

Pottstown Community Voices Grant Fund

For Residents, By Residents

Introduction

Historically marginalized communities face inequitable access to education, employment, housing and healthcare, and are more likely to experience violence, unsafe air or water, and other health and safety risks, creating ongoing health disparities. All too often solutions to address these community health issues lack a representative voice and contribution from those that are most impacted by the outcomes of investments and interventions. Systematic policies, practices, and stereotypes can affect the opportunity for residents to participate in civic engagement. There is an ongoing need for institutional and organizational leaders to increase engagement of residents, clients, and program participants at all stages of the decision-making process.

In the Spring of 2022, the Pottstown Regional Community Foundation (PRCF) in partnership with Public Health Management Corporation (PHMC) conducted a community health needs assessment, using a multi-method approach to increase the representation of historically marginalized groups that had been underrepresented in previous assessments. The study focused on 6 census block groups that represented the highest levels of poverty and the highest populations of color in the Borough of Pottstown, Pennsylvania.

Typically, data from community needs assessments are presented to the leadership of social institutions, and used as a valuable tool for strategic planning, advocacy, and grant writing. However, the information usually remains at the institutional level, inhibiting residents from accessing and leveraging the data for their own advocacy and decision making. The purpose of this project was to share community health data directly with residents and incorporate community voice in developing solutions to community challenges that directly impacted their neighborhoods.

PRCF communicated a request for proposals from select consultants that had a reputation for conducting work that aligned with the goals of the project. The goals included: increasing capacity to award funding through a racial equity lens; supporting base building and leadership development of residents; and implementing a data driven and participatory response to addressing community health issues. PRCF selected Strategy Arts, a consulting firm with expertise in equitable community engagement, to develop a participatory grantmaking framework with residents engaged in each stage of the grants process. Through facilitated conversations and educational opportunities to support engagement, residents designed a participatory grantmaking framework and led the Community Voices Grant Fund to allocate funds to nonprofit organizations they determined would bring the best solutions to their communities.

Literature Review

Gibson (2018) defines participatory grantmaking (PGM) as “ceding decision-making power about funding – including the strategy and criteria behind those decisions – to the very communities that funders aim to serve.” This differs from a conventional grantmaking approach where the funder identifies priority areas and makes funding decisions (Berube, 2023). Although participatory grantmaking has existed since the 1960’s (Price, Won, Russell, 2024), there are few foundations that delegate decision making through formal participatory grantmaking processes (Price, et al, 2024). Similar to other participatory processes (e.g. participatory research, participatory budgeting), PGM can increase community trust, empathy, positive social development, social capital, and civic engagement (Schugurensky & Mook, 2024). There are a growing number of organizations and networks helping practitioners interested in participatory grantmaking (e.g. Fund for Shared Insight, Candid Learning, the Participatory Grantmaking Community).

PGM can create positive outcomes for both the grantmaking institution and the community. When community members with lived experiences are brought to the decision-making table, institutions benefit from their expertise by deepening their understanding of how investments may directly impact those they intend to serve. This insight can enhance their positive impact in the community and reduce the risk of any unintended negative consequences of their grantmaking. Simultaneously, participants can gain a greater understanding of how institutional decisions are made, how resources are distributed, and how grant recipients utilize those resources to deliver services to the community. This knowledge can directly help residents advocate, and influence decisions that impact their neighborhoods. PGM can also increase mutual trust between residents and neighborhood institutions, ultimately improving community health, reducing health disparities and advancing health equity (Lansing et al., 2023). In 2024, fifty-seven percent of American report high trust in nonprofit organizations; although this was an increase from 2023 (52%), it was preceded by four years of decline. Even lower is public trust in philanthropy which has remained steady at 33% in recent years (independent sector.org, 2024).

PGM practices can encourage change in participant’s agency, power, and leadership (Hauger, 2023), increasing the capacity of the community to solve social problems in their neighborhood (Stiglitz, 2009). Theoretically, the higher degree of control that a community feels they have, the better community health they can achieve (Iton, Ross, and Tamber, 2022). Many communities invest in civic leadership programs to train future and current leaders in the skills necessary to contribute to their communities (Azzam, 2003). Education institutions integrate citizenship education and service-learning opportunities through classroom instruction in primary and secondary grade levels (Lin, 2013). PGM can contribute to a collective approach of increasing civic engagement and leadership which is necessary for inclusive community development.

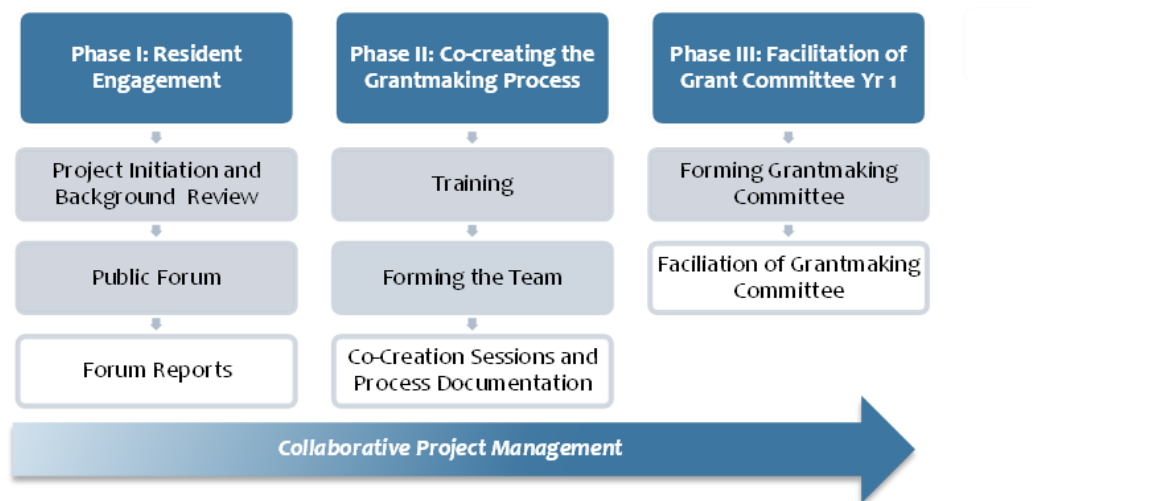
PGM practices do come with challenges that may make it difficult to implement. A shift from traditional grantmaking can be a massive undertaking (Gibson, 2018) and capacity can be a concern for smaller foundations considering the time commitments and resources required for a deeper level of engagement with the community (Evans, 2015). Changes to practices in grantmaking can have effects on other processes within a foundation requiring additional changes to internal processes. Additionally, a foundation can lose credibility and trust with

residents if they do not feel like they do have adequate influence in the decision-making process (Gibson, 2018).

Methodology

The project had three phases: 1) gathering feedback from residents on community health needs assessment results, 2) designing a participatory grant fund, and 3) implementing a participatory grant fund (see Table 1). The following details each phase of the project and steps towards completion of the project.

Table 1: Participatory Grantmaking Process



Phase 1: Community Conversations

To begin resident engagement in the decision-making process and create a foundation for the design of a participatory grantmaking framework, the Project Team (Strategy Arts and PRCF staff) developed an opportunity to have residents review and react to the community health needs assessment results. Community meetings were designed for residents to review and reflect on the results, share reactions, and make recommendations for solutions to community challenges presented in the data. The conversations incorporated trauma-informed practices that both validate and affirm resident experiences, and asset-based framing that brings forth the strengths and aspirations that are present in the communities and lives of residents.

The Project Team held 2, two-hour Community Conversations in June and July of 2023 to share the results of the community health needs assessment. The purpose of the meeting was not only to share results, but to gather input on community health issues that residents felt should be prioritized. Participants were recruited for the community conversations using two approaches: 1) an email was sent to CHNA respondents that expressed interest in future data collection efforts, and 2) local nonprofits were requested to share the opportunity with their program clients and participants.

Strategy Arts facilitated the sessions using their expertise in equitable community engagement. Prior to the sessions, PRCF was provided with guidelines for organizational engagement to enable a safe space for residents that is productive, non-extractive and equitable and generates active and generative dialogue between community members about topics that impact them. To reduce barriers for residents to participate, the sessions were held in the evening at a neighborhood community center. Dinner was provided and participants received a \$50 honorarium to recognize them for their time and contributions.

The first community conversation focused on adults that resided in the project area. As an ice-breaking exercise, participants were asked to share the length of time they lived in Pottstown, and using an asset-based approach, the conversation began by asking residents to speak to the aspects of their neighborhood that they appreciate and value. Next, PRCF shared information about the history of the Foundation and the purpose of the participatory grantmaking project. Strategy Arts facilitators presented an overview on health equity and health disparities to create a shared language for key terms, a process that is important for meaningful community engagement. After presentation of the data, participants were asked to identify the three community issues from a list of social determinants of health which they felt should be prioritized for the participatory grantmaking fund. Participants then shared the reasons why the selected social determinants of health were most important to them. The second Community Conversation followed the same process, however it was focused on youth residents. In addition, the Project Team collaborated with STRIVE, a youth development nonprofit, to recruit youth participants, advise on the design of the conversations, and support its facilitation.

Phase 2: Design of Participatory Grant Fund

The purpose of Phase II was the formation of a small group of residents (Design Team) who helped to develop an equitable participatory grant-making process. Members of the Design Team were recruited from those that participated in the Community Conversations. PRCF staff also reached out to local nonprofit organizations to recommend community members for the Design Team. The recruitment process included a flyer with information about the Design Team and a link to a questionnaire for interested residents to complete, which included demographic questions, length of time living in the area, and the reason for their interest in participating in the project. The Project Team reviewed the responses to confirm residents lived in the project area and to help compose a team that was diverse and inclusive of the community.

Once recruited, the Design Team met 4 times, both in-person and virtually, to create the structure for the grant. The initial session included education for the residents to support their full engagement, and bring their perspectives based on their lived experiences. The content of the sessions included background information about the Foundation, explanation of grantmaking, types of participatory grantmaking models, and results from the Community Conversations. Using this information, the Design Team was led through a series of discussions to design the structure for the grantmaking process, including the goals, purpose, eligibility criteria, grant program focus area, selection criteria, and reporting requirements. They also made recommendations for the name of the fund, and name of the group that would review grant proposals and would make the funding decisions. Design Team members received honorariums (\$25/hour) for their work on this phase. The following month, they participated in a public

presentation to the nonprofit community that shared details of the participatory grant opportunity.

Phase 3: Implementation of the Participatory Grant Fund

Using the results from Phase II, Strategy Arts drafted a Request for Applications that included a background of the fund, focus areas, eligibility requirements, characteristics of a quality applicant, awards and selection process, timeline, reporting requirements, application questions, scoring rubric, and a map of the eligible geographic area. The Project Team recruited members for the Grant Advisory Council, who were interviewed by PRCF staff. The council was composed of participants from the Design Team, and residents were again recruited with the help of local nonprofit organizations. A total of 8 meetings were held between February and June of 2024, both in person and virtual, to implement the Community Voices Grant Fund.

The first session consisted of an orientation and explanation of materials and resources needed for each person to fully participate in the process. It allowed participants to orient themselves to the project and each other. Advisory Council members were asked about their personal goals for participating in this process. Participants learned about participatory grantmaking and the work completed by the Design Team. In the second meeting, the Project Team explained the review and rating process. The Project Team worked to provide education and structure to support personal goals which included learning about grants, learning about the community, and building relationships. Advisory Council members independently reviewed one application, and then collectively discussed each rubric item and their associated scores until they were comfortable with the process. After meeting two, Advisory Council members had approximately one month to review all submitted applications and complete the reviews. Members could either submit rubric scores electronically through google sheets, or on paper. The Project Team checked in regularly to ensure council members did not have any challenges while reviewing the applications.

In meetings 3-6, the Project Team facilitated a discussion on each application where they began the process of reviewing and ranking all applications. Council members had access to a spreadsheet that shared results from the reviewers for each application. Strategy Arts presented a slide deck that included a summary of each application and included key information such as the name of the organization, project title, population served, summary of project need, focus area(s), and amount requested; also included was the average score of the application (out of 100). After each slide, Advisory Council members had the opportunity to share additional feedback about the application. Council members would then anonymously vote on a sheet of paper, selecting one of the following options.

High (3 points): *If there is enough funding, I would definitely want to fund this application (partially or in full)*

Medium (2 points): *I might want to fund this application. Would like to discuss/consider more.*

Low (1 point): *I would definitely not or likely not fund this application.*

This process continued until all applications were reviewed.

In meeting six, Strategy Arts provided a spreadsheet, listing all applicants and project information including project title, requested amount, initial average rubric score, post review score, focus area, and population served. Different funding scenarios were presented to the council. For example, funding more applications at a lower amount than requested, or a smaller number of applications at the full amount requested. Using these results, the members came to a decision about how to distribute the available funding. Following meeting six, the Foundation staff completed the grant management process including award/declination notifications, and check processing. In meeting 7, the Project Team collected feedback from the Advisory Council members on their experience including the review process, the applications, and the Advisory Council. Following this meeting, an electronic survey was sent to the council members, thanking them for their time and contributions and requesting the completion of a survey about their experience including compensation, satisfaction, and trust building.

In the final meeting, PRCF hosted a Meet & Greet for the Advisory Council and grantees. This was an opportunity to build relationships between the Advisory Council and grantees, and celebrate the inaugural CVGF. Advisory Council members and grantees introduced themselves and shared a meal together. Halfway through the grant term, PRCF hosted a virtual meeting for grantees to provide updates on their awarded projects. Each grantee in attendance provided an update on their grant project. This was followed by an opportunity for PRCF and Advisory Council members to ask questions. A final report was due one year following the start of the grant term.

Results

The following describes the results of the project including: 1) Community Conversations, 2) Design Process, and 3) Community Voices Grant Fund.

Community Conversations

A total of 27 residents attended the community conversations; 8 adults attended Session I, and 19 youth attended Session II. Participants shared what they felt were the most important community issues from the data presentation. The two issues most mentioned were: mental health and feeling safe/community safety. After reviewing the results from both sessions, there were four issues that received the most attention; Feeling safe in the community; Housing; Mental Health; and Park and Recreation Facility Access. These four issues emerged as community priorities. Information from the community conversations was used to guide decisions by the Design team on the grantmaking framework.

Design Team

The Design Team was composed of 8 residents, including 3 youth, that lived in the project area. During the 4 participatory grantmaking framework design meetings, the following decisions were made:

Priority Areas: after reviewing and discussing the community priorities identified through the community conversations, and data from the community health needs assessment, the design team supported the four priorities identified during the community conversations (Housing, Park and Recreation Facility Access, Feeling Safe in the Community, Mental Health), and added a fifth priority, Employment.

Title of Fund: after submitting ideas for the title of the grant fund via an online form, the Project Team presented 2 options to the Design Team. The team agreed on the title, *Community Voices Grant Fund*, with the tagline *For Residents, By Residents*.

Characteristics of Quality Applicant: the Design Team determined that quality applicants should be able to demonstrate that they possess the following attributes: they are committed to a thriving, healthy, successful future for Pottstown; they are committed to collaborations and partnerships within the community; they are representative of the communities they serve; they submit proposals informed by the community; and they are invested in community participation.

Scoring Rubric: the following items were identified as important components to the awarded projects and were used to evaluate the applications using a rubric. The Project Team weighted each rubric item (listed in parentheses) for a total possible application score of 100 points.

Geographic Area Alignment (25)
Focus Area Alignment (25)
Addressing Solutions from the Community (10)
Community Involvement (10)
Collaboration & Partnerships (10)
Program/Project Impact (10)
Data Driven (10)

Maximum Requested Amount: the Resident Advisory Council had \$100,000 to distribute through the application process. The Project Team presented a range of options although there was no consensus. The Design Team agreed on the recommendation by the Project Team that the maximum dollar amount that could be requested was \$15,000.

Focus Areas: using results from discussions from the design team, Strategy Arts presented 5 focus areas along with examples of community solutions. These were guided by the Community Conversations and feedback on community issues from the design team. The council agreed to the following focus areas:

Access to Parks/Recreation/Green Spaces: When residents have safe access to open spaces, parks, and recreational activities, health and well-being are promoted. Additionally, a community is built when individuals from diverse backgrounds come together in common places and spaces. Project examples included: Access to parks, natural lands, and open spaces including water access; Expand activities that are available for adults; Recreation and exercise opportunities for youth; Support for physical spaces that invite all community members to come together (parks, community centers).

Positive Mental Health Solutions: Improving the mental health of residents directly influences positive quality of life outcomes. Project examples included: Increasing access to mental health care; Holistic approaches to promote mental wellness; Community building programs and initiatives to support positive social connections; Youth programs for positive mental health development; Mental health programs and resources for parents

Neighborhood Safety When residents don't feel safe in the community in which they live, they cannot thrive. Neighborhood safety is a fundamental aspect of the health and well-being of a community. Project examples included: Programs that address gun violence; Programs that support youth violence prevention; Physical infrastructure improvements including street lighting and the lighting of alleyways, street improvements, the repair of walkways, additional fencing, sidewalk repair, litter clean up; Programs that build positive connections with law enforcement

Housing: Belonging to a healthy community includes the ability to live and thrive in a place you call home. Project examples included: Long-term (non-emergency) support for renters/homeowners; Lead / Asbestos removal initiatives; Programs that help homeowners with repair projects and ongoing maintenance (pest control, window repair, HVAC); Programs that increase pathways to home ownership; Innovative solutions for increasing affordable housing

Eliminating Barriers to Employment: Productive, meaningful employment that provides a living wage is essential to leading a healthy life. By eliminating barriers to employment, the community promotes its own health and wellbeing and sees positive upward mobility for all. Project examples included: Mentorship & educational support for youth; Internships; Hard and soft skills development programs; Entrepreneurial investment.;

Community Voices Grant Fund

There were a total of 6 resident Advisory Council members for the Community Voices Grant Fund that reviewed applications and made funding allocation decisions.

Funding Decisions: A total of 18 applications were submitted to the CVGF. The Advisory Council rated 5 applications green, seven applications yellow, and six applications red. After the follow up discussions, 8 were approved for funding. Five organizations received an award for \$15,000, 1 organization received \$10,000, 1 received \$8,000, and 1 organization received \$7,000 for a total of \$100,000. Five grants addressed Access to Parks, 7 grants addressed Mental Health Solutions, 2 grants addressed Neighborhood Safety, and 2 grants addressed Barriers to Employment. There were no grants for projects that addressed Housing.

Post Participation Survey: Four of the eight council members responded to the survey. Council members were asked how much they felt their experience impacted them on various items, on a scale of 1 to 5, where 1 was 'none', and 5 was 'a lot'. See Table 1.

Comments included: "I liked the way the meetings were conducted"; "everyone had a chance to express ourselves"; "I feel everyone was very respectful even if we were not in agreement", "The whole experience was very enlightening"; "I feel I learned a lot from the grants." Participants also shared, "I actually got more out of it than I expected", and "I feel more a part of my community."

Table 1: Post Participation Survey

Items	Score*
Did you get out of the experience of serving on the Advisory Council what you hoped to get?	4.75
Would you say you were proud of the work of the Advisory Council and the grants provided?	4.75
Did you feel the honorariums were adequate for the work you did?	4.5
Did you feel that your voice was heard by other Council members and the PRCF team	4.25
Did your knowledge of what is happening in your community increase?	4
Did your knowledge about nonprofits and grant funding increase?	4

* scores on a scale of 1 to 5, where 1 was 'none', and 5 was 'a lot'.

Reflections

This project shifted the role of grantmaking decisions from the institution to the community, with the institution providing the constraints and supports within which the residents could effectively participate. This resulted in a grant framework designed heavily by the community. Throughout the process the Project Team was careful to balance providing information and support without influencing the decisions of the Council. As a result, community members gained knowledge and skills to making funding decisions while the Foundation developed a framework for participatory grantmaking and learned how residents could effectively engage in the grantmaking process.

The following highlights some reflections from the Community Voices Response Fund:

Community Engagement: There is a spectrum of approaches to engaging community members in grantmaking processes from informing decisions to making decisions, from pre-grant to post grant processes (Gibson, 2004). Initial strategic conversations between the Project Team were important to determine the level of engagement throughout the grantmaking process, and ensure goals of the project were met while considering the resources available to commit to this project, alignment with existing policies and procedures, and level of internal comfort with each approach.

Ultimately the Project Team decided to engage in a process that allowed residents to make decisions during the pre-grant, granting, and post-grant processes. This included identifying problems; developing the application process, decision-making criteria, and guidelines; reviewing and/or making changes to the grantmaking review process/system; deciding which applicants will receive funding; designing and participating in peer review of participatory judging processes; and mid-term reporting. Each decision required facilitating a discussion with council members and coming to a group consensus, in addition to providing information that would help support decision making. It was clear at times that the Project Team may have deferred too many decisions to the residents, and it was difficult for the Design Team members to come to an agreement. When the Project Team was uncertain of whether to intervene, we leaned toward not influencing the Advisory Council's deliberations, unless the recommendation conflicted with grantmaking policies, procedures, or approaches.

Equitable and Inclusive Practices: For the end result to be equitable, the process of developing the participatory grantmaking process also needed to be an equitable one. Equitable and inclusive practices were implemented during all phases of this project.

In Phase I, results of the needs assessment were shared during the community conversations with residents that lived in the study area, thus countering the more typical and extractive practice of gathering information from community members and keeping the data housed at the institutional level. The consultant developed guidelines for institutional representation at the Community Conversations that include how to best engage with residents and participate. In addition, the Project Team reviewed and reflected on available literature about data territorial stigmatization and how data can further harm the people and communities that you are seeking to help. The team discussed ways to incorporate practices that destigmatize the needs assessment data. This data can be activating and triggering when residents see numbers that represent the harm caused to their community by historic and current racism. When sharing results, the presenters emphasized the structural issues that create health disparities. The consultant also incorporated trauma informed practices that validate and affirm participant experiences and asset-based framing that highlight the positive aspects very present in the participants' communities.

During recruitment for the Design Team a questionnaire was developed to gather information on demographic characteristics to help form a representative group of residents from the project area. While the group worked well together and produced excellent results, we realized that some members of the Design Team were not always supportive of equitable practices. Therefore, a screening interview was included during recruitment of the Advisory Council to communicate

the goals of the participatory grant and to ensure members supported the principles of the participatory approach.

Before each meeting, meeting principles were reviewed to support a safe and productive space. The principles included: Take care of yourself – and others; Speak from personal experience – use “I” statements and speak only for yourself; Seek to understand – test assumptions by asking questions; Maintain confidentiality – share your learning; Avoid sharing other people’s comments and stories; Protect your mental health – this is a safe space.

Recruitment: recruitment was a challenge, taking longer and requiring more outreach efforts than expected. The Project Team decided it was important to include youth voice in this process so a partnership was formed with a local youth development non-profit to support that engagement in the Community Conversations, the Design Team, and the Advisory Council. They were able to offer strong support for the youth that participated in the Community Conversation and Design Team including reminders of meetings, technological support, and transportation to meetings. When the partner was no longer able to provide this level of support, we were not able to maintain the youth engagement. This was a disappointment and a loss of an important perspective from the community.

While the initial recommendation from the Design Team was to have an advisory council of 9-13 members, we were unable to recruit enough interested participants. This project was a six-month process and it could be difficult to commit to this considering work, school, extracurricular, and familial obligations. However, in the end a committee of six was adequate for the number of applications submitted, and to maintain a space where all council members had the opportunity to participate.

Technology: since the majority of the meetings were virtual, it was important to ensure that all council members had adequate technology and capability to use the technology. Some training on virtual meeting features such as turning microphones on/off and using the hand raising tool was provided. Online meeting etiquette was also discussed. We offered both electronic submission and hard copies for application reviews. This reduced barriers to reviewing and submitting reviews, however it required PRCF staff to drop off and pick up applications and rubric worksheets. This was also the case for the honorariums. Although most council members preferred electronic payment, others preferred cash. Because meetings were held virtually, this required the PRCF to drop off payments. Payments were ultimately bundled to continue to ensure participants received the payments in their preferred method, and to streamline the distribution process.

Resident Outcomes: Hauger (2021) questions if the implementation of new participatory practices and processes have any notable impact on the participants. One goal of implementing this framework was to build trust between institutions (i.e. Foundation, Grantees). Some reasons for distrust include: money doesn’t go where organizations said it would, too much goes to overhead and salaries, Executive Directors are not in it for the right reasons, and negative personal experiences. The project allowed council members to learn more deeply about nonprofits serving the community, and hear personal narratives from organizational leadership. Throughout the process, the PRCF remained involved, participating in meetings and communicating electronically with council members. Building trust between institutions and

community members is likely a long-term process and requires ongoing engagement. Although a stated purpose was building trust between residents and institutions, we also observed relationship building between residents. Council members supported each other during the project including helping each other with technology, and providing rides to the in-person meetings. Other outcomes included skill development with software including excel and zoom. In addition, for some members, it provided a sense of purpose and connection to the community.

Foundation Outcomes: The more a funder better understands a community issue, the more effective they can be as a grantmaker. This process allowed the Foundation to hear first-hand the most pressing community issues from the perspective of the residents and their solutions to improving the quality of life in their neighborhoods. The advisory council members were able to share unique insights into some of the programs and projects that nonprofit organizations were requesting funding for as they lived in the neighborhoods where the programs and projects were proposed to be delivered and implemented. This information created a more rich discussion when determining the allocation of funds. This project helped the Foundation identify informal leaders in the community that had interest in making a difference. Since completion of this project, some Advisory Council members have participated in other community engagement opportunities or meetings hosted by the Foundation supporting efforts to increase civic participation.