

Theory of Change Overview

The Issue- The infant mortality rate in Guilford County is one of the highest in North Carolina. For several decades, Guilford County's infant mortality rates, and other leading causes of infant death, including late or no prenatal care, pre-term birth, and low birthweight rates remain higher than the state and national rates, with glaring racial disparities. These rates and racial disparities have had minimal fluctuation over the many years of efforts to address the issue that did not explicitly address the racial inequities.

The Opportunity and Our Goals- Using a racial equity lens, Every Baby Guilford is building a radically inclusive collective action movement, that builds collaborative solutions that centers the community (people, parents, children, and families) and works together with community members, frontline caregivers, health care systems civic and government leaders, faith-based organizations, and city and county officials) so that we can disrupt these longstanding health outcomes and racial disparities in Guilford County.

In five years, we collectively will ensure more Black babies are born healthy and live to celebrate their first birthday, because when we create a healthy Guilford County for Black babies then we create a healthy Guilford County for all of us. Our goals and priorities will center birthing/pregnant people and infant with an explicit aim to address the stark racial inequities in which 37 Black babies did not live to see their first birthday compared to 14 white babies in 2019. We intend to improve health outcomes by decreasing racial disparities by 50% in select infant mortality variables:

- % of women reporting late or no prenatal care
- % of reported preterm births
- % of low birthweight (<2500 grams) and very low birthweight infants (<1500 grams)

Collective Action Partners Identified (this list is continuing to grow through this process)

MOST IMPORTANT PARTNERS: Guilford County residents, a diverse group that includes parents and families most impacted by high infant mortality rates and racial disparities.

Guilford County Organizations and Institutions that influence maternal and infant health in GC (In ABC order)

College and Universities in Guilford County

- Students
- Academic Programs
- Community-Focused Initiatives

Foundations serving Guilford County:

- The Cemala Foundation
- Cone Health Foundation
- The Foundation for Healthy High Point
- Greensboro Community Foundation of Greater Greensboro



- The Guilford County Partnership for Children, Smart Start Funding
- High Point Community Foundation
- United Way of Greater Greensboro
- United Way of Greater High Point
- Weaver Foundation

Guilford County Department of Health and Human Services, Department of Public Health Services:

- Care Management for At Risk Children (CMARC)
- Care Management for High Risk Pregnancy (CMHRP)
- Clinics
- Family Connects
- Health Education Programs
- WIC

Healthcare Providers serving Guilford County:

- Cone Health Centers
- Novant Health
- Private Providers (maternal and infant health)
- Public Health Department
- Triad Adult and Pediatric Medicine
- Wake Forest Baptist Health High Point Medical Center

March of Dimes

NC DHHS, Women's Health Branch

Race Equity Institute

Ready for School, Ready for Life (GRGI)

Social Service Providers (Community-based `Organizations):

- American Heart Associations
- Children's Home Society of NC
- Guilford Child Development Nurse-Family Partnership
- Guilford Community Care Network
- Family Service of the Piedmont A Healthy Start Program
- Family Support Network of Guilford County
- The Kellin Foundation
- Piedmont Health Services and Sickle Cell Agency A Healthy Start Triad Baby Love Plus
- YWCA High Point
- YWCA of Greensboro

UNC School of Medicine Center for Maternal and Infant Health

Upstream USA Reproductive Life



| Strategies | Interventions |
|---|---|
| Advance health equity by addressing systemic racism and implicit bias within the continuum of care for maternal and infant health | Solidify EBG infrastructure to manage the logistical aspects of the Collective Action and guides community partners to take action and measure progress that result in agreed upon outcomes. Co-design a Community "Checklist" that is developed, shared, and promotes self-advocacy. The goal is to build trust between |
| Center community with radically inclusive community engagement that creates collaborative solutions | Promote and implement racial equity and implicit bias capacity building with providers to improve quality of care. This could include training and practice improvements. Create education and awareness campaigns that will include messaging across the continuum of care from before pregnancy, during pregnancy and after pregnancy. This could include toolkits for providers, parents, and other community members to reach more people. |
| Strengthen the continuum of care of reproductive life planning – from preconception to prenatal, to interconception care for equitable access to quality care | Lead a Community Storytelling Project that engages parents, families, and community to amplify the experiences of community members, create collaborative solutions, and drive health improvements. There will be targeted engagement with the Black community. Create Community Circles/Groups to create a space for the |
| Promote infant wellness and positive child development | community to support families, strengthen connections, share learnings, and action planning/advocacy. Would include parents, family members, and leverage existing groups through partnerships. Targeted engagement with the Black community. Promote healthcare access & referrals for care and supports by leveraging leverage existing partnerships and local navigation services. Implement collective advocacy to address barriers to healthcare such as through Medicaid expansion. |