

Ripple Effect Mapping

Impacts and Opportunities: Results from the Ripple Effect Mapping discussions among organizations funded through the Health Equity in Prevention initiative

BACKGROUND

In 2013, the Center for Prevention at Blue Cross and Blue Shield of Minnesota (Blue Cross) provided funding to 13 organizations through the Health Equity in Prevention (HEiP) initiative to advance health equity through policy, systems, and environmental (PSE) changes. Under this larger objective, each HEiP-funded organization has a unique work plan that outlines the project's main goals and the strategies they will use to achieve them. Although the work plans generally outline a logical sequence of activities, the actual work needed to implement PSE changes is anything but linear. Many of the strategies included in the project work plans are intended to build the capacity of community residents to be engaged in decisions that impact their health, establish organizational networks or coalitions to share resources, bring attention to key issues, and broaden their impact. The projects are also working to build the capacity of their own staff and stakeholders to be better equipped to address health equity in their work. In addition, all projects are doing their work in communities where they must understand, and be responsive to, the interests and priorities of community residents and key stakeholders, and conduct their work in a way that is feasible within the political, social, and economic climate of the community. In order to represent this complex work, we employed a relatively new evaluation method, Ripple Effect Mapping, to capture and understand the more holistic impacts of the work of each organization in their local communities.

Between late 2014 and early 2015, 10 of the 13 funded organizations held Ripple Effect Mapping (REM) discussions to better understand the intended and unintended impacts of the HEiP projects. The three organizations that did not participate in the REM process felt it was not the right time in their work to gather input from key stakeholders about the impacts of the project.

About Ripple Effect Mapping

REM is an evaluation approach that involves a facilitated discussion with project staff and local stakeholders that creates a visual “mind map” with discussion participants that shows the linkages between program activities and resulting changes in the community. REM is particularly effective in evaluating complex initiatives that both influence and are impacted by the community. The method is intended to help demonstrate the project's impacts more holistically and to describe the degree to which different types of impacts are observed by project staff and community stakeholders.

Staff from Wilder Research worked with project leads from the funded organizations to identify potential participants for the discussions, and the discussions were attended by between 8 and 18 stakeholders, including project staff (Appendix A). The 10 REM discussions were facilitated by staff from Wilder Research, and two of the organizations—Comunidades Latinas Unidas en Servicio (CLUES) and Cycles for Change—provided translators to co-facilitate the discussions in Spanish. (See Appendix B for a more detailed description of the REM method.)

Each HEiP-funded organization received an individual summary describing the impacts that were shared by stakeholders during the respective discussions and providing questions for the project to consider as they plan their work moving forward. This report summarizes the impacts that have occurred during the first 18 months across all of the projects that participated in the REM discussions. The information in this summary can be used by Blue Cross to identify broader intended and unintended impacts that have come from this work, as well as the potential pathways and supporting factors for these changes.

PROJECT IMPACTS

A total of 860 impacts or changes were identified across the 10 projects during the REM discussions. Over half (58%) of the impacts identified by the discussion participants were related to the projects' collective work to support healthy eating. Fewer impacts were identified in the areas of active living (20%), tobacco control (19%), or other topics outside of the three HEiP initiative's priority content areas, such as cancer screening and prevention or LGBTQ health more broadly (14%). These differences align with the projects' areas of focus; 10 of the projects have at least one goal in the area of healthy eating, while fewer focus at least some of their work on physical activity (N=6) or tobacco control (N=5).

To understand the impact of the projects' work, a coding scheme was developed by Wilder Research to categorize these impacts into common topic areas. Together, these topic areas describe how projects are working to build the capacity to advance health equity at individual, community, and organizational levels. The graphic included in this summary shows how often the impacts identified during the REM discussions lined up with each topic. Examples of the types of changes and impacts that were discussed in each topic area, using examples and quotes from the REM discussions to illustrate specific impacts resulting from the project's efforts, are provided in the summary narrative.

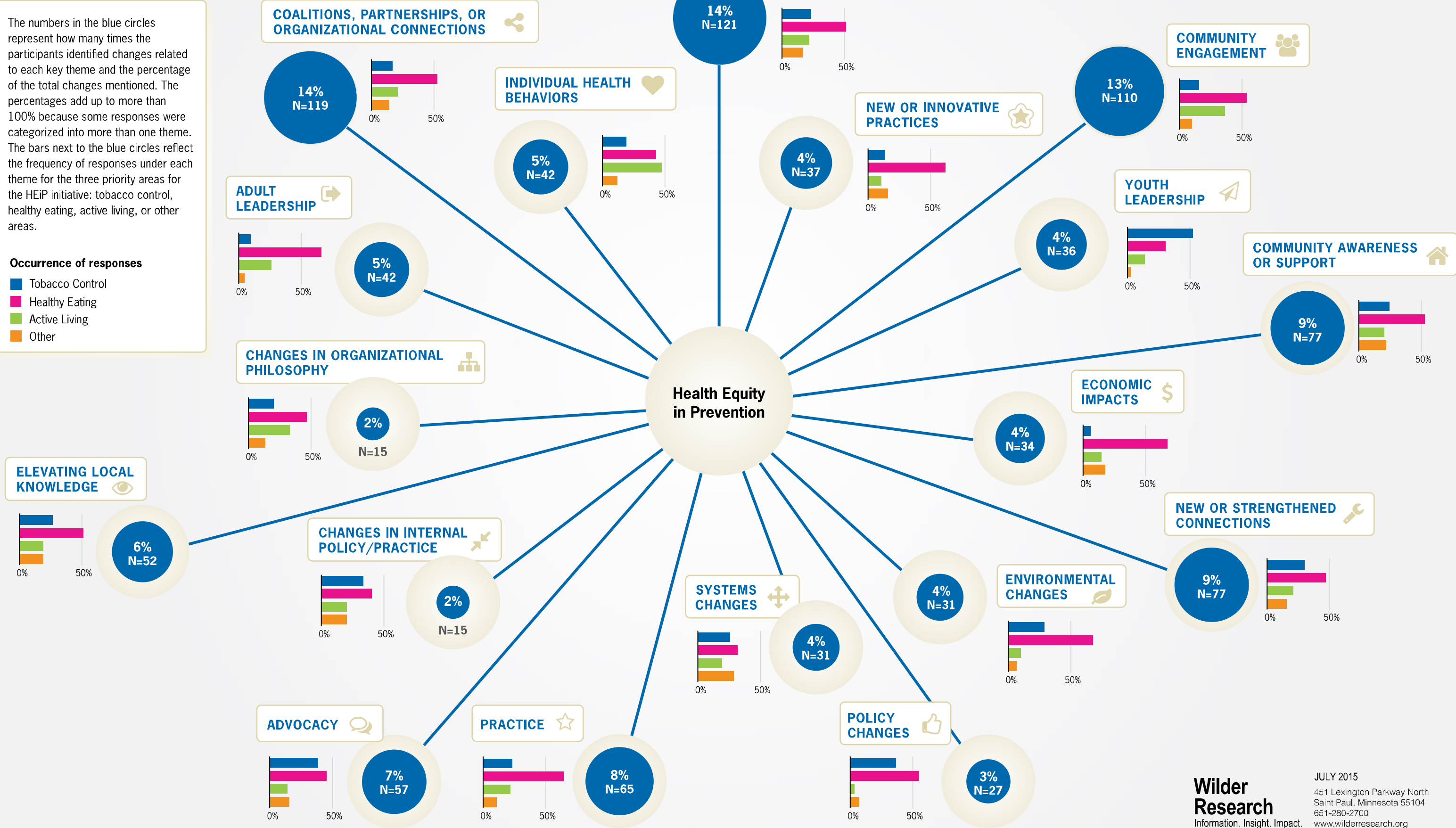
Summary of overall themes

Policy, systems, and environmental changes cannot occur without the support and involvement of community residents and organizational partners. Therefore, it is not surprising to see that after 18 months of work, the collective efforts of the HEiP-funded organizations has focused most heavily on working in partnership with other organizations, increasing knowledge and awareness around key issues, and engaging community residents in the projects' work. Combined, the discussions yielded 350 examples of changes in these areas.

Although much of the work done to date has focused on building capacity for this type of work, there are also examples of changes in policy and practice occurring at this point in the initiative. Across the 10 organizations, the REM discussion participants identified 27 changes in policy, 15 changes in organizational policy and practices, 31 system-level changes, and 31 changes in the physical environment that had occurred to date. A total of 37 innovative approaches were also identified during the discussions, and it should be noted that each HEiP-funded organization shared at least two practices that could be defined as new or innovative.

Ripple Effects Mapping

This infographic shows the themes that emerged from the ten Ripple Effect Map discussions.





New knowledge, skills, or awareness

Changes in knowledge, skills, or awareness among residents and other key stakeholders were the most prevalent types of impacts identified by participants in the REM discussions, representing 14 percent of all responses. The discussion participants offered a number of examples of ways that, through the work of the HEiP-funded organizations, residents developed new skills and learned about resources available to them, or organizations received information that improved their work. About half (51%) of the responses related to healthy eating, and another quarter related to both tobacco control (23%) and active living (22%). Seventeen percent of the responses in this area related to other issues.

Biking events at local farmers markets have provided opportunities for residents to learn about and try new foods. –key theme from Cycles for Change’s discussion

The Open Door offered technical assistance and a workshop on healthy food approaches and policies to 25 organizations in Michigan whose work touches on food. As a result of the workshop three hunger relief organizations are working on crafting healthy food policies. –key theme from the Open Door’s discussion

The Fair Food Access Campaign helped change the metrics for measuring the output of community gardens measuring wholesale value instead of poundage. –key theme from the A.H. Zeppa Foundation’s discussion

The Latino Student Wellness Program started doing presentations for students and made videos on the benefits of drinking water and the consequences of not consuming water. –key theme from CLUES’ discussion

Kwe. Strong staff developed new knowledge of community needs through their program that was funded through a sub-contract. –key theme from Waite House’s discussion

RHI provides digestible data about where key disparities exist in the LGBTQ population and solutions or suggestions to address the disparities, such as through health care provider education. –key theme from RHI’s discussion



Coalitions, partnerships, or organizational connections

The second most frequent area of impact mentioned during the REM discussions related to building formal coalitions, partnerships, or new organizational connections. These efforts also included working differently with organizational partners or acting as a facilitator or liaison in bringing organizations together. The projects described 119 impacts in this area, representing 14 percent of the total impacts across projects. About half (53%) of these new or strengthened relationships were related to healthy eating, 21 percent were associated with active living efforts, and 17 percent were tied to tobacco control work. Another 14 percent of these connections fell into other areas.

Phillips Community Healthy Living has allowed opportunities for organizations doing similar work to meet each other and be a part of the discussion about healthy food access. –key theme from Waite House’s discussion

The City of Eagan Parks and Recreation Department and the Open Door share similar visions about access to healthy, local food. The Open Door helped the Parks and Recreation Department connect to local resources related to gardening and increasing healthy food. –key theme from the Open Door’s discussion

Hope has helped make introductions across local groups working in bicycle advocacy, including the Minneapolis Bicycle Coalition, Cycles for Change, and Spokes. “Hope has been a good facilitator at helping these groups find a common goal. We can go to the city or a county as a unified group with a clear goal.” –key theme from Hope Community, Inc.’s discussion

"Getting into the broader issues that have created these disparities, I think a role that AICAF has played is that they understand the things you talk about in terms of the importance of culture. Their work on a different level is as a translator, with Blue Cross and Blue Shield and other funders, between what people within tribal communities are saying about the kind of work that needs to go on and the kind of work that funders and larger systems need to support. We can't operate in a silo, and as we're saying all these things are important, there's a whole other system at work that is trying to do away with cultural beliefs. This is a role that AICAF can play. We need to look at Blue Cross and Blue Shield's policies and approaches to see how they're not supporting that. American Indian people have been put in places and ignored. Blue Cross and Blue Shield does their work and creates all of these funding opportunities in isolation of what people have said. Bridging those two different worlds is a key piece to what health equity efforts are about."—quote from AICAF's discussion

RHI helped the Minnesota Department of Health analyze the sexual orientation questions on the Minnesota Student Survey. RHI's goal is to help publicize and share the data from the survey.—key theme from RHI's discussion



Community engagement

Community engagement was a common theme in all REM project discussions, and often set the stage for other impacts to occur, such as new connections between individuals or changes in youth or adult leadership. The projects used a variety of community engagement strategies to involve community residents in their work, from one-time events and campaigns to more established groups or classes. Community engagement was the third most commonly cited area of impact that came up during the REM discussions, mentioned 110 times and representing 13 percent of the total impacts across projects. Much of this work involved engaging residents in healthy eating efforts (54%), followed by work in areas of active living (36%), tobacco control (16%), and other topics (10%).

The Fair Food Access Campaign is helping to bring citywide events into the Lincoln Park neighborhood (e.g., Duluth Community Garden events) to reduce barriers to participation and build new knowledge.—key theme from the A.H. Zeppa Foundation's discussion

Kwe.Strong is located outside of the Phillips neighborhood, and so Waite House has helped them to make connections within the community.—key theme from Waite House's discussion

Youth have helped their peers get involved in the community.—key theme from NorthPoint Health and Wellness' discussion

The Latino Student Wellness Program has... had more recent international student members from Central America. "When they come here, they don't always know what the options are, and so when they come to the Tertulias [discussion groups through LSWP], they start to see that there are other people who speak Spanish and that they can share with. That gives them a feeling of belonging to the community. A big part of those who participate are international students."—quote from CLUES' discussion



Community awareness or support

Discussion participants also shared evidence of growing awareness of health equity issues and support for the project and related efforts among residents, partners, and decision-makers. Some of the projects observed growth in the number of community residents who participate in their project meetings and events, suggesting growing awareness of and interest in their work. In other discussions, the participants observed changes in support among community decision-makers and leaders. Discussion participants also described specific efforts that were taken to promote awareness of or support for the project or specific issues. Changes in community awareness and support had taken place in all projects and represented 9 percent of the total impacts noted by discussion participants. Most (53%) of these changes again related to healthy eating, followed by tobacco control (25%), and active living (21%). Another 22 percent of the examples of growing awareness of support focused on other areas.

Food is part of the agenda at the city. It's more of a focus. –key theme from the A.H. Zeppa Foundation's discussion

After passing the policy, the Open Door has needed to be proactive in how it solicits healthy food. It has developed a strong communications strategy to focus on spreading the message about its focus on healthy food.

–key theme from the Open Door's discussion

Informal discussions that happen at committee meetings and gatherings help stakeholders hear more about what is going on within the community. –key theme from Waite House's discussion

More people are coming to events around health, and there is more interest from tribal members about what AICAF is doing and how the members can help out. –key theme from AICAF's discussion

Residents are putting the word out in the neighborhood about not smoking, including the benefits (e.g. saving money, healthy benefits), and the dangers of second-hand smoke.

–key theme from NorthPoint Health and Wellness' discussion

People are more willing to take the Voices of Health survey because they understand the importance of collecting LGBTQ-specific health data. –key theme from RHI's discussion



New or strengthened connections

The projects have not only worked to engage community members and build coalitions, but have also fostered connections among individuals, including program staff, program participants, and the broader community. Some of the projects created opportunities for community residents to work together in community gardens or to establish new intergenerational relationships. A number of projects saw this work supporting connections to community residents or strengthening community cohesion. Other participants reported new professional connections. About half (47%) of these connections came out of work related to healthy eating and about one-third (30%) involved tobacco control efforts. Another 21 percent of the new connections resulted from active living work, and 16 percent of impacts in this area fell into other areas.

“Hope Community; home of people involved; community; I have lived here for five years; the farther I go the more I appreciate it; with each year there are new opportunities for me and my neighbors; they look out for each other; there is fellowship; in the community garden people can play in the dirt and get dirty; plant healthy foods; there is love and security in my home and the community.” –quote from Hope Community, Inc.'s discussion

“Working in the Infinity Garden has been appealing to participants because they felt that it was a way to give back to Waite House.” –quote from Waite House's discussion

Community members who have connected to growers have asked them to cultivate specific vegetables that they cannot find at farmers markets or grocery stores. –key theme from AFC's discussion

When young people move to urban areas, it can be hard for them to find people who can speak about and share tribal teachings and practices. AICAF tries to find ways to connect young people to elders and teachers who can share traditional tribal ways, particularly around traditional tobacco use. –key theme from AICAF's discussion

A youth participant was offered an internship with Congressman Keith Ellison as a result of her involvement in BreatheFree North. –key theme from NorthPoint Health and Wellness' discussion

A youth apprentice stated, “Before Cycles for Change, I was mainly friends with people like me and since that I've started working with people who are Hispanic, White, or Hmong and they may not look like me but we can be friends.” –quote from Cycles for Change's discussion

A member of the RHI Board of Directors shared that he has had the opportunity to talk with more people about RHI's work and that they are really interested in the research and training. They see value in the work. –key theme from RHI's discussion



Practice

All of the organizations identified at least three changes in practice that occurred as a result of their involvement with HEiP. These changes included a range of activities, from new practices in engaging residents to changing the way internal meetings were conducted. Most of the changes were made by the HEiP-funded organizations, but the REM discussion participants did identify changes that have been made by other project partners. The 65 changes in practice identified during the REM discussions have not necessarily been formalized through written organizational policies or practice standards. Overall, these changes accounted for eight percent of all changes or impacts identified during the REM discussions. Of these impacts, close to two-thirds (65%) were changes in practice related to healthy eating, 23 percent related tobacco control, and 22 percent focused on active living. Eleven percent of changes in practices fell into other areas.

The Parks and Recreation Department used to ask for canned and boxed good donations as admission to a Halloween event; however, the department changed and started to encourage people to donate more healthy food.
—key theme from the Open Door's discussion

Mashkiikii Gitigan is beginning discussions with Stone's Throw Farms, which grows food in the Phillips neighborhood but has traditionally sold their produce at upscale farmers markets like the Mill City Farmers Market. They are interested in keeping more of their food in the Phillips community and are working with Waite House to explore ways to do that. —key theme from Waite House's discussion

"AICAF always starts meetings and gatherings with tobacco, prayer, and smudgings. [They] are always conscious of respecting who we are as a native people." —quote from AICAF's discussion

Fresh Corners delivered produce to the West Broadway Farmers Market Aggregation Table. This helped increase residents' access to fresh, locally grown produce. A participant shared that the produce sold at the Aggregation Table was less expensive than produce at other grocery stores like Cub, thus making the produce more affordable for community members. —key theme from AFC's discussion



Advocacy

In their second year of work, many of the projects have engaged in advocacy efforts to lay the foundation for policy, systems, and environmental changes. Examples of these advocacy efforts included testifying at city council meetings, gathering information to raise awareness around an issue, or encouraging other organizations to adopt policies that advance health equity. A total of 57 impacts, or 7 percent of total impacts mentioned by participants, involved advocacy efforts. Close to half (46%) of these efforts involved advocating for healthier food environments, and another 39 percent focused on tobacco control. Fewer of these efforts were directed towards active living (14%) or work in other areas (16%). Advocacy efforts were identified in all REM discussions, and were a stronger focus for three organizations: Hope Community, Inc., NorthPoint Health and Wellness, and RHI.

Hope and LSP were invited to comment on the new Staple Food Ordinance, which requires licensed grocery and corner stores to have more healthy foods. Five people attended and advocated for affordable and edible foods, fair price comparisons, support for local farmers, and incentives for food stamp use for healthy foods at corner stores.
—key theme from Hope Community, Inc.'s discussion

Youth surveys helped stakeholders and policymakers learn about what is really happening, including the nuances of this problem, how it is experienced by young people, and other factors in young people's lives.
—key theme from NorthPoint Health and Wellness' discussion

RHI's work informed the coalition focused on increasing the minimum wage by presenting data on the rates of low-wage work for the LGBTQ community. In addition, RHI found that one of the biggest predictors of tobacco use and negative health outcomes for the LGBTQ population was low-income status. —key theme from RHI's discussion

The Fresh Corners growers have had a difficult time finding land to grow food. In response, the director of the Jordan Area Community Council suggested advocating to the city to use vacant home lots for urban farms. This approach could lead to the production of local food along with helping to address vacancy. It could also create green spaces in neighborhoods and help more community members become involved in urban agriculture.

—key theme from AFC's discussion

The Healthy Food Access Coalition has worked on changing food shelf policies with Second Harvest so that food can now be shared across food shelves and with other organizations such as churches and health care clinics.

—key theme from Waite House's discussion



Elevating local knowledge

Many of the projects also shared efforts or impacts related to bringing greater awareness to or lifting up knowledge or practices of traditionally underrepresented communities. This important work amplifies the voice of community residents and fosters more equitable prioritization and decision-making processes. Of the responses, 52 percent were focused on healthy eating, 27 percent related to tobacco control work, and 19 percent involved active living efforts. Another 19 percent of the responses in this area concerned other areas. Many of the 52 impacts were identified in the REM discussion groups held for NorthPoint Health and Wellness, AICAF, and Hope Community, Inc.

AICAF is interested in spreading knowledge more broadly about what works well in the American Indian community.

—key theme from AICAF's discussion

AICAF helps maintain American Indian practices and acts as a bridge between the American Indian community and other organizations and groups. —key theme from AICAF's discussion

The youth survey has been important because those not in the middle of tobacco work have a harder time understanding the nuances of it. —key theme from NorthPoint Health and Wellness' discussion

Through the listening sessions, the Food Justice Leadership Team heard people talk about food in a different way, share common struggles and shame around food and the ways that shame has been internalized, which brought to light bigger structural issues. —key theme from Hope Community, Inc.'s discussion

The women's self-defense tradition that came up through feminism in the 1970s reflected a largely white, middle class, female lens, and this [self-defense program] brought more voices to that discussion. Participants also started to think more critically about their own cultural identities and how culture influences the ways in which we think. —key theme from Waite House's discussion

"On another note, I'm an immigrant that came without much and without education. I have been here for more than 30 years, thanks to organizations like CLUES, it has impacted my life. When I came to Los Angeles and then to Chicago – I went to English classes and when I came to Minnesota, I said that I can't go to school, but I went to the other CLUES location... I am very grateful, because even though you don't know it, being a part of CLUES was a part of my growth and now it is my turn to give back to my community. Now I'm committed to working with this organization, with the CLUES headquarters in support of whatever activity, participating in events, donating food to the Aging Well Services in St. Paul, donating healthy foods... I am very grateful to organizations like CLUES, that even though you can't see the impact, what they have done in the community, valuing our life trajectories, this is what helps us to improve ourselves. I just wanted to say thank you for your work. —quote from CLUES' discussion

Adult leadership

Leadership development among community members is a key activity used by many HEiP-funded organizations to engage community residents in their work, increase support, and build the capacity of the community to advance health equity. In nine of the REM discussions, the participants identified at least one change in adult leadership that had occurred as a result of the project. A number of projects had provided opportunities for community residents to receive leadership or community organizing training, be directly involved in advocacy work, or serve on decision-making committees. Combined, the projects identified 42 changes in adult leadership as a result of their work. The emphasis on adult leadership development was particularly evident in the discussion for Hope Community, Inc. The discussion participants identified 16 impacts in this area. Two-thirds (67%) of the total impacts related to adult leadership focused on healthy eating, 26 percent addressed active living, and 10 percent of adult leadership development efforts targeted tobacco control. Five percent of impacts in this area fell into other areas.

We got up and talked about racial equity. It made me feel like I had a voice at the table. We got to see peers also talk about racial equity and their experiences. –key theme from Hope Community, Inc.'s discussion

Two Food Justice Leadership Team members are going to be on the committee to help guide the implementation of the Staple Food Ordinance. –key theme from Hope Community, Inc.'s discussion

Hope also connected a participant to Sustainable Progress through Engaging Active Citizens (SPEAC), which provides training and support to community activists around organizing. "This group opened my eyes about government and provided me with a language." –quote from Hope Community, Inc.'s discussion

Lincoln Park residents wouldn't have been aware of or able to attend the Fair Food Access Summit without the Fair Food Access Campaign. This was a wonderful networking and educational opportunity about what people around the state have been doing regarding food access. The Campaign offered full scholarships to residents and agency partners. –key theme from the A.H. Zeppa Foundation's discussion

A participant involved with Mujeres en Acción y Poder began a biking group for Latino residents in Brooklyn Center with the support of Cycles for Change. –key theme from Cycles for Change's discussion

The Latino Student Wellness Program at Minnesota State University-Mankato began a campaign to motivate students to participate in intramural sports. –key theme from CLUES' discussion

Individual health behaviors

In all REM project discussions, participants also shared examples of changes in individual health behaviors that they had observed among community members, such as community members biking more often, eating healthier foods, or quitting smoking. Although some projects have a programming or education component to engage residents in their work, the projects are focusing most of their efforts on building support for higher-level policy changes. At this early phase in the projects' work, individual behavior change represented 5 percent of the total changes mentioned by discussion participants. Changes in physical activity were the most commonly cited examples (48%), followed by healthy eating (43%), and tobacco use (19%). Twelve percent of changes involved other health behaviors, such as getting screened for breast cancer or monitoring blood pressure.

Families are biking together more. –key theme from Cycles for Change's discussion

A community member who has diabetes specifically chose to go the Open Door because it has healthier food options. After eating more healthily, her insulin rates decreased. –key theme from the Open Door's discussion

The Mercado owner has observed that parents are buying more watermelons, pineapples, papayas, and other fruits since adopting a healthy eating policy and [he is] preparing pre-cut fruits and vegetables to sell at his store. –key theme from CLUES' discussion

A nurse reported that people are using "my building went smoke-free" as a reason to quit smoking. –key theme from NorthPoint Health and Wellness' discussion



New or innovative practices

Many of the projects have developed innovative strategies to advance health equity through their work. These strategies may provide models or ideas for future work in this area. A total of 37 innovative practices were identified through the discussions, representing 4 percent of the responses across projects. Close to two thirds (61%) of the strategies related to healthy eating, 14 percent focused on tobacco control, and 11 percent addressed active living. Another 16 percent of the strategies identified fell into other areas. It should be noted that all of the projects detailed at least two practices that could be defined as innovative. Examples from each of the projects are included below.

Mashkiikii Gitigan has also begun the Karma Market. Food that is harvested from the garden is brought to the market, and there are no set prices. People are asked to contribute what they are able and think the produce is worth.

—key theme from Waite House's discussion

"What we do is cut the [fruits] for those kids so that people have more cravings to eat healthy foods. Some of the people didn't buy it because it was whole and too much for a person and in cutting them it made it easier for them to eat." —quote from CLUES' discussion

Appetite for Change worked with 11 local corner stores that were part of the Healthy Corner Store Initiative funded through the Statewide Health Improvement Program. These stores took part in Fresh Fridays, a program in which residents who spend up to \$3 on fruits or vegetables at one of the 11 corner stores receive additional fruits and vegetables of equal or lesser value for free. Appetite for Change helped the stores set up displays of fresh fruits and vegetables. —key theme from AFC's discussion

The Open Door is "on the forefront" of demonstrating that food shelves can say "no" to certain unhealthy foods. —quote from the Open Door's discussion

Hügelkultur gardening method involving raised beds filled with biomass was used in the Lincoln Park Emerald Garden and is now being used at an urban farm. —key theme from the A.H. Zeppa Foundation's discussion

The Food Justice Leadership team has changed the way we look at data and how we collect it. We have been building our data through narrative and storytelling and that changes how community organizers can use the data. Using stories to tell people's connections to food systems and what they need to be secure is asset-based and powerful.

—key theme from Hope Community, Inc.'s discussion

The young people administering the tobacco survey are able to communicate with the youth frequently and in real time, which allows stakeholders and policymakers to stay ahead of the game as opposed to using larger national studies.

—key theme from NorthPoint Health and Wellness' discussion

Liaisons have provided a greater reach into different communities, especially those that are less represented and not the typical face of bikers in Minnesota. —key theme from Cycles for Change's discussion

The Upper Sioux community worked with AICAF to hold the Pink Shawls Initiative which brought together over 180 people. Pink Shawls raises awareness about breast health issues in culturally-specific ways at community events within American Indian communities. It also provides breast health education and promotes programs that increase access to screening through coordination and use of available resources. —key theme from AICAF's discussion

RHI created a LGBTQ-friendly health care provider directory. —key theme from RHI's discussion

Youth leadership and engagement

Changes in youth leadership and engagement were identified by seven projects, with NorthPoint Health and Wellness having the strongest focus in this area. A total of 36 different impacts were identified across all REM discussions, and over half (53%) of those changes were attributed to NorthPoint's work engaging youth in tobacco control advocacy through Breathe Free North. Overall, more than half (53%) of the youth leadership impacts related to tobacco control, followed by 31 percent focused on healthy eating, 14 percent related to active living, and 3 percent of youth leadership efforts addressing other areas.

Youth work has resulted in a change in the mindset of store owners/operators of various stores, gas stations, etc. to be more careful and mindful of the age of the customer that is purchasing tobacco products.

—key theme from NorthPoint Health and Wellness' discussion

Youth partnered with the Association of Non-Smokers to present at the Capitol. —key theme from NorthPoint Health and Wellness' discussion

Youth surveys help stakeholders and policymakers learn about what is really happening, including the nuances of this problem, how it is experienced by young people, and other factors in young people's lives.

—key theme from NorthPoint Health and Wellness' discussion

Youth apprenticeships through the Open Shop provide leadership opportunities and an outlet to learn bike mechanics.

—key theme from Cycles for Change's discussion

Youth have increased their connections by participating in Appetite for Change's Food Ambassador and Community Cooks programs. —key theme from AFC's discussion

Appetite for Change built a relationship with the Redeemer Lutheran Church garden. Redeemer staff asked Appetite for Change to come and do training with their youth on food as an organizing tool. —key theme from AFC's discussion

Economic impacts

Some mention of the economic impact of the work came up in all 10 REM discussions. The 34 changes identified by the projects included examples of ways the HEiP-funded work was leading to changes in funding streams, revenue, employment opportunities, economic benefits to residents, work with local businesses, or changes in local economies. About two-thirds of the economic impacts related to healthy eating (68%), while fewer economic changes occurred as a result of efforts in the areas of active living (15%), tobacco control (6%), or other areas (18%).

When talking with developers, city officials highlighted Lincoln Park as a potential area for grocery store developers.

—key theme from the A.H. Zeppa Foundation's discussion

Local community members are being employed. —key theme from the A.H. Zeppa Foundation's discussion

Appetite for Change works with retailers (e.g., corner stores) to help them understand the local demand for fresh produce and how their business could benefit from selling fresh produce. —key theme from AFC's discussion

An advisory council member reported that he/she is patronizing more local businesses "because my life is now in a 10 mile radius, not a 30 mile radius." —quote from Cycles for Change's discussion

RHI was asked to join the board for Quorum, an organization that focuses on supporting businesses in the Twin Cities that are LGBTQ-owned or owned by allies. RHI helps integrate health as part of the conversation for Quorum and other LGBTQ organizations. —key theme from RHI's discussion

Hope has developed funding to support the work of Native American Community Development Institute.

—key theme from Hope Community, Inc.'s discussion



Environmental changes

Environmental changes occur when the physical indoor or outdoor environment is modified, increasing opportunities for healthy behavior. Examples of environmental changes were identified in eight of the REM discussions. Combined, the projects also cited 31 changes to the physical environment, representing 4 percent of the total impacts. More than two thirds (68%) of the impacts focused on healthy eating, 29 percent were aimed at tobacco control, and 10 percent addressed active living. Seven percent of the environmental changes were related to other areas. Many of the environmental changes identified during the REM discussions involved the establishment of community gardens or urban farming spaces.

If the Emerald Garden had not been created, there would have been a weedy, vacant space. The garden helps with local beautification and now the land has a purpose. –key theme from the A.H. Zeppa Foundation's discussion

The team of community health workers educated the rural factory owners and helped them adopt a non-smoking policy and put up no smoking signs outside the buildings. –key theme from CLUES' discussion

*Nice Ride bikes in Heritage Park multi-unit housing community.
–key theme from NorthPoint Health and Wellness' discussion*



Systems changes

A total of 31 systems change impacts were described in the REM discussions, representing 4 percent of the total impacts. Simply put, systems changes impact how the work is done by an organization, institution, or broader system across these entities. These high-level changes influence efforts throughout the system and often shift culture and norms. While some systems-level changes may be formalized with an implemented policy, other systems changes are the result of the evolving work of within or across the institutions. Many of the projects reported systems changes related to institutions working differently together or across levels of power, establishing new pathways within systems, increasing their involvement in larger systemic efforts, or ensuring sustainability. Systems change impacts also were more evenly distributed across the three focus areas, with 32 percent of the impacts related to healthy eating, 26 percent focusing on tobacco control, and 19 percent related to active living. Another 29 percent of the systems changes fell into other areas.

Fresh Corners has helped local growers sell their produce to corner stores, which has allowed corner stores to order produce year round and dramatically increased their interest in carrying fresh produce. In addition, corner stores have found that the locally grown produce is more affordable. –key theme from AFC's discussion

Large institutions such as the Children's Hospital do not always sit down with smaller community organizations and consider how they can become better connected with residents. This project has allowed the Children's Hospital to do so. –key theme from Waite House's discussion

*The Minneapolis Parks and Recreation Board did not seem to be interested in community input at the initial information sessions, but instead was looking to check the box that they had engaged the community. The Parks Board is now taking a different approach to engagement, which is a "huge systems change for this organization."
–quote from Hope Community, Inc.'s discussion*

This work is expanding the pool of bike advocates. –key theme from Cycles for Change's discussion

*Youth involvement promotes sustainability for tobacco and related advocacy.
–key theme from NorthPoint Health and Wellness' discussion*

AICAF has helped break down silos within tribal systems. –key theme from AICAF's discussion



Policy changes

Eight of the projects showed early impacts in bringing about policy change, reporting a total of 27 policy-related changes (3% of the total changes shared during the discussions). The majority of policy changes related to healthy eating (56%) and tobacco control (37%). Only one organization mentioned a policy related to active living. Seven percent of the policy changes fell into other areas. Many of the tobacco policies adopted related to smoke-free grounds or events, whereas most of the healthy food policy work related to local ordinances or institutional policies. In a number of cases, the organizations worked in partnership with other organizations to encourage these changes in policy.

*Fresh Corners helped inform and pass changes to the Minneapolis Farmstand Ordinance.
—key theme from AFC's discussion*

*The Open Door, in partnership with Second Harvest, gets discarded food from several different grocers and retailers. The Open Door's Healthy Food policy allows them to reject unhealthy, discarded food in favor of healthier food.
—key theme from the Open Door's discussion*

*The team of community health workers talked to the [Mercado] owners and helped them adopt a policy to move produce to the front of the store so that it was the first thing that people saw when they entered the store.
—key theme from CLUES' discussion*

RHI facilitated a conversation between Clare Housing and the Association for Nonsmokers (ANSR) about Clare Housing going smoke free. RHI helped make the case for going smoke free and ANSR helped implement the smoke free policy. This was important given that Clare Housing hosts HIV positive residents and data show that people who have HIV and smoke often die as a result of tobacco, not HIV/AIDS. —key theme from RHI's discussion

The Fond du Lac tribe is going smoke free in its buildings as of February 15th, 2015. AICAF's Tribal Tobacco Use Project survey and other resources have been used to inform and support policy changes. —key theme from AICAF's discussion

Through this initiative, the charter school, Adelante College Prep - Hiawatha Academies has adopted an active living policy involving the installation of bike racks. —key theme from CLUES' discussion



Changes in internal policy or practice

Organizational policies or practices can be used to formalize an organization's commitment to promoting health and advancing health equity. For example, policies that encourage the organization to serve healthy food options at events can make it easier for employees and staff to make healthier choices and can also influence the organization's selection of food caterers or other vendors. Participants reported changes in internal policy and practice within the HEiP-funded organizations, but also within partner agencies. Five of the project discussions identified at least one impact in this area, and a total of 15 changes were identified by these groups. The policies passed by these organizations supported healthy eating (40% of all changes identified), physical activity (33%), tobacco control (33%), and other aspects of health (14%).

The Latino Student Wellness Program at Minnesota State University-Mankato began serving healthy foods at their weekly meetings, such as fruit, vegetables, and water instead of chips and even held a smoothie night at one of their meetings. —key theme from CLUES' discussion

*Youth in the BreatheFree North program have been keeping an eye on NorthPoint to uphold smoke-free policies.
—key theme from NorthPoint Health and Wellness' discussion*

The greater diversity of staff at Cycles for Change has helped improve the organization's reach into different communities. —key theme from Cycles for Change's discussion

RHI helped a local organization form questions about gender identity and sexual orientation for its internal employee survey in a way that was not stigmatizing. It also helped the organization think through how to use the information from the survey. —key theme from RHI's discussion



Changes in organizational philosophy

Participants in five of the REM discussions observed changes in the broader philosophies or frameworks guiding organizations' or projects' work. These changes influence the way the organizations think about health and equity and provide a framework that can be used to guide organizational and programmatic decisions. The 15 changes identified in the discussion included shifts in the way HEiP-funded organizations approached their work, as well as some of their project partners. About 2 percent of the total impacts across the projects involved changes in organizational philosophy. Half (47%) of these related to healthy eating, one third (33%) with active living, and 20 percent focused on tobacco control. Thirteen percent of the impacts in this category related to other areas.

The City of Duluth is approaching food and land use in a different way.

—key theme from the A.H. Zeppa Foundation's discussion

Other organizations focused on biking are beginning to take more of an equity focus.

—key theme from Cycles for Change's discussion

BreatheFree North is working with people rather than on their behalf.

—key theme from NorthPoint Health and Wellness' discussion

Hope Community, Inc. is now working from a framework of resiliency. In the past, they had approached the work more from a framework of sustainability. —key theme from Hope Community, Inc.'s discussion

CONCLUSIONS AND NEXT STEPS

Ten HEiP-funded projects participated in REM discussions after approximately 18 months of work. In that span of time, the funded projects were able to show a broad range of impacts. Although each project has its own guiding philosophy and unique activities and strategies to advance its work, common themes also emerged across the projects. Efforts related to supporting new knowledge, skills, and awareness; building coalitions, partnerships, and organizational connections; and engaging community members were the most frequently cited impacts during the discussions. Additional areas of impact mentioned frequently were fostering new or strengthened connections among individuals and promoting community awareness and support for the project and related issues. Although the focus of the HEiP initiative is to advance healthy equity through policy, systems, and environmental (PSE) changes, findings from the discussions suggest the strategies related to building coalitions and partnerships, engaging the community, and stimulating new knowledge and awareness may be the first step in laying the foundation for broader PSE change work. Building relationships with the community and establishing effective coalitions takes time and ongoing effort. Therefore, organizations interested in advancing health equity through their work need to invest the staff time necessary for these critical first steps. Funders like Blue Cross can support organizations in this work by providing longer-term funding to projects and by considering ways to support organizations to do more effective community engagement and coalition-building work. They can also help organizations that are new to this work establish realistic timelines and a scope of work that is reasonable and reflective of their overall capacity and level of experience.

As the HEiP-funded projects continue their work, a variety of evaluation approaches will be used to identify the promising practices used by the organizations to engage community residents and work in partnership with other organizations to achieve common goals. This information may provide other organizations with examples of strategies that they can adopt in their work. Likewise, these strategies can help potential funders to consider the types of training opportunities and additional supports that could be helpful in building the capacity of organizations seeking to advance health equity.

APPENDIX A: Ripple Effect Mapping Participants

Name of funded organization	Brief description of Ripple Effect Mapping participants	Number of participants
American Indian Cancer Foundation (AICAF)	AICAF staff; representatives from the Upper Sioux tribe, the Minnesota Department of Health, the Bois Forte tribe, the Lower Sioux tribe, the Mille Lacs tribe, the University of Minnesota Department of Medicine, the White Earth tribe, and the Fond du Lac tribe.	14
Appetite for Change (AFC)	AFC staff; representatives from Project Sweetie Pie, the Main Street Project, and West Broadway Farmers Market; local residents and growers.	14
Comunidades Latinas Unidas en Servicio (CLUES)	CLUES staff; members of Latino Student Wellness Program from Minnesota State University-Mankato; a rural community health worker; representatives from businesses and organizations that had adopted policies related to tobacco control, healthy eating, and active living.	8
Cycles for Change	Members of the Bicycle Library Advisory Council, consisting of Cycles for Change staff, organizational and agency partners, and community residents, including youth.	18
Hope Community, Inc.	Hope staff and interns; staff from partner organizations connected to Hope's HEIP activities; community members including residents, program participants, members of Hope's Food Justice Leadership Team, and volunteers.	14
NorthPoint Health and Wellness	NorthPoint Health and Wellness staff; representatives from community organizations and the city health department; policy makers; city health department representatives; community residents, including youth.	15
The Open Door	Open Door staff; local gardeners; staff and students from Burnsville Alternative High School; representatives from Keystone Community Services, Second Harvest Heartland, the Food Group, Dakota County Public Health, and the City of Eagan.	16
Pillsbury United Communities - Waite House	Waite House staff; members of the projects three coalitions (the 24th Street Urban Farm Coalition, the Fitness Coalition, and the Healthy Food Access Coalition); organizational partners; community residents; individuals who had received micro-grants lead activities, classes, or programs related to physical fitness.	14
Rainbow Health Initiative (RHI)	RHI staff and board members; representatives from the office of Senator Al Franken, Lavender Magazine, the PRIDE Institute, the Association for Nonsmokers, and OutFront Minnesota.	18
A.H. Zeppa Foundation	Representatives from the Fair Food Access campaign's main partner organizations, including the Healthy Duluth Area Coalition, Churches United in Ministry (CHUM), Community Action Duluth, and the Duluth Local Initiatives Support Corporation (LISC); representatives from the Zeppa Foundation, the City of Duluth, the University of Minnesota Duluth, and the University of Minnesota Extension; local farmers; residents from the Lincoln Park Neighborhood.	15

APPENDIX B: The Ripple Effect Mapping Method

REM is an evaluation tool that was developed to document the intended and unintended impacts of multi-part community-based initiatives that are not easily captured by other methods of evaluation. The method involves a facilitated discussion with project staff, partners, community members, and other local stakeholders and the creation a visual “mind map” during the discussion which shows links between program activities and resulting changes in the community.

REM discussions typically involve 12 to 20 stakeholders of a project. REM is most effective when about half of the participants are key staff and partners who can speak directly to the work of the project, and the other half represent community members and stakeholders who are well-positioned to discuss the impact of the project in the broader community. The discussions are staffed by a facilitator, a “mapper” who transcribes participants’ responses in the mapping software, and a notetaker. For this project, X-Mind software was used to create the maps.

After introductions, the two hour discussion begins with participants splitting into pairs to discuss what they found to be the most important change that has come out of the project, including new connections that were made or ways that people are working differently. These ideas are then shared with the large group and mapped onto a projected screen using a mind-mapping software. The facilitator then leads a discussion to explore the “ripples” of these impacts by asking questions such as “What happened as a result of this?” or “What led to this?” By the end of the session, a draft of the map is completed that incorporates the feedback from all of the participants.

After the discussions, evaluation staff work with project leads to fill in any missing information, clarify details, and consider whether any other stakeholder input is needed. For some organizations, additional follow-up interviews may be arranged with stakeholders who were not able to attend the REM discussion. The final map, incorporating feedback from all stakeholders, is reviewed by the project leads and any other key partners they identify.

For this HEIP initiative, two of the ten discussions were facilitated in both English and Spanish with the help of a translator. In these cases, several additional adjustments were made to the Ripple Effect Mapping protocol to ensure that all participants would also be able to understand the visual map created during the sessions. Rather than having a staff member transcribe the responses in English using the mapping software, participants were asked to write their responses on large adhesive notes in the language with which they felt most comfortable. As participants shared their responses, they were invited to post the notes a wall at the front of the room. With the help of the translator, the groups then worked together to organize the notes and add additional information. Because the notes were in two languages, participants were encouraged to ask if they would like to have any of the notes verbally translated during the discussion. Responses that were gathered during this process were entered into the mapping software at a later time, supported by additional notes that were taken during the discussion.

In creating the individual summaries for organizations, the maps were organized as close to the way the discussion groups arranged the mapped responses as possible. This approach helped ensure that the local knowledge was captured and presented as it was understood by the group. For the aggregate report, the data were coded using a coding scheme developed by Wilder Research that reflected priorities proposed by Blue Cross as well as themes that emerged from the data. Each map was coded by two Wilder Research staff, either together or independently, to guarantee greater reliability.

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OCTOBER 2015