Participatory Grantmaking in Action: Lessons Learned

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Agenda

1. The New Jersey Birth Equity Funders Alliance
2. Community Advisory Committee
3. Grantmaking
4. Reflections and Discussion
The Birth Equity Imperative

Because of historical and current racial inequities, Black and Hispanic women and infants have worse maternal and infant health outcomes.

Compared to White and Asian women in New Jersey...

- Black women are 69% more likely to have a preterm birth. Hispanic women are 25% more likely.
- Black women are 7x more likely to die from pregnancy-related complications. Hispanic women are 3x more likely.
- Black and Hispanic women are 4.5x less likely to have a postpartum checkup for themselves.

This data represents the real birthing people and families that we serve and was the inspiration behind the Nurture NJ Strategic Plan.
## Traditional vs Trust-Based Philanthropy

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<thead>
<tr>
<th>Traditional</th>
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<th>Trust-Based</th>
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<tbody>
<tr>
<td>Agenda-Driven</td>
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<td>Participatory</td>
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<td>“Disrupting” Government</td>
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<td>Accompany Government</td>
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<td>Project Support</td>
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<td>General Operating Support</td>
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<td>Investment in “Innovation”</td>
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<td>Investment in Capacity Development</td>
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<td>Cautious about Advocacy</td>
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<td>Promote Organizing</td>
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<td>Grantees</td>
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<td>Partners</td>
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<td>Work autonomously</td>
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<td>Work in Collaboration</td>
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<td>Urgent Time Frames</td>
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<td>Patient Philanthropy</td>
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<td>Accountability</td>
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<td>Trust-Based</td>
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Alliance Overview

VISION
Reduce maternal mortality in New Jersey and eliminate racial disparities in birth outcomes.

MISSION
Support community-based solutions and BIPOC-led organizations to lead efforts to address maternal mortality and birth equity in New Jersey, serving as a model for the wider field.

INTENDED OUTCOMES

Short-term: Increased availability of and access to CBO services targeting the needs of BIPOC birthing people

Long-term: Increased accountability in the system for birth outcomes and racial equity in outcomes

Guiding Principles

Focus on racial equity
Collaborating, Learning and Co-Design
Community and CBO-First Approach
Mutual Accountability

New Jersey Birth Equity FUNDERS ALLIANCE
Alliance Programming

We partner with a Community Advisory Committee, the Office of the First Lady, the Department of Health and Health Hubs to build strategies and execute programming.

COMMUNITY ADVISORS

1. CBO Insights
   - Funding participatory research about CBOs and birth equity in New Jersey
   - Learning community with other, national birth equity partners.

2. CBO Technical Assistance
   - Providing technical assistance to community-based organizations

3. Community Advisory Fund
   - Funding CBO’s operational and programmatic needs
   - Building the power and capacity of BIPOC birth equity leaders

4. Rapid Response Fund

COORDINATION WITH DOH AND HEALTH HUBS

5. Nurture New Jersey Director
   - Sponsoring a director to lead the implementation of the Nurture NJ strategic plan

FIRST LADY’S OFFICE

New Jersey Birth Equity FUNDERS ALLIANCE
Launching the CAC

1. **(Re)Commit to Goals**
   - Empower those with both professional and lived experience
   - Create a cohort with geographic and professional diversity
   - Make participation viable for busy professionals; respect and pay for time

2. **Solicit and Select Members**
   - 5 question application, can be completed in an hour, using Google forms
   - 30+ applicants submitted for review by a NJBEFA committee

3. **Support Operations**
   - Senior Manager
   - Fiscal Sponsor

4. **Provide learning opportunities**
   - Stipends for Conferences
   - Presentations on issues that impact birth outcomes
Participatory Grantmaking

The Community Advisory Committee was built upon the following participatory grantmaking principles:

1. Involve community members in all stages of the grantmaking process, from determining funding priorities to evaluating grant applications and monitoring progress.

2. Provide opportunities for community members to learn about and participate in grantmaking through training, workshops, and other capacity-building activities.

3. Prioritizes grantmaking to grassroots organizations, rather than larger established institutions.

4. Be transparent about the grantmaking process and decision-making criteria and provide clear and regular feedback to grant applicants.
2023 Community Advisory Committee

Our 10-person Community Advisory Committee is comprised of community leaders and birth equity champions, several of whom are also birth workers. The CAC independently governs a fund launched with $500,000.

Jessica Andre
Community Doula & Breastfeeding Counselor, Mercer County

Joel Austin
Founder, Daddy University Inc.

Natasha R. Chinn
OB/GYN, Brescia Migliaccio Women’s Health

Christine Ivery
Project Manager, Jefferson Collaborative for Health Equity

Fatimah Muhammad
Director of 340B Pharmaceutical Services and Drug Reimbursement, Saint Peter’s University Hospital

Kashieka Phillips (Returning member)
Community Health Worker, New Destiny Family Success Center

Erica Pulliam (Returning member)
Newark Site Manager, START

Cristina Romas
Co-Founder, Mammissi Birth Services

Tiffani Williams (Returning member)
Maternal Health Department Lead, Acenda Integrated Health

Brittany Wright
Director of Maternal Programming, Perinatal Health Equity Initiative
Turn & Talk

1. How could a community advisory committee be beneficial to grantmaking decisions in your organization?

2. What challenges do you foresee?

3. Do you have any questions?
Rapid Response Grants

In 2022, the CAC provided $35,000 to nonprofits to address the formula crisis and offer support during the tough summer months. CAC and NJBEFA members discussed differences between and within their respective groups on who should be eligible for grants and why.

The grantmaking process informed development of strategic grants:

- Created space for meaningful discussions about who and what the CAC will fund
- Quickly got money out the door to demonstrate impact
- BEFA members navigated commitment to and the consequences of trust-based philanthropy

2022 Rapid Response Grantees

- **Central Jersey Diaper Bank** (Operated by the Anshe Emeth CDC)
- **C.R.O.P.S. NJ**
- **Jump Kids Health**
- **Mom’s Helping Moms**
- **Pioneer Family Success Center** (Operated by EmPOWER Somerset)
- **Journey Family Success Center** (Operated by Project Self Sufficiency)
- **Mobile Family Success Center** (Operated by Catholic Charities, Diocese of Metuchen)
Strategic Grants – Round One

It took 8 months to develop strategic grants program and disperse $137,500 in grants. Resulting grants were highly differentiated from the NJBEFA members’.

<table>
<thead>
<tr>
<th>Month</th>
<th>Focus Area</th>
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<tbody>
<tr>
<td>1</td>
<td>Kickoff</td>
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<td>2</td>
<td>Grantmaking 101</td>
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<td>3</td>
<td>Portfolio Design</td>
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<td>4</td>
<td>Criteria Discussion</td>
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<td>5</td>
<td>RFP Launch</td>
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<td>6-7</td>
<td>Evaluation</td>
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<td>8</td>
<td>Funding Dispersal</td>
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Lessons learned from “Equity in Postpartum Support:”

- **Offer grantmaking training**: Most CAC members were new to the practice. For Cohort 2, we increased from 1 to 3 sessions.
- **Maintain commitment to lived/professional experience**: The CAC used their expertise vs. quantitative, health data.
- **Be flexible to support the committee’s ambitions**: the CAC expanded grant eligibility to include individuals and for-profits, it took months to develop a process but 9 of 11 grantees were individuals.
- **Leverage existing materials**: We used approachable RFPs and guidelines from similar initiatives, such as the AAIMM Village Fund in California.
Our First Strategic Grantees

We selected 11 grantees to receive $12,500 in unrestricted funds each. In a survey, the grantees provided positive feedback on the ease of the application process.

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<tr>
<th>Grantee</th>
<th>Organization</th>
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<tr>
<td>Alquadira Cox</td>
<td>Y'NOT Events</td>
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<tr>
<td>Alexis Owusu</td>
<td>Alexis Owusu</td>
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<tr>
<td>Chesha Hodge</td>
<td>The Balanced Diet</td>
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<tr>
<td>Toshira Maldonado</td>
<td>Beautiful Womb</td>
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<tr>
<td>Angeline Irrizarri (Osores)</td>
<td>Empowered Mamacita Services</td>
</tr>
<tr>
<td>Michelle P. Gabriele-Caldwell</td>
<td>Baby, Please Birth Services</td>
</tr>
<tr>
<td>Tatiana Smith</td>
<td>Doulas for the People</td>
</tr>
<tr>
<td>Erica Pulliam</td>
<td>The Partum Tribe</td>
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<tr>
<td>Melinated Moms</td>
<td>Melinated Moms</td>
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<tr>
<td>Life After 2 Losses</td>
<td>Life After 2 Losses</td>
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Participatory Research Findings

A landscape scan of New Jersey CBOs identified key technical assistance needs. BEFA is retaining (a) TA provider(s). Learning cycle.

- **Workforce support**, to build and retain a birth equity care workforce, we need diversity initiatives, mental health support access and subsidy, training on equitable hiring practices

- **Funding landscape analysis** eliminate barriers to funding and level power dynamics to include small organizations or individuals. Determine available funding options and open doors to funders.

- **Professional development and capacity building** gain desired: social media marketing, grant writing etc. Help organizations go in new directions; streamline time-consuming tasks and save resources.

- **Collaboration and Connectivity** among birth equity workers, organizations, and resources is key, but hindered by lack of knowledge and capacity. Ideas: convene for partnerships, “boots on the ground” marketing, and a centralized database.

- **Public Awareness and Communication** launch a Diverse Communications Workgroup to increase Nurture New Jersey awareness and engage communities most affected by birth inequities in planning and implementation. Create feedback loop for transparency and accountability, trust and collaboration.
Strategic Grants – Round Two

Our second strategic grant will be released in July and apply many of the lessons learned from our first round of grantmaking.

Lessons learned and applied to round two:

• An updated application evaluation framework
• Inclusion of businesses, in addition to 501(c)3’s and individuals
Final Thoughts on Key Learnings

1. What are you proud of?
2. What do you think is a growth area or next step for us?
Session Reflection

1. What has your experience with participatory grantmaking been?

2. In what ways does this approach challenge or support your thoughts about grantmaking?

3. How would you advise us?

4. What else do you want to know?
Join us!

We would love to continue to be in touch!

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- Instagram: @birthequityalliance
- LinkedIn: @birthequityalliance