

A photograph of a woman wearing a headscarf, smiling warmly as she holds a baby. The woman's hands are gently resting on the baby's chest. The baby is looking towards the camera with a calm expression. The background is a patterned blanket with geometric designs. The entire image is overlaid with a semi-transparent blue filter.

THE COLLABORATIVE
ANNUAL REPORT
FY2022

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Update on the Maternal Health Crisis

The United States is amid a maternal health crisis that continues to worsen despite efforts by front-line birth workers and dedicated organizations working to galvanize a national response to improve outcomes for pregnant women and birthing people.

Maternal morbidity and mortality rates have steadily increased in the U.S. even though rates in other high-income countries are on the decline; continually increasing for Black women and birthing people compared to other racial groups.

The U.S. maternal mortality rate is 32.9 deaths per 100,000 live births in 2021 (compared to 23.8 in 2020 and 20.1 in 2019, according to the CDC) – officially making it one of the wealthiest nations with one of the worst health outcomes for pregnant women/birthing people and their babies globally.

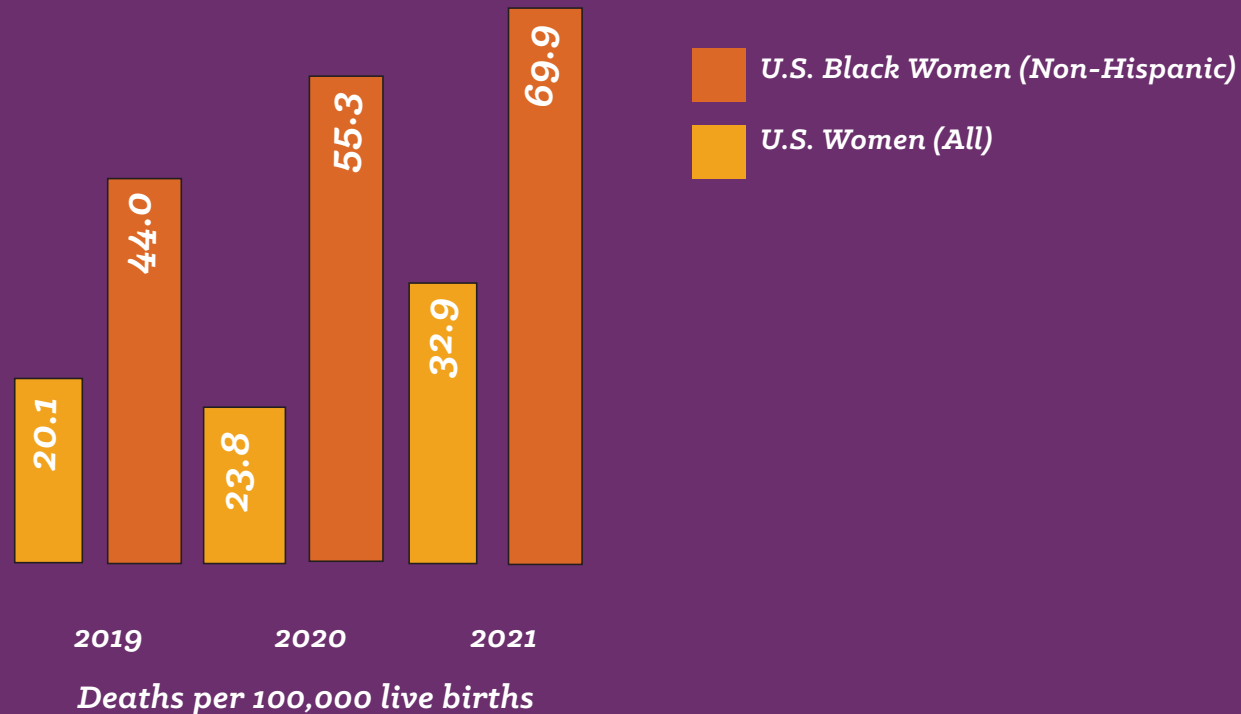
Black women experience a greater burden of maternal morbidities during and around the time of pregnancies contributing to adverse pregnancy and birth outcomes.

The U.S. maternal mortality rate was 69.9 deaths per 100,000 live births in 2021 for (non-Hispanic) Black women compared to 55.3 in 2020 (according to the CDC) in comparison to their (non-Hispanic) white counterparts.

Black women and birthing people are 2.6 times more likely to suffer harm or death in relation to pregnancy, childbirth, labor, and the postpartum period.

As we look to the future, we recognize that we must accelerate our efforts to improve outcomes for Black birthing populations. We will continue to lean into this work and call on our allies to collectively intensify and unify our efforts to incorporate equity in practice widely across health systems by working with strategic partners, funders, community-based organizations (CBOs), maternal health organizations, community leaders, policymakers, etc. to advance birth equity.

United States Maternal Mortality Rate From 2019 to 2021



In comparison to their (non-Hispanic) white counterparts, Black women and birthing people are 2.6 times more likely to suffer harm or death in relation to pregnancy, childbirth, labor, and the postpartum period.

Source: <https://www.cdc.gov/nchs/data/hestat/maternal-mortality/2021/maternal-mortality-rates-2021.htm>

Mission & Vision

The Collaborative is a Black woman-led organization that creates transnational solutions to optimize Black infant health, maternal health, sexual and reproductive well-being. Our vision is that all Black mamas, their babies, and their villages thrive. We do this by shifting systems and culture through training, research, technical assistance, policy advocacy, and community-centered collaboration.

Our work is rooted in reproductive justice, racial equity, and human rights frameworks to improve health equity for all by prioritizing the impacts of the social and structural determinants of health as well as their root causes (e.g., racism). The Collaborative, with its unique shared leadership model, is nationally recognized for providing expertise on health equity, reproductive health, birth outcomes, public insurance, respectful health care including well-woman, maternal, and prenatal care, community-based engagement, staff development and integration to address biases and racism among those who interact with pregnant people in outpatient and inpatient settings.



The Collaborative's Executive Leadership Team



Jauna Crear JD, MBA
Vice President
Finance & Compliance



Khalilah Elliott
Vice President
*Institutional Development
& Capacity Building*



Carmen Green, MPH
Vice President
Research & Strategy



Shani Hunter
*Vice President of
Administration/
Chief of Staff*



**Inas-Khalidah Mahdi,
MPH, DrPH(c)**
Vice President
*Equity Centered
Capacity Building*



Nia Mitchell, MPH
Vice President
*Center for Birth Equity
Research and Praxis*

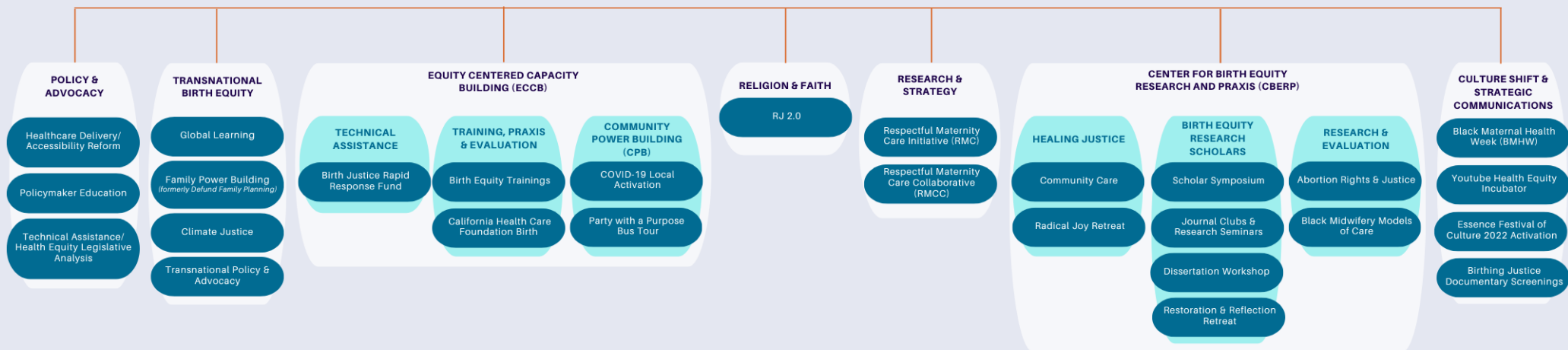
PROGRAMMING AND MILESTONES



Overview

The Collaborative is comprised of an intimately woven, cooperative network of teams with the unified goal of decreasing unnecessary deaths among Black women and birthing people in the American healthcare system and abroad. This problem is multitiered, and The Collaborative applies layered solutions powered by its comprehensive, ariel view of Black womanhood, witnessed traumas, healthcare ambivalence, and desire for change. Each team has grown programmatic branches that lean into the skill and support of sister teams, creating a strong web of distinct yet interconnected initiatives with a unified mission and vision.

PROGRAMMATIC TEAMS AND STRATEGIC INITIATIVES 2022



SPOTLIGHT ON

Birth Justice Fund



In 2020, the Robert Wood Johnson Foundation (RWJF) appointed The Collaborative and four other birth justice organizations to steward their three-year \$16M funding allocation to community-based organizations (CBOs) that address implicit bias and structural racism and their impact on maternal and infant morbidity and mortality. This award funds many efforts including a \$1.5M allocation for the Birth Justice Rapid Response Fund (RRF) supporting CBOs serving Black, Indigenous, and People of Color (BIPOC).

In 2022, the Birth Justice RRF successfully awarded \$500,000 to fifteen (15) grantees across fifteen (15) states and one (1) U.S. Territory. Funded areas included support for victims of gender-based violence, mental health counseling, full-spectrum doulas, community events, lactation support, holistic therapies, pay equity, advocacy (including incarcerated pregnant persons), programmatic support (e.g., salaries), mentorship, policy, and training.

In 2023, the Birth Justice RRF team will grant an additional \$1M to CBOs in two final funding waves.

SPOTLIGHT ON

Birth Equity Research Scholars Program



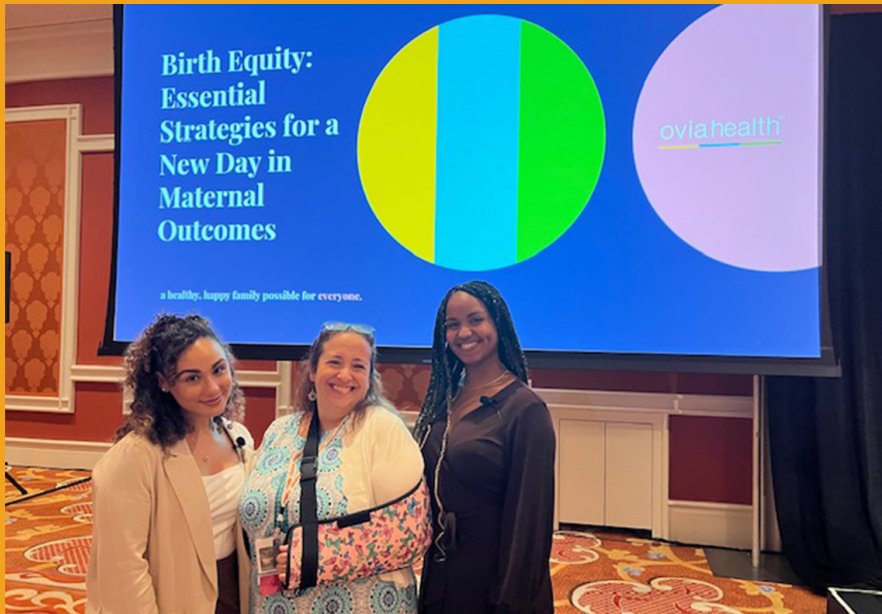
The Birth Equity Research Scholars Program is a two-year leadership and professional development program for Black women and femme doctoral students committed to advancing birth equity through research and evaluation. In August 2022, the fellowship program welcomed six new scholars from six academic institutions across the United States - including one Historically Black University –

ranging from several academic disciplines including anthropology and feminist studies to human centered design & engineering. Scholars were matched with The Collaborative’s programmatic teams to provide research and evaluation support. For a two-year contract with the Centers for Disease Control and Prevention (CDC), Scholars have led a case studies assessment on the presence and strength of collaboration between community-based organizations, maternal mortality review committees (MMRCs), and perinatal quality collaboratives. Additionally, Scholars analyzed data from the Maternal Mortality Review Information Application System to assess how MMRCs incorporate discrimination and racism as contributing factors towards deaths into maternal mortality review processes. Results from the MMRIA data analysis were presented at the 2022 BMMA Black Maternal Health Conference and 2023 MMRIA User Meeting.

Scholars also presented research on infertility, climate change, and abortion advocacy at regional and national conferences, including the American Public Health Association Annual Meeting (APHA), Nuturely Enviro-Natal Health Equity Symposium, and Medical Students for Choice Conference; and were featured in articles on Yahoo News, Stat News, and NBC.

SPOTLIGHT ON

Research and Strategy



The Research and Strategy team leads the Respectful Maternity Care (RMC) initiative. This initiative is based on a global concept—similarly named—wherein medical care is administered in a manner that maintains a person’s dignity and assurance throughout the birthing process using the organization’s mission of centering Black birthing people and initiating the corrective action of racist medical practices. They achieve these goals by utilizing qualitative and quantitative data to develop a patient-centered framework and Equity Measure tools to hold care providers accountable to improve maternal outcomes and re-shape a hostile healthcare culture.

The Research and Strategy team introduced this initiative by delivering a presentation entitled The Respectful Maternity Care Initiative at the American Health Insurance Plans March of Dimes Mom and Baby Action Network and an awareness campaign through blog posts and a six-part webinar series covering topics from community leadership to measurement development.

The team further advanced the RMC framework by hosting a Virtual Convening of stakeholders from the Respectful Maternity Care Collaborative (RMCC) to announce The Collaborative’s research agenda. RMCC is a formalized partnership of stakeholders committed to improving maternal outcomes for Black birthing people. The RMCC’s research agenda is based on results from The Future of Black Birthing Research survey resulting in Ten (10) leading Research Priorities to Eliminate Black Maternal Health Disparities.

The team focused on the top priority of Systemic Change partnering with the National Committee for Quality Assurance (NCQA) on a Birth Equity Project (a three-phased four-year project) proposal, which was funded by the California Health Care Foundation (CHCF) and the Robert Wood Johnson Foundation (RWJF). The team secured \$750K between these two foundations to begin Phase 1 plans over a twelve-month period. The team also secured funding from Pritzker to replicate the Respectful Maternity Care Patient Reported Experiences Measures (RMC PREM) across all birthing populations. Likewise, the team received Institutional Review Board (IRB) approval for Phase I plans.

SPOTLIGHT ON

Equity Centered Capacity Building



The Equity Centered Capacity Building (ECCB) team receives the Equity Measure tools developed by the Research and Strategy team and applies them to hospital settings. This application includes needs assessments, staff training and training evaluations. Training development is a key focus of the ECCB team as they work closely with hospital systems to adopt a culture of Respectful Maternity Care (RMC) and coincides with the initiative developed by the Research and Strategy team.

In 2022, the ECCB team worked extensively through its Training, Praxis, and Evaluation (TPE) sub-group to develop new course content and reviewed online platforms to accommodate distance learning. The Team published and presented extensively in alignment with The Collaborative's Systemic Change research priority, including the Patient-Centered Outcomes Research Institute (PCORI). ECCB also drafted academic literature articles covering varied aspects of sexual and reproductive health.

SPOTLIGHT ON

Transnational Birth Equity



The Transnational Birth Equity Team leads multiple initiatives that create a global network of collaboration, political advocacy, resource building and exchange. Its initiatives address sexual and reproductive health and rights (SRHR) for Black women and birthing people across the African Diaspora. The team has developed an at-a-glance pamphlet describing its programs and strategies to integrate itself into the global, racial and reproductive justice landscape.

Global Learning Initiative

The Global Learning Initiative builds transnational solidarity through thoughtful, mutually beneficial idea-sharing and partnership. In 2022, The team focused on Brazil (Instituto Odara), the Dominican Republic (Reconoci.do), and Ecuador (Mujeres Del Asfalto).

Family Power Building

Family Power Building acknowledges that the family planning framework is experienced differently throughout the African Diaspora. In the Global South, a family planning structure focused on pregnancy prevention neglects key services. This initiative connects Black women and birthing people in strategic regions to deconstruct harmful practices.

Climate Justice

The Climate Justice initiative examines the impact of climate change on global sexual and reproductive health. In 2022, the team established an internal Climate Justice Task Force with the goal of working with experts to develop its long-term climate change strategy. The team also supported the UNFPA's climate justice issue brief and presented it at the UN Climate Change Conference (COP27). Additionally, the team partnered with UNFPA, Global Fund for Women, and RESURJ to organize an event at the 66th session of the Commission on the Status of Women (CSW).

Transnational Policy & Advocacy

Through Policy & Advocacy, the team works with partners and legislators to enact equitable, dignified U.S. policies regarding global sexual and reproductive rights. The Transnational team is active in several coalitions, and engages with internal teams to achieve its policy and advocacy goals. In 2022, the team signed onto fifteen (15) global letters, served on countless panels, and presented on several topics related to the health and wellbeing of children of African Descent.

SPOTLIGHT ON

Policy and Advocacy



This past year delivered a fatal blow to women's rights nationwide, especially for Black women and girls as social health determinants and historical reproductive trauma exacerbate the pressing need for intervention. The Collaborative's Policy and Advocacy team has been a hub of activity to advance birth and reproductive justice.

The Policy and Advocacy team's efforts to educate congressional lawmakers resulted in the endorsement of twenty-two (22) federal bills to advance reproductive justice and maternal health equity. Notably, the team also facilitated the Congressional Sign-on Letter to the Biden-Harris Administration in support of the *Dobbs v. Jackson Women's Health Organization* amicus brief to preserve abortion rights.

Noted state government activities in 2022 included an invitation by the New Jersey Governor's Office to provide policy recommendations at the New Jersey 2022 Black Maternal and Infant Health Leadership Summit, which resulted in the development of strategies and recommendations for the 2022 Nurture New Jersey Strategic Plan.

The Policy Shop's keen observation of our nation's healthcare policies also led to the co-authorship of another Amicus Brief with Democracy Forward addressing COVID treatment equity in New York State. The team furthered its awareness campaign with the submission of many articles and blog posts on topics ranging from infertility to breastfeeding, including comments on Birth Friendly Hospital designations and the FDA's Advisory Committee Hearing on the approval of over-the-counter oral contraceptives (OCOTC).

NEW INITIATIVES



Community Power Building



The Collaborative launched its Community Power Building (CPB) initiative in 2022 to uplift and strengthen local Community-based Organization (CBO) partners and grassroots efforts in key U.S. regions currently engaged in birth equity and social justice work. The CPB framework for social justice shifts the perception of partners from clients to fellow change agents with rooted knowledge of their own unique experiences and needs, while helping communities build the mechanics and network of allies through which to express this inherent power.

In 2022, The Collaborative's CPB team interfaced with everyday people, future healthcare workers and government officials to integrate birth equity in all strata of society. With funding provided through the CDC's Local Community COVID Vaccine Partnerships, the team engaged everyday people in relaxed settings to inform community members of Black maternal health disparities through engaging, creative activities ranging from the COVID-19 Community Party with a Purpose Bus Tour to the Breast-Feeding Week Baby Shower.

Engagements also included events at the state level with statewide conferences, speaking engagements, and several statewide mayoral proclamations in Baton Rouge, New Orleans, and Shreveport, Louisiana during, Black Maternal Health Week 2022.

Center for Birth Equity Research and Praxis (CBERP)

The Center for Birth Equity Research and Praxis (CBERP) was established to advance the reproductive desires, well-being, and outcomes of Black women, birthing people, and their families. Its objectives are to prioritize evidence-based research grounded in birth equity and reproductive justice, build a likeminded and supportive leadership community; improve clinical practices and health policies affecting Black women and birthing people; and facilitate healing from all trauma and oppression.

The Collaborative leans on perspectives from The Kindred Southern Healing Justice Collective in defining healing justice not as a movement in and of itself, but rather as a framework for movements to address collective harm and trauma.

To that end, the organization weaves healing justice into the fabric of our human resources' operations via practices that acknowledge the need for balance and restorative selfcare. Our Community Care Program encourages staff to create personal and collective restorative regimens which have included such sessions as yoga, journaling, and African dance. Moreover, our monthly Healing Justice newsletter is rich with interactive resources to connect staff with events and online resources with the click of a button.

To support Black women outside the organization seeking to overcome trauma, the team also hosted a virtual wellness event for Black women and their families to observe during Black Maternal Mental Health Week (July 19-25, 2022) in partnership with the Center for Reproductive Rights. The event featured a panel discussion highlighting the connections between Black maternal mental health and fertility challenges as well as an intimate wellness session for birthing people and their partners.

IMPACT



Birthing Justice Documentary



The Collaborative recognizes the effect media and art has on its larger efforts to amplify the voices of Black women and birthing people. Thus, The Collaborative has served as the consulting producer on the *Birthing Justice* Documentary. *Birthing Justice* follows women through pregnancy, delivery and the postpartum period with medical and social justice experts exposing the challenges Black birthing people face. These challenges have resulted in racial disparities in maternal and infant health. With input from advocates and leaders in the birthing justice movement, the film focuses on the work being done to create lasting change. With many screenings happening nationwide, The Collaborative also hosted a film screening and panel discussion at Dillard University in New Orleans, LA on January 20, 2023. The panel was moderated by Shalina Chatlani (Healthcare Reporter with WWNO), Frankie Robertson (The Amandla Group), Denise Pines (Exec Producer, *Birthing Justice* Documentary), and Dr. Veronica Gillespie (Louisiana Health Dept). Attendees included students from the Public Health and Women's Health departments at Tulane University, staff from Quilted Health, and Olivia F. Scott, head of Omerge Alliances.

Black Maternal Health Week 2022



As a member of the Black Mamas Matter Alliance (BMMA), The Collaborative participates in the Black Maternal Health Awareness Week. An annual week-long campaign founded and led by BMMA to build awareness, activism, and community-building to amplify the voices, perspectives and lived experiences of Black Mamas and birthing people. The activities and conversations hosted throughout the week intentionally center the values and traditions of the reproductive and birth justice movements working to galvanize a national response to improve outcomes for pregnant women and birthing people.

Held annually on April 11-17th, The Collaborative hosted a series of virtual events in partnership with Interactive One to highlight the multitude of topics relating to the birth justice movement ranging from sexuality and pleasure, climate justice, fatherhood, spirituality and more with panelists like Ericka Hart, Tatyana Ali, Alexis McGill Johnson (Planned Parenthood), Charles Johnson (4kira4moms), Tonya Lewis Lee (Aftershock), Latham Thomas (Mama Glow) and others.

COVID-19 Local Activation



In collaboration with the CPB team, the Culture Shift and Strategic Communications (CSSC) team planned and executed several COVID-19 Activation projects during the 2022 Essence Festival of Culture (June 30th–July 3rd). The festival is the largest African American culture and music event in the United States and takes place in New Orleans, Louisiana. Festivities commenced with a Pre-Essence mixer with members of the local birth equity and reproductive justice community. At this event, the Mommy Stay @ Home Toolkit was introduced and distributed as a resource to promote active and healthy pregnancy, labor, and postpartum wellness throughout the COVID-19 pandemic. Toolkit resources included relaxing music playlists, fitness activities and updated

COVID-19 information. Throughout the weekend, teams distributed the toolkit in the New Orleans Convention Center and Essence Fest Wellness House as well as shared about The Collaborative's community work during Public Service Announcement (PSA) slots between programming and panels. Furthermore, The Teams partnered with Monique D. Barconey of Paisley Family Medical Center to administer COVID-19 vaccines and testing throughout the city.

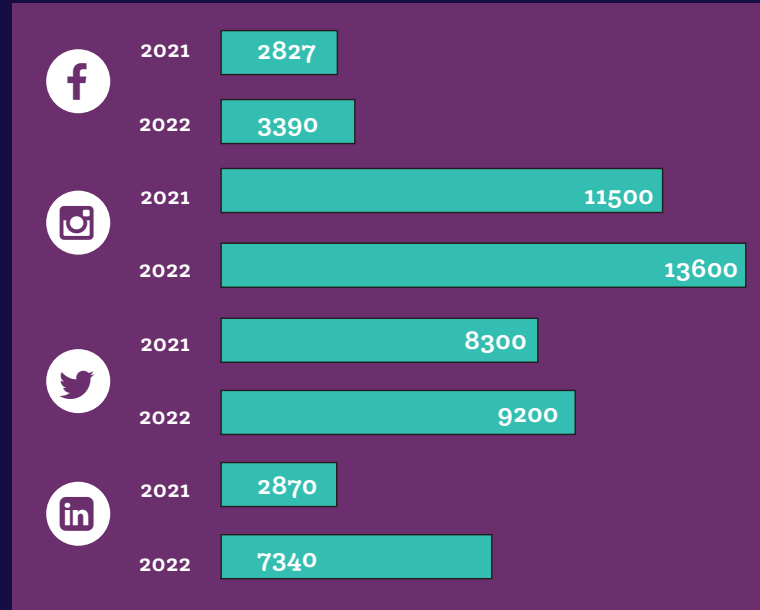
The Collaborative attended the Congressional Black Caucus Foundation's Annual Legislative Conference (ALC) in Washington, D.C. from September 28–October 2, 2022. Its theme was Advancing Our Purpose. Elevating Our Power., highlighting the importance of Black civic engagement in a pivotal election season. During this conference, our teams hosted a panel and mixer entitled *The Future of Black Maternal Health in a Post-Roe Transnational World*. This panel addressed the local, state, federal, and global risks in a world without Roe v. Wade protections. Panelists consisted of advocates and activists including Congresswoman Cori Bush (MO-01), Breana Lipscomb (Center for Reproductive Rights), Dr. Jamila Perritt (Physicians for Reproductive Health), Tonya Lewis Lee (Director, Aftershock), and Megan Simmons (Policy Director, The Collaborative). The mixer welcomed 100+ attendees from the Sexual and Reproductive Health and Rights (SRHR) community and distributed COVID-19 Keep Safe kits that included at-home COVID tests.

BRAND GROWTH

SOCIAL MEDIA

Growth (Compared to 2021)

New Followers



Total Engagements: 47,100 ↑ 205%
Total Impressions: 567,000 ↑ 282%
Total Post Link Clicks 23,600 ↑ 389%



Total Engagements: 27,600 ↑ 193%
Total Impressions: 664,000 ↑ 147%
Total Website Clicks 1,010 ↑ 54%
Total Post 519 ↑ 322%



Total Followers: 3,390 ↑ 20%
Total Engagements: 12,400 ↑ 95%
Total Impressions: 252,000 ↑ 21%
Total Post Link Clicks 1,670 ↑ 7%
Total Video Views 6,880 ↑ 35%



Total outbound Tweets: 621 ↑ 1,344%
Total Engagements: 9,040 ↑ 1,180%
Total Impressions: 235,000 ↑ 1,234%
Total Post Link Clicks 1,670 ↑ 7%

HIGH PERFORMING CONTENT

TOP INSTAGRAM POSTS



9 BLACK-LED ORGANIZATIONS UPLIFTING BREASTFEEDING AWARENESS

- Total Likes: 713
- Engagement Rate: 10.03 %
- Total Impressions: 9,460
- Total Saves: 205



BILLS OF THE BLACK MATERNAL HEALTH MOMNIBUS ACT

- Total Likes: 252
- Engagement Rate: 10.52 %
- Total Impressions: 2,900
- Total Saves: 48

HIGH PERFORMING CONTENT

TOP LINKEDIN POSTS



INTRODUCING ROBERT WOOD JOHNSON BIRTH FUND

- Total Likes: 241
- Engagement Rate: 9.19 %
- Total Impressions: 2,429
- Total Shares: 76
- Total Clicks: 430

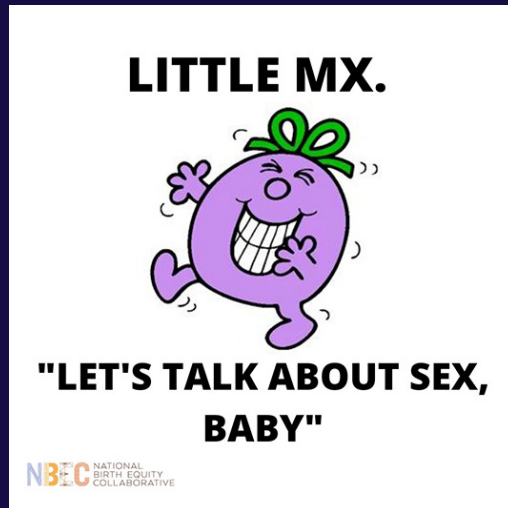


ANNOUNCING BLACK MATERNAL HEALTH WEEK

- Total Likes: 241
- Engagement Rate: 9.19 %
- Total Impressions: 2,429
- Total Shares: 76
- Total Clicks: 430

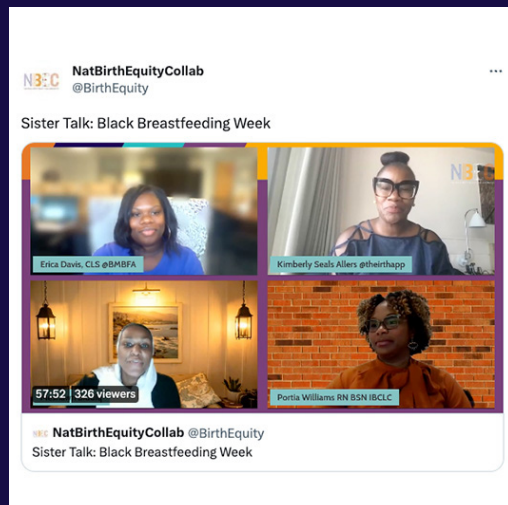
HIGH PERFORMING CONTENT

TOP TWEETS



LITTLE MISS TREND

- Total Likes: 17
- Engagement: 96 %
- Total Impressions: 1,047



SISTERTALK: BLACK BREASTFEEDING WEEK

- Total Likes: 19
- Engagement: 150
- Total Impressions: 1,032



*It seems like a scary time for reproductive rights.
Here are reasons to have more hope.*

May 21, 2022

“Power over bodies has a long history that is inclusive of racism, classism and ableism. We need to change the way we talk about abortion rights.”



*In abortion debate, echoes of another battle:
Reproductive rights for Black women*

June 10, 2022

“The United States faces an ever-growing maternal health crisis that is especially deadly for Black women, who, along with Native American women, live shorter lives than many other Americans. Pregnancy and childbirth are among the leading causes of death of all teenage girls and women 15 to 44 years old, and Black women are three times as likely to die as a result of pregnancy as White women.”



*Expectant Black mothers, facing higher mortality rates,
turn to doulas and midwives for support*

June 17, 2022

“A 2018 study found that states with more robust midwifery services reported better maternal care and better birthing outcomes, suggesting that states that have better resources dedicated to health care have better results . . .”

MADAMENOIRE

Black Maternal Health Week 2022 Kicks Off With These Stellar Events

April 11, 2022

“Black Maternal Health Week 2022 is officially underway — and this year’s theme is: Building for Liberation: Centering Black Mamas, Black Families and Black Systems of Care.”

THE ROOT

Organizations that Support Black Mothers and Caregivers Today and Everyday

May 6, 2022

“Giving back has a way of making people feel good. And Mother’s Day is the perfect time to support Black mothers and caregivers who need it most. If you are looking for a way to help those who are always helping others this Mother’s Day, consider supporting one of these important non-profit organizations.”

NEWSONE

OP-ED: Formula Shortage Highlights Blackness As The Casualty Of Capitalism

August 15, 2022

Maternal health funders must acknowledge and address injustices in funding distribution and the perpetuation of research and programming that looks for solutions outside of the marginalized community. Justice-centered approaches to funding and programming will establish a narrative that does not perpetuate this continued marginalization but promotes asset-based solutions for improving maternal health. Black women’s thought leadership is the chief asset.”



Birthing Justice Documentary Examines Systemic Racism and Identifies Solutions to Address The Shocking Infant and Maternal Mortality Rates in The U.S.

April 14, 2022

“America’s medical establishment has turned giving birth into a battlefield for Black women and their babies, but activists are changing those negative outcomes. Birthing Justice goes behind the statistics and beyond the grief to amplify how Black women are taking control of their lives and transforming the birth experience to one of resilience and joy.”



Exclusive: Black congresswomen urge Biden to declare public health and national emergency around abortion

June 24, 2022

“The effects of this decision on the lives and health of Black women and pregnant people will be devastating and require an urgent and whole-of-government response . . .”



Reproductive Justice on the Frontlines of US Climate Action Extreme Weather Highlights Need to Support Doulas and Environmental Health in Maternal Care

July 7, 2022

“Pregnant people are more vulnerable to heat-related illnesses, and exposure to heat and wildfire smoke are associated with stillbirth and premature and low weight births (themselves both linked to higher infant death rates). This makes the environmental crisis a reproductive health and equality crisis. The US has struggled with increasing rates of preterm birth for years, and rates are twice as bad for Black infants as white. Now, reproductive justice advocates and frontline birth workers, such as doulas and midwives, are intervening to support pregnancy health in the face of additional pressures from the climate crisis. “

LOOKING FORWARD



Youtube Health Equity Incubator



YouTube Health announced the creation of THE-IQ in September 2022 at the annual Google Health Equity Summit in partnership with Kaiser Family Foundation (KFF). This program addresses health equity in underserved communities through Information Quality in the wake of harmful misinformation that impedes an individual’s healthcare decisions. The Collaborative was one of three such organizations invited as a sought-after leader in maternal health disparities alongside The Loveland Foundation and Satcher Health Leadership Institute who represent the areas of mental health and healthcare access respectively. The Collaborative and KFF worked to create an informative, yet approachable video series discussing a range of topics including pollution’s effect on maternal health, reasons to join the birth justice movement and more. So far, The Collaborative’s Health Equity Incubator: Reproductive Justice series has eighteen (18) videos—and counting—with an engaged audience.

Transnational Film Festival



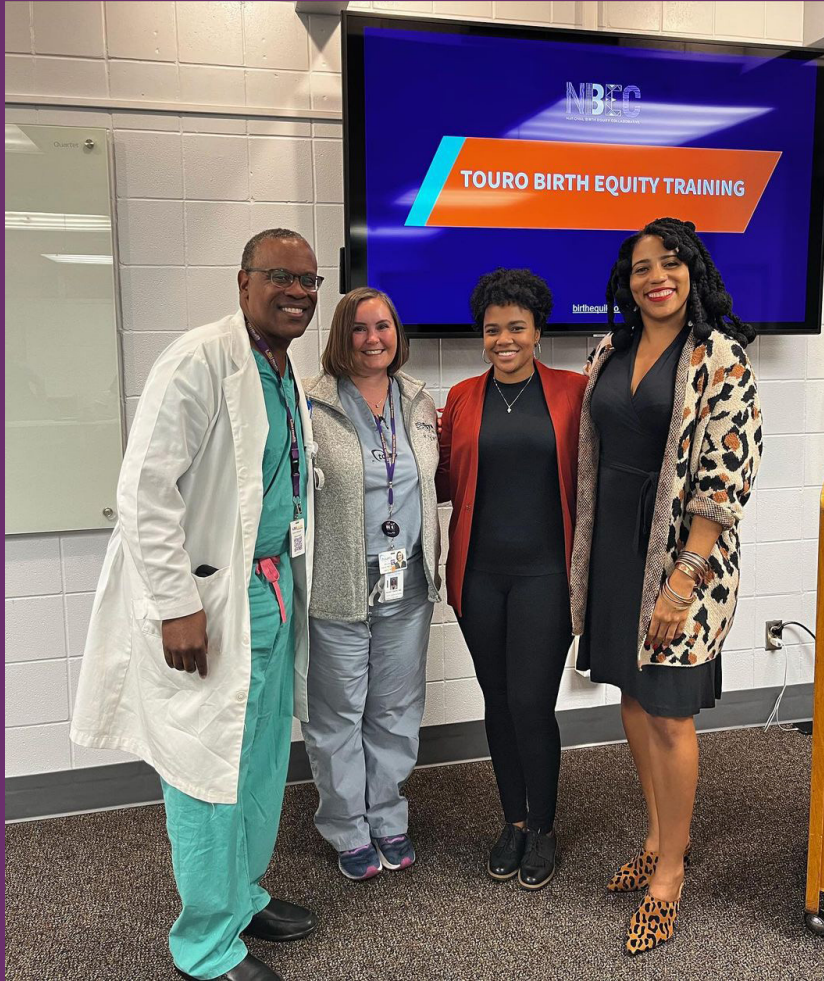
The Collaborative and its global partners will converge reproductive justice with the performing arts via a first of its kind Black Diaspora Reproductive Justice and Wellbeing Transnational Film Festival. The Film Festival will feature Black social justice filmmakers whose films bring awareness to our collective challenges and solutions as they relate to Black women and girls. Film topics will also feature social determinants of health such as race, education and climate change but will also balance these harsh realities with love and upliftment. Another objective of the Film Festival is to encourage the United Nations to include sexual and reproductive justice as a theme in its International Decade for People of African Descent (2015-2024).

Black Equity Sustainability & Social Impact Engagement



With generous support from the Hilton N. Conrad Foundation, The Collaborative kicked off its Birth Equity Sustainability & Social Impact Engagement Initiative (BESSIE). This initiative will build upon The Collaborative's existing efforts of driving culture shift and building public awareness; providing expert and technical support to peer organizations; and being an intermediary funding source for CBOs on the front lines of the Black maternal health crisis. However, BESSIE stands apart from existing efforts by moving The Collaborative towards sustainability, focusing on organization infrastructure, capacity building, continual culture shift through communications, and direct investment in birth workers. Led by the Institutional Development & Capacity Building Team who develops and strengthens The Collaborative by securing and maintaining financial resources and strategic partnerships for long-term growth and sustainability.

Birth Equity Trainings Impact Engagement



The dismantling of ingrained racist medical practices necessitates a path to the humane and equitable treatment of Black women and birthing people. Thus, The Collaborative offers Birth Equity Trainings as a thoughtful, methodical, and evidence-based solution that unites birth justice advocates and the medical community, forging a new path. We are excited about our plans to offer robust and accessible Birth Equity Trainings to our partners by housing training modules on Rise 360, a premier online learning platform that automatically adapts to all devices. In addition, training modules will include two new courses entitled Birth Equity 101 and Deconstructing Bias. The Collaborative's Birth Equity Training goals include a Promotional Campaign, the retooling and launching of the Birth Equity Assessment, developing an impact profile for Birth Equity Assessment and training, establishing a Culture of Birth Equity as a core external engagement strategy, and developing a Respectful Maternity Care training curriculum.

FINANCIALS

Contributed Revenue

- Foundation/Corporate Contributions: \$5,000,000.00
- Private Grants: \$3,108,716.00
- Individual Donations: \$50,000.00

Subtotal: \$8,158,716.40

Earned Revenue

- Program Services & Fees (Training & Technical Assistance):
\$455,000.00

Subtotal: \$455,000.00

Total Revenue: \$8,613,716.40

Expense

- Salaries/wages, payroll taxes, and benefits:
\$3,960,000.00
- Program Services & Support (Subcontractors/Consultants):
\$1,000,000.00
- Fiscal Sponsor Fee (The Praxis Project, Inc.):
\$861,371.64.00
- SubGrant Awards, Contributions & Sponsorships:
\$800,000.00
- Special Events (BMHW22, Community Cares, staff/
leadership retreats, etc.): \$200,000.00
- Travel: \$180,000.00
- Staff Training/Professional Development: \$175,000.00
- Software Licenses: \$110,000.00
- Meetings & Conferences: \$105,000.00
- Supplies & Equipment: \$84,875.00
- Rent, parking, and occupancy: \$30,000.00
- Research Incentive Support: \$10,000.00
- Postage & Shipping: \$3,000.00

Total Expense: \$7,519,246.64

Revenue Less Expense: \$1,094,469.76

NEWSONE

On Erasure, Equity And Funding: Advancing Birth Equity Requires Acknowledgment Of Black Women-Led Framing And Foundation

The injustice suffered by those birthing people is a mirror of injustice and marginalization happening in the larger structures of our society.

Written by: **Inas-Khalidah Mahdi, MPH, DrPh(c)** | Published on: **November 1, 2022**



Source: SOPA Images / Getty

Renewed and warranted interest in birth equity has understandably directed new funders to the field of maternal and perinatal health equity. The crisis of persistent inequities in maternal mortality demands that funders face harsh realities about the genesis of our maternal healthcare system and related programming. No single intervention will enjoy sustained improvement without a critical examination of the root causes of these birth inequities, and systemic injustices in maternal health care, research and funding. While funders reorient their scopes from previous maternal health outcomes to focus on birth equity, it is imperative that funders and program planners recognize the foundation and existing frameworks for action developed by Black women. Acknowledging sustained injustices within the healthcare and funding sector, while retrofitting these systems and exhibiting a commitment to their undoing offers an opportunity to build care models that can assure equitable outcomes for all birthing people.

In the past week, a record number of summits, convenings, and conferences have come together to discuss the future of birth equity, maternal health, and national frameworks for action. Absent from these conversations is the acknowledgment of the work of Dr. Joia Crear-Perry and the National Birth Equity Collaborative (NBEC) in elevating birth equity as a part of the national conversation. While Black women-led organizations may be invited to participate over the course of these events, programming agendas reflect a lack of engagement of birth equity thought leaders in the framing, planning, strategy, or execution behind these occasions.

The National Birth Equity Collaborative (NBEC), founded by Dr. Joia Crear-Perry, a Black woman OB-GYN, is a local, national, and transnational organization working in research, technical assistance, training, policy, evaluation, community-power building, health communication, and more to ensure that all Black mamas, birthing people, babies, and their villages thrive. In 2016, before the National Healthy Start Association Annual Conference, Dr. Joia Crear-Perry and a group of colleagues created NBEC as an acknowledgment of the need for Black women-led application of human rights frameworks in the perinatal health space. Human rights doctrine insists that we recognize the highest attainable standard of health for all people as freedom and entitlement. The term reproductive justice (RJ) was coined by a groundbreaking group of 12 Black feminist scholars and advocates in 1994, who are considered the founding mothers of the movement: Toni M. Bond Leonard, Reverend Alma Crawford, Evelyn S. Field, Terri James, Bisola Marignay, Cassandra McConnell, Cynthia Newbille, Loretta Ross, Elizabeth Terry, 'Able' Mable Thomas, Winnette P. Willis, and Kim Youngblood. NBEC's work builds on reproductive justice; acknowledging human rights as inseparable from the advancement of health and well-being for Black birthing people, their families and villages.

Defining Birth Equity

At the time of NBEC's genesis, no definitions existed for birth equity. NBEC built upon existing definitions from The Centers for Disease Control and Prevention and The World Health Organization, while uplifting the work of Black women scholar-activists in reproductive justice and health equity. The injustice suffered by those birthing people is a mirror of injustice and marginalization happening in the larger structures of our society.

Former American Public Health Association (APHA) President, Dr. Camara Jones, posits that health equity is the assurance that conditions for optimal health are available for all people, based on the premise that all people are valued equally, and injustice is both recognized and rectified. With the guidance of Dr. Jones and others at the National Association of City and County Health Officials and APHA, NBEC defines Birth Equity as the assurance of the conditions of optimal births and well-being for all people with a willingness of systems to address racial and social inequalities in a sustained effort.

If organizers of birth equity events are truly interested in the fruition of birth equity in our lifetime, paradigmatic shifts in funder philosophies must occur. What if funders centered the community and Black women-led frameworks on conversations around birth equity? If you center the realities of the most marginalized—that Black and Indigenous mothers and babies have the worst outcomes in Maternal and Child Health in the United States—you make room for all other racial and ethnic groups to grow and prosper. How does the exclusion of the innovators in the field comport with equity when White-led organizations are continuously centered? Maternal health funders must acknowledge and address injustices in funding

distribution and the perpetuation of research and programming that looks for solutions outside of the marginalized community. Justice-centered approaches to funding and programming will establish a narrative that does not perpetuate this continued marginalization but promotes asset-based solutions for improving maternal health. Black women's thought leadership is the chief asset.

As we are facing a preventable, sustained, and worsening Black maternal health crisis, it is important for us to examine the role of legacy. This is critical, as it points directly to the legacy of philanthropic redlining and white supremacy that seeks only to capitalize on the experiences of Black women and birthing people on the back end, signifying a sense of inclusion, without trusting our community's leadership to create solutions that will meet our needs. We encourage funders to center the organizations, experts, and practitioners, on the ground who have innovated birth equity and justice centered-solutions. As our colleagues Jennie Joseph and Kimberly Sears-Allers noted during one summit, Black women-led organizations have been innovating in birth equity and birth justice long before philanthropic attention. It is critical to recognize this innovation, fund these organizations and support further sustainable investment in these organizations. It is not time for funders to try and reinvent the wheel that Black maternal health thought leaders have created and pushed forward for generations. Instead, we challenge philanthropy and well-meaning organizations to shift the narrative of erasure and instead innovate by highlighting black women's thought leadership and frameworks and fund this work as an innovation.

It is philanthropic redlining that has, in many ways, erased the contributions of Black researchers, birthing people, and thought leaders, and has sanitized our messages in service of respectability to uphold the status quo under the white gaze. We need more

innovative, radical, rigorous, and well-resourced solutions. The cultural arrogance and ignorance involved with giving money to the same groups who have caused or prolonged health disparities will not serve us.

We must ask, what is your goal as a funder? It has been two years since America's "Racial Reckoning", where many White-led organizations stated their claims to raise their organization's racial consciousness. What progress do these organizations have to show toward this goal? What lens is equity being viewed from? What framework is being applied to advance birth equity? These actions do not align with what you are telling the world you are doing. Why must we beg to be a voice in conversations that claim to center us? Do events supporting birth equity demonstrate a "willingness of systems to address racial and social inequalities in a sustained effort?" As White-led organizations consistently diminish the voices of authority on Birth Equity that are Black birthing persons, they further confirm the point and the need for this work that, Black birthing people and their families are being left out of life or death conversations.

We urge philanthropists and birth equity supporters to see this time as an opportunity for you to build true, equitable relationships with organizations that have been doing this work long before the national spotlight.

We must be reminded of Black women's statements that "All white-governed institutions cannot serve as the benefactors, oppressors, and redeemers of Black women's genius...You have no answer that Black women don't already possess."

THANK YOU TO OUR DONORS

We offer deep gratitude to our donors for fueling The Collaborative engine, which gives us the resources to actualize our mission, values, and goals.

We also sincerely thank our supporters who continue to create a strong village that renews our fighting spirit each day.

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(CECA)***

Acknowledgment

We extend our appreciation to Dr. Joia Crear-Perry, a visionary, trailblazer and thought leader who brought the National Birth Equity Collaborative (NBEC) from the realm of possibility to active, vibrant fruition while enlisting and inspiring a team of talented experts to aid in the mission of improving birth outcomes for Black women and birthing people.

As we move forward from our foundation and grow towards making a greater impact in reproductive health as THE COLLABORATIVE (a fiscally sponsored program of The Praxis Project, Inc.), we also recognize the importance of these efforts historically and gratefully acknowledge the original vision of NBEC's founder that has made it possible to launch our work further into the future.

THE COLLABORATIVE

 **Contact us**

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