

The  
**BUILD  
HEALTH**  
Challenge®

# COMMUNITY HEALTH WORKBOOK

June 2023

Developed in partnership with



ChangeLab Solutions

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# Introduction to The BUILD Health Challenge WORKBOOK

The BUILD Health Challenge® (BUILD) is not only a funding collaborative and national awards program — it's a model of change. BUILD is a model for communities looking to employ cross-sector and community-driven approaches that ensure everyone can reach their optimal level of health. It's a network of practitioners, local advocates, and expert organizations who swap stories and solutions — and publicly share honest accounts of hard-earned lessons — all in the spirit of continual learning and innovation to advance health equity. (To learn more about the BUILD model, see Appendix A.)



Together, these partnerships design and implement initiatives based on the BUILD principles, outlined below.



**BOLD:** Partnerships that aspire to advance racial justice by driving fundamental shifts in policy, regulation, and/or sustainability that support systems-level changes through a lens of justice, equity, diversity, and inclusion.



**UPSTREAM:** Partnerships that focus primarily on the social, environmental, and/or economic factors that have the greatest influence on the health of a community, rather than on access or care delivery.



**INTEGRATED:** Partnerships that align the practices and perspectives of communities, health systems, public health, and payers, under a shared vision, establishing new roles while continuing to draw upon the strengths of each partner.



**LOCAL:** Partnerships that prioritize the diverse lived experiences, voices, and leadership of neighborhood residents and community members throughout all stages of planning and implementation.



**DATA-DRIVEN:** Partnerships that use varied forms of data from both clinical and community sources as tools to identify key needs, measure meaningful change, and facilitate transparency amongst stakeholders to generate actionable insights.

There is no comprehensive how-to guide for putting the five BUILD principles into practice; collaborative efforts are complex and dynamic. The journey — and it is indeed a journey — will look different in every community. It will be shaped by the partners you have at the table and your unique community context.

This workbook is designed to be a companion to help you along your unique path. It is not intended as an instruction manual: it offers an invitation to engage thoughtfully with complex issues, hold space for nuanced conversations, build meaningful relationships, and chart a path forward that fits *your* community context. The information in this workbook reflects key concepts, resources, and tools that have been used to support more than 68 communities since 2015.

## Who is this workbook for?

This workbook is for cross-sector team members — or potential team members — engaged in the early stages of a collaboration to strengthen community-wide health equity. Its content is based on learnings from BUILD communities throughout the country, as well as resources from across the field.

Whether you are new to the idea of community health, a professional working full time on health equity, or somewhere in between, this workbook is for you. It can be used by BUILD applicants, awardees ready to jump-start their BUILD initiative, or community leaders interested in implementing the BUILD model on their own. The only prerequisite is a desire to collaborate with partners in your community who are interested in advancing better health for all.

## Workbook elements

This workbook is divided into three main sections:

- ✓ BUILD a solid foundation
- ✓ BUILD relationships
- ✓ BUILD your path

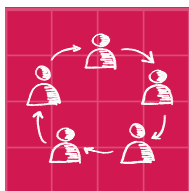
Each section introduces a set of core concepts within the BUILD model that is fundamental to the process of addressing health inequities. The following elements are woven throughout this workbook.



**Essential BUILD reading:** In the introduction to each section, we draw your attention to specific BUILD resources, case studies, and publications that relate to the topic.



**Conversation starters:** These questions help teams get on the same page, identify needs and opportunities, and center equity in the process. Communication is a critical component of successful cross-sector partnerships.



**Collaborative activities:** Accompanying worksheets encourage your team to explore key topics together and document responses. (See the Appendix for additional guidance on how you can use these tools.)



**Additional resources:** In each section, a box labeled “Dive Deeper” offers a curated list of helpful tools, resources, and templates to explore the issue in further detail. These resources are not presented in any specific order, and not every resource will be relevant to every community. Skim the descriptions to find what you need when you need it.



## Guidance for Using Conversation Starters

**T**hroughout BUILD's history, we have seen many successful examples of how collaboratives can work together. Often the best path forward does not come from a workbook or toolkit. It comes from partners taking the time to figure things out together. The conversation starters in this workbook include questions to help teams get on the same page, surface needs and opportunities, and center equity in the process. These questions are intended to inspire generative discussion; they are not a strict script you must follow. Here are some tips to keep in mind:

**○ Set yourself up for success.** A designated facilitator can help guide the conversation and ensure all participants have an opportunity to share their ideas. Your team may have a partner whose role is to convene and facilitate group meetings, or you may decide to distribute this responsibility by having a rotating facilitator. Some BUILD communities have found it helpful to bring in an external facilitator, allowing all core partners to participate fully in the discussion. Keep in mind that individuals have different learning, listening, and engagement styles. Send questions in advance to give people a chance to reflect on their own, and offer different types of engagement (e.g., large and small group discussions, individual brainstorming sessions, written responses, etc.).

**○ Embrace the process, even when it's messy.** For most of the conversation starters provided, there are no right or wrong answers. By engaging in open-ended discussion, teams can start to identify opportunities, areas of alignment, and points of uncertainty or disagreement. If team members have different points of view on key issues, it is important to bring this to light. Progress does not happen when teams ignore or brush aside these differences. Left unattended, points of tension can resurface down the road and threaten to undo work that has already been done. Progress happens when you recognize these differences, consider if and how they might affect the work you came together to do, and identify ways to bridge them.



## Guidance for Using Conversation Starters

- Take notes.** Document areas of alignment, emerging needs or questions, “a-ha” moments, and next steps. Make the notes available to all team members, current and future.
- Think of conversations as more than a means to an end.** Coming together to share, listen to others’ points of view and experiences, and problem-solve can strengthen relationships and foster a sense of collective ownership of the process.
- Prioritize continuous dialogue.** These discussion prompts are called conversation *starters* for a reason. You may start a conversation that raises more questions than answers. That’s okay! Your team’s understanding of these issues, and its capacity to take action, will evolve over time. Build generative conversations into the fabric of what you do and how you do it. Creating space for dialogue early in your collaboration can set an important tone by inviting and normalizing conversations around equity, partnership, community, and other key issues. You may revisit the same discussion questions at different stages of your work together, such as when new members join, when you reach a milestone, when you consider a new activity, or when you want help gaining traction.

Often the best path forward does not come from a workbook or toolkit. It comes from partners taking the time to figure things out together.



# Section 1.

## BUILD

### a Solid Foundation

Before jumping into planning any action, take the time to build a shared understanding of what you value, where you are, what you have, and what you hope to accomplish together.



**C**ross-sector collaboration brings together partners with unique lived and professional experiences. Partners may come to the table with different ideas about what needs to change and why. Before jumping into planning any action, take the time to build a shared understanding of what you value, where you are, what you have, and what you hope to accomplish together. Your progress will be shaped by emerging events, new windows of opportunity, and unexpected challenges. Having a clear, shared vision will orient you in the right direction and help you navigate any twists and turns. This section introduces information to help you:

- ✓ Lead with equity
- ✓ Identify root causes
- ✓ Assess community assets
- ✓ Develop a bold vision



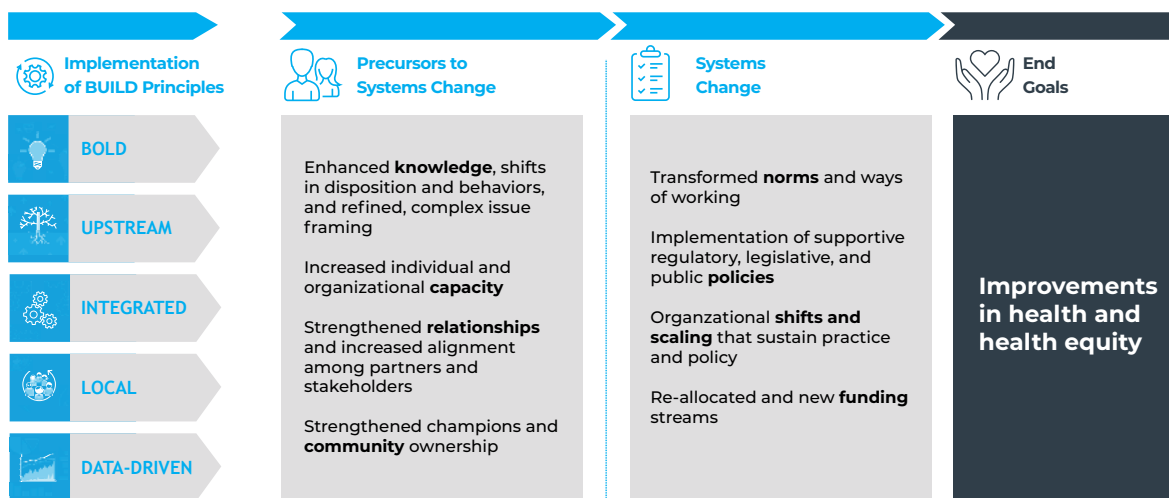
## Essential BUILD Reading

**A**t the outset of your partnership, review the [Getting BUILD Ready Guide](#) to familiarize yourself with BUILD's two key frameworks:

- The [Outcomes Framework](#) depicts what success can look like in BUILD sites as they fully implement the five BUILD principles and prioritize system-level shifts.
- The [Progress Continua](#) can help a team identify their partnership's implementation stage and spark ideas to further advance the BUILD principles.

Read about the evolution of BUILD's equity approach in [Moving to Center: BUILD's Journey to Advance Health Equity. Community Approaches to Systems Change: A Compendium of Practices, Reflections, and Findings](#) includes examples of how BUILD communities have advanced systems change using an equity lens (see pp. 29-41).

# Outcomes Framework



The BUILD Outcomes Framework depicts what “success” looks like in BUILD sites as they fully implement the five BUILD principles and prioritize system-level shifts. The precursors referenced in the Framework are early signs of systems change. They are our best understanding of what elements need to be in place in order to achieve outcomes that not only lead to systems change, but also eventually yield long-term improvements in population health and health equity.

The framework is depicted as linear for ease of reading; however, we recognize that this work unfolds in complex ways.

## Progress Continua



### IMPLEMENTATION OF BOLD

The Bold principle focuses on (1) implementing systemic change strategies (changes to institutional, regulatory or legislative policies, system or practices); (2) developing a shared understanding among partners of how to address equity issues through systemic change; and (3) identifying ways to blend, braid, and leverage complementary initiative’s and resource’s streams.

**Primary Factor: Focus on Systemic Change: policies (institutional, regulatory, or legislative), systems, and practices**

Ground Stage (0)	Early Stage (1)	Middle Stage (2)	Advanced Stage (3)
Initiative articulates the solution in individual and programmatic terms and has not developed any systemic goals or strategies (solutions remain at the programmatic level)	Initiative has begun articulating the solution in a manner that highlights the need for a systemic approach and has developed systemic goals or strategies, but in practice relies primarily on programmatic approaches	Initiative clearly articulates the need for systemic change to address the issue area and has taken a few/small steps toward implementing systemic strategies	The initiative clearly articulates the need for systemic change and has taken significant steps toward implementing a multi pronged set of systemic strategies that can effectively address the issue area
INDICATORS OF ADVANCED STAGE			
<ul style="list-style-type: none"> <li>Developing or implementing advocacy or policy agenda/strategy or communication campaign</li> <li>Mobilizing key administrative or legislative partners (policy makers, decision-makers)</li> <li>Making individual-level behavior shifts that create momentum for a larger collective shift (e.g. partners begin sharing data)</li> </ul>		<ul style="list-style-type: none"> <li>Identifying external opposition to changes and necessary strategies to deploy to combat these external forces</li> <li>Developing capacity of organizations and individuals to implement systems strategies</li> </ul>	

The Progress Continua framework helps communities articulate a set of factors that are core to each BUILD principle. The Continua features four stages of implementation that are emerging for each factor. Communities progress over time through these stages as they work together and grow their capacity.

This framework can be used to identify a community's current stage of implementation and help them to strategize about the progress they hope to see; what may have to happen to get there; and what may happen after they achieve milestones.

*(Full framework available in Appendix B.)*

## 1.1 Lead with equity

This workbook begins the way all BUILD initiatives are encouraged to begin: by explicitly naming and engaging with the concept of health equity. To do so acknowledges that good health is the foundation of a thriving community, yet not everyone is given the opportunity to reach their best level of health.

What does health equity mean? One common definition is “a state in which everyone has the opportunity to attain their full health potential and no one is disadvantaged in achieving this potential because of social position or any other socially defined circumstance.”<sup>1</sup> In other words, equity is a state in which everyone has what they need to be successful.

The reality today is that some populations *are* disadvantaged because of their social position or other socially defined circumstances. This includes race, ethnicity, sexual orientation, gender, income, age, and ability. For example:

- ✓ Black, American Indian, and Alaska Native women are two to three times more likely to die from pregnancy-related causes than white women.<sup>2</sup>
- ✓ Scientists are demonstrating that low-income communities of color experience higher rates of heat-related illness and death than their white neighbors due to climate change.<sup>3</sup>
- ✓ Lesbian, gay, bisexual, transgender, queer, and questioning youth are more likely to experience homelessness.<sup>4</sup>

Margaret Whitehead, an early researcher on social inequality, emphasized the moral and ethical dimension of inequities by stating they are “not only unnecessary and avoidable, but in addition, unfair and unjust.”<sup>5</sup> These disparate outcomes are not inevitable, and they are not simply the result of individual choices and behaviors. They are the consequences of policies and practices that have systematically granted access to opportunities and resources to some, while denying it to others.

# Centering Racial Justice

Over the previous three cohorts, the BUILD initiative has evolved from a general focus on health equity to an explicit focus on racial equity.

The reason for this is borne out in both the data and the lived experiences that community members have been amplifying for years. Across nearly every dimension of health, Black, Indigenous, Latinx, and other People of Color tend to face worse health outcomes, even when controlling for other factors like socioeconomic status.<sup>6</sup> At a community level, people of color disproportionately bear the brunt of harms associated with systems, including the healthcare system, housing system, and food system.

Structural racism highlights why we see differences in outcomes based on race. Structural racism is “A system in which public policies, institutional practices, cultural representations, and other norms work in various, often reinforcing ways to perpetuate racial group inequity.”<sup>7</sup> Importantly, it is “not something that a few people or institutions choose to practice. Instead, it has been a feature of the social, economic and political systems in which we all exist.”<sup>7</sup>

Shared commitments around racial equity and racial justice can help counteract the harms of structural racism. A shared understanding of common terms is critical to align a team around a unified vision. The organization Race Forward provides helpful definitions to unpack the nuances between racial equity and racial justice.

**Racial equity is “a process of eliminating racial disparities and improving outcomes for everyone. It is the intentional and continual practice of changing policies, practices, systems, and structures by prioritizing measurable change in the lives of people of color.”<sup>8</sup>**

If racial equity is a process, then racial *justice* is the outcome we hope to achieve. Racial justice is “a vision and transformation of society to eliminate racial hierarchies and advance collective liberation, where Black, Indigenous, Latinx, Asian Americans, Native Hawaiians, and Pacific Islanders, in particular, have the dignity, resources, power, and self-determination to fully thrive.”<sup>8</sup> According to Race Forward, “racial equity seeks measurable milestones and outcomes that can be achieved on the road to racial justice. Racial equity is necessary, but not sufficient, for racial justice.”

When BUILD embarked on a listening tour to understand how the initiative could best support community efforts to advance equity, past awardees elevated the importance of racial equity. As the report stated, “when racial equity is centered in the inquiry and process, collaborators ask better questions, emancipatory and anti-oppressive values guide decision-making processes, leaders become more diverse, and interventions become more equitable.”<sup>9</sup>

When partnerships lead with equity, they do not dismiss or attempt to explain away systematic differences in health outcomes. Rather, they confront them head on by asking:

- ✓ How are opportunities and resources distributed across our community?
- ✓ Who in our community is experiencing the greatest harm?
- ✓ What systems, policies, and norms in our community are driving these differences?
- ✓ What systems, policies, and norms within our institutions are contributing to these outcomes?
- ✓ How can we support institutions to understand their role in historical harms?
- ✓ How can we disrupt inequitable systems, policies, and norms to prevent further harm?

An equity-centered approach pushes all partners to engage with these questions — even when those discussions are difficult or uncomfortable. Incorporating equity into your work is not simply a box you can check; it is a concept that you and your partners must actively engage with throughout your project.



## Start the Conversation: Equity

**A**dvancing health equity is central to BUILD, and it is critical that partners establish a shared understanding of what equity means and how it connects to your shared efforts. If your team has not explicitly discussed equity together, responding to an existing definition can offer a helpful on-ramp to begin the conversation.

**Outcomes:** Through this conversation, teams can better understand how your differing perspectives on equity may influence your work together. This conversation may show strengths and areas of community connectedness, lifting up the lived experiences of those on the team and their partners. It may also highlight growth areas related to pursuing equity for future goals, training, and capacity building.

**Take time during a partnership meeting to review the following definition of health equity:**

“A state in which everyone has the opportunity to attain their full health potential and no one is disadvantaged in achieving this potential because of social position or any other socially defined circumstance.”

**Use the following prompts for a group discussion:**

- ✓ Does this definition resonate with you? Why or why not?
- ✓ Does your definition or understanding of equity differ from this? How so?
- ✓ How close — or far off — is our community from achieving health equity?
- ✓ What is missing from this definition?
- ✓ What questions does this definition raise for you?
- ✓ How does this concept apply to the work we came together to do? Are there opportunities to tailor this definition to our goals? (For example, if you are working on housing initiatives, you may find it helpful to narrow this broad definition from “a state in which everyone has the opportunity to attain their full health potential” to “a state in which everyone has access to safe and affordable housing options.”)





## Start the Conversation: Equity

### Reflect together:

- ✓ Did this conversation create space for our partnership to discuss race, racism, and racial equity? If race did not come up in discussion, why might that have been?
- ✓ How comfortable — or uncomfortable — do we feel engaging directly with race, racism, and racial equity? What additional resources or support would be helpful to facilitate these discussions?
- ✓ How aligned is our team around our understanding of equity? Are there major differences we need to reconcile? How might we do that?
- ✓ Did anyone raise specific questions we can explore (either individually or together) and bring back to the group?
- ✓ What might our team's shared definition of equity look like? What would it look like to center racial equity and racial justice in our shared understanding of equity?

Equity is not only an outcome; it is also a process. *How* you approach the work matters. Partners make ongoing choices about how they organize as a team, whose voices are prioritized, how and by whom decisions are made, and how to show up for each other and the broader community. These choices have ripple effects that can reinforce or undermine equitable outcomes.

It is not unusual for collaborative efforts to follow the path of least resistance — to default to the “usual” partners, practices, and processes. As a result, projects may maintain or reinforce the system that contributed to the problem in the first place, even if that is not the intent. Listening to people with lived experience of an issue brings nuance and detail to the understanding of it. The most promising solutions — in terms of feasibility and sustainability — are those created by the community in which they are implemented. When you shift power from those who have traditionally held it to those who have been systematically denied it, you are weaving equity into the process. Your BUILD initiative, and the unique set of partners you have at the table, provide an opportunity to push against the status quo and chart a new path forward.



## Dive Deeper: Equity

<b>Explore the distinction between equality and equity</b>	A strategy based on equality offers a one-size-fits-all approach to everyone, while a strategy based on equity recognizes that different groups will have different needs. <a href="#">This infographic</a> developed by the Robert Wood Johnson Foundation depicts this difference and illustrates the importance of tailoring initiatives to those who have been most harmed by inequitable systems.
<b>Familiarize yourself with common terms</b>	This <a href="#">brief primer</a> from the Aspen Institute defines 11 terms to help readers understand structural racism.
<b>Unpack different levels at which racism operates</b>	Dr. Camara Jones explains the difference between institutionalized, personally mediated, and internalized racism through her “gardener’s tale.” <a href="#">Read</a> the allegory, or <a href="#">watch Dr. Jones</a> explain it in a 20-minute video.
<b>Build a case that prioritizing equity benefits everyone</b>	When programs and policies are designed to benefit those in greatest need, everyone wins. Angela Glover Blackwell demonstrates this point using an unexpected example: curb cuts in sidewalks. Read <a href="#">her piece</a> in the Stanford Social Innovation Review.
<b>Facilitate a team conversation about identity, power, and privilege</b>	This <a href="#">toolkit</a> includes activities and guidance to foster productive discussions about power and privilege.
<b>Access tools and resources to help operationalize health equity</b>	The <a href="#">Local and Regional Government Alliance on Race &amp; Equity (GARE)</a> has practical toolkits on topics from establishing a “racial equity core team” to identifying equity-focused metrics. While geared toward local government, these resources and tools can be adapted for many types of organizations.

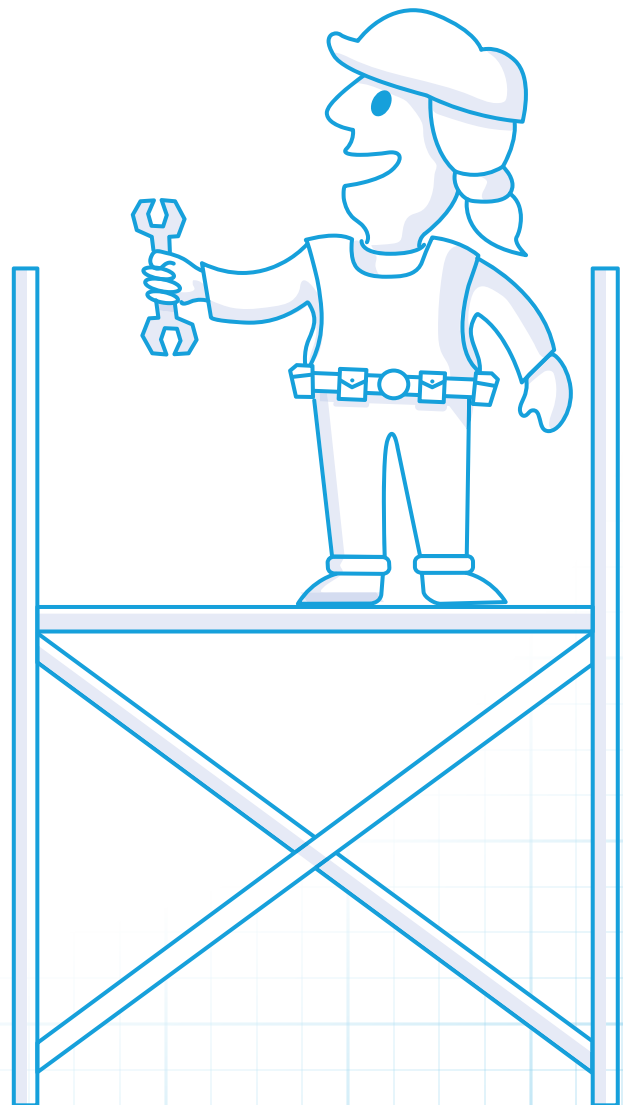
## 1.2 Identify root causes

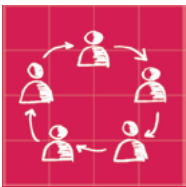
People come to collaborative partnerships with their own perspectives on what is driving inequities in their community. These perspectives are informed by many things, including an individual's first-hand experiences (sometimes referred to as "lived experiences"), their organization's mission and vision, and even the way the issue is framed in the news or popular media.

When partners come together to tackle big issues, it can be tempting to jump straight into problem-solving mode. However, it's critical to first get on the same page about the problem being addressed and the underlying factors — or "root causes" — that contribute to it. When teams do not create space to have these discussions, some people may incorrectly assume that others are approaching the issue in the same way. If partners have vastly different perspectives about the root causes of the issue, they are unlikely to be on the same page about potential solutions.

A simple framework for partners to engage in this discussion is a root cause analysis. This activity prompts partners to start with an issue they wish to address and to work backwards, brainstorming reasons why that problem exists. This activity can:

- ✓ Help build a shared understanding of a problem
- ✓ Draw attention to systemic factors that contribute to or maintain problems
- ✓ Identify a wide range of possible intervention points
- ✓ Identify intervention points that may lead to more sustainable solutions





# Collaborative Activities



## Upstream ROOT CAUSE ANALYSIS



### USE THIS TOOL...

...to uncover the root cause of a challenging problem in the community



**DURATION**  
30 minutes

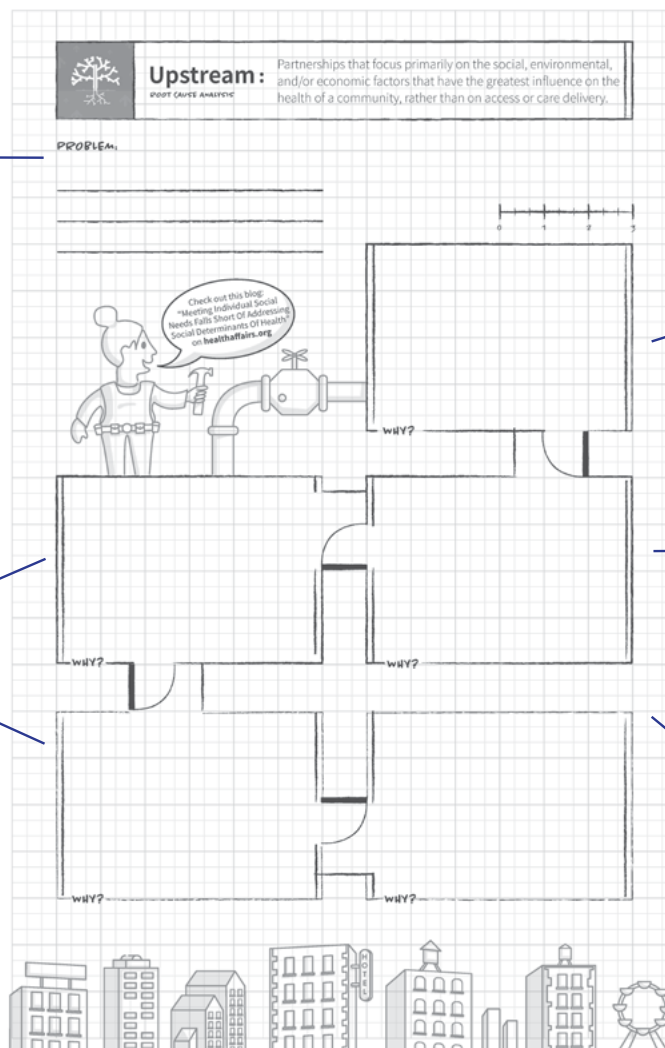
Now, let's take a step back. To build an exciting future, you will need to address problems that don't have simple solutions – and go upstream to find root causes and solve them.

### PROBLEM

To begin, state the core health issue your coalition is addressing, without reference to the known or assumed causes. We will dig into causes below.

### WHY (3 & 4)

In the **third** and **fourth** boxes, continue digging deeper, to find the cause of each previous cause. Keep asking "why?"



### WHY (1)

In the **first** box, state an immediate, proximate reason (aka "why") the stated problem occurs.

### WHY (2)

In the **second** box, state the contributing factor for the issue that precedes it.

### WHY (5)

Continue this process to a fifth level of causation, working upstream. Land on a root cause that your project should address.



In this "5 Whys" exercise, be careful not to skip between different factors, but instead dig into a single chain of causation. The causes listed here should follow logically after each other – so clearly that a reader could go in reverse order and realize that "Item 5 caused item 4, which caused 3, which caused 2, which caused 1, which is the proximate cause of the problem we've set out to solve. So, let's work on Item 5! That seems to be the root."



# Collaborative Activities



## Upstream:

ROOT CAUSE ANALYSIS

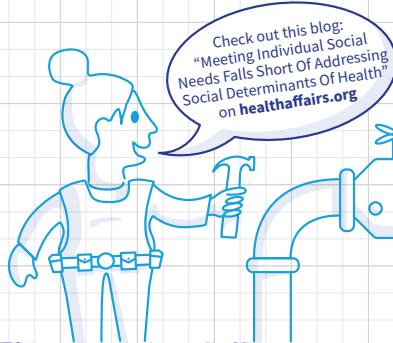
Partnerships that focus primarily on the social, environmental, and/or economic factors that have the greatest influence on the health of a community, rather than on access or care delivery.

PROBLEM:

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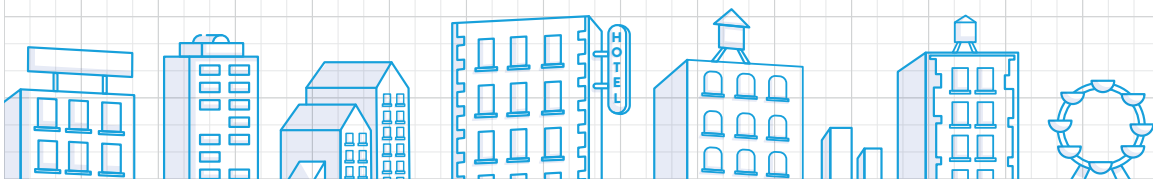
WHY?

WHY?

WHY?

WHY?

WHY?





## Dive Deeper: Root Causes

**Understand and identify root causes of inequities**

This [website](#) from County Health Rankings & Roadmaps includes a facilitation guide that walks readers through the process of exploring root causes.

**Learn how social services and the social determinants of health are related**

Read the [Centers for Disease Control and Prevention's FAQ](#) on why addressing the role of social determinants of health is important, or this [Health Affairs blog post](#) about why medical care alone cannot improve community health.

Watch a [5-minute video](#) of Dr. Camara Jones explaining how social determinants of health make some more likely than others to fall off the "cliff of good health."

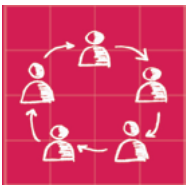
View [this framework](#) highlighting upstream social determinants of health created by Bay Area Regional Health Inequities Initiative, a BUILD awardee.

**Explore five fundamental drivers of health inequities**

This [framework](#) from ChangeLab Solutions highlights strategies to address upstream drivers of health inequities: structural discrimination, income inequality and poverty, disparities in opportunity, disparities in political power, and governance that limits meaningful participation.

### 1.3 Assess community assets

While a root cause analysis can shed light on systemic factors that have created or maintained challenges in the community, it is equally important to keep in mind that communities are so much more than problems to be solved. Rather than focusing on "what's wrong here?" take the time to ask the inverse: "what's good here?" Communities are made up of vibrant individuals with unique talents, strengths, and ambitions; physical spaces to gather with community or connect with the outdoors; organizations and businesses that serve various needs; unique history, culture, and traditions; deep relationships; and so much more. What assets exist in your community? How can you leverage these strengths to bring about change?



# Collaborative Activities

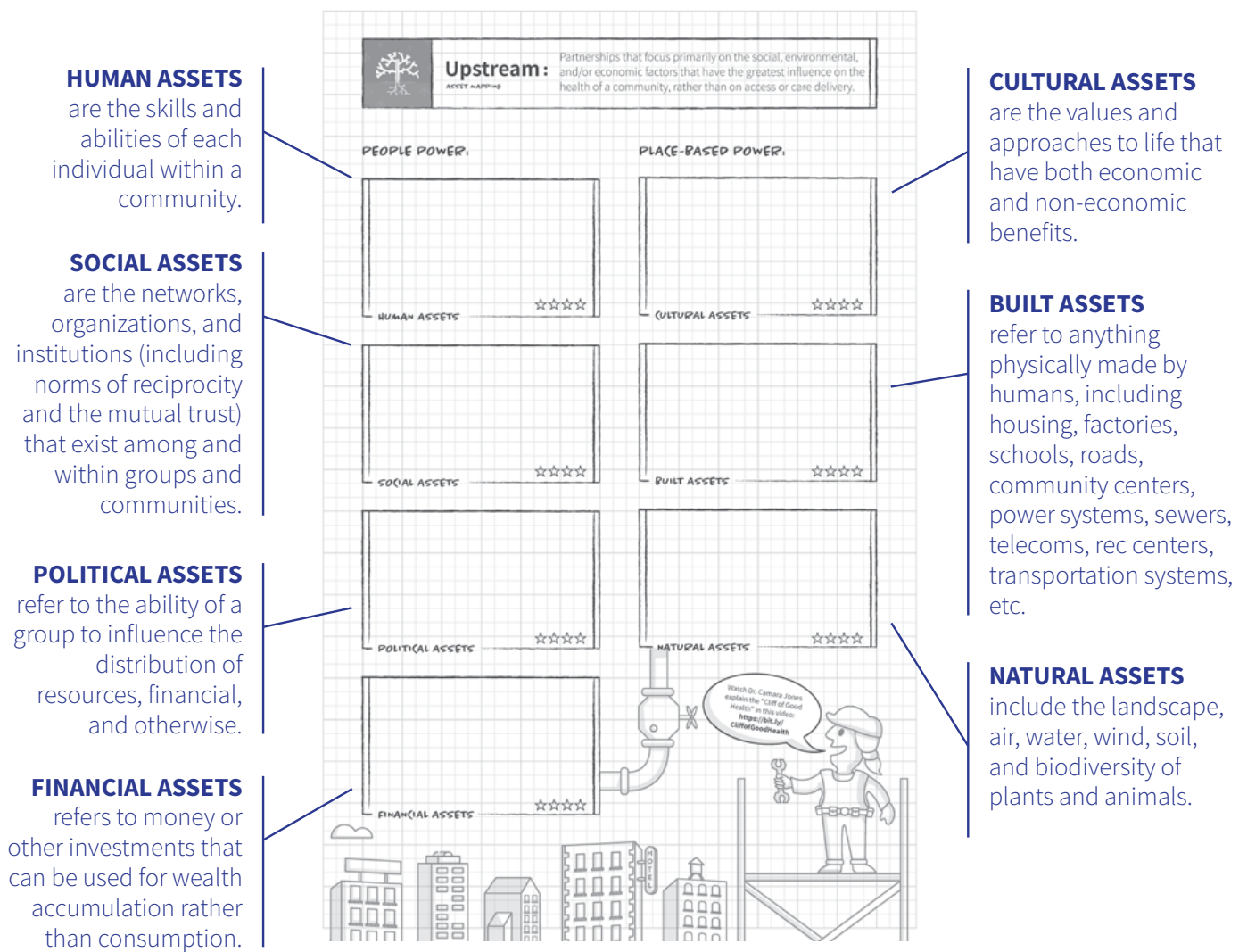


## Upstream ASSET MAPPING

**USE THIS TOOL...**  
...to map and rate the strength of different assets in your community.

**DURATION**  
35 minutes

To address root causes in an effective way, your coalition will need to draw upon people-based power and place-based power – the assets that comprise your community’s capabilities. Let’s explore them here.



After mapping the assets that exist in your community, don't forget to rate each type of asset on a 4-star scale. This is your space to express how abundant or lacking these assets are in your community. Do you have ample social assets and few political assets? Reflect that in the star rating. A robust built environment that pushes out the natural environment? Tell that part of the story as well.



# Collaborative Activities



## Upstream:

ASSET MAPPING

Partnerships that focus primarily on the social, environmental, and/or economic factors that have the greatest influence on the health of a community, rather than on access or care delivery.

### PEOPLE POWER:

HUMAN ASSETS ☆☆☆☆

SOCIAL ASSETS ☆☆☆☆

POLITICAL ASSETS ☆☆☆☆

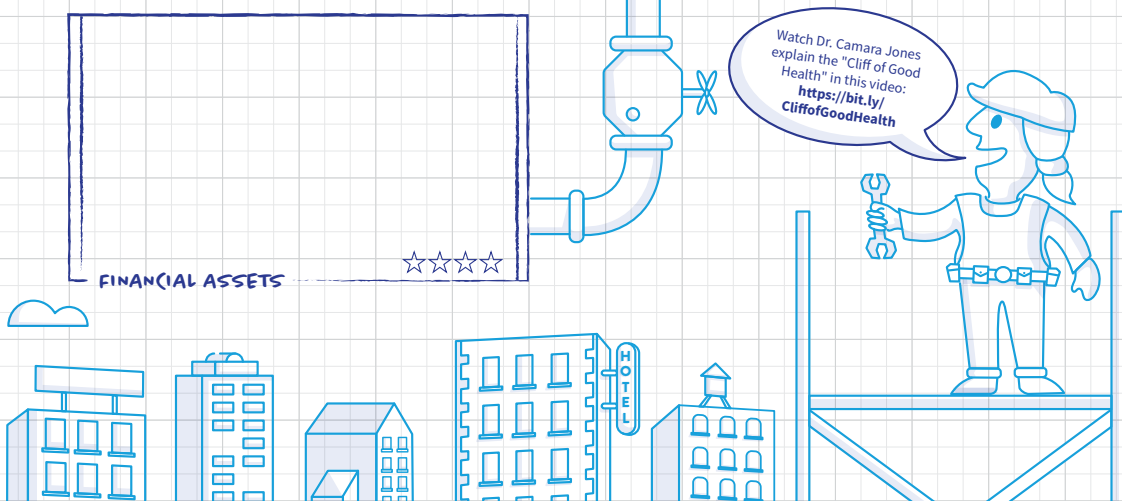
FINANCIAL ASSETS ☆☆☆☆

### PLACE-BASED POWER:

CULTURAL ASSETS ☆☆☆☆

BUILT ASSETS ☆☆☆☆

NATURAL ASSETS ☆☆☆☆







## Dive Deeper: Community Assets

### Learn about asset framing

Trabian Shorters, founding CEO of BMe Community, discusses the power of asset framing in the article [“Asset Framing: The Other Side of the Story”](#) and in [this series of brief videos](#).

### Conduct an asset mapping activity

The Community Tool Box includes a [section](#) on identifying community assets and resources with detailed guidance, examples, and checklists to help you conduct this activity with your partners. Alternatively, the [Toolkit for Stakeholder Asset Mapping](#) from the National Center on Advancing Person-Centered Practices and Systems includes guidance and facilitator tools for asset mapping.

### Explore a round-up of resources on asset-based community development

The Asset-Based Community Development Institute at DePaul University offers a [virtual library](#) of tools and resources for community changemakers, from videos and podcasts to online tools.

## 1.4 Develop a bold vision

The process of exploring the foundational concepts in this section — equity, root causes, and community assets — sets the stage for developing a bold vision for success. As a team, what do you want to accomplish together? What does success look like to you?

This vision is what the work of BUILD is all about! Embrace the opportunity to imagine a more equitable future together. What would that look like in your community? What would that feel like? What would be different?

Your vision statement can and should be bold. As you craft this vision together, consider:

- ✓ **Equity** — How does this vision address the needs of those who have historically been harmed by inequitable systems?
- ✓ **Root Causes** — Consider the upstream factors you identified as contributing to the issues you’re addressing. Does your vision reflect your team’s commitment to address one or more upstream factors? If not, are there opportunities to push yourselves and your vision further upstream?
- ✓ **Community assets** — Does your vision reflect a commitment to build upon the existing strengths in the community?



# Collaborative Activities



## **Bold** LOOKING TO THE FUTURE



### USE THIS TOOL...

...in the early stages of a partnership, when charting a course together.



### DURATION

25 to 35 minutes

Let's **start with the end in mind** and imagine an exciting future in which your partnership has made news. What will be the headline about your success? What outcomes will you have achieved?

### COVER ILLUSTRATION

In this newspaper feature, how might the project's impact be illustrated? Show how the community looks 5 years later – this could take the form of a streetscape, a portrait, or even a community celebration.

### OUTCOMES

How has this project created sustainable, long-term solutions to support community health? Use numbers to bring this success story to life.

### HEADLINE

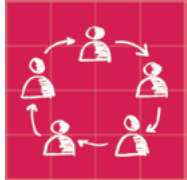
In 5 years, what might a newspaper headline say about your project's impact on the community? Feel free to use numbers and get specific.

### TEAM NAME

Write your team name (or create one for the first time!)



In this exercise, be careful not to be too clinical or technical. Write your headline and draft your illustration with a public audience in mind. Consider: what would resonate in a magazine or newspaper that folks might read in your community? Put this story in accessible terms that would interest the people you hope to work with.



# Collaborative Activities



**Bold:**  
LOOKING TO  
THE FUTURE

Partnerships that aspire to advance racial justice by driving fundamental shifts in policy, regulation, and/or sustainability that support systems-level changes through a lens of justice, equity, diversity, and inclusion.

HEADLINE

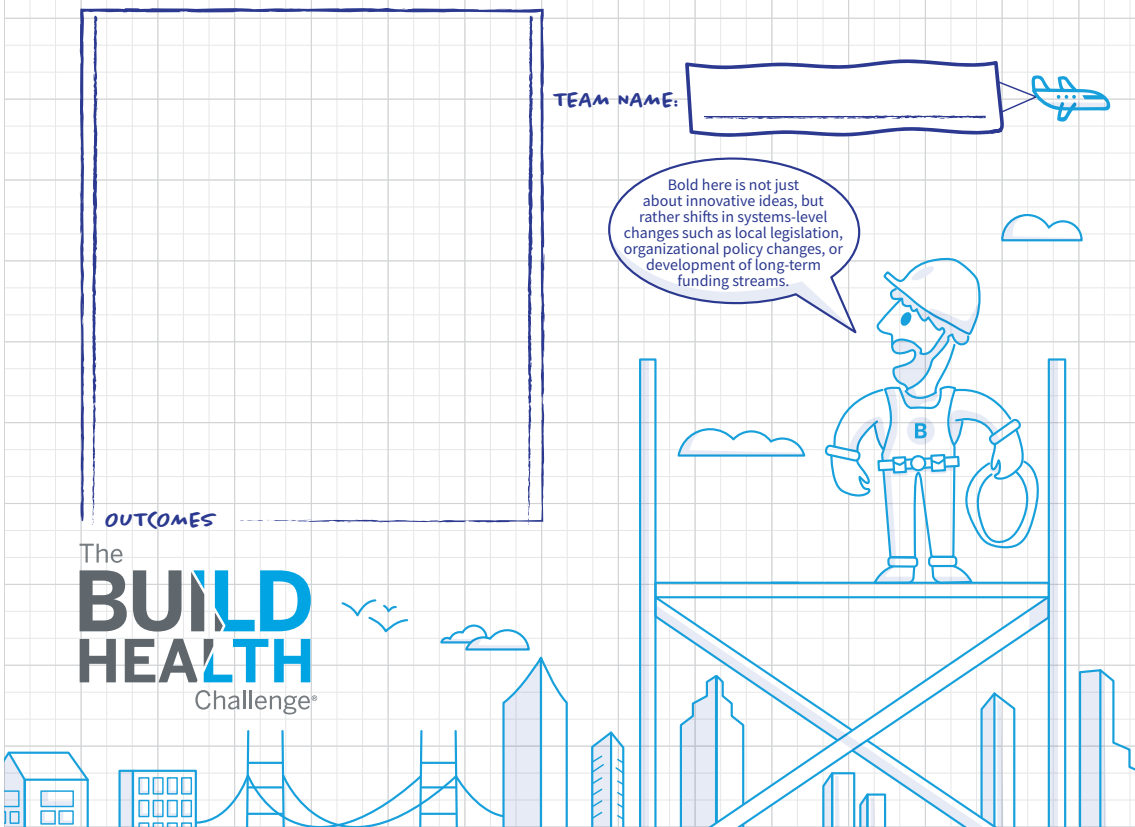
COVER ILLUSTRATION

TEAM NAME:

Bold here is not just about innovative ideas, but rather shifts in systems-level changes such as local legislation, organizational policy changes, or development of long-term funding streams.

OUTCOMES

The  
**BUILD  
HEALTH**  
Challenge®





# Collaborative Activities



## Bold IMPACT



### USE THIS TOOL...

right after completing the first Bold tool, as a way of adding detail.



### DURATION

25 to 35 minutes

After showing what your partnership will one day make news for doing, zoom in and show how you will achieve these results. Use the past tense, as though you're writing in 2030 and telling a success story.

### IMPACT

Let's add some detail, beyond the initial numbers from the previous exercise. How many lives have been impacted by your work? Which gaps have narrowed (or even been closed) in your community? Be as specific as you like when crafting this vision of future success.

### PARTNERSHIP

Cast your mind forward to the moment when you look back on this effort with pride. What aspects of the partnership powered your success? How has engaging as a diverse team assisted your work?

### SYSTEMIC INEQUITIES

In this space, think not only about society-wide inequities that affect many communities but also about local inequities that may be unique or especially prevalent in your area.

### AWARD

Give your team a hypothetical award! At the end of this journey, what will your coalition be known and recognized for?



In this exercise, avoid worrying too much about getting the future story "just right." Many things will happen along the way that will differ from the aspirational story you tell in this space, so feel free to get creative, be experimental, or even be proven wrong. It's much more important to cast your mind forward and be inspired than to haggle over every detail.



# Collaborative Activities



## **Bold:** IMPACT

Partnerships that aspire to advance racial justice by driving fundamental shifts in policy, regulation, and/or sustainability that support systems-level changes through a lens of justice, equity, diversity, and inclusion.

WHAT IMPACT HAS YOUR TEAM ACHIEVED?

WHAT ARE THE SYSTEMIC INEQUITIES YOUR COMMUNITY HAS TO NAVIGATE?

HOW WILL YOU MEASURE THE PROGRESS YOUR TEAM MAKES?

HOW HAS WORKING AS A PARTNERSHIP BEEN BENEFICIAL TO YOUR COLLABORATIVE'S WORK?

1ST PLACE FOR

Looking for more on systems change? Check out BUILD's resource, Community Approaches to Systems Change. <https://buildhealthchallenge.org/resources/community-approaches-to-system-change/>

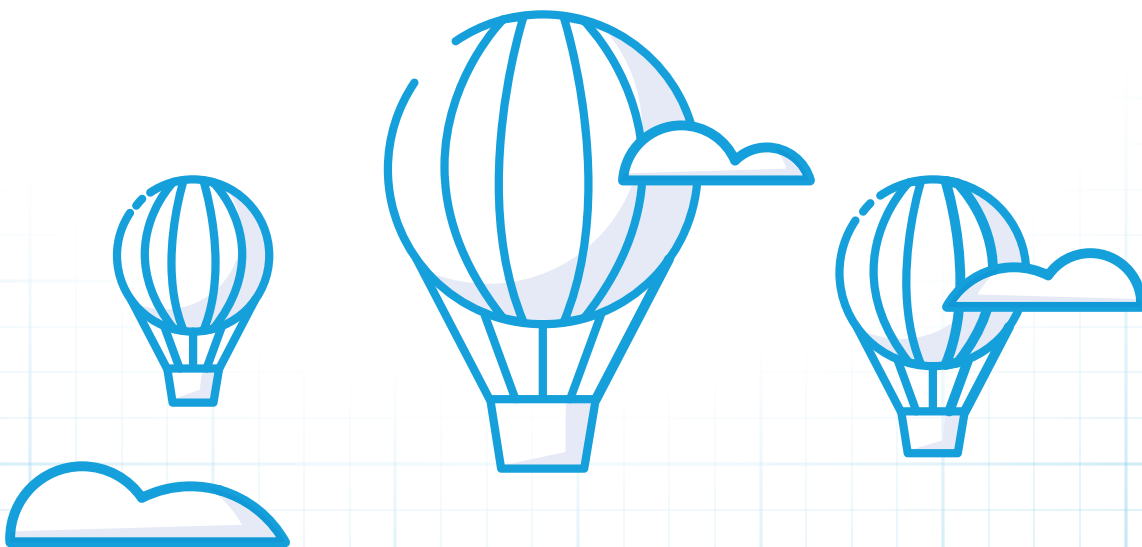


# Section 2.

## BUILD Relationships

“If you want  
to go fast,  
go alone.  
If you want  
to go far,  
go together.”

- African Proverb



**T**here's a saying about relationships: "If you want to go fast, go alone. If you want to go far, go together." Strong relationships are critical to the success of BUILD initiatives, but they do not necessarily form automatically. All partners must invest time, energy, and care into nurturing relationships for the long term. This section introduces information to help you:

- ✓ Learn who's who in a BUILD partnership
- ✓ Set the tone for your collaborative partnership
- ✓ Connect with your community



## Essential BUILD Reading

Learn how past BUILD sites cultivated cross-sector partnerships in BUILD's [Keys to Collaboration Report](#).

Read [Listening, Learning, and Leading Together](#) for insights from BUILD awardees and funders on developing cross-sector partnerships, centering racial equity, and engaging community members with lived experience.

Understand the perspective hospital and health system representatives bring to BUILD partnerships. In [Conversations with Hospital and Health System Executives: How Hospitals and Health Systems Can Move Upstream to Improve Community Health](#), healthcare partners share their motivations for participating and the nontraditional approaches they are taking to improving community health.

Learn more about what role health plans can play in driving sustainable solutions to health at the local level. [Forging a New Path: BUILD's Health Plan Partners](#) explores opportunities for alignment, as well as the factors that can accelerate or impede their collaborative work.

## 2.1 Learn who's who in a BUILD partnership

BUILD teams take on complex issues — from racial disparities in maternal and child health outcomes to inequitable access to safe, affordable housing. BUILD was designed with the understanding that no single organization or sector can address these issues on their own. Bold, upstream change requires diverse partners to work together in new ways.

A cross-sector partnership between a community-based organization, local health department, healthcare organization, and community residents forms the scaffolding of every BUILD team. While these specific entities are expected to play key roles, you may also find it beneficial to include additional partners, such as local businesses, universities, or other government agencies. Each partner brings diverse perspectives, expertise, resources, and connections to the table. On the flip side, each partner must also navigate unique contexts, structural constraints, and lines of accountability.

### COMMUNITY-BASED ORGANIZATIONS

Community-based organizations (CBOs) are as diverse as the communities they serve. Broadly speaking, CBOs provide services, programs, education, advocacy, and other support to specific communities. A CBO may focus on a specific geographic population, racial or ethnic group, socioeconomic demographic, issue area, or some combination of the above.

BUILD encourages involvement from organizations that are not just community-based but *community-driven*. A community-driven organization is rooted in, reflective of, and responsive to the community it serves. Rather than doing things *to* and *for* community residents, it partners *with* them and ensures residents with lived experience have meaningful opportunities to shape the organization's priorities and decisions.

In partnerships funded by the BUILD Health Challenge, the community-based organization is designated the "lead" partner. This is by design. BUILD's funding structure is set up to invest resources directly in CBOs, strengthen economic parity across partners, and build community power and capacity.





## Dive Deeper: CBOs

### Learn about your CBO partner's mission and work

Exploring an organization's website is a great way to learn about their work, but note that it takes time and resources to maintain a website. Smaller, grassroots, or developing organizations may have limited or no online presence, so a conversation may be the best way to learn more. Here are some questions to guide your curiosity:

- What is the mission of the organization, and how did it come about?
- When did the organization form, and how many staff work there?
- What key values drive the organization's work?
- What core activities or services does it provide?
- Who is its primary audience, and what is the geographic reach of its work?
- How does the staff and/or board reflect and engage with the community it serves?

### Read examples of the power of CBOs in action

[This report](#) describes how California-based CBOs stepped up to support communities of color in response to COVID-19.

## HEALTH DEPARTMENTS

Local health departments are on the front lines of safeguarding public health. Public health staff assess and monitor population health, investigate and diagnose health hazards, and educate the public on important health issues. Staff can support collaborative efforts in a number of ways. Some examples include collecting and analyzing population-level data, developing and implementing plans and policies, serving as neutral conveners and facilitators, providing education and training opportunities, conducting community outreach, and so much more.

Keep in mind: there are over 3,000 local health departments in the United States, and there is no one-size-fits-all template. These agencies vary greatly in size, structure, geographic reach, level of authority, and relationship to local and state governments. Therefore, it's important to learn about the structure of *your* health department and to understand where in the organization your specific partner is situated.



## Dive Deeper: Health Departments

### Get to know the field of public health in general

Public Health Reaching Across Sectors ([PHRASES](#)) breaks down the role of public health using clear, easy-to-understand messages. If you're wondering "what *exactly* does public health do" or "how is public health different from health care," [this FAQ](#) is a great place to learn more.

This [Public Health 101](#) resource from Human Impact Partners is geared towards community organizers. It explains what public health is, describes how organizers can partner with public health entities, and defines key public health lingo.

### Get to know how health departments operate

[The National Association of County and City Health Officials](#) (NACCHO) is a helpful starting point to orient yourself to the role of local health departments. Read its latest [national profile study](#) for an in-depth view into what this sector does.

### Get to know the priorities of *your* health department

[Look up your local health department here](#), and spend some time browsing its website to learn more about how it is structured. Many health departments engage in extensive assessment and planning efforts, and the results are often published in a Community Health Assessment and/or Community Health Improvement Plan. These documents provide valuable information about the health trends in your community, and the specific issues and actions your local health department is prioritizing.

## HEALTHCARE ORGANIZATIONS

The healthcare partner in a BUILD collaborative may be represented by a hospital, health system, or health plan provider. When many people think about the role of health care, they typically think of an individual provider — like a doctor or nurse — interacting with a patient. That is certainly a central component of what this sector does, but healthcare organizations are increasingly getting involved in *upstream* initiatives. In other words, these organizations are supporting efforts that aim to *prevent* patients from ending up in a doctor’s office or emergency room. For example, nonprofit hospitals are required to provide “community benefits” to maintain their federal tax-exempt status. Some pioneering health systems are using this mandate to spearhead bold initiatives that tackle the root causes of poor health, such as investing in affordable housing or healthy food businesses.



## Dive Deeper: Healthcare Organizations

**Learn the basics about hospital community benefits**

Review [this fact sheet](#) from ChangeLab Solutions and Community Catalyst’s [compilation](#) of key resources.

**Learn how hospitals can develop an investment strategy that prioritizes community health**

[Investing in Community Health: A Toolkit for Hospitals](#) is designed to help healthcare organizations look at their resources differently, expand their efforts to support their communities, and maximize their impact on community health by harnessing the power of their investment capital.

**Get inspired by what health systems are doing**

The Hospitals Aligned for Healthy Communities [toolkit series](#) includes a collection of resources covering topics such as inclusive hiring, impact purchasing, and place-based investing.

The Moving Healthcare Upstream initiative has a [robust library](#) of tools and resources on healthcare partnerships to support community health.

This [resource guide](#) from the Center for Community Investment includes case studies of healthcare investments in housing, food systems, and other community resources.

**Make the business case for investing in community health and equity**

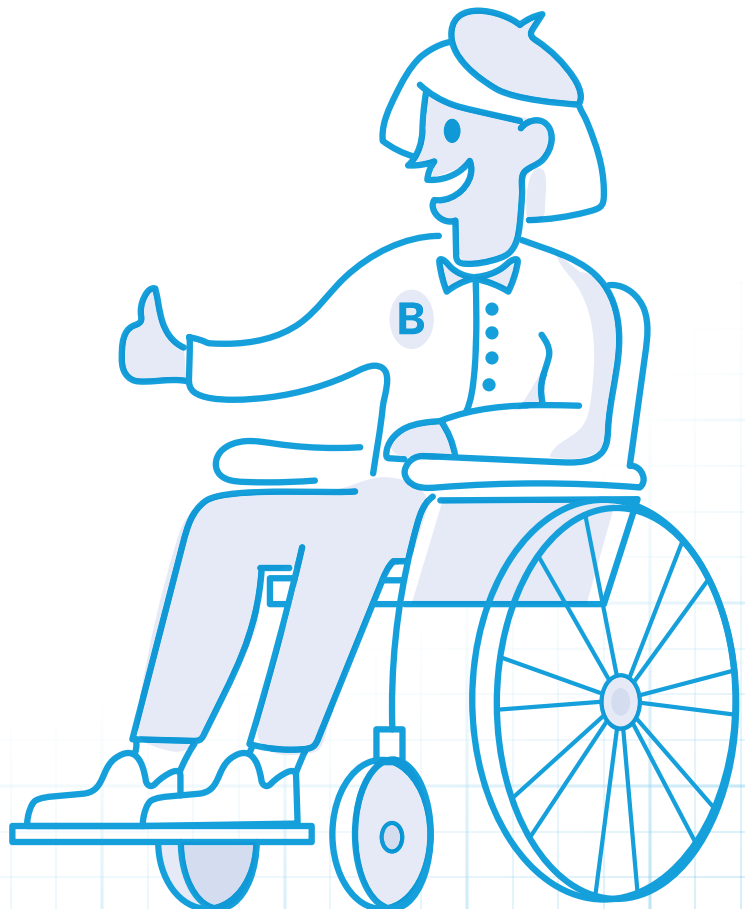
The Commonwealth Fund’s [Return on Investment \(ROI\) Calculator](#) can help community-based organizations and their health system partners structure sustainable financial arrangements to support upstream initiatives.

Read the [Business Case for Racial Equity](#), from the W.K. Kellogg Foundation and Altarum.

## COMMUNITY RESIDENTS

Community residents are at the heart of BUILD. BUILD has always prioritized community-driven change, with community-based organizations serving as liaisons to residents. Yet BUILD's own equity journey has evolved: over the first three cohorts, the initiative recognized the need to embed *direct* community representation into the core structure of each partnership. Many BUILD partnerships have done this by hiring community members to fill key staff positions. Others have established community advisory teams or committees that collectively set the direction of the partnerships' work. While direct resident engagement may look different in each community, the intent is to prioritize residents who live in the area, have lived experience related to the issue being addressed, and are interested in lending their expertise to co-design a solution.

Too often, those who have the power to set agendas, make decisions, and direct resources are far removed from the consequences of those decisions. They may not directly experience the unintended consequences — or missed opportunities — those decisions represent. Individuals who have been directly impacted by harmful systems bring necessary insight into what's needed, what works, and how people are already navigating local issues. Partnering with community residents can help redistribute power to those most affected by the issues at hand.





# Collaborative Activities



## Integrated PARTNERS AT THE TABLE



### USE THIS TOOL...

...to better understand each other as a team; to align on the team's values



### DURATION

30 minutes

Your team has a lot of building to do, and it will be important to integrate deeply with each other's work. **Use this exercise as an inventory of your team**—whether it is just forming or needs to carefully integrate new members.

### NAME

This will be a straightforward exercise! For each of these six boxes, list a person who is already involved – or a persona who needs to be represented but isn't yet.

### AFFILIATION POWER

What sort of power or passion does their affiliation bring to the effort? This could mean the organization they work for or the group they represent.

### ROLE

What role will each person play in the coalition?

### PERSONAL POWER

What sort of power or passion do they bring to the effort? Why are they here? Why do they care about this work?

### VALUES

Think as a team about the values that will unite you – the values that will keep the group aligned and motivated when the going gets tough.

**Integrated** PARTNERS AT THE TABLE  
Partnerships that align the practices and perspectives of communities, health systems, and public health under a shared vision, establishing new roles while continuing to draw upon the strengths of each partner.

NAME  
ROLE  
AFFILIATION POWER/PASSION  
PERSONAL POWER/PASSION

NAME  
ROLE  
AFFILIATION POWER/PASSION  
PERSONAL POWER/PASSION

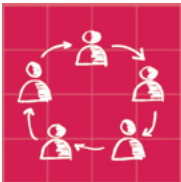
NAME  
ROLE  
AFFILIATION POWER/PASSION  
PERSONAL POWER/PASSION

NAME  
ROLE  
AFFILIATION POWER/PASSION  
PERSONAL POWER/PASSION

VALUES



In this exercise, make sure the team isn't simply listing each person's job title from their home organization as their "role." We're curious in this space about the role they will play in the coalition. Are they the convener? The fundraiser? The consensus builder? Whatever you will look to someone for – that is their role.



# Collaborative Activities



## Integrated:

**PARTNERS AT THE TABLE**

Partnerships that align the practices and perspectives of communities, health systems, and public health under a shared vision, establishing new roles while continuing to draw upon the strengths of each partner.

NAME
ROLE
AFFILIATION POWER/PASSION
PERSONAL POWER/PASSION

NAME
ROLE
AFFILIATION POWER/PASSION
PERSONAL POWER/PASSION

NAME
ROLE
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PERSONAL POWER/PASSION

NAME
ROLE
AFFILIATION POWER/PASSION
PERSONAL POWER/PASSION

## VALUES




## 2.2 Set the tone for your collaborative partnership

Understanding what each sector brings to the table is necessary, yet it is the *people* within those sectors who drive the work forward. Organizational practices, local policies, and inequitable systems do not shift on their own. They shift because people prioritize and implement new ways of acting together.

With that in mind, get to know your people! This is a team with whom you will co-design a bold future, celebrate wins, and navigate the roadblocks that you will inevitably face. You will be called upon to support each other, hold each other accountable, and extend grace along the way.

Your partnership likely includes individuals you already know; you might even have long-standing relationships with some. These relationships are incredibly valuable and can set a strong foundation for a successful partnership. At the same time, take care not to default to the relationships and individuals that are most familiar to you. Invest equally in getting to know partners who are new to you and making space for everyone to build a sense of collective ownership.

Learn what brings each partner to the table — as both a representative of their respective organization and as an individual. Remember that relationships aren't built with a single meeting. They evolve and grow over time, so prioritize relationship-building throughout the initiative. Doing so is not a distraction from the work; it is a fundamental part of it.

Sometimes, participants in collaborative efforts are laser-focused on deliverables and workplans — at the expense of the experiences of the people involved in that work. *What* you work on matters, and *how* you do it matters too. Shifting inequitable systems is a long-term effort. Take the time to nurture a collaborative partnership — and an ethos of meeting and gathering — that people will want to stick with for the long term.



## Start the Conversation: Setting the tone for partnership

**D**eciding to work together is the first step in a process of defining, implementing, and growing a relationship. Setting goals and ground rules creates a culture that allows all partners to feel visible in their contributions, valued for their insights, and invested in the collaboration. These good habits can sustain partnerships when challenges arise difficult conversations are needed.

**Outcome:** Through this conversation, teams can identify commonalities and differences in how you might structure your collaboration to set the stage for planning logistics.

### Use the following prompts for a group discussion:

- ✓ Think about the best meeting you've attended. What made it great?
- ✓ Think about an unpleasant meeting you attended. What made it so?
- ✓ What kind of partnership do we want to cultivate?
- ✓ What do we want the experience of being part of this effort to feel like?
- ✓ How do you best process new information?
- ✓ How do we want to show up for each other in this space?

### Reflect together:

- ✓ Where are similarities among the group's responses?
- ✓ Can these ideas serve as a foundation to set up structures and guidelines for your collaboration?
- ✓ How can the group memorialize its agreements to support buy-in and facilitate onboarding of new staff and partners?





## Start the Conversation: Setting the tone for partnership

### Revisit this conversation:

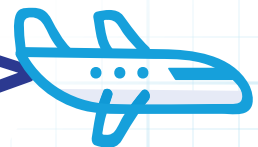
Tending to your partnership is not something you do once at the start of an initiative. It is ongoing. While there are formal tools teams can use to assess their partnerships, here are some questions you can use to check in along the way:

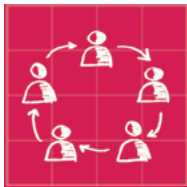
- ✓ Is the frequency and pacing of our meetings still working for us?
- ✓ Do we feel like we are communicating the right kind and level of information to ensure everyone is on the same page? Do people need something more or different?
- ✓ How are we holding one another accountable?
- ✓ How have our recent meetings resonated? Are we leaving this time together feeling energized? Inspired? Drained?
- ✓ Who haven't we heard from in a while? Is it time to check in?
- ✓ Who is missing from our partnership?
- ✓ Are we creating space for joy and human connection, in addition to getting to business?
- ✓ Are we creating space to celebrate wins along the way, and to imagine what more we might do together?

As an individual, take a moment to reflect on your own:

What do you appreciate about your partners?

If you haven't told them directly, let them know! A quick email or acknowledgment goes a long way..





# Collaborative Activities



## Integrated POWER



### USE THIS TOOL...

To begin integrating the people shown in the previous exercise into a team



### DURATION

35 minutes

After listing and describing the key people in your coalition, it's time to consider ways of working. How will this team meet, work, share responsibility, leverage power, and resolve imbalances?

### POWER

At the top of this exercise, think in general terms about various partnerships you have seen or been part of. What kinds of power are often present?

### DYNAMICS

This can be an awkward conversation, but it's an important one. Be clear and frank in this section.

### RESPONSIBILITY

Try to be specific in this section. In what areas will the team share responsibility, and how will you maintain the balance?

### DECISIONS

There are many options for decision-making. Will your team choose consensus, democratic vote, or some other method? Whatever you choose, be intentional.

### ADDRESSING

With the imbalances in mind, explore how this group might address the differences and make progress.

### LEVERAGE

In this section, don't be afraid to ask coalition partners to step up and leverage the power of their position or organization.



In this exercise, there is a risk of being too general or not making clear requests of each other. If it's important that one organization changes the way it relates to another, this is the space to discuss that. If another group needs to bring its financial or political assets to the table, make that request here – in service of the group's larger mission.



# Collaborative Activities

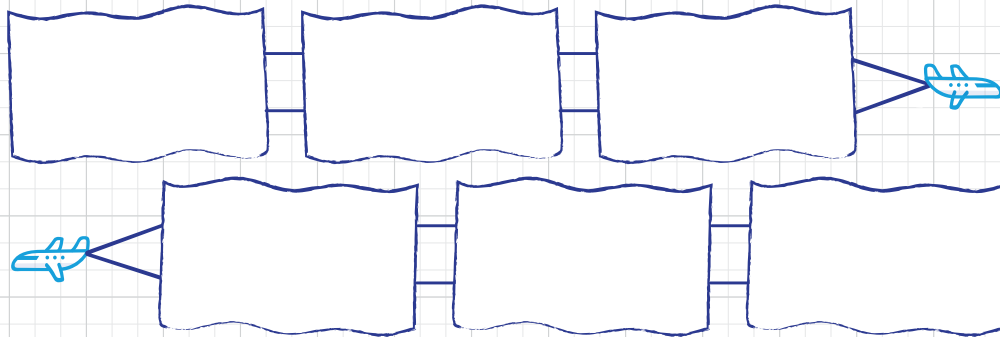


## Integrated:

POWER

Partnerships that align the practices and perspectives of communities, health systems, and public health under a shared vision, establishing new roles while continuing to draw upon the strengths of each partner.

IDENTIFY DIFFERENT TYPES OF POWER THAT EXIST IN PARTNERSHIPS:



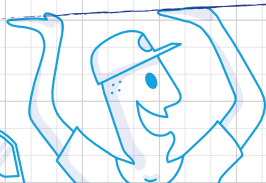
HOW WILL WE MAKE DECISIONS AND ENSURE ACCOUNTABILITY?

WHAT POWER DYNAMICS OR IMBALANCES SHOULD WE BE MINDFUL OF?

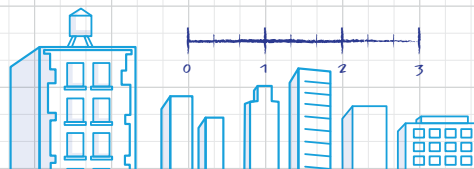
HOW WILL WE WORK TO ADDRESS THESE IMBALANCES?

HOW WILL WE SHARE RESPONSIBILITY IN THIS EFFORT?

HOW CAN WE MAKE THE MOST OF THE POWER AT THIS TABLE?



Looking for ideas on how to facilitate effective and inclusive virtual gatherings? Check out: <https://bit.ly/VirtualFacilitation>



# Establishing Meeting Agreements

Having an intentional conversation using the prompts above is valuable in and of itself. Reflecting on these questions together invites people to think about the process of working together, and not just the external deliverables. Teams can go a step further and develop a set of shared meeting agreements. Here is one example of what group agreements could look like, from the third BUILD cohort:

1. **Lean into discomfort and each other.** Growing pains are a normal and necessary part of learning and change. The goal is not to always agree, but to grow. We are allies in this work.
2. **Assume good intentions from each other — but understand the difference between intent and impact.** Acknowledge the existence of multiple truths.
3. **Create space for each other and avoid interrupting those who are speaking.** Give priority to those who haven't spoken.
4. **Listen actively, without distractions.** Participate fully. Be conscious of body language and nonverbal responses.
5. **Do the work of understanding what kind of power dynamics we individually bring into the room.**
6. **Be thoughtful about language.** Use people-first language and preferred terminology. Speak from personal experience and avoid generalizations.
7. **Keep it confidential.**
8. **Celebrate joy.**

You may also want to incorporate specific practices into your collaborative meetings. Some examples are included below, but feel free to get creative.

- Open every meeting with a check-in. One simple but powerful check-in question is "What are you carrying with you today?" Creating space for each participant to acknowledge something that's on their mind — the good and the bad — can help individuals be more present.
- Close every meeting with a song. Invite everyone to nominate a favorite and create a playlist. [Here's an example](#) from the third BUILD cohort.
- Carve out time to celebrate wins at every meeting — no matter how big or small.
- Have someone lead the group in light stretching, a brief meditation, or a deep-breathing exercise.



## Dive Deeper: Relationship Building

**Identify and navigate power dynamics within your team**

In [this article](#), the Interaction Institute for Social Change breaks down what power is, why it matters, and how to attend to power dynamics in collaborative spaces. For more in-depth information, see [this toolkit](#).

**Dive into the logistics of structuring collaborative teams and meetings**

The Community Toolbox has training curricula on [developing a team structure and assigning roles](#), along with guidance on [conducting effective meetings and facilitating group discussions](#).

**Create space for human connection**

This [document](#) includes a list of check-in questions and activities to help team members get to know each other as people, not just project partners. Try incorporating a new question at the top of each team meeting; even simple questions can open the door to greater vulnerability, openness, humor, and joy.

**Level-up your group facilitation skills**

Experiment with new ways to spark discussion, brainstorm creatively, and problem-solve as a group. [Liberating Structures](#) and [Gamestorming](#) are two great sources for facilitation ideas.

**Find best practices for virtual connection**


Trainings and resources from [Training for Change](#) can help you host inclusive and effective virtual meetings.

The Movement Netlab Library reviews the pros and cons of dozens of [virtual communication tools and platforms](#) to help you figure out what tools (if any) best fit your needs.

## 2.3 Connect with your community

As discussed in Section 1, community members are a critical part of the BUILD infrastructure and can help ensure priorities and activities are rooted in community experiences, needs, and preferences. However, community engagement extends beyond this core group of staff or advisors. BUILD initiatives are dynamic, and your team will likely interact with different community members at different times, in different ways, and for different purposes. For example, you may be organizing a roundtable for broad community feedback on one day, inviting residents to a celebratory neighborhood event on another day, and figuring out the best way to provide timely information about a critical policy in between. Just like other issues discussed in this workbook, community engagement is not a single, static activity or a standalone category of work.

The Spectrum of Public Participation can help teams conceptualize the different levels at which community engagement can occur. As you move from left to right, this framework describes an increasing level of community participation — and ultimately community ownership.

		INCREASING IMPACT ON THE DECISION 				
		INFORM	CONSULT	INVOLVE	COLLABORATE	EMPOWER
PUBLIC PARTICIPATION GOAL		To provide the public with balanced and objective information to assist them in understanding the problem, alternatives, opportunities and/or solutions.	To obtain public feedback on analysis, alternatives and/or decisions.	To work directly with the public throughout the process to ensure that public concerns and aspirations are consistently understood and considered.	To partner with the public in each aspect of the decision including the development of alternatives and the identification of the preferred solution.	To place final decision making in the hands of the public.
	PROMISE TO THE PUBLIC	We will keep you informed.	We will keep you informed, listen to and acknowledge concerns and aspirations, and provide feedback on how public input influenced the decision.	We will work with you to ensure that your concerns and aspirations are directly reflected in the alternatives developed and provide feedback on how public input influenced the decision.	We will look to you for advice and innovation in formulating solutions and incorporate your advice and recommendations into the decisions to the maximum extent possible.	We will implement what you decide.

Reprinted with permission from the International Association for Public Participation [www.iap2.org](http://www.iap2.org)

Consider the role of community members in a key activity you are engaged in. Where would you place that activity on this framework? Is this where you'd like to be? If the goal is to shift power and ownership to community members who have been traditionally excluded from decision-making processes, how might you adjust your approach to move further along this spectrum?

Use this framework to acknowledge and clearly communicate where on this spectrum a particular activity falls — *even if it's not where you ultimately want to be*. Trust and transparency are key ingredients to strong community relationships. When an organization or initiative frames an opportunity as one of empowerment and ownership, but in practice is only prepared to inform and consult, that trust erodes. Moving towards greater community ownership is a two-way street. It does not just require community members to step up as active participants; it also requires institutions and organizations that have traditionally held power to step back and honor community voices and wisdom.

Trust is built — and can be rebuilt — over time. It is strengthened when partners consistently say what they mean, mean what they say, and follow through on their word.

## CONSIDERATIONS FOR EQUITABLE COMMUNITY ENGAGEMENT

Here are some best practices to guide your community engagement efforts:

### **Design activities that are additive, not extractive**

Who is truly benefiting from your community engagement? If your team or partnership gets more out of the interaction than individual residents do, why is that? Equitable community engagement activities are ones that add to the community — in the form of resources, access to critical information, opportunities for connection and capacity building, and shared power to influence decisions and priorities. Community residents — particularly those who are most impacted by inequitable systems — have many demands on their time. It's important to be thoughtful about what you are asking of the community, and what you are offering in return.

### **Take concrete steps to reduce structural barriers to participation**

Meet people where they are, in places that are comfortable and familiar to them, rather than asking the community to come to you. Consider the location, meeting duration, and time that will allow for the greatest participation by the population you are trying to reach.

Deliver information in the community's preferred language(s). Avoid using jargon or technical terms; the "language" of hospitals, health departments, and CBOs is not always accessible to a broader audience.

If you are asking community members to contribute their time and expertise, compensate them as you would any other expert or consultant. In addition to paying community members for their expertise, consider additional supports including childcare, transportation stipends, and food.



**Acknowledge how past interactions may influence the present-day dynamic**

BUILD initiatives and partnerships do not occur in a vacuum. There may be a longstanding history of trust — or distrust — that exists between the community and an institution. Bridges to the community can be built when this history is acknowledged, not ignored. Collaborative efforts that are truly community-driven provide an opportunity to repair trust, especially when organizational leaders authentically acknowledge past harms and demonstrate what will be different moving forward. See an example of how a health system acknowledged its racially discriminatory past [here](#), featuring a BUILD community from Greensboro, NC.

**Respect local norms and traditions**

When engaging a specific population as an outsider, cultural humility is critical. Partnering with an individual or organization that is embedded in the community can help broker new relationships. Be mindful of norms and traditions — whether that involves taking specific dietary restrictions into account or avoiding events on religious or other culturally significant holidays.

**Follow up in a timely manner**

Community engagement is not a one-time event; it's an ongoing relationship that can build trust over time. Maintain relationships even after an engagement or activity comes to an end. Send a personal follow-up note of appreciation to thank someone for their time; share a summary of outcomes; invite residents to stay in touch and reach out with questions, providing a specific point of contact. If information or feedback was gathered, be transparent about how that feedback will be incorporated, what the next steps are, and how you will keep individuals informed along the way.



## Start the Conversation: Community engagement considerations

**C**ommunity engagement is a term that embraces a variety of tactics, styles, and models for working within and with our communities. Determining the type and degree of community member involvement can allow your team to embed opportunities and commitments early on — and to grow engagement throughout the course of your work together.

**Outcome:** Through this conversation, teams can identify actions to strengthen community engagement practices.

**Select a specific effort or activity to focus on, and use the following prompts for a group discussion:**

- ✓ Where on the spectrum of public participation does this activity fall, and is it where we want to be?
- ✓ Is there an opportunity to adjust our approach to facilitate a deeper level of community empowerment? What would it take to do that?
- ✓ What steps are we taking to clearly communicate the purpose and value of this activity to community residents?
- ✓ How will residents benefit from engaging in this activity?
- ✓ Does this activity run the risk of being extractive, without adding back to the community? If so, how can we mitigate this?
- ✓ What specific steps can we take to reduce barriers to participation?
- ✓ What is our plan to follow up with residents, and whose responsibility will that be?

**Reflect together:**

- ✓ What needs to change — within our partnership and within our individual organizations — to shift more power to the community?
- ✓ How can we show our partners and our broader community that we are continually listening, learning, and improving?
- ✓ Are there related sectors or projects that would benefit from the lived expertise of our community partners and our model of engagement?



# Collaborative Activities



## Local COMMUNITY POWER



### USE THIS TOOL...

...to consider how you can empower different groups in your community.



### DURATION

25 to 30 minutes

Once you have an integrated team around the table and out in the community, it's time to put resources and power in the hands of those who need it. How will you make concrete progress on this front?

### NEXT STEPS

For each of these ad-libs, briefly state the collaborative's aims to achieve with community members as community power is enhanced & grows.

**Local: COMMUNITY POWER** Partnerships that engage neighborhood residents and community leaders as key voices and thought leaders throughout all stages of planning and implementation.

**IMMEDIATE NEXT STEPS TO STRENGTHEN RELATIONSHIPS WITH THE COMMUNITY**

1 WE WILL...	WILL THIS REQUIRE ONGOING INPUT?
WITH...	<input type="checkbox"/>
2 WE WILL...	
WITH...	<input type="checkbox"/>
3 WE WILL...	
WITH...	<input type="checkbox"/>

HOW CAN WE BUILD POWER WITH...

COMMUNITY MEMBERS ON OUR TEAM?	COMMUNITY MEMBERS WHO ARE DIRECT BENEFICIARIES?	COMMUNITY MEMBERS AT LARGE?

Consider IAP2's Spectrum of Public Participation, which can help identify different levels of community engagement and participation.  
<https://nhi.ca/iap2/public-participation-spectrum>

### RIPPLE EFFECT

For this section, think in concentric circles. There are community members on the team, surrounded by those who will be directly impacted by the team's work – and they are surrounded by the community at large. How can your team engage with these groups more fully?



In this exercise, there's a delicate balance between being sufficiently bold and sufficiently realistic. We want to come up with concrete ways of helping to build power within the community while while not over-promising. Seek out this balance by having frank conversations with your coalition partners.



# Collaborative Activities



## Local: COMMUNITY POWER

Partnerships that engage neighborhood residents and community leaders as key voices and thought leaders throughout all stages of planning and implementation.

### IMMEDIATE NEXT STEPS TO STRENGTHEN RELATIONSHIPS WITH THE COMMUNITY

WILL THIS REQUIRE ONGOING INPUT?

1 WE WILL...

WITH...

2 WE WILL...

WITH...

3 WE WILL...

WITH...

### HOW CAN WE BUILD POWER WITH...

COMMUNITY MEMBERS ON OUR TEAM?	COMMUNITY MEMBERS WHO ARE DIRECT BENEFICIARIES?	COMMUNITY MEMBERS AT LARGE?





# Collaborative Activities



## Local PERSONAS

**USE THIS TOOL...**  
...to plan your engagement with specific people or groups.

**DURATION**  
25 minutes

After considering the community at large, it's time to zoom in on specific people or defined groups you want to engage. How will you bring them in and deliver value in their lives?





### AIM STATEMENT

This ad-lib, when completed, should be the most simple version of your aim statement – who are you working with? Where? What goal do you hope to achieve with them? By when?

**Local:** Partnerships that engage neighborhood residents and community leaders as key voices and thought leaders throughout all stages of planning and implementation.

WE WILL BE WORKING WITH \_\_\_\_\_ PEOPLE LOCATED IN \_\_\_\_\_ LOCATION

WITH THE GOAL OF \_\_\_\_\_ GOAL BY \_\_\_\_\_ DATE

 <p>NAME: _____</p> <p>REPRESENTING: _____</p> <p>WHY IS THIS VOICE IMPORTANT?</p> <p>WHAT SHOULD WE ASK THIS PERSON/GROUP?</p> <p>WHAT VALUE ARE WE OFFERING THEM?</p>	 <p>NAME: _____</p> <p>REPRESENTING: _____</p> <p>WHY IS THIS VOICE IMPORTANT?</p> <p>WHAT SHOULD WE ASK THIS PERSON/GROUP?</p> <p>WHAT VALUE ARE WE OFFERING THEM?</p>
 <p>NAME: _____</p> <p>REPRESENTING: _____</p> <p>WHY IS THIS VOICE IMPORTANT?</p> <p>WHAT SHOULD WE ASK THIS PERSON/GROUP?</p> <p>WHAT VALUE ARE WE OFFERING THEM?</p>	 <p>NAME: _____</p> <p>REPRESENTING: _____</p> <p>WHY IS THIS VOICE IMPORTANT?</p> <p>WHAT SHOULD WE ASK THIS PERSON/GROUP?</p> <p>WHAT VALUE ARE WE OFFERING THEM?</p>

COMMUNITY PARK

BUILD stakeholders offers 5 key strategic recommendations for reimagining the future of community health. <https://bit.ly/3uL0zwwng>

### PERSONAS

For each of these personas, identify a specific person (or a group from which you plan to find a specific person), and think deeply about why you want to engage them, what you'll ask in your conversations, and how this will provide value to them.



Engaging neighborhood residents and community leaders will be essential in your work – and certainly you will end up engaging more than four people! Please use as many of these sheets as you need to capture all of the stakeholders you can identify.



# Collaborative Activities

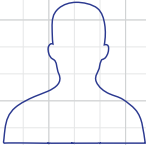


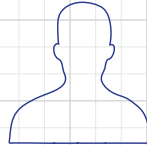
## Local: PERSONAS

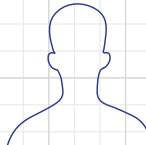
Partnerships that engage neighborhood residents and community leaders as key voices and thought leaders throughout all stages of planning and implementation.

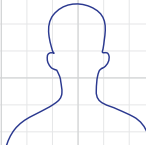
WE WILL BE WORKING WITH \_\_\_\_\_ LOCATED IN \_\_\_\_\_  
PEOPLE LOCATION

WITH THE GOAL OF \_\_\_\_\_ BY \_\_\_\_\_  
GOAL DATE

 NAME: \_\_\_\_\_  
REPRESENTING: \_\_\_\_\_  
WHY IS THIS VOICE IMPORTANT?  
  
WHAT SHOULD WE ASK THIS PERSON/GROUP?  
  
WHAT VALUE ARE WE OFFERING THEM?

 NAME: \_\_\_\_\_  
REPRESENTING: \_\_\_\_\_  
WHY IS THIS VOICE IMPORTANT?  
  
WHAT SHOULD WE ASK THIS PERSON/GROUP?  
  
WHAT VALUE ARE WE OFFERING THEM?

 NAME: \_\_\_\_\_  
REPRESENTING: \_\_\_\_\_  
WHY IS THIS VOICE IMPORTANT?  
  
WHAT SHOULD WE ASK THIS PERSON/GROUP?  
  
WHAT VALUE ARE WE OFFERING THEM?

 NAME: \_\_\_\_\_  
REPRESENTING: \_\_\_\_\_  
WHY IS THIS VOICE IMPORTANT?  
  
WHAT SHOULD WE ASK THIS PERSON/GROUP?  
  
WHAT VALUE ARE WE OFFERING THEM?





## Dive Deeper: Community Engagement

### Practice cultural humility in your interactions with community members

Cultural humility involves recognizing community members as experts on their own lives and experiences and committing to a continuous process of learning and adapting in order to be in the right relationship with others. Learn more with this [Cultural Humility Toolkit](#).

### Distinguish between the different levels of community participation

The [Spectrum of Public Participation](#) is a foundational framework for considering different levels of community participation. [This version](#), from Facilitating Power, builds on that spectrum by incorporating a more explicit focus on equity.

### Prioritize language justice throughout your initiative

Practicing language justice allows multilingual community members to communicate and be understood in their preferred language. Language justice is a key component of creating inclusive, equitable spaces for all. Browse this collection of [tools and resources](#), download a [language justice toolkit](#), and seek [partner organizations](#) that offer relevant trainings and services.

### Explore different models for engaging and shifting power to community members

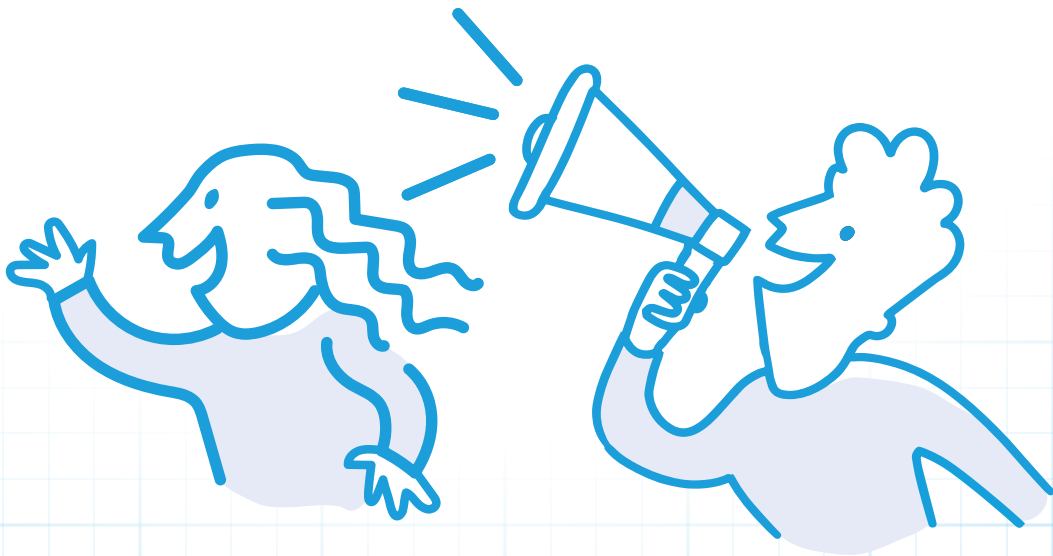
Create structures for community members to make ongoing decisions and take ownership over the initiative's progress through a [community advisory board or committee](#). Thoughtfully engage residents in policy decisions through a formal [public deliberation process](#). Shift power to community members to decide how to spend public resources through [participatory budgeting](#). Engage residents in all phases of research and evaluation through [participatory action research](#) approaches.

## Section 3.

# BUILD Your Path

“What we find is that if you have a goal that is very, very far out, and you approach it in little steps, you start to get there faster. Your mind opens up to the possibilities.”

- Mae Jemison





**T**he first two sections emphasized the importance of getting on the same page, aligning around a shared vision, and coalescing as a community-centered team. Now it's time to move from vision to action. While specific strategies will look different in every community, this section highlights general guidance to help you:

- ✓ Develop an action plan
- ✓ Formalize partnership agreements
- ✓ Incorporate data
- ✓ Consider the role of policy



## Essential BUILD Reading

Read [community stories](#) that describe the diverse actions BUILD awardees took to operationalize bold, upstream, integrated, local, and data-driven initiatives and policies.

See example memoranda of understanding (MOUs), partnership agreements, and project timelines from BUILD 1.0 communities: [Des Moines, IA](#); [Harris County, TX](#); [Oakland, CA](#); and [Albuquerque, NM](#). Examples can be found in the appendix of each case study.

Learn how BUILD communities have navigated common data-related barriers in [Data Sharing Within Cross-Sector Collaborations: Challenges and Opportunities](#).

## 3.1 Develop an action plan

The previous section focused on building a shared foundation as a team. You clarified the problem and its underlying root causes, you identified community assets, and you articulated a bold vision for the future — together. Having these pieces in place can be inspiring; it can also be overwhelming! Where do you start? By completing an action planning process, you can translate this vision into a set of active steps for implementation.

An action planning process can help teams juggle the many considerations that will go into achieving their goals. For example:

- ✓ Name the gaps between reality and the shared vision, and how they might be addressed.
- ✓ Share challenges and brainstorm possible solutions.
- ✓ Identify strengths that are unique to the team.
- ✓ Break down tasks into bite-sized chunks that can be allocated to team members.
- ✓ Assign responsibilities and timelines to hold partners accountable.
- ✓ Make the most of near-term opportunities — decision-making timelines, changes in political will, moments of heightened community awareness.
- ✓ Agree upon measures of success.

There are many ways to approach an action planning process. Teams may choose to engage in a formal, extended process with a professional facilitator or may opt to facilitate the process on their own. Regardless of the approach, action planning should provide a written record that the team can return to over time to ensure accountability, evaluate the progress of the project and the partnership, and revisit core goals to reshape or reinvigorate the work.



### Dive Deeper: Action Planning

#### Facilitate an action planning process

The Community Toolbox includes detailed guidance on going through an action planning process. See this comprehensive [toolkit on developing strategic and action plans](#) or dive directly into the [chapter on developing an action plan](#).

#### Download an action plan template

This [template](#) from County Health Rankings & Roadmaps can be used to create a detailed action plan expressed in terms of goals, objectives, and activities with expected results.

## 3.2 Formalize partnership agreements

Collaborative efforts involve many partners implementing numerous activities at different points in time. Written partnership agreements can solidify commitments, clarify roles and expectations, outline how resources and responsibilities are shared, and promote transparency and accountability. In addition, written agreements are an important tool for sustainability. If an individual leaves their organization, or their role changes within that organization, having a written agreement in place makes it more likely that the organization will continue its role in the partnership.

Even when a formal agreement is not needed, it is always helpful to record key decisions and governance structures in writing. Documenting your team's progress can help keep all partners on the same page, avoid potential misunderstandings, and help bring new partners up to speed. Here are some helpful tips:

- ✓ Designate a notetaker during partnership meetings.
- ✓ Send a brief follow-up email summarizing key action items after the meeting.
- ✓ Save notes and key resources in a shared file or website that all partners can access.



## Dive Deeper: Partnership Agreements

### Learn why, when, and how to draft agreements

The Practical Playbook has a chapter on “[How to Draft Successful Memorandums of Understanding and Data-Sharing Agreements](#),” which details the benefits, drawbacks, and considerations of putting written agreements in place.

The “[Understanding and Writing Contracts and Memoranda of Agreement](#)” chapter of the Community Toolbox offers detailed guidance on partnership agreements.

### Learn about data-sharing agreements

Many successful BUILD partnerships involve multiple organizations sharing data for the purpose of coordinating support, aligning services, and measuring impact. Partners intending to share data — particularly federally-protected health information — should work with their attorneys or seek legal technical assistance to ensure compliance with privacy laws. This [article from The Network for Public Health Law](#) provides a helpful primer on where to start.

### Access a sample MOU template

County Health Rankings and Roadmaps has a [downloadable MOU template](#) that can be tailored as needed.

### Read a community case study

Learn how the health department in Kansas City, MO, [used an MOU to formalize the partnership](#) when it teamed up with a faith-based community organizing group.

## 3.3 Incorporate data

BUILD initiatives are data-driven. Data comes in many forms, and there is no single type, format, or approach that will fit every partnership's needs. Data can be used to describe the scale and scope of an issue and who is impacted by it, drive implementation of an intervention, provide insight into what is and is not working, and demonstrate impact and outcomes.

BUILD partners often interact with different kinds of data to support different phases of their work. Quantitative data includes numbers and statistics. The number of individuals served by your program, the rates of food insecurity in your neighborhood, and the demographic composition of your community are all examples of quantitative data.

Qualitative data can add context to those numbers, shedding light on things numbers alone may not show, or may even obscure. Were program participants satisfied with the program? What makes it hard for community members to access food? What forces have shaped who has greater access to resources? Qualitative data can play a role in filling in these blanks.

Whether quantitative or qualitative, remember that data is a *tool* to drive action. Simply having or collecting information is an important step, but it is not the end goal. How will this information move people to take actions that support health and equity?

When clarifying your approach to data, it is equally important to consider the role of the community in this effort. How are the people whom the data describes — or who are most impacted by the issue being studied — involved in this process?

Best practices recommend that the communities most affected by the research have access to and can fully use the data for their own purposes. Specifically, BUILD partners can do the following:

- ✓ Make the data that was gathered publicly available, including publishing your data online.
- ✓ Be transparent about the methods and processes used during the data collection and analysis phases of the project.
- ✓ Present the findings in ways that different audiences, including community members and those with technical expertise, can understand and use to advance their own efforts and goals. It may be necessary to curate pertinent information for different groups, such as the general public, public health practitioners, hospital leadership, or policymakers.

Fully participatory approaches create opportunities for community members to exercise their power and take ownership of this process from start to finish. Community members can help design research questions and identify data metrics that are most relevant to the needs of the community. They can develop and implement data collection methods. They can connect the numbers to lived experience, adding nuance and context to the data collected. In short, they can provide a much-needed reality check to researchers and organizational leaders. When you have cultivated strong relationships with community members, they can let you know if a research question or approach misses the mark and offer important insights to help interpret data and prioritize what comes next.

## IDENTIFY YOUR DATA TASK

Teams will interact with data at different times, and in different ways. This chart outlines the various data-related tasks you may need to prioritize. Think about the role that community members will play in each of the activities below.

<b>Find it</b>	<p>Does the data you need already exist? Don't start from scratch. There are many existing data sources you can tap into, including:</p> <ul style="list-style-type: none"><li>• Publicly accessible data sets (national, state, local)</li><li>• Community-specific data summarized in reports developed by local institutions (e.g., Community Health Assessments, Community Health Needs Assessments, and Health or Health Equity Impact Assessments)</li><li>• Issue-specific data summarized by a research or advocacy organization</li><li>• Data collected by partner organizations</li></ul>
<b>Generate it</b>	<p>While scanning existing data is a great place to start, the information that is available may not fit your specific needs. BUILD initiatives have a local focus, and public data sets may not reflect the nuances of a specific neighborhood, census tract, or population. You may be addressing a new or emerging issue for which there is little data or exploring an old question in a new way. And, of course, you may be conducting original research or evaluating an effort happening in real time. You may need to generate new data if the situation calls for it.</p>
<b>Share it</b>	<p>Sharing data among two or more organizations can support collaboration and allow partners to better meet community needs. For example, clinical data can be leveraged to link individuals to social support services. Thoughtful planning is critical to the success of any data-sharing partnership, and all involved must consider the practical, technical, and legal considerations of their approach.</p>
<b>React to it</b>	<p>Collecting data may be an important part of your project, but it's also important to reflect on this data. What is the data telling you? Are you noticing any trends, like an increase or decrease in participation? Taking the time to reflect on trends with partners may help you adjust your approach to better meet your goals.</p>
<b>Communicate it</b>	<p>The data you access and generate through your initiative tells an important story about your community. Who else needs to hear this story? Data can help you tell stories about your successes. It can help convince a decisionmaker — from an elected official to an organizational leader — to take critical action. It can provide a compelling hook to grab media attention and build awareness for your issue. And it can reinforce your case — to new and potential partners, funders, and others — that the issue matters and your efforts are making a difference.</p>



# Collaborative Activities



## Data Driven DATA NEEDS



**USE THIS TOOL...**  
...to gain clarity on the data needs at each partner organization.



**DURATION**  
30 minutes

Now that your team is formed, aligned, emboldened, and grounded in local reality, let's **consider data needs**. What do you have in hand, what do you want, and how will you obtain it?

### DATA WE HAVE

For “data we have,” each partner should list the relevant types of data they can bring to the table, to understand community needs or measure progress.

**Data-Driven:** Partnerships that use data from both clinical and community sources as a tool to identify key needs, measure meaningful change, and facilitate transparency amongst stakeholders to generate actionable insights.

	DATA WE HAVE	DATA WE WANT	WHO CAN HELP GET IT
CEO			
RESIDENTS			
HOSPITAL			
PUBLIC HEALTH DEPT			
HEALTH PLAN			

Learn best practices to restore community members as the authors and owners of community research: <https://bit.ly/WhyAmIAlwaysBeingResearched>

Designed by: **dotank**

### DATA WE WANT

For “data we want,” each organization should consider what data would be helpful on the path to achieving the coalition’s goals. What will you want to track, measure, and report on?

### WHO CAN HELP

In the “who can help get it” column, get a quick sense of who can help obtain the data your organization will need.

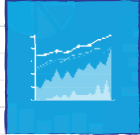


For all of the data considerations above, be as concrete as possible and think ahead to the next step. If there is a new data set we want, ask “When can we obtain it?”. If someone is identified who can help obtain the data, go ahead and make a plan for engaging them. These actions will set the team up for greater success!





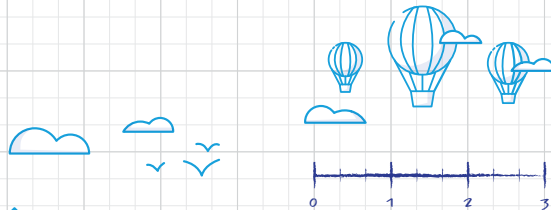
# Collaborative Activities



## Data-Driven: DATA NEEDS

Partnerships that use data from both clinical and community sources as a tool to identify key needs, measure meaningful change, and facilitate transparency amongst stakeholders to generate actionable insights.

	DATA WE HAVE	DATA WE WANT	WHO CAN HELP GET IT
CBO			
RESIDENTS			
HOSPITAL			
PUBLIC HEALTH DEPT			
HEALTH PLAN			





# Collaborative Activities



## Data Driven OBJECTIVES



### USE THIS TOOL...

...to get aligned on the group's top data objective and any related risks.



### DURATION

20-30 minutes

After getting a broad sense of your data assets and data needs, zoom in and identify the group's top data objective. What stands out that the group must obtain soon to effectively measure progress?

### TOP DATA OBJECTIVE

Identify your top data objective here. What is the most pressing need? What will help the coalition make sense of its community and the pace (or lack) or progress toward its goals?

**Data-Driven OBJECTIVES:** Partnerships that use data from both clinical and community sources as a tool to identify key needs, measure meaningful change, and facilitate transparency amongst stakeholders to generate actionable insights.

TOP DATA OBJECTIVE

Looking for ideas, support, or training related to data and collaboration? Visit [allindata.org](http://allindata.org) for resources.

CONSIDER RISKS IN THE DATA-GATHERING PROCESS. WHAT COULD CHALLENGE, INTERRUPT, OR DERAIL THIS EFFORT?

RISK 1:

MITIGATION PLAN

RISK 2:

MITIGATION PLAN

Designed by: dotank

### RISKS

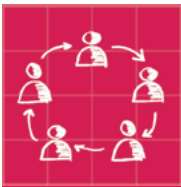
Take a moment to consider risks in the data-gathering process. What could challenge, interrupt, or derail this effort?

### MITIGATION PLAN

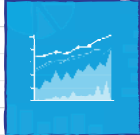
For both risks you identify, state how you would get back on track and mitigate the effects of delayed or mistaken data.



Remember that this exercise helps you explore data risks, not overall risks to the project. Overall risks are important, but it will be useful to focus on data risks for a moment. Exploring what might slow down or obscure your data collection will help head off these risks and put the whole project on stronger footing.



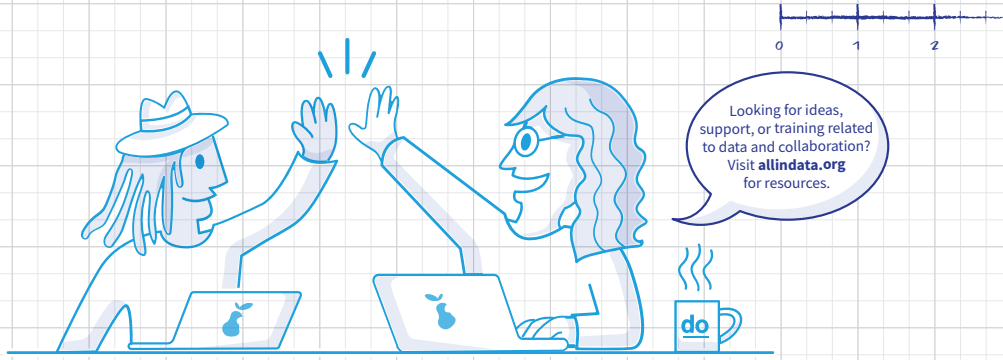
# Collaborative Activities



## Data-Driven: OBJECTIVES

Partnerships that use data from both clinical and community sources as a tool to identify key needs, measure meaningful change, and facilitate transparency amongst stakeholders to generate actionable insights.

TOP DATA OBJECTIVE



CONSIDER RISKS IN THE DATA-GATHERING PROCESS. WHAT COULD CHALLENGE, INTERRUPT, OR DERAIL THIS EFFORT?

RISK 1:

MITIGATION PLAN

RISK 2:

MITIGATION PLAN





## Dive Deeper: Data

**Connect with peers improving community health through cross-sector data sharing**

[All In: Data for Community Health](#) is a learning network that includes over 700 community collaborations across the country. Get involved in an [affinity group](#) to engage more deeply with peers; and access [podcasts, webinars, and publications](#) focused on data sharing.

**Learn best practices for centering racial equity throughout data integration**

When partnerships fail to center racial equity in data integration projects, they run the risk of reinforcing inequitable outcomes. [This toolkit](#) from Actionable Intelligence for Social Policy at the University of Pennsylvania includes guidance for embedding racial equity considerations into all phases of designing, collecting, and disseminating data.

**Shift power to community members in the design, implementation, and implications of research projects**

Based on lessons learned from a project in Chicago, [Why Am I Always Being Researched?](#) highlights best practices to restore community members as the authors and owners of community research.

## 3.4 Consider the role of policy

Policies shape our communities in myriad ways. The inequities that BUILD partners are addressing today did not appear out of nowhere. In many cases, they are the consequences of policies and laws that have systematically granted opportunity and resources to some, while denying it to others.

A policy refers to a written statement by a public agency or organization of its position, decision, or course of action. While the word “policy” leads many people to think of laws and ordinances passed by government bodies (“public policy”), it is important to keep in mind that private organizations and institutions create policies too.

For example, federal policy can unlock funding, determining if and how those resources flow into local communities. Local policies — like zoning ordinances — shape our physical environment by dictating what can be built and where. School policies can expand or decrease students’ access to quality, affordable meals. Organizations can set policies that establish fair and inclusive hiring and operational practices. Policies also influence partnerships by formalizing roles and responsibilities through a memorandum of understanding or a formal data-sharing agreement.

Community-driven policies can be designed to:

- ✓ Initiate widespread change
- ✓ Enable and guide other activities
- ✓ Sustain change over the long term
- ✓ Focus attention on structural problems, not individuals
- ✓ Express values against bias, unfairness, and injustice
- ✓ Influence the distribution and use of money, opportunity, and power
- ✓ Undo historical policy-driven harms

What role might policy play in your work? Think about the project or intervention you are implementing. Is there an opportunity to improve, expand, or sustain the work through policy change? Your team may not be prepared to take on a policy change right now, but it is worth keeping this on your radar as a future possibility.

While you may not be proactively working to change or develop policy, it’s important to keep in mind that existing policies may create barriers or opportunities that affect your work. It can be beneficial to stay connected with partners about how changes in policy — at the federal, state, local, or organizational level — might impact the work you do together.



## Start the Conversation: Moving to Policy

**P**olicies can influence, institutionalize, and sustain work happening in communities, partnerships, and individual organizations. Consider the different types of policy that impact your work. Each organization likely has a different perspective to share based on the issue they work on or the population they serve. Look for areas of alignment and opportunities to work collaboratively toward a shared policy goal.

**Outcomes:** Through this conversation, teams can increase awareness of relevant policies and identify policy opportunities that can support the partnership's shared goals.

**Use the following prompts for a group discussion:**

***In your community:***

- ✓ What level of experience, comfort, and capacity does each partner have when it comes to policy change?
- ✓ What local, state, or federal policies influence the issue your team is working on? What policy opportunities or goals are partners interested in pursuing? What policies are currently creating the biggest barriers to health and equity for community members?
- ✓ How and by whom are budgeting and funding decisions made for your issue area?
- ✓ Who is already leading policy work? Are there community groups organizing for policy changes that will impact health and equity? Are any of your partners engaged in the policy process already? Are there existing grassroots efforts to which your partnership can lend its support (including capacity and expertise, connections, data, credibility, financial or other resources, etc.)?

***In your partnership:***

- ✓ What key decisions or processes are memorialized in the event of staff turnover, hiring, or unexpected leaves of absence?
- ✓ How dependent is your work on the knowledge and verbal commitments of individuals at your partner organizations, as opposed to formal commitments on behalf of those organizations?
- ✓ What funding agreements and restrictions have shaped your work?



## Start the Conversation: Moving to Policy

### ***In your organization:***

- ✓ How do manuals, workflow documents, and other written guidance define your work with employees, partners, and the public?
- ✓ How do your vendor solicitation, selection, hiring, and contracting practices influence your relationships with the community?
- ✓ Has your organization made any policies or made any public declarations related to diversity, equity, and inclusion?

### **Reflect together:**

- ✓ What is an easy lift — a policy change within the power of your partners that will move your collaboration closer to one of its goals?
- ✓ What is a stretch — a policy change deeply connected to your work, but outside your current partners' powers to make happen? Who has the power to make that change?



## Dive Deeper: Policy

**Review an introductory resource on what policy is**

Start with this [two-page fact sheet](#) that defines policy, distinguishes between policy and programmatic changes, and shares examples of how communities have used policy to improve health.

**Explore frameworks for identifying and developing policy solutions**

From identifying the problem to implementing a solution, the [CDC's Policy Process](#) provides a systematic way to approach community change. [Pathways to Policy](#) is a step-by-step playbook. While developed with young people in mind, this resource includes guidance and considerations that apply to advocates of all ages.

**Assess the equity implications of a potential policy**

Analyzing the impact of a proposed policy on populations of color is an important component of equity-focused policy change. Several jurisdictions use racial equity assessment tools to guide policy decision-making. See what this process looks like in [St. Paul, MN](#), and [Seattle, WA](#).

**Leverage health departments' power to set policy**

Health departments have unique powers to implement and enforce policies and laws. Learn more about [how health department partners can advance health equity](#) through administrative policymaking.

**Browse promising policies that advance racial equity and community health**

[CityHealth](#) has curated a package of evidence-based public policies that help cities increase community health. The [What Works for Health webpage](#) provides a searchable database of policies and the evidence base underlying them. [Healing through Policy](#) and [A Blueprint for Changemakers](#) highlight policies and practices that can be implemented at the local level to promote racial healing and address social inequities. The [Big Cities Health Coalition](#) website provides access to policy priorities and advocacy resources geared toward large metropolitan health departments.

**Understand the difference between advocacy and lobbying**

While 501(c)3 organizations face restrictions when it comes to grassroots and direct lobbying, there is a wide range of policy and advocacy-oriented activities that are not considered lobbying. This [webinar](#) explains this distinction and provides important pointers for organizations considering policy change. [Bolder Advocacy](#) is an excellent resource for nonprofits engaging in advocacy.



# Conclusion

**W**hen created and cared for intentionally, your relationships can be as powerful as your impacts. Wherever your team finds itself on this journey, the tools and activities in this workbook are intended to deepen your understanding of the theories and practices that make up the foundation of BUILD — to help you create communities that nurture health and well-being for all.

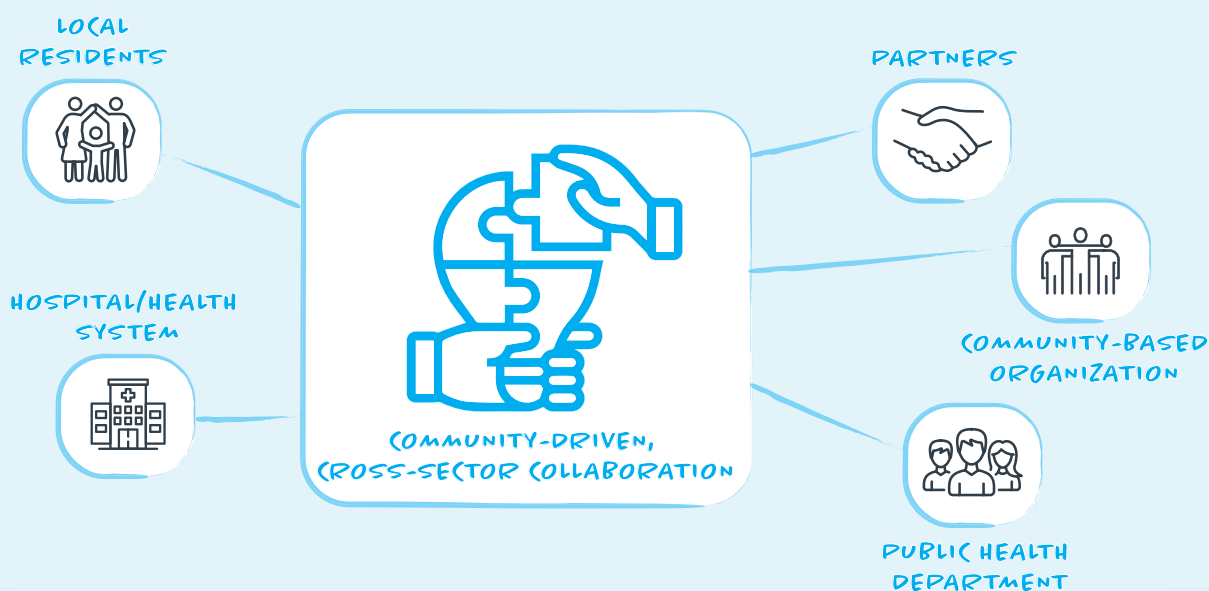
As noted above, these questions, conversations, and activities cannot be completed with a checkmark, but are an iterative framework to revisit and build upon as your collaborative continues working toward your goals — and sometimes identifies new ones. When you find yourselves at a crossroads or encountering one of the barriers inherent in advancing health and racial equity, revisiting these activities with your partners or exploring how your conversations may have evolved can help you remember the mission of your partnership, check in on your path, and move forward in alignment.

# Appendix A: The BUILD Health Challenge Model

# The BUILD Health Challenge Model

In 2015, BUILD was established as an innovative, national awards program with a specific focus on strengthening cross-sector, community-driven partnerships to reduce health disparities caused by systemic or social inequities. BUILD’s “North Star” is to support communities seeking to advance health equity and to contribute to the improvement of population health outcomes — by changing inequitable conditions and systems in their communities.

BUILD promotes collaboration among partners in community-based nonprofit organizations; hospitals, health systems, and health plans; governmental public health; and resident groups, to achieve their goals more effectively. A hallmark of BUILD is how each collaborative is structured, with the community-based organization serving as the lead partner and recipient of a grant award up to \$300,000 over 3 years, as well as a healthcare partner match award for each supported initiative. This strategy ensures each partners’ work is aligned with the community’s needs and interests.



Guided by the BUILD principles — Bold, Upstream, Integrated, Local, and Data-driven — each local cross-sector partnership works with community leaders and residents of their neighborhood, city, or town to identify a public health issue prioritized by the community. Across the four cohorts of awardees, 20 funders have invested nearly \$30M to support cross-sector partnerships in 68 communities across 27 states and Washington, DC.

To date, BUILD awardees have applied diverse strategies to achieve sustainable improvements in community health, reduce downstream health care costs, and promote health equity. Communities report influencing dozens of system changes to impact funding streams; organizational practices; and legislative policies. Bolstered by the credibility BUILD has contributed to their initiatives, awardees have collectively accessed millions in funding and resources from hospitals and other organizations.

# Appendix B: The BUILD Progress Continua



## IMPLEMENTATION OF BOLD

The Bold principle focuses on (1) implementing systemic change strategies (changes to institutional, regulatory or legislative policies, system or practices); (2) developing a shared understanding among partners of how to address equity issues through systemic change; and (3) identifying ways to blend, braid, and leverage complementary initiative's and resource's streams.

Primary Factor: Focus on Systemic Change: policies (institutional, regulatory, or legislative), systems, and practices			
Ground Stage (0)	Early Stage (1)	Middle Stage (2)	Advanced Stage (3)
Initiative articulates the solution in individual and programmatic terms and has not developed any systemic goals or strategies (solutions remain at the programmatic level)	Initiative has begun articulating the solution in a manner that highlights the need for a systemic approach and has developed systemic goals or strategies, but in practice relies primarily on programmatic approaches	Initiative clearly articulates the need for systemic change to address the issue area and has taken a few/small steps toward implementing systemic strategies	The initiative clearly articulates the need for systemic change and has taken significant steps toward implementing a multi pronged set of systemic strategies that can effectively address the issue area
INDICATORS OF ADVANCED STAGE			
<ul style="list-style-type: none"> <li>Developing or implementing advocacy or policy agenda/strategy or communication campaign</li> <li>Mobilizing key administrative or legislative partners (policy makers, decision-makers)</li> <li>Making individual-level behavior shifts that create momentum for a larger collective shift (e.g. partners begin sharing data)</li> </ul>		<ul style="list-style-type: none"> <li>Identifying external opposition to changes and necessary strategies to deploy to combat these external forces</li> <li>Developing capacity of organizations and individuals to implement systems strategies</li> </ul>	

Primary Factor: Equity-Focused Systemic Change			
Ground Stage (0)	Early Stage (1)	Middle Stage (2)	Advanced Stage (3)
No or limited discussion or focus on equity	Initiative has begun learning about or discussing equity issues present in the systems	Initiative has taken concrete steps to better understand and identify systemic change strategies to advance equity	Initiative partners have a shared understanding of inequities in the system; Systemic change strategies include an explicit equity lens/focus .
INDICATORS OF ADVANCED STAGE			
<ul style="list-style-type: none"> <li>Created/fostered a shared definition/understanding of equity among partners</li> <li>Explicitly expressed equity as a shared value among partners</li> <li>Identified and applied a framework/structured process to examine the ways in which inequities are influenced by the systems/systemic issues (e.g., R4P)</li> </ul>		<ul style="list-style-type: none"> <li>Identified and articulated the value of systemic solutions to address inequities (removing heal th-damaging conditions created by inequitable social and environmental factors)</li> <li>Built capacity and leadership to address identified equity issues (e.g., training)</li> </ul>	

Primary Factor: Sustainability Planning and Implementation			
Ground Stage (0)	Early Stage (1)	Middle Stage (2)	Advanced Stage (3)
Initiative has not begun sustainability planning	Initiative has begun identifying opportunities to blend or braid complementary initiatives or resource streams	Initiative has taken concrete steps toward blending, braiding and leveraging complementary initiatives and resource streams	Initiative has prowess at blending, braiding and leveraging complementary initiatives and resource streams
INDICATORS OF ADVANCED STAGE			
<ul style="list-style-type: none"> <li>Has champions within partner organizations (multiple levels/leaders within organization buying into BUILD agenda) and across partner organizations</li> <li>Positioned BUILD as an anchor strategy for a longer-term change effort</li> <li>Integrated BUILD with at least one or more other initiatives or resource streams including those with diverse philosophies who would typically be seen as "nontraditional" partners</li> </ul>		<ul style="list-style-type: none"> <li>Developed concrete plans to or has secured additional sources of funding</li> <li>Taken into consideration external negative forces and built resilient strategies</li> </ul>	



## IMPLEMENTATION OF UPSTREAM

The Upstream principle focused on (1) addressing the social/cultural, physical or economic/educational drivers of the issues area of focus in a way that allows multiple partners (inside and outside the health system) to contribute; and (2) including an explicit focus on equity in addressing the issue area of focus

Primary Factor: Issue Framing			
Ground Stage (0)	Early Stage (1)	Middle Stage (2)	Advanced Stage (3)
Initiative solely or primarily focuses on addressing issues related to health care access or delivery at the individual-level (no framing, scoping, or bounding of the issue to address upstream drivers)	Initiative has begun articulating the importance of socio-cultural, physical or economic/educational drivers, but maintains a large focus on addressing health care access/delivery, and/or addressing issues at the individual-level	Initiative has clearly articulated the importance of socio-cultural, physical or economic/educational drivers and focuses a significant portion of their work on addressing these issues.	Initiative has a strong focus on addressing socio-cultural, physical or economic/educational drivers using a population-level and preventive approach, in ways that allow multiple partners to contribute to the solution
INDICATORS OF ADVANCED STAGE			
<ul style="list-style-type: none"> <li>Has a strong focus on addressing socio-cultural, physical or economic/educational drivers at the population (vs. individual) level</li> <li>Takes a preventive (vs. reactive) approach to the issue</li> </ul>		<ul style="list-style-type: none"> <li>Uses framing that considers where partners are able to act/what they can influence</li> <li>Has selected an issue and geographic area that resonates with all partners</li> </ul>	
Primary Factor: Equity-Focused Goals and Strategies			
Ground Stage (0)	Early Stage (1)	Middle Stage (2)	Advanced Stage (3)
No or limited discussion or focus on equity	Initiative has begun discussing equity issues present in the issue area of focus	Initiative has taken concrete steps to better understand and identify equity issues present in the issue area of focus	Issue area of focus includes an explicit equity lens
INDICATORS OF ADVANCED STAGE			
<ul style="list-style-type: none"> <li>Used locally relevant and disaggregated data to identify priority topics/areas</li> <li>Examined what contributes to inequity in the community in the issue area of focus (analysis of root causes)</li> <li>Examined community needs/preferences</li> </ul>		<ul style="list-style-type: none"> <li>Developed strategies grounded in community assets and local resources</li> <li>Explicitly used equity as criteria in selection of goals and strategies</li> </ul>	



## IMPLEMENTATION OF INTEGRATED

The Integrated principle focuses on (1) developing and actively implementing the structures necessary to support partnerships; (2) creating vision alignment and buy-in among health systems (in particular) as well as public health, communities, and other partners; (3) fostering respect, trust, and shared power among partners.

Primary Factor: Structures to Support Partnership			
Ground Stage (0)	Early Stage (1)	Middle Stage (2)	Advanced Stage (3)
Initiative has not established any structures to support partnerships	Initiative has identified structures to support partnerships	Initiative is actively implementing some of the structures necessary to support partnership	Initiative has formalized and actively implements all structures necessary to support partnership
INDICATORS OF ADVANCED STAGE			
Initiative has developed and is actively implementing structures to support the partnership:			
<ul style="list-style-type: none"> <li>Clearly articulated roles/responsibilities</li> <li>Decision-making processes</li> <li>Collaborative structures (e.g., work groups)</li> <li>Communication structures</li> </ul>		<ul style="list-style-type: none"> <li>Plan for who needs to be involved and when</li> <li>Dedicated or ear-marked staff/time to support administrative functions (backbone)</li> <li>Accountability or improvement processes or measures</li> </ul>	
Primary Factor: Vision Alignment and Buy-In			
Ground Stage (0)	Early Stage (1)	Middle Stage (2)	Advanced Stage (3)
Only some of the necessary partners are present, the initiative has low levels of shared accountability for success, and there is low organizational buy-in	Most of the necessary partners are present, the initiative has moderate/low levels of shared accountability for success, and there is moderate/low organizational buy-in	Most/all of the necessary partners are present, the initiative has moderate/high levels of shared accountability for success, and there is moderate/high organizational buy-in	All of the necessary partners are present, the initiative has shared accountability for success and organizational leadership is invested at the highest levels.
INDICATORS OF ADVANCED STAGE			
<ul style="list-style-type: none"> <li>Initiative has a diverse range of partners (across partners organizations and within partner organizations)</li> <li>High-level leaders are engaged/supportive (e.g., C-suite)</li> <li>Partners consistently participate and take on lead roles, and/or contribute organizational knowledge or resources</li> <li>Partners are entering into joint ventures with each other and external stakeholders</li> </ul>		<ul style="list-style-type: none"> <li>Partners have taken on "new roles" and aligned practices, perspectives, or processes</li> <li>Partners openly share about their involvement in BUILD (work is not kept siloed, but considered for integration into overall funding, sustainability)</li> </ul>	
Primary Factor: Respect, Trust, and Shared Power			
Ground Stage (0)	Early Stage (1)	Middle Stage (2)	Advanced Stage (3)
Initiative has low or moderate level of respect, trust, and shared power and has not taken any steps to build these components	Initiative has low or moderate level of respect, trust, and shared power but has identified strategies for building these components	Initiative has moderate or high levels of respect, trust, and shared power as a result of intentional strategies to foster/build these components	Initiative has a high level of respect, trust, and shared power as a result of intentional strategies to foster/build these components
INDICATORS OF ADVANCED STAGE			
Initiative has established high levels of respect, trust, and shared power by implementing strategies to:			
<ul style="list-style-type: none"> <li>Assess partnership quality</li> <li>Build commitment</li> </ul>		<ul style="list-style-type: none"> <li>Identify complementary skills/strengths</li> <li>Openly navigate trust and power dynamics</li> </ul>	
Primary Factor: Health System Partner Engagement			
Ground Stage (0)	Early Stage (1)	Middle Stage (2)	Advanced Stage (3)
Hospital/health system is considered a partner purely based on their financial contribution	Hospital/health system recognizes the need or value of nontraditional partners and community-centered work	Hospital/health system has taken a few/small steps to align processes/resources to better support engagement of nontraditional partners and community-centered work	Hospital/health system partner has taken significant steps to align processes/resources to better support engagement of nontraditional partners and community-centered work
INDICATORS OF ADVANCED STAGE			
Initiative's hospital/health system(s):			
<ul style="list-style-type: none"> <li>Have highly engaged hospital executive(s)</li> <li>Recognizes healthcare delivery as one aspect of the health continuum</li> <li>Have changed policies or practices, for example, integrating the BUILD agenda as part of the hospital system strategic and business plans</li> </ul>		<ul style="list-style-type: none"> <li>Have shifted/allocated resources to support the social determinants of health</li> </ul>	



## IMPLEMENTATION OF LOCAL

The Local principle includes (1) implementing processes to directly engage community leaders and residents, including traditionally disenfranchised groups; and (2) involving and empowering the community to identify the issue area of focus, develop solutions, and own the initiative.

Primary Factor: Community Representation			
Ground Stage (0)	Early Stage (1)	Middle Stage (2)	Advanced Stage (3)
Community is defined as, and engagement is limited to, community-based organizations	Initiative inconsistently engages a small/moderate number of community leaders and residents	Initiative has implemented processes to consistently engage a small number of community leaders and residents and has identified other priority populations within the community whose voices should be included, as well as strategies for engagement.	Initiative has implemented processes to consistently engage a moderate/large number of community leaders and neighborhood residents, including traditionally disenfranchised groups
INDICATORS OF ADVANCED STAGE			
<ul style="list-style-type: none"> <li>The initiative regularly and consistently engages directly with community members and residents</li> <li>Initiative has implemented processes to reach traditionally disenfranchised groups / historically oppressed members (e.g., meet at convenient times/locations, bi-lingual translation, transportation/ child care, compensation for time/expertise)</li> </ul>		<ul style="list-style-type: none"> <li>The initiative has developed processes that facilitate community engagement such as standing meetings, staffing positions, etc.</li> </ul>	
Primary Factor: Actions to Empower Community			
Ground Stage (0)	Early Stage (1)	Middle Stage (2)	Advanced Stage (3)
Initiative communicates and reports out to the community, for example, shares resources.	Initiative identifies and implements opportunities to collect data from the community and/or have the community provide feedback on ongoing work.	Initiative implements opportunities for the community to be involved and opportunities for the community to serve in a leadership capacity	Initiative substantively involves and empowers the community to identify the issue area of highest priority, develop solutions, and own the initiative.
INDICATORS OF ADVANCED STAGE			
<ul style="list-style-type: none"> <li>The community has a high degree of power/control, including having been substantively involved in defining the problem and creating, implementing, and refining the action plan.</li> <li>Leaders, implementers, and influencers are representative of the of entire community intended to benefit from the initiative in terms of demographics and lived experience</li> </ul>		<ul style="list-style-type: none"> <li>Initiative implements processes that allow the community to lead and recognizes and supports where this is already occurring</li> <li>Initiative provides training or coaching to community to foster engagement</li> <li>Initiative provides adequate funding to support participation of community-based organizations and community leaders</li> </ul>	





## IMPLEMENTATION OF DATA-DRIVEN

The Data-driven principle includes: (1) using data to identify needs/assets, develop and select strategies, track implementation, examine partnerships, and measure impact and return on investment; (2) implementing strategies to share data among partners; (3) sharing results and lessons learned to strengthen partnerships, leverage funding, and advance a culture of improvement and learning; and (4) including an explicit equity lens in data collection, dissemination, and use.

Primary Factor: Ways in which data is used			
Ground Stage (0)	Early Stage (1)	Middle Stage (2)	Advanced Stage (3)
Initiative uses data for limited purposes, primarily at the outset of the grant to describe the problem or community needs.	Initiative uses data to describe the problem and community needs/assets as well as to inform strategy selection.	Initiative uses data to describe the problem and community needs/assets; inform strategy selection; and lay the groundwork to refine/improve strategy over time, for example, to track outcomes.	Initiative uses data to describe the problem and community needs/assets; to inform strategy selection; and to learn and inform ongoing strategy implementation and adaptation.
INDICATORS OF ADVANCED STAGE			
<p>The initiative uses quantitative and qualitative data to:</p> <ul style="list-style-type: none"> <li>Identify community risk or assets and/or identify target population</li> <li>Identify priorities/plans and select strategies</li> <li>Support the need for systemic change</li> <li>Track implementation of objectives and inform ongoing adaptation and refinement of work</li> <li>Examine partnership composition or quality and make modifications to strengthen partnership</li> <li>Measure impact or outcomes of work and identify ways to improve.</li> <li>Measure return on investment and/or make a business case</li> </ul>			
Primary Factor: Data sharing			
Ground Stage (0)	Early Stage (1)	Middle Stage (2)	Advanced Stage (3)
The initiative has not developed any structures or processes to facilitate data sharing.	Initiative has identified structures or processes to facilitate data sharing but is facing major barriers to sharing data.	Initiative is actively implementing some of the structures necessary to support data sharing, but if facing some barriers to sharing data.	Initiative has formalized and is actively implementing all of the structures necessary to support data sharing.
INDICATORS OF ADVANCED STAGE			
<p>The initiative has implemented strategies to facilitate data sharing, such as:</p> <ul style="list-style-type: none"> <li>MOUs</li> <li>Shared understanding/culture of how data will be used</li> <li>Shared understanding of privacy/data granularity concerns</li> <li>Shared definition of measures (such as ROI)</li> <li>Timelines for data collection, sharing, etc .</li> <li>Integration/harmonization of data systems</li> </ul>			
Primary Factor: Sharing results and lessons learned			
Ground Stage (0)	Early Stage (1)	Middle Stage (2)	Advanced Stage (3)
The initiative never or rarely shares results or lessons learned from its own initiative evaluation	The initiative intermittently shares results or lessons learned from its own initiative evaluation	The initiative has processes in place to regularly share results and lessons learned from its own initiative evaluation	The initiative has processes in place to regularly share evaluation results and lessons learned and regularly uses results to strengthen partnerships, leverage funding, inform community of developments in work, and advance a culture of improvement and learning
INDICATORS OF ADVANCED STAGE			
<p>The initiative has implemented processes to share and use data, such as:</p> <ul style="list-style-type: none"> <li>Internal and external communication to partners to foster collective buy-in</li> <li>Processes to communicate/ make the case to funders</li> <li>Feedback loops or dashboards</li> <li>Learning processes for engaging stakeholders in interpreting data and generating actionable insights (e.g., learning agenda)</li> </ul>			

### Primary Factor: Equity-Focused Data Practices

Ground Stage (0)	Early Stage (1)	Middle Stage (2)	Advanced Stage (3)
No or limited discussion or focus on equity in the context of data collection, dissemination, or use	Initiative has begun discussing equity issues in the context of data collection, dissemination, or use	Initiative has taken concrete steps to address equity issues in data collection, dissemination, or use	Initiative has an explicit equity lens/focus in data collection, dissemination, and use
INDICATORS OF ADVANCED STAGE			
<ul style="list-style-type: none"> <li>Getting input from target audience in designing data collection scope, questions, and tools</li> <li>Taking steps to ensure data is collected from hard to reach voices / historically oppressed members</li> <li>Examining community assets (vs. only deficits)</li> </ul>		<ul style="list-style-type: none"> <li>Analyzing the impact of strategies on different populations</li> <li>Using dissemination strategies (language, format) that make results accessible to communities</li> </ul>	

# Appendix C: Instructions for How to Use BUILD's Collaboration Activities

# Facilitator Guide

## WHO you need in the room

These tools are designed for use with your coalition partners, whose **diverse perspectives** will help you build a bright future in your community. The group should include local residents, as well as representatives from the hospital, CBO, public health department, and health plan.



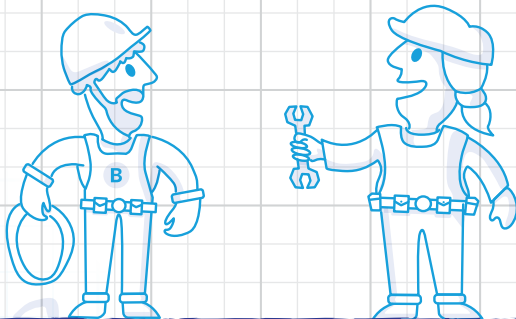
## WHY your role is important

A facilitator has the ability to ignite or extinguish a team's energy. You can create a climate of creativity, set a tone that's open and frank, and give the group permission to **think and work in a new way**. Most importantly, you should lead the room with a sense of fun and energy.

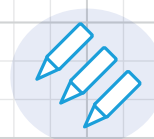


## WHAT your role consists of

As the facilitator, your role is about **process, not content**. You are responsible for keeping the group focused, ensuring the discussion is relevant, and boosting the energy level when needed.



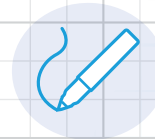
## SUPPLIES you will need



**Color markers**



**Printed canvases**



**Sharpie markers**

## HOW to pull it off efficiently



Rely on the videos to introduce, explain, and transition the exercises.



Use your voice! While the content must come from the participants, direction and encouragement will come from you.



Refer to the 1-pagers provided provided when participants have questions. (When in doubt, use the tools to suit your purpose.)



Rely on the tool to drive conversation and pull ideas from people's heads. This is a challenging work—it's okay if teams initially struggle with it.

# Printing Instructions

To print the 10 human-centered design tools for use with your team, take one of the following approaches:

## OPTION 1

At your workplace, open the PDF files and select 11" x 17" (tabloid) paper. Send a copy of each file to a printer equipped with this size of paper. For the full visual effect, print in color.

**Referring to the facilitation guide, use the canvases with your team.**

## OPTION 2

Send an email to your local UPS Store or FedEx Office with the following instructions:

---

Hello,

I'd like to order printed, color copies of the attached PDF files on 11" x 17" paper.

[list each file by name in your email]

Can we pick these up by [time, date]? If so, I'll plan to see you then.

Thanks!

---

When you visit the store to pick up your order, request a sleeve to protect the copies from creases or other damage.

**Referring to the facilitation guide, use the canvases with your team.**

## OPTION 3

Your local library may provide printing services, where you are either able to print from a library computer or from your own device. Open the PDF files and select 11" x 17" (tabloid) paper. Send a copy of each file to a printer equipped with this size of paper.

*\*be sure to confirm the cost, if there is one, for this service before using these services\**

**Referring to the facilitation guide, use the canvases with your team.**



# Digital Use Instructions

To work digitally on the 10 human-centered design tools with your team, take the following approach:

## STEP 1

You will be working with a digital whiteboard called Jamboard. Your team can access your Jamboard here: <https://buildhealthchallenge.org/resources/>

## STEP 2

Watch this video for tips and tricks on how to use Jamboard: <https://buildhealthchallenge.org/resources/>

## STEP 3

When running a digital workshop, remember:

- If you are up for it, please put your cameras on
- Microphones on mute when you have background noise
- Feel free to use the video chat feature to log comments
- Don't be afraid to speak, this is a safe space
- Tech challenges happen, don't worry or stress about that
- You own your digital workspaces and canvases—please add content and use the space how you wish

Use the pre-populated 'Type here' text boxes to add your text.

**Referring to the facilitation guide, use the canvases with your team.**



# Resources

1. National Academies of Sciences, Engineering, and Medicine. Communities in Action: Pathways to Health Equity. Washington, DC; The National Academies Press; 2017. [www.nap.edu/catalog/24624/communities-in-action-pathways-to-health-equity](http://www.nap.edu/catalog/24624/communities-in-action-pathways-to-health-equity).
2. Petersen EE, Davis NL, Goodman D, et al. Racial/Ethnic Disparities in Pregnancy-Related Deaths — United States, 2007–2016. Morbidity and Mortality Weekly Report (MMWR); 2019. [dx.doi.org/10.15585/mmwr.mm6835a3external icon](https://doi.org/10.15585/mmwr.mm6835a3external%20icon).
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