

GRANT ANALYSIS FORM

OPERATING & CAPITAL GRANT PROJECTS/PROGRAMS

Department/Division: **Health Department/Maternal and Child Health (MCH) Division**

Contact Person & Phone No: **Erica Olivier - Maternal and Child Health Director x8018/Nicole Miles - BOMB Doula Program Manager x6651**

Category of Request

New Grant

Grant Continuation

Change in Previously Approved Grant

Previous Council File No.

Previous Council File No.

Project/Program Title: **Strengthening Community Solutions to Improve Health Outcomes for Black Mothers and Infants**

Grantor Agency: **Wisconsin Partnership Program**

Grant Application Date: **8/23/2021**

Anticipated Award Date: **12/1/2021 – 12/1/2023**

Please provide the following information:

1. Description of Grant Project/Program (Include Target Locations and Populations):

The goal of this grant is described in the title; “*Strengthening Community Solutions to Improve Health Outcomes for Black Mothers and Infants*”. The Wisconsin Partnership Program identified four priority areas, three of which the Birth Outcomes Made Better (BOMB) Doula Program will focus on:

1. Supporting Black women’s health before a possible pregnancy by programs, such as:

- o Providing health and wellness education, including stress reduction through traditional and cultural practices, self-care, mindfulness and exercise
- o Providing information about maternal and prenatal health, including options for mental health needs, smoking cessation and alcohol/drug reduction programs

2. Expanding community-based models of care to be responsive to the desires/needs of pregnant Black women, such as:

- o Midwives, doulas, perinatal community health workers and other birth care providers
- o Peer support groups such as Centering Pregnancy or other models
- o Education to empower mothers of their ideal birth options
- o Creating a pipeline into culturally responsive education and apprenticeship to become a doula, midwife, and other supporting birthing professions

3. Strengthening access to post-partum maternal care and infant needs, such as:

- o Breastfeeding assistance and education through lactation consultants or other support providers
- o Maternal depression screening and post-partum mental and behavioral health programming and support, and providing the option for one year after birth
- o Safe sleep efforts and resources
- o Comprehensive home visitation programs, focused on the challenges of being a parent, whether it is the first time or not, and the dynamic growth and brain development of the infant.

This funding prioritizes areas of the state with the highest populations of Black families and Black maternal and child health disparities including the City of Milwaukee.

2. Relationship to City-wide Strategic Goals and Departmental Objectives:

Infant mortality is a pervasive issue with the City of Milwaukee – impacting specific zip codes and BIPOC populations the most. The City of Milwaukee has a specific focus on curtailing the infant mortality crisis in conjunction with its declaration of racism as a public health crisis in 2019. The BOMB Doula program was created as a result of this declaration and is built to target the specific gaps in cares for BIPOC birthing persons; particularly Black mothers and babies as they are 3x more likely to die or suffer poor birth outcomes than any other race.

Wisconsin remains one of the worst states in America for a Black child to be born. Wisconsin Black infants are about 3 times more likely to die before their first birthday than their white peers. Moreover, Black mothers in Wisconsin face severe complications during pregnancy, have a higher rate of pregnancy related deaths and severe maternal morbidities than white mothers. To address this complex and ongoing health challenge, the Oversight and Advisory Committee of the Wisconsin Partnership Program allocated upwards of \$2 million over two years to organizations to expand and strengthen successful strategies and approaches for improving Black maternal and infant health. Priority was given to organizations that illustrated a track-record of successfully supporting Black communities and that have established trust-based relationships with Black women, specifically women of childbearing age and who are already mothers.

3. Need for Grant Funds and Impact on Other Departmental Operations (Applies only to Programs):

Specific Expenditures of the Grant: Black families tend to struggle with having access to and affording important supplies prenatally and post-partum for their selves and their babies. This includes having limited availability of emergency supplies, gaps in benefits, ineligibility for certain resources, resources only covering 1 child in a multi-child family or mothers that are just above minimum income limits but not making enough wages to offset the lack of various benefits. Another part of the funding would be allocated to health education materials geared towards Black mothers; reflective of Black women and families, inclusive of specific health needs of black families, having imagery with black families, meeting the literacy level of disenfranchised black families, etc. Generic health education tools are not relatable, inclusive of black women/women of color’s needs. Lastly the grant will support the professional development, training and certification of our Doula staff to build their capacity on serving BIPOC birthing people in Milwaukee.

This grant will afford us the opportunity to partner with other grant recipients that provide birth work services in the surrounding counties where we can create a collective impact, intentional evaluation development for the program, and sharing of resources/strategies/operational considerations to ultimately improve our program. This grant’s focus on strengthening community solutions to improving black maternal and infant health directly align with the mission and vision of the Maternal and Child Health Division. Lastly this will afford the program financial support in the training/development of the doula teams; enhancing their skills and practice while being able to provide for necessary resources/supplies for our families.

4. Results Measurement/Progress Report (Applies only to Programs):

The WPP funding will support running the Birth Outcomes Made Better (BOMB) Doula Program with the goal to serve 75 Black families each contract year. Reporting Templates have not been finalized though MHD and WPP have agreed to standardize a quarterly reporting structure agreeable to both parties.

The Program's current Metrics are as follows:

- a) Number of families enrolled/registered
- b) Number and type of visits completed by doulas
- c) Client demographic information: Name, age, zip code, household income, etc
- d) Estimated delivery date and actual date of birth
- e) Trimester at enrollment
- f) Birth history
 - Miscarriage(s)
 - Stillborn(s)
 - Preterm birth(s)
 - C-section(s)/Vaginal birth(s)
- g) Prenatal care and postpartum care
- h) Medical home (OBGYN)
- i) Birth plan
- j) Labor:
 - Doula presence at labors
 - Length of labor
 - Medications/Interventions
 - Labor induced or not
 - Complications
 - C-section or vaginal birth
- k) Infant deaths among enrolled families (babies born alive who die before age 1)
- l) Birthweight
- m) Gestational age
- n) Breastfeeding Initiation and Duration
- o) Assessments (and connection to services/referrals as needed)
 - Tobacco Usage/Cessation
 - Depression/Mental Health/Stressors
 - Substance abuse
 - Intimate Partner Violence
- p) Level of involvement of fathers/partners
 - Very involved (i.e. lives in home and/or actively co-parenting)
 - Moderately involved (i.e. may or may not live in the home and/or plans to be involved in cares)
 - Minimally involved (i.e. not cohabitating/limited participation)
 - Uninvolved (i.e. absent/refusal—by mother or partner—to be involved)
- q) Support systems (formal and informal)
- r) Retention and Attrition of clients
- s) Source of referrals into program
- t) Client experience surveys
- u) Any other evaluation deemed meaningful through the partnership

5. Grant Period, Timetable and Program Phase-out Plan:

12/1/2021 – 12/1/2023

6. Provide a List of Subgrantees:

N/A

7. If Possible, Complete Grant Budget Form and Attach.

See attachment