



Equity Generally Must Precede Health Equity: Lessons Learned from Community Organizers

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Over the last 30 years, community health professionals and organizations, as well as philanthropies concerned with improving equity and health equity, have increasingly recognized community engagement as critical. Numerous studies have documented promising processes and outcomes of community-based participatory research, coalition building and other

community engagement approaches.



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“As public health's focus has evolved from rediscovering and emphasizing, two decades ago, the field's deep roots in the social determinants of health, to understanding the health and equity impacts of all policies, to now working intentionally to understand and address systems of oppression rooted in racism, classism and heterosexism, and other “isms,” so too must the field's community engagement strategies move to more deeply embrace community leadership and control through community organizing.”

Highlights

Health providers can be better allies to communities through community organizing.

Community-based participatory research, community coalitions, and other community engagement can build power and community capacity.

Far less attention has been paid to what is arguably the highest level of community engagement: organizing by and for communities themselves to build power, identify common problems, and develop and use strategies for action to achieve the change they seek. Health professionals can learn a lot from organizing. Grassroots organizers, and the base—building (recruiting and retaining volunteers), empowerment, advocacy, and other skills they bring to the table, may be particularly critical to engaging marginalized and otherwise hard-to-reach populations.

Organizing by and for communities, to build power, select issues, develop and use strategies, and take action to address the goals they collectively have set, may offer important lessons in these fraught times. We share, largely in their own words, the experiences and reflections of ~140 grassroots organizers across the United States who attended regional convenings of organizers in 2017, planned and run by four leading community capacity and base-building organizations.

Racially and ethnically diverse organizers shared successful strategies, challenges faced, and the deep concerns among their already often disenfranchised communities. After briefly reviewing some of community organizing's core tenets and complexities, we share our qualitative research methods and key findings about the primary cross-regional concerns raised (mass incarceration, voter suppression, and immigrant rights), the themes that emerged (e.g., centering leadership by women of color and of using a health lens to frame community issues), as well as the challenges faced (e.g., the retraumatization often experienced by organizers and the difficulties in building alliances between groups “that have been taught to distrust each other”). We conclude by discussing how many of the promising practices and lessons shared by the community organizers might enhance health equity-focused efforts. There can be no health equity without racial equity and social justice. Put another way, to achieve health equity, we must first address equity more generally.

Methods

Our research team collected and analyzed extensive qualitative data from the convenings. Community organizers were identified and invited to take part in one of four regional 3-day

HOW DID A COMMUNITY PSYCHOLOGY PERSPECTIVE INFORM YOUR WORK?

A Community Psychology perspective informs the implications for community organizing for health because issues of race and race-based power and privilege continue to shape the landscape in which community health is situated. Working to build and achieve health equity may be largely futile unless grounded in a deeper understanding of the ways in which our country's long and difficult history of structural racism, and the recent dramatic and alarming uptick in racial/ethnic “othering” and xenophobia, harm the individual's and community's health.

convenings (Birmingham, Alabama in the South; Chicago, IL in the Midwest; Pacific Grove, CA in the West; and Ossining, NY in the East) by leading base-building organizations in the region. These organizations, which also facilitated the convenings in their respective areas, invited individuals they considered leading equity-focused organizers in their regions. A total of 137 organizers, ranging in age from their 20s to their 70s comprised the final sample.

Results

- Organizers in all regions shared the importance of starting with issues that are deeply felt by the community. They further stressed that these issues typically do not fall under a narrow health rubric, and that if health professionals want to get to health equity, we must start with more fundamental issues of race-based oppression and social injustice.
- Across regions, participants emphasized the importance of supporting organizing by and with groups that do not fit within traditional identity paradigms or are particularly stigmatized in the current sociopolitical climate, including immigrant, LBTQIA, and Native communities, to build political and economic power.
- Participants stressed the importance and power of organizing led by women of color, especially Black women, in helping build racial equity and a healthy democracy as well as in a way that leads to healing justice.
- Organizers want to partner with public health departments and professionals to gain credibility with stakeholders, and receive assistance with data collection and advocacy efforts. At the same time, these partnerships must balance the tension between addressing social determinants of health and fundamental causes of racial inequities.

What Does This Mean For?

Practice- It is crucial to engage patients or community members on issues beyond traditional health topics, or in ways that start with more fundamental issues of race-based oppression and social injustice. Promoting non-traditional leaders and healing practices is important.

Social Action- Consider applying tenets of *Critical Race Theory*, which explores how we understand race and power, into community organizing, research, and partnerships aimed at building social change and institutional transformation. Funders should provide support to prevent leaders from being retraumatized and support them to heal while organizing.

*Original Citation: Minkler, M., Rebanal, R. D., Pearce, R., & Acosta, M. (2019). [Growing Equity and Health Equity in Perilous Times: Lessons From Community Organizers](#). *Health Education & Behavior*, 46(1_suppl), 9S-18S.*

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