

## CASE STUDY REPORT

April 2019

# Adopting Participatory Budgeting in Pierce County, Washington

*Tacoma-Pierce County Health Department (TPCHD)*

### INNOVATION CHARACTERISTICS

New or creative | Collaborative | Co-produced | Replicable



The Tacoma-Pierce County Health Department (TPCHD) in Pierce County, Washington, is overseeing the implementation of a Participatory Budgeting (PB) approach. PB gives community members the power to determine how public funds should be allocated to address identified community issues.<sup>1</sup> The PB approach lends itself to the equitable distribution of public funds, as it empowers community members to control the budgeting process and to ensure that public funds are reflective of community needs and values. TPCHD is overseeing an innovative application of PB by seeking participatory engagement through the educational system, implementing PB in three schools—one elementary school, one middle school, and one high school—in East Tacoma, Washington. TPCHD is guiding community members, including students and teachers, to develop ideas and proposals for community improvement projects, enabling them to vote to determine which proposals will be implemented, and then allocating funding to implement the winning proposals. This project was implemented with funding and support from the Robert Wood Johnson Foundation (RWJF) through the Public Health National Center for Innovations (PHNCI) Public Health Innovations Implementation Grant Program.

### Background

In Pierce County, Washington, the Tacoma-Pierce County Health Department (TPCHD) sought to identify a way to improve meaningful engagement of community residents in public health and local government decision-making.

TPCHD had implemented prior efforts, such as community collaboratives, to involve residents in identifying community issues and determining priorities, but sought to find ways to shift control of the decision-making process away from government and into the hands of community members.

TPCHD considered focus groups, surveys, and community-based participatory research as strategies for improving community engagement, but ultimately realized that these strategies would not result in a sufficient power dynamic shift, as the government or other institutions would still hold the decision-making power. In researching alternative approaches, TPCHD identified PB as a strategy for shifting decision-making power towards community members and identified the following intended outcomes for their project: empowering the community in the decision-making process; improving social cohesion and self-efficacy among residents; strengthening civic engagement; supporting the equitable allocation of resources; encouraging the utilization of PB in public health and other sectors; and supporting improvements in health outcomes and health equity. In the PB approach, the government works with the community to define the PB process, but the community retains ultimate ownership of the process while the government adopts a supporting role.

TPCHD decided to implement PB in a public health context in their community because of its success in other sectors and countries. Because TPCHD had also identified a need to improve partnerships with local schools, TPCHD elected to partner with the public school system to implement the PB approach, as well.

**The PB approach.** PB has been used most frequently in the fields of parks and recreation and education. According to The Participatory Budgeting Project, as of January 2019, \$300 million had been allocated to PB projects.<sup>ii</sup> Although different communities and projects apply different PB approaches, PB generally involves the following steps:

- A local advisory group or steering committee designs the process and rules for engaging with government officials;
- Residents brainstorm project ideas;
- Volunteers develop proposals based on the project ideas;
- Residents vote to determine which proposal(s) will be funded;
- The government funds and implements the winning proposals; and
- The government and residents work together to monitor project implementation.<sup>iii</sup>

PB is reliant on close collaboration between community residents, the government, and other community partners. TPCHD believed that they could apply PB to address some of the health disparities in their community by engaging community members typically excluded from decision-making processes and recognizing the collective wisdom of these community members and marginalized groups.

## INNOVATION FOCUS

### Topic Areas

Community Engagement, Financial Process Innovation

### Summary

Participatory budgeting engages residents in the process of allocating public funds in their community.

### Location Served

Tacoma, Washington

### Partners

- Tacoma Public Schools
- East Side Collaborative
- Pierce County Parks
- Metro Parks Tacoma
- Pierce County Auditor
- Communities in Schools Tacoma

### Target Audience

Tacoma residents

## Adopting Participatory Budgeting in Pierce County, Washington

To implement PB, TPCHD designed a project consisting of a pilot phase, an implementation phase, and a dissemination phase. These phases are described below.

**Piloting the PB approach.** Prior to applying for the Public Health Innovations Implementation Grant, TPCHD conducted an initial pilot of the PB project with Pierce County Parks. Through this pilot project, community members participated in determining the allocation of \$100,000 of redevelopment funding for a community playfield. The pilot helped TPCHD gain experience with administering the PB approach and identify lessons learned that they were able to apply to implementing PB in schools. TPCHD identified the community's public school system as an ideal partner for the PB project, as the school system is "committed to systems improvement," according to TPCHD staff, and expressed interest in the PB project. TPCHD staff also said that the schools "offer dynamic community hubs in East Tacoma." Additionally, the East Tacoma Core Team, an interdepartmental group coordinated by TPCHD, identified the need to improve TPCHD's partnership with local schools through an asset mapping exercise.

**Implementing the PB approach within the community.** TPCHD selected three schools in East Tacoma—one elementary school, one middle school, and one high school—to participate in the PB project. Using the funding provided through the PHNCI Public Health Innovations Implementation Grant Program, TPCHD created a Participatory Budgeting Funding Pool that contained \$100,000 in seed funding to be allocated to the schools. The schools are in one of TPCHD's Communities of Focus, which are areas of Pierce County that experience low voting rates, low social cohesion, and high poverty rates. The selected schools have diverse student bodies and robust parent engagement. To implement the PB approach, the three schools: created an advisory panel; collected ideas and proposals; voted on the proposals; and implemented the proposals. The schools determined which students would most benefit from participating in the advisory group, and the students determined the best mechanisms for collecting the ideas and proposals from their classmates. While TPCHD ensured that voting occurred in a way that maximized student participation, the schools determined how and when voting occurred. Students in the elementary school elected to make playground improvements, while the middle schoolers voted to create a student lounge and the high schoolers voted for improvements to the school bathrooms. Once the winning proposals were identified, the schools moved forward with implementing the plans.

**Disseminating the PB project.** TPCHD is pursuing opportunities for replicating the PB project within their agency and within other organizations. For example, they began a second year of PB in new schools in the Tacoma Public Schools system, and began the first year of PB in the high school of White River Schools, another school district in the area. TPCHD also forged a new partnership with Communities in Schools Tacoma, a local organization that aims to reduce school dropout rates by supporting and empowering students,<sup>iv</sup> to support staffing for subsequent implementation periods. A staff person from Communities in Schools Tacoma is present in each school daily. This person will provide on-site support and leadership for PB within each school by serving as the project lead. During the dissemination phase, TPCHD is also marketing their expertise in PB so that they can serve in a consulting role by providing education, technical assistance, and training to other agencies seeking to implement PB, as some of the organizations interested in adopting a PB approach lack staff with the appropriate skills and capacity to implement PB.

### Key Staff and Stakeholders

TPCHD has engaged a variety of internal staff and external partners to support the PB project, including:

- The Eastside Collaborative, a cross-sector group of community-based organizations, government agencies, healthcare providers, and funders, convened to discuss health outcomes and inequities. They also recruited

and trained community facilitators to engage the broader community in discussions around community needs and priorities.

- Pierce County Parks, a government agency in Pierce County, piloted the innovation in coordination with TPCHD before TPCHD applied it within schools.
- Staff from the Family Support Center and Community Focus team within TPCHD leveraged their expertise in community organizing and experiences working in the project's communities of implementation to support the project.
- The TPCHD grant writing and finance departments identified financial strategies for the project and navigated the contracting and memorandum of understanding (MOU) processes.
- The school districts, school staff, administration, and students have been involved in the entire PB process: defining the project; generating ideas and proposals; voting on the proposals; and implementing winning proposals. Students in the middle school led communications and marketing activities for the proposals they had developed. In the high school, students developed proposals and worked with the Pierce County Auditor's Office—the entity that oversees elections, licensing services, animal control services, and public records services<sup>v</sup>—to create ballots, make arrangements for the ballot drop box, and register voters in the high school.
- Communities in Schools Tacoma, a community-based organization, is being engaged by TPCHD to serve as an ongoing presence in the schools and to lead future PB processes.

## Implementation Experiences

In implementing the PB approach, TPCHD identified several lessons learned, including:

**Securing buy-in and funding.** Some elements of the PB project are contradictory to traditional public health funding mechanisms and concepts. For example, public health grants typically allocate the majority of funding to health department staff and resources, while the budget for the PB project allocates the majority of the funding to the community projects, rather than the health department. For these reasons, it may be challenging to obtain buy-in and funding from health department staff when they learn that the funding would not be allocated to the health department. Potential adopters may experience initial resistance to the PB funding approach.

**Training staff involved in the PB project.** By design, a limited number of TPCHD staff are involved in the PB project. However, for staff that are involved, TPCHD provided trainings to ensure that they understood the basics of PB and its phases. The trainings provided included: PB 101, which focuses on the basics of the PB process; PB 201, which focuses on implementation and serving as project lead for a PB project; and financial training, which focuses on the financial aspects of PB.

**Shifting the power dynamic.** True PB requires representation of the community members most affected by the issues of focus. PB necessitates shifting the decision-making power to residents, as they are the experts on issues occurring within their community. As such, it was important for TPCHD to ensure that agency staff supporting the project were skilled in facilitating and supporting community-based processes without assuming total control, and that the community maintained a position of decision-making power throughout the process.

**Establishing contracts with those involved in the PB project.** To implement the PB project, TPCHD sought to establish an MOU with the participating school district. However, the contract required multiple rounds of reviews and approvals from the school board and board of health due to the combined contract value across the three schools. After months, TPCHD finally received approval to initiate project activities. TPCHD believes that additional planning could have

helped expedite the timeline. They also highlighted that PB necessitates a non-traditional contracting process in order to achieve its intended outcomes, as funding for the project supports the process rather than the outcomes.

**Determining an appropriate timeline for implementation.** TPCHD sought to implement the PB project the week after the start of the new school year, which posed a challenge in terms of teacher and staff capacity to participate. To address this barrier, TPCHD ensured that the schools maintained control of the process and empowered the schools to determine project timelines and identify which individuals had the capacity to lead the process. Flexibility has also been key to ensuring that schools have manageable workloads. Additionally, the construction of some of the winning proposals did not occur before the end of the school year, so students did not get to experience the benefits of the process immediately. This necessitated postponement of the final evaluation component until construction was complete and students were able to see the results of their votes.

**Logistical challenges.** The size of the high school has posed a challenge to communication and creating the advisory group. In the middle school, students voted to establish a student lounge, but there is currently no space for a lounge. TPCHD is working with Tacoma Public Schools to address this logistical challenge. TPCHD staff also noted that it is important to create an appropriate, realistic, and concrete scope and boundaries for the project. Potential adopters should focus on an issue that can be changed through community decision-making.

**Staffing and capacity issues.** The project experienced staffing issues at the end of the school year, due to teachers and students leaving the building for the summer. In the high school, it was also difficult to support the teachers in leading students through the PB process. TPCHD has been providing direct support and connecting staff with each other in an attempt to overcome this challenge, and they also learned to try to contain project implementation to a single school year. There was also staff turnover at the schools and a lack of staff capacity at TPCHD, as the project team initially underestimated the amount of staff time and management required for implementation. To address these issues and expand their role in the schools, TPCHD is partnering with Communities in Schools to provide project staff within the schools, improve the frequency and quality of their communication with the schools, and have a regular presence in the schools.

## Considerations for Replication, Adaption, and Adoption

PB is a flexible process that has been implemented in a wide range of countries and settings. The PB approach has prescribed steps for implementation, but is adaptable to many contexts. To support adoption of PB in other settings, TPCHD has developed resources that others interested in implementing a similar project can use. They are also developing a consulting strategy to provide assistance and support to others seeking to implement PB. Other considerations for communities seeking to implement PB are described below.

**Ensuring agency support for innovation.** According to staff from TPCHD, the agency's culture is one receptive to projects that focus on health equity. In their agency, the Health Equity Coordinator encourages staff to consider equity in their work, and they utilize a health equity technical assistance process and tools. TPCHD also noted that having a grant writer is essential to innovation within their agency, as funding can be a barrier to implementing innovative practices, and the grant writer can identify funding sources to support innovation. Additionally, the buy-in from TPCHD leadership and finance staff was described as vital to innovation in the health department, especially for overcoming the complexity of the contracts process that must be in place for certain innovations.

**Understanding the value of piloting.** TPCHD highlighted the value of their piloting phase. The pilot allowed them to start their project quickly, try new approaches, and implement PB with the understanding that they would be able to make changes and adaptations to the innovation. TPCHD also suggested that small funding sources can support the pilot phases for innovative projects.

**Maintaining the intent of PB.** TPCHD indicated that it has been valuable to utilize existing PB tools and resources and to follow the established steps of PB. TPCHD also indicated that adhering to the prescribed methodology is important for building a strong connection with the community. For this project, TPCHD sought to implement the steps of PB with as much fidelity as possible to help preserve the intent of the PB approach. In particular, TPCHD noted that it is important to implement the process design and proposal development phases as intended, while the idea generation and voting phases are more suitable for adaptation.

**Other process-related considerations.** Adopters should be intentional about their communication, contracting, and design processes in order to overcome some of the challenges experienced by TPCHD. For example, TPCHD staff indicated that it would have been beneficial to connect with the implementing organization's finance department at the outset of the project in order to minimize miscommunications and set expectations early on. Additionally, implementing organizations should seek to adopt flexible financing processes and requirements from the beginning of the project, as traditional governmental contracting and financial procedures often lack the flexibility required to conduct PB with success.

## Results

By the end of the project period, TPCHD oversaw implementation of all of the winning proposals in the schools. TPCHD also reported the following results of the PB project to date:

**Student experiences.** During the PB project, many students submitted proposals for improving their schools, and approximately 1,500 students voted on the proposals. Additionally, according to TPCHD, students had a "successful field trip" to the election center to count the ballots and TPCHD has quantitative indicators to demonstrate that students participated in civic engagement.

**Visibility and credibility within the community.** Due to their experiences implementing the PB project, according to TPCHD staff, the community views their agency as more of a leader and guiding force within the community. They described that others in the community view TPCHD as a credible expert that can support the implementation of PB in other agencies.

**Improving internal processes.** As a result of this project, TPCHD staff indicated that, as a whole, their agency is more amenable to taking risks by initiating innovative and novel projects. For example, TPCHD is applying lessons learned from the PB project to a quality improvement (QI) project they are implementing with their agency's finance department that focuses on improving TPCHD's contracting and financial processes.

**Awareness of PB.** TPCHD has generated a level of awareness around the PB project that staff believe will translate to the implementation of PB by other governmental agencies. For example, the City of Tacoma and Metro Parks Tacoma are considering shifting some of their funding to a PB approach, and the school district is contemplating creating a permanent fund to allow students to identify improvements to their schools. With these changes, TPCHD staff believe that it is possible that significant resources will be spent using the PB approach in Pierce County in the coming years.

**Implementation of PB across sectors.** To support PB implementation, TPCHD conducted a community visioning process that included regional funders, consultants, elected officials, and community stakeholders to discuss how to advance PB as a community engagement strategy. This stakeholder group recommended adding PB into the services offered by the Public Health Centers of Excellence, which is a partnership formed between TPCHD and Spokane Regional



### RESOURCES

- ▶ [Public Health Centers for Excellence](#)
- ▶ [Participatory Budgeting Project Website](#)

Health District. The Centers is committed to disseminating innovative practices, recovering costs, and improving population health. Since being promoted through the Centers, PB is being implemented across sectors – in healthcare agencies, funders, and cities throughout Pierce County and beyond.

## Next Steps

TPCHD has identified plans to support continued implementation of PB, both within their agency and at other organizations, including:

**Continuing to disseminate PB.** TPCHD hopes to stimulate the uptake of the PB process in other sectors and governmental agencies in Washington, such as the City of Tacoma, Metro Parks Tacoma, and Tacoma Public Schools. They are currently working to identify future implementation sites and secure formalized commitments with adopters. The school district has agreed to implement a second year of PB, and the relationship that TPCHD built with the County Auditor’s office has spurred additional projects between the two agencies.

**Consulting on PB.** TPCHD has begun developing a “consulting arm” on PB that will support the implementation of PB in partner organizations by providing training, education, and technical assistance. TPCHD plans to market these skills to other organizations and governmental agencies and will charge a fee for their consulting services. They have also developed a manual that they can provide to adopters to support implementation.

**Building skills and knowledge in PB among staff and partners.** TPCHD will continue to build staff members’ skills and expertise in PB, so that the agency has a pool of experts with relevant skillsets from which to draw for future PB projects, and they also hope to integrate PB into other areas and programs of their agency. TPCHD is also training staff at partner organizations and other organizations across the country. For example, they are conducting PB 201 Mock Process Workshops with staff and partners and at conferences.

### For More Information about the Adopting Participatory Budgeting in Pierce County, Washington Project:

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<sup>i</sup> The Participatory Budgeting Project. (2019). What is PB? Retrieved from <https://www.participatorybudgeting.org/>

<sup>ii</sup> The Participatory Budgeting Project. (2019). Home Page. Retrieved from <https://www.participatorybudgeting.org/>

<sup>iii</sup> The Participatory Budgeting Project. (2019). How Participatory Budgeting Works. Retrieved from <https://www.participatorybudgeting.org/how-pb-works/>

<sup>iv</sup> Communities in Schools Tacoma. What We Do. Retrieved from <https://tacoma.ciswa.org/what-we-do/>

<sup>v</sup> Pierce County Government. Pierce County Auditor’s Office. Retrieved from <https://www.co.pierce.wa.us/Facilities/Facility/Details/35>