



Imagine HomePlace

Hennepin County
Planning Grant Report
December 2024



Table of Contents

- Executive Summary* 2
- Introduction*..... 5
 - Our Vision5
 - Commitment to Families: You belong at HomePlace6
 - A Place for Fathers6
 - Liberty’s Healing Enterprise7
 - History of HomePlace.....7
 - Process Overview8
- Need & Solutions Research* 10
 - Our Learning Agenda11
 - Deepening Research as a Foundation for our Solutions13
- Model & Implementation* 18
 - Our Solutions18
 - Implementation Planning.....19
 - Projecting into the Future27
 - Learning & Innovation Approach27
- Liberty’s Business Plans*..... 29
 - Marketing and outreach plans29
 - Human Resources30
 - Finances and Sustainability31
- Call to Action* 32
- Reference List* 33

Executive Summary

Liberty's HomePlace is a vision that is coming to life, imagined and planned out by the African American community participating in the Birth Justice Collaborative supported by Hennepin County's investment to address maternal health disparities. We know that African American mothers and babies face alarming rates of death and morbidity, and that these health disparities are just the beginning along a continuum of disparate social outcomes connected to historical and present-day racism and trauma. Taking on this challenge is not only the right thing to do, but also the smart thing to do. Through this work, with the County's support, we are getting to the root by identifying and supporting social determinants that will help African American families in our community to start out in wholeness. By starting at the beginning – at birth – we can set in motion new pathways for African American lives, rooted in healing, belonging, and connection as an antidote to the sometimes invisible but always deeply felt impacts of racism in America.

HomePlace Vision

Historically, African American people believed that the construction of a *HomePlace*, however fragile and tenuous (the slave hut, the wooden shack) was a place of flourishing through healing, rest and revival. Our vision for Liberty's HomePlace is to bring forth this ancestral way through a holistic retreat center for birthing families rooted in African American culture in North Minneapolis at Liberty's Northside Healing Space. We will surround families with culturally responsive healing and connection, as we support preventive practices in collaboration with responsive providers. This effort is anchored in the work that Liberty is already doing as a healing enterprise in North Minneapolis. We work with a love-in-action framework to create a healing environment for youth and families, while we support day-to-day success in practical ways. HomePlace is growing out of this impactful approach.

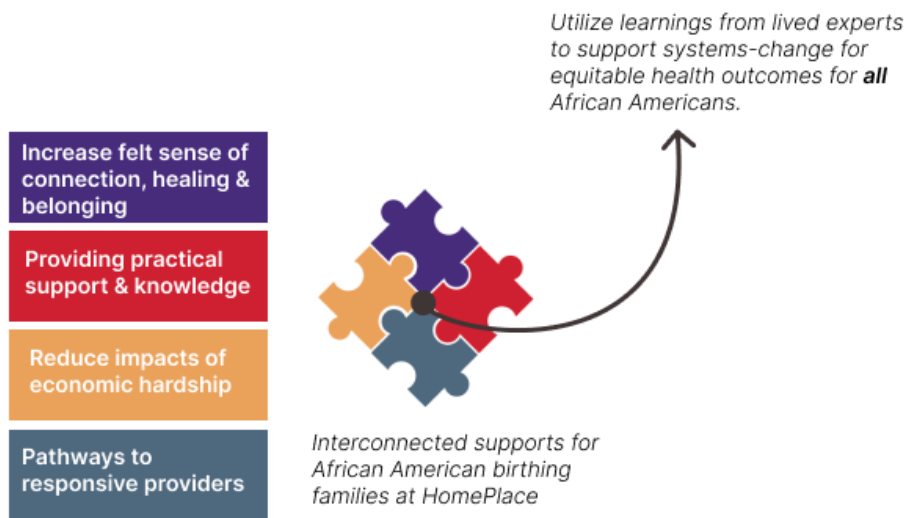


Planning Process & Strategies

We anchor our planning process in an African American liberation ethos that culturally centers the healing power of gathering, connection and belonging. We utilize a human-centered design framework that aligns with this ethos by centering the human experience and collective voice. We listened to stories from mothers and families across generations which illuminated a common thread, an African American birthing experience that is disconnected from culture and reveals the strain that racism puts on the African American body. An exploration of the research affirmed this collective experience. For African Americans, chronic stress from impacts of racism exacerbated by economic hardship result in negative health outcomes, including those associated with pregnancy, birth, and postnatal health. The literature also points to epigenetics,

historical racialized trauma from slavery and its aftermath carried forward as a memory imprint in the genetic make-up of Black bodies.

Our HomePlace solutions were developed with this research in our heads and the stories from our lived experts in our hearts. We created a plan that includes strategies we believe will lead to our vision. This includes interconnected supports for HomePlace families, including: 1) increasing felt sense of connection, healing and belonging, 2) providing practical support and knowledge, 3) reducing impacts of economic hardship, and 4) establishing pathways to



responsive providers. We will take our learnings centered on the voice of lived experts and share this with the field to support systems change.

Collaborative Team

We are readying our collaborative team of experts to lead this effort into the future. Anchored by the community-based leadership through Liberty, we are largely African American – pastors, healers, researchers, strategists, medical professionals, wealth builders and lived experts. We work in partnership with the Birth Justice Collaborative, and the growing network of engaged stakeholders ready to explore how systems can change based on listening and responding to community.

This report describes implementation plans for how we will begin to bring these strategies to life in 2025 and beyond, including descriptions of how individual and communal approaches to healing, connection and belonging in partnership with trusted providers will be established. While our primary stated outcomes are with maternal and infant health, we know that fathers will be an important part of our work. Our plans include specific supports for fathers as a healing force within the family.

Pilot Testing

We have begun to pilot test our solutions we are imagining as we work toward a soft launch of HomePlace in the Spring of 2025. We will utilize our *Imagine HomePlace* solutions to wrap around pilot families with healing engagement, pathways to responsive providers, and concrete support in times of need. We will also begin hosting communal offerings such as classes, baby showers, and fathers' groups. We will begin a formative evaluation process rooted in bell hooks elements of love-in-action to inform our own planning process and add to learnings for the field. We will begin to answer questions like: How does regular, supportive healing-centered engagement with birthing families support positive wellbeing outcomes? How can a collaborative experience between African American birth workers (ie Doula's), parents, and the medical provider be established and increase likelihood of better maternal and baby well-being outcomes?

Sustaining Change Together

Our planning work in 2025 will be informed by our pilot effort as we engage more deeply in discussions about our business model. We are exploring sustainable resource models, marketing and communication plans, and operational structures such as staffing and talent management. We will combine some early actions with continued reflection and planning, so that by the end of our State of Minnesota planning grant in September 2025, we will know what we need to be successful. This will include an internal focus on how Liberty's HomePlace will be held as a healing force in North Minneapolis, as well as a call to action for people, organizations, and systems of goodwill to provide responsive resources and supports. And together, we will create conditions for African American HomePlace families to thrive.

“ African American Poet Laureate Gwendolyn Brooks reminds us that ‘We are each other’s harvest; we are each other’s business; we are each other’s magnitude and bond’. Today at HomePlace, because we are each other’s, harvest, business and bond; we are committed to offering safe and nurturing places for our birthing parents to live abundantly through offerings that provide resources, connection, love and rest. We offer a place that amplifies our humanity, dignity and sense of belonging. A place that celebrates our bountiful, beautiful culture and a love that is active and whole. We offer active love incarnate as a solution to the oppressive forces that keep us bound to poor birth outcomes and tragic maternal deaths. We offer opportunities to listen and respond within the cultural lens that has fortified and amplified our communal wellbeing! We offer HomePlace as a gift and as a solution to destructive systems, because we remember that we are each other’s harvest; each other’s business and each other’s bounty.

-Rev. Dr. Alika Galloway, HomePlace CEO

Introduction

Historically, African American people believed that the construction of a **HomePlace**, however fragile and tenuous (the slave hut, the wooden shack), had a radical dimension. A HomePlace was the one site where people could freely construct the issue of humanization, where one could resist and heal. Black women resisted by making homes where all black people could strive to be subjects, not objects. Where we could be affirmed in our bodies, minds and hearts despite poverty, hardship, and deprivation. Where we could restore our wellbeing and community flourishing through rest, revival, connection, and belonging.



In our young minds houses belonged to women, were their special domain, not as property, but as places where all that truly mattered in life took place—the warmth and comfort of shelter, the feeding of our bodies, the nurturing of our souls. There we learned dignity, integrity of being; there we learned to have faith. The folks who made this life possible, who were our primary guides and teachers, were black women [partnered with black men].

-bell hooks, Yearning

Our Vision

We will reclaim the HomePlace of our ancestors. We will amplify this intention with African American birthing families to help them thrive with equitable health outcomes and access to culturally compassionate care and comprehensive resources.

HomePlace is a sanctuary where love and connection take center stage for African American birthing families. We will surround families with culturally responsive healing and connection to anchor preventive practices in collaboration with responsive providers. We are a culturally rooted initiative that offers essential resources and a nurturing environment, ensuring families feel seen, heard, and valued. With healing-centered care, practical resources, and access to culturally trained providers, we guide families every step of the way. We restore wellbeing through connection and celebration. This will be **their** HomePlace.

We will use our lived expertise and learnings from HomePlace to inform systems change. We invite stakeholders from the broader region to join our mission to uplift African American birthing families in North Minneapolis and beyond. Together, we will help reduce maternal health disparities and foster healing within the African American community. By investing in our inter-generational community, stakeholders will play a vital role in empowering families to transform their own lives and the systems that matter most. This will be **our** HomePlace.

Commitment to Families: You belong at HomePlace

HomePlace is committed to improving maternal health outcomes and helping African American families thrive. HomePlace offers essential resources and a nurturing environment, ensuring families feel safe, seen, heard, and valued. We are a place where ALL are welcome and we engage with non-judgement. Together, we can create a future where every African American family thrives, surrounded by love, respect, belonging and compassion.

HomePlace is a community dedicated to empowering families. Trained providers, staff, and experienced parents are equipped to answer questions, share their experiences, and offer guidance. HomePlace families and staff hold mutual accountability. In this sacred space, families will feel seen, heard, respected, and safe. We will walk beside, offering love, support and resources every step of the beautiful - and sometimes challenging - path of parenthood. And families will commit to their healing journey for themselves and for their children.

A Place for Fathers

When we talk about maternal health outcomes and birthing families, we hold a strong intention to include and support fathers as a valued asset and as a resource for maternal wellbeing. Whatever the familial circumstances, fathers have a special invitation at HomePlace.



When my wife Alike, delivered our second daughter Iyana, I asked to be present in the delivery room and I was told “No you cannot come – there is no need for you!” Today as I reflect on our HomePlace initiative I know that many, many African American men are told the same thing. They get the same message that they are not needed, wanted or desired in the birthing process. HomePlace offers African American men a place to gather, reflect on parenting roles, bond with their children and offer loving support to their partners in the birthing of their children and postpartum process. We at Liberty’s HomePlace send a message loud and clear that African American men are needed, wanted and desired. We need our men in the birthing process and in the lives of their partners and children. Brothers you are needed and wanted at HomePlace...Welcome HOME!

-Rev. Dr. Ralph Galloway, Liberty Community Church

Liberty's Healing Enterprise

An Intergenerational Healing Community Rooted in Love.

We will use the approaches and energy we have been building over the past 15 years through our Northside community engagement initiatives. We see ourselves as healers in need of healing! We offer connection, healing opportunities, and holistic support to youth and families at our two sites in North Minneapolis to mitigate the opportunity gap and the trauma impacts of generational poverty. Inspired by bell hooks vision, we are first and foremost a community of love. We anchor the chaos of racism and poverty rooted in loving relationships – with each other and with the youth and families we serve. Love-in-action is messy and complicated. And it is the only foundation for lasting change. This same energy, talent and commitment which has helped establish our youth enrichment initiative called 21st Century Academy – where 100% of our youth who regularly participate graduate high school and enroll in college – will be brought to this birth justice effort.

Liberty Community Church is cultivated through our intergenerational African American community. Led by Co-Pastors Rev. Dr. Ralph Galloway and Rev. Dr. Alike Galloway, Liberty was founded on liberation and action-reflection models of the historic African American Church. We see our community with an intersectional lens, understanding the impacts of identity Our Liberty community supports the North Minneapolis community. Many of our pastoral leaders are also our staff. Many of our staff came through our community initiatives. Our church members share their talents and time within our programs, serving as guides and resources. We are pastors, doctors, social workers, laborers, attorneys, youth workers, and more. We have PhDs and GEDs. We walk all economic journeys. At Liberty, it's all connected! This interwoven fabric is what makes us whole.

History of HomePlace

HomePlace was envisioned by Liberty members participating in the Birth Justice Collaborative (BJC). BJC was launched in 2022, when four African American and American Indian led organizations partnered with Hennepin County to engage their communities in co-designing strategies to improve birth outcomes for their communities. With the knowledge, wisdom and collaboration cultivated through that effort, Liberty proposed creation of HomePlace. Liberty was funded through BJC with Hennepin County and the State of Minnesota planning grants. This Imagine HomePlace report is a result of community-engaged planning throughout 2024. We are starting a pilot and will begin HomePlace offerings, starting small, at Liberty's Northside Healing Space in 2025.



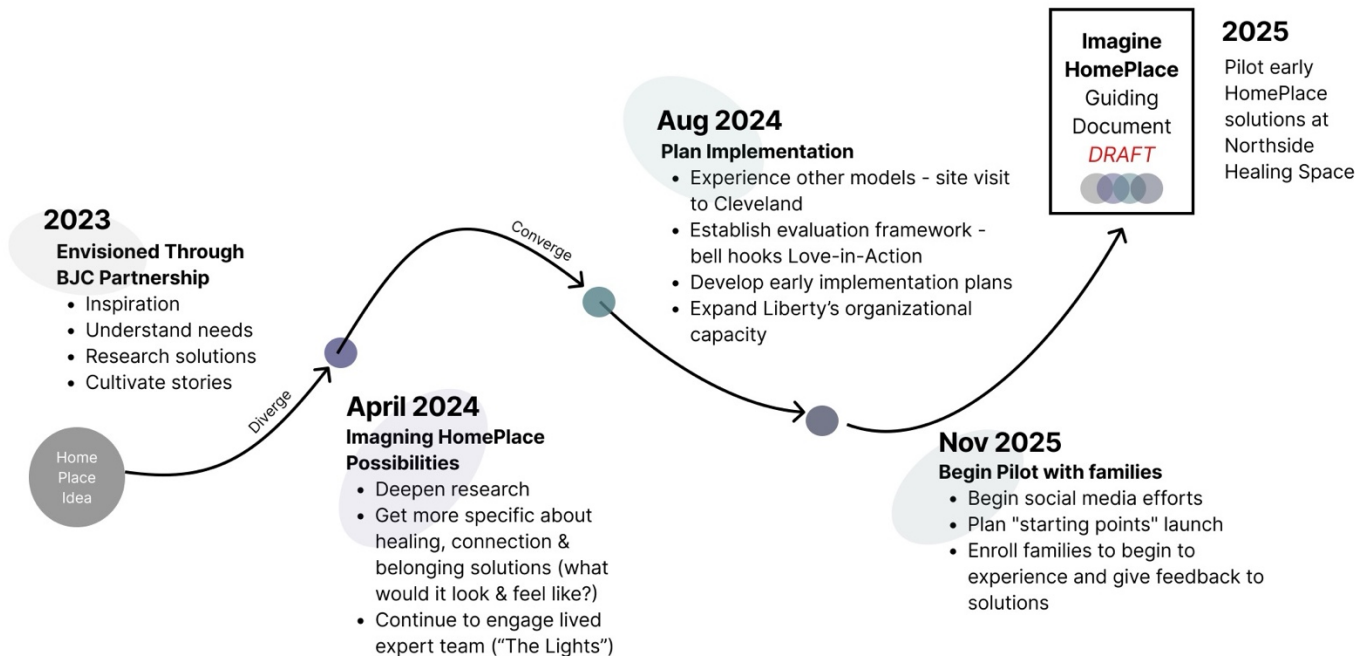
I had my first baby in hometown, a small community in Mississippi. I was living with my mom and had the support of all the women around me. They shared their wisdom during my pregnancy. After the birth, the only thing I was allowed to pick up was my baby! Everything else was taken care of. This is my inspiration for HomePlace.

Dr. Bernice Sims, Liberty’s HomePlace leadership team

Process Overview

Over the past year, Liberty has been engaged in a planning process that evolved out of the Birth Justice Collaborative to design and launch HomePlace, a birth justice retreat center in North Minneapolis. “Imagine HomePlace” has been our theme as we’ve used human centered design and a liberation ethos to frame our planning discussions. We anchor our planning process in an African American liberation ethos that culturally centers the healing power of gathering, community, connection and belonging. We utilize a human-centered design framework that aligns with this ethos by centering the human experience and collective voice. This means we center our planning on creating with the voice and experience of African American families at the center. We utilize a research base to guide development of our solutions. But our north star is listening to the stories, experience and knowledge from lived experts. Through our process, we open our thinking to possibilities informed by research and lived expertise.

Diagram: HomePlace Design Process



Throughout 2024, we brought our ideas into a concrete form and shape, and began developing implementation plans for each solution area. And we expanded our HomePlace core team and external consultants to provide diverse viewpoints and expertise to the planning process. We are working toward a slow opening in the Fall of 2025. We will add to our evidence and advance our solutions by piloting individual and communal efforts and evaluating the impact. This diagram depicts at a high level the design process we utilized through 2024, starting with the vision for HomePlace that emerged through the earlier BJC process.

Collaborative Teams

We worked collaboratively across multiple teams:

HomePlace core team – Liberty leaders tasked with planning and launching this effort.

Pastor Alika Galloway, Chief Executive Officer
Pastor Cyreta Odunyi, Chief Operating Officer
Michelle Martin, Resource and Systems Development
Doctor Bernice Sims, Development Manager
Makeda Zulu, Liberty member and UROC Senior Director of Partnerships
Pastor Katherine Lankford, Liberty member and financial wellness specialist
Michael Brooks, Healing specialist and licensed therapist
Leslie Hayes, Liberty member and researcher

The Lights – community advisor team of lived experts shining a light on our planning path.

Jonvierre Bracyadams	Jessica Thompson
Sierra Dillard	Judy Williams
Michelle Kpissay	Saleta Sallet-Cobb
Iyana Galloway	LaKisha Clark Burgess

External Consultants supporting the development of HomePlace and expansion of Liberty’s foundation to run this work sustainably into the future.

Jeff Halbur, Integris Consulting	Vivian Chow
Kim & Eric Snyder, Excelsior Bay Group	

And we had the steady guidance and support from our BJC collaborative partners along with the Collective Action Lab leaders.

Olivia Mastry	Heather Shore
Corenia Smith	Amanda Hitchner

Need & Solutions Research

The research is clear that we have a problem to solve.

African American mothers face significantly higher risks during pregnancy and childbirth. Data shows they are 2.8 times more likely to experience maternal death than their white counterparts.¹

29-44% of U.S. born Black women experience postpartum depressive symptoms (PDS), yet few are properly identified and/or connected to mental health services.²

The United States has particularly stark racial disparities related to birthing. The imbalance is especially prominent between White and Black populations. Black women are more than 50% more likely to have a pre-term birth and nearly twice as likely to have a low-birth weight baby. And, black infants are 2.3 times more likely to die within their first year of life.³

Many intersecting understandings of root cause.

We began our HomePlace planning guided by the literature review developed through the Birth Justice Collaborative in 2022 and 2023. The BJC literature review⁴, which included research from Liberty and University Research and Outreach Center (UROC), and its citations was an initial source for examining drivers related African American maternal health outcomes. In addition to amplifying the need, multiple intersecting root causes were examined in the literature including societal, community, institutional, interpersonal and individual/family. Beyond medical care, birthing families require comprehensive support that addresses emotional, social, and practical needs. This includes access to resources such as food, housing, and educational materials.

¹ Minnesota Department of Health. (2021). Care during pregnancy and delivery. Retrieved September 19, 2022 from <https://www.health.state.mn.us/docs/communities/titlev/carepregdelivery2021.pdf>

² James, K. F., Smith, B. E., Robinson, M. N., Tobin, C. S. T., Bulles, K. F., & Barkin, J. L. (2023). Factors Associated with Postpartum Maternal Functioning in Black Women: A Secondary Analysis. *Journal of Clinical Medicine*, 12(2), 647. <https://doi.org/10.3390/jcm12020647>

³ Leimert, Kelycia B., and David M. Olson. "Racial disparities in pregnancy outcomes: genetics, epigenetics, and allostatic load." *Current Opinion in Physiology* 13 (2020): 155-165.

⁴ Birth Justice Collaborative Literature Synthesis Regarding Black and American Indian Maternal Health and Birth Justice Strategies, 2023.

A human-centered approach.

For creation of HomePlace, our starting point is the African American birthing families we have in our community. While we recognize there are compelling broader societal root causes for the alarming maternal health disparities, our primary focus for developing HomePlace is to first and foremost design around the African American birthing family perspective. Using a human centered approach, we set out to understand how we could have a direct impact on the family to promote wellbeing. From the experience of shifting the outcomes for families in our care, we will evaluate our learnings to share with the field with the goal of supporting broader systems change.



Going into the hospital when I was giving birth to my first child, I just kept praying that my baby and I both came out of the hospital alive and back to my husband alive.

-Pastor Cyreta Oduniyi, Chief Operating Officer, HomePlace

Our Learning Agenda

A primary aspect of our literature review related to the need focused on epigenetics from historical racism and trauma, along with exploration of how allostatic load from chronic stress that builds up in the bodies of African American birthing people impact maternal health.

Allostatic load is seen as a cumulative wear and tear on the body's systems through repeated adaptation to stressors. Specifically for African Americans, the chronic stress from impacts of racism exacerbated by socioeconomic status have been found to increase negative medical impacts such as cortisol levels, sympathetic nerve activity, blood-pressure reactivity, cytokine production, waist-to-hip ratio, and glycated hemoglobin levels. These indicators are known to be contributing factors in maternal health outcomes. Blacks had higher allostatic load scores than did Whites and had a greater probability of a high score at all ages, particularly at 35–64 years. Racial differences were not explained by poverty. Poor and nonpoor Black women had the highest and second highest probability of high allostatic load scores, respectively, and the highest excess scores compared with their male or White counterparts.⁵

In addition to evidence that chronic stress from racism and economic hardship contributes to maternal health disparities, the literature supports the idea that historical racialized trauma from slavery and its aftermath is carried forward as a memory imprint in genetic make-up of

⁵ Geronimus, A. T., Hicken, M., Keene, D., & Bound, J. (2006). "Weathering" and Age Patterns of Allostatic Load Scores Among Blacks and Whites in the United States. *American Journal of Public Health (1971)*, 96(5), 826–833. <https://doi.org/10.2105/AJPH.2004.060749>

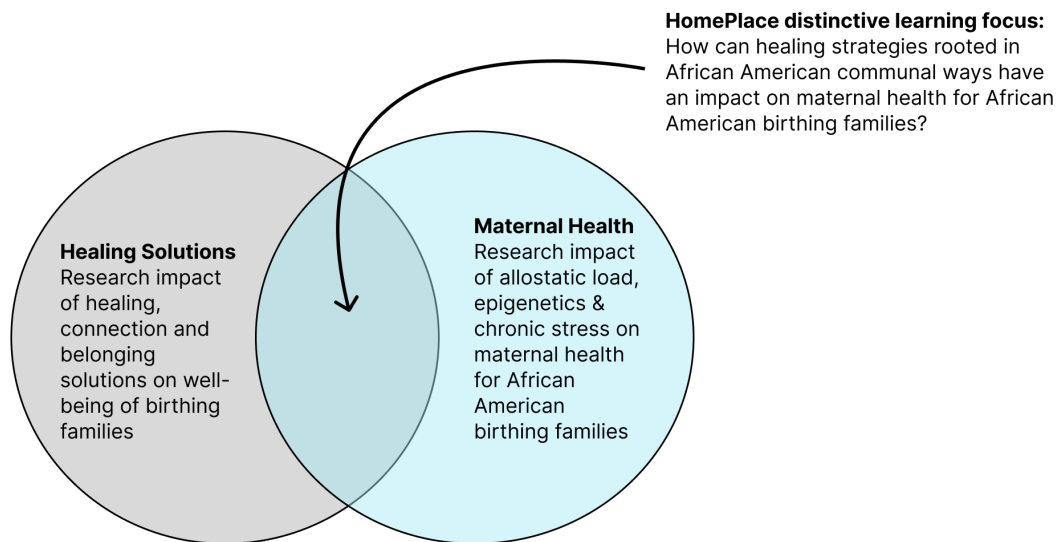
Black bodies.⁶ We identified evidence supporting the concept that epigenetics and chronic stress are contributing factors in maternal health.

With these root causes in mind, we explored research supporting the idea that cultural and communal connections along with organizational healing strategies contribute to reduction of chronic stress and impacts of epigenetics on marginalized communities. We found research that identifies asset-based, communal, and cultural healing strategies can become protective factors within marginalized communities generally. We examined loneliness as it impacts health outcomes, and how intentional connection can be an antidote.

As depicted in the diagram below, our hope is that as we practice our communal healing approaches, we will develop learning resources that will be contribute to this question:

How can intentional healing, connection, and cultural engagements mitigate the negative impacts of chronic stress and become contributing factors for improving maternal health outcomes?

Diagram: Distinctive learning focus for HomePlace



⁶ Thayer, Zaneta M., and Christopher W. Kuzawa. "Biological memories of past environments: epigenetic pathways to health disparities." *Epigenetics* 6.7 (2011): 798-803.

Deepening Research as a Foundation for our Solutions

With a strong evidence base that supports the need and root cause understanding of African American maternal health disparities, we expanded our research to seek out literature that would inform the solutions that were emerging out of our engagement with the community and initial evidence found in the BJC literature review. Our solution-focused review brought us to two areas related to our target population of African American birthing families, including:

- 1) Potential effects of cultural and communal healing efforts that could serve as environmental enrichments to improve outcomes,
- 2) How organizational healing strategies can be utilized to empower community engagement to inform systems change, and
- 3) Impact of connection on healing in a place-based effort.

Solution-focused Research Area #1:

Potential effects of cultural and communal healing efforts that could serve as environmental enrichments to improve outcomes.

Within epigenetic research, we found evidence that “environmental enrichments” can erase epigenetic memory and support wellbeing. According to McReary and Metz, “exposure to complex beneficial experiences, such as environmental enrichment (EE), is one of the most powerful therapies to promote neuroplasticity and behavioral performance at any time in life”.⁷ They describe activities such as mindfulness and support groups as potential environmental enrichments that can begin to roll back historical impacts through epigenetics.

We believe HomePlace will impact the invisible but deeply felt dynamics surrounding the medical and prevention strategies – including impacts of historical racism, chronic stress, weathering, and epigenetics. A primary solution for HomePlace will be rooted in culturally grounded, communal healing and belonging engagements to counteract chronic stress and reduce allostatic load from current impacts of racism. We will contribute learnings around illuminating and mitigating the epigenetic memory of historical racism through the environmental enrichment we will offer through HomePlace individual and communal engagements.

Since epigenetic markings provide a “memory” of past experiences, minimizing future disparities in health will be partially contingent upon our ability to address inequality in the current environment. Thayer and Kuzawa suggest that future research in environmental

⁷ McCreary, J. Keiko, and Gerlinde AS Metz. “Environmental enrichment as an intervention for adverse health outcomes of prenatal stress.” *Environmental epigenetics* 2.3 (2016): dvw013

epigenetics should focus on establishing the reversibility of stress-induced epigenetic modifications, and also on identifying positive epigenetic effects of environmental enrichment.⁸

Lemiert and Olson's research says that "stress accumulates throughout a lifetime and across generations leading to a large accumulated allostatic load that is mediated by epigenetic mechanisms. Epigenetic mechanisms can however be reversed and therein lies future hope".⁹ We also found evidence that intentionally supporting environmental enrichment with impacted individuals and groups may reverse most behavioral, physiological and neural deficits associated with prenatal stress.¹⁰ This research buoys our model of creating communal and individual healing supports to counteract the negative impacts for African American birthing families.

One study found that pregnancy and early parenting are a unique window for healing. Parents described many things that help to heal and nurture their own family, including seven broad themes including: 1. The sense that pregnancy is an opportunity for 'a fresh start' with new hope for the future to create a new life for themselves and their child. 2. The influence of the perceptions of the new parenting role. 3. The feeling of connection which can be fostered with self, baby and others. 4. Compassionate care: Kindness, empathy and sensitivity enables parents to build trust and feel valued and cared for. 5. Empowerment: Control, choice and 'having a voice'. 6. Intentional practice of creating safety even in an unsafe world. 7. Seeking strength, hope, and support to reweave a future.¹¹ These elements align with the core focus of HomePlace solutions.

Solution-focused Research Area #2:

How organizational healing strategies can be utilized to empower community engagement to inform systems change.

HomePlace cultivates a healing organizational approach as a foundation for our work with families and our efforts in community-driven advocacy and systems-change. We found a myriad of articles and evidence supporting the idea that healing-centered organizational practice and

⁸ Thayer, Zaneta M., and Christopher W. Kuzawa. "Biological memories of past environments: epigenetic pathways to health disparities." *Epigenetics* 6.7 (2011): 798-803.

⁹ Leimert, Kelycia B., and David M. Olson. "Racial disparities in pregnancy outcomes: genetics, epigenetics, and allostatic load." *Current Opinion in Physiology* 13 (2020): 155-165.

¹⁰ McCreary, J. Keiko, and Gerlinde AS Metz. "Environmental enrichment as an intervention for adverse health outcomes of prenatal stress." *Environmental epigenetics* 2.3 (2016): dvw013

¹¹ Chamberlain, C., Ralph, N., Hokke, S., Clark, Y., Gee, G., Stansfield, C., Sutcliffe, K., Brown, S. J., & Brennan, S. (2019). Healing The Past By Nurturing The Future: A qualitative systematic review and meta-synthesis of pregnancy, birth and early postpartum experiences and views of parents with a history of childhood maltreatment. *PLoS One*, 14(12), e0225441–e0225441. <https://doi.org/10.1371/journal.pone.0225441>

engagement can lead to systems change sparked by empowerment within marginalized groups or communities

One approach identifies a continuum of organizational engagement approaches including (1) restorative justice, (2) posttraumatic growth, (3) relational cultural theory, and (4) fostering dignity. Findings supported the idea that participants move from being recipients of healing to facilitators of healing that can create change at broader, activating scale.¹² This research illuminates ways to remedy bias and harm through supporting healing within marginalized groups. This is an inspirational approach that fits with Liberty's purpose of being healers in need of healing, and the systems-change goal for HomePlace.

Another approach focuses on organizational healing including reparative practices and routines through social relationships and connections. Active healing approaches, more than the idea of resilience, coping, or recovery, enables greater organizational strength than what was previously understood. A process of organizational healing is supported by four mechanisms: empathy, interventions, collective effort, and leadership. Organizational healing efforts enable both resilience and strengthening, which can promote what is identified as *virtuous human systems*.¹³ These systems created through human capacity have the power to shift societal structures.



I've worked most of my life in North Minneapolis to find solutions to racial disparities. I've seen the power of community-driven efforts, when people bring their lived expertise to lead change. I believe harnessing the capacity of people in communities toward their own liberation as a lever for systems change is the only way forward.

-Michelle Martin, HomePlace Resource & Systems Development

Other approaches emphasize participatory action research at the organizational and community level focusing on opportunity-centric approaches to social change versus problem-focused interventions. Boyd and Bright suggest that "problem-centric approaches work with the momentum of norms without substantively changing them. By contrast, opportunity-centric approaches have the potential to reframe and dramatically shift organizational and community norms." Utilizing Appreciative Inquiry as an organizational method is as an example of opportunity-centric change that supports innovation and collaboration through participatory

¹² Livne-Tarandach, Reut, et al. "Cultivating organizations as healing spaces: A typology for responding to suffering and advancing social justice." *Humanistic Management Journal* 6.3 (2021): 373-404.

¹³ Powley, Edward H. "The process and mechanisms of organizational healing." *The Journal of Applied Behavioral Science* 49.1 (2013): 42-68.

methods. The authors suggest a large-scale inquiry designed with four phases: Discover, Dream, Design, and Destiny, can support opportunity-centric approach.¹⁴

Lastly, we were compelled by an approach to seeing individual, intergenerational, collective, and intersectional historical trauma for what they are to be a powerful force to grapple within our present-day systems. When we move discussions about trauma from the margins to the mainstream, we can support the social sector to discern new and effective approaches to systems change.¹⁵

These organizational healing and empowerment approaches are instrumental in shaping how HomePlace will be positioned beyond a direct-service model, but rather as a service-oriented effort that also aims to harness systems change through intentional practices that utilize the lived experience, learnings, and social power of those involved.

Solution-focused Research Area #3:

Impact of connection on healing in a place-based effort.

Promoting social connection and belonging have been a primary focus of Liberty's work and a topic of inquiry in our literature review. Beyond social research, we found a body of evidence that loneliness and isolation is a determinant of negative health impacts. And that connection and belonging can be a healing influence. Former surgeon general Vivek Murthy's 2020 book *Together* is a primary source on this topic. Murthy describes loneliness as a specific feeling that social connection is missing, and collective loneliness takes that individual feeling and expands it as a community condition.¹⁶ Murthy explores the specific mechanisms that loneliness triggers. From hypervigilance, isolation, negative self-perceptions that disconnection can breed. We are meant to be together. The separation that has resulted from the social media explosion, and the individualism that often permeates our culture as an invisible weapon against community, are the social conditions that need to be understood and mitigated to bring us back together.

We found a body of research exploring maternal loneliness and social connection as a primary factor in health, including research revealing that with an absence of social connection, our

¹⁴ Boyd, Neil M., and David S. Bright. "Appreciative inquiry as a mode of action research for community psychology." *Journal of Community Psychology* 35.8 (2007): 1019-1036.

¹⁵ Calderon de la Barca, Laura, Milligan, Katherine, and Kania, John. "Healing Systems: How recognizing trauma in ourselves, other people, and the systems around us can open up new pathways to solving social problems." *Stanford Social Innovation Review*, <https://ssir.org/articles/entry/healing-trauma-systems>

¹⁶ Murthy, Vivek H. *Together: Loneliness, health and what happens when we find connection*. Profile Books, 2020.

mental and physical health suffers.¹⁷ For birthing families, this is a particularly significant protective factor. One study found that the depth of relationships was more important than the objective number of relationships¹⁸, which speaks to the need for connection to be culturally relevant and intentionally developed to be meaningful to the individual.



What we know, generally, of those societies that tend to live the longest, they do more than eat well and have high levels of activity. More importantly, they maintain and have strong connections within their community. Whether these connections are within family units, extended friend groups, or religious affiliations the finding is the same. Connections help people live well and live longer.

-Kevin L. Gilliam II, MD, FAAFP, FABOM, Medical Director, NorthPoint Health and Wellness Center, HomePlace advisor

For HomePlace, culturally-rooted social connection is a primary focus. We are developing communal experiences that birthing families can count on as a regular part of their journey. We connect birthing families with HomePlace staff and volunteers, and with each other. These experiences are the glue that will both promote healing and support how prevention practices are utilized. Our effort is place-based, allowing these communal cultural experiences to be maximized. Through our emphasis on connection, we will restore are wellbeing and community flourishing through rest, revival and belonging.

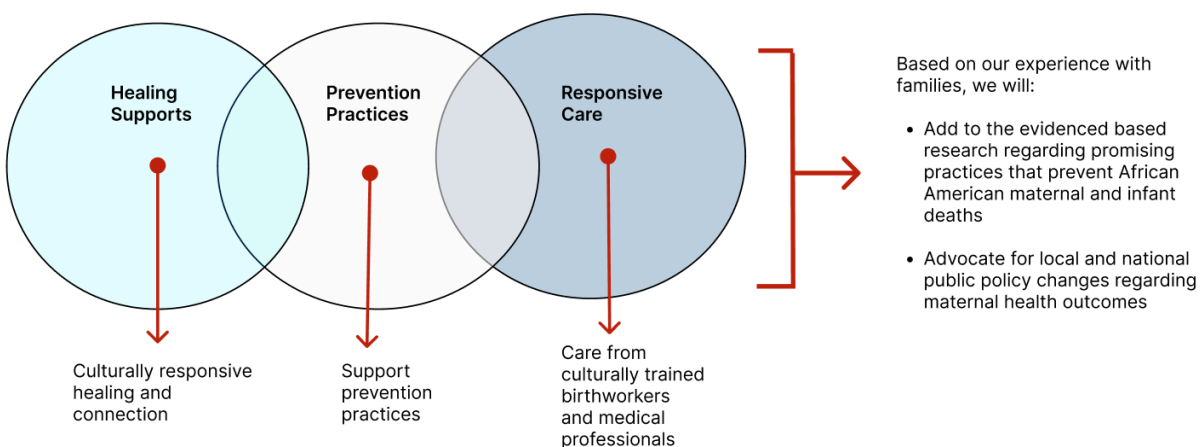
¹⁷ Schug, J. (2020). The other public health crisis Together: The Healing Power of Human Connection in a Sometimes Lonely World Vivek H. Murthy Harper Wave, 2020. 352 pp. *Science (American Association for the Advancement of Science)*, 368(6490), 480–480. <https://doi.org/10.1126/science.abb3582>

¹⁸ Yu, Qihan, et al. "Associations between social network characteristics and loneliness during pregnancy in a sample of predominantly African American, largely publicly-insured women." *Maternal and child health journal* 24 (2020): 1429-1437.

Model & Implementation

Lead by our lived expertise coupled with our research, and factoring what we believe is in Liberty's unique expertise, we designed a model that will function at the intersection of healing, connection, culture, and belonging as levers for anchoring prevention and responsive care to impact maternal and baby health disparities. While we will work to support responsive medical systems for the families we touch, our primary efforts will focus on healing and belonging to reduce chronic stress and alleviate allostatic load for birthing mothers. We plan to evaluate how this approach impacts maternal and baby health and wellbeing. We will share our learnings with the field to inspire other efforts. This diagram depicts our model as we currently envision it, including our direct work with families and our efforts to change systems.

Diagram: Liberty's HomePlace Model of Interconnected Supports



Our Solutions

At Liberty's HomePlace, we will engage African American families through multiple interconnected approaches to:

Strategy 1: Increase felt sense of healing, connection and belonging.

- Curate experiences that mitigate the impact of intergenerational racism and trauma for African-American birthing parents through Makeda Zulu's leadership.
- Reduce stress and provide protective tools during pregnancy and the postpartum period such as culturally grounded bodywork, music, art, and affinity group gathering.
- Monitor and support well-being.
- Develop a cultural ambience through physical space, food, etc.

- Create connections with Fathers through Michael Brook’s leadership.

Strategy 2: Provide practical support and knowledge.

- Inter-generational and communal approach to learning about early parenting and postpartum support through Pastor Cyreta Oduniyi.
- Tailored support to birthing mothers and families, including transportation to key appointments and access to essential pregnancy and post-natal supplies.

Strategy 3: Reduce impacts of economic hardship.

- Alleviate economic hardship through direct, trust-based resource allocation.
- Financial education and planning for the future through Pastor Katherine Lankford.
- Support access to resource navigation and/or job support (housing, benefits).
- Build a public/private partnership to develop concrete resources to support HomePlace families.

Strategy 4: Support pathways to trusted providers and birthworkers.

- Cultivate intentional relationships with a network of trusted providers.
- Physical presence of responsive providers at HomePlace.
- Support education and capacity of medical providers and cultural birthworkers to work in tandem.

Strategy 5: Utilize Learnings & Lived Expertise to Support Systems Changes.

- Develop community-engaged evaluation plan and research agenda to drive shared learning process.
- Create paid opportunities for HomePlace participants to share their insights and support systems change as a lived expert.
- Implement relevant, meaningful community-engaged research and cultivate learnings to share with the field.

Implementation Planning

To ensure a successful launch of HomePlace, we considered a 360-degree view for our solutions. During this phase of planning, for each strategy area, we developed clear and actionable plans to support implementation. These solutions and plans were iterated with the HomePlace core team, shared with BJC leaders for feedback, and evolved with input from The Lights lived expert team. During the first part of 2025 and with the support of the State of Minnesota planning grant, will develop implementation and business plans. For each goal area, we used a planning rubric to support our discernment and discussion working to tie out the vision to a realistic and impactful implementation plan.

Our starting point for our designs was our engagement with The Lights, our lived experts. Here are three of their stories:

- Birth Story { I found out I was pregnant when I was six months along. I was induced at 36 weeks because I had protein in my urine. I did not have much time to prepare, but I did have a lot of people in my corner. The school counselor, my grandma, my sister, a doula from the community, and a teacher from a teen mom program all worked together to support me. My birth was smooth and took a long time. I felt scared most of the time in the hospital. One nurse stayed an extra shift for me, which helped. When I got home, I could not breastfeed well. My doula explained the baby was tongue-tied and helped me learn how to work with that. I would have stopped otherwise. I was able to breastfeed in between classes.
- Birth Story { I thought this birth experience would be smooth because my first three weren't bad. This one was totally different. This was my first experience with having a doula. I had a set of doulas from the community, but I was disappointed that they did not seem to advocate or educate me. Because my insurance changed, I was going to a different OB. I felt a disconnect with her and had gaps in my care. I was told I had high blood pressure, but nobody told me what to do. At my 35-week check, they told me I wasn't going home. After two days of hard labor, I had a c-section. My baby had trouble eating and other sensory problems. I was told the traumatic birth experience caused this. I had post partum depression for a long time and had trouble taking care of him. I heard later that I could have taken baby aspirin during my pregnancy, and wondered if this could all have been avoided.
- Birth Story { I saw a midwife throughout my pregnancy and went to a 1st time parents expecting class – all participants were people of color like me. I understand what was happening throughout the pregnancy, which felt good. At 34 weeks, I was told I had high blood pressure. They admitted me to the hospital. I had doulas, midwives, and one of the moms from the group supporting me; no family were around since I moved the year before. I was in the hospital 2 weeks when they decided to induce me. The baby needed to stay in the hospital for 2 more weeks. Because I wasn't working, I didn't have money for gas. I didn't always make it to breastfeeding times, so they started formula. I felt ashamed and sad that I did not breastfeed. But overall thankful that my baby was well and home. After 2 months, I moved back to where my family lived for more support.

With these and other stories, along with our research as our starting point, we went through an inquiry process over many months to build out strategies we believe will be impactful.

Strategy 1: Increase Felt Sense of Connection, Healing & Belonging

What will we do?

HomePlace will curate experiences that mitigate the impact of historical inter-generational racism and trauma with African American birthing parents. We will reduce stress and build protective factors during the pregnancy and post natal period.

Participants will say:

“I feel a sense of connection and belonging with the team at HomePlace. My load feels lighter. My humanity is recognized. These are my people and I trust their suggestions for me and my family.”

<p>Action 1: Develop a HomePlace Team that can wrap around families with healing-centered engagements.</p>	<ul style="list-style-type: none"> • Pastoral primary team from Liberty. • Engagement staff role (ie healing guide) • Collaborative contract roles (ie- therapists, Black doulas). • Focus specific supports for men.
<p>Action 2: Create HomePlace Space that is welcoming, nurturing and rooted in African American communal ways.</p>	<ul style="list-style-type: none"> • Re-design space into HomePlace • Inspiring, culturally rooted art and engaging touches. • Explore idea of a “Joseph Center” for men • Procure supplies for services, such as soundbath, tongue drum, warm pool, etc
<p>Action 3: Provide individual connections and services that are rooted in African American culture, including art, storytelling and spirituality.</p>	<ul style="list-style-type: none"> • Individual engagement for birthing mothers and fathers • Healing services through collaborative roles (massage, Reike, etc) • Monitor and support wellbeing
<p>Action 4: Curate HomePlace communal healing touchpoints and offerings that support joy and celebration</p>	<ul style="list-style-type: none"> • Affinity-based support groups (ie birthing mothers, dads, post-natal) • Community gatherings to recognize milestones (ie- baby showers) • Baptism, naming ceremonies, inter-generational storytelling and wisdom sharing

What will it take?

The healing team will have the support they need to be successful.

- We will invest in their ongoing well-being through intentional plans for rest and revival.
- We will see their contribution through a responsive, strength-based lens.
- Roles and expectations will maximize their strengths.
- Training and capacity-building will increase their effectiveness.
- Pay and benefits will lift any economic hardship.

Additionally, HomePlace will need strong, well- resourced partnerships with African American community organizations and providers.

How will we know?...

- Reduce feelings of stress
- Increase felt sense of wellbeing
- Increase understanding of protective factors in relationships to maternal health
- Increased likelihood that key learnings related to pregnancy and parenting will be attained
- Reduce impacts of chronic stress
- Reduce allostatic load



Inquiry Questions:

How does regular, supportive healing-centered engagement with birthing people support positive well-being outcomes?

How does regular communal connections rooted in African American culture support positive well-being outcomes?

Strategy 2: Provide practical support and knowledge

What will we do?

HomePlace will offer practical support and knowledge through an African American, inter-generational and communal approach to increase likelihood that key actions along the medical milestones of pregnancy and post-natal will promote health.

Participants will say:

“I received valuable information about my pregnancy and to raise my newborn. I have a plan my family and I believe in. We are prepared to provide the care our baby and we need. I am connected and know who to ask for support!”

<p>Action 1: Develop a birth plan process</p>	<ul style="list-style-type: none"> • App or workbook to create birth plans • Offer plan ideas that are culturally rooted and factor evidence-based actions • Specify actions for birthing mothers and fathers role
<p>Action 2: Learning modules with a cultural lens that support what to know & do</p>	<ul style="list-style-type: none"> • Develop or find learning tools that are culturally rooted and provide insight for key pregnancy and parenting milestones • Offer individual and group opportunities embedded in the healing strategies. • Learning focus for entire family, including father role, extended family, etc
<p>Action 3: Provide practical support to birthing mothers and families in customized ways.</p>	<ul style="list-style-type: none"> • Transportation to important appointments • Access in the space to supplies and gear to support pregnancy and post natal (ie- diapers, car seats).

What will it take?

We will need access to birthing plans and learning tools that have worked in other locations as examples of best practice, specifically with an African American lens.

We will need to partnership with culturally relevant experts for pregnancy milestones and the post natal journey (ie parenting, health and well-being for mother, etc).

How will we know?...

- Increase confidence to approach birthing process in a way that fits the individual
- Reporting experiences and actions that support prevention approaches
- Increase knowledge that’s rooted in cultural ways
- Access to knowledge that’s timely for key pregnancy and post natal milestones
- Increased likelihood that the birthing process will provide support healthy outcomes for mother and child



Inquiry Questions:

How can a collaborative experience between a cultural birthing support person, parents, and the medical provider be established and increase likelihood of better maternal and baby well-being outcomes?

How might relevant, culturally rooted pregnancy and parenting tools help support knowledge and actions that promote maternal and baby well-being?

What will we do?

STRATEGY 5

Utilize Learnings & Lived Expertise to Support Systems Changes

Based on our experience with families, we will:

- Research guided by lived expert insight
- Sharing learnings to support shifts within related systems

System learning partners with HomePlace will say:

“My practice and approaches were improved through engaging with HomePlace lived experts and research products. I understand better how to be responsive and effective with the African American community my institution serves. My commitment to break through challenges is growing.”

<p>Action 1: Develop community-engaged evaluation plan and research agenda to drive shared learning process.</p>	<ul style="list-style-type: none"> • Utilize Goals 1 - 4 to create an evaluation framework that helps us understand how we know we are successful. • Establish data collection plans and evaluation milestones
<p>Action 2: Create paid opportunities for HomePlace participants to share their insights and support systems change as a lived expert.</p>	<ul style="list-style-type: none"> • Create a protocol for inviting HomePlace participants to join our research efforts as lived experts. • Maintain lived expert involvement using community-based research ethics of practice.
<p>Action 3: Implement relevant, meaningful community-engaged research and cultivate learnings to share with the field.</p>	<ul style="list-style-type: none"> • Develop initial learning opportunities that are informal and based on insights about our model • Deepen external learning through published reports and customized engagements (ie hosting site visits).

What will we do?

STRATEGY 4

Reduce Impacts of Economic Hardship

Given the relationship between economic hardship and negative health impacts in the African American community, it is imperative that we directly address resources as one of the primary contributing factors. Our goal is to have blend of economic experiences within the HomePlace community, including:

- those in the lowest poverty levels,
- the “floating families” who make too much to receive services but not enough to get help, and
- more resourced families who still face the impacts of chronic stress of being an African American birthing family.

<p>Action 1: Support access to resource navigation and/or job support (housing, benefits)</p>	<ul style="list-style-type: none"> • Develop collaborative agreements with local non-profits (ie housing, jobs) • Embed Investment Club curriculum into HomePlace communal offerings • Explore communal one-stop-shop with relevant services at HomePlace
<p>Action 2: Alleviate economic hardship through direct, trust-based resource allocation</p>	<ul style="list-style-type: none"> • Explore what it would take to provide a monthly stipend for pregnant and post natal families who are experiencing economic hardship. • Consider monthly stipend as a resource exchange for their participation as a lived expert in systems change
<p>Action 3: Build a public-private partnership to develop a universal basic income pilot with HomePlace families</p>	<ul style="list-style-type: none"> • Work with Hennepin County and State partners to identify opportunities for implementing a pilot UBI effort.

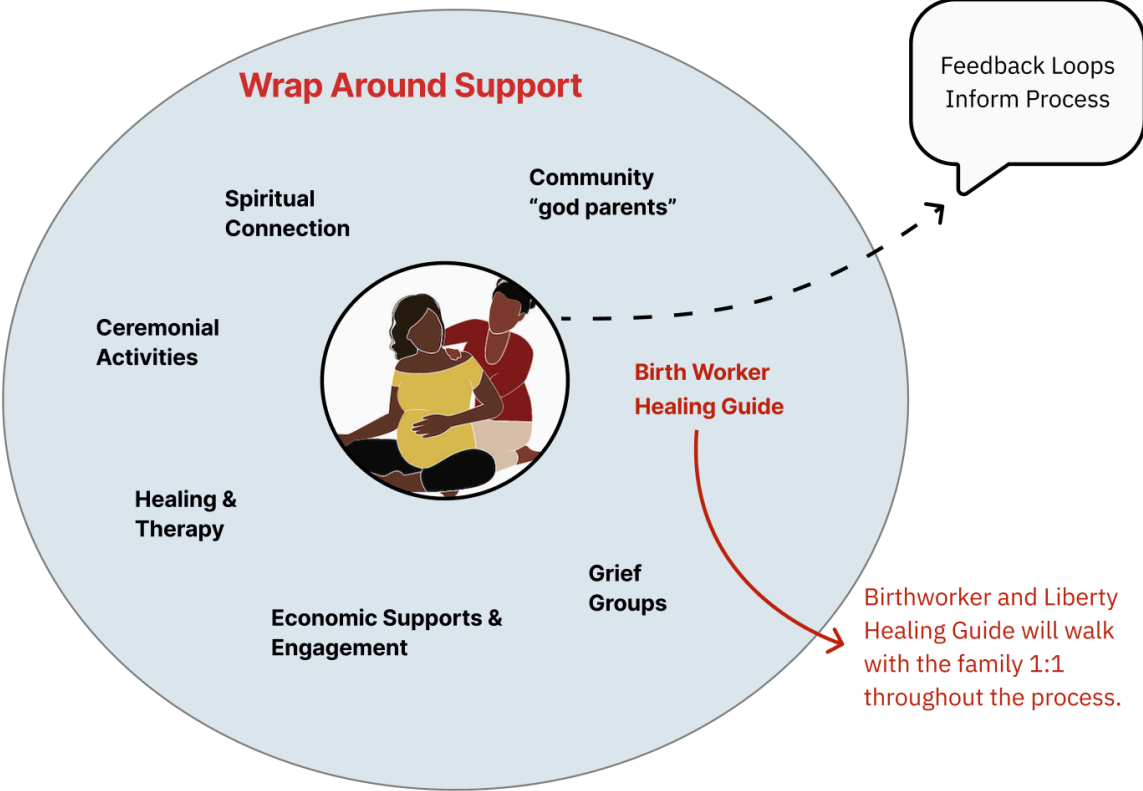
Pilot Effort

We are trying out the solutions we are imagining through a pilot effort being formed in Fall 2024, which will be fully running at our soft launch of HomePlace in the Spring of 2025. We will utilize our Imagine HomePlace solutions to wrap around up to 10 families with healing engagement, pathways to responsive providers, and concrete support in times of need. We will also begin hosting communal offerings such as classes, baby showers, and fathers’ groups. These efforts will be used to shape HomePlace development over time. There are three components to the Pilot:

- 1) Wrap around 10 African American families with healing and prevention strategies.
- 2) Host communal offerings available to Pilot families and offered to the community.
- 3) African American Doula and birthworker satellite to build capacity and connection.

Pilot Families

We will wrap around 10 families with healing, practical, and responsive care. We will provide resources during pregnancy and post-natal. We will ask pilot families to provide feedback to shape HomePlace supports. This diagram depicts the kinds of wrap around supports we plan to offer our Pilot families as we try out and learn what has the most impact.





Hosting Communal Offerings

We will host classes and gatherings to learn what resonates for our families. These communal activities will be established prioritizing the needs and interests of our Pilot families, and also made available through outreach to African American birthing families from the community to join.

Sample Schedule of Early Offerings

Mother's connecting and learning	<i>Healthy Mother, Health Baby</i> Learning sessions with key information about African American ways for a healthy pregnancy, a safe birth, and a thriving baby! <ul style="list-style-type: none"> • Finding and working with a Doula • Pregnancy milestones -- what to know, what to do • Raising a healthy baby
Supporting Dads to support mother & baby	<i>“Joseph Sessions” for Dads</i> Lead by an African American male therapist, dad’s will grow and learn together how to help their family seek and secure healthy practices from pregnancy through early childhood.
Family’s celebrating together	<i>Celebration and Ceremony</i> <ul style="list-style-type: none"> • Family photos • Art projects that recognize important moments • Communal ceremonies
Building a financial foundation	<i>Education and Financial Planning for the Future</i> <ul style="list-style-type: none"> • Affirmations and investment framework for financial education • Economic supports navigation for families on assistance

African American Birthworker Satellite



During this pilot phase, we will start to offer space and support for African American Doula’s and other critical birthworkers. We will start by creating a satellite space for gathering, connecting, and engaging with birthing families. We will provide capacity-building support, work on tools to support collaboration with responsive providers, and work through what would be necessary for birthworkers to call HomePlace home.

Pilot Participation Feedback Rooted in bell hooks Elements of Love

We will create a survey for participants at HomePlace to understand their experience with each visit. For families in the pilot, we will explore additional questions related to their experience of our HomePlace solutions. All to understand our impact, adjust our solutions, and begin to create a roadmap for use beyond HomePlace. We will utilize bell hook's ideas about love-in-action to ensure we hold ourselves accountable to love our families into wholeness.



We will be so committed to making our practice of love-in-action so robust that even in our moments of chaos or disruption, our muscle memory brings us back to love.

-Pastor Alike Galloway

Dimension of Love Sample Questions

Care	How did I feel cared for today?
Commitment	How was a commitment to my wellbeing expressed?
Trust	How was I lead to believe in the recommendations, actions, experiences?
Responsibility	What was my to do list that I left with?
Respect	How was my humanity valued today?
Knowledge	What information did I take away?

*Rooted in bell hooks All About Love



When we can see ourselves as we truly are and accept ourselves, we build the necessary foundation for self-love...whether we learn how to love ourselves and others will depend on the presence of a loving environment. Self love cannot flourish in isolation.

-bell hooks, All About Love

Projecting into the Future

HomePlace will start as a small, intimate program to ensure the human connection is prioritized as our primary change factor and to test out our impact. As we learn what works, we will expand our model, share with the field, and support systems change over time. Here’s one way we could get there:

	Phase 1: Start Small <i>Test solutions, develop model and build foundation for the work</i>	Phase 2: Grow the Model <i>Develop into full model at HomePlace; launch formal collaborative learning</i>	Phase 3: Expansion Possibilities <i>Consider expansion & deeper systems change</i>
Projected Years	2025 - 2026	2026 - 2027	2028 and beyond
Projected Cost	\$500,000 to \$1m annual	\$2 – 3M annual	TBD
Direct engagement with families and hosting communal offerings at Liberty’s Northside Healing Space.	<ul style="list-style-type: none"> • Begin to implement 2-3 solutions starting with 10 families • test and solidify model • begin to increase scale based on learnings 	<ul style="list-style-type: none"> • HomePlace to identify a target number that it will engage annually based on funding levels • Fully operational program model 	Liberty could use Presbyterian network to spark replication of the model. Other replication vehicles would be explored.
Projected collaborative opportunities including with BJC, impacting the field, and supporting systems change	<ul style="list-style-type: none"> • Share planning and start-up learnings informally • Share HomePlace Plan (with copyright) • Produce quarterly learning reports that are story and feedback-focused • Begin to build learning center 	<ul style="list-style-type: none"> • Produce publications and reports that are research and story-focused • Begin to host site visits for collaborative learning 	Collaborative learning could support systems change in multiple sectors (social services, medical, etc)

Learning & Innovation Approach

Built into the HomePlace model is an actionable focus on evaluation and supporting a learning approach for broader systems change. This will be instrumental for HomePlace to implement solutions that have an impact on participating families, and it will contribute to the maternal health disparities more broadly as shared insights. We know from our Birth Justice Collaboration

work that this is a burgeoning field of study in both medical and social sciences. In the medical field, practitioners are asking themselves how care can be more responsive and preventive. In the social sector, we are asking ourselves how conditions for African American birthing families can be changed to promote wellbeing as a protective factor for improving pregnancy, birth, and postnatal outcomes. Our learning and innovation effort will aim to contribute to the intersection of these two approaches. Our primary focus will be evaluating our services and supports for birthing families – what works for HomePlace families to experience different birthing outcomes? Our secondary focus, rooted in a community-engaged research ethic, is to produce key insights and learnings for the field. For 2025, we will implement a formative evaluation of our Pilot effort to inform our model. We will continue our partnership with the Native American community through sharing best practices.

In the future, we aim to contribute to both the social sector and the medical field, answering inquiry questions such as:

- How does regular, supportive healing-centered engagement with birthing families support positive well-being outcomes?
- How does regular communal connection rooted in African American culture support positive well-being outcomes?
- How can a collaborative experience between African American birth workers (ie Doula's), parents, and the medical provider be established and increase likelihood of better maternal and baby well-being outcomes?
- How might relevant, culturally rooted pregnancy and parenting tools help support knowledge and actions that promote maternal and baby well-being?
- How does receiving concrete support in times of need positively impact maternal health and baby wellbeing?

Our early ideas for developing and sharing out a model to inform the field include a partnership with the University of Minnesota's University Research and Engagement Center in North Minneapolis and the School of Nursing. Liberty has a proven track record of implementing community-engaged research with multiple schools within the U of M, including researching impacts and factors related to sex trafficking with Dr. Lauren Martin of the School of Nursing and youth development with Dr. Ross VeLure Roho with the School of Social Work.

One of our planning priorities for 2025 will be to solidify our research and evaluation partners and begin to establish research questions and capacity. As we implement our pilot efforts, we will be establishing a feedback protocol for gathering input and experiences of our earliest participants. We will plan our staffing models to have the resources necessary to partner with our research experts while we continue to provide our community engagement and lived expertise to the process. And we are building our public relations capacity through our marketing focus to be able to share out our learnings in meaningful ways.

Liberty's Business Plans

Most of our planning time in 2024 was developing how HomePlace will function as a birth justice program and systems change effort, and to set up how we will pilot test our solutions in 2025. We also began to focus on the organizational structure and business plans that Liberty will utilize to successfully launch and sustain HomePlace. In 2025, a primary focus of our MDH planning grant will be to engage business and resource development consultants to support our finance and fundraising strategies. This report includes key questions identified for us to explore in this next phase.

Marketing and outreach plans

Liberty has excelled in community-engaged communication and storytelling to amplify the voice of those involved. For HomePlace, we plan to build on that strength and branch out to deeper and broader communication strategies that will support our ability to run and sustain this effort over time. We know this work needs to be anchored in community to have the intended impact. And we need deep partnerships and support from stakeholders in the surrounding community to sustain the effort. We will develop marketing and communication plans that reflects both a community outreach focus and plans to successfully engage the broader region.

We worked with a strategic marketing consultant to help inform our goals and strategies for launching HomePlace in 2025. Our marketing goals include:

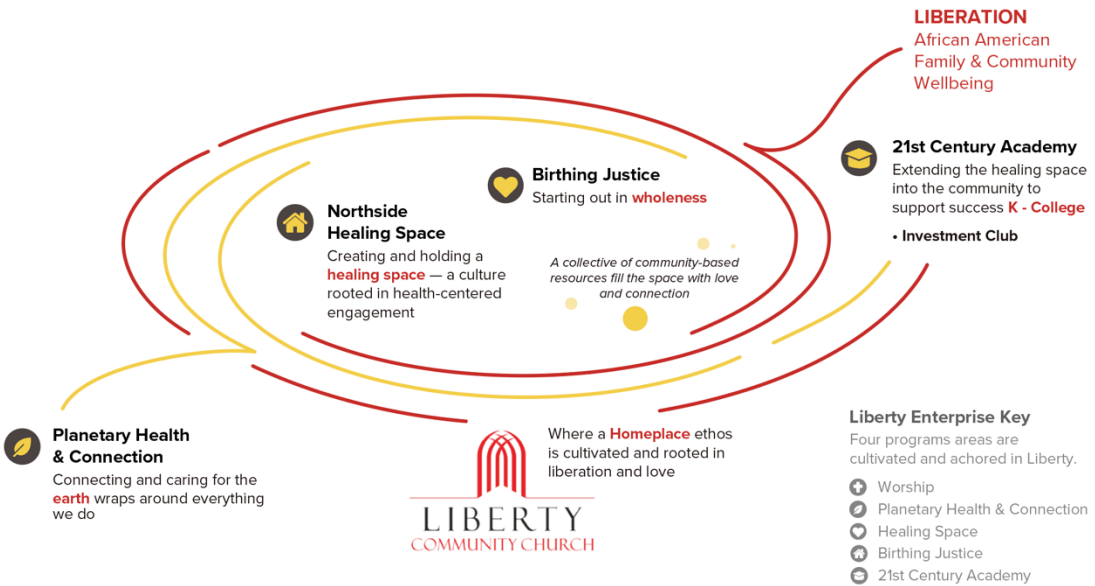
- Increase Awareness of HomePlace (purpose, goals, work) to build support, secure funding, and develop partnerships for sustainable impact
- Educate on need for HomePlace: share health disparities and evidence-based research regarding African American birthing families to promote the need for HomePlace and systems change
- Foster Community Engagement with local families, services/support organizations, and birthing professionals to build network of support and providers
- Promote Services to let birthing parents know about the resources and support available at HomePlace, emphasizing culturally responsive care
- Advocate for Policy Change to address the systemic issues that prevent equitable outcomes and appropriate care for African American birthing families (Long-term/secondary goal)

Key question for 2025: With these key goals in mind, we will ask ourselves – how can HomePlace create marketing, communication and outreach plans to position HomePlace for success both locally and in the broader community?

Human Resources

Liberty is a healing community – an ecosystem – anchored by a church in the heart of North Minneapolis. A community of healers in need of healing! Through our own lived experience, we engage authentically with our community – prenatal and birth through college to life success, youth and their parents – to provide healing connection and practical support navigating the barriers we face from systemic racism and internalized oppression. This diagram depicts how we envision our community.

Diagram: Liberty’s Healing Ecosystem



We are asset-based and see our strengths and potential first, often, and actionably. We also recognize our challenges, but we do so from the light of our strengths. We anchor in love – rooted in bell hooks vision of love-in-action as fuel for community transformation. We are mending racialized trauma and we know, as Resmaa Menakem states, it is a process that will take generations to undo the impacts of systemic racism on Black communities.¹⁹

¹⁹ Menakem, Resmaa. "My grandmother's hands: racialized trauma and the pathway to mending." (2017).

Anchored by a Healing Network

We run community engagement initiatives, but we know that we cannot “program our way” into liberation and wellbeing. As our research highlighted, we are developing a “virtuous human system”, one that can have the power to heal each other and also contribute to shifting systems.

To achieve this, we work as a healing network. Many of our pastoral leaders are also our staff. And many of our staff came through our programs. Our church members provide mentoring and support to our program participants. We all wear many hats even within our specialized roles. Many of our family – close and extended – are in our programs. Some of us work within Liberty, some of us take on roles as part of our church commitment. We are pastors, doctors, social workers, laborers, attorneys, youth workers, and more. We are contributors to philanthropy and recipients of services. **It’s all connected!** This interwoven fabric of connection is what makes us whole. We are a true community network rooted in love in the heart of North Minneapolis. We support each other in our liberation journeys, supporting others to join in, and working in ways that the sum truly is greater than our parts.



Key question for 2025: What staffing models will be needed for HomePlace to launch and grow into the future? What adjustments will be necessary to our HR model to fit the unique human capital needs for this work?

Finances and Sustainability

Liberty Community Church is laying the foundation for a comprehensive campaign to strengthen and support the offerings and infrastructure at Liberty well into the future. This includes raising resources to effectively launch and sustain HomePlace, anchored by the planning investments from Hennepin County and the State of Minnesota. Our commitment is that our service and supports will be free to the families who participate. We have been working with resource development and sustainability consultants over the past year to develop a plan, establish a resource development team, and begin to operationalize our increased development needs. We will seek resources to support HomePlace from government, institutions, and a growing base of individual donors.

Key questions for 2025: What possible pay for service resource streams would align with our healing and responsive provider approaches? What business planning approaches do we need to determine realistic implementation plans that are also as aspirational as our vision for HomePlace requires and leaves no one behind?

Call to Action

African American birthing parents deserve culturally affirming support that uplifts their journey. From pregnancy through postpartum, HomePlace offers a safe space where they are seen, heard, and supported by providers who understand and respect their unique needs. With healing-centered care, practical resources, and access to culturally trained providers, we guide them every step of the way. We provide resources and guidance to navigate the healthcare system, get emotional support, ease financial burdens, strengthen community connections, and much more. HomePlace is committed to improving maternal health outcomes and helping African American families thrive.

Join our mission to uplift African American birthing families in North Minneapolis. HomePlace is a sanctuary where love and connection take center stage. Support from stakeholders in the broader community – including our government partners – will help reduce maternal health disparities and foster healing within the African American community. By investing in our inter-generational community, supporters will play a vital role in empowering families. Together, we can create a future where every African American family thrives, surrounded by love, respect, belonging and compassion.

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