



COLORADO CROSS- DISABILITY COALITION

In 2014, The Colorado Trust launched the **Health Equity Advocacy (HEA) Strategy**, a multi-phased investment in building a strong and diverse field of health equity advocates to ensure equitable health outcomes for Colorado's most vulnerable. A centerpiece of the second phase of this strategy (2015-2016) included providing financial and capacity-building support to a cohort of direct service, community organizing, and policy advocacy organizations across the state. This support was designed to strengthen individual and collective capacity to "seed" an emerging health equity advocacy field in Colorado.

The following is part of a **"Seeds of the Field"** series of profiles of each of the 17 cohort members funded in the second phase of the HEA Strategy.

Seeding a Health Equity Advocacy Field: The Story of Colorado Cross-Disability Coalition

Since 1990, [Colorado Cross-Disability Coalition](#) (CCDC) has served as a leading voice uniting Coloradans with all types of disabilities and advocating for their civil and human rights. CCDC has always had a firm belief in the importance of affected communities serving on the front lines of policy change that impacts them. A part of a statewide network of disability organizations, CCDC is run exclusively by people with disabilities and the organization is strongly centered around the value: *Nothing about us without us*.

At the launch of Phase 2, a core part of CCDC's programming centered on a nationally-recognized, eight-week advocacy training program. Running for over a decade, CCDC's

training programs annually graduate over 20 individual and systems advocates—many of who are former clients of CCDC—who are equipped with the knowledge, skills, and resources to fight for equitable outcomes for Colorado’s disability community. Phase 2 was envisioned as an opportunity to strengthen CCDC’s approach and ultimately build its capacity to serve as a critical anchor in an emerging health equity advocacy field.

CCDC’s Phase 2 Work

Foremost, CCDC leveraged the Phase 2 opportunity to focus inward. After years of operating with a self-described “culture of poverty” that characterizes many mission-driven non-profits, Phase 2 provided timely general operating resources that allowed CCDC to strategically build capacity as a statewide advocate. Specifically, through Phase 2, CCDC was able to bring on dedicated volunteers as paid advocates, hire both an advocacy coordinator and a director of evaluation and development, invest website development and working computers, financially compensate staff for statewide advocacy-related travel, and much more.

Executive Director Julie Reskin emphasized how valuable the level of HEA support was, sharing, “I’ve been saying for 15 years this is the kind of thing that we need, because that way we can have staff. Not everyone [has to] be a volunteer. *We can now do what we need to get the job done.*”



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– Julie Reskin,
Executive Director

CCDC also leveraged the Phase 2 opportunity to deepen their internal *equity* focus. While the organization has always been guided by anti-racist values, according to Reskin, racial equity discussions and trainings offered through Phase 2 of the HEA Strategy led to the organization raising internal expectations around assuring racial equity in their work. Language in CCDC’s most recent strategic planning process, for example, included explicit language around health equity. CCDC has also begun tracking diversity of staff and membership, as well as examining personnel policies to ensure bilingual and bicultural staff are in place for community outreach.

Phase 2 also saw new developments in CCDC’s long-running advocacy training as well. Not only is health equity further integrated into their advocacy training curriculum, CCDC was also able to make this eight-week advocacy training program available online. This significantly expanded access to the training, making it possible to reach interested participants from across the state who might be unable to otherwise physically attend trainings in-person in Denver.

Laying the Groundwork for an Emerging Field

CCDC's investments in organizational development over the past two years are not only in service of the organization itself. Rather, CCDC's evolution into a strong anchor organization ensures that disability rights perspectives are not just at the table, but are lighting a path in policy discussions focused on addressing systemic barriers that stand in the way of equitable outcomes for Colorado's most vulnerable.

Reflecting on CCDC's growth over the course of Phase 2, Reskin confirmed how their strengthened capacity fuels an emerging health equity advocacy field. Most immediately, CCDC's increased capacity has allowed them to meet the growing demand



“Because we were stable enough we've been able to really be a much stronger leader.”

– Julie Reskin,
Executive Director

and complexity of client needs, as well as be a stronger champion of their rights. In policy discussions with other Phase 2 organizations, CCDC representatives have consistently introduced and underscored specific disability rights perspectives that might not otherwise be raised in broader discussions about health access or housing. Similarly, within the disability networks in which it is embedded, CCDC has been able to underscore an equity perspective by virtue of the explicit inclusion of racial equity as an integrated value in CCDC's work and strategic plan. This level of involvement and

leadership, according to Reskin, would simply not be possible for a small, volunteer-run organization.

Where CCDC's work also lays important groundwork for an emerging field is in the continuing development of leaders—now beyond the Denver metro region—who are positioned to engage in individual and systemic advocacy on behalf of themselves and their loved ones. CCDC advocates and clients have offered an important intersectional perspective in field-level discussions about advancing health equity that demands consideration of how poverty and race and disability present *layered* barriers to health access and equity. Having their voices on the front lines is critical for ensuring meaningful change ahead.



CCDC leaders at the 2015 state meeting

Looking Forward

Beginning in 2017, the 17 HEA cohort members, including CCDC, are launching a new phase of work focused on further cultivating the seeds collectively planted across the state in Phase 2. Ultimately, guided by common values and empowered communities, cohort members will be aligning their change efforts to dismantle structural and racial inequities and build equitable health systems so that all Coloradans can thrive. CCDC is poised to serve as a leader in this collective endeavor.

Highlights: Colorado Cross-Disability Coalition's Seeds of the Field

- Nationally-recognized advocacy training program, which is now available online, equipping more people with disabilities and their allies to advocate within systems and for systems change
- Deep integration of health equity into CCDC's work and operations, with a ripple out impact in its disability networks
- Greater capacity to serve as a strong anchor organization representing disability rights perspectives within broader health equity policy discussions
- Cadre of CCDC advocacy training alumni that continue to serve on the front lines of disability rights and health equity advocacy, and are poised for future state-wide mobilization

