

# SPARK REPORT

## Partnership in Action

Community Input for the Vitalyst Strategic Plan Refresh



**March 2022** In 2018, Vitalyst embarked on its first strategic planning process to guide its programmatic work for the next two-five years. In 2021, amid a global pandemic and its devastating effects across the state, Vitalyst decided it was necessary to reassess.

# Background

In 2018, Vitalyst embarked on its first strategic planning process to guide its programmatic work for the next two-five years. To do this, it conducted external focus groups, four community partner meetings, and worked with a consultant on how to further imbed equity into its programmatic work. As part of this effort, the organization also developed a Collaboration Continuum Survey to understand how stakeholders incorporated healthy community practices in their field and whether they were actively collaborating with other sectors to ensure a multidisciplinary approach to wellbeing.

These two approaches engaged consultants and nonprofits, as well as current and past grant recipients across the state. As a result, in 2019 Vitalyst launched its Strategic Roadmap and five goals: Access to Care and Coverage, Healthy Community Design, Community Capacity Building, Transformative Grantmaking, and Civic Health. A summary of all the objectives can be found in Figure 1.

In the first three years of the strategic plan, Vitalyst was able to accomplish many of its objectives. For example:

- Over 18,000 people were enrolled in health insurance and more than 400 community partnerships were built to expand health insurance outreach;
- Together with 18 funders, Vitalyst raised \$480,000 and created AZEvictionhelp.org to assist Arizonans with eviction resources;
- More than \$2,145,000 in grants were distributed; and
- Community organizing was strengthened by the partnership with Arizona Town Hall. During the two years of discussion on “Vibrant Communities,” almost 1,900 people were involved in town halls across the state.

A complete list of accomplishments for fiscal year 2020-2021 can be found in Appendix I online.

In 2021, amid a global pandemic and its devastating effects across the state, Vitalyst decided it was necessary to reassess its programmatic plans to properly address community needs. To do this, it embarked in a process

similar to the one of 2019. Staff had several internal discussions guided by an external consultant, built a draft plan, and presented it in two community meetings attended by over 60 of its partners. In November 2021, Vitalyst also conducted its second Collaboration Continuum Survey to understand how stakeholders had changed their way of integrating health in all their work. Both the community partner meetings and the Collaboration Continuum Survey provided valuable feedback for staff on current challenges, priorities, and possible activities for the upcoming years. The new plan continues to encompass the work that Vitalyst has always done by streamlining it in three goals (Figure 2): Collaborative Networks, Strong Community Partners, and Informed Decision-Makers.

This report aims to summarize the feedback received by Vitalyst’s community partners during the 2021 Strategic Refresh process. Section I explores the results of the Collaboration Continuum survey and how Vitalyst’s Stakeholders integrate health in their work. Section II looks at what Vitalyst’s Community Stakeholders think are some of the challenges that the organization might encounter while accomplishing their updated goals. Section III summarizes possible areas of work for Vitalyst, as suggested by its partners during the community meetings and the Collaboration Continuum Survey.

FIGURE 1 Vitalyst Strategic Plan, 2019

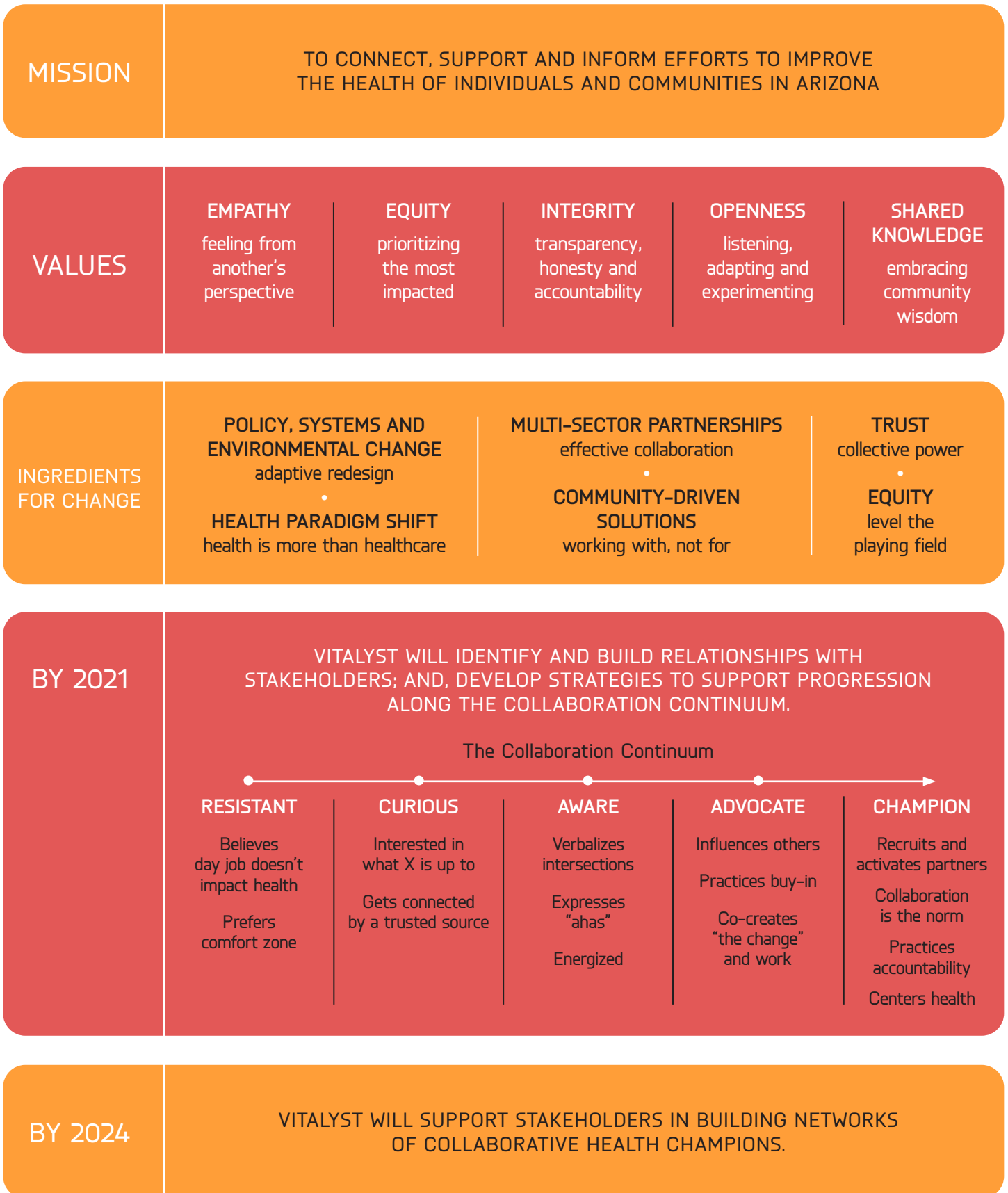


FIGURE 1 Vitalyst Strategic Plan, 2019 CONTINUED






	BY 2021	BY 2024	
<b>GOAL 1</b>  <b>ACCESS TO CARE AND COVERAGE</b>	<input type="checkbox"/> Increase the insured rate and identify healthcare workforce needs <input type="checkbox"/> Support partnerships to connect healthcare and social services <input type="checkbox"/> Identify and connect First Responder partners statewide	<input type="checkbox"/> Reduce the uninsured rate and advance the healthcare workforce <input type="checkbox"/> Support development of statewide infrastructure to connect healthcare and social services <input type="checkbox"/> Support integration of First Responder work	<b>EQUITY</b> <i>Practices incorporated throughout all five goals</i> Focus on unmet need • Use disaggregated data • Acknowledge historical inequity and disinvestment • Invest in communities most impacted by the work • Implement explicit equity processes and tools • Build power with the most impacted
<b>GOAL 2</b>  <b>HEALTHY COMMUNITY DESIGN</b>	<input type="checkbox"/> Identify and strengthen stakeholder relationships to influence policies focusing on food, transportation, housing and community planning <input type="checkbox"/> Support the public health sector's built environment focus <input type="checkbox"/> Incubate community-based, collaborative cohorts	<input type="checkbox"/> Activate relationships to influence policy and systems change <input type="checkbox"/> Expand public health and built environment coalitions <input type="checkbox"/> Expand place-based, cross-collaborative incubation	
<b>GOAL 3</b>  <b>COMMUNITY CAPACITY BUILDING</b>	<input type="checkbox"/> Strengthen Technical Assistance Partnership systems and strategies	<input type="checkbox"/> Boost capacity of community-based leaders, organizations and coalitions	
<b>GOAL 4</b>  <b>TRANSFORMATIVE GRANTMAKING</b>	<input type="checkbox"/> Implement tiered grants <input type="checkbox"/> Streamline processes and improve data collection <input type="checkbox"/> Engage in funder collaboratives	<input type="checkbox"/> Utilize community expertise to establish data-driven, responsive grantmaking practices <input type="checkbox"/> Pilot participatory grantmaking	
<b>GOAL 5</b>  <b>CIVIC PARTICIPATION</b>	<input type="checkbox"/> Strengthen systems that increase community organizing and advocacy <input type="checkbox"/> Promote authentic community participation and research <input type="checkbox"/> Support 2020 Census	<input type="checkbox"/> Build resident, community, and civic leadership <input type="checkbox"/> Connect empowered voices to influence policies <input type="checkbox"/> Promote fair processes in civic institutions	

FIGURE 2 Vitalyst Updated Strategic Goals, 2022

**COLLABORATIVE NETWORKS** working to improve the conditions that impact health.

**WHAT THIS LOOKS LIKE**

- Silos are disrupted to improve outcomes and wrap services around the person or family.
- Resources are better leveraged through cross-sector integration and collaboration.
- Communities are engaged to build networks for health and well-being.

**OBJECTIVES/APPROACHES**

Foster relationships between sectors.

Invest in opportunities to bridge communities and institutions.

**CURRENT ACTIVITIES**

Supporting coalitions and collaborations  
(Cover Arizona, Food Coalitions, housing collaboratives, AzHIP)  
Social Determinants of Health and Healthcare Integration

Schools and Housing  
Food Policy Councils

**STRONG COMMUNITY PARTNERS** equipped to advance health equity.

**WHAT THIS LOOKS LIKE**

- Community-based leaders, organizations and coalitions are built and supported to advance health equity.
- Nonprofits have sustainable and resilient financial and programmatic infrastructure to accomplish their missions.

**OBJECTIVES/APPROACHES**

Fund and leverage funding.

Provide technical assistance tools.

**CURRENT ACTIVITIES**

Systems Change, Spark, and Medical Assistance Grants  
Impact Investing  
Arizona Together for Impact Fund (funder collaborative)

Technical Assistance Partnership (TAP) Tools, TAP Talks,  
TAP Team of consultants/coaches  
Fiscal Sponsorship (TAPAZ)  
Capacity Building for leaders

**INFORMED DECISION-MAKERS** prioritizing community health and well-being.

**WHAT THIS LOOKS LIKE**

- Factual information is gathered, shared and used to improve policies and systems.
- Decision-makers actively work to create policies that advance health equity.

**OBJECTIVES/APPROACHES**

Invest in policy-focused collaboratives.

Strengthen advocates.

Influence decision-makers.

**CURRENT ACTIVITIES**

Housing policies  
COVID-19 Policy, Systems and Environmental Grants

Advocacy and public policy capacity building  
Podcasts

Public testimony and advocacy  
Census and redistricting  
Spark Brief reports

# I. How do Vitalyst's stakeholders integrate health in their work?



Collaboration across sectors is at the center of creating healthy communities and Vitalyst's work. When the organization launched its first strategic planning process in 2019, it wanted to better understand how partners across the state incorporate social determinants of health in their work and launched its first Collaboration Continuum Survey. In 2021, as part of the Strategic Refresh, Vitalyst sent the survey to the same partners to understand how their position had changed. The Continuum measures the level of engagement and cross-collaboration among partners to ensure an interdisciplinary approach to health. The four different levels of engagement, from more engaged to less engaged, are: resistant, curious, aware, advocate, and champion. A description of each category and respondents' results are summarized in Figure 3. A brief summary of the highlights of the 2021 survey follows. A complete list of questions can be found in Appendix II online.

FIGURE 3 Collaboration Continuum

QUESTION: Your organization...		2019	2021
RESISTANT	Does not consider health as part of our decision-making; Does not factor health into our strategic planning; Does not consider health as part of our work.	4.8%	2.8%
CURIOUS	Doesn't have a history in connecting to health-related work, but is interested in learning more about the health-related implications of our work; Attends meetings, events or conferences to network with sectors/industries outside of our own.	4.8%	6.3%
AWARE	Understands why health is an important factor, but we have yet to apply it to strategy and operations; Sees how we can work with other sectors to improve health and well-being; Reaches out to other sectors to discuss possible collaborations; We are still working on how to apply health to strategy and operations.	18.1%	21.6%
ADVOCATE	Has developed a limited set of strategies focused on improving the health and well-being of the communities we serve; Includes a staffing model with at least one position focused (in-full or in-part) on developing partnerships with industries/sectors that are outside of our traditional scope of work; Invests some finances in projects that impact industries/sectors beyond our own.	18.9%	15.9%
CHAMPION	Is a leader in efforts to inform and influence others about the importance of adopting a broader view of health; Focuses a significant portion of its resources toward improving community health and well-being; Meets with key stakeholders to explore creative solutions to improve health; Creates forums to bring non-traditional partners together.	53.3%	53.4%

The 2021 survey had 183 community partners respond from across the state. Most respondents were executives (67%) followed by directors (21%), mid-level (10.7%) and entry-level (1.30%). About 60% of respondents said that their organizations serve across the state with most organizations providing services in Maricopa, Pima, and Pinal counties.

**Survey results show that a majority (53.4%) of partners identify themselves as champions.** Most respondents seem to embrace a broader view of health, one that goes beyond focusing on individual behavior and healthcare. Some of the most common ways in which respondents are trying to adopt a multi-disciplinary view of health are:

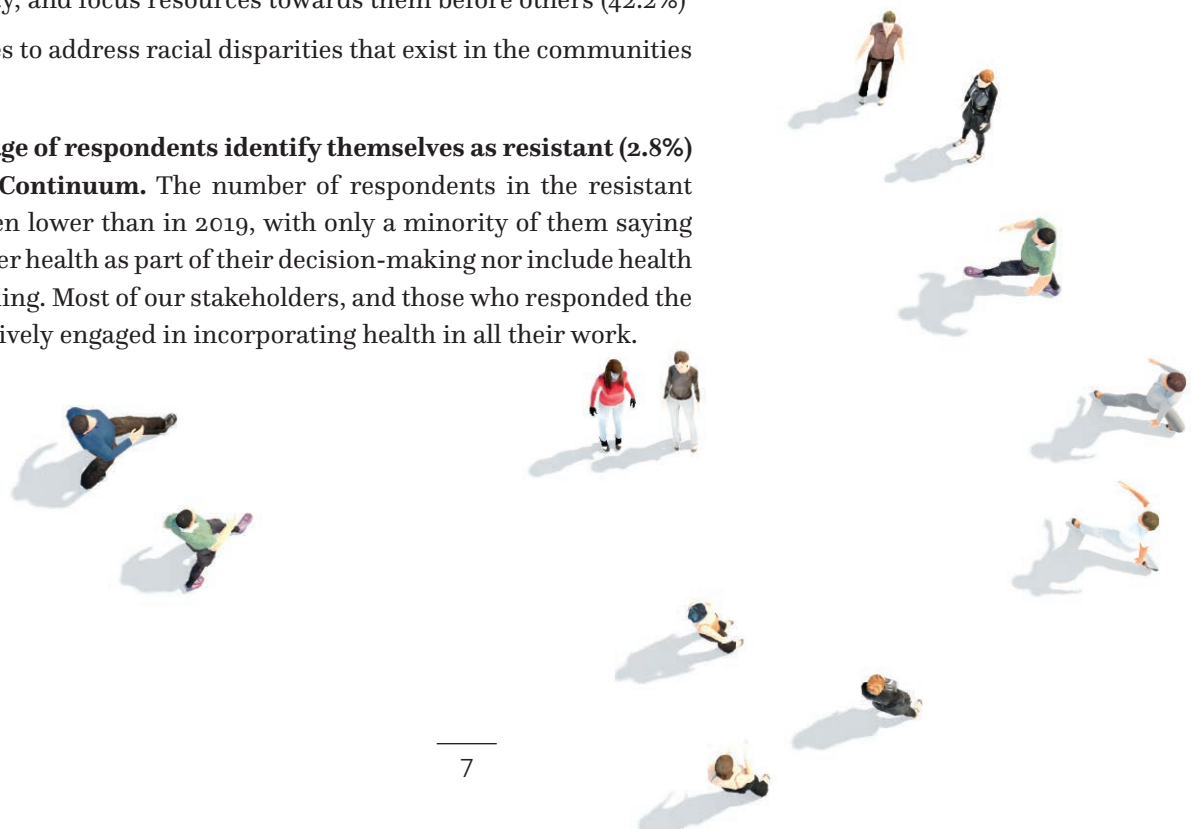
- Attending meetings, events, or conferences to network with sectors/industries beyond their own (85.2%)
- Investing staff time in projects that impact more than one industry/sector and/or sectors beyond their own (66.7%)
- Informing others about the importance of adopting a broader view of health (60.2%)
- Meeting with decision and policymakers to influence laws, rules and regulations that affect community health and well-being (56.8%)

**Some have already been able to integrate health in their day-to-day operations, but many are still looking for additional support on how to do this.** About 15.9% of the interviewed stakeholders identify themselves as advocates and have adapted practices to integrate health in their strategies and staffing model. About 40% of respondents say that they have a staffing model that includes at least one position focused on changing policies, systems, and/or environments to improve community health and wellbeing. However, those in the curious (6.3%) and aware (21.6%) categories are interested in learning more on how to operationalize health in their activities. Specifically, respondents say they would welcome additional support in:

- Developing concrete strategies focused on changing policies, systems, and/or environments to improve community health and well-being (43.8%)
- Using disaggregated data to identify communities experiencing the largest gaps in opportunity, and focus resources towards them before others (42.2%)
- Investing resources to address racial disparities that exist in the communities they serve (39.5%)

**Only a small percentage of respondents identify themselves as resistant (2.8%) in the Collaboration Continuum.** The number of respondents in the resistant category has fallen even lower than in 2019, with only a minority of them saying that they do not consider health as part of their decision-making nor include health in their strategic planning. Most of our stakeholders, and those who responded the survey, are already actively engaged in incorporating health in all their work.

MOST RESPONDENTS SEEM TO EMBRACE A BROADER VIEW OF HEALTH, ONE THAT GOES BEYOND FOCUSING ON INDIVIDUAL BEHAVIOR AND HEALTHCARE.



## II. What are some obstacles keeping Vitalyst from achieving its mission?

Vitalyst's mission is to *connect, support, and inform efforts to improve the health of individuals and communities in Arizona*. During Vitalyst's two community meetings, partners shared what they think are the biggest challenges for the foundation to achieve its mission and what staff should keep in mind in order to be successful. Here is what they said:

### COVID-19

COVID-19 continues to affect everyone's day-to-day lives. Partners reminded Vitalyst's staff that organizations are short-staffed, financially strained, and, as a result, employees are overworked. To achieve its mission, Vitalyst must keep in mind these challenges and continue to show flexibility in funding requirements and grant reporting. Partners also highlighted the importance of long-term financial support for organizational planning and stability. Besides the myriad of challenges that COVID-19 created for organizations, the pandemic has also highlighted the importance of wellness and health. Now, more than ever, people are aware that health is determined by much more than a doctor's visit.

### Lack of Collaboration

Partners listed a lack of collaboration across organizations and agencies as one of the challenges that might make achieving Vitalyst's mission difficult. Those who are working on the same issues might be duplicating efforts and miss achieving their goals because they are unaware of what other groups are doing in the same field. Moreover, some organizations might be aware of the similarities of their work, but still decide to work separately because of conflicting priorities. Partners encouraged Vitalyst to continue collaborating with others and promoting collaboration across sectors, even if it's difficult.

### Administrative Challenges

Vitalyst has a broad approach to improving health, but the needs in the state exceed the existing infrastructure and funds available. For a medium-size foundation, it might be difficult to tackle the extensive needs that exist statewide. It's important for Vitalyst to prioritize its work by using an equity lens and focusing on the most pressing needs.

### Community Engagement

In order to create long-lasting change, Vitalyst must first create meaningful engagement with the communities with whom it works. Community partners want Vitalyst to continue to be aware of some of the racist and long-standing power dynamics that have existed between philanthropy and community-based organizations. Partners also highlighted the need to differentiate priorities between urban and rural areas. They want Vitalyst to approach its work by centering community voice and making sure it is heard in everything it does. Healing must be a focus by using trauma-informed practices.

### Political Environment

Bringing together different actors across the political spectrum to agree on policy change is not an easy task. The current political structures, fearing a change in the status quo, and losing public civility are real difficulties when dealing with policy change, and these factors could make it difficult for Vitalyst to accomplish its goals. In order to be successful, partners suggested that Vitalyst create effective and compelling messaging for all sides of the political spectrum and educate newly-appointed lawmakers on key issues affecting communities. Partners want Vitalyst to continue doing this work, however difficult it might be, and never lose sight of the changes that are needed to improve communities across Arizona. As one community partner said: "Vitalyst is a changemaker institution [...] don't shy away from the edge."

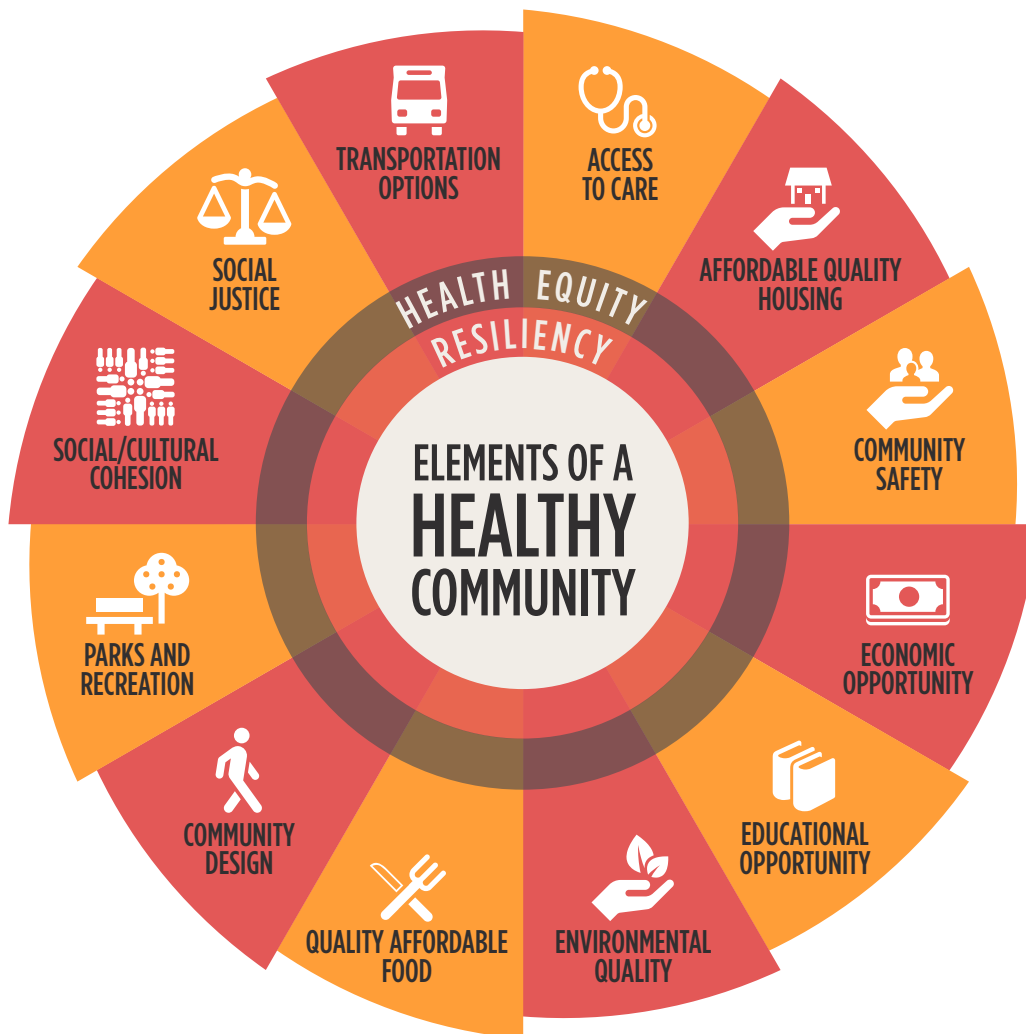


### III. What are some concrete ways in which Vitalyst can meet its goals and better support community-based organizations?

During the community meetings participants shared specific activities that Vitalyst could implement to meet its three new strategic goals: Collaborative Networks, Strong Community Partners, and Informed Decision-Makers. Vitalyst also asked respondents what kind of support, if any, their organizations would like to receive. Responses can be summarized into several categories:

- Foster Collaboration
- Maximizing Financial Support
- Leveraging Data
- Centering Inclusion and Equity
- Pushing for Policy Change
- Increasing Capacity Building

FIGURE 4 Elements of a Healthy Community



## Foster Collaboration

*“We all benefit when we work together”*

*—Participant, Community Partner Meeting*

Partners want Vitalyst’s support in connecting them to other organizations so they can learn from each other, amplify their impact, and grow together. Collaboration was such an important element for some, that one respondent suggested making it a pre-requisite for funding. Another also suggested that Vitalyst “strategically support overhead costs for small, related nonprofits if they agree to share space to incentivize collaboration and cross-pollination.” Organizations want collaboration, because it reduces the duplication of work by coordinating efforts among several parties working on the same issue.

Some suggest creating “a tool or common platform to determine and share impact,” or “a map of who is doing what in the community.” This would also help them better serve specific populations, such as rural communities. Another way of enhancing collaboration would be for Vitalyst to create the space for collaboration to happen. Examples of this would be bringing together experts from different fields who are working on the same issue, with one suggesting Vitalyst “host an Arizona Town Hall with nonprofit organizations on one or several topics.” Other respondents also suggested that Vitalyst host convenings on the different spokes of the Wheel (Figure 4), to learn about collaborative efforts in certain fields. Community partners do not simply want to increase collaboration between each other, but they suggest that Vitalyst collaborate more with other parties such as foundations, faith-based organizations, and members of the business community.

## Maximizing Financial Support

*“Multi-year commitment of unrestricted operational funding would be incredibly helpful. Continued funding support for strategic planning, board/staff retreats and visioning, internal policy development would be a huge help, as we remain a relatively small organization with limited capacity and thus prioritize putting our energy and resources into our [outward] work in/with community.”*

*—Respondent, Collaboration Continuum Survey*

Financial support was one of the most requested forms of assistance requested by partners in the Collaboration Continuum Survey. Many nonprofit organizations depend heavily on philanthropy as a source of revenue and are looking for ways to diversify income sources for long-term stability. There was a unanimous request for multi-year, unrestricted general support funds. Organizations, particularly newer, smaller ones, need economic security for long-term strategic planning, operational programming, and staffing. They want easily available grants with fewer reporting requirements, giving them more time to focus on the community they serve and less on the administrative aspects of managing an organization.

## Leveraging Data

*“Thank you for your support in state data collection to determine inequities in accessing public benefits. We would like to continue this work past data analysis to create more concrete strategies.”*

*—Respondent, Collaboration Continuum Survey*



Community stakeholders expressed interest in increasing their knowledge of data analysis and in using it for their strategic planning. More specifically, there is a growing interest in using data to address health inequities. Organizations want help understanding state and local demographics and assessing where racial disparities are, so that they can prioritize underserved communities and align their goals with state demographics.

They are also interested in learning how to use data to conduct evaluations and communicating the impact of their work. They want to know how to use data for internal decision making and to understand how to increase their access to a qualified workforce. They are also encouraging Vitalyst to have “comfort in looking at non-traditional metrics” and tracking community impact on its website, so that everyone is aware of how the work is evolving and invite partners to assist where there are gaps.

## Inclusion and Equity

*“There is an immense need to focus on building the capacity within Black organizations to achieve sustainable change that must remain to overcome centuries of institutional racism.”*

—Respondent, Collaboration Continuum Survey

Partners highlighted the need to center equity and antiracism in Vitalyst’s work and agreed that funders must have an active role in addressing the intergenerational causes of racism. There is a call for larger funding commitments and reduced restrictions for Black, Indigenous and People of Color (BIPOC)-led organizations. Partners want Vitalyst to have an active role in addressing racism, with one respondent urging staff to advocate for it in contracts and procurement. They also pointed out the importance of keeping the community informed and making sure that community partners and stakeholders are engaged at the onset of the work. They encouraged Vitalyst to tap into lived experience and organize more community focus groups. More importantly, they want Vitalyst to celebrate and share the success of community members and organizations.

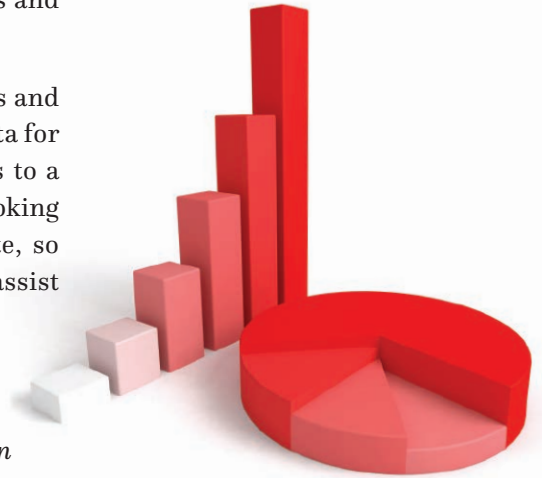
Stakeholders want Vitalyst to use trauma-informed practices and acknowledge the pain that is experienced daily by many of the nonprofits and partner agencies that are doing the work on the ground. In one community meeting, one participant suggested for Vitalyst to “create space to convene leaders and organizations interested in healing processes like truth and reconciliation.”

## Pushing for Policy Change

*“Bridge the gap between the power that exists in communities and the power being played out in politics.”*

—Participant, Community Partner Meeting

Organizations want support in bridging the gap that often exists between communities and decision-makers. They are interested in building better relations with



ORGANIZATIONS WANT HELP UNDERSTANDING STATE AND LOCAL DEMOGRAPHICS AND ASSESSING WHERE RACIAL DISPARITIES ARE, SO THAT THEY CAN PRIORITIZE UNDERSERVED COMMUNITIES AND ALIGN THEIR GOALS WITH STATE DEMOGRAPHICS.

their city and county officials and learning more about how to effectively communicate their needs. Some want to learn how to influence decision-makers so that they can see their community's needs reflected in new policies.

Some community partners suggested that Vitalyst should play an active role in this by engaging more in advocacy and lobbying. Another way would be to create trainings for community-based organizations on how to effectively advocate and achieve policy change. One participant suggested

training for emerging organizational leaders on advocacy, which would then conclude in a meeting with their elected officials where they can discuss their desired policy changes. Another suggestion was for Vitalyst to “rate elected leaders on how they support the healthy community’s framework.”



## Increasing Capacity Building

*“Vitalyst always has excellent training that allows projects to see beyond their own borders and creates new idea pathways on how to expand influence to new sectors. More of this would be amazing!”*

*—Respondent, Collaboration Continuum Survey*

Organizations want to learn more about the specific skills that are needed to run their day-to-day operations. Many organizations would like to have additional support in learning grant writing and strategies to request federal funding. Others have also expressed interest in learning more on how to build a strategic plan, communicating the impact of their work, and building internal policies for their organizations. Moreover, because of the vacancies created by the recent ‘Great Resignation,’ organizational leaders want to know ways in which they can recruit and retain staff. One respondent encourages Vitalyst to continue organizing workshops, expand its reach and do “strategic outreach to individual grantees to assess needs” to familiarize more organizations with its capacity building services.

## Looking Ahead

As Vitalyst begins to put its new strategic refresh into action, it will continue to measure its impact and make sure community input is reflected in its day-to-day work. Vitalyst will keep providing capacity building tools and enhancing collaboration among partners to ensure that they are well-equipped to create healthy communities for all. It will prioritize equity and inclusion by centering community voice and seeking feedback from its partners to ensure that its programmatic work continues to address community needs.

**Vitalyst’s virtual doors are always open.** If you have any questions or comments on this report, please feel free to contact us at [info@vitalysthealth.org](mailto:info@vitalysthealth.org). You can find an electronic version of this report which includes the following appendices on our website at: <http://vitalysthealth.org/partnership-in-action-march-2022/>

Appendix I: Strategic Roadmap Goals and Measures FY 2020-2021

Appendix II: 2021 Collaboration Continuum Survey Questions and Responses

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**Acknowledgement:** A big thanks to all the community partners who participated to the community meetings and responded our survey. This report would have not been possible without your valuable input.

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# Appendix I: Strategic Roadmap Goals and Measures FY 2020–2021

In response to the unprecedented impacts of COVID-19, the Board authorized an additional \$1 million drawdown of the Vitalyst endowment for FY 2020-2021. The allocations were modified through the year, and the final approved amounts were:

- Public Policy Levers – \$265,000 (\$250,000 expended)
- COVID-19 Health Equity Grants – \$310,000 (\$325,000 expended)
- Technical Assistance and Bridge Support – \$240,000
- Loan Administration and Losses – \$80,000 (\$55,000 expended)
- Arizona Together for Impact/Nonprofit Mergers – \$35,000 (\$14,875 expended)
- Cover Arizona Enrollment Support and Marketing – \$50,000
- Developmental Learning Reflection of CV19 Investments and Activities – \$20,000
  - \$45,125 remaining – one \$30,000 request remaining (\$15,125 left)

GOAL	ORIGINAL 2021 GOALS	COMPLETED
 <p><b>ACCESS TO CARE AND COVERAGE</b></p>	<input type="checkbox"/> Increase the insured rate and identify healthcare workforce needs	<ul style="list-style-type: none"> <li>• 18,000 people enrolled in health insurance with Vitalyst’s assistance.</li> <li>• More than 200 assisters trained to help with insurance enrollment around the state.</li> <li>• More than 400 community partnerships built to expand health insurance outreach.</li> <li>• A digital media campaign in high-need zip codes resulted in over 12 million impressions.</li> </ul>
	<input type="checkbox"/> Support partnerships to connect healthcare and social services	<ul style="list-style-type: none"> <li>• Vitalyst advised and supported Arizona’s Medicaid agency (AHCCCS) to include new provisions in their five-year plan that will pay healthcare providers to address social determinants of health (SDOH).</li> <li>• With input from Vitalyst and community partners, Health Current, AHCCCS and 211 Arizona selected NowPow as the statewide SDOH referral platform to connect healthcare and social services.</li> </ul>
	<input type="checkbox"/> Identify and connect First Responder partners statewide	<ul style="list-style-type: none"> <li>• We leveraged the use of Mobile Integrated Health (MIH) to connect first responders. Nine of 15 counties have approved Emergency Triage, Treat &amp; Transport (ET3) protocols in place. Agencies continue to evolve the Arizona MIH work beyond Treat &amp; Refer.</li> <li>• From 2019 to 2021 the number of First Responder partners identified and connected increased from 6 to 21.</li> </ul>

**OUTCOMES:** Coverage data by zip code will be available in late 2022, but early indicators suggest stability due to extended enrollment periods and additional enrollment support. AHCCCS submitted its 1115 Waiver proposal, which included SDOH components. Arizona launched the Healthcare Workforce Repository. Federal agencies will eventually have ET3 data on impacts.

**GOAL**



**HEALTHY  
COMMUNITY  
DESIGN**

**ORIGINAL 2021 GOALS**

Identify and strengthen stakeholder relationships to influence policies focusing on food, transportation, housing and community planning

Support the public health sector’s built environment focus

Incubate community-based, collaborative cohorts

**COMPLETED**

- Together with 18 funders we raised \$480,000 and launched the [AZEviictionhelp.org](http://AZEviictionhelp.org) website to assist Arizonans with eviction resources. There have been more than 71,000 page views and 54,000 unique visitors since January.
- Regional Collaborative on Homelessness – The collaborative (which includes Vitalyst) meets weekly and has produced a comprehensive strategy document which will serve as a roadmap for all cities in Maricopa County to work together to reduce duplication and maximize resources in finding solutions to homelessness.
- Seven Medicaid organizations are participating in the Home Matters for Arizona Fund. About \$30M in grants and loans has been raised and almost \$2M has been distributed for affordable housing grants. Vitalyst was instrumental in its creation.
- \$225,000 disbursed in COVID-19 supplemental funding to organizations that contributed to improving food systems.
- A Schools and Housing report was produced and Vitalyst received a \$100,000 grant from the Halle Foundation to build a coalition of housing providers and school districts interested in workforce housing on their campuses.
- One of the COVID-19 Policy, Systems and Environmental Change grants was to the Corporation for Supportive Housing (CSH) to implement a statewide Institute that would accelerate training for providers who want to build affordable housing. Vitalyst contributed \$50K and eight other funders contributed \$250,000 more to expand the project and create a modular series of training on best practices in supportive housing.


- Incorporated Social Determinants of Health (SDOH) into multiple elements of the Arizona Health Improvement Program and worked with the Maricopa County Department of Health to fully incorporate SDOH into its Health Improvement Plan. Other counties, cities and organizations have incorporated SDOH concepts into their planning work as well.
- The Vitalyst Data Dashboard has allowed organizations to use disaggregated data on the SDOH. The Vitalyst Data Dashboard had a total of 883 unique visitors and 3,872 page views.

- Vitalyst implemented year three of Live Well Arizona incubator and five projects around the state were selected.

**OUTCOMES:** More than \$830,000 has been raised from other funders to promote affordable housing work and eviction support. Thousands of people have received assistance. Affordable housing units are being built, and work in this area is being accelerated. The interrelationship of SDOH and health is being integrated in work throughout the state.

GOAL	ORIGINAL 2021 GOALS	COMPLETED
 <p><b>COMMUNITY CAPACITY BUILDING</b></p>	<input type="checkbox"/> Strengthen TAP systems and strategies	<ul style="list-style-type: none"> <li>• Capacity Building:             <ul style="list-style-type: none"> <li>• 32 Capacity Building partners</li> <li>• Average contract amount increased from \$8,000 to \$10,000</li> <li>• Four months average contract length</li> <li>• Nine TAP talks, 376 attendees via Zoom</li> <li>• 76 scholarships for underserved and BIPOC groups</li> </ul> </li> <li>• Fiscal sponsorship:             <ul style="list-style-type: none"> <li>• 61 active projects</li> <li>• \$6.9M in total revenue raised in FY 2019-2020</li> </ul> </li> </ul>

**OUTCOMES:** The pandemic hurt the nonprofit sector in many ways, with an [Alliance of Arizona Nonprofits survey](#) noting that nonprofits lost up to half of their revenue, a staggering total loss of more than \$91M. Vitalyst boosted technical assistance support with additional COVID-19 funding to do its part to help meet the need. We distributed nearly \$53,000 more in FY 2021 than FY 2020 and increased our average technical assistance contract amount from \$8,000 to \$10,000.

GOAL	ORIGINAL 2021 GOALS	COMPLETED
 <p><b>COLLABORATIONS AND GRANTMAKING</b></p>	<input type="checkbox"/> Implement tiered grants	<ul style="list-style-type: none"> <li>• \$780,000 in responsive grants to tackle opportunities exposed by COVID-19</li> <li>• Three Systems Change Grants (\$175,000 over three years)</li> <li>• Nine Spark Grants (\$10,000-\$20,000 each)</li> <li>• 81 attended four remote Grant Learning Sessions with 20 additional views</li> </ul>
	<input type="checkbox"/> Streamline processes and improve data collection	<ul style="list-style-type: none"> <li>• Two platforms were leveraged to maximize data collection: i) WizeHive for internal grant data analysis and management; and ii) My SideWalk for external data sharing and visualization.</li> </ul>
	<input type="checkbox"/> Engage in funder collaboratives	<ul style="list-style-type: none"> <li>• We supported and engaged in 12 different funder collaboratives, including the Early Childhood Funder’s Collaborative and the Rental Assistance Collaborative.</li> </ul>

**OUTCOMES:** Tiered grants were implemented, data collection was dramatically improved and we expanded on funder collaboratives. Vitalyst distributed \$2,145,411 in non-COVID-19 in grants in FY 2021.

GOAL	ORIGINAL 2021 GOALS	COMPLETED
 <b>CIVIC HEALTH</b>	<input type="checkbox"/> Strengthen systems that increase community organizing and advocacy <input type="checkbox"/> Promote authentic community participation and research <input type="checkbox"/> Support 2020 Census	<ul style="list-style-type: none"> <li>• Produced the Arizona Town Hall Creating Vibrant Communities Background Report and helped sponsor more than 40 community town halls around the state so far.</li> <li>• Vitalyst 2020 investment in Community Based Participatory Research (CPBR) provided a foundation for community groups to reimagine safety and advocate for investments in alternative practices, infrastructure, and resources to create true safety, healing, and health in our communities.</li> <li>• Deployed nearly \$100,000 in grants to partners to engage hard-to-reach people for the Census. (Helped to generate \$1M from other funders).</li> </ul>
<p><b>OUTCOMES:</b> Community town halls have engaged an approximate count of 1,276 people. More than 10,000 surveys were conducted in the CPBR work in Maryvale. Census data by zip code is still not available, but initial Census data shows self-response rates in Arizona were 2.8% higher in 2020 than 2010 and specific Census tracts invested in had 2020 rates at or above 2010.</p>		

## RESOURCES

Maricopa Association of Governments. [Regional Homelessness Strategies](#).

[AZ Eviction](#) help.

[Vitalyst Dashboard](#).

Alliance of Arizona Nonprofits. [A Year Later, COVID-19’s Impact on Arizona’s Nonprofit Sector](#). March 12, 2021.

ORS Impact & The Democracy Funders Collaborative’s Census Subgroup. [2020 Census, State-by-State Reports—Arizona. August 2021](#).



# Appendix II: 2021 Collaboration Continuum Survey Questions and Responses

## Response Statistics

	Count	Percent
Complete	183	77.5
Partial	53	22.5
Disqualified	0	0
Totals	236	100

## Question 1

Does your organization serve across the state of Arizona? If this program will provide services across the state of Arizona, select 'Yes' and you have completed this section. If this program will provide services only to specific regions, counties, or cities, select 'No' and go to the next question.

Value	Percent	Count
Yes	60.4	134
No	39.6	88
Totals	100	222

## Question 3

If applicable, type specific city(ies) your organization serves within the county.

## Question 4

Please select your position level within your organization.

Value	Percent	Count
Executive/ Senior (e.g. Executive Director, C-suite, Board Member)	67.0	150
Director (e.g. Vice President, Assistant Chief/ Director)	21.0	47
Mid-Level (e.g. Manager)	10.7	24
Entry Level (e.g. Associate)	1.3	3
Totals	100	224

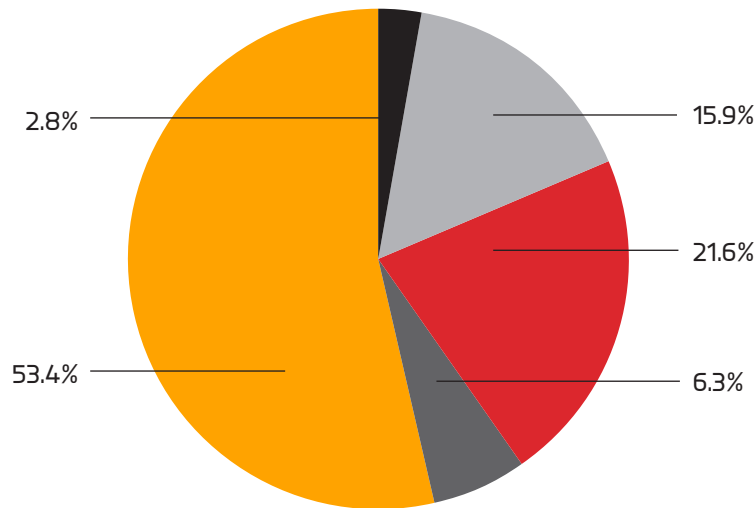
## Question 2

Select all counties where your organization provides services.

Value	Percent	Count
Apache	4.7	4
Cochise	4.7	4
Coconino	9.4	8
Gila	5.9	5
Graham	2.4	2
Greenlee	4.7	4
La Paz	4.7	4
Maricopa	71.8	61
Mohave	5.9	5
Navajo	9.4	8
Pima	17.6	15
Pinal	17.6	15
Santa Cruz	5.9	5
Yavapai	15.3	13
Yuma	3.5	3

## Question 5

Please read the items below. Select the one that most applies to your organization.



Our Organization...	Percent	Count
■ Does not consider health as part of our decision-making; Does not factor health into our strategic planning; Does not consider health as part of our work.	2.8	5
■ Has developed a limited set of strategies focused on improving the health and well-being of the communities we serve; Includes a staffing model with least one position focused (in-full or in-part) on developing partnerships with industries/sectors that are outside of our traditional scope of work; Invests some finances in projects that impact industries/sectors beyond our own.	15.9	28
■ Understands why health is an important factor, but we have yet to apply it to strategy and operations; Sees how we can work with other sectors to improve health and well-being; Reaches out to other sectors to discuss possible collaborations; We are still working on how to apply health to strategy and operations.	21.6	38
■ Doesn't have a history in connecting to health-related work, but is interested in learning more about the health-related implications of our work; Attends meetings, events or conferences to network with sectors/industries outside of our own.	6.3	11
■ Is a leader in efforts to inform and influence others about the importance of adopting a broader view of health; Focuses a significant portion of its resources toward improving community health and well-being; Meets with key stakeholders to explore creative solutions to improve health; Creates forums to bring non-traditional partners together.	53.4	94
Totals	100	176

## Questions 6-19

To help inform our work over the next few years, please select how best to describe your organization for each statement below. Please use this framing for the remaining questions.

Our Organization...	Would Welcome Additional Support Count/Percent	We Do This Count/Percent	Does Not Apply To Us Count/Percent	Responses Count
Develops concrete strategies focused on changing policies, systems, and/or environments (e.g., laws, rules, regulations) to improve community health and well being.	78/43.8%	75/42.1%	25/14.0%	178
Has a staffing model that includes at least one position focused on changing policies, systems, and/or environments to improve community health and well being.	65/36.7%	71/40.1%	41/23.2%	177
Meets with decision and/or policy-makers to inform/influence laws, rules, and regulations that affect community health and well being.	52/29.5%	100/56.8%	24/13.6%	176
Uses disaggregated data to identify communities experiencing the largest gaps in opportunity (i.e., those with the greatest amount of need), and focuses our resources toward those communities before others.	73/42.2%	79/45.7%	21/12.1%	173
Has policies and/or procedures to ensure that our team is representative of the socio-demographic makeup of Arizona's population.	58/33.5%	94/54.3%	21/12.1%	173
Includes "impacts to health" in our decision-making criteria.	44/25.0%	108/61.4%	24/13.6%	176
Creates forums (in-person and/or virtual) to obtain insights from the individuals, families, and/or communities most affected by our work.	58/33.1%	98/56.0%	19/10.9%	175
Attends meetings (in person and/or virtual), events or conferences to network with sectors/industries outside of our own.	22/12.5%	150/85.2%	4/2.3%	176
Invests finances in projects that impact industries/sectors beyond our own.	40/23.3%	59/34.3%	73/42.4%	172
Invests staff time in projects that impact more than one industry/sector, and/or sectors beyond our own.	27/15.5%	116/66.7%	31/17.8%	174
Informs others about the importance of adopting a broader view of health (e.g., health is determined by more than healthcare and individual behavior).	54/31.6%	103/60.2%	14/8.2%	171
Has documented concrete strategies focused on improving the health and well-being of the communities we serve.	63/35.8%	97/55.1%	16/9.1%	176
Has strong relationships with communities most affected by our work that enable them to make decisions about our work.	45/26.3%	115/67.3%	11/6.4%	171
Invests resources to address racial disparities that exist in the communities that we serve.	70/39.5%	86/48.6%	21/11.9%	177

## Question 20

What additional type of support/s would your organization like to see?