

Racial Healing and Health Equity: Promising Policies and Community-Driven Interventions (Part 2)



Community Leaders Forum: Call to Action

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EXECUTIVE SUMMARY

There are a range of systemic and structural challenges to achieving health equity in the US today. These challenges include population-wide issues such as lack of access to health care services, insufficient affordable housing, environmental hazards, a paucity of health education, and limitations in the built environment that make physical activity and social engagement more difficult. The experience of racial discrimination mechanisms such as microaggressions, blatancy, or unconscious bias may be less distinguishable than other social determinants of health, but it also functions as a major contributor to health inequities.

Health Equity Initiative, a member-driven nonprofit organization that engages across sectors and disciplines to advance health equity, held a Community Leaders Forum specifically to consider the intersection of racial healing and health equity and identify how community leaders and policymakers can support these aims from a program, practice, and policy perspective.

The forum, which took place on December 12, 2022, was Health Equity Initiative's second session on this theme. The first Forum on racial healing and health equity took place in November 2021 and proved to be so rich in content that it quickly became clear that one session wasn't sufficient to cover everything. Thus, the 2022 Forum built and expanded upon some of the key themes and insights from the earlier discussion.

The most recent forum focused on (1) the leaders' experience with racial healing and how this applies to health equity issues, (2) personal and professional values the leaders bring to their work and everyday life, and implications for racial healing, (3) lessons learned from community-driven interventions and strategies that aim to build or restore community trust, (4) community

perspectives on the impact of racism among specific groups, and opportunities for group-specific strategies and policies for racial healing, (5) a discussion on both key policies that have the potential of jeopardizing racial healing, as well as policies that may help promote racial healing, and (6) recommendations and sample steps toward racial healing and equity to be implemented at the policy level and within community settings.

This report includes a summary of the discussion from the December 2022 Forum and offers a call to action with specific recommendations to strengthen and advance racial healing and health equity in the US. Through this event and other Community Leaders forums, Health Equity Initiative puts a spotlight on the value of the expertise offered by community leaders and offers a platform for them to both express the needs and priorities of their communities and to share their knowledge and thinking to support the larger ecosystem.

Participants

Forum Participants/Panelists (in alphabetical order by last name)

Jesus Ayala, Director, South Providence Health Equity Zone

Von Gordon, Executive Director, The Alluvial Collective

Denise Morrow, Executive Director, BEMORE

Moderator:

Renata Schiavo, PhD, MA, CCL, Founder and Board President, Board of Directors, Health Equity Initiative

Call to Action and Policy Recommendations

This Call-to-Action highlights community interventions and practices that can foster racial healing and health equity in the U.S. and identifies approaches to policies that can further the equity movement. These recommendations were shared at Health Equity Initiative's Community Leaders Forum which took place on December 12, 2022. They are designed to assist policymakers, community leaders, funders, and other interested individuals and organizations who are seeking the tools and pathways to advance health equity and racial healing within their own communities and across the country. Health Equity Initiative is grateful to have the opportunity to amplify the voices of those on the front lines of the fight against racial discrimination and growing inequities and to share their wisdom with others.

1) To help build and restore trust in local institutions, community-based organizations can develop interventions that meet people where they are and engage in efforts to identify and serve those who are traditionally less visible in society.

Regarding meeting people where they are, community leaders expressed the benefit of venturing into the community to provide needed health services to build trust with those individuals who loathe going to a healthcare setting. One example was holding vaccination clinics in a bus parked by a popular supermarket in a Rhode Island town that was frequented by many of the Latino residents in the community. Another recommendation around building trust centered on the use of informal networks to connect with those who might not be as visible and help reduce the inequities they face. One example was of a network of Black women in Mississippi focused on community needs who were able to identify how the elders in the community didn't have sufficient access to water and to provide them with this resource. There was an acknowledgment that even simple solutions represented by these two examples can be highly effective.

2) The fight for greater equity requires an expansion of how we think about solidarity and organizing including broadening the tent with whom we form alliances, recognizing other marginalized groups who would benefit from

support, and focusing on unity over polarization.

Community leaders addressed how important it is to think beyond the Black-White binary as the lens through which people see race, and instead build solidarity among various groups who have faced challenges due to discrimination, including anti-immigrant bias. There was an exhortation to work more intentionally with those closest to the action in the battle for health equity from all different groups, including Native communities. Community leaders agreed that the goal was to develop a shared sense of justice and that getting there required locking arms across communities, lifting up more marginalized groups who lacked visibility, and finding apertures to transcend that which polarizes us in society.

3) There are policies in place that can promote or hinder health equity and racial healing and it is incumbent upon individuals and community-based organizations to identify what kinds of impacts policies may have on communities of color and advocate accordingly. Community leaders identified the myriad laws that restrict voting in states across the US as not only reducing political participation but also potentially jeopardizing racial healing and equity. Being aware of how elections are funded, how power is distributed, and the far-reaching consequences of enacted policies are important components in the fight for health equity and racial justice. One community leader's definition of

politics as “who gets what, when, where, and how,” underscores the point. The lack of codification of the Dreamers Act was also identified as something that is a destabilizing factor for young Dreamers who have struggled with their identity and sense of belonging.

4) To improve the likelihood that proposed and implemented policies can advance racial healing and health equity, it's beneficial to assist policymakers in developing an equity lens, and important to identify whether the actual application of enacted policies is equitable. Community leaders advocated for the use of storytelling to provide a view of the people behind the data sets and to build a new culture of leadership in our country that celebrates those stories. Community leaders and activists were encouraged to monitor how laws and policies are applied, recognizing that useful policies may be in place but if there is inconsistency in how they are applied, it can lead to real disparities in outcomes.

5) To further the fight for health equity and racial healing, key stakeholders need to build deeper alliances, better lift up the voices of community leaders to share their experiences, and support the efforts of those working every day to achieve the movement's goals. Community leaders singled out how funders are in a strong position to build deeper relationships with other funders and other organizations that have the capacity to support this critical work. They underscored the need to have future forums and other events for community leaders' voices to be heard, acknowledging how there's “nothing about us without us.” There was also a call out to community-based organizations to support their own workers and compensate them fairly for the work they do.

Participants

(In alphabetical order by last name)



Jesus Ayala

Jesus Ayala is a passionate Public Health Practitioner that understands Health Equity from a lens of resilience and civic responsibility. He is the Director of the South providence Health Equity Zone, a place-based Public Health Initiative. As a hurricane survivor and first-generation migrant, he sees Equity as a healing pathway to attend to the unmet needs of the growing sect of the population. He has a master's degree in Public Health from the University of Puerto Rico.



Von Gordon

Von is a native of Moorhead, MS, in Sunflower County. He is the Executive Director of the Alluvial Collective and first joined the organization to develop and coordinate youth programs as Youth Engagement Coordinator. He attended the University of Mississippi, where he was a student leader and helped organize the first Statewide Student Summit on Race. He served as a founding board member of the Winter Institute and the only student representative. Von believes in building deep relationships and creating transformation and movement towards belonging and justice for communities, organizations, and individuals.

He is a member of the W.K. Kellogg Foundation's Community Leadership Network. He serves on the board of directors of Operation Shoestring and supports the work of the Mississippi Afterschool Network. He also serves on the Community Advisory Councils of the University of Mississippi Medical Center and the Junior League of Jackson.

Von previously worked in leadership and business development in the food and beverage industries.

He and his family now reside in Jackson, Mississippi, stewards of Choctaw land.

Participants

(In alphabetical order by last name)



Denise Morrow

Dr. Denise Morrow serves as the Executive Director of BEMORE nonprofit operations. Denise is committed to improving quality of life. As project manager, she has established partnership agreements with municipalities and organizations surrounding health promotion, and to support HIV initiatives. Her research in health and education has afforded her participation as a roundtable contributor to congressional leadership on health reform; and a contributor role for the Governor initiated 21st Century Education Commission. Her leadership roles in Health and Human Services program administration, hospital and health center operations, financial services, and Professor of Health Management provide an intricate understanding of opportunities to achieve health equity.

Moderator



Renata Schiavo, PhD, MA, CCL

Renata Schiavo is the Founder and Board President of Health Equity Initiative. She is a passionate advocate for health equity and a committed voice on the importance of addressing and removing barriers that prevent people from leading healthy and productive lives. She has 20+ of experience working across sectors and disciplines to improve the health and wellbeing of vulnerable, marginalized and underserved populations, including communities of color, Indigenous and immigrant communities in the United States, and low-income groups, refugees, and patients from underserved areas in global settings. Renata is a Senior Lecturer at Columbia University Mailman School of Public Health, the Editor-in-Chief of the peer-reviewed *Journal of Communication in Healthcare: Strategies, Media and Engagement in Global Health*, and a Principal at Strategies for Equity and Communication Impact (SECI), a global consultancy. She has significant experience on health policy and community, patient, and citizen engagement and has written extensively on raising the influence of community voices on health, racial, and social equity.

Acknowledgements

Health Equity Initiative would like to thank everyone who made this forum possible, including our participants for their insight and commitment to health equity. Thank you all!

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Health Equity Initiative (HEI) is a member-driven nonprofit membership organization dedicated to build a global community that engages across sectors and disciplines to advance health equity. By bringing together and enlisting the efforts of the public and private sectors, professions and communities that have both a stake and an influence on social determinants of health, HEI advocates for improving conditions and achieving equity in health for all.

We focus on championing transformative change to advance health equity, supporting knowledge, engaging communities and leaders, and building capacity to address barriers that prevent people from leading a healthy and productive life.

Bridging Silos, Building ONE Community for Health Equity!
