Black Child Legacy Campaign (BCLC) Executive Summary

Overview: Black Child Legacy Campaign improves outcomes for African American children through strategic, coordinated work carried out across public and private systems, and through grassroots efforts.

Challenge: In 2011, Sacramento County was presented with a report that indicated a disturbing trend: for 20 years, African American children died at twice the rate of other race groups in the county. In response to this, a Blue Ribbon Commission convened to explore the top four causes of disproportionality in the death rates - perinatal conditions, infant safe sleep, child abuse and neglect, and third party homicide - and recommended that the County reduce African American child deaths by 10-20% by building an infrastructure spanning across public and private sectors to increase public awareness, provide targeted direct services, and institute policies that recognize the issue as a priority.

Solution: A collective impact model to reduce African American child deaths through targeted, community-based programs aimed at reducing risks is a promising approach. In 2013, the County funded a county-wide infrastructure to: 1) aid neighborhoods experiencing the greatest instances of African American child deaths by providing evidence-based services and supports; 2) engage and empower the African American community to help implement and inform culturally appropriate outreach and services; 3) launch a coordinated community education campaign addressing the top four causes of disproportional deaths; 4) improve data collection and sharing across systems; and, 6) establish a backbone agency (Sierra Health Foundation, in this model) and an ongoing steering committee of stakeholders with diverse representation to oversee the effort and help build sustainable systems with lasting impact.

Innovation: One of the major, innovative components of the BCLC is the “Community Incubator Leads” (CILs). Located in each of the neighborhoods experiencing the greatest tragedy and need, CILs are community centers providing services and resources to support the local residents. Each CIL houses a multi-disciplinary team of County human assistance workers, child welfare workers, probation officers, and cultural brokers (peer advocates with specific cultural knowledge and who understand how to navigate public human services systems). CILs utilize already-established, trusted neighborhood institutions to juxtapose public services with grassroots supports, removing barriers to accessing public services by making them community-based and in an environment of familiarity and trust. A “Technical Assistance Resource Center” serves as a central hub for providing direction, training, and assistance to all CILs, as well as gathering
and maintaining a standard set of qualitative and quantitative data elements collected by all CILs, so that the impact of the initiative can be evaluated. Another component of BCLC is unified community education that utilizes and builds onto existing initiatives addressing social and environmental determinants of health. Prevention and early intervention concepts such as self-care, reduction of risk factors, and good parenting are infused in messaging that focuses on preventing the top four causes of disproportional deaths, reaching the community through a variety of media sources. Finally, a remarkable and crucial element of BCLC is the mobilization of Sacramento’s African American community members and leaders. The power and innovation behind this initiative is the ownership of an entire community; and the value of involving communities in creating their own networks for success are the bonds forged among residents, the pride built in communities, and the commitment established to create a legacy that will last for future generations.

**Results**: Sacramento County is beginning to see results that indicate it is headed in the right direction to effectively reduce African American child deaths. In 1990, the African American child death rate was 166.1 per 100,000. Between 2013 and 2016, the rate dropped to a low of 54.9 per 100,000. When comparing 2013 to 2016, there was a 45 percent decrease in the African American infant death rate and a 76 percent decrease in disparity. In addition, the shifting and integrating of systems have improved service delivery and utilization by the community, streamlined efforts, increased response time, and have even increased the community’s trust and faith in the County’s services.

**Replicability**: Although Sacramento County has been working to reduce African American child deaths since before the formal inception of the BCLC initiative, after receiving the alarming information that African American children were dying at twice the rate of other races in the county, it recognized that more needed to be done, and in a strategic and integrated way. Since then, Sacramento County has taken this issue on as a community and has transformed the way it works and the way it involves its citizens. Its data-driven approach, mixed with community feedback on strategies, can be a model. Counties have an opportunity to work with their communities to reduce known and preventable risks for illness and death. A collective impact model could shape the way systems interact with at-risk families, increase efficiencies and coordination across systems, impact policies, and reduce death rates.

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