



Building a movement for equity in Washington State: Latino Community Fund of WA State

When Latino Community Fund of Washington State (LCF) began, it was with the intention that it would be different than traditional philanthropic models. LCF's mission is to invest in the Latino community to cultivate new leaders, support effective non-profit organizations, and improve the quality of life for all Washingtonians. Our vision is a vibrant and civically engaged Latino community in Washington State. LCF is not a traditional "community fund" model in that it uses many ways to organize resources for equity and uses broader definitions of resources than traditional philanthropy. Our Theory of Change expresses the impact intended from LCF's approach and program strategies. *Appendix A*. LCF does not provide "program services," but engages and supports community leadership, supports capacity building of community leaders and organizations, and engages community leaders in advocating and lobbying for greater impact and equity. LCF also has an affiliated 501(c) (4) organization Progreso: Latino Progress (www.progresowa.org) to further amplify community voice in legislative and electoral arenas.

1. How have you engaged, convened, and maintained relationships with your community/communities?

LCF's primary efforts to engage community leaders have been in King, Pierce, Snohomish and Yakima counties with some community and youth leaders from other parts of the state. We:

- Develop Community Leadership and Pipeline (using a train-the-trainer model with local community connectors);
 1. Bridging access to family support resources and creates trust with individuals
 2. Direct recruitment through presentations to community and youth groups
 3. Canvassing and talking to community members
 4. Attending and tabling at events where community members gather
 5. Host and invite community members to forums and dialogues about issues
- Engage Local Leadership (civic engagement activities and trainings);
- Create Collective Policy Advocacy (Training and capacity building for decision making processes working towards a shared policy agenda);
- Build Networks (Connecting leaders with each other as a neutral convener through the Latinx Health Board and Latino Equity Network).

Work is premised on the fact that community members directly impacted by issues (health disparities) have the knowledge of what needs to change to improve their lives and families.

2. How have you co-designed/co-created solutions with your community, communities?

One example of co-designing solutions is with the Latinx Health Board which includes over 30 community and health professionals from the Latino community, including South Park Promotoras, Community Health Worker Coalition for Migrants and Refugees, Latino Center for Health, nurses, UW professors and students, community health clinic outreach specialists for CHPW, Molina, HHS, Latinos Promoting Good Health, Komen Puget Sound, Public Health Seattle-King County, and medical interpreters. LCF also brought youth leaders into the coalition as an opportunity to develop leadership and bring youth voice to the fore. Alianza youth leaders joined the Latinx Health Board, did policy research and contributed to issue prioritization.

Recently LCF helped draft King County legislation to convene and support community groups for a robust census outreach process. While other non-profits only had their senior leaders involved, LCF used this opportunity to engage local parents and youth. We provided training on

how to testify at county council, continuing to invest in local leaders and build our collective capacity to center community voices and for community leaders to speak on their own behalf.



The Latinx Health Board is an extension of our Latino Equity Network (LEN), which was formed in 2014, after nine Latino non-profit organizations participated in the Washington Latino Nonprofit Leadership Academy, hosted by LCF. See *Appendix B*. Leaders coalesced around a shared vision of lifting the voices of Latino communities in WA and the need for carrying those voices to policy makers. Members of the LEN work with thousands of Latino families across the state, from Olympia to Everett to Spokane; the collective knowledge and experience these leaders bring in working

with Latino families is enormous. In 2014, LEN surveyed hundreds of community members and held community dialogues developed and led by local leaders in five counties about the issues and recommendations most urgent to community. This co-designing of policy priorities was and continues to be synthesized in the Latino Equity Agenda, a state-level policy platform updated each year, serving as the basis for advocacy priorities and engaging community members. See *Latino Equity Agenda* at: https://www.latinocommunityfund.org/latino_equity_network

3. How have you addressed systemic inequities that affect health (such as power differentials or racism) as part of your community engagement work?

Since systemic health inequities (and others) are the result of public policies that perpetuate inequities through barriers to access because they don't use "targeted universal" strategies or are actually intended to be punitive and racially oppressive, undoing oppressive policies, advancing new policies that are racially equitable, both legislative and administrative, is the priority for LCF. The Latinx Health Board determines our collective priorities as informed and led by community leaders. This means repealing policies that oppress our Latinx community, reforming policies that perpetuate racial inequities, create and advocate for policies that support and center communities that are most impacted by health inequalities - including migrant, refugee, low-income, people of color, disabled, women, and undocumented communities. We also bring leaders together to include these principles to influence local and statewide budgets.

One example of the impact of this work is through policy changes like the Fresh Bucks Program, which "matches SNAP/EBT (food stamps) benefits dollar-for-dollar at all participating farmers markets farm stand, and grocery stores". Our work through Fresh Bucks informed us that our Latino community did not feel welcome at Farmer's Markets and Latino businesses did not have capacity to accept Fresh Bucks. We engaged Latinx youth to inform direction of the City's Fresh Bucks program. Through community dialogue and advocating, the Fresh Bucks program has expanded its reach for small Latino owned stores to offer Fresh Bucks to customers. And now we are working with Latino businesses to facilitate the implementation of the Fresh Bucks

Program for SNAP recipients, but also for City of Seattle and King County residents that are experiencing food insecurity and do not qualify for SNAP or cannot apply. More policy change work includes WA Dream Act, Automatic Voter Registration, and others as seen at: https://www.latinocommunityfund.org/policy_change.

We also aim to share resources and knowledge in a way that is accessible to all participants. Meetings are held in Spanish and English to combat language barriers. LCF shares resources to provide capacity to partners to participate in the co-designing process of advocacy priorities. We work with Latinx Health Board and LEN partners to co-develop grant applications and often apply for funding together. This shared equitable funding model is central to this work; this means funds are shared equitably, not always equally to account for differing access to resources that partners bring. And because we value the work that youth leaders, promotoras, and other community leaders bring to this work, we bring stipends for leaders to engage.

A key learning from LCF's work has been to recognize varying levels of privilege within the community and address it. We learned that despite having a room that was 100% Latino, our different experiences and levels of privilege meant we had to grapple with communication, culture variance, and power imbalance challenges as well. For example, with Latinx Health Board, while the group was thrilled to have the knowledge and education of mainstream medical professionals (including doctors and researchers from large institutions), we made adjustments to ensure that the voices of community health workers, or "promotoras" and students, were equally heard and valued to shape the goals and strategies.

4. What about your organization's way of working has made you successful?

Latino Community Fund centers its work on being led by our community. This informs every part of our work and our success. We center our programs on the needs, knowledge, and leadership of our community. This means that community who are most impacted have the knowledge about what needs to change. And it means we must listen to the people we serve, we must invest in these people who are our community, and we must center our community's voice. The



success of our work is based on the understanding that community must lead. It is essential to **ask and listen**, but also to build the capacity of leaders at the center to develop solutions based from their personal experiences, knowledge, and expertise.

It is not that our organizational culture has changed. Rather, our organizational structure has adapted as we build capacity and secure more resources. With these investments we are more able to **provide stipends for youth leaders and promotoras** and continue our mentorship models.

We value the “lived experiences” of our community, rather than centering leadership on “Professional expertise”.

Since our founding, LCF’s staff and board has reflected our community and our values of inclusiveness. One of our core values, as stated on our website, is: “Creating communities of inclusion, mutual support and respect – Although we are a transnational, transracial and trans-ethnic community, we still struggle with classism, colonialism, racism, sexism, homophobia and other forms of oppression. To move forward, we must first identify and dismantle those walls that keep us apart so we can move together into a better tomorrow.” Currently, all LCF staff are of Latino heritage but vary in country of origin, immigration generation, age, gender identity, and sexual orientation. LCF’s board of directors is comprised of majority Latino heritage and, and has included other interested leaders who are not Latino. Our staff also consists of Alianza Youth Fellows, including one youth leader working directly with our Latinx Health Board.

Keys to success:

- LCF see potential leaders in community member instead of “clients” in need of “charity”
- Through shared resources, community voice is stronger and addresses inequity directly
- Relational community power building replaces traditional hierarchical structures and practice.

5. What have been your most significant challenges, obstacles, and missteps?

One of the most significant challenges we face is the increased hate and fear in our communities after the 2016 election. The political and social climate have led to setbacks of engagement and trust in our communities, making this work harder, but even more essential. After the election, many of our community partners needed to shift away from their work with the Latino Equity Network (including the Latinx Health Board) to provide direct, and immediate support for immigrant communities, including leading Know your Rights Workshops and providing support for families in need. This urgency is equivalent to the crisis brought on by a natural disaster. And while some of the Latino Equity Network small community based groups saw slight increases in funding to combat the politically inspired crisis, the historic underinvestment of these leaders and groups coupled with a crippling increase in demand has placed many of these organizations in a suffocating juncture. While some generous funders are responding to the increased headlines impacting our communities, few understand that for every headline there are cascading pressures for our families, communities, and organizations.

In addition, the leaders and nonprofits we work alongside have historically been under-resourced. People of color-led and community-based nonprofits struggle with increased demands for services and support from our community, while trying to build their capacity with limited resources. This structure of the nonprofit and philanthropic sector has led to under-resourced POC organizations, which means limited financial capacity. We work to combat this obstacle through equitable (not always equal) share funding models, taking into account which organizations have less access to resources.

We work with our partners to overcome a legacy of historical trauma in community leadership that has led to mounting distrust to partner with government agencies, white-led nonprofits, and funders. Our communities see too many times these entities come into community to collect data or ask for knowledge without proper compensation or authentic sharing of leadership. When resources are introduced, this can lead to competition and distrust among community partners, who are pitted against each other for limited resources (the 'scarcity model').

Another significant challenge is the result of inequitable voter registration of eligible POC; According to 2016 data, eligible white voters are registered from 63% to 92% across all state electoral districts, while eligible POC are only registered from 14% to 42%. This means our communities are not able to elect representation that care about their issues, and consequently very few elected representatives in the State Legislature understand or care about racial equity which makes our work to advocate better policies more difficult to achieve positive change.

6. What changes have you seen that give you hope about a future that is more equitable?

Community leaders are hope. We have seen more young people engage in this health work, we have seen more community members being honored for their experience and knowledge, and we have seen some real policy shifts that give us hope to keep pushing for a more equitable future. But, we also know there is still more to be done and more community leaders that need to be centered when developing and implementing policy solutions.

Some things that give us hope are:

- More engagement of community and local leaders in the Latinx Health Board;
- More Latinx youth motivated to get involved in their communities and politics;
- The power of parent leaders means more parents are taking even more leadership roles in their homes, school, work, and community;
- The power and voices of 'Promotoras' and other community leaders to bring their voices and expertise into the conversation;
- Cross-cultural collaboration through Community Health Boards model.

While it is clear that immigrant communities are facing a powerful and multifaceted crisis, we also see many opportunities within these challenges. For example, as Steve Phillips has noted in his best selling book "Brown is the New White" we have only begun to tap into the electoral power of Latinos. LCF recently innovated with this power by supporting Latino candidates in Burien who were responding to the racist rhetoric of the nationally funded group "respect Burien". The Latino Community Fund tried a different voter engagement strategy. Rather than follow mainstream voter engagement norms that focus on high propensity voters, LCF contacted low-propensity Latino voters. Through on the ground and on the phone effort, the group reached 4,000 low-propensity voters in Burien. The calling room was abuzz, with most callers speaking in Spanish and many laughing while connecting to those on the phone, who were rarely contacted, much less in their mother tongue. That day 1,200 committed to vote -- a higher conversion rate than expensive high-propensity voter campaigns. All Latino and progressive candidates won on this tide of votes, some winning by as few as 200 votes.

The success of this work speaks to how we do our work. This is not about an easy win, this is about long-term engagement with our communities. We partner with community members most impacted by policies, which is why we focus on engaging continuing and NEW community members. And the Latinx Health Board and Community Health Boards are asking for civic engagement trainings, conversations, and opportunities for leadership. We are also hopeful working alongside the leaders who are emerging through the Latinx Health Board, including youth leaders, mothers, immigrants, and so many individual leaders who are leading the way to change and reach equitable health outcomes for our communities.

Appendix A

Latino Community Fund Theory of Change



Appendix B

