Bridgeport Baby Bundle Ecosystem

BRIDGEPORT PROSPERS

ALLISON LOGAN - EXECUTIVE DIRECTOR
Bridgeport..... “A city in trauma”
Bridgeport, Connecticut

- Population: 145,934
- Children 0-3: 8,272
- Annual Births: ~2000

- Surrounded by the wealthiest cities/towns in the state and the nation.
- 64% Children 0-17 in low income households
- 63% births are Medicaid funded
- Student achievement gaps are the largest in the state
- A collective impact StriveTogether site since 2012
Area Deprivation Index (ADI)
Measures social vulnerability (Adverse Community Experiences)

17 indicators (income, employment, education, health, housing, violence, basic needs)
CAN Landscape Analysis- Community Assets and Needs
This work began in Bridgeport, CT with some alarming data...

- 14% of 5th graders proficient in math
- 24% of 3rd graders reading at level
- 3 in 10 entering K school ready
- 75% of three-year-olds enter Head Start BEHIND
- 21% no or inadequate prenatal care
- 63% of the city’s 1800-2000 yearly births Medicaid funded
What if.....

...All babies and their moms experienced a healthy and supported pregnancy and birth...

...All families, caregivers and neighborhoods were safe, supported, thriving and resilient...

...All children are healthy and on-target developmentally at three...

The Bridgeport Baby Bundle Ecosystem Framework
EARLY CHILDHOOD DEVELOPMENT IS A SMART INVESTMENT

The earlier the investment, the greater the return.

Source: James Heckman, Nobel Laureate in Economics
Cross-Sector Community Partners

**Common Goal**
Healthy and Ready by age 3

**Home Visiting**
- Child First
- Child and Family Guidance (NFP)
- Bridgeport Hospital (PAT, MIECHV)
- St. Vincent’s

**Basic Needs - Housing/Food**
- Supportive Housing Works
- The Connection
- Green Village Initiative
- Food Policy Council
- Council of Churches

**Community - Based Services**
- Over 40+ programs and organizations city-wide including Faith, Grass-roots, Advocacy, Youth, Community Organizing, Community Advocates, Business leaders

**Infant/Toddler Education**
- All Our Kin
- Early Head Start/ABCD
- YMCA

**Healthcare**
- **Bridgeport Hospital**
- St Vincent’s Hospital
- Optimus Health (FQHC)
- **Southwest Community Health Center (FQHC)**
- Health Improvement Alliance (HIA)
- Bridgeport Department of Health

**Higher Education**
- Sacred Heart University
- University of Bridgeport
- Fairfield University
- Housatonic Community College
- Yale

**State and National**
- Office of Early Childhood
- DSS, DPH, OHS
- Center for Social Policy
- Institute of Child Success
- Reach Out and Read
- Sparkler
- National Interoperability Collaborative
- Strive Together
- Pritzker Children’s Initiative

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Bridgeport Baby Bundle Ecosystem

There is no single program that can increase health and development outcomes for ALL children prenatal-3 in Bridgeport, but collectively, we can....

1. Become Neuroscience informed: Start early, focus on adult-child relationships

2. Create a Bundle of Strategies with simultaneous actions to build better systems

3. Implement and Manage with data for results accountability
Vision, Focus, and Primary Goals

What We Know and Who We Are

Knowledge and Science
- Developmental Neuroscience of Trauma to Resilience
- "What Works? for Practice, Programs, Policy & Systems
- Implementation Science
- Rapid-Cycle Work

Relationship-Driven, Culturally-Respectful Participation
- "Nothing about us without us"
- People
- Neighborhoods
- Organizations
- Community
- Collaborations
- The Rule of "P"

What We Want and How to Build It: Core Community Strategies

1. Care and Support for Parenting (EB Programs)
2. Deep Neighborhood Engagement and Innovation
3. An Army of Helpers and Advocates
4. Collaborative Service Networks and Trauma-Informed Practice
5. Operationally Strong and Healthy Organizations
6. Data to Track Change and Measure Outcomes
7. A Resource Investment Portfolio

Protective Factors
1. Basic Needs Met
2. Parenting Knowledge and Skills
3. Social Networks
4. Social-Emotional Development
5. Parental Resilience

Policy & Systems Levers
- Equity and Justice, Scalability & Sustainability

Our Expected Outcomes

Healthy Births and On-Target Child Development at Age Three
- Strong Parent-Child and Child-Family Relational Health and Resilience
- Adult Education, Workforce and Economic Success
- A Resilient Community with Strong Social Capital

Bridgeport Baby Bundle Theory of Change: invite. Engage. Empower. Evolve...
**Outcome Goal**

**Key Drivers**

**Universal Screenings:** Universal screenings and ongoing assessments that focus on early identification and treatment of developmental delays in children (including vision, hearing impairments and behavioral health) as well as maternal/paternal depression and ACES to reduce depression, improve parent/child interaction and enhance child development.

**Early Intervention:** Provides services, education and support to infants and toddlers who have an identified physical or mental delay, disability, special need or whose risk factors place the child at high risk for delay.

**Universal Home Visiting:** For vulnerable families who are expecting a child, early and intensive support by skilled home visitors produces significant benefits for both the child and parents including the enhancement of parent/child interactions.

**Early Care and Education:** Participation in high quality, center or home based early childhood education programs has been demonstrated to enhance child cognitive and social development.

**Literacy:** Early Language and literacy develop at the same time, beginning at birth, with both visual and vocal exchanges between a child and caregiver. Children with books in their homes who are read to in the first years of life are more likely to read on grade level.

**Supporting Care and Parenting:** Resources, tools, outreach and access to universal parent supports based on the neuroscience of early child development.
The Baby Bundle Ecosystem is designed to promote **protective factors** and **positive childhood experiences** that increase caregiver and child **resilience**.

Coordinated care with existing HV models- Child First, PAT, NFN, MIECHV
We know that families with ACES often live in communities with ACES.
ACEs Connection is a social network that supports communities to accelerate the global ACEs science movement, to recognize the impact of adverse childhood experiences (ACEs) in shaping adult behavior and health, and to promote trauma-informed and resilience-building practices and policies in all institutions — from schools to prisons to hospitals and churches — to help heal and to develop a resilient Bridgeport.

Knowledge and Awareness Campaign

Click here for our new, live Community Resilience Alliance Website!
https://www.acesconnection.com/g/Community-Resilience-Alliance
Organizations That Have Received an ACEs Science Presentation

Select the Sector to Display

Sector:
All

Subsector:
All

Sector:
- Business
- Child Care
- Civic
- Community Service Organizations
- Community Initiatives
- Education
- Education 12+
- Emergency Responders
- Faith-based
- Funders
- Health
- Justice System
- Media
- Political Organizations
- Recreational Clubs and Organizations
- Social Services
- Youth Organizations
The McGivney Community Center’s mission for our youth is to provide stimulating and enriching programs that foster academic success and self-esteem. McGivney’s goal is to nurture youth’s intellectual, creative, and physical growth in order to promote success and expand their feelings of confidence, integrity and character.
• Five fun, simple, and powerful ways that every family can give every child a strong start.

• Encompasses what experts say is important for development from birth to age three. *Builds Relational Health!*

• Find a 4-minute video on each Basic at bridgeport.thebasics.org

• Distributed over **12,000 printed materials** through our **24 cross-sector partners**

• September 5th-Bridgeport For Babies Day! Press Conference in **partnership with City, Department of Health and Bridgeport Hospital**

[CLICK HERE for the Bridgeport Basics Theory of Change](#)
Bus and transit ads are reaching 79.3% of city residents.

Total media campaign (Bus, Transit, Social Media) 3.4 million impressions a month.
• New partnerships with FQHCs - Optimus/SWCHC = impacting **5,400** pediatric/OB patients 0-3 and their families
• Targeted **Google Platform** will run Basics videos and Bridgeport specific information in pediatric waiting rooms.

**Measurement**
• Pre and Post Caregiver Attitudes and Perceptions Survey through Pediatric EHR
• Tracking ASQ-3 scores

Text Messaging Supports available to parents this fall!
MOMS Partnership
Every Mother Matters

- Developed at Yale in 2011 (Evidence-Based)
- Mental health services delivered by clinician AND a Community Health Ambassador (a local mom) in neighborhood hubs
- Provides diapers and basic needs

Some Findings:
- 53% of moms reported a low level of social support
- 65.3% reported housing insecurity
- 65% reported food insecurity
- 39% screened at high risk for depression
- 57.1% reported inability to provide sufficient diapers

July 2019 Completed Bridgeport Moms Goals and Needs Assessment Overview - CLICK HERE
July 2019 Completed Bridgeport Moms Goals and Needs Assessment Full Report - CLICK HERE

Services developed from Needs Assessment begin in early 2020
Evidence-Based Early Literacy Supports in OB and Pediatric Well-Child Visits

- Parents are **2.5 times more likely** to read to their children
- Families are **2.5 times more likely** to enjoy reading together or have books in the home
- Children's pre-school language development is **improved by 3-6 months**

Currently serves 2,942 children a year in 6 clinics

Partnership with Southwest Community Health- Grant **awarded** from Child Health Development Institute (CHDI) in collaboration with StriveTogether grant to serve **2,465 more** children a year in all SWCHC clinic locations.

In total, this will be a reach of **5,407 children a year** in Bridgeport.

**Prenatal Project** in SWCHC OB clinics- books and supports at each visit

**Books for Babies** new Welcome Baby Board Book to every baby born in both birthing hospitals, with Bridgeport Basics information- **~ 2000 births a year.**
Key Driver: Universal Developmental Screening

Increasing ASQ-3 and Parental Support

Working with CHDI, OEC and Sparkler to pilot with pediatric providers at SWCHC
Doula Home Visiting
(in early implementation and planning now)

Promotes Health Equity and reduction of maternal mortality and low birth weight

• Can reduce the length of labor by about 25%
• Reduce women’s stress hormone production
• Cesarean risks are almost cut in half by about 50%
• Mothers are more confident and feel capable of giving birth and parenting a newborn, leading to a reduction in postpartum depression
• Mothers have less anxiety and a more positive attitude toward their baby and the father.
• Support Doula Bill 1078- Medicaid reimbursement
  • Task force created with the CT Commission on Women and Children

Did you know?

• African American women are three to four times more likely to experience a pregnancy-related death than white women.
• African American women are more likely to experience preventable maternal death compared with white women.
• African American women’s heightened risk of pregnancy-related death spans income and education levels
...and vastly improved data development and sharing
What’s Next????

Community Innovation Grant
*Invite Only

Health Enhancement Community (HEC)