

FLOURISH: The First Five Years

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FLOURISH St. Louis was formed because we have a crisis in our region.

Our infant mortality rate is one of the worst in the U.S. — and Black babies are three times more likely to die before their first birthdays than white babies.

This isn't just a health problem. Issues like systemic racism, poverty and access to health services inhibit Black families' ability to flourish.

Our region's transportation, housing, employers, schools and social services all need to be part of the solution.

Since 2015, FLOURISH has been bringing community members impacted by racial inequities together with key sectors, including health care, nonprofits, business and education. Together, we have worked to reduce infant mortality by changing how systems in St. Louis work for Black families.

This is complex, challenging work, but after five years, we are pleased to see progress toward our goal:

- · Increased groundswell around the issue has led other organizations to make the health of Black moms and babies a priority, and the media is telling these stories.
- The narrative is changing as more organizations approach their work with a racial equity lens, focused on solutions that specifically help Black families.
- · Hospitals, practitioners and community members are getting trained and promoting safe sleep practices to caregivers.
- Managed care companies have made it easier for moms to access medical transportation.
- Residents in low-income housing are advocating for their right to a safe home.

- Community leaders are unapologetically promoting that Black Babies Matter and launching outreach efforts where fellow Black moms live.
- Funding from FLOURISH is enabling community organizations and nonprofits to implement more services for Black moms and babies.
- Other cities are modeling their own efforts after St. Louis.
- · And, most importantly, while the racial gap in fetal and infant mortality remains large, it has begun to decrease. Currently, 75 more Black babies than white babies die each year, down from 81 Black babies in 2016.



It typically takes a generation to fully impact infant mortality rates like ours

This is a marathon, not a sprint. Black infant mortality won't be solved until we change policies and systems in our region. We are excited by the momentum and will continue to lead the charge — so 75 more Black babies will reach their first birthday each year.

KENDRA COPANAS

Executive Director, Generate Health FLOURISH's backbone organization





Achieving zero racial disparities in infant mortality by 2033

Our Principles

Infant mortality is a complex problem that can't be solved by a single organization.

FLOURISH was created to align our region in how we address infant mortality to make lasting change.

THE FOLLOWING PRINCIPLES GUIDE OUR WORK:

RECOGNIZE

the power of the community to make change

BE ACCOUNTABLE

to the community most impacted by racial inequities

CREATE

sustainable systems change

MANIFEST

shared resources across the FLOURISH network

REINFORCE

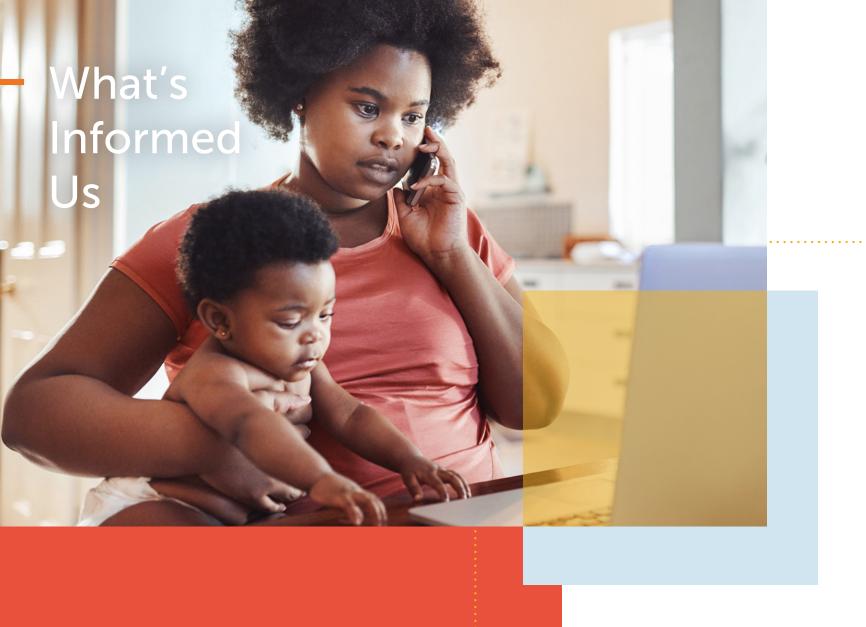
trauma-informed/ responsive practices

INSIST

on authentic relationship building

PRACTICE

equity at all levels



FLOURISH's work is inspired by several frameworks, including:

Collective Impact Model

FLOURISH was built with a collective impact framework, bringing many people and sectors to one table. Together, we established a common agenda for our region to coordinate efforts to reduce infant mortality in St. Louis. Community voice is core to this approach.

Racial Equity

The racial disparity in health and in birth outcomes in the St. Louis region is staggering. As a result, FLOURISH follows the racial equity framework established by Forward Through Ferguson as the core of its approach to solving St. Louis' infant mortality crisis. The Forward Through Ferguson initiative was born following the tragic death of Michael Brown in 2014, which brought to light the deep racial inequities in St. Louis.

Theory of Change

In partnership with our funder, Missouri Foundation for Health (MFH), FLOURISH developed a Theory of Change to guide our work. This outlines the early changes, long-term systems changes and health impacts we hope to see, and helps us enact the right strategies to achieve those.

Other Inspirations

Peer organizations addressing infant mortality in other regions — including Celebrate One in Columbus, Ohio; Cradle Cincinnati in Ohio; and B'More for Healthy Babies in Maryland — inspired FLOURISH's work. We also looked to local community organizers and the California Endowment for how to create systems change through community-led work.



In its early days, FLOURISH was led by representatives from different sectors, including physicians and administrators, health departments, managed care companies, universities, nonprofits and community members.

These leaders were instrumental in helping FLOURISH identify and begin addressing priority areas, as well as setting our North Star: Achieving zero racial disparities in infant mortality by 2033.

In 2018, we changed our approach. It became clear that every barrier we explored negatively impacted Black families more than white families Black babies are dying three times more often than white babies, and our solutions must focus on closing this gap. But to do this right, we needed to shift how FI OURISH. works — and bring the impacted community to the center.

Community members most impacted by racial inequities are critical because they have the lived experience to identify exactly where barriers exist. A Community Leaders Cabinet now drives our work. With their guidance, FLOURISH can focus on the best solutions for achieving greater racial equity in infant mortality.

It Takes a Region

Many people were part of FLOURISH's successful evolution over the past several years:

- A Leadership Council and original Cabinet brought together leaders from multiple **sectors** to establish our path.
- Action Teams identified specific solutions needed to address the main issues impacting the health of moms and babies.
- A Think Tank and an Impact & Improvement Team closely analyzed data to guide our decisions and helped us determine how to evaluate our impact.
- Generate Health also brought existing connections to FLOURISH. The Fetal Infant Mortality Review provided insights into infant mortality trends in the St. Louis region, and the Making Change Happen Leadership Academy helped elevate community voices during FLOURISH's early days.



babies. The reason for this disparity is systemic racism in our community.

Why are Black babies in St. Louis at a higher risk?

Systemic racism describes the policies and practices entrenched in established institutions that harm certain racial groups. The systems that serve our society — government, health care, social services, education. businesses and more — were created centuries ago by white people to protect themselves and their interests. Over time, it becomes "the way we do things," and people often don't even realize that the system is designed to put minorities at a disadvantage.

Black families in St. Louis are facing systemic racism every day. Where they live, where they go to school, the kinds of jobs they have, how they get around, the quality of care they receive from doctors — in all of these areas, they have fewer opportunities and worse experiences.

A Black woman's experiences with racism throughout her life — not just during pregnancy — create stress that contributes to actual physical changes

in her body. This leads to an increased risk of hypertension and preeclampsia, which can trigger premature labor.

Most babies who die in St. Louis are born too early and too small.

FLOURISH is working toward a St. Louis where race no longer predicts a baby's outcome. It is a bold goal, but we cannot settle for anything less.

INFANT MORTALITY

Per 1.000 live births*

Black

White

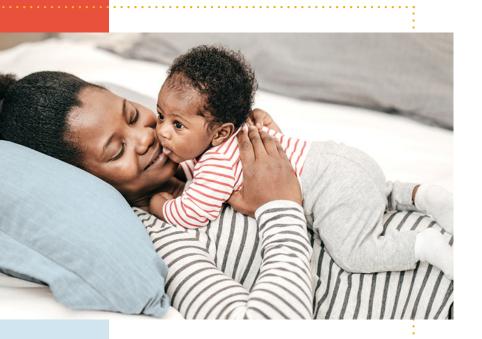
* Based on most recent data available for St. Louis City and County, which is reported in five-year averages to show trends

Source: MOPHIMS, 2010-2018





Achieving zero racial disparities in infant mortality by 2033.



The North Star was born after deep discussion about how we reorient our work to focus on racial disparities.

- More than 40 representatives from FLOURISH participated in the multi-day Crossroads Antiracism training, a national program that elevated as critical training for leaders in St. Louis by Forward Through Ferguson. This training helped us all better understand and articulate the impact of systemic and institutional racism in St. Louis.
- · We closely reviewed key health data to identify where the biggest disparities occur, and spoke with community members about their lived experience.
- We followed the Forward Through Ferguson Racial Equity Framework to concentrate on closing the racial disparities in infant mortality by advocating for system and policy changes.

Race in St. Louis

Nearly 30% of residents in St. Louis City and County are Black.

As one of the most segregated metropolitan areas in the country, St. Louis' Black families are concentrated in once-redlined neighborhoods — which still have insufficient access to resources, as well as higher poverty rates, fewer public services, and greater exposure to pollution and violent crime. These experiences compound, making it very challenging to be Black in our region.

- Black people in St. Louis City and County have an average life expectancy that is five years less than the life expectancy of white people.
- Across St. Louis City and County, Black families are over seven times as likely as white families to receive food stamps. Black children face a serious challenge in accessing food when compared to white children across the region. Some live in food deserts, with no immediate access to a grocery store.
- About one in four Black people face severe rent burdens in St. Louis City and County, meaning they spend more than half of their income on rent.

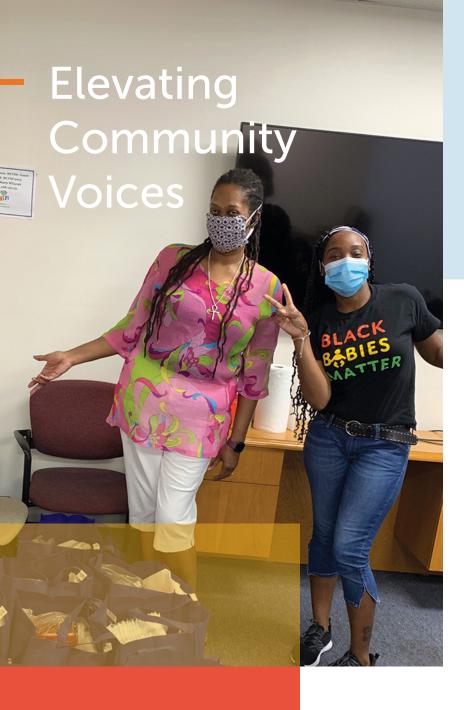
- Commuting time is considered one of the strongest factors in the odds of escaping poverty. In both St. Louis City and County, Black residents face longer commutes. In St. Louis County, Black residents' commutes are about 28% longer, and in the City of St. Louis, they are about 22% longer.
- Black babies in St. Louis City and County are seven times more likely to die from a sleep-related death than white infants.



Black people in St. Louis City and County have an average life expectancy of

5 years

less than that of white people



Today, nearly 30 community members serve on FLOURISH's Community Leaders Cabinet.

They help to determine our priorities, identify the solutions that can make the biggest impact, and decide how we will allocate funding to organizations that can address those priorities.

Our Community Leaders Cabinet members represent many of the zip codes with the highest infant mortality rates. They deeply understand the challenges Black families are facing because they experience them too. By sharing their experiences, they help to shape how our entire region thinks about solutions.

The members spent several months preparing for their role. They participated in trainings on topics such as racial equity, trauma awareness and advocacy. They also are leading their own initiatives to help Black families.



Meet our community



Sam

Why I joined the Community Leaders Cabinet:

I first learned about FLOURISH through my work with Project Launch and Vision for Children at Risk. I joined the original Cabinet, and then joined the Community Leaders Cabinet (CLC). I think the CLC is so important because it gives us the opportunity to be part of making changes that affect our own families and community.

What are you most proud of from your work with FLOURISH?

I was part of the original FLOURISH Cabinet, and in 2016 I raised the issue of how a mice infestation at the Clinton-Peabody housing complex was impacting the health of babies and families. FLOURISH stepped in to advocate for improving housing conditions at Clinton-Peabody. I think this was the defining moment for FLOURISH's evolution into a communitycentered model.

My vision for Black babies and families:

I want a future where all the systems change on behalf of our children. Education, jobs, health care, welfare, policing — institutions like these must work in harmony with the needs of families, especially Black families, in mind.





Alecia

Why I joined the Community **Leaders Cabinet:**

I've been connected to Generate Health for years through the Making Change Happen Leadership Academy. I believe engaging parents and community members can make a big impact in improving conditions for Black families.

What are you most proud of from your work with FLOURISH?

I'm proud that we've created a model where community members can amplify their voices, make decisions and foster relationships for the future. I'm also proud of the role we are playing in aligning home visiting providers based on feedback and recommendations provided by Black families.

My vision for Black babies and families:

I am working for a racially equitable society, with unrestricted access to wealth and prosperity, so Black families can flourish.







Natasha

Why I joined the Community **Leaders Cabinet:**

Quite frankly, I was tired of seeing Black moms and babies dying. I wanted to be a part of an effort that was focused on change.

What are you most proud of from your work with FLOURISH?

I am proud that we've established ourselves as a voice in the community, an organization that stands up for those who can't.

My vision for Black babies and families:

I am hopeful that our work at FLOURISH will help the whole region make Black moms and babies a priority.



FLOURISH's work focuses on four priority areas that encompass the biggest challenges Black families face when it comes to a healthy pregnancy and baby.



Coordinated Quality Care

Designing prenatal care models with and for Black moms and improving Black moms' access to quality, holistic health care services through community health workers, doulas, home-visiting programs and behavioral health programs for pregnant and postpartum parents.



Social Determinants of Health

Improving access to safe and affordable housing of families and removing transportation barriers, so families can access health care and other critical services.



Safe Sleep

Scaling the network of safe sleep champions in the region, along with building shared infrastructure to distribute portable cribs and collect regional data.



Capacity Building in Racial Equity

Supporting the region to effectively advance equitable policies and practices because systemic racism and racial inequity are at the heart of Black families' health outcomes.

FLOURISH established priority areas based on thorough reviews of data and multiple listening sessions with community members. We recruited people from our key sectors, such as health care and transportation, as well as community members, to serve on action teams to dive deeper into each area. However, it became clear that these issues are often interwoven and could not be addressed in siloed teams.

The Community Leaders Cabinet engaged in many discussions about the issues facing Black moms, babies and families. Ultimately, each member voted on which solutions they believed could make the biggest impact. FLOURISH is now focusing its work on those interventions through coalition building and investing in organizations that can bring these critical services to families



ISSUE-BASED EFFORTS

In some cases, aspects of FLOURISH's priorities are being addressed through other initiatives lead by Generate Health, the backbone organization supporting FLOURISH. For example, the Perinatal Behavioral Health Initiative (PBHI) is coordinating a network of service providers to better connect moms with behavioral health resources. PBHI supports FLOURISH's priority of Coordinated Quality Care.



We believe there are three primary levers to make lasting changes for Black moms, babies and families:







Community-Led Investment

Health care providers, home-visiting programs, community health workers, and a variety of social service organizations, neighborhood organizations and churches are the boots on the ground addressing FLOURISH's priority areas. We want to enable them to meet our community's needs, change systems and advance policy changes. One of the main ways we do this is through grant opportunities.

During FLOURISH's early years, Missouri Foundation for Health (MFH) awarded more than \$3.5 million in grants to organizations working on projects related to maternal and infant health. In 2019, MFH turned the grant-making responsibility to FLOURISH, using a communitydriven decision-making model. This new funding model acknowledges that those most impacted by infant mortality are the ones most likely to be able to identify the root causes and solutions, so the model aligns investments in solutions around these priority areas. That's why the Community Leaders Cabinet now takes the lead in determining where funds go, and community members on our Community Review Committee decide on the criteria for eligible projects and serve on the panel to select the granted partners.

Each year, we aim to invest in community-led projects and ideas that support the health of Black moms and babies through the Community Mobilization and Innovation (CMI) grant. We're also investing in health systems and social service organizations that are leading projects focused on the priority areas through the Aligned Activities grant. In our first year of awarding grants, we allocated approximately \$950,000 to community organizations and nonprofits, including nearly \$280,000 in COVID-19 relief efforts.



COMMUNITY MOBILIZATION AND INNOVATION (CMI) GRANT RECIPIENT: A RED CIRCLE

A Red Circle addresses systemic racism and regional economic health in North St. Louis County. There is a scarcity of grocery stores and fresh foods in this area, which is a challenge for the health of moms. A Red Circle is using CMI funds to provide nutrition education, group meal preparation and dinners together for prenatal through postpartum Black women. The group discusses tips for healthy preparation of culturally accepted foods and where to find fresh foods in their community.

ALIGNED ACTIVITIES GRANT RECIPIENT: NURSES FOR NEWBORNS

Nurses for Newborns acts as a safety net for families to prevent infant mortality, child abuse and neglect. Nurses for Newborns is using Aligned Activities funding for its Safe and Secure initiative, which will promote safe sleep practices through home visits to Black families in North St. Louis zip codes where the region's infant mortality rates are highest.

Mobilizing Partners and Residents

To make widespread changes, we need many hands.

FLOURISH is committed to bringing community members and system leaders together to expand our reach in addressing the priority areas.

- We joined forces with organizations in St. Louis' portable crib network to better equip families with cribs and safe sleep education. Together, we hosted summits to train service providers in safe sleep best practices and are working with local hospitals to model safe sleep for parents.
- We brought together the three managed care companies in our area to improve their policies around non-emergency medical transportation for pregnant and new moms.
- We convened town halls for community members and health care providers to address barriers families face when it comes to accessing care.

- We enabled 58 organizations and grassroots groups to respond to Black pregnant and parenting families' needs during the COVID-19 pandemic. FLOURISH also partnered with the St. Louis Area Diaper Bank to distribute nearly 200,000 diapers to partner agencies. The Community Leaders Cabinet led efforts to drop off care packages to 100 families, and FLOURISH provided more diapers and care packages to Clinton-Peabody residents.
- We are bringing together the region's prenatal and early childhood home-visiting providers and consumers to strengthen this critical service **delivery system** by coordinating the outreach to and intake of families, sharing outcomes data and providing professional development.



Advocacy

Through Generate Health's advocacy, we are rallying the region to advocate for policies that protect the health of Black moms, babies, and families and align with FLOURISH's priorities.

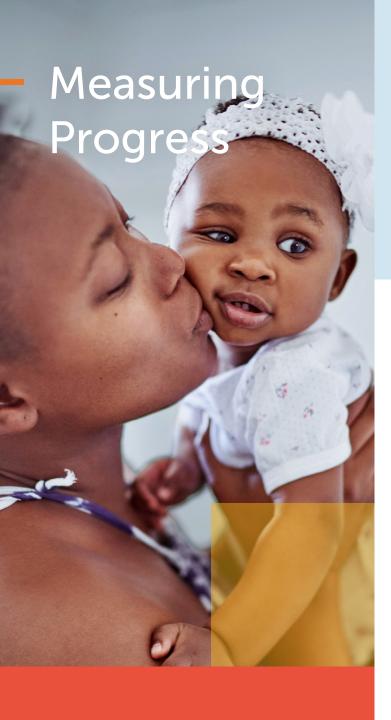
- We hosted legislative roundtables and visits to Jefferson City so community members can tell their stories, helping legislators understand the real impact their legislation has on Black families.
- We mobilized partners to participate in the successful campaign to expand Medicaid in Missouri.
- When there was pressure to adopt baby boxes, we helped to align the St. Louis region around portable cribs as a safer, better alternative for the region.



ADVOCATING FOR SAFE AND **HEALTHY HOUSING CONDITIONS**

When a community member alerted FLOURISH to a mice infestation at the Clinton-Peabody government housing complex, we took action. We knew these hazardous living conditions could impact the health and well-being of babies and children living there.

Over the course of several months. we developed petitions, deployed our network, secured the media's attention, and armed residents to advocate for their families. As a result. we rallied local and state elected officials to change policies to improve these unsafe housing conditions. FLOURISH continues to support Clinton-Peabody residents through diaper drives, mom support groups and tenant rights educational sessions.



Something as complex as infant mortality will take years to address.

One way we will gauge our progress is by following data for some of the key causes of Black infant mortality:

- Low birth weight
- Preterm birth
- Inadequate prenatal care
- Sudden Unexpected Infant Deaths (SUIDs)

TO SEE THE MOST RECENT DATA, VISIT:

FLOURISHSTLOUIS.ORG/PROBLEM/DATA

By the Numbers

275

partner organizations involved



NEARLY

450

community members



WHEN WE STARTED OUR WORK,

81

more Black babies died each year than white babies. Our goal is to bring this number to zero. Already, we have improved to 75 – but there is much left to do

\$3.5M

granted to nonprofits and community organizations



MORE THAN

350

community members attended 20 different listening sessions to guide our work



130

safe sleep champions participated in training to provide safe sleep education to families. Two major hospital systems have begun working toward safe sleep certification.

A Model for Other Regions

While our work is local, FLOURISH has had the opportunity to participate in national initiatives for maternal, child and community health. As we've grown and progressed, we've shared our learnings with other regions that want to implement their own infant mortality reduction initiatives.

CityMatch Equity in Birth Outcomes Institute:

FLOURISH was selected to participate in this three-year program that brings together city and county health departments, community leaders, and other health organizations in seven different regions across the country to discuss trends in urban health issues and promote racial equity when developing strategies and interventions.

From our involvement, we launched FLOURISH Motivating Outreach for the Restoration of Equity (MORE) to address housing issues that

can impact the health of Black moms and babies. We brought to light the appalling living conditions at the Clinton-Peabody housing complex in St. Louis City, resulting in engaging elected officials and working with residents to successfully advocate for improvements, including the implementation of new housing policies.

We also are mentoring other cohorts of this program, helping them replicate our model of community engagement in their own cities.

BUILD Health Challenge:

FLOURISH brought together three hospital systems, the City of St. Louis Health Department and Project LAUNCH/Vision for Children at Risk to apply for this national grant. We received a \$250,000 two-year grant, as well as matching and in-kind funds from the hospitals, to engage partners in managed care, Metro Transit, medical transportation and policy advocacy to improve Black moms' access to transportation for medical appointments — one of the biggest barriers to getting the care they need for a healthy pregnancy.

Before, it would have been highly unlikely for St. Louis to have received this grant. It took FLOURISH to build collaboration across these organizations and create a more unified response to an issue they all were trying to address on their own. This resulted in a venue for the community to share experiences, deeper understanding of the complexity of transportation systems and improved policies from managed care companies. We shared key learnings about how we built partnerships in The Practical Playbook II: Building Multisector Partnerships That Work, a resource from the CDC, de Beaumont Foundation and Duke Family Medicine & Community Health.

Data Across Sectors for Health (DASH) Mentorship Program:

Generate Health, FLOURISH's backbone organization, is one of 42 community-based organizations paired with seven national partners to bolster local community capacity and improve health through multi-sector data sharing.

As a DASH Mentee, we are connecting with communities around the country through a peer-to-peer learning network. Together, we are building local capacity to systematically combine health data with data from other sectors, like education, social services and housing. The goal is to acquire a more complete picture of the factors that influence health.

Recommendations for Our Region

To achieve zero racial disparities in infant mortality by 2033, we need to continue to act as a region.



Collect and disaggregate data by race to provide a clearer picture of how Black people in St. Louis City and County are impacted by specific issues.



Listen to Black community members impacted by the issue because they can identify cultural practices, community institutions, support systems and other important community resources that are beneficial to them. Identify what support they may need to participate, such as childcare, transportation, stipends or meals.



Trust the expertise and fund Black-led organizations and grassroots efforts in communities of high impact to take the lead in addressing issues that impact their communities.



Require racial equity training with staff and/or volunteers and address company policies and culture to become an anti-racist organization and, as a region, recognize those who are implementing racially equitable practices.



Demonstrate interconnectedness of issues related to Black maternal and infant health across sectors, and adopt cross-sector collaboration and partnerships to reduce silos.



Commit to deeper, more sustained investments from funders, health systems and businesses, and include community decision-making in determining where funds can make the greatest impact.



Attract resources to the region to sustain and scale systems change with consistent and long-term attention dedicated to addressing Black maternal and child health.



Become a Safe Sleep City to promote consistent safe sleep education and policies, and align with the regional portal crib network and safe sleep shared measurement systems.



Create access to high-quality, consumer-focused **transportation choices for families.**



Create access to affordable, safe and healthy housing for families, and hold housing authorities, elected officials, property managers, management companies and home loan companies accountable.





We must also advocate for and invest in critical services and infrastructure that change systems to improve health equity for Black moms and babies, including:

Leveraging of Medicaid expansion to enhance access to care for families, such as providing insurance reimbursement for midwives, doulas, community health workers and home visitors.



Enhanced reimbursement for prenatal care models that reflect the holistic standards of care by and for Black women, like group prenatal care.



Collaborative efforts to encourage cross-sector partnerships, especially those that include consumers in leadership roles, such as the Perinatal Behavioral Health Initiative and the Home Visiting Collaborative.



Intentional community building by organizing and training residents who have been historically marginalized and excluded from decision-making to participate in policy development and implementation.



Sustained investment in the full range of interventions needed to create large social change, including grassroots advocacy and mobilization, policy and systems change, strategic communications, data, and the development of new innovative programmatic solutions.



Regional capacity to **better collect** data and measure the region's progress.

Join the **FLOURISH** Network!

This is a marathon, not a sprint, but it is the most important race we will run.



Join us as we take on speed and overcome these hurdles to get closer to the finish line — a St. Louis where Black babies matter and Black families flourish.

LEARN HOW TO HELP HERE:

FLOURISHSTLOUIS.ORG/JOIN-US



For organizations/entities:

- Invest in our work
- Join our advocacy efforts
- Become a safe sleep champion
- Apply for FLOURISH funding for projects that help Black moms, babies and families

flourishstlouis.org/how-you-can-help/funding



For individuals:

- Tell others about how racial inequities are impacting Black families in St. Louis
- Join Generate Health's Ambassador Board to help advocate for Black families
- Purchase a Black Babies Matter t-shirt and wear it proudly
- Visit our website to sign up to receive updates from FLOURISH

flourishstlouis.org



A special thank you to the many community members who have shared their experiences and led efforts to give Black families a better chance at good health.

flourishstlouis.org

FLOURISH St. Louis is funded and supported by Missouri Foundation for Health, working in coordination with Generate Health, which organizes and coordinates the initiative. The Foundation is a resource for the region, working with communities and nonprofits to generate and accelerate positive changes in health. As a catalyst for change, the Foundation improves the health of Missourians through a combination of partnership, experience, knowledge and funding. Generate Health mobilizes and inspires the St. Louis region to advance racial equity in pregnancy outcomes, family well-being and community health.