



Learning, Equity, and Power (LEaP) is an initiative of the Center for the Study of Policy (CSSP) to help turn "ideas into action." LEaP highlights and encourages learning about what it takes to advance equity and power in communities.

# Expanding the Roles of the Foundation

BHC has been a transformative journey for TCE itself, as it has learned how to listen more deeply to voices that are not often heard by grantmakers. It has consciously set out to explore what it takes to be a changemaker rather than just a grantmaker. By committing itself to a 10-year timeline, TCE has also

gained a longitudinal perspective on what it takes to effect and sustain change at the policy and community levels. BHC expands the traditional foundation definition of an "initiative" to a more grounded intergenerational approach that seeks to transform an entire policy and power ecosystem.

## TCE's Changemaking Roles

BHC set out to expand the past practice of place-based philanthropy by combining intensive investment in a limited number of neighborhoods with sophisticated strategies for influencing public policy at the state level. TCE called this approach "grassroots and treetops." The

implementation of this concept was guided by the Foundation's ambition to no longer operate merely as a grantmaker, but to extend and deepen its influence as a changemaker. Over the ensuing 10 years, what began as an investigation of root causes of longstanding health

disparities evolved into an effort that was increasingly centered on building grassroots power to promote health and racial equity. To function as a changemaker, our interviews suggest that TCE played six roles that were particularly instrumental in shaping the trajectory of BHC:



### Patient Long Term Investor

TCE's 10-year commitment of significant funding was probably the most important role played by the Foundation from the viewpoint of grantees and external observers. It acknowledged just how complex the challenge of community transformation would be and allowed BHC partners to pursue a much longer-term policy agenda and stick with it despite inevitable setbacks.

This LEaP highlights lessons and insights from selected research and evaluation of The California Endowment's (TCE) decade-long Building Healthy Communities (BHC) initiative. BHC is a \$1 billion initiative launched in 2010 that reached 14 communities devastated by health inequities. With various local campaigns, core strategies, and the

efforts of thousands of adults and youth, BHC took a broad approach to health equity and building community power. BHC learned many lessons along the way about what it takes to transform communities into places where all people have an opportunity to thrive. This LEaP features information from a collection of research that can be found [here](#).



**Center for the Study of Social Policy**  
Ideas into Action



## Proximal Ally

Program Managers were assigned to the 14 communities, where they spent a good deal of time developing an extensive network of local relationships, fostering collaborative planning and action, and helping turn local ideas into actionable strategies. They also built trust with local activists that had every reason to be skeptical of the motives of a big foundation. The proximal ally role was challenging to implement, requiring transparency, humility, political acuity, and an ability to forge a balance between accountability to TCE and to the community.



## Narrative Driver

A substantial body of work was dedicated to communications efforts by TCE and its partners to help shift the public narrative about what constitutes a healthy community. BHC helped to expand the boundaries of health philanthropy to encompass the social determinants of health, and eventually racial equity and justice. By calling out “people power,” BHC embraced organizing and advocacy as essential strategies for tackling the social determinants of health.



## Principled Risk Taker

In its public statements and direct actions, BHC consistently demonstrated its commitment to a set of core values that prioritize principles such as diversity, equity, and inclusion, and health and justice for all. Pressure from the community upped the ante on how far the Foundation was willing to go to live its principles... in some cases into territory outside most foundations’ comfort zone. TCE intentionally sought to change the dominant philanthropic narrative about “risk” by reframing these issues and organizations as mainstream public health concerns.



## Campaign Director

TCE itself took the lead in designing and implementing multiple state-level public policy issue campaigns that combined messaging with mobilization around issues such as Affordable Care Act (ACA) implementation, health care for the undocumented, and reform of school discipline policies. TCE got better over time at maximizing the authenticity of its messaging by seeking out and listening to the people who were living those issues rather than relying primarily on the advice of media professionals.



## Strategic Opportunist

Something that has vexed other foundation initiatives is the inability to pursue emerging opportunities due to “locked in” multi-year funding commitments. Even In the case of a major investment like BHC, TCE retained the budget flexibility to allocate significant additional dollars in short order to pursue timely opportunities that complemented BHC’s core purposes such as California ACA implementation and state-wide leadership development for young men of color.

“ We do experience ‘lightning in a bottle’ moments of transformative change, but we can’t underestimate the years and years of capacity building and advocacy support it takes ‘in-between-moments’ to reap the benefits of such moments. I know of tiny nonprofits that have labored in relative obscurity for many years, but were ready for the prime time moment of transformative change when that moment showed up recently—a reminder that ‘moments’ are both combustible and also created over time. ”

– Dr. Robert K. Ross, President & CEO, The California Endowment

# A New Health Equity Dialogue

---

BHC changed the understanding and dialogue about health equity in California, gave it new urgency, and spurred significant action. Over the past decade, BHC helped broaden the definition of health and raised public awareness about unequal access to health care in California, creating public will for expanding coverage to all residents. Taking this on required knowledge of how extensive the disparities in health care coverage are for communities of color, families with low incomes, immigrant families, and others. It also required advancing a central premise: that health is not determined primarily by access to health care or the

quality of health care, but by historical, structural, and systemic community conditions and the policies that shape them. BHC brought a broadened understanding of health equity into the mainstream of policy debate and public consciousness. The changes stemmed not just from new state policies but also from broad adoption of a different narrative: that health care in California is unequally distributed and that this injustice is associated with race and place, i.e., zipcode. TCE communicated this message constantly and creatively, and the public as well as policymakers began to understand it.

---

Farrow, F., Rogers, C., Henderson-Frakes, J. (2020) "Toward Health and Racial Equity: Findings and Lessons from Building Healthy Communities." Washington, DC: Center for the Study of Social Policy. 2020. [Source found here.](#)

## Narrative Change

Narrative change is the process of disrupting dominant narratives that normalize inequity and uphold oppression and advancing new narratives from our communities and individuals in historically marginalized groups, narratives that help us dismantle social inequities and imagine a different future.

---

Jewlya, L. Insights from an Analysis of BHC Narrative Change Evaluation Reports. Policy Solve. 2019. [Source found here.](#)

"There is no doubt the Endowment has been critical at changing our paradigm when it comes to accessing healthcare for immigrants. They changed the conversation and took it outside of the halls of Sacramento and to the mainstream public—and this policy is now supported by the majority of Californians, who see this as a human rights issue. The ‘Health4All’ campaign elevated the discussion and put a face to it. That campaign created a consciousness that did not exist beyond immigrant rights advocates and a few legislators who understood this at a personal level. We had never seen this discourse taken to mainstream California."

Farrow, F., Rogers, C., Henderson-Frakes, J. (2020) "Toward Health and Racial Equity: Findings and Lessons from Building Healthy Communities." Washington, DC: Center for the Study of Social Policy. 2020. [Source found here.](#)

BHC's investments in Integrated Voter Engagement broadened the range and impact of power-building strategies, increasing BHC's focus on civic engagement and electoral power while further underscoring the combined power of local activism with statewide coordination. The premise underlying IVE was straightforward...Electoral participation by underrepresented groups would be critical to move public systems toward equity. This, in turn, required issue awareness within communities, voter education and policy advocacy not limited to the timing of election cycles, and coordinated local and statewide actions beyond what most individual BHC sites could orchestrate.

## Integrated Voter Engagement (IVE)

IVE is a strategy to increase the civic participation and power of residents in defined geographic areas by integrating efforts to increase the voting participation of under represented constituencies with ongoing community organizing, issue campaigns, and public policy advocacy.

## The IVE Work of Key California Organizations and Alliances

<p><b>California Calls</b></p>	<p>An alliance of 31 grassroots organizations across the state, operating in rural, suburban, and urban environments.</p>	<p>The African-American Civic Engagement Project, a coalition of 16 Black-led grassroots organizations in 6 counties:</p> <ul style="list-style-type: none"> <li>• Registered 12,000+ voters,</li> <li>• Built a base of ~138,000 supporters,</li> <li>• Engaged ~33,000 Black voters for 2018 election.</li> </ul>
<p><b>Million Voters Project (MVP)</b></p>	<p>An alliance of 7 community-based networks that seek to strengthen democratic participation.</p>	<p>Created a voter base of ~525,000 people.</p>
<p><b>Power California</b></p>	<p>Emerged from the union of Mobilize The Immigrant Vote and YVote, two community-based organizations that organized immigrants, refugees, and youth of color.</p>	<p>Contributed to record turnout among 18-24 year-olds between 2014 and 2018 elections: 3x increase from previous year and registered more than 40,000 young voters.</p>

Farrow, F., Rogers, C., Henderson-Frakes, J. (2020) "Toward Health and Racial Equity: Findings and Lessons from Building Healthy Communities." Washington, DC: Center for the Study of Social Policy. 2020. [Source found here.](#)



This LEaP was made possible through generous funding from The California Endowment and their years of dedicated efforts to increase health equity and justice for all Californians.

Special thanks to evaluation partners Tom David, Prudence Brown, and Jewyla Lynn. Their work, along with other research on BHC, can be found [here](#).



**Center for the Study of Social Policy**  
Ideas into Action