Building Capacity for Equitable Data & Evaluation: Cohort 2

RFP Workshop
Sept. 6, 2023
Agenda

- Welcome
- About the Data for Equity Funding Collaborative
- Capacity Building Survey
- Request for Proposal
  - Goal and Overview
  - Eligibility Criteria
  - Application Process and Timeline
  - Self Reflection Tool
  - Evaluation Process
- Q&A
Introductions

Use the chat to introduce yourself!

- Name
- Organization
- Best summer adventure or experience
Data for Equity Funders Collaborative

bi3

INTERACT FOR HEALTH

HEALTHPATH
Data for Equity Cohort 1: 2023
Health Equity

Everyone throughout our diverse region has a fair and just opportunity to live the healthiest life possible, and there are no unnecessary, avoidable, unfair, unjust or systemically-caused differences in health status.
Life expectancy can vary by ~26 years between census tracts in the region.

Census tracts with **shortest life expectancy**:
- West Newport (62.4)
- Walnut Hills (63.3)
- Covington (63.8)
- Corryville (63.8)
- West Price Hill (64.9)

Census tracts with **longest life expectancy**:
- West Chester (85.5)
- St. Leon (85.7)
- Blue Ash (86.5)
- Mt. Adams (86.7)
- Indian Hill (88.2)

Note: For white areas on map, no data available due to changes in census tract areas.

NCHS, USALEEP. 2010-2015.
Characteristics of census tracts with lowest and highest life expectancies in the region

Residents in census tracts with the lowest life expectancy are *more likely to* ...

- Be younger
- Be Black or Hispanic
- Have less income
- Rent their home
- Not have a vehicle

... than those with the highest life expectancy

<table>
<thead>
<tr>
<th>Census tracts and life expectancy</th>
<th>Total population</th>
<th>Median age</th>
<th>Black</th>
<th>Hispanic or Latino</th>
<th>Median Household Income</th>
<th>Renter Occupied Units</th>
<th>No Vehicle Available</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Highest life expectancy</strong> census tracts (79.3-88.2 years)</td>
<td>554,267 people</td>
<td>40.6 years old</td>
<td>7%</td>
<td>3%</td>
<td>$93,735</td>
<td>22%</td>
<td>4%</td>
</tr>
<tr>
<td><strong>Lowest life expectancy</strong> census tracts (62.4-73.3 years)</td>
<td>336,432 people</td>
<td>36.8 years old</td>
<td>32%</td>
<td>5%</td>
<td>$38,724</td>
<td>56%</td>
<td>18%</td>
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</tbody>
</table>

The Process of Equity

Whenever we work with data, in any type of project, we make decisions. Even in a small project, at least hundreds of important decisions are made. These decisions have equity implications. How data are collected or interpreted are influenced by an individual’s values, biases and worldviews—often unintentionally.
What is Capacity Building?

“...the process of building and strengthening the...

...that organizations need to serve their communities.”

2021 Capacity Building Survey Results
Survey Overview

In the fall of 2021, community and nonprofit organizations serving those most impacted by the COVID-19 pandemic continued to face challenges. To have a strong, thriving community, we need resilient health and social service organizations.

To that end, bi3, Interact for Health and HealthPath Foundation issued a brief survey intended to help identify the knowledge and skills organizations need to build capacity and strengthen the social service and non-profit sector in Greater Cincinnati in the coming year.

The survey was sent to 186 grantee partners, 62 (33%) responded to the survey.
# Capacity Building: Areas of Focus

When asked which areas they would like to build capacity in over the next year, most organizations identified:

- Evaluation/Impact/Learning
- Fundraising
- Data Collection and Analysis
- Equity Focused Leadership and Practices

<table>
<thead>
<tr>
<th>Area</th>
<th>Total (N=61)</th>
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<tbody>
<tr>
<td>Evaluation/Impact/Learning</td>
<td>57.38%</td>
</tr>
<tr>
<td>Fundraising</td>
<td>49.18%</td>
</tr>
<tr>
<td>Data Collection &amp; Analysis/Disaggregating Data</td>
<td>45.90%</td>
</tr>
<tr>
<td>Equity Focused Leadership &amp; Practices</td>
<td>42.62%</td>
</tr>
<tr>
<td>Communications</td>
<td>39.34%</td>
</tr>
<tr>
<td>Technology</td>
<td>36.07%</td>
</tr>
<tr>
<td>Grantwriting</td>
<td>34.43%</td>
</tr>
<tr>
<td>Listening/Engaging with Lived Experience</td>
<td>34.43%</td>
</tr>
<tr>
<td>Leadership Development</td>
<td>31.15%</td>
</tr>
<tr>
<td>Board Recruitment</td>
<td>31.15%</td>
</tr>
<tr>
<td>Board Development &amp; Governance</td>
<td>26.23%</td>
</tr>
<tr>
<td>Advocacy &amp; Lobbying</td>
<td>26.23%</td>
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</table>
Types of Capacity Building Support

<table>
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<tr>
<th></th>
<th>Total (N=61)</th>
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<tbody>
<tr>
<td>Direct Grant Support</td>
<td>86.89%</td>
</tr>
<tr>
<td>Technical Assistance or</td>
<td></td>
</tr>
<tr>
<td>Consultant Support</td>
<td>45.90%</td>
</tr>
<tr>
<td>One Time Training/Learning</td>
<td>44.26%</td>
</tr>
<tr>
<td>Cohort Training</td>
<td>26.23%</td>
</tr>
<tr>
<td>Peer Learning Groups or</td>
<td></td>
</tr>
<tr>
<td>Networks</td>
<td>26.23%</td>
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</table>

Respondents indicated that **direct grant support** would be the most helpful type of capacity building support followed by **technical assistance or consultant support**.
Request for Proposals
Working Differently: Shifting Practices and Mindsets

- Trust-Based Philanthropy
- Equitable Data and Evaluation
- Improved Practices
- Reduced Health Disparities and Improved Health Equity
What is Equitable Evaluation?

1. Evaluation and evaluative work should be in service of equity.
   - Production, consumption, and management of evaluation and evaluative work should hold at its core a responsibility to advance progress towards equity.

2. Evaluative work can and should answer critical questions about the:
   - Ways in which historical and structural decisions have contributed to the condition to be addressed
   - Effect of a strategy on different populations
   - Effect of a strategy on the underlying systemic drivers of inequity
   - Ways in which cultural context is tangled up in both the structural conditions and the change initiative itself.

3. Evaluative work should be designed and implemented commensurate with the values underlying equity work:
   - Multi-culturally valid
   - Oriented toward participant ownership.

Source: Equitable Evaluation Initiative
Data for Equity Overview

- Capacity Building Grants
- Grantee Learning Cohort
- Reflection and Learning
Data for Equity RFP

**Goal:** To provide funding and learning opportunities to nonprofit organizations to develop their organizational capacity around data and evaluation in service of health equity.

- **Capacity Building**
- Up to $25,000 for one year
- Up to 10 awards
Project/Practice Examples

- Align practices with equitable evaluation principles
- Engage the voices of those with lived experience
- Disaggregate and analyze data
- Build knowledge and skills
- Engage in continuous quality improvement
- Improve practices to create better outcomes
Examples from Cohort 1

✓ Training community members to define, collect and analyze evaluation data
✓ Conducting neighborhood-based community listening sessions to guide action planning
✓ Revising evaluation and data approaches and tools with an equity lens to improve programming for populations experiencing health disparities
✓ Co-designing data collection tools and approaches with community members to better reflect their priorities and experiences
✓ Designing youth-centered data collection methods that are meaningful for youth

“The data for equity grant has allowed RefugeeConnect an opportunity to dive deeper into our evaluation practices, engaging our entire Community and Health Navigator team (all of whom are refugees and immigrants) in helping us incorporate more equitable data collection and evaluative practices. As a result, we are more aligned with understanding the larger refugee community’s needs.”

RefugeeConnect
Learning Cohort

- Three Learning Cohort meetings
  - First meeting tentatively scheduled for week of January 22nd, 2024

- Co-creation and shared learning

- Open to all team members

- Additional technical assistance, training, and support
Cohort 1 Training Topics

- We All Count Foundations of Data Equity
- Community Engagement & Culturally Responsive Evaluation
- Building a Culture of Evaluation
- Outcomes v. Outputs
- Data and Evaluation Infrastructure
Reflection and Learning

- Goal: To capture the process and learning, shape technical assistance offerings and inform the design of the next cohort

- Anticipate 2-3 touch points over the year
  - May include site visits, interviews, focus groups or surveys
  - Will take the place of in-depth grantee reports

“Equitable data and evaluation work is a muscle we build through practice and continue to engage in - there is no end.”

*Grantee at Coffee Chat*
Application Process and Timeline
RFP Timeline

- **September 29, 5pm**: Proposal Deadline
- **Oct 18 - 25**: Review Committee Selects Finalists
- **Week of Oct 30**: Advisory Committee Selects Grantees
- **November 1**: Grantees Notified
- **Week of Jan 22, 2024**: Grantee Learning Cohort Meeting
- **December 1**: Grant Announcement
Grant Eligibility

- Public or private nonprofit or governmental organization
  - Fiscal sponsorship
- Provide services in at least one county of the 20-county region
Application Questions

- Project description
- Population and geography of focus
- Evaluation approach and practices
- Defining success
- Organizational equity journey
- Other technical support

- Learning cohort
- Amount requested
- Budget request form
- Key staff list for project
- Organization’s demographics
- Virtual visit availability
Self-Reflection Tool

To support organizations in assessing their journey to use data and evaluation in pursuit of equitable programs and outcomes.

- What are our key strengths?
- What are our areas of opportunity?
- What steps can we take to move further along in our journey?

**Not required for the application**
How to Apply

www.interactforhealth.org/open-funding

Interact for Health awards competitive grants through Requests for Proposals and Requests for Applications. Organizations submit a proposal based on the requirements of the RFP or RFA. Interact for Health reviews the proposals and awards a limited number of grants to the organizations that best meet the requirements of the RFP or RFA.

Click the button below to begin the application process for any of the current open RFPs or RFAs listed below (unless noted).

Contact Kristine Schultz with any questions about the process at: kschultz@interactforhealth.org
Virtual Visits

- **Purpose:** For reviewers to learn more about the organization and proposed project and ask any clarifying questions

- **What:** One-hour virtual call, October 18 - 25

- **Who:** Key team members who will be driving the capacity building effort

- **Select an available date(s) in the application**
Application Evaluation Criteria

Focus on Advancing Health Equity
Alignment with Equitable Evaluation Principles
Organizational Commitment to Equity
Clear Goals and Process
Adequate Budget and Staff Capacity

Diverse Organizational Leadership
Additional Points
As funders, we are on a journey to use data to build equity in our grantmaking approaches & practices. Organizations led by Black, Indigenous and People of Color (BIPOC) have been underfunded, leading to disparities in resources and capacity.

**How We Will Use This Information**
- To better understand the diversity of who we work with, to inform our grantmaking, and to equitably and efficiently direct resources in pursuit of our mission
- To acknowledge the historical underfunding of BIPOC-led organizations

**Information Collected from Applicants**
- Race and ethnicity demographics of Board members, leadership, and staff (template provided)
- Additional points awarded to those applicants with a higher percentage of BIPOC-led leadership relative to other applicants in the following categories:
  - Board members
  - CEO/executive director
  - Other c-suite/executive leadership
Q & A

Drop your questions in the chat!
Connect with Us

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