



STATE OF THE FIELD

**Findings from a Scan of Colorado's
Emerging Health Equity Advocacy Field**



Overview

1. Background on the Health Equity Advocacy Strategy

2. Research findings

- Composition of the health equity advocacy field
- Connections within the field
- Perspectives on the current state of the field
- Considerations and implications moving forward

3. Discussion of learnings



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The Health Equity Advocacy (HEA) Strategy

A multi-year funding strategy with the goal of building a strong and diverse field of health equity advocates in the state of Colorado.

Field: An identifiable group of actors, in relationship with each other, that has a shared identity, knowledge base, vocabulary, policy, practices, leadership and sources of support

Health equity: Differences in health by race, income, geography or other social, economic or environmental factors are no longer observed, and people of color, low-income communities and other historically disenfranchised people are involved in achieving this outcome

Health equity advocacy field: A group of individuals and organizations who develop knowledge and practices that work in alignment to influence policy related to advancing health equity for Colorado's diverse populations

Why Field-Building?

Field-building

- Encourages efficiencies, maximizes resources and reduces silos
- New advocacy voices can be incorporated
- Harness power statewide to advance change



Health Equity Advocacy in Colorado

2013 Field Assessment



Research Questions

1. What is the current composition of the health equity advocacy field in Colorado?
2. How are these partners connected?
3. To what extent do those working on efforts to advance health equity see the emergence of a health equity advocacy field?
4. What are the perceived gaps in this field, as well as the opportunities for growth and development?



Online survey

The diagram illustrates the research methodology. At the bottom, there are two teal-colored rectangular boxes. The left box is labeled 'Online survey' and the right box is labeled 'Bellwether interviews'. From the top center of each box, a dark blue arrow points upwards towards a large, light blue rounded rectangle that contains the four research questions. This visualizes that the data from both the online survey and the bellwether interviews will be used to address the research questions.

Bellwether interviews

Methodology

Online Survey

- Survey open from March-April 2017
- Unbounded snowball sample
- Seeded by participants in the 2013 field assessment and 18 current organizations receiving funding from The Colorado Trust
- 557 organizations invited to complete survey
- 227 responses

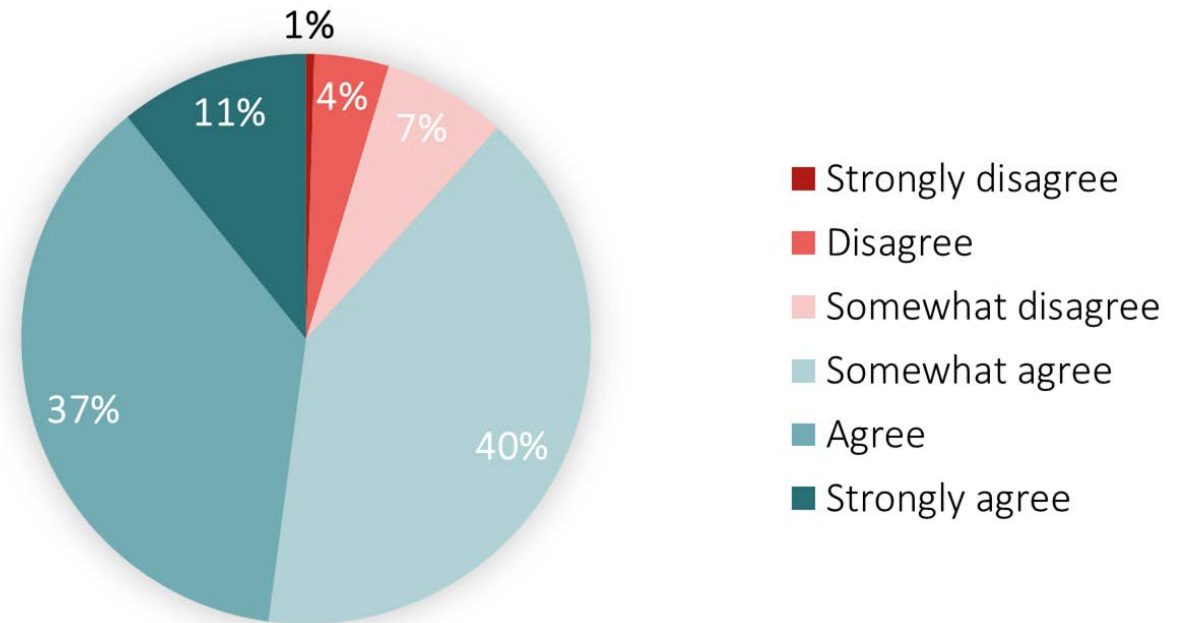
Bellwether Interviews

- Telephone interviews
- 22 organizations presumed to be part of the health equity advocacy field
- Nominated by The Trust based on participation in the 2013 field assessment

Summary of Findings

1. An emerging health equity advocacy field exists
 - Diverse and diffuse
2. Opportunities exist to leverage diverse expertise within the field
3. There are some clear directions for future field-building efforts

To what extent would you agree that an identifiable health equity advocacy field exists in Colorado?



Limitations

New and complex field

Sample: Key stakeholders

Specific perspective





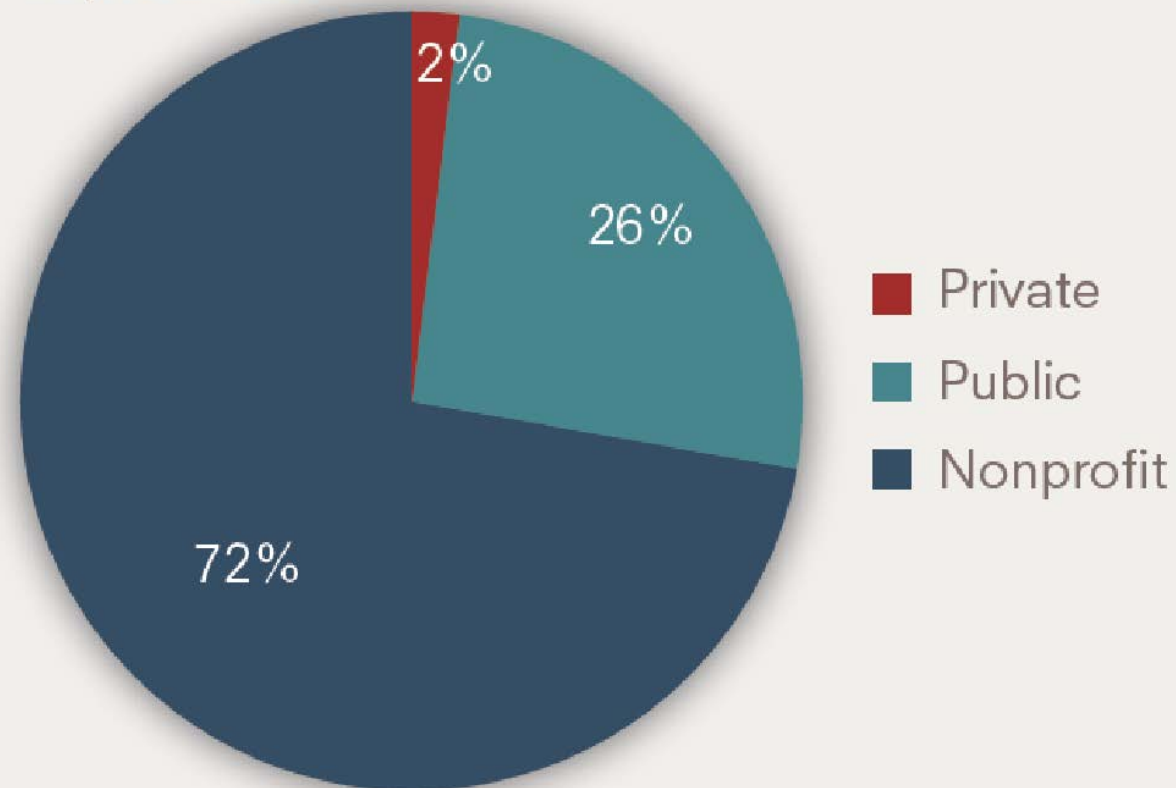
Who Comprises the HEA Field?



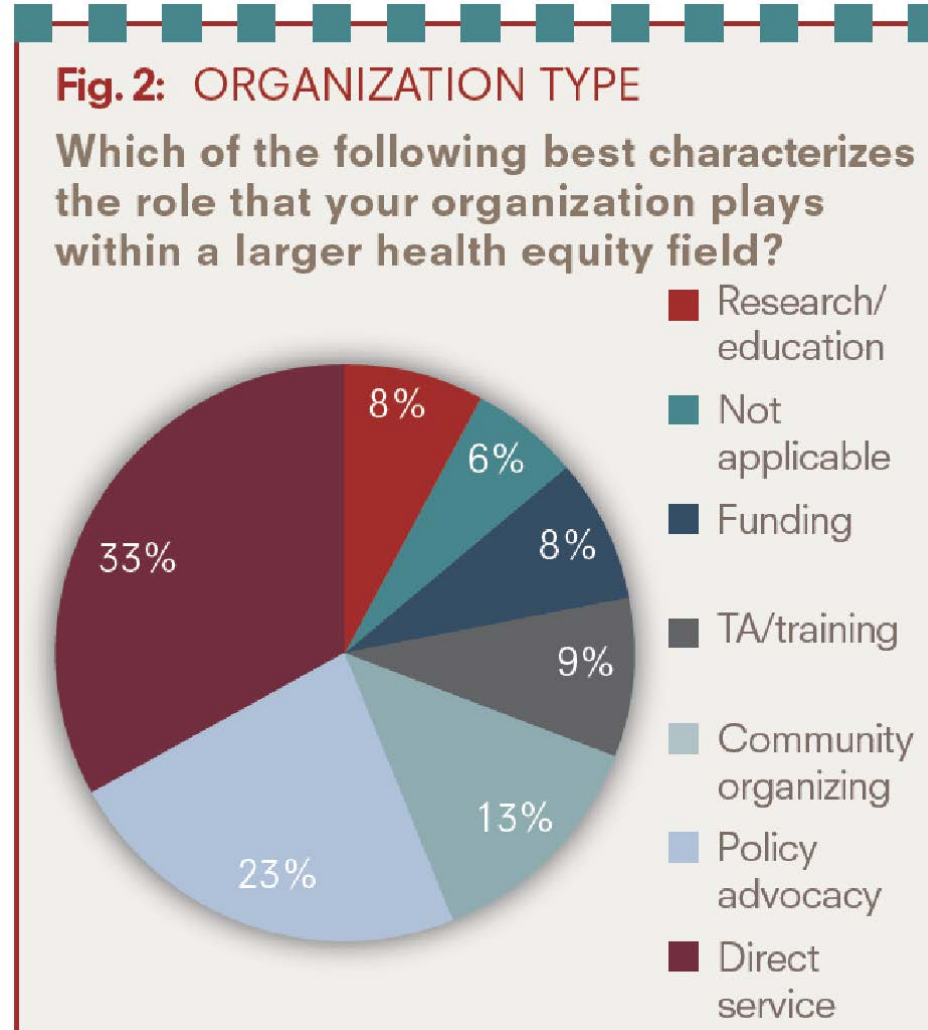
Sectors

Fig. 1: SECTOR

Which of the following sectors do you represent?



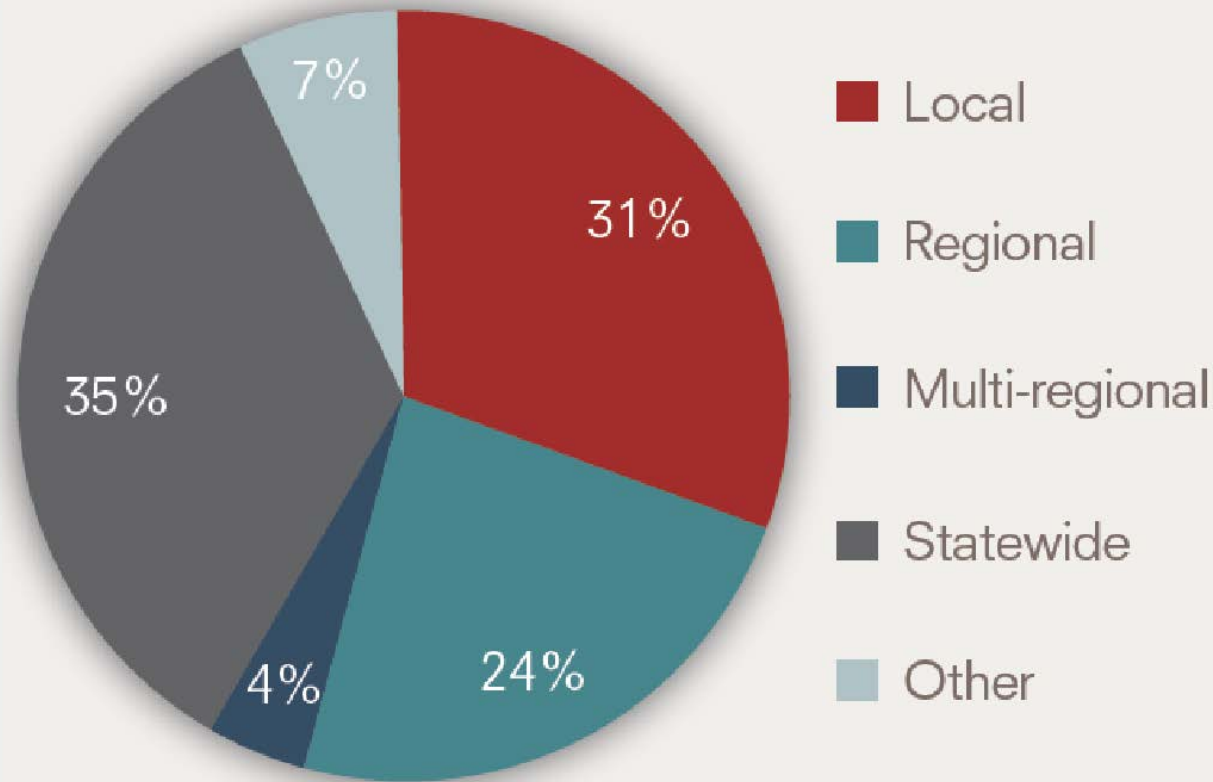
Organization Type



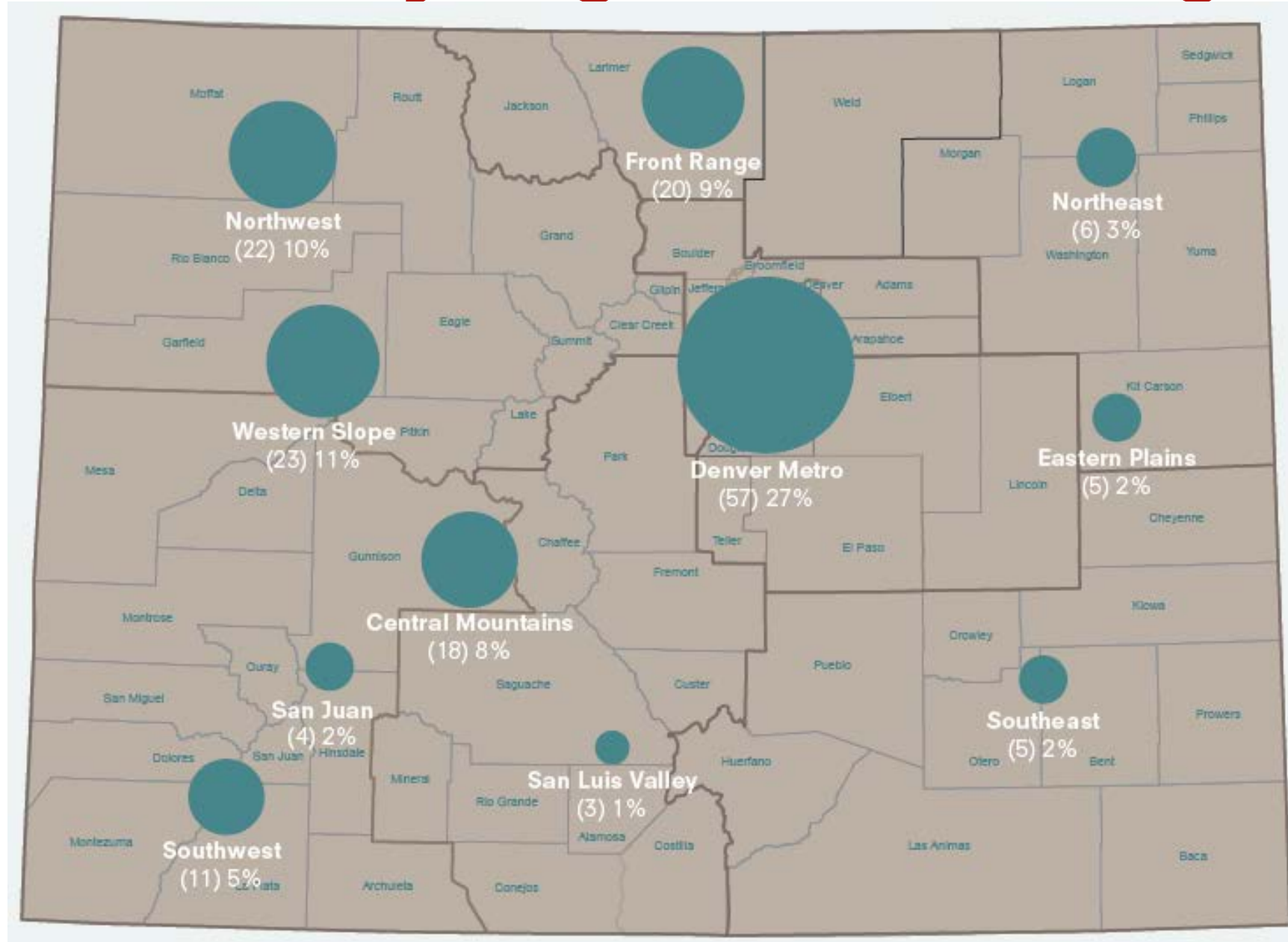
Scope

Fig. 3: SCOPE

How would you describe your scope?



Regions Served by Regional/Local Orgs



Communities Served

Most commonly served “core” populations

- Low-income families
- Children and youth
- Latino/Hispanic populations
- Rural populations

Least commonly served “core” populations

- African Americans
- Undocumented populations
- Native Americans
- Asian Pacific Islanders
- LGBT populations
- Homeless populations
- Incarcerated/formerly incarcerated populations
- Veterans

Top Issues

Table 1: TOP ISSUES IN THE FIELD

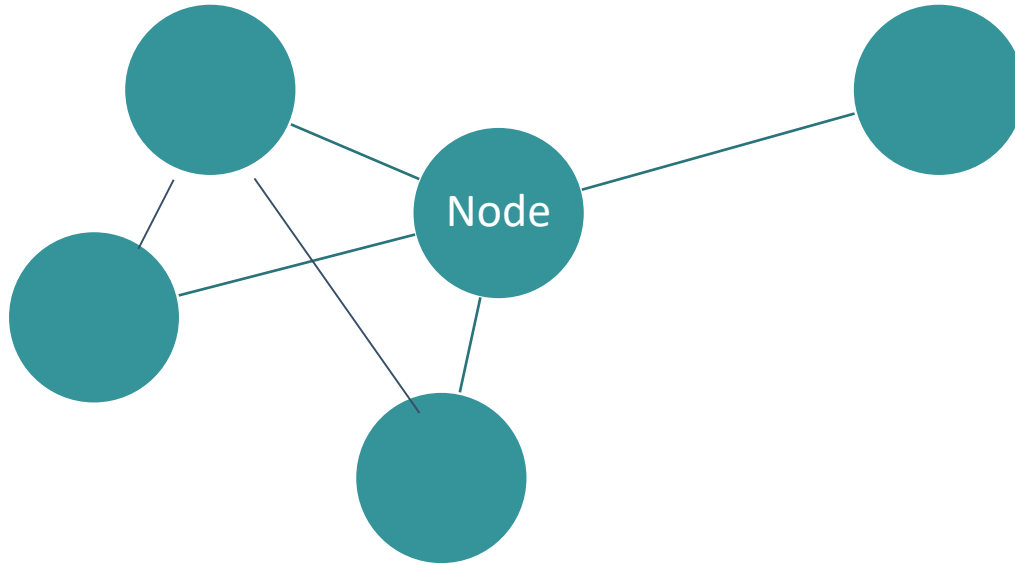
Top 11 issues (non-advocacy focus)		Top 11 issues (advocacy focus)	
Access to care	53%	Access to care	45%
Health education/health literacy	51%	Health care affordability	42%
Education	48%	Education	35%
Family support services	47%	Family support services	34%
Health systems navigation	46%	Health education/health literacy	32%
Culturally responsive care	43%	Culturally responsive care	32%
Food access	37%	Economic security	32%
Economic security	37%	Health systems navigation	32%
Health care affordability	34%	Immigrant services/rights	31%
Insurance enrollment	30%	Transportation	31%
Transportation	30%	Civil rights	31%



How is the Emerging Field Connected?



Social Network Analysis



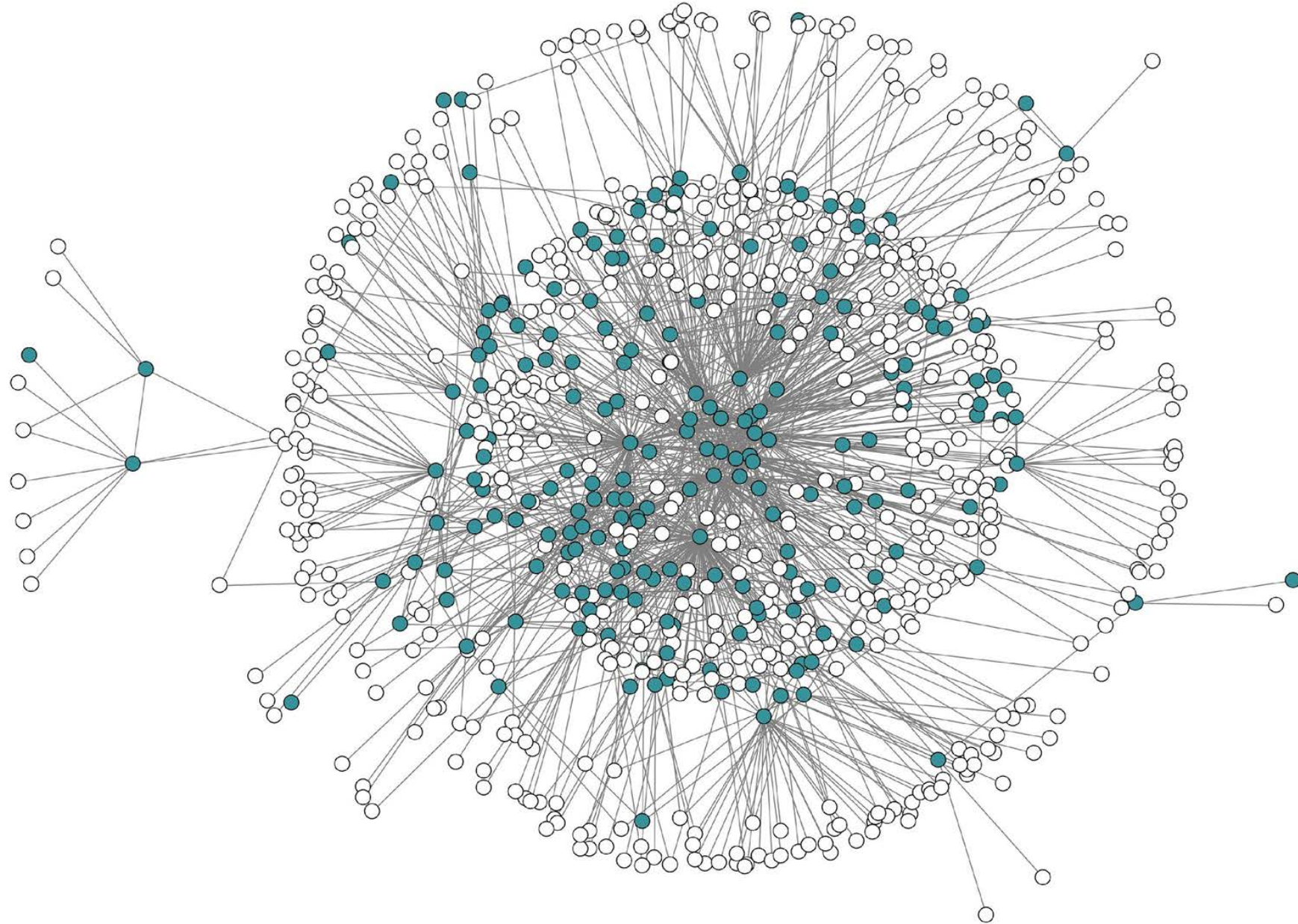
- Study of social relations among a set of actors
- “Maps the network” by measuring relationships between individuals within a given group
- Identifies patterns and structures that can be graphically represented

Health Equity Advocacy Field

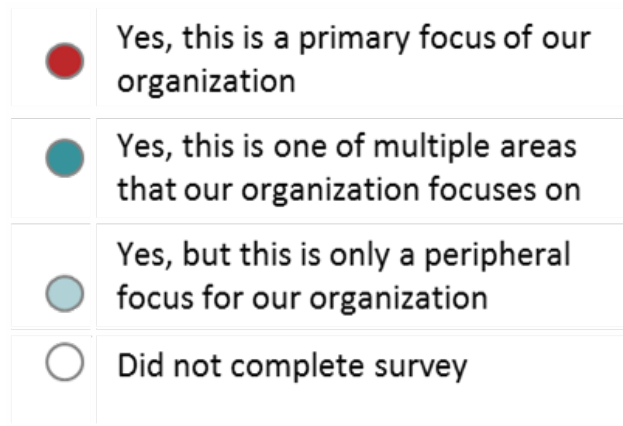
775 unduplicated
organizations

227 completed
survey


Final sample size:
213

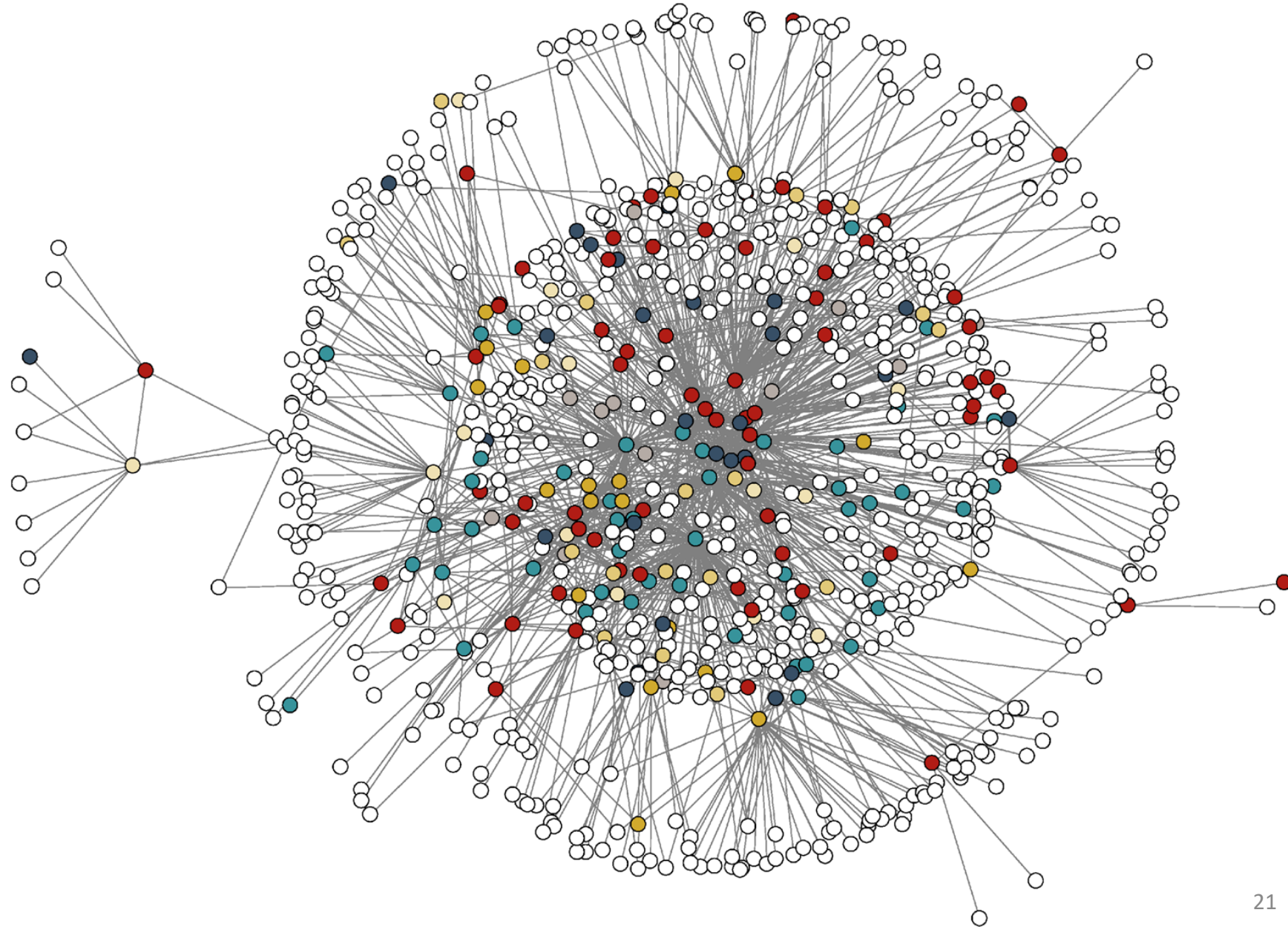


Health Equity Focus

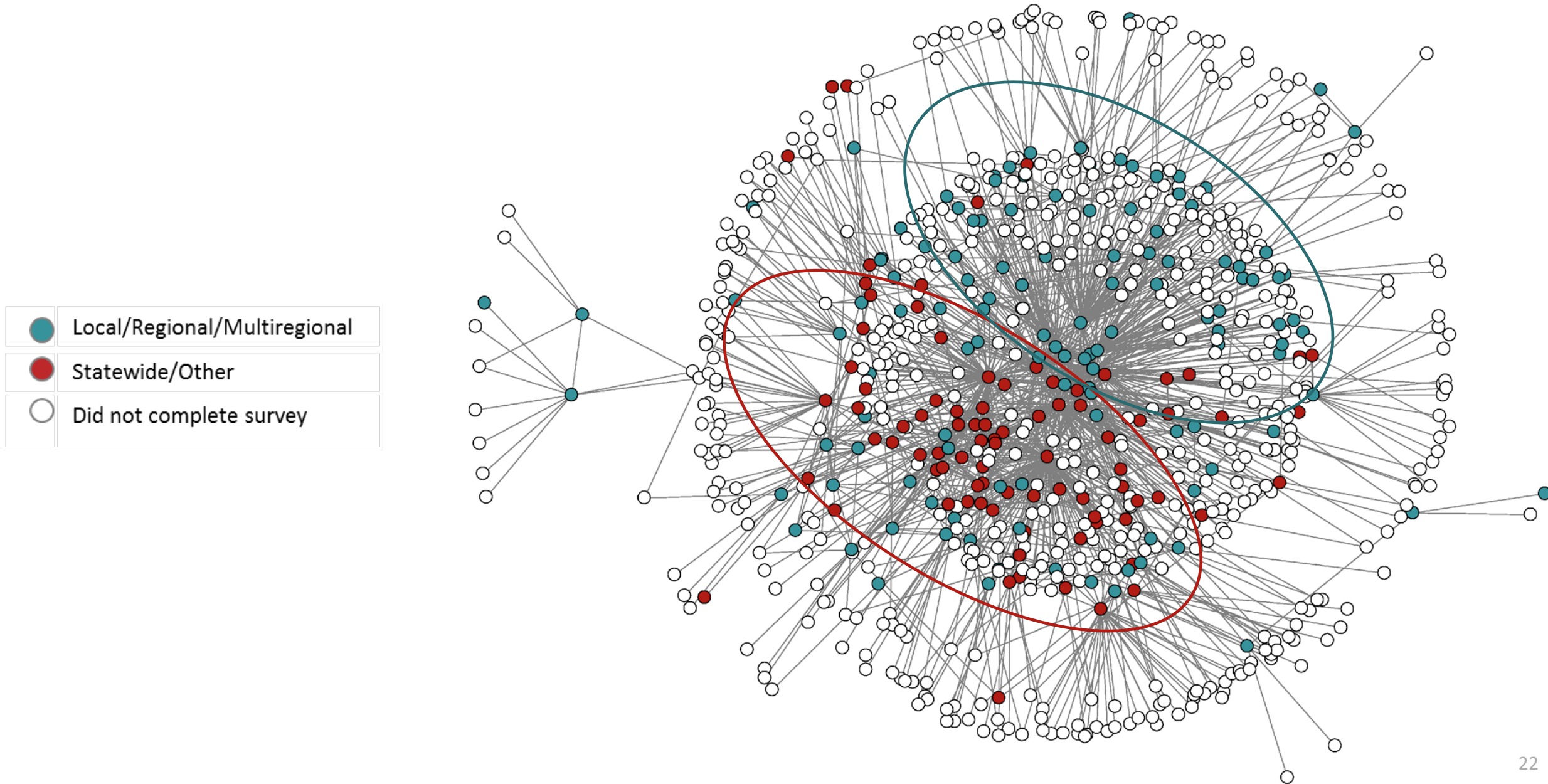


Organizational Type

	Direct service
	Policy Advocacy
	Community organizing
	Technical assistance/training
	Funding
	Research/education
	Not applicable
	Did not complete survey



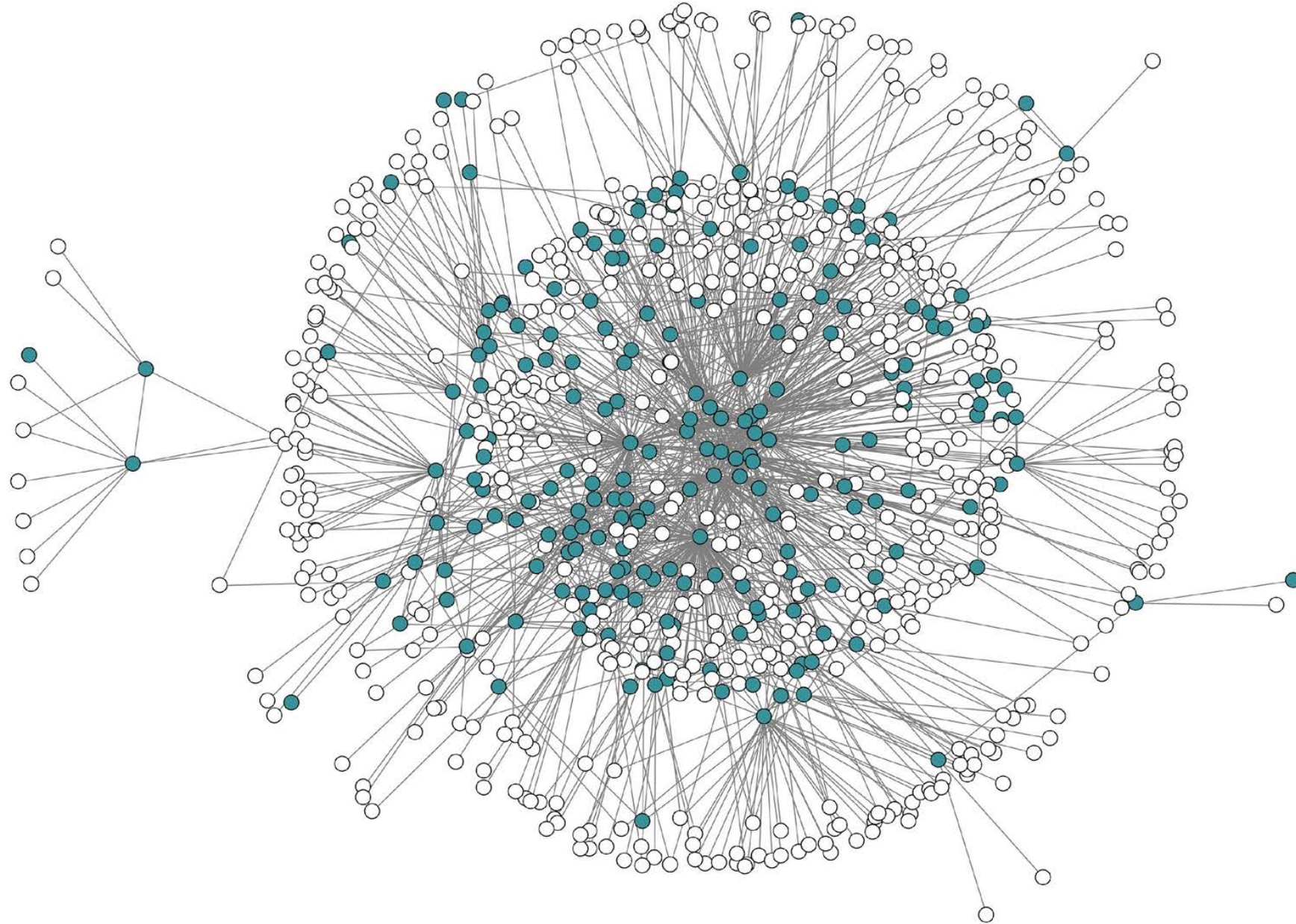
Organizational Scope



Health Equity Advocacy Field

Status as of 2017

2019 follow-up



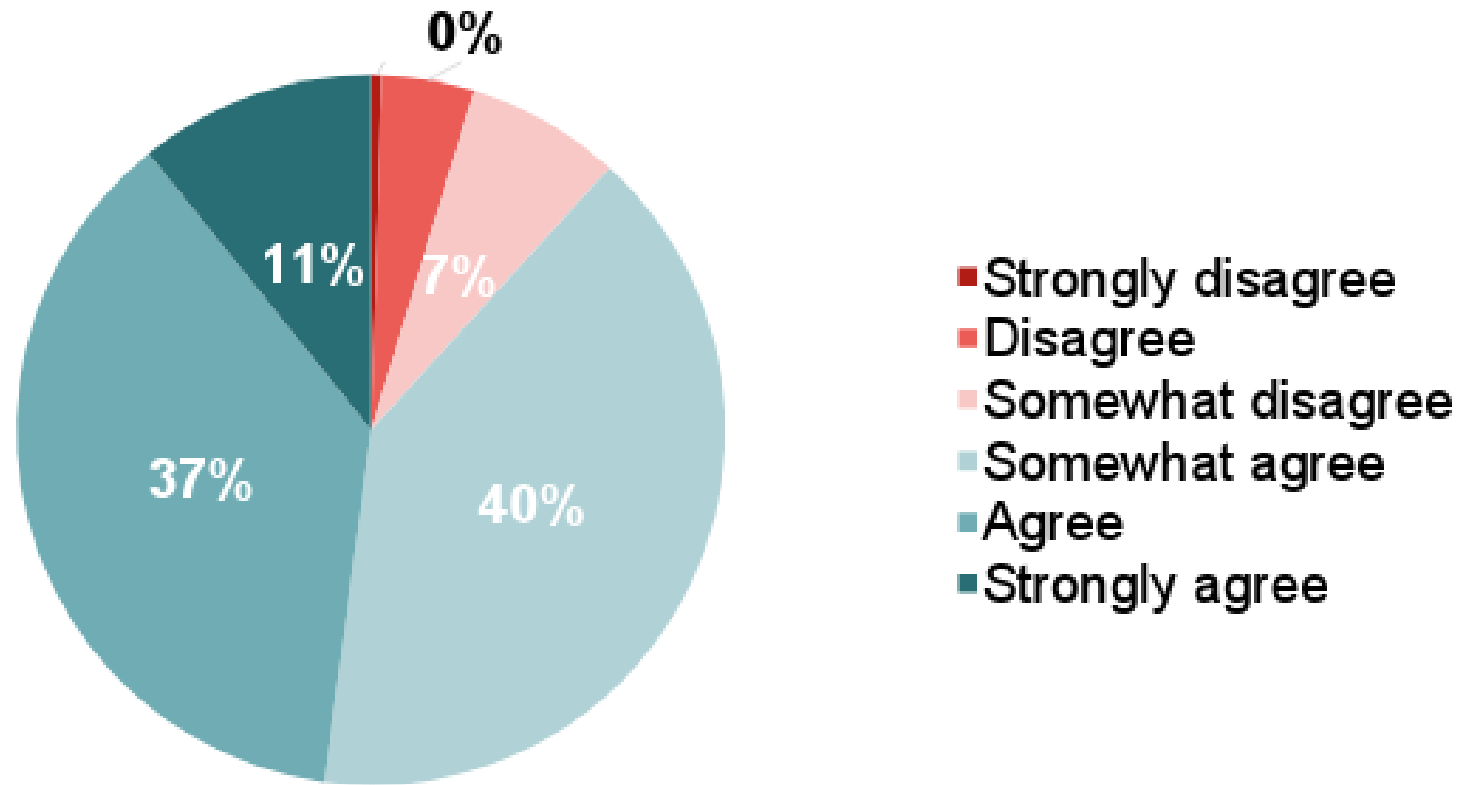


Perspectives on Colorado's Emerging Health Equity Field



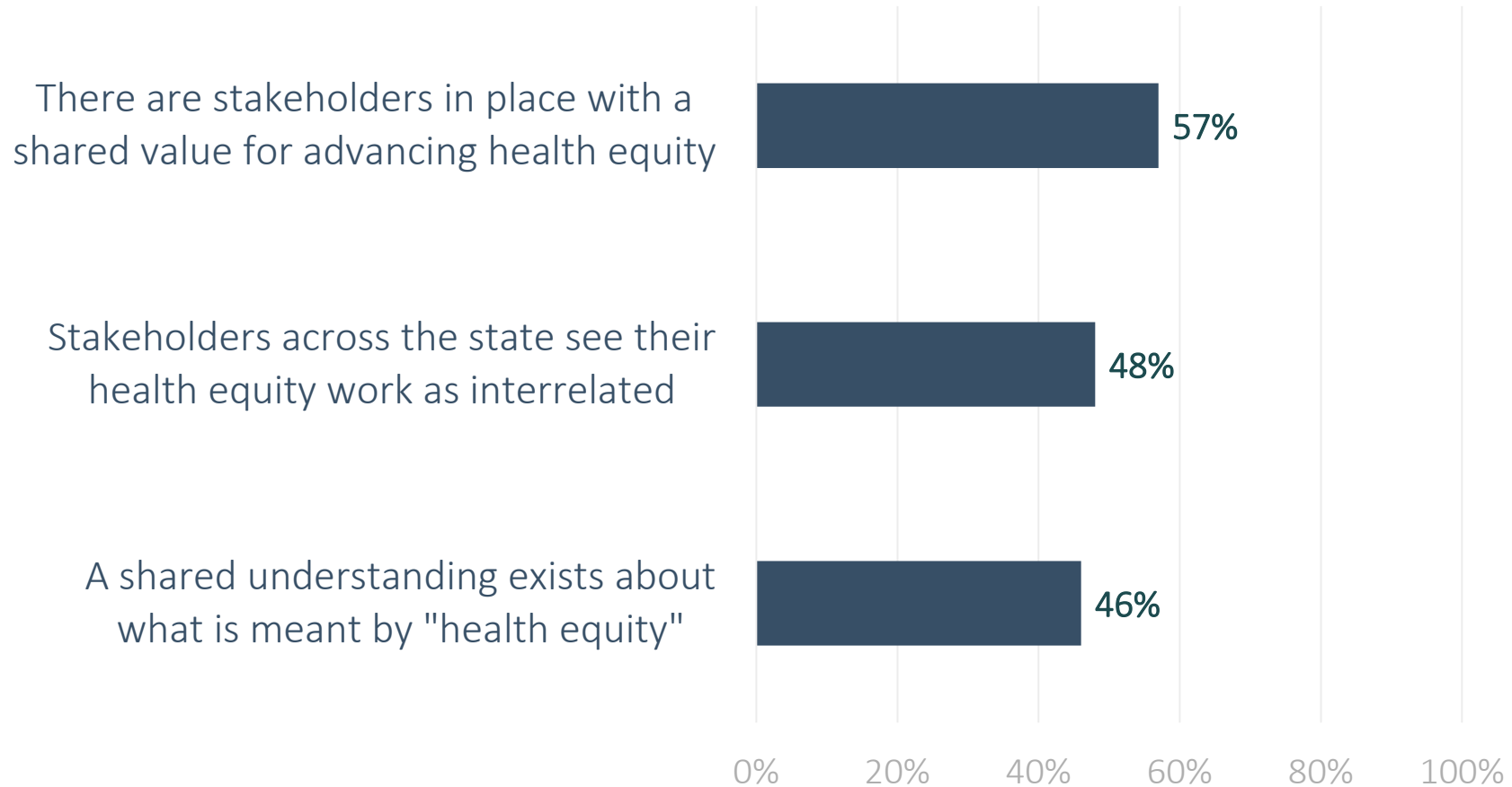
Existence of a Health Equity Advocacy Field

To what extent would you agree that an identifiable health equity advocacy field exists in Colorado?



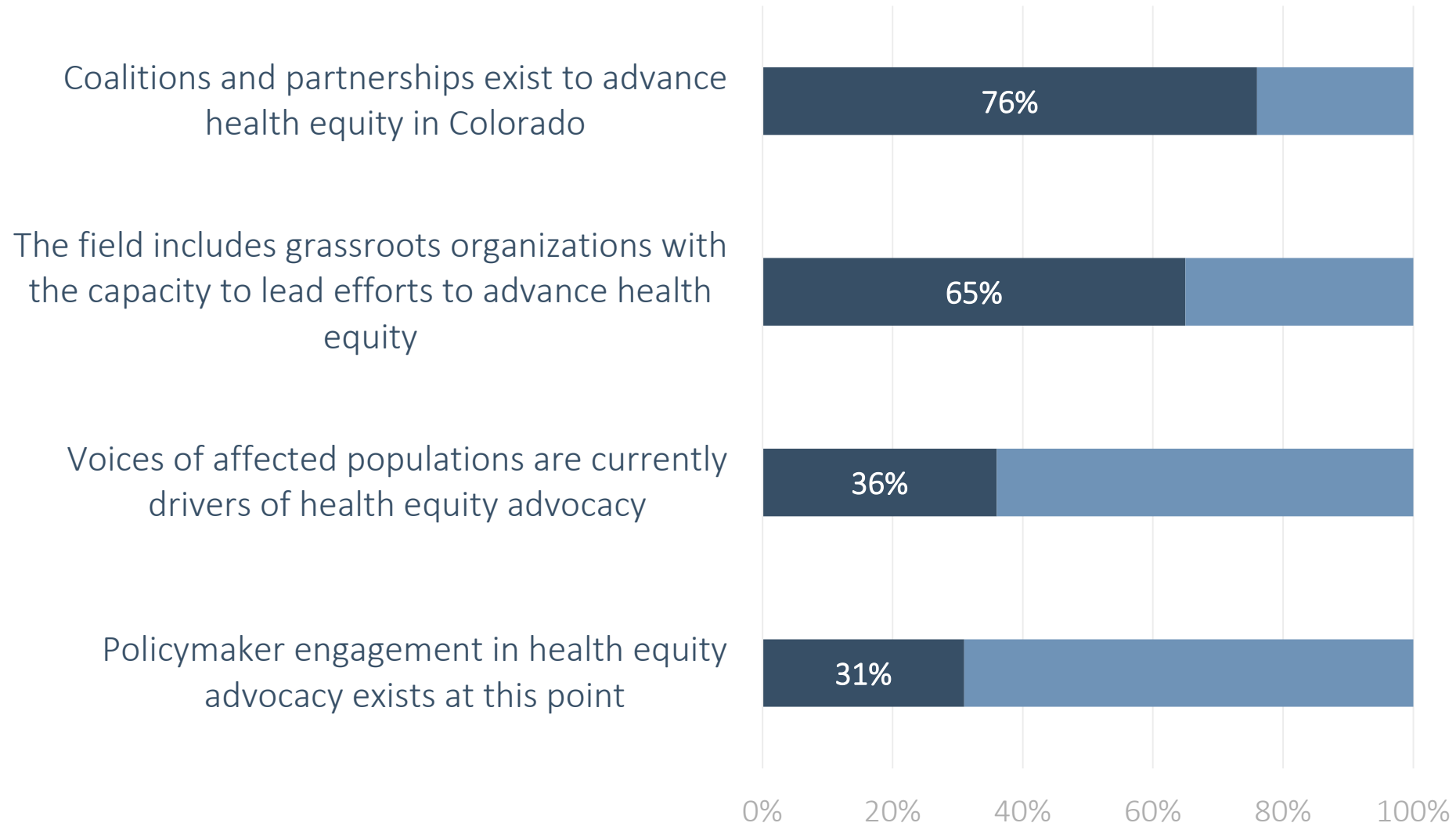
Perspectives on Colorado's Emerging HEA Field

FIELD FRAME



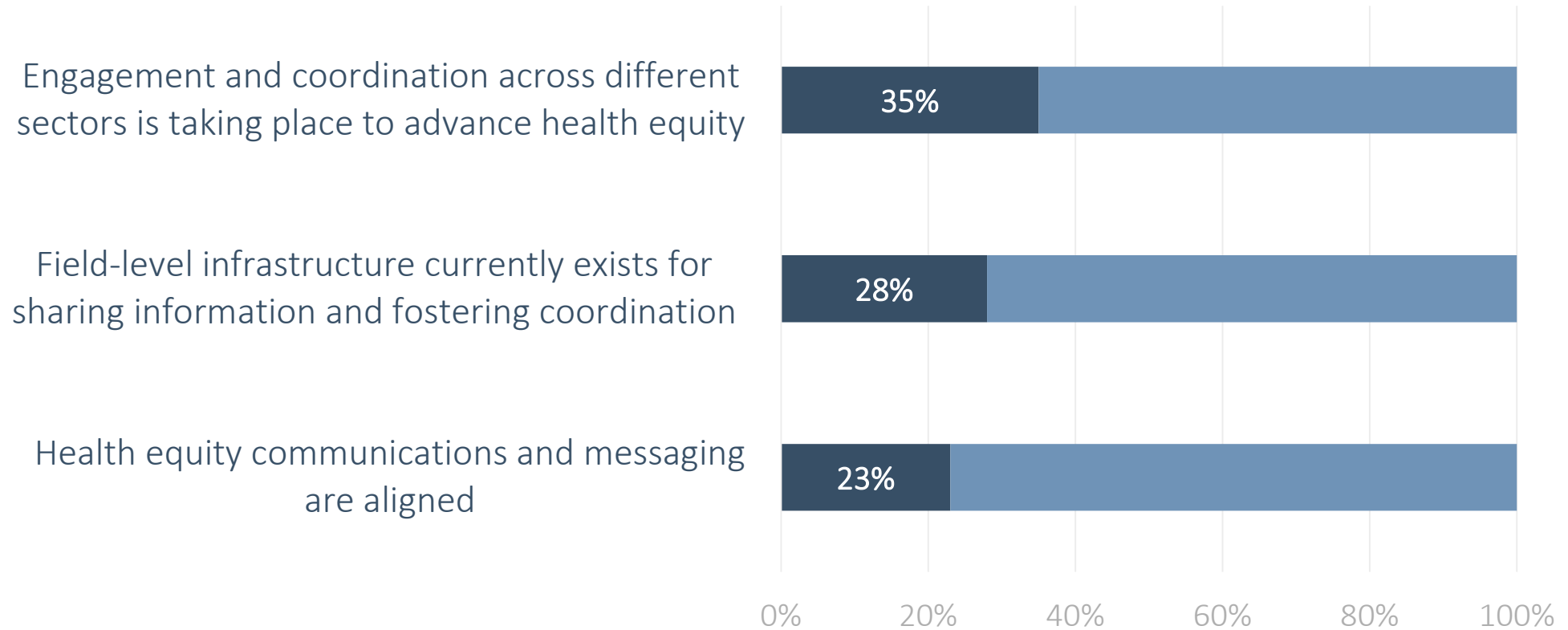
Perspectives on Colorado's Emerging HEA Field

COMPOSITION



Perspectives on Colorado's Emerging HEA Field

CONNECTIVITY



Perspectives on Colorado's Emerging HEA Field

NEEDED INFRASTRUCTURE, SUPPORTS, AND RESOURCES

- Financial resources
- Clear coordinating or leadership body
- Capacity building at multiple levels
- Health equity advocacy research and tools



Perspectives on Colorado's Emerging HEA Field

LIMITED ADAPTIVE CAPACITY FOR ADVOCACY





Considerations and Implications Going Forward



Considerations and Implications Going Forward

Strengthen the frame

Further diversify the
composition of the field

Provide more strategic
collaboration
opportunities

Strengthen the field's
infrastructure

Build the field's health
equity advocacy capacity

Discussion Questions

1. Was there anything in this presentation that rang particularly true or false from your own understanding of the field?
2. How might your organization take better advantage of the power inherent in the emerging field?
3. You've heard our considerations and implications of these findings for field building. Would you add any others, based on the findings we've presented today or your own experience as a member of this field?

Contact Information

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