



## **AHEAD Guiding Principles**

### **March 2015**

#### **Common Frame of Reference**

These principles provide a common set of values and practices for our commitment to make optimal use of resources to achieve measurable and sustainable improvements in health status and quality of life.

#### **Shared Ownership**

There is growing understanding that there is a shared interest and a wide range of contributions that can be made by private, public, and nonprofit sector stakeholders, including healthcare, business, and community development, to improve health and quality of life in our communities.

#### **Personal and Social Responsibility**

We agree that improving health requires each of us to take responsibility to educate ourselves and take actions that will improve our health status. We must also come together at the community and societal level to address social, physical, economic, political, and environmental conditions that impede efforts to improve health at the individual level.

#### **Collaboration and the Social Determinants of Health**

While competition is an element of economic enterprise that can contribute to increased efficiency and effectiveness, there is recognition of a need for competitors to align their resources and expertise to address the social determinants of health. While health care providers and payers compete to enroll and provide services for populations, they recognize the need to collaboratively invest in addressing the community level factors that impact the health of those populations.

#### **Focus on Health Inequities**

We live in the most affluent nation in the world, yet we tolerate profound inequities in the health and well-being of our people. These inequities are driven by a complex array of interacting factors that cross generations, beginning before conception, and playing out at the family, community, and societal level and can result in harm to multiple future generations. In recognition of this complexity, and the fact that these inequities are often concentrated in specific geographic areas, we believe there is an imperative to focus our efforts in these communities.

## **Race, Ethnicity, and Health**

Despite numerous gains since the civil rights struggles of the 1960s, African-Americans, Latinos, and other people of color have experienced persistent individual discrimination and institutional racism. We are committed to reversing these persistent injustices by working with others to change public, private, and nonprofit institutional policies and practices that perpetuate inequalities in opportunity, and substantially contribute to poor health and overall well-being.

## **Alignment / Mutual Reinforcement**

The historical pattern of proprietary “branding” of healthcare services for marketing purposes has resulted in a squandering of resources, due to duplication of effort and missed opportunities to leverage resources and share expertise. We recognize that there are substantial resources currently invested by diverse stakeholders across sectors that can produce measureable and sustainable health improvements if they were collaboratively aligned in comprehensive strategies that are mutually reinforcing.

## **Metrics and Values**

We share a commitment to validate the contributions of *all* stakeholders through the use of metrics that are relevant across sectors and document change at multiple levels. We envision the development of an easy to understand set of metrics that measure individual level health outcomes and systems changes at both the institutional and community level.

## **Approach to Engagement and Planning**

These principles inform our approach to the engagement of diverse stakeholders and highlight a commitment to shared ownership, inclusiveness, and acknowledgment of the many contributions that are needed to bring about meaningful change.

## **Build on Existing Assets**

We share a commitment to identify and build on what is already in place in communities as an essential first step and ongoing practice in leveraging available resources. This includes the identification of existing forums for dialogue, as well as the full range of assets, ranging from informal social support systems and physical infrastructure to places of worship, existing programs, services, and the skills of individuals.

## **Efficiency**

We acknowledge that many of us attend too many meetings that produce too few substantive results. With this in mind, we will seek every opportunity to: a) align our planning process with existing forums; b) ensure timely documentation and broad dissemination of action steps; and c) establish short term sub-groups that can expeditiously address specific areas of concern.

## **Resident Realities**

We recognize that neighborhood residents are among the few in community planning processes who are not paid to come to meetings, and who are often the most pressed with other work, family, and life obligations. With this in mind, we will make every effort to hold meetings at times and places that are most convenient for resident representatives in the planning process, and ensure that key steps in the planning process are shared broadly in the community.

## **Balance of Power Dynamics**

We recognize that participants in the planning process have different skill sets, formal roles, and associated status in a community and the larger society. All AHEAD participants acknowledge these dynamics, and are committed to giving equal appreciation and value to diverse contributions, and providing meaningful, shared decision-making opportunities, to all involved in our efforts.

## **Acknowledgment of History**

Many of the institutional stakeholders participating in the planning process may be less familiar than others with historical dynamics in a particular community. Building an understanding of these antecedents and their relevance to current planning processes is an essential contribution of community stakeholders to ensure that the proposed strategy is successful and has strong support in the community.

## **Candor and Respect**

Full candor is expected of all participants in the process in order to ensure that complete information is available to inform the design of a successful strategy. At the same time, all participants share a commitment to a deep, mutual respect and appreciation of all individuals and their contributions, regardless of historical circumstances.

## **Collaborative Spirit**

Participants in the AHEAD initiative share a commitment to move beyond the exchange of information, the alteration of activities, and the sharing of resources to a deeper level of engagement that embraces the larger purpose of *building and enhancing each other's capacity to achieve a common purpose*.<sup>1</sup>

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<sup>1</sup> Adapted from Himmelman, Arthur T. "Communities Working Collaboratively for a Change." In Resolving Conflict: Strategies for Local Government. Edited by Margaret S. Herrman. International City/County Management Association: Washington, D.C., 1994.