

Youth Engagement and Health Equity: Lessons Learned and Community-Driven Strategies



Community Leaders Forum: Report and Call to Action





Suggested Citation: Schiavo, R., Butler, A, Marcus, R., Patel, S., Ramesh, R., Hammond, P. and Health Equity Initiative (2023). Youth Engagement and Health Equity: Lessons Learned and Community-Driven Strategies. A Community Leaders Forum: Report and Call to Action.New York, NY: Health Equity Initiative. Forum Discussion on December 6, 2022. Available at: (https://www.healthequityinitiative.org/reports.html)

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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

While young people are often at the front lines in grappling with health, social, and racial inequities in their communities, their voices are often seen as peripheral to the discourse on community needs, values, and priorities. However, their lived realities and perspectives, especially those from communities that have been historically marginalized or under-resourced, provide fresh insights into the real-world nuances and contexts that are important to build a future that is truly more inclusive.

Beyond laying the foundation for community-driven health equity solutions, youth engagement is also beneficial for the young people involved. It gives them the agency to make change happen, teaches them to communicate effectively and with empathy and stand up for others, provides opportunities for them to become more invested in the process and outcomes, and ultimately helps young people become active participants in civic discourse and citizenry.

It is therefore incumbent upon everyone who works to advance health, racial and social equity to seek out and value young people's participation, and to look at young leaders as competent community organizers.

To capture the perspectives of youth advocacy organizations, and community and youth leaders, and examine how youth engagement can drive health equity, Health Equity Initiative, a member-driven nonprofit membership organization, designed, organized, and hosted a discussion as part of its Community Leaders Forum series. The forum took place on December 6, 2022, and focused on (1) the leaders' experience with youth engagement and how this applied to health equity issues, (2) how young community leaders can contribute to policy and intervention design for health equity, (3) examples of engagement strategies utilized within participants' organizations

or youth groups and schools, (4) key health equity topics of concern amongst young people and young leaders, (5) most promising practices and policies to promote youth engagement and contribute to health equity, and (6) ideas for future policy solutions that may encourage youth engagement and help advance health equity.

This discussion highlighted strategies to encourage meaningful and lasting youth engagement on health equity and social justice issues, discussed barriers that need to be addressed to truly engage young people and value their perspectives, identified prominent health equity issues that drive youth engagement, and provided recommendations to mainstreaming youth engagement in health and social systems via policy solutions and suitable interventions.

Sample recommendations that emerged from the forum include the importance of positioning youth at the forefront of the health equity movement; empowering them to make their voices heard by strengthening their stills for advocacy and participation; involving diverse voices to improve youth representations across a variety of backgrounds and experiences, especially from communities that have been historically marginalized or experience other kind of disadvantage; encouraging shared decision-making; committing to building deep and trusting relationships with youth; and providing opportunities, information, and training for youth to engage in civic discourse. Specific frameworks for youth engagement and lessons learned were also discussed.

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)

Armonté Butler, Associate Director of LGBTQ Health & Rights, Advocates for Youth

Becki Marcus, Assistant Program Officer, Local Initiatives Support Corporation

Saahil Patel, BS/MD Medical Student, The College of New Jersey/New Jersey Medical School

Moderator:

Renata Schiavo, PhD, MA, CCL, 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 youth engagement in the health equity movement. These recommendations emerged from a discussion on December 6, 2022, at Health Equity Initiative's Community Leaders Forum, 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) Empower young people to make their voices heard by training them to speak out to their elected officials, school boards, and others in positions of power. Encourage them to eventually serve their communities directly by running for office themselves or holding other policy-making positions.
- 2) Position young voices at the forefront of the health equity movement and begin by involving them in brainstorming about collective future vision for their communities; identifying causes, needs and priorities to be addressed; developing ideas and proposals, connecting them with city leaders, organizations, agencies, and other stakeholders, and giving them the platform to bring their visions to fruition.
- 3) Avoid tokenizing young people by meaningfully involving a multitude of young voices and creating enduring intergenerational partnerships for lasting impact on health, racial, and social equity. In this context, genuine youth engagement means ensuring a diversity of voices, especially those from communities that have been marginalized or underserved, as these young people often have the lived experience to understand the need for health equity. It also means to not be dismissive of young people's perspectives, but rather welcoming them and committing to building a relationship based on mutual trust.

- 4) Strive for shared decision-making to make sure youth share agency or power with adults. Existing frameworks, such as Roger Hart's Ladder of Participation (1), can be used to strengthen youth engagement models and processes, and help young people's develop competence and confidence. This may also help deepen youth ownership in transforming future environments.
- 5) Take the time to cultivate relationships that are close and transformational, and not merely transactional, with and between young people. For youth to feel closer to their communities and to each other, to trust adults, and ultimately step into the roles of community builders and leaders, it is important to cultivate rapport and openness, and value their wellness, mental health and social connectedness. Mentorship and career support can also help support young people's future path while they serve their communities.
- 6) Recognize the health and equity issues that youth advocates are passionate about and that motivate them to break through surrounding stigma and silence. Apart from being attentive to gender, racism and poverty issues, example of topics that galvanize young people because of their lived experiences include gun violence, climate change, access to abortion, menstrual health, confidentiality in healthcare, medically accurate sex education, and LGBTQI+ rights.



- 7) Utilize well-established community-driven approaches like participatory budgeting to engage youth in civic discourse and decision-making. For example, young people can connect with each other as well as with city planners, local organizations and other agencies, and share ideas and proposals on how to allocate funds in their communities and address key community needs and priorities.
- 8) Support opportunities for youth to engage in local governance and politics and provide the information and training necessary for civic engagement, including civic literacy training, access to local policymakers, city council members, and other representatives. Encourage them to reach out to legislators to model inclusive and equitable policies locally.



Forum Discussion

Moderator: Renata Schiavo, PhD, MA, CCL

Forum Participants/Panelists: Armonté Butler, Becki Marcus, Saahil Patel

Renata Schiavo: Welcome, everyone. It's great to see you all here today. Thank you, Armonté, Becki, and Saahil for being here at this very busy time. Thank you for the work you do to give a voice to young advocates and leaders. Thank you also to Macy's Inc. and their Office of Diversity and Inclusion for their support of Health Equity Initiative's 2022 Community Leaders Forum, a series we launched in 2020. Macy's also recently launched a major corporate philanthropy initiative, which is called Mission Every One.

I'm Renata Schiavo and serve on the board of directors of Health Equity Initiative as the organization's founder and board president. As many of you already know, Health Equity Initiative is a member-driven nonprofit membership organization, which is dedicated to building a global community and bridging silos across different professions, geographical communities, and disciplines in support of health equity. We accomplish our mission through several action areas. One is community building, via membership and volunteerism. The other is education and advocacy via resources and efforts to give a voice to community leaders and professionals across sectors. The third is professional development, capacity building, and training via resources and events to empower other organizations and communities to integrate a health equity lens in their own work. The last area is partnerships, as we believe that in the health equity movement, we are always stronger together.

We strongly feel that communities and their leaders are the real experts in community needs, values, and priorities. They should inform everything we do to advance health, racial, and social equity. Today's Community Leaders Forum is another milestone in our advocacy and capacity-building efforts, and we look forward to hearing from everyone. Our topic today, Youth Engagement and Health Equity: Lessons Learned and Community-Driven Strategies,

reflects Health Equity Initiative's commitment to supporting and building capacity for youth leaders, so that their voices can become increasingly prominent in the health equity movement.

For the past 11 years, Health Equity Initiative has worked to integrate youth voices in developing ideas and solutions to advance health equity. We have provided opportunities for leadership training. We established an internship program for young people and held several dedicated events and resources. We celebrate the voices of young people and provide a platform for their ideas within our blog. We have also encouraged them to take the lead in the development of many of our youth-led resources. For example, our college toolkit for students and young leaders who want to start conversations on their college campuses and communities about health equity was developed by students, for students. We also integrated youth engagement as a key topic in past summits and workshops. Yet we believe that the health equity movement as a whole needs a more systematic approach to giving voice to young leaders in the movement and beyond.

While awareness of health, racial, and social inequities has increased among younger generations since the onset of the pandemic, we still feel that youth-led organizations and student groups that are dedicated to health equity are less common than for other human rights causes. When I say youth-led groups and organizations for health equity, I mean those groups and organizations that focus on different social and political determinants of health across multiple health and social areas, groups, populations, and communities. We can definitely do more. We can do better to prepare the next generation of leaders, so they can take charge of the health equity movement as many of them are already doing in our communities, organizations, and cities.



We are here today to give voice to your ideas and promote youth engagement on health equity issues. The forum aims to provide context for future policies and solutions that would motivate younger generations to become engaged and take the lead. We want these policies and interventions to be informed by the experience of our panelists, by the work you all do to engage young leaders and young people from the communities you serve or that you represent. We look forward to learning from you all, and thank you again for being here, Armonté, Becki, and Saahil.

I want to start with our first question and also give you all an opportunity to introduce yourself and your work. When you introduce yourself, please also let us know about the one thing that makes you passionate about health equity, especially about promoting the importance of youth engagement on health equity topics.

Becki Marcus: It's very nice to meet you. Thank you again to Health Equity Initiative for inviting us to speak on this panel. I'm really excited to hear from the other panelists as well. My name is Becki Marcus. I use she/her pronouns. I work with Local Initiatives Support Corporation in Rhode Island. We are really thrilled to be the backbone agency of the Pawtucket Central Falls Health Equity Zone.

As a brief background, the Health Equity Zone initiative was started by the Rhode Island Department of Health to create place-based community-driven collaboratives throughout Rhode Island that work to advance health equity. I'll get more into that in a moment. In our collaborative, in the two small cities of Pawtucket and Central Falls, we know that youth leadership and youth voices are really key to advancing health equity. We've been really thrilled to be able to create platforms for the youth to take agency and bring some of their visions for what health equity should look like to fruition in these two cities.

Saahil Patel: Hi, I can go next. Hello, everyone! It's a pleasure to be here, and I'm really excited to hear from everyone else as well. My name is Saahil Patel. I am a seven-year BS/MD medical student. I'm currently finishing up my studies in biology and public health at The College of New Jersey. Then, starting next summer, I'll be matriculating into New

Jersey Medical School to pursue my MD to hopefully, in the future, begin practicing medicine.

What makes me really passionate about health equity, especially from the lens of youth engagement, is that being a young person myself, I see the duality of medicine. There is the traditional side that we often think of, which focuses on genetics and the medications and procedures we can give patients. But, there's also the aspect of medicine that often goes overlooked, that people exist within a social framework of determinants that ultimately does dictate and affect their health. I think on this aspect specifically, the perspective of young people can really push the narrative forward so that we can truly promote health.

Armonté Butler: Hi, everyone. I'm excited to be here as well. I'm Armonté Butler. I use he/him/his pronouns. I'm the associate director of LGBTQ+ Health and Rights at Advocates for Youth. We're a national nonprofit in DC that supports young people in leading sexual and reproductive health campaigns in their communities at the local, state, and federal levels. Outside of directly training youth, we have various programs that work with youth-serving organizations and professions in increasing their support for young people as well. In addition, I'm currently a Master of Public Health candidate at the Johns Hopkins Bloomberg School of Public Health studying adolescent health and health equity.

What's most exciting about health equity is that this is something for me that is tangible, measurable, and realistic. Health equity doesn't exist without Black people. It doesn't exist without Latinx folks. It doesn't exist without folks who don't have adequate insurance. It's always about making sure that those folks are counted on, centered, and not tokenized.

Renata Schiavo: That's great. Thank you all for a wonderful introduction. I wanted to ask you what brought you here today. I am very happy that Armonté said that health equity is tangible, and it's an achievable goal. This is what we also believe here at Health Equity Initiative. But what brought you here today? How do you relate to this topic, either professionally or personally, or as related to what you see in the communities that you attend, serve, or represent? Please speak about any work



or direct experience with youth engagement and how this applies to health equity issues.

Becki Marcus: I'm happy to start again. One thing that makes me really excited about this work, is how the Health Equity Zone model turns the traditional model of how we think of public health on its head. Instead of the state dictating how we spend public health resources in communities, the goal of this model is to position community voices at the forefront and say, "What are our priorities when it comes to health? What are the root causes and social determinants that matter most in our community, and how can we shape systems to address our needs?" On a personal level, it has been so incredible to see what the youth can do once you give them the platform to shape systems and connect them to organizations and agencies. They can see that there's a world ready to support their visions. We see how this unleashes the passion and determination of young people. Their perseverance for this work is so exciting when they're given that platform. That's something that really inspires me and makes me feel passionate - to see young people take agency, and lead projects and efforts in their own communities.

Saahil Patel: Going off what Becki just mentioned, what brings me here today is just the incredible inspiration that I get from seeing all of these amazing young leaders out there doing this work on the ground. I think it really speaks to the entire youth that this is a very passionate and informed generation, perhaps more so than any other generation in the past, considering all the advancements we've seen in technology.

There's just this incredible energy amongst young people because for so long they've been sidelined and maybe their viewpoints and what they have to offer haven't necessarily been considered or respected as much. But we're now seeing that these young leaders are developing, coming to the forefront of all these conversations we're having, and using their potential to completely change the narrative in a way we haven't seen. That's what really makes me excited about the future.

Renata Schiavo: Thank you very much. Armonté, do you want to add something about your own personal and professional experience, or any stories

that brought you here today, or that you want to add to this conversation? Thank you.

Armonté Butler: Yes. I think that as everyone notes, it's exciting to see young people call attention to what they want and what their communities need. At Advocates for Youth, we're an organization that really believes that. I'm thankful to be part of a community where we're drawing up or imagining a world with young people, where they're celebrated for who they are, and where they're afforded honest, affirming, and inclusive sex ed, and access to confidential universal sexual health services.

Renata Schiavo: Great! Thank you all! I encourage all participants to use storytelling as a tool in answering questions because this is also what we do at Health Equity Initiative. We tell stories to bring to life people's experiences and to make sure other people can relate to those experiences. I would like to ask you to think of the current realities that we all face. We know that awareness of health inequities has increased during the pandemic. Yet we also feel that health equity is gradually coming out of the news cycle and that we have to continue to work to keep the momentum going, be diligent in raising our voices, and in promoting health, racial, and social equity in our communities and amongst young generations.

I would like you to reflect on this current reality, the environment in which we work and live, and raise our children or care for our parents. Please share your vision on how youth engagement can contribute to advancing health equity, including your opinion on how young community leaders can effectively contribute to policy and intervention design for health equity, which is what we advocate for at Health Equity Initiative.

Armonté Butler: At Advocates for Youth, we have several core youth activist cohorts in addition to expanded networks of young people. Young people are organizing for access to abortion, ending sexual and dating violence in their schools, HIV decriminalization, honest sex education, contraceptive access, and safe and affirming environments. Right now, we're seeing so many attacks on young people. There are attacks on the young people living with HIV that we work with. They're still being criminalized. The Pennsylvania



legislature recently introduced and passed legislation, which was signed by the Governor, that needlessly criminalizes conduct that cannot result in the transmission of HIV. Using this bill as an example, young people are continuing to fight to be affirmed and validated in a climate where dishonesty and misinformed information, like how HIV is transmitted, is normalized.

Our role is to provide young people with the tools and training to speak out to their legislators, to speak out to their school boards, to speak out to folks that are holding power and say, this bill, legislation, or policy has a severe impact on my health and wellbeing, here is how it shows up in my life and in my community.

Due to the impact of these harmful proposed and passed policies, we're also working with young people to consider running for office. I think that's been probably the most helpful part of say, you don't like that law, you don't like that legislation, well you can actually run for office, change it, and make policy that you know your community needs and deserves.

Renata Schiavo: Thank you. This is very powerful, and I really love the idea of youth leaders running for office, of encouraging more young people to run for office because the future of our world is really in the young people's hands. Anyone else?

Saahil Patel: Yes, I do have to say that this is something I'm particularly very passionate about, just civic engagement as a whole. As I said before, there's this whole generation of incredibly passionate and informed young people, but paradoxically when it comes time to vote, they may not take that final step to go ahead and cast the ballot. The numbers show that young people do not vote in high numbers. In a sense, this is quite disheartening because there are many things that can be done on a grassroots level, but certain things just need to be written into law or changed in law. Unless we take that final step to cast our ballot and make our voice heard in the democratic system that we operate in, it's very difficult to effectuate the change that we want to see. Now, one potential explanation for this is that it's very easy to become disempowered when you're inundated with all the information about what's going on in the world. You

open your phone and you see the news notifications, and one day it's about gun violence. Then, the next day it's about climate change. The following day is troubling economic news. This reality forces you to think as though you don't have any power because there are just so many issues going on that might affect young people. To that end, I would say, especially for engaging the youth, the focus perhaps should be to instead find that one thing that gets you going, that issue that you can focus on, that area you can prioritize, and that you can try to change in your own way. Then, when you coalesce with all the other groups that are out there, you can lead to system-wide change. Focus on that one thing you're passionate about without necessarily feeling like you must do everything.

Becki Marcus: Definitely. I would like to answer this question through two lenses. For starters, as I mentioned, the health equity zone is a very placebased initiative. It's bringing youth together to focus on their communities. I also want to clarify that the youth were involved every step of the way in the creation of this group. For example, in bringing together the agencies that were going to inform the funding. If they wanted specific resources and training, the youth are there creating the curriculum or the priorities and facilitating every session. We start off every 10-week session of the youth equity leaders with dreaming. We ask the youth, or the youth ask each other, rather, because they're the ones facilitating, "What is your dream for what all young people in Pawtucket and Central Falls should experience, should feel? What should life be like?" We really spend time in that, reflecting with our eyes closed, drawing, writing, and then we have a visual brainstorm where we put out our dream. We can work on the problem so much, but sometimes we can get reactive if we're not actually working towards a collective dream. So, we start there, and then we do a similar brainstorming exercise around the question, "What do you want to change in your community? What are the big issues you're seeing?"

We've only had two cycles of the youth equity leaders thus far. What we've seen in both cycles were issues rising to the top of homelessness, violence in the community, gun violence, and drug use, as well as youth having a platform to make their voices heard. It's out of those issues that youth then shape their direct-action projects. For instance,



when homelessness was really elevated, the youth organized. Over the two cycles, they've cooked a total of 300 meals and passed them out to folks who are homeless in the community. When it comes to civic engagement, they have been incredible leaders of a participatory budgeting process through the health equity zone. I'll explain that briefly and I'll probably loop back to it in subsequent answers. Participatory budgeting is a process where communities directly decide how to spend funds in their community. There are different stages of collecting ideas, developing proposals from the ideas, and voting. And so, the young people have been incredible with collecting ideas from the community and hosting open town hall forums, where the youth designed and facilitated a town hall for their participatory budgeting project. This project is called Together We Can, or Unidos Podemos. So, the two cities have \$385,000 to invest in health equity.

The youth had an event where they attracted over 80 total young people. It was the Together We Can Town Hall and a basketball tournament. So the youth combined both, which was great, especially because sometimes folks who identify as boys or young men are underrepresented in health equity work. It was really great to see that focus, and we were able to bring in a lot of boys of color and teens, and the youth shared ideas. They wanted to see more mental health resources, more resources for folks who are homeless, and more after-school programs and rec centers. It was very uplifting to see them building more platforms to invite other young people into civic engagement opportunities.

Renata Schiavo: Thank you very much, Becki. This was very interesting and congratulations on the work that you are all doing. I also want to bring my question back to the personal and professional values that inspire this work. You mentioned so many important issues in your answers - from civic engagement to homelessness to LGBTQI+ rights. We know that some of those rights have been under attack lately, so having this value-based approach is very important in addressing inequities and policy setbacks. So, it would be interesting to discuss the values that you bring to this work, or that your organization brings to this work.

Armonté Butler: Advocates for Youth envisions a

society in which all young people are valued, respected, and treated with dignity; sexuality is accepted as a healthy part of being human; and youth sexual development is normalized and embraced. In such a world, all youth and young adults are celebrated for who they are and afforded honest, affirming, inclusive sex education; access to confidential, universal sexual health services; and the economic, educational, and social power to exercise their bodily autonomy and make informed decisions regarding their health and well-being.

Advocates' role is to further nurture and support this pipeline of diverse youth leaders and to partner with them and their adult allies to boldly advocate for changes in the cultural and political environment, and to champion program strategies that improve youth sexual health. To that end, Advocates will also work to build the capacity of youth-serving professionals to implement evidence- and rights-based sexual health strategies and to engage young people as partners in their work.

Becki Marcus: I would say a core value that I hold is that those closest to the problem are closest to the solution. I first felt the power of that truth in work related to folks who have been impacted by the justice system, and really seeing how people directly impacted by this system have the knowledge, tools, and connections in their community to break cycles that are creating inequities in quality-of-life outcomes and health outcomes. I think, especially when we look at the legal system, we can really see the impacts of systemic racism at play. We can see how these systems impact people's lives and we can really see how it's the folks directly impacted who are going to harness the assets in their communities and really advance us closer to health equity.

Saahil Patel: I would definitely have to agree with that. I think there's this tendency that when it comes to youth engagement, oftentimes it's just picking out the cream of the crop and those individuals who may be in a privileged position to be able to pursue that leadership role, but you're often overlooking the people who have the lived experience and the understanding to really know what it means to need health equity because they're coming from that background. It contributes to that whole intersectional idea of considering one's race,



gender, ethnicity, and zip code because where you're born and raised is going to be determinative of your health and the experiences that you have. Focusing on those underserved, marginalized voices is important when we talk about youth engagement and health equity. Adding to that, it is important to tell young people that they matter and that they deserve a seat at the table.

The common talking point is to say you're too young, you don't know what you're talking about, stay in school, get more education and then come back and tell us what you think; however, that's quite dismissive and it doesn't build that bond of trust that would encourage young people to speak up and be a part of these initiatives. They have something to offer. It's a different perspective, sure, and it might not be the one that meshes well with the status quo, but being dismissive is not going to contribute to the narrative in any way other than serving to push young people down.

Renata Schiavo: Thank you very much, everyone. At Health Equity Initiative one of our values is to recognize the expert in everyone. We think that the people who are experiencing disadvantage or marginalization because of discriminatory policies and norms in our society are the most important to engage and to bring around the table to develop suitable solutions. You alluded already to some strategies and barriers to overcome. For example, Saahil spoke about the dismissing tone that some people, unfortunately, use in referring to youth engagement efforts. So, what are some examples of strategies that you have implemented both in youth leadership settings and/or in working with young adults on health equity and social justice issues? What are some of the lessons learned, implications for health equity, and your own recommendations? How do we move forward, and how do we implement those strategies and skills at scale? What are some of the actions or interventions that you know do not work and should not be implemented in the future?

Armonté Butler: I think one major thing that we've learned and what we've been doing with several youth-serving organizations is empowering them, compensating them, and compensating young people in our communities to develop and create these youth advisory boards. At Advocates for

Youth, we clearly do work for youth in partnership with them. This also includes having young people on our board of directors. It does not make sense to continue to talk about these issues and not include them on the board and have their time and expertise. I think one thing is that for nonprofits that are agencies, looking at and thinking about your boards, and asking "Are young people included?" And we don't have one young person, there are multiple because we recognize and name that tokenism is harmful.

Another thing we do is work with several agencies to develop the youth-adult partnership framework, which has them think about things like power. We are not shy of informing folks that adults are leading these programs, they're running these programs, and they are paid salaries, but it also matters to name that power and recognize it and consider, "How do you make the work at these agencies equitable so that young people also have some shared power in decision making?" That's where policies and programs should be considered. A major thing that we also do is use Hart's Ladder to really look at the tiers of youth participation, which goes from number one manipulation to number eight, young people initiated, shared decisions with adults, and that's a really helpful framework for all of our work, and all of our programs. Really thinking about, where are young people at in this agency? Are they being manipulated, decorated, or tokenized, or are they being adult-initiated, involved in shared decision-making, or actively participating? That's the most helpful tool that we use thinking of equity, of where young people are in your organization or at your team level.

Renata Schiavo: Thank you. That's very powerful. Thank you very much.

Saahil Patel: I could speak to one effective engagement strategy that I've personally experienced, and that's the role of mentorship. Specifically, working on a person-to-person level with a student or a young person can serve to show them the ropes and give them that understanding of how they can take their passion, ideas, and energy and implement them into the real world. Otherwise, when you're just coming into this arena as a young person, it could be pretty complicated and difficult to bring about the change that you want to see or



know how to become active and engaged in the first place. Moreover, we really do stand on the shoulders of everyone who's come before us, so when you have that mentorship, working with someone who can transfer their lived experience and knowledge to you, it really builds that bond of trust that I alluded to before and ensures that someone has the skill set needed to effectuate whatever change they wish to see.

I experienced this in the past when I served as an EMT. To become an EMT, you have to undergo rigorous technical training. You study from a textbook, take quizzes and assessments, and work on your hands-on skills. But, when you go into the real world and actually implement and use the things that you learned, it doesn't transfer exactly. You need someone who's going to be there with you to guide you through the entire process. In my ambulance corps, I was paired with a trained, seasoned, experienced crew chief who taught me nearly everything, and it allowed me to view my community from an entirely different perspective. For example, that apartment building over there houses a lot of elderly people, so sometimes you get calls for them because they fall down or they may not have the oxygen that they need in their tank, or maybe they're just feeling lonely and sometimes they call emergency services for that. You don't learn that just from a textbook; you learn that from getting the advice of someone more experienced, who can show you what they have seen and learned, and that can inform your outlook. That mentorship really allowed me to become a part of my community and see my role as an EMT from a completely different perspective.

Becki Marcus: Yes, I'm really excited about Harts Ladder, so thank you, Armonté, for sharing that resource. It's great to have frameworks and language to keep us accountable for our goals and show us what we're looking for. One other thing I wanted to add is, I think we learned about taking the time to cultivate transformational and not transactional relationships. I remember in one of our first cohorts, we were in the brainstorming phase, thinking about, "What are we going to do in the community? Let's map it out. Let's do this stuff." And then one of our youth leaders said, "I think we need to put all of this on pause and just play games. We're in the YMCA. Let's play capture the flag." This

reminded us that kids also need time to think about their own lives, and what they want to do when they grow up. Questions that for a lot of our youth, no one's really taken much time to sit down with them and have these conversations.

Also, the youth should feel comfortable with each other, and with stepping into their own leadership role. There's so much work we can do, and how do we find that balance of finding spaces for the youth to get to know each other? I think sometimes that happens through a really healthy mix of fun. Holding activities that are purely for bonding and fun. Things that are direct service but are also really great bonding activities like cooking 150 meals and passing them out to folks in your community. We've seen that this has been great for kids, who then feel like they were able to make an impact that day. In turn, they are closer to their communities and to each other.

And also, advocacy. Having bigger visions for systems change. I would also highlight the participatory budgeting work for future policy. Showing youth that they have a voice in direct investments in their own community is huge, and I think it's something that can apply in so many institutions and agencies. The investments we make and how we invest should be in the hands of the communities themselves. Youth are the ones who are going to be impacted the longest by the investments we make today. They are the voices and visions of tomorrow, so they should be involved, and they should be leading the way.

Renata Schiavo: Thank you very much. At Health Equity Initiative, we view community and youth engagement as something that ultimately should benefit the community and not the organizations that seek to engage community members. Based on the models that all of you discussed, whether it's the Hart's Ladder or the dream brainstorm model that Becki talked about or the importance of not talking down to youth that Saahil mentioned, I would like our HEI community to have a sense of some of the issues that you have seen to be prominent in young people's minds. What are some of the issues that you feel young people may want to become engaged with? Of course, any kind of engagement should reflect their priorities, needs, and values because we definitely want to empower young



people to come up with their own ideas. Within this context, what are some of the key issues you have seen mobilizing young people, and where do you see the youth movement going when it comes to health equity?

Becki Marcus: In some ways, the initiatives that the youth have chosen to focus on are thoughtful, nuanced, and surprising. They organized a hygiene and menstrual product supplies drive out of really caring about gender equity, and how that intersects with health equity. I am so moved by the nuance of attention to these intersections of gender, poverty, and race, and what it takes to martial resources, distribute them, and address stigmatization. Because we don't like to talk about the fact that some folks don't have access to the menstrual resources that they need. That is one thing that is amazing about working with young people - that when it comes to breaking through stigmas and breaking through silences, we can see our young people are really great at that.

Additionally, they have been really passionate about addressing gun violence. It's such a huge issue, and I think it's one that in the cycles of our youth equity leaders, we're constantly mulling over. How does one get at the root causes of gun violence? What kinds of resources would support youth to prevent involvement early on? We're looking at that issue both in the youth group and in our youth engagement task force, which also brings together adult partners. We're focusing on increasing graduation rates in Pawtucket and Central Falls. I think the strategies and our action plan to impact graduation rates can very well intersect with some of those strategies one might take to prevent gun violence as well, and we're really thinking about those upstream preventive measures. I would say that those are two issues that the youth have been excited about, and I think that there's a lot of work to be done.

Renata Schiavo: These are definitely very important health equity issues. On gun violence.... as we know, access to guns is the real issue that then translates into gun violence. I feel that having access to guns contributes to a number of health, racial, and social inequities in our communities. Does anyone want to add anything else to this question?

Saahil Patel: Yes, absolutely. I'll speak to gun violence because that's what I was going to say originally as well. I think the reason why young people especially get so motivated when it comes to trying to eradicate gun violence is that we have the lived experiences that perhaps really no other generation has when it comes to seeing this happen in our safe places, especially in schools. I can recall all of the lockdown drills I've had to go through, all of the active shooter drills. That leaves a memory that stays with you the entire time. That experience of cowering in the corner of the room and hearing the door banging sticks. Just that experience is something that motivates you in the future, and we see that in the data as well with what topics and issues motivate young people to get out and vote. Oftentimes it is gun violence because it's that one thing that we can relate to and think of. I was guite young when Sandy Hook happened, and it's something that I still remember to this day as being a very tragic experience for a lot of young people. So, gun violence especially is something, as Becki mentioned, that really motivates young people to get involved.

The other topic I would mention is climate change. This is something that's particular to young people because we may not see the effects of it directly right now, though we are to some degree. It's something that in the future, 20, 30, 40, 50, 100 years down the road, that's really going to define the entire paradigm under which we will operate. Young people, if we're engaged in dealing with the climate crisis now, then we're not going to have the worse ramifications in the future. That's something that young people are actively considering and thinking of when they're contemplating the future that they want to have and the world that they want to inherit. So, climate change is another significant issue that really gets young people motivated and engaged.

Armonté Butler: Yes. Agreeing with everyone, I think there are several issues. At Advocates for Youth, we have a few. We're really passionate about abortion access, so making sure that people have access to abortion on demand and on their terms. We're also advocating for issues related to confidentiality and healthcare. We're also looking at again, honest sex education and LGBTQ health rights.



We have a Youth Activist Toolkit on our website, advocatesforyouth.org, and we have several campaign resources. Annually on April 10, we celebrate National Youth HIV and AIDS Awareness Day (NYHAAD), a campaign where young people are really throwing down and advocating for their policymakers, legislators, school boards, and principals to know that HIV impacts young people. Our work aims to move young people from the margins to the center. I think that's something that's been really impactful to see happen.

Renata Schiavo: Great! Thank you! I want to move on to one of the last questions and ask you about your ideas for policy solutions. What do you see as being the most important or promising emerging practice that should become a policy or an emerging policy that may encourage youth engagement and help advance health equity? So again, please let's look at systems change and how we mainstream youth engagement within the different systems in which we work and engage.

Becki Marcus: I would touch again on participatory budgeting, and creating creative frameworks. When we have pots of funds, it's the young people who are best positioned to come together and think creatively about how we should invest in our communities. I think that has been thrilling because it's not only the ideas for the funding itself, but it's also the ways the young people are connecting to bring others together into these spaces of sharing ideas. We've had the youth making TikTok videos to recruit other youth to share ideas. Then while they're sharing ideas for how we should invest the funds in the community, from there, there is the process of developing project proposals. We've collected hundreds of ideas from our community, but how do we design a feasible and implementable project? It is an incredible learning experience when we're bringing together young people with city planners, local organizations, and experts in the community to make the young people feel connected to their community. Showing them that their voice matters and giving them incredible exposure to city agencies to understand the workings of a city and the kinds of decisions that their local elected officials are making because we're involving their voices in this democratic process.

The normal voting age is 18 and up but in our

process with participatory budgeting, you can be 10 years old and up to submit an idea and 14 and up to vote, and you can be 14 and up to help develop a proposal. We're really excited about the exposure that this creates for our young people. As Armonté was mentioning, it really opens that path and the trajectory for them to see themselves as a city leader or as an elected official, and for them to feel the vibrant network of connections of a city that supports their voice.

Saahil Patel: One thing I would say is that politics is local, and change is local as well. As Becki mentioned with participatory budgeting, this is a great initiative that you can do with your local town or city to become involved in the issues that are affecting you directly. But it could be difficult to get involved on the local level because there's just an inaccessibility that's present there. You oftentimes aren't able to attend your local town hall meeting because it may conflict with school or work or you simply are not able to see what's going on with your local elected officials due to a lack of local journalism. The focus tends to always be, therefore, on the national framework and what's going on perhaps in DC but not what's going on in your community, which is right nearby. So, I think anything that could enhance the accessibility of local politics would be very important for young people because they could see the direct changes that could be effectuated from their actions, rather than just focusing on the large-scale changes that would only happen from national policy, which is very difficult to accomplish.

Armonté Butler: Yes, I fully agree. I think that we are seeing that right now. At Advocates, we access work, we have a lobby day for young people to advocate for bills like the Equality Act, which will ensure that LGBTQ folks aren't discriminated against in public accommodations like schools, healthcare settings, etc. We have a Real Education and Access for Healthy Youth Act, which will ensure that young people have access to honest sex education and vital sexual and reproductive health services. With these bills, we're seeing that at the federal level, they might pass, or they might not. We've really been gearing up on how to go local and how to model these bills in other places like at city councils and school boards. Across the country, there are several young legislators that are doing



some really cool work and offering some really model policies that we're looking at like, "Wow, let's model that. Let's support young people in knowing that that exists."

Becki Marcus: Can I just add that when we're doing that local advocacy, it is so important to create spaces of language justice and language access to ensure that folks who are undocumented know that their voices matter in these spaces. That's really huge for bringing those closest to the problem closest to the solution.

Renata Schiavo: That's great, thank you so much. At this point, I would like to ask you all if you have any closing thoughts, especially focusing on recommendations either for policy change or for young people who want to become engaged in the health equity movement. How would they go about becoming engaged, and how can they start working on health equity issues and recognize the power of their voice? In other words, for your closing thoughts, please focus on the one policy solution you may recommend as well as any kinds of recommendations for young people and leaders.

Saahil Patel: I will say as one closing thought on policy engagement strategy, the power of social media simply cannot be overlooked. That's the language of young people nowadays. If you want to meet young people where they are and communicate with them about issues that they could be passionate about and that they can bring change about, you have to use social media. For a lot of organizations that I've seen lately, it's almost mandatory to have an Instagram account or a TikTok account because that's exactly how you go to the young people that you want to work with.

Lastly, I would just end with a call to action for young people. We're the ones that can make the change that we want to see. We're going to inherit this world, and we're the main benefactors of the work we do now. As long as we're engaged, we're active and we step up, we participate, and at our local level, we vote in our elections, we stay informed, and use our voices, we can make the change that we want to see but again, it's up to us. It's not enough to just be on the sidelines. We can speak up and when we come together, we can make the change to promote health equity.

Armonté Butler: Continue to make your voice heard and reach out. I think that there are several agencies, but some people don't know where to look. Also, using the power of mentorship and resources to identify how to make a change and take action. I think that we are seeing, with this onset of a bunch of social media, some people are still confused about how to find out who their legislators are and who their policymakers are. I think, to that end, also making sure that we're incorporating a civic engagement component. Do you know who your federal representatives are? Do you know who your city council member is? Some people don't, so it is critical to meet people where they are to identify how they can.

Becki Marcus: Yes, I think there's a lot of momentum right now for youth-led advocacy and policy work. I think in the ways we work with youth and the ways we fund that work, it's very important to show our young people that continuum from selfcare to community care. When we're talking about health equity, this applies to you in your own life. Showing people that we value your mental health, your wellness, and your social connectedness if we're asking young people to do any kind of advocacy. As Armonté said, what kind of mentorship are we baking in? What kind of career support are we baking in? How are we connecting with the family in the family's language? How are we making attendance accessible and spurring this young person's future path? Does the young person feel connected to the other advocates they're working with and their broader community through the work? If you're a young leader yourself, your wellness and your health really matter, your rest matters, and your happiness matters because that's really important in serving your community. You can't just pour out if you're not full inside too. So, thank you to all of the young leaders out there.

Renata Schiavo: I love what you all said! Thank you very much, Saahil, Becki, and Armonté for your participation today. I think that your closing thoughts also pointed to a number of important action steps, including the importance of capacity building, of teaching civic literacy in schools, and in all our environments, so that young people can connect to resources and opportunities for engagement. I want to join your call for action for young leaders to become involved in the health



equity movement. We need YOU in the health equity movement and we don't need you only for the future. We need you NOW because we need fresh ideas in the movement, and we need to reflect your values and your priorities in what we do.

Thank you very much, Becki, Armonté, and Saahil for bringing to life so many interesting ideas today. Please stay in touch with Health Equity Initiative and congratulations on your great work.



Participants (In alphabetical order by last name)



Armonté Butler

Armonté Butler is the Associate Director of LGBTQ Health & Rights at Advocates for Youth. He supports youth activists in leading sexual and reproductive health campaigns in their communities. He also supports various youth-serving organizations in adopting the youth-adult partnership framework. He holds Bachelor of Arts degrees in Global Studies and Gender Studies from The University of the South. He is a Master of Public Health candidate studying adolescent health and health equity at the Johns Hopkins Bloomberg School of Public Health.



Becki Marcus

Becki Marcus is the Assistant Program Officer at Local Initiatives Support Corporation where she is part of a team that leads the Pawtucket Central Falls Health Equity Zone, a collective impact model that centers community leadership to address social determinants of health. In her former role at the Nonviolence Institute, she managed a collaborative project to support youth impacted by violence across three Rhode Island cities. She graduated with a B.A. in Public Policy from Brown University and loves nurturing spaces for communities to make their voices heard.



Participants

(In alphabetical order by last name)



Saahil Patel

Saahil Patel is a direct medical student at TCNJ with joint admission to New Jersey Medical School. He is passionate about health policy and implementing the practicum of public health into the delivery of medical care as a physician. In the past, Saahil has served as an EMT, hospital intern, and mental health crisis counselor as well as a leader for numerous school-based organizations. Equity, he fundamentally believes, is an integral facet of promoting health!

Moderator



Renata Schiavo, PhD, MA, CCL

Renata Schiavo is the Founder and Board President, Board of Directors 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 well-being 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 in 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. She has experience with engaging young people in participatory processes across her different professional endeavors.



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!

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!



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!

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