

## INTRODUCTION

In 2016, the **California Accountable Communities for Health Initiative (CACHI)** was launched to develop cross-sector tables called Accountable Communities for Health (ACHs). ACHs tackle complex health issues by developing multi-dimensional solutions and centering community voice and equity.

In early 2022, as the initial cohort drew to a close, CACHI conducted a series of discussions with ACH leaders and

community partners who participated in the initiative.

They shared their reflections on the benefits and challenges of developing an ACH and what difference they believe ACHs make in their communities. As CACHI embarks on a new phase of activity, we hope these findings and perspectives, drawn from those sessions, will help new collaboratives join this effort.

## THE ACH IS THE NEW CIVIC INFRASTRUCTURE

CACHI participants said that the ACH changed how they do business, for the better.



The bridges that have been built across different sectors are amazing and were not the case a few years ago. Everyone sees the bigger wellness concerns that we all share. We have common vocabulary. Now we talk about how to more deeply integrate what we offer—the conversations are at a different level.

—Healthy San Gabriel Valley



People keep showing up. Other initiatives have dwindled as they go along and that's not happening here. And people ask us for help, even on topics beyond our original topic.

—Humboldt Community Health Trust



## COMMUNITY VOICE IS CENTRAL

Authentic, meaningful community and resident engagement provide the lived experience necessary to identify issues and find solutions.



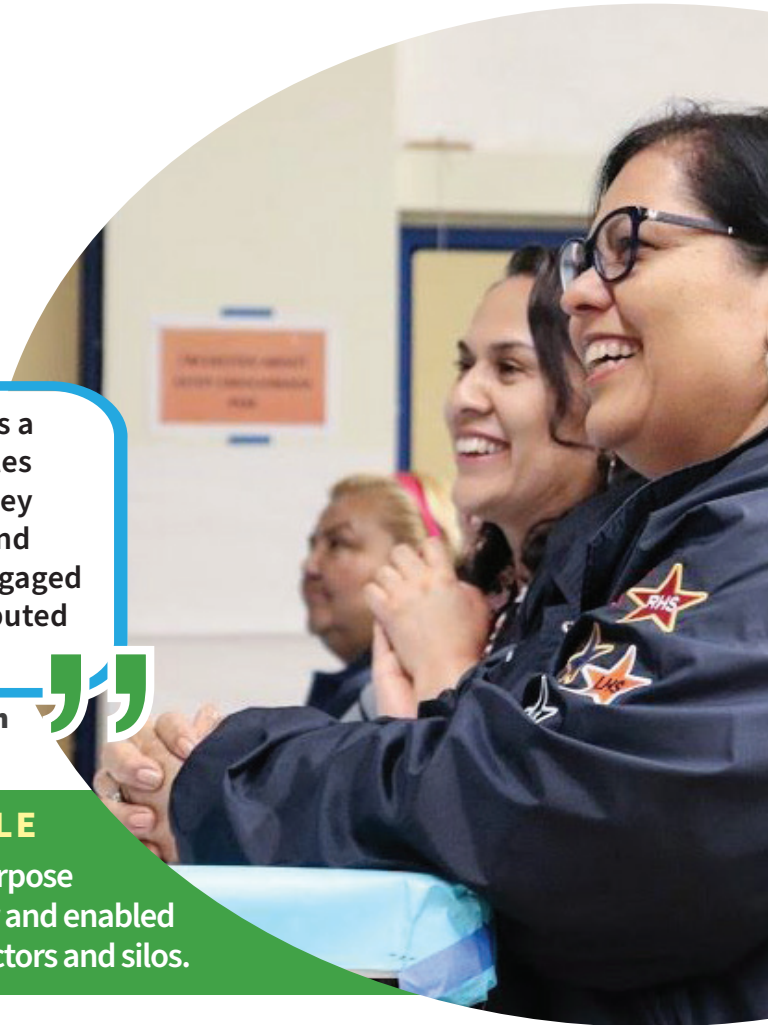
“ We are more seriously engaged with our residents and they've helped us to identify our initial focus areas. Social connectedness had not been on any of our minds—that came from the residents.

—West Sacramento Health Education Council



“ Getting residents engaged in leadership roles was a challenge at first. But then we started finding roles within our work where the residents could see they could have a larger impact on their community and what's happening around policy. They stayed engaged in the process, attended all the meetings, contributed to the discussions.

—Reinvent South Stockton Coalition



### IT HELPS TO SET A BIG TABLE

Carefully framing a broad common purpose brought members of the ACH together and enabled essential partnerships that crossed sectors and silos.

“ We took a broad definition of our issue. That helped bring more partners to the table and create a larger tent or umbrella. Picking one disease puts us on the wrong path. The work we are doing is impacting all our health. We are selling ourselves short when we focus on just one disease.

—San Diego Accountable Community for Health



“ Broadening our focus kept people at the table and we were able to make progress on multiple issues. For us it was not a single health condition, but how do we come together across different health issues to address health in our community.

—Imperial County Accountable Community for Health



## RELATIONSHIPS AND TRUST ARE BUILT OVER TIME

It takes time and intentional effort to develop the relationships that are essential to building trust.



“ We convened a group of what I call ‘combatants.’ They had been working in their silos—they would yell at each other, take opposing sides, blame each other. Bringing that group together to let it air out and create a better understanding of what was going on washed over many issues. Once those groups learned to share, in a larger sense, that changed how people worked across issues and sectors. It’s about how people work together differently than they ever have—how partners come together across sectors, and how important it is that everyone be at that table. ”

—Imperial County Accountable Community for Health

“ You have to have patience. We have challenging personalities who are all in the same room to help move the work together collectively. Historically, they didn’t work together because they were in competition for funding—so change management was essential. ”

—All Children Thrive Long Beach



## GOOD GOVERNANCE IS INCLUSIVE & PROACTIVE

It is important to clearly define how ACHs are structured, who will be involved in governance and how people will work together. The resulting governance models are more inclusive and distributed than would have been possible before.

“ Who sits at the governance table is a really important question. Doing another survey about what the community wants is not the answer. If we’re going to shake up the normal way of doing things, we have to shake up the power dynamic. We had to build an ongoing structure, where either the organizations who are working with community or community leaders themselves sit at the table. ”

—Health Action Sonoma County

“ What worked really well...was when we had committed public health leadership coupled with strong, visionary, charismatic CBO leadership and a strong resident leader. When we had that trifecta, things were moving and shaking in all the right places. ”

—East San Jose PEACE Partnership



## TRUST IS REALIZED IN PIVOTAL MOMENTS

Once relationships and trust were built, they became the foundation for deeper, cross-sectoral work and community resilience.



“ The trusting relationships that were established led to a very noncompetitive environment and helped us to work together better for the benefit of the community. The work on governance and relationship building allowed us to respond to the needs of the community during the pandemic in ways we otherwise couldn't have.

—West Sacramento Health Education Council

“ We got a phenomenal response from all our partners when applying for federal funds, even though they weren't necessarily going to be getting any money. That kind of response from everyone was exciting, and motivated everyone to keep working together.

—Healthy San Gabriel Valley



## PATIENCE & PERSISTENCE ARE KEY

Developing an ACH takes time, and isn't always easy, but it is worth the effort. With the right support, tools and guidance, ACHs can navigate the comprehensive, multi-year approach needed for community change.

“ Some of our efforts didn't bear fruit in year one but are starting to flourish now. We're now ready to leverage the training we gained. All of those things have been so powerful. We're excited and grateful for what we've been able to achieve.

—Boyle Heights Health Innovation Community Partnership

“ You can have it all, you just can't have it all at once. We needed to think through our capacity and bandwidth. On reflection, we needed more pacing and phasing to maximize our impact.

—San Diego Accountable Community for Health

