

CAHF's Focus on “Systems Change” and “Policy Change”

Systems

Systems may be both intentionally created and evolve organically in response to the needs of communities. Like icebergs, often the visible structural elements of a system rest on a much larger base of less-visible assumptions, practices, and cultural choices. Health care systems can be very complex, and their success is often determined by how well they work together with other systems that affect health.

Systems Change

Defined as a fundamental change in policies, processes, relationships, and power structures that are oppressive and unjust.

A “Systems Change” approach addresses the root causes of social problems, which are often intractable and embedded in networks of cause and effect. It is an intentional process designed to fundamentally alter the components and structures that cause the system to behave in a certain way.

Policy

Policies can be understood as governmental or political (official written documents such as legislative or regulatory policies), managerial (operational, financial or administrative mechanisms) arranged to reach explicit goals.

Policies exist, and affect communities and institutions, at many levels. Policies interact with other systems, regulate access (who is served, when, where and to what degree). Policies define problems and solutions—and all of these have effects on the health of people and groups.

Policy Change

Policy Change refers to incremental shifts in existing structures, or in the development of new and innovative policies. Changes to existing policies can be undertaken through legislative, statutory, regulatory, administrative, modifying routines, protocols and by incorporating “best practices. The Affordable Care Act, health care reform, is an example of a major policy change consisting of legislative, statutory, and regulatory policy changes.

Changing policies can be an important strategy in implementing reforms and community interventions.

Grant applications that identify and demonstrate an understanding of how one or more policies affect health and demonstrate a strategic focus on changing such policies to better serve those affected, will be very competitive.

Con Alma Health Foundation does not fund lobbying or other activities prohibited by the Internal Revenue Service. However, such activities are rarely successful unless many other kinds of policy change effort have already taken place—activities that Con Alma Health Foundation will fund. These may include community organizing, statutory or legislative advocacy (building awareness and educating stakeholders and leaders), regulatory or administrative advocacy.