

# THEORY OF CHANGE



If we recognize that  
**health is more  
than health care,**



that  
**health inequities  
are not inevitable**  
but the result of faulty systems

and that  
**community  
knowledge is key**  
to unlocking new  
solutions,



then our work is to  
**bring together people  
and system partners**  
to test creative solutions and push for action

so we can achieve  
**health and  
dignity for all.**



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## INPUTS

People's own **LIVED EXPERIENCES, IDEAS & PRIORITIES OF WELLBEING**

**TRUST & PARTNERSHIPS** with communities & community leaders

**TRUST & SUPPORT** from health & social partners

A **DIVERSE, PROCESS ORIENTED TEAM** that is dedicated to learning

**DEEP KNOWLEDGE** of the complexities of the health system & the communities we support

## ACTIVITIES

**BUILD BRIDGES** to integrate voices that have been excluded, bringing them into policy conversations

**ELEVATE STORIES** to build understanding of community experiences, needs & impacts

**CO-DESIGN** to shift power so it's in the hands of those most impacted, and for whom the system isn't working

**GENERATE INSIGHTS** that are rooted in community & point to new ways forward

**REMOVE THE RISK** in implementing tests of change to understand what makes a difference & why

**CHAMPION** local & system strategies to reduce disparities

## OUTCOMES

Policy makers prioritize **EQUITY-BASED** solutions & strategies from the start, always

Systems are designed using **POPULATION HEALTH APPROACHES**

**SUSTAINABLE PARTNERSHIPS** thrive within and across sectors, communities and governments

**COMMUNITY LEADERS** have a greater role in decision making & are seen as experts in complex problems and systems

Promising solutions are **SHARED AND SCALED UP, OUT, OR DOWN** consistently

More equitable access to services & better experiences of care, leading to improved outcomes for those negatively impacted by the social determinants of health

