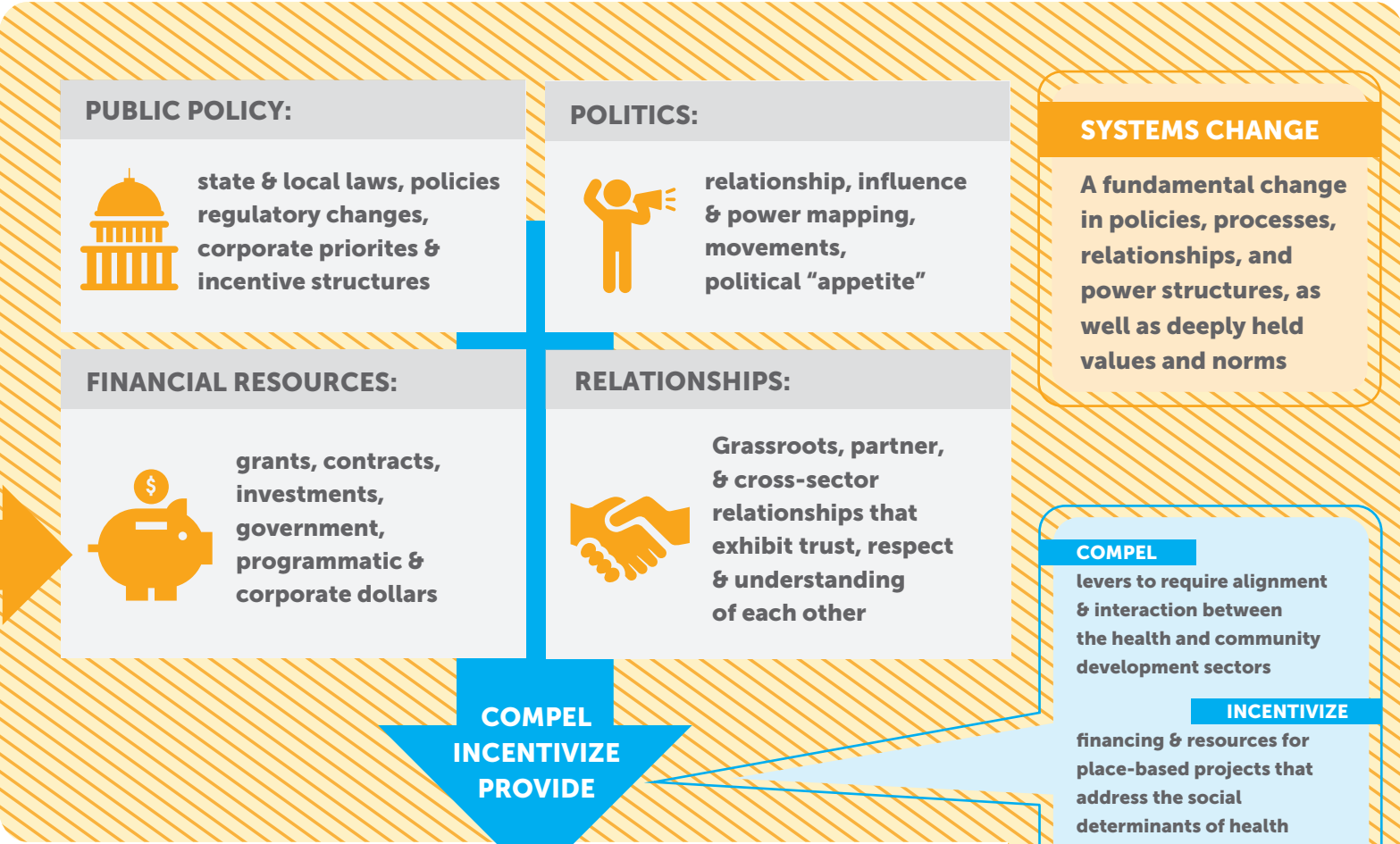


# NACEDA HEALTHY PLACES CHALLENGE: THEORY OF CHANGE

**NATIONAL**  
 NACEDA, Build Healthy Places Network, and Community Catalyst support 34 state and regional community development networks (NACEDA members) to create and implement high-and low-touch systems changes in four systemic categories that focus on LMI communities



**SYSTEMS CHANGE**  
 A fundamental change in policies, processes, relationships, and power structures, as well as deeply held values and norms

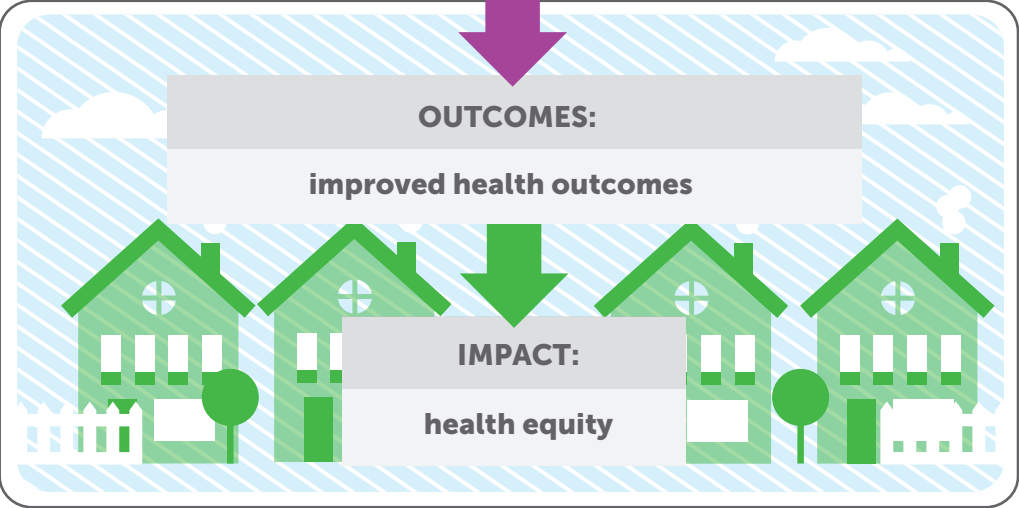
- COMPEL**  
 levers to require alignment & interaction between the health and community development sectors
- INCENTIVIZE**  
 financing & resources for place-based projects that address the social determinants of health
- PROVIDE**  
 a platform to develop broker & institutional relationships & identify shared priorities

**REGIONAL**  
 NACEDA members partner with health organizations to implement systems changes that COMPEL, INCENTIVIZE and PROVIDE community development-health partnerships and place-based development that encourages better health

**LOCAL**  
 System changes facilitate local partnerships, deliver programs and catalyze place-based development that improves health in LMI communities

**PEOPLE & PLACES**  
 LMI communities experience improved health outcomes due to programmatic and development activities, making strides towards health equity

**PARTNERSHIPS, PLACE-BASED DEVELOPMENT & PROGRAMS:**  
 community-level programs, development, partnerships, campaigns & movements that serve LMI communities



**HEALTH EQUITY**  
 The attainment of the highest level of health for all people

- KEY QUESTIONS**
- What are the regional **systemic factors** (such as money, resources, public and corporate policies) that can impact how these two sectors partner and work together to achieve outcomes?
  - How do we build a regional system that encourages **more and effective partnerships** among community-based development organizations (CDCs and similar) and health institutions (public health agencies, hospitals, insurers, etc.)?
  - How do community development and health partnerships **identify and act upon** the most urgent, promising, and tangible health outcomes facing their communities and regions?
  - And—most importantly—how are we ensuring that system changes lead to cross-sector partnerships that improve health equity specifically for America's **underinvested and disadvantaged people and places**, as opposed to the more affluent?