



United Way
of Greater Charlotte



United Way of Greater Charlotte

Impact Framework

At United Way of Greater Charlotte (United Way), we believe that everyone has a right to achieve optimal physical, mental, and social well-being no matter where they live or who they are. To help achieve this, we have developed an impact framework focused on creating economic mobility through grassroots, place-based investments that are rooted in equity, led by residents, and focused on the social determinants of health. The next few sections describe our impact framework and rationale for our approach.

Impact Framework

What are the Social Determinants of Health?

The Social Determinants of Health (SDOH) refer to the conditions in which people live, learn, work, and play that affect a wide range of health, functioning, and well-being outcomes. The SDOH can be grouped into five domains (Office of Disease Prevention and Health Promotion, n.d.):

- **Economic Stability** refers to areas such as employment, income, poverty, net worth, housing stability, and food security.
- **Education Access and Quality** refers to the quality, availability, and effectiveness of educational programs.
- **Health Care Access and Quality** refers to access to health insurance coverage, quality care, and health literacy.
- **Neighborhood and Built Environment** refers to components of individuals' surroundings, including housing quality, transportation access, grocery store availability, environmental pollutants, and local crime.
- **Social and Community Context** refers to individuals' social contexts, such as community engagement, civic participation, discrimination, and incarceration.

The SDOH are interlinked – In other words, less favorable conditions in one SDOH domain are likely to impact conditions in another domain. For example, people born into poverty often lack economic stability due to underemployment and/or lack of income. At the same time, individuals experiencing poverty are more likely to face barriers accessing quality health care, housing, and schools, leading to unfair differences in their health and well-being (Song et al., 2011; Brennan Ramirez et al., 2008).

Locally, the odds for breaking the cycle of intergenerational poverty and achieving economic stability are disheartening. According to a study by Harvard researchers, Charlotte ranks **50 out of 50** major U.S cities in upward economic mobility – with children who grow up in neighborhoods with high poverty having the lowest odds of escaping poverty in their lifetime (Chetty et al., 2014; Opportunity Insights, 2020). Thankfully, efforts to solve this issue are already underway, and leaders in the Charlotte and the surrounding communities are committed to reversing this trend.

Why Ground Our Work in Equity?

While inequities exist across many dimensions, including but not limited to race, ethnicity, gender, sexual orientation, disability status, and class, research shows that most inequities are in large part due to historical patterns of structural oppression based on race and/or ethnicity. Below are some data points to help illustrate racial and ethnic disparities that exist across the SDOH.

Economic Stability

- **Poverty.** In 2020, 25% of Hispanic residents and 18% of Black residents in Charlotte were living in poverty, in comparison to 7% of white¹ residents (Opportunity Insights, 2020; Daniszewski, 2020).
- **Income.** In 2020, median household income for Asian Americans was \$94,903 and for non-Hispanic whites was \$74,912. By contrast, median income was \$55,321 for Hispanic households and \$45,870 for Black households (Statista, 2021).
- **Net Worth.** In 2019, the average net worth of white households in the United States was 7 times the average for Black families and 6 times the average for Hispanic families (Board of Governors of the Federal Reserve System, 2021).

Education Access and Quality

- **Early Childhood Education.** In 2016, Black children, by the time they entered kindergarten, were on average nearly 9 months behind in math and 7 months behind in reading compared to their white non-Hispanic peers, disparities which research indicates persist throughout schooling but are effectively targeted by increasing Black families' access to high-quality early childhood education programs (Friedman-Krauss & Barnett, 2020).
- **Reading Proficiency.** In 2019, only 18% of Black and 23% of Hispanic 4th grade students were proficient or above in reading, in contrast to 44% of white and 57% of Asian American 4th grade students (National Center for Education Statistics, 2020).
- **Post-Secondary Education.** In 2019, 78% of Asian American and 56% of white adults over age 25 had an associate degree or higher, compared to 31% of Hispanic adults and 40% of Black adults (Education Data Initiative, 2021).

Health Care Access and Quality

- **Health Insurance Coverage.** In 2019, 10% of Black and 17% of Hispanic individuals were uninsured, in contrast to 5% of white and 6% of Asian Americans (Keisler-Starkey & Bunch, 2020).
- **Infant Mortality.** In 2018, the infant mortality rate for Black babies in North Carolina was 11.9 infant deaths before age 1 per 1,000 live births, compared to 5.2 and 5.4 deaths per 1,000 live births for white and Hispanic babies, respectively (United Health Foundation, n.d.-b).
- **Healthcare Services.** In 2016, 12.3% of Black adults had difficulty getting needed care, tests, or treatment compared to 6.8% of white adults (Agency for Healthcare Research and Quality, 2019).

¹ See Daniszewski's (2020) article: *Why we will lowercase white* for more information on why "White" is lowercase in our text.

Neighborhood and Built Environment

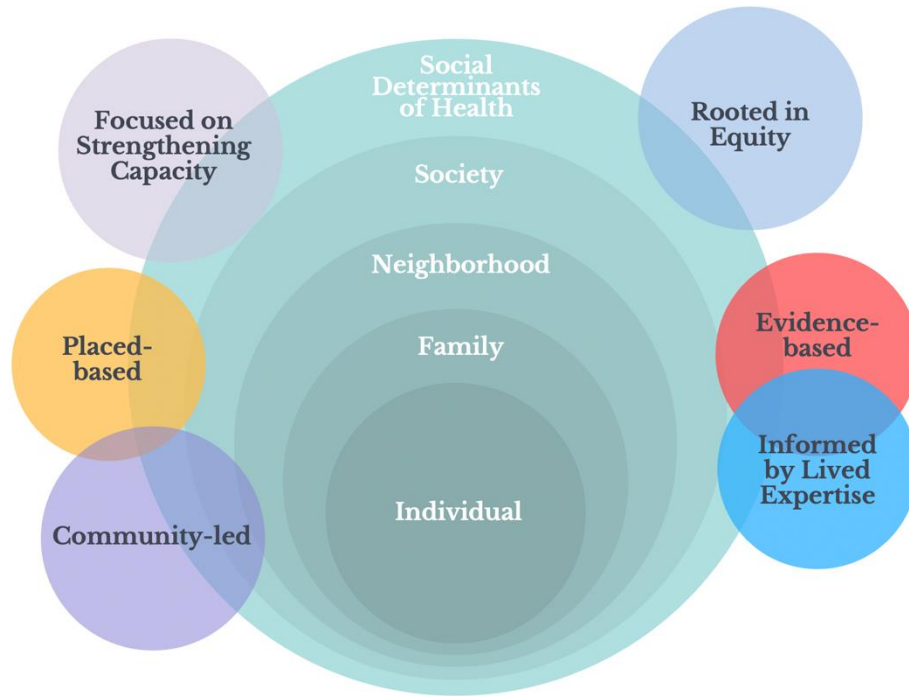
- **Housing Quality.** In 2018, 13% of white Americans faced severe housing problems, compared to 25% of Black, 29% of Hispanic, and 22% of Asian Americans (United Health Foundation, n.d.-a).
- **Healthy Food Availability.** In 2016, 18% of mostly Black neighborhoods had limited access to supermarkets, as opposed to 8% of predominately white neighborhoods (Reinvestment Fund, n.d.).
- **Violent Crime Exposure.** In 2016, 7% of Black youth had been the victim of violence or witnessed violence in their neighborhood, as compared to 3% of white youth (Sacks & Murphey, 2018).

Social and Community Context

- **Civic Participation.** In 2017, 19% of Black adults and 15% of Hispanic adults reported experiencing discrimination when voting or participating in politics, compared to 4% of white and 7% of Asian individuals (Solomon et al., 2019).
- **Bullying.** In 2016, despite comprising 15% of overall student enrollment, Black students reported 36% of bullying based on race or ethnicity (Office for Civil Rights, 2018).
- **Incarceration.** In 2016, Black adults were 5.9 times more likely to be incarcerated than white adults. In fact, Black Americans are disproportionately more likely than white Americans to be arrested, convicted, and experience lengthy prison sentences (The Sentencing Project, 2018).

United Way prioritizes funding organizations that focus on addressing racial and ethnic inequities. United Way recognizes that these are not the only groups experiencing systemic inequities and that some groups experience multiple forms of oppression based on intersecting group memberships. However, as some of the most enduring and pervasive inequities fall along lines of race and ethnicity, United Way is focused on prioritizing investments that address racial and ethnic disparities. In doing so, we will be better equipped to transform systems and institutions towards a more equitable future for all.

Impact Framework



Best Hope for Creating Economic Mobility

Beyond focusing on social determinants of health, research suggests that, to address inequities in our communities, we also must:

- Use grassroots or **place-based** strategies
- Develop solutions that are **community-led** and informed by **lived experience**
- Implement interventions that are **evidence-informed**
- Fund interventions **across issue areas** and **across systems** (e.g., education, health, housing, etc.).
- Strengthen the **capacity** of grassroots and/or community based organizations

To ensure we align with research and best practices, United Way has shaped its impact framework so that these elements are embedded in its investments. The next sections further describe the guiding principles for our investment strategies.

Why Place-Based Investments?

Historical and present-day policies and practices including but not limited to residential segregation, discrimination, redlining, urban renewal, and lack of investments in communities of color, have created sharp divides in neighborhoods across the U.S. (Valentine, 2020; Burrowes, 2021). For example, previous research has shown that white affluent neighborhoods are often favored for infrastructure investments at the expense of communities of color, who get displaced, priced out, or simply not given the same access to opportunities as their white counterparts (Rothstein, 2017; Caro, 1974). As a consequence, people of color are often forcibly concentrated on the outskirts of cities, with less access to quality housing, education, employment, food, and other basic needs (Valentine, 2020). United Way recognizes that short-term funding will not reverse decades of targeted disinvestments in communities of color (Lambe, 2015). As such, United Way is committed to place-based investments supporting neighborhood revitalization, as well as individual and community well-being.

Why Community-led?

To uncover the root causes of community issues and address structural inequities, it is important to recognize the expertise of the people living in communities we serve (Farrell et al., 2021). Historically, there has been a power imbalance in the decision-making process regarding community need, in which a privileged few determined the allocation of resources to a given community, with little input from those that are directly affected. However, research has shown that economic mobility is best addressed through targeted investments reflecting residents' voices, lived experiences, and priorities (National Academies of Sciences, Engineering, and Medicine, 2017). In doing so, we offer community members the ability to drive solutions tailored to the distinct strengths, assets, and needs of their community.

Why Evidence-Informed?

Although many factors are important for making progress toward economic mobility, missing from most investments, but critical to success, is the need for communities to identify evidence-based interventions and/or practices for achieving their community goals (Child and Family Research Partnership, 2018). Many nonprofits and/or community-based programs attempt to reinvent the wheel—without the expertise of individuals with lived experience, and/or decades of research that have already identified promising drivers of change. By combining evidence-based practices with lived experience, we are better equipped to achieve and sustain progress towards community goals and transformation.

Why Focus on Multiple Systems?

At United Way, we recognize that to achieve and sustain change within communities, we must not only focus on the individual, but also on the multiple systems in which an individual is embedded (e.g., family, neighborhood, school, society, etc.). Research has shown that interventions and/or programming generally focus solely on the individual, often ignoring the impact of a person's social and physical environments on their health and well-being (Westmaas et al., 2011). When possible, United Way will fund a combination of investments that will allow for tackling issues across multiple systems.

Why Focus on Strengthening Capacity

Many grassroots organizations are already working to create safe and thriving communities where people can work, live, play, and reach their potentials. Unfortunately, many of these grassroots organizations are not able to maximize their impact, or sustain their work due to a lack of capacity. As a result, funders, service providers, and practitioners have begun calling for investments that *strengthen organizational capacity* -that is, activities designed to improve and enhance a nonprofit's ability to achieve its mission and sustain itself over time (see Figure 1 for areas generally targeted for capacity building efforts).

United Way is committed to strengthening the capacity of grassroots organizations in fulfilling their mission and sustaining their impact.



Figure 1. United Way Focus Areas for Capacity Building.

Social Determinants of Health

- Economic Stability**
Children, youth, and families have the resources to achieve financial stability and meet their needs
- Education Access & Quality**
Children, youth, and families have access to high-quality education and the resources needed to succeed
- Health Access & Quality**
Children, youth, and families have access to affordable, timely, and high-quality health services
- Built Environment**
Children, youth, and families live in environments that promote health, safety, and well-being
- Community & Social Context**
Children, youth, and families have positive social and community supports where they live, work, and play



Figure 2. United Way Goals across the 5 Key Social Determinants of Health

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[ecl4;population:all;units:mean;range:1989,2019](https://www.federalreserve.gov/econres/scf/dataviz/scf/table/#series:Net_Worth;demographic:race4;population:all;units:mean;range:1989,2019)

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