

About social connectedness and health

For this initiative, the Foundation defined social connectedness broadly, as the extent to which people interact with one another, either individually or through groups. As a result, the organizations aimed to increase connections in different ways and at multiple levels. Some focused their work at an individual-level, working to help residents increase bridging social capital (relationships with other residents) or linking social capital (relationships between residents and people in positions of higher power or influence, such as policy makers and service providers). Others thought of their work as a community-level activity that aimed to increase neighborhood cohesion, which reflects the connections residents have to their community and their feelings about their neighborhood and its residents.

These approaches have the potential to improve health outcomes in a variety of ways. Research has demonstrated improved physiological changes, such as lower blood pressure rates, when individuals feel connected to one another. Within groups, the informal sharing of health resources and information can help people access services and support and the social norms established by groups can reinforce both positive and negative health behaviors. In addition, when residents share a sense of community and feel they can work together with their neighbors, they may be better able to effectively organize and advocate for changes to improve health in their neighborhoods. Although the projects funded through this initiative were not expected to demonstrate improved health outcomes during the short funding period, it is assumed the projects that are successful in helping residents build connections are also establishing a foundation that can ultimately improve both individual and community health.

About the funded projects

The organizations that received funding varied greatly in their target populations, anticipated reach, and primary activities. The 21 organizations that received one-year Connect for Health grants all focused on increasing social connectedness among low-income residents or between low-income residents and community decision-makers or service providers. Grants were awarded to organizations located throughout the state, although most (n=15) were located in the Twin Cities metro region (Figure 1, page 6). The implementation model used by each organization varied widely; while some engaged residents in ongoing classes or education sessions, others convened residents in one-time events. The types of activities used by each project also varied widely, and included: convening resident groups in monthly cooking classes, engaging youth in creating educational materials or art, bringing together diverse groups of residents to share their cultural traditions with one another, and creating an infrastructure that helps residents address shared community concerns (Figure 2, pages 7-8).

The organizations also worked to achieve different goals. Fifteen organizations worked to increase bridging social capital by bringing together groups of residents who may not otherwise know one another, while four focused on increasing linking social capital by creating opportunities for residents to build relationships to service providers and local decision-makers. Nine organizations planned activities to increase resident involvement in the community and improve trust among neighbors, examples of improving neighborhood cohesion. Some organizations also had goals of improving resident health outcomes, developing community leaders, and increasing neighborhood safety.

Together, the funded projects touched over 8,000 residents. However, the level of resident involvement varied widely. Many residents were reached through one-time events or stand-alone activities that brought groups of residents together. While these activities may stimulate new relationships or ongoing participation in other events, it is unlikely that these single events will lead to long-lasting changes in social connectedness. Approximately 500 residents were involved in ongoing activities, such as monthly groups or a series of educational classes, or had ongoing leadership or planning roles. The projects that engaged residents in these types of activities offered some preliminary evidence of residents feeling more connected with others or influencing changes that will have a positive impact on health in their community.

Early lessons learned

Overall, the projects were successful in reaching their target populations, but had more difficulty establishing ongoing resident groups. All of the projects reported they were able to reach their specific target population, such as residents of a particular neighborhood or of a specific cultural community. About 80 percent of the projects that used one-time or stand-alone events successfully met their recruitment goals. Fewer projects (56%) that attempted to form groups or committees were successful in getting a group of residents to consistently participate. Often, they found that residents were too busy to be regularly involved in ongoing groups.

Successful projects had the organizational infrastructure to engage residents and quickly implement their work plan. The organizations that already had strong connections to the residents they hoped to reach and the resources in place to adequately support outreach work were more successful in their efforts during this one-year funding period. A number of the grantees also leveraged existing relationships with other community-based organizations to share knowledge, co-create program activities, or align community outreach activities.

The projects experienced a number of challenges that impacted the implementation of their project and the overall success of their work in helping residents increase social connectedness. The projects received limited evaluation technical assistance to develop tools to measure the impact of their work on building social connectedness. Most grantees found it relatively easy to track program outputs, such as the number of people reached, but felt it was difficult to know whether any promising observations or feedback from participants would actually result in long-term changes in social connectedness. A number of projects also experienced common implementation challenges including:

- A lack of staff time, often due to underestimating the effort needed to engage residents in their activities or to establish partnerships with other organizations
- Systemic poverty-related barriers, such as the lack of “free time” among residents who work multiple jobs to participate regularly in groups
- Disruptions to project timelines due to poor weather or unanticipated staff turnover

Examples of promising practices

A few strategies stand out as promising approaches to increase social connectedness. A number of projects provided preliminary evidence that residents were building relationships with one another and becoming more involved in their communities. Some of the strategies that these projects used in their work included activities that:

- Support mentor-mentee relationships
- Engage residents in staff-supported, regularly-convened resident meetings or work groups
- Develop community leaders who acted as “liaisons” between the organization and community residents
- Create resident advisory committees empowered to recommend actions to stakeholders with power and influence

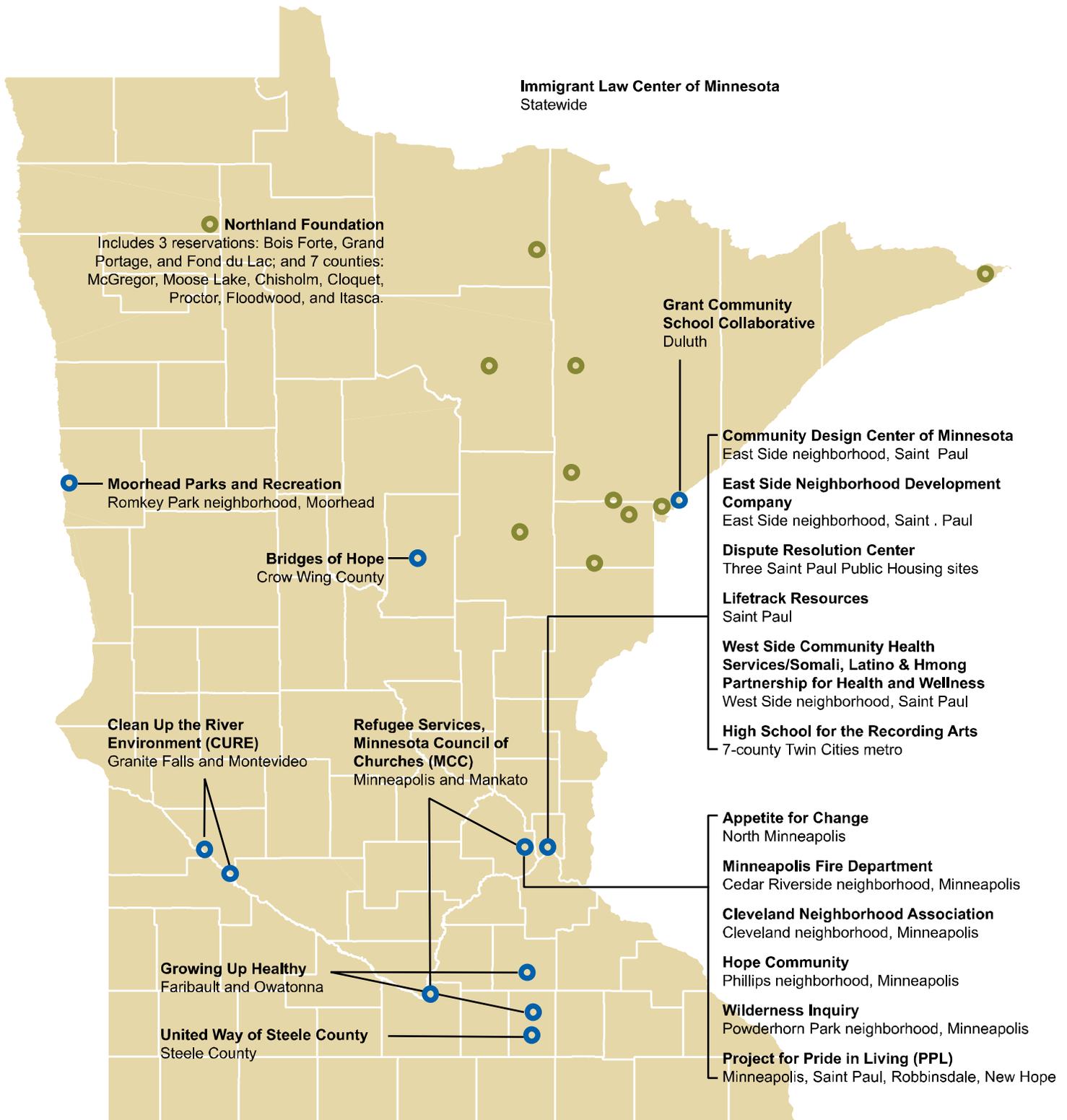
Some organizations provided leadership training to community residents, ultimately increasing the organization’s capacity to engage and involve more residents in their work. Although one-time events or stand-alone activities can build excitement or bring attention to issues, they need to be supported by other ongoing efforts to be a successful strategy for increasing social connectedness.

Recommendations

The following recommendations, based on the information gathered through grantee interviews and other project data, were developed by Wilder Research as ways for the Foundation to improve future grantmaking efforts:

- Refine the scope of future grantmaking and evaluation efforts to focus on assessing the long-term impact of promising approaches using consistent measures
- Extend the length of the grant period, particularly for organizations that do not have experience supporting social connectedness among residents
- Provide additional support, such as connections to training resources, to grantees interested in developing leadership capacity of community residents
- Offer grantees opportunities to meet with one another to share their lessons learned and support one another in their work

1. Location and target populations of the 2012-13 Connect for Health grant recipients



2. Brief project descriptions of the 2012-13 Connect for Health grant recipients

Organization	Project description
Appetite For Change	Community Cooks focused on increasing social connectedness by bringing low-income families and community residents together through small groups and to help them develop the skills to cook healthy meals at home.
Bridges of Hope	Side by Side paired low-income woman with peer mentors to cultivate relationships and provide social and emotional support through weekly check-ins and monthly activities and programs.
Clean Up the River Environment (CURE)	Upstream Downstream concentrated on building social connections between residents of Montevideo and Granite Falls through riverside recreation, exercise, and educational events.
Cleveland Neighborhood Association	Neighborhood Adventure League engaged culturally and economically diverse residents in a series of interactive activities to build social connections.
Dispute Resolution Center	We Can Talk About It focused on building the social connections and conflict resolution skills of diverse, low-income residents of St. Paul public housing through block club socials and community events.
Eastside Neighborhood Development Company	East Side Community of Choice Initiative hosted community events and provided opportunities for residents to have a role in planning and implementing local development activities.
Grant Community School Collaborative	From the Ground Up involved individuals and community organizations in experiential learning activities that supported the development of local, low-income youth's academic, socio-emotional, creative, and life skills.
Growing Up Healthy Rice County	Growing Up Healthy created opportunities for low-income, immigrant residents to build connections with one another, and for neighborhood groups to discuss concerns and identify solutions in partnership with community agencies.
High School for Recording Arts	Check Yo' Self Health and Wellness Center program worked with low-income, African-American students to expand the reach of the Center's mission of developing and delivering peer education materials about HIV/AIDS/STDs and teen pregnancy prevention and awareness.
Hope Community	Intersections engaged people from different cultures in creative practices such as art, music, and storytelling to address what connects people and what keeps them apart.
Immigrant Law Center of Minnesota	Citizenship Day of Welcome hosted a community gathering that included a swearing-in ceremony and multi-cultural celebration for sworn-in citizens.
Lifetrack Resources	Early Childhood and Family Enrichment activities offered events to culturally diverse, low-income families enrolled in Lifetrack Resources' home visiting program to strengthen their community connections, build their local networks, and share resources.
Minneapolis Fire Department	The Community Firefighter Academy brought together firefighters and high school students from the Cedar-River side neighborhood to develop relationships and expand students' skills in CPR, first aid, and firefighting techniques.
Moorhead Parks and Recreation (Youthworks)	The youth program provided a safe place for youth to access structured activities to interact with other youth of different cultures and to build healthy relationships with adults in the community.

2. Brief project descriptions of the 2012-13 Connect for Health grant recipients (continued)

Northland Foundation	AGE to age invited members of different generations to build relationships, promote community engagement, foster social connections, and improve health and well-being through healthy activities.
Project for Pride in Living, Inc. (PPL)	Creating Social Connections and Community concentrated on developing the leadership, conflict resolution, and social connections of a group of low-income, diverse, affordable housing residents.
Refugee Services, Minnesota Council of Churches	The Craft Collaborative brought refugee and non-refugee women together weekly to practice their crafts, build trusting relationships, and connect refugee women with formal and informal mental health healing resources.
United Way of Steele County	Building Bridges to a Healthy Community engaged low-income community members with local leaders to identify barriers to a healthy community and develop a collaborative approach to reduce disparities through a series of dialogues.
Urban Roots	Growing Healthy Youth and Communities provided elementary school students, youth interns, and adults with opportunities to gain knowledge and social connections through gardening, cooking, and healthy eating activities.
West Side Community Health Services: Somali, Latino, and Hmong Partnership for Health and Wellness Program (SoLaHmo)	This project organized community events that featured traditional arts related to physical activity, healthy diet, and wellness for Latino, Hmong, and Somali families with young children.
Wilderness Inquiry	Outdoor Adventures, Arts, and Community Connections built social connections among low-income youth and families through outdoor recreation and interactive activities in Powderhorn Park and the surrounding area.

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For more information

This summary presents highlights of the *Strengthening Connections, Building Community report*. For more information about this report, contact Melanie Ferris at Wilder Research, 651-280-2660.

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