Introduction

This memo includes:

1) Themes from Upstream Action Acceleration (UAA) Initiative grantees interviews
2) Observations from the May 1, 2019 Learning Collaborative convening
3) Data from the Participant Feedback Survey conducted by Healthy Places By Design (HPBD) following the May 1 convening

This memo continues to build upon previous data collection and learning efforts conducted by the support team. Specifically, it follows the Theory of Change (TOC), focusing on two elements: outcomes related to precursors to systems change (Section 1) and outcomes related to peer network building (Section 2).

Section 1. Evidence of Precursors of Systems change

Early evidence indicates coalitions are progressing toward their goals, demonstrated by the advancement of observable changes, or precursors, to systems change¹. Grantees provided examples of precursors to systems change including:

- Taking advantage of new partnership opportunities
- Exploring how work among partners could be more efficient
- Building momentum with early wins
- Using data to make decisions
- Influencing the mindset of the community members and the coalition partners

In pursuing these precursors to systems change, grantees are progressing to the long-term goals described in the UAA Initiative’s Theory of Change, including advancement toward health equity with strategies to reduce disparities in social determinants of health.

¹“Precursors to systems change” represent the steps toward systems change. “Systems changes” are sustainable, formal, and at-scale changes that contribute to improvements in community health. They entail shifts in norms, policies, and processes to support community health (BUILD Health Challenge Outcomes Framework).
Below are precursors to systems change surfaced during interviews and observations from the May learning collaborative meeting.

**Coalitions are engaging new sectors by actively seeking new partners and leveraging existing connections.**

- In outreach efforts, a few coalitions are strengthening their appeal to potential supporters by linking their UAA work with implications that resonate with new audiences.
- One coalition framed a staff transition as an opportunity to grow the partnership’s network. When a coalition member moved into a new role, they became a link to another sector.

Approaches like these help grantees cultivate new partnerships in additional sectors, further spreading their systems-level, upstream approach beyond current boundaries to expand the impact of this work.

**Some sites are deliberately creating collaborative processes or practices and adopting new norms, which together will support coalition sustainability.**

Several grantees have aspirational goals to implement new ways of working within their coalitions that have the potential to accelerate the work and sustain it into the future.

- Multiple grantees are encouraging partners to “step up,” by taking on roles in the collaborative work that cater to their strengths.
- A few partners are avoiding “reinventing the wheel” by inter-relying on assets and sharing resources. For instance, sharing calendars helps reduce redundant activities while ensuring they are focused and impactful. Other activities include discussing how organizations can partner, such as submitting joint grant applications, to increase impact.

As coalition partnerships continue to collaborate and integrate work, new structures to support sustainability will be introduced.

**Organizations within the coalitions are beginning to shift internal practices to support coalition efforts.** To prepare for implementation of new, upstream, system-level practices to support community health, organizations are beginning to change internal practices to advance their efforts.

- One coalition site shifted organizational practices by incorporating a cross-sector training program to offset the influence of ACEs in their community. This training supports partners’ and stakeholders’ understanding of how children and families may experience adverse events (e.g., unemployment, substance abuse and addiction), as well as how to recognize potential reactions to these acute and long-term traumatic stressors. The training contributed to additional changes at partner institutions, prompting shifts such as modifications to law enforcement scheduling and school-based disciplinary practices.
- A grantee adopted additional mechanisms to gather community input to bolster their engagement with community members and to direct their efforts to create parks and green spaces.

**Interviewees described initiative activities that provided powerful “early wins” which strengthen relationships, help make progress visible, and contribute momentum.** A few coalitions experienced a variety of early wins through their work under the UAA grant, which were cited as key to developing the coalition partnership. These small wins help gain momentum for the work, and examples include:
• Successful launching of pilot programs including teacher and professional development training.
• Advocacy for public policy changes at the municipal, school district and even state and national levels.

These early wins demonstrate to the coalition and partners that new ways of working can be successful and have an impact on partnerships and the community.

Data is sought and valued among partners, and coalitions seek to increase their capacity to use data to enhance the impact of their efforts. Grantees all reported data collection and use, often for tracking activities and identifying priorities. Data activities range from the technical (e.g., collection and documentation practices) to the analytical/operational (e.g., reflection and learning; informing prioritization of future activities; building an evidence base for policy advocacy). The majority are using data to make a case for small and/or large “P” policy recommendations and as accountability to share progress back with the community.

• Several sites are actively collecting and using data to inform future priorities and workplans, while fewer are using data to reflect on past outcomes.

All coalitions are committed to using data, even if some are more nascent in developing data collection and analysis plans congruent to assessing their impact.

The majority of coalitions are taking steps to build trust with community members using intentional outreach and engagement efforts to deepen their understanding of issues affecting the community. The scope of work planned by the UAA initiative’s grantees require the establishment of trust from the communities in which they work. It is necessary to build the community’s trust of the coalition’s intentions to develop a shared understanding of the issues. Some sites expressed community engagement as a need, even if challenging.

• A few coalitions are examining root causes to deepen their awareness of the issue areas identified by community members. This approach provides greater insight about how to undertake work inclusive of a community perspective. For instance, a housing focus may require knowledge of building and housing code inspection, and, knowledge of why residents may be wary of voicing concerns for fear of retribution.
• As several coalitions became more cognizant of root causes, they included strategies to preempt their own work from perpetuating inequities. Example of tactics are compensating community members for their contributions of time, energy and work, and connecting residents to professional development trainings.

Coalitions want community members to understand their work, but also to engage in, advocate for, and be reflected in it so building trust is essential. Coalitions’ continued learning and growth around fostering trust with the community will help to move this work along.

Several coalitions show evidence of activating and strengthening community leadership; activities are aligned with the expressed needs of the community. Due to the focus of the UAA
initiative, community engagement activities are prevalent throughout the coalitions. While some coalitions were doing this work prior to the grant, others are more recently incorporating these efforts into their work since becoming grantees.

- A few sites are relying on community action groups to take the lead on recognizing and prioritizing community concerns. Supporting these action groups to achieve goals identified under the aim of creating a healthier community helps to build trust and encourages engagement.
- These sites are also developing community leaders for future sustainability and advocacy positioning. This commitment to developing community leaders builds on the goal of community empowerment and ownership, which in turn ensures strategies resonate with the community and are more likely to be sustained.

**Coalitions are working toward enhancing coalition partners knowledge of community members’ experiences by changing how issues are framed.**

- A few coalitions are seeking to shift dispositions, of partners and stakeholders more broadly, using an equitable, asset-based approach. Creating opportunities for community members to interact with other people from different backgrounds (e.g., racial, ethnic, economic, sector) in impartial spaces provides openings for honest conversations about issue areas and can initiate the growth of social cohesion. This approach is used by grantees to consider the influence of a range of concerns such as community safety, housing, ACEs, and notions of community ownership from new perspectives.

**Section 2. Evidence of Success in Building a Peer Learning Network**

The UAA initiative is expanding the grantees’ capacity by grounding them in upstream health approaches, providing opportunities to learn from peers, and promoting innovation and use of best practices. The coalition-based approach enables the continuity and expansion of partnerships by providing tools to help grantee organizations align and strengthen their coalitions, an important component of a systems change strategy. Early evidence indicates that the coalitions understand upstream health principles, understand the logic of a cross-sector coalition approach, seek out ways to bring innovation to their work, and see the benefit of learning from peers.

**Enhancing Community Knowledge: Notes from the learning collaborative meeting.**

During the ACEs group meeting, participants talked about the importance of educating themselves and the community not only about the impact of ACEs on children, but also the ripple effects on the community at large.

**Evidence of alignment between the mission of the UAA initiative and the way a majority of coalitions describe their work indicate grantees’ awareness of upstream health.** Grantee organizations have internalized the UAA initiative: descriptions were often contextualized to the priorities of their initiatives/projects, as opposed to alluding to upstream health as a general concept. Grantees consistently framed their vision and project work with linkages between the social determinants of health and planned strategies.

As an example, sites focused on housing mentioned their work to address a variety of relevant elements including tenants’ rights, inspection policy, built environment in relation to safety, and healthy housing factors like lead exposure and asthma triggers.

**A Day at the Robert Wood Johnson Foundation**

During the learning collaborative meeting at RWJF, Marjorie A. Paloma emphasized that the grantees are a part of a larger strategy of RWJF’s upstream health initiatives throughout the country. Michellene Davis challenged coalitions to continue to speak out about health inequity and provided them with resources. In open-ended convening survey comments, respondents enthusiastically noted Michellene Davis’ comments as highly resonant, and appreciated understanding the Foundation’s perspective.
Grantees could articulate the logic behind an investment with a focus on upstream health using a cross-sector regional approach. Grantees understand how the UAA initiative can help sites have a greater impact by working together at the coalition and learning community levels, rather than as an organization alone. Interviewees appreciate the potential “silo-busting” nature of the coalitions and the opportunity to meet, interact with and learn from a diverse group of partners targeting a variety of upstream health focus areas. There is an emerging sense of state-level alignment, with about a quarter of site interviewees communicating an aspiration to impact state-level policy, while about the same number discussed scaling efforts at, but not limited to, more local levels.

This investment shows signs of sparking “innovation” and new ideas in many of the grantees, most evident in how grantees are finding new ways to engage with their community stakeholders.

Coalitions are leveraging neutral and known spaces to engage with community members. Use of public places such as museums, libraries and parks help coalition partners to meet people where they are while contributing to the growth of trust with the community. In addition, this provides opportunities for residents to increase their social capital by strengthening their networks of support.

Grantees are taking advantage of the opportunity to connect with and learn from their peers. Grantees reported the relationship building and networking aspects of the peer learning network to be the most beneficial part of the collaborative. Informal connections were valuable, providing grantees with the opportunity to think about their work in new and upstream perspectives. All grantees appreciated the opportunity to grow with other organizations on a social level within the UAA’s peer learning network, though several do not see this as a part of a broader network. This finding may be a consideration if there is interest in aligning organizations to elevate the work of the UAA coalitions at a state level.

Interviewees wanted to learn more about community engagement techniques, how to conduct effective developmental evaluations, as well as how to assess impact, and the implications of these areas to upstream health. They are hoping to learn more about these topics to support potential challenges or new work in areas of community engagement and data collection. Feedback from convening survey respondents was similar; the most common suggestions for content for future meetings were data and measurement, collaborative approaches, health equity and racism, and policy change.

Building Connections – Affinity Groups

During the Learning Collaborative convening, grantees were given the opportunity to connect through formal and informal activities. The affinity group session provided the opportunity for participants to connect with others based on similar interests. In general, these groups were successful in identifying needs for technical assistance and potential areas for collaboration. Nearly 50% of post-convening survey respondent indicated that peer networking was the best part of the convening.