



This series is made possible with funding from IDPH and the Community Health Assessment and Planning Grant, 2025

August 14, 2025

Building Community Power to Advance Policy and Systems Change

IPLAN Training Webinar Series

This session is being recorded.

IPHI Training Team and Peer Presenters

- **Laurie Call, Director, Center for Community Capacity Development (CCCD), Illinois Public Health Institute (IPHI)**
- **Samantha Lasky, Program Manager CCCD, IPHI**
- **Jasmine Deskins, Program Associate CCCD, IPHI**
- **Peer Presenter**
 - **Jamie Byrd, Administrator, Egyptian Health Department**

Agenda

Welcome and Introductions

- Learning Objectives; Group Agreements; Introductory Polls

Defining Policy, Systems, and Environmental Change Strategies

- Zoom Polls
- Shifting the Narrative
- Programs vs. PSE
- Zoom Polls

Chief Health Strategist and Social Change Role Breakout Group Activity #1

Break

Peer Presentation from Jamie Byrd, Egyptian Health Dept.

Guiding Principles for Transformational Relationship Building with Community

- Defining Power
- Concepts and Faces of Power
- Process Steps to Advance Equity
- Power Analysis

Breakout Group Activity #2 – Shift the Narrative

Closing

- Evaluation Poll, Q/A, Additional Resources

Learning Objectives

Participants will be able to:

1

Describe policy, systems, and environmental change strategies

2

Describe how local health departments can build power within their communities

3

Apply methods for community power building in the community action plan cycle

Group Agreements

- Actively participate; Stay present; Use video camera as much as possible
- Take space/ Make space
- Seek to understand different perspectives.
- Allow facilitator to move conversation along
- Ask questions in the chat or raise hand
- We can "park" items we cannot address today and get back to you
- Complete polls and evaluation questions (funders need data!)
- What else?



Poll 1

- 1. Which of the following types of strategies do you have in your IPLAN?
(policy development/change, systems change, environmental change)**
- 2. How comfortable are you with leading policy, systems, or environmental change strategies? (very comfortable, comfortable, somewhat comfortable, not comfortable)**



Policy, Systems and Environmental (PSE) Change Strategies

What is PSE?

Policy

Systems

Environmental

Policy Change – passing of laws, ordinances, resolutions, mandates, regulations or rules

Legislation that provides financial opportunities/incentives, like child tax credits or “baby Bonds”

Written agreement for a peer-led (student or non-profit) Mental health group to have meeting space in the school gym

Reallocation of school funding from police to social workers, school-based Mentors, Etc.

Policy Change Strategies

Big P

- Large-scale, governmental policies that influence a wide range of people or sectors.
- Federal or state laws, major regulations, and large-scale initiatives with significant impact.
- Often involve elected officials, require significant resources, and can be difficult to influence.

Little p

- Smaller-scale, often localized policies that influence specific groups or organizations
- Organizational policies, departmental guidelines, community-level initiatives, and operational procedures within a specific context.
- May be easier to influence at the local level, involve smaller budgets, and can lead to incremental changes.

Systems Change – change to unwritten rules or processes of an organization, institution, or community

Local Community based organization and School partnerships & collaboration to create an easily accessible Mental Health referral process

A network of organizations and agencies that work together to address mental health issues and emergencies, that go beyond calling the police. Having non-emergency 911 calls redirected to a mental health community crisis Team

Environmental Change – Changes made to the economic, social or physical environment

Affordable
housing in our
neighborhoods

Healthy Food
accessible in our
communities

More green
space, walkable,
bike-able
communities

Program Approach vs. PSE Change Approach

Setting	Programs/Events	PSE
School	Celebrate and create awareness about mental health during the month of May	Change school budget to always have a healthy ratio of social workers to students AND have constantly funded art, music, dance, etc., programming at all the schools
Community	Co-host a mental health resource fair	Coordination of a mental health network, so that every touch point that community may have (school, church, hospital, food bank, etc.) is streamlined and advocates for root cause solutions (like affordable housing, better paying jobs, etc.)
Worksite	Hold health screenings for staff	Make sure all jobs positions have access to health insurance that will cover mental health services. In addition to yearly COLA (cost of living adjustment)
Hospital	Offer a yearly online course around treatment and care for patients with mental health diagnosis	Change hospital policy in how it reacts to and handles mental health cases, in order to collaborate with local providers, for example, instead of calling the police

Poll 2

3. Why are Policy/Systems/and Environmental (PSE) Change strategies important in public health?

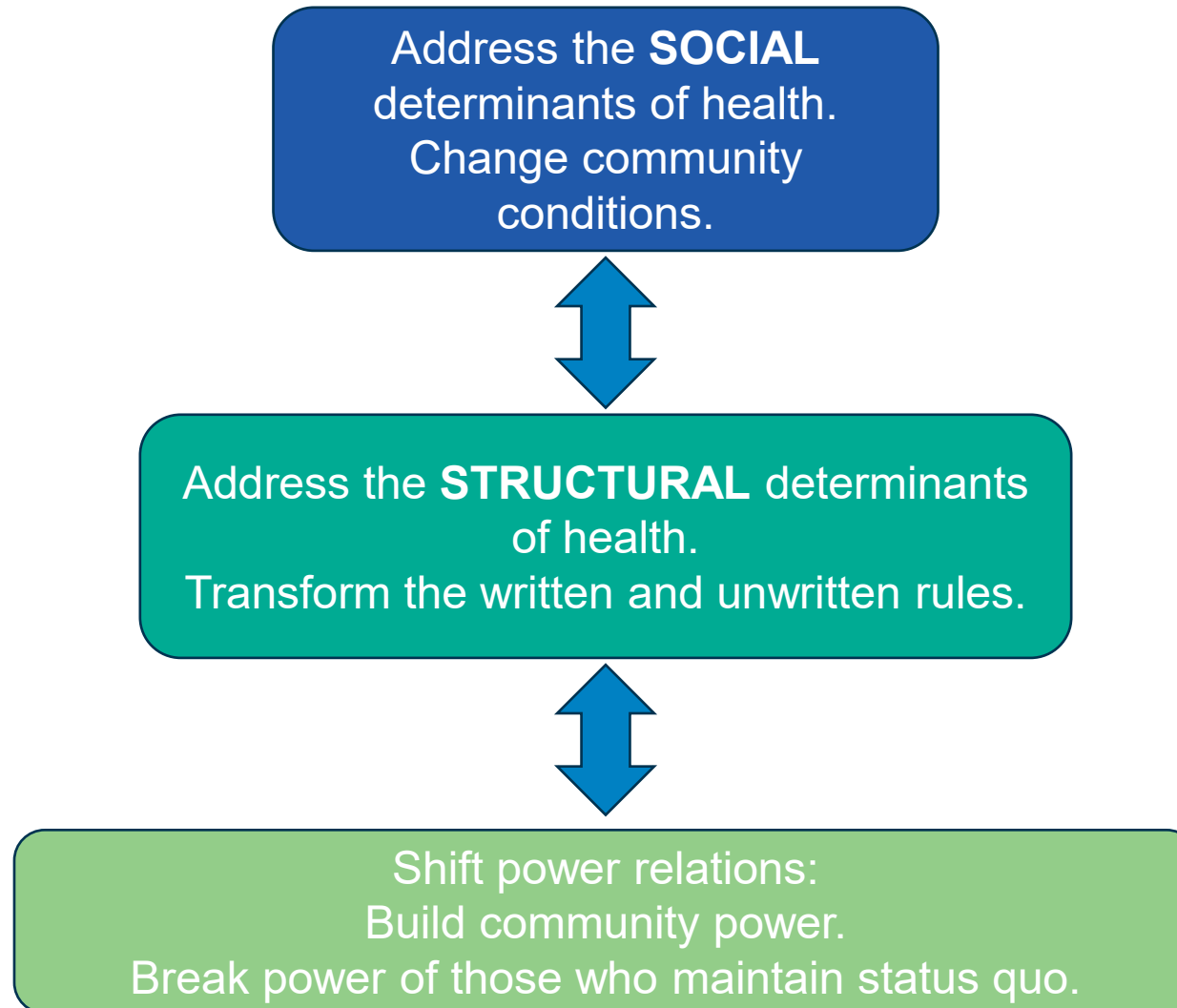
Why is PSE important?

1. Addressing root causes
2. Prevention
3. Improving population health outcomes
4. Advancing Equity
5. Sustainability

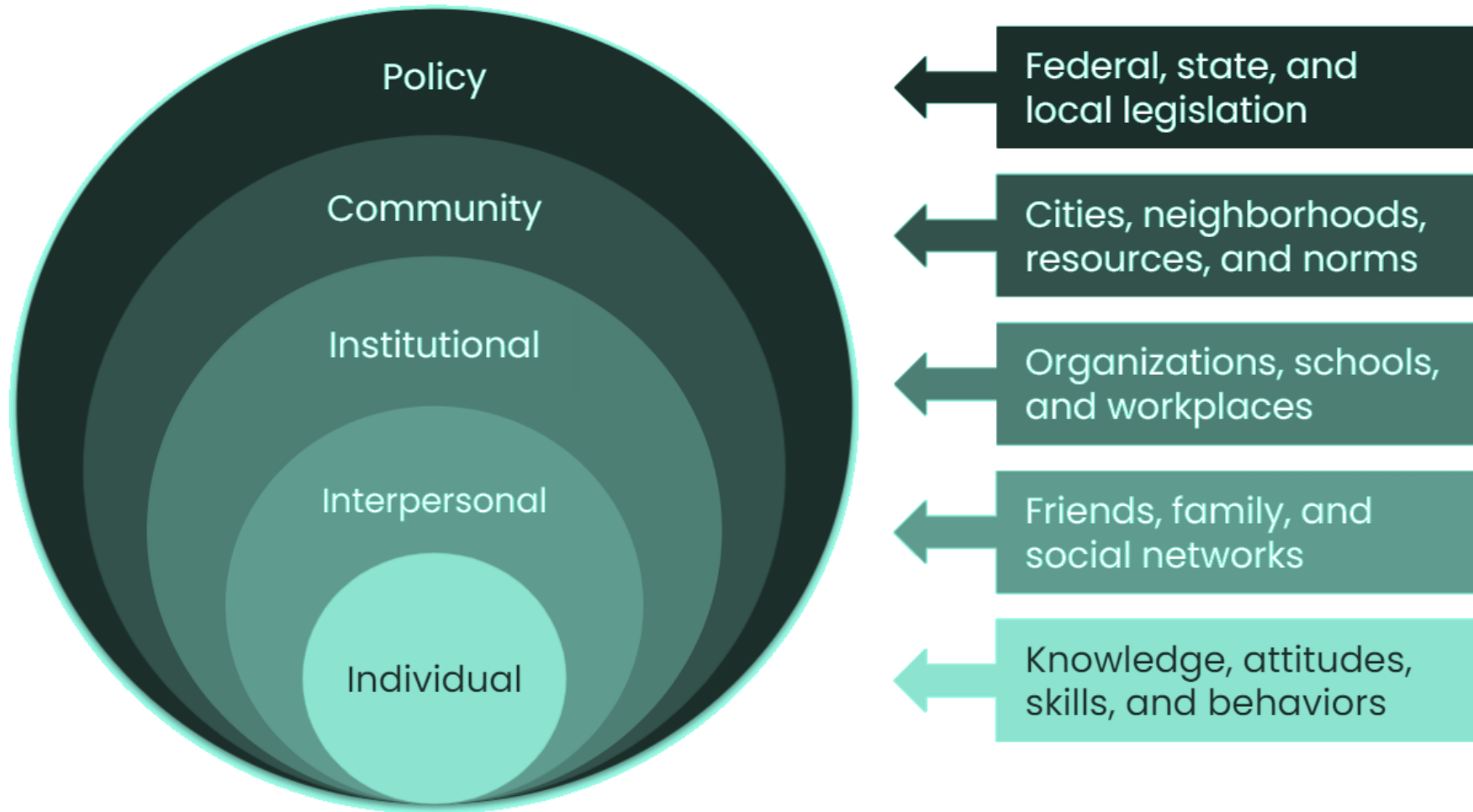
Source: Community Commons, <https://www.communitycommons.org/collections/An-Introduction-to-Policy-Systems-and-Environmental-PSE-Change>



How do we advance equity?

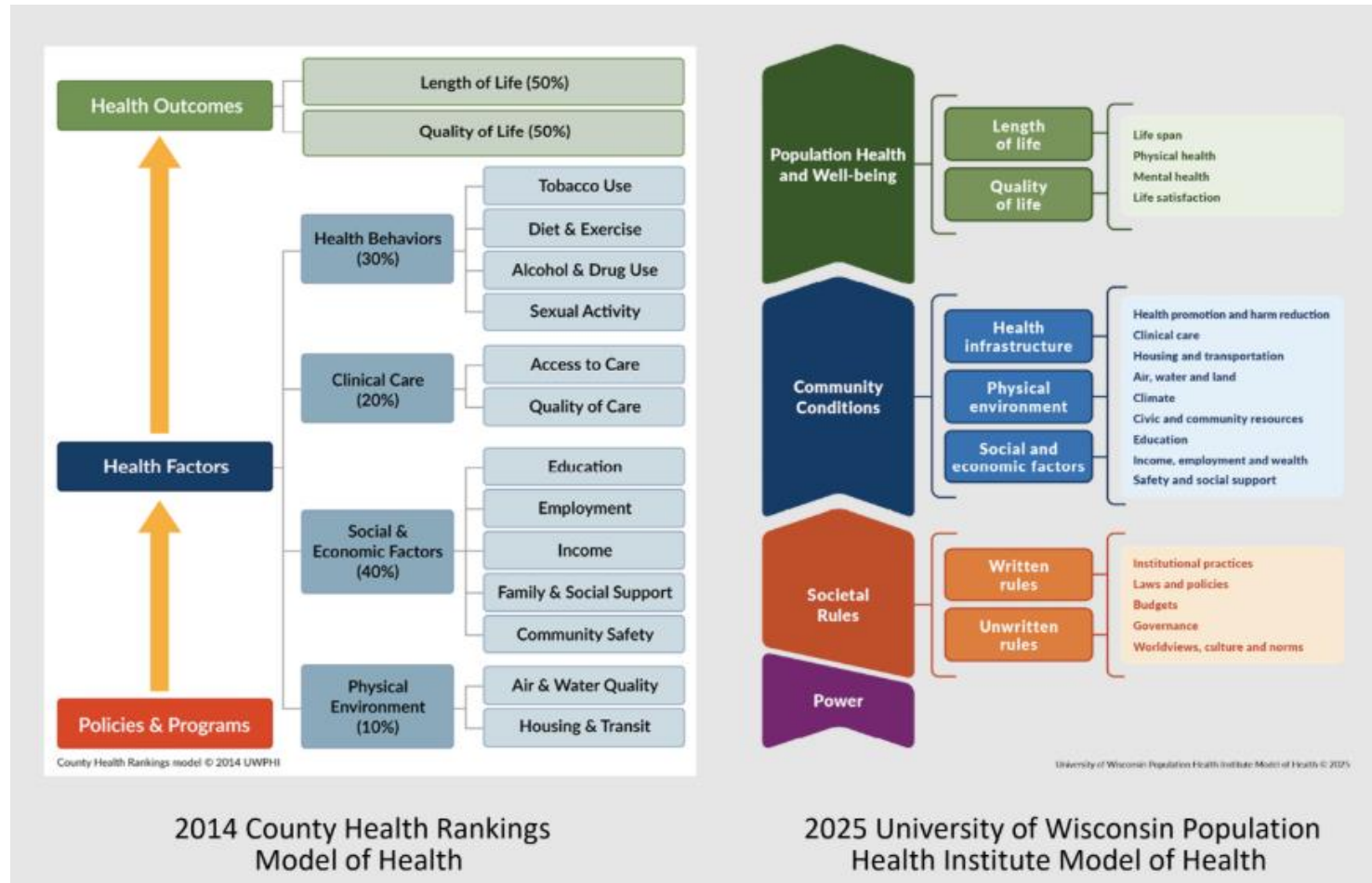


Social Ecological Model

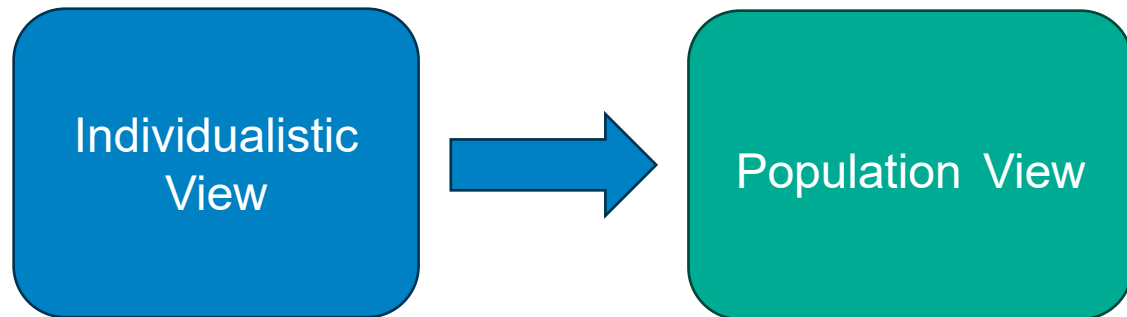


Expanded CHR&R Model of Health

What contributes to population health and well-being?



Shifting the Narrative



Creating healthy environments



Improving systems to be more effective for all and to work in unison

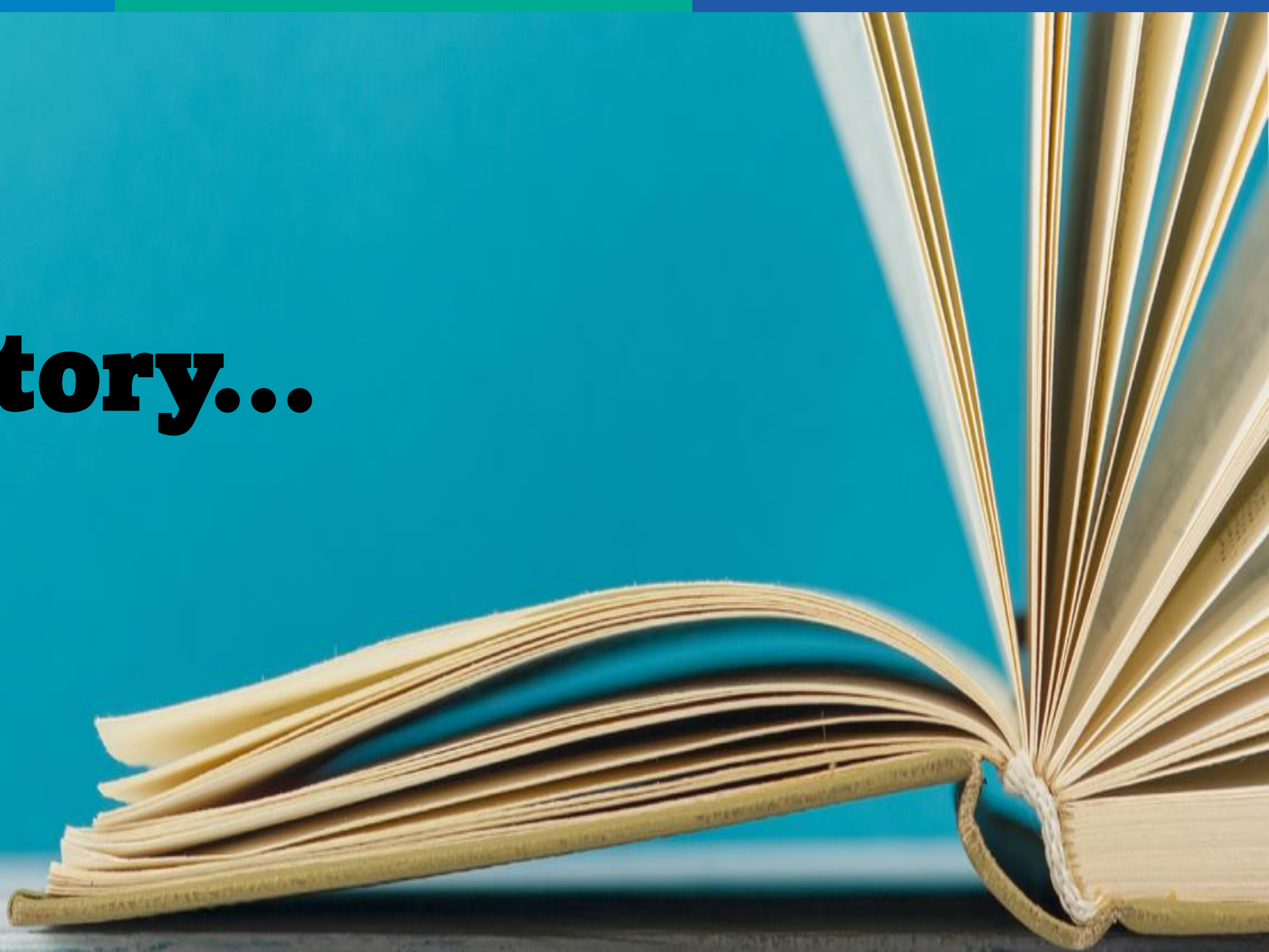


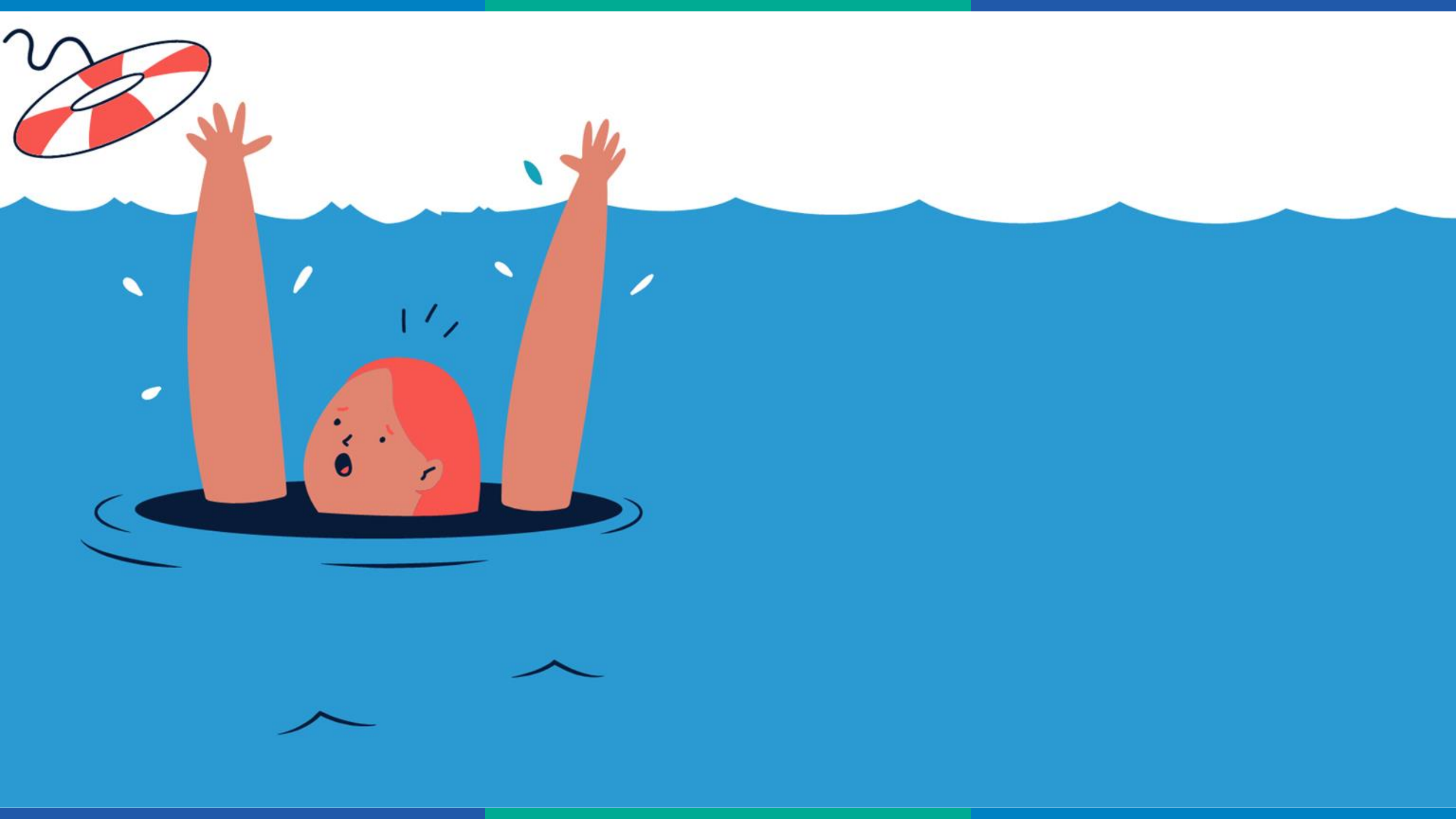
Advancing and supporting equitable policies

“It is unreasonable to expect that people will change their behavior ***easily*** when so many forces in the social, cultural, and physical environment conspire against such change”

- Institute of Medicine (2000)

A Story...









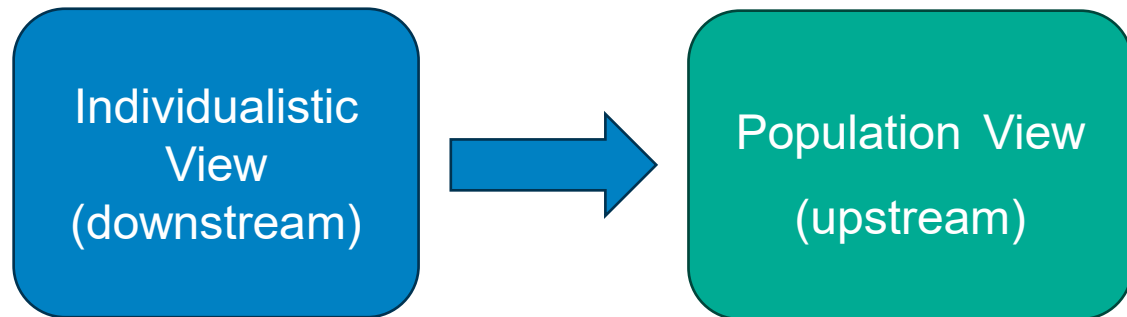


DANGER

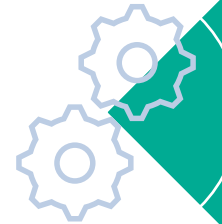


DANGER

Shifting the Narrative



Creating healthy environments



Improving systems to be more effective for all and to work in unison



Advancing and supporting equitable policies

Breakout Session 1

Breakout group discussions will be for approximately 10-15 min.

Take a photo of this screen for the questions. We will also copy the Q's into your chat.

Ask for a volunteer to read the questions and facilitate discussion or kick-off sharing. If no volunteer, go in alphabetic order by first name. Individuals may have a right to pass if nothing to share.

1 person should note the examples and types of challenges discussed to report out.

What are some examples of policy, systems, or environmental (PSE) change that you have worked on in the past or are working on currently?

- **Share what was successful about it, challenges, and how you overcame challenges**

If you do not have an example, what is a PSE change that is needed in your community?

- **Share what is keeping you from moving forward and what you anticipate to be challenging.**

Breakout Session Report Back

- What were a few examples shared?
- What were some of the common challenges or anticipated challenges?

Who is involved in PSE?

Government bodies (federal, state, local)

School districts and schools

Park districts

Healthcare organizations (hospitals, health systems)

Worksites and other community institutions (daycare, senior living centers, faith institutions, detention facilities, etc.)

Individuals, families, members of the community, especially those most impacted by the issues trying to be addressed

Important Considerations

- Engage partners, stakeholders, and community members in the early stages of program development.
- Understand the needs of the intended population to identify appropriate PSE change strategies.
- Use health impact assessments to demonstrate the rationale for PSE changes.
- Assess individual and organizational readiness for change, using the [Stages of Change](#) (Transtheoretical Model).
- Provide education to the individuals (healthcare providers, managers, or teachers) and organizations (healthcare facilities, businesses, or schools) who will be involved in implementing PSE changes.
- Foster partnerships and coalitions to support broader reach and sustainability.
- Ensure enforcement of new policies.

However...

Keep in mind that PSEs *are only successful* to the degree that they are:

community-driven & community-led



Social Change Roles

There are three distinct roles played by those who participate in movements for social change: agitator, innovator, and orchestrator.

- **Agitators:** An agitator brings the grievances of specific individuals or groups to the forefront of public awareness.
- **Innovators:** An innovator creates an actionable solution to address these grievances.
- **Orchestrators:** These folks coordinate action across groups, organizations, and sectors to scale the proposed solution.

***In reality, the boundaries between these roles may blur, with some individuals and organizations playing multiple roles either at once or sequentially.*



Social Change Roles

	Agitator	Innovator	Orchestrator
Goal	Articulate a critique and mobilize diverse parties around it	Develop an actionable solution and demonstrate its superiority to the status quo	Mobilize all parties around the solution and ensure its adoption
Communicating	Highlight a problem that needs to be solved	Connect the innovation to the problem and explain why it is a superior solution	Tailor the message to different constituents while maintaining overall coherence
Organizing	Launch collective action against the status quo	Build a coalition of supporters behind the proposed solution	Broaden and sustain collective action toward change
Evaluation	Assess the extent to which agitation resonates with movement participants and establishes common purpose	Assess the extent to which the solution addresses the problem in a feasible way	Assess progress toward change adoption
Traps	Fragmented agitation and stalled solution	Blindness to negative consequences and impractical elegance	Mission drift and dilution



Peer Presentation

*Jamie Byrd MEd, LEHP, Administrator
Egyptian Health Department*



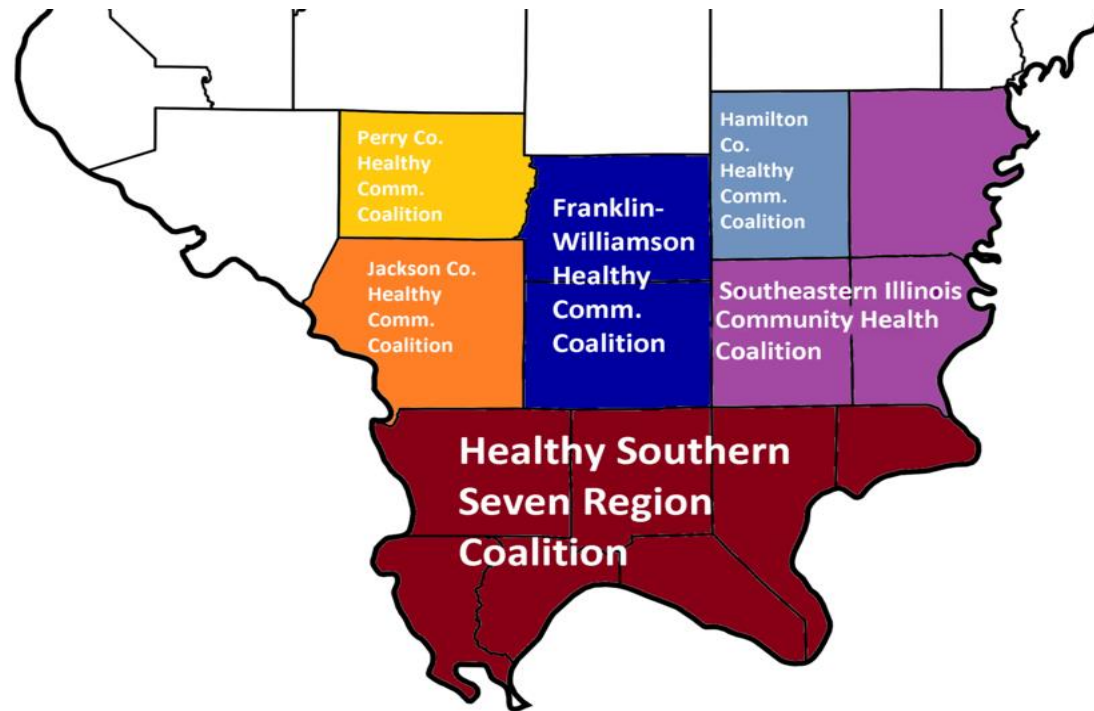
SICHC

**Southeastern Illinois
Community Health Coalition**

**Promote, Educate,
Collaborate**

Healthy SI Delta Network (HSIDN)

- Formulation of group including Southern Illinois Healthcare, SIUC and 7 LHD's covering the lower 15 counties in SI in February 2008



Planning

- The first planning meeting for Saline, White & Gallatin Counties took place on November 25, 2008.
- Framework laid for creation of new coalition
- Main players – EHD, Ferrell Hospital, WADI (HMC, Beck's, SIC at later dates)



Planning (cont.)

- The Building of a Coalition
 - Name?
 - Mission Statement
 - Functions (What do we want to accomplish?)
 - Members (Who do we invite?)
 - Meeting schedule (monthly vs. bi-monthly)
 - Committees, groups
 - Leadership
 - Challenges
 - Goals (short and long term)



A Coalition is Born

- Leadership structure is laid out
- Bylaws or rules discussed
- First event held – H1N1 Forum – May 21, 2009
- Officially renamed the “Southeastern Illinois Community Health Coalition” at April 21, 2010 meeting
- SICHC organized as a tax exempt 501(c)(3)



Becoming more official

Mission Statement

- The Southeastern Illinois Community Health Coalition (SICHC) will have an active interest in and commitment to improving the health of the communities in Southeastern Illinois.



Main Goals

- The Coalition will provide leadership and a unified voice at the local level on all health-related issues.
- The SICHC appointed an IPLAN team to assess local health data and update the community health plan based on statistics and local knowledge of health priorities.



Health Priorities

- Current IPLAN (2021) Priorities
 - Substance Use & Abuse
 - Mental Health & Mental Disorders
 - Overweight & Obesity



Action Teams

- Emergency Preparedness/SPARC
- Healthy Lifestyle
 - SI Cancer Action Network - (SICAN)
 - Diabetes Today Resource Team (DTRT)
- Healthy Minds, Healthy Lives
 - Suicide Prevention Taskforce
- SI SUPRT (Southeastern Illinois Substance Use, Prevention, Recovery, & Treatment)
 - SE Illinois Tobacco Free Alliance
 - SI Tobacco Disparities Partnership



SICHC Accomplishments

- Annual Rails to Trails ¼ Marathon
- Caregiver Workshops (w/ EAAA)
- Cancer Prevention Study
- Kidney Mobile – Partnered w/NKFI
- Colon Kit Pick-Up – Partnered w/ ACS
- Health Care Resource Guide
- Community Garden at Ridgway Golden Circle - 2023
- IPLAN - 2011, 2016, 2021
- Free Laundry Days
- Health Fairs in Schools



Planning for IPLAN 2026

- Initial Meeting – June 2025
- Develop Health Priority Survey on Survey Monkey
 - Market survey through SICHC and EHD Facebook
 - Hard copies delivered through local Housing, Senior groups
- Compile strategies/activities currently implemented for 2021 health priorities.
- Discuss data compiled from a variety of sources (BRFSS, Illinois Cancer Registry, US Census, County Health Rankings, SparkMap, etc.)



Planning for IPLAN 2026

- Establish consensus on Health Priorities w/ full coalition
- Establish and finalize goals, objectives and potential strategies
- Complete IPLAN May/June, 2026
- Present to EHD Board of Health for Approval – June/July
- Present to SICHC for Approval. Invite media! - August
- Send completed IPLAN to IDPH in August



Where to From Here?

- Begin work on 2026 IPLAN
- Continue to try and find funding opportunities – Work on branding and more exposure within community.
- Increase and Diversify membership – Include business community
- Keep motivation high – Don't become complacent!!



Guiding Principles for Transformative Partnerships



Act with Care – Be thoughtful, be deliberate, seek to understand, build trusting relationships and lead with love



Inclusivity – Those most affected by inequities are in the best position to define the problem, design appropriate solutions, and define success.



Authentic Community Collaboration – Collaborations should build dignity and integrate all perspectives, and solutions should be co-designed, co-implemented, co-measures, and co-evaluated.



Sustainable Solutions – Solutions should be community-driven, build community capacity and resident knowledge, deepen relationships, increase programmatic capacity, build lasting infrastructure, and ensure respect for all.



Commitment to Transformation – All participants can learn from one another, reflect on their own structures and practices, and find areas to continuously improve their respective organizational cultures and practices.



Power Dynamics

Community Power

- The ability of communities most impacted by structural inequity to develop, sustain, and grow an organized base of people who act together through democratic structures to set agendas, shift public discourse, influence who makes decisions, and cultivate ongoing relationship of mutual accountability with decision makers that change systems and advance health equity.

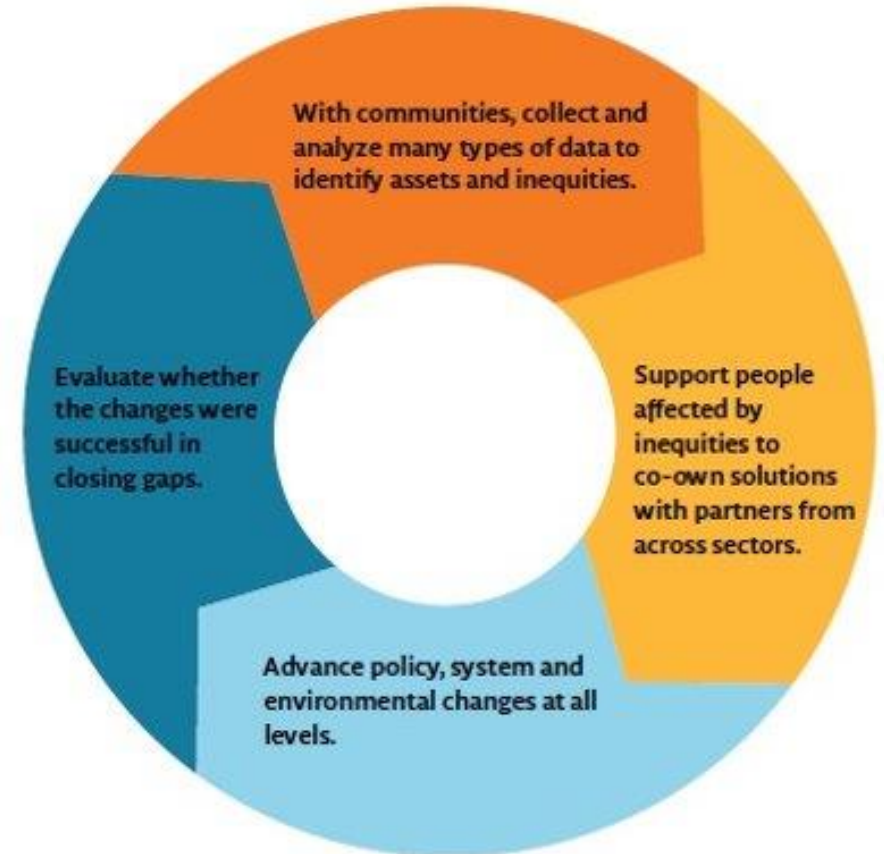


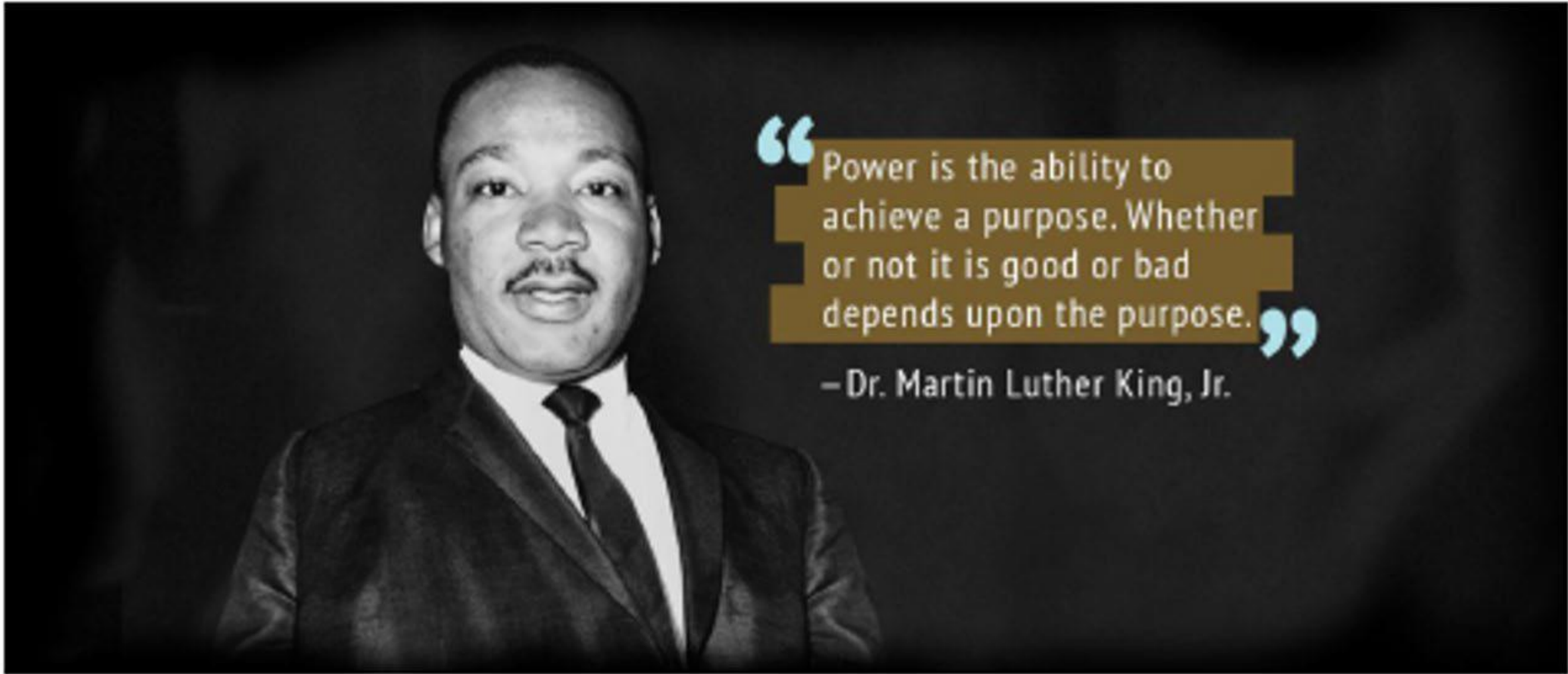
Equity is both a Process and Outcome

As an **outcome**, equity results in fair and just access to opportunity and resources that provide everyone the ability to thrive.

As a **process**, equity requires a new way of doing business, one that...

- prioritizes access and opportunities for groups who have the greatest need;
- methodically evaluates benefits and burdens produced by seemingly neutral systems and practices;
- and engages those most impacted by inequities as experts in their own experiences, strategists in co-creating solutions, and evaluators of success.





Concepts of Power

Power Over	Domination or control of one person, group, or institution over another
Power To	Individual ability to act; Communities having the capabilities to achieve their desired ends.
Power With	Collective action, the ability to act together; Building alliances with other groups to achieve common goals
Power Within	Individual or collective sense of self-worth, value, dignity.



Faces of Power



Visible Power

- Exercising influence in the political or public arena and among formal decision-making bodies to achieve a particular outcome

Faces of Power



Hidden Power

- Organizing the decision-making environment, including who can access decision making and what issues are being considered by decision-making bodies

Faces of Power



Invisible Power

- Shaping information, beliefs, and worldviews about social issues

Process Steps to advance equity

Identify and name the underlying root cause(s) of the issue. What are the underlying structural determinants of health?

- Name the written and unwritten rules including the following:
 - Values, beliefs, worldviews, culture and norms
 - Governance
 - Laws, policies, regulations, and budgets
 - Institutional practices

Conduct a power analysis.

- List the equity agenda vs. the opposing agenda.
- Plot stakeholders by power and level of support.

Shift the narrative.

- Break power by exposing narratives that glorify individualism, free markets, anti-government sentiments and racism. Unmasking dominant narratives makes them lost power.
- Build power by developing transformative narratives that amplify values and beliefs such as interconnectedness and belonging. Lift up a different set of values and beliefs that people already hold, changing what's possible.

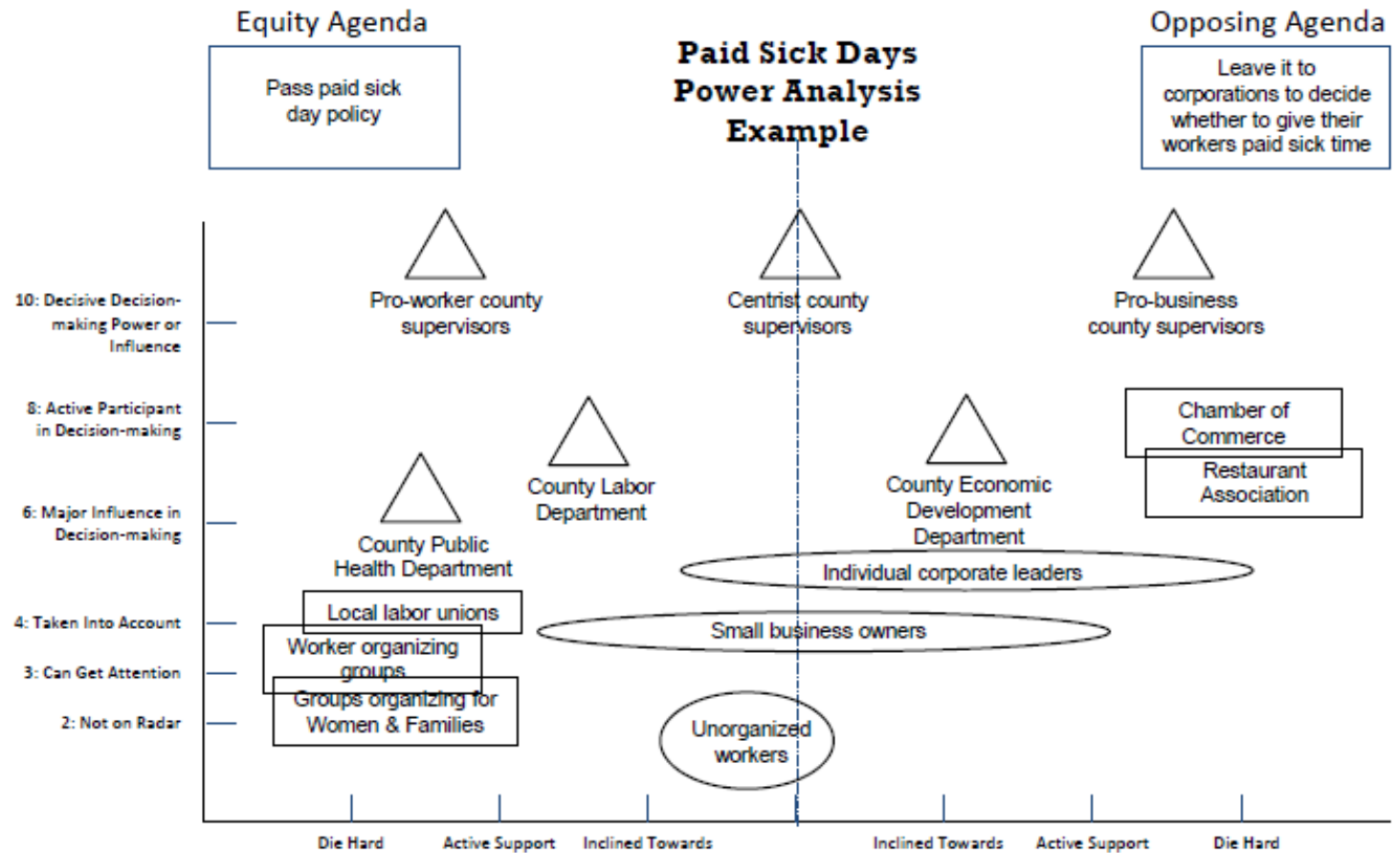
Move to action.

- Identify what actions you can take to address the structural determinants of health.
- What are you currently doing that you can shift to focus on these upstream concepts?
- What new work can you start?



Slide adapted from: Introduction to the Structural Determinants of Health Workshop, September 2024, County Health Rankings and Roadmaps.

Power Analysis Example



Reflection Questions

- What are your roles in shifting power relations and passing legislation?
- What action strategies could you take based on this power analysis?
- Whose influence do you have the ability to sway?
- Which groups are the most important to influence?
- What individual and organizational relationships do you currently have that you can leverage?
- What relationships do you need to cultivate?
- What actions can you take to limit the influence of the groups who oppose our agenda?

Examples of Strategies and Actions to Shift Power Relations

- Model power sharing
- Use data to support policy change that advances equity
- Develop a legislative agenda and conduct advocacy in support of that agenda
- Support the organizing of community members and workers to build collective power
- Build relationships that support an equity agenda
- Build the infrastructure needed to set the decision-making agenda
- Work to shift narratives/worldviews

Food Justice

Interventions into the
Structural Determinants
of Health



Interventions into the
Social Determinants
of Health

- Change belief that food security is about individual behavior
- Build coalitions between groups advancing food justice (organized people facing food insecurity, service providers, local food stores, etc.), across racial, minoritized, and other dimensions of shared or imposed identity
- Organize people facing food insecurity
- Change laws about income and food prices
- Increase budgets for food subsidies (SNAP)
- Providing food

Slide adapted from: *Keeping it Political and Powerful: Defining the Structural Determinants of Health. Milbank Quarterly, 2024*

Shift the narrative.

Break power by exposing narratives that glorify individualism, free markets, anti-government sentiments and racism. **Unmasking dominant narratives makes them lose power.**

Build power by developing transformative narratives that amplify values and beliefs such as interconnectedness and belonging. Lift up a different set of values and beliefs that people already hold, changing what's possible.

Select a priority issue in your community (i.e. food insecurity, housing insecurity, community violence, substance use and overdoses) and discuss the following:

- What dominant narratives are standing in the way of policy change to your case study topic?
- What transformative narratives would help make room for progress?

Poll 4 – Evaluation Feedback

Resources

- *An Introduction to Policy, Systems, and Environmental (PSE) Change*, Community Commons. <https://www.communitycommons.org/collections/An-Introduction-to-Policy-Systems-and-Environmental-PSE-Change>
- *Policy, Systems and Environmental Change*, Rural Health Information Hub. <https://www.ruralhealthinfo.org/toolkits/health-promotion/2/strategies/policy-systems-environmental>
- *Let's Talk: Redistributing Power to Advance Health Equity*, National Collaborating Centre for Determinants of Health (NCCDH). https://nccdh.ca/images/uploads/NCCDH_Lets_Talk_Redistributing_Power_to_Advance_Health_Equity_EN.pdf
- *Should You Agitate, Innovate, or Orchestrate?*, Stanford Social Innovation Review (SSIR), September 2017. https://ssir.org/articles/entry/should_you_agitate_innovate_or_orchestrate#
- *Narratives for Health*, County Health Rankings and Roadmaps (CHR&R). <https://www.countyhealthrankings.org/strategies-and-solutions/narratives-for-health>
- *Keeping it Political and Powerful: Defining the Structural Determinants of Health*, The MilBank Quarterly, February 2024. Heller, Givens, Johnson, Kindig. <https://onlinelibrary.wiley.com/doi/epdf/10.1111/1468-0009.12695>
- *Theory in Action: Public Health and Community Power Building for Health Equity*, Journal of Public Health Management (JPHM) Pract 2023, Jan-Feb 01;29(1):33-38. doi: 10.1097/PHH.0000000000001681. PMID: 36448756. Heller JC, Little OM, Faust V, Tran P, Givens ML, Ayers J, Farhang L. <https://pubmed.ncbi.nlm.nih.gov/36448756/>
- *Power, Control, Communities and Health Inequalities: Theories, Concepts and Analytical Frameworks*, Health Promot Int. 2021 Oct 13;36(5):1253-1263. doi: 10.1093/heapro/daaa133. PMID: 33382890; PMCID: PMC8515177. Popay J, Whitehead M, Ponsford R, Egan M, Mead R. <https://pmc.ncbi.nlm.nih.gov/articles/PMC8515177/>
- *Building Community Power to Achieve Health and Racial Equity: Principles to Guide Transformative Partnerships with Local Communities*, NAM Perspect. 2022 Jun 13;2022:10.31478/202206d. doi: 10.31478/202206d. PMID: 36177209; PMCID: PMC9499374. Farhang L, Morales X. <https://pmc.ncbi.nlm.nih.gov/articles/PMC9499374/>
- *Power Primer: A Tool in Mobilizing for Action Through Planning and Partnerships – MAPP 2.0*, National Association of County and City Health Officials (NACCHO). <https://www.naccho.org/uploads/resource-hub-images/Power-Primer.pdf>



Closing

Upcoming IPLAN Trainings

- Managing the Community Action Cycle – October 30th, 1-3pm





Thank You!

IPHIONLINE.ORG

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