

Improve the Quality of Maternal Mental Health Care for Black Birthing Populations in Buncombe County, NC

RFP for Coronavirus State and Local Fiscal Recovery Funds

Mount Zion Community Development, Inc.

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Application Form

Question Group

Buncombe County requests proposals for projects to help the community recover from and respond to COVID-19 and its negative economic impacts.

Buncombe County has been awarded \$50,733,290 in Coronavirus State and Local Fiscal Recovery Funds (Recovery Funding), as part of the American Rescue Plan Act. To date, Buncombe County has awarded projects totaling \$23,093,499, leaving a balance of \$27,639,791 available to award.

Visit <http://www.buncombecounty.org/recoveryfunding><http://www.buncombecounty.org/recoveryfunding><http://www.buncombecounty.org/recoveryfunding><http://www.buncombecounty.org/recoveryfunding><http://www.buncombecounty.org/recoveryfunding> for details.

This infusion of federal resources is intended to help turn the tide on the pandemic, address its economic fallout, and lay the foundation for a strong and equitable recovery.

Buncombe County is committed to investing these funds in projects that:

- Align to county strategic plan and community priorities
- Support equitable outcomes for most impacted populations
- Leverage and align with other governmental funding sources
- Make best use of this one-time infusion of resources
- Have a lasting impact

Proposals shall be submitted in accordance with the terms and conditions of this RFP and any addenda issued hereto.

[Click here for the full terms and conditions of the RFP](#)

Organization Type*

Nonprofit

Nonprofit documentation

If nonprofit, attach IRS Determination Letter or other proof of nonprofit status.

[IRS Confirmation Letter for MZCD 3-21-2018.pdf](#)

Name of Project.*

Improve the Quality of Maternal Mental Health Care for Black Birthing Populations in Buncombe County, NC

New/Updated Proposal*

Is this a new project proposal or an updated version of a proposal submitted during the earlier (July 2021) Recovery Funding RFP?

Updated version of previously submitted proposal

Amount of Funds Requested*

\$1,055,000.00

Category*

Please select one:

- Affordable Housing
- Aging/Older Adults
- Business Support/Economic Development
- Environmental/Climate
- Homelessness
- K-12 Education
- Infrastructure and/or Broadband
- Mental Health/Substance Use
- NC Pre-K Expansion
- Workforce

Mental Health/Substance Use

Brief Project Description*

Provide a short summary of your proposed project.

Mount Zion Community Development, Inc. (MZCD) requests funding to strengthen maternal mental health care for Black mothers as part of our health equity program, titled Project NAF (Nurturing Asheville and Area Families). We use evidence-based strategies that strengthen the mental health of Black mothers, while reducing infant mortality and low birthweight births for Black pregnant and post-partum women and their infants in Buncombe County, NC. Our project is aligned with Buncombe County's Community Health Assessment Priorities for 2022-2025 as it relates to mental health, birth outcomes, and infant mortality. In addition, our project compliments the Buncombe County 2025 Strategic Plan by using an equity lens to ensure that healthcare delivery models are culturally responsive to the mental health and pregnancy needs of Black mothers and their infants.

Project Plan*

Explain how the project will be structured and implemented, including timeframe.

Project Structure

- **Leadership:** A team of doulas, community health workers, and a nurse will support the mental health needs of Black pregnant women and their families through home visits, coordination of pregnancy related resources, connections to mental health resources, and emergency funds for basic needs. Notably, doula care and pregnancy home visiting programs are a key strategy identified in the results-based accountability scorecard defined by the Community Health Improvement Project (CHIP) Advisory Committee.

- **Maternal Mental Health Advisory Team:** Our project will be monitored by a core advisory team comprised of community leaders, doulas, and mental health practitioners.

- **Collaborative Partners:** Our project will collaborate with SistahsCaring4Sistahs, Homegrown Families, Mothering Asheville, YWCA, Institute for Preventive Healthcare and Advocacy (IFPHA), Mountain Area Pregnancy Support, ABCCM Medical Ministry, MAHEC, Mission Hospital, Historic Black Churches, Buncombe County Health and Human Services, Mountain Area Pregnancy Services (MAPS), WNC Community Foundation, and SPARC Foundation.

Implementation Plan

- **Activity 1:** Provide structured home visits to Black Mothers in partnership with doulas, mental health practitioners, and clinicians to support perinatal and post-partum care to 40 clients each year over the course of three years. (Monthly during all three years of the project)

- **Activity 2:** Provide monthly stipends and basic needs assistance for mothers to participate in the program. (Monthly during all three years of the project)

- **Activity 3:** Coordinate strategic partnerships between doulas and mental health providers to strengthen healthcare delivery models that reduce racial disparities in maternal mental health, reproductive health, and infant health outcomes for Black women. (Quarterly advisory team meetings to strategize, monitor, and improve our work plan during all three years of the project)

- **Activity 4:** Innovate our home visiting program to include partners and children's grandparents in learning new skills to support maternal mental health, healthy pregnancy, and infant development. (Monthly during all three years of the project)

- **Activity 5:** Create an evaluation and measurement plan in partnership with the NC Center for Health and Wellness. (Establish baseline in year one, measure changes annually, and provide final report by year three)

Project Timeframe

We request a three-year grant award to support our work to strengthen maternal mental health and reproductive health for Black birthing populations. This project will address maternal mental health needs by providing access to pregnancy resources and reducing stressors related to pregnancy including anxiety, trauma from labor and delivery, and post-partum depression. Our goals are to support maternal mental health, promote healthy births, reverse infant mortality rates, and increase positive health outcomes for Black women and infants in our region.

Statement of Need*

Describe the need that this project will address. Include data to demonstrate the need, and cite the source of the data.

Our project will improve the quality of maternal mental health care for Black birthing populations in Buncombe County, NC. We know that gaps in our mental health system are disproportionate for Black birthing populations, who experience higher infant mortality rates, higher rates of traumatic births, and higher maternal mortality rates, according to data from the Centers for Disease Control and Office of Minority Health.

Additionally, a 2021 research study in Health Affairs found that, "Black women experience a higher prevalence of maternal mental health conditions, particularly postpartum depression and anxiety, relative to the US population as a whole. In addition, maternal mental health issues among Black women are largely

underreported, and symptoms often go unaddressed. Structural and social determinants are increasingly recognized as contributing factors to mental health; social and economic disasters exacerbate inequities in mental health outcomes and well-being and have implications for pregnant and postpartum population.”

Our local community health research reflects the above findings from national health agencies. The 2018 Buncombe Community Health Assessment found that infant mortality rates for Black babies are more than twice as high as rates for white and Hispanic babies. Since the pandemic, Black mothers in our program have reported an increase in stress, anxiety, and depression during and after their pregnancy; a decrease in access to perinatal and post-partum care; a loss of income due to absence from the workforce; an increase in food insecurity, an increase in housing instability, and an increase in intimate partner violence. Moreover, they have heightened stress due to an increase in racialized hate crimes, police brutality, and white supremacy violence. These racial disparities reflect an urgent need to prioritize and address inequities in maternal mental health care and reproductive healthcare delivery models for Black populations.

Link to COVID-19*

Identify a health or economic harm resulting from or exacerbated by the public health emergency, describe the nature and extent of that harm, and explain how the use of this funding would address such harm.

The trauma caused by COVID-19 directly correlated with an increase in maternal mental health challenges and maternal and infant health disparities within communities of color in our region. For example, many of our mothers were required to use telemedicine to access perinatal and post-partum doctor appointments and wellness checks for their babies. This shift from an in-person support system to remote support resulted in a decrease in the quality of care received by our clients during their pregnancies and post-partum periods. In addition, we witnessed increases in maternal mental health issues due to heightened anxiety and depression as the virus disrupted the daily lives of our clients and their families. Our clients also reported an increase in domestic violence due to being isolated with abusive partners during the pandemic's lockdown. In terms of economic disparities, we found that many women left the workforce to meet the increased demand for childcare while schools operated remotely during the pandemic.

We will use funds from this grant to address the above challenges by coordinating maternal mental health services and pregnancy services for perinatal and post-partum Black women through our home visiting program. We will provide competitive stipends and emergency assistance support to allow women to fully participate in our program. We will hire Black staff – including doulas, a nurse, and therapists to support our program. We believe this increase in support and representation will help to re-establish trust between pregnant women and the health care system. We will also use these funds to coordinate partnerships between doulas, mental health providers, community leaders, and nonprofits to reduce racial disparities in maternal mental health, reproductive health, and infant mortality.

Population Served*

Define the population to be served by this project, including volume and demographic characteristics of those served.

Our program participants represent low-income Black women who have been structurally excluded from mental health services, health care delivery models, and pregnancy related resources. These women are strong, resilient, and care deeply for their families' health and well-being. Our program will aim to support 120 Black women and 120 infants over the next 3 years to strengthen maternal mental health and reduce racial disparities in access to maternal and infant healthcare. Specifically, we will hire Black doulas and a Black nurse who can build trust and relationships with our clients due to having shared lived experiences, greater cultural awareness, and deeper understanding of their health challenges. Ultimately, this project will

improve the quality of maternal mental health care and reproductive health care for Black birthing populations.

Results*

Describe the proposed impact of the project. List at least 3 performance measures that will be tracked and reported. If possible, include baselines and goals for each performance measure.

1. Performance Measure: Number of Black babies, mothers, partners and grandparents served by structured home visits and holistic services.
 - o Baseline: 40 babies, 40 mothers, 40 partners and 40 grandparents will be supported in year 1.
 - o Goal: 120 babies, 120 mothers, 120 partners and 120 grandparents are supported by the end of year 3.

2. Performance Measure: Percent of mothers who report a decrease in mental health challenges related to anxiety, trauma from labor and delivery, and post-partum depression due to increased support from our team related to pregnancy services and access to mental health resources.
 - o Baseline: No current baseline data.
 - o Goal: By the end of the three year period, 75% of participating mothers report increased knowledge of mental health resources, 50% greater access to mental health resources, and 50% greater engagement with mental health resources throughout their pregnancies and over the first year post-partum.

3. Performance Measure: Percent of pregnant Black women served by Project NAF who deliver babies at a healthy weight.
 - o Baseline: 83.4% of Black babies in Buncombe are born at a healthy weight (compared to 90.7% of White babies, based on the most recent data available for Buncombe County, NC (5 Year Aggregate 2014-2018, WNC Healthy Impact Data Workbook 2020).
 - o Goal: By the end of the three year period, increase the percentage of healthy weight births among Black babies served by Project NAF to 90.7%, eliminating the disparity.

4. Performance Measure: Percent of participating mothers, partners and grandparents reporting increased knowledge and skills of contributors and methods to support healthy pregnancy and infant development.
 - o Baseline: No current baseline data.
 - o Goal: By the end of year three, 90% of mothers, partners and grandparents have reported an increase in knowledge related to the contributors for a healthy pregnancy and infant development.

Evaluation*

Describe the data collection, analysis, and quality assurance measures you will use to assure ongoing, effective tracking of contract requirements and outcomes.

We will establish a partnership with the NC Center for Health and Wellness Culture of Results Initiative at UNC Asheville to assist in our data collection, analysis, and evaluation for the three-year period of the grant. The NCCHW Culture of Results team will utilize Results-Based Accountability (RBA) and its data-driven process to prioritize and collect data, and plan, evaluate and improve their strategies. RBA has been recognized by the Center for Disease Control (CDC), the National Institute of Health (NIH), and departments and agencies across North Carolina as an evidence-based model for planning, evaluation, and improvement processes, and it aligns with the Buncombe County Community Health Assessment process.

The research consultants will work with our staff to design the evaluation, develop instruments such as surveys and/or focus group guides, collect and manage data; and report on outcomes. This will include developing quantitative and qualitative research tools to capture the quantity of our services and our impacts. We will use these measures and the story behind the curves to adjust our programmatic strategies

based on our progress each year and assure continued quality performance. We will also assess how the COVID-19 pandemic has impacted maternal mental health and reproductive health disparities to understand how our work is contributing to reducing these disparities in the community. We will also request their support for planning and facilitating cross-sector partnership meetings, developing shared strategies, and aligning efforts by multiple agencies to address this issue on a systemic level.

Equity Impact*

How will this effort help build toward a just, equitable, and sustainable COVID-19 recovery? How are the root causes and/or disproportionate impacts of inequities addressed?

A just, equitable, and sustainable COVID-19 recovery effort must include and prioritize the mental health and reproductive health needs of Black women and their families who have been disproportionately impacted by the virus in Buncombe County. This includes directing resources to families and programs that are explicitly supporting the mental and physical health needs of communities of color. Our program is essential to this recovery effort as we are a Black led team who have a deep level of trust and relationships with directly impacted communities and can ensure Covid relief resources are accountable to their expressed needs. This funding is essential to our growth and sustainability as an organization. We are one of a small number of Black led nonprofits in the region who are embedded within the communities we serve. An equitable COVID-19 recovery must reflect investment in those on the frontlines of community response efforts.

Our project will address the root causes of systemic inequities in maternal mental health and reproductive health in Buncombe County by amplifying the voices and health needs of Black women who are often excluded in healthcare policy decision making spaces. Our project will work on two core equity strategies. The first strategy is providing structured home visits and one on one support to Black pregnant mothers, infants, and their families. This includes hiring Black doulas and a Black nurse, as they can establish more trust with our clients. The second strategy will involve coordinating diverse partnerships to identify gaps in mental health and reproductive health care delivery models that are not culturally responsive to the needs of Black pregnant women. Both strategies are critical for addressing the compounding inequities caused by COVID-19 on maternal mental health and reproductive health at the individual and systemic level.

Project Partners*

Identify any subcontractors you intend to use for the proposed scope of work. For each subcontractor listed, indicate:

- 1.) What products and/or services are to be supplied by that subcontractor and;
- 2.) What percentage of the overall scope of work that subcontractor will perform.

Also, list non-funded key partners critical to project.

Subcontractors:

We will contract with mental health therapists, including “A Therapist Like Me” to connect Black clients to Black therapist and reduce societal stigma surrounding mental health. Comprises 13.7 % of the overall scope of work.

We will contract with Black doulas to provide wrap around support for mothers in our program. Comprises 1.7 % of the overall scope of work.

We will contract with a health agency to provide a Black nurse to work exclusively with our clients. Comprises 14.2 % of the overall scope of work.

We will contract with the NC Center for Health and Wellness Culture of Results Initiative at UNC Asheville to support our data collection, analysis, and quality assurance measures for the three-year period of the grant. Comprises 4.7% of the overall scope of work.

We will contract with a communications firm to expand our presence in the community through social media channels to establish heightened community awareness about maternal mental health and infant and maternal mortality. 10.9% of the overall scope of work.

Non-Funded Partners:

Maternal/Child Health: Buncombe County Health and Human Services, MAHEC, WNCCHS, Mountain Area Pregnancy Services, ABCCM Medical Ministry, and Mission Hospital, Institute for Preventive Healthcare and Advocacy, SPARC Foundation.

Doula Partners: Mothering Asheville, Homegrown Families, SistahsCaring4Sistahs

Mental Health Counseling: MAHEC Behavioral Health, Perinatal Emotional Health Network, Asheville Recovery Center, October Road.

Basic Needs & Financial Assistance: Mt. Zion Missionary Baptist Church of Asheville, Inc., YWCA, ABCCM Medical Ministry, Babies Need Bottoms, Buncombe Community Engagement Services, WIC, Eblen Charities, Salvation Army, Foster Memorial, and United Way's 211.

Early Childhood Education: The Community Foundation of Western North Carolina supports our evidence-based program, "Partners for a Healthy Baby" which educates mothers on the importance of Early Childhood Development.

Capacity*

Describe the background, experience, and capabilities of your organization or department as it relates to capacity for delivering the proposed project and managing federal funds.

Our maternal and child health programs have ensured Black mothers and infants have both pregnancy related resources and maternal mental health resources to enable healthy births and reverse infant mortality rates. Our work uses evidence-based strategies to support up to 40 mothers and their babies to achieve equitable health outcomes each year. Moreover, we have a 20-year legacy of supporting the health and well-being of structurally excluded community members in Buncombe County. In addition, we have managed both state and federal funds to support our project from the NC Department of Health and Human Services.

Our Executive Director, Belinda K. Grant serves in a leadership role on the Buncombe County Community Health Improvement Plan Advisory Committee. Notably, she was awarded the Lisa C. Clarke Bridge Builder Award to recognize her work to reduce health disparities, enhance communication between across agencies, and build collaborations that close gaps between health systems in Asheville, NC. In addition, our programmatic team is trained in the evidence-based curriculums, "Partners for a Healthy Birth" and "Circle of Security," which helps caregivers who are parenting children from birth to age 5-6, gain a better understanding of their children's needs and develop a secure attachment and relationship with their children.

We will also hire Black Doulas to connect women in our program to pregnancy and post-partum resources. In addition, we will partner with a health clinic to hire a Black nurse to support women in our program. Finally, we will establish a partnership with Emma Olson, the Director of Partnerships and Evaluation at the NC Center for Health and Wellness at UNC-Asheville as our Project Evaluator. She brings field and educational expertise with advanced degrees as an MPH and MSW. Our operations, financial, and legal organizational team consists of an administrative assistant, receptionist, CPA Corliss & Solomon, PLLC, Roberts and Stevens PA.

Budget*

Provide a detailed project budget including all proposed project revenues and expenditures, including explanations and methodology. For all revenue sources, list the funder and denote whether funds are confirmed or pending. For project expenses, denote all capital vs. operating costs, and reflect which specific expenses are proposed to be funded with one-time Buncombe County Recovery Funds.

Download a copy of the budget form [HERE](#). Complete the form, and upload it using the button below.

Recovery Funds Budget.Final 4.12.2022.xlsx

Special Considerations*

Provide any other information that might assist the County in its selection.

In April of 2022, the White House released a proclamation on Black Maternal Health, noting it as a crisis for Black women in our country, who are more than three times as likely to die from pregnancy-related complications as white women, regardless of their income or education. This proclamation calls on us to “improve maternal mental health treatment, bolster community-based programs, train providers, enhance research, and ensure that maternal care is better coordinated.” Our project goals meet this call to action. We are dedicated to our work to develop maternal mental health and reproductive health care delivery models that are culturally responsive to the needs of Black pregnant women, infants, and their families. Ultimately, this one-time infusion of resources will greatly strengthen the capacity of our nonprofit to support Black mothers, advocate for inclusive care delivery models, and reduce mental health and reproductive health disparities in our region. Lastly, these resources are particularly vital to overcome the budget setbacks that our nonprofit experienced during the past 2 years of the pandemic.

File Attachment Summary

Applicant File Uploads

- IRS Confirmation Letter for MZCD 3-21-2018.pdf
- Recovery Funds Budget.Final 4.12.2022.xlsx

Department of the Treasury
Director, Exempt Organizations

Internal Revenue Service
P.O. Box 2508
Cincinnati, OH 45201

Date: DEC 06 2001

Employer Identification Number:
56-2018982

Document Locator Number:
201237001

Mount Zion Community Development Inc.
C/O Jacquelyn M. Webb
48 Patton Avenue Suite 400
Ashtville, NC 28801

Contact Person - ID Number:
Eric J Bertelsen - 31-07577
Contact Telephone Number:
(877) 829-5500

Dear Sir or Madam:

Based on the information you recently submitted, we have classified your organization as one that is not a private foundation within the meaning of section 509(a) of the Internal Revenue Code. You are not a private foundation because you are an organization of the type described in sections 509(a)(1) and 170(b)(1)(A)(vi).

Your exempt status under section 501(a) of the Internal Revenue Code as an organization described in section 501(c)(3) is still in effect.

This classification is based on the assumption that your operations will continue as you stated. If your sources of support, or your purposes, character, or method of operation change, please let us know so we can consider the effect of the change on your exempt status and foundation status.

This letter supersedes any previous letter or notice we have issued in which your organization was presumed to be a private foundation.

Grantors and contributors may rely on this determination unless the Internal Revenue Service publishes notice to the contrary. However, if you lose your section 509(a)(1) status, a grantor or contributor may not rely on this determination if he or she was in part responsible for, or was aware of, the act or failure to act, or the substantial or material change on the part of the organization that resulted in your loss of such status, or if he or she acquired knowledge that the Internal Revenue Service had given notice that you would no longer be classified as a section 509(a)(1) organization.

The law requires you to make your annual return available for public inspection without charge for three years after the due date of the return. You are also required to make available for public inspection a copy of your exemption application, any supporting documents and this exemption letter to any individual who requests such documents in person or in writing. You can charge only a reasonable fee for reproduction and actual postage costs for the copied materials. The law does not require you to provide copies of public inspection documents that are made widely available, such as by posting them on the Internet (World Wide Web). You may be liable for a penalty of \$20 a day for each day you do not make these documents available for public inspection (up to a maximum of \$10,000 in the case of an annual return).

Enter Name of Organization

- 2 -

Because this letter could help resolve any questions about your private foundation status, please keep it in your permanent records.

We have sent a copy of this letter to your representative as indicated in your power of attorney.

If you have any questions, please contact the person whose name, identification number and telephone number are shown in the heading of this letter.

Sincerely yours,



Director, Exempt Organizations

Coronavirus State and Local Fiscal Recovery Funds

Organization Name:	Mount Zion Community Development, Inc.
Project Name:	Improve the Quality of Maternal Mental Health Care for Black Birthing Populations in Buncombe County, NC
Amount Requested:	\$1,055,000.00 over the course of 3 years

Proposed Project Revenue Funder	Amount	Confirmed or Pending?	Notes
Proposed Buncombe COVID Recovery Funds: Proposed	\$ 1,055,000.00	Pending	One time infusion of resources to advance our work over the next 3 years.
Buncombe County: Project NAF Nurturing Area Families	135,000	Pending	
Buncombe County: SDoH	45,000	Confirmed	
Buncombe County Strategic Partnerships Grant	150,000	Confirmed	
City of Asheville	75,000	Pending	
Community Foundation of WNC	150,000	Confirmed	
Dogwood Health Trust	600,000	Pending	Pre-Application approved. Site Visit conducted for Proposal
Fundraising	450,000	Pending	Commitment from First Citizens and Advent Health
Mt. Zion Missionary Baptist Church of Asheville, Inc.	14,400	Confirmed	
NCDHHS Healthy Beginnings: Project NAF	240,000	Confirmed	Project NAF Program to impact infant mortality, low birth weight, pre-term births
MZCD Board Contributions & Individual Donations	7,275	Confirmed	
WNC Bridge Foundation	150,000	Pending	Pre-Application approved. Site Visit conducted for Proposal
Total	\$ 3,071,675.00		

Proposed Project Expenses	Proposed Recovery Funds	Other Funds	Total	Capital or Operating Expense?	Notes
MCZD Executive Director Salary	\$ 84,000.00	\$ 168,000.00	\$ 252,000.00	Operating Expense	25 FTE of 84,000 covered by this grant (includes medical, dental, retirement, and death insurance)
Project NAF Case Manager	\$ 53,000.00	\$ 109,000.00	\$ 162,000.00	Operating Expense	25 FTE of 53,000 covered by this grant (includes medical, dental, retirement, and death insurance)
Project NAF Case Manager #2		\$ 109,000.00	\$ 109,000.00	Operating Expense	25 FTE of 53,000 covered by this grant (includes medical, dental, retirement, and death insurance)
Project NAF Resource Navigator	\$ 53,000.00	\$ 109,000.00	\$ 162,000.00	Operating Expense	25 FTE of 53,000 covered by this grant (includes medical, dental, retirement, and death insurance)
Administrative Assistant	\$ 40,000.00	\$ 110,000.00	\$ 150,000.00	Operating Expense	25 FTE of 40,000 covered by this grant (includes medical, dental, retirement, and death insurance)
MCZD Receptionist	\$ 40,000.00	\$ 110,000.00	\$ 150,000.00	Operating Expense	25 FTE of 40,000 covered by this grant (includes medical, dental, retirement, and death insurance)
Nurse (BSN)	\$ 150,000.00	\$ 150,000.00	\$ 300,000.00	Operating Expense	Full Time Position at 100,000 a year, covered by this grant (includes medical, dental, retirement, and death insurance)
Technical Assistance for Project Evaluation	\$ 50,000.00	\$ 25,000.00	\$ 75,000.00	Operating Expense	Between 15 to 20 hours a month of support from NC Center for Health and Wellness Culture of Results Initiative at UNCA-Asheville
Travel	\$ 20,000.00	\$ 20,000.00	\$ 40,000.00	Operating Expense	Staff Mileage Reimbursement, Cost of Church van for participant pick-up for education sessions, Cost of Uber services to limit transportation barriers for medical prenatal/postnatal health services

						<p>Monthly Newsletter, Logo, Website Maintenance, Monthly Youtube talk show with medical professionals with nurse family practitioners and participants (communications consultant with Aisha Adams Media) . Video storytelling of project. Commercial segment with WLOS for Project NAF Program. Monthly broadcast via WRES 100.7 FM; Local radio broadcasts. Monthly newsletter with The Urban News. National Pen- Outreach materials to enhance community awareness about issues that impact Maternal Mental, Child Health, Birth Outcomes.</p> <p>Racial Equity Forum: Annual Racial Equity Forum to heighten community awareness about Infant mortality to address Health Equity and Infant Mortality. Guest speakers from Buncombe County and City government, and other community partnerships. Virtual or In-Person Event based on COVID-19 guidelines. Radio platforms, The Urban News, Asheville Citizen Times, WLOS coverage</p>
Marketing and Communications	\$ 115,000.00	\$ 355,000.00	\$ 470,000.00	Operating Expense		
Technology/Laptops	\$ 30,000.00	\$ 50,000.00	\$ 80,000.00	Operating Expense	COVID-19 has changed the way we live, work, play and receive information. Laptops will be used to implement PHB curriculum and to connect with clients to meet their day-to-day needs. Laptops for NAF participants: \$40,000.	
Stipends for Program Participants	\$ 52,000.00	\$ 20,000.00	\$ 72,000.00	Operating Expense	500 a year per client for 40 clients x 3 years = 120 clients (24,000 per year)	
Emergency Assistance Stipends	\$ 52,000.00	\$ 20,000.00	\$ 72,000.00	Operating Expense	600 a year per client for 40 clients x 3 years = 200 clients (24,000 per year)	
Clinical Onsite Services for ABCCM Medical Ministry	\$ 13,000.00	\$ 5,000.00	\$ 18,000.00	Operating Expense	Fee to ABCCM: \$500 per month = \$6,000 x 3 years = \$18,000.	
Insurance: General Liability; Directors and Officers, Surety Bond, Transportation & Worker's Comp	\$ 16,000.00	\$ 44,000.00	\$ 60,000.00	Operating Expense	Insurance Fees	
Educational Supplies	\$ 40,000.00	\$ 40,000.00	\$ 80,000.00	Operating Expense	babies/infants/children; Car seats, clothing, workforce development	
Mental Health Therapists:	\$ 144,000.00	\$ 216,000.00	\$ 360,000.00	Operating Expense	Mental health services to impact depression, mental health challenges through "A Therapist Like Me", Perinatal Support Services, Grief Counseling. Forty participant x 15 sessions @\$100/hour x 3 years = \$180,000.00. A holistic approach in serving children with mental health needs -Forty participant x 15 sessions @\$100/hour x 3 years = \$180,000.00. Combined Total: \$360,000.00.	
PPE Supplies	\$ 15,000.00	\$ 45,000.00	\$ 60,000.00	Operating Expense	PPE Supplies for families & Community Engagement Markets/Cleaning Supplies	
DOULA Support Services	\$ 18,000.00	\$ 17,475.00	\$ 35,475.00	Operating Expense	DOULA support for Labor & Delivery	
Accountant and Legal Services	\$ 70,000.00	\$ 230,000.00	\$ 300,000.00	Operating Expense	CPA, Bookkeeper, Legal Fees, ADP-Payroll Processing	
Equipment		\$ 3,000.00	\$ 3,000.00	Operating Expense	Medical Equipment: Blood Pressure Cuff, etc.,	
Office Space/Utilities		\$ 61,200.00	\$ 61,200.00	Operating Expense	Leased Office Space: \$400/month x 12 months x 4 spaces + several spaces for program materials. Utilities: \$100/month x 12 months x 3 years = \$3600.	
Supplies/Materials/Telephone/Printing			\$ -	Operating Expense	Office Supplies: Seven staff members x \$500/yr = \$3500 x 3 years = \$10,500. Telephone services with Verizon estimated to be \$104/month x 12 = \$1248 x 3 = \$3744. Use of church copier estimated to be \$50/month x 12 months = \$600 x 3 years = \$1800. The remaining \$1431 will be used for MZCD brochures (printing).	
	\$ 1,055,000.00	\$ 2,016,675.00	\$ 3,071,675.00		\$ -	