IMPROVING SOCIAL DETERMINANTS OF HEALTH GETTING FURTHER FASTER INITIATIVE:

People, Power, and Partnership Guide

Georgia Health Policy Center

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EXECUTIVE SUMMARY

Every coalition functions within social, political, and economic systems that affect relationships among stakeholders, and their collective capacity to assess and mitigate health inequities. This resource focuses on partnering with stakeholders who are critical to successfully address social determinants of health and may need different types of engagement than core coalition members.

There are a variety of approaches coalitions can use to improve this capacity. This resource provides more information on three that are particularly useful when considering multisector efforts to influence social determinants of health and equity:

1) Improving conversational capacity around difficult or complex topics and areas of conflict that may arise out of diverse sets of values or mindsets
2) Understanding visible and hidden power dynamics among stakeholders, and how to confront them in the context of advancing equity
3) Applying intentional meeting design to plan and facilitate effective engagements with diverse stakeholders

These specific tools align to engage a wide range of stakeholders by emphasizing the value of approaching collaboration from multiple angles and purposefully surfacing unique perspectives of the system(s) your coalition seeks to change to accomplish its goals. This resource guide explores how these actions advance systems thinking perspectives and equity mindsets, as well as how increasing conversational capacity and confronting power dynamics could be particularly useful in current efforts. Thoughtful application of the tools contained in this guide will assist coalitions in building trust with their partners and throughout the communities they serve.

CONVERSATIONAL CAPACITY

Why Do We Need Conversational Capacity?

Conversational capacity is a discipline that can be practiced and improved upon. It is the ability (and intention) to have balanced, open, and disciplined conversations on complex, values-laden topics, and is intended for everyone to learn and co-create new knowledge. It enables individuals and groups to have constructive and growth-focused dialogue about complex or difficult subjects in challenging circumstances. Conversational capacity is a core competency for adaptive leadership, problem-solving, and systems thinking.[1] Within the context of coalitions working on the social determinants of health, it can be a skill to bridge cross-system perspectives, elevate lived experience of communities, and build a culture of collaboration.

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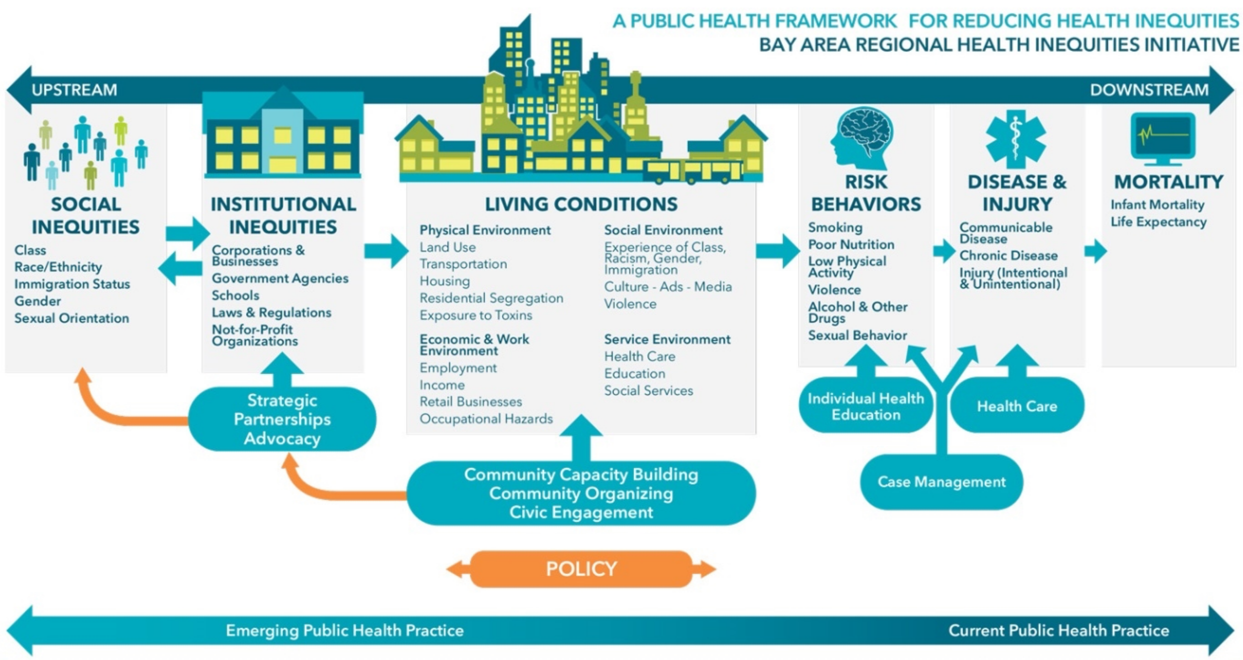
[1] Weber, Craig. (2013). *Conversational capacity: The secret to building successful teams that perform when the pressure is on*. McGraw Hill Professional. https://weberconsultinggroup.net/conversational-capacity/

Efforts to improve health by addressing social inequity can be viewed within a stream of influence, such as that depicted by the Bay Area Regional Health Inequities Initiative's Public Health Framework for Reducing Health Inequities[2] (Figure 1). This framework depicts the upstream-to-downstream drivers of opportunity to promote health and health equity from a public health lens. The downstream factors, on the right of the figure, focus on individuals and their risks, behaviors, and health outcomes. Many of these intervention areas, such as health education and case management, can be considered *technical* or *routine challenges*. These interventions may be complex, but there are often defined, tested practices to successfully improve these health factors. Even when individuals or organizations don't know how to address this type of complexity, they can engage experts who do. It is necessary to address immediate downstream health needs, but not sufficient for achieving and sustaining health equity.

Figure 1: A Public Health Framework for Reducing Health Inequities[2]



Source: Bay Area Regional Health Inequities Initiative[2]

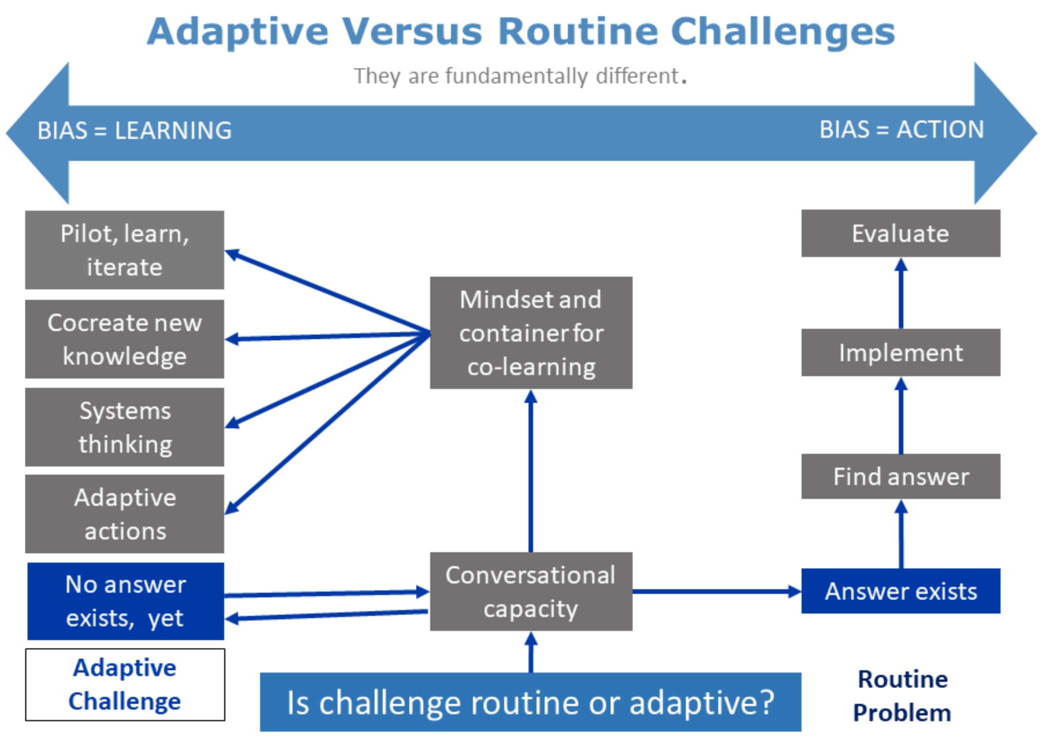
The upstream factors, depicted on the left side of the figure, typically present a different type of complexity. Here, numerous stakeholders create or contribute to living conditions through a patchwork of interdependent policies, organizations, and systems that need to be disentangled, understood, and ultimately influenced to promote equity. Effective solutions to promote health equity by transforming social and institutional factors require building and sustaining strategic partnerships while balancing power and building trust. Engaging partners in upstream efforts often presents particularly uncharted adaptive challenges.

[2] Bay Area Regional Health Inequities Initiative. (2015). *A Public Health Framework for Reducing Health Inequities.*. Retrieved from http://barhii.org/framework/

What Are Routine and Adaptive Challenges?

Routine and adaptive challenges are fundamentally different, and they each must be approached differently.[3] *Routine challenges* are technical problems for which there are readymade solutions, standard operating procedures, and experts that have 'the answer,' even if the challenge requires a great deal of skill. Examples of routine challenges include building a hospital or fixing a broken computer. *Adaptive challenges* are those that are unsolved, new, or have never been seen before, and require collaboration because no single expert has 'the answer.' Poverty and health care reform are examples of adaptive challenges, as is sustainable funding for multisector collaboration. Figure 2 depicts some of the different approaches to these types of challenges.

Figure 2: Adaptive and Routine Challenges



Addressing adaptive and routine challenges requires thoughtful consideration of underlying mindsets and biases, with conversational capacity as a foundational skill needed to do so. Initially, this capacity can be applied to identify whether the identified challenge is routine, adaptive, or both (as is often the case). Once the type of challenge is defined, conversational capacity remains a useful skill for navigating the associated approaches and underlying biases:

1. If routine, in whole or in part, the bias is toward action. There is an answer to the problem available somewhere. This known solution can be quickly identified and implemented, and the results evaluated.

[3] Heifetz, A. R., & Linsky, M. (2002, June) A Survival Guide for Leaders. *Harvard Business Review.* https://hbr.org/2002/06/a-survival-guide-for-leaders

2. Adaptive challenges, however, are complex, and harder to define. There are no readily identifiable solutions. Collaborative partners may define the issue differently based on different perspectives, and because solutions often require intentional exploration of these differences, the bias for adaptive challenges is toward learning.

Organizations or coalitions are frequently structured for action rather than for learning. The latter requires time and willingness to surface and hear new and different perspectives and to synthesize those perspectives to create new knowledge. This may entail difficult conversations between opposing viewpoints. Participants may need to practice emotional regulation and empathy to authentically hear and consider others' perspectives. A bias toward learning calls for identifying and piloting innovative solutions based on newly created knowledge. This mindset is further applied by attending to both successes and failures of these solutions and by committing to the ongoing iterations needed to bring innovations to scale.

Conversational capacity is foundational for this type of work to be successful. It is a skill to practice so that it becomes more intentional, enabling your coalition to build a shared mindset in pursuit of effective solutions. The skillful application of conversational capacity in this space creates a container for co-learning, wherein the synergy of diverse perspectives spurs innovation.

Barriers to Conversational Capacity

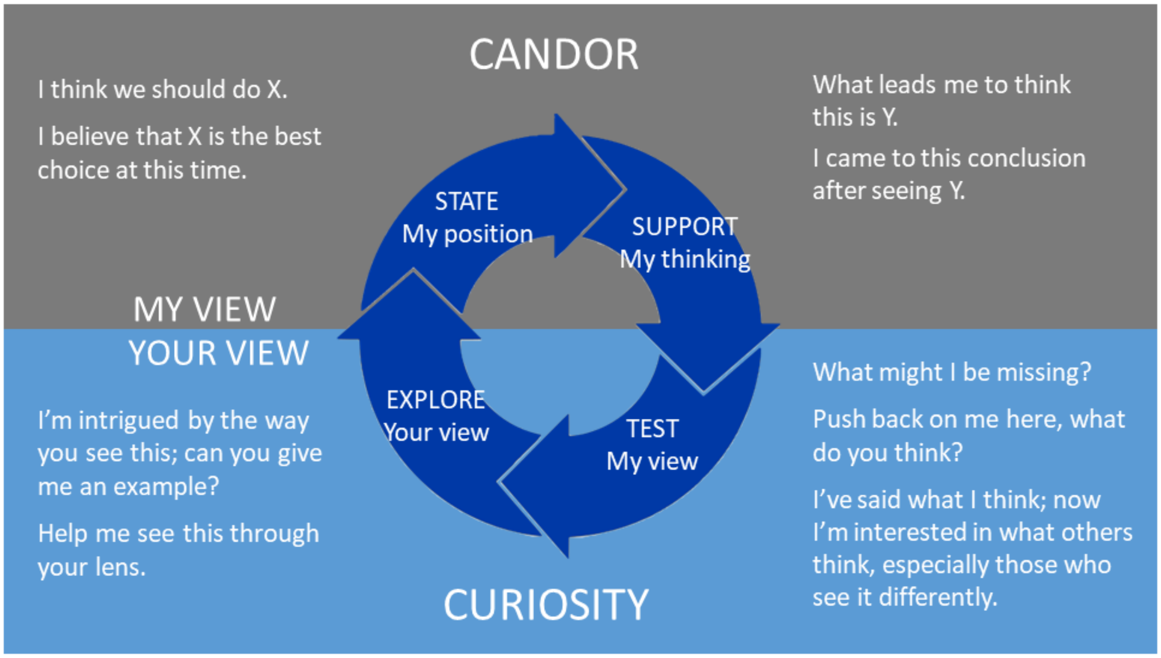
Conversational capacity requires people to find a balance between candor and curiosity. This is challenging because tendencies toward minimizing or winning often make a productive balance hard to find – and maintain. Everyone engages in minimizing and winning behaviors, while we each may have a greater propensity for one over the other based on our unique lived experience, or because certain high-stakes situations may have us lean into one or the other behavior. Often, we are not consciously aware that we are engaging in these behaviors. But the goal of conversational capacity is to become more conscious of your own and others' conversational tendencies.

Minimizing behaviors that pose a barrier to conversational capacity include avoiding conflict, feeling uncomfortable, and not wanting to hurt someone's feelings.

Winning behaviors involve winning the conversation or being right. Those with a tendency to exhibit winning behaviors can often dominate and lead those with minimizing tendencies to withdraw. This prohibits the collaborative learning and co-creation of new knowledge needed to address adaptive challenges.

Figure 3 illustrates how candor and curiosity can be intentionally employed to balance these tendencies.

Figure 3: Using Candor & Curiosity for Conversational Capacity



After an individual states their position, they can test their thinking behind that position by asking others questions such as “Do you see it differently?” or “What am I missing?” After hearing a different position, the first individual can probe further with prompts like: “Your perspective is interesting. I’d like to learn more about what you’ve seen or heard that led you to this view” or “I may need to expand my thinking on this; tell me how you see X.” Conversations where participants bring humility and an intentional approach to balancing candor and curiosity are foundational for the collaborative relationships needed to sustain multisector partnerships that co-create and apply new knowledge.

Five Tips for Putting Conversational Capacity into Practice:

1. Agree that the purpose of the conversation is to learn.
2. Be aware of any fight (‘winning’) or flight (‘minimizing’) tendencies you might have, especially when the topic elicits a strong emotional response.
3. Practice mindfulness in conversations by asking thoughtful questions to explore and test your view in the context of what you hear from others.
4. Embrace differences in perspectives as learning opportunities.
5. Be more skeptical of your own thinking and more curious about others.

POWER DYNAMICS

Understanding power dynamics is essential to addressing social determinants of health.

Figure 4: Cracking the nut of health equity

Source: Baum, F. (2007). Cracking the nut of health equity: Top down and bottom up Pressure for action on the social determinants of health. *Promotion & Education*, 14(2), 90-95.

If health inequities are maintained through lack of power, then we can solve them by combining power with the knowledge of the people who are experiencing social needs, and coalitions like yours can act as the ‘hand’ that brings these stakeholders together.

What is Power?

Power is the degree of control over material, human, intellectual, and financial resources exercised by different sections of society. The control of these resources becomes a source of individual and social power. Power is dynamic and relational, rather than absolute. It is exercised in the social, economic, and political relationships between individuals and groups. It is unequally distributed — some individuals and groups have greater control over the sources of power and others have little or no control. The extent of an individual or group’s power is correlated to how many kinds of resources they can access and control. Power can be:

- Clearly visible in formal and semiformal decision-making procedures
- Expressed in more hidden ways through the influence of agendas and access to the decision-making process
- Largely invisible through the influence over mindsets of the public and key leaders.

Different types of stakeholders will naturally have different manifestations of power relationships associated with their position within the system. How those manifestations of power exist in relation to one another is where inequities emerge or become entrenched, but it is also where equitable solutions can often be found.

- *Vulnerable stakeholders* are most deeply affected by the successes and failures of a policy or program and are often excluded from having influence over decisions about those policies or programs.
- *Powerful stakeholders* have influence over foundational decisions about policy or program options and may (or may not) be affected by those decision outcomes.

- *Implementing stakeholders* play a critical role in how policies and programs are executed; their power is in the everyday routine decisions and actions made in the application of a specific policy or program.
- *Knowledgeable stakeholders* may influence policies and programs by providing information and skills needed by other stakeholders involved in the process.
- *Other affected stakeholders* are likely to be directly or indirectly affected by the policy or program and are neither very vulnerable nor powerful. [4]

Tools for Working with Power Dynamics

This section provides details on how to how to use some specific power analysis tools: the XY Power Graph and Community Power Analysis. These tools can be used for both in-person and virtual settings. They can help coalitions identify key decision-makers or stakeholders who have power over a specific issue, as well as the people and organizations who can influence those with power.

These can be difficult conversations to have with partners. It is recommended that key coalition partners participate, individually or as a group, in a recognized training on equity and social justice (see here for additional NACCHO resources).

Another strategy for effective discussions, Intentional Meeting Design, is covered in the following section. In order to prepare for conversations about power, meeting planning should explicitly address the ways that internal power dynamics will be addressed during the event:

- How will conversations be facilitated to ensure that all participants, especially those who have experienced systematic disempowerment, will feel safe, heard, and validated while expressing their perspectives and experiences?
- Does the facilitator(s) for the session have demonstrated experience in creating such a climate?
- Is the session structured effectively to allow this climate to occur? In some cases, the meeting design team may choose to strategically divide participants into smaller groups for a power exercise, in order to manage known conflicts or dominating voices.
- Does the distribution of participants avoid power imbalance? Ensure that more vulnerable or historically excluded stakeholders are adequately represented.
- Are the participants ready to have this conversation? The meeting design team may need to check in with stakeholders in order to assess their readiness. If participants seem unable to implement conversational capacity, as described above, on this topic, it may be necessary to plan additional sessions prior to the power dynamics activity in order to build conversational capacity or equity awareness.
- Discuss ground rules before starting the exercise. Ground rules for difficult conversations can include ‘assume positive intent,’ ‘share the air,’ ‘be present, listen to learn.’

[4] VeneKlasen, L., Miller, V., Budlender, D., & Clark, C. (2002). *A new weave of power, people & politics: the action guide for advocacy and citizen participation*. Oklahoma City: World Neighbors.

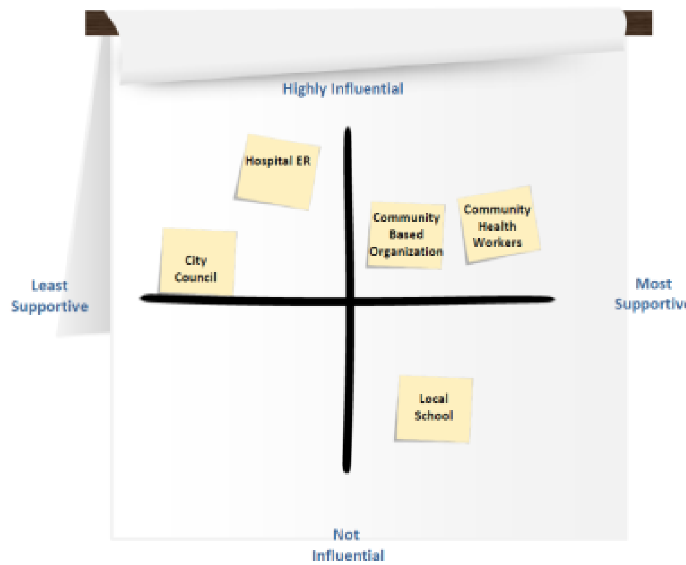
XY POWER GRAPH[5]

This activity (Figure 5) ranks stakeholders according to two dimensions: how influential they are over a particular issue or initiative, and how supportive they are of it. The activity should be done collaboratively with coalition members. Detailed facilitation instructions are posted in MyNACCHO Virtual Communities.

Instructions:

1. Create a comprehensive list of your stakeholders, including affected stakeholders, policy-makers, experts, and all others
2. Create a large workspace divided into quadrants with a horizontal arm (the X-axis of the XY graph) and a vertical arm (the Y-axis).
3. Using sticky notes for in-person work, or an appropriate analog for virtual collaborations, place each stakeholder on the XY graph, given that:
    a. the more powerful and influential, the higher on the map
    b. the more supportive of your governance advocacy objective, the further to the right-hand side ('neutrals' central, objectors on the left)
4. Highlight any significant differences between departments or key individuals within the same organization.
5. Brainstorm the reasons behind the positions on the graph chosen for each stakeholder. Does everyone agree? It is particularly important to discuss situations in which different participants perceive the role or attitude of a key stakeholder differently, as this may reveal indirect or hidden power nodes. Take thorough notes and ask many questions:
    a. Are they a supporter, an ally, or uncommitted?
    b. Why do they support or oppose your objective? What is their agenda, either stated or implicit? Their priorities?
    c. What drives them to take this position, and what constraints do they face that might make it difficult for them to move from this position?

Figure 5: XY Power Graph



Source: Community Health Systems Development. (2015). *Power Mapping for Effective Collaboration.* Atlanta, GA: Georgia Health Policy Center.

[5] Community Health Systems Development. (2015). *Power Mapping for Effective Collaboration.* Atlanta, GA: Georgia Health Policy Center.

6. Rearrange the stakeholders on the graph as needed. You can adjust their positioning based on the discussion in step 5. You can also group stakeholders that tend to operate together. In this step, you should seek to reach consensus about the placement of each position, based on authentic input from all participants. The facilitator(s) should be prepared to direct potentially difficult conversations, in which participants have had conflicting experiences with some of the key stakeholders.
7. Lastly, discussion should focus on stakeholders that have been identified as particularly influential. Discuss potential strategies for engaging those stakeholders that have been highlighted through this tool:
    a. For potentially influential stakeholders, how can you sustain involvement and support? How can you learn about and address the concerns of those who oppose your work?
    b. For less influential stakeholders, how is your coalition including them in defining the issues, and identifying and implementing solutions?
    c. How will you learn more about stakeholders whose level of influence or support was unknown?

COMMUNITY POWER ANALYSIS

Community Power Analysis is a tool to understand the opportunities and barriers for a healthy physical, social, and economic environment, and to identify the entities that influence them. Rather than a needs assessment, which tends to create a deficit-based view of communities that experience inequities, the Community Power Analysis is intended to identify opportunities and external barriers. This activity should be led by affected stakeholders. Coalitions can play an essential role as conveners, facilitators, and subject matter experts on particular sectors, agencies, or jurisdictions. The output of the analysis will help connect identified problems and opportunities with potential strategies.[6]

Instructions:

1. Prior to the session, collaborate with community partners in order to convene a group of community members with relevant lived experience
2. Begin the session with a discussion of participants' goals.
    a. Some coalition members may be particularly focused on selecting tactics to address a specific social determinant of health, while others may want to get a more general picture of the forces that shape the environment where they live, work, and learn.
    b. It is important to incorporate potentially diverse goals of different participants. This will build or maintain trust between affected stakeholders and other coalition members, and reduce the risk that planned interventions will fail due to unaddressed barriers to well-being and opportunity.

[6] People's Institute for Survival and Beyond (n.d.) *Undoing Racism Workshop* https://pisab.org/

3. Draw a representation of the community in the center of a large workspace (a flipchart, whiteboard, or virtual whiteboard), as shown in Figure 6. Depending on group dynamics, community stakeholders may lead the drawing, or a facilitator might draw with input from community participants. The activity can also be conducted on a printed map or aerial photo.
4. Facilitate a relatively unstructured discussion and brainstorming session around the barriers and facilitators that individuals encounter seeking health-supporting activities and services. This discussion may focus around the coalition's focus areas, such as food access, positive social connections, healthcare access, clean air and water, physical activity, etc.
    a. Depict the barriers and facilitators on the drawn community representation with words, pictures, or symbols.
    b. Do not constrain input at this point. For instance, if transportation is identified as a barrier to food access, it should not be excluded even though it is outside of the food system. This will provide a more comprehensive view of lived experiences and potential solutions.
5. Once barriers and facilitators are depicted, discuss the sectors, public agencies, businesses, and other influential organizations or people who control them. Depending on the results at this point, it may make more sense to discuss one barrier/facilitator at a time, or to discuss the entities that influence many of them.
6. Ask if any important factors or entities are missing.

Figure 6: Community Power Analysis Depiction

Source: People's Institute for Survival and Beyond (n.d.). *Undoing Racism Workshop* https://pisab.org/

Example: A nonprofit organization was working to build a community-based coalition in a neighborhood facing many inequities, including poverty, unemployment, low educational attainment, and more. The neighborhood also had disproportionately high rates of chronic disease, such as heart disease and cancers. The nonprofit sought to start a conversation with community members about physical activity and nutrition, in order to directly address their chronic disease rates. With the help of a health equity consultant, the organization, their coalition partners, and community stakeholders were able to have an effective conversation about the social determinants of health behind these disease rates. In this conversation, community stakeholders discussed the barriers they actually experienced to being healthy: vacant lots and overgrown parks that made them feel unsafe walking around the neighborhood, lack of affordable transportation to schools and jobs, and inadequate food selections in local stores. They also highlighted some assets and opportunities in the area amenities.

7. When the power representation is complete, use good meeting design practices to facilitate a discussion of the reasons to prioritize particular factors and entities.

a. Probe for reasons such as one agency or governing body that influences multiple factors, or a particular barrier that is preventing access to healthful resources.

Example: In the case described in step 4, above, the coalition used a series of meetings to discuss potential interventions for their barriers and opportunities, and analyze the feasibility of implementing them based on the decision-makers for each. For instance, while vacant lot revitalization was appealing, the difficulty of locating and obtaining permission from absent property owners, and the lack of legislation giving the city authority to manage the lots made this intervention lower in priority. On the other hand, relationships with the city parks department and a 'friends of the park' group supported improved park maintenance – but was not able to increase local hiring.

INTENTIONAL MEETING DESIGN

Coalitions conduct a wide variety of engagement activities involving partners and stakeholders in the communities they serve. Engagements can range from one-on-one conversations to complex multi-day capacity-building workshops. Thoughtful planning in advance of these interactions offers opportunities to harness conversational capacity and to address power dynamics in ways that achieve a given purpose. Some basic practices to foster a more intentional mindset for designing meetings (and other types of engagements) are considering the Circle-Triangle-Square approach, convening representative meeting design teams, and creating detailed facilitation agendas designed to achieve a clear purpose and associated objectives.

Circle-Triangle-Square Approach

This approach is a thought exercise developed by Mark Reardon that provides a simple framework to consider what outcomes an engagement intends to achieve, what participant mindsets need to change to achieve that outcome, and what actions can be taken in the context of the engagement to achieve that change.[7]

Figure 9 illustrates how this approach can be applied with a hypothetical example. This exercise is meant to be an informal way to think through these three critical dimensions of an engagement before starting the actual design process.

1. Circle: start here and consider what you want the outcome to be for participants. What do you want them to be doing differently at the end of your time together? In the hypothetical example, the outcome we would like to achieve through our engagement is "Community members affected by our initiative are more involved with implementation."
2. Triangle: once you have an idea about the change you want to see, think about your stakeholder participants and how they may need to shift their view of the issue(s) at hand in order to get to the desired change. What is their current mindset, and what mindset is needed for the desired outcome? In our example, we believe that most stakeholders currently see community members as the target of our intervention and view success as contingent on those community members adopting a certain behavior change. The nuanced shift in mindset we believe our

[7] Reardon, S, M. (2018) *What You Say Matters, Now Make it Stick.* https://markstevenreardon.com

stakeholders need to achieve is to see those community members more as an integral part of designing and implementing the intervention, and that this level of involvement will determine overall success.

3. Square: Once the needed mindset shift is identified, you can consider what you are able to do in the context of the given engagement that promotes that shift. If the engagement is a long-term series of convenings, you can think about how each part of the series could focus on a specific aspect of mindset shift; if it is a one-time meeting, you want to think about how to approach the needed shift within the limits of that single engagement. In our example, we assume the context is a day-long “Initiative Planning Summit” where key stakeholders are coming together to learn about the initiative and inform a strategic implementation plan. To facilitate the needed shift in mindset to achieve the desired outcome, we propose having a dedicated session on addressing power dynamics relative to decisions about the intervention and creating space on the agenda to have affected community members share their experiences with intervention proponents. Both of these actions could help our stakeholders think differently about how community members can be involved in this hypothetical initiative.

It is critical to note that completing this exercise is intended as a way to organize thoughts about an engagement before embarking on more formal design activities. Outputs here should inform the recruitment of a design team and serve as a starting point for more formal development of a facilitators’ agenda, especially when defining the meeting purpose and objectives.

Figure 9: Circle-Triangle-Square Approach to Engagements Example

The context where you can work to shift mindsets	The mindset shifts or changes needed to get to the desired outcome	The outcome you would like to achieve
Day-long “Initiative Planning Summit” with key implementation stakeholders: • dedicated session on addressing power dynamics • have affected community members share their experiences as part of the summit	Current mindset: Community members are the target of the intervention; their uptake will determine success Mindset needed for outcome: Community members are an integral part of the intervention; their involvement at all stages will determine success	Community members affected by our initiative are more involved with implementation.

Source: Reardon, M. Facilitation Island Training Workshop conducted for Georgia Health Policy Center.

Meeting Design Teams

There are often specific members of a coalition or collaborative who are charged with hosting or convening partners and stakeholders as part of the overall effort. While responsibilities for this role may vary widely, it can often fall to a single individual or partner organization. To ensure that the design of a meeting is not developed in isolation, a good practice is to form an inclusive and representative group of stakeholders who will come together to support partners in that convening role. This is the meeting design team.

Having a diverse design team allows meeting planners to better anticipate different values, experiences, and concerns likely to be present when stakeholders convene. This practice can help disperse the power of the convener by including representatives of likely participants, leading to more successful engagement during the event. Shifting power over agenda setting and design to a more diverse team also helps to identify issues that may not be apparent from the perspective of the meeting host.

For example, if planning a coalition meeting with three major partnering organizations and key community representatives, an ideal design team would include at least one person from each organization and at least one community representative in addition to the main convener. The design team would then meet as available early in the design process to provide input on meeting purpose and objectives (perhaps informed by the Circle, Triangle, Square approach described above). A subsequent convening of the design team would occur around mid-way through the design process to consider what content and activities are likely to be best received by the larger group. Then near the end of the process, the team would have an opportunity to provide input on a final design, including any potential logistical challenges. The design team would then be acknowledged during the coalition meeting to thank them for their time and to illustrate to others the collaborative approach behind the agenda.

Critical factors to consider in selecting a meeting design team include:

- <u>Feasibility</u>: Time is often the limiting factor here, both in terms of the amount of time available for the meeting planning process itself and the amount of time potential design team members have to offer. There may also be specific rules and protocols in place that must be followed in some contexts and might limit full implementation of this collaborative approach.
- <u>Representation</u>: Each type of coalition and engagement will warrant specific consideration of who could be included in a design team. Diversity in perspectives is key, and that can arise from individual characteristics (sex, gender, race, ethnicity, age, etc.), from stakeholder roles (member of an affected community, evaluator, subject matter expert, elected official, etc.), or from organization type (community-based organization, local government, business, academic, etc.). Within the bounds of what is feasible for the context, the design team should aim to be as representative of the diversity of potential participants as possible.
- <u>Power</u>: Similar to representation, a design team should strive to include perspectives from people with differing levels (or types) of power within the system. An inclusive design team can begin to address power imbalances before they potentially derail the main convening. If the design team can develop or model an approach in its process, then a similar approach can be employed with the full group of participants to promote a more inclusive and productive meeting.

Facilitation Agendas and Design

Documenting the plan for a given engagement or meeting is a critical aspect of being intentional with meeting design. While relatively straightforward, having a clear design document that guides your meeting facilitator(s) through each portion of an event is often a missed opportunity. Taking the time to collaboratively plan with the design team in this format can lead to more productive meetings. The facilitators' agenda is not the same as the participant agenda or the slide deck containing relevant content and talking points. This is a specific document that serves to tie all aspects of the meeting together based on a clear statement of the purpose (Why are we here together today?) and objectives or goals (What do we want to accomplish during our time together?).

One approach used by the Georgia Health Policy Center is illustrated in Figure 10 using an excerpt from the facilitators' agenda from the June 9, 2021, Subcohort Workshop. Key components include:

- The meeting title: Which meeting is being described in this document?
- The date and time of the meeting: When will the meeting occur and how much time is available? The amount of time available can be considered the 'budget' for meeting content as ideas start to take shape.
- Participants: Who is expected to be at the meeting? Knowing how many people to expect and a little bit about who they are will inform the design. A meeting of ten community leaders will naturally require a different plan than a meeting of 200 multisector stakeholders. If the perspectives of expected participants are not reflected in the design team, consider diversifying that team if feasible.
- The meeting purpose: Why are we together today? Any part of the design that does not align with this defined purpose should be reconsidered. A representative design team can help to develop a purpose statement that will resonate with participants.
- Meeting objectives: What do we want to accomplish during our time together? Objectives support the purpose and are another place where a design team is particularly useful. If there are pieces of the design that do not support at least one of the stated objectives, they should be reconsidered.
- Facilitation Agenda Table: This is where content and activities are developed and organized to support the stated purpose and objectives. Meeting facilitators should be able to look at the final version of this table and know what they are doing, when they are doing it, and how they are going to do it - even if they were not active in creating the design. The columns of the table are:
    - Time: estimate of the amount of time each section will take to complete. This becomes the schedule for the meeting and might be shared in whole or in part on a corresponding participants' agenda.
    - Activity: the section 'title' or brief label to know what will be happening during the corresponding timeframe. These are what would appear on a corresponding participants' agenda.

- Description: details about how each section/activity is envisioned to take place and critical points facilitators and/or speakers should make. This is also where detailed notes about logistics and/or processes are included.
- Lead: designates the main facilitator or speaker for each section. If there are multiple facilitators or speakers, this column provides a quick reference for each to know when they are supposed to be making their contributions.
- Materials/Logistics: briefly notes what is needed to support the design of each section. If there are specific slides, handouts, Zoom functionality, or other support functions needed, this is where they are noted. If there are dedicated staff to support the administration of a meeting, this is the column that will help them know what they need to have ready and when.
- Associated Objectives: lists the objectives that are supported by each section. This column can be particularly useful (along with the time column) when making decisions about what to cut, combine, or adapt as the design evolves. This information is also useful for demonstrating to members of the design team and/or participants the intentionality behind each aspect of a meeting.

Figure 10: Example Facilitation Agenda

People, Power, and Partnerships for Getting Further Faster

FINAL version 6.9.21: Facilitators' Agenda for Sub-Cohort Workshop with NACCHO/ASHTO Getting Further Faster (GFF) Coalitions addressing Social Determinants of Health (SDoH). Session to be led and facilitated by Georgia Health Policy Center (GHPC) as the designated partnerships & Sustainability Training and Technical Assistance (TTA) Provider.

Date & Time: 6.9.21 **|** 3:00-4:30ET **Participants:** 50-70 representatives from coalitions, plus a few observers (based on reported attendance at 6/7 workshop).

Purpose: This session will focus on partnering with stakeholders who are critical to successfully addressing social determinants of health and may need different types of engagement than core coalition members.

Objectives:

1. Build trust through sharing across coalitions
2. Note connections to systems thinking perspective and equity mindsets
3. Explore conversational capacity as a skill to bridge cross-system perspectives and elevate lived experience of communities
4. Grow understanding of power dynamics and how to confront them in the context of advancing equity
5. Discuss how conversational capacity and confronting power dynamics could be useful in current efforts
6. Introduce and model aspects of intentional approach to meeting design

Facilitation Agenda

Time (ET)	Activity	Description	Lead	Materials/Logistics	Associated Objective(s)
3:00 (5 min)	Welcome & What's Up Pairs	**Start Recording** General Welcome Empty your cup activity: What's up?/reflective listening. Participants randomly assigned to pairs; in breakouts they have 3 minutes. Quickly decide who is partner 1 and partner 2. Partner 1 asks 2, "What's up?". Partner 2 responds in 1 miute or less, then partner 1 summarize what they heard in 30 seconds or less. Then repeat for partner 2 asking "What's up?". Quick popcorn back in full group if anyone wants to share.	Jimmy	Slide **Zoom** breakouts, random paris (half of total participant number less co-hosts?), 3 minutes	1,6
3:05 (5 min)	Framing & Agenda	Quick review of purpose, objectives, and agenda Perspectives video clip as bridge to Leigh	Jimmy	Slides	2,6
3:20 (15 min)	Conversational Capacity	Tie to systems thinking, mental models/perspectives/SSM, BARHII, technical/adaptive Explore CC as a way to build trust, and emphasize value of trust in building accountability	Leigh	Slides	2,3
3:35 (5 min)	Quote Activity	You have to be vulnerable to learn/listen and build trust **Waterfall chat:** Sit with this quote for a few minutes; think about it in the context of your coalition's work; briefly type what feelings it evokes in the chat BUT DO NOT SEND until we ask you to; all share at once, creating 'waterfall' effect in the chat. Facilitator reads/reacts and asks participants to share a little more if they're wiling.	Jimmy	Slide **Zoom** Chat	1,3,6
3:45 (10 min)	Power Dynamics	What is power? Participants put their brief definition in **chat** Review a definition and some dimensions Relate to types of stakeholders Connect power dynamics to SDOH and equity Some key questions/tools	Michelle	Slides **Zoom** Chat	1,4
25 min	Power Dynamics: Revisiting Assumption Dominos	(15 min) **Zoom Breakout** groups: • Room 1: Food access + social isolation • Room 2: Community-clinical linkages • Room 3: Built environment + tobacco Think about your primary outcomes from 5/25 Assumption Dominos Activity **See facilitator instructions** (10 min) **Back to full room** – Facilitators briefly share questions/TA needs that came out of groups - If focusing on questions that came up in rooms, allow space for participants to share insights by posing to the full group for discussion. Also share insights . . . tie back to feelings? How can your work bring them together to define and solve the problem?	Michelle	3 **Zoom** Breakout Rooms (15 min) PDFs from 5/25	1,3,4,5
15 min	Tying it together…Intentionally Designing Interactions	Beyond 'meetings': using 'Circle, triangle, square' to be intentional about a range of interactions - share pic of 'real' version for this workshop Meeting design teams and facilitation agendas Share thinking behind the design of today's session thus far to illustrate concept	Jimmy	Slides	1,2,3,4,5,6
10 min	Buffer time and Wrap-up?	Meeting Evaluation Link: https://gsu.qualtrics.com/jfe/form/SV_5zkyJ5pWy3Kgz8a TTA Office Hour tomorrow afternoon	Leigh?	Survey link in **chat** Slide	
4:30	Adjourn	**End Recording**			
15 min	Facilitators Debrief	Plus/Delta: What went particularly well? / what's a change to consider for future engagements?			

Source: Georgia Health Policy Center

PUTTING RESOURCES TO ACTION

Working with a diverse group of stakeholders can open doors and create new opportunities, but is not without its challenges. Being intentional about engagement activities in terms of the purpose(s) of engagement activities, desired outcome, and who to include, and ensuring cultural competency in the design and facilitation can help create the sustainable and productive collaboration needed to address the unique needs of your community and to promote the upstream and downstream drivers of health and health equity. Used together, the approaches and tools described in this document can help overcome common challenges and achieve health equity gains. These strategies and skills can take time to master, so we encourage you to continue practicing them, evaluating your results, and learning and achieving together.