

Building Back Better from Below (B4):
*Harnessing Innovations in Community Response
and Intersectoral Collaboration for Health and
Food Justice Beyond the COVID-19 Pandemic*



Project Objectives

- **Research:** to identify grassroots innovations and multi-stakeholder collaborations that have emerged in response to COVID-19 in São Paulo, Toronto and Brighton, analyse their effects on pre-existing and pandemic-intensified inequities of health status, food security and political voice – particularly for racialised communities – and assess their potential scalability and sustainability.
- **Engagement:** to amplify the voices of community leaders and front-line service providers in debates on transforming food systems, primary health care provision and democratic representation after the pandemic, helping to build coalitions for the systemic changes needed to overcome the inequities affecting marginalised and racialised communities in cities on both sides of the Atlantic.
- **Mutual learning:** to promote mutual learning between Brazil, Canada and the UK, building the skills of academic and practitioner researchers and promoting within the participating research institutions and their peer academic networks a decolonial approach to knowledge generation and mobilisation – one which disrupts regimes of truth that exclude subaltern, Black and Indigenous knowledges and ensures that the research questions and processes honour the perspectives of the people most directly affected and the ways in which they frame issues for research.

Project timeline

| Phase 1 | May 2022 | Jun 2022 | Jul 2022 | Aug 2022 | Sept 2022 | Oct 2022 |
|-------------------------------|--|------------------------|---|---|---------------------------------------|-------------------------|
| Project Setup | Launch | Toronto meeting | Contracting | Ethical review and primary data management setup | | |
| Evidence review | Protocol drafted | Protocol agreed | Literature/evidence collected / coded | | Background papers drafted | |
| Case study selection | Initial contacts | Criteria agreed | Scoping / collection of possible cases | | | Cases defined |
| Phase 2 | Nov 2022 | Dec 2022 | Jan 2023 | Feb 2023 | Mar 2023 | Apr 2023 |
| Case studies | Students selected | Document review | Key informant interviews | | Analysis | Feedback |
| Action learning sets | Members and process agreed | | Reflection sessions facilitated | | Conclusions synthesised and validated | |
| Cross-theme analysis | City team coordination meetings and emerging finding workshops | | | | | City workshops |
| Phase 3 | May 2023 | June 2023 | Jul 2023 | Aug 2023 | Sept 2023 | Oct 2023 |
| Country-level outputs | City reports | | Student dissertations and case study Working Papers | | | |
| Cross-country analysis | São Paulo meeting | | | Special issue and joint book proposal development | | |
| Phase 4 | Nov 2023 | Dec 2023 | Jan 2024 | Feb 2024 | Mar 2024 | Apr 2024 |
| Academic outputs | Papers submitted | | Peer review and editing | | Special issue published | |
| Policy and practice | Book sections and linked material prepared | | | Book and linked material published | | Brighton meeting |

Activities and Outputs: partnerships and fieldwork

- Careful engagement with marginalised and racialised communities through community advisors (e.g. AfriCan Food Basket and Uzima joining project Advisory Board in Toronto) and partnership agreements under which Black and Racialised Minority organisations took leadership of specific components (e.g. Bridging Change Action Learning Set with BRM activists in Brighton)
- Negotiated agreements for collaboration on action learning and policy dialogue activities with senior health system managers (e.g. São Paulo State Health Secretariat for Brazil-UK dialogue on digital transformation and inclusion, NHS Sussex for Brighton Conference on Health Equity, head of Toronto Public Health for project Advisory Board)
- Scoping research and secondary evidence reviews conducted in all three cities; draft City Reports prepared and shared with other country teams at July 2023 São Paulo meeting, key findings now being shared in local stakeholder workshops before final revision and publication.
- Field research at different stages, due to staggered timing of ethical approval processes: empirical work (interviews and focus groups) commenced in São Paulo in July 2022, in Brighton in September 2022 and in Toronto in November 2022.

Activities and Outputs: analysis and communication

- Meetings across the countries by theme (e.g. researchers working on the Representation theme in São Paulo, Toronto and Brighton met both online and in person to define shared research approach) and across themes within the city teams (e.g. São Paulo team has meetings every two weeks to discuss findings and draft papers)
- Annual cross-city meetings with the participation of the three research teams, case study community representatives and invited academics and activists (UofT hosted in Toronto in June 2022, Cebrap hosted in São Paulo in July 2023, IDS to host in Brighton in June 2024)
- Definition of a shared analytical framework for case studies to underpin comparative analysis across cities, building on interdisciplinary inputs from across the team (including elements from innovation studies, social movement theory and governance analysis).
- Conference presentations of city-specific findings (e.g. São Paulo findings in presentation at International Political Science Association Conference, Buenos Aires, July 2023) and initial comparative analyses (e.g. Brighton and São Paulo findings in presentation at Royal Geographical Association Conference, London, August 2023); blog series jointly authored by cross-team group of early career researchers currently being prepared.

São Paulo component: preliminary findings

Four case studies were identified in poor regions of São Paulo city:

- Agencia Solano Trindade – Campo Limpo, peripheral neighborhood
- São Remo – Favela in the west zone of the city, near USP
- Casa do Povo – NGO, “old center” of the city
- Cozinha Solidária – popular restaurants, different parts of the city

All experiences are strongly related to food (in)security

- While health and political action were central issues in the public debate, grassroots movements were focused on tackling hunger
- Hypothesis: hunger was one of the main problems faced in the regions + dismantling of national food policy in the Bolsonaro government
- Research explores how the cases articulated issues related to food security, health and political representation (intersectoral dimension)

São Paulo component: preliminary findings (contd.)

Innovations emerged from the identification of emergency needs and articulation of organizations' old & new actions and knowledge

- Solano Trindade reinforced its work in the area of healthy eating and support for small local businesses
- São Remo coordinated efforts and reached 100% of the families in the community
- Casa do Povo respected the diversity of eating habits and "opened" its food baskets
- Solidarity Kitchen sought to provide ready-to-eat food in the face of the cost-of-living crisis and has the potential to become a national public policy

Creative solutions were implemented: healthy food, universal coverage, choice

- These solutions can inspire more flexible policies
- What can be done to facilitate their sustainability and replicability?

Brighton component: preliminary findings

Health:

- The National Health Service in England is traditionally characterised by centralised and siloed management, but the Covid-19 emergency response enabled agile, decentralised decision-making and intersectoral collaboration to tackle racialised inequities; there is an opportunity to institutionalise this as part of ongoing reforms, but insufficient attention has been paid to learning from what worked well during the pandemic.

Food:

- The pandemic drove rapid grassroots innovation in food provision for marginalised and racialised communities, with some innovative models (e.g. 'social supermarkets') becoming consolidated; now, the cost of living crisis has increased demand at the same time as government funding has been cut and some innovative providers have had to close down, risking the loss of knowledge as well as provision.

Representation

- The pandemic and Black Lives Matter highlighted the inequalities facing Black and minoritised communities, catalysing change that led the local council to implement an anti-racist strategy, tackling internal inequalities as well as issues around representation of and funding for Black and racialised communities; now the challenge is to institutionalise these gains while maintaining autonomy.

Toronto component: preliminary findings

Key findings from qualitative review of scholarly and grey literature:

- The hardest hit were not immediately prioritized in government pandemic response
- Racialized, low income neighborhoods at greatest risk of exposure, disproportionately burdened (hospitalizations, morbidity, mortality), significant and near immediate food insecurity with closures of local food banks that were already highly utilized
- Community groups like TAIBU Community Health Centre championed the response - advocacy to draw attention to intersecting inequities, mobilizing to partner with stakeholders from all sectors to offer services and fill the gaps to promote food and health justice
- Local and national coverage of systemic, intersectional, inequities during the pandemic alongside renewed activism associated with the Black Lives Matter movement (in response to high-profile, police-involved deaths of Regis Korchinski-Paquet in Canada and George Floyd in the US helped anti-Black racism policies at the municipal level (e.g., the work of the City of Toronto Anti-Black Racism Task Force) move forward at an accelerated pace

The Trans-Atlantic Research Partnership: strengths

- Meaningful and sustained engagement with community collaborators (e.g. TAIBU CHC in Toronto, Bridging Change and BHFP in Brighton, Agência Solano Trindade and Casa do Povo in São Paulo) has generated research insights while honoring ethical commitments and building ownership.
- Strong engagement with policymakers and health system managers has ensured interest in research findings from the outset and generated significant potential for policy influence.
- Cross-country interactions have been intense and rewarding, including for partners from community groups and service provider organisations.
- Interdisciplinarity of the teams (African studies, anthropology, development studies, geography, innovation studies, political science, public health) has illuminated different aspects of the complex processes being studied and enriched the comparative research approach.
- Diverse representation across sectors on Community Advisory Boards and engagement groups has built dialogue among stakeholders as well as strengthening research design.
- High degree of engagement of students (undergraduate and postgraduate) has expanded research capacity building contribution and supported development of teaching materials.

The Trans-Atlantic Research Partnership: challenges

- Time required to develop trust and establish rapport, and to allow for meaningful sustained engagement with community partners that reflects our project's ethical commitments and obligations.
- Worsening food crisis and health system challenges make it harder to engage community stakeholders and government partners as they are forced to prioritize immediate crisis response over reflecting on the past.
- Delays in research ethics approval process affecting fieldwork timetables.
- Complexity and time demands of maintaining dialogue and consistent communication across city teams and negotiations to ensure a balance between the demands and objectives of the respective teams.
- Need to integrate perspectives and insights from different themes (public health, food security and political representation) within a single set of analyses.
- Difficulty of standardizing empirical work enough to support comparison while still allowing for a high degree of nuance across the three cities.
- Insufficient funding available to allow for more fulsome inclusion and participation of community partners, including in international exchanges.
- Funding model (including specific research council restrictions) limits allocation of resources to joint activities and publications bringing together teams from the three countries.