

YEAR 2020

ANNUAL REPORT

2020

VITAL VILLAGE NETWORKS
BOSTON MEDICAL CENTER



INTRODUCTION



Vital Village Networks (VVN) builds community capacity to optimize child well-being, prevent early life adversities, and advance equity by developing leaders, connecting institutions, and building research evidence and shared data systems. During 2020, our efforts are all the more critical as our network responds to the twin pandemics of the novel coronavirus (COVID-19) and systemic racism.

Systemic and unjust social and economic policies have exacerbated inequities in COVID-19 health outcomes. COVID-19 has increased financial and material hardships for families, including food and housing insecurity; disrupted access to enrichment, childcare, and educational opportunities and supports; disrupted daily routines and schedules; increased stress during critical periods, such as pregnancy; and disproportionately impacted communities of color. The COVID-19 pandemic exposes the tremendous cost of failing to address systemic inequities.

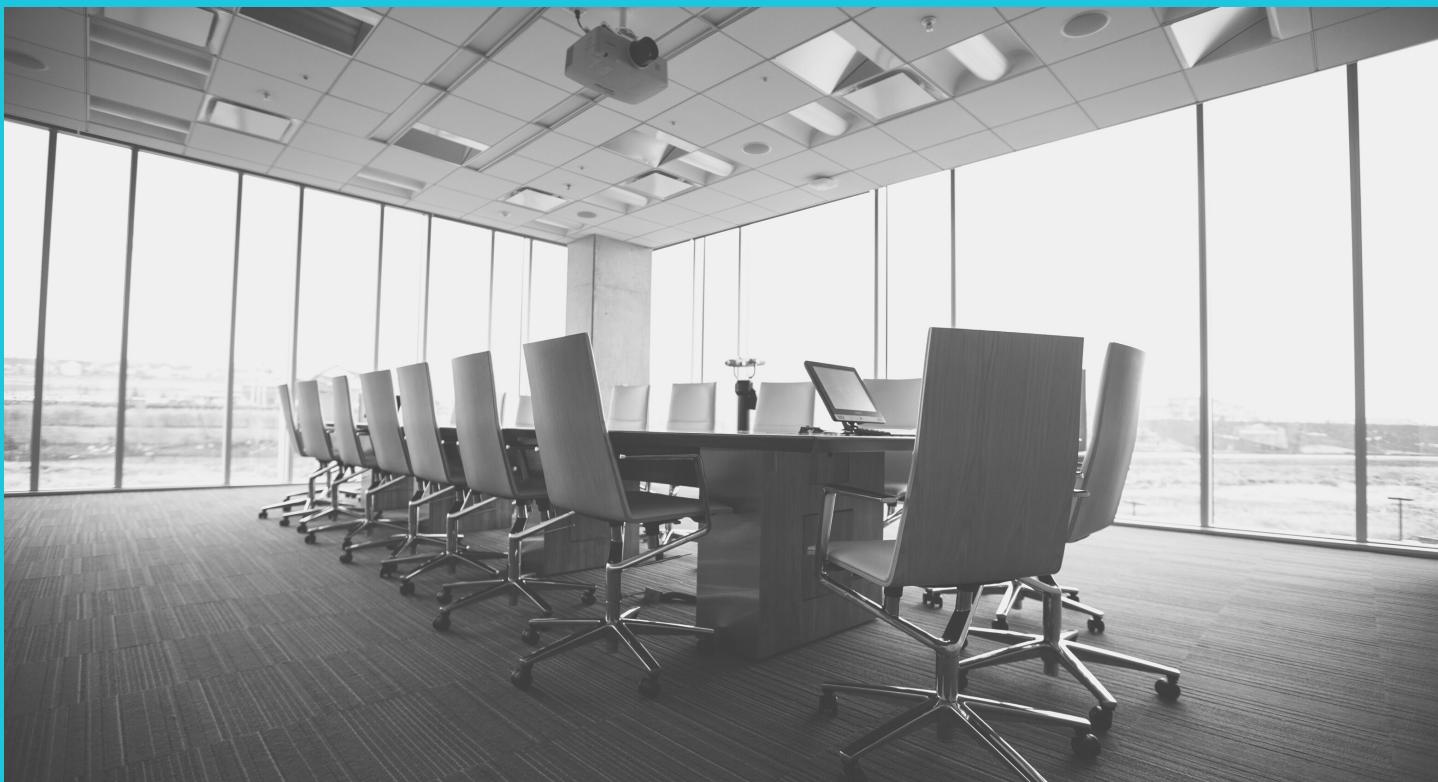
During this period of uncertainty, the Vital Village Team adapted our organizational structure, communications, convening, and programming in order to address new and emerging obstacles. Our flexibility allowed us to address new and emerging obstacles and uncovered new opportunities to engage stakeholders in collective actions.

Despite the immediate challenges waged by the COVID-19 pandemic, Vital Village is leveraging its network of cross-sector partnerships to ensure that community residents are included as leaders in efforts to promote public health and rebuild local infrastructure and systems of care and education. The novel coronavirus pandemic has elevated risk for social isolation, child maltreatment, parental stress, and family and community violence. Our work to support community leadership, collaboration, and shared resources and data to promote child wellbeing is even more crucial.

This annual report seeks to highlight some of the most significant adaptations and innovations that have emerged in response to the challenges of 2020. In partnership with community residents and organizational partners we have mobilized a lean, efficient, and consistent response to the pandemic.

7 STRATEGIES BASED ON THE VITAL VILLAGE NETWORKS Co-DESIGN MODEL

- 1 Mobilizing Civic Engagement, Collaboration, and Collective Action
- 2 Co-creating Spaces to Support Social Connections and Wellness
- 3 Updating Technology to Improve Access to Dynamic and Timely Resources
- 4 Maintaining Comprehensive and Up-To-Date Resource Maps and Tools
- 5 Engaging Policy Stakeholders and Policy Recommendations
- 6 Building Research Evidence on Risk and Protective Factors for Child Wellbeing
- 7 Leveraging Shared Data to Highlight Opportunities and Challenges



REMOTE OFFICE TRANSITION

Vital Village transitioned to a remote office during the second week of March 2020 as a result of the COVID-19 pandemic and this structure remains in place six months later. The transition, although abrupt, was relatively seamless, with limited interruption of existing programming and engagement efforts with our local stakeholders or partnering research sites, in part due to existing remote meeting technology and protocols that allowed us to adapt quickly to this new workplace normal.

We have developed virtual orientations and onboarding experiences for new staff, AmeriCorps VISTA members, student research Interns, and Emerging Leaders. For those completing their service commitment and for staff modifying roles, we have adapted our transition process to virtual.

We have worked to improve our internal capacity, technology, and protocols for secure, remote communications.

We continue to adapt our office culture and practices to maintain connections and promote wellness as well. Boston Medical Center has offered comprehensive support through Information Technology and Human Resources to support physical and mental wellbeing.

MOBILIZING CIVIC ENGAGEMENT, COLLABORATION, AND COLLECTIVE ACTION

With the transition to virtual operations, we needed to rethink our capacity building efforts. It became a critical priority to find ways to work with and support our community partners through the use of new tools and technology that offered the means for remote engagement. Instead of holding in-person events, we successfully transitioned to the virtual space by arranging for Zoom licenses for community volunteers, webinar trainings on remote meeting technology and security, and shared toolkits for remote facilitation and engagement. In response to home instruction for students, changes in childcare access, and remote and adapted forms of work for caregivers, we adapted our network meeting formats, adjusted length and times of the workday, and worked closely with partners to identify meeting themes and co-create relevant content.

In terms of our ongoing coalition-building efforts, this change brought new challenges for the Vital Village team. We needed to find a way to

move from traditional in-person hosting of events and convenings to virtual forms of these activities; however, this proved to be less of a challenge than expected, as our NOW team had nearly 2 years of experience with webinars, virtual group meetings, and virtual meeting technology from which we were able to learn. In fact, we were able to begin hosting virtual activities for our community partners the week after our office went virtual.

Overall, the virtual transition opened up new opportunities for collaboration, peer leadership, and learning across geographies. Virtual engagement offers the opportunity for stakeholders – organizations, individuals, and community members – to join in our efforts without having to accommodate in-person attendance, which may have been prohibitive in the past.

We have also found that partners from outside the greater Boston area are engaging in ‘local’ events. During the spring, virtual meetings hosted by the local Boston team

In photo: Roxbury Love mural (Photographed by Joe Difazio for WBUR)



regularly included partners from states outside of the Commonwealth of Massachusetts. NOW network partners in New Jersey and Washington state learned and adapted the virtual community café

model we launched for the Boston community. Our Steering Committee for the 2020 National Community Leadership Summit engaged partners from multiple states in planning efforts for the first time.

CO-CREATING SPACES TO SUPPORT SOCIAL CONNECTIONS AND WELLNESS

The pandemic has yielded new innovations, not just in the means of delivery but also in programming deliverables to address the unique needs of our current experiences. We worked collaboratively with partners and community leaders to co-create spaces to promote and support social connections and wellness, amid the collective experiences of trauma, uncertainty, social stress, and racial injustice.

Vital Village community leaders from the Breastfeeding Coalition now offer a breastfeeding support WARMLINE and transitioned in-person caregiver support groups to virtual group programming to reduce social isolation and increase community support along with expanded mental health

committee programming that proactively supports wellbeing and health. Our efforts also include a series of new virtual community cafés, guided by community partners, which provide a safe environment for timely dialogues on education, racism, childcare, and self-care, among other topics.

We have also used these virtual platforms to provide a new resource within the community called the Wellness Bank. We worked with community partners to develop a shared resource to promote learning, wellness, and critical information sharing. Community members contributed hundreds of resources that are sorted and available immediately through the Wellness Bank.

UPDATING TECHNOLOGY TO IMPROVE ACCESS TO DYNAMIC AND TIMELY RESOURCES

Among our achievements during this time period are the creation of resources that address immediate needs, such as improved technology for the Abundance Boston food access app. We modified Abundance Boston to include COVID-19 related resources as well as updated its existing features for the release of its 2.0 version. We focused on food access locations that were open to support the community during the pandemic, including WIC approved stores, food pantries and free meal sites, and meal sites for youth. As farmers markets re-opened, we updated the information. Changes in business hours of supermarkets have been reflected in the app as well. Based on a suggestion from one of our partners, we added another layer of information about the organizations that were assisting Boston residents with SNAP applications. The updated features in the 2.0 version of the app enabled users to select site types and search by keywords. In the list view, the app sorted sites based on a user's location showing the sites that were closest to a user.

MAINTAINING COMPREHENSIVE AND UP-TO-DATE RESOURCE MAPS AND TOOLS

We generated more data sharing tools to mitigate the economic and social consequences of COVID-19, including a COVID-19 Resource Map and our Community Housing Data Tool. In order to keep these resources up-to-date given the rapid nature of changing community

resources during the pandemic, we also developed a process for student interns to support team members in maintaining comprehensive and up-to-date resources on a weekly basis. The COVID-19 Resource Map mainly shares the resources that are



accessed by in-person visit, such as free meal sites for youth, food pantries & free meal sites, meal pick-up sites for seniors, COVID-19 testing sites, and hygiene kit & diaper sharing locations. In addition to the resource map, the page shares important virtual resources and information that would be helpful during the pandemic. The examples include utility assistance programs, food access hotlines, emergency child care programs, and changing information around public transportation. For the Community Housing Data Tool, we made a designated page for sharing resources and information about COVID-19 related eviction prevention.

As a part of initial response to COVID-19 to support families with children, we developed an educational resource map, a virtual field trip, sharing more than 100 zoos, aquariums, museums, national parks, and world cultural heritage sites.



ENGAGING POLICY STAKEHOLDERS AND POLICY RECOMMENDATIONS

Our new structure also allowed for more focused communications with elected officials with respect to timely, impactful events. In spring, we created and launched a virtual, census-focused campaign focusing on education and dispelling census-related myths. This campaign utilized social media as a primary tool for raising awareness and increasing engagement. We hosted a collaborative webinar with State Representative Ayanna Pressley to further emphasize the importance of participating in the census.

We continued our dialogues with local politicians regarding early care and education, particularly in light of existing educational challenges during the COVID-19 pandemic. During this period, our Certificate in Community Advocacy and Leadership program at Urban College Boston hosted Representative Liz Miranda and City Counselor Julia Meja, who spoke on the importance of local advocacy and pathways to greater civic representation, power and leadership.

Elected officials also contributed to our ongoing health and wellness efforts. Senator Sonia Chang-Diaz provided a citation on the importance of Black Breastfeeding Week and its positive impact on maternal and child health. We invited City Councilor Andrea Campbell to join our breastfeeding coalition for the launch of Black Breastfeeding Week, and her voice amplified the importance of equitable access to lactation support and the ongoing challenge of maternal and child health equity issues during these extremely challenging times.

Vital Village has made it a priority to continue our political outreach and community advocacy efforts through this time period as well. Our network co-authored the Network Juneteenth statement, which focused on racial injustice in the United States. We also participated in the comments provided to the House Ways and Means Committee by the Boston Breastfeeding Coalition and Breastfeeding Community Action Coalition (Springfield) for its May 27 hearing, "The Disproportionate Impact of COVID-19 on Communities of Color."



BUILDING RESEARCH EVIDENCE ON RISK AND PROTECTIVE FACTORS FOR CHILD WELLBEING

With our new and expanded virtual platform, Vital Village has broadened the way in which we are able to communicate with those that may have declined to seek assistance in person or with whom access may have been limited. One of our summer emerging leaders also developed a community needs assessment to help us better understand and time our communication and outreach, particularly in the areas of child well-being and youth wellness. The results of this needs assessment, as well as feedback from our virtual efforts, have helped us iterate and adapt programs and expand outreach into our community in new ways.

COVID-19 restrictions have required our communication platforms to evolve away from in-person events to virtual settings. Many of our in-person breast feeding and baby cafés, along with drop-in groups, are now held virtually, providing continued support for families through a virtual setting. For example, our breastfeeding coalition has launched a WARMLINE that provides daily accessibility to

families in the greater Boston area seeking lactation and parenting support. This new initiative utilizes a lean budget and Google-based tools to provide access to 17 volunteers via a hotline. Our seven-person leadership team continues to organize this new initiative, which also provides access to outreach video and other resource materials for families, and find more ways to make families in the community aware of these resources.

Traditional events, such as our May Mental Health Month community events have also been re-envisioned. Mental health and wellbeing focused communications and events have been adapted to virtual engagements, time sensitive opportunities for grief, self-care, and connection expanded, and the community Mental Health committee has expanded to develop a mission and scope of work that is to address mental health beyond a single month to promote wellbeing and to help reduce the stigma of seeking help during these challenging times. Our community coalition found that such a change was necessary to support the overall mental health and well-being of families in addressing.



not just COVID-19 related stress but race-based trauma and distressing, long-standing racial injustice that our nation is reckoning with in a new way.

NEWS AND MEDIA OUTREACH

We also focused our efforts this spring on making our collective voice heard through a variety of published op-eds that emphasized key issues of concern in our community. One opinion piece authored by one of our Emerging Leaders focused on child and adolescent mental health during COVID-19. Another focused on childcare providers as essential workers during this period and the provisions these key employees need. We also co-authored an op-ed that focused on the impact of police violence on the mental health and well-being of children.

We continue to seek out editorial opportunities where we can draw focus on areas of concern for our community during the twin-pandemics.

RESEARCH AND EVALUATION TEAM ADAPTATIONS

During this time period, the CRADLE Lab was officially launched, which included the CK-Ready Study and Centering Parenting Research Network. The CK-Ready study is the first major national cluster-randomized trial (CRT) that evaluates the impact of Centering Parenting, a model of group well-child care, on child outcomes at 24 months of age.

The CK-Ready Study faced immediate challenges with the impact from COVID-19; our funders paused funding for the study, as they were concerned about the closure of clinical in-person group engagement and the possible impact it could have on research

findings. However, we adapted our research approach so that we could continue work on this important study. We started working more closely with research sites so that they could navigate COVID-19 billing changes and telemedicine adaptations to ensure that the CK Ready Study could continue running smoothly. The CK Ready Team now meets biweekly with clinical sites to support action planning and adaptation.

The student interns who would normally work under supervision within the office setting adapted to new procedures and expanded

projects throughout Vital Village. We continued to engage study participants via phone, which allowed for a seamless transition to a virtual environment for continued study.

COVID-19 clinical changes resulted in an increased demand for the Centering Parenting Research Network due to the need for clinical sites to work together to explore the impact of this model and advocate for continued support of Centering at their respective sites.

The team designed and launched a supplemental stress survey to assess the stressors experienced by caregivers and families due to the COVID-19 pandemic and national

dialogue on racial justice and protests on racism.

The CenteringParenting Research Network (CPRN) launched in October 2020. Presently there are 11 clinical sites engaged in the Network. The CPRN members met monthly to design the aims, research priorities, membership roles, and research opportunities. The co-designed a Memorandum of Understanding (MOU) as well as membership guidelines. Several participated in a collaborative grant application. The CPRN plans to continue connecting virtually and expanding membership and developing research opportunities in the coming months.



In photo: Hank Willis Thomas and MASS Design Group's proposed memorial "The Embrace" (Courtesy of King of Boston) WBUR

FURTHER ADAPTATIONS FOR THE NOW TEAM

Our Networks of Opportunity for Child Wellbeing (NOW), a national effort, has successfully transitioned into Phase Two of its project work as planned, despite the unanticipated challenges of 2020. Prior to the start of the pandemic in February 2020, our learning community cohort concluded at the end of an 18-month Phase 1 period and transitioned to Phase 2, and we have had 100-percent engagement from all 10 coalitions involved in the cohort.

The next phase focuses on launching a number of capacity building leadership pathways co-designed by learning community leaders, partners, and other local leaders. A signature leadership pathway includes the launch of three Peer Learning Clusters, co-designed and co-led by members of the learning community cohort. Cluster leaders and participants will meet regularly around a central focus area or topic -- such as family engagement, trauma informed practice, and early childhood education workforce development -- to share learnings and use the collective wisdom of Cluster Group members to discuss

fchallenges and create opportunities. NOW staff members would partner with cluster co-leads in providing backbone support and additional professional development opportunities, including capacity areas such as virtual facilitation and healing centered team strategies. Although leaders are not funded in this new role, we have seen continued expansion of peer leadership roles.

Given the national scope of these leadership pathways, meetings and gathering would take place virtually and draw upon the ongoing lessons and adaptations around virtual meeting facilitation, communications, and engagement. Technology justice has emerged an important issue to expand accessible and participation to these leadership and peer learning opportunities, and the NOW team is continuing to explore additional partnerships or resources to support this need.

Other leadership Some members are also serving on the Steering Committee for our 2020 Community Leadership Summit as well as helping to guide the design of the next phase of the NOW Child Well-Being tracker.



Given the COVID-19 pandemic, several NOW partners expressed interest in adapting the tracker to capture family and community engagement efforts and how they adapted during the twin pandemics and their impacts on engagement.

Since the emergence of the COVID-19 pandemic, the NOW team has been able to leverage its existing online resource hub, the NOW Innovation Forum

(<https://networksofopportunity.org/>), to further disseminate timely and relevant resources, stories, and tools that focus on addressing the “twin pandemics.” Building on existing content structure and signature programming -- such as including blog, webinar, and podcast series, as well as an up-to-date searchable Resource Library, the NOW team was able to elevate additional content and resources focusing on topics such as community-driven policy advocacy for immigrant children and families,

priorities, membership roles, and research opportunities data storytelling, virtual facilitation, wellness during remote work, the 2020 Census campaign and more. The Forum is continuing to strengthen pathways for community leaders in our network to co-curate and co-develop future content, including additional guest authored blog posts and establishing formal community content co-curator roles.



In Photo: By Victor "Marka27" Quiñonez (Photo Courtesy of KP Strategies)

EXPANDED PARTNERSHIPS

While our efforts remain focused on deepening partnerships with communities in Boston, we are continuing to establish new partnerships nationwide.

We have leveraged our strong, positive reputation for focusing on strengthening social connections, community co-design and leadership, and addressing inequities to build new relationships with important stakeholders around the country. These efforts not only improve the quality of capacity building and partnerships as well as the community learning we engage in Boston, but also help create a stronger dialogue for positive change nationwide.

We also participated in a new project, which centered around a series of racial-healing dialogues presented by a national organization focused on immigration rights. We also partnered with the University of Massachusetts Boston Leadership Institute focused on improving compensation and equitable pay for early care and education.

Our NOW team has also focused on responding to several requests we have received in helping to support the design of racial equity and justice framing within clinical healthcare transformation models on the west and northeast coasts with the support of our existing team. We see potential for further work in adapting our capacity building tools that specifically serve our local community and other like communities nationwide. We also now have a business plan in place for future, deeper engagement with hospital systems.

Additionally, we plan to continue our work with webinars and podcasts, two easily accessible platforms that allow for sharing of information and insights both within our existing networks and partnerships, but also for those outside of our community that are seeking education and helpful resources. We believe that 2020 has allowed us to creatively innovate to address the needs of our community, and we are happy that we can share this information with others who may be facing the same challenges.

In photo: "Faces of Dudley" mural in Roxbury by Mike Womble and Mayor's Mural Crew (Greg Cook)



LEARNING SHARED DATA TO HIGHLIGHT OPPORTUNITIES AND CHALLENGES

The Child Wellbeing Tracker is a tool to capture the collective actions of local coalitions working to promote parent and family engagement, developed collaboratively by the NOW Learning Community. NOW Peer Learning Community coalitions shared information about their events, activities, programs, and projects involving parent and family engagement for the pilot implementation. The Phase 2 Cohort is co-designing the collective data sharing efforts in a way to track parent & family engagement during the COVID-19 pandemic, including information about changes in engagement environments, efforts in addressing systemic racism, and community leadership. We also plan to add a feature to the data dashboard that would allow the participating coalitions to identify and extract their own data. It is expected to help the coalitions use data to assess their efforts in parent & family engagement taking into account the changes caused by the pandemic.

2020 NATIONAL COMMUNITY LEADERSHIP SUMMIT

We continue to adapt our existing programming and efforts to the “new normal” created by COVID-19. As an example of this, we pivoted our 2020 Community Leadership Summit from an in-person event to a virtual event. Professor Loretta Ross, our opening keynote speaker, addressed the increased need for community leadership to reimagine the future post-COVID as well as the needed social change to improve racial justice. It is our hope that this summit will help guide our community and all attendees toward further action and social change.



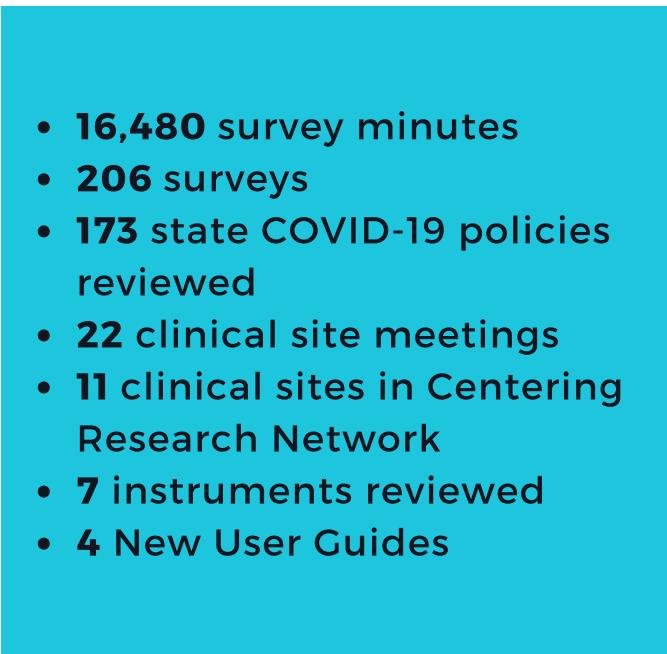
2020 NATIONAL SUMMIT

Here is an overview of national participation in Vital Village Networks 2020 National Community Leadership Summit entitled, "Our Future, Our Communities".

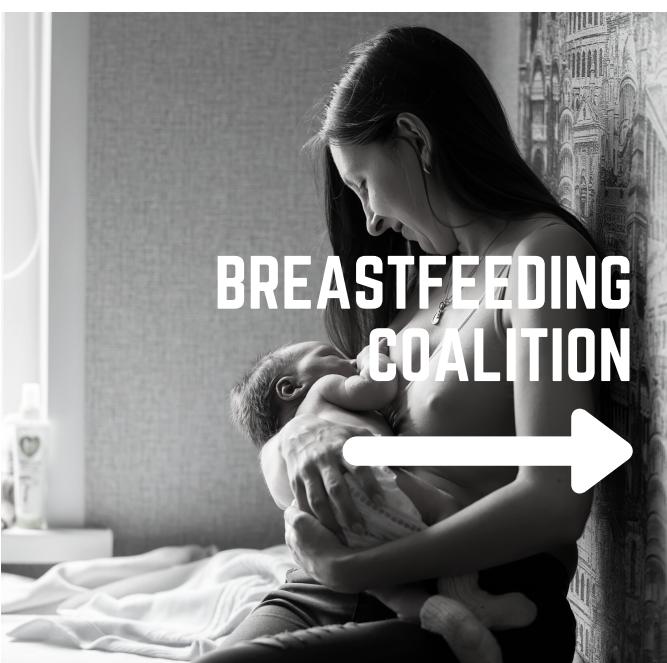
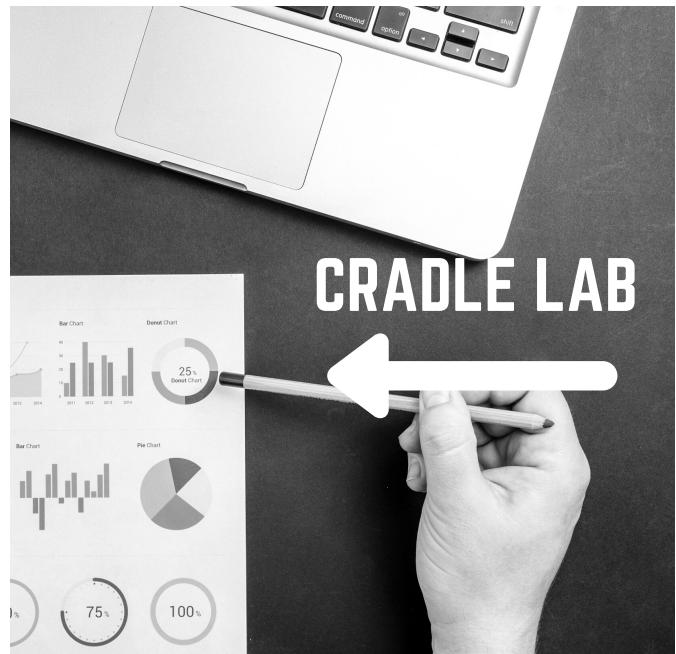
BY THE NUMBERS



- **1000** listeners for 7 podcast episodes
- **263** members
- **101** new resources
- **20** blogs
- **6** Community Champions
- **3** Peer Learning Clusters
- **3** quarterly virtual action labs



- **16,480** survey minutes
- **206** surveys
- **173** state COVID-19 policies reviewed
- **22** clinical site meetings
- **11** clinical sites in Centering Research Network
- **7** instruments reviewed
- **4** New User Guides



Warmline

- **652** hours volunteered
- **12** Warmline volunteers

Virtual Groups

- **69** Caregivers
- **35** new children
- **6** virtual groups

Black Breastfeeding Week 2020

- **9** virtual events
- **75+** community members
- **132** Committee volunteer hours
- **3** public officials engaged
- **3** policy engagements

BY THE NUMBERS



- **823** workshop registrants
- **787** workshop participants
- **71%** ECE providers of color
- **21** workshops and trainings hosted



- **110** Children engaged
- **71** Families
- **38** Storytimes
- **20** Learning Themes
- **9** Community Leaders



6 Community Leaders are launching **3 National Peer Learning Clusters** in the 1st quarter of 2021:
Trauma Informed Practices,
Family Engagement,
ECE Workforce Development

NOW Community Leaders engaged in 13+ hours of virtual planning and design meetings in the efforts to create an opportunity that is engaging & authentic

CONCLUSION

JULY 2018

As we continue to progress and expand our efforts in the unprecedented climate created by COVID-19 and the racial injustice that continues to occur locally, regionally, and nationwide, we can see that our work is even more critically important in helping our community improve child wellbeing and reduce early life adversaries.

While it would be difficult for anyone to have predicted the COVID-19 pandemic that Vital Village and other community focused networks now find themselves working through, our community engagement network exists because of longstanding inequities. The adaptations we have taken have provided us with new approaches and platforms to deepen our critical partnerships with community partners. We believe that, going forward, these challenging times have ultimately provided us with new opportunities for growth and success. The urgency of building a robust community infrastructure to promote early childhood wellbeing has never been as clear.





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