



NC Public Benefits Collective

● What is the NC Public Benefits Collective?

The NC Public Benefits Collective (the Collective) is a statewide, collaborative effort that aligns and amplifies the work already happening across North Carolina by strengthening information-sharing among community-based organizations, advocates, and public partners. Together, members identify barriers to public benefits access, share solutions, and coordinate strategies for systems change and policy advocacy.

What is the Collective's role?

The NC Public Benefits Collective:

- Convenes and coordinates organizations, networks, and advocates working toward more equitable public benefits access across North Carolina,
- Builds the connective infrastructure that strengthens alignment and coordination across local, regional, rural, and urban divides,
- Holds the field accountable to the communities that have been most harmed by its failures, and
- Advances a united narrative that reframes public benefits not as charity, but as essential investments that strengthen health, economic opportunity, and community wellbeing.

NC Public Benefits Collective Timeline

From early convening to a coordinated statewide infrastructure



NC Public Benefits Collective

Who we center

Led by and accountable to community. Decisions are made with direct input from the people impacted, not just on their behalf.

Longevity. Organizations that have built trust and are embedded in the relationships and institutions that make up community life.

Close to the impact. Organizations working directly with people navigating public benefits, who understand their material conditions from the inside and are accountable to them when things go wrong.

Operationalized through Collaboration Committee and Community Leads.

Our focus

Immigrant Access and Language Equity — cross-cutting work to ensure programs are accessible to immigrant communities.

Health and Wellness — including Medicaid and related health coverage programs.

Food and Nutrition — including SNAP, WIC, and related nutrition supports.

Energy Assistance — programs that help families afford utilities and home energy costs.

Housing Assistance — rental assistance, housing subsidies, and related supports.

Income Support — cash assistance and economic stability programs.

Supports for Work — including child care subsidies and workforce-related benefits.

Structure

1

Collaboration Committee (steering committee)

Cross-cutting leadership and coordination, members are drawn from the Circles, core administrative and technical support, community strategy team, program participants, and other key partners.

2

Topic Circles

The heart of the Collective's work happens here, organized around substantive benefit areas, circles engage in both information exchange and aligns advocacy, with an immediate focus on maximizing access to existing benefits.

3

Community Strategy Team

WNC & ENC Community Engagement Leads work alongside organizations and community partners to ensure authentic engagement in the Collaboration Committee and Circles – building and supporting the direct community feedback loops.

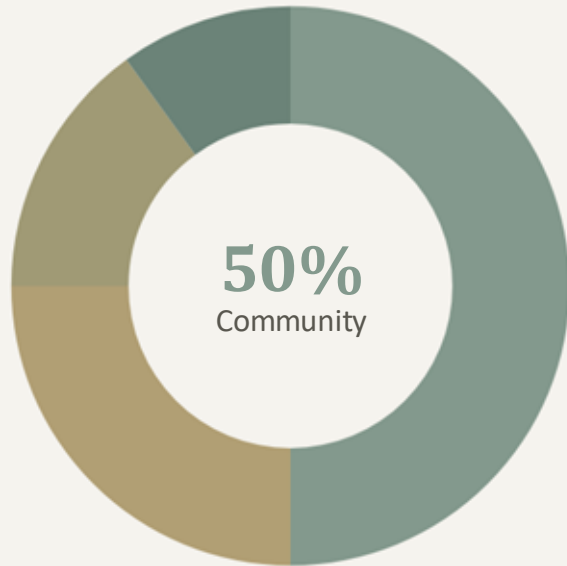
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Core Support

Care Share Health will serve as the core administrative and technical support for the Collective.

Collaboration Committee

Primary governance body of the NC Public Benefits Collective, setting direction and centering community voice.



Community Representatives

10 seats — 6 Regional Leads (one per NC Medicaid region) plus 4 strategy-at-large seats for cross-regional perspectives.



Capacity and Liaison Seats

5 seats — subject-matter experts in data, policy, technology, NCDHHS, and philanthropy.



Circle Representatives

1 seat per active Circle, designated by each Circle — not through the nomination process.



Care Share Health Alliance Staff

Anchor organization — houses the Collective's Director, Communications Lead, and WNC Engagement Lead.

Accountability and Commitment

Monthly meetings

Biweekly at launch; 90% attendance expected.

~30 hours/year

Virtual meetings plus annual 1-2 day in-person convening.

\$5,000 annual stipend*

Per non-staff member; payable to individual or organization.



Immigrant Health Circle

Circle Sample: Planned activities and strategy



Establish necessary protocols and infrastructure

Map assets to establish a database of organizations serving immigrant communities across NC.

Establish protocols and infrastructure ***so that Circle members feel safe and supported to participate and collaborate fully and with each other.***

Convene/engage stakeholders in Circle

Bring together:

- Immigrant-serving organizations
- Health systems
- Public health departments
- State agencies
- CBOs
- CHWs
- Community leaders

to ***identify ongoing/new barriers, lessons learned, and collaborative solutions***

Track progress on barriers and solutions toward action

Continuous evaluation of meeting notes and attendance in association with policy changes or implementation will provide timely feedback to stakeholders to ensure accountability and ***maintain momentum toward addressing obstacles to immigrant access.***

Collect and disseminate resources statewide

The committee will gather materials from stakeholders and organizations across North Carolina for secure storage and distribution to relevant populations, CBOs, and CHWs, ***ensuring communities have safe access to accurate, culturally appropriate information.***

Assess immigrant access to public benefits

Interviews with DSS County Directors and staff to assess county-level barriers and facilitators to immigrant public benefit access.

Triangulate this evidence with the barriers, lessons learned, and solutions identified by the Circle.

Develop a ***comprehensive understanding of factors influencing immigrant access to public benefits in NC.***



Thank you.

BenefitsCollective@caresharehealth.org

www.caresharehealth.org/collective