



**Maximizing Federal Investments for Young Children  
Webinar Series:**

**Babies, Toddlers, and Systems that Support  
Them and Their Families**

**February 26, 2018  
1:30-3:00pm Eastern**



# The BUILD Initiative's Mission

## **The BUILD Initiative**

supports state leaders to develop a comprehensive, equitable system (infrastructure, programs, policies and services) that meets the needs of young children and their families.

## **This systems-building approach**

effectively prepares our youngest children for a successful future, while carefully using private and public resources.

# Approach for Today's Webinar

- **New series, Maximizing Federal Investments in Young Children**
- **Today's focus: Babies, Toddlers and Systems that Support Them and Their Families!**

# Our Speakers



**Karen Moran Finello**  
Director, California Project LAUNCH



**Gena O'Keefe, MD**  
Senior Associate,  
Anne E. Casey Foundation  
Advisor, B'more for Healthy Babies

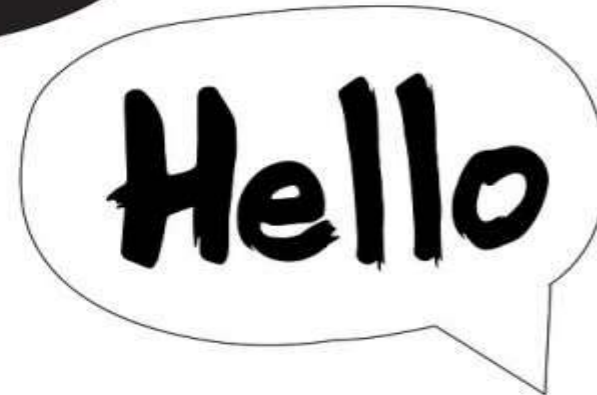


**Jeanetta E. Green, MPA, BS, CPM**  
Director, Child Care Services Division,  
Alabama Department of Human  
Resources



**Harriet Dichter**  
BUILD Initiative  
[moderator]

# Introduction to Alabama, Baltimore and California

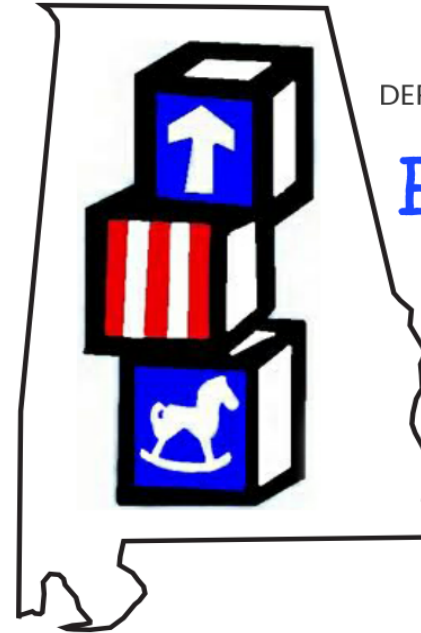


# Introduction to Alabama Early Head Start-Child Care Partnership

## EHS-CCP grant awarded in 2015!

**Increase the number of providers** that can meet the highest standards of quality for infants and toddlers.

- **Combining the strengths** of Child Care and Early Head Start (EHS) programs.
- **Layering funding** to provide comprehensive services and high-quality early learning environments for low-income working families with infants and toddlers.
- **Integrating EHS comprehensive services** and resources into the array of traditional child care and family care settings.



STATE OF ALABAMA  
DEPARTMENT OF HUMAN RESOURCES

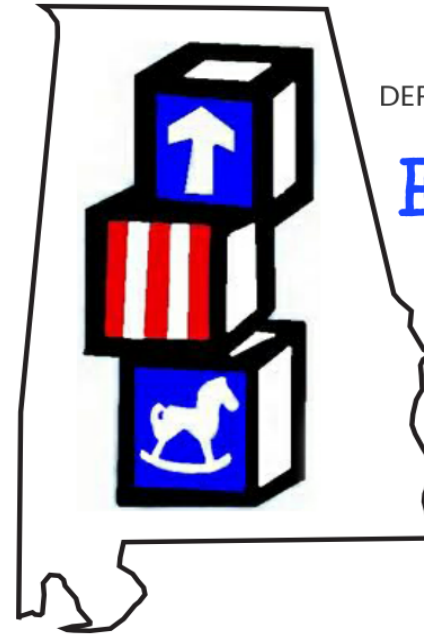


Early Head Start-  
Child Care  
Partnership

**Strengthening Alabama's Children  
Families, and Communities**

# Introduction to Alabama Early Head Start-Child Care Partnership

- Funded Enrollment – 566
  - ✓ 198 children in Family Child Care
  - ✓ 368 children in Center Care
- Children Receiving Subsidy – Currently 84%
- Partnerships with child care programs
  - ✓ 20 Centers
  - ✓ 50 Family Child Care Homes
- 99 Classrooms
- 29 Counties



STATE OF ALABAMA  
DEPARTMENT OF HUMAN RESOURCES



Early Head Start-  
Child Care  
Partnership

**Strengthening Alabama's Children  
Families, and Communities**



# Introduction to California Project LAUNCH

## Project LAUNCH (Linking Actions for Unmet Needs in Children's Health)

- **Integrates systems** to address the unmet needs for children's health and well being
- Focuses on children, families and communities that are at **high risk of trauma**
- **Promotes** wellness, **prevents** mental, emotional and behavioral disorders, and **supports** early detection and referral to needed resources





# 3 Strategies in California LAUNCH

- **Integrating early childhood systems** at the local and state levels to promote identification, referral, access to and engagement with needed resources
- **Family Cafes** to strengthen families, connect them to resources, & support development of parent leaders
- **Integrating mental health consultation** into home visiting programs to support both families & home visitors

## B'more for Healthy Babies: Citywide Initiative with a Vision

All of Baltimore's babies are  
**born healthy and grow and  
thrive** in healthy families.



## **Reductions in rates for top three causes of infant mortality:**

- Pre-term births
- Low birthweight infants
- Sleep-related deaths

## **Improved life course outcomes:**

- Learning to advocate for self and family in health care setting
- Sustain behavior change in the home
- Improving family literacy as a way to increase income, quality of life
- Improving resiliency through trauma-informed care

## Goals for BHB 2009–2016

- **Reduce number of deaths from unsafe sleep** by at least 30%
- **Reduce teen births** by at least 15%
- **Reduce preterm birth** by at least 10%
- **Reduce low birth weight** by at least 10%

# BHB Guiding Principles

1. Life course approach
2. Race equity lens
3. Cross-sector collaboration
4. Systems focus
5. Sustainable evidence-based solutions and funding
6. Community and client involvement
7. Proactive monitoring



# Multi-Level Framework

## Policy

- Advocate for fair policies
- Standardize how things are done

## Services

- Train doctors, nurses, social workers
- Improve screening and counseling

## Community

- Outreach pregnant women and families
- Provide group programs

## Individual

- Create education campaigns
- Provide one-on-one services

# Community Context: Alabama, Baltimore & California





# Community Context: Alabama

Increase the number of providers offering high quality services:

- Classrooms in 29 of 67 Alabama Counties
  - ✓ 21 of the counties served are designated as rural
- Program Partners - Local Partnerships with existing EHS agencies some of which are also Community Action Agencies

Layering Funding:

- Maintaining subsidy program participation above 80%
- Aligning policy with Child Care Subsidy Program

Integrating Services EHS Comprehensive Services:

- Wide Reaching Impact 1155 children

## Unacceptable Infant Mortality in 2009

- ❑ 128 infants died in Baltimore City, 27 of sleep-related infant death
- ❑ 4<sup>th</sup> highest infant mortality rate of 50 largest U.S. cities
- ❑ Black infants died at 5 times the rate of White infants

**The deaths in 2009 leave Baltimore with 10 empty third grade classrooms this year (2017)**



# Community Context: California

- **San Francisco County Dept of Public Health**
  - countywide collaborative--Healthy Communities Together
  - in partnership with the Mayor's Project 500 Initiative, San Francisco County is looking at the root causes of health inequities, social determinants of health, a life course approach and community identified health problems
  - part time mental health consultant who focuses on parents and children referred to SF Nurse Family Partnership & MCAH Field Nursing
  - building partnerships with F5SF to support the Family Cafes

# Community Context: California

- **Fresno County Dept of Public Health**
  - collaborating with their local Behavioral Health Care system
  - provides mental health services to parents served in home visiting programs including Black Infant Health & Babies First (federal Healthy Start funding to reduce perinatal mortality and morbidity)
  - Family Cafes to promote family leadership and engagement
- **Nevada County Dept of Public Health**
  - Part of a local community collaborative--the Nevada County Public Health Department, First 5 (F5) of Nevada County, and Foothills/Truckee Healthy Babies
  - Home Visiting program focus is Healthy Families America model, funded by MIECHV dollars to California Dept of Public Health and F5Nevada
  - Family Cafes are supported through a partnership between F5Nevada and LAUNCH.

# Collaboration and Partnerships: Alabama, Baltimore, and California



# Collaboration and Partnerships: Alabama

- **7 Head Start / Early Head Start agencies**
  - Partnering with 20 Centers
- **Auburn University – Family Child Care hub**
  - Partnering with 50 Family Child Care Homes
- **Alabama Department of Public Health**
  - Care Coordination – assisting parents with access to services including medical homes, dental homes, other services
- **Alabama Department of Early Childhood Education**
  - TS GOLD Assessment
  - Practice-based coaching model
  - Creative Curriculum trainings
- **Jefferson State Community College**
  - Infant/Toddler Professional Development Network – mentoring /coaching and professional development assistance to infant/toddler teachers
- **CCDF Funded Regional Quality Enhancement Agencies (QEA)**
  - Training to meet licensing standards; health and safety training ; CPR; First Aid; Scholarships; Inclusion Support
- **CCDF Funded Regional Child Care Management Agencies (CMA)**
  - Subsidy Program Enrollment; Policy alignment; Priority placement

# Collaboration and Partnerships: Alabama

## Follow, as closely as possible, Head Start Performance Standards

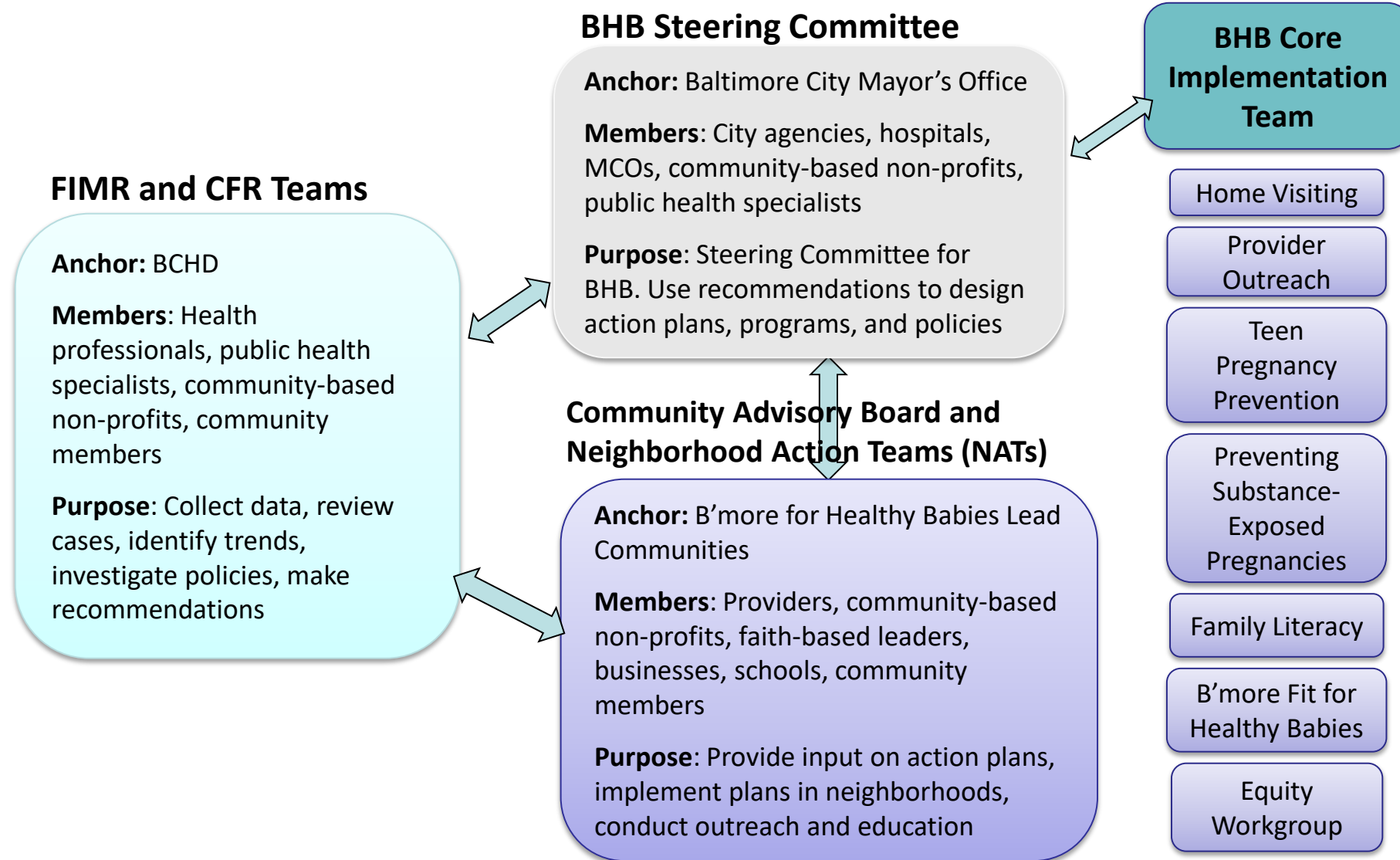
- Governing Committee – representation from state/tribal agencies and community representative
- Policy Council – parent and community representative

## Unique aspects of being a State Agency with multiple state/federal funded programs

- Governance structure for EHS-CCP did not replace our DHR Board, with the Governor as Board Chairperson
- Financial representation in Governance includes DHR Assistant Finance Director
- Legal representation in Governance includes DHR attorney



# BHB Structure



# Collaboration and Partnerships: California

CA LAUNCH “Leadership” includes:

- California Department of Public Health, California Home Visiting Programs
- Alameda County Maternal, Paternal, Adolescent and Child Health
- First 5 Alameda County
- WestEd Center for Prevention and Early Intervention

Expansion County Primary Partnerships noted earlier and spans public health, behavioral health, First 5’s, and specific other local government and collaborative projects

# Collaboration and Partnerships: California

- **Family level**
  - Family Cafes, national parent leadership trainings, local family leadership building, and representation of family members on oversight councils such as Community Advisory Boards & the State Interagency Taskforce-Home Visiting workgroup),
- **Community level**
  - building partnerships with key community organizations to share responsibility for service delivery, family referrals, trainings, and support sustainability)
- **Systems level**
  - all of the above
  - other child/family serving organizations important to successful implementation of services, delivery of services, and sustainability (e.g., the CA LAUNCH Training & Technical Assistance Team, CA Center for IFECMH that leads an endorsement system for MH professionals, including the MH consultants important to service delivery, County Depts of Public & Behavioral Health, & CA Dept of Public Health)

# Equity and Empowerment: California, Baltimore and Alabama



# Equity and Empowerment: California

Health disparities and family empowerment through MHC, Family Cafes, Systems work

Example:

Significant stigmas attached to mental health services across the country, in addition to disparities in availability & access to MH resources

- MH Consultants work directly with home visiting program staff to provide linkages and referrals for longer term MH services for families and may provide short term interventions directly in family homes, in collaboration with the home visitor (thus breaking down some barriers)

# Equity and Empowerment: California

- Through the Family Café work in LAUNCH, we are building family engagement, strengthening families, and supporting the development of family leadership, particularly in underserved and isolated communities
  - The goals are to reach underserved populations and to empower families
- There is also a frequent sense of “selfless obligation” in providers of home visiting services leading to compassion fatigue, burnout, & attrition
  - Provision of MH consultation can help to support home visitors as they work with families who have MH needs & to reduce their “vicarious trauma”

# Equity and Empowerment: Baltimore

- BHB recognizes that the health and life course of mothers, babies, and families in Baltimore diverges widely based on race, neighborhood, and income.
  - Differences are often driven by *health inequities*—outcomes that are unjust and shaped by racism, unfair social and economic policies, and unequal access to health care, stable housing, and other resources needed for good health. We must strive to eliminate these inequities to ensure that Baltimore is a place where every child has the chance to thrive.
- January 2017, BHB formed a Community Advisory Board (CAB) made up of 14 committed and inspiring Baltimore City residents with a wide range of talents, expertise, and life experience.
  - The CAB is drafting a set of guidelines through which they will hold BHB accountable for being anti-racist and community driven, whether through prioritizing programming, advancing policy, hiring staff, purchasing goods, or contracting with community organizations.



# Equity and Empowerment: Baltimore

B'more for Healthy Babies strives to:

- Equip staff and partners with knowledge and skills to address how racism shows up in the BHB work
- Welcome challenges to privilege and oppression
- Use data to make disparities visible and to drive decision making
- Root out racist and discriminatory practices in the public preconception, pregnancy, and early childhood system
- Put in place policies (e.g., contracting, hiring, spending) that foster equity and inclusion
- Engage city leaders, partners, funders, and community residents in dismantling racism in organizations and communities

# Equity and Empowerment: Alabama

## Opportunities to impact underserved communities and families

- Classrooms located in or near public housing
- Classrooms that serve special needs children
- Classrooms that serve homeless families
- Annual Parent Leadership Academy

# Impact/Expected Outcomes



# Impact/Expected Outcomes: California

- Models for IFECMH consultation in Home Visiting will be available to other regions
- Strategies for an integrated approach to using Family Cafes for family engagement, support, and leadership building will be shared
- Systems changes supporting integrated services will be documented

# Impact/Expected Outcomes: Alabama

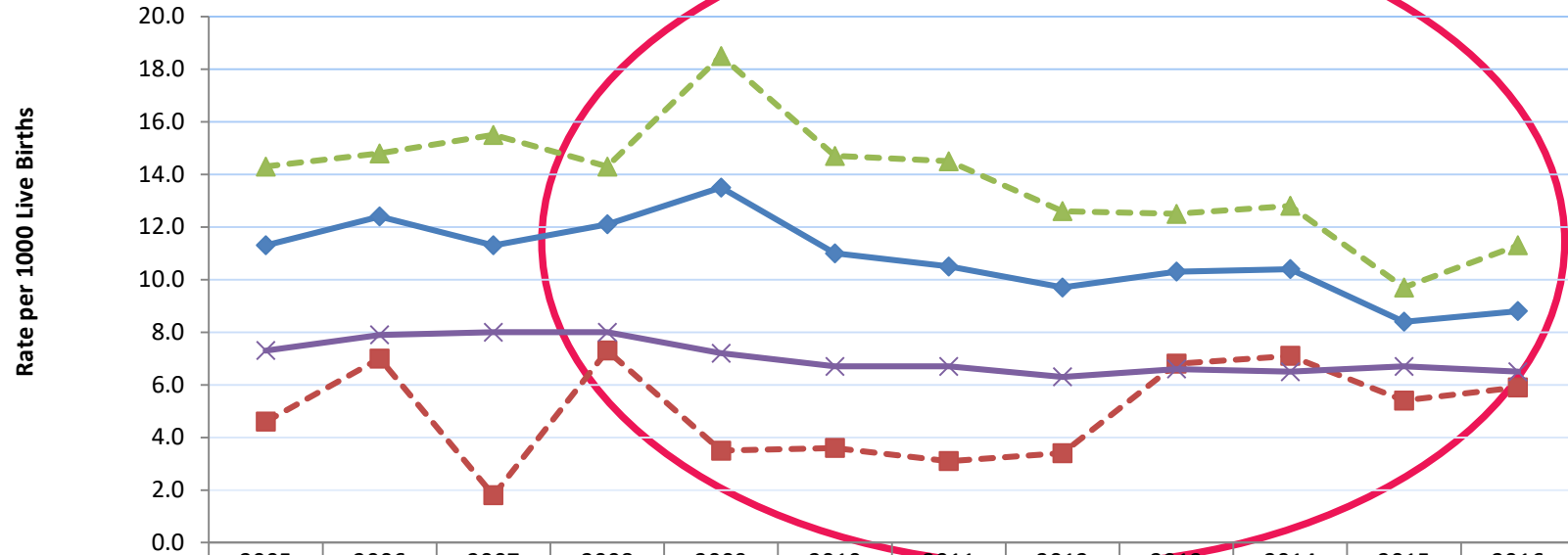
- Wide Reaching Impact
  - ✓ Impact for non EHS-CCP children served in the same program
- Empowering Parents
  - ✓ “Parents are becoming better educated and more confident not only as parents but also as members of our community”. - *FCC Provider*
- Helping Children Achieve – A child who did not talk or participate with peers is now
  - ✓ “doing the simplest actions, but I am most proud of him laughing and smiling. These acts alone make the teachers so proud of what they do everyday to help children “ – *Center Teacher*

- Decrease in infant mortality: **35%**
- Decrease in the Black–White disparity in infant mortality: **64%**
- Decrease in teen birth rate: **49%**
- Decrease in the Black–White disparity in teen birth rate: **75%**
- Decrease in sleep-related infant deaths: **71% \***
- Number of cities/states/jurisdictions requesting assistance from BHB: **20+**

\* In 2017, the decrease is 52% b/c of 2017 uptick in Sleep-related infant deaths. Lowest on record for deaths was 2016.

# Overall 35% Decline in Infant Mortality Rate in Baltimore City

**Infant Mortality  
Baltimore City and Maryland  
2005-2016**

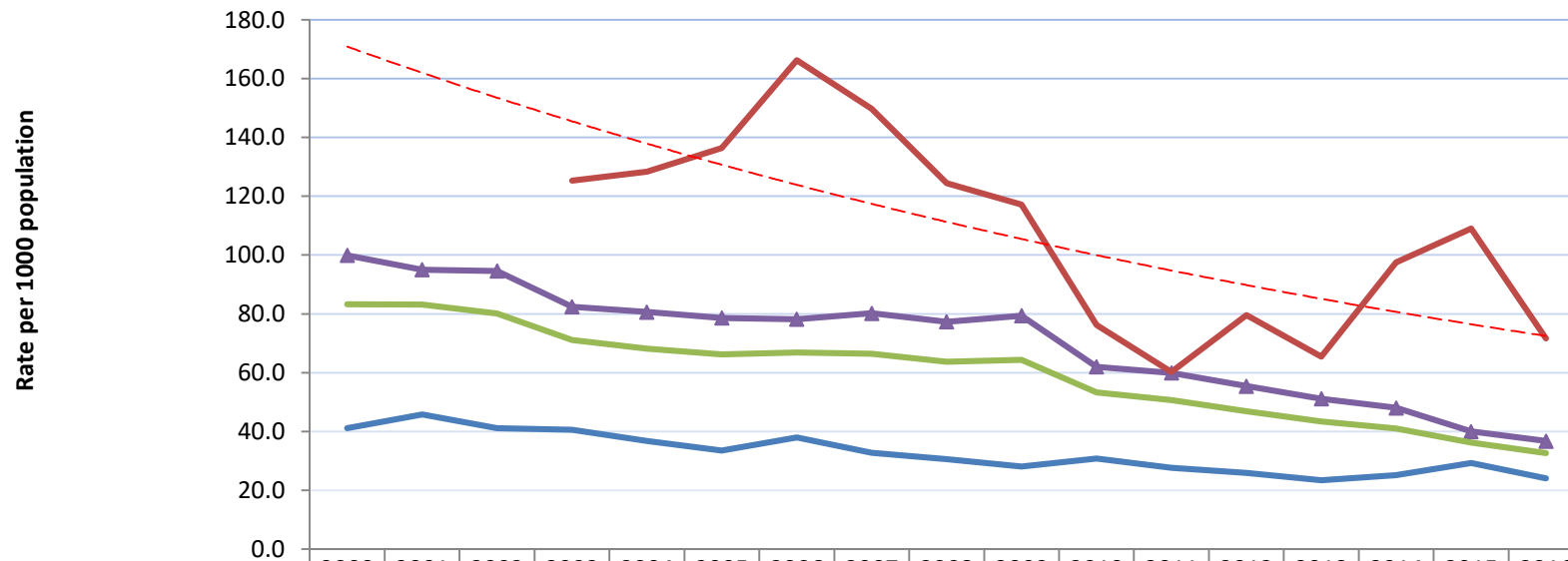


	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
◆ Baltimore City- All	11.3	12.4	11.3	12.1	13.5	11.0	10.5	9.7	10.3	10.4	8.4	8.8
■ Baltimore City- White	4.6	7.0	1.8	7.3	3.5	3.6	3.1	3.4	6.8	7.1	5.4	5.9
▲ Baltimore City- Black	14.3	14.8	15.5	14.3	18.5	14.7	14.5	12.6	12.5	12.8	9.7	11.3
× Maryland- All	7.3	7.9	8.0	8.0	7.2	6.7	6.7	6.3	6.6	6.5	6.7	6.5



# Overall 49% Decline in Teen Birth Rate in Baltimore City

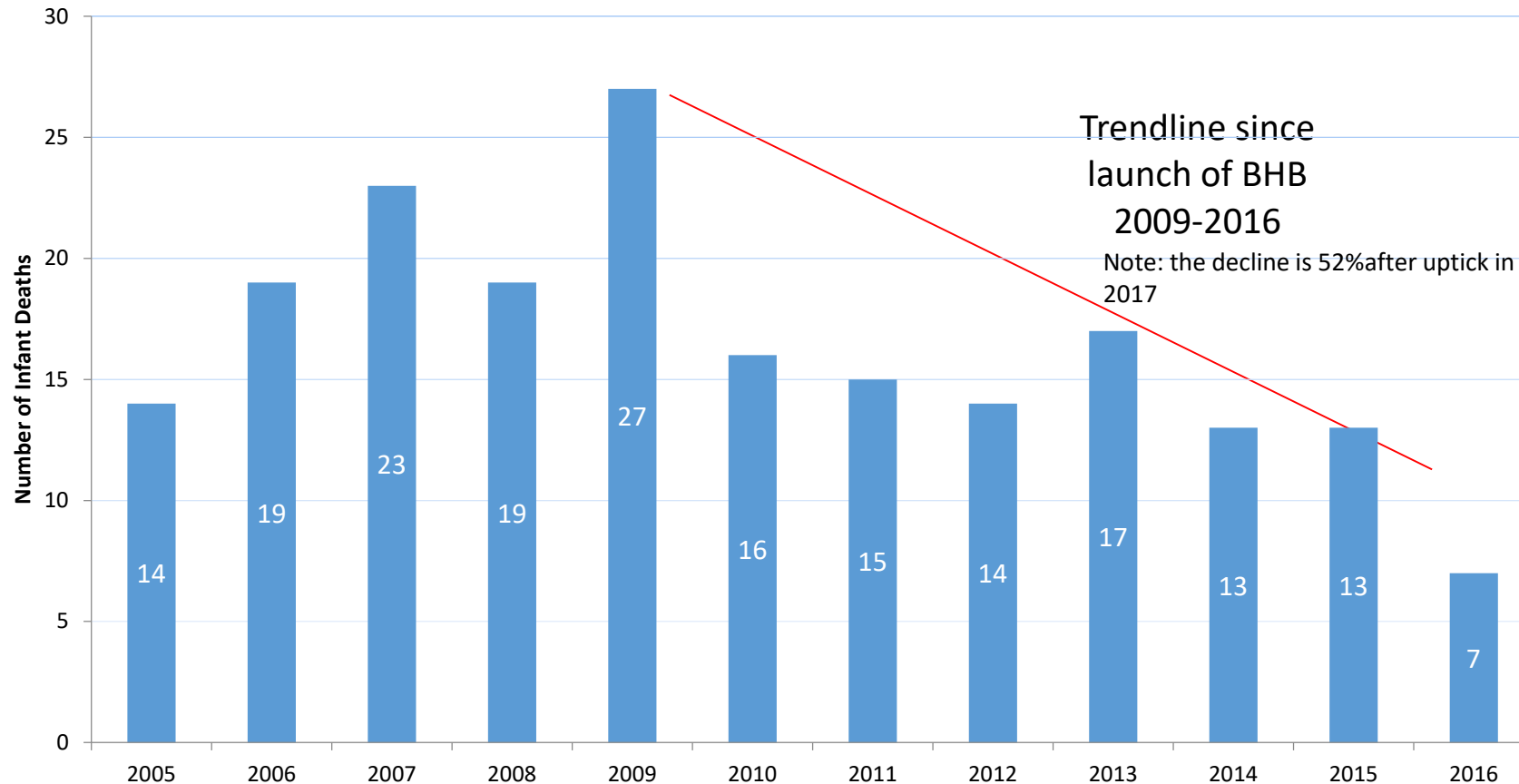
**Teen Birth Rate by Maternal Race/Ethnicity  
Baltimore City Residents  
2000-2016**



	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
▲ Baltimore- African American	99.9	95.0	94.6	82.4	80.6	78.6	78.2	80.2	77.3	79.4	62.0	59.9	55.4	51.1	48.0	40.0	36.7
— Baltimore- White	41.1	45.8	41.1	40.6	36.7	33.5	37.9	32.7	30.6	28.0	30.8	27.6	25.9	23.4	25.1	29.2	24
— Hispanic/Latina				125.3	128.4	136.4	166.3	149.8	124.5	117.2	76.2	60.2	79.6	65.4	97.5	109.0	71.6
— Baltimore- Overall	83.3	83.1	80.1	71.1	68.2	66.2	66.9	66.4	63.7	64.4	53.3	50.7	46.9	43.4	41.0	36.2	32.6

# 71% Decline in Sleep-Related Deaths

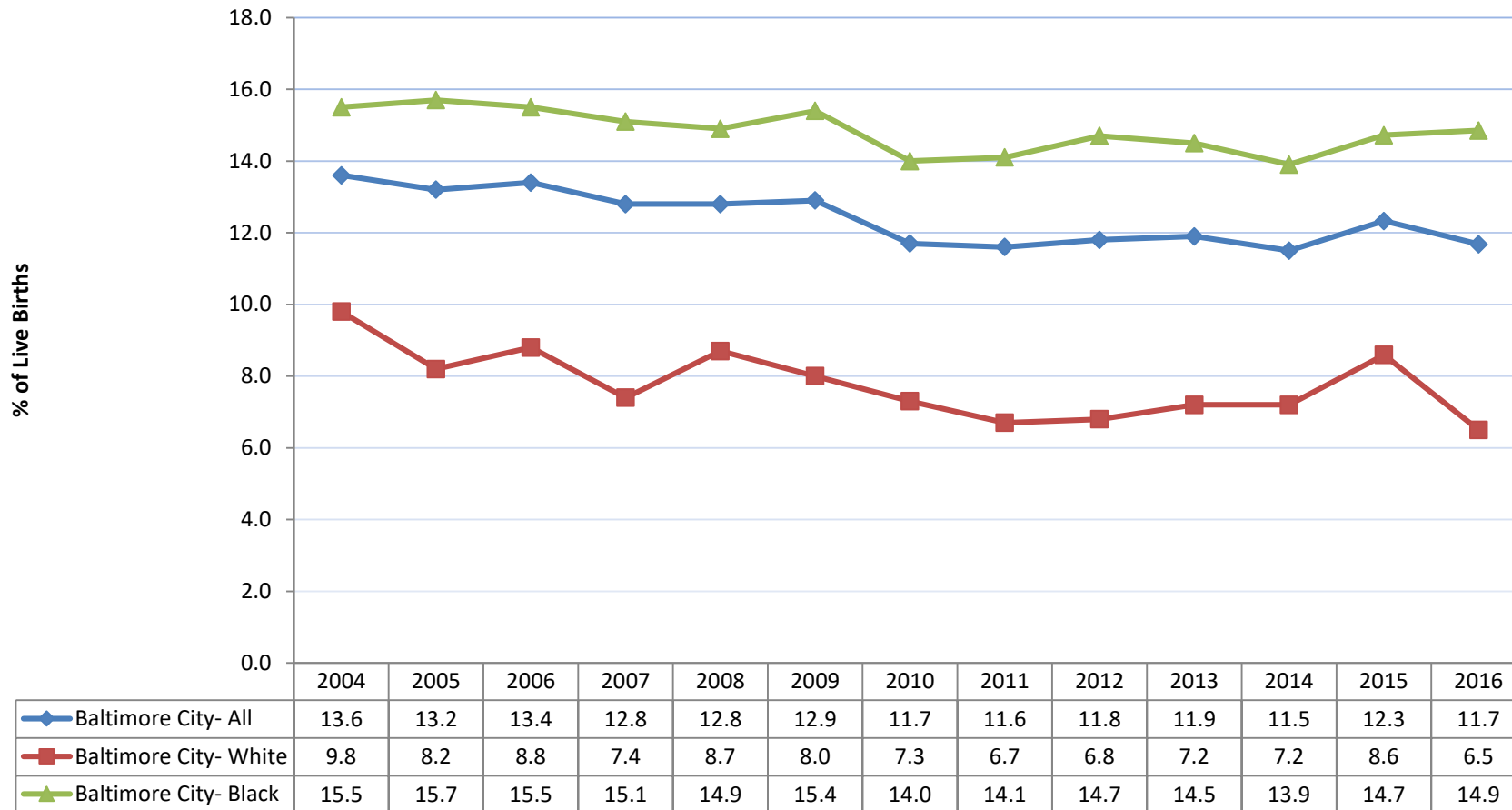
## Baltimore City Sleep-Related Infant Deaths 2005-2016



Property of Baltimore City Health Department. Data Source: BCHD Analysis of DHMH Vital Statistics.

# 9% Decline in Low Birth Weight in Baltimore City

**Low Birth Weight Births by Race  
Baltimore City, 2004-2016**



# Financing: Alabama, Baltimore, and California



# Financing: Alabama

## Layering Funding

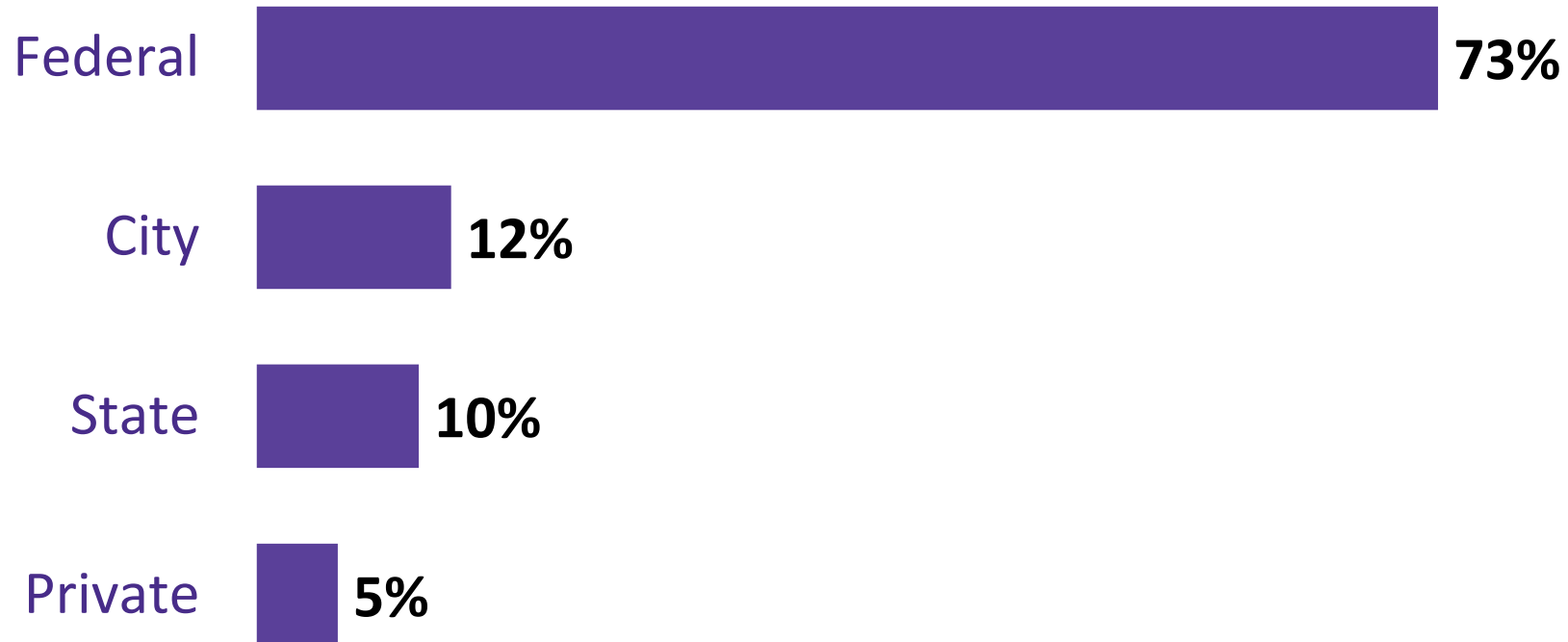
- Head Start Funds
- CCDF – Child Care and Development Fund
- Foundation Funding – W K Kellogg Foundation
- In-Kind funds
- State Match

# BHB Budget Content

- Total Bureau of Maternal and Child Health budget (e.g., WIC, Baltimore Infants & Toddlers, Adolescent Health Services, Fetal-Infant Mortality Review and Child Fatality Review, Immunizations, etc.)
- Home visiting funds managed by BCHD, Family League, and Baltimore Healthy Start
- BHB partner coalitions and systems work (including CAB)
- BHB community programs, provider outreach, and communications campaigns (e.g., SLEEP SAFE)

## Total Budget Approx. \$29 Million

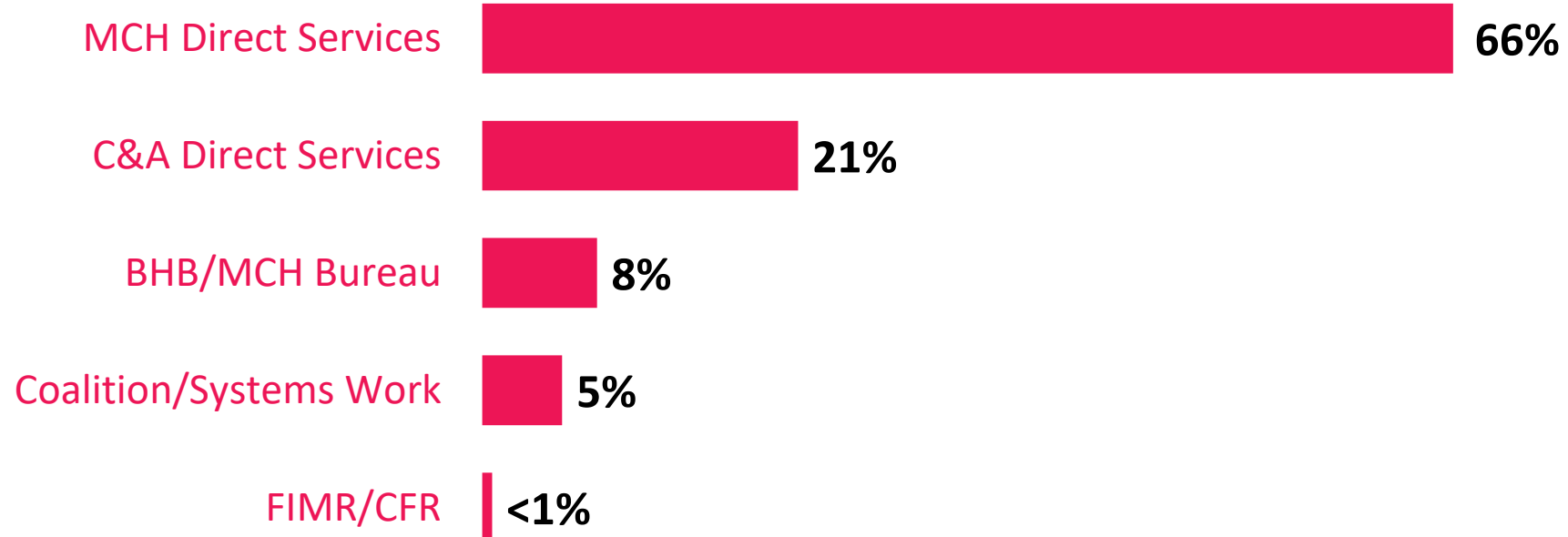
95% of funds are public (taxes and fees) and 5% are private (philanthropic foundations)





## Total Budget Approx. \$29 Million

~87% of funds support implementing direct services and ~13% support infrastructure, BHB communities and systems work, and monitoring



# Funder Roles



Strategic Planning



Executive on Loan



Convener if Needed



Capacity Building



Accountability Measures



Financing Small Programs, Filling Gaps

# Financing: California

- Although federal SAMHSA (Substance Abuse & Mental Health Services Administration) funding for LAUNCH is the primary impetus, the partnerships are critical to financing the complex work we have undertaken since the LAUNCH funding is quite small and relatively short-term (4 years)
- Partner financing includes:
  - County Departments of Public Health funds (administrative costs, oversight, etc)
  - First 5 County dollars in all counties involved
  - SF Mayor's Project 500 Initiative in SF
  - County Departments of Behavioral/Mental Health

# Sustainability: California, Alabama and Baltimore



# Sustainability: California

Sustainability is always a challenge for complex programs

- In the counties involved, we are attempting to build support for the model of MH consultation and family engagement through community collaborations and partnerships and through sharing of information about successes
  - Family “Partner” Cafes to allow other community organizations and leadership to experience a Family Café
- In Alameda, F5 Alameda has continued involvement as a partner beyond the initial LAUNCH funding to implement services in Alameda Co (the first LAUNCH grant). F5’s are invested in meeting community needs & responding to disparity issues

# Sustainability: California

- Nationally, we are exploring mechanisms to fund MHC as a part of MH systems (e.g., 21<sup>st</sup> Century Cures Act, Medicaid waivers for provision of MH services beyond a “targeted” client)
- MIECHV is very interested in the approach LAUNCH has taken to supporting home visiting programs and families but has the same funding limitations as most other federal programs requiring re-authorizations by Congress

- 5 Year Strategy to Launch in Spring
- Advocacy to Maintain Government Funding (SB 912)
- Braiding Funding
- Self-Sustaining Operations
- Lean Processes
- Traditional Fundraising (United Way MOU; United Way Combined Charities; Cribs for Kids)



# Systems Change: Alabama, California, and Baltimore



# Systems Change: Alabama

- Enhancing communication between Head Start, Child Care and State Pre-k
- Policy alignments between Head Start and Child Care
- Accessing other funding sources
- Accessing collaborative funding opportunities with other state agencies
- Overall acknowledgement and understanding of the Infant/Toddler needs within the state
- Support of teacher competencies at each child care segment

# Systems Change: California

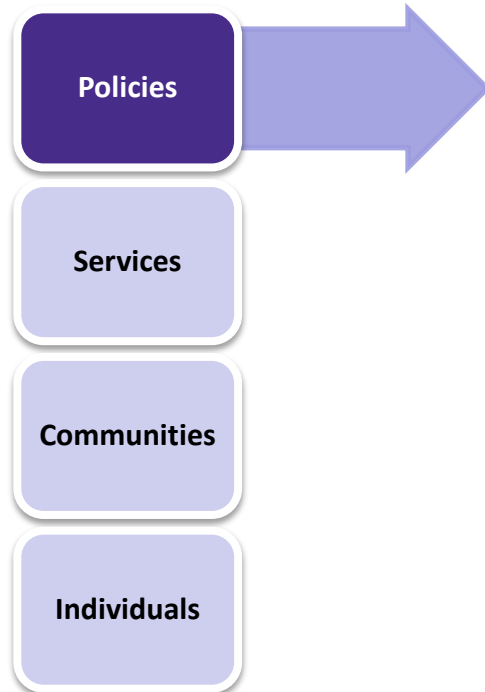
The funding for LAUNCH comes through the Public Health system and we believe a public health approach to mental health services is very important. However, there are challenges in linking very different systems

- Public health staff (including the home visiting programs operated by Public Health such as NFP) typically have very limited training and background in MH
- Some initial resistance may be seen in providing things like “Reflective Supervision” in a non-mental health system—this can be a challenge and take time to overcome
- Limited levels of family support are available in Public Health Programs
  - Family support tends to have grown out of other systems, such as Early Intervention, Early Care & Education, and Early Childhood Mental Health. Hiring program staff and building the infrastructure for family support in PH takes time and effort

# Systems Change: California

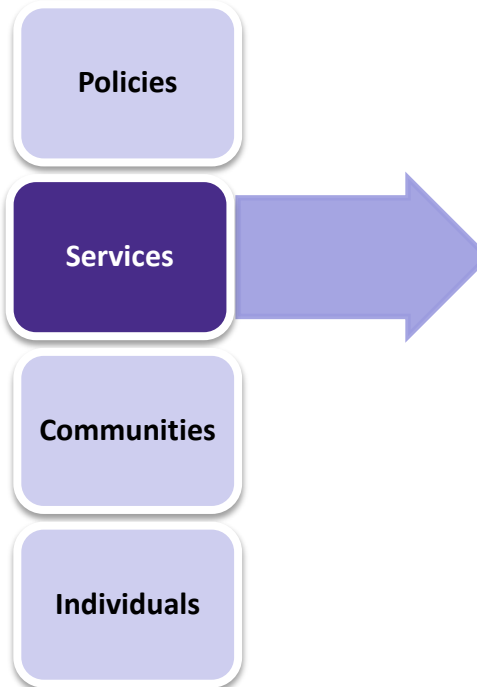
- Great “buy-in” for the LAUNCH program elements within the state Dept of Public Health, but challenges in creating the infrastructures and financing to support such an approach
- Despite significant challenges due to the many players involved at all levels (state, county, non-profits), we are seeing success at the community level and acceptance and enthusiasm by families & program staff. This will ultimately drive systems change at state and national levels

## Major Accomplishments: Policies



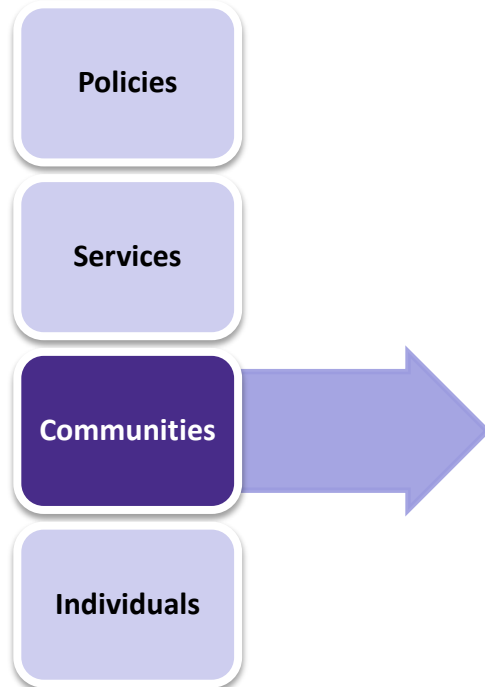
- Mayor Stephanie Rawlings-Blake's 2010 proclamation requires **standardized safe sleep education** for all
- Teen Pregnancy Prevention Initiative ensuring Federally Qualified Health Centers and hospitals offer **long-acting reversible contraception** so that the full range of family planning options are available to clients
- Implementing a **centralized intake process** for linking pregnant women and infants with health and social services
- PRA advocacy and enforcement action with DHMH
- **Implementation of pilot ED** referral system with CRISP
- Alignment and braiding of Medicaid, public health, and private sector funds
- Transition policies – HV, Early Head Start, Head Start
- Through WDC pilot, changed reproductive health guidelines

## Major Accomplishments: Services



- Implementing **provider outreach strategy** delivering quarterly BHB newsletters/updates to over 450 city providers
- In person annual door-to-door delivery of BHB materials to 120 clinics and social services site on Rattle & Roll Day
- Trained 4,000 providers from 220 locations on **safe sleep**
- Trained 50+ health care providers to administer **LARC**
- Use of OB provider detailing to **implement e-prenatal risk assessment system and PRA champions**
- With **City Schools**, implementing **comprehensive reproductive health education** in all middle and high schools
- Transitioned **home visiting programs** to evidence-based models – programs now at capacity and offering Citywide coverage
- Created and evaluating HOPE, an entirely new home visiting model that is now a promising practice within HFA
- Provided 12K+ pregnant women with **Baby Basics** books
- **Developed** full strategy for early intervention services to include social emotional supports for infants and toddlers
- **Developing** health education/counseling curriculum with Corizon Health for Women’s Detention Center

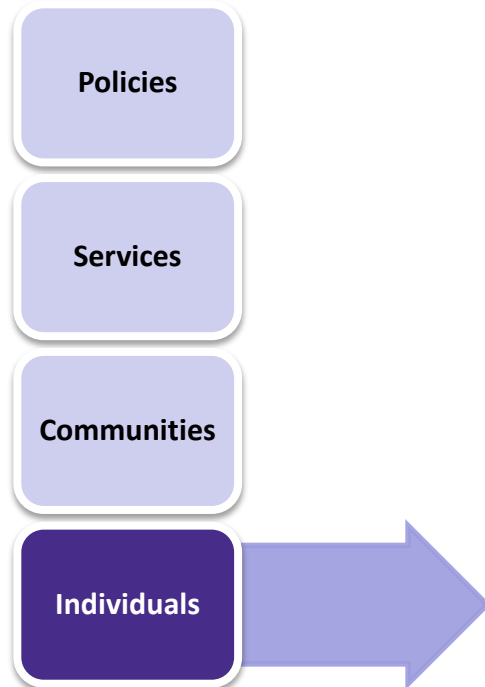
# Major Accomplishments: Communities



- Teams in **Upton/Druid Heights** and **Patterson Park North & East** have reached 35K+ people with their outreach
- **Launched** a Community Advisory Board for resident accountability and to replicate neighborhood work Citywide
- Nine **Baby Basics Moms Clubs** provide education and support to pregnant women
- **B'more Fit for Healthy Babies** provides weight loss and fitness programs in two locations
- **Sleep safe Videos (4)** based on focus group work, background literature, and local data, targeting mothers, fathers, caregivers and the Spanish-speaking community. Materials distributed/shown at barber shops, libraries, jury duty, detention centers
- The **Youth Advisory Council** informs materials and outreaches teens on pregnancy prevention and health
- Developed **Youth Health and Wellness** preconception health strategy and launched Recast trauma prevention strategy
- Launched **doula** pilot program

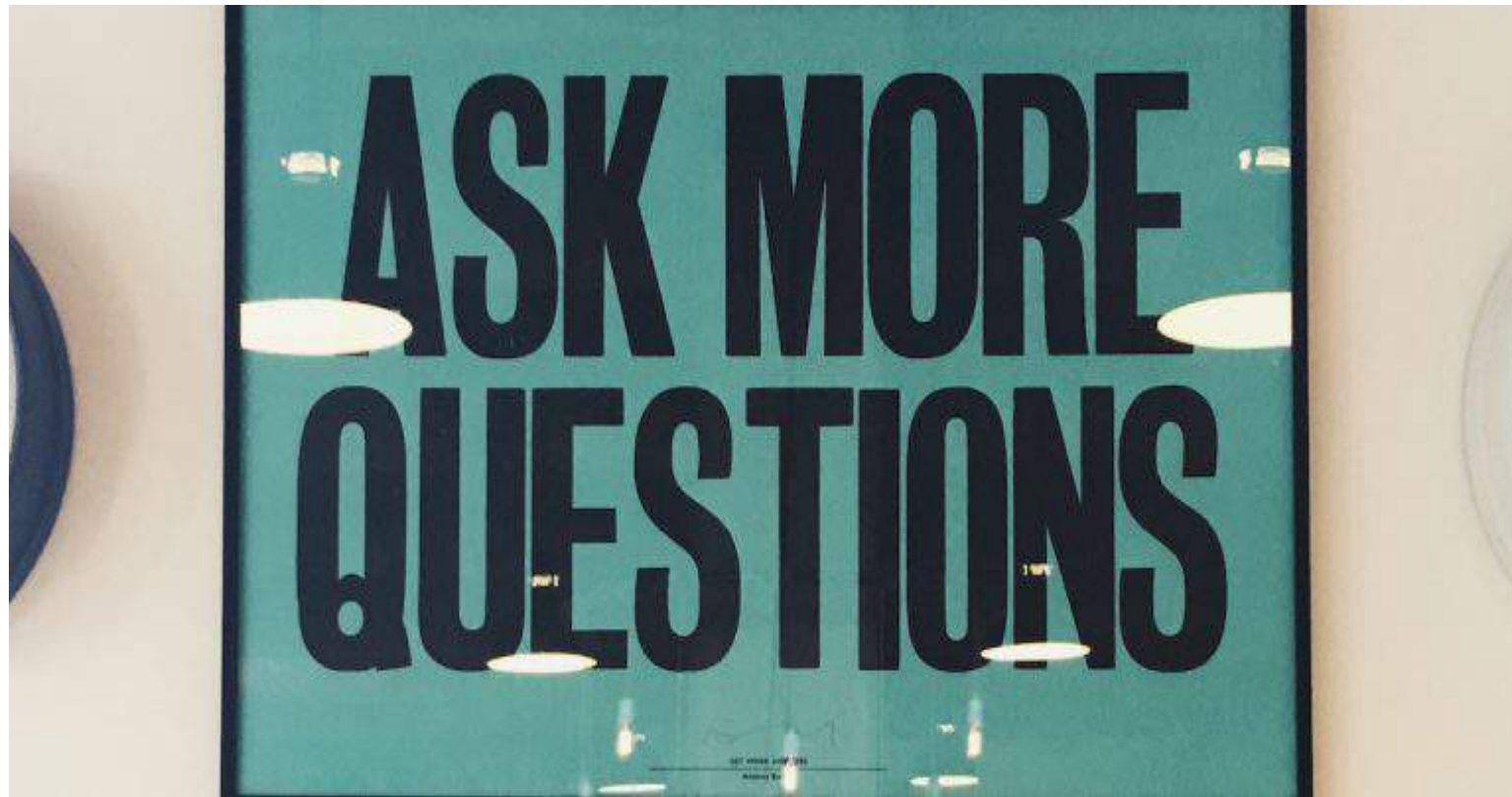


## Major Accomplishments: Individuals



- **SLEEP SAFE** messages have been placed in the media with the potential reach of 14 million views
- 250,000 posters, rack cards, and other materials have been disseminated citywide for the **SLEEP SAFE, Just Hold Off** (smoke-free environments), and **Know What U Want U Choose** (teen pregnancy prevention) campaigns
- BHB has 3,800+ friends and followers on **Social Media**
- The HOPE Project launched **peer home visitors** to help women heal from the loss of an infant/child
- Conducted a City-wide **maternal mental health needs assessment** with 285 high-risk mothers and pregnant women to inform future strategy.

# Questions



# More Information

- California Project LAUNCH: [www.caprojlaunch.org](http://www.caprojlaunch.org)
- B'more for Healthy Babies website: [www.healthybabiesbaltimore.com](http://www.healthybabiesbaltimore.com)

# Thank you!



# BUILD Initiative

**For more information:**  
**[www.buildinitiative.org](http://www.buildinitiative.org)**

