THE BAKARI FOUNDATION

COMMUNITY MOBILIZATION GUIDE



measure

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CARE MODEL

LETTER OF ACKNOWLEDGMENT

Dear The Bakari Foundation, CARE Team and Community,

As we work to eliminate social justice disparities, Measure calls for strengthening communities to self-advocate through our Measure CARE Model.

Community Mobilization (CM) involves training communities to plan, implement, and assess activities collaboratively and consistently to enhance their health. The goal of CM is to promote constructive and lasting changes in social norms, attitudes, and personal, household, and community behaviors.

The Measure CARE model improves the community mobilization process by centering anti-racism and community voice. With an equitable framework like the Measure CARE Model built into the community mobilization process, we can avoid the continual perpetuation of oppression. We might even harm rather than good in our neighborhoods.

The Measure CARE Model Community Mobilization Guide offers guidance on collaborating with your community to bring about positive change. It outlines both the issue at hand and potential solutions to address it. Additionally, it includes a thorough theory of change and a set of metrics to track progress and outcomes.

To ensure the sustainability of this plan, the strategy suggests using a transparent system for tracking and measuring progress when implementing it.

Measure hopes this community mobilization guide will encourage your organization to move forward in eliminating social disparities, innovate for justice, and measure world-changing solutions.

Cheers To The Greater Good,

Meme Styles

Measure Founder + President

About Measure

Measure is a community-based research and public education organization rooted in data-driven activism for Powerful Black, Brown, and Indigenous Communities. We encourage people to use data to eliminate social disparities. We do this by elevating data in a usable format for the community that initiates community mobilization.

Community mobilization drives large-scale system changes that lead to the development of equitable policies and practices, which expand opportunity and open paths to upward mobility.

The CARE Model

The C.A.R.E. (Community, Advocacy, Resilience, Evidence) model is a process for working in active partnership with communities to develop solutions to complex social problems. Each letter represents a component of the community mobilization process that organizations and institutions will go through as they partner with communities to address problems. It provides a means for increasing meaningful engagement and minimizing all potential trauma to the community.

The CARE model is deployed when a organization or group comes together to address known disparities.

The CARE Model is based on the four guiding principles below:

C - Community is involved from the beginning.
A - Advocate with the community to address disparities.
R - Generate solutions that strengthen community Resilience.
E - Use data and Evidence for data-informed decisions.

MEASURE IGNITE SPARKS

During the deployment of the CARE Model with various organizations, we recognized the importance of community impact metrics that had a racial equity component. As we analyzed the data, we began to identify trends among metrics and organized them into Sparks based on their cause area. In pursuit to evoke collective action towards a common goal, bonfires were created to bring together organizations and individuals who are passionate about similar issues. Our ultimate goal is to accelerate progress toward equity and inspire action from all who share in this vision.

SPARKS

Sparks are "humanitarian causes" that support the community. The Ignite system measures how much sparks help the community by using Community Impact Metrics (CIM).



SUSTAINABLE DEVELOPMENT GOALS (SDG)

In 2015 the UN created 17 Sustainable Development Goals (SDG) which serve as a "shared blueprint for peace and prosperity for people and the planet now and into the future. At Measure, we believe in the power of communities coming together, leveraging unique perspectives and values in opposing systems of injustice to build a better future for all, and have ensured that each Spark on Measure Ignite is dedicated to working towards the attainment of at least one SDG.



SPARKS DEFINED

Arts & Culture - Activities intended to develop and represents the customs and values of a community.

Animal Care & Services - Activities that provide services for domestic and wild animals.

Agriculture - Activities towards fairness, equity, & empowerment in the food system for all who labor from farm to retail.

Aging Well - Activities designed to meet the needs and requirements of our aging community at various stages of life.

Behavioral & Mental Health - Activities that provide evaluation, treatment, and supportive services to people of all ages who are living with mental health conditions and/or substance use disorders.

Career Development & Training - Activities that provide employment readiness training, resources, and opportunities for working individuals.

Climate Action -Activities to protect our planet.

Civic Engagement- Political actions to improve outcomes for the community.

Community Power & Advocacy - Activities that are driven by the community.

Digital Inclusion- Activities to ensure equitable access to and use of information and communication technologies.

Disaster Relief and Emergency Response - Activities designed to assist the community in response to disasters.

Disability Rights- Approaches to advance access and inclusion for disabled people, their families, service providers, and communities.

Economic Growth & Wealth Building- Activities that encourage job security, a thriving economy, and generational wealth.

Education- Activities that promote knowledge sharing and creation for all ages and abilities.

Faith & Spirituality - Activities that promote spiritual well-being.

Fraternity & Sorority Life- Membership organizations founded on the values of scholarship, leadership, friendship, and service.

Health & Wellness - Activities that promote a state of health and well-being regardless of age and ability.

Human Services- Activities that provide essential access to food, health care, safety, housing, education, and more.

Indigenous Rights- Activities that promote the rights and safety of indigenous people.

Immigrant Rights- Activities that promote the rights and safety of immigrants.

Legal System- Activities that challenge the traditional criminal justice system by promoting court diversion, intervention programs, and peer support services.

LGBTQIA+ Rights- Activities that promote the rights and safety of the LGBTQIA community.

Military & Veterans- Activities that provide services for active military service members, veterans, military spouses and their families.

Monitoring & Data- Activities that implement data structures to assure data integrity to cultivate a culture of data-based decision-making.

Public Safety & Accountability- Activities that promote rehabilitative and restorative practices and demand accountability for community harm

Research & Evaluation- Activities that expand prior knowledge and/or provide information for decision-making

Youth Empowerment- Activities that empower emerging generations through community-based education, mentoring, and enrichment programs.

SUMMARY + METRICS

THE PROBLEM

The Bakari Foundation used the Measure CARE Model to address the lack of accessible, trusted, and culturally competent mental and emotional health resources for Black and Brown families dealing with violent loss, especially when it comes to trauma-grief processing. This lack of resources continues intergenerational violence, trauma, and anxieties, with few tools available to process their pain in healthy ways.

The Bakari Foundation seeks to both re-evaluate existing solutions and develop new solutions using community input and design community impact metrics. By engaging the community in the process, The Bakari Foundation aims to ensure that their efforts are effectively addressing the unique needs and challenges faced by the Black and Brown families they serve.

SOLUTIONS

The CARE Team, consisting of community members, and representatives from The Bakari Foundation, convened regularly to refine their objectives using the CARE Model. By leveraging community insights and expertise, the team focused on developing impactful solutions to address the lack of accessible, trusted, and culturally competent mental and emotional health resources for Black and Brown families dealing with violent loss. The Bakari Foundation CARE Team concentrated on creating and strengthening a support system dedicated to breaking the cycle of intergenerational violence, trauma, and anxiety.
The final approved solutions selected by the CARE Team are:

- Training community members to advocate for their needs
- Building trust between the community and mental health professionals
- Ensuring access to resources and representation for The Bakari Foundation and the community

SPARKS

Sparks are humanitarian causes that support the community.

BEHAVIORAL AND MENTAL HEALTH



HEALTH & WELLNESS



COMMUNITY POWER & ADVOCACY



SUMMARY + METRICS

> The Bakari Foundation is extremely grateful for the opportunity to go through the CARE Model program which has helped our team have a comprehensive understanding of how we can provide equitable mental health solutions to the community we serve. Thank you Measure for not only seeing but acting on the need to bring the CARE Model to our community.
>
> **CARE TEAM LEADER**
> Jill Henderson Founder & President

COMMUNITY IMPACT METRICS

1. Number of community-led initiatives or policies proposed by trained advocates
2. Number of community events or trainings held and attendance
3. Percentage of engaged participants who report positive changes in community mental health services
4. Total revenue earned to support advocacy efforts

PROBLEM (OPPORTUNITY)



ORIGINAL PROBLEM STATEMENT:

Competent mental and emotional health resources for Black and Brown families dealing with violent loss, especially when it comes to grief and trauma processing, which continues intergenerational trauma with few tools to process their pain in healthy ways.

PROBLEM STATEMENT FROM THE COMMUNITY'S PERSPECTIVE:

There is a lack of accessible, trusted, and culturally competent mental and emotional health resources for Black and Brown families dealing with violent loss, especially when it comes to trauma-grief processing. This perpetuates intergenerational violence, trauma, and anxieties with few tools to process their pain in healthy ways.

METHOD OF GATHERING COMMUNITY FEEDBACK ABOUT THE PROBLEM STATEMENT:

To validate the problem statement, The Bakari Foundation CARE Team conducted a survey via google forms that was distributed through email to their community members. This approach allowed the team to gather direct feedback and input from the community regarding the problem statement. By directly surveying community members, The Bakari Foundation could quantify agreement and alignment with the defined problem statement. The analysis of the survey responses and community feedback enabled the team to refine the problem statement, ensuring that it accurately reflects the community's perspectives and priorities. The community expressed alignment with the problem statement, suggesting only minor changes, which led to the development of a new, more comprehensive problem statement that better encapsulates the challenges faced by Black and Brown families dealing with violent loss.

POPULATION IMPACTED





The Bakari Foundation focuses on serving Black and Brown families dealing with the devastating impacts of violent loss, particularly homicides, across the United States. These families face immense challenges in accessing culturally competent and trusted mental health resources to process their grief and trauma. The lack of these vital support services perpetuates cycles of intergenerational violence, trauma, and anxiety within these communities.

According to CDC mortality data, in 2022, Black individuals experienced homicide at a rate almost quadruple the overall population rate (29.0 versus 7.7 per 100,000 people) and nearly seven times higher than the rate for white individuals (29.0 versus 4.2 per 100,000 people) (Black Homicide Victimization in the US | Violence Policy Center, 2024).

The ripple effects of violent loss extend beyond the immediate family, impacting the broader community, including service providers, faith-based organizations, and advocacy groups working tirelessly to support these families. By focusing on the specific needs of Black and Brown families dealing with homicide-related grief and trauma, The Bakari Foundation aims to disrupt the cycles of violence and provide the tools necessary for healthy healing.

Recognizing the systemic inequities and cultural barriers that hinder access to mental health support, The Bakari Foundation is committed to bridging these gaps and empowering families to process their pain, build resilience, and foster hope for future generations. Through culturally sensitive interventions and community-driven solutions, The Bakari Foundation seeks to create a nationwide network of support that uplifts and strengthens Black and Brown families facing the unimaginable loss of a loved one to violence.

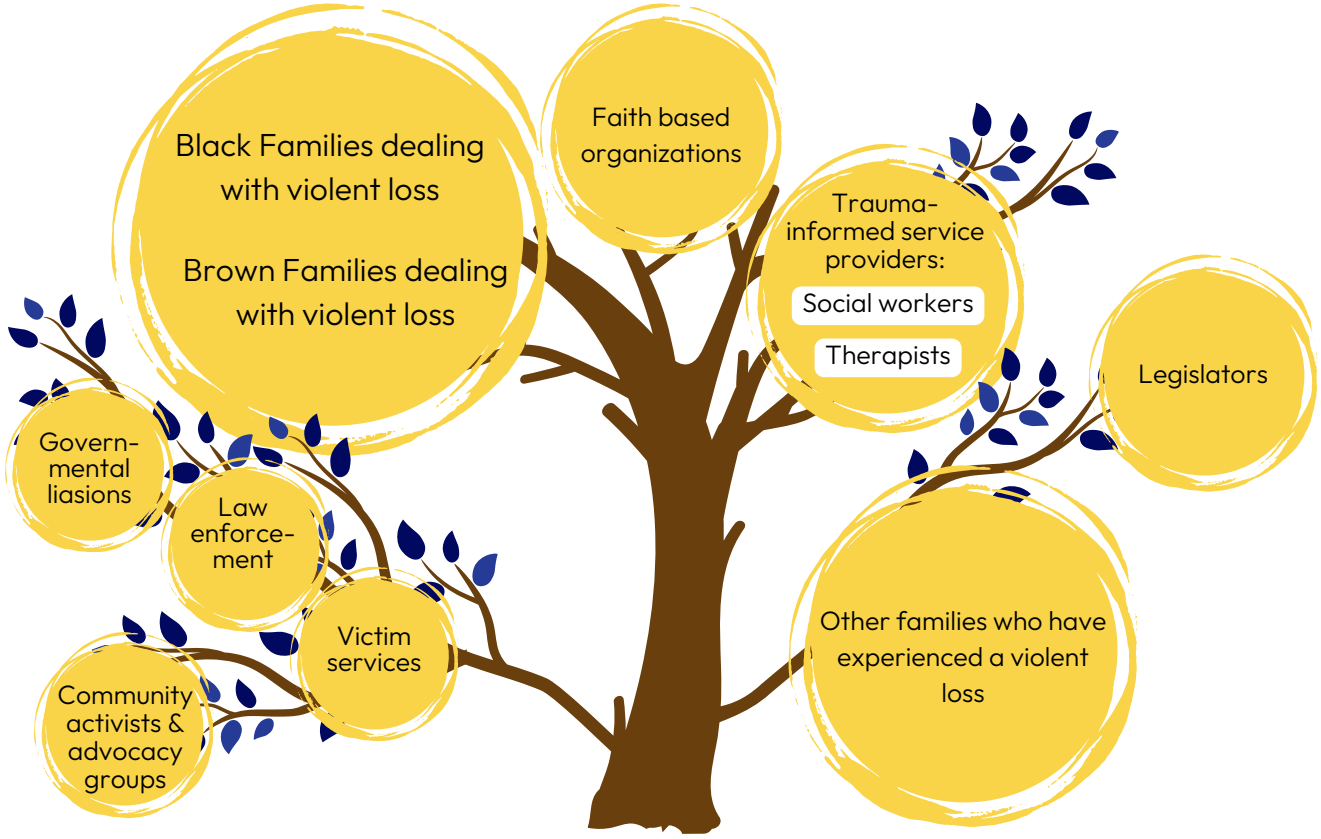
Source:

Black Homicide Victimization in the US | Violence Policy Center. (2024, July 8). Violence Policy Center. https://vpc.org/black-homicide-victimization-in-the-united-states-national/

COMMUNITY IMPACT TREE

The community discussed during the activity was those impacted by the lack of accessible, trusted and culturally competent mental and emotional health resources, as outlined in the problem statement. In particular, black and brown families dealing with violent loss were identified as the group most directly impacted.

The groups selected for the community impact tree included black and brown families dealing with violent loss, which was placed in the largest circle to represent greatest impact. Other groups in medium-sized circles were people who have experienced violent loss more generally, and trauma-informed service providers such as therapists. Smaller circles included faith-based organizations, community activist/advocacy groups, law enforcement, victim services, and legislators. These additional groups were included because they either support families experiencing loss or are impacted by the lack of mental health resources. The relative size of each circle on the tree was meant to represent the level of impact the problem has on each group, with the understanding that the problem most directly impacts black and brown families dealing with violent loss.



HISTORICAL TIMELINE

The historical timeline is a visual method of chronologically highlighting important historical dates, terms, figures, and events. It may be used to understand how injustice has contributed to the current problem. This timeline was co-created with The Bakari Foundation CARE Team.

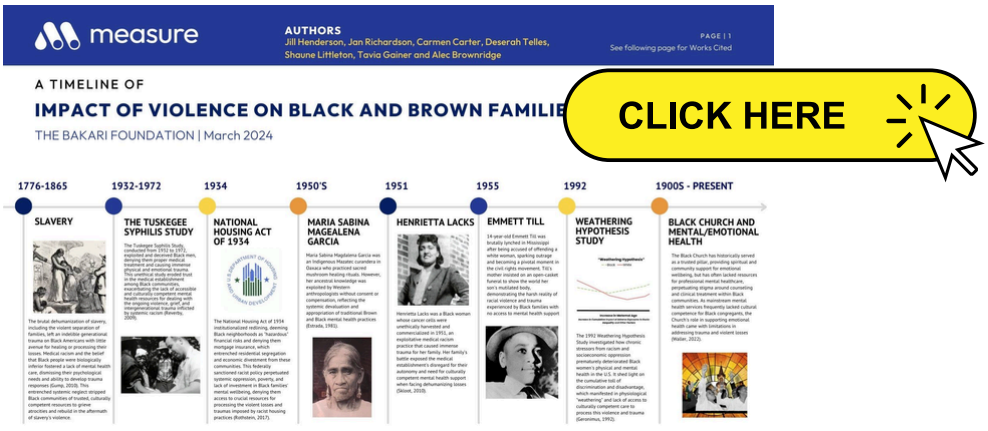
The historical timeline traces a narrative of systemic injustice, oppression, and the denial of culturally competent mental and emotional health resources for Black and Brown communities. From the dehumanizing violence of slavery to the unethical exploitation of individuals like Henrietta Lacks and Maria Sabina, the timeline highlights a pattern of disregard for the autonomy and wellbeing of these communities.

Significant events such as the Tuskegee Syphilis Study, where Black men were deceived and denied proper treatment, further eroded trust in the medical establishment. The brutal lynching of Emmett Till and the lack of support for his family to process such a traumatic loss exemplify the systemic neglect of their mental health needs.

The timeline also explores the role of the Black Church as a trusted source of spiritual and community support but often lacking resources for professional mental healthcare, perpetuating stigma around counseling and clinical treatment.

These events collectively illustrate the historical and ongoing lack of accessible, trusted, and culturally competent resources for Black and Brown families to process trauma and grief, contributing to the intergenerational transmission of violence, trauma, and anxieties.

Historical timeline link (see full-view or download as PDF):
https://www.canva.com/design/DAF5ftdmt5U/nHBKaseesM1t0ZyQJlZQrA/view?utm_content=DAF5ftdmt5U&utm_campaign=designshare&utm_medium=link&utm_source=editor



INVESTED PARTIES ANALYSIS

ENGAGEMENT AND STRATEGY

Invested Parties refers to people, individuals, organizations and groups that are interested in supporting your nonprofit.

invested Parties might include people directly involved like board members, or local business that might benefit from your service to the community. The Stakeholder wants to see you succeed.

NOTE: Listed below are Invested Parties you've identified. Use this list to strategize on how to engage with the stakeholder. How often will you engage them? Who is the best person to engage them? What will you ask them to do for the organization?

INVESTED PARTIES	STRATEGIES FOR ENGAGEMENT

St. David's Foundation	• Mail
	• In Person Meeting
	• Internal advocate:
	  ◦ Abena Asante
	  ◦ TBF Board Member

Office of Violence Prevention	• In person meeting. • Internal Adocate: DA Garza & Sta
Hogg Foundation	• In person or virtual meeting. • apply for funding

DATA VISUALIZATION PLAN

WHAT IS A DATA VISUALIZATION PLAN?

A data visualization plan helps an organization determine how data can be used to visualize the problem they are seeking to solve.

This plan will help to clearly define an approach to gathering both baseline data/information as well as data that can give your organization insight into root causes. This plan includes what data the organization needs to collect, how to collect it, and who will collect it.

Note: Keep in mind privacy rules when collecting and maintaining data.

	DATA TYPE #1	DATA TYPE #2
DATA NEEDED	What is percentage of black and brown families are seeking mental health assistance? Individuals?	Long term affect of The Bakari Foundation transformative retreats.
WHO WILL COLLECT	The Bakari Care Team will make a google doc to present findings. Lead: Shaune Littleton	The Bakari Foundation Board
HOW TO ANALYZE	Comparing percentages who has and hasn't sought out mental health services. (Breakout of families experiencing violent loss)	How it impacts the family dynamic. Short (immediately after retreat) and long term surveys.
HOW TO PRESENT FINDINGS	Bar chart comparing percentages across different demographic groups	Line graphs tracking changes in key metrics (e.g. trauma symptoms, quality of life) before and after retreats over time

DATA VISUALIZATION PLAN

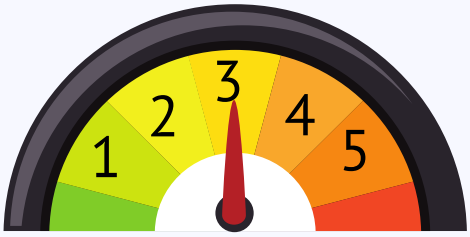
CONTINUED...

	DATA TYPE #3	DATA TYPE #4
DATA NEEDED	What mental health resources are/aren't available for black/brown families?	How many Black and Brown families are impacted by a homicide?
WHO WILL COLLECT	The Bakari Care Team Lead: Deserah Tellas	The Bakari Foundation
HOW TO ANALYZE	Categorize what is accessible and trusted. (Breakout of families experiencing violent loss)	Analyzed by percentage annually, overall or state by state
HOW TO PRESENT FINDINGS	Iconographic chart representing different resource categories and gaps	Animated yearly trend chart with mapping/geographic component

COMMUNITY ASSET MAP

CREATING SOLUTIONS

Use the Measure Asset Map to help define preparedness and create your organizational solutions. The community asset mapping focuses on three main categories: people, places, and equitable opportunity. With this data, the CARE Team can create high-level solutions to make positive and sustainable changes in their communities.



5 - Outstanding Strength
4 - Strength
3 - Competent
2 - Needs Improvement
1 - Needs Significant Improvement
0 - Not There At All

CORE COMPONENTS TO COMMUNITY RESILIENCE	BASELINE SCORE (0-5)	PRIORITIZE HIGH, MEDIUM, LOW	SOLUTIONS & SUGGESTIONS FOR IMPROVEMENT/ HOW TO MAINTAIN
PEOPLE - SOCIO-CULTURAL ENVIRONMENT			
Policies and Political Structures	1.5	High	Advocate for policies and policy changes.
Community Involvement	2.5	High	-Train people on how to advocate for what they need. -Fostering trust of the community
Write-In: Public Awareness	1.5	High	Public educational forum

COMMUNITY ASSET MAP

CORE COMPONENTS TO COMMUNITY RESILIENCE	BASELINE SCORE (0-5)	PRIORITIZE HIGH, MEDIUM, LOW	SOLUTIONS & SUGGESTIONS FOR IMPROVEMENT/ HOW TO MAINTAIN
PLACE - PHYSICAL / BUILT ENVIRONMENT			
Community Design and Planning	2	Medium	
Housing and Infrastructure	2	Low	
EQUITABLE OPPORTUNITY - ECONOMIC AND EDUCATIONAL ENVIRONMENT			
Employment Opportunities	1	High	-Access to resources -Making a case for change
Stability of Businesses and Schools	1	High	-Access to resources -Seat at the table

SOLUTIONS ALIGNMENT

COMMUNITY FIRST SOLUTIONS

Solutions alignment ensures that your organization's high-level solutions (or strategies) will be in a position of agreement or alliance with what your community needs. The solutions alignment process helps to ensure the CARE Team has solutions that are equitable, feasible, desirable and viable to the community and target population.

SOLUTION	DESIRABILITY	EQUITABLY	FEASIBILITY	SUSTAINABILITY
Advocate for policies and policy changes. (Policy for access to non-traditional mental health tools)	High	High	Low	High
Training: Train people on how to advocate for what they need	High	High	Medium	High
Fostering trust of the community (Building relationships)	High	Medium	Low	Medium
Access to resources and Bakari Foundation has a seat at the table (funding, educationa	High	High	Low	Medium

SOLUTIONS DISCUSSION

Solution 1: Train People on How to Advocate for What They Need
This solution focuses on training community members to develop the skills and knowledge needed to effectively advocate for their own needs. The desirability of this solution is high, as it empowers the community to participate in the process and ensures that their voices are heard. The equitability is also high, as it directly involves the people most impacted by the issues at hand. The feasibility is considered medium, as it will take some time to train the community and get them actively involved, but it is not an insurmountable challenge. The sustainability is high because once the community is invested in the process, they are more likely to continue driving change.

Solution 2: Fostering Trust of the Community
This solution aims to build trust between the community and the mental health professionals, policymakers, and other stakeholders working to address their needs. The desirability of this solution is high, as trust is a critical component of effective service delivery and community engagement. The equitability is medium, as building trust involves the community but may not directly address institutional racism and biases. The feasibility is low, as fostering trust takes a significant amount of time and consistent effort. However, the sustainability is high, as once trust is established, it can have a long-lasting positive impact on the community.

Solution 3: Access to Resources and The Bakari Foundation has a Seat at the Table
This solution is twofold. First, it ensures that The Bakari Foundation has a seat at the table when decisions are being made that impact the communities they serve. Second, it focuses on providing the community with access to resources, such as funding and educational opportunities, to address mental health needs. The desirability of this solution is high, as it directly addresses the need for representation and resources. The equitability is high, as it involves the community and works to address institutional barriers. The feasibility is low, as securing a seat at the table and accessing resources can be challenging and time-consuming. The sustainability is medium, as it will require ongoing effort to maintain representation and access to resources.

THEORY OF CHANGE



IF

we equip Black and Brown communities with advocacy skills, foster trust, and secure influential policymaking roles,

THEN

we can broaden our reach of providing accessible, culturally competent mental health resources in times of crisis and significantly reduce intergenerational trauma and violence.



The Bakari Foundation

THEORY OF CHANGE

SOLUTION #1

Train People on How to Advocate for What They Need

SOLUTION #2

Fostering Trust of the Community

SOLUTION #3

Access to Resources and The Bakari Foundation has a Seat at the Table

OUR TARGET POPULATION

Black and Brown Families dealing with violent loss

ASSUMPTIONS

- Lack of mental health services.
- Assuming black/brown families don't have access to these services.
- Assuming The Bakari Foundation can provide training resources that are easily understood by the community

The Bakari Foundation
THEORY OF CHANGE

THEORY OF CHANGE	IF we equip Black and Brown communities with advocacy skills, foster trust, and secure influential policy-making roles, THEN we can broaden our reach of providing accessible, culturally competent mental health resources in times of crisis and significantly reduce intergenerational trauma and violence.
LONG TERM GOAL	To significantly reduce intergenerational violence, trauma, and anxiety within Black and Brown communities, we will provide effective nonviolent strategies and accessible trauma-grief processing.

SOLUTION #1	SOLUTION #2	SOLUTION #3
INTERMEDIATE GOALS		
Community members actively use advocacy skills to improve personal and communal access to mental health services. Health policies begin to reflect the advocacy and input from engaged community advocates.	The Community perceives The Bakari Foundation as a trusted and integral part of their mental health ecosystem. Increased community-led initiatives supported by the foundation.	Expand access to culturally competent mental health professionals and programs in the community. The Bakari Foundation influences significant policy decisions affecting community mental health services
SHORT TERM GOALS		
Increase the number of community members engaged in advocacy annually. Enhance community knowledge on mental health rights and resource utilization at annual retreats. (1st in July 2024)	Enhance and broaden existing communication channels between The Bakari Foundation and the community. Achieve a measurable increase in community participation in foundation-led initiatives.	Secure partnerships with at least three major community organizations or health service providers in the first year. Establish a formal advisory role for The Bakari Foundation in mental health policy discussions.
ACTIVITIES		
Develop and deliver comprehensive advocacy training programs focused on mental health needs and rights. Host workshops and seminars on navigating health systems and securing necessary resources.	Implement regular community engagement sessions and feedback mechanisms to build and maintain trust. Collaborate with community leaders and influencers to act as mental health ambassadors.	en partnerships with governmental, community, and health organizations to enhance resource availability. Advocate for policy changes that increase funding and support for targeted mental health services

COMMUNITY IMPACT METRICS TOOL

LONG-TERM GOAL

To significantly reduce intergenerational violence, trauma, and anxiety within Black and Brown communities, we will provide effective nonviolent strategies and accessible trauma-grief processing.

MEASURE SPARKS

SPARK #1	SPARK #2	SPARK #3
		

INPUTS (ACTIVITIES)	OUTPUTS (ACTIVITY METRICS)	OUTCOMES (SHORT-TERM GOALS)	INTERMEDIATE GOALS	COMMUNITY IMPACT METRICS	TARGETS
SOLUTION #1: TRAIN PEOPLE ON HOW TO ADVOCATE FOR WHAT THEY NEED					
• Develop and deliver comprehensive advocacy training programs focused on mental health needs and rights. • Host workshops and seminars on navigating health systems and securing necessary resources.	• Number of advocacy training sessions conducted • Number of participants in advocacy workshops • Number of advocacy materials distributed (guides, brochures, online resources) • Number of new advocates recruited • Number of community events or trainings held and attendance	• Increase the number of community members engaged in advocacy annually. • Enhance community knowledge on mental health rights and resource utilization at annual retreats. (1st in July 2024)	• Community members actively use advocacy skills to improve personal and communal access to mental health services. • Health policies begin to reflect the advocacy and input from engaged community advocates.	• Number of new advocates recruited • Percentage of engaged participants who report positive changes in community mental health services • Number of community-led initiatives or policies proposed by trained advocates	• 5% annual increase of new advocates. • 50 % annual increase in engaged participants who report positive changes in community mental health services. • 7 community-led initiatives or policies proposed by trained advocates over 5 years.

Note: Since a few community impact metrics were identified for this solution, The Bakari Foundation CARE Team selected “Number of community-led initiatives or policies proposed by trained advocates” to focus on for the data collection plan.

COMMUNITY IMPACT METRICS TOOL

MEASURE SPARKS

LONG-TERM GOAL

To significantly reduce intergenerational violence, trauma, and anxiety within Black and Brown communities, we will provide effective nonviolent strategies and accessible trauma-grief processing.

SPARK #1	SPARK #2	SPARK #3
		

INPUTS (ACTIVITIES)	OUTPUTS (ACTIVITY METRICS)	OUTCOMES (SHORT-TERM GOALS)	INTERMEDIATE GOALS	COMMUNITY IMPACT METRICS	TARGETS
SOLUTION #2: FOSTERING TRUST OF THE COMMUNITY					
• Implement regular community engagement sessions and feedback mechanisms to build and maintain trust. • Collaborate with community leaders and influencers to act as mental health ambassadors.	• Number of community engagement sessions held • Number of mental health ambassadors trained and active • Frequency and reach of communication (newsletters, social media posts, community bulletins) • Number of coalition meetings held and attendance • Number of briefings or presentations held	• Enhance and broaden existing communication channels between The Bakari Foundation and the community • Achieve a measurable increase in community participation in foundation-led initiatives.	• The Community perceives The Bakari Foundation as a trusted and integral part of their mental health ecosystem • Increased community-led initiatives supported by the foundation	• Number of coalition members • Number of favorable responses to community trust surveys • Number of community events or trainings held and attendance • Percentage of engaged participants who report positive changes in community mental health services	• 50% increase in coalition members by the 5-year mark. • 40% increase in favorable responses to community trust surveys within 5 years. • 60% increase in attendance at community events or trainings within 5 years. • 40% of engaged participants reporting positive changes by the 5-year mark.

Note: Since a few community impact metrics were identified for this solution, The Bakari Foundation CARE Team selected “Number of community events or trainings held and attendance” and “Percentage of engaged participants who report positive changes in community mental health services” to focus on for the data collection plan.

COMMUNITY IMPACT METRICS TOOL

LONG-TERM GOAL

To significantly reduce intergenerational violence, trauma, and anxiety within Black and Brown communities, we will provide effective nonviolent strategies and accessible trauma-grief processing.

MEASURE SPARKS

SPARK #1	SPARK #2	SPARK #3
		

INPUTS (ACTIVITIES)	OUTPUTS (ACTIVITY METRICS)	OUTCOMES (SHORT-TERM GOALS)	INTERMEDIATE GOALS	COMMUNITY IMPACT METRICS	TARGETS
SOLUTION #3: ACCESS TO RESOURCES AND THE BAKARI FOUNDATION HAS A SEAT AT THE TABLE					
• Strengthen partnerships with governmental, community, and health organizations to enhance resource availability • Advocate for policy changes that increase funding and support for targeted mental health services	• Number of partnerships formed with organizations - health providers and government agencies • Number of policy advocacy meetings attended by foundation representatives • Number of policy advocacy meetings attended by community advocates • Quantity of resource guides or directories created and distributed • Number of policies formally established	• Secure partnerships with at least three major community organizations or health service providers in the first year • Establish a formal advisory role for The Bakari Foundation in mental health policy discussions.	• Expand access to culturally competent mental health professionals and programs in the community • The Bakari Foundation influences significant policy decisions affecting community mental health services.	• Number of policies formally established • Number of partnerships formed with local health providers and government agencies • Number of strategic donors • Total revenue earned to support advocacy efforts	• Train 250 culturally competent mental health professionals by the 5-year mark. • At least 7 new policies influenced or enacted within 5 years. • 100% increase in the number of strategic donors by the 5-year mark. • 100% increase in total revenue to support advocacy efforts within 5 years.

Note: Since a few community impact metrics were identified for this solution, The Bakari Foundation CARE Team selected “Total revenue earned to support advocacy efforts” to focus on for the data collection plan.

COMMUNITY IMPACT METRICS
DATA COLLECTION PLAN

MEASURING SUCCESS
This plan can chart the path towards collecting the data needed to measure your impact and also illustrate who is accountable.

COMMUNITY IMPACT METRIC
Community Impact Metric (CIM) is a standard of measurement to track the progress of change, prioritizing the effect a program is having on communities served.

	COMMUNITY IMPACT METRIC #1 Number of community-led initiatives or policies proposed by trained advocates	**COMMUNITY IMPACT METRIC #2** Number of community events or trainings held and attendance
METHODOLOGY • What types of data will we collect? • How will we collect this data? • What will be the source of the data? • Is this data meaningful to our community?	• Survey created by The Bakari Foundation from trained advocates to see if the policies were purposed. • Decide on the technology of data collection.	• Registration information from online and on-site. (mobilize) • Event attendants
TIMELINE • When will this data be collected? • What else will need to happen to enable us to collect this data? • When will we analyse the data?	• Data will be collected and analyzed quarterly. • Analyze annual view that summarizes the quartely data. • Establish an outreach date	• Prior to each session and after each session. • Collect data during the section to identify number of attendees.
ANALYSIS AND REPORTING • What type of analyses do we want to perform? • Who will analyze the data? • How will we share the results? • How will we use this data?	• Mixed Methods. • The Bakari Foundation staff and consultants. • Written report, newsletter, and website. • The Baker Foundation will use data for public awareness, advocacy, building relationships, and funding.	• Quantitative • The Bakari Foundation staff and consultants. • Written report, newsletter, and website. • Building relationships, for recruiting more people for each session, and marketing.

COMMUNITY IMPACT METRICS
DATA COLLECTION PLAN

MEASURING SUCCESS
This plan can chart the path towards collecting the data needed to measure your impact and also illustrate who is accountable.

COMMUNITY IMPACT METRIC
Community Impact Metric (CIM) is a standard of measurement to track the progress of change, prioritizing the effect a program is having on communities served.

	COMMUNITY IMPACT METRIC #3 Percentage of engaged participants who report positive changes in community mental health services	**COMMUNITY IMPACT METRIC #4** Total revenue earned to support advocacy efforts
METHODOLOGY • What types of data will we collect? • How will we collect this data? • What will be the source of the data?	• Qualitative and quantitative data on participants' perceptions of changes in community mental health services. • Surveys and interviews with engaged participants. • Directly from the engaged participants in The Bakari Foundation's programs and initiatives.	• Financial data on revenue earned through various sources (e.g., grants, donations, fundraising events). • Tracking revenue through the Foundation's financial management system. • Internal financial records and reports.
TIMELINE • When will this data be collected? • What else will need to happen to enable us to collect this data? • When will we analyse the data?	• Surveys will be conducted at regular intervals (before & after each event) throughout the year. Interviews will be conducted on a semi-annual basis. • Develop survey questionnaires and interview guides that are culturally sensitive and relevant to the community. Identify and train staff members or volunteers to conduct the surveys and interviews. • Identify what are "positive changes" before creating surveys • Data will be analyzed quarterly.	• Revenue data will be collected on an ongoing basis throughout the year. • Ensure that all revenue sources are properly documented and recorded in the financial management system. • Data will be analyzed on a quarterly and annual basis.
ANALYSIS AND REPORTING • What type of analyses do we want to perform? • Who will analyze the data? • How will we share the results? • How will we use this data?	• Descriptive statistics and content analysis of qualitative data. • The Bakari Foundation's research and evaluation team, in collaboration with relevant staff members. • Results will be shared through annual reports, newsletters, and presentations to stakeholders, including funders, partners, and community members. • To assess the effectiveness of the Foundation's programs and initiatives in improving community mental health services. To identify areas for improvement and inform decision-making regarding program design and implementation.	• Financial analysis to determine total revenue earned and track trends over time. • The Bakari Foundation's finance team, in collaboration with the executive leadership. • Results will be shared through annual financial reports, board meetings, and funding proposals. • To assess the Foundation's financial capacity to support its advocacy efforts. To inform budgeting and resource allocation decisions. To demonstrate the Foundation's financial stability and sustainability to potential funders and partners.

CONCLUSION

The Bakari Foundation Mobilization Guide presents a comprehensive and strategic approach to addressing the lack of accessible, trusted, and culturally competent mental and emotional health resources for Black and Brown families dealing with violent loss. The guide outlines targeted solutions focused on training community members to advocate for their needs, building trust between the community and mental health professionals, and ensuring access to resources and representation for The Bakari Foundation and the community.

Training Community Members to Advocate for Their Needs:

- By empowering community members with the skills and knowledge to advocate for their own needs, The Bakari Foundation fosters a sense of agency and ensures that the voices of Black and Brown families are heard and their needs are met.

Building Trust Between the Community and Mental Health Professionals:

- The Bakari Foundation recognizes that trust is a critical component of effective service delivery and community engagement. By focusing on building trust, the foundation aims to create a safe and supportive environment where Black and Brown families feel comfortable seeking help and support.

Ensuring Access to Resources and Representation:

- The Bakari Foundation is committed to securing a seat at the table when decisions are being made that impact the communities they serve. This representation, along with providing access to resources such as funding and educational opportunities, will help address the mental health needs of Black and Brown families effectively.

In conclusion, The Bakari Foundation, by implementing the Measure CARE Model, is dedicated to making a significant impact on improving mental and emotional health outcomes for Black and Brown families dealing with violent loss. Through focused efforts on increasing access to and participation in culturally competent mental health resources, reducing barriers to these services, and enhancing key well-being indicators, The Bakari Foundation aims to empower this demographic, fostering healing, resilience, and lasting positive change in their lives and the community as a whole. The confidence in these steps leading to greater participation and improved outcomes aligns with The Bakari Foundation's mission to support and uplift Black and Brown families, breaking the cycle of intergenerational violence, trauma, and anxiety, one family at a time.

