Aligning **Systems** with **Communities** to Advance **Equity** through **Shared Measurement**

Guiding Principles

AIR®
AMERICAN INSTITUTES FOR RESEARCH®

Robert Wood Johnson Foundation

Contents

Introduction

"I think the system is designed to not be equal, and for it to work for us, we need to be part of the process. In order to have an equal role, we have to have a seat at the table and not on the menu. We need to be there, be activists to be heard. The system is designed to keep us outside, so we need to make that space. We need to see that people who are being impacted by these decisions being at the table, being compensated for their time, taking their voices seriously, and being treated fairly and with respect."

— Community resident, Denver, CO

A Vision for Shared Measurement that Aligns Systems with Communities to Advance Equity

The various systems within communities—including medical care, public health, housing, education, transportation, justice, and human services—directly influence the health and well-being of community members. These systems often operate independently from each other in silos, with each system's policies and practices solely reflecting their own bodies of knowledge, producing and reinforcing fragmentation.

Further, these systems' policies and practices have perpetually excluded, marginalized, and disadvantaged some communities of people—especially people of color, creating long-standing inequities in health and well-being. Yet these inequities cannot be attributed to, or addressed by, any single system or sector. Community members understand the interconnectedness of social factors that contribute to their health and well-being (e.g., health, education, nutrition) and know that achieving equitable health and well-being requires a holistic view and approach by all the systems in their communities. As one Chicago resident explained, people know their community is changing for the better "when holistically they are able to get all of their needs met. I should not have to go to [other neighborhoods] in order to get my needs met. Everything that I need should be within my community because that's how my community thrives."

From communities' perspectives, systems must be aligned because each system cannot independently address the holistic concerns of community members. To break down silos and effectively address these inequities, systems must work together with each other and with community members to collectively align their actions with the needs and priorities of the communities they serve, particularly communities that historically have been harmed the most. One way to do this is with shared measurement.

What Is Shared Measurement?

Shared measurement is using a common set of measurable goals that reflect shared priorities across systems and with community members.

The process of shared measurement includes:

- Defining what to measure; how to measure; where, when, and from whom to collect data; and why the measures are important;

- Choosing specific metrics, data sources, and methods;

- Using measurement to support cross-systems alignment; and

- Understanding what measurement means in the context of communities' own history, narratives, and experiences.

Why Use Shared Measurement for Alignment Toward Equity?

Shared measurement has the power to create change in systems' policies, practices, and norms to transform measurement from a tool that reinforces the status quo to one that shifts power to communities by:

- Defining collective goals and mobilizing collective action;

- Monitoring progress toward goals and evaluating success;

- Generating buy-in and trust among different systems and communities; and

- Creating benchmarks for accountability and shared learning to mitigate and rectify harm.

Looking at efforts across the United States, when communities and systems partner together around shared measurement to advance equity, it can lead to tangible improvements in outcomes, such as hospitalizations, infant mortality, reading proficiency, and homelessness. For example, the Cincinnati All Children Thrive initiative collaborated with more than 30 organizations and community members to work toward the goal of making Cincinnati's children the healthiest in the nation through strong community partnerships. Community members co-designed programs by identifying important issues in specific neighborhoods. They also co-lead the improvement teams that participate in implementation, monitoring, and measure tracking. In the program focusing on reducing racial disparities in birth outcomes, this community partnership has so far shown a 24% decrease in Black infant mortality rate compared to the previous 5 years.

In this initiative and others, we've seen that alignment rises from strong, equitable partnerships undergirded by trust and humility; authentic, long-lasting commitment to equity; a shared, bold vision for growth; and inclusion of diverse perspectives that recognizes communities are not a monolith and amplifies voices that historically have been suppressed or dismissed or that have gone unheard. When

used as a tool for alignment, shared measurement focuses on measures that are meaningful to all partners and goals for success that are actionable and accountable to all partners.

Guiding Principles to Align Systems with Communities to Advance Equity through Shared Measurement

The American Institutes for Research (AIR), with funding from the Robert Wood Johnson Foundation, developed five Guiding Principles to inform measurement that effectively aligns systems' actions with the needs and priorities of the communities those systems serve, particularly communities that historically have been harmed the most by inequities. The AIR team, including consultants in equity and community engagement, developed these principles through a modified Delphi process in partnership with an 18-member expert stakeholder panel and a seven-member steering committee consisting of leaders in cross-systems alignment, measurement, and community engagement from across the nation (see Appendix A for a list of contributors and Appendix C for a methods overview).

Measurement that aligns systems with communities toward equitable outcomes:

1. Requires **upfront investment** in communities to develop and sustain community partner capacity;
2. Is **co-created** by communities to center their values, needs, priorities, and actions;
3. Creates **accountability** to communities for addressing root causes of inequities and repairing harm;
4. Focuses on a **holistic and comprehensive view** of people and communities that highlights assets and historical context; and
5. Reflects **shared values** and intentional, long-term efforts to build and sustain trust.

While aspirational, these principles and accompanying guidance for putting them into practice intend to show how community members, system leaders, service providers, and policymakers actively engaged in cross-systems efforts can use shared measurement as a tool to align decisions, policies, and practices toward equitable health and well-being. It is through sustained, collective, and intentional actions that progress toward equity is achieved.

In applying these principles, we encourage all partners in shared measurement to have transparent discussions about what key concepts and terms mean within their own context. We have provided a framework and some definitions as a starting point to these conversations in Appendix B. In addition, partners are encouraged to co-define roles and norms for transparency and accountability.

Five Guiding Principles for Using Shared Measurement to Align Systems with Communities to Advance Equity

Measurement That Aligns Systems with Communities Toward Equitable Outcomes...

Requires **upfront investment** in communities to develop and sustain community partner capacity

Is **co-created** by communities to center their values, needs, priorities, and actions

Creates **accountability** to communities for addressing root causes of inequities and repairing harm

Focuses on a **holistic and comprehensive view** of people and communities that highlights assets and historical context

Reflects **shared values** and intentional, long-term efforts to build and sustain **trust**

1. Requires Upfront Investment in Communities to Develop and Sustain Community Partner Capacity.

- Co-design of measurement requires upfront and sustained investment of time, money, and other resources to build and strengthen economic and social assets in communities through activities such as job creation, skill building, racial equity training, and local events to foster social cohesion, which directly address existing challenges.

- This investment is essential to building authentic partnerships among stakeholders engaged in measurement, including community members; community-based organizations; grantmakers; community initiative implementers, anchor institutions, and nonprofit organizations; and local, state, and national leaders.

- Authentic partnership means that all partners have decision-making authority in every step of measurement from start to finish, including the design, data collection, data analysis and interpretation, and dissemination or publishing of results.

- Readiness to advance equitable, authentic partnerships may vary depending on past actions and relationships. Building and sustaining capacity for these partnerships requires all stakeholders to invest time in readiness self-assessment and ongoing self-reflection to check biases and behaviors.

Real-World Examples of Community Investment in Shared Measurement Efforts

How [Cincinnati All Children Thrive (ACT)](#) Has Invested in Its Community: Cincinnati ACT developed an *improvement course* called IMPACT U to build capacity and capability within communities and systems. The course enables people to collaborate across systems, use data in similar ways, and learn how to test frequently and improve. Cincinnati ACT also designed a separate training course tailored for community residents to give them tools to solve problems, build capacity, and create community leaders who can work with systems directly.

Partners: Healthcare, public health, education, community-based organizations

How the [Community Schools Initiative (CSI)](#) Has Invested in Its Community: CSI provides *professional development and technical assistance* to increase the skills and capacity of partners and the communities they work with. For example, the Family League of Baltimore, a partner to Baltimore City Community Schools, launched a summer institute in 2014 to train new community partners on ways to develop and fulfill a results-based vision. This investment is essential for identifying resources, funding sources, and developing buy-in to build and sustain support and interest in the community school.

Partners: Healthcare, government, philanthropy, commerce, community-based organizations, faith-based organizations, social services, occupational development, sports and recreation

2. Is Co-Created by Communities to Center Their Values, Needs, Priorities, and Actions.

Co-creation requires shared power, diversity in perspectives, and shared ownership of data.

Shared Power

- As co-creators, power is shared such that no one entity dominates the measurement process or dictates the concepts measured. Checks, balances, incentives, and mandates—where required—are established to avoid perpetuating existing power imbalances, recognizing that these imbalances directly impact data ownership.

- In creating shared power, it is important to identify multiple and meaningful opportunities for community members to have a clear role; early and ongoing involvement; and power, agency, and decision-making authority at all stages of measurement. This includes:
  - selecting measures
  - making key data decisions, such as what data to use, who will collect data, and when and how to collect data
  - analyzing, interpreting, and making sense of measure results

- refining measurement as needed in response to findings
- deciding how measures will be reported and used, and by whom

Diversity in Perspectives

- All partners co-creating measurement recognize and welcome diversity in perspectives, experiences, culture, and priorities within communities and prioritize marginalized voices in decision making. Recognizing and welcoming diversity means intentionally creating frequent and ongoing opportunities for shared learning through dialogue and partnership among the wide range of stakeholders within communities. Shared learning opportunities reinforce a mutual appreciation for the knowledge and wisdom that each stakeholder brings to the conversation, including the shared and varied experiences of community members, especially with the tangible effects of systems, policies, and practices within their communities.

- Opportunities to partner around measurement are open to a wide range of community partners, with emphasis on supporting and building capacity where needed for partnership among individuals who bring direct lived experience with the systems, policies, or outcomes at the heart of the measurement effort.

- Community members have agency to share their positions, solicited or unsolicited. Communication is open, transparent, and bi-directional with embedded feedback loops.

Shared Ownership of Data

- Data creation is a collective effort with all involved partners as shared owners of the data, especially the communities from which those data are derived.

- Communities have full access and authority to use their own raw and manipulated data. They are recognized as creators of information, not solely recipients of information. Communities evaluate, reexamine, refine, and if needed, reject measurement strategies or interpretations that misalign with or misrepresent them or their goals. Communities' roles as measurement co-creators continues throughout the measurement lifecycle, recognizing that community needs and priorities shift over time.

Real-World Examples of Co-Creation in Shared Measurement Efforts

How San Antonio 2020 (SA2020) Co-Created With Community Members: In SA2020, community members have a clear role as well as power, agency and decision-making authority at all stages of measurement. SA2020 *used a community-wide visioning process* to identify priorities for making San Antonio residents the healthiest in the nation. Community members informed selection of measures to annually track progress toward this vision, and reviewed and approved baseline measures before they were put in use. Currently, SA2020 is asking community members about changes they would like to see in a shared vision for the next decade. "If you have a vision that a community wrote, and said that these are the results we are seeking from our nonprofits, from our elected officials, from our media, from our corporations, and as a community, we are holding you accountable to that—it sort of shifts the way that institutions function, or it should." — SA2020

Partners: Nonprofit organizations, corporations, foundations, local government agencies, educational institutions, member trade organizations

How Cincinnati All Children Thrive (ACT) Co-creates With Community Members: Cincinnati ACT established the *ACT Learning Network* where partners and community members collaborate to identify focus areas. Within the network, community members are part of improvement teams who are responsible for tracking progress and achieving outcomes. The learning network creates frequent and ongoing opportunities for shared learning through dialogue and partnership among the wide range of stakeholders within communities. As part of the learning network, stakeholders and community members meet twice a year to share their learning, have a chance to talk and learn together, and celebrate successes.

Partners: Healthcare, Public health, education, community-based organizations

3. Creates Accountability to Communities for Addressing Root Causes of Inequities and Repairing Harm.

Root Causes of Inequities

- Measurement focuses on root causes of inequities, not symptoms of inequities. This includes measuring the impact of policies, practices, and structures that create and perpetuate inequities, and highlighting how systems affect people in multiple ways (i.e., intersectionality). An example is measuring the effects of racist policies (e.g., redlining) on communities of color.

- Measurement creates accountability for addressing root causes when communities use measurement to identify their needs, define goals, monitor progress toward those goals, and define the ways that root causes harm community members.

Repairing Harm

- To minimize the risk of harm and unintended consequences from measurement, communities shape the purpose of measurement, the stories used to make sense of measured data, and actions taken in response to measurement.

- Communities define when measurement itself causes harm, such as when measuring inequities is used to reinforce negative narratives about communities or when inequities are highlighted but not addressed.

- Communities' roles in assessing real and potential harm begin in the earliest stages of measurement and continue throughout the life of a measurement effort. This includes transparent decisions about who is to be held accountable when measurement causes harm. Transparency in decisions, roles, and actions supports accountability and shared power.

- A diversity of perspectives is needed in monitoring for harm because harm may be experienced differently by different members of a community.

- When communities determine that measurement has created harm, entities using measurement must not dismiss or perpetuate that harm. Rather, those using measurement are accountable to communities through open acknowledgement and transparent, collaborative, restorative actions.

Real-World Examples of Accountability in Shared Measurement Efforts

How the Connect SoCal Initiative Created Accountability: Connect SoCal uses federal environmental justice measures to minimize the risk of harm and unintended consequences from measurement to under-resourced communities. Connect SoCal *hosted a series of stakeholder workshops* with community members and environmental justice groups in which community members shared their concerns and shaped the purpose of measurement, the stories used to make sense of data, and actions taken in response to measurement. For example, community members expressed concerns about the proximity of warehouses and truck routes near schools. In response, Connect SoCal recommended restricting sensitive public facilities, such as schools and hospitals, from being located near industrial facilities or high-volume roadways that pose a hazard to health and safety.

Partners: Association of local governments and agencies from six counties and 191 cities across Southern California
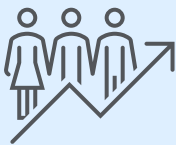
How the LA County Homeless Initiative Created Accountability: By *publicly funding the initiative through voter-approved taxes*, this built an expectation of transparency and accountability to the public and government. Investment of tax dollars to fund the initiative influences how the initiative uses and reports on measures. For example, when planning implementation and evaluation, partners determine the measurement processes and outcomes, evaluate measures regularly, and report them through interactive data dashboards, quarterly progress reports, annual evaluation reports, and 2-year report cards. At public meetings like town halls, the initiative shares these measures and discusses results with stakeholders and community members to track progress and support accountability and public transparency.

Partners: County government, community development and housing, health services, social services, education, children and family services, consumer and business affairs, probation, sheriff's department, philanthropy

4. Focuses on a Holistic and Comprehensive View of People and Communities That Highlights Assets and Historical Context.

- Measurement highlights communities' assets, resilience, and resources, not just areas for improvement. These assets are understood in the context of past injustices (e.g., slavery, segregation, unethical research, mandatory minimum sentences) that have negatively impacted communities and led to the inequities observed today.

- Quantitative information from measurement is balanced with stories and qualitative information from community members to frame measurement around how communities define themselves, their strengths, and expressed needs and goals.

- A holistic focus considers the myriad factors affecting community members' health and well-being, as they define it. These factors may include multiple systems such as healthcare, transportation, food, education, public health, and other human and social services as well as other cultural or lived experiences of health and well-being. It also requires measurement at the individual, system, and population levels.

Real-World Examples of Adopting A Holistic and Comprehensive View of People and Communities in Shared Measurement Efforts

How SA2020 Adopted A Holistic and Comprehensive View: SA2020 takes into account community members' priorities and concerns to get a holistic understanding of the needs and assets in a community. The initiative raises awareness of the historic and systemic root causes of inequities, such as racial segregation, that affect community health. The initiative *reports data disaggregated by race, gender, and locale for its 62 measures to tell a more complete story of its progress*. SA2020 uses measurement to identify targeted, race-conscious opportunities for focused programs, policies, and interventions. For example, breaking down data by race enabled the city to prioritize investment of resources during the COVID-19 pandemic to address the needs of people living in under-resourced communities.

Partners: Nonprofit organizations, corporations, foundations, local government agencies, educational institutions, member trade organizations

How the Vermont Health in All Policies Initiative Adopted a Holistic and Comprehensive View: In Vermont, the health department is working with partners to *measure whether helping residents weatherproof their homes reduces healthcare costs and use*, like emergency department visits and hospitalizations. With support from the Health in All Policies Task Force, a Weatherization+Health initiative is ensuring that when residents receive services to help protect their homes from temperature changes and moisture, they are screened for additional health, energy, and housing needs and referred to necessary support.

Partnerships with hospitals have also provided integrated weatherization and health services to patients who have trouble breathing or who are at risk of injury from falling. Measures to track progress include data collection that will help partners understand the extent to which unhealthy housing conditions are common and allow the health department to track improvement over time.

Partners: Public health, 13 state agencies, departments, and organizations, including health, transportation, agriculture, education, human services, and natural resources

5. Reflects Shared Values and Intentional, Long-Term Efforts to Build and Sustain Trust.

- Measurement reinforces trust, relationship building, and accountability when partners agree on shared values and goals and everyone has a clear role in measurement they can recognize, identify with, and continually act on. Community members' trust is earned over time and can be achieved and sustained through:
  - acknowledging mistrust and its root causes;
  - being accountable within and across systems to address social, economic, and political structures and policies that create and perpetuate racism and exclusion, income inequality, and conditions and environments that diminish health (e.g., food insecurity, poor housing, reduced access to care); and
  - promoting transparency throughout the measurement process about decisions, actions, and the resulting outcomes.
- Measurement helps systems become more trustworthy partners by engineering into systems structures and incentives for accountability to communities.

Real-World Examples of Building Shared Values and Trust in Shared Measurement Efforts

How the [Community Schools Initiative (CSI)]() Built Shared Values and Trust: Local partners participating in community schools define goals related to their shared vision and focus on measures related to those goals. Once partners *define goals, shared measurement guides community schools toward building the right approach for achieving those goals*. For example, the United Way COMPASS Community Schools Initiative in Pennsylvania uses Results-Based Accountability™ planning to start with the results in mind and then map backwards to the services and programs needed to achieve those results.

Community schools then use the measures they collect to self-evaluate, learn, and hold their collaborative leadership accountable. "The accountability on the partnership and the collaborative leadership itself are within the performance measures. Are we going to deliver these things? Are the numbers going in the direction we'd like it to go in? Are the percentages going in the direction we would like it to go in? And so together, they hold themselves accountable." — Community Schools Initiative

Partners: Health, government, philanthropy, commerce, community-based organizations, faith-based organizations, social services, occupational development, sports and recreation

How the [Vermont Health in All Policies](#) Initiative Built Shared Values and Trust: This initiative *appointed a task force to share information among state agencies and identify opportunities for collaboration and support*. The task force includes representatives from agencies focused on agriculture, commerce and community development, education, human services, natural resources, transportation, public service, health and administration. Through the task force, the initiative showed agencies what they were already doing to contribute to a Health in All Policies framework, helping partners agree on shared values and goals early on and ensuring that everyone has a clear role in measurement they can recognize, identify with, and continually act on. "We started by talking to people in specific agencies and asking how they are already contributing to this Health in All Policies philosophy, and then asking what more they can do. It was a matter of getting people to the table and having them see that they are already doing this work, so it wasn't a big lift right away. And then nudging people to the next step, asking, 'What more can we do? What else can we do?'" — Vermont Health in All Policies

Partners: Public health, 13 state agencies, departments, and organizations, including health, transportation, agriculture, education, human services, and natural resources

Conclusion

This set of principles offers guidance for ways that systems and communities can use shared measurement as a tool to align decisions, policies, and practices toward equitable health and well-being. By using these resources, community members, system leaders, service providers, and policymakers can be more effective in collectively improving the health and well-being of their communities.

Appendix A: Contributors

The American Institutes for Research team, including consultants in equity and community engagement, developed these principles through a modified Delphi process in partnership with an 18-member expert stakeholder panel and a seven-member steering committee of leaders in cross-systems alignment, measurement, and community engagement from across the nation.

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Appendix B: A Framework for Aligning Systems with Communities to Advance Equity through Shared Measurement

Key Concepts and Definitions

The purpose of this framework is to create a shared understanding of core concepts essential to the set of principles for shared measurement. This framework builds on the concept of shared measurement introduced in the Collective Impact model.[1] The American Institutes for Research adapted this concept to the context of cross-systems alignment efforts based on learnings from a review of 43 cross-systems alignment initiatives through an ongoing environmental scan, key informant interviews, a deep exploration of six initiatives through use cases, insights from virtual community listening sessions in six communities across the United States, and advice from steering committee members. Recognizing the diversity of experiences and perspectives that people bring to cross-systems alignment work, we offer working definitions of these core concepts, including community, systems, shared measurement, cross-systems alignment, equitable health and well-being, and principles (Exhibit B-1).

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[1] The Collective Impact model describes shared measurement as a system for collecting data and measuring results consistently across all participating organizations to ensure that efforts remain aligned, that they hold participants accountable, and that they enable participants to learn from one another's successes and failures. Source: Kania, J., & Kramer, M. (2011, winter). Collective impact. *Stanford Social Innovation Review*.
https://ssir.org/articles/entry/collective_impact

Exhibit B-1. A Framework for Advancing Equity through Shared Measurement

Who shapes shared measurement? Community members with systems

Community members with expressed needs, priorities, and interests

Systems and services aligned to meet community needs and goals

Healthcare	Public health	Human and social
Medical care (primary and specialty), substance use treatment, physical/occupational therapy, dental care	Healthy food access, food safety, vaccinations, environmental agencies, youth development programs	• Education (school infrastructure, curriculum, special education) • Housing (affordability, monitoring conditions, emergency shelters) • Justice (public safety, fire/rescue, courts, police, animal control) • Transportation (public transit authorities, city planning, freight, airline, railroad services, highways)

Shared Measurement	Cross Systems Alignment	Equitable Health and Well-Being
What is shared measurement?	**How does shared measurement support cross-systems alignment?**	**Why is shared measurement for cross-systems alignment important?**

Shared measurement is a tool to:

Use a common set of measurable goals that reflect shared priorities *across* systems and *with* community members

The Process of using shared measurement includes:

• **Defining** what to measure; how to measure; where, when, and from whom to collect data; and why the measures are important

• **Choosing** specific metrics, data sources, and methods

• **Using** measurement to support cross-systems alignment

• **Understanding** what measurement means in the context of communities' own history, narratives, and experiences

Defines collective goals

Monitors progress

Generates buy-in and trust

Creates external accountability

Supports learning (internal accountability)

Shared measurement can help communities and systems align decisions, policies, and practices toward **equitable health** through

Upfront investment

Co-creation

Accountability

Holistic understanding

Shared values and trust

Glossary of Core Concepts

Core Concept	How it Relates to Shared Measurement
Community has no single definition. It can refer to geography or a group that self-identifies by age, ethnicity, gender, sexual orientation, disability, illness, or health condition. It can refer to a common cause, a sense of identification or shared emotional connection, shared values or norms, mutual influence, common interest, or commitment to meeting a shared need.[a]	The priorities and concerns of community members are central to understanding how systems can work to create community health and well-being.
Systems are the organizations, programs, infrastructure, and activities within communities that shape the way that people work, live, play, and pray. Systems are made up of people who use resources to build and maintain infrastructure to carry out programs, activities, and functions following set policies, practices, and procedures.	Systems within communities (including medical care, public health, housing, education, transportation, justice, and human and social services) provide services that directly influence the health and well-being of community members.
Shared measurement uses a common set of measurable goals that reflect shared priorities across systems and with community members.	Shared measurement helps systems and communities systematically define collective goals, monitor progress, generate buy-in, and create accountability within organizations and communities.
Cross-systems alignment requires that systems think and work together in fundamentally new ways to improve the health and well-being of the people and communities they serve.[b]	Systems that work together with communities to address community priorities and concerns are more effective in collectively improving the health and well-being of their communities.
Equitable health and well-being means that everyone has a fair and just opportunity to be as healthy as possible. **Health**[c] means physical and mental health status and well-being, distinguished from healthcare.	Achieving equitable health and well-being requires reducing and ultimately eliminating disparities in health and its determinants that adversely affect excluded or marginalized groups.
Excluded or marginalized groups[c] are those who often have suffered discrimination or been excluded or marginalized from society and the health-promoting resources it offers. These groups have been pushed to society's margins, with inadequate access to key opportunities. They are economically and/or socially disadvantaged. Examples of historically excluded/marginalized or disadvantaged groups include—but are not limited to—people of color; people living in poverty, particularly across generations; religious minorities; people with physical or mental disabilities; LGBTQ persons; and women.	Social exclusion, marginalization,[c] discrimination, and disadvantage can be measured, for example, by indicators of wealth (such as income or accumulated financial assets), influence and prestige, or social acceptance (for example, educational attainment and representation in high executive, political, and professional positions). They also can be measured by well-documented historical evidence of discrimination (such as slavery; displacement from ancestral lands; lynching and other hate crimes; denial of voting, marriage, and other rights; and discriminatory practices in housing, bank lending, and criminal justice).

Core Concept	How it Relates to Shared Measurement
Shared power is a governance structure, system, or way of working in which no one entity or individual dominates decision making or actions. All partners have equal agency, authority, and capacity to act, say, decide, do, or challenge. Sharing power seeks to keep the ability to affect outcomes in the hands of those who are affected.	Sharing power through measurement means shared processes to (a) *define* what to measure, how to measure, from whom to collect data, and why the measures are important; (b) *choose* specific metrics, data sources, and methods; (c) *use* measurement to support cross-systems alignment; and (d) *understand* what measurement means in the context of communities' own history, narratives, and experiences.
Accountability is how individuals accept responsibility for and hold themselves to their goals and actions, acknowledge the impact of those decisions and actions on the groups to whom they are responsible, and take steps to rectify harm or unintended consequences that occur. Accountability requires transparent and consistent communication about roles, processes, and outcomes.	Measurement creates and reinforces accountability by quantifying goals, tracking progress toward those goals, and providing transparent mechanisms for reporting on performance.
Investment means intentional and sustained implementation of resources (time, funding, skill-building activities, economic and social development) to develop trusting relationships, build capacity, share learning, and improve the social and structural environments in ways that advance equity and growth.	Investing in measurement capacity building among community partners, and developing skills and capabilities for co-creation and power sharing among systems stakeholders, can support shared measurement.

Notes:

[a] Community-Campus Partnerships for Health. Frequently asked questions. https://www.ccphealth.org/frequently-asked-questions/

[b] Robert Wood Johnson Foundation. (n.d.). Cross-sector alignment glossary. Align for Health. https://www.alignforhealth.org/glossary/

[c] Braverman, P., Arkin, E., Orleans, T., Proctor, D., & Plough, A. (2017). *What is health equity? And what difference does a definition make?* Robert Wood Johnson Foundation. https://www.rwjf.org/en/library/research/2017/05/what-is-health-equity-.html

Appendix C: Overview of Principles Development

The American Institutes for Research (AIR) developed the five principles for Aligning Systems with Communities to Advance Equity through Shared Measurement through a collaborative, modified Delphi process. A modified Delphi method is an iterative process that systematically and progressively gathers input from a panel of stakeholder experts to determine group consensus.

Panelists

AIR purposefully recruited and engaged a panel of 18 experts with expertise in cross-systems alignment, measurement, and community engagement who brought a wealth of experience in working to understand and/or address the needs and priorities of communities that are most at risk of inequities. The panel included leaders involved in initiatives to improve health outcomes at the national, state, and local levels; policymakers; "bridge builders" who work to connect public health, healthcare, human and social services, and other systems with communities; and community members and advocates.

Process

Over the course of 6 weeks (September 16, 2020, through October 28, 2020), AIR guided the panel through three rounds of activities, including four facilitated virtual meetings (including an introductory meet-and-greet to introduce panelists to each other and the team, and to set expectations) and three online surveys to develop the set of stakeholder-driven principles.

To support panelists throughout the Delphi process, we developed and shared a detailed resource guide that described key learnings from all previous project activities, including a conceptual framework for shared measurement, use case examples of measurement practices applied within five multi-system alignment initiatives, perspectives from listening sessions held in six diverse communities, and a draft set of nine principles derived from these formative activities. We also developed a brief, 8-minute introductory video to accompany the guide. All panelists received equal compensation for their time and participation.

Surveys

Following the meet-and-greet, AIR administered online surveys before each panel meeting. Surveys asked panel members to rate and re-rate (if applicable) each of the draft principles in terms of importance for inclusion as a principle (4-point Likert scale: omit, possible candidate for inclusion, desirable candidate for inclusion, essential for inclusion) and offer new recommendations, edits, etc. via open-ended responses. For each survey round, we summarized ratings using percentages; we equally weighted the views of all panelists (survey responses were anonymous). Based on survey responses, we grouped the draft principles into three categories:

- Prioritized Principle: If at least 75% of participants rated a principle in the "essential" category

- Principle to Consider for Omission: If at least 75% of participants rated a principle in the "omit" category

- Potential Principle: All remaining principles—if less than 75% of participants rated a principle in the "essential" and/or "omit" category

We analyzed qualitative responses for themes and patterns.

Meetings

Before each meeting, AIR sent an email reminder with key takeaways from the previous survey. Two expert facilitators co-moderated each meeting, which we structured to include a combination of full- and small-group interaction (breakout rooms). During meetings, facilitators engaged participants in icebreaker/warm-up activities, communicated meeting objectives and guiding questions, set the tone for discussion by acknowledging external events/factors that might impact reactions, recapped key learnings from previous surveys and meetings, asked probing questions to uncover perspectives on the principles, summarized what participants heard from panelists before the end of each call, and shared reminders for upcoming activities. All meetings were audio-recorded with participants' permission. After each meeting, we shared key takeaways, detailed meeting notes, and recording links with panelists. In addition, after the meetings, we revised draft principles based on feedback obtained on the survey and during discussion; we included these revised principles, as appropriate, in the next survey. The project team held 1-hour debrief calls after each meeting and subsequent planning calls upon finalizing key takeaways.

Evolution of Principles

- AIR began the Delphi process with nine draft principles for Round 1 (Survey 1 and Meeting 1), which we developed based on key learnings from early project activities.

- After Meeting 1, we integrated two principles into others, and we added two new principles, yielding a total of nine principles going into Round 2 (Survey 2 and Meeting 2).

- After Meeting 2, we integrated four of the nine principles into others and added no new principles, leaving a total of five principles going into Round 3 (Survey 3 and Meeting 3).

- During Round 2, panelists recommended the addition of a preamble to contextualize the principles and a glossary of key terms; we included these in Survey 3 in addition to the five revised principles.

- After Meeting 3 (end of the Delphi process), we revised the principles based on feedback. The five principles presented above reflect these changes.

Exhibit C-1. presents key points from panel discussions, suggestions for principle revisions, and modifications applied in each round of the modified Delphi process.

Exhibit C-1. Panel Feedback on Principles, by Round

Modified Delphi Round	Key Points	Suggestions	Modifications
Round 1	• Recognize diverse and divergent community voices • Shared language is important • Data and measurement can cause harm • Accountability is critical and relevant across principles	• Be explicit about what is meant by "those who have experienced inequities" • More clearly define "harm" • Reframe as asset based • Need principles on community investment and data ownership • Tease apart concepts (overlap) and adjust language around "systems" and "communities"	• Combined the draft principle on centering the needs, values, and priorities of community members with the principle on co-creation • Combined draft principle on not harming communities with the draft principle on addressing root causes • Added two new principles on data ownership and investment in community
Round 2	• Need to name shared power and shared decision making as important • Language should encourage collaboration and a dynamic process • Importance of a shared learning environment • Need to frame principles with intention and clarity • Level setting around key concepts is important • Concerns and questions about implementation	• Several concepts need further definition (e.g., community, authentic engagement, whole person) • Address redundancy across principles • Include a preamble to accompany the principles • Include a list of key terms and definitions • No new principles recommended	• Drafted a preamble to contextualize the principles that included list of key terms and definitions • Consolidated to five principles • Added questions about implementation to Survey 3
Round 3	• Support for preamble and definitions • Need to apply a process lens to this work; it is iterative • Key steps to building buy-in • Communication is important • Power must be shared	• Some suggestions for reorganizing parts of preamble and revising definitions; moving definitions to an appendix • Suggested revisions to language or order across the five draft principles (e.g., community investment first)	• Revised language in preamble/introduction to address concerns regarding tone • Added sections and headers to break up language in introduction • Included project's shared measurement framework as an appendix; integrated new key terms and definitions into framework glossary

Modified Delphi Round	Key Points	Suggestions	Modifications
Round 3 (continued)	• Implementation requires time and resources • Equity must be integrated into systems and power structures		• Reordered principles to present the upfront investment in communities principle first • Integrated example practices that reflect principles from use cases • For co-creation principle, moved shared power up to first concept and integrated "equitable, sustained partnership" into this section • For accountability principle, created two categories: one on accountability for addressing root causes of inequities and one addressing the need to repair harm when it occurs • For trust principle, added language addressing sustainability focus and the need to engineer trust into systems and not just focus on the interpersonal aspect of trust • Added appendices with list of stakeholder experts and brief overview of methods

Suggested Citation

FOR MORE INFORMATION ABOUT THIS PROJECT

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