



**EXCEPTIONAL CARE. WITHOUT EXCEPTION** 

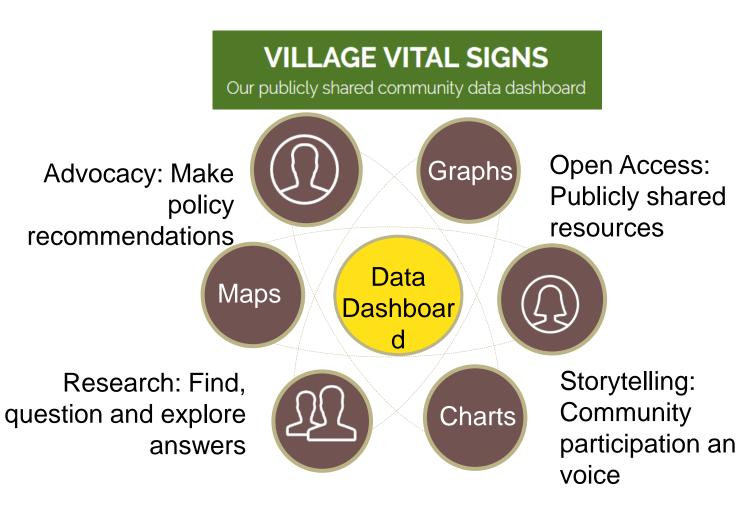
## **Network Description**

• The Vital Village Network (VVN) at Boston Medical Center (BMC) is a collaborative which includes medical professionals, community residents, and community-based organizations acting synergistically to reduce childhood adversities and improve the well-being of children and families in Boston, with a focus on three vulnerable neighborhoods: Roxbury, Dorchester, and Mattapan.

## MARC Objectives

- **<u>Community of Practice</u>**: To support growth of a local community of practice aligned by a shared mission, to cultivate community settings which protect children from violence and optimally support their wellbeing
- **Data & Tools:** To improve the quality of data and tools that allow community residents and community institutions to promote family and community safety





## Highlights

- Hosted 3 Leadership Summits from 2015-2017, focusing on strengthsbased approaches to addressing wellbeing for children in Boston, with network partners co-designing the event and facilitating workshops, reaching over 375 network members.
- Increased Community Champion cohort from 1 individual to 10 individuals who co-lead, co-design, and co-facilitate VVN projects.
- Linked community learning opportunities such as the Social Justice Mediation Institute (80 community members), lactation support trainings (42 community members), and trauma-informed classroom trainings (160 educators, principals, and staff, and 6 school trauma **specialists**) to practical application in the community setting.
- Hired a full-time Data Coordinator who developed and launched an interactive Data Dashboard, Village Vital Signs, on the VVN website.
- Vital Village Signs improves the quality of data and tools that allow residents and organizations prevent childhood adversities and promote family and community strengths that support optimal child wellbeing.

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# It Takes a Village: Growth and learning over two years with MARC

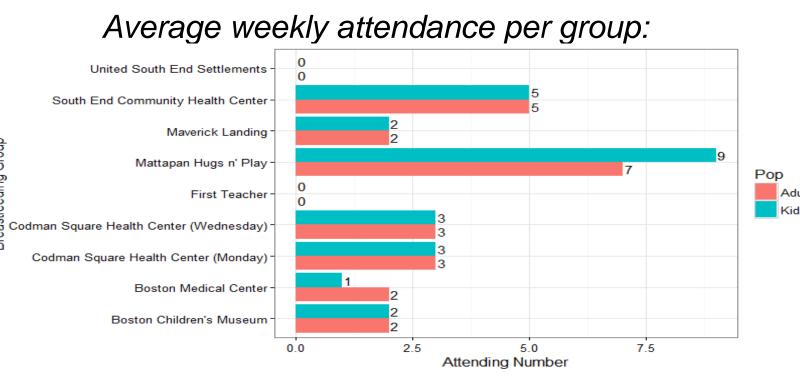
Erica Pike, MS, Futu Chen, MPH, Renée Boynton-Jarrett, MD, ScD,

participation and

## **Community of Practice**

### **Boston Breastfeeding Coalition**

- From Feb. 2016 through Nov. 2017, the Breastfeeding Coalition has grown from 16 stakeholders to over 100 members who aim to expand breastfeeding and social support services in Boston.
- Structured volunteer opportunities engage trained community members who have spent over 400 hours providing support to Boston families at 9 support
- groups across Boston neighborhoods in 2016 and 2017. In just 7 months, volunteers have provided support to over 270 babies and 230 adults.

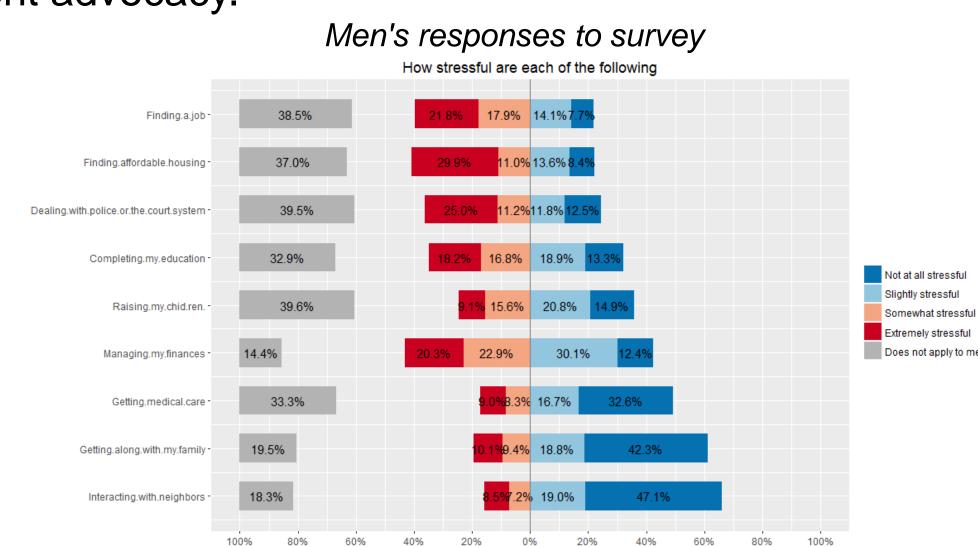


### **Trauma-Informed Practices**

- Collaboratively designed and revised curriculum for Codman Square Health Center's Group Well Child Care and Trauma-Informed CenteringPregnancy groups reaching 13 providers and over 50 parent-child dyads.
- Preliminary research findings from a RCT reveal that parents in the traumainformed curriculum pregnancy group were more likely to know where to get information on parenting and childcare, and to control behavior when angry with their child than those who took part in the standard CenteringPregnancy curriculum (n=30).
- In a pilot intervention, 28 classes from 3 Boston schools participated in a traumainformed training and were scored before and after the training using the CLASS observation tool. Statistical significant differences were observed in the emotiona support and classroom organization domains.

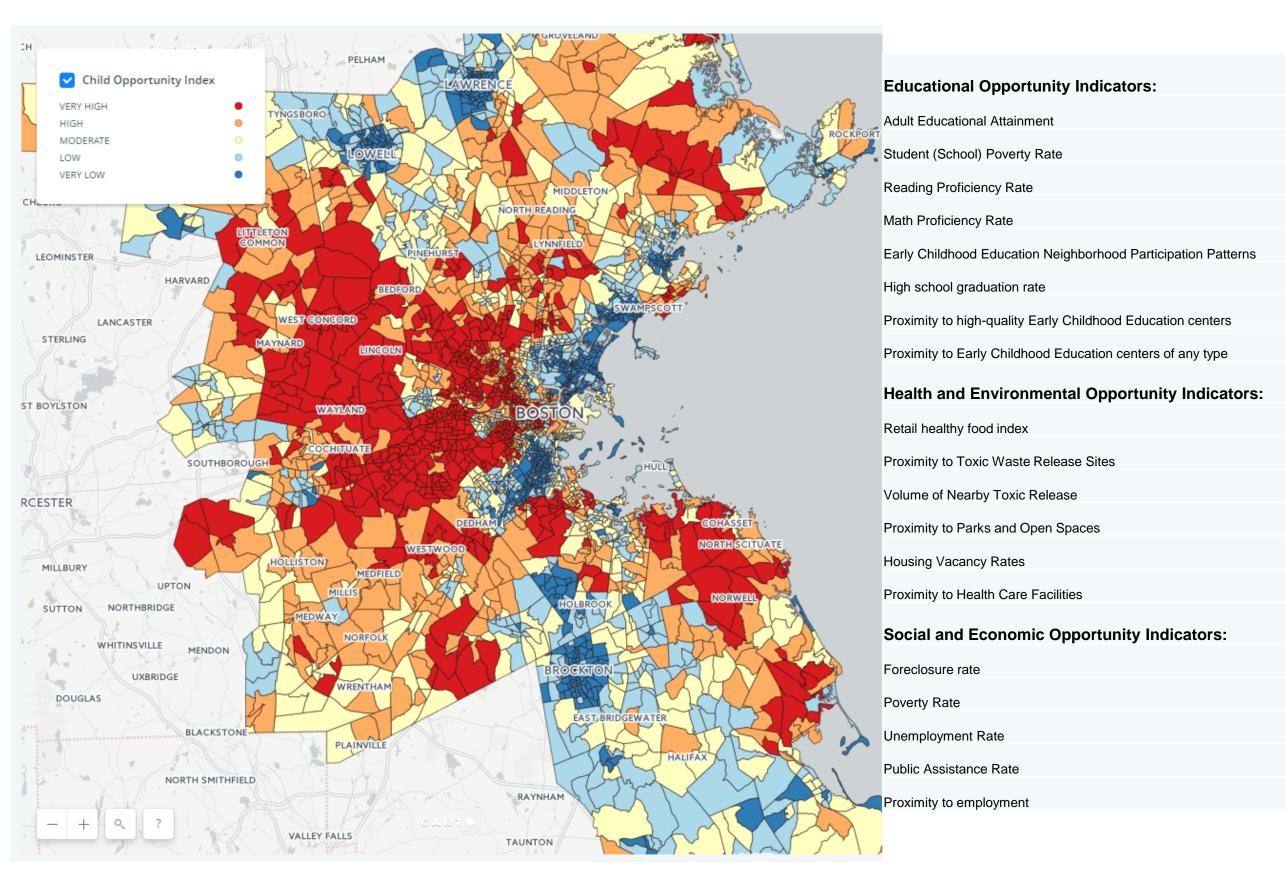
### Male Engagement

- Worked with a diverse group of stakeholders to form MEN (Male Engagement) Network) to improve mental wellbeing for men of color and reduce toxic stress.
- Hosted community dialogues on masculinity, race/ethnicity and mental health.
- Hosted a 2-day digital storytelling workshop with on what it means to be a father where 5 fathers worked to write, revise, and record their own personal stories.
- Helped facilitate a process to design a survey that has been disseminated to over 300 men, which addresses mental wellbeing, financial wellness, and antidisplacement advocacy.



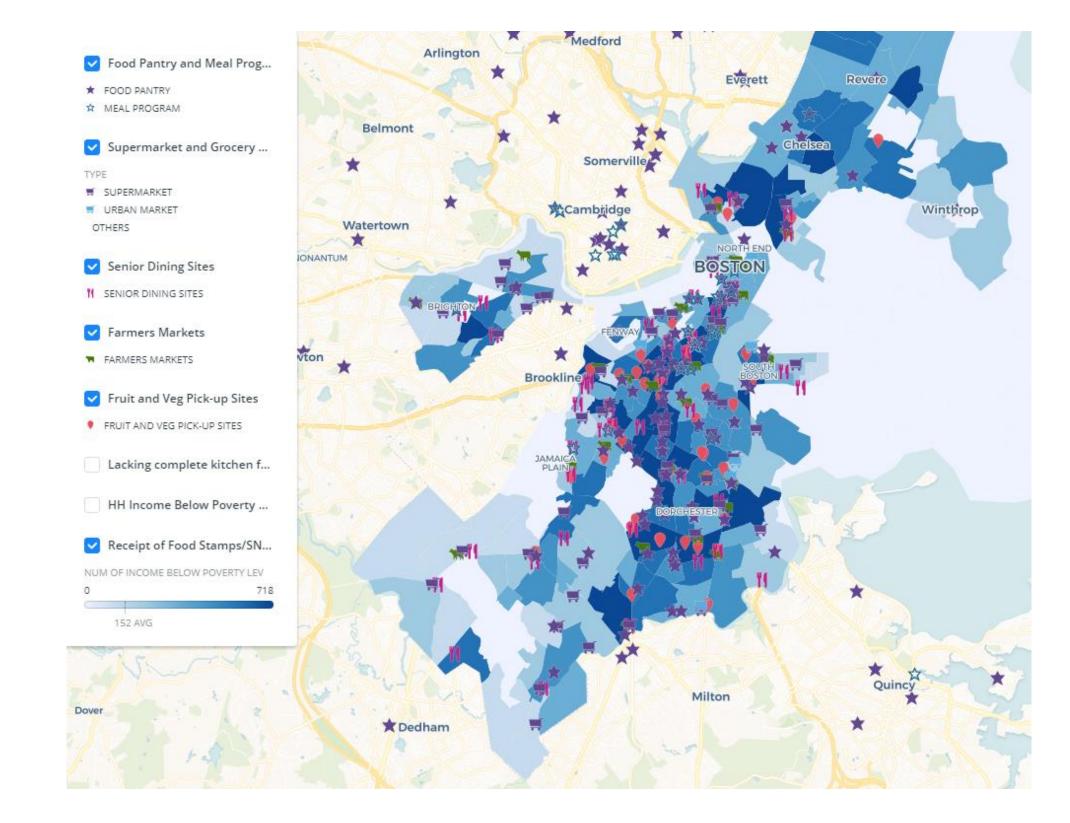
Pre- and Post-Intervention CLASS Scores by Paired T test (N=28)

	Domain	Baseline	Follow-up	P-value
	Emotional Support Domain	5.23	5.96	<.0001**
al	Positive classroom climate	5.25	6.04	<.0001**
	Negative classroom climate	1.42	1.17	0.0398*
	Teacher sensitivity	5.25	6.00	0.0011**
	Respect for student perspective	3.82	4.94	<.0001**
	Classroom Organization Domain	5.42	5.97	<.0001**
	Behavior management	5.46	6.13	0.0002**
	Productivity	5.59	6.13	0.0008**
	Instructional learning formats	5.21	5.64	0.0045**
	Instructional Support Domain	2.70	2.98	0.1281
	Concept development	2.38	2.76	0.0758
	Quality of feedback	2.88	2.99	0.6028
	Language modeling	2.84	3.18	0.0941
	Note: *Significant at $\alpha$ =0.05 level; **Significant at $\alpha$ =0.01 level			



- others.

Boston food resources map showing number of people who receive Federal Food Assistance







### **Data and Tools**

### **Child Opportunity Index**

The Child Opportunity Index (COI) is a metric that combines 19 separate component indicators which are linked to child wellbeing. • We recreated the COI at the neighborhood block group and block level for Boston, MA to understand how neighborhood opportunity structures influence health and development.

Boston metropolitan area block group level Child Opportunity Index

### Data Workgroup

In 2017, a data workgroup was formed and consists of community members who are passionate about improving access to data on high quality, nutritious foods for local families.

The workgroup has partnered with organizations like the Boston Public Health Commission and the Boston Mayor's Office, among

The group is currently working to empower residents of Roxbury to find easily accessible, low-cost, high-quality food options in their neighborhoods through an interactive map.