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Equity for All: Building the Infrastructure for Change Through Community-First Funder Collaboratives

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Introduction

Funder collaboratives are a powerful and enduring approach to uniting philanthropic resources and expertise around a shared interest in order to learn from, leverage, and deepen each participant’s impact. In recent years, funder collaboratives have become more common as a tool for increasing and coordinating philanthropic investments to address the root causes of inequity (Fine, Lawrence, & Schultz Hafid, 2018), while staying responsive to shifting needs and political priorities (McCarthy, Bornstein, Perrin, James, & Fulton; 2017; Seldon, 2015).

Research and experience have identified practices that increase the likelihood of success in funder collaboratives: having a shared vision, identifying clear goals, establishing honest relationships, having strong backbone management, leveraging the collective strengths of the participants, and being flexible and humble in the face of emerging needs and contexts (Leland, 2017; Porter, James, Medina, & Chow, 2017). Community voice, however, is a crucial — and often missing — element that enables funder collaboratives to use equitable practices of partnership and power-sharing in pursuing a more equitable world.

This article describes a “community first” model, which emerged from the experience of a funders collaborative created to advance equity through policy and systems change in California’s San Joaquin Valley. The community-first model was developed in response to the needs of a region with a deep history of racial disparities and a dearth of philanthropic and public investment. Funders working in other regions with similar histories could use this approach, which joins the concepts of funder collaboration, funder-grantee collaboration, and community empowerment.

After a brief overview of the model, this article highlights the groundwork that facilitated the fund’s success, examines the strategies that ensured a community-first orientation, and reflects on how foundations can utilize this approach elsewhere to build the infrastructure needed to advance equity for all.
In 2013, Sierra Health Foundation explored a new model in which funders’ collective investments are driven by the voices and priorities of marginalized communities. Drawing on research conducted to document the collaborative, the article presents its successes and challenges, with implications for replicating the approach.

What Is a Community-First Funder Collaborative?
Many philanthropic organizations are well-acquainted with and committed to supporting regions and communities that experience persistent racism, marginalization, and lack of investment that have limited residents’ opportunities for optimal health and well-being. These communities span the United States, reaching from California’s San Joaquin Valley across to the Southwest, the South, Appalachia, and through the Rust Belt. While each community has a unique context, they share experiences with racial, economic, environmental, educational, and social discrimination and the consequences of poverty, inadequate housing and public transportation, exposure to environmental hazards, limited access to high-quality education and living-wage jobs, and poor health. These conditions are often compounded by histories of underinvestment that resulted in weak systems and infrastructure, which can in turn limit new investment.

In 2013, Sierra Health Foundation explored a new model in which funders’ collective investments are driven by the voices and priorities of marginalized communities. Together with community organizations and both local and national funders, Sierra Health Foundation and the Center at Sierra Health Foundation (an affiliated, independent nonprofit organization) established the San Joaquin Valley Health Fund to achieve health and racial equity in California’s San Joaquin Valley. The fund’s community-first funder collaborative model includes several key components:

- an explicit focus on achieving equity through locally prioritized, locally led policy and systems change;
- a place-based approach that takes into account the interconnected issues that a community or region faces, rather than focusing on a single issue;
- pooled funds from numerous philanthropic partners who are looking to make their resources go farther and deeper in achieving impact;
- grants to local organizations that infuse a community with resources to support advocacy, leadership development, and community organizing activities;
- capacity-building support to facilitate community-partner ownership and leadership of policy and systems change efforts, such as training opportunities, tailored technical assistance, and opportunities to network and collaborate with community colleagues locally, regionally, and across issue areas in service of policy and systems change;
- a collaborative structure and network that brings funder partners and community partners together (funder partners gain knowledge and relationships in these hard-to-reach communities, and local organizations gain access and exposure to a broader network of funders in the state and nation); and
- a locally based organizing entity to manage the collaborative’s funds, facilitate effective collaboration and communication, support capacity building among community partners, and serve as a trusted local intermediary for funder partners.
The Case of the San Joaquin Valley Health Fund

California’s San Joaquin Valley is one of the most culturally diverse and economically important regions of the state. Its nine counties span more than 28,000 square miles and are home to over 4 million people and a strong agricultural industry that generates almost $40 billion a year in exports. The rich cultural diversity of the Valley — which includes Latino, Southeast Asian, African American, indigenous, refugee, and other racial and ethnic communities — brings vibrant cultural practices, entrepreneurship, and vital workplace skills to the regional economy. Furthermore, local community-based organizations are building on the United Farm Workers’ legacy of community organizing and protest to “build the capacity of immigrants, People of Color and low-income populations to advocate for policies and systems that promote equity” (Hartzog, Abrams, Erbstein, London, & Watterson, 2017, p. 5).

Despite these economic and social assets, more than one in four of the region’s children are in households living below the federal poverty level (Hartzog, Abrams, Erbstein, London, & Watterson, 2016). Economic inequities in the region are compounded by histories of racial and ethnic residential segregation. More than 30 percent of the population lives in unincorporated areas with little infrastructure to support clean drinking water, sewage treatment, sidewalks, and other services (PolicyLink, 2013). Disparities in living conditions and other determinants of health have contributed to the region’s high rates of asthma, obesity, heart disease mortality, and homicide, among other health issues (Hartzog et al., 2016). Agriculture is the region’s economic mainstay and lifeblood of its people, yet the lack of strong policy and regulation has been the root of pervasive environmental and health injustices.

While the need for investment in the region and its residents is great, per capita support from federal agencies is only 73 percent that of the national average. The region’s nonprofits also have fewer resources. According to an analysis of data from the National Center for Charitable Statistics, nonprofits in the Valley are funded at only 30 percent of the national average (Great Valley Center, 2014).

Developing the Model: Putting Communities First

Recognizing the inequities and underinvestment in the Valley, Sierra Health Foundation’s leadership began to explore strategies for investing in the region in 2013. The foundation’s president and CEO; vice president of programs and partnerships; and director of health programs conducted community listening tours to meet with Valley residents and stakeholders at house parties and community centers. These tours allowed the foundation and its philanthropic partners to hear directly from the community and see firsthand the challenges Valley residents faced. Community members and stakeholders offered important suggestions on how to approach engagement in the Valley:

- Listen to residents of the impacted communities, with no set funding agenda.
- Maintain a physical presence in the Valley, with local staff who are familiar with the region’s resources and challenges.
- Invest directly in local organizations embedded in the community.
- “Bring others along” by partnering with key influencers and local organizations to address the region’s deep-rooted and complex needs.

Hearing directly from community residents strengthened the foundation’s determination to invest in the region and confirmed that organizations in the Valley supported an approach of strengthening local capacity to advocate for more equitable policies and systems advocacy in and for their own communities. As a result, the fund was launched in 2014 with initial funding from the foundation and The California Endowment. The fund’s ambitious, five-year vision set forth a plan to invest at least $10 million in the Valley and build a network of at least 100 local, funded
partner organizations advocating for policy and systems changes in their communities and the region to advance health and racial equity.

Management of the Fund
The fund is managed by the Center at Sierra Health Foundation. Established by the foundation in 2012, the center operates as an independent nonprofit that is supported by foundation leadership, staff, and infrastructure, and seeks to eradicate inequities throughout California. The center serves as an intermediary or backbone organization for several projects and allows for the aggregation of funds from multiple sources, including local and state government, as well as philanthropic organizations.

The center’s infrastructure and established role as a backbone organization have been an important aspect of the fund’s development and administration. It is responsible for administering grantmaking for the fund, implementing its capacity-building and advocacy activities, developing the regional network of nonprofit and community partners, working with funder partners, and cultivating new funder and community partnerships. The center has decision-making power over the fund, with leadership from foundation staff.

Since its launch, the fund has granted more than $6 million to 90 local organizations. Eighteen state and national funders have invested their resources and expertise in the work of the fund. While most of the grants are relatively modest (up to $20,000), the fund has also offered larger, multiyear “cluster” grants of up to $600,000 that support groups of three to four community partners to work together towards a common policy target. Regardless of grant size, partnership with the fund gives community partners access to a broad suite of technical assistance and other resources to strengthen their work and ongoing opportunities to connect with a broader network of community organizations working on related issues.

Key Strategies
The fund was developed to strengthen the capacity of communities and organizations in the San Joaquin Valley to advocate for policy and systems change while concurrently building a regional movement for the advancement of health and racial equity. Underlying that mission is a deep commitment to partnering with community-based grantees, as well as philanthropic and other funding organizations — a commitment reflected in the use of the term “community partners” rather than “grantees.” To accomplish this mission, the fund employs six interconnecting strategies in partnership with community partners and in consultation with funder partners. (See Figure 1.)

1. Policy and systems change: A key component of the model is a focus on achieving equity through policy and systems change. That focus, however, does not help a collaborative identify which systems changes are most needed. Similar to other place-based initiatives, the fund looks not at a single issue, but at the broad landscape of the region’s opportunities and challenges; then, as a community-first collaborative, the fund follows the lead of community partners in establishing funding priorities. With support from staff, a committee of more than 50 community partners worked together to set policy priorities for the region and the fund, and then developed a policy platform that establishes a framework of five issues: health, education, environment, land-use planning, and immigration. Within those issue areas, the platform identifies policy and systems-change solutions to improve the health and well-being of vulnerable children and families, and advance racial equity and social justice regionwide.

2. Community organizing and leadership development: The priority given to community organizing and leadership development is expressed in funding decisions, which favor applications that include those strategies. The fund is trying to build

1 For the 2018 policy platform, see http://www.shfcenter.org/equity-on-the-mall.
a movement by supporting the capacity of communities to organize and have their voices heard by policymakers, and thus funds organizations that are committed to identifying and training community residents with lived experience of the Valley’s inequities to lead advocacy efforts. In a region that has historically excluded people of color from access to equitable opportunity, focusing on the power of local leaders and other residents is both critical to the movement-building mission of the fund and responsive to community input provided during the listening tours. The residents have the most at stake and are experts in what their communities need, and therefore have a central role in advocating for change. This strategy is reflected in the fund’s annual advocacy event, Equity on the Mall, which brings Valley residents to the state’s capitol to share their stories and hold elected officials accountable for addressing the region’s needs. In 2018, more than 1,500 community leaders, organizers, families, youth, and others participated in the event, which was attended by numerous legislative leaders; presented the 2018 San Joaquin Valley Health Fund policy platform; and held a forum for residents to discuss how gubernatorial candidates planned to address such key Valley issues as water access, air quality, and poverty.

3. Leveraging political capital and leadership: Political capital is the ability to leverage one’s influence, relationships, and power to bring about policy change. As an entity that holds relationships with community members, funders, and policymakers, the fund has grown its political capital and leadership, and uses it in service of the region. Early on, for example, it developed

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**FIGURE 1** San Joaquin Valley Health Fund Strategies
The fund has been intentional from the start about funding small, local organizations, which previously may not have had direct access to funders and more often received regranted funding from larger, statewide advocacy organizations. These smaller organizations are critical to the success of the community-first model because they represent and work closely with the most vulnerable residents of the Valley.

4. Education and knowledge: Learning directly and proactively from organizations and residents in the region rather than imposing an existing agenda is core to how the fund approaches its work and reflects guidance received during the listening tours. For example, the fund asks applicants for funding to identify their own policy focus and explain how they know it is a need in their community. In response, the applicants often describe community meetings and other approaches for gathering local input, as well as providing research data. Analyzing the applications allow fund staff to gain insight into local priorities, needs, and opportunities. The fund has also commissioned research to inform the center’s planning, fundraising, and advocacy efforts and educate others about the Valley’s inequities and assets. This research, prepared by the University of California-Davis Center for Regional Change, has highlighted specific communities with the greatest opportunity for change (London & Watterson, 2015), as well as racial and health inequities experienced by children across the Valley (Hartzog et al., 2016) and advocacy efforts in Kern County (Hartzog et al., 2017).

5. Effective communication: Communication is at the core of successful relationships with community members. This strategy stresses the importance of how fund staff and community partners interact, as well as how the fund amplifies community voices. To build trusting relationships with community partners, the center opened an office in the San Joaquin Valley and hired local staff as program officers, as recommended during the listening tours. In addition to regular in-person convenings of community and funder partners, the fund uses common communication approaches such as site visits, webinars, social media, and a weekly e-mail update to community partners that shares advocacy, funding and learning opportunities, and other resources. The fund also uses its partnerships with external stakeholders, such as reporters and statewide advocates, and events like Equity on the Mall to increase the reach of the voices, experiences, and perspectives of community residents.

6. Strengthening organizations and networks: In the model, grant funding is used to incentivize participation in and subsidize staff...
time for capacity-building activities and connecting with other advocates to build a regional movement. The fund has been intentional from the start about funding small, local organizations, which previously may not have had direct access to funders and more often received regranted funding from larger, statewide advocacy organizations. These smaller organizations are critical to the success of the community-first model because they represent and work closely with the most vulnerable residents of the Valley. By including and building capacity among these organizations, the fund has benefited from their deep knowledge of community and regional issues. Capacity-building activities include regular convenings of all community partners, webinars and other virtual learning opportunities, and site visits. The fund requires participation in convenings as a way to create opportunities for networking. In-person convenings create space to share experiences and information and are also used to provide training on such topics as lobbying rules, ways to support increased access to safe drinking water in the Valley and throughout California, and other policy advocacy opportunities.

Although presented separately, the strategies of the fund are necessarily intertwined. For example, the policy platform was the result of the intersection of strategies around community leadership, networking, and political leverage. Similarly, Equity on the Mall is one of the fund’s most effective communication strategies, while also leveraging political capital and organizing community residents to advocate for regional policy and systems changes that they prioritized.

Implementation: Early Successes, Challenges, and Lessons

While the San Joaquin Valley’s context is unique, the realities that its residents face are not. Therefore, the fund’s experience can provide guidance to those interested in replicating the community-first funder collaborative model in other regions. Recognizing this potential, the center partnered with Harder+Company Community Research in 2017 to document the fund’s model and describe highlights and challenges in its implementation. The research, funded by the W.K. Kellogg and Sierra Health foundations and carried out in 2017–2018, included interviews with the fund’s philanthropic partners, staff, and other stakeholders (n = 25); a survey of community-based grantee partners (n = 38 of the 73 partners in 2017); and review of the fund’s internal documents. This section summarizes key findings of the research and identifies considerations for implementing the community-first funder collaborative model elsewhere.

Spurring a Regional Movement With a Collective Agenda for Change

Initial findings indicate that the fund has helped to seed a regional movement for change. In interviews, funders and community partners pointed to both the policy platform and Equity on the Mall as two early successes that have propelled the fund’s work. The policy platform clarifies the fund’s approach to improving health and racial equity and encourages community partners from across sectors and focus areas to work together towards common goals; Equity on the Mall reinforces the policy platform’s unified voice. Craig Martinez, program manager of funder partner The California Endowment, observes:

Equity on the Mall is one of those places where [the fund has] been particularly successful. To really see partners who represent a diversity of issues come together with a shared priority, being able to share a perspective, and really focus on the needs of an underinvested region — I think it’s really phenomenal.

The implication of this finding is that a community-first funder collaborative can facilitate a regional movement by organizing opportunities for shared advocacy, such as public events and policy documents.
A community-first funder collaborative can have an important role in connecting funder partners to community organizations. These connections can increase philanthropic investment in the region outside of the collaborative.

Expanding the Network of Partnerships
In addition, the fund has increased the size and strength of the network of organizations mobilizing across issue areas and county lines to achieve health and racial equity in the Valley. Community partners reported that fund convenings, shared work on the policy platform, and other activities have increased their connections with other advocates and helped to unite the voices of organizations tackling similar issues. Almost 90 percent of the respondents to the survey of community partners said that they increased experience, knowledge, or skills related to connecting with other funded partners.

Jesus Martinez, executive director of one funded organization, the Central Valley Immigrant Integration Collaborative, described the fund’s partner convenings as critical for expanding their understanding of communities across the region:

An even greater value [beyond financial support] has been the connection to all the other organizations [and] the ability to learn from them. The organizations that we’ve been connected to via this fund, they know the local communities; they know what is significant to them. … You really can’t put a price on that.

Consistent with this perspective, more than 70 percent of survey respondents reported increasing their work on shared policy goals with other organizations and connecting with other key stakeholders in the region. This finding indicates the importance of activities explicitly intended to build connections and of incentives for community partner participation.

Strengthening Capacity for Policy and Systems Change
A community-first funder collaborative will likely need to build the capacity of community partners to engage in advocacy, especially among smaller local organizations in underresourced regions. According to survey respondents, the fund has had some success in increasing the capacity of individual organizations to advocate for equitable policies and systems. Overall, 87 percent of respondents agreed that the fund accelerated their organizations’ ability to achieve systems and policy change. In particular, they reported that participation in the fund increased their experience, knowledge, or skills related to advancing health and racial equity (63 percent), advocacy for policy change (57 percent), and engaging community residents in advocacy efforts (55 percent).

The fund’s grants also strengthen capacity for policy and systems-change advocacy. One community partner remarked, “We absolutely could not have done this policy work without [the] funding.” While some community partners indicated that the small grants should be increased in size or length (a sentiment echoed by some funders and external stakeholders), the majority (63 percent) of the partners responding to the survey reported that they received sufficient funding for their participation. One partner remarked that “although the grant size is small, the [fund’s] staff enhance opportunities for the organizations to increase skills, network with others, and also [offer a] platform to advocate on a large scale.”

Addressing the Needs of Diverse Community Partners
While the fund has had some success in building capacity for policy and systems change, the wide range of experiences, skills, and focus areas across funded organizations can be a challenge in community-first funder collaboratives,
which prioritize funding for local partners. The partners vary in their organizational history, constituents, funding stability, advocacy expertise, and areas of focus. This diversity is a strength of the network as they come together, but means that the staff of a community-first funder collaborative must try to tailor support to the different needs.

The fund has addressed this by including peer-to-peer learning with panel presentations from the community partners who have deeper experience in policy and systems-change advocacy than others and providing one-on-one assistance during site visits. The fund has also added optional technical assistance activities based on specific requests from community partners to the extent that resources allow. However, providing the right technical supports requires ongoing attention if the collaborative is going to be truly inclusive of small, community-based organizations.

Increasing Philanthropic Investment in the Region

A community-first funder collaborative can have an important role in connecting funder partners to community organizations. These connections can increase philanthropic investment in the region outside of the collaborative. Beyond the fund’s direct grantmaking activities, community partners reported that the fund increased their ability to obtain grants from other sources. Two-thirds of community partners responding to the survey found that the fund’s ability to connect them with other funders had been very or extremely helpful, and 49 percent reported an increased ability to obtain funding from other sources. This result was supported by comments from funder partners. For example, Fatima Angeles, vice president of programs at the California Wellness Foundation, said its partnership with the fund “allows us to learn more about what’s happening in the area. … We are a more informed funder, and because we are more informed, we are investing more in the region.”

Several funder partners noted that previous interest in investing in the San Joaquin Valley had been constrained by their narrow knowledge of the region and their limited capacity to increase that knowledge. The mechanisms of the fund — including the pooled funding structure, management by a trusted philanthropic partner, and local staff — enabled funders to invest in the region with greater confidence. This was particularly important for state and national funders, as well as those without prior experience funding organizations in the Valley. Melina Sanchez, a program officer at the James Irvine Foundation, reported that the pooled fund “makes it easy for investors who aren’t based in the Central Valley to still allocate resources while feeling that the work will be community-driven.”

While some of these mechanisms are not unique to community-first funder collaboratives, the emphasis on using local knowledge to guide grantmaking decisions is an essential aspect of the model.

Communicating With Multiple Stakeholders

By design, a community-first funder collaborative includes a diverse group of stakeholders, including community partners, current and potential funders, policymakers, other advocates, and the general public. Each stakeholder group will have differing levels of interest, engagement, and understanding of the funder collaborative’s goals and will be curious about different aspects of the fund.
Reflective Practice

including community partners, current and potential funders, policymakers, other advocates, and the general public. Each stakeholder group will have differing levels of interest, engagement, and understanding of the funder collaborative’s goals and will be curious about different aspects of the fund. For example, a potential funder is likely to be very interested in the pooled fund’s logistics, whereas a legislator may only be interested in the collaborative’s policy priorities. These diverse audiences can make it complex to communicate the value or key components of the model.

Through interviews and document reviews, the research team found that although staff and partners of the fund were challenged in explaining the fund’s work in the early years, they have increased their ability to describe the work and to tailor their messages effectively. The use of Harder+Company’s research to develop a guide to community-first funder collaboratives is an example of the fund’s communication efforts (Harder+Company Community Research, 2018b). Even with these resources, however, when working on multiple issues in regions with a range of populations and geographies, communicating clearly about a community-first funder collaborative’s purpose and goals is a continuously evolving process.

Demonstrating Progress and Impact

Evaluating progress and impact can be challenging in any intervention with the goal of changing policies and systems in order to create a more equitable society. In a community-first funder collaborative, this challenge is compounded because community partners are pursuing a variety of policies and systems changes and tailoring their advocacy work to the local context. The fund, for example, did not set out with predetermined outcomes in order to provide the space for community partners to identify the priorities of the communities that they work in and with. Although particularly challenging for a policy and systems-change initiative, tracking and measuring progress are often vital to sustain momentum and keep partners engaged in the advocacy process. During its initial years, the fund has used tools such as journalism, social media, and visual storytelling to document and communicate its early successes and challenges.

As it has matured, the fund has begun to add other evaluation tools, such as a dashboard of indicators of health and racial equity, process indicators related to capacity-building and advocacy training, and participatory evaluation of its larger grants. This flexible approach can help a community-first funder collaborative to document its progress, share successes, and make adjustments while its implementation continues to evolve.

Sustaining the Work

Funder collaboratives, community-first or otherwise, have the ongoing challenge of sustainability. The San Joaquin Valley Health Fund has grown significantly over the last four years to include new grants, partners, and activities — which also increases the cost of managing the work. In a region without a strong nonprofit sector and little public investment, philanthropic partners are the source of the funds needed to maintain the quality, breadth, and depth of the fund’s activities.

To accomplish this, the fund works to retain current funders while also adding new ones.
One way that it has been successful in retaining funder partners is by ensuring that contributions fit the goals and strategies of the fund while also meeting the goals of the contributing foundations. For example, some local organizations receive funding directly from funder partners rather than through the fund, but are nonetheless community partners of the fund, participating in convenings and other activities, and receiving site visits from and reporting to fund staff. By providing a variety of ways to contribute and leveraging its network of current funders, the fund has been able to expand its network from two in 2014 to 18 funder partners now. While the future of the fund is unknown, the flexibility and opportunity it offers to funder partners has thus far enabled it to continue to support and grow the network of community partners.

Moving Forward

The San Joaquin Valley Health Fund’s community-first funder collaborative model grew out of what the founding funders heard at the community listening tours and their commitment to community-driven change. It started as an exploration into how to build a movement in a region with great needs and has developed into a partnership of local organizations and funders working to create a more equitable San Joaquin Valley.

The fund faces challenges, particularly related to supporting organizations with a range of skills and needs; evaluating a locally driven, multi-issue, regionally focused initiative; and communicating the progress and successes that have been achieved. However, through the fund, the funder and community partners have brought attention, investments, and capacity-building resources to the Valley. It illustrates how the community-first funder collaborative model puts the priorities of the communities experiencing the greatest inequities at the center of the work. A community-first funder collaborative invests in local organizations, provides support and connections that go beyond funding and traditional technical assistance, and is guided by priorities established by community residents.

When philanthropy aims to advance equity, it makes sense to use a model that seeks to create a partnership between funders and community — a model that seeks to act equitably by putting the community first.
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