

BARRIER TO CHANGE:

→ **The focus on individual care, rather than in the family and community context.**

This document describes actions from the [Birth Equity Action Map](#) that can shift mental models that perpetuate a focus on individual care, rather than a holistic focus on family and community context. This was identified as a barrier to change using the [Iceberg Model of Systems Thinking](#). Click [here](#) to view these actions in the interactive Birth Equity Action Map.



ACTION



DESCRIPTION



RESPONSIBLE SYSTEM ACTORS

Elevate community voices for policy change^{1,3,4}

Elevate and value diverse community voices in both governmental and organizational policy change efforts. Apply Black feminist praxes and Indigenous knowledge to policy and program development, implementation, and analysis at every level of government. Specifically, this might look like:

- Assess current relationships, initiatives, and reputation regarding community engagement
- Seeking out, disseminating, and supporting insights shared from community members' lived experience including to inform on disaster and public health emergency response
- Dedicate staff hours to building and maintaining relationships with the community
- Actively inviting and integrating diverse and underrepresented perspectives in collaborative and policymaking spaces
- Creating and supporting dedicated spaces to bring community voices and experiences to policymakers and legislative staff
- Developing a patient- and community-led governing and decision-making board at a health system or hospital
- Provide opportunities for staff to learn from community leaders
- Join community leaders in community settings, for example, serving on community boards or attending community-led health events
- Require proportionate community representation – based on race and ethnicity, ability, and sexual orientation and gender identity in the service area population – on advisory committees and other governance bodies with meaningful decision-making roles

State and local health agencies, Community-based organizations, National non-profits, Health systems, Hospitals

ACTION	DESCRIPTION	RESPONSIBLE SYSTEM ACTORS
Engage and compensate people with lived experience ^{2,3,4}	Recognize and create a structure for compensating the invaluable insights gathered from people with lived experience. Specifically, this might look like developing a mechanism to pay people with lived experience for serving on advisory boards or revising job descriptions to recognize lived experience as relevant job experience.	State and local health agencies, Community-based organizations, National non-profits, Health systems, Hospitals
Ensure equitable, trauma-informed, patient-centered care ^{1,3,4}	<p>Ensure equitable, trauma-informed, patient-centered care is provided and rooted in reproductive justice. Specifically, this might look like:</p> <ul style="list-style-type: none"> • Develop community-led governance structures within health systems • Invest in reproductive justice informed peer-to-peer, and community health worker programs • Train providers to deliver respectable maternity care, including respect for the full range of birthing options and patient autonomy • Provide access to peer counselors and lactation specialists to support human milk feeding • Establish breastfeeding-friendly spaces and adhere to the 10 Steps to Successful Breastfeeding. 	Health systems, Hospitals, Payer, Medical and health education programs
Implement collaborative knowledge sharing tools to support families ^{3,4}	Implement and disseminate approaches (e.g., collaborative knowledge sharing tools, websites, platforms like Unite Us) to efficiently provide up-to-date information about resources and wrap-around services that can support families.	State and local health agencies, Community-based organizations, Hospitals, Health systems
Support community engagement and staff retention ^{1,3,4}	Cultivate and implement strategies to support the wellness and restoration of staff and create accessible, inclusive environments that welcome family and community engagement in program and policy design.	State and local health agencies, Community-based organizations, Health systems, Hospitals

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Sources

Actions were synthesized from a two-part Systems Mapping to Advance Birth Equity workshop with 48 diverse actors representing federal, state, local, community, and family birth equity partners as well as the following recommended recent sources that have called for specific actions to advance birth equity.

1. Black Mamas Matter Alliance (2023). Black Mamas Matter: In Policy and Practice: A policy agenda for the Black maternal health, rights, and justice movement.
2. Institute for Medicaid Innovation (2023). Innovation in Perinatal and Child Health in Medicaid.
3. National Birth Equity Systems Mapping Workshop (2023). AMCHP Virtual Workshop, May and June 2023.
4. National Partnership for Women and Families (2023). Raising the Bar for Maternal Health Equity and Excellence.
5. New Jersey Health Care Quality Institute and The Burke Foundation (2022). Delivering Better Care: Midwifery Practice in New Jersey.

Participating Organizations (in the workshop or feedback sessions)

- Alliance for Early Success
- Birthing Cultural Rigor, LLC
- BirthMatters
- Black Mamas ATX
- CityMatCH
- Family Solutions: A Program of the SC Office of Rural Health
- Funders for Birth Justice and Equity
- Georgetown University Center for Children and Families
- Giving Austin Labor Support
- Greater Newark Health Care Coalition
- Hand to Hold
- Healthy Mothers, Healthy Babies Coalition of Georgia
- HRSA's Maternal and Child Health Bureau
- Institute for Women and Ethnic Studies
- Intermountain Health RMOMS Program
- Mama Sana Vibrant Woman
- Mamatoto Village
- March of Dimes
- Maternal Health Equity Collaborative
- Maternal Mental Health Leadership Alliance
- Merck for Mothers
- Minnesota Indian Women's Resource Center
- National Healthy Start Association
- National Institute for Children's Health Quality
- National Partnership for Women & Families
- Our Journ3i
- Philadelphia Department of Public Health
- Preeclampsia Foundation
- Rhode Island Department of Health
- Sedgwick County Health Department
- St. Joseph County Department of Health
- Starting Out Right
- The BEE Collective
- The Reilly Group
- Trenton Health Team
- The U.S. Department of Agriculture
- U.S. Department of Labor
- Utah Pacific Islander Health Coalition
- University of Washington's Parent-Child Assistance Program

