

# Lessons Learned

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Note: This document was published under our previous organization name, Group Health Foundation.



# Lessons Learned

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**A reflection of the many lessons shared with us by  
organizations partnering with communities to advance health  
and health equity in Washington state.**



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# Introduction

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Group Health Foundation aspires to shape and accelerate efforts to improve health equity and advance community aspirations for a vibrant, healthy future in Washington. As a newly formed foundation with equity as a leading value, we seek to learn from those working across our state who are addressing racism, poverty, and other oppressions in their work to advance health and health equity.

Prior to embarking on our strategy development, we have committed to exploring a number of areas including gaining a better understanding of how we incorporate equity into all that we do; taking time to learn the landscape of health and health equity work in Washington state; and looking at how best to approach community engagement and supporting community-centered solutions. To contribute to this learning, in the spring of 2018, we put out a call for proposals

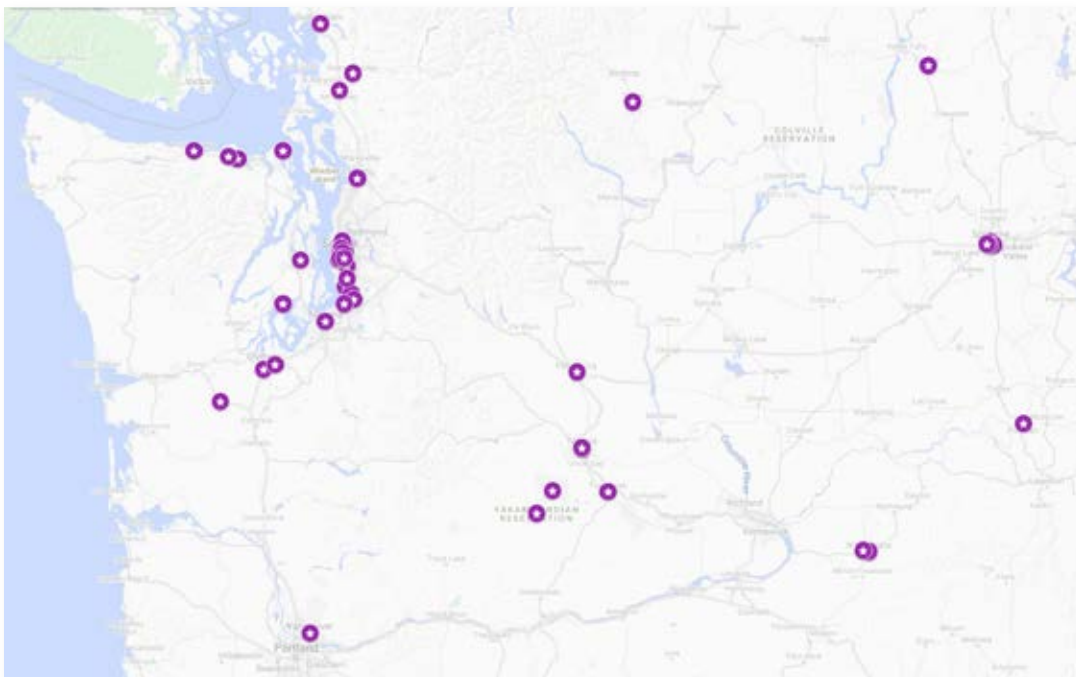
to fund presentations from those working to engage place- and identity-based communities to improve health and health equity. Starting from the value that communities most impacted by inequities should be at the center of solutions, we sought to learn from, and alongside, mission-aligned organizations. We asked what others had learned from their efforts to develop effective and equitable community-based approaches to improving health. The responses we received are rich with wisdom. This report brings together many of the lessons, stories, and insights shared with us by our partners. We are grateful for their generosity and recognize the gifts that have been shared with us. In the spirit of reflecting back what we are learning, this report lifts up many of the stories and lessons that we were fortunate to receive.

# Participants

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Across Washington, incredible efforts are underway to advance equity, address structural racism and other oppressions, and build thriving communities. From Native-led efforts to revitalize the Salish languages spoken in the Columbian plateau to Black-led community organizations in Seattle partnering to protect and build community wealth in the face of displacement, communities are working to ensure that those experiencing the impacts of inequitable policies and practices are at the center and forefront of solutions.

This report includes lessons shared with us by 85 organizations including community-based organizations, legal and policy advocates, statewide coalitions, educational institutions, tribally-affiliated organizations, and public-sector agencies. We have included stories to illustrate key learnings and to provide specific examples. To review the full presentations that were shared with us. Please visit [\*\*grouphealthfoundation.org\*\*](https://grouphealthfoundation.org).





# Prevalent Challenges Across the State

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In their reports, organizations spoke to some of the challenges they faced that pose barriers to addressing inequities and building community power. While this summary does not represent the totality of challenges experienced across the state, the issues raised provide examples and indicate trends of what individuals, families, and organizations are facing daily as they work to build and strengthen their communities.

In the state's urban centers, many organizations spoke to the difficulty of trying to build a thriving community amid rapid community displacement—which not only brings with it the devastating loss of housing, but also the loss of established networks, significant cultural community anchors, and other community resources.

Rural and other more sparsely populated areas of the state named geographic distance as a factor that makes it difficult to bring people together and ensure needs are met. A lack of transportation and technological infrastructure has meant that receiving medical care, whether by public transit or telemedicine via the internet, are not currently feasible options.

Isolation was not only a barrier experienced by geography. Organizations working with elders and people with disabilities raised that social isolation can be a challenge for some community members.

Linguistic isolation, whether because of scarce resources or community ostracism, was a barrier to services in communities where, for example, services may be offered in Spanish but not in many of the indigenous languages of Mexico and Central America.

Addressing the needs of community members given the proliferation of opioid use, was an issue that organizations across the state, regardless of geographic location, named as a challenge. Additionally, several organizations raised community safety as a central concern. For example, fears caused by recent raids by Immigration and Customs Enforcement (ICE) have led to great difficulty in bringing members of immigrant communities together at public forums and events.

Under exacting political and economic pressures on communities, organizations are working to develop solutions to what may feel like intractable problems. They are carrying out this work with no, limited, or unpredictable year-at-a-time funding commitments. Organizations named the need to plan for long-term efforts that promote sustainability. They stressed that supporting community-driven solutions means investing in relationships and projects for the long-term.

# Lessons

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As Group Health Foundation embarks on our efforts to address health and health inequities, we are keenly aware that communities have long been working to address issues of structural racism, poverty, and other conditions of oppression. The Lesson's Learned grants provided organizations with funding to share with us what they had learned to inform how we approach engaging community in our work towards health equity. The lessons that emerged from the voices filling the pages, presentations, and videos sent to us, describe knowledge gained over time and

with intention. Spokane's Health Equity Circle reminded us of Paolo Freire's words to Myles Horton: "We make the road by walking." While each organization approaches its work in its own way and using varied strategies, organizations are walking the road to equity by building collective power, ensuring community-driven solutions, transforming organizational culture, deepening accountability, and strengthening democracy. The following provides a synthesis of these lessons and what organizations identified as essential components of their work.

# I. Build Collective Power

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**“The more voices, the richer the results.” – N.E.W Hunger Coalition**

Many organizations named the inherent power imbalances created by structural racism and other oppressions. Addressing this imbalance has required an intentional effort to build collective power. To do this, organizations highlighted the importance of investing in long-

term relationships, developing leaders, healing from harm and trauma caused by historical and present-day inequities, and building the support and learning infrastructure necessary to create strong partnerships for collective action.

## Invest in long-term relationships

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A significant number of organizations shared how critical it is to invest in long-term relationships. They recognize that building trust with the community takes time. Some groups we heard from are based in the community and so relationships are already established. As the Salish Language School in Spokane stated, “We are Native driven and led, a continuum of the community, not a separate segment of it. Because we are firmly rooted within the community, every decision, creation, design is a community response to a community problem.” The Salish Language School emphasized that their successes have come from their commitment to staying community-driven, and Native led.

Other groups discussed issues of mistrust to overcome due to historical harms caused by government, philanthropy, or other institutions or to past missteps by their own organization. Some pointed to the need to develop a shared vision for racial and social justice. Across the board, organizations stressed that building community power has meant a commitment to building relationships slowly, staying committed to those relationships, and responding as community needs arise.



# La Casa Hogar (Yakima Valley)

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## **Building authentic relationships and responding to community needs.**

La Casa Hogar has been a part of the Yakima Valley for 23 years. The organization works to build community amongst Latina families through programs centered on adult education including GED and English and Spanish literacy, women's leadership, health and nutrition, early learning, and citizenship. More than 600 families partner with La Casa Hogar every year. The organization values building authentic and trusting relationships and demonstrates this value by a deep commitment to listening and investing in

**"We expect relationships to build slowly and are willing to put in the work for the long vision."**

what community is calling for. They illustrate how they respond to community need through a story about how their citizenship class came into being:

*Carmen, one of La Casa's English students, decided she wanted to become a US Citizen. She approached the Program Director and asked "Por qué no ofreces clases de ciudadanía?"*

The Program Director responded that if Carmen could find ten others who wanted classes, they would offer them. Carmen went downstairs and asked ten other students who were in the living room. Fifteen minutes later she returned upstairs and declared, "We're ready." Classes began in 2010 and La Casa employed the first DOJ-Accredited Representative in Yakima in 2014. As La Casa states, "The rest is our story..."



# Cultivate leadership

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Organizations stressed the importance of developing and cultivating leaders within their community. Leadership development for many organizations has meant drawing from the inherent knowledge that comes from lived experience. The Healthy Living Collaborative of Southwest Washington uses popular education tools to surface people's innate skills and strengths. In Seattle, Asian Counseling Referral Service has found mentorship and peer to peer outreach to be essential in the leadership development of queer Asian American Pacific Islander youth who are navigating intersecting identities and facing compounding inequities. In the Skagit Valley, Catholic Community Services has used women's empowerment circles as a helpful way to nurture the leadership development of farmworkers.

In addition, some organizations highlighted the importance of cross-racial organizing and building a pipeline of leadership across communities. One America, a statewide advocacy organization, brought African American, Native American and immigrant and refugee communities together in 2016 to co-develop an advocacy agenda and break down barriers between communities. Prior to this time, issues had been identified by people in leadership outside these communities. They reflected on their approach, "We centered this because we fundamentally believe that unless we heal the divides that have intentionally been created between our communities we cannot work towards justice."



## Got Green (Seattle/King County)

### Developing a base of leaders in South Seattle and beyond.

Since its inception in 2008, Got Green has been working to bring together communities of color in South Seattle to organize for environmental, racial, and economic justice. Their organizing approach intentionally cultivates and builds a base of multi-generational community leaders to be central voices ensuring that the benefits of the green economy such as green jobs, healthy food, energy efficient, healthy homes, and public transit reach low-income communities and communities of color.

In its early years, Got Green was a majority male organization due to the focus on green jobs in the construction industry. They launched the Women in the Green Economy Project in 2011, by engaging with women of color living in Southeast Seattle on their priorities. Got Green's model of engagement includes using community-based research as one way to organize and build leadership. Through surveys conducted by young adults and women from the community, and in community

conversations, they identified access to healthy foods as their top issue. This led to the formation of the Food Access Team, a place for women of color to find their voice and influence public policy on issues of food security and affordability. Their efforts led to significant legislative victories at the municipal level, including the passage of a tax in 2017 that is designed to dedicate resources to support those who earn too much to qualify for federal assistance with food, yet don't make enough to afford healthy, fresh food.

Additionally, Got Green has cultivated youth leadership through the Young Leaders in Green Movement, which engages young adults about their priorities and the barriers faced in creating their future. One policy victory has included ensuring that City of Seattle-funded projects include a percent of workers from the zip codes where those projects take place. The deliberate emphasis on cultivating leaders has resulted in organizers across generations working alongside each other as they build power for communities of color in Seattle and in neighboring communities.

**“The very people often left out of policy and systems change – people of color and low-income women -yet disproportionately impacted by food policy, are rising up and strategizing together on how to best address this food security gap.”**

# Use culture and community to heal from historic harms

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Organizations named the deep harm caused by slavery, colonization, and the subsequent practice and perpetuation of structural racism and other compounding and intersecting oppressions that have impacted Black, Native, and other communities of color. Groups called out the incredible resilience of their communities and the important role that healing plays in their work.

For some, healing has been about creating the time and space for fellowship and connection. Byrd Barr, an organization that is a part of a larger community of practice bringing together Black-led organizations in Seattle, shared, “We focused our peacemaking circle work on relationship and trust building to inform a shared leadership practice. This process involved acknowledging, healing and celebrating our individual and collective experiences as a people, to learn and create solutions together.” The King County Early Learning Coalition also found that creating space for people to build connections was key to addressing trauma and harms. They described a community engagement process centered on what Black families wanted to see strengthened in early learning, “The conversations were frank about how the current systematic and structural issues in early learning and K-12 school systems, and a racist society in general, have impacted the mental health of the children and families as a whole. Multi-generational trauma was acknowledged as a stressor for family members of all ages.” While the coalition is now developing a parent advisory group to inform next steps, they observed that the fellowship shared between families during the engagement process helped strengthen parent connections and has led to the request for ongoing gatherings.

Kitsap Strong, an initiative consisting of seventy agencies working to improve the well-being and educational attainment of Kitsap County residents, described how an understanding of trauma and Adverse Childhood Experiences has been built into their capacity building efforts. “We believe by building collective knowledge and understanding about the impact of trauma and toxic stress on human development and behavior, we can increase empathy and perspective taking, two critical skills for addressing equity.”

UTOPIA, an organization serving the Pacific Islander LGBTQI community in Seattle and Tacoma, highlighted the role culture plays in providing healing and a safe space. “We provide frontline support and advocacy to people for whom gender identification has resulted in harassment, discrimination, severely limited work opportunities and even criminalization... Within mainstream society, we are simultaneously both invisible and hypervisible as other and as targets for discrimination, abuse, and violence.” They provide services and resources as well as political education and cultural community. “We refuse to leave behind any aspect of ourselves in our work for the liberation of QTPI people. We are concerned addressing both the immediate physical safety of our community and the systems, policies, and beliefs that make us unsafe.” UTOPIA stresses the importance of centering community and culture, “Together we share community, our cultural and healing practices, our language, and our ways of being in the world.”



# Salish School of Spokane (Spokane/Columbian Plateau)

**“We believe that traditional language and culture are the keys to achieving a healthy and culturally grounded Native community.”**

**Revitalizing language and culture to strengthen resiliency and self-determination.**

The Salish School of Spokane is founded and led by Native American community members committed to revitalizing the languages of the Columbian Plateau. The school brings community together across generations to teach and participate in language classes and provide cultural programming to transform the community.

The school shared that their effort was undertaken in response to the historical harms of colonization and the continued impacts of structural racism that have led to disparities in education, health, employment, and interactions with the criminal justice system. They know that reclaiming their language and identity as a people has profound impacts on the health of the community. “When we engage in inter-generational language and culture programs, we strengthen our Native identity, pride and inter-generational relationships. A strong identity, a sense of self-worth, and strong relationships empower us to make healthy choices and increase our resiliency when we face challenges or crises.”

The Salish School’s work emerged from the community collectively finding that a movement for language and cultural revitalization proved to be the most transformational in addressing intergenerational trauma, creating confidence, building support networks, increasing family stability, and reintroducing healthy diets. “Community transformation is not a segmented process but a holistic one. We have learned that to enact long-term, sustainable improvement for children and families in the Native American



community, we must acknowledge, respect, and celebrate traditional Native American language and culture. As our community members speak our traditional language, learn our traditional songs, gather our traditional foods and medicines, and maintain and build intergenerational relationships with our Elders and other Knowledge Keepers, they are also healing themselves and our community in the process.”

The School’s work is both led by, and in response to, the needs of the community. As such, they define priorities and ways of being that are best for their community, recognizing that their efforts are a part of a larger movement. “Our people want every door of opportunity open to their children, and do not want to have to choose between honoring and maintaining traditional culture and language and being economically self-sufficient and able to thrive in the globalized and informatized international economy. Our community has invested in language and culture revitalization because they are invested in the health, wellbeing and recovery of our community. They are invested in the foreword thinking for and empowerment of our community. Moreover, we are connected to a larger network of indigenous communities that are also in the processes of creating their own responses towards revitalization and decolonization.”

# Build an infrastructure to support one another

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Many groups shared that creating networks has been a critical part of building collective power. This has included formal and informal partnerships, coalitions, and communities of practice.

For some community-based groups, coalition building is a strategy to amplify and center their voices in system changes. One example of a community-based effort to use a network to lift up community voice is the Somali Community Health Board. They began in 2012 by inviting health system providers to the table to discuss issues of priority to their community including prenatal care, as well as substance use, mental health, tobacco use, chronic disease, cancer, and youth violence. Their work has led to the formation of a Community Health Boards Coalition that includes the African American Health Board, Eritrean Health Board, Ethiopian Health Council, Cambodian Health Board, Vietnamese Health Board, Arab/Iraqi Health Board, and the Pacific Islanders Health Board. The Coalition is an effective model of community-owned and directed health care that gives power to the community to advocate for culturally competent and accessible services.

We heard from organizations about the need to address power dynamics in coalitions and to ensure community voices are at the forefront of efforts for policy and system changes. To this end, an essential part of building networks for power

has been ensuring that the coalition has shared values to guide their work. The Washington Voting Justice Coalition, housed at the Win|Win Network and working on a set of policy reforms to reduce barriers to voting, spent time identifying a set of principles to serve as a foundation for their policy work. This includes a commitment to racial equity and being accountable to communities most impacted by voting barriers; redefining wins to acknowledge that a win is not only defined by the policies won but by the process; creating a transparent and equitable decision-making process and a resource allocation model focused on those most impacted by voting access issues; and creating a learning community that focuses on mentoring and supporting one another to strengthen their collective and individual work. Kitsap Strong, raised a similar lesson stating, “Most of the literature and research on collective impact fails to address the critical group process of developing shared values. We tried to implement collective impact like it was a recipe for community and social change, and rapidly found that it was ineffective and incomplete.”

The time spent investing in these efforts has strengthened partnerships to ensure that power dynamics are addressed, communities most impacted by racial and social inequities are guiding the work and their voices are centered, and communities have a space to learn together and reflect as they build collective power.



# Community of Practice – Byrd Barr Place (Seattle)

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## Weaving resources together to support learning and community power.

*“There are nearly 240,000 Black people in Washington State. We share a history and identity as the descendants of survivors of the middle passage who became enslaved in the antebellum south and began migrating to the Pacific Northwest as far back as 1788 to pursue opportunities in the urban centers of the north. Our identity and experience as a community, described in the outcomes data in health and other areas, has been shaped by extraordinary resilience in the face of pervasive racism over generations.”*

Established in 2013, the Community of Practice(CoP) is a growing coalition comprised of agencies serving African Americans in Seattle: Urban League, the Washington Commission on African American Affairs, the NAACP, Africatown, and Byrd Barr Place. The CoP shared the importance of working in coalition and in mutual support as they work to address racial inequities amidst rapid community displacement.

When they began work in 2013, the organizations came together with differing values and priorities. While many of the organizations had partnered on policy and other projects in the past, the group

worked to create shared values and guidelines for communicating. The time taken to do this ensured that they could move into hard conversations and make tough decisions from a place of trust. The attention paid to building a partnership led to deepened ties, greater cooperation, as well as an opportunity to build individual organizational capacity and the coalition’s ability to make a greater impact.

Their success in leadership, capacity, and partnership has led to strong collaborations and the development of a health equity frame, adding housing and neighborhood-scale economies as the foundation for a healthy community. Successes include: NAACP and Urban League partnering to keep distressed Black homeowners in their property; Byrd Barr Place and Africatown partnering to acquire ownership of a historically Black-owned building located in a gentrifying area of the community; and NAACP and Africatown partnering to serve the business needs of Black-owned businesses. In addition, they completed their first collaborative project to gather stakeholder input on the most important needs for local African Americans culminating in a report that elevates innovative race-based solutions to address barriers to un- and underemployment and barriers to wealth creation in the Black community.

**“As King County grows and real estate prices outpace income, Black homeowners, renters and businesses have been displaced from our historic neighborhoods. We risk losing the place-based critical mass of people, and culturally-relevant businesses and services that keep us connected to one another.”**

## II. Ensure Community-Centered Solutions

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**“We believe success begins with relationships, a heart for authentic connection and collaboration born from trust-building.” – Whatcom Family and Community Network**

A second current that ran through the presentations was the importance of ensuring that those who are most impacted by conditions of oppression are central to developing solutions to health inequities. Organizations presented a number of lessons learned about what this looks

like in practice. This includes committing to deep listening, allowing people to share their full selves by using arts and culture as a part of engagement, identifying the root causes of inequities, and attending to the importance of narrative and messaging.

### Commit to deep listening and meeting people where they are

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Ensuring that communities most impacted by racism and other oppressions are front and center requires that organizations commit to deep listening. While nearly all organizations emphasized the importance of holding community sessions and one-on-one conversations, many organizations have learned that it also includes getting out of the office, community center, or clinic to go to people and meet them where they're at, both literally and figuratively. International Community Health Services (ICHS), an organization serving the Seattle area's Asian American Pacific Islander communities, shared that their community outreach team has made it a practice to go out into the community rather than expect community to come to them. “They bring ICHS right to the community's doorstep and are

often a trusted first point of contact long before a person has ever stepped foot within an ICHS clinic or seen an ICHS health care provider.” This model of engagement is rooted in an understanding that community members experience historical and ongoing marginalization and a lack of access to health care due to institutional racism, discrimination, or bias by care providers, a lack of culturally relevant information, services in their home language, and a general mistrust of health or other formal systems. To reach communities means acknowledging this reality and taking a step forward. At a time when our communities across the state are experiencing increased fear and vulnerability, as well as challenges such as substance use and homelessness, meeting people where they are is critical.



# Confederated Tribes of the Chehalis — Chehalis Tribal Wellness Center (Oakville)

## Gaining trust one person at a time.

The Chehalis Tribal Wellness Center shared their experience working to build trust with their tribal members, including addressing the needs of tribal members who are experiencing substance use. “We recognized that we do well in helping those who come through our doors, but we still know we have a 25-30% population that does not come in for services. We know a majority of those may have addiction or mental health issues and barriers to not coming in. So, we decided to start an outreach team to go and find them and start addressing their chronic health needs as well as mental health and addiction issues.”

The outreach team works to gain trust of community members by taking food and connecting with individuals. They reach out to those who are housed and to those experiencing

homelessness. They don’t collect names to start with and instead use numbers. Rather than expecting people to come into the clinic, they treat what they can in the field, including bringing patients medication. Clinic staff are responsive to addressing the needs of their members. For example, many tribal members don’t want to be treated unless their non-tribal partner can be treated. As a result, the tribe works with non-tribal health agencies to ensure they can provide treatment to couples. They have begun to train other tribes, organizations, and health care providers on their model.

**“We feel once they trust us and let us address their health and dental issues maybe we can work towards treatment.”**

# Engage from culture and honor the whole person

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Ensuring the voices of communities are centered means being a part of people's lives outside of conventional work hours. Many organizations called out the importance of honoring the culturally specific ways that communities gather and fostering an environment that ensures a person can bring their full selves. Breaking bread together was named as an important part of building fellowship and a chance to strengthen relationships. Many groups found that engaging children in a parallel activity such as art activities, games, or reading was a way to bring children into the experience. Being flexible and creative with the timing of meetings also played an essential role. Food Innovation Network, an organization working to advance the local food system in South King County, named the need for adaptability. "We have moved away from meetings following a strict agenda, timing, and the standard 'opening the floor for discussion' that typically brings out participation of those familiar and comfortable with that format. We have rotated facilitators, broken into small groups, and used tools such as 'gracious space,' a process developed by the Center for Ethical Leadership. We have also had frank and open discussions on being aware of the words and terminology used in meeting spaces and written materials such as our work plan."

The Trust for Public Land, a national organization working to protect public lands and to create close-to-home parks, said that art and culture played a critical role in a project in Wenatchee, where the Latinx community has taken on ownership of the development of a neighborhood park by forming a stewardship group based on the Latinx cultural model of godparents or padrinos.

They reflected on how advocating for the park has strengthened community advocacy, "With more than two dozen members, the Parque Padrinos are some of the park's strongest advocates and an essential link to the community. Seeing the value of civic engagement, they are already planning to tackle issues beyond the park, like underrepresentation of the Latino community on Wenatchee City government committees and councils."

The City of Seattle's Duwamish Valley Program and the Duwamish River Cleanup Coalition/Technical Advisory Group has engaged community in ways that bring in culture in a less formal setting. This has included an intergenerational dinner and karaoke night with Vietnamese seniors and program members, tea parties and living room forums with the Somali community, and boat tours with Latinx youth and their families. The Duwamish Valley Program said, "Community members have felt more comfortable and safe sharing their priorities and co-developing solutions in these informal settings that celebrate their cultures and traditions and recognize their expertise."

Honoring community voice also means ensuring community members are compensated for their time and expertise. As the Duwamish River Cleanup Coalition/Technical Advisory Group (DRCC/TAG) stated, "The concept that low-income and marginalized communities are expected to volunteer their time to ensure social justice is one that DRCC is opposed to. Members of our community deserve compensation for addressing issues, just as City, Port and County officials do."



# Identify root causes

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A crucial part of community-driven or community centered solutions comes from working with community members to surface and elevate the root causes of the issues being addressed. Many organizations use the tools of community-based participatory research, a tool that centers impacted communities as they design and lead research, and popular education models to simultaneously draw out the root cause of an issue, develop relationships, cultivate leadership, and organize with the community.

Room One, an organization working with young women in Okanagan County, found that in their work on teen pregnancy, the young women in juvenile detention and in school could use storytelling to challenge a dominant narrative that teen pregnancy was the result of poor choices. They shared, “Staff and many of these youths they worked with, saw that their own stories highlighted how the problem of teen pregnancy was tied to other critical problems in our community.” Telling their stories became a way to surface a bigger analysis of their lived experiences.



# Ttáwaxt Collaborative (Yakama Nation)

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**“The solutions are in the hearts and hands of the community.”**

The Ttáwaxt Collaborative is working to promote healthy families and reduce infant mortality within tribal communities on the Yakama Nation Reservation. Their journey began in 2013 when service providers and one tribal member on staff at Virginia Mason Hospital came together to address maternal and infant health and the high tribal infant mortality rate in Yakima County. They shared, “The service providers wanted to implement a Centering Pregnancy® program right away. However, the tribal member on staff, who is a trusted tribal community member with a MPH, urged a step back to examine the situation further, build relationships, and build capacity.”

The group hired a tribal member to facilitate the start of the collaborative and they launched a Community Needs Assessment Research Study using a community-based participatory research framework. The group hired two sisters from the Yakama Nation with no prior experience in research. “The sisters who were recruited and hired by the tribal member at Mason Memorial. At that time, they did not have much interest in the project itself; however, that would later change.”

**“Listening to the voice of the tribal community and understanding barriers to care was vital to improving health services for tribal women.”**

The sisters and the tribal member on staff conducted interviews and administered a survey. The collaborative invested in the women by paying for research skills training. “It took about eight months to collect the data due to the lack of capacity, burnout, and often times the members did not have gas money up front to get to where they needed to go. This process was very difficult due to the sensitive nature of the questions asked and it caused hardship on the women collecting data. It was in those moments that bonds were formed between the community, those collecting data, and the Ttáwaxt Collaborative service providers.” The findings from the research project were profound. The responses from the interviews sparked the desire for Ttáwaxt members to fight for birth and family justice in the tribal community. The research was also able to highlight the incredible impact of culture and family. They reflected, “Perhaps the greatest finding of the study was that those women who had a tribal elder in their lives had no infant mortality.”

Through the research and by sharing their findings, the collaborative has developed trusted relationships with the community. Tribal members have joined the collaborative as trainers and as doulas. Taking the time for this process has ensured the collaborative could respond to the needs of tribal members and provide culturally relevant wrap-around services led by the community and for the community.



# Shape message and narrative

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Organizations expressed that their work must address harmful dominant narratives that perpetuate inequity. For example, Northwest Immigrant Rights Project (NWIRP) has committed to challenging ideas regarding who is worthy of citizenship, “NWIRP is deeply conscious that our immigration system is built upon a foundation of racism and inequity that operates in multiple levels. In practice, this means ensuring that our services are open even to those who are politically unpopular, such as people who have had criminal convictions in the past.”

Organizations also named that research is often given weight in public discourse without looking at the nuance of how data is collected or who has been involved in research design. To that end, organizations stressed the importance of valuing lived experience as an essential component

of understanding how people are impacted. El Centro de la Raza described an effort they undertook to address air quality data in the Beacon Hill neighborhood of Seattle. “Many systemic inequities that we addressed stemmed from the fact that communities in general and in particular, communities of color, are often not considered in research and information sharing.” Their campaign emphasized the impact of the air quality on residents, including the high rates of hospitalization due to asthma, instead of solely relying on monitoring devices that were placed in less populated parts of the neighborhood. Ultimately the Puget Sound Clean Air Agency modified their online statement to publicly acknowledge that that exposure to multiple sources of air and noise pollution, among other factors, could lead to established health problems.

# International Examiner and International Community Health Services (Seattle)

## Partnering to get the word out.

International Community Health Services (ICHS) and the International Examiner (IE) have been serving the Asian American Pacific Islander community in the Seattle area for more than 40 years. The two organizations partnered to share health information with the community via the IE, in part to dispel the racialized stereotype of Asian Americans as a “model minority” without the need for health services.

Their partnership consisted of six articles that ran in a special ICHS issue highlighting patient stories and the role health centers play as a part of the social safety net. They also included information to raise awareness of hepatitis B, which disproportionately impacts the Asian American Pacific Islander community. The partnership focused on health concerns and disparities among the APA community. “Mental health issues, in particular, often go untreated among APA people out of stigma and shame.” ICHS and IE’s media campaign allowed them to simultaneously communicate that the health issues are both prevalent and can be treated, and to raise awareness to the broader community about these disparities. By joining forces, they were able to challenge harmful stereotypes while amplifying their impact on their community.



IE COMMUNITY VOICES

INTERNATIONAL EXAMINER

July 5, 2017 - July 10, 2017 - 3

## Sick with worry: Asians and minorities ignore the need to heal in a climate of fear

### Pathways to Health

By International Community Health Services

Increased fear of discrimination and harsh immigration policies are causing mental anguish for people in Seattle's minority, immigrant, and refugee communities. The disease is so prevalent it's keeping them from seeing a doctor or therapist, and creating paralysis when the community could most use the support of counseling and other health-related services.

"Patient anxieties have increased along with certain executive actions and the local national debate on health care," said Randee Aua, behavioral health manager at International Community Health Services (ICHS).

ICHS providers are seeing distress that interferes with patients' daily lives and decisions, including an increase in complaints of sleeplessness, paranoia of being followed, difficulty concentrating, and hypervigilance.

"Patients have increased anxiety about their health care benefits being cut and their immigration status questioned," said Jessica Bhagat, ICHS psychologist. "Some feel an urgency to apply for U.S. citizenship, while others are not sure about making travel plans to visit other countries because they fear not being allowed back into the United States."

"I have patients in the process of seeking political asylum. They are worried they will be deported. Some have already experienced trauma in the process of leaving their home-

with mental health services. Newsweekers in a strange land, marginalized from the mainstream—transportation, child care, cost, insurance, and time off already offer a challenge.

Some find other reasons to stay away. "People with mental illness are taught to feel shame, to believe they have a character or moral deficiency. This perception is especially true among many ethnic communities," said Aua. "Many people don't want to deal with why they experience certain feelings, they just want them to go away. Those seeking treatment are the better ones."

Sometimes, help literally gets lost in translation. Medical professionals like those at ICHS, who are trained to be culturally sensitive, as well as those in other languages, help bridge gaps.

"Communication is influenced by the translator's cultural filter and biases, as well as their interpretation ability," said Aua. "We tend to generalize people of different cultures based on our past interactions. People may misread cues."

**Healing starts with community, compassion and kindness**

"Whatever the source of anxiety, we can make a difference with how we respond," said Aua.

Health care centers—falling under a category with hospitals, schools, places of worship, parents, friends, and workplaces—are

### About ICHS

Founded in 1973, ICHS is a non-profit community health center offering affordable primary medical and dental care, acupuncture, laboratory, pharmacy, behavioral health, and health education services. ICHS' four full-service medical and dental clinics, located in Seattle's International District and Holly Park neighborhoods, and in the cities of

Bellevue and Shoreline—serve nearly 20,000 patients each year. As the only community health center in Washington primarily serving Asian and Pacific Islanders, ICHS provides care in over 50 languages and dialects annually. ICHS is committed to improving the health of medically underserved communities by providing affordable and in-language health care. For more information, please visit [www.ichs.com](http://www.ichs.com).

### What it means to be welcome

As a Federally Qualified Health Center, International Community Health Services (ICHS) doesn't have always been open to any and everyone. Recently the community health center has taken extra steps to make sure patients feel welcome—addressing staff training and a welcome statement posted in all clinics that make it clear patient dignity, privacy and security are a priority.

"ICHS is providing staff training to offer consistent and considered responses to patient concerns about issues such as disclosure of personal information and immigration status. We also make sure our staff are aware of resources such as free legal support, that can be passed along to ease some of the challenges facing our community members," said Michael McKee, director of health services and community partnerships at ICHS.

Patients and visitors to ICHS' International District, Bellevue, Holly Park, and Shoreline clinics will soon be greeted with multilingual posters offering reminders of ICHS' commitment to health care for all, regardless of ability to pay.

"We've created a message that reminds patients how much we value them—how much we truly value everyone," said McKee. "We will be launching this as a welcoming statement to further help put people at ease."

"Our clinic works alongside patients to support them in achieving their health goals. An important aspect of this partnership is that patients feel comfortable and relaxed about going to see their health care team," said Teresa Lee, ICHS family physician.

# III. Transform Organizational Culture

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**“Our community is experiencing a cultural change around collaboration. The City and County working together to fund [a community health improvement plan] is one example but there are many others... These changes are both uncharacteristic and exciting, and provide hope for cultural and relational evolution can will yield positive payoffs in the community.” – Jefferson County Community Health Improvement Plan**

Many organizations described their journey to live the value of equity and what they have learned about the need to shift and transform organizational culture. This included developing

shared values, hiring staff that reflect the community, investing in training and education, and addressing power dynamics between organizations and communities.

## Develop shared values and agreements

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Spending time on articulating shared values and agreements was fundamental as organizations committed to equity. The Win|Win Network, when working on the Washington Voter Justice Coalition (WVJC) to address barriers to voting for marginalized communities, learned that developing a shared set of values and principles was critical to their effort. The coalition led by

a steering committee of seven, the majority of whom are people of color, paused multiple times to come back to their values. They emphasized, “We cannot stress enough that our coalition’s successes happened, in large part, because we dedicated as much time (if not more) to develop our values, processes, and culture, as we did to running a campaign and winning our goals.”

# Hire staff that reflect the community

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Leading with racial and social equity has meant organizations have learned that their work must be led by those most impacted by inequities. Many organizations shared that they had prioritized changing the staff composition so that it is representative of the community. Organizations stressed that having community members from impacted communities in positions of leadership is an important part of shifting organizational culture. Under the leadership of a former Board president who had lived experience as a farmworker and, now, a respected businessperson, the Community Council of Walla Walla broadened its outreach and connection with the community: “He emphasized the importance of showing Latinos that their voices matter and the central role they should play in shaping the future of the region. He also recognized the potential loss of not creating structures through which to engage them in the community-building work that we were already doing. While Community Council certainly had intentions of better engaging the Latino community, his

leadership, vision and energy gave that agenda more force.”

Organizations also reminded us that work doesn’t end at hiring, however, and must include prioritizing and valuing the work of community engagement and partnership. As the Community Foundation of Snohomish County shared regarding their work on the Casino Road Initiative, “Organizational expectations needed to shift so that staff time spent building and maintaining relationships with the community was highly valued. This meant giving staff the flexibility to work nontraditional hours, to attend community events, and show up to community invitations.” The Ttáwaxt Collaborative similarly highlighted making space to build relationships, “Give people the time and space they need to really develop relationships: it is not always a 9-5 job and not always supported by professional organizations (how do you put a sweat lodge ceremony on a time sheet?).”

# Educate and train

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Organizations have learned how important it is to ensure staff and organizational leadership understand the root causes of health inequities. As Healthy Living Collaborative of Southwest Washington reflected, “As we embarked on the work of collaboratively working to address health equity, we found we had to start with training and education and providing a historical context for health disparities to our organizational partners. We realized that many of our partners had a lack of understanding of the context of health disparities and the reasons why there is mistrust of systems in the community.”

Training was described as one tool to ensure staff and board were learning the historical context of present-day inequities and developing shared definitions to help facilitate more meaningful conversations. A few organizations called out that educating dominant communities on issues of racism or other oppressions should not fall onto the communities most impacted by those oppressions. Describing some work done as a part of the WVJC, Sue Mason with What’s Next Washington shared how due to concerns raised by people of color, the coalition put together a series of conversations for white people to address their biases. “Instead of putting the onus on the marginalized to educate, the coalition put the onus on white people to address their behaviors and their biases accordingly. It was incredibly powerful to be part of a coalition that centered the lived experience of communities of color rather than prioritizing the comfort of its white members.”

When describing the development of a Tribal Partners Leadership Council, Better Health Together (BHT), an Accountable Community of Health (ACH) stated “In hindsight, our staff would have benefited from more education—earlier on—around Indian Health Services, Tribal sovereignty, and Native history in our region, in order to have avoided some early missteps. We did not fully understand what it would take to build a trusting and collaborative partnership with our area Tribes and Native organizations, given the incredibly complex history of genocide, racism, and trauma resulting in Natives facing the harshest health disparities of any race in our region. The creation of this council, as well as hiring a Tribal Liaison (a role specifically dedicated to improving collaboration with tribes), has helped us ensure Native voice is part of all BHT decision making.” A commitment to equity has put organizations on a journey that has included learning to fall forward. Investing in upfront education and continuous training has ensured staff and boards are better equipped to keep learning a central part of their work.



# Room One (Okanogan County)

## Shifting internal processes toward equity.

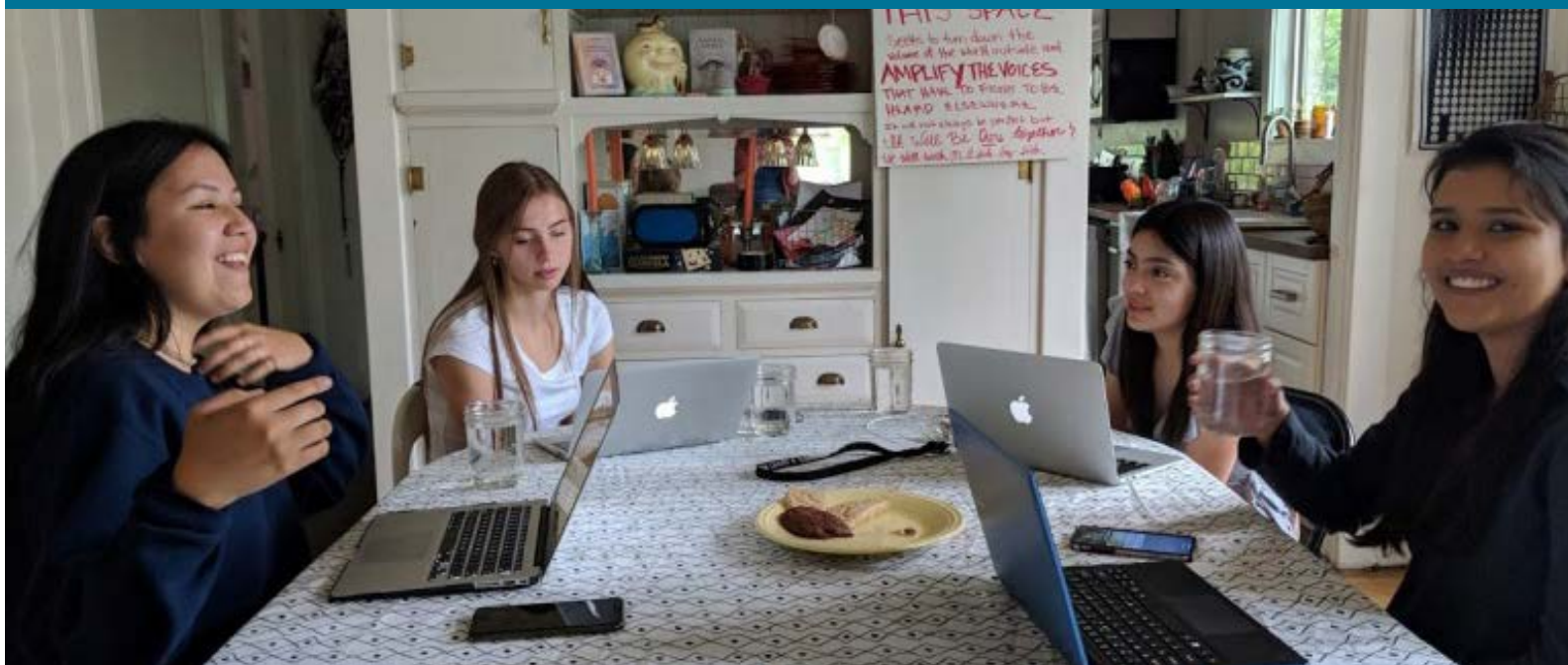
Room One is a central social services and advocacy organization serving the Methow Valley and greater Okanogan County. Through direct services, prevention education, and advocacy for systems change they are working towards a vision of a connected community in which all people can thrive. Committing to equity, both internally and externally, has impacted how they plan and carry out their work.

As a health and social services advocacy agency, they stepped back to look at their role in centering communities most impacted by oppressions, “One way we did this in our teen pregnancy prevention initiative was by continually asking

**“In order to address systematic inequities that affect health, we’ve had to work to ensure that our processes themselves were reflective of both the problem and the solution.”**

ourselves what our role was at any given moment or place. Sometimes the most important thing we could give was our time to research or convene folks, other times it was facilitating in a style that directly addressed or called out existing inequities in the room, and still other times it was to share our learnings or expertise from our direct work with youth or organizational history. We also understood that given our organization’s physical and social location, we were better resourced than most in our county, and sometimes that meant our role was simply to share or redistribute resources.”

The organization shared about the many ways that their values of self-determination, allyship, accountability, dignity, and joy were applied to their internal processes. In terms of hiring they “understand professional work experience and education is inequitably distributed, and try to balance that kind of background with other factors, such as being from the communities we serve, other kinds of work experience and lived history, and hiring for difference within our organization.”





# Recognize power dynamics

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Legal advocates and statewide policy advocacy organizations shared that committing to equity and centering community-led solutions has meant they have needed to acknowledge power dynamics at play between their organizations and the communities they are working with. For many, this has resulted in a fundamental change in how they approach their work. They have moved from leading policy efforts to supporting emergent efforts based in communities.

For example, Columbia Legal Services discussed how they have shifted to “following not leading.” They described their role supporting Got Green to develop legislation aimed at ensuring that when a City-funded construction project was taking place in a distressed community, the residents of that community would have priority for employment. They shared, “We spent more than a year in meetings with Got Green and a community coalition they formed on this issue. We listened to their needs to help create an ordinance that would

survive a legal challenge and achieve the desired result. This intensive listening was critical to the success of the legislation. We had to be able to communicate complex constitutional issues in a way that was coherent. We also learned to listen deeply to make sure a complicated law really would have the results desired by the community.”

Similarly, Legal Voice shared that they have moved to take a more supportive role than to take the lead on efforts. When Washington state proposed a new system for changing one’s gender marker on a birth certificate, they worked closely with a coalition of transgender-led and gender non-conforming community organizations, leaders, and individuals: “Legal Voice provided legal advice, drafting, and coordination, and messaging support as needed and requested by the community, rather than assuming a leadership role.”

# IV. Deepen Accountability and Strengthen Democracy

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**“We interpret our contracts for providing information as a two-way process: Out to individuals and family members (what the systems need them to know), and back to policy makers and people who run day- to-day health and human service operations (what people are experiencing). We layer in skill building so people with [developmental disabilities] and their family members can help policy makers resolve gaps and improve services.” – The Arc of King County**

Many organizations emphasized the importance of shifting power to communities that have experienced historical and ongoing marginalization. Building collective power, ensuring community voices are at the center of the work, and transforming organizational culture are all essential components to addressing longstanding inequities. Organizations also shared

with us that to really make traction, we must also reckon with, and address, entrenched societal power imbalances. This means implementing concrete practices of accountability that rely on more than good will and thoughtful intentions but rather shifts decision-making power to our communities.

# Build structures and practices of accountability

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Organizations shared that addressing inequities and building healthy communities is as much about engaging a community as it is about developing structures for accountability. In addition, organizations are looking at how to ensure accountability in how programs and work plans are developed. King County Public Health's Best Start for Kids Initiative convened an advisory board to govern their work including making recommendations and monitoring how funds are distributed. Since 2014, the Food Innovation Network has been working to support a community-led process. While they made changes to some of their engagement practices they still knew they weren't adequately accountable to communities. Rather than create a work plan that was put in front of the community to comment and react to, the community advocates were asked, "What should community engagement look like in 3-5 years? and "How will we get there?" This led to advocates working with staff to draft a workplan and budget which was ultimately voted on by the advocates themselves.

Many organizations shared that they are applying equity tools to analyze their programs, policies, and budget decisions to create a practice of centering community when developing intended outcomes, examining impacts, addressing unintended consequences, and ensuring that there is an evaluation mechanism. The Healthy King County Coalition developed a Health Equity Assessment Tool to analyze the impacts of their own policies and practices. Additionally, in a report outlining the promising practices ACHs could take when working to ensure greater accountability, Northwest Health Law Advocates recommended the ACHs apply a racial equity tool like the one used by the City of Seattle.

A few organizations shared that they are incorporating direct democracy processes into their health equity work. The Public Health Centers for Excellence, a partnership between the Tacoma-Pierce County Health Department and the Spokane Regional Health District shared, "Many of the communities most affected by health inequalities have experienced sustained and multigenerational discrimination and disempowerment. To change that expectation and relationship, we must use processes that visibly, transparently and actively place enough power and decision making in the hands of those communities to regain their trust and willingness to participate in health improvement strategies." For example, they use Participatory Planning and Budgeting (PPB), a process that facilitates community members directly determining part of a public budget, "In Pierce County, the community told us repeatedly about the opioid crisis before it was on the radar of the CDC. PPB gives community members the authority and resources to respond rapidly and directly, reduce the scale and duration of problems, and improve individual and community resilience by participating."



## Boyer Children's Clinic (Statewide)

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### **Using its role to advocate and be accountable to the children and families they serve.**

Boyer Children's Clinic is an early intervention provider working with children with special healthcare needs (age birth to three), including disabilities and developmental delays, and their parents and caregivers. The clinic works in partnership with early education programs, medical clinics, hospitals, doctors, housing communities, corporate partners, and advocacy groups throughout Seattle, King County, and statewide.

The organization has worked to ensure accountability to those they serve by creating a model in which the "leadership team depends on the unique perspective of a dedicated Parent Advisory Council (PAC) and parent feedback to guide program development, communications, and organizational effectiveness. The PAC meets monthly with Boyer's Executive Director to provide direct input and leadership in how programs are offered and provide suggestions for improvement."

The organization sees the unique role they play and their ability to impact larger systems change. "We recognize –as an early intervention provider operating within a complex, federally-mandated early intervention system –that Boyer plays a role as a "gatekeeper" for families to access early intervention and other health-related services." While they help individuals and families navigate complex barriers to accessing services, they simultaneously work to elevate needs for broader systemic changes across systems. For example, they are working to address access to early intervention services for young children when families are homeless. "This effort will work directly with homeless shelters to design referral processes to directly engage families in early intervention services and otherwise connect families to healthcare services. Additionally, we are working with transitional housing organizations to design a comprehensive early intervention access model that will reduce barriers to access early intervention and other health-related services."

# Go deep and scale impact

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Many organizations spoke about work that was occurring at a localized level to strengthen the community while building political power. The Latino Community Fund's voter engagement work focused on 4,000 "low-propensity voters" in the city of Burien: "The calling room was abuzz, with most callers speaking in Spanish and many laughing while connecting to those on the phone, who were rarely contacted, much less in their mother tongue. That day 1,200 committed to vote --a higher conversion rate than expensive high-propensity voter campaigns."

Localizing power-building efforts can lead to significant changes and result in a community maximizing and, in some cases, scaling its impact. As a part of the South CORE Coalition, Puget Sound Sage brought together groups to push for equity along the light rail corridor in South Seattle. They successfully advocated for the inclusion of the Graham Street Station, which was initially left out of the plan and the area remained unserved by public transit after bus routes were cut. "Little insight was given to the fact that many residents used local stops for short trips to schools, childcare, grocery stores, places of worship, community centers and healthcare facilities." In addition, "South CORE members identified the need for access to community-controlled land near the pending station. This spurred our Land for Justice Campaign, focused on moving an equitable transit-oriented development policy with Sound Transit that will transform how the transit agency acquires and disposes of surplus property at or around light rail stations, ensuring that communities can thrive in place close to transit."

Some organizations reframed a narrative of scarcity, competition, and difference among or within communities and organizations to scale impact and ultimately heal communities. Children's Alliance cited their campaign as "a testament to how a statewide, long-established advocacy organization like Children's Alliance can partner with grassroots communities in a way that makes both groups stronger." Salish School of Spokane's efforts were "focused on engaging the dominant society in an effort to advocate and create positive avenues for reconciliation. We know that in order for our efforts to be successful, it is imperative that the institutions and leaders of the dominant society help empower Native communities through direct funding as well as engagement in critical partnerships with Native led and driven organizations that have demonstrated the development of effective solutions." Commitment to Community, introduced in the section below, work to bring communities of different incomes together: "we actively encourage and challenge people to engage with each other, to take risks by stepping out of their comfort zones to build relationships that are mutually beneficial and are essential to building a thriving community."

Organizations working to bring about health equity are building civic leadership and community power, whether at the local or at the statewide level, by centering the communities most impacted by inequities. Commitment to Community's neighborhood-based work in Walla Walla and Children's Alliance statewide policy efforts are two examples of how organizations are ensuring communities most impacted by inequity are at the forefront of addressing solutions.



# Commitment to Community (Walla Walla)

## **Building strong neighborhoods and advancing community power.**

Commitment to Community, a program of the Blue Mountain Action Council in Walla Walla, is a grassroots community-led program working with residents living in three of Walla Walla's most economically-challenged neighborhoods. They work to build community connections and support building capacity with the residents who are primarily Latino and many of whom are undocumented. They shared, "There is much work to be done to effectively address power differentials in our community. We believe that our capacity building work gives people the opportunity to realize the extent to which their power can impact their lives, and their neighborhoods."

The neighborhoods have experienced significant outcomes as a result of owning their power. "We have successfully prepared many residents to speak at city council meetings (some, more than once) to voice the needs of their neighborhoods. In almost every instance of such public testimony, the city government responded by directing resources to the neighborhoods. When residents assert and advocate for themselves they are taking steps to confront power differentials. They own the process, and the outcome. And this process creates something usually unexpected: the power to be transformative."







# Children's Alliance (Washington State)

## Supporting a movement for equity.

Children's Alliance is a 35-year-old statewide policy advocacy organization focused on issues impacting children and families including health, nutrition and food security, and early learning. They worked in collaboration with Washingtonians from the Marshall Islands to restore cuts to the state food assistance program and highlighted the importance of building relationships. People from the Republic of the Marshall Islands, along with those from two other Pacific Island nations, Republic of Palau and the Federated States of Micronesia, have Compacts of Free Association with the United States.

The compacts are based on current and historic strategic U.S. military interests. People from COFA nations have a unique status. They can travel to, live, and work freely in the United States. People from COFA nations serve in every branch of the United States military. They pay taxes and reside in the country legally, but are barred from most federal benefits including food stamps and Medicaid.

**“Collaboration, shared advocacy, and shared leadership are crucial to building movements and organizations that can endure, adapt, and win real victories that transform systemic inequities.”**

As Children's Alliance engaged with the COFA community, they learned about health disparities experienced by its members. Their close ties ensured that when an opportunity to address these issues arose, they were ready. Six years after their initial work on restoring cuts to the state food assistance program, they partnered with the community in a successful campaign to pass the Pacific Islander Health Equity bill, Senate Bill 5683. This new Washington law provides free health coverage to low-income adults from COFA nations (children are already eligible via Apple Health for Kids).

Children's Alliance stressed the supportive role their organization played by allowing the communities to lead the work and how this is key to building a movement. “No one policy change can undo racial inequities in health care and health outcomes. Each campaign should help build a stronger movement for equity. And effective movements are rooted in the leadership and expertise of people directly impacted by the harms of racism. Over eight years, many leaders played a part in advancing both the State Food Assistance and the health equity campaigns and deepened their leadership and expertise in the process. These leaders are now working to create a statewide organization of Washingtonians from COFA nations. Children's Alliance is playing a supportive role in this effort, along with other allies. We see its success as important to the endurance of our policy wins and the long-term well-being of the community.”

# Address structural barriers to health equity and promote self-determination

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The conditions of structural racism, ableism, poverty, heterosexism, and other oppressions that are embedded in our institutions require strategies that address immediate needs as well as systemic change. Organizations are tackling this need from a place of self-determination, understanding the deep wisdom that comes from lived experience. Byrd Barr Place shared how through their own work and the Community of Practice, they are working to bring together organizations in the Black community that are

working on economic opportunity, health, and housing. They stated, “The key question is: How can we foster a groundswell of positive change within our community to increase resilience against the intersection of inequities in health, economic opportunity and housing?” They practice deep listening as they work with the community to develop solutions including outlining an advocacy agenda for equitable policies at the local and state level.



# Tacoma SEED (Tacoma)

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## **“We are the people we have been looking for.”**

Tacoma SEED, is a backbone organization for a network of organizations located in Tacoma’s Hilltop neighborhood including Hilltop Urban Gardens and Black Mycelium. The disparities in life expectancy for people of color in Tacoma and conversations with their community moved them to focus on addressing the basic needs of food, shelter, and jobs. They shared that their organizing approach is rooted in the tradition of Ella Baker, Septima Clark, Fanny Lou Hamer, and Bob Moses, focusing on the long-term leadership development of residents.

To ensure food security and the challenge of only having one grocery store in the neighborhood, they support Hilltop Urban Gardens, the Black Folks Food School, and the Urban Farm Network to redistribute food throughout the neighborhood. They also support Black Mycelium, a limited liability corporation, to encourage the growth of small Black-owned businesses in the community. They have begun to hire members of the community, including those who have been formerly incarcerated and struggle with barriers to employment due to the conditions of reentry.

Their work addresses the community’s immediate needs through encouraging mutual aid, supporting community organizing and promoting cultural knowledge. “Hilltop Urban Gardens redistributed one ton of fresh produce

grown in their Urban Farm Network back into their community, the HUG Grub program asked beneficiaries of the harvest to offer in exchange talent, skill or labor, an act that has strengthened the Social Solidarity Economy and sustained relationships and social connections. The Black Folks Food School, a nutrition and education program that teaches culturally relevant Afro-ecological farming practices and revitalizes and proliferates the use of African diasporic first foods and medicines is the network’s organizing home where deeper relationships are created among neighbors.”

The organization is also working to meet the needs of residents and the displacement that has come with Tacoma’s increasingly high cost of housing by addressing the political economy at a very local level. “Through our Urban Farm Network, we seek to structurally de-commodify land in our neighborhood, by creating a commons for local food production and distribution. Our strategy around housing in our historically red-lined community is to preserve black ownership of land within our portion of the Hilltop Neighborhood, to defend elderly and low-income neighbors from displacement, and to grow home ownership among the most impacted members of our community.”

# Closing

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The organizations we heard from provided incredible stories about what they have learned as they address health and health inequities in their communities and across the state. Investing time to build collective power, center communities with the lived experience of structural oppression, transform organizational culture, and deepen accountability are all critical to address the deep racial and social power imbalances that have been foundational in this country and continue to perpetuate inequitable and harmful outcomes for our communities. Organizations are building a movement for equity and strengthened democracy through community organizing, leadership development, deep listening, building trust, and supporting movements for self-determination.

As we continue to develop our community engagement strategy, our funding strategy, and our organizational practices, we have an opportunity to reflect on the lessons shared with us. How are we supporting efforts to build collective power? How do we ensure community is centered in our decision-making? What does accountability mean in our funding and policy work? Communities across Washington state are making the road by walking and they have given us a gift by sharing with us what this journey has meant for them. We embrace the opportunity and responsibility to thoughtfully explore what walking alongside will mean and how our actions might make a difference.



# Appendix A – Lessons Learned Partners

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American Indian Health Commission for Washington State  
Asian Counseling and Referral Service  
Better Health Together  
Boyer Children's Clinic  
Bridging Wisdom  
African American Equity in Health Initiative (Byrd Barr Place)  
Catholic Community Services Farmworker Center (Catholic Community Services of Western Washington)  
Children's Alliance  
Children's Home Society of Washington  
Columbia Legal Services  
Commitment to Community (Blue Mountain Action Council)  
Community Cafe Collaborative  
Community Council  
Community Resilience Initiative (Blue Mountain Action Council)  
Community to Community (Institute for Washington's Future)  
Confederated Tribes of the Chehalis Reservation  
Duwamish River Cleanup Coalition/Technical Advisory Group

Duwamish Valley Program (City of Seattle, Office of Sustainability and Environment)  
El Centro de la Raza  
Food Innovation Network (Global to Local)  
Front and Centered (Latino Community Fund of Washington State)  
Global to Local  
Got Green  
Healthy King County Coalition (Center for Multicultural Health)  
Healthy Living Collaborative of Southwest Washington (Southwest Washington Regional Health Alliance)  
Heritage University  
Healthier Here (Seattle Foundation)  
Homeless Network of Yakima County (Yakima Neighborhood Health Services)  
Information School (University of Washington)  
Inland Northwest Farmers Market Association  
Innovation Network / Trauma-Informed Care (Kitsap Community Foundation)  
International Examiner  
Investing in Children Coalition (Yakima Valley Community Foundation)  
Jefferson County Community Health Improvement Plan



## Lessons Learned Partners (cont.)

Key Peninsula Partnership for a Healthy Community (Key Peninsula Community Council)  
Kin on Health Care Center  
Kitsap Strong (Kitsap Community Foundation)  
Kittitas County Early Learning Coalition  
La Casa Hogar  
Latino Center for Health  
Latinx Health Board (Latino Community Fund of Washington State)  
Legal Voice  
MascOn/MascOff (Northwest Alliance for Alternative Media & Education)  
North Central Accountable Communities of Health (Chelan-Douglas Health District)  
North Olympic Development Council  
Northeast Washington Hunger Coalition  
Northwest Health Law Advocates  
Northwest Immigrant Rights Project  
Olympic Peninsula Healthy Community Coalition  
OneAmerica  
Population Health Trust Advisory Committee (Skagit County Public Health)  
Public Health - Seattle and King County  
Puget Sound Sage  
Room One  
Salish School of Spokane  
Seattle Children's Hospital and Research Foundation  
Seattle Community Law Center  
Smile Spokane (Arcora Foundation)  
SOAR and King County Early Learning Coalition (School's Out Washington)  
Somali Health Board

Somali Reconciliation Institute (East African Community Services)  
Spokane Ride to Care Consortium (Spokane Neighborhood Action Partners)  
Spokane Alliance  
Statewide Poverty Action Network (Solid Ground)  
The Health Center  
Tacoma-Pierce County Health Department  
Tacoma SEED (Centro Latino)  
Tenants Union of Washington State  
The Arc of King County  
The Casino Road Initiative (The Community Foundation of Snohomish County)  
Ttáwaxt Collaborative (The Memorial Foundation)  
The Trust for Public land  
Thrive Washington  
Thurston Asset Building Coalition (Thurston Economic Development Council Center for Business and Innovation)  
United General District 304  
Unity Care NW  
United Territories of Pacific Islanders' Alliance  
Volunteers of America of Eastern Washington and Northern Idaho  
Washington State University Foundation  
Whatcom Alliance for Health Advancement  
Whatcom Family & Community Network  
White Swan Community Coalition (Mt. Adams School District)  
Win | Win Network  
Yakima Neighborhood Health Services  
Yakima Valley Farm Workers Clinic

# Appendix B – Lessons Learned Presentation Guidelines

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As part of the Lessons Learned grants process we asked organizations to respond to the following questions:

1. How have you engaged, convened, and maintained relationships with your community/communities?
2. How have you co-designed or co-created solutions with your community/communities?
3. How have you addressed systematic inequities that affect health (such as power differentials or racism) as part of your community engagement work?
4. What about your organization's way of working has made you successful? How has your organizational culture or structure changed to allow for authentic community relationships? Include examples of how your staff and your board (if relevant) contributed to the culture and values that enabled your success.
5. What have been your most significant challenges, obstacles, and missteps? We know that we can learn as much from setbacks as we can from successes, so please don't hold back! (If you are concerned about sharing challenges publicly, just let us know and we will omit your response to this question from the version we share publicly.)
6. What changes have you seen that give you hope about a future that is more equitable?