TOGETHER, WE CAN UNLOCK BIRTH EQUITY

ANNUAL REPORT 2017
HEALTHCONNECT ONE BELIEVES THAT HEALTHY BABIES ARE THE CORNERSTONE TO A HEALTHY COMMUNITY, AND WITH YOUR SUPPORT, WE KNOW WE WILL KEEP FIGHTING FOR A BRIGHTER FUTURE.
Dear Friend of HealthConnect One,

As many of you know, Rachel Abramson, HealthConnect One’s co-founder and current executive director, announced her decision to retire at the end of June 2018. There are no words to adequately express the extraordinary gifts that Rachel has provided to HealthConnect One throughout her 30-year tenure. Rachel started this organization to address the dismal breastfeeding rates in Cook County. With ever-present warmth, sincerity, and compassion, Rachel’s leadership grew the Chicago Breastfeeding Task Force into HealthConnect One, with a broad intention to impact organizations, communities, and Community Health Workers (CHWs) on a national (and international!) scale.

Rachel, I thank you for your leadership and for demonstrating to the Maternal and Child Health field that listening is an active verb and the key to effective community health programming. Your example has revolutionized the strengths-based approach to this work and has emboldened women to speak up for their health and for the self-determination of their peers. And lastly, thank you for the bold vision of HealthConnect One to fight for equity in maternal and child health so that every baby, mother, and family can thrive in a healthy community.

Moving forward, it is this ambitious vision that HealthConnect One’s Board, Associate Board, staff and partners will continue to build upon. We will work together with leaders in various communities across the country to make this a reality, partnering with visionaries in philanthropy that want to ensure that families have the tools to make the best choices for their health and well-being, and with leaders in policy and organizing that want to ensure that the changes are led by those who are impacted.

Rachel nurtured HealthConnect One during its first 30 years, and now we are in a strong position to build on our collective vision. I hope you will consider making a contribution today to honor Rachel’s legacy and to grow the important work you will learn about in this report.

Thank you,

Mairita Smiltars

(Left) Julie Smolyansky, CEO of Lifeway Foods with (Right) Mairita Smiltars, President of HC One Board at 30th Anniversary Gala
HealthConnect One’s New National Leadership Academy

In March of 2017, W.K. Kellogg Foundation of Battle Creek, Michigan, demonstrated their commitment to equity in birth and breastfeeding by funding HealthConnect One’s National Leadership Academy. This 3-year project will develop grassroots leadership that will impact communities’ capacity to analyze and understand maternal and child health issues. Through HealthConnect One’s Leadership Academy, participants will share their challenges and triumphs so as to amplify diverse voices and change perceptions. HealthConnect One will also partner with communities to conduct field-based innovation for grassroots community organizing.

This National Leadership Academy will gather committed advocates for Maternal and Child Health and amplify community voices for birth equity so they are bigger, stronger, and louder.
At our 30th Anniversary Gala, we honored our 2017 Durbin Community Health Worker of the Year awardee, Yvette McKee, a community-based doula from Open Arms Perinatal Services in Seattle, Washington. Established by HealthConnect One in 2014 and championed by U.S. Senator Richard Durbin of Illinois, this award recognizes a Community Health Worker who has made a tremendous impact on maternal and child health.

“It’s been heartening to see the progress HealthConnect One has made over the years in expanding its doula program to more than 50 communities across the country,” stated Senator Durbin. “I am honored to have this award named after me, and I am pleased to congratulate Yvette McKee on being named the 2017 Community Health Worker of the Year.”

“Ms. McKee embodies the true essence of community support,” writes Open Arms’ Director of Programs, Michelle Morse. “She is thoughtful and caring and her commitment always shines through. She single-handedly shaped the Birth Doula Services Program, which matches over 200 moms who are at and below the federal poverty line with volunteer and paid doulas.”

“I always had a burning desire to help mothers,” Yvette told us, “and I was Open Arms’ very first Doula Coordinator. I knew the need for these services was there, and I wanted to make this happen for as many people as possible.”

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Top: Yvette and a client, Hawa Egal
Middle: Yvette with the Senator Durbin CHW of the Year award
Bottom: Yvette and a co-doula, Kate Silvett
EVEN BIRTH IS A DOOR TO TRANSFORMATION
For years, HealthConnect One has encouraged and supported leadership of underrepresented communities in breastfeeding and birth work. Our efforts consistently lead to more people of color at the table with important national and local coalitions. Below, Margarita Celis, a Community Health Worker from Open Arms Perinatal Services, talks about serving as a HC One representative to the United States Breastfeeding Committee (USBC).

**Margarita Celis**  
**SEATTLE, WASHINGTON**

“My time at USBC was great. I focused on issues that are important to our communities. I was nervous, but I was able to connect with someone from my state, so I didn’t have to do it alone! We talked to United States Representatives and Senators about the importance of cultural competence in breastfeeding support, the importance of connecting breastfeeding professionals with the mother at least one month prior to delivery and how key home visiting programs are after birth. Running from building to building, in the rain, in Washington D.C., we felt like heroes!”
Certified Lactation Consultants Scholarships

In 2016, our partner, Healthy Children Project, Inc., granted three Certified Lactation Counselor (CLC) Training Scholarships to Community-Based Doulas and Breastfeeding Peer Counselors who were trained under the HealthConnect One curriculum and provided breastfeeding support in their communities. Through this collaboration, we identified three community health workers in maternal child health who are proven champions for their communities.

Here are two of their stories.

Natasha Enos
TUPELO, MISSISSIPPI

“I do this work so that women won’t have to experience what I did trying to breastfeed my second child. It was a bad experience that I almost gave up on. It was hard being alone and having to google to find the answers. I want to be that help that is there no matter what time of day it is.”

Natasha Enos and her husband, Christopher

Jaylyn Spencer
DETROIT, MICHIGAN

“I have had an interest and passion for working with mothers and babies even before I had my first child. A few months after attending the training, I heard about a breastfeeding peer counselor job opportunity at WIC. Having the CLC made me stand out as a candidate and I was offered the position at a higher hourly rate. I decided to prepare for the IBLCE [credentialing] exam... the CLC training combined with 3 years of working as a peer counselor, I was able to meet the requirements to sit for the exam. In April, I took the exam and this June, I learned that I passed!”

Jaylyn Spencer and Family
I was 18 years old and my cousin was having her child and she had a doula. I remember asking, “A doula? What is that?” She started explaining, “A doula is somebody that supports mom before, during, and after pregnancy.” The idea was encouraging to me. There was going to be a prenatal training and a doula training and I decided to participate. It was really encouraging to see these mujeres who had successful breastfeeding experiences support other women. I was really inspired by Latina and other women of color, bringing the trainings directly to la comunidad, which motivated me to become more involved with HealthConnect One. Since then, I’ve seen some great progress. There is more information for communities in a way that there wasn’t before. People, families, and communities are empowered to advocate for themselves, to ask for what they need, and there is a growing movement of people of color addressing equity when it comes to birth, or justice around maternal and child health in our communities; this gives me hope.

I also see that there is a need to address systemic and policy issues for birth support and justice work. One of the proudest moments at HealthConnect One is when we co-created a Breastfeeding Statement to advocate that licensure and credentialing should not be a barrier for breastfeeding support reimbursement. It was a statement that was created collectively with our partners across the country, and spoke to the missing representation of community health workers in the lactation field. HealthConnect One is part of the United States Breastfeeding Committee (USBC), and I have the honor of collaborating with the Center for Social Inclusion (now part of RaceForward). During a training on racial equity, they talked about institutional and systemic racism in a way that was really impactful. I felt affirmed.

When it comes to racial equity work around Maternal and Child Health, I’ve learned what it takes to create real change. It takes commitment, leadership, collaboration, willingness to make mistakes and learn to repair, to apologize, to move forward, to learn, to be vulnerable, not to always have the right answer and that’s okay, but to take risks ... To try something new. I come from the Pilsen neighborhood in Chicago. I come from a community where there is a lot of strength, and a lot of not-for-profit work, and a lot of artists, a lot of murals, a lot of resistance, a lot of people fighting for justice. So, I just want to build and continue to build on that work to address inequity in birth.
I heard about Doulas in 1998. I was working with OB/GYN physicians in a community clinic and they were talking about conducting a University of Chicago doula research project to explore the effect of doulas with pregnant teens. I was curious. What do these doulas do? They explained to me that a doula supports a mom during childbirth. I instantly remembered my birth. I was 17 when I had my son and didn’t have anyone in the birthing room. It was me, by myself. I was with the nurse and the doctors, but I didn’t have any family or any of that… I felt alone.

So, I told U of C that I wanted to be a doula and they said no, you shouldn’t. They told me I would be taking a pay cut, but I knew that I would be good in that role, so I took that pay cut. And I loved it!

HealthConnect One trained me. Rachel Abramson was one of my trainers. I was so excited about this training because usually at trainings, you sit there in a desk. The teacher does all the talking. But instead, it was a round table. The trainers asked us what we thought, what we saw, what we felt. And we talked and talked. It was so exciting! I started as a doula and it was so important to me to let those teen moms know that they are not alone, that someone is here, I’ve got you.

Through HealthConnect One’s Training of Trainers, I see myself duplicated. I see myself still being able to help create those special moments: the skin-to-skin; to be able to help the baby latch on for its first feeding. I see myself in this role helping organizations be effective in supporting moms and babies.

In 2016, I joined W.K. Kellogg Foundation’s Truth, Racial Healing & Transformation, a comprehensive, national, and community-based process to plan for and bring about transformational and sustainable change, and to address the historic and contemporary effects of racism. I connect my work in this national collective with how I approach and engage in birth, because, just like birth, racial healing needs honesty and respect. Every birth has its own story. Everyone has a story to tell. And we cannot tell anyone’s story without respecting them first, without listening to them, involving them in the change, involving them in decisions that lead to a healthier future. Over the years, I’ve seen what inequity in birth looks like, how social service agencies and hospitals will look at two young women in almost identical situations and treat them so drastically different solely because of the color of their skin. In my vision for birth equity, we offer every mom the best that we have, so that each mom can give birth in the successful, healthy way that she decides. It is her voice that dictates her and her baby’s health, not their race.
COMMUNITY IS KEY TO NATIONWIDE CHANGE

We train community health workers

Focused on strengthening community-led support for prenatal families, HealthConnect One worked jointly with caseworkers and home visitors to listen to the challenges families are facing, and frame breastfeeding support from a strengths-based approach. In partnership with organizations throughout the Chicago metropolitan area, such as Mano a Mano Family Resource Center and El Hogar Del Niño, HC One conducted bilingual (English and Spanish) community health worker trainings to impact more than just birth.

“The way the training impacted my personal life,” one CHW reported, “is the power it gives me to educate, first as a mother to my family and then as a health promoter in my community.”

We mobilize diverse stakeholders

Presenting at the Families USA Health Action Conference, on a panel entitled “Promising State and Local Strategies to Improve the Health of Women of Color,” Associate Director Wandy Hernandez discussed how HealthConnect One trainings transform individuals both professionally and personally.

Addressing the Maternal Health of Black and Brown Communities, HealthConnect One co-hosted a #MaternalJustice Twitter Chat with MomsRising and Planned Parenthood to preserve Medicaid and the protections of Obamacare.

We jointly create programs

Award Winning Program—HealthConnect One’s Community-Based Doula Program was recognized by AMCHP as the 2017 Best Practice! AMCHP’s Innovation Station highlighted that community-based doula programs lead to cost savings:

“Program outcomes demonstrate some immediate cost savings and suggest additional long-term costs savings in the following areas:

• Higher breastfeeding rates lead to both short and long term cost savings for both mother and baby in the form of avoided illness and chronic disease. Over the long term, the cost of suboptimal breastfeeding in the U.S. is estimated to be $13 billion per year for pediatric costs and an additional $18.3 billion per year in maternal health costs.

• Each avoided C-section provides $4,459 in medical care savings (Medicaid costs).

• Each avoided epidural provides $607 in medical care savings (Medicaid costs).

We facilitate community-led change

Sustaining our impact, HealthConnect One investigated available paths for funding and released Sustainable Funding for Doula Programs that maps revenue streams for community-based doula programs throughout the country. Our in-depth policy analysis is also applicable to breastfeeding peer counselors, community health workers, and others working to improve maternal, infant, and family health outcomes.

Co-leading racial equity training and facilitating equity conversations, Brenda Reyes — along with Simran Noor from the Center on Social Inclusion (now RaceForward) and Mona Liza Hamlin — acted on the local, state and national levels to dismantle structural racism and build a sense of community and common ground.

Bringing forward our experience and expertise around structural racism, Sadie Wych and Brenda Reyes presented during the 2017 International Lactation Consultant Association (ILCA) Conference a workshop on “Cultural Humility and Care: Overcoming Barriers to Equity in Lactation Support.”
Thank you to all of our donors for your gifts that have opened doors for HealthConnect One over the last 30 years. We are grateful for your unwavering and continued support. The Top Individual Donors generously made donations that were acknowledged between July 1, 2016 and June 30, 2017.
FINANCIAL INFORMATION

Revenue
- Foundation Grants $1,489,005
- Individual and Corporate Giving $53,496
- Special Events $44,132
- Fee-For-Service $42,532
- Donated Services $15,000
- Other $2,655
Total $1,646,820

Expenses
- Program Services $1,153,883
- Strategic Capacity Building $261,486
- Administration and Fundraising $352,981
Total $1,768,350

80% of Your Donation Goes Directly to Our National Work Towards Birth Equity
“HC One continues to grow and impact underserved communities and find ways to expand their reach. I appreciate the work continues to empower individuals to help themselves and their communities.”

“I want to support organizations working with maternal and child health populations in communities of color.”

“I have seen firsthand how crucial it is for communities to have access to resources and services in order to ensure healthy birth outcomes and parenting.”

“I feel it’s important now more than ever with the current administration to have programs in place to protect women’s health and welfare.”