



# BEST PRACTICES FOR WHITE-LED ORGANIZATIONS TO PROMOTE HEALTH EQUITY AND RACIAL JUSTICE IN HEALTH ADVOCACY

MARCH 2019

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# Introduction

Consumer health advocates continue to build networks of powerful, diverse consumer voices to ensure that all communities can increase their influence in local, state and national health policy decisions. We recognize that explicitly integrating health equity into [systems of advocacy](#) is a newer approach for many white-led health advocacy organizations who are seeking meaningful ways to conduct this work.

This is also the case for Community Catalyst – a white-led national health advocacy organization with a commitment to health equity. Community Catalyst is on the journey to making sure this commitment becomes a reality in all aspects of our work. We value learning from those doing this work in states and communities around the country and sharing these learnings within our networks.

This toolkit, featuring examples from health and health equity advocates, aims to support other white-led organizations looking to ensure their health advocacy agendas, coalition work, stakeholder engagement, communications and campaign strategies include, reflect and respond to the needs of people of color. This toolkit also aims to help white-led organizations align their work with existing health advocacy, organizing and community-building work already happening in communities of color in ways that are respectful and grounded in an understanding of power and racial justice principles. It includes strategies, steps and examples for white-led organizations looking to integrate health equity in building and maintaining systems of advocacy in their states.

The best practices compiled in this toolkit are from a series of health equity-themed learning community calls facilitated by Community Catalyst with guidance from people of color-led organizations. While this resource is focused on effective ways that white-led organizations can participate in equity- and racial-justice-informed health advocacy, it may also inform how white-led health advocacy organizations can collaborate across the intersections of disability, immigration status, socioeconomic status, gender and sexuality. As Community Catalyst continues our health equity work, we understand this will be a constant journey, with adjustments to our work and ways of thinking made along the way, in collaboration with our partners. We also strive to apply the learnings from this toolkit in our day-to-day work and welcome feedback on what we have captured to assist us in revising this resource as we learn and grow.

This toolkit is modeled on the Community Catalyst system of advocacy, which envisions diverse organizations working together across six capacities:

- Campaign development
- Communications
- Resource development
- Policy analysis and advocacy
- Coalition and stakeholder alliances
- Grassroots organizing

## Community Catalyst's Vision of Health Equity:

*"A society in which everyone has a fair opportunity to achieve their full health potential, regardless of the individual or population group's race, color, religion, national or ethnic origin, immigration status, class, age, disability, veteran status, sexual orientation, gender, gender identity."*

Together, diverse coalitions can transform many separate organizations into a complementary and collaborative group that is better positioned to achieve health policy change. When organizations form a system of advocacy that centers commitment to health equity and racial justice across all six capacities, it makes coalitions stronger and more effective and supports policy change that meets the needs of the communities that will be most directly affected by the policy at hand. This commitment to authentic partnership builds power and fosters policy change in ways that reflect the diverse needs, skills and expertise of different communities.

## COMMUNITY CATALYST SYSTEM OF ADVOCACY



# Key Considerations for White-led Organizations

The following are key considerations to use as overarching guiding principles for authentically incorporating health equity and racial justice principles into your work.

## ***Address Power Dynamics***

Be aware of the fact that racism – and other intersecting forms of oppression – is about [power dynamics that maintain the status quo](#); it is more than just the way individual people treat each other. Power dynamics between white-led and people-of-color-led organizations can reinforce a dominant culture in which white people and organizations have more access to funding, stakeholders and legislative and administrative decision makers. Pay attention to the way that power dynamics may show up in your coalition meetings, decision making processes, organizing strategies, funding priorities and other campaign activities. When you notice these power dynamics manifesting themselves, be prepared to shift your tactics, policy priorities, meeting and decision-making structures and other aspects of your work. Responses may include engaging in trainings and/or facilitated conversations about racial justice, rethinking where and when you hold coalition meetings and reconsidering how you decide on policy priorities and make group decisions. Also, ensure that people of color have decision-making power in your coalition – incorporating their strengths and diverse perspectives. It can also include considering how you divide up campaign tasks, evaluate where you get your funding and how you distribute it, and how you incorporate a grassroots organizing strategy into your work.

## ***Relationship and Trust Building***

Trust building is key when looking to develop long-term relationships that focus on health equity and the value of people of color-led organizing and policy work. It will be important to recognize the existing advocacy and organizing work in communities of color. You may need to shift your advocacy strategy away from thinking about your organization as the leader and policy decision maker and toward centering the expertise and leadership of people of color and other marginalized groups in policies that will directly affect their communities. For example, state advocates in Arizona followed the leadership and expertise of Tribal communities in supporting dental therapy legislation; dental therapy was originally brought to the U.S. by Tribal leaders and Tribal groups were strong leaders in the Arizona coalition. Pay attention to the impact of your decisions – in addition to your good intent – and commit to being accountable when mistakes are made.

## ***Follow a “Nothing about us without us” Model***

People experiencing the health effects of racism and other forms of oppression must be included in policy solutions. For instance, if a policy is going to directly impact a predominantly Black community, ensure Black community members are setting the policy advocacy agenda, have leadership roles in establishing the advocacy table, and are involved in setting coalition stances, policy positions and community-engagement strategies. [California Pan Ethnic Health Network \(CPEHN\)](#), for example, builds relationships with community partners, including enrollment specialists and local organizing groups, in creating a feedback loop on policies impacting communities of color. Communities of color are continually informed and engaged on the policy decision-making process impacting their communities.

The six sections that follow offer guidance about how to incorporate health equity and racial justice principles into each of the six capacities in the Community Catalyst system of advocacy. We offer general suggestions and key questions to ask yourself, your organization and your partners about your work and concrete examples from different states.

# Campaign Development

Campaigns bring together all capacities and provide organizations with opportunities to engage with existing on-the-ground work being done in, and by, directly-impacted communities. Campaigns allow diverse organizations to work together to develop and execute strategies that advance a policy agenda responsive to the needs and desires of communities of color.

## **Suggested Strategies:**

- Meet early on with groups who will be directly impacted by your work and listen. Build and maintain relationships with organizations of color during and outside of an advocacy campaign and remember to [be mindful of and address power dynamics](#).
- Commit some staff time to being out in the community, showing up for partner organizations' events and investing in your organization's learning and growth around health equity. This will be necessary to build trusting partnerships.

Your authentic relationships will help reduce the problematic power dynamics that result in tensions when white-led organizations look to engage people of color when needed and then end the relationship once a campaign is over.

## **Key Questions:**

1. How are you coordinating your campaign in partnership with organizations led by and for people of color?
2. How are you choosing what you campaign and advocate for? Is there a racial or health equity component in determining your decision?
3. Are you working in partnership and/or have you spoken with members of directly impacted communities to inform your strategies? Do the experiences and recommendations of directly impacted communities inform your decision making?
4. Are you elevating the voices of communities of color in your campaign? Do your communication strategies reflect the impacts policy threats would have on people of color?
5. Are you empowering community voices to share their stories with decision makers to help influence and shape health policy decisions?

## **State Example:**

In Arizona, a diverse coalition of groups across the state came together to advocate for the authorization of a community dental provider known as a [dental therapist](#) to help address access to oral health care in the state. [Groups working on the campaign](#) included representatives from Tribal governments, free-market groups, direct service and grassroots organizations staffed by and serving Native American, Asian American and Latino communities, as well as provider groups and community health centers. Together, with support from national partners including the Pew Charitable Trusts and Community Catalyst, this diverse group helped successfully pass dental therapy legislation in 2018. The inclusion of grassroots organizations at all phases of campaign development and strong relationships among diverse people of color-led groups and white allied organizations supported a successful campaign that produced a policy win and fostered longer-term relationship building among partners.

# Communications

The ability to employ effective communications strategies with a health equity lens is essential for white-led organizations to build timely public and political support for health policy campaigns in partnership with people-of-color-led organizations. Innovative and tailored [communications tactics that are health-equity- and racial justice-forward](#) are important for framing your policy goals in ways that reach diverse audiences and create accountability for health equity to remain a key component of your messaging.

## **Suggested Strategies:**

- Develop multilingual social media or radio ads to increase awareness about how threats to health coverage impact families from diverse communities.
- Host community events, roundtables or otherwise engage with community leaders who have the ears of community members who would be impacted by health care decisions.
- Make your outreach and education materials, as well as other public-facing resources, accessible by utilizing language access, [readability tools](#) and translating resources into languages other than English.
- Make your public events and forums accessible by utilizing American Sign Language (ASL) interpreters, translators and holding events in physically accessible spaces.
- Tap into the skills, expertise, organizing strategies and methods that already exist in communities of color.
- Learn about what grassroots people-of-color-led organizations do to engage diverse language communities and think about whether there are ways to fund them to continue this important work.

## **Key Questions:**

1. Do you need tailored messaging research for diverse audiences, such as Spanish-speaking community members?
2. Do your materials reflect the needs, preferences and experiences of communities of color, in their own words?
3. Are your materials language accessible? This includes providing translations into other languages spoken by your target audience, providing subtitles on videos, providing ASL interpreters at public forums and events, providing subtitles on webinars, etc.
4. What is your plan to engage ethnic media? For example, is there a local Spanish-language newspaper or radio station that could promote your enrollment event?
5. Are you making sure to collect and highlight stories from diverse voices?

## **State Example:**

[Strong Families New Mexico](#) created social media graphics for their local health care advocacy campaigns that included images of the Latino and Native American families the organization serves. They leveraged their story collection efforts to identify Spanish-speaking spokespersons who could share their stories with ethnic media and engage decision makers and stakeholders on Medicaid policies impacting rural, Spanish-speaking Latino communities. They also hire community health workers from Latino and Native American communities to build trust and communication with local communities.

# Resource Development

Raising and appropriately allocating funds to support campaigns aimed at promoting health equity is critical to success and sustaining health policy advocacy that supports and protects the health of communities of color. Exploring ways to integrate health equity into fundraising practices without tokenizing or making too many asks of people-of-color-led organizations can go a long way to ensuring health advocacy campaigns are inclusive, successful and sustainable. Keeping in mind that the system of advocacy aims to foster partnerships to create diverse multi-organizational coalitions, consider which capacities your organization has deep skills in and which are the best ones for partnering with people-of-color-led organizations, creating space for them to be funded for their work, skills and expertise.

## *Suggested Strategies*

- Provide grants to people-of-color-led organizations in your community already working on health issues.
- Expand your coalition or network to include people-of-color-led organizations
- Make the case to your funder network that people-of-color-led organizations should receive funding to work in communities of color.
- Plan a shared fundraising event with a people-of-color-led organization you have a relationship with to leverage your donor networks to support leaders of color in your community.
- Promote the work and resources of people-of-color-led organizations in your community through social media and other public outreach.

## *Key Questions:*

1. Are there local or national funders particularly interested in supporting health equity work? Could you introduce people-of-color-led organizations you partner with to these funders, develop a partnership grant project to build a new relationship or bring a new partner into the fold of an existing funder relationship?
2. How are you thinking about creating a lasting presence and impact in communities of color? What are ways you could sustain these partnerships with financial resources to build and maintain capacity in these areas?
3. Are there people-of-color-led organizations doing effective work, but left behind by national or state foundations? If so, what can you do to make sure people-of-color-led organizations are not overlooked?
4. Is any of our work already being done by people-of-color-led organizations or local activists? Can we fund these groups to continue their work or advocate to our funders that they do so?

## **State Example:**

Take Action Minnesota (TAMN) was approached by a national funder to support health advocacy work directly impacting African American communities. TAMN asked the funder to reconsider providing their organization with funding given that TAMN was, at the time, a white-led organization that maintains strong connections with national funders and operates with more resources than coalition partner organizations led by and directly serving African Americans. TAMN directed the funder to provide its African American-led coalition partner with a funding opportunity to support health advocacy efforts aimed at promoting racial and health equity in Minnesota.



# Policy Analysis and Advocacy

All organizations are faced with setting policy agendas in the face of many different proposals and priorities. Policy analysis that is grounded in health equity involves weighing the impact that different policies will have on health disparities, committing to advocating for policies that will [advance health equity](#) and pushing back against policies that will be harmful to communities of color. Doing so requires accurate information, so that communication with people-of-color-led organizations that are tapped into their communities – and directly impacted individuals, where appropriate – can ensure that your policy research includes data on diverse communities as well as qualitative information on the lived experiences of people of color. Your advocacy strategies should create space for people of color to speak on behalf of their own experiences and ensure that people of color are at the table in the development and execution of such policies. This very frequently will involve not only extending invitations to spaces where decisions are made, but also ensuring those spaces are accessible and respectful of the experiences, skills and expertise of diverse advocates.

## **Suggested Strategies:**

- Seek out data and information on racial and ethnic disparities in the policy areas you are working on.
- Find out what people-of-color-led organizations in your area are already doing to work on the policy areas you're interested in. See if there are ways you can get involved with existing efforts and partner to advocate for policies that people of color support.
- When analyzing policies, consider using a racial equity tool, like Race Forward's [Racial Equity Impact Assessment](#)

## **Key Questions:**

1. Are your policy proposals specifically intended and designed to reduce racial disparities or prevent disparities from worsening?
2. What missing data or information would be helpful?
3. With whom did you consult to develop this proposal? Were people serving or representing communities of color engaged in the issue? What policy support would you need to begin to engage with these potential partners?
4. Are people-of-color-led organizations involved in the decision making process, from picking policy priorities to deciding on legislative compromises?

## **State Example:**

[Health Equity Solutions \(HES\)](#) in Connecticut brought together over 130 people from organizations across the state to define health equity and identify barriers to health coverage, access and care in the state. HES began assessing legislative and policy decisions based on their [health equity impact analysis tool](#), and communicated the results via a report to healthcare stakeholders and policymakers in coordination with [Connecticut Voices for Children](#). The report found that state agencies had incomplete or fragmented data, greatly hindering the state's capacity to understand where disparities exist, and offered strategies to promote equitable solutions for health care. The report also helped inform HES' 2019 policy agenda, making sure this reflects the needs and priorities of communities of color.

# Coalition and Stakeholder Alliances

Coalitions make it possible to coordinate resources and leverage advocacy capacities among diverse partner organizations to achieve policy change. Coalitions that include people-of-color-led organizations are able to extend their reach and bring together a broad range of diverse stakeholders and partners with different assets, missions, relationships and strategies to put health equity at the center. By forming broad-based multi-stakeholder coalitions, white-led health advocacy organizations can increase their credibility with communities of color, impact change and lay the groundwork for future health equity campaigns.

## **Suggested Strategies:**

- Recognize how including people-of-color-led organizations and members of communities directly impacted by the policy issue you are working on can offer connections and perspectives of people with lived experiences into health policy and advocacy campaigns.
- Analyze the existing makeup of your coalition with an eye toward diversity and inclusion. If your coalition is made up predominantly of white-led organizations, consider some facilitated conversations about health equity and/or racial justice to move your coalition in a more inclusive direction.

## **Key Questions:**

1. What are the goals of your coalition? Do they reflect the needs or address the health concerns facing communities of color? How were these goals determined, and did members from directly impacted communities have a decision-making role?
2. Who are the members of your coalition? Have you reviewed the principles and structures of your coalition with an eye toward policies or practices that may be unintentionally exclusive or oppressive?
3. Do you have community agreements and/or other accountability mechanisms in place to support authentic relationship building that accounts for power dynamics and the impact of racism?

## **State Example:**

Washington Community Action Network (WACAN) created a tool to ensure policies, programs and budgets developed by the Accountable Communities of Health (ACHs) have racial equity goals and desired outcomes built into their framework for eliminating disparities and inequities in the health care system and reducing negative impacts on both low-income communities and communities of color. WACAN and their coalition partner, Northwest Health Law Advocates (NoHLA) used this racial/equity tool in their Promising Practices for Consumer Engagement in the New Regional Health Collaboratives toolkit to help coalition partners and stakeholders recognize and address how their decisions on health care systems will have an impact on racial equity.

# Grassroots Organizing

Grassroots support has strategic as well as practical importance in campaigns. The stories of people of color put a human face on the health equity concerns consumer health advocates are addressing. Building power by involving communities of color who are directly impacted by the policy priorities your coalition is advocating for will go far to advance a health equity policy agenda that is responsive to the needs of people of color. Ideally, grassroots organizing should occur throughout all parts of your campaign and members of the grassroots base should have decision-making power and the ability to be involved in various parts of the campaign, as per their own preferences and needs. This approach ensures that your grassroots organizing strategy will be authentic and inclusive and not tokenistic.

## ***Suggested Strategies:***

- Include a grassroots organizing strategy as part of your early advocacy planning. Include grassroots organizations and individuals from directly-impacted communities in decisions about policy priorities and advocacy strategies from the start.
- Create opportunities for community members to have decision-making power in your campaign.
- Build long-term relationships with grassroots organizations and organizers so that all of your campaign activities are centered on what communities need.

## ***Key Questions:***

1. Recognizing the importance of increasing awareness of white privilege and structural racism's impact on racial health disparities, how can you be a trusted partner to communities of color?
2. How can you partner with and train leaders in communities of color to be spokespersons? How and where can you lift up the existing spokespersons in communities of color to your networks?
3. What is your organization's most effective strategy to identify the policy priorities of communities of color? How can you leverage those existing priorities to build power around issues and solutions that have already been identified by people directly impacted?
4. What resources and tools does your organization need to increase its efforts to partner with communities of color?
5. How can you be a partner and support efforts that other organizations of color are already engaged in? For example, are there opportunities to be a part of immigration advocacy tied to health care? Is there an existing network of disability advocates working on health-related issues that you could plug into?

## State Example:

Unite Oregon primarily serves immigrants, refugees and people of color in low-income communities. Before engaging a particular community on a campaign or project, Unite Oregon works to build a trusting relationship with, and leverage connections to, communities of color. Unite Oregon staff recognize that being an ally to people of color, immigrants and refugees may mean taking on a supportive role and allowing communities impacted to speak on their own behalf. Unite Oregon worked on a project organizing undocumented immigrants to build support around the state's Reproductive Health Equity Act. However, the undocumented immigrants Unite Oregon engaged were also concerned about a local sheriff's race that would have serious implications on their safety, health and well-being. They were fearful of being targeted by local law enforcement, and potentially deported. To respond to the local community's concerns, Unite Oregon partnered with a local community-based organization that serves immigrants to offer organizing capacity and advance a combined health advocacy agenda that protects both the health and safety of all people.

# Conclusion

We recognize that incorporating health equity into an organization's communication, campaign, coalition, policy development and fundraising strategy is not easy work, nor will it be accomplished overnight. Resources and capacity to undertake such important work may be limited. And often, a better understanding and increased awareness about health disparities, cultural nuances and power dynamics at play in partnerships between white-led and people-of-color-led organizations are needed as a foundation before this work can be done effectively. This process has been ongoing for Community Catalyst and there will always be more work to do in deepening our own understanding of and work on health equity and racial justice. We will continue to apply the recommendations within this resource to our own work. We would love to know if and how you have used this toolkit, as well as receive any feedback or recommendations to make this resource more useful. Please share your thoughts with Community Catalyst's Director, Diversity and Inclusion, Dara S. Taylor at [dtaylor@communitycatalyst.org](mailto:dtaylor@communitycatalyst.org).



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