

→ SYSTEMS MAPPING TOOLS TO **Advance Birth Equity**

The Birth Equity Action Map, Ecosystem Map, and Iceberg were created with funding from the Pritzker Children's Initiative. These tools are intended to accelerate the work of communities, coalitions, and funders in strategically assessing their efforts, identifying opportunities, and committing to specific actions to strengthen the birth equity ecosystem.

What's different about this approach? This set of tools seeks to integrate existing frameworks, recommendations, practice-based priorities, and evidence-based approaches to create a shared vision that informs investment and actions to address systemic barriers to change.



Process Overview



STEP 1: Systematic literature review of existing place-based, organizational, and academic birth equity report and frameworks



STEP 2: Two-part national systems mapping workshop with 48 diverse actors representing federal, state, local, and community-based birth equity partners

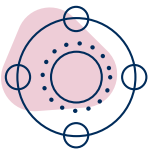


STEP 3: Review of recommended recent sources that have called for specific actions to advance birth equity



STEP 4: 11 Birth Equity Action Map feedback sessions with 22 partners

Tools Overview



BIRTH EQUITY ECOSYSTEM MAP:
The characteristics of an ideal system



BIRTH EQUITY ICEBERG:
Important systemic barriers to change



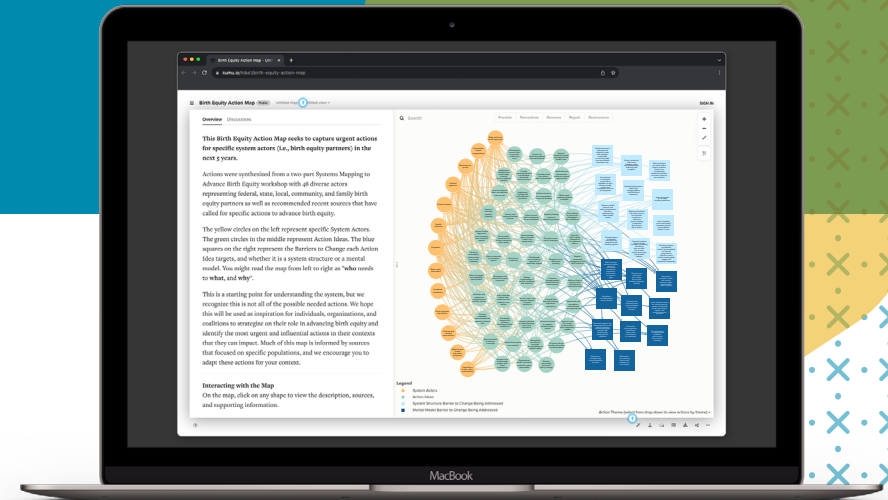
BIRTH EQUITY ACTION MAP:
Urgent actions needed to address identified barriers to change

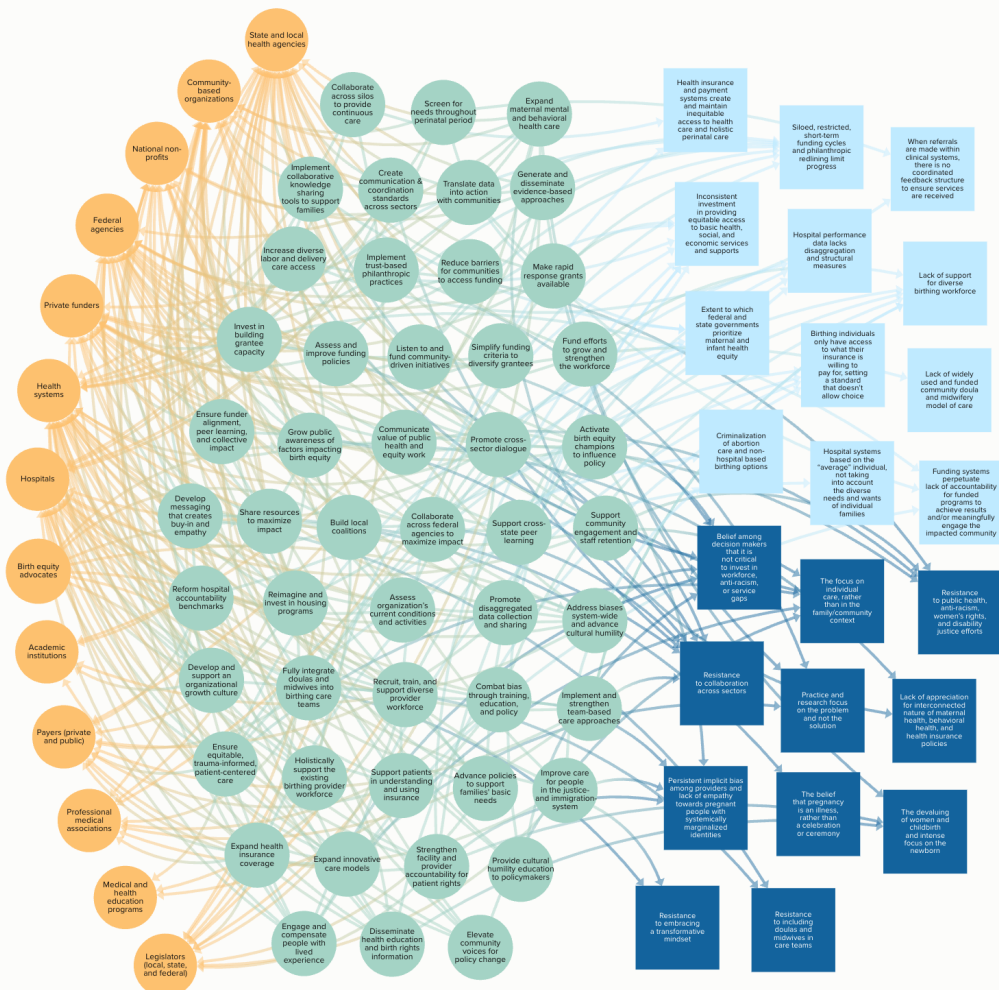
Birth Equity Action Map

Key Question: What can we do to strengthen systems to advance birth equity?

The Birth Equity Action Map describes urgent actions needed by specific system actors (i.e., birth equity partners) in the next 5 years to improve birth and racial equity, and highlights where in the system funders can use their leverage to accelerate birth equity. The actions fall under the following overarching action themes:

1. **Champion Policy Change:** Educate and advocate for policies at the federal, state, local, and organization-level to increase access to the full range of birthing options, improve workforce capacity, and address root causes of birth inequity.
2. **Co-Design with the Community:** Work to create authentic trust-based relationships with community members and organizations and embrace and support community-rooted leadership in co-designing programs and policy change.
3. **Expand Workforce Capacity:** Recruit and train a diverse birthing workforce and strengthen and holistically support the existing workforce to protect from burnout. Provide regular and meaningful bias training, create structures of accountability, and restructure systems to support team-based, trauma-informed, interdisciplinary care models.
4. **Improve Continuous Care:** Strengthen local health systems to eliminate gaps in care throughout the perinatal period, including improved wrap around services and connections between families and system resources.
5. **Leverage Collaboration:** Expand capacity and align efforts through local multi-sector coalitions, cross-state peer learning, authentic community engagement, and support for staff wellness and restoration.
6. **Restructure Institutions:** Restructure institutions to create accountability mechanisms for addressing biases and advancing health equity. Support transformative growth mindsets among leaders and organizations to expand possibilities for change.
7. **Shift Funding Structures:** Restructure funding processes and systems to better support deep systemic changes and apply trust-based philanthropic principles.
8. **Transform Mental Models through Communication Initiatives:** Develop and test targeted messaging, including voices of people with lived experience, to shift mental models of providers, policymakers, and decision makers in the system.



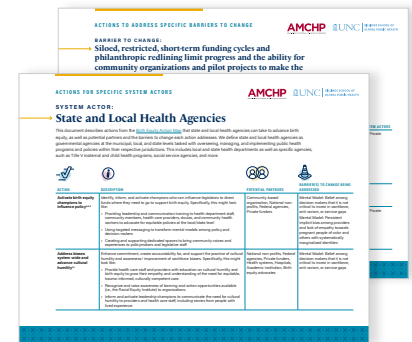


- Legend**
- System Actors
 - Action Ideas
 - System Structure Barrier to Change Being Addressed
 - Mental Model Barrier to Change Being Addressed

This is a starting point for understanding the system, but we recognize this is not all of the possible needed actions. We hope this will be used as inspiration for individuals, organizations, and coalitions to strategize on their role in advancing birth equity and identify the most urgent and influential actions in their contexts that they can impact.

Utilize the Birth Equity Action Map by navigating the [interactive version](#), or review the following resources which break down the map:

- [Full Table of Actions and Descriptions](#)
- [Actions for Specific System Actors or Specific Barriers to Change](#)



Not sure where to start? Our team is here to support you in using these tools!

We recognize that even if you are deep in the birth equity system, there is a lot of information here. If you would like an orientation to these materials for you or your partners, assistance facilitating a strategy session using this map, materials tailored to your organization's or coalition's specific needs, or if you want general support thinking about how to apply this map to your context, please reach out to us at jsimon@amchp.org.

Birth Equity Iceberg

Key Question: What are the most important systemic barriers limiting our ability to advance birth equity?

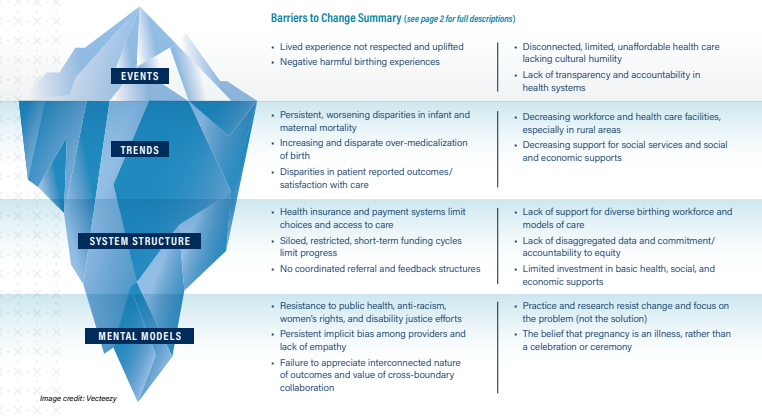
This Birth Equity Iceberg captures insights on the barriers that perpetuate inequitable outcomes and limit our efforts to advance birth equity. The [Iceberg Model of Systems Thinking](#) was used to prompt for underlying system structures and mental models maintaining birth inequity. The Birth Equity Iceberg helps to define and understand the problem from a systems perspective, which is the first step towards collectively strategizing to shift structures and transform mental models.



You will want to convene your birth equity partners to review and update these systemic barriers to change to ensure that the most pressing barriers in your context are included and prioritized.

The Birth Equity Iceberg

Overview: This Birth Equity Iceberg captures insights on the barriers that perpetuate inequitable outcomes and limit our efforts to advance birth equity. This list is a synthesis of 200+ sticky notes brainstormed in a national Systems Mapping to Advance Birth Equity Workshop using the [Iceberg Model of Systems Thinking](#) to prompt for underlying system structures and mental models maintaining birth inequity. The Birth Equity Iceberg helps to define and understand the problem from a systems perspective, which is the first step towards collectively strategizing to shift structures and transform mental models.

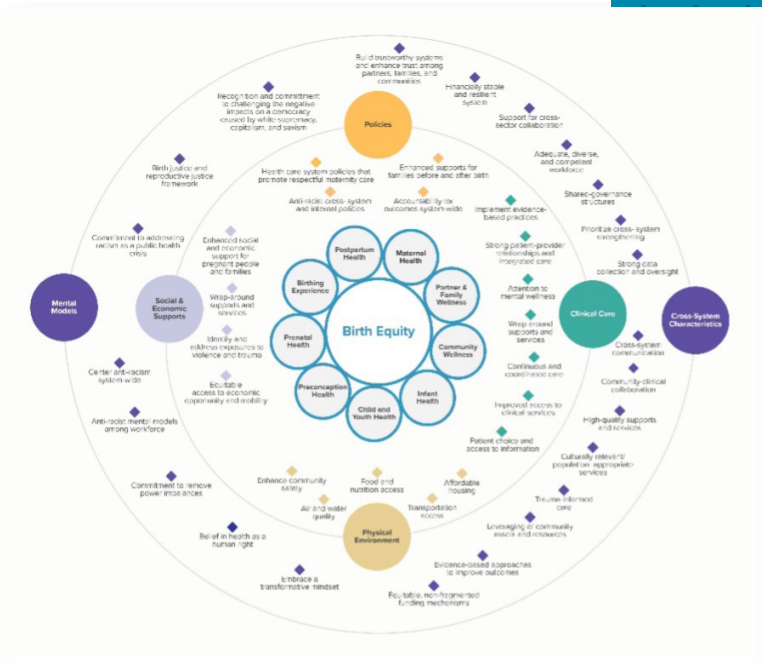


Birth Equity Ecosystem Map

Key Question: What are the characteristics of an ideal system to advance birth equity?

The Birth Equity Ecosystem Map is a holistic, living visualization of the factors and conditions needed to achieve equitable outcomes. This tool provides a thematically organized synthesis of existing wisdom, recommendations, and frameworks to offer a vision of what the 'ideal' birth equity system may look like across sectors. The Birth Equity Ecosystem Map helps us appreciate the big picture of what is needed to achieve birth equity.

Four specific system structures were identified as particularly important in shaping birth equity: policy, clinical care, physical environment, and social & economic support. For each of these, we describe the factors and conditions needed. Underpinning these structures, are the critical assumptions, beliefs, and values (i.e., mental models) and cross-cutting characteristics that could create and maintain an equitable system.



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

