

Building Bridges 2.0

Health Equity and Racial Justice
Resource

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Module 1: Introduction to Health Equity and Racial Justice

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An Ecosystem Approach to Public Health is...

- Adopting a vision that fully supports the roles and needs of governmental public health and extends beyond government bodies to include non-governmental actors, and related sectors, who unquestionably impact the health of our communities
- Centering the leadership, contributions, priorities, and agency of community-based organizations, community networks, advocates, and community residents as essential to public health's effectiveness and workforce
- Centering racial justice as the driver for social and structural transformation
- Committing to transparency in how actions and principles of equity, racial justice, and antiracism are operationalized

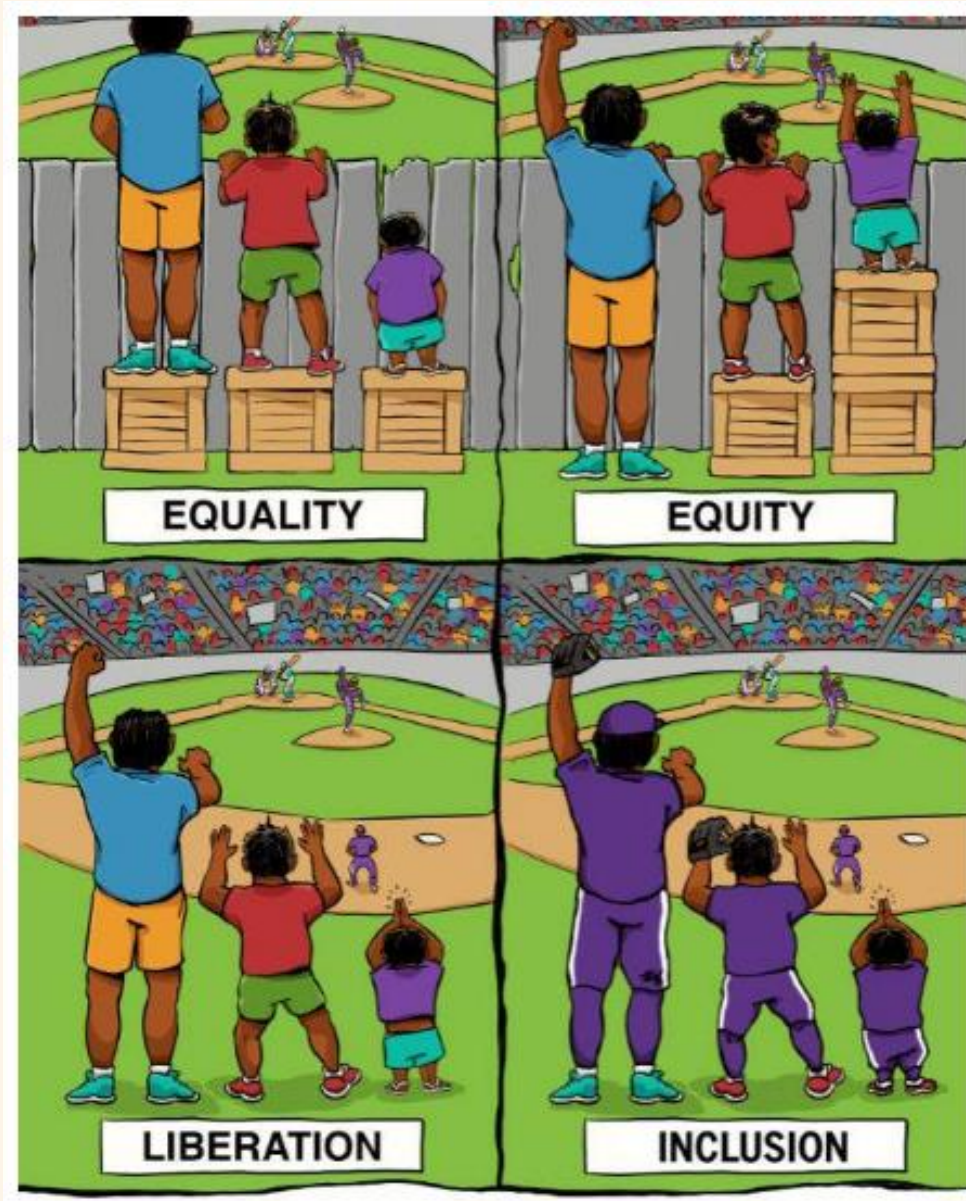
Principles and Elements

- Insist on racial justice
- Acknowledge and account for harms
- Earn and sustain community trust
- Center community-led priorities, strategies and solutions
- Challenge power imbalances and share resources
- Build narrative power



“Health inequity is related both to a legacy of overt discriminatory actions on the part of government and the larger society, as well as to present day practices and policies of public and private institutions that continue to perpetuate a system of diminished opportunity for certain populations.”

- A Time of Opportunity: Local Solutions to Reduce Inequities in Health and Safety

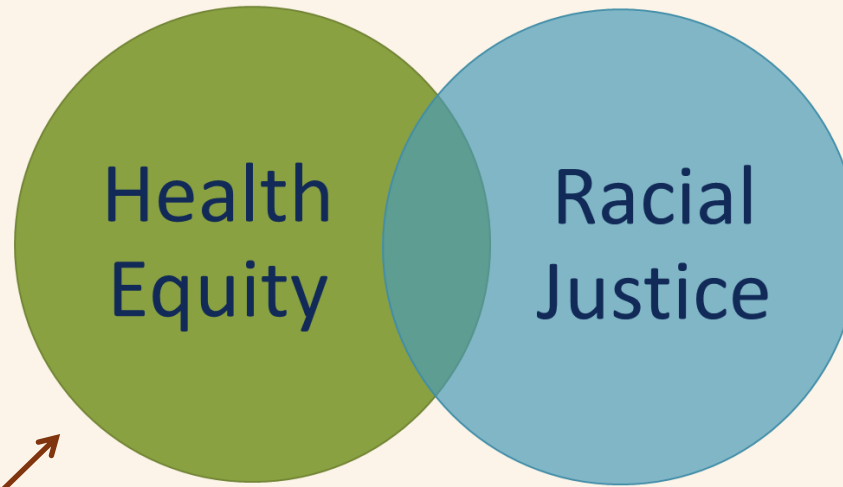


Moving Toward Inclusion ...

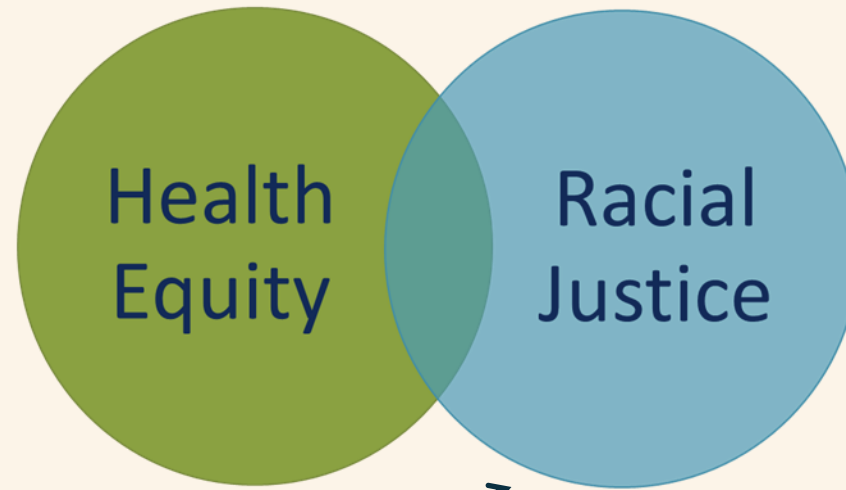
The field and public health's understanding of equity, and community involvement in achieving health equity continues to evolve, learn and improve.

Our approach to public health must advance health equity, especially through prioritizing racial and ethnic populations based on health need data.

Health Equity and Racial Justice

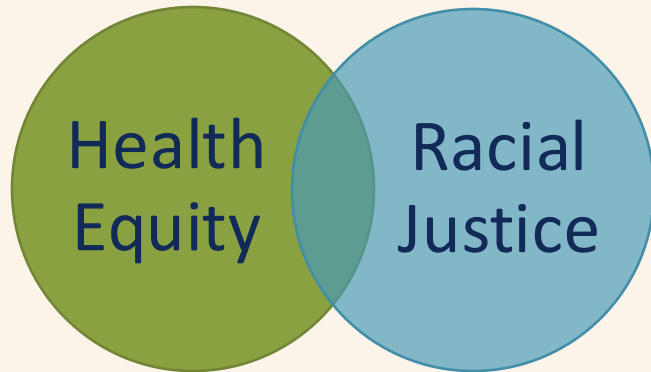


Health Equity means that everyone has a fair and just opportunity to attain their full health potential and that no one is disadvantaged, excluded or dismissed from achieving this potential. Health equity requires the removal of systemic obstacles to health.



Racial Justice would be attained if racial factors no longer served as robust and reliable predictors of key measures of health, safety, economic stability, or other important societal outcomes. This requires the elimination/reversal of the policies, practices, norms and messages that reinforce differential outcomes by race and a transformation of the systems and structures that uphold/reinforce persistent and widening inequities.

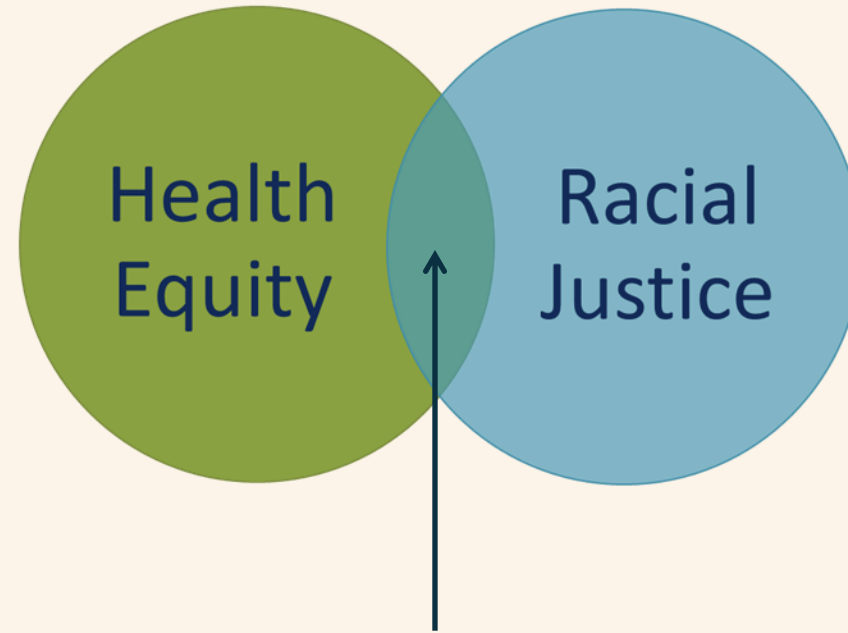
Principles for Aligning & Advancing Health Equity & Racial Justice



- Acknowledging and documenting inequities, disparities and injustices is not enough
- Not everyone starts from the same place about their understanding of these concepts
- We need a process with actionable strategies and clear milestones that embed equity and justice from the start
- Achieving health equity and racial justice outcomes requires a strong focus on the experiences, perspectives and approaches of marginalized people and vulnerable communities

Tensions Aligning Health Equity & Racial Justice

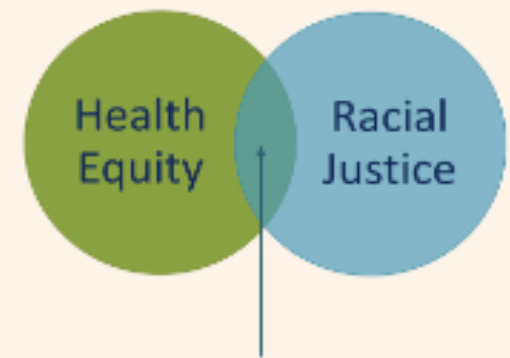
- Use of universal language, such as *all communities deserve...* or *everyone benefits when...* can be alienating
- Concern that elevating racial justice fails to acknowledge other forms of inequity
- Centering racial justice ultimately requires shifts in power – individual and institutional



**Strategic Opportunities to Advance and Align
Health Equity and Racial Justice**

Strategic Opportunities to Advance Health Equity and Racial Justice

1. Synergistic Data Creation and Analysis
2. Strategic Framing and Communication
3. Effective Multi-Sector Partnerships
4. Power Building, Policy and Systems Change
5. Transformative Resource Investment



Strategic Opportunities to Advance and Align
Health Equity and Racial Justice

1. Synergistic Data Creation & Analysis

Alignment of analytic frameworks for health equity and racial justice can help practitioners:

- Paint a clearer picture of inequities
- Articulate the roots of inequities
- Identify levers for change
- Clarify indicators to measure improvements over time
- Increase synergy and enhanced strategy

2. Strategic Framing and Communication

- Speaking about racially unjust health inequities is challenging
- Naming racial justice does not preclude other intersectional forms of equity
- Health inequities will not be eliminated if we do not deal explicitly with racism
- We must learn to converge the languages health equity and racial justice

3. Effective Multi-sector Partnerships

- Increases available resources, strategies, and capabilities
- Shifts organizational cultures, practices and norms
- Fosters cross sector learning and innovation
- Generates new ways to catalyze and sustain systemic change

4. Power Building, Policy & Systems Change

- Advancing health equity and racial justice requires policy, systems & environmental change (PSE)
- Power building is fundamental to community-driven PSE
- Racial justice advocates' expertise can inspire allies and provide guidance on:
 - ✓ Organizing & mobilizing impacted communities
 - ✓ Changing narratives
 - ✓ Altering power dynamics for accountability
 - ✓ Improving conditions that have denied some groups the opportunity to experience good health, safety and wellbeing

5. Transformative Resource Investment

Financial or infrastructure investments, and other forms of opportunity can serve as catalysts to produce equity in low-income communities of color.

Racial Justice in Narrative

Racial Equity and Community-Centered Language

Language and images help to shape the narrative.

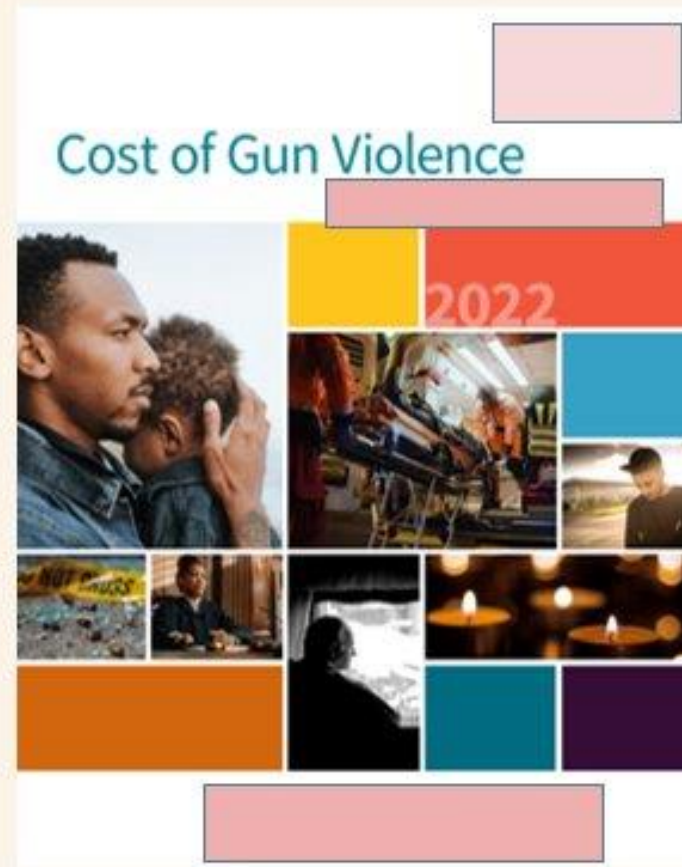
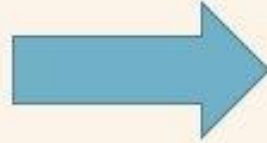
- Choose images and narratives that reflect the priority communities, avoiding racist stereotypes .
- Review public statements and reports for racially-biased language and consider how racial and ethnic communities are described as part of the solution, and as agents of change.
- Use images that show people of color as leaders in advancing solutions and show people and their lives in context.
- Review reports and media with community partners before their release.

Deficit versus Asset Framing

Deficit Framing	Assets Framing
Defining people by their challenges	Defining people by their aspirations and contributions

- Prioritizing an asset frame when conducting **data collection** (choosing indicators, framing questions, etc.) and **data analysis** (choosing theories/frameworks, broadening outcomes) can lead to more comprehensive and robust understanding that can challenge stereotypes and narratives about underrepresented groups

Example: Changing the Narrative



Equity-Centered Changes Made to the Report:

- Language and images help to make it a more community-centered story.
- Reviewed the report for racially-biased language and recommended changes.
- Elevated community-centered and community-driven solutions.
- Advocated for images that show people of color as leaders in advancing solutions, avoided racist stereotypes.

Elevating Community Voice as Critical Data

Direct quotes from community members affiliated with CBOs and advocacy groups were included in the updated version of the report alongside quantitative data.

“[We] need a policy change from investing in jails and punishment to invest in human beings. Stop investment in criminal justice system. Start with better education. Invest in school structures. Investing upfront.”

*— Stakeholder Meeting participant,
Black Leadership Kitchen Cabinet member*

“We must pursue permanent solutions that uplift communities and youth rather than temporary fixes. Talking about things is not enough, allocation of resources and support is key to making any impact.”

*— Stakeholder Meeting, Community-based
organization staff*

Discussion Questions for Module 1

- How do the tensions between racial justice and health equity show up in your work? Where are the opportunities for bridging?
- Out of the five Strategic Opportunities, where is your organizational already doing good work? What supports are necessary to maintain and enhance what you have?
- Can you think of an example of deficit and asset framing from your work?



Module 2: Health Equity and Racial Justice in Theory and Practice

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Normalizing Racial Justice

- Build a shared understanding of terms and concepts (e.g., name racism)
- Be willing to have difficult conversations and to sit with discomfort
 - Do not allow discomfort to prevent progress
- Prioritize and incentivize urgency toward change
- Move toward truth and healing

What is Critical Race Theory?

- School of thought created by several scholars of color in late 1980's declaring how racism is woven into our social institutions (e.g., health care, judicial courts, housing market)
- Institutional policies reproduce racial disparities that negatively impact BIPOC communities' wellbeing. (Ex: Scholars of color have consistently been excluded from research opportunities)
- Refutes the idea that we live in a “color-blind” society and people's outcomes are solely influenced by character and merit
- Inequities are reproduced at a systemic level

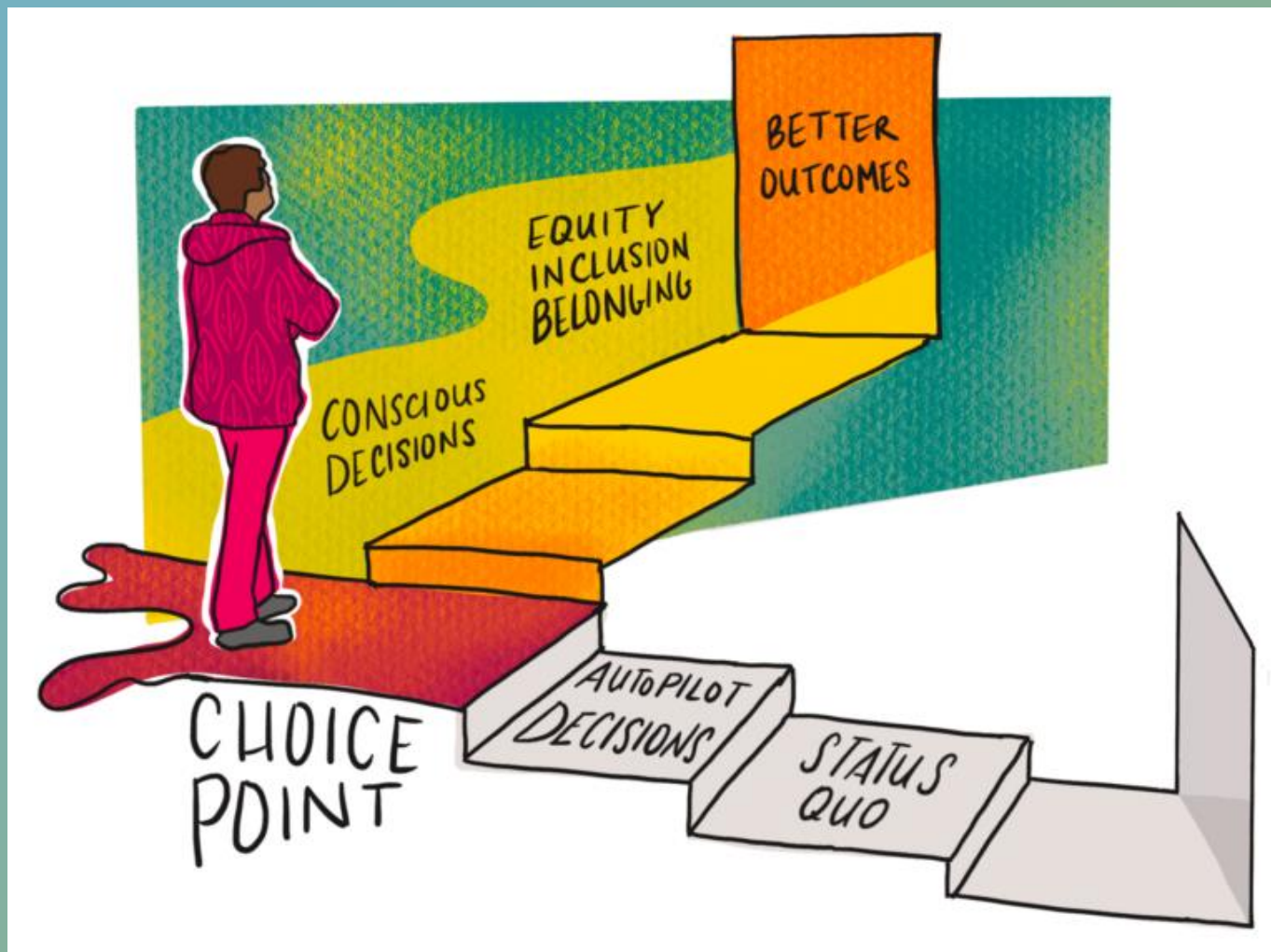
Engaging Partners with a Specific Focus on Racial and Ethnic Groups

Strategic Imperative

- CRT recognizes of how implicit bias and structural racism permeate our systems in society and creates disproportionate negative effects on BIPOC communities.
- Addressing racial inequity in health and other life outcomes requires examining and intervening at the systems levels → choice points

*Sources: [Thought Co. CRT Introduction article](#) / [Brookings Institution "Why Are States Banning Critical Race Theory?" Blog post](#)

Choice Points



Using Choice Points to Advance Racial Justice

- Choice points are decision-making opportunities that influence outcomes.
- The cumulative impacts of many small choices can be as significant as the impacts of big decisions.
- When we're conscious of choice points and the related impacts, we're less likely to replicate the status quo, and we open new possibilities for equitable change.

[Race Forward: An Introduction to Racial Equity Assessment Tools \(Keleher, 2014\)](#)

Choice Points Questions to Advance Racial Justice

- Where are the decision-making points that affect outcomes?
- What decisions/actions may be reinforcing bias and current inequities?
- What alternative action options could produce different outcomes?
- Which action will best advance racial justice?
- What reminders, supports and accountability systems can be structured into routine practices to keep racial justice as a high priority?

[Race Forward: An Introduction to Racial Equity Assessment Tools \(Keleher, 2014\)](#)

Organizational Privilege and Choice-Points

- What do we understand our organizational privilege?
 - What types of data do we have access to?
 - What relationships do we have with academic institutions (local colleges/universities) or other anchor organizations?
- How are we leveraging our privilege toward the benefit of others?
 - Community-serving partnerships, community grants/scholarships, high school internships, etc.
- What risk does our privilege allow us to take?
 - e.g., how does our privilege influence our investments?
- In what ways does our privilege stall / hinder us?
 - Is there a sense of urgency within our organization that matches the urgency in communities?
- What is the balance between privilege and power?

Organizational Best Practices for Operationalizing Equity

- Having a **dedicated, equity-focused** team at the organization to lead, guide, and measure equity and racial justice outcomes and impact
- Leadership engaging in ongoing review of equity-centered resources, metrics, communication, and transparency tools
- Sustain equity-focused work through:
 - Training and capacity building for staff
 - Aligning values with partners and stakeholders
 - Celebrating organizational achievements
 - Adapting with changing community contexts and activities
 - Utilizing diverse and balanced evidence and data



Module 3: Equity-centered Data and Evidence

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Three Equity Objectives

Three Equity Objectives

To help assure that real advancements toward more equitable health conditions are actionable and progress is measurable, we ground our health equity work in three distinct equity objectives:

- **Procedural Equity**
- **Distributional Equity**
- **Structural Equity**

Procedural Equity

- Transparent, fair and inclusive processes with additional opportunities for those who are disproportionately impacted



Example of Procedural Equity: Equity Guided Interview and Team Discussions

What do you/we know about the priority neighborhoods in our community?

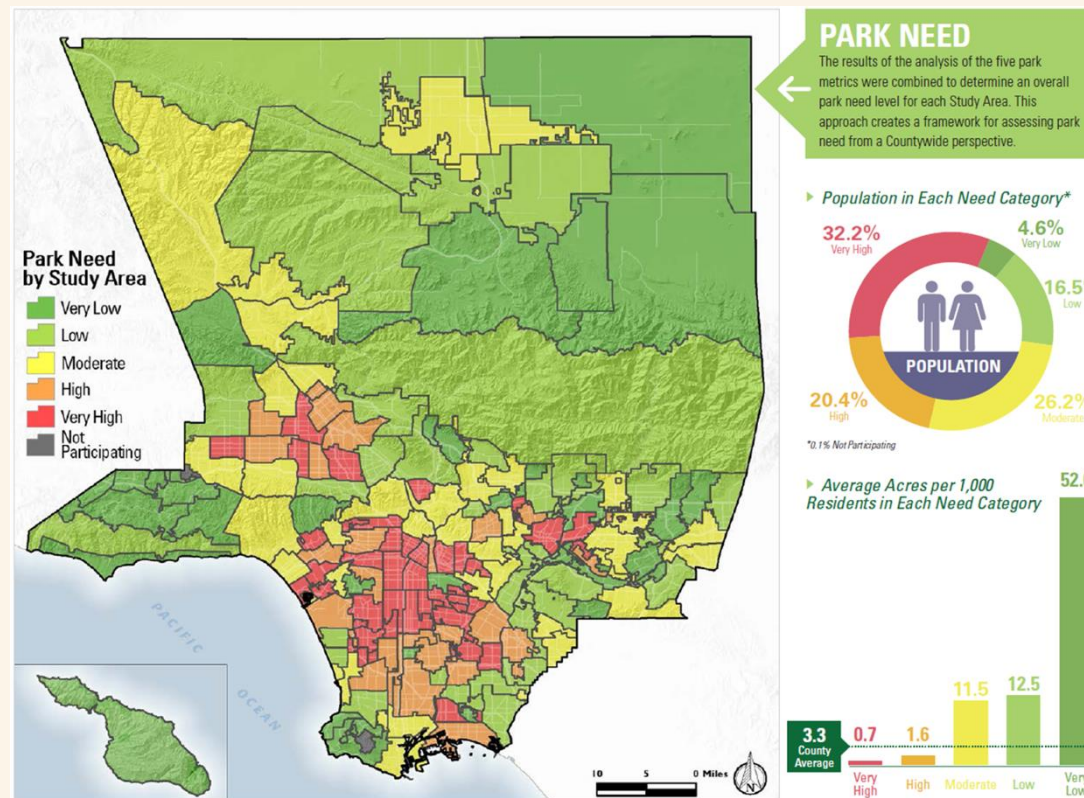
- Encourage a culture of continuous learning and systems thinking
- Build awareness and disrupt harmful language and stereotypes

What do you/we know about health equity and racial justice?

- Some comfort level in describing health equity and why it's important in response and systems improvement.
- Health equity is not just about individual health behaviors but more importantly about inequitable factors that shape health.
- Awareness that past and present policies and practices influence the inequities we see in health.

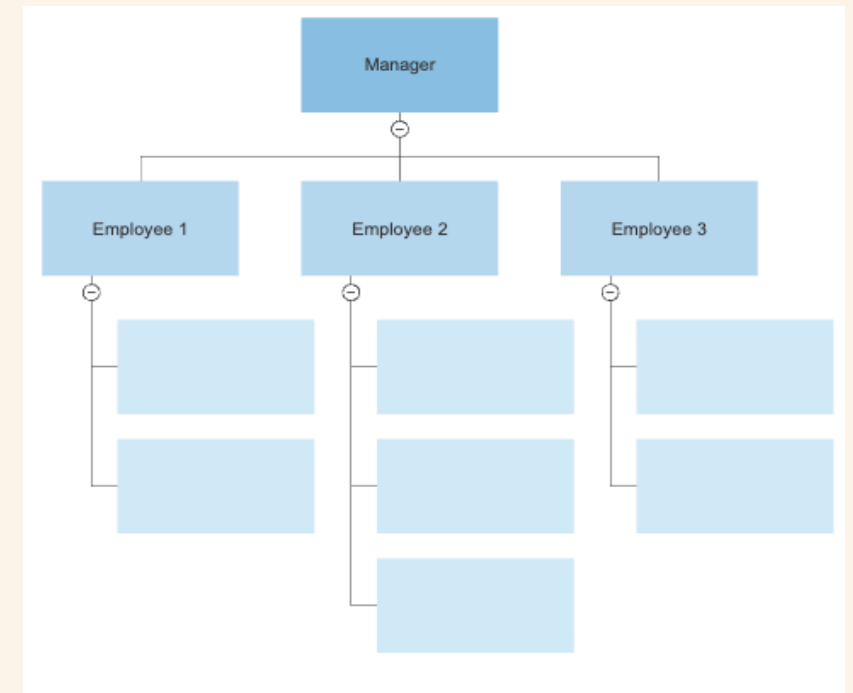
Distributional Equity

- Fair distribution of resources, benefits and burdens; prioritizes resources for communities (geographic and demographic) experiencing the greatest inequities



Structural Equity

- Addresses underlying structural factors & policies that gave rise to inequities; makes a commitment to correct past harms & prevent future unintended consequences



Example of Structural Equity: THRIVE Framework

- Considering multiple factors in a community that impact health outcomes



Operationalizing Equity

Past disadvantage: Closes historic gaps to improve health and economic opportunities in vulnerable communities.

Contemporary participation: Engages in shared decision making through community-based participation and elevating perspectives of vulnerable communities.

Future consequences: Prevents future disparities by leveraging funding for long-term health and organizational capacity, and incorporating metrics and evaluation to track whether initiatives are closing gaps.

Data and Evidence for Racial Justice and Health Equity

Maintaining Balance in Data Collection

Multiple Sources: the data collection process drives equitable practice

- Risk Factors/Deficit Data & Protective Factors/Strengths Data
- Qualitative/Narrative & Quantitative/Numeric
- Perceived Issues & Possible Solutions
- Experiential & Contextual & Statistical



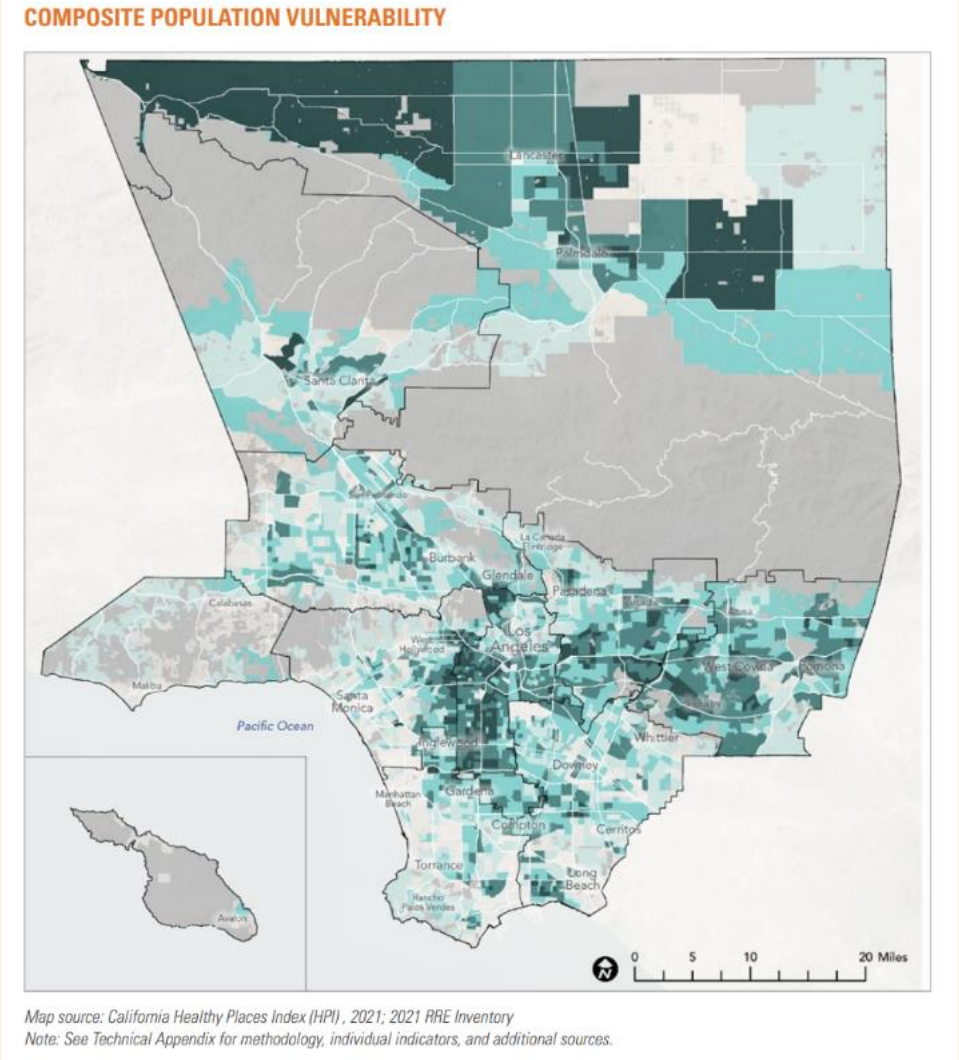
Three Types of Essential Data & Metrics

- **Best Available Research Evidence** - is information derived from scientific inquiry, published and academically rigorous.
- **Contextual Evidence** - is a collection of measurable factors in the community that may impact the success of a prevention strategy.
- **Experiential Evidence** - is the collective experience and expertise of those who have practiced or lived in a particular setting. It also includes the knowledge of subject matter experts. These insights, understandings, skills, and expertise are accumulated over time and are often referred to as intuitive or tacit knowledge.

Find more information at: [Evidence Project Overview \(cdc.gov\)](#)

Example: Population Vulnerability in Los Angeles County

- Los Angeles County conducted a comprehensive Parks Needs Assessments Plus (PNA+) to assess park equity
- The Composite Population Vulnerability map shows how social factors (age, race, poverty, etc.), transportation access, health indicators, and environmental vulnerability intersect

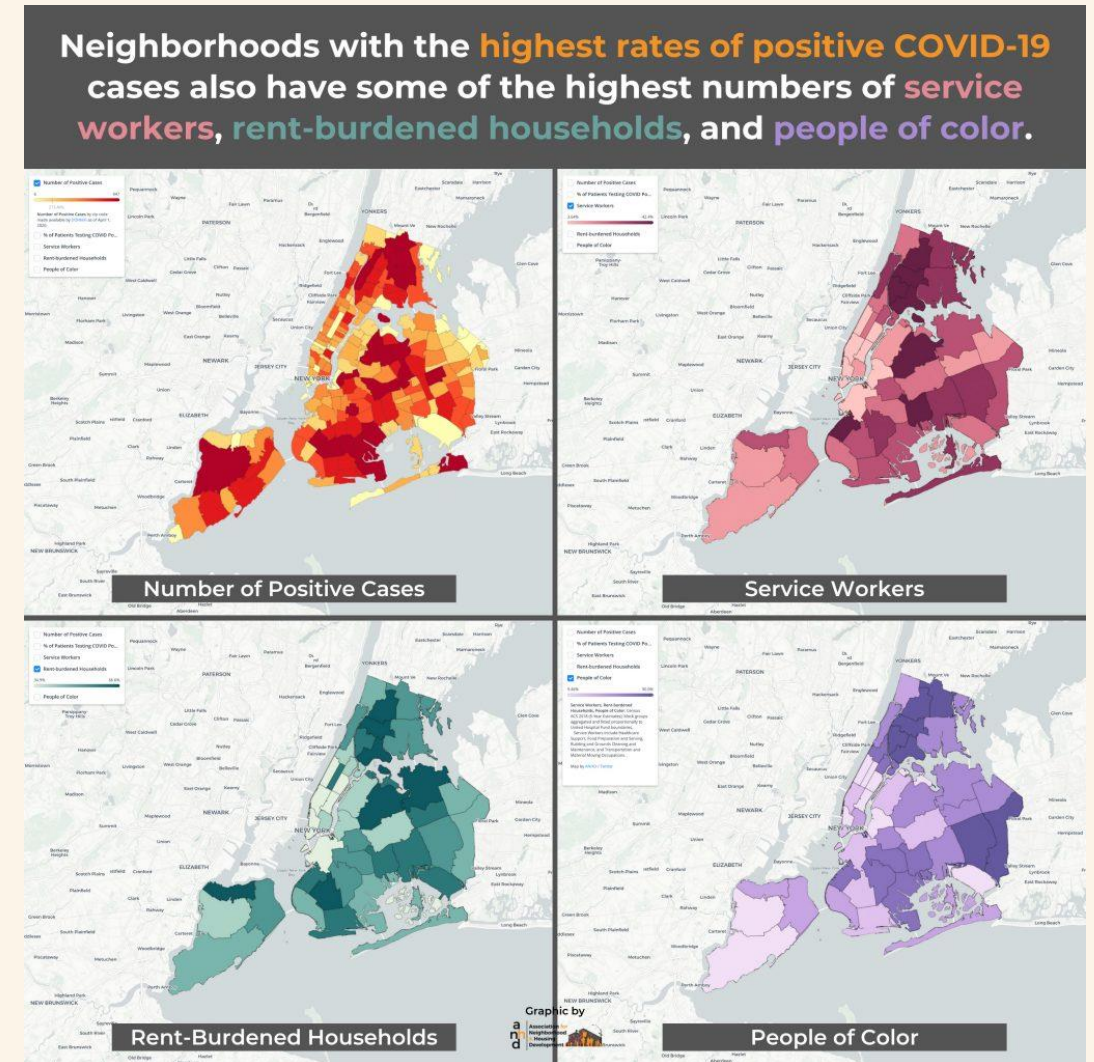


Map source: California Healthy Places Index (HPI), 2021; 2021 RRE Inventory
Note: See Technical Appendix for methodology, individual indicators, and additional sources.

https://lacountyparkneeds.org/wp-content/uploads/2023/03/PNA-Plus-ExecSum-ENG_Dec2022.pdf

Example: Racial Disparities and COVID-19 in New York City

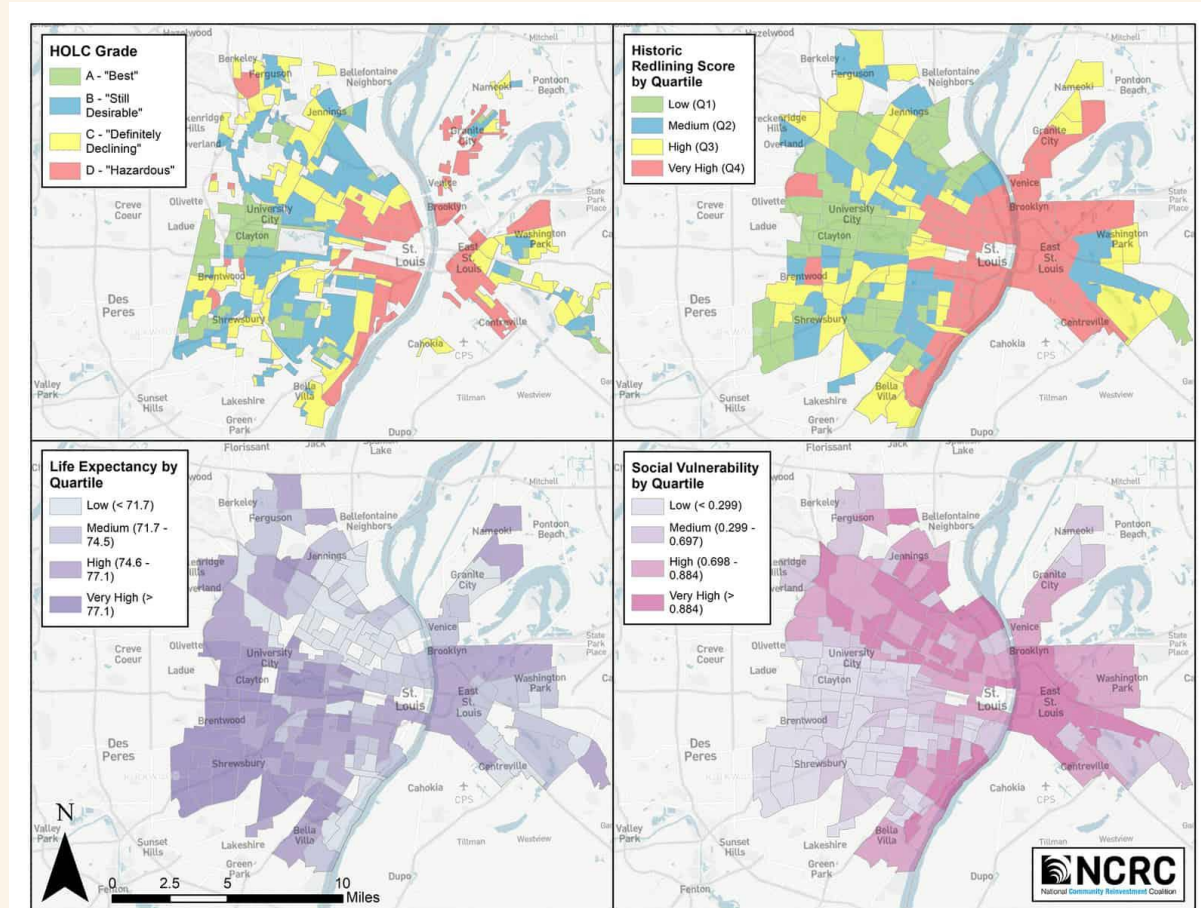
- Columbia Climate School's National Center of Disaster Preparedness shared this visualization of the disproportionate impact of COVID-19 on communities of color and working class
 - Illustrates the intersection of service work, race, housing insecurity, and illness



<https://ncdp.columbia.edu/ncdp-perspectives/racial-disparities-and-covid-19/>

Example: Impact of Redlining on Health in St. Louis, Missouri

- This map created by the National Community Reinvestment Coalition visualizes how historical housing discrimination and redlining in St. Louis impacts current life expectancy at birth and social vulnerability





Module 4: Equity-centered Community Engagement

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Community Voice, Engagement & Awareness

- Equity is advanced through community involvement in multiple levels of the Ecosystem.
- Transparency and expanding the methods of communication with the public, especially with communities and populations most impacted by poor health outcomes will support equity-grounded data collection and analysis, better solutions, and better community awareness and preparation to address health inequities.
- Community residents, smaller organizations, and neighborhood agencies all have a vital role in improving their community's health.



When you start with needs, you get programs. When you start with strengths, you get possibilities.

- Lupe Serrano
Casa de Esperanza

Coordination for equity is necessary, but we need to go further for transformational change



Parallel Play



Transformational change

Community-Driven Planning



San Diego, California

Young men from the United Women of East African Support Team in San Diego identifying priorities and leading solutions

Be equity-centered in community engagement:

Questions to ask:

- Who should be at the table?
- What voices and perspectives are missing as solutions are designed?
- How is each segment of the ecosystem connected to the discussion?
- How can those most impacted be engaged in refining the change in intervention is needed?

Thinking & Acting for Equity

What relationship with community is valuable beyond receiving services and answering surveys?

- What are steps to make community relationships equitable, mutually beneficial, stronger, and ongoing?
- How can this be measured through the three types of equity?

Activity: *Community Voice in Decision Making*

The following pictures show parks and green space in different communities:

- In what ways do they reflect different levels of resource?
- In what ways would the needs of the communities need to be explored in partnership with residents?
- How can community residents and partners come together to address concerns if any?
- What images show community engagement and voice in action?







Building Bridges 2.0

Health Equity and Racial Justice Resource

Supported by the W.K. Kellogg Foundation

For questions, please contact laquana@preventioninstitute.org



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Additional Resources:

- Centers for Disease Control and Prevention. (2023, April 6). *The Public Health Ecosystem: Before and After*. www.cdc.gov/ophdst/public-health-data-strategy/ph-ecosystem-before_after.html
- American Public Health Association. (2020, September 9). *10 Essential Public Health Services*. www.apha.org/what-is-public-health/10-essential-public-health-services



Additional Resources:

- [CDC: The Evidence Project Overview](#)
- [Measures Matter: Ensuring Equitable Implementation of Los Angeles County Measures M & A](#)



Additional Resources:

- [National Training Institute on Race and Equity](#)
- [Building Bridges: The Strategic Imperative for Advancing Health Equity and Racial Justice](#)
- [Allegories on race and racism | Camara Jones | TEDxEmory](#)



Additional Resources:

- Building Strategic Skills for Better Health: Chapter 20: Public Health's Essential Ingredient: Inclusive Community Engagement
- Building Strategic Skills for Better Health: TABLE 1: Fostering Trust to Activate Transformative Community Engagement



Additional Resources:

- [Race Forward](#)
- [Government Alliance on Race and Equity \(GARE\)](#)
- [Racial Equity Toolkit: An Opportunity to Operationalize Equity](#)



Additional Resources:

- [The Role of Culture in Basebuilding Community Organizing for Health, Justice, & Racial Equity — The Praxis Project](#)
- [Boosts & Blocks Timeline](#)
- [Three Faces of Power](#)