BUILDING A THRIVING FUTURE, TOGETHER

MODERN INTERMEDIARIES AS PARTNERS IN COMMUNITY TRANSFORMATION

SUMMER 2026

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CACHI California Accountable Communities for Health Initiative	California Accountable Communities for Health Initiative
center for community investment	Connect Capital Accelerating Investments for Healthy Communities
ChangeLab Solutions	Housing Solutions Collaborative Legal Epidemiology Cohort
Enterprise®	Building to Heal Enterprise Green Communities Certification + WELL Certification Health Action Plan Housing for Health Fund RxHome Fund Thome Aging Well Program
working cities challenge	Working Cities Challenge Working Communities Challenge
NLC National League of Cities — Cities Strong Together	Cities of Opportunity
Reinvestment Fund	Building Healthier, More Equitable Communities Invest Health
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Wellville	Wellville

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SCOPE AND GEOGRAPHIC DISTRIBUTION OF CONTRIBUTING INITIATIVES

This report synthesizes insights from $312M of community investment and systems change initiatives, spanning every state over a decade.

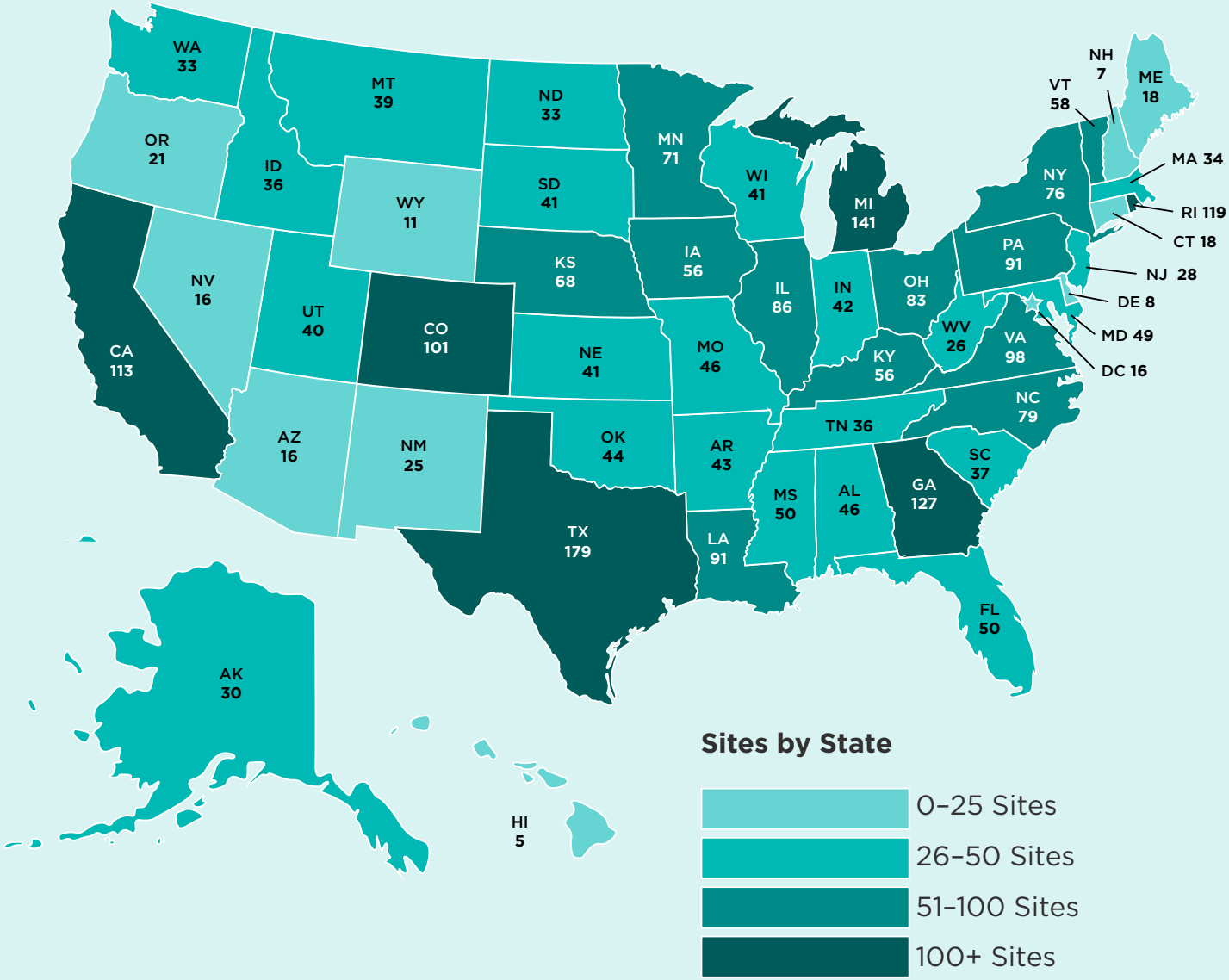
12 organizations

26 initiatives

2,352 sites*

$312 million

10 years 2015-2025



*Total number of sites is larger due to incomplete geographic data.

MODERN INTERMEDIARIES IN THIS MOMENT

AUTHOR: TIFFANY MANUEL

There has never been a more powerful moment to affirm, invest in, and elevate the wisdom of communities. We are living through a profound inflection point defined simultaneously by turbulence and unprecedented possibility. Across the country, communities are reaching for a future where belonging is non-negotiable, equity is foundational, and thriving is expected, rather than aspirational. At the center of that work, often operating in the background, stand a set of influential intermediary organizations that have become essential partners in making place-based transformation possible.

This report offers one of the first cross-organizational attempts to synthesize insights from intermediaries that together represent more than $312 million invested in communities over the last decade. Intermediary organizations often act as extenders of foundations, both distributing grant resources into communities, while more importantly bringing together diverse community partners (nonprofits, government agencies, health care, businesses, and community leaders) to the same table.

They bring together insights from multiple organizations operating across geographies, sectors, and scales; they act as an independent facilitator of coalitions as they align on shared values and priorities; they surface and share the practices that consistently produce better, more equitable outcomes; and they respond to an explicit call from funders, practitioners, and policy makers who have asked for a clearer understanding of what state-of-the-art intermediary practice looks like.

Taken together, these insights move us from a set of isolated stories and field practice toward a more coherent field narrative—one that is ready, perhaps for the first time, to articulate shared learnings, collective wisdom, and a vision for a future we are building together.

WHAT IS AN INTERMEDIARY—REALLY?

Most Americans would have trouble defining the term intermediary, yet most of their lives are shaped by them. Intermediaries show up in different guises and under many labels. They act as bridge builders and catalysts; they work through many operational forms, including community development, financial institutions, public health departments, foundations, and other types of nonprofit organizations. **At their core, intermediaries expand what is possible by aligning existing strengths of community coalitions and supporting them in ways they have historically been underinvested in, structurally constrained, or systematically overlooked.**

They connect people and organizations, helping communities share knowledge, grow leadership, and work in solidarity across places, sectors, and issues.

Intermediaries operate at the field level, sitting between grassroots communities and the broader organizational systems—governmental, philanthropic, corporate, and civic—that structure daily life. Unlike direct-service organizations, intermediaries do more than simply run programs or deliver single projects; they help

- **translate community wisdom** into institutional action,
- **convene leaders** who rarely have the time or bandwidth to come together to think creatively about solving the challenges their communities face,
- **bolster collaborations** that would otherwise stall out,
- **mobilize multisector resources** that no one entity could assemble alone,
- **catalyze systems change** that takes alignment of multiple organizations that even the most resourced organization couldn't take on by itself, and
- **expand learning across geographies** that would otherwise stay local.

In this sense, intermediaries add value by catalyzing change through resources, technical assistance and facilitating learning across communities, even when their roles appear to be in the background. They support organizers in energizing their movements, help to curate knowledge, are custodians of cross-place learning, and shared stewards of relationships that make sustained change possible.

Even though this role is often adaptive and guided by local contexts, the work of fellow stewards in communities across the country becomes bigger, sharper, more aligned, and more impactful when they do their work well.

This report showcases several high-capacity, national and regional intermediaries who are using their roles to advance thriving, place-based community investment as a means to address the urgency of this work for our collective future.

WHY LEVERAGING THE ROLE OF INTERMEDIARIES MATTERS NOW

Despite the central role that intermediary organizations play, their work is consistently under-documented, under-studied, and at times misunderstood. Intermediaries bring significant expertise (both professional and lived) and strategic capacity that has often been hidden in plain sight. As a result, the value proposition is not widely understood, in part because it has not always been explained clearly.

This moment could not be more critical for making that value proposition explicit, and for thinking rigorously about how to position intermediary work in a shifting economic and political landscape. As the nation and the communities that intermediaries serve grapple with compounding crises—affordability, public health, climate, racialized violence, democratic erosion—intermediaries are being called to deliver more impact, serve a broader range of places and populations, lift up community voice in new ways, and embrace operating practices that deeply respect and reinforce community self-determination. They are being called to bring the very best that our field has to offer, to codify the hallmarks of best practice, and to socialize those practices so that they become the expectation—not the exception—for how this work is carried out and understood.

The good news is that the field building of intermediaries is no longer in its infancy. Intermediary practice has grown more sophisticated, more coherent, and more evidence-informed over time. **Savvy intermediary organizations have undergone significant transformation over the last decade: they are more in tune with community aspirations and assets, more responsive to local voices, more conscious of power dynamics, more reflective of the communities they serve, and more committed to continuously refining their roles and practices.**

After decades of engagement, we now have a set of emerging practices that, when taken together, represent the hallmarks of high-impact intermediary work. Even a cursory look at the evaluations and examples on intermediary websites reveals the depth of this work and its profound effects in partnership with communities.

Yet knowing, on its own, is not enough. The patchwork of separate studies and organizational reports needs to be woven into a broader tapestry of field-level learning. This moment calls for a more deliberate articulation of what we have learned, a willingness to confront the assumptions that have constrained us, and a discipline of naming both the horizon we envision and the consequences of failing to act strategically, now.

Not all intermediaries approach the work the same way, nor are they equally effective. Still, most intermediaries have had to evolve their practices to better support communities, and they are no longer the solely transactional organizations of decades past (e.g., with narrow roles as fiduciaries or information hubs). Those at the epicenter of impact do not bring prepackaged solutions to communities; they arrive with a stance of respect for community wisdom, curiosity, and a willingness to share expertise. They also recognize the expertise that already exists locally and have the capacity to stand in complexity without rushing to oversimplified answers. They step forward in spaces where they can add real value and intentionally step back in spaces where they cannot. This awareness was not always easily learned, with missteps along the way that generated learning and grew humility. Both funders and intermediaries had to develop a level of comfort with ambiguity as communities worked through coalition alignments and role refinement. Over time, intermediaries adapted to prioritize ongoing collaborative initiative design with communities.

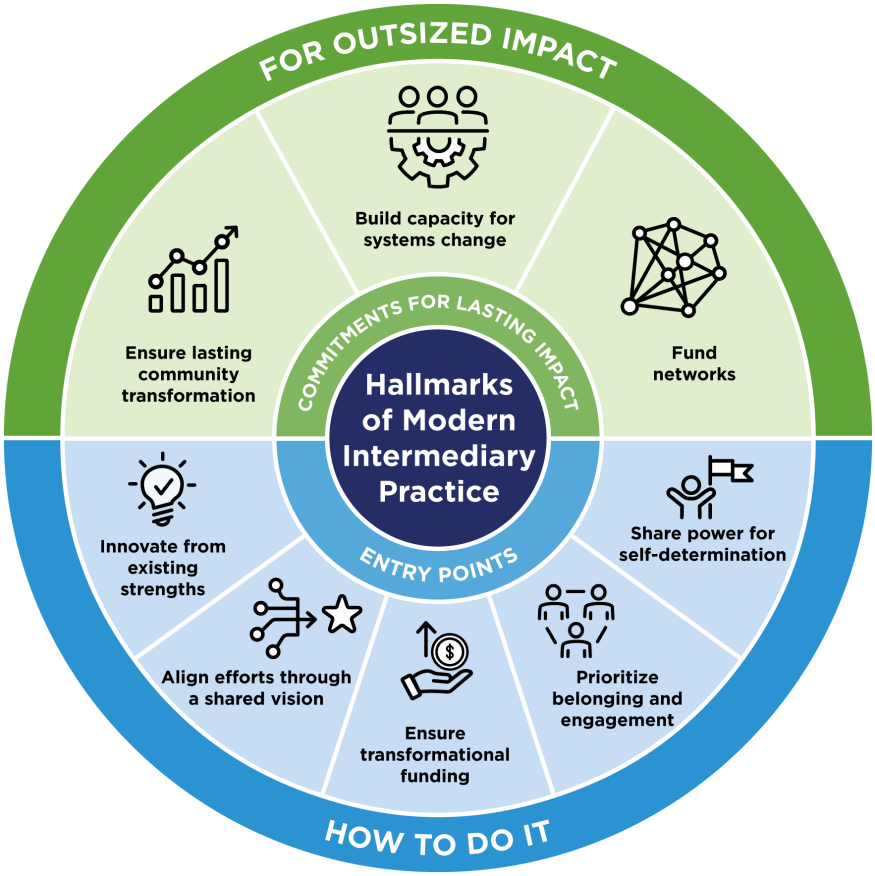
EMERGING HALLMARKS OF MODERN INTERMEDIARY PRACTICE

When intermediaries do their work well, they amplify local leadership and uplift community vision. The most effective intermediaries understand how to build and sustain mutual respect across deep divides, how to help move multisector coalitions toward a shared sense of purpose, and how to support democratized decision making so that residents help steer the systems that shape their lives. They have mapped the conditions that enable thriving communities and identified the patterns that recur in high-impact, place-based work. They bring nationwide insights and resources to amplify local work, and are starting to proactively choose to collaborate across intermediaries, make introductions in new places and build the field by lifting up each other's learnings.

In this moment, when the nation's collective future hangs in the balance, elevating, clarifying, and resourcing this role is urgent.

This report's core insight establishes that many of the practices long recommended by scholars, practitioners, and field leaders are now emerging as consistent hallmarks of effective intermediary practice (Figure 1). These are becoming the operational norms for intermediary organizations serious about long-term, equitable systems change.

Figure 1: Hallmarks of Modern Intermediary Practice



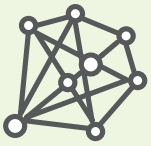
HALLMARKS OF MODERN INTERMEDIARY PRACTICE

COMMITMENTS FOR LASTING IMPACT:

Quick Links

Enable lasting, transformative community change rather than chasing short-term, easily measurable outputs.

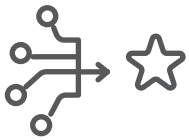
Build local capacity for systems change that endures beyond individual grants, leaders, or funders.



Fund and strengthen networks rather than isolated organizations, recognizing that people and communities live at the intersection of multiple systems.

IMPACTS COME TO LIFE THROUGH FIVE ENTRY POINTS:

Innovate from existing community strengths, rather than approaching communities as problems to be fixed.



Align multisector actors through shared vision, providing the structure and facilitation needed to move from fragmented effort to collective action.

Ensure transformational funding, using tools such as pooled funds or flexible capital that do not undercut the very outcomes they are meant to support.

Prioritize belonging as foundational to engagement, treating connection, voice, and trust not as ancillary, but as central to durable change.

Share and grow power for community self-determination, proactively reconfiguring who sits at the table, who decides, and how accountability is defined.

THE COST OF MISSING THE CONNECTIVE TISSUE OF INTERMEDIARY ORGANIZATIONS

Despite the learning generated by intermediaries, they now sit at the center of a divergence reshaping philanthropic and public investment strategies. On one side, funders are experiencing acute pressure: diminishing federal commitments, rising community needs, political volatility, and limited resources forcing painful trade-offs. The call for trust-based philanthropy and direct investment in local organizations is strong and justified, especially as communities face the urgency of current crises.

Yet, **when the pendulum swings toward direct investment alone, something essential is lost**. Communities need strong grassroots organizations and intermediaries alike to function as scaffolding for long-term connection, learning, alignment, and systems change. A strategy that neglects intermediaries risks eroding the progress the field has made and undermines the potential for scale, acceleration, and durable impact.

Findings from this study reveal a consistent truth: direct investment alone rarely produces the systems-level results that become possible when high-capacity intermediaries are part of the equation.

When intermediaries are left out of the picture, funders and communities lose several critical capacities:

- They lose **leverage and acceleration**, as investments remain bound by the insights and capacity of a single organization rather than being multiplied across a network.
- They lose the **ecosystem view**, the ability to see the relationships, gaps, tensions, and opportunities that exist between systems.
- They lose the **ability to calibrate investments to context**, to tailor strategies based on local political dynamics, cultural norms, institutional histories, and community priorities in ways only trusted intermediaries can.

In practical terms, this represents the difference between a $4.68 million investment stagnating, versus one that catalyzes nearly $100 million in follow-on investment. Massive multiplier effects like this one—from Reinvestment Fund's initiative on Building Healthier, More Equitable Communities—are increasingly common when an intermediary can coordinate, broker, and amplify the work. Playing this pivotal role also prepares communities for role evolution (the point at which decision making shifts to residing within communities themselves).

THE FUTURE PATHWAY: A NEW KIND OF INTERMEDIARY FOR A NEW KIND OF MOMENT

Contributors to this report include **12 nationwide and regional intermediaries** that have been informally meeting since 2021 as the Intermediary Learning Network (ILN) – dedicated to advancing their practice, collaborating, and creating opportunities for the communities they work with. We are a small part of a larger field of practice, yet have been contributers to many of the most ambitious place-based initiatives of the last decade. Led by entities spanning foundations, community development finance, nonprofit networks, and public sector organizations, our deep and varied experiences enable us to spot patterns that are often overlooked when studying individual initiatives alone. This report concentrates on signals that stand out across an unusually wide range of nationwide initiatives.

Intermediaries know the world is shifting faster than many institutions can keep pace. Intermediary organizations are not exempt from this reality and are being called to evolve their role and elevate beyond what has previously been considered “best practice.” The communities intermediaries touch deserve a deeper bench of tools, strategies, and civic muscle to ensure their work remains deeply participatory, capable of shifting systems, and centered on what connects us all, rather than simply being a new replacement for old programs that leave underlying structures intact.

In this sense, intermediaries are facing two tomorrows. In one, intermediaries continue to evolve, deepen their alignment with communities, and strengthen the connective tissue that supports long-term change. In the other, they allow the hard-won investments and insights of the last decade to fray and dissipate. Funders, communities, and intermediaries are tied together in the work of building a future where all people and places thrive together. This is a pressing opportunity to go even farther, faster, for more people.

The choice before us is not a binary between direct investment in community-based organizations or investment through intermediaries. Rather, it is whether we invest in intermediaries who are elevating their craft—strengthening their commitment to community realities, sharpening their practice, and building durable connective tissue—or view intermediaries primarily in more transactional, narrow functions like grant managers or pass-through entities. It is the difference between viewing intermediaries as fellow stewards and force multipliers who build will for courageous action, channel resources into overdue investments, and drive long-term change—or viewing them as impediments to action and community voice.

This report synthesizes a decade of field-level learning to illuminate how we choose the former and avoid the latter. It paints a new portrait of modern intermediaries infused with insights from continuous learning and adaptation; deep trust and long-term relationships with communities; partnerships that span agencies, sectors, and levels of influence; reflexivity and humility; a commitment to building, not extracting, community capacity; an ability to facilitate alignment across diverse actors; and a systems-change orientation grounded in equity, powered by relentless efforts to expand belonging and civic muscle.

Findings in this report show that if our goal is equitable systems change, we must continue to invest in intermediaries capable of embodying these hallmarks. Without strategic investment, we risk losing ground at the precise moment when communities need us to move in the opposite direction.

HOW TO USE THIS REPORT

This report is a synthesis of past experience and a provocation for the future. It is for all of us—funders, intermediary leaders, community partners, policy makers, evaluators, and students of the field—who play distinct roles in shaping the future of place-based work.

Use this report to provoke profound questions about how you work, where you invest, and what you assume. Use it to reshape funding strategies to align with what we know about lasting change. Use it to strengthen collaboration across organizations, sectors, and geographies. Use it to distinguish between older forms of intermediary work and the emerging practices that better reflect the demands of this moment. Use it to recalibrate what we fund and why, and to resource intermediaries, when appropriate, at the level that systems change requires.

Above all, use this report to establish that thriving communities are not an accident; they are built. They are built, in part, through sustained investment in the intermediaries who weave together people, practice, and possibility over time.

As you review the briefs that follow, we invite you to read them not simply as isolated innovations, but as evidence of a cohesive, evolving practice—one that, if understood and well-resourced, can build the future we all deserve.

Once again, this study underscores a consistent truth: direct investment in grassroots organizations is imperative, but rarely produces the systems-level results that become possible when high-capacity intermediaries are part of the equation. If the next generation of place-based initiatives embraces this enduring insight, we will be more likely to make strides toward a fair and thriving future.

FOR OUTSIZED IMPACT

COMMITMENTS FOR LASTING IMPACT

FOR OUTSIZED IMPACT

ENSURE LASTING COMMUNITY TRANSFORMATION

AUTHORS: MELISSA MONBOUQUETTE, JENNIFER FASSBENDER, LOURDES ACEVES, BECKY JOHNSON, REA PAÑARES, SOMAVA SAHA

Complex challenges require complex solutions, often beyond the scope of any one organization, sector, or funding source. While individual programs and projects can be effective ways to connect partners and pilot new ideas, sustained community change requires fundamental shifts in policies, practices, relationships, and funding. Across the Intermediary Learning Network (ILN), intermediaries work in ways that look beyond discrete projects or initiatives and focus on fostering transformational mindsets and actions that drive sustainable, long-term progress. **This includes supporting approaches that resonate across sectors and advance multiple goals at once. Intermediaries help communities shift focus—from discrete projects, single organizations and narrow solutions to achieving sustained, long-term community transformation—in several key ways, enabling deeper, more resilient change.**

FOSTERING A LONG-TERM, SYSTEMIC VISION

Intermediaries helped communities and institutions shift their perspectives from immediate, project-specific outcomes to embracing ambitious, long-term visions that address vital conditions for comprehensive well-being. This expansion of aspirations encouraged a "whole system" view, guiding strategies and investments toward enduring community thriving.

For instance, **Wellville** was a national nonprofit project (lasting from 2014-2024) that helped five U.S. communities shift from siloed, short-term agendas to a long-term shared vision—realizing that the vital conditions for health and well-being are built when communities choose to create a better future together. With Wellville as a catalyst, stakeholders aligned investments, shifted policy, and redesigned systems to produce lasting improvements in maternal health, early childhood, and economic opportunity.

Similarly, the **Ventures** project supported partners across six sites in articulating bold aspirations for a transformed region, recognizing that meaningful change could take decades. Through coaching, practical tools, and structured peer learning, partners developed a compelling, shared regional vision that anchored their value proposition and collaborative strategy. By reframing their work around long-term transformation and the vital conditions for health and well-being, Ventures enabled partners to move beyond a single-organization focus and aligned stakeholders around an ambitious, region-wide approach.

BUILDING ROBUST, INTERDEPENDENT NETWORKS

Intermediaries facilitate the development of cross-sector relationships and distributed leadership models, therefore distancing projects from siloed efforts and instead fostering mutual accountability among stakeholders. This approach recognizes that no entity can achieve complex, systemic change alone.

Under this principle, the **Hospital Systems in Transition** (HST) project encouraged health systems leaders to work interdependently with partners. Recognizing that organizations can not achieve health goals while operating alone, hospital leaders like those at West Virginia's Carilion Clinic used targeted networking strategies to understand relational dynamics and partnered with others around mental health and substance abuse initiatives. This strategy shifted Carilion's approach from working alone and with superficial engagements, to an aligned, interdependent collaboration that better defined who was best positioned to advance their initiatives.

The **California Accountable Communities for Health Initiative** (CACHI) supports locally-governed Accountable Communities for Health (ACHs) in shifting institutional planning from parallel processes to shared, community-accountable infrastructure. In Sonoma County, the ACH worked alongside public health and Medi-Cal managed care plans to align a community-led "Agenda for Action," grounded in lived experience, with the County's Community Health Assessment and Community Health Improvement Plan (CHA/CHIP). Rather than allowing institutional assessments and community priorities to proceed separately, partners invested in sustained convenings, clarified shared language and requirements, and reduced duplicative efforts across sectors. Over time, managed care plans moved from producing standalone needs assessments to actively participating in a coordinated local process, contributing data and aligning strategies. This shift reframed the CHA/CHIP from a compliance exercise into a shared governance platform, strengthening trust, transparency, and collective accountability across institutions and community partners.

ALIGNING FINANCIAL RESOURCES FOR SUSTAINED IMPACT

Intermediaries guide communities in rethinking their investment strategies, reallocating existing funds, and attracting new capital to support vital conditions and systemic change, rather than solely addressing immediate project needs. This ensures financial sustainability and long-term impact.

The BUILD Health Challenge® (BUILD) collaboratives embrace "Bold" goals that aspire to advance health and health equity through systemic changes. Identifying and establishing funding streams for their work, including leveraging a health care match to BUILD's grant funding, is a key strategy for lasting impact. In Camden, New Jersey (NJ), Roots to Prevention developed a purchasing agreement for an existing food-as-medicine program that enabled hospitals to purchase locally-grown produce instead of purchasing from a large national grocer. Supported by an urban gardening training program, this shift also created local jobs, embraced environmentally friendly procurement practices, and built support for converting blighted properties into productive green spaces.

The **Portfolio Design for Healthier Regions** (PDHR) project applied a stewardship-based portfolio design approach to help partners think and act differently to align financial resources for greater regional impact. Rather than dispersing funds across numerous disconnected initiatives, partners like 5 Healthy Towns in Michigan intentionally concentrated over $1.1 million on mental health as a "multisolver" strategy; one capable of addressing multiple, interrelated challenges simultaneously.

Guided by simple rules for stewardship and an intentional interdependence mindset, partners clarified their complementary roles and coordinated investments to proactively address isolation and depression. This focused, shared approach addressed community challenges around isolation and depression by strengthening collective impact and positioning the region to secure additional resources to expand behavioral health services over time.

CATALYZING POLICY AND PRACTICE TRANSFORMATION

Intermediaries focus on influencing changes in institutional policies, government programs, and organizational practices to create an enabling environment for equitable, long-term community development. This ensures that systemic barriers are addressed, moving beyond individual projects and into broader, structural change.

The **Building Healthier, More Equitable Communities** (BHEC) initiative played a meaningful role in shaping statewide programs and policies, shifting mindsets, and strengthening state-level relationships. BHEC contributed to the creation of the New Jersey Economic Development Authority's (NJEDA) Aspire program—a gap financing tool used to support development projects—by collecting feedback from the four city coalitions and aligning resources with local project needs. BHEC also influenced the New Jersey Department of Community Affairs (DCA) to adopt an intentional and holistic neighborhood investment approach. These shifts in ways of working demonstrate the changes made by state agencies in how they interact together and with local stakeholders. By convening state-level and local partners, BHEC enabled the deepening of relationships that supported more frequent exchanging of insights and feedback in ways that helped shape and shift state resource programs. This was not individual feedback making the difference, but rather collective feedback from multiple cities amplifying messaging and activating state agencies to take action.

Rhode to Equity (R2E) braided multiple streams of funding from the Executive Office of Health and Human Services, the Centers for Disease Control and Prevention through the Rhode Island Department of Health, and local philanthropy to create a two year collaborative that brought together Health Equity Zone leaders, community residents, primary care and ACO sites, and community health workers to approach population health through a balanced portfolio of upstream, midstream, downstream, and groundwater (root cause) strategies using Pathways to Population Health.

The intermediary role aligned both funding and change strategies into a cohesive, leveraged approach. This freed teams to identify where people were experiencing asthma flare-ups in the community and address them with appropriate medications. It also enabled teams to tackle upstream housing conditions and tenant rights policies needed to create humane living environments that support health and well-being. Together, these efforts contributed to a statewide, multi-agency roadmap that sustains an expanded role for community health workers as civic change agents, individuals who not only navigate broken systems but also help build bridges across them to create lasting, sustainable change.

On the other side of the country, **Cities of Opportunity** (CoO) supported Napa, California community leaders in integrating a Health in All Policies (HiAP) approach across all city policies, building on a City Council resolution declaring systemic racism a public health crisis. To operationalize this commitment, city staff conducted a comprehensive review of existing policies to identify where HiAP principles could be embedded. This work culminated in the integration of HiAP into the city's General Plan update, resulting in Public Health & Equity being adopted as a stand-alone element of the General Plan. In addition, a staff-led diversity, equity, and inclusion team was established to lead ongoing reviews of city policies through an equity lens, advancing long-term, structural policy change.

CONCLUSION

While traditional grant-funding mechanisms often look for quantifiable impact within a pre-determined timeline, sustainable transformation requires a longer-term vision and an understanding of the complex systems that drive health outcomes. This includes focusing on creating resilient relationships, supportive mental models, equitable policies, and replicable and sustainable funding streams. Few entities or projects are capable of shifting these systems alone.

Intermediaries across the ILN have experience fostering these transformations that, in turn, drive healthier communities. As BUILD documents in More Than The Sum—a report discussing BUILD's decade of investment in systems-change focused initiatives—the community-centered support that intermediaries provide generates a ripple effect of dynamic, responsive stakeholder networks backed by expanded public will and support. This ripple effect continues long after a discrete grant-funded project has ended.

Intentionality is key to this approach. This includes shifting grantmaking practices, resource allocation, success metrics, messaging, and timelines to create space for community partners to envision long-term community transformation and navigate the inherent complexities therein. On top of this, community partners must be given space to create enduring systems to support that vision. Community residents are already aware of the challenges and assets in their jurisdictions. They are also aware of the history and relationships that have led them to their current state, and what they need to thrive in the future. Intermediaries are key partners in making that vision a reality.

KEY IMPLICATIONS:

- Communities are being asked to do more with less. Systems thinking encourages greater resiliency and sustainability. Collaborative visioning supports the creation of multisolvers that carry broad appeal, backing their durability.
- Traditional grantmaking does not always support this type of complex effort. Intentional program design and support are key to success.
- Call to action: **Move from focusing on discrete projects and programs to supporting long-term systems change efforts.**

FOR OUTSIZED IMPACT

BUILD CAPACITY FOR SYSTEMS CHANGE

AUTHORS: LOURDES ACEVES, SARAH WELLER PEGNA, JENNIFER FASSBENDER, BECKY JOHNSON, REA PAÑARES, ROMI HALL

What if the most powerful results come from work that takes the longest to see? Across the Intermediary Learning Network (ILN), intermediaries are showing that systems change doesn't begin with a policy or a project—it begins with people and the capacity they build together over time. From housing and health to youth leadership and community investment, ILN partners are proving that doing the slow, hard-to-measure work of strengthening collaborative capacity and adaptive leadership produces the most durable, transformational results.

BUILDING COLLABORATIVE CAPACITY FOR LONG-TERM CHANGE

Across ILN initiatives, intermediaries provide capacity-building supports that enable communities to achieve durable systems change. Through structured learning environments, tailored coaching, flexible resources, and shared frameworks, intermediaries invest in the relationships, leadership skills, and collaborative infrastructure that allow local leaders to adapt, innovate, and sustain progress over time—well beyond any single project or grant. The **Cities of Opportunity** (CoO) initiative illustrates the value of this approach.

Since 2016, The National League of Cities' Health and Wellbeing team has supported over 70 cities through Mayors' Institutes and Action Cohorts designed to strengthen cities' capacity to advance health and equity. Rather than funding discrete interventions, CoO focused on strengthening how cities work by supporting cross-department alignment, strategic data use, and durable community engagement practices.

Cities reported clearer decision-making structures; stronger coordination across health, housing, and other systems; and greater confidence translating resident data into policy and investment. These capacity gains enabled policy and systems changes—such as new data governance practices, cross-department structures for addressing housing and health challenges, community-informed planning processes, and policy reforms ranging from zoning updates to traffic safety and environmental health initiatives—that persisted beyond the cohorts and positioned cities to leverage future funding more effectively.

Similarly, the **Center for Community Investment** (CCI) built capacity for community investment leaders to think and act systemically. CCI's coaching and convenings approach grounded teams in adaptive leadership, racial equity, and the Capital Absorption Framework—helping partners from Coachella Valley to Miami understand how to attract and deploy capital for equitable development. CCI also supported teams in developing the skills and relationships needed to work across differences, evolve strategies over time, and lead collectively. The result: teams developed shared priorities among diverse collaborators, identified pipelines of affordable housing projects and introduced new equity investment tools to support teams to enable their environments—demonstrating how strategic capacity building can move markets towards impact and equity.

TAILORED SUPPORT THAT MEETS COMMUNITIES WHERE THEY ARE

Effective capacity-building is not one-size-fits-all. ILN intermediaries tailor their support to community context, meeting communities where they are, and leaning in on the strengths already in place.

In the **California Accountable Communities for Health Initiative** (CACHI), capacity-building evolved alongside the maturation of the ACH field. Early in the initiative, CACHI focused on establishing a shared foundation: providing structured technical assistance on the ACH model, collective impact principles, and collaborative governance delivered through regular webinars, frameworks, and one-on-one coaching. As sites strengthened their core infrastructure, CACHI adapted its approach, shifting from primarily delivering content to cultivating adaptive leadership and peer exchange. Technical assistance became more tailored to local context (e.g. supporting leadership transitions, sustainability

planning, and governance design) while simultaneously creating spaces for cross-site learning. Today, CACHI's Peer Learning Communities are shaped by ACH-identified priorities, enabling collaboratives to exchange tools, troubleshoot challenges, and build collective capacity. By evolving from foundational training to network-driven learning, CACHI has strengthened collaborative muscle across sites and supported the long-term systems change necessary for durable impact.

TOOLS, FRAMEWORKS, AND LEARNING NETWORKS THAT ENABLE ADAPTIVE LEADERSHIP

ILN intermediaries use structured tools and learning collaboratives to help communities build the capacity to lead adaptively and translate investment into lasting change. Across initiatives, **WE in the World** uses tools to help teams self-reflect on the effectiveness and equity of their change processes as a way of advancing more rooted, effective, and structural change. This aligns with a general belief that to change the world, we have to change ourselves. Over the years, WE in the World developed and tested a range of tools. These include the ABC's of Changing Ourselves. This includes the Assessment for Advancing Community Transformation (AACT), which measures the effectiveness of community collaboration (used in RISE), BEACON for Equity, designed to support more equitable collaboration (used in ARISE), and the Compass, which helps health departments, businesses, faith communities, and healthcare organizations assess and align their core operations to drive more meaningful change (used in Rhode to Equity and ARISE). These tools provide teams with ways to reflect, assess progress, and set goals to change themselves, which ultimately enables them to advance more complex system change. Frameworks like the vital conditions, WIN Measures and Pathways to Population Health Equity complement these with practical approaches to change the world.

The **Build Healthy Places Network** (BHPN) develops tools to support multisector partnerships, such as the Playbook for New Rural Health Partnership Models of Investment: an action-oriented guide for healthcare organizations to engage with rural development partners on the drivers of health. BHPN piloted the Playbook to support local policy changes and to develop multisector health and housing projects partnerships in Pierce & St. Croix counties, Wisconsin. The Playbook also advanced community-centered engagement and local policy shifts for the Wild, Wonderful & Healthy West Virginia initiative, designed by the Center for Rural Health. By embedding frameworks across the field, intermediaries helped practitioners shift from transactional to transformational approaches—building capacity not only to participate in systems, but to reshape them.

FLEXIBLE FUNDING AND TRUST AS ENABLERS OF GROWTH

Capacity-building requires time and trust—both of which are made possible through flexible resources. Initiatives like **Building Healthier, More Equitable Communities** (BHEC) and **Connect Capital** (CC) demonstrate that flexible operating funds for coordinators, consultants, and convenings allow teams to remain responsive to emerging needs. In Asbury Park, BHEC funding allowed Interfaith Neighbors to hire a coordinator whose leadership secured new wellness and food justice resources for residents. The coordinator drove regional impact by developing a Food Council to institutionalize collaborative approaches to improve the local food system. These results stemmed from investments in people and processes—not just projects.

Similarly, the **Housing Solutions Collaborative** supported local leaders in understanding the law, policy process, peer learning strategies, and the cross-sector collaboration required to lead policy wins, such as the approval of a 10-unit affordable housing project coupled with county support for 300 additional units. This work began by building shared understanding and skill, which produced concrete outcomes.

Communities RISE Together leveraged its intermediary role, in partnership with fiscal sponsors (Public Health Institute, Heluna Health, and the CDC Foundation), to support communities closest to the challenges—helping them to not only secure resources, but also be entrusted with the power to drive solutions. By using their power to provide upfront resources, and by challenging the narrative that those with lived experience couldn't be trusted, Communities RISE together was able to shift $30 million toward communities closest to the problems who held brilliant solutions.

These communities reimagined pandemic response, not as fighting a virus, but about preserving love (Black and Indigenous communities, led by chromatic.black and National Indian Health Board respectively), preserving cultural memory, and preventing truth decay. These communities created alternative safe reporting systems that remain accountable to the community.

Finally, the **National League of Cities** (NLC) supports cities in building the capacity to strengthen trust as part of long-term systems change. Through its Policy and Systems Change Compass—a practical, equity-centered framework—NLC helps local leaders strengthen transparency, community engagement, and participatory policymaking. The Compass equips cities with the skills and structures needed to involve residents meaningfully across the policy lifecycle, helping to demystify how policy is made, center community voice, and create the conditions for stronger relationships between residents and local government.

By strengthening local capacity for participatory policymaking, intermediaries help cities move beyond transactional engagement and toward shared ownership of solutions. Over time, this approach has enabled communities to navigate difficult trade-offs, respond effectively to resident priorities, and lay the groundwork for more durable, community-centered systems change.

CONCLUSION

Across the ILN, intermediaries demonstrate that building capacity for systems change is both an art and a science. Through coaching, frameworks, funding, and facilitation, intermediaries strengthen communities' ability to collaborate, adapt, and lead—creating the conditions for lasting transformation.

These examples illustrate that outcomes such as new housing, improved health, and strengthened equity infrastructures are possible because intermediaries invest in the slow, relational work of capacity building. By aligning their supports with community context, intermediaries enable leaders to move beyond short-term wins and toward sustained systems change.

TO DEEPEN AND EXPAND THIS IMPACT:

- **Intermediaries** are refining how they tailor capacity-building supports to the unique readiness and aspirations of each community, balancing structure with flexibility.
- **Funders and policymakers** accelerate systems change by investing in this long-term, relationship-based capacity building—providing flexible, multi-year resources that fund collaboration, leadership, and learning, not just implementation.

FOR OUTSIZED IMPACT

FUND NETWORKS

AUTHORS: JENNIFER FASSBENDER, REA PAÑARES, SOMAVA SAHA

Networks are made to connect people, giving individuals the ability to expedite learning and strategies beyond the network itself. By fostering broader network connections, intermediaries actively facilitate the expansion of diverse networks of individuals and organizations, encouraging collaborative communication for cross-sector dialogue and shared learning. This dismantles silos, increases mutual understanding, and creates a collective sense of purpose, enhancing social and cultural capital and the ability to act collectively.

Intermediaries may develop networks that are the ongoing recipients of a program; build networks that consist of multiple cohorts experiencing the same program; or create networks of cohorts experiencing different programs, but come together under one unifying platform. **Regardless of how a network is built, it is the ongoing connection that builds trust, incubates learning, and catalyzes opportunity.** Intermediaries consistently support network-building within and across communities, as seen through the development and curation of the network itself, as well as the exchange of knowledge building. Network-building activities across intermediaries have led to:

- More trusting relationships and increased local collaboration,
- An ability to create solutions and learn from success elsewhere, and
- Access to a wider array of resources in support of establishing the necessary conditions in places for healthier, thriving, and more equitable communities.

CULTIVATION OF NETWORKS CATALYZES RESOURCES AND LEARNING ACROSS INITIATIVES

Strengthening cross-sector collaboration, building knowledge between communities, and sustaining connections across priority areas is challenging without a central, convening entity. Leaders from healthcare, public health, local government, community development, finance/philanthropy, community-based nonprofits, resident-led organizations, and corporate sectors add value when they partner to advance shared priorities. Although coalition building can occur locally and in cities with the resources available to coordinate connections, it is often a capacity strain in smaller places. These regions may gain value from a regional or national partner as the connective tissue. This is especially true when you consider the effort and resources it takes smaller communities to connect to similar-sized places across geographies.

FACILITATING CROSS-SECTOR COLLABORATIONS AND PARTNERSHIPS

Intermediary Learning Network (ILN) initiatives convened diverse organizations and stakeholders from different sectors to establish new partnerships and deepen existing ones, fostering a coordinated approach to community challenges. This often involved creating platforms for dialogue and shared action, breaking down traditional silos between entities that previously operated independently.

One of the long-standing networks was the **Invest Health** initiative, which cultivated a cohort of 50 small to midsized cities across 10 years. This network building made key collaboration possible, improving neighborhood conditions through policy and practice shifts, and built environment projects that advanced equity, health and wellbeing.

Locally, the Roseville (CA) coalition created and sustained a strong multi-sector team throughout the initiative, building the trust needed to expedite local action during the COVID-19 pandemic. This centered around food access, institutionalizing community-driven development to improve the social drivers of health, and leveraging an initial $60,000 grant into over $12 million in municipal funding. The team also regularly drew on the national network of cities to access collaboration grants, conduct site visits, and share technical assistance expertise in advancing their Weber Park neighborhood project.

Network cultivation can also help drive collective action. In a New Jersey **Building Healthier, More Equitable Communities** (BHEC) initiative, an intermediary facilitated collaboration between four city teams to push for a public comment that influenced a state-level resource program with multi-unit housing construction projects. This change saved developers' time and resources, meaning they did not have to rework the project designs to be eligible for tax credits. **As a network, the four cities leveraged this $4.68 million initial investment into $98 million—a 21-fold multiplier.** The initiative significantly strengthened local community development systems by fostering collaborative practices and breaking down traditional silos among nonprofits, academic institutions, hospitals, and government agencies. This led to improved coordination among state agencies, new partnerships (e.g., Interfaith Neighbors with Rutgers University for food systems assessment), and shared resources, which collectively enhanced community well-being. Organizations in participating cities, like Paterson, New Jersey, forged new partnerships across traditional silos, enabling more effective collaboration to address critical community needs, such as a core group of nonprofits jointly applying for a food deserts study.

Build Healthy Places Network (BHPN) demonstrated its convening role by creating spaces for cross-sector thought leadership and innovation. A prime example is the organization's partnership with the National Association of Chronic Disease Directors to spearhead a thought leader roundtable. The resulting primer serves as a powerful tool catalyzing stronger engagement between public health and community development to advance health through community investment.

Housing Solutions Collaborative strengthened advocacy skills, leading to a deepened collaboration with non-profit partners and the approval of a 10-unit affordable housing project. In the past year, an additional 300 affordable housing units were built, partly due to county support spurred by the cohort process.

The cohort enabled participants to identify and advance new housing policies. As one participant from a team shared, they were inspired by a workforce housing fund model from a similar community and are now advocating for a comparable "pooled funding concept" in their own region. They use the example "endlessly... to show like, hey, look what's possible."

Communities RISE Together (RISE) built a strategic reach and trust network to shift the flow of resources toward communities experiencing the greatest barriers to health and wealth. By bringing together an unprecedented, multisector grassroots to grasstops collective, spanning Black, Indigenous, Latinx, Asian-Pacific Islander, older adult and migrant communities, this network could return trusted information within 2 hours and mobilize multisector responses. By trusting what the grassroots could do, RISE created the conditions for abundance.

CONVENING AND CULTIVATING PEER-TO-PEER LEARNING AND KNOWLEDGE EXCHANGE

ILN innovators intentionally designed opportunities for participants to share experiences, learn from successes and challenges, and exchange knowledge. These platforms, whether within a city, at national convenings or affinity groups, fostered a learning community that accelerated the adoption of effective strategies across different locations.

Invest Health was a "learning community approach" through national and small "pod" convenings fostering cross-team connections and knowledge exchange. 40% of members report implementing programs or policies as a result of learning from peers. Master classes, where cities "pitched" projects to panels of experts and peers, were particularly valued for clarifying goals and improving communication. Missoula (MT) was the little city that could—tackling a community first approach that fundamentally changed how the city (and county) developed and enforced community development policies aimed to ensure they enabled equity and health. The team worked with partners across the region to host a Justice, Equity, Diversity, and Inclusion (JEDI) Summit, which overlapped with a county-wide training on how to embody JEDI principles across local government. With a robust community organizing infrastructure and strong municipal and nonprofit support, they tackled a growing mental health, housing and drug abuse crisis. By connecting to the national network, the team later hosted a Housing for All Summit with 12 other Invest Health cities. The teams experienced Missoula City Club, which is an inclusive community engagement model bringing forward topics that residents ask to learn more about and then develop solutions to advance, such as affordability and accessibility of housing in their community.

BHEC organized numerous cross-site learning activities, including webinars, virtual meetings, and four in-person gatherings in participating cities, allowing teams to share experiences and insights. Affinity groups, such as the consistently active food affinity group, also fostered valuable relationship building and knowledge exchange.

The BHEC initiative meaningfully shaped and refined statewide programs and policies by shifting mindsets and strengthening relationships at the state level, contributing to the creation of the New Jersey Economic Development Authority's (NJEDA) Aspire program and influencing the New Jersey Department of Community Affairs (DCA) to adopt a more holistic neighborhood investment approach. This was supported by aligning cities on common community development issues, such as coordinated testimony to the governor advocating for the allocation of American Rescue Plan State Fiscal Recovery Funds.

Activating Relationships in Illinois for Systemic Equity (ARISE) convened 18 rural and suburban coalitions and 12 health departments in a learning and action collaborative designed to build relationships with residents experiencing disparities, and to address the root causes driving community vulnerability. Through transformational Community Health Improvement Leadership Academies (CHILAs), groups spanning vast political, racial, economic, and urban-rural divides began to develop a shared approach to the problem. Through frameworks like Pathways to Population Health Equity and Health Equity Action Labs (HEALs), a 90-day asset-based community development approach, these groups found that they could align resources to make substantial progress to advance investment and policy to address upstream and root causes of poor health and well-being. These types of relationships and collaborations have continued long after funding concluded for this two-year initiative. The intermediary role created the conditions for a third space that broke past polarizing narratives into shared power to change policies. ARISE laid the groundwork for Community Equity Zones to be advanced in Illinois in the two years following.

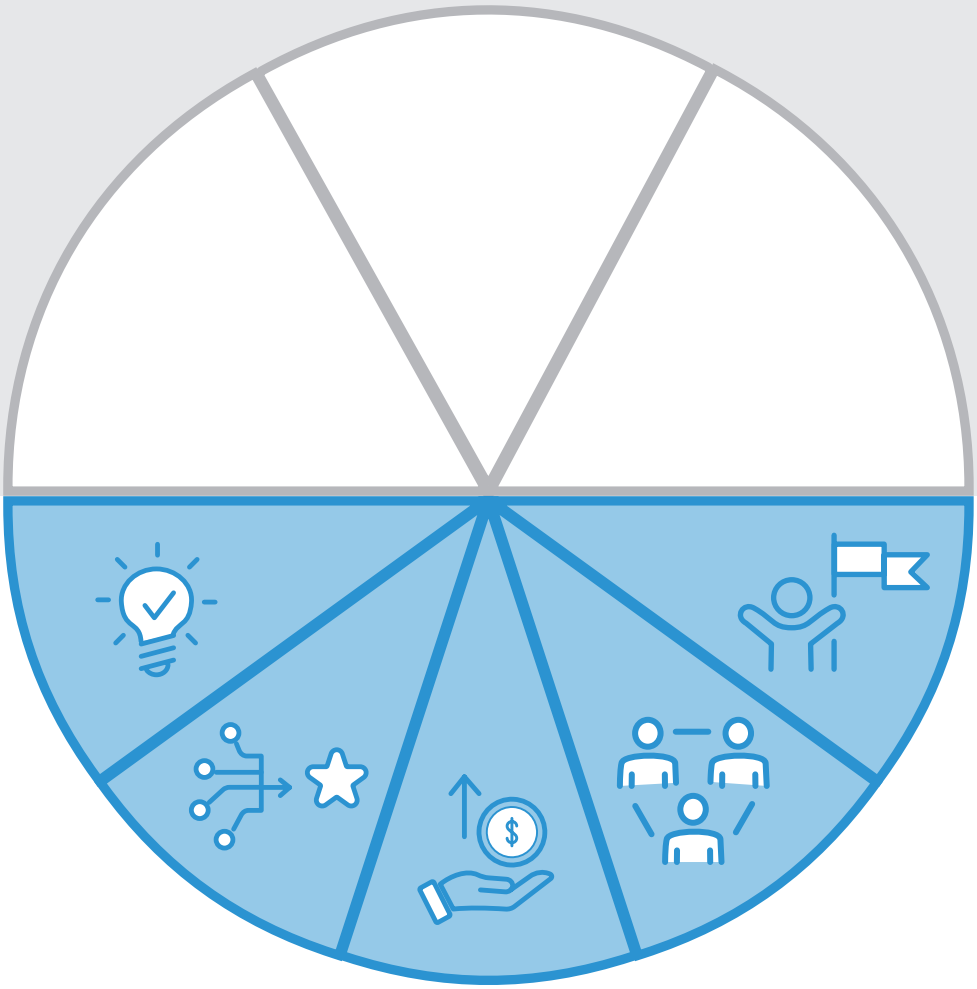
In the **Portfolio Design for Healthier Regions** (PDHR) project, participants in 5 Healthy Towns learned that developing simple rules for shared stewardship builds collective understanding across a network of organizations and supports shifts in strategies and investments to expand vital conditions. These simple rules helped partners shift from siloed approaches to addressing community mental health as a cohesive group, influencing training sessions and a significant grant for behavioral health services.

Wellville hosted annual Wellville Gatherings, which were 3-day convenings in one of their communities, providing an unstructured setting for residents and organization members from all 5 Wellville communities to share openly, reflect, and learn from each other. These gatherings facilitated the launch of new initiatives, increased investment, strengthened connections, and developed local leaders in the participating communities.

The **California Accountable Communities for Health Initiative** (CACHI) cultivated a statewide network of Accountable Communities for Health (ACHs), evolving its structure to deepen peer learning and cross-site exchange. Early in the initiative, CACHI convened regular webinars and affinity groups organized around state health priorities and policy alignment. As the network matured, CACHI asked sites how they wanted to organize peer learning and heard a desire for sustained engagement with similar communities and an exposure to diverse peers facing different challenges. In response, CACHI developed multiple configurations for exchange—including state policy affinity groups, regional clusters, and now Peer Learning Communities organized around ACH-identified topics such as workforce development, youth well-being, and CalAIM implementation. These smaller, recurring cohorts provide consistent touchpoints for troubleshooting, tool sharing, and candid discussion, while broader network convenings maintain cross pollination across geographies and models. This layered approach strengthens connectivity across ACHs, creating the network infrastructure necessary to coordinate strategy, share resources, and act collectively when opportunities arise.

CONCLUSION

While strengthening local cross-sector coalitions remains the building block of systems change, weaving connections across a defined network of places catalyzes learning and helps communities discover what efforts work elsewhere. Becoming an issue area's thought leader creates opportunities for the team, making the benefits of standing out as an expert to be circular, as opposed to one sided. This makes the mixing of cities with varying-level capacities less consequential. Local trust building can be paramount to an effective and sustained coalition, and leads to priority alignment that catalyzes action around changes to policies, programs, and practices. At the multi-site network level, those working to advance equity may experience arduous barriers. So, the alignment of a network can provide support, validation, connection, and resiliency to those needing self care to refocus. The power of networks can also lead to relatively small amounts of grant funds being leveraged to attract major investments. While strengthening local cross-sector networks can prove powerful in achieving aligned, community-driven priorities, **intermediaries' centralized programmatic support and multi-site connective tissue builds lasting infrastructure and substantial leverage that relieves pressure on individual organizations or coalitions**.



HOW TO DO IT

ENTRY POINTS

HOW TO DO IT

INNOVATE FROM EXISTING STRENGTHS

AUTHORS: BECKY JOHNSON, SARAH WELLER PEGNA, RICK BRUSH, LOURDES ACEVES

Across the country, communities are leading efforts to advance health, equity, and well-being, often in the face of complex and entrenched systems. These systems—financial, institutional, legal, health care, public health, and communication—are frequently structured to preserve the status quo, which perpetuates ongoing inequities. Despite these entrenched systems, there is promise: **communities possess deep expertise, lived experience, and innovative strategies that can accelerate change and transform these systems**.

Organizations and collaboratives leading this work must ensure their efforts are grounded in community wisdom. To do so, local changemakers need the ability to:

- **Center community priorities** by listening, responding to real needs, and elevating lived experience as the foundation for action.
- **Build authentic partnerships** that foster trust, shared ownership, and collective problem-solving across residents, organizations, and institutions.
- **Understand systems**—including financial, institutional, legal, and political—and work in partnership with communities to develop strategies that advance change.
- **Seize windows of opportunity to translate community priorities** into credible, actionable changes that resonate with decision makers, funders, and policymakers.
- **Craft and share compelling narratives** that communicate the urgency and possibility of transformation, inspiring broad alignment and support.
- **Mobilize sustainable resources**—financial, institutional, legal, and political—to sustain long-term impact and scale what works.

However, because of the complexity of our systems which are not always transparent or intuitive, putting these skills into action is not always easy. Progress can be slowed by limited capacity, unclear pathways for action, lack of resources, and difficulty navigating the needs of multiple partners.

Learning collaboratives, led by intermediary organizations such as those reviewed in this brief, are created in direct response to inquisitions from the field. They serve as catalysts, helping communities navigate barriers and leverage existing strengths to achieve greater impact. When thoughtfully designed with clear goals, facilitated with intention, grounded in understanding of the needs of participating organizations and communities, and responsive to participants' needs, they deliver powerful and lasting results.

Across evaluations of nearly a dozen collaboratives, we have found that impact is accelerated through three key areas of action:

1. Leveraging existing collaborative structures and relationships,
2. Building on established community plans and priorities, and
3. Mobilizing pre-existing financial mechanisms and resource pools

This brief explores how these strategies accelerate innovation and ensure that change efforts are rooted in the three essential ingredients for lasting impact: local context, trust, and momentum.

LEVERAGING EXISTING COLLABORATIVE STRUCTURES AND RELATIONSHIPS

Intermediaries often begin by utilizing pre-existing, multi-sector partnerships. These networks provide fertile ground for deeper alignment and collective action without the need to build new structures. This is shown in several examples below:

Wellville was a 10-year (2014–2024) national nonprofit project that supported five U.S. communities in advancing long-term, equitable community well-being. Acting as a trusted catalyst, Wellville helped communities see persistent challenges in new ways and connect across silos. This approach demonstrated how intermediaries can accelerate transformation by strengthening existing collaboration rather than imposing new structures.

> ***"We started out at a bit of a stalemate around affordable housing. But we now have a process and platform for building alignment over time."***
>
> *— Oriana Lopez, Former Urban Resilience Coordinator, Austin, TX*

In Muskegon County, MI, this approach took shape through the Livability Lab, an annual, community-led process where residents, organizations, and institutions use local data to form action teams and achieve measurable "small wins" in 100-day cycles. By tapping into a strong existing network of relationships, Livability Lab has mobilized hundreds of participants to address issues from child care access to maternal health, launching initiatives such as How YOU Birth Doulas focused on inequities in prenatal and postnatal care among Black mothers, and the Blueprint Project, a community-led economic hub. Continued investment through The BUILD Health Challenge® (BUILD), shows how aligned intermediaries can co-invest to sustain locally led work over time.

Through the **California Accountable Communities for Health Initiative** (CACHI), some existing place-based collaboratives were strengthened through flexible funding and backbone support. In San José, the East San José Peace Partnership (ESJPP) was a long-standing multi-sector violence prevention collaborative that convened community-based organizations, city agencies, and systems leaders prior to CACHI investment. Rather than creating a new coalition, CACHI funding enabled the partnership to formalize coordination, clarify shared roles, and deepen cross-sector alignment. With dedicated backbone capacity and more structured governance, partners sustained consistent engagement, reduced silos, and advanced a unified, community-driven violence prevention strategy. By reinforcing an existing foundation of trust and collaboration, this support accelerated the partnership's ability to act collectively with greater clarity and impact.

This example shows that existing partnerships are powerful springboards for change. Intermediaries can accelerate transformation by deepening trust and aligning efforts across sectors. Funders and practitioners should prioritize communities and collaboratives that have multiple sectors represented, invest in strengthening those networks, and ensure that the funded communities have the support they need to maximize their local infrastructure.

BUILDING ON ESTABLISHED COMMUNITY PLANS AND PRIORITIES

Strategic alignment with existing community plans, citywide policies and resolutions, and documented local priorities allows intermediaries to align work within a vetted and understood local context. This approach ensures relevance, fosters stakeholder buy-in, and provides a clear roadmap for action. For example:

The **Cities of Opportunity** (CoO) initiative supports city leaders and their partners in building the core municipal capacities needed for sustained systems transformation for health, equity, and well-being.

Operating on the principle of meeting cities where they are, CoO provides cities with dedicated time, space, and structured guidance to reflect on existing priorities, identify gaps, and catalyze action. Through this expert guidance, along with the frameworks and tools provided by National League of Cities, cities zeroed in on existing strategies and leveraged these existing efforts for greater, more sustainable impacts. As result, in Austin, TX, CoO supported the first-ever equity assessment of the Imagine Austin comprehensive plan; strengthening interdepartmental collaboration and ensuring equity is centered in future planning. In East Point, GA, CoO helped align departmental goals with the city's strategic equity plan and embedded health equity indicators across operations.

Housing Solutions Collaborative (HSC) convened eight cross-sector teams to advance housing equity. Through peer learning, technical assistance, and capacity-building focused on understanding and using the tools of law and policy, HSC supported teams in developing equity-informed strategies for affordable housing tax incentives, emergency rental assistance, anti-displacement policies, and racial equity in housing systems. Participants reported increased confidence, collaboration, and policy innovation. Two communities revised ordinances and created policies, leading to 300 new affordable housing units. ChangeLab's support helped teams educate stakeholders, advocate for policy change, and implement solutions that were legally sound and community-driven.

These examples show that aligning with existing plans ensures relevance and accelerates buy in. Intermediaries help communities reflect, refine, and activate their priorities. Funders should support efforts that build on local planning processes and elevate equity within them.

MOBILIZING PRE-EXISTING FINANCIAL MECHANISMS AND RESOURCE POOLS

Intermediaries identify and leverage existing financial resources, funding mechanisms, and institutional capacities present within communities or partner organizations. By directing these resources toward community priorities, they scale impact without needing to create new funding structures.

For example, **Accelerating Investments for Healthy Communities** (AIHC) sought to help participating hospitals and health systems deepen their investments in affordable housing and advance policies that foster equitable housing solutions. Over two phases of work, AIHC supported institutions in building the internal capacity, cross-sector relationships, and strategic alignment needed to achieve this goal.

In Phase I, AICH worked with cross-disciplinary teams from eight participating hospitals and health systems to understand their local contexts and strategies. In Phase II, six hospitals and health systems built on Phase I's foundations to advance their identified strategies. They focused on expanding beyond healthcare to convene community stakeholders supporting a pipeline of projects targeting housing. A key objective of Phase II was to foster long-term, systemic changes in how communities approach and sustain investment in equitable housing.

To support cities in Phase II, AICH provided intensive coaching to healthcare leads and their partners, facilitated a series of in-person and virtual convenings, and coordinated with consultants to deliver tailored technical assistance to each site. Additionally, AICH deployed two types of funding: accelerator funds to advance pipeline development and capital funds to catalyze investment in local projects.

Through 68 projects in 27 states and territories, The **BUILD Health Challenge®** (BUILD) is helping communities transform health and wellness through bold, collaborative action. As part of this work, communities are discovering new funding models to cover needed services. For example, the Healthy Together Medical-Legal Partnership for Improving Asthma in Southeast Washington, DC used data to demonstrate cost savings associated with its medical-legal partnership program, leading to an innovative partnership with a local insurer to share costs for legal interventions in health-harming housing issues. As a result, they have been able to help children with asthma and saved $10,000 in healthcare costs within the first 18 months.

These efforts underscore the critical role of intermediaries in not only guiding strategic planning and capacity building, but also in driving local innovation by unlocking and mobilizing existing financial mechanisms. By serving as connectors between funding sources and community-led initiatives, intermediaries translate broad investment strategies into tangible, place-based outcomes.

CONCLUSION: INNOVATING FROM WITHIN

Intermediaries play a vital role in accelerating the change that communities already drive. Rather than reinventing solutions, they respond to what leaders across the country are asking for, including (but not limited to) creating spaces that honor local expertise, fostering cross-jurisdictional learning, supporting the development of actionable strategies, and bringing new tools to accelerate action. By facilitating environments where leaders can exchange ideas, refine plans, access resources, and strengthen their skill sets, intermediaries help community leaders surface solutions that might otherwise take years to emerge.

Communities consistently call for peer-learning models that build on existing strengths, deepen skill sets, share practical strategies, and foster mutual support by trusted intermediaries. These entities honor the needs of changemakers, meet them where they are, and provide training and capacity building on highly technical subjects such as judicial, financial, and governmental processes.

This consistent demand, paired with the repeated impact of well-designed technical assistance and peer-learning models, reinforces that this approach remains a powerful tool, especially when grounded in community context and supported with the right structure, facilitation, and investment. As part of this, funders should consider investing in intermediaries that can create peer learning spaces and provide tailored technical support to:

- Guide communities in **fostering more robust, cross-sector collaboratives** to drive systems change.
- Support communities in **developing innovative funding models** (that move beyond single funding streams) to employ multiple strategies for improving financial sustainability, resilience, and impact.
- **Access legal technical assistance**, as it is estimated that one-third of the US exist in legal deserts and that many localities are under-resourced. This means they must out-contract legal support, significantly slowing innovation and change.
- Identify and implement **shared governance and operational models** that are rooted in a shared vision, accountability, and collective action.
- **Diffuse innovation across communities** to ensure the amplification and replication of best practices.

Innovation flourishes when communities build from what already exists—their relationships, plans, and financial foundations. Intermediaries like those in the ILN ecosystem amplify these strengths, creating spaces for peer learning, cross-sector problem-solving, and practical action that lead to sustained, community-rooted transformation.

HOW TO DO IT

ALIGN EFFORTS ACROSS SECTORS THROUGH A UNIFYING SHARED VISION

AUTHORS: COLLEEN FLYNN, REA PAÑARES

Effective systems change hinges on the ability of diverse sectors to unite under a common vision, transforming fragmented efforts into a cohesive force for community well-being. **Intermediaries play a catalytic role in cultivating this alignment, building trust, and strengthening civic capacity to drive sustainable progress.** They are the essential connectors, conveners, and facilitators that enable communities to move beyond discrete projects towards lasting transformation, ensuring that short-term actions contribute to sustainable long-term progress.

CO-CREATING AN AMBITIOUS, SHARED "NORTH STAR" VISION AND COMMON LANGUAGE

Intermediaries play a crucial role in fostering a shared "North Star" vision among diverse stakeholders, moving beyond individual organizational interests to establish a collective understanding of systemic outcomes.

A powerful illustration comes from the **Hospital Systems in Transition** (HST) project, where hospital systems, like Jefferson Health in Philadelphia, shift their mindset towards "Thriving together—no exceptions" as a unifying expectation for equitable well-being. This new mindset led Jefferson Health to explicitly frame their mission around vital conditions, such as belonging and civic muscle. This visionary shift led Jefferson Health to reframe its philanthropic approach, channeling over $70 million to community-driven work focused on vital conditions for health equity, rather than expanding inpatient care alone.

Wellville's approach empowered communities to transcend immediate self-interest, fostering a deeper understanding of their collective aspirations. This transformative shift enabled them to successfully launch community-wide initiatives, reshape policies, and fundamentally alter local systems. The results were more equitable outcomes in critical areas such as maternal health, early childhood development, and economic opportunity, demonstrating the profound impact of aligning efforts under a shared vision for long-term well-being.

As an intermediary, the **Build Healthy Places Network** (BHPN) strategically develops tools and resources that address needs expressed by practitioners in the field. One example is their factsheet and webinar on navigating difficult conversations, which equipped participants with effective strategies for fostering cross-sector collaboration, a sense of belonging, and collective action through value-based conversations. A subsequent survey revealed that 89% of participants reported increased capacity to facilitate these crucial value-based conversations across sectors, demonstrating how responsive, practitioner-informed resources can translate into strengthened field capacity.

ESTABLISHING INCLUSIVE GOVERNANCE AND DISTRIBUTED LEADERSHIP

Intermediaries are instrumental in designing governance structures and fostering distributed leadership models that deliberately incorporate diverse voices, including those of overlooked community members. This ensures broad ownership and accountability for a shared vision, moving away from centralized control and toward interdependence, thereby strengthening collaborative capacity and mutual trust.

For example, in Miami, Florida, **Connect Capital** (CC) intermediaries proved instrumental in coordinating relationships across a historically fragmented ecosystem of community-based organizations, financial institutions, developers, philanthropy, and federal sectors. This fostered a broad coalition that defined shared priorities to advance an affordable housing agenda, which included establishing an enduring, cross-sector steering committee to ensure the plan's accountability and long-term implementation. This laid the groundwork for an affordable housing plan aiming to produce and preserve 210,000 affordable units by 2030.

Furthermore, in the **Cities of Opportunity** (CoO) initiative, the requirement of cross-departmental teams and external partners were foundational in undertaking deep, aligned action and fostering resource alignment across city departments. In Providence, Rhode Island (RI), this structure went beyond mere coordination; it formalized community leadership by embedding resident and non-profit stakeholders directly into the policy-making process. This supported cities in connecting departments and partners to align efforts, thus enabling equitable initiatives like Providence's comprehensive housing plan, bringing lasting impact by institutionalizing equity into the city's investment strategy.

LEVERAGING EXISTING STRENGTHS AND ADDRESSING URGENT COMMUNITY NEEDS

Intermediaries are adept at recognizing and building upon communities' plans, initiatives, and palpable senses of urgency. This strategic approach ensures that a shared vision is anchored in tangible, relevant issues, making it responsive to immediate needs while simultaneously driving long-term, systemic change.

Invest Health cities demonstrated this by establishing credibility using prior work, as well as building a clear, shared vision across partners focused on improving specific social drivers of health, such as housing, food, or economic opportunity. Missoula, Montana discovered that part of building trust required cross-sector alignment around priorities, which at times began with programs centered around lighting to improve public safety and sidewalk repairs. Residents evaluated these infrastructure improvements on their input, which contributed to relationship development. This accelerated Missoula's progress toward Invest Health goals by showing local government partners that community-driven priorities often lead to more successful outcomes. This became the basis of the adoption of a Health and Equity in All Policies approach. Invest Health's team in Roanoke, Virginia ensured an effective combination of decision makers were at the table after identifying residents' priorities, allowing the team to develop a transformative community and economic development project, titled Melrose Plaza.

In Seattle, CC intermediaries grounded their shared priorities in the existing Duwamish Valley Action Plan, a vision co-created by community members and City of Seattle staff. This pre-existing plan, coupled with a pressing concern around displacement and climate change, united and galvanized the team, directly leading to new partnerships like the agreement with the Seattle Office of Housing to acquire land and build more than 100 affordable housing units.

Similarly, the **Building Healthier, More Equitable Communities** (BHEC) initiative encouraged teams to choose between creating a shared vision or to build upon prior planning processes that engaged neighborhood residents in setting community goals. This initiative adopted a flexible approach to pursue emergent local priorities, allowing teams like Interfaith Neighbors in Asbury Park, New Jersey (NJ) to leverage BHEC funding and secure an additional $295,000 in grants to support farm-to-food pantry programs. These grants thereby strengthened local food systems and attracted further investment, including an additional $500,000 grant from the Robert Wood Johnson Foundation at the end of the initiative. Parkside Business and Community in Partnership in Camden, NJ aligned engagement strategies across multiple initiatives through a single process to reduce resident burden and improve efficiency in advancing projects on housing, food and commercial corridor development.

Community Innovations for Racial Equity initiative supports BIPOC-led Community Development Corporations (CDC). It builds capacity for CDC's to pursue community-owned models, such as land trusts and participatory data strategies. A significant outcome of this initiative is an 86% increase in their ability to support existing community assets and address priority community needs through community-led and community-owned approaches.

CULTIVATING STRATEGIC NARRATIVE AND ADVOCACY PLATFORMS

Intermediaries are crucial in supporting the development of compelling narratives and advocacy platforms. These platforms effectively communicate the value of a shared vision to a broader audience, including funders and policymakers. This focused messaging builds public will and leverages influence for broader systemic and policy changes.

In the HST project, Trinity Health, with intermediary support, focused on constructing a narrative to expand stewardship commitment and to draw others into their mission ministry work in Detroit, Michigan (MI). They learned that attention to legacy and mission is more critical than brick-and-mortar investments. This strategic narrative helped the new mission ministry gain approval from Trinity's trustees, which gained a clear shape and value proposition after years of being an undefined aspiration.

Furthermore, the **Building Healthier More Equitable Communities** (BHEC) initiative significantly refined statewide programs and policies by shifting mindsets and strengthening relationships at the state level. By ongoing engagement of leaders at state level agencies and networks, like the New Jersey Economic Development Authority, the New Jersey Department of Community Affairs, and the Housing and Community Development Network of New Jersey, leaders sought more intentional and effective alignment in support of local needs. This was supported by aligning cities on common community development issues, such as coordinated testimony to the governor advocating for the allocation of American Rescue Plan State Fiscal Recovery Funds.

INTEGRATING DATA AND LEARNING FOR COLLECTIVE IMPACT AND ACCOUNTABILITY

Intermediaries are instrumental in supporting the use of data, robust evaluation frameworks, and continuous learning processes. These tools help multi-sector partners understand community needs, measure progress towards their shared vision, and effectively demonstrate collective impact. This data-driven approach fosters transparency, accountability, and adaptive learning, allowing for the refinement of strategies over time.

The **California Accountable Communities for Health Initiative** (CACHI) model specified the use of data to set direction and monitor progress toward their goals. On top of this, Wellness Funds were established to attract resources and sustain their long-term work. This resulted in ACHs like San Diego and East San Jose using the Results-Based Accountability model and creating public-facing dashboards to understand root causes, select population health indicators, and communicate programmatic success.

In the **RISE and ARISE** initiatives, intermediaries shifted the balance of power to communities to define, collect, and receive real time data about what mattered to them rather than simply what federal funders wanted. This gave communities real-time data pipelines that support 1,009 communities in creating a well-being response that accounted for jobs, food and vaccines together. They also developed dashboard to help teams monitor their progress and analyze aggregate initiative-level data, serving as an important tool for tracking reach and impact. This data-informed approach not only created resilience but helped communities strengthen civic power to move policy and ARPA investments for the long term.

Invest Health further emphasized community engagement and data collection as critical for identifying community needs and gaining support for the shared vision. This generated unexpected benefits for expanding resident voice in decision-making and planning, leading to teams making progress on shaping the enabling environment and articulating a greater understanding of the community investment system. Tools like Collaboration Grants brought multiple cities together to learn how to unlock state resources to advance health equity and engage residents in determining how resources are allocated. Following one such collaboration trip to Providence, RI, groups such as the Grand Rapids, MI team explored a process for participatory budgeting.

ACTIVATING INFLUENTIAL LEADERS AND CHAMPIONS FOR SYSTEMIC BUY IN

Intermediaries recognize the critical role of senior leadership and internal champions from anchor institutions and government in driving and sustaining cross-sector alignment. By securing their active participation, initiatives ensure that the shared vision gains organizational authority, influences internal policies and resource allocation, and facilitates broader systemic buy in.

In **Invest Health**, high capacity teams consistently included senior leaders from city government, community development and anchor institutions. Their decision making authority enabled them to shift internal policies, priorities, or resource flows to align with the teams' desired outcomes, thereby accelerating progress towards goals. In Roseville, CA leaders from city government, public health nonprofits, and other partners kept momentum across political shifts by strategically refocusing which drivers of health they operationalized action around. The adoption of a city-wide approach anchored in the Invest Health principles institutionalized the team's approach and strengthened trust on a level that made addressing emergencies in food access during the Covid-19 health and economic crisis significantly easier.

Further illustrating the intermediary's role in cultivating trust and alignment, **Portfolio Design for Healthier Regions** (PDHR) project conducted a network analysis. This analysis assessed several measures of trust across core participants, including reliability, working in support of a shared mission, and openness to discussion. Although core teams across both regions started in different places, they both reported significant increases across all trust measures. The Palm Beach County group, for instance, reported a 50% increase in their overall levels of trust, while the 5 Healthy Towns group reported an even more substantial 80% increase. These gains were made possible through PDHR's facilitation and capacity-building support, which was specifically designed to help participants develop the collaborative skills and shared practices needed to build trust with one another over time. This demonstrates how intermediaries are crucial in fostering the foundational trust necessary for cross-sector collaboration and systemic buy in, ultimately accelerating progress towards shared goals.

CONCLUSION

Intermediaries are not merely facilitators; they are the architects of alignment, the cultivators of trust, and the accelerators of sustainable change. Their vital role in fostering shared purpose across sectors transforms fragmented efforts into a powerful, unified movement for lasting community transformation. By leveraging existing strengths, building capacity, and mobilizing resources, intermediaries ensure that diverse stakeholders can effectively collaborate to achieve a shared vision, leading to more responsive systems and stronger civic capacity.

HOW TO DO IT

ENSURE TRANSFORMATIONAL FUNDING

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Successful systems change in communities requires funding practices that are sustainable, ecosystem-oriented, and grounded in a shared strategic vision. Traditional funding models often reinforce fragmentation and lead to short-term outcomes. **In contrast, transformational funding approaches are rooted in community priorities, support solutions designed and led by local residents, deliver immediate and lasting benefits, and build resilient systems that tackle root causes rather than just symptoms.**

Serving as the connective tissue between communities, institutions, and funders, intermediaries are uniquely positioned to distribute funding in transformational ways—ones that shift mental models and establish new norms for resource flows and long-term sustainability.

INFLUENCE POLICY AND REGULATORY FRAMEWORKS FOR ANCHOR INSTITUTION INVESTMENT

Intermediaries shift the mindsets that influence how large institutions, like hospitals and universities, invest in their communities. They encourage anchor institutions to direct significant resources toward improving community health and well-being, moving far beyond short-term clinical care or ad-hoc philanthropy and into long-term, community-driven investment. These types of shifts reflect a powerful change in thinking: community investment is no longer seen as an optional act of charity, but as a core responsibility for building thriving, equitable systems.

In Massachusetts, the **Accelerating Investments for Healthy Communities** (AIHC) worked with hospitals and community leaders to channel over $70 million into affordable housing initiatives anchored in racial equity—an approach that not only improved living conditions, but also addressed root causes of poor health. Making this possible required a shared strategy for linking housing and health equity, specialized expertise to structure complex financing deals, and stronger cross-sector partnerships, all needs that AIHC helped meet through coaching, convenings, targeted grant funding, and co-developed tools.

In New Jersey, the **Building Healthier, More Equitable Communities** (BHEC) initiative contributed to the Qualified Allocation Plan, aligning with state partners and providing greater access to subsidies in targeted urban municipalities, which helped community developers build the necessary capital stack for housing projects with fewer funding sources. It also shaped elements of the New Jersey Social Impact Investment Fund's scope and scale, creating stronger incentives and subsidies for affordable housing in under-resourced and targeted municipalities. These shifts in the policy and financing environment expanded access to powerful tools, such as New Markets Tax Credits, that increased project viability and enabled organizations like the Urban League of Essex County (ULEC) to secure funding for affordable housing developments that advance long-term health equity goals.

A similar transformation unfolded in Philadelphia through the **Hospital Systems in Transition** (HST) initiative, where Jefferson Health reimagined its investment strategy. The hospital began by shifting leadership mindsets away from traditional philanthropy focused on expanding inpatient care and toward underlying drivers of health disparities. Early actions included defining the vital conditions that shape health, building cross-sector partnerships, and reallocating existing resources. Through the HST project, Jefferson broadened its philanthropic approach and unlocked over $70 million for initiatives addressing community health.

Achieving this transformation required both financial commitment and a willingness among leadership and donors to reimagine what "impact" means. By linking funding to systemic change rather than short-term outputs, Jefferson demonstrated how transformational funding can advance lasting health equity and strengthen community resilience.

These examples show how intermediaries help institutions unlock and sustain large-scale investments that align with community needs by creating the enabling conditions for anchor institutions to see community investment as an essential lever for sustainable systems change.

CULTIVATE MULTISOLVING PHILANTHROPIC AND INSTITUTIONAL INVESTMENT

Intermediaries help philanthropies and anchor institutions rethink community investment by encouraging shifts from fragmented, project-specific funding toward strategic, multisolving investments that address root causes of inequity, such as health, housing, and a thriving environment.

In Michigan, through the **Portfolio Design for Healthier Regions** (PDHR) project, local leaders and funders explored how coordinated investments in housing, mental health, and economic opportunity could reinforce one another. This led the 5 Healthy Towns Foundation to commit $45 million in property tax revenues over eight years to behavioral health and prevention initiatives. Partner organizations aligned their strategies, shifting resources toward a balanced portfolio of interventions that addressed immediate needs and long-term well-being. By working across sectors and centering shared goals for equitable health outcomes, partners not only changed how they invested dollars but also adopted new mindsets, prioritizing prevention, collaboration, and durable impact.

By working at the intersection of sectors and aligning capital around community-defined priorities, intermediaries cultivated a new mindset: the most effective investments solve multiple problems simultaneously while preparing their ecosystem for long-term, systemic change.

ESTABLISH FLEXIBLE, COMMUNITY-DRIVEN CAPITAL POOLS

Intermediaries play a vital role in helping communities design and manage flexible funding pools that put decision-making power directly into local hands. These community-driven funds allow resources to be blended, shared, and deployed quickly in response to evolving needs, building both trust and agility in the systems they support.

The **California Accountable Communities for Health Initiative** (CACHI) created local Wellness Funds that pool contributions to sustain long-term community health strategies. During the COVID-19 pandemic, CACHI's East San Jose partnership mobilized more than $600,000 from this fund to provide emergency aid to hundreds of families, drawing on a mix of seed funding from CACHI grants, local government contributions, and philanthropic partners. This demonstrates how flexible capital can meet immediate needs while reinforcing long-term resilience. By aggregating resources across public, private, and philanthropic partners, CACHI not only addressed urgent community needs but also incentivized collaborative decision-making, supported preventative health programs, and enabled investments in structural changes, demonstrating how shared, flexible funding can transform local health ecosystems.

Communities RISE Together (RISE) directed $30 million through three intermediaries (Public Health Institute, Heluna Health, and the CDC Foundation), providing flexible resources to partners already trusted within their communities. By redefining "risk" and challenging the narrative of who is trusted, RISE helped resources reach trusted intermediaries, leading to 11,572 jobs created in these communities. This required courage–the Public Health Institute took out a line of credit to remove structural barriers that prevented communities from accessing cost-reimbursable funds. By giving 50-80% of the resources upfront, communities that had deep insight but lacked resources could engage and offer solutions. In every initiative, communities had the chance to define what their approach would be and received support to develop their own theory of change and measures of success. The solutions designed by these communities were innovative and multisolving because communities naturally see the interconnections and naturally leverage these. In a MacArthur Foundation funded initiative, for example, Oceti Wakan identified youth mental health in Pine Ridge, South Dakota, a former site of a boarding school, as critical for well-being and restored Indigenous healing practices, with measures of success co-developed with youth and educators in the community. In another initiative, potential applicants from regions that had been identified were invited to find one another and build collaboration as part of the funding webinar–with resourcing to develop multisector partnership capacity as core to long term system change. This led to changes in food policy advanced by Black rural farmers in Eastern North Carolina and expanded Medicaid through innovative Food as Medicine models, while also expanding vaccine access. Trust and flexible funding had a multiplier and multisolving effect on impact, with a 30:1 estimated return on investment based on formal evaluation data.

Together, these examples show how intermediaries are helping communities not just access capital, but own the process of transforming it into power, ensuring that funding flows align with local priorities and sustain systems change from the ground up.

INTEGRATE HEALTH EQUITY INTO MAINSTREAM DEVELOPMENT FINANCE AND REGULATORY INCENTIVES

Intermediaries help weave health equity directly into the policies and financial tools that shape community development. They ensure investments in housing, infrastructure, and economic growth actively promote well-being.

The **Health Action Plan** (HAP), offers affordable housing developers a path for embedding health into the affordable housing development process. The HAP is a part of the Enterprise Green Communities Criteria— the nation's only green building program created with and for the affordable housing sector adopted by 29 states as part of their Qualified Action Plans for the distribution of Low-Income Housing Tax Credits. This results in developers seeking competitive tax credits being incentivized to include features like improved air quality, green space, and active design, for example. Investments like the Housing for Health Fund and programs like the Thome Aging Well Program, allow the HAP's transformational impact to be made possible by providing grants, incentives, and technical support to analyze local health data, perform community engagement, and develop tailored Health Action Plans. These investments not only guided immediate project decisions, but also created lasting tools, partnerships, and processes that continue to advance health-centered design across the field.

In New Jersey, the **BHEC** initiative worked with the New Jersey Economic Development Authority (NJEDA) to adjust lending policies and fee structures, making it easier for smaller community-based organizations to access financing for projects that strengthen local health and economic opportunity.

Across these examples, intermediaries are redefining what counts as "return on investment," expanding it from financial gain alone to include equity, resilience, and the vitality of communities.

BUILD CAPACITY FOR LONG-TERM SUSTAINABILITY AND DIVERSIFIED FUNDING PORTFOLIOS

Intermediaries are essential in helping local organizations build the knowledge, skills, and infrastructure needed to sustain systemic change long after initial funding ends. Through training, technical assistance, and strategic connections, they support communities in developing diversified funding portfolios and long-term financing plans that strengthen local autonomy.

In New Jersey, the **BHEC** initiative helped the Urban League of Essex County and Interfaith Neighbors gain expertise needed to navigate complex mechanisms, such as New Markets Tax Credits, making it possible to secure financing for major affordable housing and wellness projects. Similarly, **Invest Health** cities, such as Napa, CA, were supported in cultivating financing mechanisms for a new affordable dwelling unit center that layered government, philanthropic, and loan financing mechanisms. This center helped to increase the national affordable housing stock and provided supplemental income to at-risk residents so they could age in place.

In California's Coachella Valley, the **Connect Capital** team with Lift to Rise strengthened local capacity by helping partners map and align housing projects into a unified development pipeline, a move that not only clarified regional priorities but also positioned them to attract and effectively manage new waves of federal and state investment. Through their work, they have moved their pipeline from 300 to 10,000 units to meet the affordable housing needs in the Coachella Valley.

These examples show how intermediaries fundamentally change the way communities are resourced, moving funding from fragmented, short-term projects toward aligned, long-term investments that strengthen systems shaping health and equity. By influencing policy, cultivating cross-sector partnerships, and centering community voices in decision-making, intermediaries prove that transformational funding is not just about raising more money, but about reimagining how money moves—building trust, flexibility, and shared accountability into the flow of resources. When funding approaches are transformational, they do more than sustain programs—they sustain progress, creating the conditions for communities to thrive on their own terms.

CONCLUSION

Intermediaries prove indispensable in helping to create transformational funding systems that deliver long-term change. By bridging communities, institutions, and funders, they help shift mindsets and actions for change. **Intermediaries help transform isolated investments into coordinated strategies** that address root causes of health disparities and build lasting well-being. Through their policy influence, financial expertise, and cross-sector partnerships, intermediaries ensure that funding flows reflect community priorities and strengthen local capacity. They turn capital into connection, aligning diverse resources toward shared goals for health.

When intermediaries help communities lead in transformative ways, communities are able to move beyond short-term fixes to create resilient systems where equity, trust, and local ownership drive enduring progress.

HOW TO DO IT

PRIORITIZE BELONGING AND ENGAGEMENT

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Interventions that are disconnected from community priorities are inherently limited in their impact. Intermediaries working at the intersection of health and community development actively shift who drives change by centering community voice. Building connections and positioning residents as the leaders of change creates a sense of belonging and are essential to developing healthier communities. Over the past decade, members of the Intermediary Learning Network (ILN) prioritized community engagement in a variety of ways, including:

- Facilitating **restorative practices**.
- Building **social connections** and cohesion.
- Strengthening **civic muscle** and leadership.
- Centering **lived experience** in decision making.

The following examples demonstrate how ILN intermediaries advanced belonging, healing, and meaningful engagement within communities as preconditions for creating lasting change.

FACILITATING HEALING AND RESTORATIVE PRACTICES

ILN members created safe spaces, thus enabling communities to process historical trauma and build authentic relationships. This fostered trust and laid the groundwork for broader community change efforts.

Enterprise's **Building to Heal** framework encouraged affordable housing and community based partners to integrate healing-centered principles into their work, emphasizing culture, connection, community voice, and shared power. These principles came to life in a peer-to-peer network that included community-based practitioners and explored new approaches to community development that respond to residents' and staff's lived experiences and priorities. Participants also developed tools, resources, and lessons learned to inform and strengthen healing-centered practices across the broader field.

Through months of trust building, Wellville worked alongside members of California's Lake County Pomo Tribes to center the annual gathering of **Wellville** communities around an opening ceremony in which locals shared stories of historical trauma. This created an invitation to heal together and influenced Hope Rising—a collaborative of local health systems—to meaningfully engage Pomo members, resulting in increased social capital and shared governance as seen by the election of a Pomo tribe member as board chair.

BUILDING SOCIAL CONNECTIONS AND COHESION

ILN members designed and supported programs, projects, and events that intentionally brought people together, integrated services, and created accessible opportunities for interaction and shared experiences. This directly fostered stronger community ties, increased belonging, and built social cohesion.

The **Working Cities Challenge** fostered social connection through events like community cafes, community dinners, pop-up street conversations, neighbor nights, and Zumba classes. These varied, accessible activities increased opportunities for residents to interact, building local social capital and a sense of belonging.

Through the **California Accountable Communities for Health Initiative** (CACHI), belonging and community leadership were advanced through a structured, cohort-wide Transformational Equity Series that moved equity work from a transactional checklist to foundational, systems change infrastructure. CACHI convened ACH leaders to facilitate dialogues, baseline assessments, peer learning sessions, and ongoing coaching focused on examining how governance structures, funding decisions, and partnerships shaped power within their collaboratives. As a result, many ACHs strengthened resident-majority committees, added youth leadership roles, and formalized onboarding processes that prepared community members to participate meaningfully in decision-making.

Rather than positioning engagement as outreach, this approach embedded lived experience into governance and resource allocation across the network. By investing in reflection, shared learning, ongoing power-shifting practices, and adaptation, CACHI helped local collaboratives build trust, strengthen civic capacity, and create the conditions for durable systems change.

STRENGTHENING CIVIC MUSCLE AND LEADERSHIP

ILN members invested in developing the knowledge, skills, and organizational capacity of residents, supporting their transformation into leaders to sustain local advocacy and advance community efforts.

Through **Communities RISE Together** (RISE), **Activating Relationships in Illinois for Systemic Equity** (ARISE), and **Rhode to Equity** (R2E), WE in the World and its partners strengthened civic capacity by building collective leadership to drive systems change. This included policy and advocacy training through Center for Popular Democracy, narrative change training through chromatic.black, and asset-based Health Equity Action Labs (HEALs), along with training in stewardship, organizing, and shared power. Beyond formal training, WE in the World also cultivated spaces for belonging and mutual support by convening trusted messengers across neighborhoods for peer learning, shared problem-solving, and collective action. These gatherings transformed outreach from an individual task into a shared civic practice, strengthening social ties and building a coordinated, community-rooted infrastructure. This approach enabled communities to respond to public health crises while advancing longer-term efforts to address the root causes of disparities.

CENTERING LIVED EXPERIENCE IN DECISION MAKING

ILN members shifted decision making processes to center residents as co-creators, moving beyond superficial engagement to having residents define needs, strategies, and resource allocation.

The **Cities of Opportunity** (CoO) initiative centers the vital role of community engagement and civic infrastructure as a core component of the initiative's framework. Participating cities were provided with a robust set of tools, alongside technical assistance and expert guidance, to support city leaders and their partners in building long-term civic capacity while embedding community voice within ongoing projects. An example of this approach can be seen in Rochester, Minnesota, where the city developed a community co-design model that involved community members to expand career pathways for women of color in construction. This approach empowered women of color, who are traditionally excluded from construction spaces, to advocate on issues most important to them. This model not only shaped the city's economic opportunity strategy, but also established a sustainable co-design model that has since been applied across issues.

The **BUILD Health Challenge** partnerships prioritized residents' decision making to define issues, generate solutions, and set goals, thus embedding health equity and power-building as core components of their work. This commitment aimed to drive fundamental shifts in policy and sustainability, with resident perspectives guiding the process.

For **Invest Health** and **Building Healthier, More Equitable Communities** (BHEC) initiatives, Reinvestment Fund consistently co-designed the initiative programming with collaboration from cities to ensure the value of resources were aligned with the cities' needs. City teams advised most aspects of the initiatives and were compensated with stipends in recognition of valuable input. This was also central to the development of convening agendas—making the lived experience of the city teams and community residents positioned as critical expertise and showcasing it through peer learning exchanges. Ultimately, this succeeded due to trust built over years of partnership between the intermediary, the cities, and their previously outspoken residents.

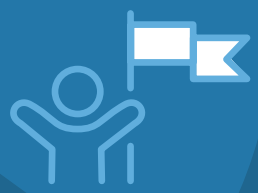
CONCLUSION

Across their various initiatives, the ILN members facilitated healing, built local leadership, and increased collective capacity. This resulted in both small, individual changes and larger scale transformation. One participant of a leadership training reflected that residents "often felt unseen by larger institutions." However, using the skills she learned, this participant continued to organize community cleanups, youth engagement projects, and a community health worker program to address housing instability and mental health issues. Her work, she reflected, is "[helping] people to find their peace and their power."

By continuing to invest in social connection, local leadership, relationship building and civic capacity growth, ILN members are creating the conditions for durable, place-based change. This change is especially necessary, now that communities feel increasingly fragmented and isolated. The ILN members have demonstrated how to create more supportive and connected places where people feel seen, that they belong, and are included in shaping their communities.

HOW TO DO IT

SHARE AND GROW POWER FOR COMMUNITY SELF-DETERMINATION



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Community self-determination is a principle and a practice. It is essential for achieving lasting systems change. Members of the Intermediary Learning Network (ILN) described many initiatives in which intermediaries had shifted power away from institutions and toward the people most affected by inequities. This shift has transformed how decisions are made, how resources are distributed, and whose knowledge is recognized as valid evidence.

For too long, institutions have sought community input without sharing control. The ILN demonstrates a different way forward. By embedding community members in governance, compensating lived experience, democratizing data, and enabling residents to shape policies and budgets, intermediaries have turned participation into genuine power.

This chapter highlights how intermediaries can create the conditions for shared and growing power. Their work enables communities to be heard and to take the lead. These stories show that when intermediaries expand power, communities define what thriving looks like and build systems that sustain it.

PUTTING RESIDENTS IN CHARGE OF GOVERNANCE

Intermediaries help communities move from advisory roles to true decision-making authority by intentionally redesigning governance systems. Rather than positioning residents as consultants to institutional power, intermediaries create structures in which community members act as co-governors of system change, shaping priorities, resource allocation, and accountability.

The **California Accountable Communities for Health Initiative** (CACHI) embeds a structural shift toward shared governance. Rather than offering symbolic inclusion, CACHI ensured shared authority by having community members serve as co-chairs alongside institutional leaders.

This redesigned structure, evident in Boyle Heights and Madera, re-prioritized efforts from institution-defined concerns like heart disease to community-identified needs, such as trauma and mental health. This durable shift in power was achieved through deliberate changes, including transparent decision making, stipends for resident leaders, and formal co-leadership frameworks. In practice, residents were given formal voting authority over implementation and priority setting, thereby embedding community leadership at the core of the initiative's governance instead of relying on advisory input. The outcome was a more sustainable collaboration, increased trust, and stronger alignment with community priorities.

Communities RISE Together brought together an unprecedented collaboration of organizations reaching 10,000 Black artist-activists, Indigenous health leaders, Latinx community organizers, migrant workers, senior center leaders, area agencies on aging, and Meals on Wheels workers. This effort shifted the response from one delivered to communities to one powered by them. At the center of the collaboration was a shared, multilevel stewardship structure among core partners that enabled transparent decision-making on resource allocation, prioritization, and policy. Communities themselves had their own shared governance structures–both with decision-making capacity about their own resourcing and about what data they wanted to collect, have collected and used to drive the response. Through shared governance and agreements among partners, RISE was able to nimbly shift resources and reimagine civic investment with effective stewardship over the outcomes.

While CACHI and RISE demonstrate how governance structures themselves can be transformed, other intermediaries have expanded community authority by opening access to financial decision making. In the **Wellville** community of North Hartford, CT, the Ascend initiative built trust through budget transparency and shared governance. This gave residents full visibility into financial allocations and an equal voice in how the $66 million combined investment could build on existing community assets to create a comprehensive prenatal-to-career system. By pairing budget transparency with shared decision making, the initiative transformed residents from stakeholders into stewards of capital, enabling community priorities to shape investment outcomes. This outcome reflected community-defined priorities rather than externally imposed plans.

In addition to budgeting authority, intermediaries have explored how community power can influence philanthropic investment decisions. At Jefferson Health's **Hospital Systems in Transition** (HST) project, a community advisory board gained control over certain aspects of philanthropic spending. This marked a significant shift toward investments driven by community needs.

Board members played a key role in determining which projects received funding, defining success metrics, and aligning resources with issues identified by the community. This approach demonstrated a meaningful redistribution of philanthropic power.

Throughout the project, trust among multisector partners grew, resulting in increased perceived reliability, a shared mission, and openness to dialogue, which helped sustain collective governance beyond a single initiative.

These examples show that when intermediaries act as architects of governance, budgeting, and investment systems, residents gain real authority over the policies and resources that shape their lives. Power sharing becomes institutionalized, enabling communities to move from participation to lasting leadership.

VALUING AND PAYING FOR COMMUNITY EXPERTISE

Intermediaries can champion self determination by recognizing residents' lived experience as a critical form of expertise rather than as a supplemental perspective. By elevating community members into paid consultant, navigator, and outreach roles, intermediaries ensure initiatives are shaped by those most affected while simultaneously building economic power and professional pathways within communities.

In the **Wellville** community of Muskegon County, Michigan, Livability Lab illustrates the value of lived expertise in generating health and economic returns. Through the How YOU Birth Doulas initiative, which was launched through the annual Livability Lab process, residents created a community-driven program that trained women of color as doulas and supported them in securing clients and reimbursement. This approach improved maternal health outcomes while creating sustainable income streams and formal leadership roles, strengthening local capacity long after the initial intervention.

The Livability Lab demonstrates how employing community experts can support a specific initiative. In contrast, other organizations have implemented this practice as part of broader, place-based strategies. Programs like Connect Capital and the Working Cities Challenge have engaged residents as community consultants, block captains, and peer navigators. These residents played a crucial role in shaping outreach strategies, program design, and necessary adjustments, ensuring that the implementation was guided by community insights rather than institutional assumptions. By embedding community perspectives throughout the process, these roles created meaningful economic opportunities connected to efforts aimed at systemic change.

RISE flipped the script and the balance of power. While many studies have demonstrated the power of trusted webs closest to the ground to more meaningfully address challenges, there are substantial structural barriers in place that limit who can access resources intended for communities experiencing disparities. Rather than asking communities to "trust us," RISE mapped trust in every community across the country through a series of 13 intermediary partners who reached over 2400 communities across the country. RISE then created a series of intermediary structures, together with Public Health Institute, the CDC Foundation, and Heluna Health, that changed the rules of the funding in a way that removed structural barriers and created efficiency and accountability to those closest to the problems. The result: 11,572 jobs were created in communities that needed them most, among trusted messengers who helped keep 1.5 million people well, ultimately restoring 195,000 years of life that would otherwise have been lost. These outcomes were driven by novel approaches imagined by farmers, barbers, Meals on Wheels workers, promotoras, migrant workers, and others with lived expertise, yielding a 30:1 return on investment.

Similarly, **CACHI**'s South Stockton team extended this model by hiring Trustbuilders to connect neighbors with services and information. By compensating residents for relational labor and local knowledge, the initiative formalized community leadership as an essential system function rather than informal volunteerism. This approach reframed relationship building as core infrastructure for systems change, legitimizing community knowledge as essential to effective coordination and service delivery.

Intermediaries can reframe community engagement from unpaid participation to professional and civic contribution. By designing roles that dignify, compensate, and sustain resident leadership, intermediaries can advance self determination while redistributing economic and decision-making power within communities.

SHIFTING POWER THROUGH COMMUNITY-LED DATA

Who defines success?

Control over data is control over narrative, legitimacy, and investment. Intermediaries have galvanized community self determination by advancing approaches in which data collection, analysis, and evaluation are led by community members themselves. This shift transfers authority over evidence from external experts to local residents, enabling communities to define what information matters, build power through data, and use it to inform advocacy, decision making, and systems change. When residents control how success is defined and measured, data becomes a tool for shaping strategy and reallocating resources rather than merely documenting need.

Through the **Health Action Plan**, developers learned that traditional public health data often overlooks local context and lived experience. By engaging residents in interpreting data and identifying priority concerns, intermediaries elevated community-defined issues that diverged from data-identified trends. This shift led developers to adjust planning strategies, intervention focus, and investment decisions, reinforcing the principle that data gains meaning and legitimacy through community interpretation and ownership.

Building on this reframing, intermediaries have also supported the creation of shared tools that institutionalize community-led data practices across organizations and places. Through **Community Innovations for Racial Equity** (CIRE) initiative, Verge Impact Partners and BIPOC-led community development corporations co-developed frameworks guiding community-driven data collection and evaluation. These tools supported residents in defining indicators, shaping evaluation questions, and controlling how findings were used. This enabled organizations to align development strategies with community-defined measures of equity and well-being. Through this process, evidence generation itself became a mechanism for collective power building.

The **BUILD Health Challenge** further demonstrates how community-led data can extend beyond narrative control to reshape financial and institutional systems. Spanning 68 projects in 27 states and territories, BUILD has supported communities in using locally generated evidence to challenge conventional funding models and sustain community-prioritized interventions. In Southeast Washington, DC, the Healthy Together Medical-Legal Partnership for Improving Asthma used community-level data to demonstrate the cost effectiveness of legal interventions addressing health-harming housing conditions. This evidence enabled partners to negotiate an innovative cost-sharing agreement with a local insurer, securing financing for legal services traditionally excluded from healthcare reimbursement. Within 18 months, the partnership improved asthma outcomes for children and generated approximately $10,000 in healthcare cost savings, illustrating how community-owned data can unlock durable resource flows aligned with community needs.

RISE used its intermediary status to reimagine and implement a real-time data pipeline in 1,009 communities experiencing disparities. These communities often didn't trust the government and were reluctant to provide expanded data to them. In addition, much of public health data collection did not meet what these communities truly needed to keep their communities safe and well. WE in the World used its intermediary status to facilitate a conversation to understand the needs and concerns of these groups and the federal government–and at the request of these communities–developed and implemented a real-time data pipeline driven first by what communities needed. Through a RISE Data for Power group, communities in one in three counties across the country reimagined and collected data on what mattered most to them, including overall well-being, financial security, mental health, loneliness, basic needs, and public health priorities. Within 24 hours, they received the results back. This data not only helped communities craft more meaningful responses, resulting in 195,000 years of life restored and $900 million in economic benefit from a $30 million investment, but also laid the foundation for long-term system change.

Visualizations developed from the RISE data pipeline helped communities advocate for American Rescue Plan Act (ARPA) investments, influence state policy, and advance broader conversations about what drives well-being.

Over time, RISE partners began collecting their own well-sampled, community-validated national data, creating one of the largest baselines of well-being for hard-to-measure groups in the country. This work in data democracy has since evolved into the We Rise & Win Together data pipeline and the Data for Power initiative, foundational civic infrastructure that continues to strengthen civic capacity and community voice amid the dismantling of the broader public data commons.

Across these examples, intermediaries champion the right of communities to determine what counts as evidence, how it is interpreted, and how it is used. When communities reclaim ownership of their data, evidence becomes a lever for power: shaping narratives, redirecting investments, and driving systems change in service of genuine self-determination.

MAKING RESOURCES FLEXIBLE AND RESPONSIVE

Intermediaries fostered a systemic shift in how programs and resources are structured by moving away from plans set by external entities and toward systems that continually evolve in response to community input and emergent needs. Advancing this shift required significant flexibility from both funders and intermediaries, as well as a willingness from institutions to realign original priorities, investment strategies, and timelines to reflect community-articulated goals. In practice, flexibility served as a core condition for power sharing—allowing communities to influence not only what was done but also how and when resources were deployed.

CACHI illustrates how flexibility can be embedded within large, multi-site initiatives. CACHI supported local sites in adapting implementation strategies midstream when community perspectives diverged from original mandates. In Boyle Heights, for example, community members identified trauma and community safety as more urgent concerns than chronic disease, prompting a reallocation of attention and resources. This pivot required funders and institutional partners to approve changes to scope and priorities, resulting in stronger partnerships, increased trust, and actions that more closely reflected residents' lived realities.

While CACHI demonstrates adaptive flexibility within a defined initiative framework, other intermediaries have embraced more fundamental transformations in program design.

Wellville offers a powerful example of this deeper pivot. Originally conceived as a five-year, outcome-oriented contest among communities with prescribed metrics and interventions, Wellville reshaped its model in response to community feedback. The initiative extended the timeline to 10 years, loosened rigid deliverables, and shifted from prescribing solutions to supporting communities in defining their own priorities and measures of success. This evolution transformed Wellville from a time-limited community competition into a long-term stewardship model—one that prioritized local ownership, continuous learning within and among peer communities, and shared decision-making as drivers of change.

Building on these lessons, intermediaries have also worked to codify flexibility so it can be replicated and sustained across contexts. The **Build to Heal Toolkit** translates adaptive, community-led practice into a practical planning framework for developers and institutions. Co-created with community development organizations, the toolkit guides users to center healing, cultural connection, and power-sharing throughout the project lifecycle. By offering concrete prompts and design principles, Build to Heal helps institutions operationalize flexibility without reverting to rigid, top-down planning models when uncertainty or complexity arises.

Equity depends on humility, adaptability, and respect for community direction. By championing flexible, community-led systems, intermediaries help institutionalize a new standard—one in which programs are designed to listen, evolve, and sustain shared power over time rather than locking communities into externally defined paths.

TURNING COMMUNITY VOICE INTO POLICY AND ADVOCACY POWER

Self-determination ultimately means the ability to shape the systems and policies that govern daily life. Intermediaries help communities move from local organizing to influencing policy and resource flows by equipping residents with advocacy skills, creating platforms for their voices to reach decision-makers, and fostering coordinated “inside/outside” strategies that translate community priorities into systemic change. In these efforts, intermediaries serve as bridges connecting grassroots leadership to institutional processes where decisions about policy, funding, and accountability are made.

Through initiatives such as **RISE**, **Activating Relationships in Illinois for Systemic Equity** (ARISE), and **Rhode to Equity** (R2E), residents in North Carolina, Rhode Island, Illinois and Wisconsin built collective advocacy capacity to engage in statewide policy initiatives. Intermediaries supported residents in developing shared policy agendas, coordinating messaging across communities, and navigating legislative processes. As a result, community members mobilized to support Medicaid expansion, protect SNAP and WIC benefits, and advocate for clean water and safer neighborhoods. These efforts demonstrate how intermediaries can help residents translate lived experience into sustained, coordinated policy action across multiple issue areas rather than isolated campaigns.

While these initiatives highlight the power of collective advocacy at the state level, other intermediaries have focused on reshaping local decision-making structures tied to land use and investment. **Connect Capital** partnered with community advocates, philanthropy, and City of Seattle leaders to secure funding for affordable housing while advancing the design of a Resilience District centered on residents and businesses thriving in place despite climate change. Residents played a direct role in shaping priorities and governance principles, with the long-term goal of establishing a model that formally affirms residents' influence on land-use decisions and infrastructure projects. This work represents a profound shift in power dynamics, positioning communities as stewards of neighborhood change rather than passive recipients of development.

Intermediaries have also supported residents in building direct, sustained relationships with policymakers to ensure accountability beyond individual policy wins. At Codman Square Neighborhood Development Corporation, residents participated in "Community Action 101," a training program that built skills in policy analysis, testimony, and legislative engagement related to environmental justice and transit electrification. Through facilitated lobby days and follow-up engagement, residents spoke directly with state legislators, developed ongoing relationships, and successfully influenced policy outcomes, including the electrification of a local transit line. These efforts transformed episodic civic participation into durable civic power rooted in long-term accountability.

As a result, residents moved from being consulted on policy issues to actively shaping infrastructure decisions, establishing a durable pathway for community influence over future transportation and environmental investments.

Taken together, these examples show how intermediaries turn community voice into institutional power. By strengthening advocacy capacity, opening access to formal decision-making arenas, and supporting sustained relationships with policymakers, intermediaries enable residents to influence systems that have historically excluded them by embedding self-determination directly into the policy process rather than treating it as a temporary engagement strategy.

CONCLUSION

Cross-Cutting Lessons

1. Intermediaries are essential catalysts, translating community needs into institutional action and building bridges that enable institutions to responsibly cede power. They ensure communities have the capacity and resources to lead their own transformation.
2. Designing and investing in equity-centered governance is paramount, and intermediaries are essential in facilitating this design and investment. This necessitates shared leadership, fair stipends for participants, and transparent budgeting as fundamental structural elements.
3. Trust, as both a foundation and a result, is forged when a durable system change is built on transparency, equitable compensation, and shared accountability, moving beyond mere consultation. Intermediaries are essential in fostering this trust and enabling the shift from consultation to shared accountability.
4. The tangible returns of power sharing are evident in redirected investments, new policies, and strengthened local economies, all demonstrating measurable, impactful change. Intermediaries are essential to orchestrating this power-sharing to deliver tangible returns.

So what? Now what?

The work of intermediaries demonstrates that **power sharing is not an abstract ideal but a viable and transformative operating model** for systems change. By aligning governance, funding, and data around community leadership, intermediaries bridge the divide between community knowledge and institutional reform, creating the conditions for communities to determine their own paths forward.

For **funders**, this work underscores the importance of investing in intermediaries as architects of community power. Their value lies in translating vision into durable structures by redesigning governance, redistributing resources more equitably, and embedding healing-centered, equity-driven practices across sectors. Flexible, multi-year funding is essential to sustain this infrastructure and to allow communities the time and stability required to lead meaningful, long-term change.

For **practitioners**, the implications center on codifying shared power as a core operating principle rather than a supplemental practice. Embedding community members directly into decision-making, implementation, and evaluation processes ensures that initiatives remain grounded in lived experience. Tools such as Build to Heal help practitioners integrate flexibility, healing, and power sharing into program design from the outset, rather than treating these elements as afterthoughts or course corrections.

For **policymakers**, the findings point to the need to institutionalize community voice within formal governance and policy frameworks. Participatory budgeting, standing resident councils, and transparency requirements can make shared decision-making routine and durable. Embedding these mechanisms into policy helps ensure that community leadership persists beyond individual initiatives, funding cycles, or political administrations.

Intermediaries play a critical role in normalizing shared power, and ultimately community seeded power, as a foundational standard rather than an exception. When communities are supported to lead, systems become more responsive, resilient, and equitable. By fostering environments in which community voices shape decisions, intermediaries do more than strengthen individual programs. They lay the groundwork for long-term transformation rooted in collective self-determination. The real value of intermediaries is in how they work behind the scenes in partnership with communities, while creating the connective tissue that fosters community-led change to take root and grow.

APPENDIXES

APPENDIX A: SYNTHESIS PROCEDURES

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Methods

The eight briefs that make up this report were collaboratively written by members of the Intermediary Learning Network (ILN). The process was designed and facilitated by Leading Edge Advisors, in close consultation with a steering committee of ILN members. From start to finish, the process was stewarded by The Rippel Foundation.

Framework

The study framework, developed by the project team, comprised four primary areas:

1. Intermediate outcomes (systems changes), rooted in the Waters of Systems Change framework (Kania, Kramer, and Senge, 2018);
2. Long-term outcomes (aspects of vital conditions that support thriving people and places), rooted in the Vital Conditions framework (The Rippel Foundation, 2025);
3. Drivers (approaches/ways of working that enable these intermediate and long-term outcomes) and
4. Unique value and roles of intermediaries in supporting and promoting both drivers and outcomes.

Approach

Data collection was grounded in an outcomes harvesting approach, focused on identifying key outcomes and what it took to achieve them. Two primary methods, which informed each other, were used to identify themes: 1) wisdom gathering sessions with the full ILN and 2) document review. Wisdom gathering sessions were prioritized as the most current and comprehensive source of insight and evidence. These were complemented by review of materials selected and submitted by each ILN member. This design intentionally centered the experience of the ILN members, recognizing the evolution in ILN members' practice and learning over the previous decade, and enabling balanced contributions from initiatives of all sizes (avoiding the practice of privileging those initiatives with funds available for formal evaluations and communications).

Wisdom Harvesting

Two wisdom harvesting sessions and multiple asynchronous follow-ups focused on generating insights and sharing concrete examples, with an emphasis on understanding 1) what outcomes have been achieved to date across ILN initiatives and 2) which drivers were most important to achieving these outcomes. Leading Edge Advisors analyzed qualitative feedback, alongside notes from conversations with the ILN steering committee,

to identify patterns and propose a series of cross-cutting themes. With input from the full ILN, the original set of themes were narrowed down to the most resonant eight.

Document Analysis

To supplement the wisdom harvesting, Leading Edge Advisors used NotebookLM to complete AI-assisted analyses of a bounded set of ILN initiative documents. Each ILN member was invited to provide up to five documents for each initiative in their purview, including initiative descriptions, evaluation reports, and other related published resources. In total, analyses included 36 documents for 26 initiatives. AI-assisted analyses were used at two primary time points. First, an initial (exploratory) analysis helped inform the study's approach. NotebookLM was used to identify insights and examples within each of the four study framework areas (systems changes, changes in vital conditions, ways of working, and roles played by intermediaries) to generate ideas to explore with the ILN. Second, once the ILN had identified their eight priority themes, NotebookLM was used again to summarize the top five ways each theme showed up in the submitted documents and, for each of those five, up to three of the most illustrative examples.

Synthesis

Leading Edge Advisors synthesized results from the wisdom gathering sessions, notes from discussion with ILN members, and the second AI-assisted analysis into detailed writing guidance for each of the final eight themes and supplementary sections. Writing guidance included the key overarching insights to emphasize within each thematic brief, along with strong supportive examples from across the ILN members' experience. Each example included a brief description of where and how that theme had been elevated in the work, and what had been made possible as a result. Leading Edge Advisors also created a cross-reference table showing which ILN initiatives appeared within the writing guidance for each theme. Writers were encouraged to coordinate with each other as they selected examples to elevate in each brief, to ensure a broad and representative selection of examples across all eight briefs.

Collaborative Writing

Small writing teams of 3-4 ILN members per theme used the provided guidance materials to discuss, select and draft the content of each brief. In lieu of a traditional report introduction, conclusion and executive summary, a Statement of Significance was collaboratively drafted by Bobby Milstein and Cierra Bryant (The Rippel Foundation), Jennifer Fassbender (founder of the ILN), Dr. Shamsah Ebrahim (Leading Edge Advisors), and Dr. Tiffany Manuel (The Case Made). This introductory piece binds together the eight inter-related thematic briefs as a coherent whole and speaks to the timeliness and importance of these learnings in the current context.

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