

Community Climate Equity Initiative

A look into the history and initial outcomes of a community-led and co-developed climate resilience planning effort with health care institutions after 1 year of collaborations.

The Community Climate Equity Initiative (CCEI) is building a bridge between health systems and communities to form a cohesive network that addresses the health impacts of climate disruption and synergistically supports community and health care facility resilience through equitable partnerships and co-developed strategic initiatives.

History & Groundwork

Anchors in Resilient Communities (ARC) is a partnership between <u>Health Care Without Harm</u> and <u>Emerald Cities Collaborative</u> to develop equity-centered regional projects that leverage the assets of health care <u>anchor institutions</u> to improve community health, wealth, and climate resilience. Anchor institutions are entities that are firmly rooted within communities, such as health systems and universities, and hold significant socioeconomic power,

For nearly 30 years, Health Care Without Harm (HCWH) has helped the health care sector protect patients and communities from the health impacts of pollution and the changing climate, while Emerald Cities Collaborative (ECC) has led impactful work to build communities that are more equitable, economically just, and sustainable while advancing racial, economic and climate justice for over 15 years. Leaning on the decades of experience, networks, and trust built by HCWH within the health care sustainability sector and by ECC in the environmental justice space, ARC was established in 2015 as one of the first initiatives that intended to bridge power gaps between communities and large health care institutions.

Over the years, ARC championed place-based work in the Bay Area through the Regional Food Systems initiative, enabling sustainability and community wealth by supporting health care food purchasing from local and historically marginalized producers, and through learning opportunities for activating health care institutions to embody their anchor mission. In 2022, we observed a crucial piece of the puzzle was still missing—equitable representation from community stakeholders that was proportional to the attendance and power of health care institutions. This realization was followed by an intentional engagement plan to understand and uplift community priorities, and weave those with health care sector opportunities. That same year, a community convening that



included partners like Local Clean Energy Alliance, GRID
Alternatives, Asian Pacific
Environmental Network, SPUR,
People Power Solar Cooperative,
People's Solar Energy Fund,
Richmond Progressive Alliance,
and Creative Development
Partners, elevated climate
resilience – the ability to prepare
for, withstand, and recover from
climate disruptions while
preventing climate impacts from
growing – as a top priority.



In 2023, ARC shifted gears to

build our health care partners' readiness on what it takes to engage in equitable co-development through a series of <u>Learning Lab Sessions</u>. This effort continued in 2024 with an anchor convening and interview process that helped identify champions and understand partner priorities, and came to a full circle with the first dual community-anchor convening where cross-sector discussions highlighted one top area of opportunity: *resilience hubs*.

Why Resilience Hubs?

The Urban Sustainability Directors Network defines resilience hubs as: "Community-serving facilities where community members can access services for disaster response and recovery, as well as gather, organize, and access resilience-building social services on a daily basis." They emerged as a main opportunity for collaboration because they represent existing and accessible infrastructure the community can readily tap into, while offering multiple paths for health care institutions to support their capacity, infrastructure, or programming.



From Idea to Reality: The CCEI 2025 Resilience Hub Pilot

Following this engagement, ARC received seed funding from Patagonia and Blue Shield of California to develop a pilot project that tested the idea and process of increased



collaboration between health care anchors and community organizations to strengthen community climate resilience via resilience hubs.

ARC had identified various stakeholders during the groundwork phase to now mobilize them around a concrete opportunity. CCEI had entered a new phase in its lifecycle – the opportunity had been collectively identified and resourced to make the vision a reality. Honoring the values of equitable co-development and shared governance, ARC ensured the community was not merely centered, but leading the process, too.

Our Approach to Equitable Co-Design: Emergent Strategy & Collective Visioning

Organizing different sectors is a challenging aspect of equitable co-design. While health care and community anchors have interrelated priorities and goals, these are often carried out using different processes. There is an interdependence that connects us all as we collectively face the climate crisis. Articulating this reality in a way that resonates with each sector is key to activating partners not merely to be *recruited* for a project, but to *collectively develop* the objectives and deliverables with a high potential for impact.

In early 2025, the ARC team conducted an intentional outreach campaign including 1-1 meetings, open-office hours, and a brainstorming session where partners came together to shape the project objectives and structure. ARC distributed <u>outreach materials</u> describing high-level activities and potential outcomes to guide conversations while discussing partners ideas and barriers around community climate resilience collaboration.

We engaged over a dozen stakeholders throughout this outreach process and held a brainstorming session on Apr 22, 2025. The themes that emerged during the brainstorm served as the basis for the project model, Charter, and the workstreams that followed, and were gathered via two facilitated discussions described below:

- Understanding the Landscape: Each organization shared their place within the broader ecosystem of resilience and answered sector specific questions. This discussion fostered cross-sector learning and deep listening, while offering context for the second discussion. Broadly, the themes that emerged revolved around the following needs:
 - Community education initiatives and assessments that bridge community needs with resilience hub offerings.
 - Integration between clinical responses, bedside care, and community resilience offerings.



- Supporting organizations to grow into resilience hubs, and increasing health and wellbeing of residents on a block by block model.
- Funding, as lack of resources continue to be major barriers.
- Having actionable to-dos and spaces for intentional connection.
- Connecting the Dots and Visioning: The second discussion was meant to spur group visioning through open-discussion prompts and sector-specific questions. ARC staff facilitated the discussion while encouraging creative thinking and problem solving. Ideas and opportunities that emerged from this discussion included:
 - Expanding existing health care programs to weave them with community partnerships.
 - Conducting a self-assessment at a community safety-net clinic, to identify needs and build capacity to become a resilience hub.
 - Bringing disability and other vulnerable community advocates into the space, as well as other types of health care entities such as clinics.
 - o Conducting asset mapping and developing a shared resilience resource hub.
 - Access to data to act proactively and share timely resources with community members during a climate emergency, while establishing consistent data sources and data points.

Our Project Model: Breaking Silos While Cultivating Focused Action

The opportunities identified during the brainstorm session highlighted common themes that could be organized around pillars of work centering community climate resilience and resilience hubs. Partners also expressed a need to have tangible actions, which was often a challenge when addressing climate resilience planning at a system-wide scale.

ARC developed a cohort-workgroup model that created spaces for partners to focus on efforts based on their needs, opportunities, and interests, while still fostering cohesion, regional coordination, and silo-breaking. The goal of this model was to move from broad vision into specific action through ARC's coordination and facilitation with partner buy-in and agreed upon alignment.

Our Community of Practice: The CCEI Cohort & Stakeholders

Our table has continued to grow since the brainstorming session, as a goal and key indicator of success is to see the expansion of our collective effort. To this day, our cohort includes representatives from the following:

• *Health care institutions:* UCSF Health, UC Center for Climate, Health, & Equity, Stanford Children's Health, and Blue Shield of California.



- Community clinics: Roots Community Clinic and Aliados Health.
- Service organizations and resilience hubs: St. Mary's Center, SF Women's Building, and Local Clean Energy Alliance.
- Municipal agencies: SF Department of Public Health and SF Office of Resilience and Capital Planning,
- Nonprofit organizations: Thrive Alliance, and Collective Resilience.

In the process, we have also cultivated partnerships with stakeholders such as MedCycle Network, Harbour Hall-Community Resilience Center, and Tracking California.

Important Note: Our cohort partners and stakeholders do not represent their entire institution or organization, but rather serve as champions that liaise, identify opportunities for collaboration, and connect and leverage resources in support of shared goals and objectives.

Our Containers of Action: The Workgroups

The workgroups were established to address three pillars of work that encompassed various opportunities identified during our brainstorming session:

1. Program Expansion & Co-Development Workgroup: Health anchors can partner with resilience hubs to expand existing programs to incorporate community resilience principles. Our 2025 objective was to establish a supply donation pipeline between hospitals and a resilience hub, to reduce supply waste from health care institutions while offering community supplies and a positive financial offset for the hub. Members of this workgroup represent UCSF Health, Stanford Children's Health, and The Women's Building.



2. Community-Based Anchor Needs

Assessment Workgroup: Community Clinics and Health Centers have a unique opportunity to function as resilience hubs and support community climate resilience on a block-by-block basis due to their established community presence and trust. However, they need tools to assess their capacity to respond during climate disruptions and recovery efforts while maintaining health care delivery. Our 2025 objective was to co-develop a Resilience Hub Readiness Self-Assessment that incorporated community health center considerations, allowing them to



- self-identify infrastructure and programmatic needs to become a resilience hub. Members of this workgroup represent Roots Community Health, St. Mary's Center, Thrive Alliance, and Blue Shield of California.
- 3. Climate Resilience Resource Hub Workgroup: Health anchors, hubs, community organizations, and municipal agencies need cross-sector coordination and access to consistent data to build evidence-based regional planning efforts. We identified a need for matchmaking between regional resources and needs, and focused our 2025 efforts on developing two sector-specific surveys for health care and community organizations as a first step towards a regional asset mapping and matchmaking process. Members of this workgroup come from the SF Department of Public Health, SF Office of Resilience and Capital Planning, Stanford Children's Health, the UC Center for Climate Health and Equity, UCSF Health, and Collective Resilience.

Our Grounding Guide: The CCEI Charter

Ensuring collaborative commitments and measures of accountability is essential for the sustainability of long-term partnerships in a co-developed, equity rooted initiative. ARC manages CCEI to reflect these values through agreements and protocols. Our CCEI Charter is the grounding guide that maintains group alignment in both the practice of equitable partnerships, and our collective vision. In addition to goals and deliverables, the Charter includes a Community Agreements and Accountability section that details a conflict resolution protocol.

Our 2025 Accomplishments: The Deliverables of a 5-month Sprint

CCEI officially kicked off on July 7, 2025, marking the transition from project initiation to execution, with the project closeout timed for December 2025. Our 5 month sprint transpired via monthly workgroup meetings and three cohort meetings every other month. The deliverables were designed to be the foundation that would support the implementation work in 2026 and beyond, and were all achieved by mid-December 2025.

Program Expansion & Co-Development Workgroup Deliverables

 The workgroup co-developed a climate resilience and emergency preparedness supply list for resilience hubs, with categorizations by hazard type, seasons, storage options, and community redistribution planning. From this, we consolidated a supply wishlist for The Women's Building, an emerging resilience hub in San Francisco pictured here receiving medical supply donations.

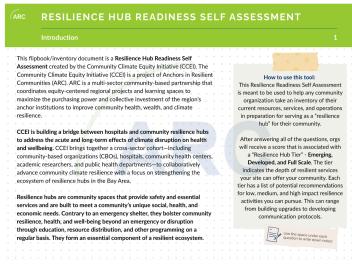


- We established a partnership between The Women's Building and MedCycle Network, a nonprofit that collects surplus medical supplies from hospitals and redistributes them to safety-net clinics at no cost. The partnership expanded to include resilience hubs as supply recipients, and MedCycle Network's first delivery to The Women's Building occurred on December 12. Donated supplies were provided by UCSF Health and other Bay Area hospitals.
- UCSF Health and Stanford Children's initiated pilots within some of their campuses to collect supplies that were previously missed from their established supply donation program, and would meet resilience hub and community emergency preparedness needs.



Community-Based Anchor Needs Assessment Workgroup Deliverables

- Partners worked with Roots Community Health to understand their resilience hub needs, using this as a basis for co-developing a Resilience Hub Readiness Self-Assessment tool. The group developed a "badge" system to help communicate offerings each hub specializes in (i.e. fire, flood, cooling).
- We initiated a testing phase by distributing the tool to 7+ hubs and clinics across multiple Bay Area counties, to gather feedback on usefulness and user experience to improve the assessment.







Climate Resilience Resource Hub Workgroup Deliverables

- The group co-developed two surveys to identify resource availability and needs across sectors as the first step of a regional asset mapping and matchmaking process- with one survey for Institutions and Health Anchors, and one survey for CBOs and Resilience Hubs.
- We initiated the testing phase by distributing to 10+ test users to gain feedback and improve the assessment before engaging in broader regional distribution for the mapping process.

Our Continued Endeavor: Improving Regional Climate Resilience Planning & Cross-Sector Coordination to Enable Health

Throughout the planning process, our strategy remained emergent and iterative, allowing for responsiveness to changing needs. We included multiple checkpoints for feedback to ensure workstreams remained on-track while allowing ideas to emerge. As we enter the 2026 implementation phase, we will incorporate lessons learned to continuously improve our bottom-up approach in co-designing objectives, deliverables, and workstreams.

The 2026 implementation priorities will add a layer of depth to our work, focused on:

- Refining the supply donation program and engaging community members around climate resilience at The Women's Building.
- Iterating on the Resilience Hub Readiness Self-Assessment tool to develop recommendations and expand applicability of the badges system.
- Improving the resource mapping surveys to kick-off the regional mapping process.
- Launching a fourth workgroup focused on climate-health data and metrics.

Our work is ambitious and recognizes the high stakes of the climate crisis we collectively face. Truly equitable and adaptive solutions require new approaches that shape systems that mirror the just and sustainable future we aim to achieve. Health care systems can bolster community climate resilience by supporting the organizational capacity in the communities they serve to ensure access to vital services, supplies, and resources during a climate disruption. Community resilience hub networks support health care facility resilience and prevent emergency room overflow by improving community accessibility to essential resources. By working synergistically via cross-sector collaboration, we can bolster the climate resilience of the community and of health care facilities, and ultimately, improve community health and wellbeing.