

Black Maternal Health & Early Childhood Intervention Empowerment Project

2023 Final Report









ACDMH BAH USCC

RECRUITMENT



The Therapeutic Play Foundation (TPF) employs a multifaceted recruitment approach to ensure meaningful participation. Through word-of-mouth and community referrals, existing participants and stakeholders are encouraged to recommend potential Cohort Members, leveraging trusted networks within the community. Partnerships with local organizations, healthcare providers, and community leaders enhance outreach efforts, while active participation in relevant community events facilitates direct engagement with prospective Culturally sensitive and linguistically participants. appropriate communication strategies are employed to foster trust and relevance. By employing a comprehensive and community-centered recruitment approach, the project aims to ensure diverse representation and capture Black mothers' and families' unique perspectives and experiences.

Early Childhood Intervention The Health & Black Maternal Empowerment Project prioritizes the recruitment of individuals who have encountered birth or early childhood trauma and challenging transitions into motherhood as Cohort Members. The Therapeutic Play Foundation (TPF) employs a multi-pronged recruitment strategy to achieve this. Recommendations from existing participants and stakeholders are sought through word-of-mouth and community referrals, tapping into trusted networks. Collaborations with local organizations, healthcare providers, and community leaders expand outreach, while active participation in community events allows for direct engagement with potential participants. Communication efforts are culturally sensitive and linguistically appropriate to establish trust and relevance. The project aims to capture diverse perspectives and experiences within the Black maternal health and early childhood intervention space through this inclusive approach.



PROGRAM DESCRIPTION AND PURPOSE

The Therapeutic Play Foundation, in collaboration with the Los Angeles County Department of Mental Health Stakeholder Engagement Unit and Underserved Cultural Communities (UsCC), has implemented the Black Maternal Health & Early Childhood Intervention Empowerment Project. This project aims to address the disparities in mental health access for the disabled community in Los Angeles County, specifically focusing on Black mothers and families. The Therapeutic Play Foundation, along with community partners and consumers, works diligently to enhance the capacity of the public mental health system. This includes developing culturally relevant recovery-oriented services tailored to the unique needs of the disabled community. Additionally, the project undertakes capacity-building initiatives to strengthen support networks and resources.

PURPOSE

Maternal Health & Early Childhood Intervention The Black Empowerment Project, implemented by the Therapeutic Play Foundation, is designed to provide emotional processing and healing experiential opportunities to Black mothers and families in Los Angeles County. The project's primary objective is to identify community members who have encountered birth or early childhood trauma, as well as those who have experienced a challenging transition into motherhood, and invite them to participate as Cohort Members. The project aims to empower Black mothers and families by creating a supportive and nurturing environment, promoting their overall well-being and mental health. Through a combination of therapeutic interventions, community engagement, and targeted support, the project seeks to foster resilience, healing, and positive early childhood experiences within the Black community.

COHORT MEETINGS



The Mom Squad Cohort Meetings, as renamed by the cohort members themselves, have emerged as a powerful source of strength and support throughout the program. Over the course of eight engaging sessions, participants actively partake in ice breaker activities, creating a nurturing environment for open and honest discussions. Motivated by their own birth experiences and the desire to share wisdom and advice, the Mom Squad Cohort Meetings have become a safe haven for Black mothers to connect and build a sense of unity.

However, it is important to address the need for reinforcing confidentiality agreements within the Mom Squad Cohort. Instances of breaches have highlighted the significance of maintaining trustworthy and confidential а space. Bv implementing clear guidelines and emphasizing the importance of confidentiality, we can ensure that the Mom Squad Cohort remains a safe and supportive environment for all participants. These measures will further enhance the effectiveness and inclusivity of the cohort meetings, facilitating authentic and meaningful conversations among members.

COHORT MEETINGS



Therapeutic play Foundation has hosted 8 number of Mom Squad Cohort Meetings. The following shows details of each meeting: **Cohort Meeting 1-**Date: 11/3/22 Number of Participants: 10 Facilitator Observations: Many of the attendees were motivated to join the Mom Squad because of their birth experiences or to share about birth experiences and advice. Assessments: Pre-survey issued to participants to gauge current knowledge of Black motherhood, childhood and birth experiences as well as the stats surrounding the disparities. **Cohort Meeting 2-**Date: 11/5/22 Number of Participants: 7 Facilitator Observations: Attendees discussed the Black Maternal/Mental Health needs. Many attendees hammered on the need for more resources and culturally competent care. Attendees also gave ideas and plans for the video interviews. **Cohort Meetting 3-**Date: 11/10/22 **Number of Participants: 7** Facilitator Observation: All attendees revealed that they or someone they know has suffered from one or more of the disparities discussed. Attendees were then prompted to draft key points they'd like to touch on for their narrative video interview. **Cohort Meeting 4-**Date: 11/12/22 Number of Participants: 9 Facilitator Observation: Attendees then participated in a 10-minute standing yoga and breathing exercise led by a Black female yogi. Participants stated that they felt very relaxed after the yoga experience. The facilitator then went into detail about the expectations of the narrative video interviews and asked questions for clarity. **Cohort Meeting 5-**Date: 11/17/22 **Number of Participants: 7** Facilitator Observation: The importance of childhood development was shared with ten reasons of significance. Afterwards, attendees crafted how they would like the town halls to run. An agenda filled with many interactive activities and opportunities to win useful items and self care items was drafted completely by the attendees. Attendees were very excited to plan the events of the two town halls and are excited to attend.

COHORT MEETINGS



Cohort Meetting 6-

Date: 11/19/22

Number of Participants: 7

Facilitator Observation: All attendees expressed not wanting any special treatment as an African American woman and not necessarily someone that looks like, but rather someone who can empathize with their needs and experiences. Afterwards, the attendees drafted the community survey to identify mental health concerns, gaps in services, and identify ways to serve our community in a culturally appropriate and holistic manner. As a result, attendees drafted a survey that determines demographic information, their current stage of care, healthcare experience and care needs and preference.

Cohort Meeting 7-

Date: 12/01/22

Number of Participants: 7

Facilitator Observation: Attendees shared interesting facts about themselves as we engaged in the ice breaker activity. Many attendees shared interests in uncommon activities they engage in for fun. Afterwards, the attendees took one final look at the final draft of the community needs survey and gave final feedback on the questions formulated in the previous cohort session. Attendees were satisfied with final questions formulated.

Cohort Meeting 8-

Date: 12/03/22

Number of Participants: 7

Facilitator Observation: Attendees shared their favorite takeaways from the cohort meetings; most truly enjoyed sharing their stories of motherhood with one another and some requested a meeting in person and more opportunities to discuss with other Black mothers. The upcoming events and expectations of the cohort were discussed. Attendees then engaged in a ten-minute breathing exercise before the final closing

Assessments: Post-survey issued to participants to gauge current knowledge of Black motherhood, childhood and birth experiences as well as the stats surrounding the disparities after cohort participation.

COHORT FEEDBACK



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The following letters are personal testimonies from cohort participants. The testimonies were sent post cohort and town hall meetings. The full names of the participants testimonies will be disclosed for privacy reasons:

Thanks to your help, I feel more equipped to navigate the challenges that I've been facing and to work towards a brighter future.

Thank you again for everything you've done for me. I'm so lucky to have you in my life.

I just wanted to take a moment to express my sincere gratitude for all the support you've shown me recently. Your willingness to listen and offer advice, your encouragement and kindness, and your unwavering presence have meant more to me than I can express.

The workshops and therapy sessions you recommended have been incredibly helpful, and I'm grateful for your insight and guidance. Thanks to your help, I feel more equipped to navigate the challenges I've been facing and to work toward a brighter future. Thank you again for everything you've done for me. I'm so lucky to have you in my life.

I am so grateful to have had TPF come into my life at this time. Accessing the programs and the resources without shame is a practice that allows me to walk into the process with my dignity still intact. Having the ability to gift the youngest members of my family with Christmas gifts and necessary items that supports their day to day needs being met has been extremely helpful. Enjoying the experience of the movie screening affirms my existence in connection to mental health and all the other things that intersect and affect my ability to trust in healthcare that speaks to the heart of melanin bodies. Since attending the sessions whether in person or virtual I have felt the sincerity in being seen in the fullness of my humanity and motherhood. I will continue to enjoy the sessions with the group as well as the individual sessions with my therapist because I see the value in being able to co create mental health and lifestyle practices to balance my nervous system while standing for my rights to have joy and speak truth that contributes to a society where equity is embodied. Lastly, being in space with people who are like minded in the ways in which we value each other's humanity and that look like me, is an experience that has reshaped my narrative for receiving care that's delivered from an institutional stance. To really achieve sustainable health and mental health equity we must be able to freely access spaces that seek to learn with us while positioning us to emerge in our own leadership, share wisdom, offer a wide variety of healing modalities, and affirm our existence with dignity. It is a pleasure to participate and witness the efforts TPF has dedicated to enhance the quality of living for those of who have been disenfranchised and disproportionately impacted by systemic racism. May these efforts continue to bring health and wellbeing to many!

COHORT TESTIMONIES



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Hello, my name is V and I'm married, and we are a blended family of 6 in which I gave birth to three of them via c-section. They are ages 21, 18, and 10. I felt overall just not well, I was extremely swollen and my blood pressure was extremely high. At one point I overheard my doctor saying that I had protein in my urine in the hallway outside the door. When he came back in, I assumed he was going to explain to me what was going on, he didn't, he told me to go have lunch. I was surprised because I was really expressing to him that I didn't feel well that something is just not right. So, because at the time I didn't feel comfortable advocating for myself, I left. I left the doctor's office, I went on to start experiencing my water breaking, I went to the hospital, they told me the fluid that they tested was the amniotic fluid. I kept telling them I know something is wrong, I'm not peeing on myself; I know the difference between when I'm peeing on myself and not. Shortly after that I got an ultrasound, as soon as I started to get the ultrasound, I started to go through full blown contractions. Next thing you know, the doctor is rushing me in for an emergency c-section. I remember being on the table while getting the csection and them saying that my blood pressure was 200 over a hundred something. I felt so scared that I just wouldn't make it through. After I gave birth, I ended up having a blood transfusion, and I was just trying to figure out how I ended up from the doctor telling me to go have lunch to getting a blood transfusion. At the time, I felt like I wasn't being heard. My husband was there which I'm very thankful for, he was my support system in that traumatic time. I really felt it was a normal thing at the time, but when I look back and reflect, I know that the situation wasn't normal and wasn't right. I also reflect on it when I hear other stories about other women like myself who are expressing that they are not well, they are in pain, and basically being ignored and some of those women don't make it. I'm reminded that I am blessed to have made it through that situation when I too felt ignored. I am telling my story in hopes to let other women know that it is okay to advocate for yourself and insist when you're not feeling well and to let them know that something is not right. When they are not listening, maybe you can go to someone else and get a second opinion and that is why I am telling my story.

COHORT TESTIMONIES



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Hi, my name is N.A and I am married with four children. The traumatic motherhood story that I would like to share is about one of my children. His biological father passed a few years ago and after his father died, he wanted to commit suicide and actually tried to drown himself in our bathtub. How I cope with that trauma is by trying to get him as much help as possible and trying to always be there for him physically and always having someone around when I couldn't be. I'm so thankful for that time in my life where I was able to take him to work with me. After work and even during work, I would take him to therapy and then come home with him and finish work from home. I really am so thankful for the therapist that helped him through that time, there was a lot of teaching on mindfulness and just reminding us that grieving is okay, and it's okay to grief and remember to fight to come out of that pain and to live. The people who stood up for me were my family and church, especially my husband. I don't know what I would have done if he wasn't by my side. There were so many times that I did not know what to do and I wanted to give him the help but was also afraid that he would be admitted to a psychiatric facility or that I would be deemed an unfit mother for some reason, it was just a lot of fear and just scared of losing my child and losing him physically, just thinking that he would do it again and succeed. The people that did not stand up for me at the time, I don't think anyone did not stand up for me. Even his school was very supportive, everyone was understanding. At that time, I needed a break, and he needed a break too. A lot of people around me, especially the older women around me, said to keep doing the normal routine, keep taking him to basketball practices, keep bringing him to school, keep bringing him to after school activities, and don't change any routines. That actually did a disservice than actually taking a break and we ended up having to take a break because we kept trying to push through. I wish that I had a break and that he could have taken a break too. The good that came out of the trauma was that my son was able to learn how to grief and deal with loss at an early age and so even when my father passed, he was still able to grief in a good way, in a positive way. My thoughts for seeking help for trauma, like I said its scary sometimes because you don't want your child taken away, it's a fear of the system, you don't want to get in trouble, you don't want the system to slap you on the wrist because we are human and we have trauma that we want to solve. Overcoming that fear and taking the bold leap of putting him in therapy, when his father died, therapy wasn't the first step that I took. My first step would be taking him to church and things like that and I think that was a mistake. Sometimes we make mistakes in our culture, we think God can heal everything, and I believe that he can, but he also gave us therapists and mental health professionals. The advice that I would give someone whose gone through similar trauma, it is scary having a child who was suicidal, even though my son is fine now and he's doing great in school, academically, and sports. There's still a little hidden fear that is he really, okay? But he really is okay. My advice that I would give to any mother that has a suicidal child is to yes watch for the signs but have an open line of communication and love on that child repeatedly and get the child the help right away. They shouldn't have to be suicidal before seeking mental help, your child doesn't even need to have trauma before seeking mental wellness. The stressors of life, school, and work can lead to mental illness, so learning different techniques to cope in life and having those different self-care routines is just helpful for everyone and that would be my advice. Thank you.

PRE AND POST SURVEY ANALYSIS

During our first and last cohort meeting, we asked all participants to fill out surveys in order to track any changes. Both Surveys We noticed that before the cohort meetings, only 7.4% of participants were familiar with ways black mothers can be addressed through community engagement. After our sessions, almost 99% of all participants were fully informed of ways barriers for black mothers could be addressed through community engagement. Before the start of cohort meetings, about 30% of participants were able to confidently talk about barriers black mothers faced regarding mental health given their previous knowledge. After our sessions 100% of our participants felt confident that they understood the barriers black mothers faced regarding mental health.

Overall our post-surveys show a huge improvement in participants' knowledge of what it means to be a black mother along with the potential barriers it can have towards having good mental health compared to their pre-surveys. We also see in our pre and post surveys that most participants felt that they learned valuable information that can help them find more resources, become more socially aware, and overall work towards obtaining better mental health.

One limitation that we had during our survey process is the lack of participants willing to fill out both pre and post surveys. In the future we would like to find ways to increase our number of completed surveys especially during post surveys since we saw less post surveys compared to pre surveys. Since our sample group was so small, we were not able to conduct any formal statistical analysis other then providing the descriptional analysis above.

Town Hall Meetings/

(Black History Month Mental Health Summit)



A four day Black History Month Mental Health Summit, which included two town hall meetings specifically for Black mothers, was conducted from February 22, 2023 to February 25, 2023 .

A total of 584 participants attended the Black History Month Mental Health Summit. Participants were given the option to participate virtually and in-person for some activities in order to reach more participants. The Black Maternal Health Town Hall Session 1 took place on 2/22 and had 68 registered in person participants and The Black Maternal Health Town Hall Session 2 took place on 2/24 and had 46 registered in person participants.

The women in the Black Maternal & Early Childhood cohort not only created the agenda for their town halls, but also filmed short videos telling of their birthing or motherhood story. Those narrative videos were presented at the Town Halls followed by a Q&A and initial distribution of the Community Health Survey aimed at improving healthcare access for Black women and children.

The narrative videos can be accessed at the following link: <u>https://bit.ly/blackmamasquadvideos</u>



Flyers/Marketing/Agenda materials for the Black Mama Squad Cohort, the Black History Month Mental Health Summit and the Black Maternal & Early Childhood Town Hall meeting activities are shown on the following pages. The Therapeutic Play Foundation, Inc. (TPF) in concert with the Black Mental Health Task Force, the Los Angeles County Department of Mental Health (LACDMH) and the San Gabriel Valley African American Infant and Maternal Mortality Community Action Team are collaborating to implement the *Black Maternal Health and Early Childhood Intervention Empowerment Project*.

The *Black Maternal Health and Early Childhood Intervention Empowerment Project*, aims to offer emotional processing and healing experiential opportunities to Black mothers and families; and the LACDMH's goal in supporting this project is to increase the capacity of the public mental health system to develop culturally relevant recovery-oriented services specific to the disabled community; in this case, birthing and parenting women of Black and African heritage.

As the Facilitator of this project, TPF will create safe spaces where mothers of Black and African Heritage can discuss and document birth, childhood and motherhood experiences; and develop and process recommendations that can support the collective mental recovery of the Black community. The efforts will be digitally documented in a video series entitled "To Be Heard is To Be Healed" where filmed interviews empower the Black mother's voice. TPF has convened a cohort of mothers of Black & African heritage that we have coined as the "Mom Squad". The Mom Squad will meet virtually eight times over a two month period. They meetings will take place on Thursdays and Saturdays from 10:30am to 11:30am on November 3rd, 5th, 10th, 12th, 17th, 19th and December 1st and 3rd.



Play

Cohort meetings will include the following:

- Share and document the birth, childhood and motherhood experiences of a cohort of 10-15 women of Black and African Heritage;
- Participate in psychoeducation that empowers improved mental wellness and builds the mom as peer community as a resource;
- Empowered Black mothers will develop a community survey that will identify the specific mental health concerns experienced by their intentionally oppressed community and help close gaps in service delivery;
- Learn how to best heal Black families via culturally sensitive and holistic modalities; and
- Explore their role as experts, Black mothers, because they have lived experience as Black mothers, are the best resource to lead our community mental recovery.

To nurture our cohort participants, TPF will host two in-person day retreats to pamper Mom Squad mamas on November 30th and December 7th. Moms will indulge in luxuries such as sound healing, restorative yoga, massages, therapeutic gardening, cooking classes and community "Breaking Bread" dinners. Childcare will be provided for those unable to find that support.

By the end of the eight cohort meetings, moms will have created a community survey to help empower better informed outreach to other mothers just like them. They will each have also video recorded digital childhood, birthing and motherhood stories because to be heard is to heal. Those digital stories will be shared with LACDMH, the Black Mental Health Task Force, and the African American Infant and Maternal Mortality AAIMM Initiative in a progressive campaign to de-stigmatize mental health treatment and empower community connection.

The cohort will also be heavily involved in the Black History Month Mental Health Summit (Summit) led by TPF and the Black Mental Health Task Force. The Mom Squad will be recognized throughout the Summit as experts in their own wellness and peer leaders in our outreach efforts. Not only will the Mom Squad help to disseminate the community survey aimed at other Black mothers, but they will also be apart of the planning and implementation of two Community Town Halls full of important conversations about how to support Black women and their families. The Summit is a collaboration effort to equip the Black community with tools for mental wholeness and self-care that includes activations to enhance community wellness such as a psychoeducation about intergenerational trauma, stress and it's somatic impact, and holistic offerings such as a sound bath, a trap yoga workshop, wellness stations and music based activations centered around Hip Hop culture.

Current partners include the Black Mental Health Task Force, the SGV AAIMM CAT, Kaiser Permanente/East Bay Foundation, Innovative Wellness Consulting, Charles Drew University, LACDMH, and more to come!

In the end, we hope to have equipped mothers of Black and African heritage with the tools needed to heal from traumatic experiences, have brave conversations with other mothers who have experienced similar traumas, and engage in community connection. We also hope to have provided holistic therapies-catering to the Mom Squad so that they feel loved and empowered.

We expect that the town hall discussions and survey results will reveal community-based solutions led by Black women can solve the Black Mental Health crisis that is occurring in our nation.



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Need Help? Call the LACDMH 24/7 Help Line 800-854-7771

@therapeuticplayfoundation | (323) 924-9084 | therapeuticplayfoundation.org | hello@therapeuticplayfoundation.org



troductions





ICE BREAKER: WHAT MADE YOU SAY YES TO JOIN THIS GROUP?



Black Maternal Health and Early Childhood Intervention Project

PURPOSE

To offer emotional processing and healing experiential opportunities to Black mothers and families

GOAL

To increase the capacity of public mental health system to develop culturally relevant recoveryoriented services specific to the disabled community



OUR GOAL:

To create a safe space where we can discuss and document our birth, childhood and motherhood experiences; and develop and process recommendations that can save our community.

EIGHT VIRTUAL MEETINGS:

FROM 10:30AM TO 11:30AM ON NOVEMBER 3RD, 5TH, 10TH, 12TH, 17TH, 19TH AND DECEMBER 1ST AND 3RD

TWO HYBRID TOWN HALL MEETINGS:

WEEK OF FEBRUARY 20, 2023

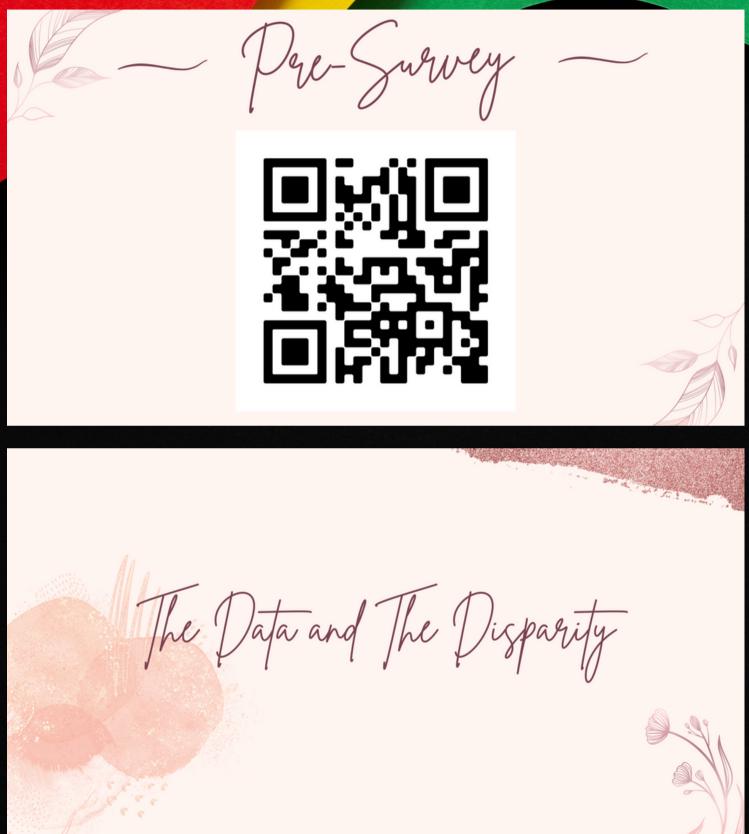
TENTATIVELY BOOKED AT PHOENIX HALL IN WATTS

• Share and document your birth, childhood and motherhood experiences

Dur Pledge, Our Plan

- Develop a community survey that will identify the specific mental health concerns experienced by this underserved community and any gaps in service delivery, as well as learn how to best serve this community in a culturally sensitive and holistic way
- Host two town halls where we'll:
 - Share your recorded experiences and provide psycho-education on Black maternal mental health needs and increasing engagement around Black Maternal Health
 - At least 50 attendees at each town hall 110 survey submissions from LA county Black mothers

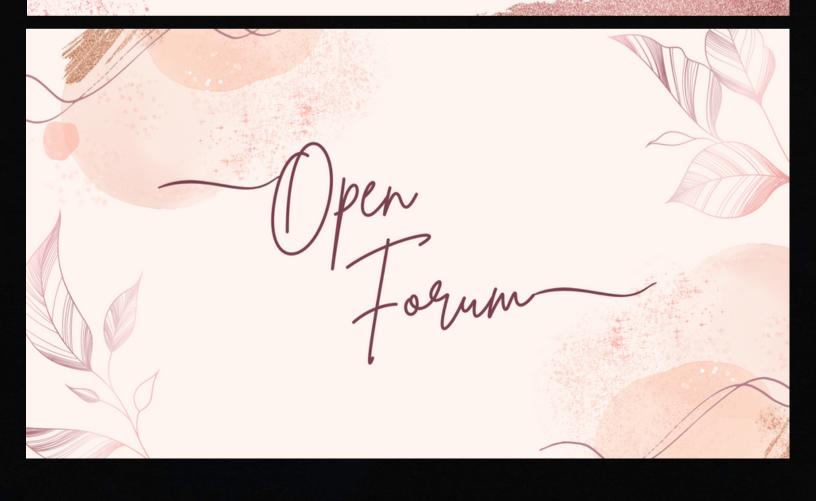




- Black men are more at risk of remaining in poverty
- Black men earn less than white men and women
- Black men are less likely to join the labor force
- Black men make up the largest share of prisoners

- Black children are three times more likely to be suspended or expelled
- Black children test lower than other races in standarized tests
- Black children are underrepresented in advanced courses
- Black children are five times more likely than white children to to be detained in juvenile Justice systems

- The poverty rate for Black women is higher than white and nonhispanic women
- Black women experience higher unemployment than the U.S. average for women
- Black women have a higher prevalence of many health conditions, including heart disease, stroke, cancer, maternal morbidities, obesity and stress
- Black women are three to four times more likely a pregnancy-related death as compared with white women



"To bring about Change, you must not be Afraid to take the First Step"

-Rosa Parks





bit.ly/BlackMamaSquad Mudtown Farms 8:00-10:00 Sound Bath for Restoration 2001 E 103rd St. bit.ly/soundbathatthegarden & Healing pm Los Angeles, CA 90002 Day Three, 2/24 TPF 12:00-2:00 Therapeutic Gardening 236 W Mountain St. # 103 bit.ly/gardeningforwellness PM Pasadena, CA 91103 TPF 236 W Mountain St. # 103 Pasadena, CA 91103 Healthy Mindset & Fitness 2:00-3:00 pm with Jzaquise Mangram

			Day Four, 2/25	
6: 8:	6:00 pm- 8:30 pm	Black Maternal Mental Health Town Hall	Flintridge Retreat Center 236 West Mountain St. #117 Pasadena, CA 91103	bit.ly/blackmamasandbabi
4: pr	4:00- 8:30 pm	Children's Socialization Drop-in Play	TPF 236 W Mountain St. # 103 Pasadena, CA 91103	bit.ly/kidsplaysocial
4: pr	4:00 -5:30 pm	Healing Art	Flintridge Retreat Center 236 West Mountain St. #117 Pasadena, CA 91103	
3: pr	3:00-4:00 pm	LACDMH Mental Health Promoter "Mental Health & Stigma" Workshop 2	Virtual	bit.ly/mhstigma2

6:00- 8:00 pm	Screening of Black Mental Health: Changing the Narrative Film Docu-Series Q&A with filmmakers	Miracle Theatre 226 S Market St. Inglewood, CA 90301	Watch the trailer here: bit ly/changingthenarrativetrailer
8:00-10:00 pm	Summit Wrap Party (Participants will receive complimentary food and a swag bag)	Miracle Theatre 226 S Market St. Inglewood, CA 90301	By lickets here: <u>bit.ly/bmh_film</u>
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WE NEED YOUR VOICES!

FEB. 22nd or FEB 24th 2023 bit.ly/blackmamasandbabies

REGISTER

Need Help? Call the LACDMH 24/7 Help Line 800-854-7771

Meet the Black Mama Squad Cohort!

Learn about the process of developing and creating a Black mama-led community survey, watch narrative videos of their birth/motherhood stories, gain an understanding of the mental health needs of Black mothers. Event is Hybrid, virtual and in-person.

Be the first to complete the Black Mama Squad's Community Survey and help impact positive social change











Black Maternal Mental Health Town Hall

Event Outline - Flintridge Retreat Center - 2/22/22 & 2/24 2:30pm-9pm (revised 2/14/23)

Segment	Speaker/Performer
LOCATION: Flintridge Retreat Center	Balloons delivered by 3pm - Black, yellow, red and green
Room 117	Balloons
TOWN HALL MOMS PANELISTS 4-8:30pm:	TPF/PANELISTS/Vendors/Volunteers - setup starting at
Call time 4:00pm	2:30pm
 Felicia Ford <u>fefeford@gmail.com</u> 310-420-9119 	
 Jessica Williams 	Event Team Leads - Sutiweyu to determine vendor table
williamsj0288@gmail.com 909-239-6358	and Vendor setup.
Janice N. Gordon <u>inicole9803@gmail.com</u>	Stage/ Projector or Projection screen/ Facebook Portal
626-419-7525	Setup - Amanda
TRACE STEWART	
<u>traceemstewart@gmail.com</u>	2 portable mics - Ask Flintridge - Amanda
760-912-1395	
Abbie Amankwa	Vendor tables and chairs for each tables - Need to
<u>theglamwellnessnp@gmail.com</u> 909-549-2610	confirm with Flintridge - Amanda
 Aisha Spencer 	Outside tables for vendors
Aishaspencer82@gmail.com	How many tables provided inside and chairs (- Amanda
323-972-6952	will confirm)
• Vanity Grace <u>vanitygrace2018@gmail.com</u>	
909-341-3034	Check-In Table/Eventbrite Check-In/Presurvey handout -
 Imani Bradley <u>imanibradley@gmail.com</u> 	TBD
562-234-2143	
 Nicole Edun <u>operationmba@gmail.com</u> 951-347-3769 	Post Survey (print out and have pens available to fill out
 Sariah Grace <u>sariahgrace1@gmail.com</u> 	after event) - <mark>TBA</mark>
626-426-0766	Town Hall Needs:
	1-2 staff need for:
FOOD/DRINKS: 5:30pm	1) Registration - Amanda/Chelle
TOWNHALL: Wingstop, Coffee, Fruit Platter, fruit	2) Set up of room and food - Sutiweyu
punch, lemonade, iced tea, charcuterie board,	3) Pre/Post Survey Distribution (2 different surveys) -
grape cider, Water	Pre-Survey- paper and digital? Sophie will make Survey
	Monkey and give link and QR code and we will make
	paper handouts for use at event. Put link in chat
	Amanda
TPF TEAM:	4) DMH community survey - Make oversized poster with community survey QR code - use bit.ly to make QR code
<u>TOWNHALL:</u> Amanda, Sutiweyu, Nakeya	and design poster and order poster to print - chelle
	Post Survey. Need Easle for poster to stand on. Someone
Children's Socialization Group: Cathy, Lorrie	practice trying to survey and see how long it takes, how
	do we know who finished and and where does it go? The
HEALING WORKSHOP 4-6pm:	

Call time 3:30pm	people who turned it in get entered into the completion
Teresa Smith	of survey raffle.
	5) Maintaining zoom room
	6) Maintaining in person rooms
	Call times for Healing Workshops (2/22 and 2/24):
	Theresa - 3pm - Flintridge Retreat Center (117)
	Requested - 6 per table (5 Tables/30 Chairs)
	Black Tablecloths - get from store Cathy
	Pre and Post Survey - send pre survey to everyone who
	is registered for each event/workshop. Are they virtual
	or in person? Also have pre surveys and post surveys
	printed out hard copy for in person walk in participants - Chelle
	Chene
	No food needs
CHILDREN'S SOCIALIZATION WORKSHOP	
4-830pm	
Cathy	Call times for Children's Group (2/22 and 2/24):
Lorrie	Cathy - 2:30pm - 845pm - TPF (103)
Chelle	Lorrie - 6pm - 845pm - TPF (103)
Children & Casialization Consum Direct Manaia Dista	Chelle - 4pm - 5:30pm (Children's socialization) - TPF
<u>Children's Socialization Group:</u> Pizza, Veggie Plate, Fruit Platter, Juice, Water	(103)
Fluit Platter, Juice, Water	Music Streaming - Nakeya's Facebook portal
	Need login for Disney + for playroom, main lobby area
	dancing and movement in main area *give it to her!
	Need clipboards?
	Food - Pizza, Beverages, Coffee for staff
	Screening Needs:
Livestream: TBA	
VENDORS: Set Up: 2:30PM	
	Program:
	3 ads to add;
NEED TO CONTACT	

AAIMM Black Maternal Health Support Group	45 people registered? Are they prepped
SOUND HEALING	Mudtown Farms
8-930pm	
Onyi	
Sutiweyu	
Alo team - Live Streaming - Task Force Youtube? or	
Zoom? Give login to sutieweyu/Alo	
SET UP TIME:	SET UP TIME FOR VENDORS/STAFF
2:30pm	 Healing station
2.50pm	Vendors
	• vendors
HEALING STATION WORKSHOP FLOW:	
4:00pm - 5:30pm (1.5hr)	
CHILDREN SOCIALIZATION GROUP:	
4:00pm - 8:30pm (4.5hr)	
4.00pm - 8.30pm (4.5m)	
TOWN HALL EVENT FLOW:	
5:30pm - 6:30pm (30 minutes)	
Check in Station	Check in Station
Check-In Table/Eventbrite Check-In/Presurvey	 Amanda will check in participants, place names
handout	in raffles, hand out presurveys
6:00pm - 6:30pm (30 minutes)	
Mingle	Mingle
For Town Hall: Sparkling Cider, Lemon Pepper	Mingle
wings from Wingstop, Finger Foods, fruit, cookies,	 Inside
water, fruit punch, lemonade, iced tea,	 Drinks and Food Outside
charcuterie board,	
	 Vendors
For Child Care: pizza, veggie snacks, juices and	
water For both: coffee	
For poth: conee	
[All Names Placed Into Virtual Raffle Upon Entry]	• America will also a series into vistual as ffla
	 Amanda will place names into virtual raffle
6:30pm - 6:40pm (10 minutes)	
Introductions of TPF staff	
Nakeya - introduces herself as primary facilitator	
,	
6:40pm - 6:55pm (15 minutes)	
Group Intros and Icebreakers	
Round 1 - name and occupation	
Round 2 - how many kids do you have	
hound 2 - now many kids do you have	

Round 3 - what is your dream vacation?	
6:55pm 7:00PM (Eminutes)	
6:55pm- 7:00PM (5 minutes)	Pattle
Raffle (Restaurant Gift Cards - 3 Chipotle - \$15 each)	Amanda will project a virtual raffle
	Amanda win project a virtuarrame Share Video
<mark>7:00PM - 7:15PM (15 minutes)</mark> Share Video	Sutiweyu will project video
(mom-created/TPF edited)	• Sutiweyd win project video
(mom-created) in edited)	
7:15PM - 7:35PM (20 minutes)	
Open Discussions/ Questions for Panel from	
Audience	
(Audience Prompts: In one word, describe how	
this video makes you feel? Can any of you relate	
to the trauma/experiences shared?)	
7:35PM - 8:15PM (40 minutes)	
Panel Discussion	Panel Discussion
Ask each mother a question about her shared	 Panel Questions for Nakeya to ask panelists.
experience	
Panel Questions:	
https://docs.google.com/document/d/1NzgCRaYx	
10_ZQadJAefcqDW6bR52XiKE1av0hk4VNfo/edit?	
<u>usp=sharing</u>	
**	
*Option - Open Discussion for Audience	Community Survey & Post survey
(Audience Prompts: In one word, describe how	Project Community Survey and handout
this video and these videos make you feel? Can	printouts
any of you relate to the trauma/experiences	 Project Post Survey and handout printouts
shared? Is there anybody in the room who would	
like to share their story?)	
	Closing remarks - <mark>Nakeya</mark>
8:15PM - 8:25PM (20 minutes)	
Issue Community Survey/QR Code on screen, link	
in chat, disseminate paper copies	
Survey Link needed from all attendees required	
from DMH:	
https://bit.ly/MomSquadSurvey	
Survey QR Code:	

8:25PM - 8:30pm (5 minutes) Raffle	 <i>Raffle</i> Amanda will project a virtual raffle
8:30pm-9:00pm (10 minutes) <i>Take Down</i> Clean up Flintridge and office area END = minutes running time	Note: For internal purposes only

END = ... minutes running time

Note: For internal purposes only

Community Informing Access

HELP US WITH OUR COMMUNITY SURVEY

Need Help? Call the LACDMH 24/7 Help Line 800-854-7771

An amazingly brave group of Black mothers shared their narratives and created this community survey to help public systems better serve our families.

Please help us honor their hard work by using your voice to also impact change by completing the community survey

bit.ly/bmh_survey









Community

<u>Surveys</u>



As of 06/20/22, a total of 114 community surveys have been completed which surpasses our goal of 110 completed surveys. Please see the Survey Monkey Summary Report and for outcomes/trends below.

The survey results show that the majority of participants (77.78%) reside in Los Angeles County, indicating a high level of local engagement. 52.78% of participants are 40 years old or older, 19.44% of participants are in the 36-40 year old age group,18.52% lied between the 30-35 age range, 5.56% fit between the 24-29 age group, and 3.71% were 23 or younger. A significant percentage of participants (94.44%) have health insurance, which can contribute to improved access to healthcare services. Over half of the participants (52.83%) have a mental health provider, suggesting access to mental health support. The survey identified mental health concerns among participants, including postpartum depression (52.88%), depression (75.96%), anxiety (79.81%), stress (77.88%), and grief (70.19%). This highlights the importance of addressing mental health needs within the community. The survey also revealed medical concerns among participants, such as high blood pressure (51.67%), gestational diabetes (15%), Preeclampsia (13.33%), high cholesterol (28.33%), Preeclampsia (13.33%), and diabetes (8.33%) underscoring the need for comprehensive healthcare services.

Participants expressed a desire for increased support and care during childbirth and prenatal visits, with 59.02% indicating that they do not feel adequately cared for in these settings. A significant portion of participants (47.17%) reported not having a mental health provider, indicating a need for improved access to mental health resources. A low percentage of participants (12.38%%) reported having a birthing provider, suggesting a need for increased access to prenatal and birthing care services. More than half of participants stated they did not know their maternity leave rights (51.43%). A significant number of participants (36%) reported not feeling adequately cared for during childbirth and prenatal visits, suggesting a need for improved healthcare experiences. Financial challenges were prevalent among participants, including credit issues (44.93%), lack of savings (55.07%), job loss (18.84%), and struggles to pay bills (50.72%). This highlights the need for financial support and resources within the community.

Overall, the survey highlights the diverse needs and challenges Black mothers and families face, including mental health concerns, medical issues, and financial hardships. Addressing these needs requires a comprehensive approach encompassing improved access to healthcare services, mental health support, and financial resources to ensure the well-being and empowerment of the community. We also realize that it can be difficult to answer questions or become self-aware so many participants skipped questions and that trauma/mistrust may have contribute to outcomes of many participants deciding not to answer all questions on the survey.

Strengths and Barriers

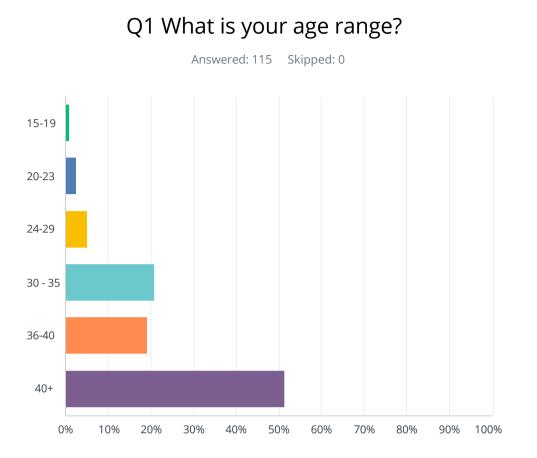


Strengths:

Overall we were able to inform and influence nearly 600 participants through the cohort and Black Mental Health Summit. The tools and information given through these meetings have also indirectly influenced the families of the participants as well. Furthermore, we have been able to collect important data using both cohort pre/post surveys and community surveys that helped us understand the concerns participants have that may affect their mental and physical well being. Surveys also helped us understand where our participants lack proper maternal healthcare which in turn allowed us to target these disparities during our meetings. Please refer to both pre/post survey and community survey sections for more detailed information.

Barriers:

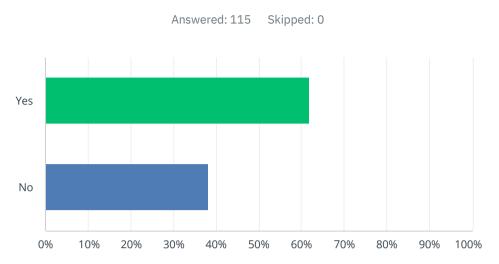
Facilitators had difficulty developing questions that were culturally sensitive but that still indicated the recipient's current knowledge, expectations and existing trauma. We utilized staff who are Black mothers in order combat this challenge and were fully receptive to their feedback and input. During the planning stages of cohort meetings, it took more effort than anticipated to find Black mothers interested in participating. Some mothers approached were worried about the unwanted publicity their recorded birth stories would garner and were worried about their current employers finding it and hearing what they said and it having some sort of impact on them financially. Some participants stated they have never done anything like this before but this challenge and were fully receptive to their feedback and input. because they trust TPF and the staff approaching them they would participate. When joining, some requested and referred over other Black mothers so they would not "be alone" which led to us exceeding our goal of 10 moms. Another challenge was getting those interested to respond to emails and communications in a timely manner. Finally, not many participants wished to participate in creating narrative videos. We were able to incentivize them. Many of them wrote their testimonies and sent them to our facilitator. Please refer to the cohort testimonies section above for detailed summaries of their testimonies.



ANSWER CHOICES	RESPONSES
15-19	0. 87% 1
20-23	2. 61% 3
24-29	5. 22% 6
30-35	20. 87% 24
36-40	19.13% 22
40+	51. 30% 59
TOTAL	115

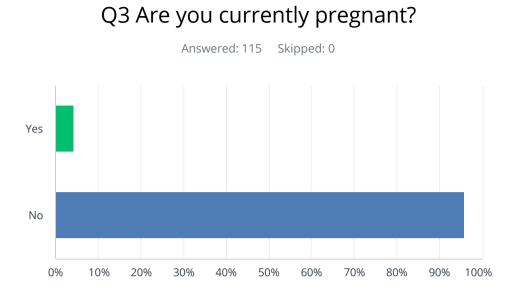
Community Survey

Q2 Do you identify as a Black/African American mother?

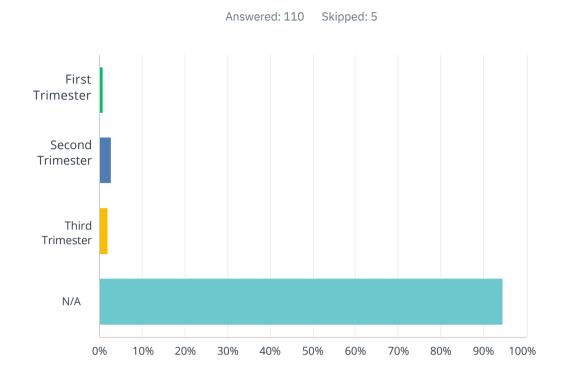


ANSWER CHOICES	RESPONSES	
Yes	61.74%	71
No	38. 26%	44
TOTAL		115

Community Survey

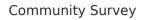


ANSWER CHOICES	RESPONSES	
Yes	4. 35%	5
No	95. 65%	110
TOTAL		115

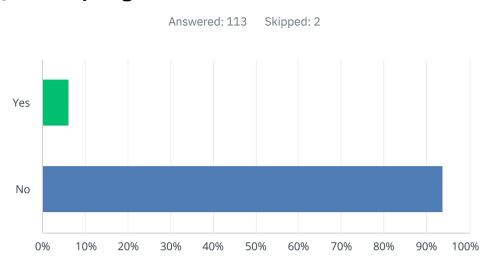


Q4 If you're pregnant, how far along are you in your pregnancy?

ANSWER CHOICES	RESPONSES	
First trimester	0.91%	1
Second trimester	2.73%	3
Third trimester	1.82%	2
N/A	94. 55%	104
TOTAL		110



Q5 Have you given birth within the last 12 months?

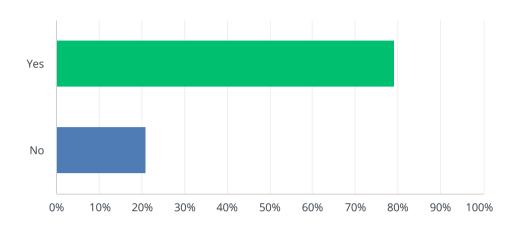


ANSWER CHOICES	RESPONSES	
Yes	6.19%	7
No	93.81%	106
TOTAL		113

Community Survey

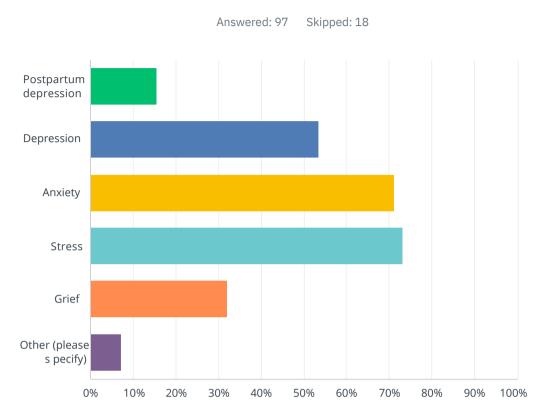
Q6 Do you reside in LA County?

Answered: 115 Skipped: 0



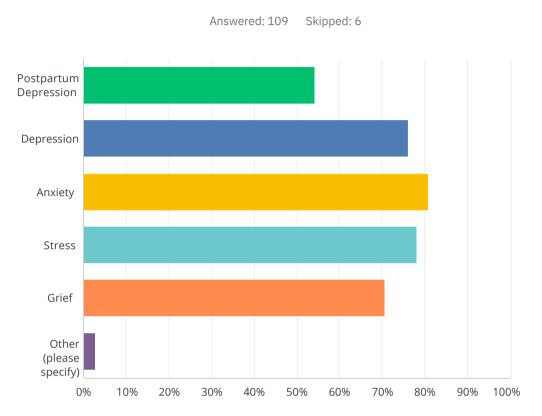
ANSWER CHOICES	RESPONSES	
Yes	79.13%	91
No	20. 87%	24
TOTAL		115

Q7 Have you or are you currently experiencing any of the following mental health concerns?



ANSWER CHOICES	RESPONSES	
Postpartum depression	15.46%	15
Depression	53.61%	52
Anxiety	71.13%	69
Stress	73.20%	71
Grief	31.96%	31
Other (please specify)	7.22%	7
Total Respondents: 97		

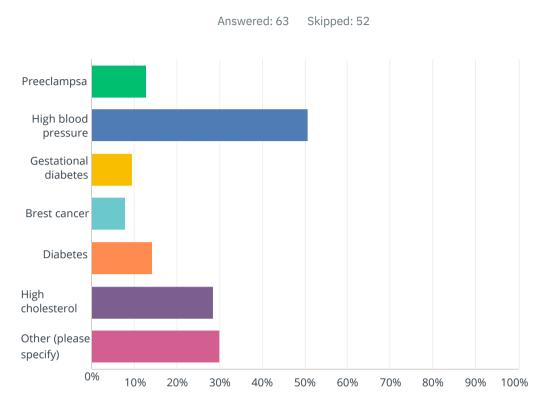
Q8 Do you know someone who has experienced any of the following mental health concerns?



ANSWER CHOICES	RESPONSES	
Postpartum depression	54.13%	59
Depression	76.15%	83
Anxiety	80.73%	88
Stress	77.98%	85
Grief	70. 64%	77
Other (please specify)	2.75%	3
Total Respondents: 109		

OTHER (PLEASE SPECIFY)	
PTSD		
Schizoph	renia	
PTSD		

Q9 Have you or are you currently experiencing any of the following physical health concerns?

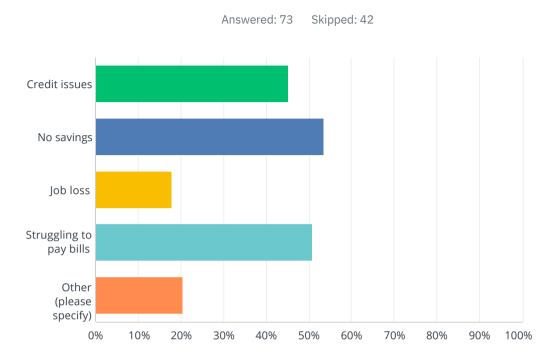


ANSWER CHOICES	RESPONSES	
Preeclampsia	12.70%	8
High blood pressure	50.79%	32
Gestational diabetes	9.52%	6
Brest cancer	7.94%	5
Diabet es	14.29%	9
High cholesterol	28.57%	18
Other (please specify)	30.16%	19
Total Respondents: 63		

OTHER (PLEASE SPECIFY)	
No	
NA	
 No	
 Tumors in the brain	
Pre-diabetes	
 None	

Low oxygen	
No	
Rheumatoid Arthritis	
Psoriasis	
Chronic Pain	
Chronic Pain	
Colon cancer	
N/A	
Fibromyalgia	
no	
N/A	
Fibromyalgia	
autoimmune Fibroids	

Q10 Have you or are you currently experiencing any financial challenges?



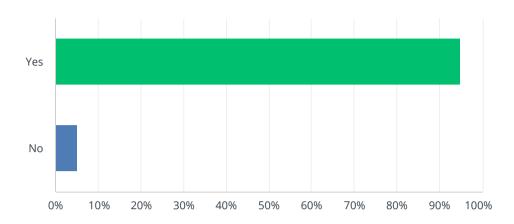
ANSWER CHOICES	RESPONSES
Credit issues	45.21%
No savings	53.42%
Job loss	17.81%
Struggling to pay bills	50. 68%
Other (please specify)	20. 55%
Total Respondents: 73	

OTHER (PLEASE SPECIFY)	
No	
I have not had any financial struggles	
Stable job and retirement	
None	
student loans	
No	
N/A	
Financial management	
low earnings, lack of grants for salary	
Tax es	
N/A	

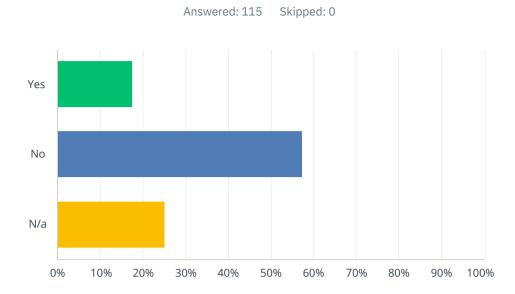
No	
No	
No	
Housing insecurity, disabled adult child and mold in a unit we lived in that a billionaire owns in Playa Vista. Will nit accept responsibility, and we were displaced	

Q11 Do you have health insurance?

Answered: 115 Skipped: 0



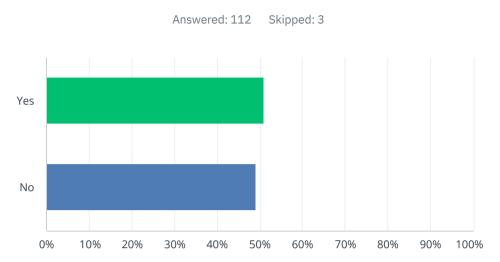
ANSWER CHOICES	RESPONSES	
Yes	94.78%	109
No	5. 22%	6
TOTAL	1	115



ANSWER CHOICES	RESPONSES
Yes	17.39% 20
No	57.39% 66
N/a	25.22% 29
TOTAL	115

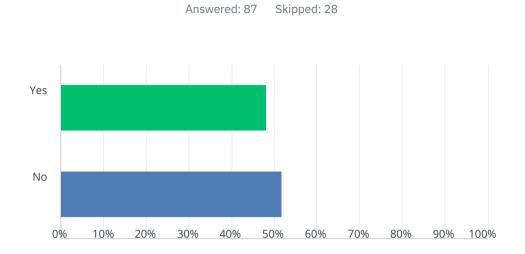
Q12 If insured, are you underinsured?

Q13 Do you know your maternity leave rights i.e. FMLA?



ANSWER CHOICES	RESPONSES	
Yes	50.89%	57
No	49.11%	55
TOTAL		112

Q14 Do you (or did you) feel cared for or valued during childbirth and prenatal visits?



ANSWER CHOICES	RESPONSES	
Yes	48. 28%	42
No	51. 72%	45
TOTAL		87

Q15 If so, please explain why.

Answered: 27 Skipped: 88

RESPONSES

It seems as though healthcare professionals are making a concerted effort to provide appropriate care.

I didn't receive help until insurance cleared and didn't have support system

No

I have pretty great health insurance and a good team of support with the UCLA midwives and nurses

N/A

NA

I'm a health professional

I had great service through Kaiser

It's hard to feel care in large healthcare systems

The medical professionals were always available to help

Not sure didn't have guide

Supportive friends and family

N/A

Question does not apply. N/A

I have multiple children and had differing birth experiences, some of which were very negative. In my first two pregnancies I was on Medi-Cal which impacted some aspects of how I was treated by staff. I also felt like my choices on optional tests were over scrutinized by my doctors with one of my pregnancies and in that instance I had to change doctors four times and was labeled as difficult. During one pregnancy I was counseled on whether I wanted to terminate my pregnancy because the baby may have Down Syndrome, while I was approaching my third trimester. Despite insisting that I did not want to terminate the pregnancy they continued to bring up the option, never disclosing the high false positive rate of that screening exam.

Everything felt rushed - she came in, she asked her standard questions, she checked vitals, and she left. Very efficient, but not caring.

My obstetrician was awesome

N/a

Lots of tests were done, classes were offered for any concerning areas, doctor was responsive when I emailed or called

I was blessed to have a black Doctor who saw me and was there for me every step of the way. If it wasn't for him I don't know how my experience would have been.

I was blessed to have a black Doctor who saw me and was there for me every step of the way. If it wasn't for him I don't know how my experience would have been.

Had regular appointments with OB. Nursing staff during delivery made sure I was well; advocated for me.

Does not apply

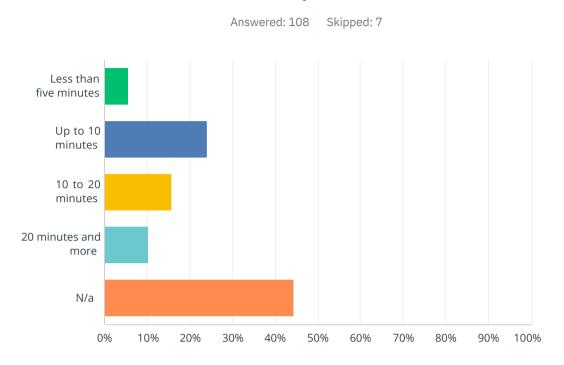
Not at first. But eventually found my soror, Black female doctor and she took care of me

Sometimes, it was hit or miss

I received Care through a midwife and she was very attentive and informative. I also received care through an obgyn and I felt rushed with appointments, but I received quality care.

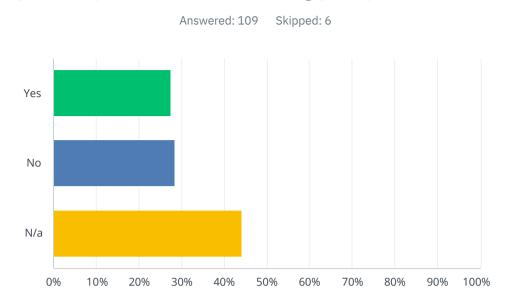
Dr Harold Peart let my daughter almost die because of his neglect

Q16 During your prenatal care visits, how long did your provider spend with you?



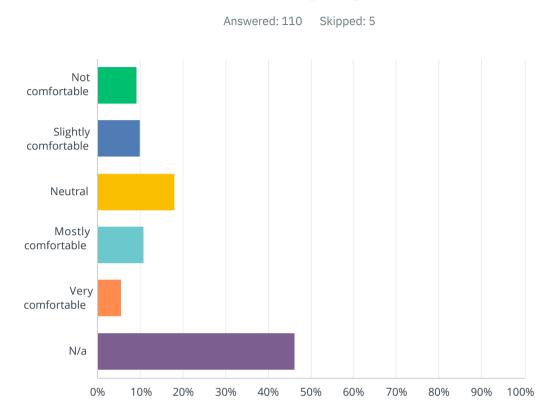
ANSWER CHOICES	RESPONSES
Less than five minutes	5.56% 6
Up to 10 minutes	24.07% 26
10 to 20 minutes	15.74% 17
20 minutes and more	10.19% 11
N/a	44.44% 48
TOTAL	108

Q17 Did you (do you) feel rushed during your prenatal care visits?

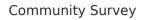


ANSWER CHOICES	RESPONSES
Yes	27.52% 30
No	28.44% 31
N/a	44.04% 48
TOTAL	109

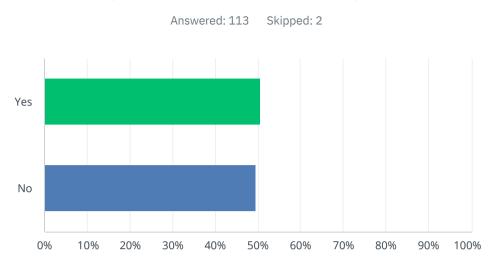
Q18 Based on your prenatal visits, how prepared and comfortable did/do you feel about giving birth?



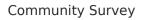
ANSWER CHOICES	RESPONSES	
Not comfortable	9.09% 10)
Slightly comfortable	10.00% 11	L
Neutral	18.18% 20)
Mostly comfortable	10.91% 12	2
Very comfortable	5. 45%	6
N/a	46. 36% 51	L
TOTAL	110	C



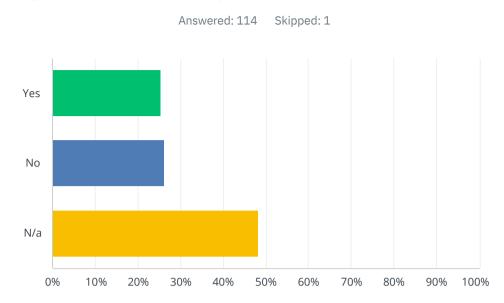
Q19 Do you have a mental health provider?



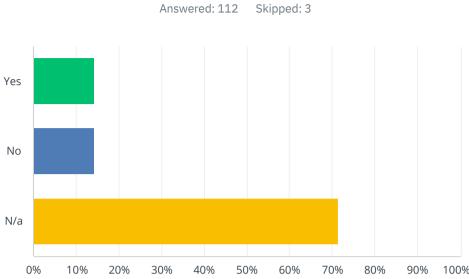
ANSWER CHOICES	RESPONSES	
Yes	50.44%	57
No	49.56%	56
TOTAL		113



Q20 Is your mental health provider Black/African American?



ANSWER CHOICES	RESPONSES
Yes	25.44% 29
No	26.32% 30
N/a	48.25% 55
TOTAL	114



100% **ANSWER CHOICES** RESPONSES 14.29% 14.29% 71.43%

Yes

No

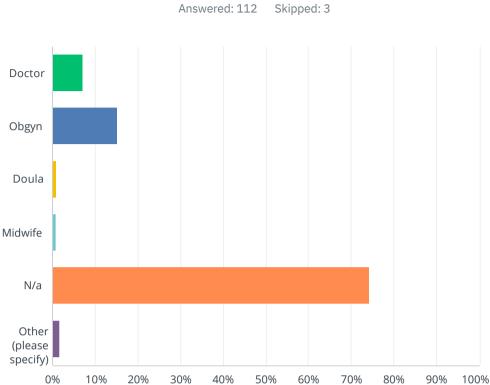
N/a TOTAL 16

16

80

112

Q21 Do you have a birthing provider?



	(please specify)											
	0%	10%	20%	30%	40%	50%	60%	70%	80%	90%	100%	
ANSWER CH	IOICES							RESPONS	SES			
Doctor								7.14%				
Obgyn							-	15. 18%				
Doula							(0.89%				
Midwife								0.89%				
N/a								74.11%				
Other (please	e specify)						-	1.79%				
TOTAL												
#	OTHER (PLEASE S	PECIFY)										
1	No											

Haven't decided

2

8

17

1

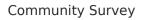
1

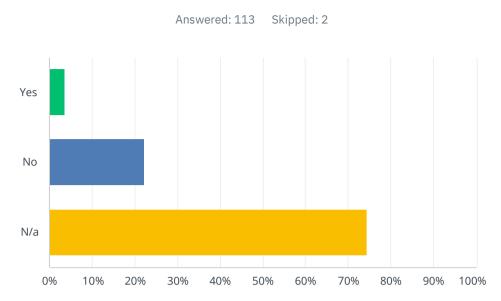
83

2

112

Q22 What type of birthing provider do you have?





Q23 Is your birthing provider Black/African American?

ANSWER CHOICES	RESPONSES
Yes	3.54% 4
No	22.12% 25
N/a	74.34% 84
TOTAL	113

Q24 If you have a doula or midwife, please explain why you chose this type of provider?

Answered: 14 Skipped: 101

RESPONSES

No

I didn't like the OB who was going to be my delivering doctor so switched to the midwives. I also had a doula but due to Covid constraints, she couldn't be in the hospital with me. N/A

N/A

N/A

Because I knew I wanted someone in my corner while giving birth. Also, I was afraid of Black mortality rates.

N/a

Because I wanted support

N/A

N/a

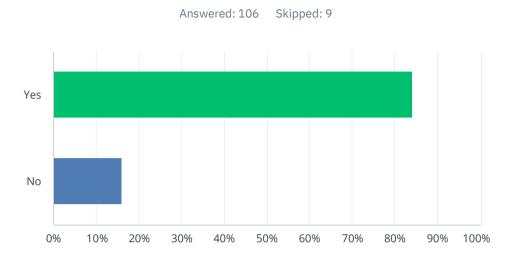
No

I chose a midwife because I initially wanted a home birth due to the health disparities present.

None

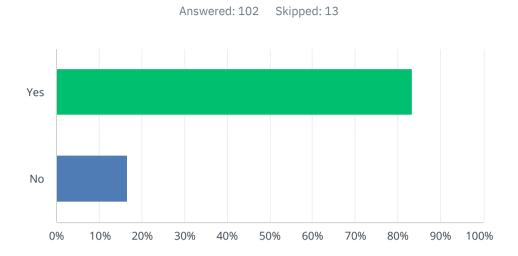
N/A

Q25 Do you prefer being helped by a Black/African American provider?



ANSWER CHOICES	RESPONSES	
Yes	83.96%	89
No	16.04%	17
TOTAL		106

Q26 Are you comfortable with being helped by a non-Black provider that is empathetic, genuine and aware of your challenges as a Black mother?



ANSWER CHOICES	RESPONSES	
Yes	83.33%	85
No	16.67%	17
TOTAL		102

Q27 If not, please explain why.

Answered: 16 Skipped: 99

RESPONSES

They judge and think your an addict

No

N/A

I might work with an empathetic provider but rather than comfortable, I feel on low-level

alert for signs that they're missing something important to me.

not a mother

I'm not a black mother

N/A

I don't like having to educate them on my cultural needs

N/a

Having to navigate the ingrained oppressive behaviors aren't worth it

It depends, I prefer black but I have come across some black providers that did not show empathy

I feel like if you never felt my struggle as a Black woman, you will never understand the struggles of a Black Woman

Because I'm more comfortable with people I can relate with

Being black gives most of us a set list of shared experiences within our culture that no one else can understand

Q28 What are some characteristics you would like to see in a healthcare provider?

Answered: 69 Skipped: 46

RESPONSES

Patience, listens to my concerns and provides solutions w/out discarding my concerns

Science based, understanding, empathetic, warm, knowledgeable, caring

Woman and black

No

Someone who is willing to listen to my concerns and doesn't down play my feelings.

Not to see use as a number and to prescribe drugs to. Actually take time to care fully to the patient

Empathy, truthfulness, availability

Compassion, understanding, good listener, informative, knowledgeable, and patient

More holistic care integrated, more time during visits

Helpfulness in providing assistance with filling out paperwork; and empathy and understanding.

Empathetic, culturally knowledgeable, down to earth,

Actively listens, asks follow-up questions to information that I share, has open facial and body

language, actively speaks about the challenges they're aware of with Black women receiving care.

a good listener, not fat phobic

My son was born with a lot of health problems I was always told he was ok ok and then when cps came along his health is so bad he's in a medical hub program

Knowledgeable, respectful, empathetic

Friendly informative

Friendly informative

Caring and genuine

Competency, professional, empathetic

Patient, understanding, caring

culturally competent and put those into practice

Kind

Caring and empathetic approach

Willingness to see all options and not just book

Compassionate and understanding

Caring

Listening, understanding, and empathetic

consistency and real care

Cultural competent, sensitive

Connection to the person

Cultural competence, compassion, patience, knowledge

Empathic, woman, BIPOC

More patient time given and detailed exam explanations

more bedside manners

Cultural awareness regarding equity, cultural differences, and knowledge of Black history and reference point. A person experienced and knowledgeable of working with diverse groups of people.

experience, respect for patient choices and options

caring, high level of communication, understanding my needs

compassion and knowledge

A well resourced provider, that listens to my concerns, that believes in comprehensive care, is open to incorporating non-western healing practices, and is readily accessible. Thorough, explains things, provides options

Trusting patients concerns

Authentic

Nurturing bedside manner

They listen and not just rush you through

They listen and not just rush you through

Attentive, patience, inquisitive and concerned

Understanding- racial compassion-

Warm, caring, attentive

Caring about your wellbeing

Competency

Caring, loving and supportive

Empathy

Listen

realism

For black women to be understood more

Caring, patient, knowledgeable about my culture and expectations

No rushing

Empathy, care, listening skills, paying attention to the Nonverbals

Empathetic, understanding, calmly informative, culturally competent

Caring, compassionate, understanding to cultural issues

Caring, emphaty with the patient, pacient, friendly

Caring, culturally aware, passionate, loving, patient, non judgmental

Empathy, listen to understand, cultural competency, tells me all my options, listen to my plan

Listen to black women more

Availability for black providers to take on new clients. In my experience it has been hard to find black providers and when they are there, they aren't accepting new patients

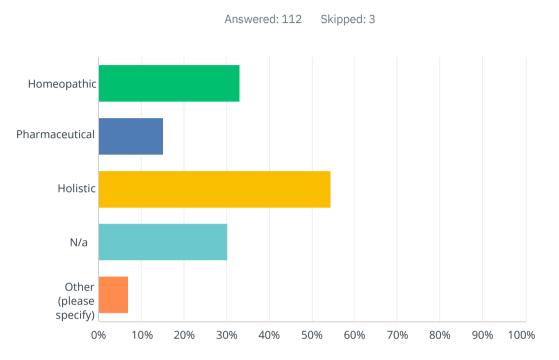
Listen

Morals, values, and love what they do

Calm welcoming attitude, with care

Color, bed side manner, energy

Q29 Do you prefer a homeopathic (non-traditional/Eastern modalities/natural), pharmaceutical (traditional/Western medicine), or holistic (homeopathic, pharmaceutical and mental wellness) approach to your healthcare needs?



ANSWER CHOICES	RESPONSES	
Homeopathic	33.04%	37
Pharmaceutical	15.18%	17
Holistic	54.46%	61
N/a	30.36%	34
Other (please specify)	7.14%	8
Total Respondents: 112		

OTHER (PLEASE SPECIFY)	
 No	
Knowledgeable about both	
equally open to both	
Open to options	
Spiritual	
 I prefer a combination of care modalities	
 Pretty open with pharmaceutical being a lady resort	
Herbal natural vitamins	

Q30 Please explain why.

Answered: 45 Skipped: 70

RESPONSES

My experience with homeopathic practices have netted better relationships with my healthcare providers, as well as, more effective treatment

I think all of them have value.

Love the idea of natural care

No

Pharmaceuticals don't fix the problem, they just mask them and create more problems. The body is able to heal itself if you let it

Familiar

I was raised adhering to a mix of Western medicine and homeopathic/Eastern medicines.

I've found that having all 3 provided give me the fastest results with minimal to no side effects and help shift behavior for longterm integration.

I believe all forms of care have some level of validity to their claims.

Different options and able to think about my care broadly

I'm most familiar with Western medicine but believe deeply in attempting to focus on root causes of imbalance. I think looking at the body/mind/spirit can be more effective at the root. i am a whole person and I deserve access to all applicable options to be well

It's what I know

A mixture of both is beneficial

I don't trust the pharmacy industry

I have three doctors, a traditional doctor, Dr. sports, medicine, and a holistic doctor, and a health coach

More effective, less side effects, more recovery

I'm sure something can be learned/experienced from each approach

I believe different approach to healing ther than traditional (medication) is long term more healthier for the body.

Multiple ways of providing care and knowing full range of options.

natural cures often get at the core cuase and help relieve without harmful side effects

I like to explore all available options and make a determination on what feels right for the particular situation.

I trust western medicine fine, but am open to hearing alternatives

Broader choices

I don't care

It's natural and authentic. Don't want to use pharmaceutical to trick the body into thinking it is well. Want my body to actually be well.

It feels like it would be safer

Although I believe both eastern and western can be helpful when combined... I tend to be

medication averse due to mistrust of the medical industry... but doing my own work there.

I want to have the option to engage with practices from ancestral knowledge and healing from earth connections

It worked in the past. I'm fearful medicine could cause other problems

I don't trust the medical system and prefer natural methods when possible.

Herbal based on side effects of medicine

Because I don't like medicine and I feel natural healing is the brst.

nature is always best

Holistic care touches on every part of our health

Because for me it's more security than others

I believe it is beneficial for health and wellness to be treated as a whole.

It is less risky to develop other issues

I believe natural healing modalities should be used first before medicine. I believe, culturally, western medicine is frowned upon.

I do not believe Western medicine is the only way

None

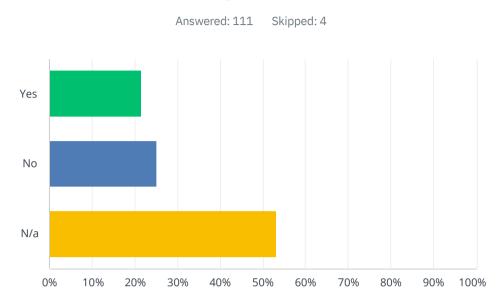
I'm open minded to various approaches. If it works, it works!

I delivered 3 children without complications or medication and would love to do a water birth

More meaningful and helpful with things that are Non medical in a traditional sense

Prefer natural remedies

Q31 Do you know what resources are available to you during and after pregnancy?



ANSWER CHOICES	RESPONSES
Yes	21. 62% 24
No	25.23% 28
N/a	53.15% 59
TOTAL	111

Q32 Are the any other comments or concerns you'd like to share regarding 1) mental health, 2) gaps in services/service delivery, and/or 3) ways to serve our community that are culturally appropriate and holistic.

Answered: 32 Skipped: 83

RESPONSES

I think we can offer medical services without involving spirituality. I'd like to see that more from holistic providers.

No

The process of filling out paperwork in order to go on leave is perhaps the most overwhelming part of the process.

Mental health care providers aren't paid enough. The stress of providing care and having difficulty paying bills is a reason folks are leaving the profession.

I wish providers understood that everyone with a uterus does not want to have a child and everyone who has a child is not a woman.

No

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As a mental health professional I still have a heard time finding and getting the services I need and getting providers to listen to me. Wealthier women are actually more at risk for birthing death and issues because there are actually now more resources for women in poverty than the average woman. Even women with healthcare. I lost 2 babies in a 3 month time span. The 2nd while waiting to get in for an IUD appointment after loosing the first baby and learning I and my baby were high risk. I can only imagine what less equipped women experience. No

Lack of TAY youth services while pregnant and with small children. More help for young mothers and fathers from 18-25

More professional customer service oriented workers

Mental health receiving the correct resources a

I believe we all in the work should continue seeking different ways to reach our community in need.

Listening, experiencing our reality, and cultural intelligence are important factors to deal with mental health. Therapists should be exposed to a public health framework to understand and empathize with the whole person.

It hard to connect with black mental health or medical providers. Ppl make you feel bad by inquiring if you have someone that looks like you (black).

reaching out in small in person groups concerning to provide education/information about mental health

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Hire more Black providers and also think about more interactive ways to engage with us about our health than just a white room and talking about sad things.

Accessing justice through economic health- and restoration to our right relationship with our people as and equity agenda upheld at the federal level

Not at this time

Questions should've encompassed concerns for everyone not just limited to mothers. This was supposed to have been education on black mental health

No

Na

1 mental health is real. I realized that I have a lot of childhood trauma that I've suppressed as a coping survival mechanism. As a result I was always looking for someone to fill the void I had in my heart. I had to learn the value of self love, forgiveness and grace. I had to unlearn to be strong all the time.

Not at this moment of the workshop. thank you.

We need free healthcare! We need black providers!

None at the time

No

.

I'm so glad that we're removing the negative stigma around mental health support in the black community

Please care for us