



2023 Power-building Partnerships for Health (PPH)

Call for Applications

Human Impact Partners (HIP) is seeking applications for the 2023 cohort of Power-building Partnerships for Health (PPH)! PPH is a 9-month program that cultivates powerful collaborations between **local health departments** and [community power-building organizations](#) (or CPBOs, also known as grassroots organizing groups, movement-building organizations, community organizing or base-building groups) to advance health equity. Applications for the 2023 cohort will be accepted from existing partnerships only. Four to five partnerships, or “sites,” will be selected to participate in the cohort, which will be conducted from March through December 2023. Deadline for applications is Tuesday, January 7th, 2023.

Table of Contents

[Call for Applications](#)

[Why Participate?](#)

[PPH Goals](#)

[Who Should Apply?](#)

[Requirements](#)

[Timeline](#)

[How to Apply](#)

[Frequently Asked Questions](#)

[FAQs about power-building work and topic issues](#)

[FAQs about eligibility and requirements](#)

[FAQs about application and selection process](#)

Why Participate?

Social movements and public health belong together. PPH provides resources for strategic action.

We are living through turbulent times with overlapping crises. The massive and inequitable loss of life from the ongoing COVID-19 pandemic put health departments in the spotlight, highlighting the importance of health equity while at the same time exposing the structural weaknesses of

public health systems. Across the country, public health laws and leaders are under attack¹, and many in the public health workforce are burnt out, disempowered, and experiencing PTSD symptoms².

The [early history of public health](#) in the US is a [story of social movements converging to build power and create transformative changes](#) that drastically improved living conditions and extended life expectancy. While modern health departments can be strategic allies for social movements, most are not grounded in accountable relationships with communities experiencing inequities. There is also justified distrust of government agencies among movement builders and communities, due to the long histories of racist laws and ongoing unjust policies that are a root cause of health inequities.

The PPH model is designed to address these challenges and deepen the relationships and trust needed to work together for structural change and health equity. [Previous cohorts of PPH have been successful](#) in building shared understanding, community power and influence, and catalyzing deep and trusting relationships between community organizing groups and local health departments. With funding from the Kresge Foundation, HIP is building from the successes of the two previous cohorts to offer this new opportunity to participate in PPH.

Sites participating in the Power-building Partnerships for Health 2023 cohort will receive:

- ★ **\$30,000 in flexible funding for community power-building:** funds can be used to support community organizers' time and participation and support power-building activities
- ★ **Peer learning:** the cohort will have eight (8) virtual sessions and one or two in-person gatherings for shared learning, building relationships, and leadership development
- ★ **Site-specific coaching and technical assistance:** monthly site meetings and up to 20 hours of direct TA support to advance local health equity and power-building work
- ★ **Dedicated time for relationship-building:** we “move at the speed of trust” and emphasize building trust within organizational teams and partnerships
- ★ **Support with navigating power dynamics:** PPH provides a confidential and supportive community to help navigate the political and complex power dynamics inherent in this work

¹ American Journal of Public Health article “[Unanticipated Pandemic Outcome: The Assault on Public Health](#)” about the threats, intimidation, harassment and political scapegoating of public health leaders and staff by extremist far-right organizations

² [Infographic on Rising Stress and Burnout in Public Health](#), based on the results of a national public health workforce survey (PH WINS) - 56% of public health employees report PTSD symptoms, 41% of public health leaders report harassment, threats and bullying

PPH Goals

The goals of PPH are to:

1. Deepen relationships, trust and support structures for strong collaborations between CPBOs and health departments
2. Develop a shared understanding of health equity, community power-building and inside/outside strategies
3. Support health departments to leverage their power and take action to contribute to community power-building priorities
4. Support CPBOs to use their power to advance stronger public health policies and practices
5. Enhance ability to advance inside/outside strategies for health equity and racial justice

Who Should Apply?

Seeking: health departments and community organizers working together on a root cause issue

HIP welcomes applications from teams of community organizers and health department staff who are dedicated to [building community power](#) for health equity and racial justice. Participants should be invested in building trusting, impactful and accountable relationships.

The PPH cohort experience is most impactful for partnerships that have an existing relationship and aren't starting from the first step of learning about each other. There should be some familiarity with each others' work and some history of working together: for example, working on a report or research project, participating in a steering committee, task force or community health assessment together, or conducting community engagement or policy work together. It is okay if the partnership is limited in scope or the relationship is primarily held by a couple individuals. Participation in PPH will help build the depth and strength of the relationship.

Partnerships should identify which "upstream" topics or root cause issues they are working on or want to take action around. This could include one or more of HIP's policy action areas:

- **Climate Justice** (including environmental justice, land use and transportation work)
- **Community Safety** (abolition of carceral systems of policing, incarceration, surveillance and immigrant detention; to learn more about our community safety framework, see our [Health Instead of Punishment](#) program page)
- **Economic Security** (living wage, paid family leave, working conditions/ worker rights and ending economic inequality)
- **Housing Justice** (housing as a human right, tenant power, preventing displacement, community-owned land and housing)

Applications do not need to be limited to these topics, but must be focused on upstream policy, systems and environmental changes to address root cause issues, not only on downstream individual behavior change or service delivery programs.

Requirements

- Partnership with a local health department and a [community power-building organization](#)
- Commitment of 6-8 people per site (3-4 people per organization) to participate in monthly cohort sessions, site meetings, and activities to support community power-building (estimated total of 6 hours per month for 9 months)
- Local health department in-kind contribution of staff time to participate in PPH activities
- Willingness as individuals to bring your identities into the room, be challenged, be vulnerable, and show up as full human beings beyond professional roles and responsibilities

Timeline

- ★ Applications Open: mid-November 2022
- ★ Webinar Q&A for interested applicants: December 1, 2022 at 10am Pacific / 1pm Eastern - [register here](#)
- ★ Application Deadline: January 7th, 2023
- ★ Group interviews: January 23rd - February 17th, 2023
- ★ Announce selections: early March 2023
- ★ Virtual launch event: March 21, 2023
- ★ 2023 PPH Cohort Sessions: March - December 2023
- ★ In-person PPH cohort gathering: May or June 2023 (all travel and meeting expenses covered by HIP)
- ★ Final evaluation focus groups: January 2024
- ★ Ongoing communication among PPH cohorts: January 2024 and beyond

How to Apply

The application deadline is **Tuesday January 7th, 2023** at 11:59pm Pacific Time.

Applications are meant to be brief and should be jointly submitted as a partnership between a health department and a community power-building organization.

This is an opportunity to tell us about your partnership, what you want to accomplish together, and why you are interested in PPH.

To apply, see instructions on our [application form](#).

Frequently Asked Questions

FAQs about power-building work and topic issues

- How do you define Community Power Building or Community Power-Building Organizations?
 - ◆ We use the definitions from the [Lead Local Glossary](#):
 - ◆ “**Community power building** is the set of strategies used by communities most impacted by structural inequity to develop, sustain and grow an organized base of people who act together through democratic structures to set agendas, shift public discourse, influence who makes decisions and cultivate ongoing relationships of mutual accountability with decision-makers that change systems and advance health equity. Community power building is particularly critical for underserved, underrepresented, and historically marginalized communities who have been excluded from decision-making on the policies and practices that impact their health and the health of their communities.”
 - ◆ **Community Power-Building Organizations** are “Organizations that may be identified by geography (local, state, regional, national), demography (e.g. youth, workers, multi-racial) or issue(s) (e.g. workers rights, environmental justice, multi-issue) who conduct a range of activities including base-building. Other terms sometimes used to describe CBPOs include but are not limited to: grassroots organizing groups, social movement groups, movement-building organizations, community-based organizations, community organizing groups, base building groups.”
- Does the issue/topic the partnership is working on have to be one of HIP’s areas of work (Climate Justice, Community Safety, Economic Security, or Housing Justice)?
 - ◆ We are open to a broad range of topics in applications and look forward to hearing more about what you are working on! It is not a requirement for partnerships applying to PPH to be working on a topic or issue that is one of HIP’s focus areas, as long as the partnership is focused on addressing the root causes of health inequities and the approach is oriented to structural change, rather than only downstream factors or delivery of individual-level services. When there is alignment with HIP’s areas of work, we can provide in-depth direct support on the content of the work. When HIP doesn’t have expertise on your topic, we’ll bring in partner organizations and other support as needed.
- We are in a conservative city/county/state where there are limitations on what words governmental agencies are allowed to use. For example, CRT (Critical Race Theory) was banned and government employees can’t directly talk about racism. Is PPH only for progressive areas or blue states?

- ◆ Community power-building work is happening everywhere, in red, blue, and purple states. HIP is intentionally seeking to create a 2023 PPH cohort with a range of political and geographic contexts. The local political terrain will determine what kinds of strategies or terminology are effective in different places. When there are more limitations on what governmental public health agencies can say or do, inside/outside strategies and strong partnerships with CPBOs are even more important.

FAQs about eligibility and requirements

- We have a partnership but there are issues and we're not perfect. Should we still apply?
 - ◆ Absolutely! No one is perfect, and perfection is a colonial construct that we do not want to use. Working through issues and conflicts is an important part of the process and is a foundational skill for building successful inside/outside strategies. PPH will be a productive space to work together on the issues alongside other partnerships who are working through their issues.
- We are a health department that doesn't currently have an existing partnership with a community power-building organization, but there's an organization we would like to partner with. Can we apply together and use PPH to start our partnership?
 - ◆ For this cohort of PPH, we are requiring that there is some foundation of an existing relationship between the health department and the community power-building organization, so a completely new partnership would not be eligible to apply. HIP may be able to provide technical assistance to help you establish a new partnership that could apply for the 2024 PPH cohort. Contact PPH@humanimpact.org if you have questions or are interested in TA.
- Does the community power-building organization have to be a 501c3 nonprofit?
 - ◆ No. If the community power-building organization is not a 501c3 nonprofit organization, however, it will need to go through a fiscal sponsor to receive the flexible funding for PPH participation and community power-building.
- Do the 3-4 participants from the community power-building organization have to be staff members of the organization?
 - ◆ Nope! PPH participants can be community members who are engaged with the organization's power-building work as members, volunteers, board members, steering committee members, or any other paid or unpaid role within the organization's community power-building or base-building work. Just specify each participant's role and contact information in the application.
- Do the 3-4 participants from the health department have to be staff / employees?
 - ◆ Yes, the health department participants do need to be employed by the health department in order to represent the public sector side of the partnership. Contractors / contract-based employees who have health department .gov

accounts are also able to participate, as long as the overall health department team has sufficient authority to speak on behalf of governmental public health.

- Does the power-building partner have to be an organization? What about a coalition, campaign, or other organized power-building formation?
 - ◆ The PPH model is designed around building deep and powerful partnerships between health departments and CPBOs. Organizers are often part of coalition and campaign work but coalitions and campaigns are more complicated for health departments to directly partner with. Coalitions can have more layers of power dynamics to navigate, more complicated decision-making processes, and varying levels of participation between members. Campaigns are limited in time and can have less history of being rooted in a community, or have limited capacity for long-term power-building work. That said, if there is interest in PPH from a strong existing partnership between a health department and a coalition or long-term campaign rooted in community power-building organization, you are welcome to apply and make a case for how the partnership would fit with PPH in the application. Questions about coalition power dynamics, decision-making processes, and long-term sustainability can be discussed during the group interviews or by emailing PPH@humanimpact.org.
- Is PPH only for local health departments? Can state health departments participate?
 - ◆ Community power-building work is rooted in local base-building and organizing in communities, which is why PPH has focused on working with local health departments that operate more at the community level than state health departments. Regional health departments are also eligible to apply, and in states where there isn't any local health department, a state health department could apply if it does intensive community work and has close partnerships with CPBOs. Any questions about this can be discussed in more detail during the group interviews or by emailing PPH@humanimpact.org.
- Our health department is attached to a larger health system. Are we still eligible to apply?
 - ◆ Yes! Some health departments are part of or attached to health systems that provide medical health care services. As long as the applicant is a governmental public health entity it is eligible to apply. However, medical health care provider entities that aren't part of governmental public health agencies are not eligible to be part of PPH.

FAQs about application and selection process

- Who should be the point of contact for the application?
 - ◆ Since it is a joint application from the partnership, there should be a primary point of contact for both the health department and the community power-building organization. Each point of contact should be able to serve as the primary

follow-up person to help with scheduling the group interview. Being the point of contact does **not** mean that the person is “leading” their organization’s work in the partnership, just that they are quick to respond to emails and can help coordinate among the participants.

- Can I submit multiple applications for different projects with different partners?
 - ◆ It is possible if there are multiple distinct partnerships in an area that would be a good fit with PPH. Because health departments are jurisdictional, there is only one eligible local health department in a given area, but there could be separate applications with a different community power-building organization, and it could be different participating health department staff working in a different department or unit within the health department

- What is the selection criteria for choosing who participates?
 - ◆ We will create a selection committee to review the applications, select partnerships to interview, and make the final selection of 4 or 5 sites to participate in the 2023 cohort of PPH. The selection committee will review if applications meet the [requirements](#) and will seek to establish a cohort with a diversity of geographic locations, political contexts, different size health departments, and topic areas.

- What should we expect for the group interview?
 - ◆ Up to 10 partnerships will be selected as finalists for group interviews. The interviews will be up to 1 hour via Zoom and will be a chance to meet and hear from all 6-8 people in your partnership. Questions and discussion topics will be based on the content of your application materials. Interviews will be scheduled between January 23rd and February 17th 2023. Language interpretation, closed captioning, and other accessibility needs can be provided as needed.

- What happens if we apply but don’t get selected for PPH? Would HIP still be able to work with us, and are there any other opportunities for supporting our power-building work?
 - ◆ Yes! PPH is just one of HIP’s offerings, and we are excited to work with health departments and CPBOs in a range of ways. The Kresge Foundation funding we have for PPH is also enabling HIP to provide 1:1 direct technical assistance to support partnerships between health departments and CPBOs. In addition to this in-kind TA, we are currently developing a set of webinars, trainings, resources and tools on power-building for health equity. HIP also provides capacity building services via contracts with health departments. Additionally, there will be another cohort of PPH in 2024 and potentially more cohorts for PPH in the future depending on funding and capacity. To stay updated on this work, [subscribe to our mailing list](#).