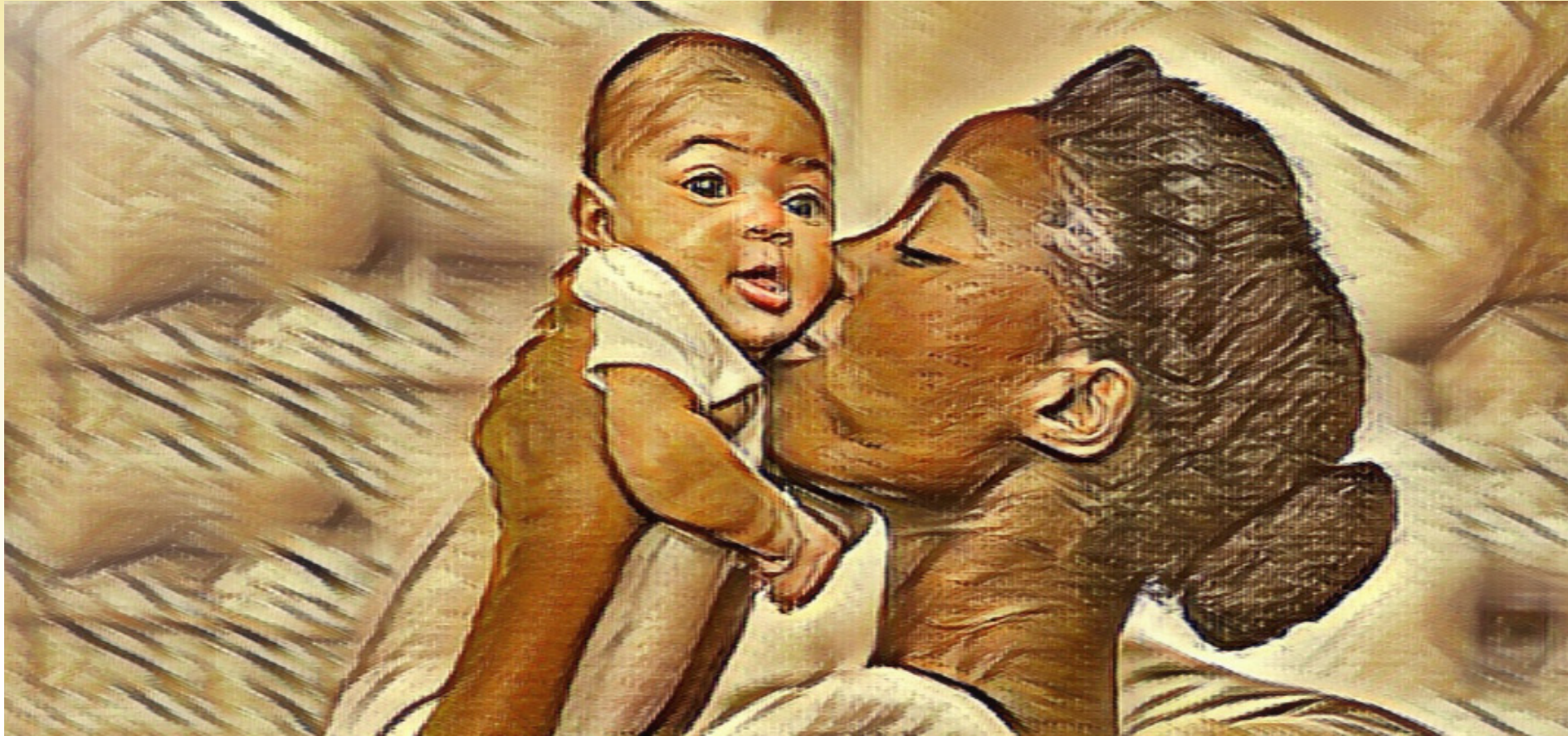


# 2021 ANNUAL REPORT

PIVOTING, PLANNING AND PROGRESS DURING THE PANDEMIC



THE CITY OF  
**COLUMBUS**  
ANDREW J. GINTHER, MAYOR



## MISSION

CelebrateOne is a place-based, collective impact initiative founded to reduce infant mortality and improve health equity, so more babies reach their first birthday in Franklin County.



Every baby deserves to celebrate his or her first birthday, regardless of race, address or family income.

## VISION

## OUTCOMES/GOALS

To lower the Black infant mortality rate (IMR) to 5.0\* by 2030 with the intermediary goal of bringing the Black IMR to 7.6. And to bring the overall Franklin County IMR to 5.0 by 2030 with the intermediary goal of 5.7.

*\* 5 deaths per 1,000 live births.*





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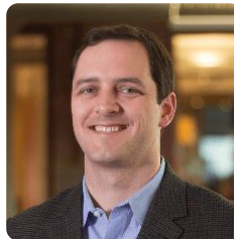
**Rebecca Howard**

Parent



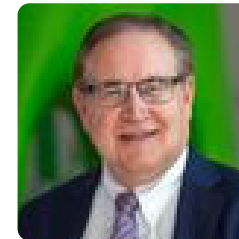
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Executive Director,  
CelebrateOne

# Mayor's Message



## **The year 2021 stands out as a pivotal one for CelebrateOne.**

While dealing with the challenges presented by the COVID-19 pandemic, CelebrateOne doubled-down on its mission work, with a steadfast commitment from its staff and partners. CelebrateOne had to up its game, and it did. They joined other community organizations during drive-through food distribution events to connect with pregnant and new moms needing health care and other resources to ensure healthy birth outcomes.

As vaccines became readily available, CelebrateOne continued to meet families where they were, both figuratively and literally, on front porches, grocery stores, parking lots, parks, online meetings and over text messages. They strengthened existing connections and built new bonds during a year when it was easier to drift apart than to come together.

Data shows progress was made in some areas over 2020, such as sleep related deaths. Our community achieved this largely by educating parents about the importance of safe sleep practices. There is no other large county or city in the nation with this kind of success. But we can't take our foot off the pedal. There is still much work to be done where the infant mortality rate and racial disparity is highest, especially in our 11 CelebrateOne high-priority neighborhoods – Hilltop, Linden, Franklinton, South Side, Near East, Southeast, Northeast, Northland, the far East Side, Whitehall and the far West Side.

## **Strategic Plan**

While the pandemic is not yet behind us, our future has never been more in focus with CelebrateOne's new five-year strategic plan. The bold new plan calls for deeper investments into racial equity and expanded efforts on the social determinants of health. The social determinants of health are the social and economic factors that influence people's health.

Like every organizational transformation effort, advancing racial justice and health equity requires leadership. It also requires courage to approach this work with genuine respect to facilitate and create a safe space for difficult conversations and to commit to meaningful action.

The strategic plan defines what we stand for and what we know we can change with our leadership, partners, government agencies and businesses throughout the Columbus community.

## **Opportunity Rising**

In the City of Columbus, we are incorporating equity into everything we do. We call it "Opportunity Rising," and it is the strategic, quantifiable playbook by which we will optimize our resources to tackle our city's greatest challenges – including infant vitality. This means more of our families will be celebrating their child's first birthday.

Infant vitality needs our attention now more than ever. Despite pervasive racial disparities in maternal and infant deaths, public attention has only recently begun focusing on this issue as a public health crisis.

We can tackle this together. If you know you are pregnant, contact CelebrateOne. If you are a new parent, grandparent or caregiver of a newborn, consider becoming a Safe Sleep Ambassador and enroll in an upcoming training session by visiting the Columbus Health Department website for dates and times of upcoming classes.

During an unprecedented year, we made some progress. However, our sleeves are still rolled up because there is still work to do. Please join us in creating a vibrant and healthy community for our families and their babies.



Mayor Andrew J. Ginther



## FACT

**in 2021, 1,533 cribs were distributed to Franklin County families.**



# Director's Message



## Pivoting

Seven years ago we made a commitment to our community to reduce the infant mortality rate (IMR) because it was one of the highest in the country.

Since then, the numbers have been trending downward. More babies were celebrating their first birthday. It felt like we were hitting our stride. And then the COVID-19 pandemic hit, continuing on into 2021.

Vaccines became available but businesses and offices were not all operating at full capacity. The crux of our work involves walking into doctors' offices and county offices to find pregnant women and new moms to ensure they are receiving health care and are connected to the right people.

Just as we did during the onset of the pandemic in 2020, we continued joining the staff at daycare facilities and food pantries to distribute food and hand out information about CelebrateOne. This was a vital step in keeping connected with our community and our moms-to-be. In addition, we organized a Drive-In Movie Night at Easton Town Center and distributed food and baby supplies while Columbus Public Health administered COVID-19 vaccines. We adhered to all COVID-19 safeguards and still had a lot of fun.

While the pandemic brought a lot of uncertainty, CelebrateOne community health workers and staff soldiered on. We had to. Many families needed help during this difficult time. I commend our

community health workers and staff for their bravery and resiliency. They, too, were on the front lines serving our families in a myriad of capacities.

Despite our best efforts, the infant mortality rate in Franklin County rose 12 percent, from 7.9 infant deaths per 1,000 live births compared to 6.7 infant deaths in 2020. Prior to 2021, the IMR was declining.

We are watching the IMR very closely, while also focusing on closing the racial disparity gap in our community, especially in our priority neighborhoods.

## Planning

Thanks to the work of 60 community members, our new strategic plan puts health equities front and center. I am proud of the work we accomplished virtually that will carry us to 2026.

### Our plan includes the following six recommendations:

- Target and address structural and interpersonal racism as fundamental drivers of infant mortality.
- Address the social determinants of health across the life course to advance maternal and child health. (The social determinants of health are the social and economic factors that influence people's health.)

- Advance policies that prevent poor birth outcomes and promote women’s health and wellbeing.
- Improve access, quality and provision of reproductive health care.
- Design and implement a connected and consistent care experience for mothers and babies.
- Accelerate innovation, progress, commitment and accountability for health equity.

In addition to strategic planning sessions, we also carved out time to listen to the stories from our 32 Black moms, providing a platform where they could speak freely and openly about the health care disparities they have encountered during and after their pregnancy. Information gathered from the listening sessions were incorporated into our strategic plan.

### Progress

By the end of 2021, we took notice of the progress we made through the pandemic. There were lots of bright spots:

- Distributed 1,533 cribs in Franklin County
- Trained 741 Safe-Sleep Ambassadors
- Connected 651 women with Moms2B, up from 625 in 2020

In addition, we also outlined a plan to create a new group for Black women called Queens Village. The group is committed to reducing the Black infant mortality rate by learning how to build and lead community advisory boards, changing the narrative about Black women, and understanding the systemic challenges and barriers that Black families navigate daily.

### Pressing On

During 2021, we had to pivot to assist our families during the pandemic. We planned for the future and noticed some of our progress, but now we must press on. Our commitment to reducing the racial disparities in our community is unwavering. Our work is not done. We will press on as we focus on the lofty goal of ensuring that Columbus is the first city in the United States to eradicate the racial disparities in infant mortality.

Maureen L. Stapleton



# PIVOTING

## Meeting the Needs of our Families During the Pandemic

**CelebrateOne community health workers had to pivot during the pandemic in order to meet the needs of our families. So what did they do? Take a few moments to read their stories about their unconventional approach during an unprecedented year.**

CelebrateOne community health workers meet with soon-to-be moms and new moms to connect them to community organizations and resources to ensure a healthy birth outcome, with the ultimate goal of reducing the infant mortality rate in Franklin County.

The job of a community health worker is not easy. They spend a lot of time visiting county government offices, stores, salons, gas stations, just to name a few, to locate pregnant women.

Kadijah Torian started at CelebrateOne as a community health worker in 2019.

Kadijah admits her quiet demeanor does not always go hand-in-hand with her job as a community health worker, so she came up with an idea.

She loaded up the trunk of her car with CelebrateOne printed materials to distribute, picked up a few balloons to get people's attention and popped open her car trunk in the parking lot at big-box stores, shopping strips and any other parking lot with lots of foot traffic in Whitehall.

And Present on Purpose, better known in the CelebrateOne office as POP Up was born. "It's an opportunity to meet the moms who may be disconnected and connecting them. We are meeting them in places and spaces they are already going," she said.

"There is no advertising ahead of the POP Ups. I just picked a location, opened my trunk and started handing out information," Kadijah added.



Every Tuesday and Thursday for approximately two hours, Kadijah was connecting with new and expecting moms. The newly created POP Up idea was a success.

Fast forward to 2021, and a global pandemic didn't make meeting with moms indoors a viable option all the time. But the POP Up was the answer to continuing to serve the community during the pandemic. By this time, many of our community health workers followed in Kadijah's footsteps, setting up POP Ups throughout Columbus.

After working as a community health worker for two years, Kadijah was promoted to a CelebrateOne assistant manager in July 2021.



# PIVOTING

## Meeting the Needs of our Families During the Pandemic

**Tiffany Groce joined the CelebrateOne team in July 2021 as a community health worker. She was ready to roll up her sleeves and get to work, despite the ongoing pandemic.**

Tiffany was assigned to the South Side of Columbus and worked out of the Reeb Center, home to several nonprofit partners connecting families with necessary services. Due to the pandemic, the Reeb Center was closed during 2021 but families could stop by during a specific time to pick up lunch and dinner. “They would come to the Center to pick up their food and if they needed to talk to me, then I was there to provide resources, such as diapers, bus passes, and travel cribs,” she said.

CelebrateOne community health workers usually visit government offices, such as Women, Infants, and Children (WIC) frequently to connect with pregnant women and new moms who may need a doctor, food, housing or transportation services.

Many offices, however, revamped their procedures due to the pandemic and were not allowing face-to-face-meetings. So Tiffany got creative. “Between 4-5 p.m., I would go to the parking lots at grocery stores waiting for pregnant women or new moms with a baby. You would be amazed how many people were willing to talk to me,” she said.

“As an outreach worker, you have to go to unconventional places to be successful,” she added.

When asked what the most unusual place she had to meet a mom during 2021, “a homeless camp,” she responded. The woman was expecting twins and needed a bus pass. Tiffany continued to visit the woman at the homeless camp and provide assistance until she delivered the babies.



### FACT

**In 2021, over 3,000 women were scheduled for prenatal care with StepOne**



# PIVOTING

## Meeting the Needs of our Families During the Pandemic

Danielle McKnight began working at CelebrateOne in January 2020, a few months before the COVID-19 pandemic shutdown some business, schools and offices.

As 2021 rolled around, the pandemic was not winding down. CelebrateOne staff had no choice but to think outside the box and find alternative ways to connect pregnant women and new moms with the resources they needed. So CelebrateOne staff joined food pantry and daycare staff at their drive-through food distributions. "While they were picking up food, they were also receiving information from CelebrateOne. It worked."

Danielle recalls a time when she and other CelebrateOne staff were at the Inprem Food Pantry located on Karl Rd. A man pulled through the line, mentioning that his daughter recently had a baby. As the grandfather, he wanted to help her, but couldn't transport his new granddaughter because he did not have a car seat.

Thankfully, representatives from Columbus Public Health were on site and were able to properly install a car seat for him. "He was very appreciative," Danielle said.

Like many other CelebrateOne community health workers, Danielle could not rely on conventional ways during the pandemic to meet pregnant women. She, too, came up with a unique idea of distributing flyers about CelebrateOne to employees working at Graceland Mall. Store managers were receptive, even allowing Danielle to post the flyers in staff lounge areas.

Danielle did not hesitate to maintain a presence in the community throughout the pandemic. "I had to put my own fears aside if I wanted to see a mom have a healthy birth outcome," she said.



### FACT

In 2021, a total of 17,366 babies were born in Franklin County.

# PIVOTING

## Meeting the Needs of our Families During the Pandemic

**As a community health worker, Brianna Young lives by the “it takes a village to raise a child” mantra.**

The COVID-19 pandemic didn't make meeting the needs of new moms and babies easier. “Families needed a lot of help during this difficult time,” she said.

Prior to the pandemic, Brianna and other CelebrateOne staff could approach moms waiting in lobby areas at doctors' offices, Job and Family Services or Women, Infants and Children (WIC). “There usually was a lobby full of people that I could speak to,” Brianna said. “It's just the perfect place for us to be.”

Once the pandemic hit, though, some offices closed while others were meeting with individuals by appointment. There was no longer a lobby full of people, and she had to come up with a new strategy to locate pregnant women in the community.

Technology was the answer. “Phone calls, emails and text messages are what saved the day.” She reached out to women and families she had worked with previously, inquiring if they needed assistance or asking if they were aware of other families with a newborn or baby on the way.

And when she wasn't connecting with women by phone, she didn't hesitate to approach them at the grocery store while she was doing her own shopping after work. “I'm not afraid to adapt to any situation,” she said.

In November 2021, Brianna was promoted to a neighborhood integration manager.



### FACT

**By 2030, the goal is to reduce the infant mortality rate in Franklin County to 5 deaths per 1,000 live births.**





# Infant Mortality Rate Rises

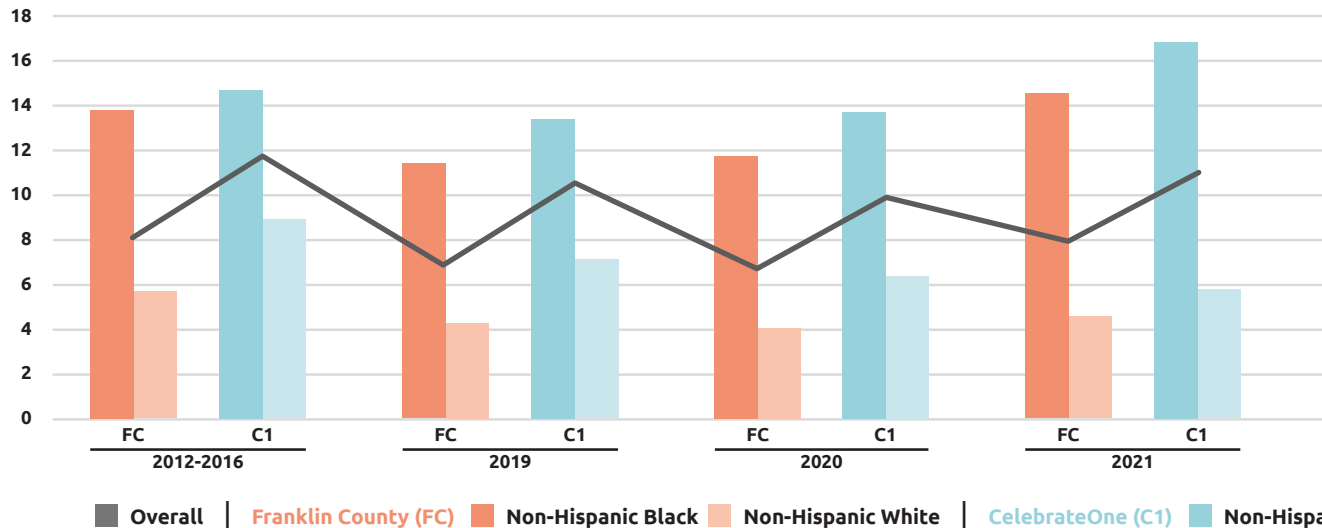
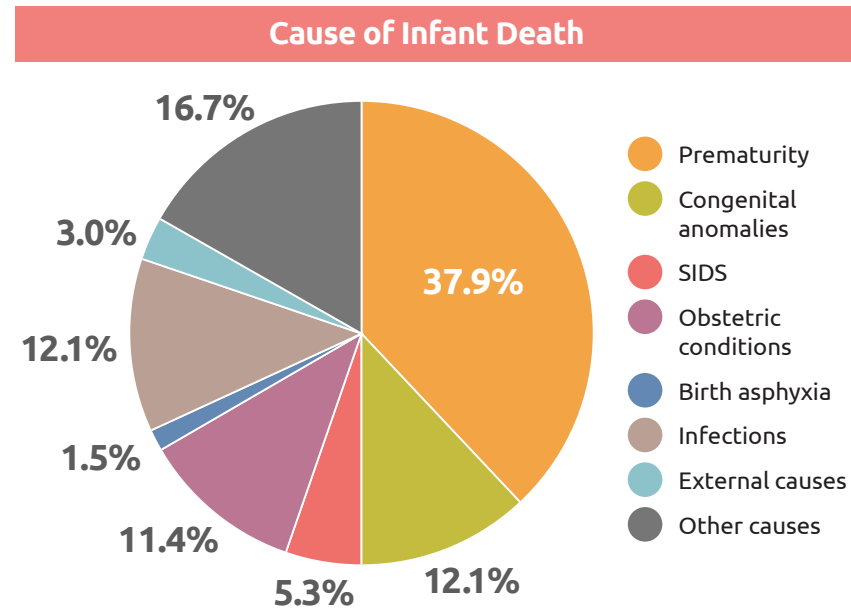
The infant mortality rate (IMR) in 2021 rose slightly.

IMR is the death of an infant before his or her first birthday. In Franklin County, the IMR increased 12 percent, from 8.1 deaths per 1,000 live births compared to 6.7 deaths in 2020. Prior to 2021, the IMR was declining.

In 2021, CelebrateOne and Columbus Public Health reported 17,366 babies born in Franklin County. There were a total of 140 infant deaths, with prematurity as the leading cause. In 2020, a total of 17,498 babies were born with a total of 118 infant deaths.

In CelebrateOne priority neighborhoods, IMR increased 15 percent, from 9.9 deaths per 1,000 live births in 2020 to 11 in 2021. Some of the priority neighborhoods include Linden, Franklinton, Hilltop and Northland. The number of births also dropped in the priority neighborhoods from 6,150 in 2020 to 5,840 in 2021.

Franklin County Fetal-Infant Mortality Review (FIMR) is part of a community-wide effort to decrease fetal and infant mortality in Franklin County. By reviewing fetal and infant deaths and by listening to the unique stories of those who have lost a child, we learn about our community's strengths and its needs. And as a community, we try to answer the questions: "Why are babies dying?" and "What can we do about it?"



**FACT**  
In 2021, the infant mortality rate for Franklin County was 8.1 per 1,000 live births

# A Closer Look at Infant Mortality Rates

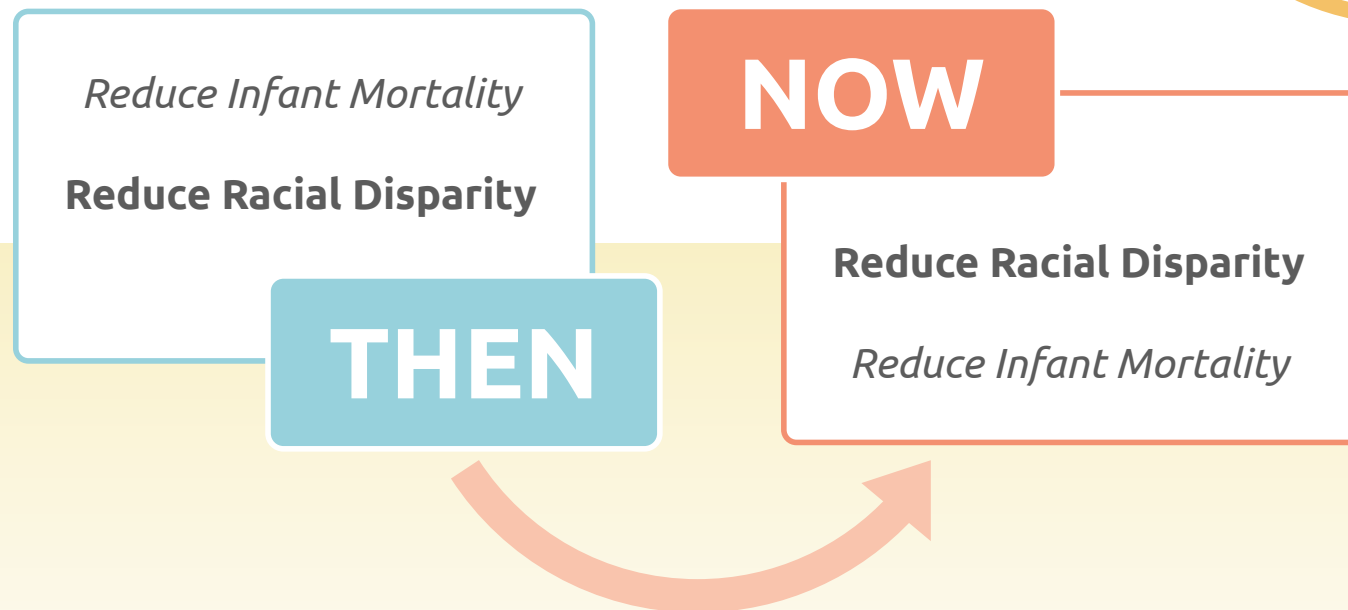
**The infant mortality rate (IMR) for Black and white babies increased in 2021.**

The IMR for Black babies in Franklin County was 14.5 per 1,000 live births compared to 4.8 for white babies. While the IMR for white babies increased in 2021, it was still three times lower than Black babies.

In CelebrateOne neighborhoods, the IMR for Black babies rose 18 percent, from 13.7 in 2020 to 16.8 in 2021. For white babies, it decreased nine percent, from 6.4 to 5.8, respectively.

It is this racial disparity that requires much of our attention going forward and is addressed in the five-year strategic plan.

**FACT**  
Every month,  
11 babies die  
in Franklin County  
before they reach  
their first  
birthday.



## Five-Year Strategic Plan

**Our five year strategic plan is clear: “This plan puts equity front and center,” said Ashon McKenzie, CelebrateOne’s director of strategy, policy, planning and innovation.**

“The entire first recommendation is about short and long term race equity and maternal health issues,” he added. “We continue to focus on health equity with the belief that a person’s ability to attain health and wellness is an essential human right.”

The priority areas of the strategic plan, which will drive our work and decisions over the next five years, include: health equity, social determinants of health, public policy, high quality health care before, during and after pregnancy, continuous and consistent care experience and advancing health equity using best practices.

Strategic planning is a process involving lots of communications, conversations and exchanging of ideas that usually take place in a large meeting room. The COVID-19 pandemic did not allow for in-person meetings and so the strategic planning sessions took place virtually. “This made it very challenging,” McKenzie said.

Over the course of five months, CelebrateOne hosted five meetings with key stakeholders, held seven community conversations and received input from 60 community and health professionals to create a plan that reflects our values and focuses on the lofty goal of ensuring that Columbus is the first city in the United States to eradicate the racial disparities in infant mortality.

**For more details about the 2021-2026 strategic plan, please visit our website, [columbus.gov/celebrate-one](http://columbus.gov/celebrate-one)**

### 1

#### RECOMMENDATION

**Target and address structural and interpersonal racism as fundamental drivers of infant mortality.**

#### STRATEGY

- 1.1 Center perinatal community resources and supports in accessible locations in each neighborhood with the highest Black infant mortality rates.
- 1.2 Advocate for state, local, and organizational policies that support Black women's reproductive health and rights.
- 1.3 Develop standards, assessments, and incentive structures for public and private sector partners to engage in action on racial equity in maternal and infant health.
- 1.4 Center the voice of Black women and women with lived experience to consistently drive the work.
- 1.5 Ensure individual-level representation and advocacy in care for Black women and families.
- 1.6 Inform the public of the effects of race and racism on infant mortality.
- 1.7 Increase Black enrollment in health insurance

### 2

#### RECOMMENDATION

**Address the social determinants of health (SDOH) across the life course to advance maternal child health**

#### STRATEGY

- 2.1 Expand the availability of safe, environmentally appropriate, affordable housing.
- 2.2 Increase options and accessibility for medical and nonmedical transportation.
- 2.3 Bridge the digital divide for pregnant women and parenting families.
- 2.4 Advance economic mobility for women of conception age, pregnant women, and families with children under the age of one.
- 2.5 Ensure education access and advancement
- 2.6 Ensure the nutritional needs of pregnant women and parenting families are met.



3

RECOMMENDATION

**Advance policies that prevent poor birth outcomes and promote women's health and wellbeing rights.**

STRATEGY

- 3.1 Advance policies to improve infant and maternal health, including policies designed to reduce infant mortality and maternal mortality and eliminate racial and ethnic inequities.
- 3.2 Pursue public and private funding to prioritize maternal and child health populations, especially Black families.
- 3.3 Expand access to preconception care and family planning services, including efforts to ensure access to comprehensive health care services and supports and efforts to promote intended pregnancies and healthy births.

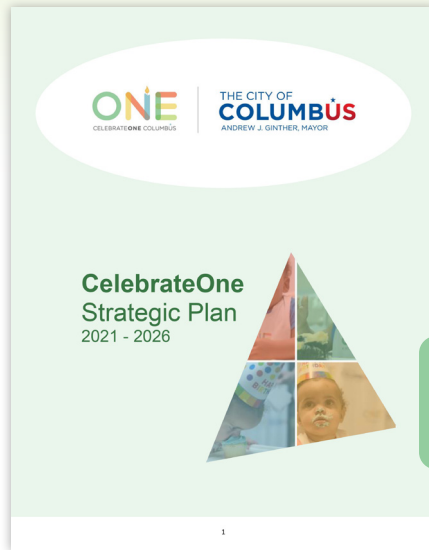
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RECOMMENDATION

**Improve provision of reproductive health care from preconception through one year of age.**

STRATEGY

- 4.1 Improve access to reproductive health care.
- 4.2 Improve quality of reproductive health care.



5

RECOMMENDATION

**Design and implement a connected and consistent care experience for mothers and babies.**

STRATEGY

- 5.1 Connect families with perinatal support and advocates as a standard of prenatal and perinatal care practice.
- 5.2 Develop plan to address gaps in prenatal support services including but not limited to centering, doula, Moms2B, etc.
- 5.3 Empower women to be co-creators of their unique pregnancy journey.
- 5.4 Develop programs that support families and caretakers as well as mothers and parents.

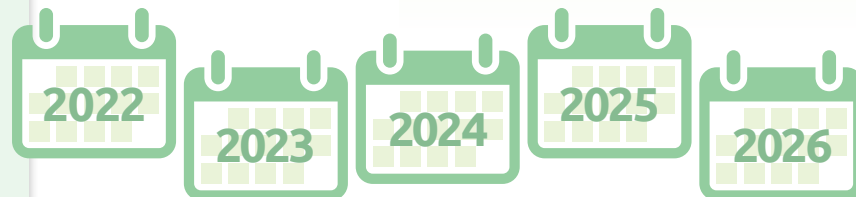
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RECOMMENDATION

**Accelerate innovation, progress, and accountability for health equity.**

STRATEGY

- 6.1 Target new investments using data to measure local programmatic and community outcomes by race and other demographic factors.
- 6.2 Increase investments in programs/ interventions with known positive outcomes for Black women and babies.
- 6.3 Implement maternal health solutions based on the results of maternal health data and maternal mortality review processes
- 6.4 Identify opportunities to align City/County/ business community strategies to improve social and economic conditions for mothers.



## Listening to Our Moms

**Thirty-two Black women held nothing back. They were honest. They didn't hide their emotions when it came to sharing their stories about birth – before, during and after.**

The women participated in a research study conducted by CelebrateOne, Design Impact and Nationwide Children's Hospital. The purpose of the study was twofold; to understand the experiences of women of color as they relate to pregnancy; to reduce racial health disparities as outlined in CelebrateOne's strategic plan.

The women involved in the study were identified as women of color, 18 years of age or older and self-identified as having experienced pregnancy or birth complications after 2016.

While the women talked, five community members, who were all women of color with lived experiences of pregnancy and/or birth complications, were designated as the meeting facilitators. Before stepping in as facilitators, they participated in extensive training to lead the virtual listening sessions, taking place over a two-month period.

The listening sessions were intended to gain the honest perspectives of Black women and their maternal health experiences. "We heard a lot of traumatic stories that were not being heard," said Kaitlyn Jones, one of the facilitators.

The women shared a variety of experiences related to their health care, during their pregnancy and after their delivery, revealing many health disparities and the barriers many women of color face.

During the listening sessions, seven themes emerged:

- Mental Health
- Moving Beyond Self Advocacy
- Connecting with My Child
- Black Women Feel Unheard
- Marital Status Changes the Quality of Care
- Representation Matters
- Caring for People on Public Insurance

At the conclusion of the study, the information was presented to a group of CelebrateOne stakeholders who then developed key action steps under each of the seven themes. Those action steps can be viewed on pages 18 and 19 of this report.

## ACCESS TO RESOURCES THEMES

### ***Supporting good mental health***

The medical community often talks about the importance of good mental health, but when it comes to Black women it can be deprioritized or missed. Pregnant Black women and new mothers need to receive support because they face bias from medical staff.

"(Poor) mental health often removes the enjoyment of the experience of pregnancy, becoming a mother."

### ***Moving beyond self-advocacy***

Black pregnant women and new mothers do not feel that pertinent medical resources and information are readily available to them by healthcare providers.

"My doctors suggested bed rest, but how am I supposed to do that and take care of a five-year old and work full-time? I didn't know about short time disability. I didn't have education for resources and I wasn't able to follow doctor's orders (bed rest). (That) was not a realistic thing for me. I felt very in the dark because bed rest was an unrealistic expectation."

### ***Connecting with my child***

Black mothers crave more time to spend with their newborn babies so they can recover from childbirth and bond with their babies, but maternity leave is often inadequate.

"Eight weeks maternity leave is not enough. Women need more time to spend with their babies. Rushing back to work is depressing."

## BIAS IN SERVICES THEMES

### ***Black, Indigenous and People of Color Women feel unheard***

The concerns and voices of Black women are often ignored and not respected. And they often receive pushback on the choices they make.

“If you are a woman of color, it’s as if you don’t have a voice. There are preconceived notions from others.”

### ***Marital status changes the quality of care***

Healthcare systems often treat single mothers differently and make them feel judged. Mothers want to be seen as a whole person, not as someone who has failed to meet supposed white, middle-class sensibilities of doctors and staff.

“There is a stigma on marriage and what kind of care you get.”

### ***Representation matters***

Black mothers appreciate when their medical team reflects them and understands their unique needs.

“There was an old black woman on staff who actually supported me, saying: ‘I believe you can do it; I got you.’ She listened and heard me while other staff ignored me. She went out of her way to advocate for me and my baby even after he was born.”

### ***Caring for people on public insurance***

Black mothers reported receiving less quality healthcare services when switching from private to public health insurance. They reported shorter visits with doctors and more dismissive actions from healthcare workers. Black pregnant women utilizing public health insurance want the same level of care and service that women with private insurance receive.

A mother shared a story of needing to relocate due to her husband’s job (she was 8 ½ months pregnant at the time). She was referred to a new doctor and says she “had a horrible experience [that was] blatantly racist.” She called corporate and wrote a letter and once she shared that she had private insurance, she says the experience changed. She says she wanted time to be able to ask questions and have a positive birthing experience, but these other issues got in the way.

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Funds to address inequitable birth outcomes that disproportionately address Black moms were awarded to CelebrateOne in late 2020 from the Ohio Department of Health.

To read the Disparities in Maternal Health Final Report, visit [columbus.gov/celebrate-one/](http://columbus.gov/celebrate-one/).

Information gathered from the listening sessions was then incorporated into CelebrateOne’s five-year strategic plan.





# Access To Resource Strategies

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## 1 INCREASE ACCESS TO ALTERNATIVE SUPPORT FOR PATIENTS

- Link families with prenatal supports such as: doulas, partners, community health workers or home visitors.
- Include the advocate or support person in care discussions.
- Engage in clear communication that allows for advocates to ask the questions.
- Expand the prenatal team to become a "dynamic care team" in order to help connect with resources and better engage with mental health and other services.
- Support legislation for sustainability of perinatal supports (doulas, home visiting, etc.).

## 3 INCREASE ACCESS TO MENTAL HEALTH SUPPORT

- Prioritize screening for mental health in prenatal care and warmly link to appropriate resources.
- Modify electronic medical record (EMR) to allow for mental health inputs, including factors such as homelessness and interpersonal violence.
- Share mental health information.

## 2 RESPOND TO SPECIFIC FAMILY NEEDS IN REAL TIME

- Incorporate qualitative inputs on the family's experience of birth into specific approaches based on family's needs.
- Use electronic medical records to incorporate action and connect across systems
- Create feedback loops between providers and clients that allow for timely input or critique to be delivered.
- Create spaces for mediated dialogue between patients and providers.

## 4 INCREASE THE TRANSPARENCY OF DATA BETWEEN HEALTHCARE AND COMMUNITY BASED ORGANIZATIONS

- Conduct research to determine how funding challenges or other limitations impact the quality of care that mothers are receiving based on location.
- Share research to generate transparent records on locations for families – potentially connect to resource allocation.

# Bias in Healthcare Strategies

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## 1 INCREASE ACCOUNTABILITY OF HEALTHCARE PROVIDERS

- Create space for families to provide meaningful feedback on their experience to providers.
- Conduct audits and collect data on patient experience that is tied to provider and/or location and disaggregated by race of provider and patient.
- Publicize the results of these activities (a+b).
- Connect the results of these activities to funding.

## 3 INCREASE AWARENESS OF BIAS IN HEALTHCARE

- Assess and update organizational policies to reduce barriers to inclusion (ie. fees for tardiness, asking about marital status, etc.)
- Incorporate bias, structural racism, and cultural competency into education and training programs for new and experienced healthcare providers.
- Create feedback systems that allow providers to learn from patient.

## 2 INCREASE BLACK, INDIGENOUS, AND PEOPLE OF COLOR REPRESENTATION IN HEALTHCARE

- Collect data on Black, Indigenous, and people of color representation and patient outcomes based on racial alignment.
- Connect families to resources that center Blackness, including providers of color, birthing classes, and affinity groups.
- Provide more scholarships and incentives for Black, Indigenous, and people of color students in the healthcare fields.

**FACT**  
In 2021, there were a total of 17 sleep-related deaths in Franklin County, remaining unchanged from 2020.

# PROGRESS

## Additional Supports for Women in Our Community

**For Whitney Gordon, 2021 was about taking small steps to organize a group of Black Women called Queens Village. In the years ahead, they will have a big impact on maternal health and racial disparities in our community.**

Queens Village is committed to reducing Black infant mortality by prioritizing Black women and families and understanding the systemic challenges and barriers they navigate daily.

“Queens Village is another key step in centering Black women in order to refine our focus and our partners’ focus as we continue to strategize and implement equitable interventions,” Gordon said. She, along with several other CelebrateOne staff members, spent the year recruiting members and determining the group’s vision.

“Some of the goals established by Queens Village Columbus include accountability, community engagement and self-care advocacy for Black women,” Gordon said. “These are important to us because as we embark on



this infant mortality work, the tasks ahead can feel daunting and very much like an uphill battle.”

Gordon and other CelebrateOne staff members connected with Queens Village Cincinnati to get acquainted with the organization and understand how it is shifting racial disparities in birth outcomes. “The biggest takeaway from the Cincinnati group was to develop and carry out the vision of our local group with authenticity and intention,” Gordon said.

As the group continues to take shape, Gordon says she plans on expanding its membership and envisions Queens Village Columbus becoming a widely recognized and respected organization in the area of infant mortality. There’s so much more to come from Queens Village Columbus. The group began meeting in early 2022.

### Queens Village Goals

For more information about Queens Village, please contact Whitney Gordon, [WRGordon@columbus.gov](mailto:WRGordon@columbus.gov)

#### RELAX, REST, REPOWER

Reduce Black women’s stress by creating space for them to relax, rest and re-power.

#### CHANGE THE NARRATIVE

Change the narrative about Black women by creating spaces and content for and by Black women that celebrate and amplify their voices.

#### INVEST IN LEADERSHIP

Invest in Black women’s leadership with social capital and power through community advisory boards.

#### CREATE OPPORTUNITIES

Create economic and professional pathways for Black women to succeed and flourish.

#### ENGAGE COMMUNITIES

Engage with social, political and medical communities to support equity initiatives and reduce implicit bias that affects Black women.

# PROGRESS

## Additional Supports for Women in Our Community

### Doula Program

In 2021, CelebrateOne began exploring opportunities to offer expecting moms a community-based doula program.

A doula is a trained professional who provides emotional and physical support and information to new and expectant parents before, during and after birth.

A recent report, Continuous Support for Women During Childbirth, found there were many positive birth outcomes when a doula was present. Women reported having a more positive childbirth experience with the support of a doula.

Studies suggest that increased access to doula care, especially in under-resourced communities, can improve a range of health outcomes for mothers and babies, lower healthcare costs, reduce cesarean sections, decrease maternal anxiety and depression and help improve communication between low-income, racially/ethnically diverse pregnant women and their health care providers.

Doula support is not routinely covered by health insurance and one of the barriers to having doula support is cost. Doula services offered through CelebrateOne would be available at no cost to women meeting the following criteria: beyond 25 weeks pregnant, women of color (Black/African American, Native American, etc.), and income 200 percent below the federal poverty level.

We are excited to launch the doula program in 2022 and look forward to sharing more information in our monthly newsletter.



### FACT

**In 2021, 651 women participated in Moms2B, up from 625 in 2020. Moms2B is a program offering education for women at high risk for pregnancy complications and preterm birth.**





## The Numbers

**741**

Safe Sleep  
Ambassadors  
Trained

**91**

New individuals  
enrolled in  
Baby and Me  
Tobacco Free

**500**

Attended the  
Movie Night  
held at Easton

**500**

2021 Baby  
Shower  
Attendance

**1,914**

Families served by  
home visiting  
up from 999  
in 2020

**10,419**

referrals made to community  
partners such as Moms2B,  
Women, Infant and Children (WIC),  
Home Visiting and Cribs4Kids



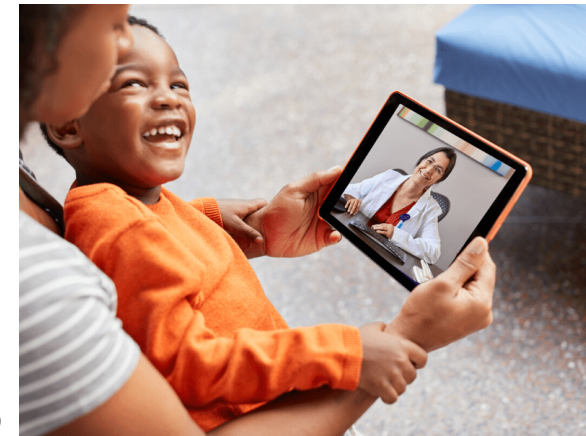
## Home Visiting

Care coordination assistants, community health workers, nurses, and social workers who usually visit pregnant women and parenting families in their homes or other arranged locations transitioned to virtual visits due to the COVID-19 pandemic.

“Since we were still in the midst of COVID-19 in 2021, we were doing virtual visits instead of in-home visits” said Stephen Snyder-Hill, maternal child health section chief, Columbus Public Health.

During a traditional in-home visit, staff provide pregnancy, parenting and after birth health education and ensure families are linked with important community resources, such as Medicaid, health care, and social supports. In-person services strengthen the connection between the home visitor and the family, improving the effectiveness of services.

As a result of the pandemic, visits went from in person to virtual, and the numbers climbed from 999 in 2020 to 1,914 in 2021. “Through the use of technology, we could reach and serve more families,” Snyder-Hill explained.



“The virtual visits were a great means to continue to communicate with families and serve them during the pandemic,” Snyder-Hill said, but he recognizes that home visitors and families are pleased to be able to meet in person again.



# Demographics

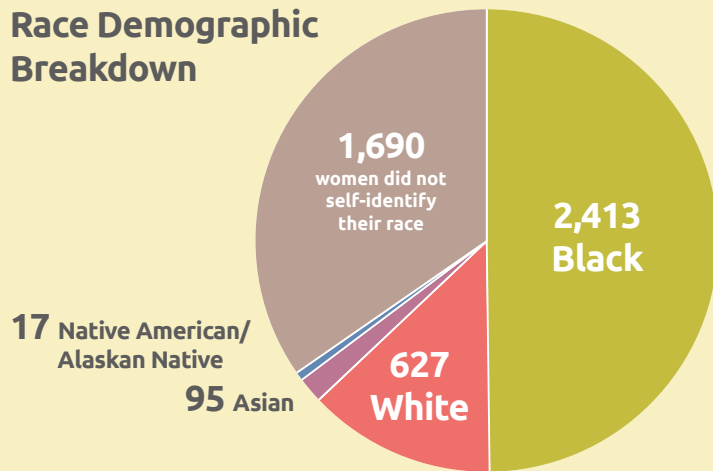
# 4,842

## women served by CelebrateOne during 2021.

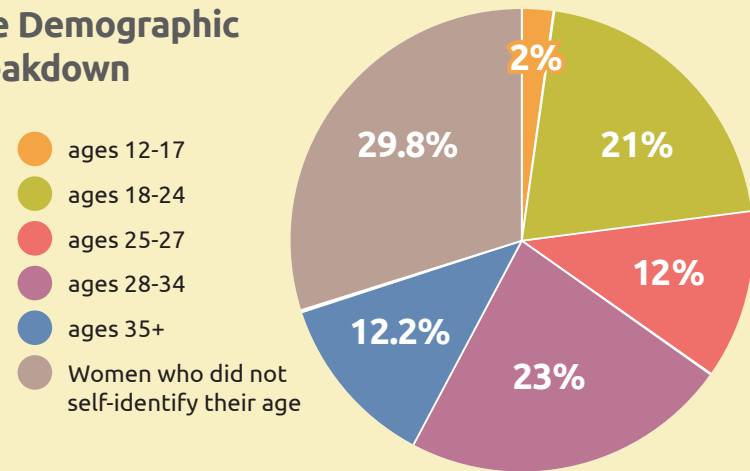
(The number of women served is determined by how many women met with CelebrateOne at least three times or more.)



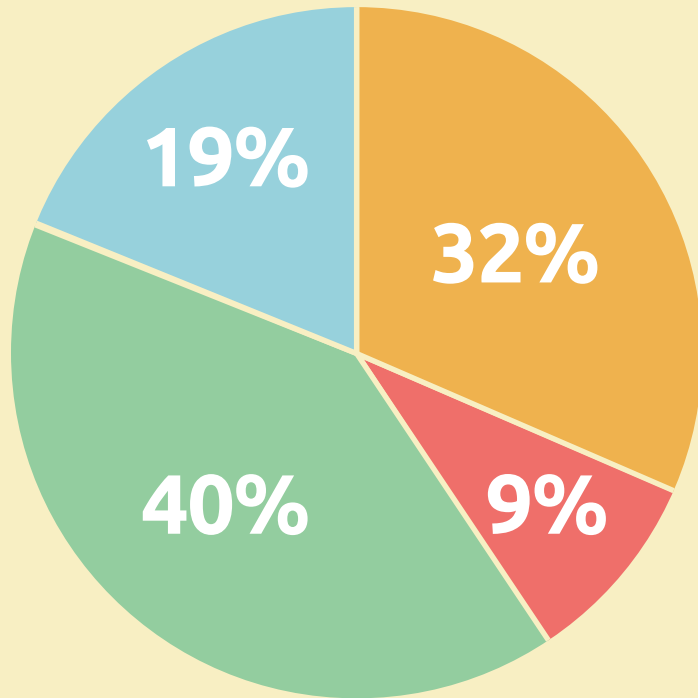
### Race Demographic Breakdown



### Age Demographic Breakdown



## CelebrateOne Revenue Sources 2021



- City General Fund - \$2,240,860
- Franklin County - \$650,000
- State of Ohio - \$2,833,852
- Private Donors - \$1,347,049



### Thank you to our Lead Entities

It takes a lot of different people working together to reduce Franklin County's infant mortality rate. Simply put, we couldn't do this work alone. We rely on the expertise, experience and advice of many people to guide us along the way. We are grateful to our lead entities, representing city and county agencies, hospitals and nonprofit organizations, for their time, commitment and dedication.

- **Central Ohio Hospital Council**
- **Columbus Department of Development**
- **Columbus Public Health**
- **Franklin County Family Children First Council**
- **Franklin County Board of Commissioners**
- **Franklin County Department of Job and Family Services**
- **Lower Lights Christian Health Center**
- **Ohio Better Birth Outcomes Collaborative**
- **Moms2B (OSU Wexner Medical Center)**
- **Physicians CareConnection**



A SPECIAL  
**THANK YOU**  
FOR YOUR GENEROUS DONATIONS

CelebrateOne is a public-private partnership and our mission is realized through the generosity of donors, and we would like to especially recognize the following major supporters donating \$5,000+

- **Accel Inc.**
- **American Electric Power Foundation**
- **Anthem Foundation**
- **CareSource Foundation**
- **Columbus Kiwanis Foundation**
- **Dan and Christie Crane**
- **Dang-Crane Fund**
- **Huntington Foundation**
- **KeyBank Foundation**
- **L Brands Foundation**
- **Nationwide Foundation**
- **NiSource Charitable Foundation**
- **Orange Barrel Media**
- **PNC Foundation**
- **The Columbus Foundation**
- **Wolfe Associates Fund**





CelebrateOne Columbus  
**VALUES**

## Equity

We demand, design and create ways to ensure equity for our families.

Equity involves trying to understand and give people what they need to enjoy full, healthy lives. Equality, in contrast, aims to ensure that everyone gets the same things in order to enjoy full, healthy lives. Like equity, equality aims to promote fairness and justice, but it can only work if everyone starts from the same place and needs the same things.  
*(Annie E. Casey Foundation)*

## Empower

We strive to empower our families to build the lives they want and deserve.

## Quality

We expect high quality care for women and families of ourselves and our partners.

## Collaborative

We strive to build collaborative relationships with and amongst our families and our partners.





THE CITY OF  
**COLUMBUS**  
ANDREW J. GINTHER, MAYOR

For more information visit [columbus.gov/celebrate-one](https://columbus.gov/celebrate-one)

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