

BARRIER TO CHANGE:

→ **Inconsistent investment in providing equitable access to basic health, social, and economic services and supports.**

This document describes actions from the [Birth Equity Action Map](#) that can help to shift current structures maintaining inconsistent investment in basic health, social, and economic supports, which 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

Advance policies to support families' basic needs^{1,3,4,5}

Educate/advocate for and advance policies at the state and federal level to protect and provide for basic human needs such as food, shelter, and childcare. Apply Black feminist praxes and Indigenous knowledge to policy and program development, implementation, and analysis at every level of government. Specifically, advance policies including:

- Raising the minimum wage
- Federal laws for paid family leave, paid sick leave
- Increasing EBT/WIC allocation and benefit period
- Increasing the supply of affordable housing
- Enacting progressive policies to support families basic needs at the state and local level
- Enacting the Black Maternal Health Momnibus Act. Center and defer to Black-led and centered, community-based organizations in implementing and evaluating Momnibus policies and programs.
- Offering evening and weekend appointments.
- Offering telehealth visits, in-home visits, mobile clinics, and other options for expanding access to care.
- Co-locating laboratory, imaging, mental and behavioral health, and other services to facilitate one-stop prenatal and postpartum visits.
- Ensuring the accessibility of exam rooms and other service areas.
- Making translators available and ensure signage and websites are available in priority languages.
- Removing work requirements
- Expanding Child Tax Credit
- Ensuring affordable and accessible childcare
- Targeting resources to families living in climate-affected areas

State and local health agencies, Federal agencies, Health systems, Birth equity advocates, Legislators



ACTION	DESCRIPTION	RESPONSIBLE SYSTEM ACTORS
Holistically support the existing birthing provider workforce^{1,3,5}	<p>Holistically support the existing birthing provider workforce to protect from burnout and attrition. Specifically, this might look like:</p> <ul style="list-style-type: none"> • Offer stipends to practicing clinicians of color to serve as mentors to nursing and midwifery students • Offer holistic workplace pregnancy accommodations • Research and support implementation of innovative approaches to end violence and harassment against providers, patients, and staff that do not involve policing • Ensure living wage, workforce development opportunities, access to affordable, quality childcare, access to mental health and healing-centered services, access to retirement accounts, affordable housing, etc. 	<p>Community-based organizations, Federal agencies, Private funders, Health systems</p>
Increase diverse labor and delivery care access^{1,3,4}	<p>Collaborate and innovate to increase access to diverse labor and delivery care (including birth centers) and connections/referrals between labor and delivery and other health care (e.g., emergency departments) and social services (e.g., transportation) to improve patient care and outcomes.</p>	<p>Health systems, Legislators</p>
Listen to and fund community-driven initiatives³	<p>Listen to the community and fund community-defined needs and initiatives (e.g., through authentic, community-driven needs assessments, participatory grantmaking mechanisms, etc.). Specifically, this might look like:</p> <ul style="list-style-type: none"> • Ensuring policies and incentives that support the centering of diverse community-led partners (e.g., representing different demographics and lived experiences, focus areas, organizational sizes, years of operation, etc.). • Expanding possible grantees through networking and inviting community-led organizations that may have been historically overlooked or underrepresented to the table 	<p>State and local health agencies, Private funders, Federal Agencies</p>
Make rapid response grants available^{1,3}	<p>Make rapid response grants available (i.e., grants that are responsive to emergent needs) for grantees to provide support for unanticipated crises among birthing persons (e.g., formula shortage, climate change, etc.).</p>	<p>State and local health agencies, Federal agencies, Private funders</p>
Provide cultural humility education to policymakers³	<p>Provider policymakers and legislative staff with education on cultural humility and birth equity to grow their empathy and understanding of the need for equitable policies and inform their policy action.</p>	<p>Community-based organizations, National non-profits</p>
Reimagine and invest in housing programs¹	<p>Invest in innovative programs and partnerships that facilitate Black women and birthing people's access to housing and financial resources, including through housing cooperatives, community land trusts, managed care organizations, Section 1115 waivers, guaranteed income programs, and other methods. Include multigenerational families, families with multiple dependents, and other non-traditional family structures in these innovations.</p>	<p>State and local health agencies, Community-based organizations, Federal agencies, Private funders, Payers, Legislators</p>
Strengthen facility and provider accountability for patient rights^{3,4}	<p>Assess and strengthen health system and hospital policies and insurance policies to ensure facility and provider accountability to patient rights and birthing autonomy.</p> <p>This could include implementing a consistent, streamlined process for accessing financial assistance or charitable care, within and outside the provider institution, that is not punitive or predicated on the existence of medical debt.</p>	<p>Health systems, Hospitals, Payers, Legislators</p>

Funding & Acknowledgements

The Birth Equity Action Map was developed by the Association of Maternal and Child Health Programs (AMCHP), UNC Gillings School of Global Public Health, and Vijaya K Hogan Consulting LLC with funding from the Pritzker Children's Initiative.

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

