

A Process to Lift Up Community Voice and Invest in Community-Based Health Delivery, Access, and Social Determinants of Health Solutions

By: Sarah Ragsdale*, Alyssa A. Kotzmann*

*The Alliance for Health Equity

Keywords: community voice, community solutions, inclusivity, nonprofit, impact, evaluation

Abstract

Community Voice is the value that seeks to lift up ideas from the community to address complex health, social, and economic challenges. The Let's Talk: Community-Designed Solutions series provides a platform for those ideas rooted in one or more Social Determinants of Health and possible grant funding and processes to support progress for ultimate launch or scale. Evaluation of this process provides insights for the continual evolution of community-inclusive inputs and surfaces opportunities to support capacity building and impact.

Introduction

When people are empowered in the places where they live, lifting their voices and building their power to shape the services and programs that affect them can lead to community-driven solutions. The Alliance for Health Equity (The Alliance) aims to amplify community inclusivity through a model that drives locally determined solutions and challenges inequitable policies, systems, and structures as they are influencers to systemic racism and discriminatory practices. Based on the Community Voice Initiative, the Let's Talk: Community-Designed Solutions series seeks to uplift community ideas, resulting in improved health and well-being for everyone.

The Let's Talk Series began its first cohort in February 2023. Evaluation of this process provides initial insights that are being applied to evolve the series for future cohorts. The following will discuss Community Voice as a value and Theory of Change, as well as lessons learned from the first Let's Talk series for implementation into a scalable model for community-designed solutions within the region.

Community Voice

The Alliance is focusing on community-based solutions to address complex social and health challenges, a community-inclusive approach where stakeholders can co-create initiatives and investments with community members to develop substantive solutions for complex health, social, and economic conditions. According to Facilitating Power, a "culture of whole governance and community ownership" is necessary to "break the cycle of perpetual advocacy for basic needs" and to "achieve racial equity and environmental justice". ii

The Alliance has outlined two goals for leading with "positive community-driven change":

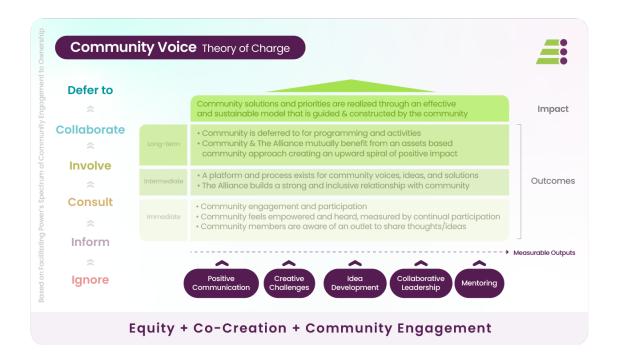


- 1. Increase engagement and remove any access barriers for residents and grassroots organizations to voice ideas and solutions, find partnerships, and receive financial investments leading to increased social impact for Greater Coatesville.
- 2. Inform Greater Coatesville residents, investors, and partners (government, nonprofit service providers, donors) on community-driven solutions and investment opportunities.

The goal of Community Voice is to "involve, collaborate, and defer to" the community as partners for the co-planning of initiatives and community-driven processes as described in Facilitating Power's The Spectrum of Community Engagement to Ownership.ⁱⁱⁱ



A vertical representation of The Spectrum has been incorporated into the following Theory of Change for Community Voice.





This model depicts Community Voice as a value that incorporates other values and priorities of The Alliance related to equity, co-creation, and community engagement.

The recommended input activities include:

- practicing mutual positive communication between the organization and the community
- posing creative challenges for the community
- facilitating the development of community ideas
- practicing collaborative leadership with and within the community
- providing mentorship for community capacity building

Measurable outputs can be identified from these input activities. The resulting outcomes for the immediate, intermediate, and long-term future coincide with the progression of the Facilitating Power's The Spectrum of Community Engagement to Ownership. The desired impact is community inclusivity that is closest to the "defer to" goal where "community solutions and priorities are realized through an effective and sustainable model that is guided and constructed by the community."

The Community Voice Theory of Change model will be used to guide and evaluate the Let's Talk series.

Community Voice: A Case Study

The Theory of Change model was designed out of the insights from an evaluation of Community Voice case study of the Coatesville Black Media Renaissance (CBMR). As a team of 9 local arts and media activists, CBMR provided a platform to uplift voices in addressing complex social, economic, and health issues. Methodology in Appreciative Inquiry (AI) rooted in Positive Organizational Scholarship (POS) was used to support optimal organizational performance. Evaluation of the group's experiences provided insights into the potential successes of community-inclusive initiatives.

Let's Talk: Community-Designed Solutions

Let's Talk: Community-Designed Solutions provides a platform for community members to present their ideas that address one or more Social Determinants of Health. Through the series, the Community Voice model advances the community's skills, knowledge, and staging of a project over time. It also empowers the project directors (i.e., the award recipients) with knowledge about project design and evaluation. This Let's Talk series encourages that:

- 1. The community is engaged in understanding the challenges Greater Coatesville faces.
- 2. The right questions are posed in response to the community's challenges.
- 3. The community designs its own solutions with guidance from innovation professionals.



The Alliance provides the platform for these community-designed solutions to be heard and potentially adopted by the government, local investors, businesses, nonprofits, and the community. This Community Voice initiative influences The Alliance and its partners' decisions regarding the deployment of capital into community-designed solutions. It also attracts co-investors into the proposed ideas/solutions.

Process

Part 1: The community is invited to present ideas pertaining to:

- o economic development
- o behavioral health
- o health
- education
- workforce
- housing

Ideas are submitted via an online application form and then coached into a sustainable solution for presentation.

Part 2: Ideas receive consultation and guidance by The Alliance team to incorporate a

- Gap Analysis
- o Financials
- o Timeline
- Benchmarks
- Team profiles
- o Partners/Fiscal Agents

Ten presentation slides with the topics above are created to facilitate a five-minute presentation.

Part 3: A Let's Talk event is created for the sustainable solution to be presented in-person as a pitch to:

- o The community
- Co-investors
- Government
- Donors
- Nonprofit Partners
- o The Alliance's grantmaking committee

All parties above provide initial feedback, partnership opportunities, and networking.

Part 4: Five initiatives from each event are selected to receive monetary awards:



- three \$500 awards selected by the community in attendance
- one \$1000 award selected by the community in attendance
- one \$2,500 award selected in a vote by key panelists

Part 5: The Alliance for Health Equity's Grant Making Committee members review recordings of the presentations and determine if any additional capital, in the form of grants and/or capacity building, is needed to successfully launch the community-driven solution.

Part 6: In addition to a monetary award, each winning solution will receive ongoing and personalized capacity building to support the idea's success in implementation.

Expected Outcomes

- 1. The generation of 30-40 new ideas/solutions annually.
- 2. The projected launch of 5-10 of the ideas/solutions annually.
- 3. The community's engagement in solving social challenges.
- 4. The influencing of grants allocation as well as changes to inequitable systems and policies.
- 5. The partnership of solutions with the Equity Health Center as part of its integrated health strategy

Initial Insights

A total of twenty-five 25 solutions received awards for Cohort 1. The award winners (project directors) were asked to participate in an evaluation over the course of one year. In addition, The Alliance's grantmaking committee distributed \$70,000 in general operations support to seven (7) of the twenty-five (25) solutions, and The Alliance partnered with six additional solutions through the Equity Health Center. The Equity Health Center is an integrated healthcare hub housing various clinical and holistic health services and programs are provided free of cost.

An evaluation is ongoing to assess progress toward the desired Community Voice impact. The evaluation is developmental, as progress is still being measured for Let's Talk Cohort 1. Initial findings are being evaluated into the planning of Cohort 2. The evaluation seeks to analyze the extent to which The Alliance is supporting Community Voice Process inputs to ultimately answer the question:

"To what extent is capacity being built for award recipients?"

Important capacity measures have been identified to understand the status of community members in advancing their skills, knowledge, and stage of their project over time. These key capacity indicators are:

- Understanding the needs and demands of the project
- Status of team and partnership development

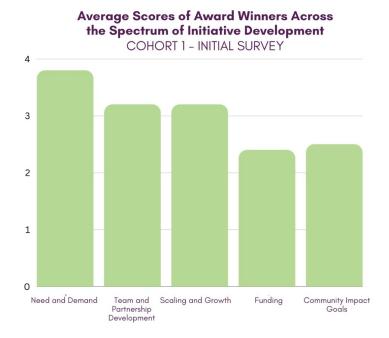


- Status of scaling and growth
- Acquiring other funding
- Understanding community impact goals

Award recipients completed an initial survey to understand the baseline measures for these key indicators. Results were quantified into categories 1 through 4:



Initial findings demonstrate the beginning status of award recipients and help to identify areas of opportunity for growth. The following bar graph presents the average scores across nine award-winner responses received.



An assessment of each of the awarded initiatives demonstrates the overall stage for each initiative and potential focus areas. At the point of receiving the award funds, this assessment shows that:

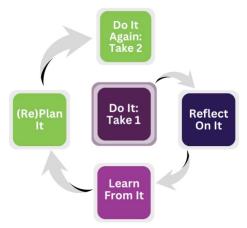
- All organizations are at stage 2 and above (pre-launch preparation stage)
- Over half of respondents are at stage 3 and above (ready for soft launch/case study)
- None are at stage 4 (ready for institutional adoption and/or scale)



Correlating mid-point and final surveys will be distributed over the course of a year to monitor progress on this spectrum of initiative development.

Discussion: Incorporating Findings and Scaling

One of the outcomes of the initial Community Voice case study and evaluation (CBMR) was the importance of experiential learning. The experiential learning cycle supports the processes that encourage an upward spiral in performance as initiatives evolve and adapt through reflection and lessons learned.



Recreated from Kolb^v

Engaging in the "re-plan" stage of Let's Talk has presented the opportunity to reflect and learn from the experiences of Cohort 1 to improve processes in Community Voice. These learnings may be applied to the development of Cohort 2, just as they may be applied to any community interested in implementing and/or scaling an initiative in Community Designed Solutions.

Experiences of Cohort 1 determined that the process must be edited to ensure community members are equitably engaged and fairly voted upon. In comparison to Cohort 1's sessions held monthly, sessions in Cohort 2 will run quarterly to allow for ongoing community submissions and proactive capacity-building coaching and training.

Each session of Cohort 2 will be themed based on the relevant Social Determinant of Health topic (i.e., Health, behavioral health, education, employment, housing, and economic stability) to ensure presentations can be fairly reviewed and compared by key panelists and community attendees. Cohort 2 topics will be combined into 1. Health and Wellbeing, 2. Education and Employment, 3. Housing, and 4. Healthy Environments.

Cohort 2 will convene key partners who are experts on the above topics. For example, a healthcare institution will be requested to partner and co-host the Let's Talk: Health and Wellbeing session, and the local school district will be requested to partner and co-host the Education and Employment session.



Compared to a small percentage of grantmaking distributions in Cohort 1, The Alliance for Health Equity will allocate 20% of its annual foundation grant-making budget to Cohort 2 of Community-Designed Solutions.

Applying findings from award recipient surveys and feedback and referencing the Community Voice Theory of Change as a guide, opportunities for growth emerge. The following inputs are incorporated into Let's Talk Cohort 2:

| Inputs | Opportunity |
|-----------------------------|--|
| Positive Communication | New Cohorts be informed of the importance of Community Voice evaluation from the beginning of initiative to increase participation |
| Creative Challenges | A continuation of challenges seeking solutions in the Social Determinants of Health |
| Collaborative Leadership | Host workshops for networking and partnership building |
| Mentorship | Facilitate check-ins coaching for new stages of development |
| Idea Development | Make available multi-media training materials to support progress |

Finally, in recognizing the potential for scale at any level, participants can be encouraged to incorporate Community Voice into their own initiatives.

As a continuation of the experiential learning process, evaluation is incorporated into the planning of the following cohorts. While progress will continue to be monitored for Cohort 1, adaptation of surveys and communication methods is ongoing for all cohorts. Highlighting the best experiences by using methods in AI may surface more learnings from projects that show progression on the spectrum of initiative development. Furthermore, data may be used to evolve our understanding of the best processes for Community Voice, especially as it applies to supporting community-designed solutions. Being open to the continual adaptation of models and tools may present more opportunities for scale.

Conclusion

The Alliance is implementing processes to lift community voices to address complex health and socio-economic challenges. The Let's Talk series provides the platform for community-designed solutions to be presented, voted upon, and supported through grant funding, coaching, training, and partnership development. Guided by the Community Voice Theory of Change model, initial



findings from a developmental evaluation have identified areas of opportunity for growth and scaling of this initiative so that it may be applied in other communities.



ⁱ The Alliance for Health Equity. http://www.alliancehealthequity.org/

- ii González, R. (n.d.). *The spectrum of community engagement to ownership*. Facilitating Power. https://d3n8a8pro7vhmx.cloudfront.net/facilitatingpower/pages/53/attachments/original/15 96746165/CE2O SPECTRUM 2020.pdf?1596746165. p. 5.
- iii González, R. (n.d.). *The spectrum of community engagement to ownership*. Facilitating Power. https://d3n8a8pro7vhmx.cloudfront.net/facilitatingpower/pages/53/attachments/original/15 96746165/CE2O SPECTRUM 2020.pdf?1596746165. p. 2.
- ^{iv} Dutton, J. E., & Spritzer, G. M. (2014). How to be a positive leader: Small actions, big impact. *Berrett-Koehler Publishers*.
- ^v Kolb, D. A. (1984). Experiential learning: Experience as the source of learning and development. New Jersey: Prentice-Hall