

# FROM COMPETITION TO COORDINATION:

## *The California Convergence Response to Federal Funding Opportunities*

Prepared by the Center for Community Health and Evaluation  
for the California Convergence

CALIFORNIA  
**CONVERGENCE**  
Working together to improve food and physical activity environments

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### INTRODUCTION

The night before Thanksgiving can involve almost as many rituals as the day itself. For many, it's a night off from the impending marathon of cooking the next day. For others, it's counting chairs, dusting off platters that have been tucked away for a year, and making sure visitors will have a place to perch. Or perhaps the evening revolves around last-minute packing, airport runs, or travel to a friend's or relative's feast.

For dozens of California Convergence members, though, the night before Thanksgiving in 2009—and indeed much of that long weekend, except perhaps for Turkey Day itself—was devoted to the final rituals of proposal preparation. Just two months earlier, the U.S. Department of Health and Human Services (HHS) had released significant federal funding opportunities for states and counties. The Communities Putting Prevention to Work (CPPW) initiative, part of the American Recovery and Reinvestment Act (ARRA), was the source of the funding—and an unprecedented opportunity, as its name implied, to truly put prevention to work at the state and community levels.

The timeline was crunched, and the overlap of the final proposal preparation with Thanksgiving was unfortunate. But across California, those who had been working for years to take the state's obesity prevention efforts to another level felt they had to pursue this unique opportunity—and wanted to do so in the most coordinated, effective way possible.

**This is the story of how the California Convergence—a “network of networks” of local public health departments, community leaders, and their partners—created a venue and infrastructure for an effective statewide response to these funding opportunities.**

After briefly describing the origins and scope of California Convergence, the story describes the context in which the state's CPPW applications unfolded, the process California Convergence and its partners used, the challenges they faced, and the results they achieved.

By sharing key features of the Convergence's approach, describing the tools developed to organize and track this effort, and highlighting lessons learned along the way, we hope to support other groups interested in turning a naturally competitive and potentially divisive scramble for funds into an opportunity for consensus, capacity-building, and securing maximal resources for California instead.

Here's how it worked in California.

## THE CONTEXT

### About California Convergence

California Convergence is a collaborative of leaders and advocates from communities across the state who are working together to change local, regional, and state policies in two specific ways: advancing health equity and improving food and physical activity environments. The Convergence was launched in 2007 by two major funders of community health and obesity prevention initiatives in California: The California Endowment (TCE) and Kaiser Permanente.

At the time, each funder was supporting community initiatives that shared similar goals and even similar names. In TCE's case, these were Healthy Eating, Active Communities (HEAC) projects and the Central California Regional Obesity Prevention Project (CCROPP), while Kaiser's were Healthy Eating, Active Living (HEAL) projects. To these funders, it made sense to join forces and collaborate more systematically on their shared goals. The argument was compelling to other funders active in California as well, and California Convergence soon expanded to include other funders and their grantees involved in obesity prevention:

- Robert Wood Johnson Foundation Active Living by Design
- Centers for Disease Control and Prevention (CDC) Steps to a Healthier U.S.
- California Department of Health Services Communities of Excellence in Nutrition, Physical Activity and Obesity Prevention (CX3)
- W.K. Kellogg Foundation Food and Fitness Initiative

To staff and manage the many administrative, coordinating, and communications tasks required for a statewide collaboration, the funders turned to the Public Health Institute's Partnership for the Public's Health (PPH), which continues to serve in this role on behalf of California Convergence.

In early 2011, California Convergence began organizing into regional clusters, with community leaders from six regions taking on the leadership and providing statewide governance for California Convergence through its newly formed Steering Committee and PPH providing statewide coordination and support. In addition, various partners provide technical assistance to Convergence communities in devising, implementing, and advancing strategies to create health equity and improve food and physical activity environments at all levels—within communities and counties, regionally, and state-wide. California Convergence's funders support some but not all of this technical assistance work. (To learn more about California Convergence and its current activities, please visit [www.californiaconvergence.org](http://www.californiaconvergence.org).)

### A test for coordination

California Convergence emerged as a way to coordinate the many ongoing environmental and policy change efforts loosely categorized as obesity prevention across the state. From this more coordinated, collective effort, Convergence funders, community leaders, and other partners hoped that a stronger, amplified policy voice would emerge—one that would be much more effective than pursuing multiple efforts

in isolation, one community at a time. However, California Convergence was not launched in a vacuum. It was neither the first nor the only attempt to coordinate these diverse and geographically dispersed efforts, although it is unique in serving as a state-wide platform for its constituent communities.

California, like many other states, had developed a state-wide Obesity Prevention Plan in 2006, in the wake of a 2005 Summit on Health, Nutrition, and Obesity convened by then-Governor Schwarzenegger. Support from CDC led to an updated plan in 2010, when the Governor convened a second Summit. Grantees from the funded initiatives described above—along with many others—gathered at state-coordinated childhood obesity conferences that had been held every other year since 2001. Advocates and technical assistance providers shared ideas and strategies, both formally and informally, through other networks including those crossing beyond the public health sector to education, transportation, agriculture, and industry. The California Department of Public Health’s “Health in All Policies” framework, later adopted by the Cabinet-level Strategic Growth Council (which coordinates policies across state agencies), was another example of parallel efforts. And, several other state and national policy groups based in California—such as Prevention Institute, PolicyLink, and the Strategic Alliance—pursue broader prevention and policy goals that dovetail with the aims of increasing health equity and improving food and activity environments.

Despite these existing networks and years of collaborative work, California Convergence funders worried that the CPPW funding opportunity might inadvertently pit California communities against one another in the competition for scarce—and, in this case, significant—funds. Large infusions of grant funds are bound to create intense competition even in the best of times, and the fall of 2009—when the CPPW funding opportunity was released—was far from the best of economic times. Already in a recessionary economy that seemed likely to take several turns for the worse before it improved, state and local budgets in California were not likely to support the organizations and investments required to change food and physical activity environments.

California Convergence’s funders knew that many California counties would be competitive applicants for CPPW funding. They had strong track records of achievement in their own communities, as well as philosophical commitments to the key tenets of CPPW: putting prevention to work, through environmental and policy change. They had ties to experienced networks of technical assistance providers and state policy advocates with national reputations for excellence, in everything from framing media messages to designing evaluations to advocating for changes in state and local policies and systems. Many were already connected to the other sectors that CPPW’s funders were hoping to draw into the prevention arena, such as transportation and education.

What if these various competing applications, instead of drawing more CPPW funds to the state, undermined one another and reduced the chances that California applicants would succeed and benefit from the CPPW funding?



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**What if, instead of a competition in which applicants canceled each other out, they could harness the strengths of Convergence communities and their partners around some common priorities, so the benefits of CPPW funding could eventually accrue to more communities?**

How could the funders support both individual applicants to increase their chances of success and build broader capacity for future efforts?

### **Seizing an opportunity—quickly**

A very short interval of 10 weeks spanned the CPPW release date in late September and the post-Thanksgiving due date for proposals in early December 2009. If the CPPW opportunity was going to yield as much funding and support as possible for California as a whole, the funders knew they would have to act fast.

California Convergence and its organizational home—the Public Health Institute and its Partnership for the Public’s Health (PPH)—were a natural choice. The PPH infrastructure offered an administrative mechanism for rapid disbursement of funds for technical assistance and grant writing. Convergence itself was already perceived as a neutral entity and had existing ties to all the key players involved: communities, key funders, the California Department of Public Health (CDPH), local health departments (LHDs), technical assistance providers, and policy advocates. In addition, Convergence already maintained a centralized communications hub, connected to each of these networks through up-to-date contacts. Finally, and most crucially, Convergence had just completed a consensus-building process to select policy priorities as the focus of concerted policy efforts across the state.

With these key ingredients in place, the funders thought, they could funnel ideas and support through Convergence quickly and effectively, increasing the chances that California applicants would succeed in the CPPW competition. To make this happen, they awarded a grant of \$125,000 to California Convergence to coordinate the CPPW application process on behalf of 17 eligible counties. Of this amount, approximately \$85,000—68 percent—went directly to applicants in the form of technical assistance and grant writing support.

## **THE PROCESS**

### **Forming a Leadership Team**

With no time to lose, the key players quickly formed a Leadership Team. The earliest conversations were between representatives of TCE and the senior management team within the California Health and Human Services Agency and CDPH who were soon joined by Kaiser Permanente, the California Conference of Local Health Officers (CCLHO), the County Health Executives Association of California (CHEAC), and representatives from several key advocacy organizations.

### **Turning a win-win proposition into a formal Letter of Agreement**

The CPPW funding opportunity had specific eligibility requirements, including a requirement that LHDs serve as the applicant entity for county-level awards. (State health departments with smaller counties went through a different application

process.) To ensure that California’s applications aligned with common goals, the Leadership Team made a proposition to eligible LHDs: in exchange for adopting a shared policy agenda and joining Convergence and CCLHO’s Chronic Disease Committee (if they hadn’t already), LHDs would receive technical assistance and grant writing support throughout the application process, as well as Letters of Support from the Governor, the CDPH Director, and the Convergence funders. Successful applicants would be expected to share any results of their funded work—such as lessons learned, materials and media messages—with other coalitions and LHDs. Eventually, 14 large LHDs and two smaller counties (via their grant applications as part of the state CDPH proposal) signed formal Letters of Agreement agreeing to participate on these terms. Only one county that met the eligibility requirements was not able to sign on to the shared policy priorities because of conflicting county policy and thus was not eligible to receive the support.

### Creating an action plan to track progress (and glitches)

Even though time was tight, the Leadership Team members realized they needed an action plan to keep each other on task and clarify the roles and responsibilities as the pace picked up momentum and more and more entities got involved. The Convergence staff created and managed the Action Plan, which tracked tasks, deadlines, who was responsible, and which loose ends needed follow-up and by whom. Since many steps required high-level approval—such as Letters of Support from agency directors and the Governor’s Office—the Leadership Team’s connections to senior decision-makers helped expedite many tasks that normally would have taken weeks or months.

### Expanding the pool of applicants

Although the funding opportunity was enticing and a good fit for many LHDs, the tight timeframe was onerous. Even a health department raring to go internally would have had to link to other partners (such as schools) and coordinate with their separate approval, budget, and other processes to sign on. LHDs that had been part of large federal grant applications knew they were looking at an intensive, consuming effort that would crowd out other work; those that hadn’t were intimidated and thought they might not be competitive anyway.

As a result, part of the Leadership Team’s early challenge was to market the CPPW opportunity to reluctant LHDs, building up their confidence and pitching the idea that help was available.

**“We never would have applied without their encouragement and help,” said one participant.**

Another compelling argument was that even those who were unsuccessful in securing funding would build capacity, connections, and confidence for future efforts—a likely scenario for most California applicants, since the competition would be national and only a limited number of California counties, at best, could win awards. This proved to be the case in 2011 when \$103 million in HHS Community Transformation Grant (CTG) funding was awarded to fight chronic disease—\$1.21 million of it to three California counties that had applied (unsuccessfully) for CPPW funds in 2009.

## Lining up Letters of Support

As is the case with many federal grants, the CPPW applications required Letters of Support. To expedite this process and demonstrate the high level of support and coordination in California, the Leadership Team arranged for applicants to obtain Letters of Support from the Governor, the Director of the California Department of Public Health, and the Convergence funders—all indicating the attention this work already received in California and the support that successful applicants would benefit from if they obtained funding through the program. (Sample Letters of Support and other materials can be found on the California Convergence’s website, [www.californiaconvergence.org](http://www.californiaconvergence.org), under ARRA Tools.)

## Identifying and paying grant writers

The Leadership Team tried to remove one of the main obstacles to applying—preparing the application itself—by identifying and offering to pay up to \$15,000 to each county to cover the cost of grant writers. This did help several counties decide to take the plunge when they might not have otherwise (because they simply didn’t have internal staff available to do so, nor did they have the funds or the time to identify and/or hire someone). However, some county teams, while grateful for the assistance, found the experience to be almost more trouble than it would have been to tackle the application themselves. Grant writers may be plentiful, but those familiar enough with all of the important elements and themes to get up to speed quickly—policy and environmental change, health equity, public health, prevention, health in all policies, to name but a few—proved to be a rarer commodity.

## Providing other technical assistance

In addition to grant writing assistance, applicants could request technical assistance in four areas relevant to the applications: policy refinement, community collaboration, data, and evaluation. In each area, specific technical assistance providers already were under contract to the funders, but the process of accessing them to assist with the CPPW proposals was streamlined through the Convergence.

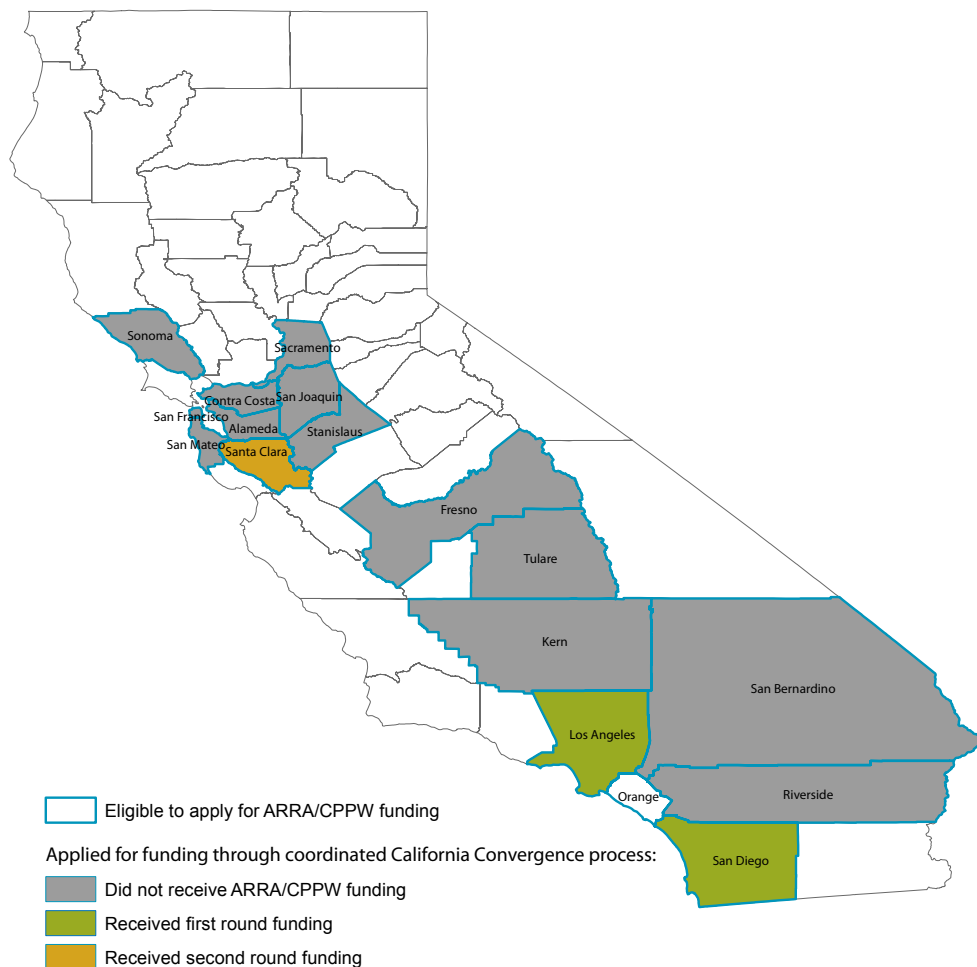
Each eligible LHD received a memo from the Leadership Team about the availability of technical assistance—either in person from various experts, or via tools developed for this purpose. For example, if an applicant was interested in pursuing the policy goal of decreasing consumption of unhealthy beverages (and/or increasing the consumption of healthy beverages), but wasn’t quite sure which specific policy targets might be appropriate, the Leadership Team could connect the LHD to experts in changing unhealthy beverage policy pricing, promoting accessible free water policies, reducing marketing to children, changing government procurement standards, or devising incentives for healthy food retailing. Technical assistance providers also could help teams identify and apply evidence-based practice data associated with policy and environmental change, access county-specific data to strengthen their applications, or design conceptual frameworks or logic models to support evaluation designs.

## Communicating clearly and often

California Convergence’s website and e-mail lists became a hub for one-stop shopping about the CPPW process, tools, Letters of Support, and sample materials—and Convergence staff played the same role on the phone and via e-mail. Given the short time frame, competitive backdrop, and tight timeline, there was no margin for error in terms of communication lapses and misunderstandings, so the Leadership Team and Convergence staff made an effort to be as transparent as possible about what everyone was doing, when, and how much it cost. The communication flow had to be smooth and open between the Leadership Team partners, as well as between the Convergence staff and the 17 potential applicants. This didn’t mean the communication problems didn’t occur, but there was a general understanding that everyone was doing their best under tough deadlines.

## THE RESULTS

On the December 10th due date, 16 California applications were submitted, encompassing all but one of the eligible counties. (As noted above, one of the 17 eligible counties was not able to sign on to the shared priorities, and two of the applications were from small and rural counties that were part of the state’s application.)



When the awards were announced a few months later, two applications—those for San Diego and Los Angeles counties—made the cut, yielding \$32 million in funding for these two counties specifically dedicated to nutrition and physical activity initiatives. Santa Clara, which received tobacco funding in the first round, received CPPW funding in the second round for obesity prevention.

The other 14 counties may not have won the initial funding they sought, but many still reported benefits from participating in the process. In some cases, the CPPW application became a crash course in preparing an ambitious federal grant proposal. It was not an experience many were eager to repeat anytime soon, but they did report a boost in confidence that they could do so in the future, especially with a bit more lead time.

Many local partnerships were strengthened by the demands of the applications process. While desperate late-night phone calls, meetings, and e-mails might not be the ideal way to build such relationships, they were built nonetheless. In some cases, local health departments lacked partnerships with natural allies in chronic disease prevention and community health, such as a local school district. In these situations, the CPPW application gave health departments and their partners a natural opening for emphasizing the benefits—or what might be termed “co-benefits”—that could accrue to schools from offering healthier food and more physical activity, such as better focus in the classroom and improved academic performance.

Sometimes, the grassroots coalitions connected to California Convergence didn't necessarily have a parallel connection to their LHDs. In these scenarios, the “speed dating” (as one participant described it) unfolded much like the real thing—leading to second dates and strong relationships in some cases, and to a willingness to try to work on joint initiatives in the future. (And, also like the real thing, to some unreturned phone calls in other cases.) Overall, as the CTG successes the following year suggest, the CPPW trial run turned out to be worthwhile for several counties.

In addition to partnerships across sectors or across town, several counties discovered untapped and unexpected sources of financial support from corporate and local foundations. In a tight economy, this too was a boon, and an unexpected one for many.

At the American Public Health Association annual meeting in Denver in November 2010, several members of the Leadership Team—joined by successful and unsuccessful applicants—served as panelists for a session about the Convergence's role in coordinating the CPPW application process. The session generated a great deal of interest and detailed questions from other state health departments and foundations, some of whom have followed California's lead and launched similar efforts in their own states.

From the Leadership Team's perspective, the process—regardless of the specific number of successful applicants or the dollar amounts received—was a winner. Since so many counties' goals were aligned with state-wide policy priorities, progress in San Diego and Los Angeles counties will yield innovative ideas and materials that can be adapted in other places. Like other states, California's rural areas are very different from its urban centers, and each is different from others in terms of size, demographics, politics, and culture.

The policy umbrella that Convergence extended over the CPPW applications offered plenty of room for different approaches and policies, while advancing some important common goals. As many Leadership Team members and applicants emphasized, California Convergence was uniquely positioned to play this role, both because it lacked the organizational agenda that other players would naturally bring to the table, and it combined this neutral role with organizational and infrastructure tools that no one else could corral as quickly or as comprehensively.

When the idea of engaging California Convergence to coordinate a statewide approach to CPPW was first raised, the goal was to help potential applicants. In retrospect, it seems possible that the benefits were mutual. Convergence's performance during the 10-week sprint to the finish line gave the organization more visibility and credibility with those who didn't know Convergence well, and brought some new members on board. It was a useful and unique brokering role for an organization that was still exploring its niche and was on the verge of a reorganization.

The California CPPW applicants included large health departments with many federal grants to their credit, small ones for whom this was a new and daunting experience, and many in between. Coordinating the process helped each of them—and California Convergence itself—in different ways. Today, they are connected not just by their shared experience of sneaking away from their families to read proposal drafts over a Thanksgiving weekend, but through their connections to new partners in their communities and across the state—and to

their common pursuit of policy goals that are relevant not only in their own backyards and communities, but across California.



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