



Collaborative Approaches to Well-Being in Rural Communities Definitions and Resources

The definitions and resources included in this document (listed alphabetically) are intended to provide context to applicants of the Collaborative Approaches to Well-Being in Rural Communities grant project.

Collaborative: "Collaboration is a process of participation through which people, groups, and organizations work together to achieve desired results. Collaborations accomplish a shared vision, achieve positive outcomes for the audiences they serve, and build an interdependent system to address issues and opportunities." A collaborative is a group that comes together "to share vision, mission, power, resources and goals" to "jointly plan, implement and evaluate programs to achieve common goals" for collective impact. [Learn more](#)

Collective impact: "Collective impact occurs when organizations from different sectors [or parts of a sector] agree to solve a specific social problem using a common agenda, aligning their efforts, and using common measures of success." [Learn more](#)

Community-Based Participatory Research (CBPR): A partnership approach to research that equitably involves, for example, community members, organizational representatives, and researchers in all aspects of the research process, and in which all partners contribute expertise and share decision making and ownership. The aim of CBPR is to increase understanding of a given phenomenon and integrate the knowledge gained with interventions and policy and social change to improve the health and quality of life of community members. [Learn more](#)

Diversity: "The demographic mix of a specific collection of people, taking into account elements of human difference, but focusing particularly on racial and ethnic groups, LGBT populations, people with disabilities, and women." [Learn more](#)

Equity versus equality: "Equity is not the same as equality; those with the greatest needs and least resources require *more, not equal,* effort and resources to equalize opportunities." [Learn more](#)

Historically excluded or underserved populations: Groups of people whose characteristics have linked them to discrimination or exclusion based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory, or physical disability; sexual orientation or gender identity; or

geographic location. [Learn more](#)

Health disparities: “Plausibly avoidable, systematic health differences adversely affecting economically or socially disadvantaged groups.” [Learn more](#)

Healthy equity: “Health equity means that everyone has a fair and just opportunity to be as healthy as possible. This requires removing obstacles to health such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care.” [Learn more](#)

Relationship between health equity and health disparities: “Health equity and health disparities are intimately related to each other. Health equity is the ethical and human rights principle that motivates us to eliminate health disparities, which are differences in health or its key determinants (such as education, safe housing, and freedom from discrimination) that adversely affect marginalized or excluded groups. Disparities in health and in the key determinants of health are the metric for assessing progress toward health equity.” [Learn more](#)

House Bill 13 (85th Texas Legislative Session, 2017): “In an effort to promote recovery-based treatment, the Texas Legislature authorized the development of a community mental health grant program through H.B. 13. The grant program for mental health services seeks to establish a matching grant program to support community mental health programs providing services and treatment for individuals experiencing mental illness. Populations to be served include individuals with mental illness and unmet behavioral health needs. Government entities and non-profit organizations are eligible to apply for funding.” The grant program is designed to “foster community collaboration, reduce duplication of mental health services, and strengthen continuity of care for individuals receiving services through a diverse local provider network.” [Learn more](#)

Inclusion: “[...] the degree to which diverse individuals are able to participate fully in the decision making processes within an organization or group. While a truly “inclusive” group is necessarily diverse, a ‘diverse’ group may or may not be ‘inclusive’.” [Learn more](#)

Integrated health care: The systematic coordination of physical and behavioral health services. “The idea is that physical and behavioral health problems often occur at the same time and that integrating services will provide the best results and be the most acceptable to individuals receiving services.” [Learn more](#)

Mental/behavioral health disparities: “[...] differences in outcomes and access to services [...] experienced by groups based on their social, ethnic, and economic status.” [Learn more](#)

Mental health: Mental health, as defined by the World Health Organization, is “a

state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community.” The foundation believes the concepts of mental health and well-being should be promoted beyond the walls of health clinics and integrated into everyday life. Community members, leaders and professionals—from teachers and preachers, to police officers and judges—should understand its importance, the factors that influence it, and its relationship to overall well-being and resilience. [Learn more](#)

Population health: “The overall goal of a population health approach is to maintain and improve the health of the entire population and to reduce inequalities in health between population groups.” [Learn more](#)

Population mental health: “[...] aims at improving the mental health status of the whole population, keeping people from becoming mentally ill, and improving the quality of life of those living with a mental disorder; all the while necessarily acknowledging the complexity inherent in such projects.” [Learn more](#)

Power and resources: Differential exposure to social, environmental and economic factors often stem from structural differences in power and resources. The root causes of these differences include racism, sexism, classism, and other institutional and historic ways that resources, opportunity and power have been and continue to be distributed across groups. [Learn more](#)

Resilience: “Resilience is the process of adapting well in the face of adversity, trauma, tragedy, threats or significant sources of stress — such as family and relationship problems, serious health problems or workplace and financial stressors. It means “bouncing back” from difficult experiences.” [Learn more](#)

Rural community: For the purposes of this project, the foundation defines rural as counties of 250,000 people or less, with a preference for smaller communities. Multiple counties who share an interest in building a resilient, mentally healthy and well community may collaborate as long as each county in the collaboration has 250,000 people or less.

Social determinants of health: “Nonmedical factors such as employment, income, housing, transportation, child care, education, discrimination, and the quality of the places where people live, work, learn, and play, which influence health. They are “social” in the sense that they are shaped by social policies.” [Learn more](#)

Social determinants of mental health: “The many interacting forces that between them shape individual and collective levels of mental health and wellbeing, and set out actions that can be pursued to promote and protect good mental health.” [Learn more](#)

Stakeholders: “[...] generally defined as people, groups, organizations or businesses

that have interest or concern in the community. Stakeholders can affect or be affected by the community's actions, objectives and policies. Some examples of key community stakeholders are residents, community groups, developers, government workers (and the agencies they represent), business owners, neighborhood leaders, commission members and other groups from which the community draws its resources." These people and entities are necessary to make a collaborative a success. [Learn more](#)

Well-being: "[...] includes the presence of positive emotions and moods (e.g., contentment, happiness), the absence of negative emotions (e.g., depression, anxiety), satisfaction with life, fulfillment and positive functioning. In simple terms, well-being can be described as judging life positively and feeling good. For public health purposes, physical well-being (e.g., feeling very healthy and full of energy) is also viewed as critical to overall well-being." [Learn more](#)

Wellness: Although sometimes sparked by workplace and community programs, wellness is a self-directed, affirming process through which people increase their self-awareness, pay attention to their needs (both physical and mental), and make choices that help them live their best life.