



Best Babies Zone Basics: A Step-by-Step Guide

A resource produced by the Best Babies Zone Technical Assistance Center at the University of California, Berkeley, School of Public Health



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To learn more about BBZ, please visit our website:

www.bestbabieszone.org

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About This Guide

This guide introduces the key steps to implementing the Best Babies Zone (BBZ) approach. It is intended for both public health and non-public health organizations looking to start a place-based, multi-sector, community-driven initiative to reduce racial inequities in infant mortality. While much of the information in this guide is intended for practitioners who are new to these approaches, parts of this guide may also be of use to those with extensive experience in these areas.

The information in this guide is based on the experiences of the three pilot BBZs (Cohort 1) during their planning and implementation processes. It also draws on the literature on birth outcomes, place-based initiatives, multi-sector collaboration, community engagement, and social movements.

The guide moves through the Six Foundational Phases of a BBZ:

- Phase 1: Select a Zone
- Phase 2: Build a Multi-Sector Collaborative
- Phase 3: Collaborate with Residents and Build Resident Leadership
- Phase 4: Strengthen Social Movements
- Phase 5: Establish a Zone Strategy
- Phase 6: Plan for Evaluation

Additionally, the appendices include tools and resources to support your BBZ planning process.

Each Phase outlined in the guide is intended as a stand-alone section. As such, there is some repetition between Phases. Use the Table of Contents to identify the Phases and steps that are most relevant to your interest and stage of Zone development.

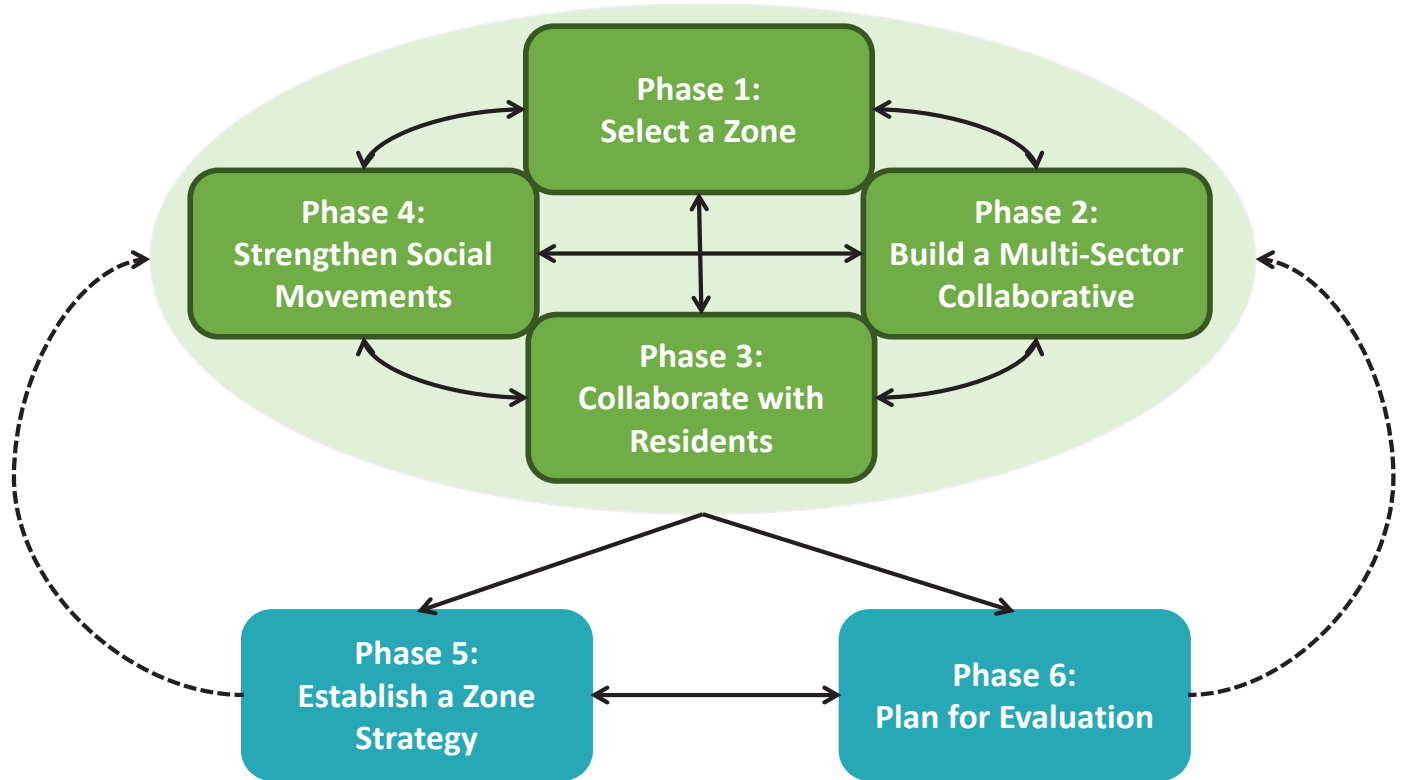
Though this document is presented as a ‘step-by-step’ guide, the Phases are iterative (see Figure 1). Phases 1 through 4 do not necessarily end prior to Phases 5 and 6. While you will find it necessary to start with Phases 1 through 4, circumstances will arise that will bring you back to the first 4 Phases as you develop, implement, and evaluate your work in the Zone. Return to this guide as your process unfolds for additional ideas and inspiration.

Who does the work? Note that, in this guide, “you” refers to the core group of people who are collaborating to start a BBZ, since growing a BBZ is a process that requires the involvement and support of more than one person or organization. The words “you” and “your” appear throughout the guide in the plural sense and for the sake of simplicity.



Finally, while this guide is intended for those who want to implement the BBZ approach, implementing these steps does not make your initiative an official Best Babies Zone site. The BBZ Initiative National Office formally designates Best Babies Zone sites through a specific application process. Use of this guide will enable you to adopt the BBZ approach and inform your efforts to create a place-based, multi-sector, community driven initiative to reduce racial inequities in birth outcomes.

Figure 1: The Six Foundational Phases of a BBZ





Introduction

The health of a nation is reflected in the health of its children, and particularly the health of its infants.¹ In the United States, babies born to non-Hispanic African American women are twice as likely to die in their first year of life as compared with babies born to non-Hispanic white women.² Despite years of investment in improving access to prenatal care and high quality services, racial inequities in birth outcomes persist.

Most studies on birth outcomes that have accounted for differences in socioeconomic status among women continue to find racial inequities.³ Studies have also shown that African American women who abstain from risky behaviors during pregnancy (e.g., smoking, alcohol, or other drug use) still have higher rates of poor birth outcomes than non-Hispanic white women who engaged in some of those behaviors.⁴ Repeated exposure to structural, institutional, and interpersonal racism that many women of color experience throughout their lifetimes, contribute to inequities in birth outcomes.⁵ Furthermore, the history of racial residential segregation, redlining, and systemic divestment in communities of color further compounds and concentrates disadvantage in specific geographic locations.⁶

Because of these historic and present-day factors, interventions that focus on changing health behaviors during pregnancy are not enough to reduce racial inequities in birth outcomes.⁷ To address the root causes and structural factors contributing to these inequities, a new strategy is needed.

The Best Babies Zone Approach

The **BBZ approach** is a place-based, multi-sector, community-driven approach to reducing racial inequities in birth outcomes by mobilizing community residents and organizational partners to address the social, structural, and economic determinants of health and promote health equity.

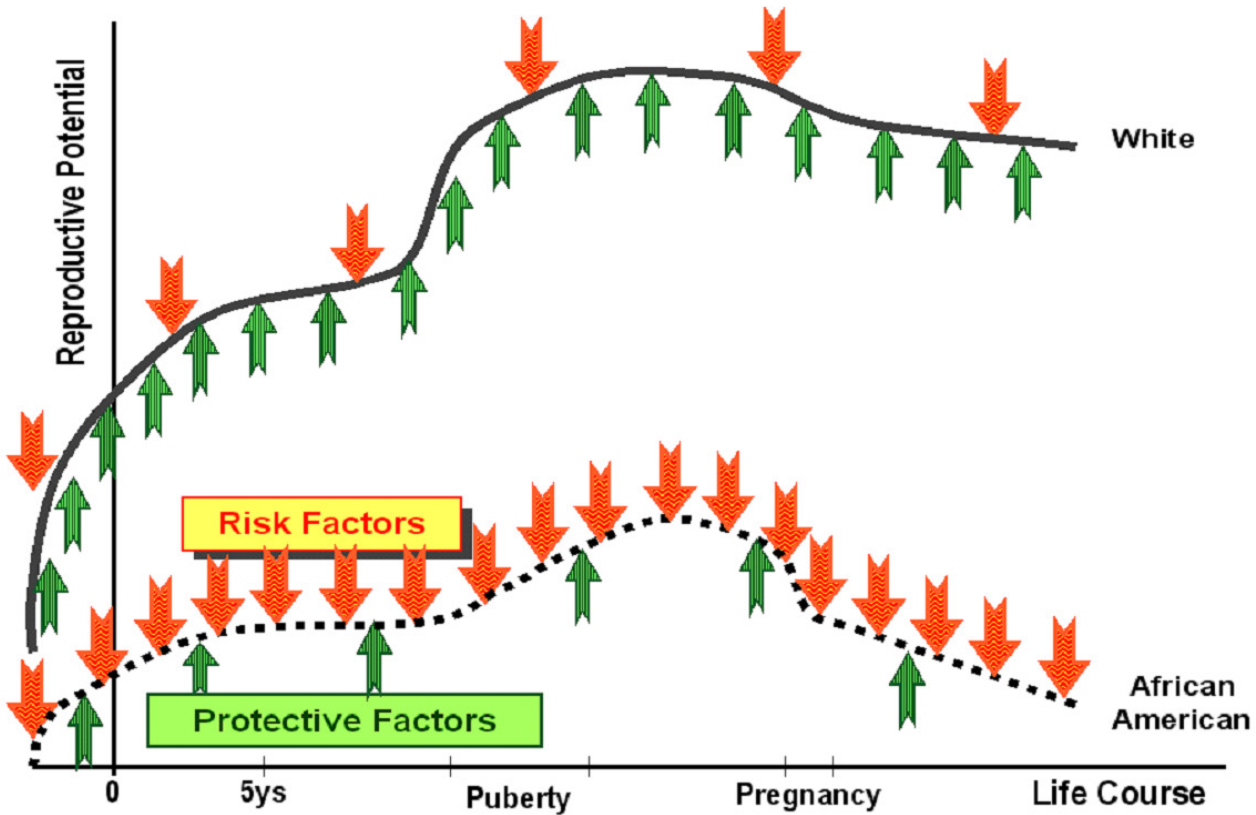
What is Health Equity? While public health has long studied “health disparities,” or differences between the health outcomes of groups of people,⁸ “health inequities” are a specific subset of these differences—those that “adversely affect socially disadvantaged groups.”⁹ Health inequities, as described by Margaret Whitehead in her seminal 1991 paper, are differences that are “unnecessary and avoidable...unfair and unjust.”¹⁰ As described by the Robert Wood Johnson Foundation (RWJF), “Health equity means that everyone has a fair and just opportunity to be healthy. This requires removing obstacles to health such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs and fair pay, quality education and housing, safe environments, and health care.”¹¹

The BBZ approach is also 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 (see Image 1).¹² The BBZ approach applies the Life Course Perspective to practice by transforming communities to support wellbeing at all stages of life. To do this, the BBZ approach seeks to address resident-identified risks factors and support resident identified protective factors in a small geographic Zone. This is accomplished by fostering cross-sector community collaboration and actions across economic development, community systems and services, health systems, and education and early care.

Image 1: From Lu and Halfon's seminal article, *Racial and Ethnic Disparities in Birth Outcomes*



“How differential exposure to risk factors (downward arrows) and protective factors (upward arrows) over the life course affect developmental trajectories and contribute to disparities in birth outcomes. The lower reproductive potential of African American women, relative to White women, results from their cumulative exposure to more risk factors and less protective factors across the life span, particularly during sensitive periods.” -Lu and Halfon



What is a Best Babies Zone?

A Best Babies Zone is a local, community driven initiative that applies the BBZ approach to address risk and protective factors in a community and improve birth and health outcomes.

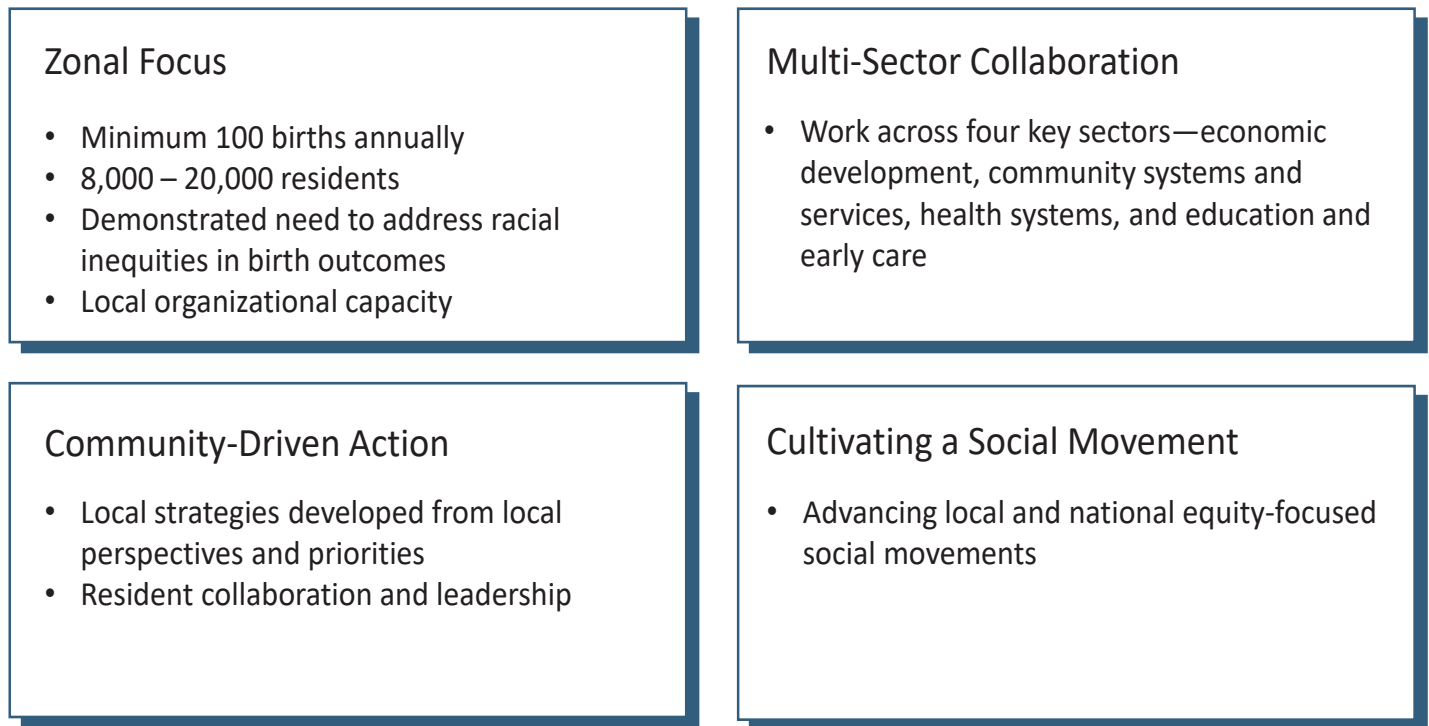
The BBZ mission is to give every baby born in a Zone the best chance in life. The BBZ vision is that all babies are born healthy, in communities that enable them to thrive and reach their full potential. To achieve this vision, a BBZ focuses on four Foundational Strategies (Figure 2):

- **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 inequities in birth outcomes and local organizational capacity to support BBZ efforts.
- **Multi-Sector Collaboration:** A BBZ engages partners across four key sectors—economic development, community systems and services (e.g. housing, parks and recreation, libraries, transportation, public safety), health systems, and education and early care. Active collaboration among partners representing each of these sectors is vital for sparking systems change and community transformation.
- **Community-Driven Action:** A BBZ develops its strategies based on the perspectives of, priorities of, and partnerships with those who live in the Zone. A BBZ strives to engage with community residents as collaborators, innovators, and implementers of BBZ strategies.
- **Cultivating a Social Movement:** A BBZ is aligned with several larger social movements taking place in the U.S. today, particularly those calling for racial and social justice and advocating for health as a human right. BBZ strategies play a role in advancing local and national equity-focused social movements, with the goal of reducing racial inequities in birth outcomes.

These strategies are the foundation on which a BBZ is built and provide the framework for the Phases of BBZ development that this guide outlines. The goal of implementing these strategies is to institutionalize a long-term, sustainable, transformative approach that will continue well beyond the life of the BBZ initiative.



Figure 2: BBZ Foundational Strategies



Because health is directly related to the neighborhood conditions in which people live their day-to-day lives, poor birth outcomes are often clustered in communities that face multiple challenges.¹³ These challenges may include: chronic stress due to racism, violence, and poverty; toxic environmental exposures; a limited local economy to support employment; poor access to fresh, affordable food; high risk of displacement and eviction; substandard housing; and other factors that directly and indirectly impact wellbeing.

These realities are also often coupled with **community assets**: residents who love and take pride in their neighborhood; community groups that unite around common interests; committed service providers; local institutions and policy-makers fighting for positive change. Drawing from the framework of Asset-Based Community Development, identifying and building on the strengths and resources of a community (including individuals, associations, institutions, physical space, exchanges, culture, stories, and history) can provide a powerful foundation for community transformation.¹⁴ These challenges and assets intersect in the unique constellations of circumstances, history, policy, and people that comprise a community.

Health is the outcome that a BBZ intends to change, but the health sector cannot work alone. To achieve equity in birth outcomes, a BBZ addresses the **social determinants of health** and **institutional and structural racism** that are at the root of poor birth outcomes.



Growing a BBZ requires grappling with these 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.

Social Determinants of Health: The World Health Organization (WHO) defines the social determinants of health as “the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life.”¹⁵ These conditions are affected by the “unequal distribution of power, income, goods, and services...and the consequent unfairness in the immediate, visible circumstances of people’s lives”¹⁶ and affect health behaviors, exposures, and physical and mental health, resulting in differences in health that are unjust, unfair, and avoidable.

Institutional and Structural racism: In her “Gardener’s Tale,” Camara Jones describes institutionalized racism as “differential access to the goods, services, and opportunities of society by race...[which] manifests itself both in material conditions and in access to power”.¹⁷ Structural racism consists of “the macrolevel systems, social forces, institutions, ideologies, and processes that interact with one another to generate and reinforce inequities among racial and ethnic groups.”¹⁸

About the Best Babies Zone Initiative

The **BBZ Initiative** (Initiative) is a strategic, national effort to advance the BBZ approach (see Figure 3). The Initiative is one of the first to attempt to translate the Life Course Perspective into practice.¹⁹ Initially conceived by **Michael Lu, MD, MS, MPH**, and colleagues, the Initiative is based at the University of California, Berkeley, School of Public Health and is directed by Principal Investigator, **Cheri Pies, MSW, DrPH**.

The Initiative began in March 2012 with funding from the W.K. Kellogg Foundation. That year, three pilot communities (**Cohort 1**) in [Oakland, CA](#), [New Orleans, LA](#), and [Cincinnati, OH](#), launched the first BBZs. In 2017, three new BBZ communities (**Cohort 2**) launched in [Indianapolis, IN](#), [Kalamazoo, MI](#), and [Portland, OR](#). In 2018, three additional BBZ communities (Cohort 3) will launch in Cleveland, OH, Milwaukee, WI, and New York, 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 worked 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. This guide draws on stories and lessons learned from Cohort 1.

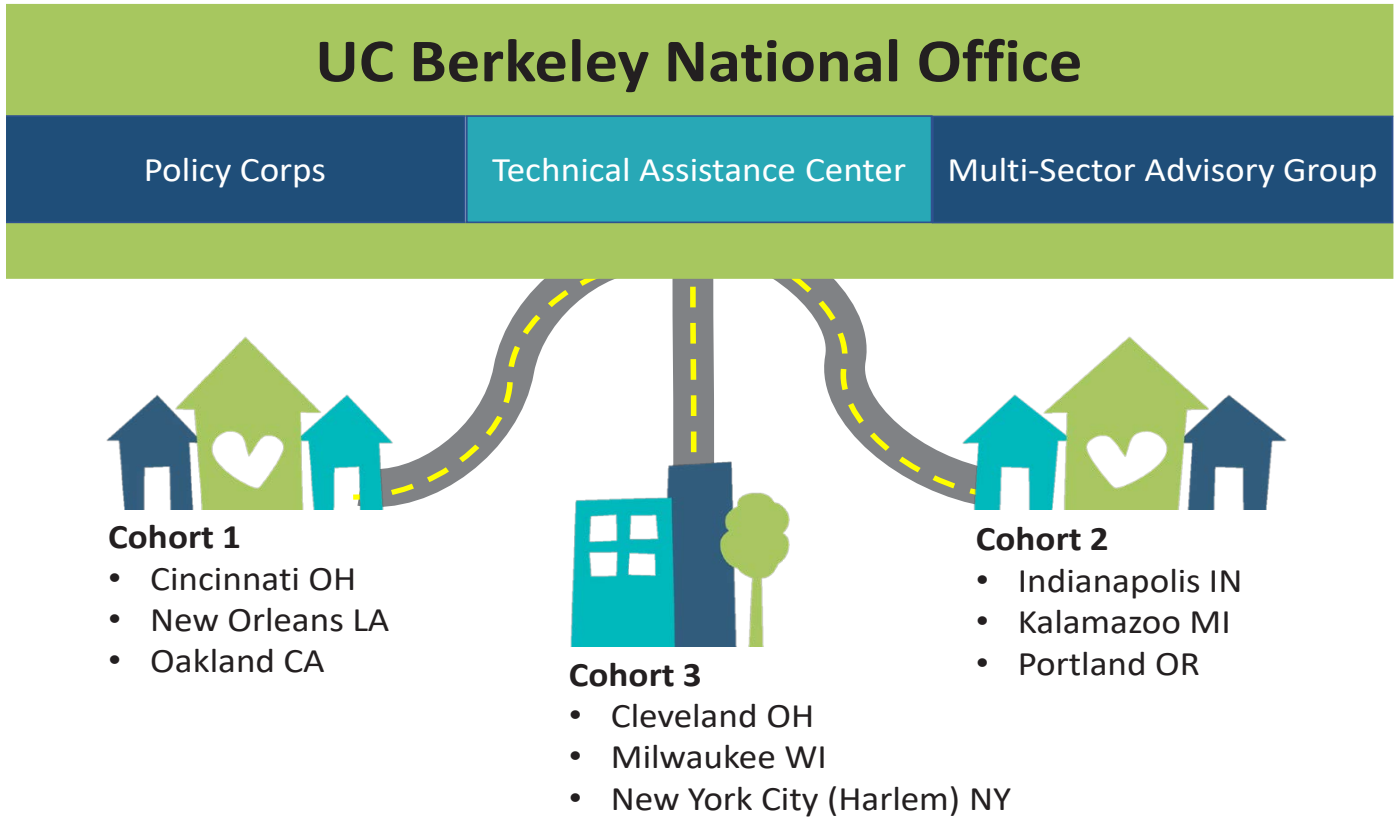
Nationally, the Initiative has mobilized a consortium of partners to provide strategic guidance to the Initiative. The **BBZ Policy Corps** serves as an advisory board to the Initiative and includes leaders from the six BBZs, the Association of Maternal and Child Health Programs (AMCHP), CityMatCH, the National Healthy Start Association (NHSA), and expert consultants from Harvard University and Portland State University. The **BBZ Multi-Sector Advisory Group** advises on strategies to engage partners outside of the



traditional health sector and is comprised of leaders from diverse sectors including economic development, housing, health, place-based initiatives, education, and early care.

In 2016, the Initiative launched a **Technical Assistance Center (TAC)** with additional support from the W.K. Kellogg Foundation. The purpose of the TAC is to increase organizational and community capacity to address racial and social inequities that contribute to infant mortality, with a focus on supporting new and emerging BBZs. This guide is a product of the TAC.

Figure 3: The Best Babies Zone Initiative



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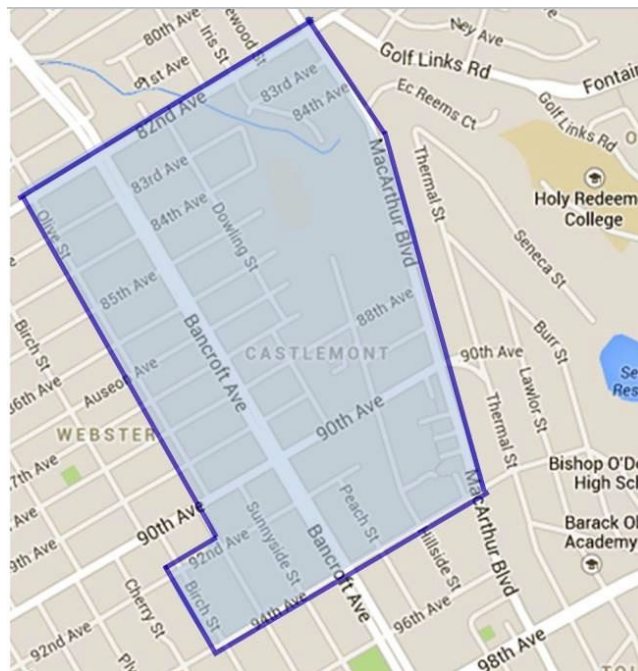
Phase 1: Select a Zone



The first Phase in implementing the BBZ approach is to identify a small, geographically defined Zone within a community that can benefit from a concentrated, multi-sector effort to reduce racial inequities in birth outcomes. The following are some steps to take to identify a Zone.

Why Place-Based? A BBZ is place-based in its focus on mobilizing change within a small, geographically defined Zone. The environments in which we live, work, and play have an impact on health, including birth outcomes.^{1,2} Place affects day-to-day existence and can have long-term implications for the wellbeing of individuals, families, communities, and future generations.³ Places are shaped by the history, policies, and people associated with them. These same mechanisms can also drive improvements within a given locality.⁴ By focusing on a specific community, a Zone can influence some of the complex, multi-sectoral issues that affect the wellbeing of residents and build change based on local priorities and perspectives. While the root causes of inequities go beyond neighborhood boundaries, starting from a place-based approach enables stakeholders to address community conditions while seeking opportunities shift broader policies and systems.

1.1 Review Zone Criteria: The BBZ approach can be adapted to fit a wide variety of communities. The criteria in **Table 1** below describe the communities that may benefit from this approach. Communities that do not fit all these criteria may still use elements of the BBZ approach. Suggested demographic, geographic, and health criteria for a Zone include:



Zone boundary for BBZ Castlemont, Oakland CA



Table 1: Criteria for a BBZ

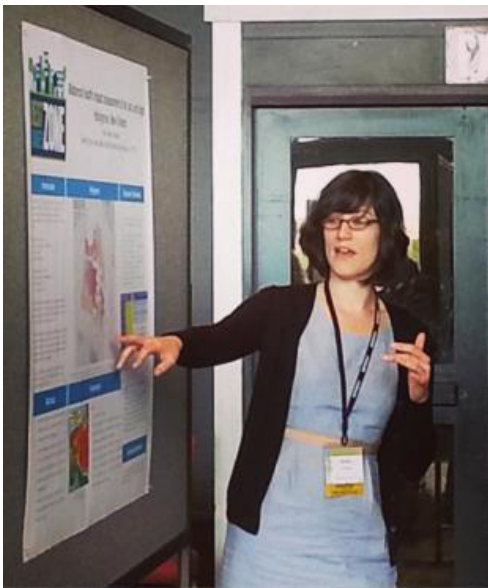
| Category | Criteria |
|--|--|
| Infant mortality rate | <ul style="list-style-type: none"> Higher than national 2014 average of 5.82/1,000 live births^a Demonstrated racial inequities in rates |
| Preterm birth prevalence | <ul style="list-style-type: none"> Higher than national 2015 average of 9.6%^b Demonstrated racial inequities in rates |
| Low birth weight prevalence | <ul style="list-style-type: none"> Higher than national 2015 average of 8.1%^b Demonstrated racial inequities in rates |
| Births per year | <ul style="list-style-type: none"> Minimum: 100 Maximum: Not Applicable <p>Note: In selecting the Zone size, consider the birth rate, prevalence of poor birth outcomes, and annual number of births. The minimum number of births may still pose challenges in measuring significant changes in birth outcomes if prevalence or rate is very low.</p> |
| Population size | <ul style="list-style-type: none"> Minimum size: 8,000 Maximum size: 20,000 <p>Note: Minimum size is based on average U.S. birth rate of 12.4 births/1,000 population^b and a minimum of 100 births per year. Areas with a higher birth rate may be smaller. Maximum size is specified to allow for a place-based approach that emphasizes reaching as many residents as possible in the Zone.</p> |
| Geographic size | <ul style="list-style-type: none"> Minimum/maximum size: variable <p>Note: Considerations for geographic size include:</p> <ul style="list-style-type: none"> Cohesiveness of boundaries or recognition of boundaries by residents Population density (ex: a large housing complex may have enough births and therefore be the whole “Zone,” whereas a more rural area may need a greater footprint to capture a dispersed population) Alignment with zip codes or census tracts |
| <p>a. National Vital Statistics Reports. Deaths: Final Data for 2014. https://www.cdc.gov/nchs/data/nvsr/nvsr65/nvsr65_04.pdf.</p> <p>b. National Vital Statistics Reports. Births: Final Data for 2015. https://www.cdc.gov/nchs/data/nvsr/nvsr66/nvsr66_01.pdf</p> | |



1.2 Brainstorm: To identify your Zone, start by reflecting on the areas in which you work and with which you are familiar, that might meet the above criteria. Here are some questions to consider:

- What social, structural, and economic challenges exist in the area(s)?
- What resources are in the area(s)?
- What community development efforts are already happening in the area(s)?
- Who are the key players (community leaders, organizations, political figures) in each area? What is your current relationship with them?
- What is the political climate like in the area(s)? How engaged are residents in existing community efforts?
- What work are you already doing in the area(s)?

Based on your knowledge and building on your existing work, you may be able to identify a few possible areas as potential Zones.



1.3 Dive into the Data and Identify

Inequities: To further support your Zone selection, gather secondary data (see **Table 2** below) on the potential Zones and the surrounding city or county as a point of comparison. The data can help to paint a picture of the demographics, health, and socioeconomic realities of the potential Zones, as well as any disparities and inequities between the Zone and the surrounding area. The American Community Survey and your local health department are the best sources for most of these data. See the data tables in **Appendix A** for a tool to help compare Zone data to county or city-level data.

While these indicators reflect the four BBZ sectors, they are not necessarily the only data that are important to consider. Look for local, community-based reports that might provide further information about the potential Zones. Qualitative data from previously conducted community assessments, news stories, or data from participatory methods like photovoice may also be helpful. Having some knowledge of community priorities will help you identify other relevant indicators. Many organizations have provided examples of indicators for assessing neighborhood health and well-being (see **Appendix B**).



Table 2: Community Health and Social Determinants of Health Indicators

| Data Type | Indicators |
|-------------|---|
| Health | Infant mortality rate Percent preterm birth Percent low birthweight Teen birth rate Percent uninsured |
| Demographic | Total population Race/ethnicity Primary language Number of women of reproductive age Number of children in the community Number of births per year |
| Community | Percent home ownership Percent single parent households Percent of homeowners where housing is 30%+ income Percent living in same residence as last year |
| Economic | Percent at <200% federal poverty line Median household income Unemployment rate |
| Education | Percent 3 year olds enrolled in preschool Percent population with a high school diploma |

1.4 Talk with People: Now that you have a data-generated picture of the potential Zone(s), and of the disparities and inequities in the Zone(s) compared to the city or county, it is time to ground that with the voices of community residents. Talk with residents and organizational representatives who are connected to the areas. Listen to what they say about the need and readiness for the BBZ approach. You will build on these conversations and relationships as you move into subsequent Phases.

However, throughout this Phase, be careful not to promise anything beyond what you have the capacity to do. If you are considering multiple areas as possible Zones, keep in mind what these conversations might mean for the areas that are ultimately not selected. There is a delicate balance between collecting information to help you move forward, while continuing to build trust and do right by your stakeholders. Bear this in mind as you proceed.



Administrative boundaries such as census tracts and zip codes are often used to define a Zone because of their relationship to large data sets, which can be used to highlight issues in a community. However, those boundaries may not match the borders that residents use to define their neighborhood. With this limitation in mind, attempt to select a Zone with a perimeter that is as close as possible to resident-defined boundaries, while still enabling the use of available data to understand the community.

1.5 Make the Selection: Once you have made it through the above steps, compile the information you have gathered and select a specific Zone. Select the Zone in collaboration with the partners you expect to work with in the BBZ (see Phase 2 for guidance on how to build a multi-sector collaborative and Phase 3 for guidance on how to engage with residents). Weigh the various pieces of information, consider your capacity and resources, and determine how to proceed. Refer to step 1.1) *Review Zone Criteria* above to guide the selection. As discussed in Table 1, the Zone you finally select must be small enough to concentrate and align efforts and large enough to measure change over time. For examples of characteristics of existing Zones, check out the overviews of the Cohort 1 Zones in **Appendix C**.

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Phase 2: Build a Multi-Sector Collaborative

In the process of selecting your Zone, you will engage with organizational and resident partners who will work with you to make the vision for the Zone a reality. In this Phase, you will begin to formalize those partnerships. The following are some steps to take to build a robust, multi-sector collaborative that can act collectively to change social and economic conditions and improve birth outcomes in the Zone.

2.1 Identify a Backbone Organization: The complexity of advancing a multi-sector collaborative initiative requires a high level of continuous coordination. A BBZ needs a lead organization that serves as the “backbone” or coordinator of the initiative. It is important that the backbone is a **trusted** organization that works within the Zone and has the staffing capacity and infrastructure to support collaborative activities. Ideally, the planning partners will implement a process that develops consensus among partners to identify and select the backbone organization best positioned and most ready to take on the role. The BBZ backbone organization does not have to be a health-focused organization. However, it is helpful if the organization has staffing capacity and experience related to several of the following areas:

- Community engagement
- Partnership and coalition building
- Equity and social justice
- Program design, implementation, and evaluation
- Policy development and advocacy
- Data collection and analysis

The **role of the BBZ backbone** organization is to convene partners, catalyze multi-sector partnerships, track progress on a set of shared measures, and implement specific BBZ-related programs and strategies where appropriate. During the planning process, the backbone organization will facilitate processes with organizational and resident partners to determine priorities for the BBZ and guide the vision and strategy of the Zone. If possible, within the first six months, the backbone organization will identify or hire at least one full-time program manager and one half-time community engagement specialist. Hiring these staff will require somewhere between \$150,000 and \$200,000. It is important to note that a tremendous amount of time and resources is required of the backbone organization to coordinate a collaborative initiative. The Collective Impact Forum’s Backbone Starter Guide¹ and the Stanford Social Innovation Review’s four-part series “Understanding the Value of Backbone Organizations in Collective Impact”² can provide helpful information on the backbone organization’s role.

2.2 Convene Partners from Multiple Sectors: Start by bringing together a core group of key partners who represent diverse sectors and whose work is connected to the priorities of the BBZ. Ideally, these partners will have experience working in or near the Zone and



with Zone residents. This early stage of partnership development may also provide an opportunity to engage with new partners who can bring vital resources—particularly funding—and knowledge to the BBZ.

At a minimum, a core BBZ team includes leadership representing the following groups:

- **Residents** who can speak to the interests and priorities of the community (see Phase 3);
- **A community-based organization** serving the identified Zone;
- **The local health department** or health system; and
- At least one **non-health organization** representing sectors such as education, social services, city planning, economic development, housing, or others.

You may also want to establish partnerships with other place-based initiatives operating in or around the Zone such as Promise Neighborhoods,³ the CityMatCH Institute for Equity in Birth Outcomes,⁴ the local Healthy Start program,⁵ HUD’s Promise Zones,⁶ or the Maternal Infant and Early Childhood Home Visiting (MIECHV) programs.⁷



It is important to approach new partners with a clear message on what you hope to achieve with the BBZ and data on why change is needed. It is equally important to focus on building a relationship and rapport with new partners, which may take time. Initially, it may be challenging to engage non-health organizations in your BBZ effort. It may be difficult for these potential partners to concretely understand how their work is connected to birth outcomes. Tools like Prevention Institute’s Collaboration Multiplier help to illuminate which multi-sector partners are important to the work and how to identify shared priorities.⁸

2.3 Establish a Collaborative Structure: When it comes to setting up a collaborative structure, there are many directions you can go. A collaborative may range anywhere from an **informal network** of multi-sector partners that convenes periodically to coordinate aligned work to a **formal decision-making body** that meets monthly to systematically advance a shared action plan. Consider what is viable for your existing partnerships, will facilitate new multi-sector partnerships, and will allow for forward momentum within the local organizational landscape and politics.

Ideally, the core partners that you identified in the previous step will become a **steering committee** that guides the direction of BBZ activities and strategies in the Zone. The partners and structure of this group are likely to grow and change over time. If you are



interested in establishing a formal collaborative or strengthening your partnerships, check out the following resources: Collective Impact Forum,⁹ Health in All Policies resources from Public Health Institute,¹⁰ the Kansas University Community Tool Box,¹¹ and the Build Healthy Places Network.¹²

A word on Collective Impact: The structure of your BBZ partnerships may include aspects of the **Collective Impact** model to promote collaboration among partners who may not always work together, but whose role in improving communities is critical and interrelated.¹³ Collective Impact includes five core components: common agenda; shared measurement; mutually reinforcing activities; continuous communication; and a backbone organization.¹⁴ Over the past several years, Collective Impact has gained traction among groups across the country that are interested in collaborating to achieve a shared vision for change. More recently, critiques of the Collective Impact approach have noted the difficulty of implementing collaboration for social change and equity. These emerging critiques have resonated with community groups and national initiatives that have experienced these challenges first hand.¹⁵ A pure Collective Impact model may not be the right fit for all BBZs. The components of Collective Impact may provide a useful framework for establishing multi-sector collaboration and considering ways to strengthen your collective efforts. Consider using Collective Impact, not as a prescriptive model, but as a framework of possible conditions for your collaborative structure.

2.4 Identify Local Champions: Strong **champions for social change** are critical for bringing partners together, supporting cross-sector action, and building political will to address the root causes of infant mortality in the Zone. Identifying at least one local champion early on can help advance the work of the BBZ. A BBZ champion will generally have the following characteristics:

- **Leadership:** The champion is often a leader within the backbone organization or one of the core partner organizations.
- **Trust and Influence:** The champion has the trust of community partners and influence among decision-makers in the Zone, city, or state.
- **Commitment:** While there are likely a variety of leaders working in and around the Zone, the champion is distinct in that they are committed to the vision of BBZ and actively supporting BBZ strategies. The champion fosters connections with potential allies, promotes the BBZ within their network, and furthers the spread of the Life Course Perspective as a lens through which to address the root causes of infant mortality.
- **Passion for Health Equity:** As a leading advocate for the BBZ, the champion must have a deep understanding of the social and structural determinants of health, and an unwavering dedication to building health equity.

The champion could be a grassroots community leader; a director of a public health department or division; an executive director of a non-profit or community organization; a leader of a city-wide coalition; or a leader from another sector with influence and commitment to BBZ. While having a BBZ champion in a leadership role is a key ingredient, it is important to have champions for the BBZ work at all levels.



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Phase 3: Collaborate with Residents and Build Resident Leadership

The third Foundational Strategy of a BBZ is **Community-Driven Action**. A BBZ is intended to benefit those who live in the Zone and experience firsthand the challenges of life in the Zone. Thus, a BBZ develops its strategies based on the perspectives of, priorities of, and partnerships with Zone residents. A BBZ engages with community residents as collaborators and implementers of BBZ strategies. Involvement of Zone residents is critical for establishing a BBZ strategy that resonates with the people who live in the Zone and addresses **concerns prioritized by community members** in ways that residents support, drive, and sustain. Residents provide valuable insights into their communities that might be overlooked by outside groups or traditional assessment methods. Active engagement of residents in selecting and implementing BBZ strategies increases the likelihood that community systems will change in response to actual community needs, realities, and experiences. The following are some steps to guide your work with residents and identify resident priorities that will set the trajectory of your BBZ strategies.

3.1 Consider the History of Resident Engagement in the Zone: As mentioned in step 2.2 of Phase 2, it is important that one or more of your collaborative partners has a history of working with residents in the Zone. Residents of the Zone may also have a history of organizing and collaborating to improve their neighborhood. Since you are not starting from scratch, take some time at the outset to reflect on the history of community engagement and community organizing in the Zone and any lessons learned from these experiences.

Below are some questions for the collaborative to consider to inform how to work with residents and build resident power:

- How does the multi-sector collaborative define “residents”? (e.g. persons who live in the Zone, who live and work in the Zone, who live in and near the Zone and access amenities in the Zone?)
- How do residents define “residents”?
- How have residents historically organized themselves to improve community conditions?
- How have multi-sector collaborative partners worked with residents of the Zone? What has worked well and what hasn’t?
- What does resident leadership look like in the Zone?
- How can the multi-sector collaborative create new opportunities for resident leadership?

For additional questions see **Appendix D**.



3.2 Establish Collaborative Principles for Resident Engagement: In the BBZ approach, community engagement is not a box to check off. It is a Foundational Strategy on which the potential success and sustainability of the BBZ is built. Drawing from community engagement and community-based participatory research approaches, the BBZ approach emphasizes the principles below for community engagement (see **Appendix E** for the rationale behind each of these principles). You may wish to adapt these principles to suit the experiences and vision of your collaborative. Discuss these principles with your core partners and establish some working agreements around how the collaborative and its individual members will meaningfully engage residents.

Principles for Community Engagement

- Strive for transparency and honesty
- Acknowledge power dynamics
- Put respect at the center
- Let cultural humility drive your work
- Acknowledge that participation is voluntary
- Endeavor to engage diverse residents (not only those easily reached)
- Institutionalize roles for residents
- Practice flexibility and openness

3.3 Plan Opportunities for Resident Issue Identification and Priority-Setting: It is important that the BBZ collaborative provide several early opportunities for residents to identify the community conditions that they want to address and how they want to address them. Consistent engagement is messy and complicated, and requires substantial time and resources. Do not let perfection be the enemy of the good. It is better to do some imperfect resident engagement than to not do any at all because you could not meet a gold standard. What is most important is that you keep the Principles for Community Engagement (Appendix E) at heart with any community engagement that you do.



Resident input, priority-selection, and agenda-setting will form the foundation for developing your BBZ strategy (outlined in Phase 5). What follows are some examples of community engagement activities used by the Cohort 1 BBZs that facilitated resident issue identification, priority-setting, and leadership development:

- **Community Cafés:** Facilitated community forums that allow residents to discuss concerns in small groups about their neighborhood and identify solutions. Community Cafés are held in the Zone, at a convenient time for residents and local organizations. The World Café method provides a helpful organizing framework that you can adapt to make the process your own.¹
- **Community Visioning Events:** A community gathering where residents can talk with one another and partner organizations about their visions for a healthy community.
- **Topic-Specific Forums:** Facilitated forums dedicated to specific topics of concern to residents (e.g. housing, safety, air quality, and employment opportunities) that can provide residents with the opportunity to provide insight into those concerns.
- **One-on-One Conversations:** Direct conversations with residents through door-to-door outreach, community events, and simply spending time in the neighborhood (e.g. at parks, laundromats, barber shops, community centers, and bus stops) to collect vital information and context about residents' experiences of their community.



It is crucial that gathering **resident input is an ongoing conversation**, not a one-time activity. For example, after a forum during which residents have volunteered their time and energy to identify priorities, follow-up with the attendees to share what you learned and check if you have it right. Engage residents in the action planning that will respond to their priorities. An iterative, resident-informed process is key to building the trust and mutual respect necessary to establish and advance your BBZ strategy.



Additionally, consider how you might facilitate opportunities for as many different groups of residents as possible to get involved in issue identification. For example: hold community meetings in the evenings, on weekends, or when working families can attend; provide childcare; offer simultaneous interpretation services; serve a healthy, hearty meal; and provide modest incentives for participation like transit passes or gift cards to a local grocery store. There are many existing resources to support planning and implementation of resident issue identification and priority-setting. The Community Tool Box's chapter on "Encouraging Involvement in Community Work" provides some great ideas.²

Resident Priorities and the Social Determinants of Health: In the process of gathering resident input, you may find that the priorities are not directly connected to infant mortality or poor birth outcomes. Perhaps the top priorities are related to community safety, economic opportunity, environmental justice, access to quality childcare, or some other community condition. This is to be expected. To achieve equity in birth outcomes, a BBZ addresses the social determinants of health and structural racism that are at the root of poor birth outcomes. What's most important is that residents have identified these priorities as connected to the well-being of themselves and their community. That's what Life Course Perspective is all about.

3.4 Identify a Range of Roles for Residents: To ensure that as many residents as possible have opportunities to inform, advise, and drive BBZ strategies, it is necessary to create a variety of roles and engagement opportunities that vary in level of involvement and intensity.

Table 5 in Appendix F illustrates the spectrum of roles that residents can play in advancing the goals of the BBZ, and the role that BBZ organizational partners might play accordingly. From the least intense level of involvement to the most intense, the roles for residents include participant, informant, advisor, partner, and leader. A participant might attend an event to learn about BBZ, whereas a leader drives an effort and invites others to support it. Note that the higher intensity roles (e.g. partner and leader) may involve more time, resources, and strategy on the part of all parties.

A promising approach is for one or more of the BBZ backbone or core partner organizations to eventually create **paid staff positions for residents** who have emerged as key leaders in driving BBZ strategies. While it may take time and additional resources to provide for the higher intensity resident roles, doing so may help with the long-term sustainability of the initiative (see Phase 5 for more information on ensuring the sustainability of your BBZ).

3.5 Identify and Support Resident Leaders: There is no single definition of a "resident leader." In general, the term refers to a person who lives in the community, has the trust and respect of their neighbors, is already advocating for change in their community, and may hold a leadership role in a community organization. Some residents may seek to take on a leadership role but may have not yet found an avenue for doing so. Keep



in mind that some residents may face challenges that hinder their capacity to take on a leadership role. In addition to engaging known resident leaders, also consider creating space for engagement with those who have not historically been involved in community initiatives. Although this can be challenging, this ensures greater representation of all members of the community. This is also important so that known resident leaders are not over-taxed by requests for involvement in multiple projects. See step 3.4 above for ideas on how to support the participation of all residents.

One way to identify existing and potential leaders in the Zone is by speaking directly with people who live and work in the Zone. Talk with your partners. Talk with local business owners, teachers, park officials, and city council members. Learn about existing community engagement efforts and identify who stands out in those spaces. Pay attention during your early community engagement events and outreach experiences. Through these conversations, connect with, learn about, and listen to people who are influential in their community. Ask these influencers whom they feel they represent or do not represent. Also, ask other residents if they feel represented by those community leaders.

Moving toward Resident Leadership Development: In the early planning stages, identify some initial activities to cultivate and strengthen community leaders. Once BBZ implementation is underway, incorporate these leadership development strategies into BBZ activities to foster meaningful and sustainable community change. For example, your BBZ strategy may include development of resident leadership opportunities, partnerships with existing community-based organizations that build resident power, and hiring residents as core staff to create and implement parts of the strategy. Initiating collaboration with residents in the early BBZ planning Phases is key to ensuring that the focus on community voice and community-driven change remains central to your BBZ.

3.6 Make Seats at the Table: In getting to know the people who live in the Zone, there may be some key resident leaders who express interest in playing a more active role in the BBZ. Early in the planning process, designate at least one core partner seat for a resident of the Zone (see Phase 2). Give a title to residents who occupy these seats, such as “Resident Advisor.” It is also important to provide a stipend for these positions. Core staff from partner organizations are paid to participate in meetings. Paying residents to participate honors their time, knowledge, and expertise. Keep in mind that this person does not necessarily speak for the entire community, but does provide valuable insight into the realities of living in the Zone.

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Phase 4: Strengthen Social Movements



The fourth and final BBZ Foundational Strategy—**Strengthen Social Movements**—is about community, social, and systemic transformation. The Zone is affected by historical legacies and present-day institutions, policies, systems, and power structures that operate at and across multiple levels—neighborhood, city, county, regional, state, national, and global. There are also structures within our society—racism, sexism, classism, ableism, xenophobia, heteronormative biases—that shape not only laws and policies, but also how institutions, organizations, and people interact on a day-to-day basis. These structures also shape community health and contribute to racial inequities in birth outcomes.

To achieve long-term, sustainable change in the Zone, and ultimately achieve racial equity in birth outcomes, it is imperative that BBZ collaborative members acknowledge, grapple with, and strive to change these structures. This is no small task. This Phase suggests a few first steps to guide your BBZ as you begin this complex yet important work.

What is a Social Movement? A social movement is a set of shared beliefs and related actions put forth by a network of actors and directed towards changing something in society, often in a disruptive manner.¹ The tools of enacting a social movement can include community organizing, marches, advocacy, campaigns, and other direct actions and strategies for seeking societal change.^{2,3} These tools may be used on specific issues and may have policy or regulatory agendas, but social movements are more than these individual issues and actions. They are about “attempt[ing] to shift the nation’s fundamental frame of reference” tackling issues, norms, and entrenched structure, piece by piece, to ultimately create a more just world.⁴

4.1 Engage with National and Global Social Movements with which BBZ is Aligned: The vision of BBZ is that every baby is born healthy, into communities that enable them to thrive and reach their full potential. This vision is not yet a reality. Racial inequities in birth outcomes still exist. In many communities, people of color face barriers to good health due to systematic discrimination. The BBZ vision and these persistent inequities provide the framework for the social movements with which BBZ is inherently aligned, including: health equity, racial justice and equity, universal human rights, and reproductive justice:

- **Health Equity:** According to the Robert Wood Johnson Foundation, “health equity means that everyone has a fair and just opportunity to be as healthy as possible. This requires removing obstacles to health such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care.”⁵
- **Racial Justice and Equity:** Racial justice is a distinct form of social justice that is “concerned with what conditions must obtain for there to be no arbitrary distinctions between racial groups in the assignment of basic rights and duties and for each racial group to have its due claim to the advantages of social





life.”⁶ The pursuit of racial justice involves “the proactive reinforcement of policies, practices, attitudes, and actions that produce equitable power, access, opportunities, treatment, impacts, and outcomes for all.”⁷ Racial equity is “one part of racial justice” and a state of racial equity would be one in which “one’s racial identity no longer predicted, in a statistical sense, how one fares.”⁵ Black Lives Matter is an example of a movement fighting for racial justice and equity: an intersectional and Black-led movement, described as “an ideological and political intervention in a world where Black lives are systematically and intentionally targeted for demise.”^{8,9}

- **Universal Human Rights:** Defined by the United Nation’s Declaration of Human Rights as the “recognition of the inherent dignity and of the equal and inalienable rights of all members of the human family is the foundation of freedom, justice, and peace in the world.”¹⁰
- **Reproductive Justice:** As described by SisterSong Women of Color Reproductive Justice Collective, reproductive justice is “the human right to maintain personal bodily autonomy, have children, not have children, and parent the children we have in safe and sustainable communities.”¹¹ Asian Communities for Reproductive Justice emphasizes that “Reproductive Justice exists when all people have the social, political, and economic power and resources to make healthy decisions about our gender, bodies, sexuality and families for our selves and our communities...[recognizing] that all individuals are part of families and communities and that our strategies must lift up entire communities in order to support individuals.”¹²

A BBZ need not create a new movement. Rather, a BBZ can support existing movements related to building a more just world. BBZ is a piece of a broad, complex puzzle which contains diverse perspectives, priorities, and calls to action. Though difficult to achieve, this reality is also comforting and humbling—a lot of good work is already happening, and there are many ways in which a BBZ can be involved and make change.

4.2 Connect with Local Social Movements in the Zone: Chances are good that residents of the Zone have historically fought for and are presently organizing for changes to community conditions. Perhaps residents of the Zone organized to register Black voters during the Civil Rights movement, advocated for clean air in the 1970s, worked for better neighborhood schools in the 1990s, or are currently in a city-wide battle to raise the minimum wage. Familiarize yourself with the past and present-day efforts of Zone residents to organize, advocate, and create a better life for their families and community. This expertise is a tremendous asset in the Zone. Build on this expertise in the design and implementation of BBZ strategies (Phase 5).

To learn about the past and present day social movement experiences of Zone residents, consider the following questions with your organizational and resident partners:



- How have Zone residents historically organized themselves to improve community or social conditions?
- What organizing and advocacy is already taking place around social issues in and around the Zone? Do those issues relate to the resident priorities identified in Phase 3?
- What tactics have residents used to organize and advocate for improved community conditions?
- What community and social issues are most important to residents of the Zone? What are the root causes of those issues? How do those root causes relate to national social movements with which BBZ is aligned?
- How have the organizations and institutions that operate in the Zone been involved in organizing and advocacy?
- How do we see national health equity or social justice movements being addressed, or not, in the Zone?

By keeping these questions in mind as you move into Phase 5, you can incorporate efforts to support and strengthen existing social movements into your Zone strategy.



4.3 Identify a Local Policy Agenda: Once you understand the experience of Zone residents in advocating for community change and have a resident-identified list of Zone priorities related to community conditions, then it's time to identify a local policy agenda for the BBZ. Pursuing local policy change, while challenging, can often lead to more immediate and achievable wins than pursuing policy change at the state or national level. The Community Tool Box provides a great overview of policy-change strategies and resources.¹³ If residents have identified that increasing availability of affordable housing is a priority, then the BBZ policy agenda could include a host of policy options related to making housing truly affordable for residents who need it most. If residents have identified that greater economic opportunity is a priority, then the BBZ policy agenda might outline a few policy strategies to build local wealth. In this process, consider if there are policies or regulations that are barriers to achieving resident priorities. What's





most important is that the policy agenda responds to resident priorities and includes policy options that residents want to see. See Phase 3 and Phase 5 for further guidance on identifying resident priorities and aligned actions.

4.4 Build Political Will: Achieving policy change is easier said than done. It often requires traveling the long road of relationship building, organizing, and campaigning. It's never too early to begin tilling the soil to make policy change possible. A key step to cultivating local readiness for policy change is to build political will. This might include a variety of actions: meeting with elected officials and discussing your BBZ priorities; raising awareness about Zone issues among decision-makers and the broader community through media campaigns; cultivating relationships with influential figures in the Zone and the broader community; and more. Of course, these actions require time and resources. As a first step, survey the political landscape with your organizational and resident partners. Consider finding the answers to the following questions:

- What credibility or connections can the partner institutions involved offer to support the work of resident organizing?
- What are the roles and responsibilities of the BBZ organizational partners in supporting a policy agenda?
- Who are the key political players who hold positions of power in the Zone, city, county, and state?
- What are the priorities of local decision-makers and other powerful or influential people in the Zone?
- Do local decision-makers' priorities align with the priorities of the Zone?

Many assessment and strategy tools are available to survey the landscape of local power players and political dynamics within and around the Zone. Such tools are available through the Community Tool Box and County Health Rankings and Roadmaps.^{14, 15}



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Phase 5: Establish a Zone Strategy

At this point in the process, you have defined the Zone (Phase 1), established a multi-sector collaborative (Phase 2), worked with residents to identify priorities (Phase 3), and planned how you will build political will for a social movement (Phase 4). Throughout these Phases, you have laid the groundwork for identifying the actions your BBZ will take. Phase 5 presents steps to develop your strategy for implementing, and sustaining your BBZ. Your strategy will apply the activities and approaches described in Phases 1 through 4 so many steps from these Phases are referenced in this section.

5.1 Identify the BBZ Mission, Vision, and Values: At the start of your strategy planning process, identify the mission, vision, and values for your BBZ. Consider beginning with the mission, vision, and values of the National BBZ Initiative (see table below) and be sure that these guiding statements resonate with the collaborative partners. The process of identifying these guiding statements can serve as a bonding and organizing opportunity for the core BBZ team and multi-sector collaborative. Start your strategy development process with this activity to ensure that the mission, vision, and values inform the foundation of your strategy. You can also return to these statements in times of confusion or to change and reflect on their relevance with new and established partners as issues arise.

Table 3: BBZ Mission, Vision, and Values

| BBZ Initiative Guiding Statements | |
|-----------------------------------|--|
| Mission | To give every baby born in a Best Babies Zone the best chance in life |
| Vision | Every baby is born healthy, into communities that enable them to thrive and reach their full potential |
| Values | Community, Equity, Flexibility, Integrity, Optimism, Respect |

5.2 Prioritize Issues: In the process of building your BBZ collaborative, engaging with residents, and identifying resident priorities during Phases 1 through 4, many issues are likely to have emerged. Because time and resources are finite, these issues need prioritization to determine first steps for your BBZ strategy. The following questions may be helpful for issue prioritization:

- **What are residents' priorities?** As outlined in Phase 3, centering BBZ efforts around resident priorities is both a core BBZ strategy and a key component of a successful BBZ. Put resident priorities at the top of the priority list to ensure that BBZ programs and activities respond to community needs and will mobilize resident engagement and support (see step 3.3 for guidance on how to identify resident priorities).



- **Which priorities will have an impact on birth outcomes?** Think broadly about the root causes of infant mortality. For example, if residents identify neighborhood safety as a top concern, learn about the links between violence, experiences of stress, and birth outcomes so that you can articulate why this is a BBZ priority to decision-makers and stakeholders. Remember that the **Life Course Perspective** takes a long-term view, so addressing one or more social determinants of health may not have an immediate effect on birth outcomes within the Zone.
- **How can we achieve some early wins?** Working on the root causes of poor birth outcomes means that it may be years before a measurable change can be observed. Therefore, it is important to think about how your priorities might produce some early, visible wins for residents and partner organizations. These early successes can help to maintain momentum in the community, show progress towards long-term goals, and build trust between stakeholders.

There are many different activities and tools that may be helpful for narrowing down and refining your BBZ priorities. See **Appendix G** for one example of a prioritization tool (the 2x2 Matrix). For an example of how BBZ Hollygrove identified its priority issues see **Appendix H**. For additional exercises and approaches, check out online resources such as the Community Tool Box,¹ IDEO's Human-Centered Design toolkits,² and the participatory learning activities of the AIDS Alliance's Tools Together Now.³

Who is missing from the table? Once you have identified your BBZ priorities, make sure there is a match between these priorities and the expertise of your partners. For example, if residents point to a lack of affordable housing as a key cause of stress for pregnant and parenting women and families, include a partner that understands housing issues—like a community development corporation, local planning department, or housing rights organization—in the planning and implementation process. This ensures that their expertise is incorporated into your BBZ strategy and activities. See Phase 2 for more information on building multi-sector partnerships and Phase 3 for how to ensure that residents are also at the table.

5.3 Identify Aligned Actions: Once you have prioritized the issues to address through your BBZ strategy, the backbone organization, partners, and residents can begin the work of determining *how* to address these issues and *who* will address them. In the Cohort 1 Zones, these actions fell into three broad types, outlined in **Table 4** below. For examples of how the Cohort 1 Zones moved issues to actions, see **Appendix I**.



Table 4: BBZ Action Typology from Cohort 1

| Action Type | Description | Example Actions |
|---|--|--|
| Connect people to existing resources and opportunities in the Zone | Communities may already have some key assets and safety net resources for residents which may be underutilized or not easily accessible | <ul style="list-style-type: none"> • Identify underutilized resources and develop a tailored program to address challenges in partnership with residents and organizations • Develop events or opportunities through which people can access resources, such as community resource fairs • Create links between organizations, between residents and organizations, or between organizations and systems so that clients can take advantage of more than one resource at a time |
| Bring in existing programs and opportunities that are outside of the Zone | There may be existing resources offered in other parts of the city or county, but not in the Zone. Based on an understanding of why these resources are not available in the Zone and whether these resources may be desired in the Zone, bring new resources in | <ul style="list-style-type: none"> • Work with partners to identify resources, opportunities, and systems not yet in the Zone, but desired by residents, and identify a plan for implementation • Engage with local decision-makers to identify any local policies that might hinder or support the addition of these resources in the Zone • Collaborate with nearby place-based initiatives to advocate for additional resources or opportunities that might be relevant to both efforts • Support advocacy efforts related to policies or procedures that create systemic barriers to opportunity |
| Launch new ideas | Some issues identified by residents may require a completely new approach or a new strategy that could then be piloted in the Zone | <ul style="list-style-type: none"> • Create a new resource, program, or community initiative based on resident-identified needs • Develop new leadership and training opportunities for residents to drive their innovative ideas • Create a campaign to promote systems change that residents have identified as needed |



5.4 Create a Sustainability Plan: Sustainability is an important consideration for non-profits and grant funded initiatives. Sustainability refers not only to the financial sustainability of your BBZ but also the sustainability of the partnerships, projects, and system changes established through the BBZ.⁴ This step offers suggestions on strategies to sustain the BBZ approach in your community:

- **Institutionalize the BBZ approach:** For some, sustainability will mean that the BBZ approach is institutionalized within one or more stable local organizations. Partners can start by identifying a local organization or institution that has consistent funding and a mission that aligns with your BBZ mission and strategy. That institution will be charged with carrying on the BBZ work, beyond grant cycles and partnership changes.
- **Promote systems change:** This sustainability strategy is focused on setting systems changes in motion so the impact of your BBZ is long lasting. Systems change does not happen accidentally—it requires continuous effort to shift power and processes. It means a reorientation of decision-making and priority setting processes to include the people most impacted by those decisions.⁵ The BBZ multi-sector collaborative (described in Phase 2) can also be an important driver of systems change since it is comprised of leaders representing various systems that influence life in the Zone.
- **Develop resident leaders:** Sustainability planning aligns with the Community-Driven Action Foundational Strategy of the BBZ approach. Long before BBZ arrived, and long after BBZ ceases to exist, the Zone had and will have resident leaders who work to strengthen their community. As described in Phase 3, your efforts to cultivate and collaborate with resident leaders throughout all aspects of your BBZ will also strengthen the sustainability of the BBZ approach.
- **Shift the policy landscape:** Another way to ensure sustainability is to incorporate policy advocacy into your BBZ strategy, as described in Phase 4. As part of the resident issue identification process, BBZ staff can work with partners to determine the link between a local, regional, or state policy and the issues that families within that Zone are facing.

See **Appendix J** for questions related to these strategies that can guide your sustainability planning process.





5.5 Document the Strategy: Once you have completed the above steps, consider documenting your strategy in a **logic model** format to outline overarching goals and the direction of your BBZ (see the Community Tool Box guidance on developing a logic model).^{6,7} You can then create a **scope of work** that describes what you will accomplish within a given timeframe. Your BBZ strategy is not a static document. The realities of your community, transitions in the staff and residents, and shifts in the local and broader political climate will likely affect your BBZ strategy over time. Continued engagement with the questions and approaches described in Phases 1 through 4 is necessary to be responsive to these evolving realities. Additionally, the implementation of your strategy will lead to change. Base your strategy on the reality of your resources and those of your partners. As new resources are identified, as activities are institutionalized, and as evaluation reveals successes and challenges (see Phase 6), your strategy can shift. What is most important is that your strategy is meaningful and actionable for resident and organizational partners.

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Phase 6: Plan for Evaluation



Measurement is an important component of any social change initiative. Programs use evaluation to monitor and assess incremental change over time to further improve program development and determine impact.¹ Yet, evaluation can be one of the most challenging parts of a BBZ. Zones are complex community settings subject to internal and external influencers beyond BBZ efforts. Evaluation also requires time, staff, and funding resources. Most importantly, the BBZ approach focuses on improving upstream community conditions in small neighborhood areas. As such, it may take decades to demonstrate significant improvements in birth outcomes in the Zone. Thus, measuring success requires multiple methods for assessing progress toward the long-term goal of reducing racial inequities in birth outcomes. What follows are a few steps to take when planning for evaluation of your BBZ. Note that because this section is related to planning for evaluation, it does not include information on implementation or analysis.

6.1 Identify Who Will Design and Conduct the Evaluation: The first step of evaluation is to determine your capacity to plan and implement an evaluation plan. Identify individuals with experience and expertise in program evaluation. This may include individuals who are part of the Zone such as those employed at the backbone organization or at multi-sector partner organizations. Local colleges and universities may be able to provide some in-kind evaluation support, or if resources are available, you could contract with an evaluation agency. Involving these individuals or organizations upfront ensures the evaluation is built into the program design, so that you can measure and track progress early on.

6.2 Develop an Evaluation Plan that Meaningfully Involves Residents: Before you dive into evaluation activities, take some time to plan the evaluation design. This includes outlining the overarching goals and timeline of the evaluation, as well as determining how key decisions will be made. There is a long history of researchers coming into communities, extracting the information they need, and ignoring the needs, preferences, and ideas of the people who live there. To avoid perpetuating this history of disrespect and subjugation, involve residents in as many aspects of the evaluation as possible. To share power equitably with residents throughout the evaluation, it can be valuable to convene a resident evaluation advisory group to inform the evaluation plan and research questions, and to contribute to data collection, analysis, and reporting throughout the steps outlined below.



6.3 Choose an Evaluation Design: Consider employing a developmental evaluation design that includes both process and outcome evaluation. **Developmental evaluation** emphasizes immediate feedback to program staff, thus facilitating a continuous development loop and allowing for course correction where needed. **Process evaluation** focuses on whether you implemented a program as intended and the factors that influenced implementation. **Outcome evaluation** assesses the effectiveness of your work and whether anything changed.² See **Appendix K** for possible questions to ask in process and outcome evaluation.

6.4 Create a Roadmap: With outcome evaluation, it is important to think early on about when you might realistically see the impact of your activity. A BBZ seeks to achieve racial equity in birth outcomes. This may take decades to realize. Along the way many things must change to ultimately reach that goal. Therefore, an outcome evaluation often includes short-term, medium-term, and long-term outcomes to illuminate the pathway to the goal and set some achievable targets in between. Draft a blueprint of this path by developing a **logic model** or a **theory of change** to outline the change you expect to see and wish to evaluate (See Phase 5). You might also have facilitated conversations or develop shared agreements with partners about the outcomes you hope to reach, indicators of interim success, and to determine whether there is any existing data that you could use to help measure change in the Zone. To establish these agreements, you might ask “how will we know if we reach our intended outcome?” and “how will we know if we are on the way there?” Early, visible wins are important. Your roadmap can help you stay on watch for these wins.

6.5 Identify Outcomes: Draw from the priorities and aligned actions that you established to identify projected short-, mid-, and long-term outcomes. Outcomes can relate to both your process and outcome evaluation questions. See the BBZ Outcomes House in **Appendix L** for a summary of the strategies and outcomes for a BBZ over 10 to 20 years that may lead to the ultimate goal of reducing inequities in infant mortality in a Zone.

6.6 Determine Methods to Measure Change in Outcomes: Based on your determined outcomes, identify the metrics you will use to measure progress toward your expected outcomes and how those metrics can be measured. Ensure well-rounded assessment of progress toward your outcomes by using a **mixed-methods** approach and multiple tools that include both quantitative and qualitative data collection. Some measurements require **quantitative data**, including birth outcome, health outcome, and socioeconomic data—all important for tracking health and the social determinants of health over time (see Phase 1 for examples of secondary data to collect). Some measurements require **qualitative data**, including understanding the processes behind multi-sector partnership development and social cohesion, and capturing the experiences and perceptions of residents within the Zone. Valuing nontraditional forms of evaluation—such as photovoice and storytelling—can be a powerful way to honor community voices and to measure things that matter. See the Data page of the BBZ website for examples of both qualitative and quantitative data collection methods that the BBZ Initiative has used in its evaluation.³



6.7 Secure Institutional Review Board Approval: Prior to conducting primary data collection in communities, it is a good idea—and sometimes required—to have your evaluation plan and tools approved by an Institutional Review Board (IRB). It is important to be cautious when collecting potentially sensitive data in communities that are often subject to over-study and inequitable research practices. Approval from an IRB will help to ensure that the people you approach for data collection are treated ethically. Be particularly sensitive to the history of researchers “studying” disinvested communities without regard to the impacts of data collection and without sharing the results with respondents.

6.8 Implement the Evaluation Plan. As you conduct planned evaluation activities, keep in mind that evaluation is a cyclical learning process. You may need to make ongoing changes to your programs, and as such, your evaluation. As key findings emerge through evaluation activities, share the information with all key stakeholders so that data that came from the community may benefit the community and to ensure that your interpretation of findings resonates those working and living in the Zone.

Attribution versus Contribution: Programs happen in dynamic communities—communities that are influenced by other social change projects, local and national economic and political shifts, family and personal changes, and more. Thus, it is challenging to claim that your organization or program caused the observed outcome, also known as demonstrating a “causal link”. However, it may be the case that your efforts had a part to play in the observed outcome.⁴ Because of the non-experimental setting in which the BBZ programs and evaluation occur, use a mixed-method developmental evaluation framework to understand how multiple factors, including BBZ strategies, play a role in shared outcomes. As you start your BBZ, it can be helpful to set expectations with partners by discussing how to evaluate the work and comply with reporting obligations to funders. Consider how can each organization in the BBZ collaborative can report on its unique contributions *and* acknowledge that individual efforts have an effect that is larger than the individual efforts combined.

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Conclusion

The journey of a starting BBZ is dynamic and challenging. The Six Phases described throughout this guide—1) Select a Zone; 2) Build a Multi-Sector Collaborative; 3) Collaborate with Residents and Build Resident Leadership; 4) Strengthen Social Movements; 5) Establish a Zone Strategy; and 6) Plan for Evaluation—each have their own challenges and complexities. As your BBZ grows, return to this guide to ground yourself in the origins of your efforts and to regroup in times of change. The work of starting, growing, and sustaining a BBZ is challenging, complex, non-linear, and ultimately worth it. Your BBZ will bring together organizational and resident partners around the vision of developing a community where all babies thrive and reach their full potential. Now, go make that vision a reality.



Appendices

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Appendix A - Indicators for Zone Selection (Phase 1.3: Dive into the Data and Identify Disparities)

Community Demographics

| 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 | | |
| Number of women of reproductive age (15-44) | | |
| Number of children <5 years | | |
| Number of births per year | | |

Community Conditions

| 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% Federal Poverty Level | | |
| 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 – Online Resources for Health and Social Determinants Data (Phase 1.3: Dive into the Data and Identify Disparities)

[Annie E. Casey Foundation Kids Count Data Center](#): This data aggregation resource allows you to learn about a wide variety of indicators (demographic, economic, education, community, and health) in any state, often down to the level of the Congressional Districts. You can also search by topics and population characteristics.¹

[Association of Maternal and Child Health Programs Life Course Indicators Online Tool](#): This tool includes health indicators at all points across the life course, as well as indicators of economic and community well-being.²

[Bay Area Regional Health Inequities Initiative Social Determinants of Health Indicators](#): This guide focuses exclusively on indicators related to the social determinants of health rather than the health outcomes themselves, and includes guidance on how to collect and analyze data on the economic, service, social, and physical domains.³

[Centers for Disease Control and Prevention 500 Cities project](#): A collaboration between the CDC, the Robert Wood Johnson Foundation, and the CDC Foundation, this project provides city- and census tract-level estimates of chronic disease risk factors and health outcomes for the largest 500 cities in the United States.⁴

[Centers for Disease Control and Prevention Community Health Status Indicators](#): This interactive online tool generates a report card for counties, showing how they compare on health measures like morbidity, health care access, and health behaviors, as well as environmental and community factors like access to parks, housing costs, and crime.⁵

[Community Commons Map Tools](#): This interactive mapping tool allows you to layer together thousands of indicators to begin identifying “hot spots” for poor health and community well-being.⁶

[Robert Wood Johnson Foundation’s County Health Rankings and Roadmap](#): This resource ranks counties by health outcome and health factor data representing a variety of resources and factors. It includes helpful visual maps and figures to show trends over time for county, state, and national comparisons.⁷

[Robert Wood Johnson Foundation’s Culture of Health Outcomes](#): These indicators look at a broad definition of health that includes community well-being and resilience, focused in three areas—individual well-being, managed chronic disease, and reduced health care costs.⁸

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Appendix C – Cohort 1 Zones at the Start (Phase 1.5: Make the Selection)

This section highlights some of the key characteristics that contributed to the selection of the Cohort 1 Zone neighborhoods. For more information on the neighborhood-level indicators explored for each Zone, visit the Data page of the BBZ Initiative website to view the BBZ Secondary Data Dashboard and the BBZ Evaluation Reports.¹

BBZ Castlemont: BBZ Castlemont in Oakland, CA, comprises one 7-by-12 block census tract with about 5,000 primarily African American and Hispanic/Latino residents and about 100 births a year. Compared to Alameda County, Castlemont experienced a high prevalence of preterm births and low birthweight births based on 2008-2010 averages (13.2% versus 9.3% and 11.5% versus 7.3%, respectively). While the census tract simplifies data collection, both residents and staff recognize that Castlemont extends beyond this administrative boundary and residents from the general area are encouraged to get involved. Challenges such as high rates of poverty and unemployment, and assets such as the existing community momentum in Castlemont from local community organizations and other community initiatives, were important in the selection of Castlemont as a Zone.

BBZ Hollygrove: BBZ Hollygrove in New Orleans, LA, covers approximately 0.75 square miles on the western edge of Orleans Parish, with about 6,500 predominantly African American residents and approximately 100-120 births per year. As compared with Orleans Parish, Hollygrove experienced a high prevalence of preterm births (16.5% versus 13.0%), low birthweight births (17.6% versus 12.3%) and infant mortality (14.2/1000 live births versus 8.2/1000 live births), based on 2008-2010 averages. The boundaries of the Zone include portions of four census tracts. By aligning with natural boundaries in the neighborhood (including a highway and a large arterial road) rather than with census tract boundaries, this Zone is a closer approximation of the neighborhood recognized by residents. Issues such as local environmental hazards along with the community's strong history of involvement in neighborhood improvement and alignment with existing Healthy Start efforts were all important in the selection of Hollygrove as the Zone in New Orleans.

BBZ Price Hill: BBZ Price Hill in Cincinnati, OH, includes 3 square miles of East Price Hill and 0.75 square miles of Lower Price Hill. This includes 16,000 residents of Price Hill and approximately 350 births a year. As compared with Hamilton County, Hollygrove experienced a high prevalence of preterm births (17.0% versus 13.7%), low birthweight births (11.3% versus 10.0%), and infant mortality (12.0/1000 live births versus 10.2/1000 live births), based on 2008-2010 averages. East and Lower Price Hill are the focus of this BBZ effort because indicators showed that the third part of the area (West Price Hill) did not face the same health and community challenges as East and Lower Price Hill. Residents of East Price Hill and Lower Price Hill recognize the distinct boundaries between these two communities, and local knowledge of the communities made it apparent that separate programming was necessary in each, for the Zone to successfully reach the broadest audience. High poverty rates as well as a diverse array of community efforts and core service partners were important in the selection of Price Hill as the Zone in Cincinnati.

Reference

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Appendix D – Additional Questions for Considering the History of Resident Engagement (Phase 3.1: Consider the History of Resident Engagement in the Zone)

It is important that one or more of your collaborative partners has a history of working with residents in the Zone. Residents of the Zone may also have a history of organizing to improve their neighborhood. Since you are not starting from scratch, take some time at the outset to reflect on the history of community engagement and community organizing in the Zone and any lessons learned from these experiences. Below are some questions for the multi-sector collaborative to consider to inform how it will work with residents and build resident power:

- **How does the collaborative define “residents”?** Do residents include only those living within the boundaries of the Zone, or those with other ties (school, work, family) to the Zone? How do residents of the Zone define their community? How do residents of areas outside of the neighborhood interact with the Zone?
- **How have residents historically organized themselves to improve community conditions?** How are residents already engaged in the Zone (e.g. neighborhood associations; clubs; community boards; taskforces; grassroots organizing efforts; community-based organizations; and community policing councils). What actions can the BBZ collaborative take to support existing resident-led initiatives, particularly those geared toward improving the neighborhood environment?
- **How have collaborative partners worked with residents of the Zone?** How are BBZ multi-sector collaborative members already partnering with residents? What has worked and what has not been as successful? How can the collaborative compliment successful efforts? What have partners learned about what does not work? Do most or all residents in a community have the opportunity to be involved in existing efforts? Are there groups of residents that are left out of these opportunities?
- **How does the collaborative define resident leadership?** What do collaborative partners value in leadership that emerges from the community? What do residents value in their community leaders? What leadership roles do residents already occupy in the Zone?
- **How can the collaborative create new opportunities for resident leadership?** What are some potential roles for resident leaders in the BBZ? How can the multi-sector collaborative work with residents to identify resident leaders? How might BBZ programs, strategies, processes, and systems be responsive to and inclusive of residents’ input, priorities, and leadership? What barriers might there be within collaborative member institutions and how might they overcome those barriers?

Appendix E – Principles for Community Engagement (Phase 3.2: Establish Collaborative Principles for Resident Engagement)

In the BBZ approach, community engagement is not a box to check off. It is a Foundational Strategy on which the potential success and sustainability of the BBZ is built. Drawing from community engagement and community-based participatory research approaches, the BBZ approach emphasizes the following principles for community engagement.^{1,2,3,4} You may wish to adapt these principles to suit the experiences and vision of your collaborative. Ideally, Zone-specific Principles can be developed through discussion with your core partners and put into action through cooperative agreements.

Strive for transparency and honesty: Lead with honesty about the purpose, limitations, and potential impact of your community engagement activities. It is equally important to be clear about your role and motivations. For example, if you invite residents to advise on a new project and ultimately disregard their suggestions (or create opportunities for resident recommendations when there is not much room for change), it may appear to residents that your attempts at community engagement are insincere. Do not promise what you cannot deliver and be prepared to receive candid feedback with humility.

Acknowledge power dynamics: All individuals have inherent power, but structures, systems, and people may constrain or promote a person's power. Acknowledgment of how power dynamics influence individuals and relationships is key to establishing and maintaining meaningful, equitable partnerships. In your interactions with residents, you may be in a position of power with respect to your organizational position, income, race, gender, age, education, or another factor. As a representative of an organization, keep in mind that your organization may carry a legacy in the community that precedes you. Recognize your power and privilege, reflect on the effect of your power and privilege in your interactions, and determine your steps to strengthen resident power, especially among those most marginalized. This involves ongoing reflection, critical feedback, and dialogue that may take you out of your comfort zone.

Put respect at the center: When carrying out community engagement activities, always maintain respect for residents' time, broader sphere of commitments, expertise, and perspective. Ensure that respect permeates every aspect of your BBZ work. Materially, you might show respect through the location where an event is located, the time it is held, or by the provision of food, childcare, interpretation services, accessibility support, or modest compensation for time and effort. Show respect by involving residents in the planning, execution, and follow-up of an event. You can also show respect by viewing individuals as whole human beings with multiple identities, connections, and experiences and avoiding assumptions of what it means to be a resident of the Zone.

Let cultural humility drive your work: Distinct from the idea of "cultural competence," cultural humility emphasizes that each BBZ partner must strive to critically reflect on their own culture, power, and privilege. Cultural humility means recognizing that everyone is a "lifelong learner" and demonstrating a desire to create meaningful relationships with people who may come from different backgrounds. Closely related to the principles on power and respect, this principle emphasizes the need to build cultural humility into every community engagement activity. It also underscores the importance of resident involvement in BBZ development, planning, implementation, and evaluation.

Acknowledge that participation is voluntary: Borrowing from the ethics of human subjects research, resident participation in any community engagement effort must be completely voluntary. This means prohibiting the use of manipulative or coercive measures to encourage participation (such as financial incentives that are so high it would be nearly impossible for someone in a difficult financial situation to turn it down). Participants must also be fully informed about any potential risks associated with their involvement (especially for more marginalized residents of the Zone) and must be allowed decline an offer to participate without fear of negative repercussions.

Endeavor to engage diverse residents: Often organizations reach out to residents who are most easily engaged. While working with community leaders who have the trust and support of their neighbors and friends can be of tremendous value, it is equally important to seek out the perspectives, ideas, and participation of those who may not be as outspoken, engaged, or confident in their leadership abilities. This will help ensure that your work is responsive to a more inclusive, diverse group of residents. No one individual can speak for an entire group. This is especially important in areas where gentrification is underway. While full engagement of every Zone resident may not be possible, it is a worthy goal.

Institutionalize roles for residents: BBZ community engagement efforts are part of a long-term commitment to supporting transformative community change in the Zone. Consider how to institutionalize community voices in your organization, BBZ multi-sector collaborative, and in broader systems of power throughout the neighborhood. For example: hire residents for positions within your organization; advocate for resident board and advisory positions within other institutions and organizations; and support resident-driven actions within the Zone that align with your BBZ strategy.

Practice flexibility and openness: To ensure that community engagement is meaningful, it is important to prioritize the issues of greatest importance to residents and to respond to resident recommendations through action. Practicing flexibility will position you to follow-through on the needs of the community. It is equally important to recognize where you cannot be flexible—where external circumstances and structures prevent you from changing course as easily—and to be upfront about those limitations (see the transparency principle).

References


- 1 Tervalon, M., & Murray-Garcia, J. (1998). Cultural humility versus cultural competence: a critical distinction in defining physician training outcomes in multicultural education. *Journal of health care for the poor and underserved*, 9(2), 117-125.
- 2 Minkler, M., Rubin, V., & Wallerstein, N. (2012). *Community-based participatory research: A strategy for building healthy communities and promoting health through policy change*. Oakland, CA: PolicyLink.
- 3 Arnstein, S. R. (1969). A ladder of citizen participation. *Journal of the American Institute of planners*, 35(4), 216-224.
- 4 KU Work Group for Community Health and Development. (2017). Chapter 7, Section 1: Developing a plan for increasing participation in community action. Retrieved from <http://ctb.ku.edu/en/table-of-contents/participation/encouraging-involvement/increase-participation/main>

Appendix F – The BBZ Adapted Community Engagement Continuum (Phase 3.4: Identify a Range of Roles for Residents)

Table 5 illustrates the spectrum of roles that residents can play in advancing the goals of the BBZ, and the role that organizational members of the BBZ multi-sector collaborative might play accordingly. From the least intense level of involvement to the most intense, the roles for residents include participant, informant, advisor, partner, and leader. A participant might attend an event to learn about BBZ whereas a leader drives an effort and invites others to support it. Note that the higher intensity roles (e.g. partner and leader) will involve more time, resources, and strategy on the part of all parties.

Table 5: The BBZ Adapted Community Engagement Continuum

| | Resident as... | | | | |
|---|--|--|--|---|---|
| | Participant | Informant | Advisor | Partner | Leader |
| Resident role | Attends event or meeting and learns and participates | Provides their perspectives on specific issues or strategies | Actively engages in the creation or implementation of parts of a project | Ongoing, equal collaborator through all parts of a process or project | Leads an effort and invites others to support |
| Example of resident in this role | <i>Attendee at a community meeting</i> | <i>Interviewee for community assessment</i> | <i>Participant in an advisory board</i> | <i>Formal member of BBZ steering committee</i> | <i>Lead organizer of an advocacy campaign</i> |
| Corresponding BBZ organizational member role | Provides resident with information and opportunity for participation | Solicits resident's perspectives | Facilitates resident's active engagement | Ongoing, equal collaborator through all parts of a process or project | Invited to support an effort led by resident(s) |

Increasing levels of intensity, trust, and impact 

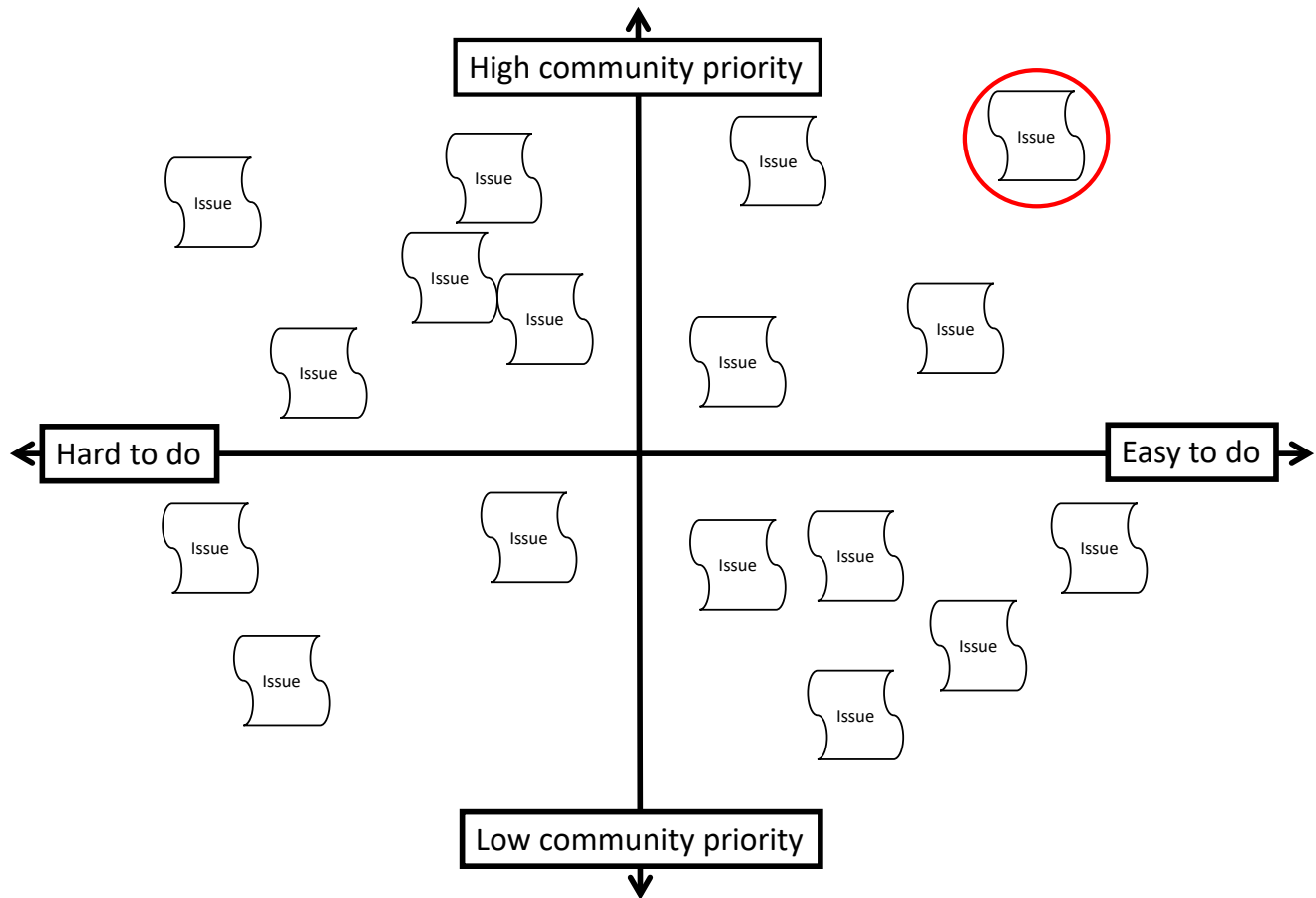
Reference: Inspired by the Principles of Community Engagement's adaptation of the model by International Association for Public Participation and The ACQUIRE Project's Active Community Engagement Spectrum

Appendix G – 2 x 2 Matrix (Phase 5.2: Select Priority Issues)

The 2 x 2 Matrix is a tool to help you organize and priorities ideas.¹ This tool makes priorities explicit, which may help to spur group discussion and enable collaborative decision-making. Once you have generated a list of possible resident priority areas, use this visual diagram below to help organize your thoughts and identify where you might want to begin. The steps are as follows:

1. Label the axes based on how you want to consider your priorities (for example, the vertical axis may range from “low community priority” to “high community priority”, and the horizontal axis may range from “hard to do” to “easy to do”).
2. Sort the list of ideas based on the labels of the axes.
3. Based on how you want to take the next step (for example, begin with “high community priority” and “easy to do” ideas to strive for an early win), discuss with your BBZ partners and identify potential priorities on which to focus.

This process can be done in multiple rounds to narrow down the choice further. Consider having different stakeholders participate in different rounds of the 2 x 2 matrix activity as different people may rate ideas differently.

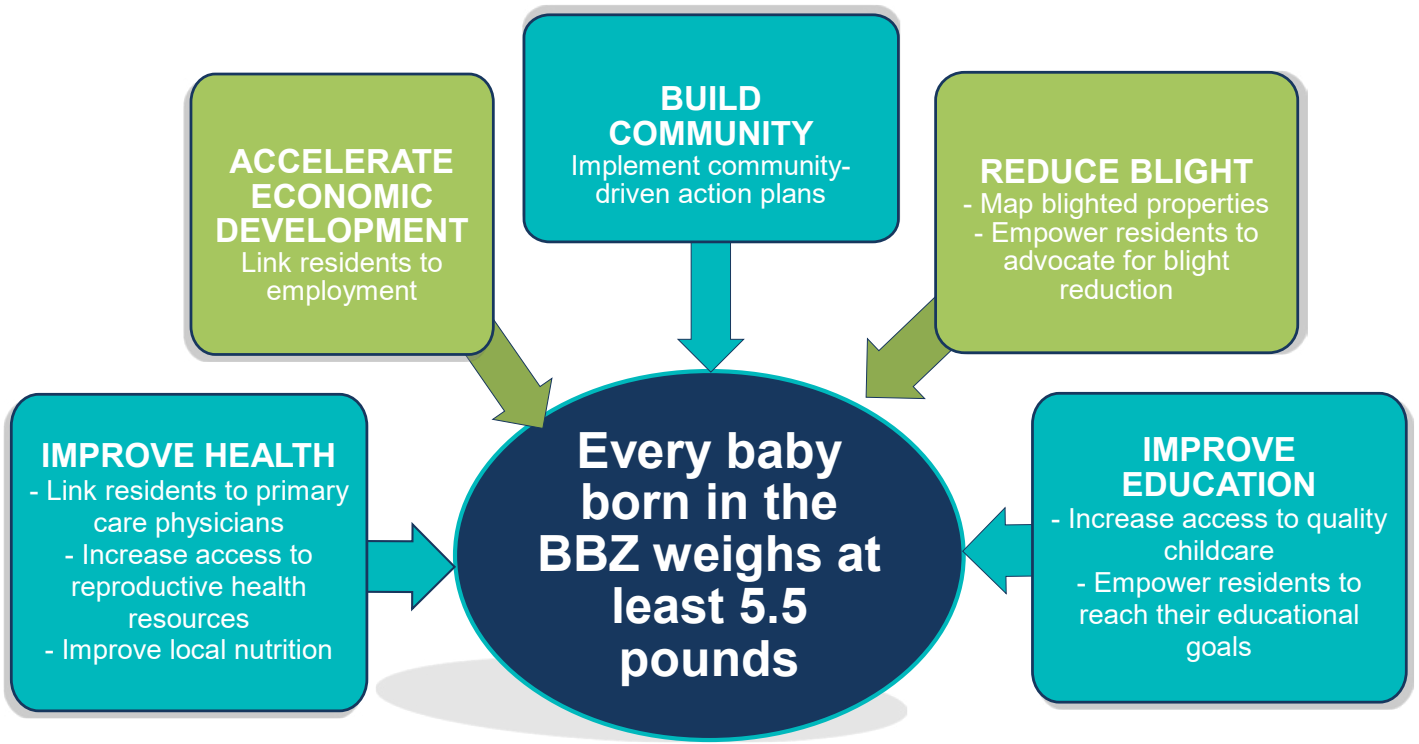


References

1 Stanford University d.school. (n.d.). 2X2 Matrix. The K12 Lab Wiki. Retrieved from https://dschool-old.stanford.edu/groups/k12/wiki/29e5a/2X2_Matrix.html.

Appendix H – BBZ Hollygrove Priority Setting and Actions (Phase 5.2: Select Priority Issues)

Each Cohort 1 BBZ selected priority issues in the Zone and preliminary steps towards addressing those issues based on input from partner residents, partner organizations, and key issues in the community. BBZ Hollygrove decided to focus on reducing low birthweight births as a key intermediate outcome. They then identified five domains that they could simultaneously work on to reduce low birthweight births in the Zone. The model below shows those five domains and first steps they took in each of those domains.



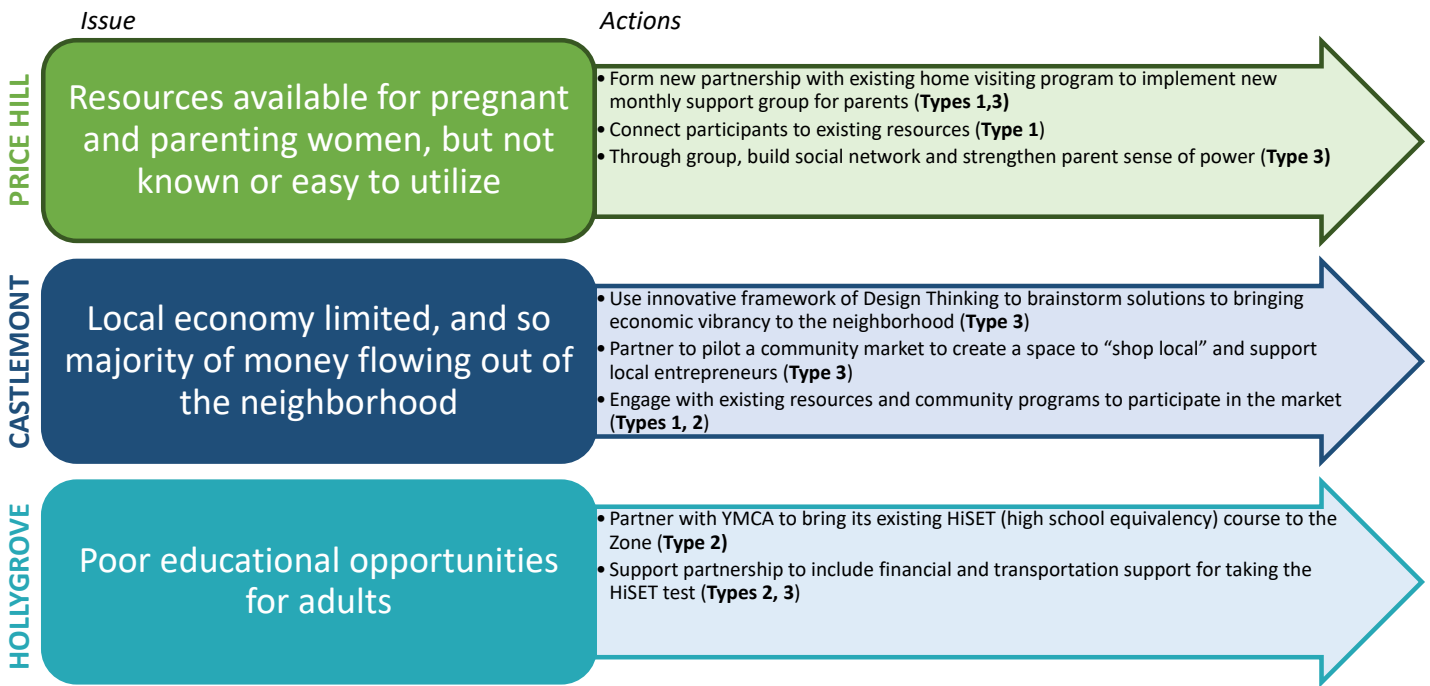
The backbone organization in BBZ Hollygrove is Healthy Start, in partnership with the Public Health Department. To align with existing efforts, the BBZ Hollygrove strategy incorporates some of the work that Healthy Start was already doing to address other social determinants of health.

Appendix I – Cohort 1 Zones: Issues to Actions (Phase 5.3: Identify Aligned Actions)

To help illustrate how a BBZ might move an issue to actions, the following graphic describes examples from each of the three Cohort 1 Zones. Three types of action emerged from the Cohort 1 BBZs:

- **Type 1:** Connecting people with existing resources in the BBZ
- **Type 2:** Bringing in existing opportunities that are outside of the BBZ
- **Type 3:** Launching new ideas for the BBZ

While the issues and actions may seem logical, the process of both identifying the issues and determining the best course of action for each involved a thoughtful process. Cohort 1 BBZ staff engaged with partners; maintained a focus on health equity, racial justice, human rights, and reproductive justice; considered how community power and community leadership would be addressed through the programs; and maintained focus on both the needs and the assets in and around each BBZ. In that way, the actions taken and issues addressed tie back to the Foundational Strategies introduced in Phases 1 through 4, even as the Cohort 1 Zones moved into Phase 5.



- Type 1:** Connect people with existing opportunities in the Zone
- Type 2:** Bring in existing opportunities that are outside of the Zone
- Type 3:** Launching new ideas

Note: To learn more about Design Thinking (referenced in the visual), check out IDEO.org’s [Field Guide for Human Centered Design](https://www.ideo.com/field-guide-for-human-centered-design).¹

References

1 IDEO.org. (2015). The field guide to human-centered design. Retrieved from <http://www.designkit.org/resources/1>

Appendix J – Questions for Sustainability Planning (Phase 5.4: Create a Sustainability Plan)

At the local level, work with partners to determine the end goal or structure of your collaborative. While the path there may not be initially clear, it is useful to consider the destination. As you begin each project or effort, consider the following questions in conversation with staff, partners, and residents:

- How does our work relate to work that has already happened in the Zone? What lessons can we learn about how those efforts were or were not sustained?
- Are there potential connections between our work and policy debates? How might we build on that connection for sustained change?
- What lasting impacts might come from an isolated project or program? How can we ensure, enhance, or evaluate those impacts?

To determine how the “**institutionalizing the BBZ approach**” sustainability method fits with your strategy, you may ask:

- Does this organization’s mission and vision resonate with the direction of the BBZ approach?
- Over time, are there ways to integrate the BBZ approach or Foundational Strategies into the funded work at the identified institution?
- What parts of the BBZ Foundational Strategies are already part of their existing programs?

To determine how the “**promoting systems change**” sustainability method fits into your strategy, you may ask:

- Which agencies or organizations have opportunities for systems improvement that offer the potential for being institutionalized?
- How might you incorporate the BBZ approach into the existing systems in the Zone? How might you influence broad, long-term changes in the community?
- When you consider the root-causes of priority issues, can you trace the issue back to a specific system within your community? How might you focus your efforts on addressing that root cause over time?

To determine how the “**developing resident leaders**” sustainability method fits with your strategy, you may ask:

- Are there ways to support residents in developing their own organizations, businesses, or programs based on their priorities?
- Are there ways in which our own organization can hire resident leaders to drive our work or other areas of work within the organizations? What opportunities exist for resident leaders to serve on organizational boards? What efforts are necessary to encourage this to happen?
- Are there existing opportunities for residents to affect change at the policy or systems level in the community? Do all residents have access to those opportunities? How might we support increased access to those opportunities?
- Are there trainings or educational opportunities that could support resident leadership development?

To determine how the “**shifting the policy landscape**” sustainability method fits with your strategy, you may ask:

- Are local elected officials open to working on progressive, equity focused issues?
- Are there policies at the local, county, state, or federal level that are the root causes of residents’ priority issues? How might you prioritize efforts to shift those policies throughout your BBZ?

Appendix K – Process and Outcome Evaluation Questions (Phase 6.3: Plan for Evaluation)

The BBZ Initiative uses a developmental evaluation design that includes both process and outcome evaluation activities at the zonal and national levels. **Developmental evaluation** emphasizes immediate feedback to program staff, thus facilitating a continuous development loop and allowing for course correction where needed. **Process evaluation** focuses on whether you implemented a program as intended and the factors that influenced implementation. **Outcome evaluation** seeks to assess the effectiveness of your work and whether anything changed as a result. Below are some potential questions to consider as you plan for evaluation in your BBZ.

Process Evaluation Questions: Questions that may be part of a process evaluation include the following:

- Did the program take place? What was different from our original plan?
- How many people participated in the program? How does that number compare to our goal number of participants?
- Who participated in the program? Were these the people we had hoped would participate?
- Did we do all the activities we had planned to do? If not, why not? If so, were people satisfied with those activities? What did they like or not like about the activities?
- Did the activity produce the product we hoped it would (for example, if the goal of the activity was to create a mural, did we create that mural)? If not, why not?
- Did resident and organizational partners participate in developing the program as intended? How did they participate?
- How much did the program cost? Was this more than what we intended? Why?

Outcome Evaluation: Questions that may be part of an outcome evaluation include the following:

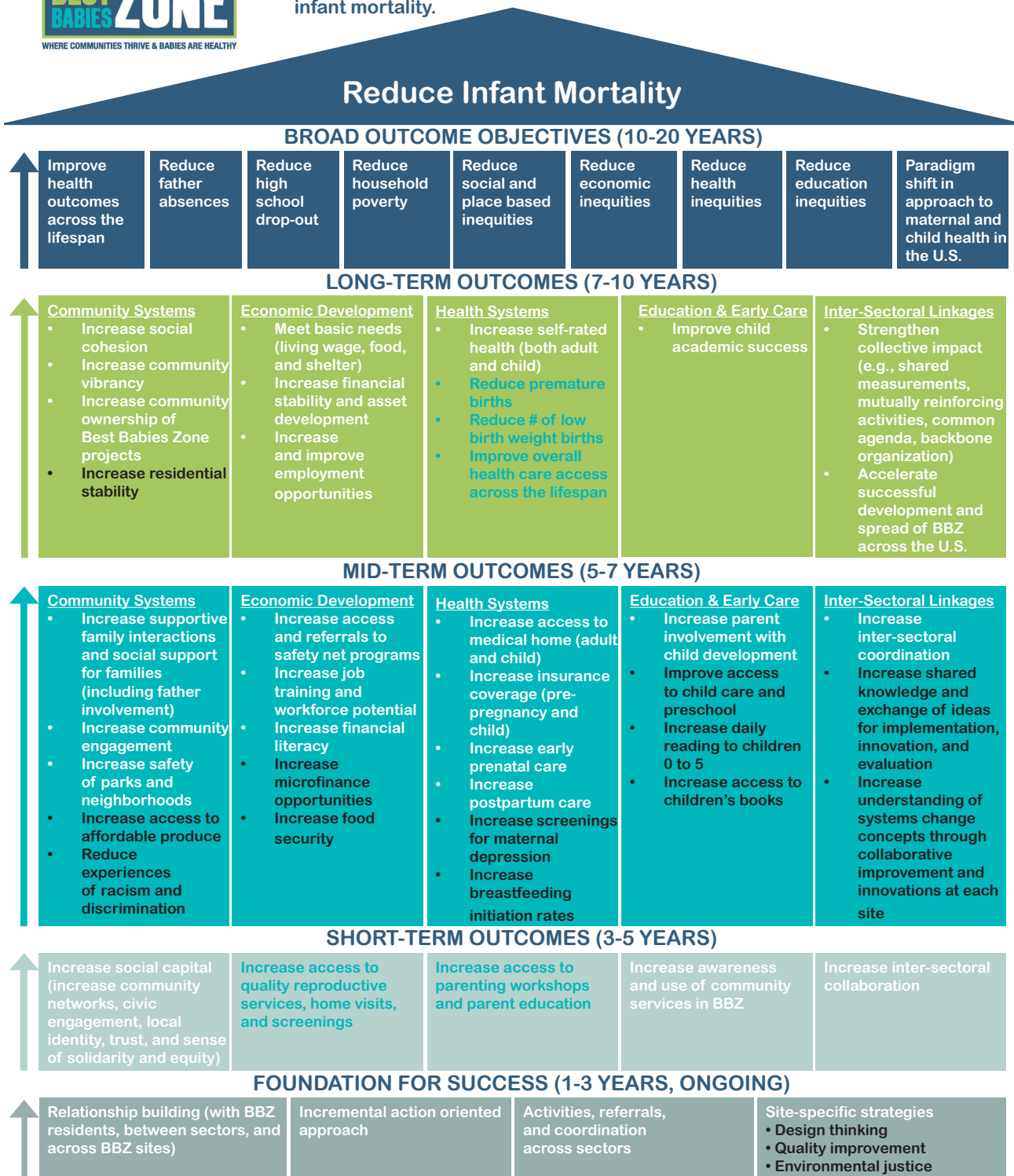
- Did people learn something new from our program?
- Did people's attitudes, knowledge, or beliefs change because of our program?
- Did people begin doing something different because of our program?
- Have residents accessed a resource more frequently because of your program's efforts?
- Are partners who participated in planning the program better able to talk about Life Course Perspective in their organizations? Are their organizations making specific changes to their work based on understanding the Life Course Perspective?
- Do residents who helped to design the program express an enhanced comfort with program design?
- Have residents who participated in your leadership development program joined the boards of local nonprofits related to their interest areas? Have residents who participated in your leadership development program begun their own efforts in the community?
- Did a policy change because of our campaign? If not, why not? If so, what specifically helped that happen?

Appendix L – The BBZ Initiative Outcomes House (Phase 6.5: Plan for Evaluation)



Best Babies Zone Evaluation Outcomes¹

This overview document presents the incremental outcomes that the Best Babies Zone Initiative is working towards in our efforts to address and reduce infant mortality.



¹While BBZ is working to reduce infant mortality, there may not be identifiable changes in every outcome listed in this document.

Key
 Item applies to all sites
 Item is site-specific
 Outcome is key indicator of progress toward reducing infant mortality

