Why Equity Matters: The Urgency & Opportunity

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MA Partnership for Health Promotion and Chronic Disease Prevention
Fall Summit
PolicyLink is a national research and action institute advancing economic and social equity by Lifting Up What Works.®
Defining Health: Overall state of physical, economic, social and spiritual well-being
Definition

Equity means just and fair inclusion. The goals of equity must be to create conditions that allow all to reach their full potential. In short, equity creates a path from hope to change.
Health Inequities

Growing Communities: Social Determinants, Behavior and Health
Our environments cultivate our communities and our communities nurture our health.

When inequities are high and community assets are low, health outcomes are worst.

When inequities are low and community assets are high, health outcomes are better.

Violence
Substance Abuse
Smoking
HIV/AIDS
Infant Mortality
Nutrition
CVD
Obesity
Depression
Stress

Fragility Systems
Powerlessness
Discrimination
Disconnected Members

Adverse Living Conditions
Poverty
Segregation
Marketing for Tobacco and Alcohol
Unemployment
Environmental Factors

Income Inequality
Occupational Hazards
Institutional Factors

Quality Schools
Access to Healthy Foods
Access to Healthcare
Adequate Income
Health Insurance
Quality Housing
Jobs

HIV/AIDS
CVD
Nutrition
Stress
Depression
Substance Abuse
Violence
Smoking
Obesity

Sense of Community
Social Networks
Social Support
Participation
Leadership
Political Influence
Organizational Networks
Policy Matters

- Policy impacts the economic, social, physical and service environments

- **Health in All Policies**: Policies not traditionally thought of as health policies (transportation, agriculture, land use, education, economics) impact health and obesity rates

- **Equity in All Policies**: All policies can produce either positive or negative impacts on low income communities and communities of color
The Face of America is Changing
1990 Percent People of Color by County

Sources: 1990 Census, Census TIGER/Line, NHGIS, and ESRI.

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2020 Percent People of Color by County

Less than 30% People of Color
30% to 40% People of Color
40% to 50% People of Color
Greater than 50% People of Color

Sources: Woods & Poole Economics projections data (adjusted using the 2010 Census); Census TIGER/Line, NGIIS, and ESRI.

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2040 Percent People of Color by County

Sources: Woods & Poole Economics projections data (adjusted using the 2010 Census), Census TiGER/Line, NHGIS, and ESRI.

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U.S. Change in Youth (<18) Population by Race/Ethnicity, 2000-2010

- White: -4,310,525
- Black: -248,081
- Latino: 4,788,632
- API: 781,946
- Other: 875,683

USC Program for Environmental & Regional Equity
PolicyLink
Lifting Up What Works®
Communities of Color and Immigrants are Driving Growth

Image source: Getty Images.
Mapping the 2010 U.S. Census

Browse population growth and decline, changes in racial and ethnic concentrations and patterns of housing development.

Change in population since 2000
- Over 20% increase
- 10% to 20%
- 0% to 10%
- 0% to -10%
- -10% to -20%
- Over 20% decline

Massachusetts

2010 Population: 6,547,529
Change from 2000: +3.1%

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>Share of Pop.</th>
<th>Change from 2000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Whites:</td>
<td>76%</td>
<td>-4%</td>
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<tr>
<td>Blacks:</td>
<td>6%</td>
<td>+23%</td>
</tr>
<tr>
<td>Hispanics:</td>
<td>10%</td>
<td>+46%</td>
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<tr>
<td>Asians:</td>
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<td>+47%</td>
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<tr>
<td>Native Amer.:</td>
<td>0%</td>
<td>-4%</td>
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<tr>
<td>Multiracial:</td>
<td>2%</td>
<td>+11%</td>
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<tr>
<td>Other groups:</td>
<td>1%</td>
<td>+38%</td>
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</table>
A Framework for Building Healthy Communities

- Economic
- Physical
- Social
- Service
- Place & Race
An Equity Agenda

- Strategy Development
- Data Collection/Analysis
- Community Engagement
Data Collection/Analysis

• What data collection and analysis has been or is currently being undertaken to understand community conditions?
• What indicators are you using in your analysis to better understand health inequities in your communities?
• *Who* is most impacted by these inequities? *Where* are these inequities most severe?
• How are community assets being identified?
• What learning has come from community residents?
Education, Income and Health: Intrinsically Linked*

More education $\rightarrow$ Longer life

More education $\rightarrow$ Healthier life

Higher income $\rightarrow$ More opportunities to live in a healthy community

Higher income $\rightarrow$ Healthier children

* This slide is from the RWJF Commission for a Healthier America.
Racial/Ethnic and Economic Inclusion Are Key for Economic Competitiveness and Good Health

Share of Working Age Population with an Associate’s Degree or Above in 2010
Disconnected Youth in Massachusetts

**Youth Disconnection by Race and Ethnicity**

- **US Average**: 16.6%
- **Asian Americans**: 7.6%
- **Whites**: 11.7%
- **Latinos**: 17.9%
- **African Americans**: 22.5%

*Source: Measure of America analysis of US Census Bureau, American Community Survey 2011 PUMS Microdata File.*

**Most Connected Neighborhood Clusters**

- Greater Allston and Brighton, Suffolk County, MA: 3.0%
- Brookline and Newton, Middlesex and Norfolk Counties, MA: 3.2%
- Cambridge, MA: 3.3%

**Least Connected Neighborhood Clusters**

- Lawrence, Methuen, and Andover, Essex County, MA: 16.9%
- Chelsea, Revere, and Winthrop, Suffolk County, MA: 17.3%
- Abington, Brockton, and Avon Cities in Norfolk and Plymouth Counties, MA: 19.1%
Understanding Systems and Dynamics

- **Values Conflicts**
  - Adaptive challenges
  - World view, beliefs, principles
  - Habits of mind and heart
  - Personal identity

- **Structural Conflicts**
  - How a situation is set up
  - Formal role definitions
  - Time constraints
  - Geographical/physical constraints
  - Unequal power/authority
  - Unequal control of resources

- **Relationship Conflicts**
  - Troubled past history
  - Strong negative emotions
  - Habitual misconceptions
  - Negative projections
  - Defensive or aggressive reactions

- **Data Conflicts**
  - Lack of information
  - Misinformation
  - Ideas of relevancy
  - Interpretation of the data
  - Assessment procedures

- **Language Conflicts**
  - Cross-talking
  - Definitions
  - Communication preferences

- **Interest Conflicts**
  - Substantive
  - Procedural
Engagement and Leadership

- Efforts to achieve revitalized communities of opportunity will not be successful without substantial community engagement

- Meaningful community engagement requires participation in governance and decision making
Principles for Community Engagement

• **Empower residents** through meaningful inclusion and partnerships
• **Build capacity** for high level engagement
• **Prioritize** community knowledge and concerns
• **Target resources** to support ongoing engagement
• **Facilitate mechanisms** that encourage *mutual learning* and feedback mechanisms
Towards More Equitable Public Engagement Processes

**Inclusive:** What communities and interests need to be represented and in what capacity?

**Accessible:** Will people and organizations from a diversity of backgrounds feel comfortable and engaged?

**Transparent:** How does public engagement interact and influence decision-making?
Institutional Structures for Community Engagement

**Governance Level**
- Appointment to decision making boards and commissions

**Consortia**
- Membership based group with options for decision making

**Advisory Groups**
- Provide guidance and advice to policymakers

**Task forces**
- Short term participation with opportunity to offer recommendations

**Focus Groups**
- One-time opportunity to provide input

**Town Hall Meetings**
- Information provided one time, sometimes an ability to offer group comments

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Lifting Up What Works®
Boards & Commissions Leadership Institute

• Identifies, trains, places, and supports low-income people and people of color for priority boards and commissions in the Bay Area.
• “Seats First”
• “Just in time” mentoring
• Movement-based

BCLI graduates have won over 30 seats. Several have run for elected office and won.
An Equity Agenda

- Strategy Development
- Data Collection/Analysis
- Community Engagement
- Partnerships
Advancing Health & Equity through All Policies

• Develop and implement strategies that get to the “triple bottom line”:
  – improving health (people)
  – revitalizing neighborhoods (place)
  – creating good quality jobs (economy).
Advancing Health & Equity through All Policies

• It also means asking:
  – Do the solutions we are developing speak to the issues that low-income communities and communities of color have identified as crucial (i.e., living wage jobs, housing, child-care, supermarket development)?
  – What are we doing to provide people with the resources and information they need to identify their own solutions?
  – WHO will take control? and WHO is building power?
  – What kinds of ‘leadership’ are we trying to foster? How are those leaders accountable to the low-income communities they are working in?

Who benefits • Who pays? • Who decides? • Who leads?
An Equity Agenda

Policy & Environmental Changes to Support Health

- Safety/violence prevention
- School wellness policies
- Land use/zoning
- Safe Routes to School
- Trails and safe parks
- Bike share programs
- Developing or updating neighborhood/general plans

- Grocery stores/supermarkets
- Corner store/bodega and restaurant initiatives
- Farmers’ markets & collaboratives with local farmers
- EBT access at farmers’ markets
Equitable Policies:

- Include equity as criteria for inclusion and/or prioritization of policies
- Identify policies important to low-income communities, communities of color and other vulnerable populations
- Target benefits to vulnerable populations
- Prioritize provision of resources to areas that need it most
Strategy Development

Questions for Consideration:

• How is your strategy conceptualized to promote equity/reduce inequities?

• What inequities will be reduced as a result of this strategy?

• How will you deliberately focus on implementing this strategy in a way that promotes equity?

• How will your strategy promote meaningful and authentic community engagement?

• What could be unintended consequences of this strategy?
Achieving Equity is Possible

Image source: Native American Community Development Institute
Cleveland Evergreen Cooperatives

• Launched in 2008 by a group of Cleveland institutions—Cleveland Foundation, Cleveland Clinic, University Hospitals, Case Western Reserve University, and municipal government

• Enterprise model launched 3 employee-owned, green businesses: Evergreen Cooperative Laundry, Evergreen Energy Solutions, and Green City Growers Cooperative

• Created dozens of good jobs with benefits and ownership opportunities for local residents, over half of whom have felony records
Healthy Food Financing Initiative

Equitable Approaches Bring Triple Bottom Line Benefits

- Promotes a healthy diet which can contribute to reduced rates of diabetes & obesity
- Creates jobs with career paths
- Lowers the cost of food
- Revitalizes neighborhoods
- Leverages private capital
- Increases local taxes

Health
Income
Economic Stimulus
Transportation: A 21sts Century Civil Rights Issue: Milwaukee

- May 2014 landmark victory by Black Health Coalition of Wisconsin, Inc. (BHCW) and Milwaukee Inner-city Congregations Allied for Hope (MICAH)
- Reached agreement with Wisconsin and U.S. DOTs to spend $13.5 million to create and expand bus routes linking Milwaukee central city residents to employment opportunities in suburbs North of Milwaukee County.
- BHCW and MICAH who combined their forces in a lawsuit to create mass transit opportunities to coincide with the massive $1.7 billion that was set to be spent to repair and expand the busiest interchange in the state.

"We've long said that improved transit is necessary to achieve racial equity, good health and environmental justice. This settlement is a step forward towards meeting those critical goals."
Greater Worcester Community Health Improvement Plan

- Comprehensive community engagement process
- Formed multi-stakeholder advisory committee including many community partners
- Focuses on 5 towns & City of Worcester to address regionalization of public health services and on areas that have the largest low-income, racial/ethnic and immigrant populations
- One of 5 principles domains created to structure the CHIP is Health Equity & Health Disparities

Source: Great Worcester Community Health Assessment
Advancing Health Equity in Minnesota Partnership

- Used an extensive community-based process to develop the state legislative report
- Decision made in this effort to be explicit about race and structural racism, particularly the relationship of race to structural inequities that contribute to health disparities
- Recommendations include:
  - Advance equity through a health in all policies approach across all sectors to examine policies and target resources
  - Strengthen community relationships and partnerships to advance equity by creating avenues for meaningful engagement
  - Redesign the Minnesota Department of Health grant making to advance equity
  - Make equity an emphasis throughout state health department by assessing all MDH programs and divisions
  - Strengthen collection, analysis, and use of data to advance equity
Bridge Building
Sew Along the Seam
Innovation
Refinement
Intrusion & Deliberateness
Behavior Change

"Look, I can't promise I'll change, but I can promise I'll pretend to change."
Conclusion

- It means bringing together 3 agendas:
  - Agenda to grow jobs and increase economic viability
  - Agenda to reduce health disparities and improve health overall
  - Agenda to ensure that all have the opportunity to participate, contribute and benefit from the change

- Takes time
- Stretching outside our comfort zones
  - Understand the economy
  - Understand structural racism and embrace racial and economic inclusion
  - Continuously ask and hold you and others accountable to the questions

- Less about specific issues and more about the tactics and processes that give meaningful power and voice to those who have been previously shut out from reaping the rewards and shaping our shared fate.
Thank You

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