

Our Journey Toward Health Equity



A Report on Building Equitable
Organizational Practices

 **Health Foundation**
for Western & Central New York

INTRODUCTION

Since our founding in 2002, the Health Foundation for Western & Central New York has focused on improving the health of people in the 16 counties of New York State we serve, with a focus on children ages zero to five and older adults. This work has always recognized the impact that poverty can have on health outcomes. However, until 2020, we had not taken an explicit stance on the role that racism as a standalone factor can play in a person's health.

In March 2020, that changed when our board and staff completed a rigorous year-long strategic planning process. We agreed that systemic racism and socioeconomic inequity are indisputable drivers of health disparities, both independently and in tandem. On March 11, 2020, the Board of Trustees of the Health Foundation for Western & Central New York committed to a new organizational vision of racial and socioeconomic health equity, as well as a detailed strategic plan to pursue that vision.

As an organization that has always been dedicated to collaborative community solutions, and out of respect for the gravity of the topic, we began our new strategic work thoughtfully. This type of work, even well-intentioned, can end up being nothing more than lip service if implemented without care, and it was important to our team that we make a real impact.

The Health Foundation team embarked on a long-term commitment to learning and evolving in pursuit of our new vision of health equity just before the start of two life-changing events—the COVID-19 pandemic and a worldwide racial justice movement. These events did not deter us, but instead influenced and informed our journey.

In the time that has passed since the strategic plan was adopted, the Health Foundation has undertaken several system-wide and department-focused initiatives to ensure our grantmaking and organizational decisions are supporting our efforts in advancing health equity.

Health equity is a broad term, and many people define it differently. The Health Foundation follows the U.S. Centers for Disease Control's definition: **Health equity** is the state in which everyone has a fair and just opportunity to attain their highest level of health.

BEGINNING BY LOOKING WITHIN: 2020

The onset of the COVID-19 pandemic complicated the way we worked, commanding much of our focus as we responded to the needs of frontline care providers in the community. But it did not delay our health equity work. Seeing how COVID-19 devastated BIPOC (Black, Indigenous, and People of Color) communities underscored the importance and urgency of addressing the impact of systemic racism on health.

We began by assessing our readiness for equity-driven work. Our board and staff took part in introductory racial equity training led by JustPartners, Inc. to determine our baseline understanding of how historical racism and disinvestment in communities have led to current-day health disparities.

During this time, we were also grateful to meet with trusted community partners to learn more about their expertise and their own approaches to incorporating equity. It became clear in our early learning that an important first step would be to conduct a review of how we work—our operations, grantmaking process, communications, and more—to determine if we were unintentionally creating bias or barriers to partnerships, especially with BIPOC-led or grassroots organizations.

A key takeaway from the early parts of this journey was the need to be specific and intentional about the changes we planned to make. As our instructors from JustPartners, Inc. taught us, ambiguity creates space for bias to occur.

A few of our first intentional steps included **examining how we evaluate programs and other grant activity**, as well as our **organizational communications strategy** to ensure the way we talked about these issues reflects our commitment.

During this time, we began learning about a concept that would become extremely influential to our equity journey: **trust-based philanthropy**.

Understanding Trust-Based Philanthropy

As part of our work centering diversity, equity, and inclusion, the Health Foundation incorporates the core principles of trust-based philanthropy. This is an approach that attempts to address the inherent power imbalances between foundations and nonprofits through values that help advance equity, shift power, and build mutually accountable relationships between funders, nonprofit organizations, and the community. Trust-based philanthropy can be incorporated into four key dimensions of a funder's work: culture, structures, leadership, and practices. More information on our trust-based philanthropy journey can be found in the following section.

BUILDING MOMENTUM: 2021

In 2021, we continued to advance our commitment to health equity with a focus on both internal operations and work in the community.

Staffing: To increase the number of applications we received from candidates of diverse backgrounds and with varied lived experiences, we focused in 2021 on reviewing our hiring processes and evolving them within best practices for racial and class equity.

This new process included working with a trusted partner with expertise in bringing equitable practices to nonprofit organizations. With this partner, we learned how every step of a hiring process can be designed to be welcoming to people of all races and backgrounds—or, conversely, create unwelcoming environments and barriers.

We began instituting new hiring practices such as identifying new outlets to share job postings to reach diverse audiences; extending the open period for applications; and developing new practices for the interview and selection process, including using a standard set of questions for each candidate.

This approach helps us ensure that we reach new communities with hiring opportunities, that all candidates have the same opportunities to apply and be considered, and that we can avoid external or personal biases that often make hiring practices inequitable.

Assessing the landscape, we noted that some organizations were investing in diversity officer positions, and we wondered if this would be a fit for us at that stage in our learning. Reflecting on these questions helped us understand that we needed to complete a baseline organizational assessment to identify where we were aligned with good practices and where we needed to improve. To assist our team, we issued a Request for Qualifications to secure consultants with DEI expertise, and selected JustPartners, Inc.

This was not a process that was solely introspective; we made operational improvements throughout the assessment period. With the support of the Board of Trustees, several initial steps were approved and implemented to ease the burden of traditional grantmaking practices on grantee partners.



Graduates of the Health Foundation's Health Leadership Fellows. We are continuing to implement initiatives to make the Fellows program more welcoming and accessible to BIPOC applicants.

Programming: In late 2020 and into early 2021, we convened a DEI advancement workgroup to discuss ways in which the Health Foundation can center equity in its work.

The outcome was a roadmap of eight specific pathways to advance a more equitable and inclusive environment for addressing health disparities:

- Develop our credibility as trusted listeners
- Deepen our reach in community by working with trusted messengers
- Build a more diverse board and encourage others to do the same
- Help BIPOC-led organizations develop skills for working with philanthropy
- Help other organizations develop outreach and partnership skills to better serve diverse populations
- Intentionally invite BIPOC-led organizations to the table for both funding opportunities and partnerships
- Revisit our business practices, especially around grantmaking
- Foster an ecosystem where more equitable partnerships among organizations become the norm

As an organization and team, we have advanced on several of these pathways, and recognize that we must remain diligent in continuing these efforts.



Advocacy partners like NY StateWide Senior Action Council (pictured) work closely with our team to help raise awareness of health equity issues.



Grantee-partner at Community Health Center of Buffalo with a patient. CHCB participates in our Age-Friendly Health Systems work to bring a “whole patient” approach to care.

Evaluation: In 2021, members of the program and communications teams participated in the Equitable Evaluation Initiative (EEI) to learn how to apply equity-based principles to evaluation of our grantmaking efforts. EEI is a framework and national collaborative that emphasizes providing space for grantees to tell the story of their work, deep listening, and giving grantees a leading role in defining what is important to evaluate.

EEI principles do not conflict with our use of Results Based Accountability (RBA), a process we use to measure grant performance. In the spirit of equitable evaluation, we work with grantees to develop RBA measures that make sense for their specific needs, rather than imposing measures on them that may not be relevant to their own goals.

Also in 2021, we adopted grant management software, Fluxx, that allows us to systematically collect and assess performance measures and demographic data in a way that can be more efficient for grantees and our staff. By making processes like this easier, our grantee-partners and our staff can focus more time on what matters.

PROGRESS IN PROGRAMS 2021-23

As we continued our organizational review, our program team was simultaneously making strides in partnerships and programs that advance health equity. Examples of our equity-driven program work in 2021 included:

- Building a relationship to support capacity building for the Buffalo Center for Health Equity (BCHE). We continue to work closely with the BCHE.
- When the American Rescue Plan brought hundreds of millions of dollars to local municipalities, we partnered with the BCHE in building a coalition of organizations to help ensure those funds were used by elected officials in a way that would have the greatest impact on racial and socioeconomic equity.
- We built on our achievements in advocacy to expand our platform on issues that address equity through universal health care and a strong safety net. These included addressing medical debt, which disproportionately impacts people of color, and advocating for public health programs to be extended to immigrants regardless of documentation status.
- We continue to work closely with community partners in both western and central New York to develop programming that increases the availability of doula services for pregnant people who may otherwise be unable to afford these important services. Racial and socioeconomic barriers are a key factor in maternal health outcomes. While doula access has been shown to improve those outcomes, the financial cost of these services has typically made it inaccessible to families with low incomes.

DEEPENING THE WORK: 2022, 2023, AND BEYOND

Our staff continues to examine the Health Foundation's processes and programs to identify ways to move toward a more trust-based and equitable approach. Accomplishments since 2022 have included:

- Establishing the Rural Health Microgrant Fund, providing up to \$5,000 to support small-scale projects. This streamlined application and approval process makes it easier for organizations to request funding as well as another opportunity for the Health Foundation to build existing or new grantee-partner relationships.
- Providing grants for general operating support when appropriate. General operating support grants are celebrated within trust-based philanthropy as a means of supporting an organization's day-to-day work while building a trusting relationship with them.
- Development of Age-Friendly: Go Local, a program that was intentionally designed to build a bridge between efforts to build equitable neighborhoods with those working on building age-friendly communities. Our program team worked with representatives of the communities we hoped to reach to review the draft Request for Proposals. This intentional work led to the selection of a diverse cohort of grassroots organizations, including several first-time grantees.
- Developing an Equity Standards and Style Guide. The guide formalizes our communications strategy within equitable best practices and provides a common language for staff, trustees, and our partners to ensure we speak on these issues with one voice.

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- Developing an attestation that can be used in lieu of a final financial report for simple, low-investment projects. This approach was reviewed and approved by the Health Foundation’s attorneys and financial advisors. Providing this option eases the burden of reporting on grantee-partners, especially those from grassroots organizations who may have limited staff and time resources. We then revised our policy and procedures to reflect the ability to use attestations in certain circumstances, such as when grants are \$10,000 or less, or if general operating support is being provided.
- Revising our policy and procedures to allow certain grantees to direct up to \$5,000 of unspent grant funds to general operating support (not to exceed 10 percent of the original grant amount) in lieu of doing a budget modification and no-cost extension. This change removes some administrative burden on grantee-partners and recognizes how important general operating funds can be to their work.
- Offering a standard financial reporting template to all grantees, while allowing them to use another format if preferred.

LOOKING FORWARD: THE WORK CONTINUES

One of the most important lessons we have learned during this process is that the pursuit of health equity is a long-term commitment; as our trusted advisors from Just Partners, Inc., taught us, it is “**urgent, lifelong work.**” Our team is committed to continue building on the key principles of equity best practices—including listening, learning, and adapting—to help advance systemic change that improves the health of our community.

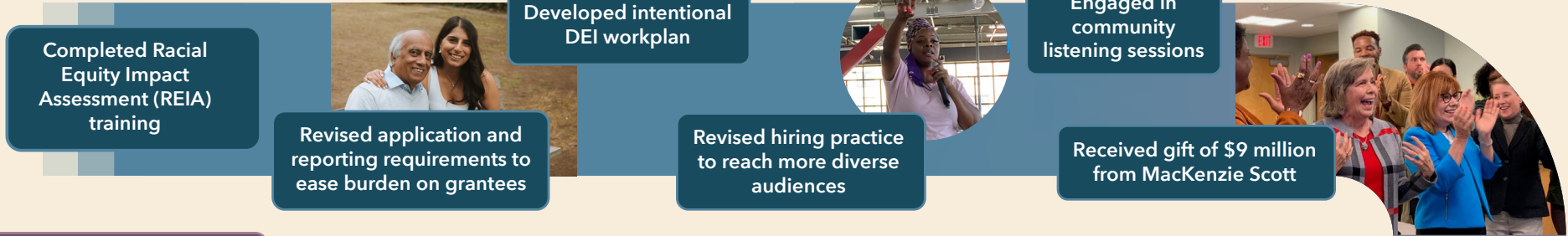
We express our gratitude to every trusted community partner who has been with us in this journey, and look forward to continuing to share power and resources on the path to health equity.

Our Journey Toward Health Equity

Health Foundation for Western & Central New York



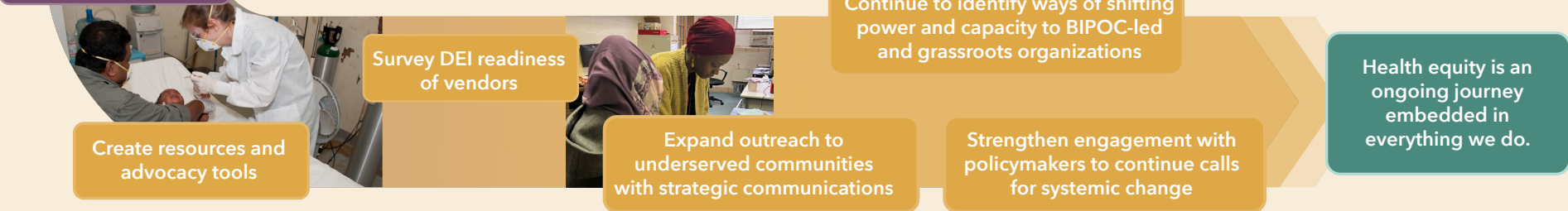
EARLY EFFORTS



BUILDING MOMENTUM



LOOKING AHEAD



A true commitment to antiracism and justice will require philanthropic organizations to transform how they partner with nonprofit organizations and the community. At the Health Foundation for Western & Central New York, we recognize and value this challenge. Since the launch of our vision and strategic plan for health equity, we have been striving to evolve as a foundation, learn from the communities we serve, and build on our progress.