

**Culture of Health  
Sentinel Community Insights:  
Brief Report**

**Grassroots Organization Engagement  
and Influence on Community Power**



## About This Report

The [Sentinel Communities Surveillance project](#) began in 2016 and has been monitoring activities related to how a [Culture of Health](#) has been developing in each of 29 diverse communities around the country. The purpose of the project is to learn more about how each community is working within its own historical context and current landscape to communicate about health and well-being, develop systems that promote health, and address health equity. Information on each Sentinel Community's work is summarized in community [reports](#), as well as cross-community [insights reports](#) on emerging themes, including this brief report on **grassroots organization engagement and influence on community power**.

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*This report includes specific examples from Adams County, Miss.; Allegheny County, Pa.; Butte, Mont.; Harris County, Texas; Louisville, Ky.; Milwaukee, Wis.; New Haven, Conn.; Oxford County, Maine; Tacoma, Wash.; and Toledo, Ohio, and themes across all Sentinel Communities..*

*The information in this report was obtained using several data collection methods, including key informant telephone interviews; an environmental scan of online and published community-specific materials; review of existing population surveillance and monitoring data; and collection of local data or resources provided by community contacts or interview respondents. Interviews were conducted with individuals in the community representing several organization types (for example, grassroots, government, for-profit) working in a variety of sectors (for example, health, business, education, faith-based, and environment). Information collected through environmental scans includes program and organizational information available on internet websites; publicly available documents; and media reports. Population surveillance and monitoring data were compiled from publicly available data sets, including the American Community Survey (ACS); Behavioral Risk Factor Surveillance System (BRFSS); County Health Rankings (CHR); and other similar federal, state, and local data sources.*

## Introduction

Grassroots organizations and community-based organizations frequently use collective action from the local level to effect change at the local, national, and global levels. Social movements are galvanized by these organizations<sup>1</sup> and these organizations are often led by populations that have been underrepresented and historically marginalized. In the United States, grassroots organizations have a rich history in advancing social and economic causes, and this mobilization has been central to responses to COVID-19, police brutality, environmental racism, and voting rights.

Building the capacity of grassroots organizations has long been a point of discussion within civil society, the government, and the philanthropic sector given the role and influence that grassroots organizations can exert. However, more recently, the focus on “base building” within grassroots and even slightly larger, community-based organizations, has gained momentum given interests in leveraging grassroots organizations to address growing social inequities. Base building includes many components, from growing the membership of organizations, rallying the membership, and activating the membership for collective action.<sup>2</sup> There are now many strategies to engage grassroots activism both offline and online. New models of base building are

examining the best ways to build capacity, coordinate across grassroots organizations for maximum community impact, and to determine how grassroots organizations are financially supported to sustain their activities. Further, discussions about grassroots organizations and base building also have included dialogue about how these approaches can shift the locus of community power to effect change. Power, sometimes defined as the ability to gain and maintain access to resources, is key to organizational sustainability and the ability of grassroots organizations to have both voice and agency in community decision-making.<sup>3</sup>

This brief report describes the role of grassroots and other community-based organizations in a sample of the Sentinel Communities; the changing role of these organizations to address community health and health equity; and barriers and facilitators to their engagement and influence locally. The report considers the capacity and power of these examples as it relates to influence and impact in communities, but this report is not intended to be a fuller analysis of the concepts of base building and power, which would require more detailed data. The insights for this report come from environmental scans and stakeholder interviews conducted for the Sentinel Communities Surveillance Project.

## Evolving Grassroots Capacity in the Sentinel Communities

Grassroots organizations have generally played a critical role across Sentinel Communities in providing direct health and social services; capturing community concerns about health, well-being, and health equity; and influencing, or in some cases, leading community strategies to improve health. The level of engagement of grassroots organizations has varied by community history; funding supports available to those organizations both locally and nationally; effective use of technology; and the types of governance to help organizations network and coordinate with each other to pool resources and execute initiatives. In some Sentinel Communities, grassroots capacity has stayed relatively stable over the past five years, while in other communities, the involvement of these organizations has increased or evolved due to concerns, such as racial injustice and COVID-19.

- In **Oxford County**, organizations outside of the health sector, such as Maine Community Foundation,<sup>4</sup> have expanded their emphasis on community-building, which is in turn positively affecting health efforts. The community has deepened its focus toward supporting the most vulnerable, and grassroots organizations have been a key part of pushing an approach that is more inclusive and ensures that the experiences of all community members are heard.
- **Allegheny County** has an ever-expanding network of smaller, nonprofit organizations partnering with one another, as well as larger anchor organizations and local government to leverage resources. For example, organizations such as Catapult Greater Pittsburgh, Uptown Partners of Pittsburgh, Black Women's Policy Agenda, and Brown Mamas have been working to address economic and health inequities, specifically for Black women.<sup>5</sup>
- In **Butte**, the community came together to address COVID-19 from grassroots levels and from the private sector to incentivize people and shift mindsets. A resident started Front Line Appreciation Group (FLAG) Butte, a grassroots effort to help frontline workers by providing meals from small businesses in the area.<sup>6</sup>
- In **New Haven**, particularly after the events of 2020, large institutions drew a line in the sand and redoubled commitments to racial equity, expanding workforce diversity efforts, realigning funding to support organizations led by people of color, and committing to internal equity review processes. Funding commitments included a \$26 million Stepping Forward initiative from the Community Foundation for Greater New Haven to address the twin pandemics of COVID-19 and racial inequity, and many funds went specifically to many grassroots organizations.<sup>7</sup>
- In **Toledo**, the V Project<sup>8</sup> was initiated at the grassroots level by a local businessperson with the impetus of COVID-19; its efforts to get people vaccinated have been commended by stakeholders, who noted some community resistance to vaccination. The project started in fall 2020 with a goal of vaccinating at least 70 percent of residents while also educating and motivating them. The work has grown to include official partnerships with two county health departments, including Lucas County, and is done in collaboration with over 250 community leaders in multiple sectors.

## Grassroots Approaches and Influence on Decisions in the Sentinel Communities

In some Sentinel Communities, grassroots organizations have shifted their focus over the past five years to tackle broader policy concerns, such as equity and systemic racism. These organizations also have been enhancing their roles in influencing community decision-making through more formal connections to governing bodies, such as city councils or service on advisory boards. Some of these shifts have happened because of the local government's interest in increasing the role of community leaders, including grassroots organizations; in other cases, grassroots organizations have exerted more action to shift that power.

- In **Harris County**, Mayor Turner launched the Health Equity Response (H.E.R.) Initiative and Task Force in April 2020 as an intervention for populations experiencing vulnerability. The task force addresses health inequities and access barriers in Houston by accelerating a rapid, data-driven response for residents in 22 priority "super neighborhoods," that have experienced greater challenges during the COVID-19 pandemic.<sup>9</sup> Stakeholders noted improved collaboration between the city of Houston and Harris County, and more thoughtful government processes that have kept partners informed and increased community and youth engagement.



- In **Louisville**, civil rights organizations came together to call for policy and investment changes for racial justice and well-being via the Path Forward initiative.<sup>10</sup> The initiative demands systemic solutions to longstanding racial injustice, such as a Black Community Fund and divestment from abusive policing practices. Power structures have been evolving, resulting in more focus on supporting Black-led organizations—noted as a “sea-change” in racial representation in leadership bodies—and increasing efforts to engage community members in developing policy solutions (e.g., the school system’s new Student Code of Conduct).
- In **Tacoma**, stakeholders across sectors historically sought community engagement in equitable decision-making but have found it challenging to engage a truly representative sample of Tacoma’s diverse population. However, COVID-19 elevated the voice of grassroots and community-based organizations when the community received funding specifically earmarked for underrepresented communities and established these organizations as important voices for decision-makers, including city councilmembers and foundation boards. In the local private sector, WorkForce Central’s Pierce County Community Engagement Task Force<sup>11</sup> intentionally includes people of color in leadership positions, stating that, “rebuilding trust among communities and networks includes a commitment to becoming trusted ourselves by removing the implicit bias imbedded within community engagement.”
- While there are notable shifts in community focus on involving grassroots organizations in decision-making, there are still concerns that equity-centered actions are largely performative, lacking a true shift in power structures or change in leadership within decision-making bodies.
  - In **New Haven**, stakeholders noted that grassroots organizations and neighborhood groups “rose up and took back their narrative, [including] how they want to pursue health,” since 2020. This energy remains on the ground, but some perceive that institutional energy around the issue may be flagging.
  - In **Adams County**, there is a shift in the dialogue around race and disparities and efforts to make these conversations less taboo, but the pace of change is relatively slow. Local political shifts suggest greater interest in shifting power structures, elevating community voice, and unifying the community, but outcomes remain to be seen.

## Impacts of Grassroots Efforts on Community Health

While there are promising moves to augment the voice and role of grassroots organization, linking those shifts to improved community health outcomes can be harder to measure. However, there are some notable impacts that suggest positive change.

- As noted earlier, **Adams County** is trying to shift the narrative to discussions of community engagement and race, though it can be difficult given pervasive narratives that health is an individual responsibility. In an effort to use arts and culture as a means of community building, civic engagement, and economic development, the Louisville-based IDEAS xLAB<sup>12</sup> partnered with local Adams County community-based organizations, community members, and local businesses for the Project HEAL (Health, Equity, Art, Learning) Natchez initiative. The initiative was cited as affecting health and well-being by fostering an increased sense of belonging and ownership of place for Black residents; encouraging individuals to consider more inclusive ways to shape policies and systems; and relationship- and trust-building among individuals, businesses, and nonprofits.
- In **Tampa**, the Hillsborough Organization for Progress and Equality (HOPE), a multi-issue, grassroots organization, secured a \$10 million annual commitment from Hillsborough County leaders for affordable housing. HOPE chose to take up housing as its main issue after listening to residents; conducting background research; meeting with various stakeholders, including Tampa HUD, to understand policy options; and utilizing housing data from the Schimberg Institute. HOPE was able to make progress through the collective action of its members, who consistently turned out in large numbers at Tampa Board of Action Committee meetings and were persistent in pushing for change for six years. This action was not without some setback,<sup>13</sup> illustrating the challenge of maintaining progress. A portion of funds that was slated to be allocated to the State Housing Initiatives Housing Program (SHIP) was instead put toward climate resilience.<sup>14</sup>
- In **Milwaukee**, violence prevention is not just city-led; there are also grassroots efforts to address the issue. For example, the Peace Garden Project MKE was started in 2015 by one woman, Camille Mays, with the goal of promoting healthy neighborhoods by spreading a message of peace and love. The project continues to work with families who have lost loved ones to gun violence and converts temporary memorials on sidewalks into permanent gardens.<sup>15</sup>

## Barriers and Facilitators to Grassroots Organization Engagement

Grassroots organizations are key to community change and positive health and social impact, yet their ability to influence and sustain that influence can be impeded by a variety of barriers. Further, durable capacity to maintain and grow a base; hold power in the community; and consistently have voice and a role in community decisions requires certain facilitating factors.

### BARRIERS

- Demographic changes in the community can make it difficult to cultivate sustained community action. For instance, instability in the population can make it challenging to consistently engage residents over time, develop social cohesion in the community, or create resident coalitions to engage in collective action. Isolation, language barriers, and a lack of political representation present additional difficulties for engaging with grassroots organizations.
- Relatedly, geographic variables can depress engagement in grassroots organization, making it difficult to build a stronger base of action. For communities that are geographically and culturally dispersed, civic engagement opportunities can be less accessible. Fragmentation and lack of coordination across organizations and lack of capacity for community-building in certain communities may contribute to limitations on more effective and sustained grassroots efforts.
- Mistrust in institutions has affected grassroots engagement. This includes the perception that engagement with grassroots organizations will not result in formal government change because of distrust. Concerns about power imbalances between underrepresented communities and philanthropic organizations (e.g., foundations) have been cited as a concern.
- In some communities, grassroots engagement for health is impeded by a narrative that health is an individual responsibility. Therefore, some initiatives tend to focus on the individual level rather than on improving organizational capacity or systems change via organizations.

### FACILITATORS

- The structure of how community voices are included in local government matters. Communities that promote significant citizen input and participation contribute to a culture of civic engagement.
- Relatedly, how local government coordinates with a range of organizations, including grassroots organizations, facilitates collective action. In some communities, there is leveraging of the work of several coalitions and collaborations to address the needs of vulnerable populations.
- Data and technology have facilitated resident and organization engagement. Data have been used to localize engagement and mobilize targeted resources. Some communities used COVID-19 to highlight the role of local government for residents, and response efforts have integrated the resident voice more than ever before and in new ways (e.g., via Zoom vs. in-person public forums).
- History and experience also matter for future grassroots engagement. For instance, some communities have based their grassroots work on a history of activism. Local leaders know that when certain grassroots organizations are not fully engaged, it can have negative consequences later that could be avoided with early involvement of these organizations.

## Conclusions and Implications

The examples in this report demonstrate the role of grassroots and other community-based organizations in providing insight about what is driving health inequities; keeping community concerns front and center; and helping to push for local change. These organizations are key to representing the voices of populations that have limited voice in formal community structures, though some have been successful in elevating their influence in those structures in recent years. Going forward, it will be important to track the evolution of these organizations and whether and how these organizations can shift power locally to systematically engage underrepresented populations in community actions related to health and well-being. It also will be important to examine the extent to which these organizations can sustain their collective action and what it looks like when grassroots capacity is fully mobilized to advance health equity.

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