

***BEST Cities***

*(Advancing* ***B****irth* ***E****quity* ***S****trategies* ***T****ogether)*

*Request for Applications*

*Due June 4, 2019 at 11:59 p.m. PST*

The Best Babies Zone (BBZ) Initiative, currently affiliated with the School of Public Health at the University of California, Berkeley, will relocate to CityMatCH at the University of Nebraska Medical Center in May 2019. CityMatCH is a national membership organization of urban maternal and child health leaders. This institutional shift was prompted by the imminent retirement of BBZ Initiative Principal Investigator, Dr. Cheri Pies. Full press release can be found at [www.bestbabieszone.org](http://www.bestbabieszone.org).

Despite recent declines in national infant mortality rates, disparities among racial lines still exist. Moreover, while critically important, clinical interventions (like prenatal care) have not significantly reduced this gap. There is growing recognition that economic stability, educational opportunity, chronic exposure to stress, and racism all play a critical role in perpetuating this inequity. The BBZ approach takes each of these factors into account to address root causes and structural factors that contribute to racial inequities in infant mortality.

*City****M****at****CH*** *is pleased to announce that applications are now being accepted for* **Cohort 4 Best Babies Zones**. Selected applicants will serve as leads to promote place-based, community-driven, multi-sector strategies to address the social, structural, and economic determinants of inequities in birth outcomes and promote health equity. Approaches will be evaluated, with results and impact of local strategies broadly disseminated. This project is funded by the W.K. Kellogg Foundation.

**Background on the BBZ Initiative**

The **BBZ Initiative** (Initiative) is a strategic, national effort to advance the BBZ approach. The **BBZ approach** is a place-based, multi-sector, community-driven effort to reduce racial inequities in infant mortality and birth outcomes by mobilizing community residents and organizational partners to address the social, structural, and economic determinants of health and promote health equity.

The BBZ approach is a practical application of the **Life Course Perspective**. The Life Course Perspective proposes that disproportionate exposure to risk factors at sensitive periods of development and throughout a lifetime may increase the risk for poor birth outcomes from one generation to the next. The BBZ approach applies the Life Course Perspective to practice by addressing resident-identified risk factors and supporting resident-identified protective factors in a small geographic zone. This is accomplished by fostering cross-sector community collaboration and actions in education, economic development, community services, and health systems.

The BBZ Initiative is among the first to attempt to translate the Life Course Perspective into practice. Initially conceived by **Michael Lu, MD, MS, MPH** and colleagues, the Initiative was based at the University of California, Berkeley School of Public Health, and directed by Principal Investigator **Cheri Pies, DrPH, MSW**. In May 2019, BBZ will transition to CityMatCH.

The BBZ Initiative began in March 2012 with funding from the W.K. Kellogg Foundation. In 2012, three pilot BBZs (**Cohort 1**) in Oakland, CA, New Orleans, LA, and Cincinnati, OH, were launched and have developed BBZs. In January 2017, three new BBZs (**Cohort 2**) were introduced: Indianapolis, IN, Kalamazoo, MI, and Portland, OR. In January 2018, three new BBZs (**Cohort 3**) were added: Cleveland, OH, Milwaukee, WI, and Harlem, NY.

In each city, organizational and resident partners identified a small geographic zone based on the presence of thriving community-based organizations, a sense of community pride and engagement, recognized economic hardship, poor birth outcomes, and racial inequities in these birth outcomes. In each zone, organizations and resident leaders work collaboratively to mobilize residents, bring together organizations across multiple sectors, align existing resources, and build on community assets to address the social and structural determinants of health, and advance health equity.

**For more information, visit the BBZ website at www.bestbabieszone.org**

**Definition of a Best Babies Zone**

A Best Babies Zone is a place-based, multi-sector, community-driven effort that applies the BBZ approach and Life Course Perspective.

The BBZ vision is that all babies are born healthy, in communities that enable them to thrive and reach their full potential. To achieve this vision, a BBZ focuses on four key strategies:

* **Zonal Focus**: A BBZ uses a place-based approach by working in a small geographic “zone”. A zone has a minimum of 100 births per year, and a population ranging from approximately 8,000 to 20,000 residents. A zone has both demonstrated need to address racial inequities in birth outcomes and local organizational capacity to support BBZ efforts.
* **Multi-Sector Collaboration**: A BBZ engages partners across four key sectors—health systems and services, economic development, education and early care, and community systems and services. Ensuring active collaboration among partners representing each of these sectors is vital for community transformation.

* **Community-Driven Action:** A BBZdevelops its strategies based on the perspectives of, priorities of, and partnerships with those who live in the zone. A BBZ strives to engage with residents as collaborators, innovators, and implementers in BBZ strategies.

* **Cultivating a Social Movement**: A BBZ is part of larger social movements taking place in the U.S. today. BBZ strategies advance local and national equity-focused social movements, with the ultimate goal of reducing racial inequities in infant mortality.

To achieve equity in birth outcomes, a BBZ addresses the **social and structural determinants of health** and **structural racism** that are at the root of poor birth outcomes. Growing a BBZ requires grappling with complex, interrelated factors, and devising comprehensive strategies and collaborative actions to advance a shared vision of health and well-being for babies, women, families, and entire communities.

**Eligibility and Timeline**

**Eligibility**

The BBZ approach is ideally suited for cities with demonstrable social and health inequalities in one or more neighborhoods. For the purposes of the application, applicants are encouraged to identify a precise geographic zone for all BBZ activities. It is necessary that applicants quantify and describe the following aspects of the potential zone: social inequities (e.g. housing, income, educational attainment, etc.); inequities in birth outcomes (e.g. prematurity, low birth weight, infant mortality, maternal health, etc.); and community resources and assets experienced by residents.

Applications will identify co-leads (one of which represents the local health department) who will take on **Backbone** functions which include taking the lead on starting and sustaining the proposed BBZ. In your application, identify the **Backbone co-leads (and their respective organizations)**, **Local** **Champion**, **Program Manager**, and the diverse **Team** of committed partners who will support the BBZ. These entities and roles are described as follows:

|  |  |
| --- | --- |
| **Role** | **Description** |
| Co-leads providing Backbone functions | These functions include convening partners, catalyzing multi-sector partnerships, tracking progress on a set of shared measures, and implementing specific BBZ-related programs and strategies where appropriate. Over the first year, the role of the co-leads is to facilitate the process among partners, engage residents in determining local BBZ priorities, and guide the vision and strategy for the work.  |
| Local Champion | This individual is someone in a leadership role who is committed to advancing the work of the BBZ. The Local Champion must understand the structural drivers of social and birth inequities in the community, city, or zone, and have some level of formal or informal authority to influence stakeholders and decision-makers in and around the zone.  |
| Program Manager | This individual serves as the day-to-day manager or coordinator of the BBZ efforts and serves as the main point of contact between CityMatCH and the BBZ.  |
| Team | The Team is the core multi-sector leadership committee (including the Co-leads, Program Manager and Local Champion) that will guide the work of the BBZ. Teams must include residents and local organizations, and ideally will have access to people with knowledge about and skills in: community engagement; equity and social justice; partnership and coalition building; data analysis or epidemiology; program design, implementation, and evaluation; and policy development and advocacy. Preference will be given to teams that demonstrate collaboration with other related initiatives within the community or state, to support and participate in the BBZ. Examples could include the local Healthy Start program, Promise Neighborhoods, etc.  |

**Timeline**

RFA Informational Call: May 7, 2019, 2:30pm CST (12:30pm PST, 3:30pm EST)

 (Conference Call Information: 1-866-740-1260; Access Code: 5529582)

**Applications Due: June 4, 2019, 11:59pm PST**

Interview Calls with Finalists: June 18-20, 2019 (if needed)

Teams Announced: June 21, 2019

Orientation Call: June 25, 2019

Team Agreements Due by: June 28, 2019, 11:59pm PST

Travel Instructions Provided by: June 28, 2019

Travel Booked By Traveling Teams: July 12, 2019

BBZ Training: Mid to Late August 2019 (dates/location TBD)

**Components of Participation in Cohort 4**

Starting a BBZ presents a unique opportunity to invest in a community with demonstrable social and health inequities and to create a place where all babies are born healthy in a community that enables them to thrive and reach their full potential. Selected participants will join the BBZ Learning Community, receive technical assistance, and receive evaluation technical assistance.

**If selected, your BBZ will receive:**

* Full use of the BBZ name on all federal and private grant applications;
* Support to develop multi-sector and resident partnerships;
* Support to develop a strategic plan for the BBZ;
* Opportunities to engage in a dynamic learning community with representatives from other BBZs, Equity Institute teams, national partners, as well as content experts in MCH, place-based initiatives, and life course strategies;
* CityMatCH partners with the University of Kansas Medical Center (KUMC) to support the evaluation of this initiative.
* Assistance in developing fundraising strategies;
* Structured and ongoing TA to implement the BBZ approach, through activities such as:
	+ Regular TA calls with national content experts;
	+ Regular sharing and mentoring calls between BEST Cities teams;
	+ Programmatic guidance for working across all four sectors;
	+ An annual site visit from the CityMatCH team
	+ An annual all-site meeting, which will include mentors from earlier BBZ teams

**Your BBZ will be responsible for:**

1. Participate in the BBZ Learning Community, including:

• Monthly calls with CityMatCH staff to discuss BBZ development, strategy, and progress;

• Quarterly Site Strategy calls with other BBZ teams;

• Annual All-Site Meeting (note that 4 Team members from each BBZ are expected to attend, with 3 team members funded by CityMatCH, 1 of whom represents the CityMatCH member health department)

2. Implementing strategies to identify and respond to resident priorities while developing resident leadership, including:

• Engaging residents in dynamic events, projects, and processes to build community and identify social and structural determinants of health that are priorities; and

• Increasing resident leadership capacity through implementing trainings and providing opportunities for sustained resident participation and ownership.

3. Developing plan for on-going, community-driven activities to spark social and structural change in your zone, including:

• Forming a broad collaborative to work across four sectors (health, economics, education, and community) and achieve social and birth equity in the zone; and

• Developing a long-term strategy for the BBZ that responds to resident priorities for improving birth outcomes and community conditions.

4. Participating in local and national evaluation activities, including:

* Teams selected for this initiative will be required to participate in key evaluation activities. The KUMC team will provide incentives, resources, and support for collecting this data. Teams will need to be prepared to provide/ support the following:
* Regular reporting of activities undertaken to implement your project.
* Annual (or more frequently if appropriate) provision of data regarding longer-term outcomes relevant to team projects.
* Completion of assessments and interviews regarding team capacity and presence of partnerships at the beginning of participation, mid-way, and at the end of the projects.
* Implementing the evaluation plan to measure short, mid-, and long-term outcomes.

**Required Proposal Materials**

 **General Instructions:**

* Pages should be double-spaced.
* Font should be 12-point and Times New Roman, Calibri, or Arial.
* Application should be emailed as a Word document.
* Application must be received by 11:59 PM PDT on Tuesday, June 4, 2019.

Materials are due by **11:59 p.m. PDT on Tuesday, June 4th, 2019,** to Jessica Ehule, Senior Public Health Project Coordinator, jessica.ehule@unmc.edu.

* Provide all materials in one document not to exceed 18 pages (including attachments).
* Note: Your team will receive an email confirmation within 48 hours of receipt of your application. If you have any questions, or do not receive a confirmation, please contact CityMatCH by email at jessica.ehule@unmc.edu or denise.pecha@unmc.edu

**Application Materials**

1. **Narrative on the social and health inequities in the potential zone (4-page limit, including data tables).** Describe the need for your community to reduce social and birth outcome inequities within one or more communities.
* Questions to answer:What makes this community strong, resilient, and ready for the BBZ approach? What social and health challenges do residents in the identified community face that others in the city do not?
* This question requires the completion of two data tables provided in **Appendix A**\*.
1. **Narrative describing why your organization or collaborative wants to start a BBZ (1 page limit)**. Describe why you are seeking to start a BBZ and how being part of this cohort will uniquely strengthen your community’s efforts. Please share 2-3 planning objectives that your BBZ might pursue in the first year, if selected, to demonstrate some initial steps you might take to start your BBZ. (Note: if selected you will not be bound to these activities.)

1. **Narrative describing Team capacity and readiness (2-page limit, including team spreadsheet).** Please describe your Team’s capacity, collaborative skills, and content expertise to address the challenges described in the previous sections.
* Explain the specific assets and capacity of your Team. Include resources, funding, talents, time, etc. to launch and sustain the proposed BBZ.
* Describe any recent and on-going efforts (or pending opportunities) that the Team or Team member organizations have taken on to address health and social inequities in your city or the identified community. Highlight the experience that individual Team members have in addressing structural inequities (community conditions in which certain groups are systematically discriminated against or put at a disadvantage).
* Describe how your Team members have collaborated on previous projects or initiatives.
* Describe the different sectors that each Team member represents and why a representative from that sector is important to include.
* **Team Spreadsheet:** Complete the spreadsheet in **Appendix B**\* and include as a component of your application. Use the spreadsheet to detail Team members’ contact information, expertise, and roles, and anticipated responsibilities related to the proposed BBZ. Please clearly indicate the people who will serve as the Co-Leads, Program Manager and Local Champion. Teams must include:
	+ One community resident familiar with the issues and concerns in the potential zone;
	+ One leader from a community-based organization, presently serving the identified neighborhood;
	+ One local health department leader; and
	+ One leader from a non-health sector (e.g., education, social services, city planning, housing, etc.).
1. **Narrative on addressing structural inequities and applying the Life Course Perspective (1 page limit).** A BBZ addresses both the structural drivers of inequity and the social determinants of health as they affect health and birth outcomes across the life course. Discuss a time when your work sought to address structural drivers of inequity or the social determinants of health. Explain how you see this work as a practice-based application of the Life Course Perspective. If you have not yet addressed these issues, use this section to demonstrate your understanding of and ability to address structural inequities and apply the Life Course Perspective to practice.
2. **Narrative on committed and potential funding (0.5 page limit)**. Describe what current funding you have to support the proposed BBZ and what, if any, funding sources you are exploring for the future. The purpose of this section is to demonstrate your current financial state and sustainability of the proposed BBZ, if selected. As previously stated, CityMatCH ***does not provide direct funding support***.
3. **Letters of commitment.** Provide at least three letters of commitment: one from each of the Co-leads and from the Local Champion. If the Local Champion is one of Co-leads, this individual may submit one letter. In this instance, please also include at least one additional letter from a partner organization that will serve as a member of the BBZ Team. Letters must include signatures, and detail the signatory’s specific commitment to supporting the proposed BBZ. Additional letters of commitment from other Team members’ organizations are encouraged. Form letters are discouraged.

**Review Criteria**

**1. Narrative on the social and health inequities in the potential zone (30%):***Clear and compelling description of the need to reduce social and birth inequities within one or more communities (including the assets of and inequities experienced by residents of these communities), with references to the included data tables to justify the need.*

**2. Narrative describing why your community wants to start a BBZ (10%):** *Clear and compelling demonstration of the unique value of starting a BBZ in the proposed community and receiving support as part of the cohort. The 2-3 proposed planning objectives clearly demonstrate some initial steps the applicant might take to start the BBZ.*

**3. Narrative describing team capacity and readiness (20%):** *Clear and compelling demonstration of the Team capacity and collaborative skills. Clear description of the extent to which the composition of the Team meets eligibility requirements and is appropriate to the scope of BBZ, including:*

*a) A compelling description of the Team’s current level of collaboration, and demonstrated readiness and ability to address the identified needs.*

*b) Clear identification of related efforts, assets, and resources (time, talent, and people) available.*

*c) Clear indication of who will serve as the Co-Leads, Local Champion, and Program Manager, and the co-leads providing the Backbone functions.*

*d) Clear demonstration of engagement with diverse partners from multiple sectors, especially those from within the identified zone.*

*e) Compelling demonstration of members’ diverse expertise in relevant areas, particularly expertise related to addressing structural inequities.*

*f) A completed Team Spreadsheet with a clear indication of who will serve as the Co-Leads, Program Manager and Local Champion and the following persons identified:*

* *One community resident familiar with the issues and concerns in the potential zone;*
* *One leader from a community-based organization, presently serving the identified neighborhood;*
* *One local health department leader or other health system leader; and*
* *One leader from a non-health sector (e.g., education, social services, city planning, housing, etc.).*

4. **Narrative on addressing structural inequities and applying the Life Course Perspective (10%):**  *Demonstrated upstream thinking and action as it relates to the structural drivers of inequities* *and the application of the Life Course Perspective.*

**5. Narrative on committed and potential funding (10%):** *Clear description of current funding sources that could support core BBZ staff and ideas for potential future funding sources to explore.*

**6. Letters of commitment (20%):** *The presence of at least 3 letters of commitment to convey the organizational and team commitment to implement the BBZ approach.*

# Appendices

# Appendix A: Data Tables

Gathering demographic data on a zone can help those involved in the BBZ effort to begin to understand who is living in the community. The demographics for surrounding areas can also highlight how the zone compares to the surrounding city and county and illuminate inequities.

Please complete the following table with demographic information on your potential zone, and the surrounding geography. Applicants may determine the appropriate comparison area (e.g. city or county level data). We recognize that some indicators may require different comparison levels (e.g. for some indicators, you may only be able to acquire county level data and, for others, city level data). If that is the case, please indicate which comparison is used for each indicator (so for instance, you might put a \* next to any city-level data and a ^ next to any county-level data). You may also list both city and county data within the column if that best represents the inequities you are trying to highlight.

**Potential Zone Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Administrative Boundaries (zip code and/or census tract(s) for zone):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**City or County comparison:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Years covered by data:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Data Sources:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

| **Demographic Information** | **Potential Zone [Tract(s) or Zip Code]** | **Surrounding City and/or County [Name]** |
| --- | --- | --- |
| **Total Population**  |  |  |
| **By Race/Ethnicity**  |
| % Black/African American |  |  |
| % Latino/Hispanic |  |  |
| % Asian Pacific Islander |  |  |
| % White |  |  |
| % Other |  |  |
| **By Primary Language** |
| % English  |  |  |
| % Spanish |  |  |
| % Other language |  |  |
| **Specific Populations** |
| Women of reproductive age (15-44) |  |  |
| Children <5 years |  |  |
| Births per year |  |  |

***Indicators of Community Conditions***

The health and well-being indicators requested for this table are essential to understanding the particular strengths and concerns in a community. Comparing the zone to the surrounding city and county is important for understanding whether the zone is a “hot spot.” Note that these indicators are not exhaustive and other information may be useful or necessary for understanding your particular zone.

**Potential Zone Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Administrative Boundaries (zip code and/or census tract(s) for zone):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Years covered by data:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Data Sources:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

| **Health and Well-Being Indicators** | **Potential Zone [Tract(s) or Zip Code]** | **Surrounding City or County [Name]** |
| --- | --- | --- |
| **Health Indicators** |  |  |
| Infant mortality rate  |  |  |
| % LBW (<2500 g)  |  |  |
| % preterm birth  |  |  |
| Teen birth rate (ages 15-17) |  |  |
| % without health insurance  |  |  |
| **Economic Indicators** |  |  |
| % < 200% FPL  |  |  |
| Median household income  |  |  |
| Unemployment rate  |  |  |
| **Community Indicators** |  |  |
| % home ownership |  |  |
| % single parent households  |  |  |
| % of homeowners where housing is 30% of income or more  |  |  |
| % living in same residence as previous year  |  |  |
| **Education/early care** |  |  |
| % 3 year olds enrolled in preschool  |  |  |
| % adult population with high school diploma  |  |  |

# Appendix B: Team Roster

|  |  |  |  |
| --- | --- | --- | --- |
| **Name & Title** | **Contact Information** | **Relevant Expertise** | **Role(s) & Responsibility(s) on the Team** |
| 1.  | EmployerAddressEmailPhone |  |  |
| 2.  | EmployerAddressEmailPhone |  |  |
| 3.  | EmployerAddressEmailPhone |   |  |
| 4.  | EmployerAddressEmailPhone |  |  |
| 5. | EmployerAddressEmailPhone |  |  |
| 6.  | EmployerAddressEmailPhone |  |  |

*Please complete with confirmed members that will be engaged in your community’s BBZ work. Please include and indicate the Co-leads, your Local Champion, Program Manager, and any individuals representing your team. Please take note of required team members (on page 4). It is not necessary to complete all rows of this template. You may add more rows to include additional team members.*

**Appendix C: Zone Travel Team Information**

*Please complete the table below with information for your travel team members. CityMatCH will fund 3 members of the travel team, and the team must support travel for at least one additional member.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Legal Name as listed on ID** **(Last, First)** | **Departure City** | **Email Address** | **Phone Number** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |