

# **Boston Children's Collaboration for Community Health:**

2020 Report

## May 2020

Boston Children's Hospital Office of Community Health

Prepared by Mathematica





#### Dear Friend,

Boston Children's Hospital's community mission is to enhance the health and well-being of children and families in our local community. The hospital is deepening this commitment to the community by investing \$53.4 million—through an agreement with the Massachusetts Department of Public Health's Determination of Need Program—to address the social determinants of health.

In the summer of 2018, we launched Boston Children's Collaboration for Community Health, an effort to benefit children and families in Greater Boston and across the state. We are pleased to present our initial progress in this report, which includes details about the funded organizations, key achievements, initial results, and lessons learned.

To date, we have invested in 56 organizations—our funded partners—to create momentum in areas critical to the health and well-being of children and families. Our funded partners represent sectors from early childhood to economic opportunity to housing to policy and advocacy and more.

Creating opportunities for all children to thrive is critical to their health today and in the future. Recent events in 2020—the impact of COVID-19 and the racial inequities in our society—have exposed and brought to the forefront of conversation the many issues that affect children's health. At this time, community health efforts are more important than ever, especially at the neighborhood level. We are committed to looking at how Boston Children's can work differently and create needed change. We'll be listening and working closely with our partners to support and identify strategies together.

Sandra L. Fenwick Chief Executive Officer

Kevin Churchwell, MD President and Chief Operating Officer

Shari Nethersole, MD Executive Director for Community Health



### **Boston Children's Community Mission**

Boston Children's Hospital's <u>community mission</u> is to improve the health and well-being of children and families in our local community. The hospital leverages its resources with community partners to address health disparities, improve health outcomes, and enhance the quality of life for children and families.

Boston Children's has a unique opportunity to build on its longstanding history of partnering with the community. The hospital received approval for its renovation and building project through a state program called Determination of Need. This program is administered through the Massachusetts Department of Public Health and approval is required for all health care facilities that make a substantial capital expenditure. One requirement is that the applicant creates a plan to spend five percent of the maximum capital expenditure (\$53.4 million in this case) on a Community Health Initiative. Given the hospital's role as a leading advocate for children, Boston Children's decided to use these funds to improve the health of children and families, both locally and statewide, through an initiative that is referred to as Boston Children's Collaboration for Community Health.

The Collaboration is managed by Boston Children's <u>Office of Community Health</u>, which oversees the hospital's community health efforts.

## About the Collaboration for Community Health

Boston Children's launched the Collaboration for Community Health to address social, economic, and other community factors that are widely recognized as powerful influences on the health and well-being of children and their families. As a result, the goals of the Collaboration are to:

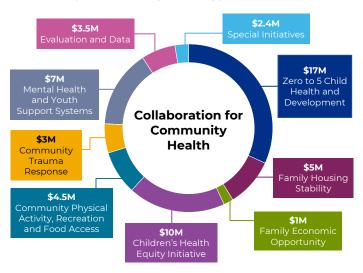
- Improve the health and well-being of children and families, specifically those disproportionately impacted by health and social inequities.
- Increase the capacity of communities to advance equity in child health by fostering partnerships, increasing awareness, and mobilizing key constituencies to influence policies that affect child health and well-being.
- Advance new methods, ideas, and investment strategies in child-centered community health through aligning investments and pooling resources with others, supporting pilot projects, and making program-related investments.

MAY 2020 / 3

### **Community investment**

The figure below shows how the \$53.4 million will be distributed by strategic focus area. Details on each focus area and how this strategy was developed can be found in the <u>Funding Strategy Report</u>.

# Collaboration for Community Health 10-year funding strategy



### Data sources and methods

This report synthesizes findings from several data sources to provide a comprehensive view of activities and progress during the first year of the Collaboration. Descriptive quantitative data are based on semi-annual monitoring data reported by funded partners and administrative data from Boston Children's related to staffing, funding, and service locations. Mathematica, the Collaboration's evaluation partner, conducted thematic analyses with qualitative data on funded partners' activities and accomplishments based on interviews with funded partner staff, notes from quarterly check-ins with Boston Children's staff, and narrative responses on progress and challenges submitted as a part of funded partner semi-annual reporting.

### **Highlights from the Collaboration**

The first round of funded partners was announced in August 2018. Key accomplishments during the Collaboration's first year of implementation include the following:

- \$18.1 million was awarded to 56 organizations addressing child health through initiatives that focus on early education and care, housing instability, economic mobility, food access and physical activity, and children's mental health.
- Two innovative initiatives were launched: The Innovative Stable Housing Initiative and Children's Health Equity Initiative.
- More than 10,000 children, families, community residents, and providers have been reached collectively through the work of funded partners.
- More than 930 staff, providers, volunteers, and community leaders were trained on topics related to early childhood education, tenants' rights, and promoting youth physical activity.
- Funded partner organizations hired 26 new full-time equivalent employees.
- 27 funded partner organizations are led by a person of color or woman.
- Approximately 90 individuals attended each of four Learning Communities for funded partners hosted by the Office of Community Health.
- Approximately 50 participants attended each
  of 11 learning sessions on evaluation and policy
  advocacy (four of which occurred during the
  larger Learning Communities).
- The Collaboration developed a shared measurement system to track progress along common indicators.

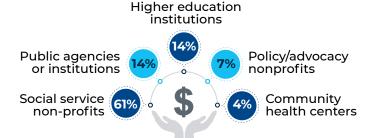
### Collaboration funded partners

The community-based organizations, public agencies, and academic institutions who have been selected to receive funding through the Collaboration are referred to as <u>funded partners</u>. In addition to their commitment to advancing health equity, funded partners will do the following as part of their grant agreements:

- · Participate in quarterly progress meetings
- Attend annual convenings and events to share best practices and build momentum for equity in child health
- Participate in evaluation and advocacy learning sessions
- · Collect and provide data on an ongoing basis
- Share efforts to a wide audience to build awareness of child health issues

During the application period, Boston Children's hosted three community meetings, including two information sessions, for organizations interested in applying for funding through the Collaboration. Staff were available by phone to answer questions as needed about the application process and guidelines. Applications received under each strategic area were reviewed by a committee of community and hospital stakeholders.

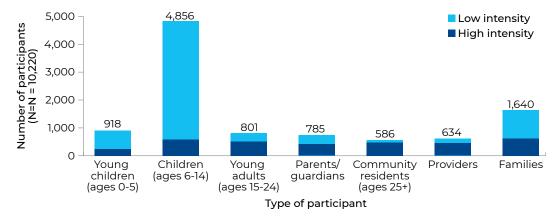
Figure 1. Types of organizations funded (n=56)



The Collaboration has funded a mix of organizations in the City of Boston and statewide, ranging from large child and family service agencies to small grassroots organizations. As shown in Figure 1, most funded partners are social service nonprofits, including larger, established nonprofit organizations—such as the Boston Children's Museum and United Way of Massachusetts Bay—as well as smaller grassroots organizations—including First Teacher and City Life/Vida Urbana.

As shown in Figure 2, the populations served by funded partners included young children, school-age children, young adults, parents, and families. Funded partners also reached providers (such as teachers and behavioral health providers) and community residents who may influence children's health and well-being through early education and the community environment.

Figure 2. Number of participants served by Collaboration for Community Health, by intensity of activities



Source: August 2019 semi-annual report data submitted by funded partners to the Office of Community Health. Note: Interventions were classified as "high intensity" if they involved intensive interactions, such as one-on-one coaching, training, home visits, or multiple sessions, and "low intensity" if they were less intensive and had a broader reach, such as distribution of products, or one-time drop-in sessions, activities, or playdates. There are 280 participants reported in an "other" type of participant category that are not reflected in this figure.

MAY 2020 5

Funded partners are implementing a range of strategies for addressing social determinants of health that reach children and families in their homes and in community settings. Figure 3 outlines examples

of the populations reached by the Collaboration, the strategies funded partners are using, and highlights related to implementation and reach.

Figure 3. Populations reached, strategies implemented by funded partners, and highlights during the first year of the Collaboration

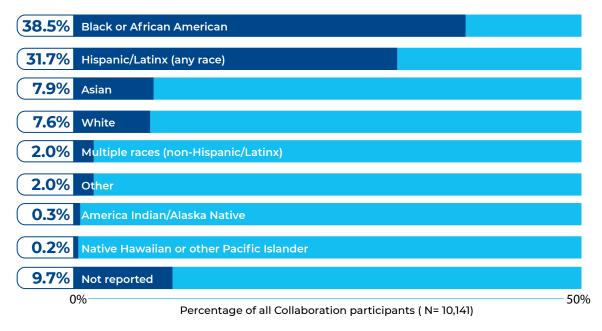
Populations reached	Strategies implemented by funded partners	Highlight examples from funded partners
Children and youth	Enrollment in high quality early education programs	226 children were screened for developmental progress.
	Screenings for developmental delays Promoting development of children's social and emotional skills Promoting knowledge and skills related to nutrition and physical activity	556 children, youth, and young adults participated in out-of-school physical activity programs.
		4,146 youth participated in and helped daily physical activity programs at their elementary school.
	Referral to behavioral health services	192 youth participated in activities implemented by staff trained in trauma response.
Parents and caregivers	Supporting knowledge, attitudes, and behaviors to increase parenting skills and confidence	310 parents participated in workshops related to early education and literacy.
	Providing opportunities to improve vocational skills, employment, or education	57 parents participated in workshops or playdates centered on supporting and empowering parents.
	Educating parents/caregivers about healthy eating and physical activity	
	Supporting parents/caregivers' understanding of financial literacy and practices	
Families	Providing housing-related cash assistance to families	275 youth, families, and residents participated in urban farming.
	Providing free meals to children and families	
Community residents	Engaging residents as advocates for stable and affordable housing	150 families participated in home buyers' education program.
	Identifying housing resources or home buying opportunities for residents	711 residents received case assistance or housing stabilization services.
		244 residents attended health or health coaching sessions.
Service providers	Training in use of evidence-based practices for children's health, safety, and nutrition and in trauma-informed care  Strengthening access to culturally responsive behavioral health services	379 early childhood providers living or working in Roxbury, Dorchester, Jamaica Plain, Roslindale, Hyde Park, Chelsea, and Malden received training and professional development.
		22 scholarships were awarded for continuing education for current or future providers.
Partner organizations	Promoting coordination across sectors Increased use of advocacy and policy strategies	90 individuals from funded partner organizations, including early education, health care, housing, and social service providers, received training on policy and advocacy strategies.
Communities	Strengthening access to healthy food retailers Strengthening social connectedness among community	25,531 children and youth live in communities that have greater access to healthy food retailers.
		57 community residents participated in a local "walking challenge" activity.

### Advancing child health equity

Promoting health equity involves removing obstacles to health, such as lack of access to quality education, affordable housing, safe neighborhoods, and good paying jobs. In Boston, the neighborhoods hardest hit by these socioeconomic challenges also have the highest percentage of Black or African American and Hispanic/Latinx residents. Promoting health equity is a primary focus for the Collaboration and reflected in the examples included below.

Funded partners serve children, families, and community residents who may be at risk for experiencing greater inequities in Boston and statewide. As shown in Figure 4, more than one-third of participants served during the first year identified as Black or African American, nearly one-third identified as Hispanic/Latinx (any race), about 8 percent identified as White, and about 8 percent identified as Asian.

Figure 4. Race/ethnicity of participants served by Collaboration for Community Health



Note: This figure reflects race/ethnicity characteristics for all funded partners who submitted these data with their semi-annual reports.

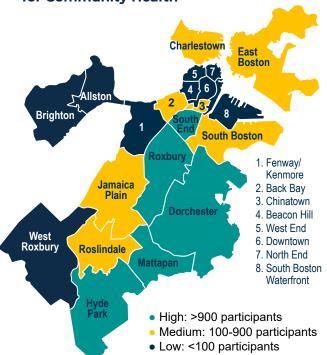
Funded partners' service sites cover all 22 neighborhoods in Boston (based on neighborhood designations from the Boston Planning Development Agency) as well as 18 additional cities and towns throughout Massachusetts. As shown in Figure 5, a high percentage of the residents served by funded partners are from such Boston neighborhoods as Dorchester, Roxbury, and Mattapan, which have experienced the greatest health and social inequities and have a higher percentage of Black or African American and Hispanic/Latinx families than do other neighborhoods in Boston.

The vast majority of our organizers are from the... cultural communities and geographic communities of the folks that we're serving or served by the project. In fact, the majority of our organizers first came through the door because they were a tenant facing displacement or a small owner who is facing displacement due to foreclosure.

—Funded partner staff

7

Figure 5. Boston neighborhoods and number of participants served by Collaboration for Community Health



Funded partners employ several strategies to ensure that programming is accessible and culturally relevant. They offer programming in the evenings and on weekends, ensure service locations can be reached by different forms of transportation, offer services for free or at low cost, and work with other community agencies to ensure that the project is aligned with community needs. In addition, nearly all funded partners ensure that their staff reflect the populations they are working with and that programming is linguistically and culturally relevant. For example, two funded partners in the Family Housing Stability and Economic Opportunity Initiative noted that several staff and volunteers first became involved with the organization when they experienced their own housing challenges.

We try to work with the families' value system, not impose a set of actions or expectations on them other than "what is it that is important to your family," "what are your goals for yourself and your family...."

—Funded Partner Staff

Funded partners are leveraging the local knowledge of families and residents by involving them as stakeholders in the delivery of programs and services. For example, the Family Independence Initiative will provide a software tool for parents to use with financial and career planning. These parents are empowered to use the tool by working within groups of peers to hold regular meetings, identify goals and solutions, and use the software and peer support to advance their financial and career development goals.

### **Building organizational capacity**

The Collaboration has helped funded partners increase their capacity through new staff hires, staff and volunteer trainings, partnerships with new organizations and sectors, and securing additional funding.

### **Employees hired**

Funded partners have increased their capacity by hiring positions such as project director or program manager, parent organizer, family liaison, clinical coordinator, outreach worker, and partnership manager. Additional funding also has allowed them to hire multilingual and multicultural staff to better serve priority populations.

## Hiring highlights

- 37 funded partners increased staffing with grant funding
- · 26 full-time equivalent positions filled

### Training staff and volunteers

Several funded partner projects in the Zero to Five Child Health and Development Initiative used resources to train providers such as early child-hood educators, primary care providers, and mental and behavioral health providers. For example, one funded partner offers continuing education for child care educators on the topics of child health, safety, and nutrition. A funded partner in the Community Trauma Response initiative is supporting staff trainings on best practices for promoting safe and permanent relationships for youth in their programs.

Because of this funding, [funded partner staff] have been able to devote more time to do more outreach specifically for the program and build more relationships.

—Funded Partner Staff

### Developing and strengthening partnerships

Funded partners have strengthened existing partnerships and established new ones, including nontraditional partners across different sectors. For example, the City of Boston's Mayor's Office of Food Access provided grants to 23 new sites to provide summer meals for children and families. This program engaged nontraditional site partners, such as faith-based organizations and physical recreation programs.

Several funded partners have formed partnerships by connecting through the Collaboration's Learning Communities. These organizations are sharing resources, providing trainings to each other, consulting on program activities or curricula, and providing referrals. Playworks provided a training on playtime to other funded partners. In the Zero to Five Child Health and Development Initiative, Urban College of Boston and Boston Chinatown Neighborhood Center are working together to develop continuing education opportunities for Mandarin-speaking early childhood educators.

### Leveraging additional funding

Several funded partners noted the Collaboration helped them secure additional funding. For example, one funded partner secured additional funding to increase the half-time clinical social worker position funded by the Collaboration to a full-time position. Another funded partner noted that the grant from Boston Children's has added credibility to their work and they have leveraged the grant as a part of their institutional fundraising.

I want to say that the funding from [Boston]
Children's got this project off the ground.
They are the first people who invested in this study, which allowed us to then leverage funds.
I don't know what would have happened if Boston Children's didn't believe in us first.

—Funded Partner Staff

### Building a culture of health equity

The Collaboration's emphasis on health equity and social determinants of health has influenced the culture of funded organizations. In addition to expanded services, several funded partners have reported a change in their organization's culture, in which staff have begun incorporating a health equity lens into their work. Some social service organizations are focused on children's health for the first time. Others noted how their expanded capacity—including newly hired and trained staff, expanded services, and the ability to reach new populations—has allowed them to reach a greater number of children in need.

We are going to make sure that all our policies, practices and even how we are viewing every step of the project [are] embedded within building equity and inclusion, which really focuses on sector, geography, race, ethnicity, linguistics, how do we really make sure this workforce [is] represented through this.

—Funded Partner Staff

## Innovations in promoting child health

The Collaboration has supported the implementation of several innovative strategies.

# A multi-sector, multi-generational approach to addressing child health

The Collaboration supports multi-sector approaches that expand funded partners' work into new sectors, and multi-generational approaches in which opportunities include children, parents, and other caregivers. For example:

- The Community Builders, a nonprofit real estate developer, is using funding to increase resources related to early childhood development, parental employment, educational opportunities, and trauma-informed residential services.
- HopeWell, a nonprofit provider of intensive foster care, is using funding to support the My First Place™ program, which provides educational, employment, and housing support to youth who have aged out of the foster care system.

 The First Teacher movement encourages playdates for families and facilitates workshops for parents and other caregivers.

### Addressing child health at multiple levels

The Collaboration has funded projects that address the immediate needs of the populations they serve as well as projects that promote systemic and policy changes to address long-term needs. Funded partners within a single initiative are addressing individual needs and promoting systematic changes, for example:

- Increasing direct access to culturally attuned mental health services, building the pipeline for a more diverse mental health workforce, and promoting behavioral health equity through policy and advocacy.
- Directly assisting families experiencing homelessness and risk of eviction, training tenants to organize for housing rights, and collaborating with government agencies to promote policies that support economic self-sufficiency.

# New initiatives funded through the Collaboration

# The Collaboration includes two initiatives that use funding in innovative ways.

The Children's Health Equity Initiative supports collaborative projects that improve the health and well-being of children and families and foster new, long-lasting systems to promote neighborhood cohesion within specific Boston communities. Starting in September 2019, one-year planning grants were awarded to six neighborhood-based, cross-sector collaboratives to plan projects to reduce inequities



in children's health and well-being. Following this planning period, implementation grants will be awarded to up to four of these cross-sector collaboratives in fall 2020.

The Innovative Stable Housing Initiative is a pilot project co-funded by a unique agreement between Boston Children's, Boston Medical Center, and Brigham and Women's Hospital. Starting in 2019, the project is investing almost \$3 million over three years to increase housing stability for vulnerable populations. Within the Innovative Stable Housing Initiative, Boston Children's is supporting two funding initiatives: (1) the Flex Fund and (2) the Upstream Fund. The Flex Fund supports individuals and families by providing short-term emergency funding to maintain or attain safe and healthy housing. The Upstream Fund promotes policy and systems change and is supporting organizing and coalition building efforts to address four areas of focus: anti-displacement, tenant protections, community control of land, and asset building.

# Sharing best practices on child and family health improvement

Boston Children's Office of Community Health, acting as a convener, has facilitated four learning communities and seven smaller learning sessions that have brought together funded partners to discuss topics such as child health equity, evaluation, advocacy, and communication. Funded partners report that the most valuable aspects of these activities have been networking with other funded partners, learning about resources and efforts related to child health, feeling like they are part of a larger "movement," and sharing common challenges and best practices on data collection and implementation.

## Insights and looking ahead

During the first year of implementation, funded partners met regularly with Boston Children's Office of Community Health staff to share their progress and identify implementation challenges and areas for continuous improvement. Common challenges included delayed project start-up, particularly for projects that relied on coordination across multiple agencies and partners; difficulty



hiring staff that met the desired linguistic, cultural, and educational criteria; competing priorities for limited staff resources; participant recruitment and engagement; and challenges with collecting monitoring and evaluation data.

After a year of building a dynamic and engaged network of funded partners, several important insights have emerged related to the work of the Collaboration:

- Setting clear expectations helps establish strong partnerships.
- Coordinating with existing trusted community resources promotes recruitment success and can secure service locations that are familiar and accessible for the target population.
- Allowing funded partners the opportunity to be creative and adapt will often promote better results, even if project activities deviate from the initial proposal.
- Considering funded partner size and capacity is key for tailoring technical assistance and other grant expectations.
- Having opportunities to network, stay informed of other funded partners' progress, and learn about the impact of the Collaboration is of interest to funded partners. A mix of in-person and virtual opportunities may best meet funded partner needs.
- Sustaining new and expanded services is a priority for funded partners and an area where they expressed a need for future technical assistance.

Funded partners, who all have three-year grant awards, will continue the delivery of their grantfunded services and activities and will increase their focus on sustainability. Boston Children's will continue to assess the impact of the Collaboration on children and families in the community and will review its funding strategy in advance of additional funding rounds to be released in 2021.

### **Acknowledgments**

Boston Children's is thankful for all of the funded partners—the leadership and staff at every organization and agency—who are working every day to rethink and improve how to address some of the most complex health, social, and environmental challenges experienced in their local communities. Thank you for being at the forefront and caring for the many children and families who rely on your programs, services, and advocacy efforts. We have learned from you and are grateful for your feedback, diligence, and friendships as we all work towards our common goal of improved child health.

The report would not be possible without the support of our evaluation partner, <u>Mathematica</u>. Thank you for your guidance and expertise in helping us to measure and share the impact of the Collaboration and our funded partners on the health of children.

A special thank you to the members of <u>Boston Children's Board Committee for Community Health</u> and our <u>Community Advisory Board</u> for your support and feedback. The Collaboration would not be possible without your leadership. We also want to recognize the members of our <u>Strategic Funding Committee</u> and <u>Community Advisory Group</u> members for prioritizing health for all children and leading us throughout the early stages of the planning process.



# Collaboration for Community Health Contact Information

To learn more about the Collaboration or upcoming funding opportunities, please contact:

Tara Agrawal, Director, Community Investment 617-919-3056

Tara.Agrawal@childrens.harvard.edu

Debbie Lay, Coordinator, Community Health Initiatives 617-919-3304

Debbie.Lay@childrens.harvard.edu

### Funded partners by strategic initiative

#### Awarded 2018-2021

# Community Physical Activity, Recreation, and Food Access Initiative (funding to date: \$2.4 million)

CommonWheels Bicycle Collective

Haley House

Massachusetts Public Health Association

Mattapan Food and Fitness Coalition

Mayor's Office of Food Access

Playworks New England

Sociedad Latina

Boston Centers for Youth and Families and Northeastern University

Waltham Boys & Girls Club

Youth Enrichment Services, Inc.

# Family Housing Stability and Economic Opportunity Initiative (funding to date: \$3.15 million)

Family Independence Initiative

Jamaica Plain Neighborhood Development Corporation

Boston Housing Authority and Boston University

Boston's Higher Ground

Chinese Progressive Association

City Life/Vida Urbana

Massachusetts Affordable Housing Alliance

MassHousing

#### Zero to 5 Child Health and Development Initiative (funding to date: \$5.3 million)

Boston Basics in partnership with Families First

Boston Children's Museum

Boston Chinatown Neighborhood Center

Boston Public Schools Department of

Early Childhood

Family Nurturing Center

First Teacher

Jamaica Plain Neighborhood Development Corporation

Massachusetts Society for the Prevention of Cruelty to Children

Raising a Reader MA, Inc.

The Community Builders

United Way of Massachusetts Bay, Inc.

Urban College of Boston

#### Special Initiative (funding to date: \$300,000)

Health Care For All

#### Awarded 2019-2022

# Community Trauma Response Initiative (funding to date: \$898,200)

Cambridge Family & Children Services

Madison Park Development Corporation

Project RIGHT

The Community Builders and Clark University

#### Mental Health and Youth Support Systems Initiative (funding to date: \$3.4 million)

The Boston Alliance of LGBTQ Youth

Children's Services of Roxbury

The Dimock Center

East Boston Neighborhood Health Center and East Boston High School (Bridge)

Simmons University School of Social Work

UMass Boston (BIRCh Center)

William James College

Boston Private Industry Council

HopeWell

Peer Health Exchange and UMass Boston

West End House

#### Special initiative (funding to date: \$600,000)

Children's Mental Health Campaign

# Awarded 2019–2020 Children's Health Equity Initiative (funding to date: \$900,000)

Boston's Higher Ground

Center for Community Health Education

Research and Service, Inc.

VietAID, DotHouse Health

Dudley Street Neighborhood Initiative

Freedom House, Grove Hall Alliance

Jamaica Plain Coalition: Tree of Life.

Mildred C. Hailey Apartments Tenant Organization

# Awarded 2019–2020 Innovative Stable Housing Initiative Flex Fund (funding to date: \$269,574)

City Life

Casa Myrna Vasque

Home Start