Racial Healing and Health Equity: A Look at Promising Policies and Community-Driven Interventions

Community Leaders Forum: Call to Action

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We are grateful to Macy’s Inc. for their generous support and partnership on our Community Leaders Forums initiative, which aligns with Health Equity Initiative’s commitment to equitable community systems and to raising the influence of community voices on health, racial, and social equity issues. A heartfelt thank you to you all at Macy’s!
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EXECUTIVE SUMMARY

For many community leaders and community-based organizations, the relationship between racial inequity and health inequity has long been understood and acknowledged. But policy makers and the public continue to have more limited recognition of this intersection. The COVID-19 pandemic, with its disproportionate toll on the lives and livelihoods of people of color, did provide a window into racial health disparities for the general public and the media. But despite this spotlight, the larger frame of how our society’s health inequities have ties to racism and to existing systems of power and privilege has not been thoroughly interrogated.

One of the foundational elements to achieving greater global health equity is the elimination of racial inequities in our societies. Supporting communities of color and indigenous communities in accessing health care, educational and employment opportunities, economic participation, safety, and social standing, all create a stronger culture of health and equality.

But getting there requires work. There is the work of racial healing, a process that begins with recognizing and addressing the harms of racism, which have deepened racial and health inequities. Simultaneously, any population that embarks in the process of racial healing has to commit to changing policies, practices, and attitudes that prevent new harms from happening in the future.

To delve more deeply into questions of how to advance health equity and racial healing, Health Equity Initiative, a member-driven nonprofit membership organization, designed, organized, and hosted a discussion, as part of its Community Leaders Forum series, to develop recommendations for policy and practice from the point of view of community leaders whose work is centered on these issues.

The forum took place on November 18, 2021 and was designed to capture the varying perspectives of the participating Community Leaders on issues which included: 1) how racial healing can contribute to health equity; 2) how to maintain the spotlight on health and racial inequities in our communities including through the media and by policymakers; 3) the role of community leaders and community-based organizations in shaping policies and racial healing; and (4) some promising emerging practices or policies to promote racial healing.

The discussion highlighted possible solutions to further racial healing such as the shifting and shaping of the narrative around experiences of communities of color and Indigenous communities and helping policymakers use a racial equity lens when considering systems change.

Recommendations on reducing health inequities included recognizing that the community itself can best determine what kinds of solutions are most needed, and that effective approaches include those that are built upon the strengths and assets of the community members.

This report and call to action include a summary of the discussion from the Forum and highlights specific recommendations for policy change and community-driven interventions as grounded in the experience of the community leaders who participated.
Participants

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

Shannon Fleg, Co-Partnership Director, Native Health Initiative

Von Gordon, Co-Executive Director, Alluvial Collective

Denise Morrow, PhD, Executive Director, BE MORE

Moderator:

Renata Schiavo, PhD, MA, CCL, Founder and Board President, Board of Directors, Health Equity Initiative
Call to Action and Policy Recommendations

The call to action and policy recommendations described below aim to propose solutions for stakeholders who are interested in or engaged around issues of racial healing and health inequities. These recommendations emerged from a discussion on November 18, 2021, at Health Equity Initiative’s Community Leaders Forum featuring and reflect the organization’s commitment to help raise the influence of community voices on health equity. Recommendations are directed at policymakers, organizational leaders, grant-making organizations, and/or other leaders and organizations across professions and disciplines, who can affect much needed change and help address health, racial, and social inequities. Health Equity Initiative may continue to explore each of these themes in future events and resources.

1) **Engage in storytelling and sharing histories to shift the narrative on racial inequity and past harms** to inform the public, policymakers and the media. Storytelling, through its many forms, whether through story circles, testimony, public forums, or through the press, provides a space to share individual and community histories. Be intentional in creating the right spaces for people with varied backgrounds to feel comfortable coming forward to share their experiences and perspectives. Practice cultural humility and awareness when hearing people’s stories. Community-based organizations can use the stories and testimonies they hear to shape the focus of the work they do as part of their process of promoting racial healing and addressing health inequities.

2) **Seek every opportunity to educate people about the racial harms that communities of color and Indigenous people have experienced** to promote redress and encourage racial healing. This process requires calling attention to the through-line of social discrimination, bias, and cultural destructiveness that communities of color and Indigenous communities have experienced throughout history. It also includes educating people on how the creation of wealth and freedom for some has historically come at the expense of others, and that perceptions and experiences relating to quality-of-life issues, such as safety and policing, are not the same across all communities. Continually exposing people to the often-untold truths of history is central to the fight for racial equity.

3) **Recognize that systems change is about changing the individuals who actually run the systems and provide spaces for them** to see how policies have created racial and health inequities. Creating opportunities for policymakers and the media to use a racial equity lens when considering an issue or policy will broaden their scope of understanding. This requires finding avenues to intersect with these individuals and sharing recommendations both for policies that will aid in racial healing and changes to discriminatory practices to reduce health and racial inequities.

4) **Invest in connecting people and strengthening the health and racial equity movement**, as interdisciplinary connections are key to addressing health inequities and promoting racial healing. These may include forums as this one, and/or other venues and spaces to give voice to people from multiple fields and highlight the connection between mental and physical health and how these are influenced by social and political factors.
5) **Use approaches like Community Asset Mapping that utilize the strengths and assets of the community** when designing health equity interventions and solutions. Approaches like this focus on amplifying the strengths of individuals or communities to improve the health and wellness of the community. Determining those strengths requires building trust within a community, including identifying and working with the gatekeepers and leaders, but also involving community members in designing and developing any solutions, programs or activities. The goal—whether it relates to creating a health equity solution, evaluating a project, or doing community-based research—is to empower members of the community to participate and shape the process and outcomes.

6) **Work within communities to develop health equity solutions** instead of imposing them from behind a desk. Practice cultural humility to learn about what is important to the community members with whom you are working, and to determine how best to support them in achieving physical, emotional, mental, social, and spiritual wellness. Be open to the expertise that comes from community members regardless of whether they are considered leaders or have other titles and continue to create spaces for those people to engage in ways that allow their stories to come to life.
Participants
(In alphabetical order by last name)

Shannon Fleg

Shannon Fleg is Dine’ of the Zuni-Edgewater Clan born for Towering House Clan, originally from Moenave, Arizona. She is a mother of four beautiful children and wife. She has been a public health educator, facilitator, program planner/evaluator and cultural specialist for more than 20 years in the areas of health equity, health disparities, and issues/concerns effecting Native American Indian/Indigenous populations. Shannon serves as Co-Partnership Director for the Native Health Initiative, a love-funded organization addressing health inequities in the Southwest. She resides with her family in Albuquerque, New Mexico.

Von Gordon

Von is a native of Moorhead, MS, in Sunflower County. He joined the Institute 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, PhD
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.
Health Equity Initiative would like to thank everyone who made this forum possible. First, thank you to our three wonderful panelists and Renata Schiavo in moderating and guiding the discussion. Finally, thank you to our board of directors for their support of this project, Radhika Ramesh for her excellent project coordination skills, and Paige Hammond for editing the Forum’s transcript and other work on this document. 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!