Shifting Power: Understanding Community Building for Health Equity Webinar Summary and Call to Action

PARTNERS for **ADVANCING HEALTH EQUITY**

Webinar Focus

The Partners for Advancing Health Equity Collaborative hosted the webinar, *Shifting Power: Understanding Community Building for Health Equity* on November 21, 2023. Panelists engaged in discussions about the power dynamics and imbalances impeding the progress toward health equity, emphasizing the need to shift power to communities. This report provides a synthesis of key takeaways, solutions, and action steps identified from the webinar.

Webinar Voices

> Caryn Bell, Associate Director, P4HE, Tulane School of Public Health & Tropical Medicine

> Jonathan Heller, Senior Health Equity Fellow, Population Health Institute, University of Wisconsin

> Gigi Barsoum, Founder, Barsoum Policy Consulting Inc.

Key Resources

- A Framework for Understanding Power Building
- Using a Power Lens in Public Health
- Building Community Power to Achieve Health and Racial Equity: Principles to Guide Transformative Partnerships with Local Communities

Your Voice

P4HE values collaboration. If there is a resource on this topic that you would like to share with us, provide it here.

Key Takeaways

People in decision making roles hold the power to affect health outcomes and equity. Power imbalances have been shaped by a legacy of structural oppression. Shifting power to communities is essential to center their perspectives and health priorities in decision-making. Cross-sector collaboration within a larger ecosystem can help communities build their power to make systemic change by targeting widespread drivers of health.

Webinar participants indicated that power dynamics play a huge role in the advancement of health equity by influencing decision-making, policy creation and change, funding, hegemony, health services offered, and the knowledge and experiences reflected and valued in decision-making. They identified government and policy makers as those holding the most influence in advancing health equity, followed by healthcare institutions and providers. Despite frequent acknowledgement of the critical role of community members and local organizations in advancing health equity, participants ranked them as being one of the least influential groups, followed by academics and researchers.

Call To Action

"We need to think about different kinds of power when we think about trying to advance health equity, like the power to influence a particular decision." Jonathan Heller, Senior Health Equity Fellow, Population Health Institute, University of Wisconsin

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Below, we've summarized immediate action steps shared by the panelists and identified by webinar participants to be taken to advance health equity.

› Examine and restructure the current imbalances of power and influence that produce health inequities.

"Identify where power resides. Figure out who has the power, what they are doing with it, and how it is informing their decisions and the policies they produce." Gigi Barsoum, Founder, Barsoum Policy Consulting Inc.

The first step to shift power to communities is to acknowledge who currently holds the power to make the decisions that cause health inequities. Consider the main actors that control health policies, practices, and systems. It's clear that the government, policymakers, and healthcare institutions and providers - entities that we entrust to balance power and utilize their health expertise for the betterment of all - have tremendous influence on the provision of health services, resources, and more. Explore the history of power and influence in particular communities, states, and the country overall to better understand the systemic oppression and racism toward marginalized communities that has led to their poor health outcomes. Utilize the Three Faces of Power framework to recognize the visible, hidden, and invisible ways that power presents itself and impacts health equity.

Visible
Exercising influence in the political or public arena and among formal decision-making bodies to achieve a particular outcome.

Three Faces of Power

Hidden
Organizing the decision-making environment, including who can access decision making and what issues are being considered by decision-making bodies.

Invisible
Shaping information, beliefs, and worldviews about social issues.

Adapted from Heller et al.'s *Theory in Action: Public Health and Community Power Building for Health Equity*

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› Create an ecosystem of organizations to center communities through collaboration toward health equity.

To advance health equity, the current power imbalances need an overhaul so that the system can work for the people, giving them the power to improve their lives. While all actors involved in the development of health policies, practices, programs, and systems should work to shift power to communities, communities cannot do this work by themselves. Improving health outcomes requires contributions and buy-in from institutions and organizations across all sectors, in collaboration with communities, to make systemic change in all corners of a society. Partnerships that seek to advance health equity must work together within a larger ecosystem that centers the health needs and priorities of communities that are directly impacted by health inequities to build their power. Within the ecosystem, partners need to identify ways to best utilize the strengths and capacities of each organization to target various arenas of change while uplifting community voices. For example, engagements with public health departments can help to create more equitable practices and programs that better serve marginalized groups.

"You need partnership – that's why I always talk about an ecosystem of organizations that centers communities. It's about having all those capacities available so that you can target multiple arenas of change." Gigi Barsoum, Founder, Barsoum Policy Consulting Inc.

Leverage the expertise of researchers and data analysts and conduct community-participatory research to mobilize evidence-based efforts that combat the current health disparities as demonstrated by community-level, state-level, and national-level data. Leverage funds provided by philanthropies and the private sector to increase the ecosystem's capacity to offer widespread, accessible resources and services. The involvement of the private sector in the ecosystem is valuable if they can acknowledge the ways profit-driven interests might negatively impact communities actively work to balance health and profit. Incorporate litigators who can help communities to overcome legal and discriminatory barriers that inhibit progress toward health equity. Collaborations across sectors can help community organizing groups to leverage the resources and knowledge available among their diverse partners that are also committed to improving health outcomes.

› Engage with communities to learn about how they envision a system that prioritizes their lived experiences, perspectives, and health needs.

The current power imbalances do not allow communities to have a voice due to government and health professionals' high position of authority in society. Give members of the community seats at the table alongside policymakers to inform and draft policies that will effectively address the

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determinants of health that produce health inequity. By creating an ecosystem of organizations that aim to advance health equity, with a shared focus on community perspectives and insights, communities will be able to build their decision-making power to promote the wellbeing and prosperity of disadvantaged populations.

Building Community Power: Brick by Brick
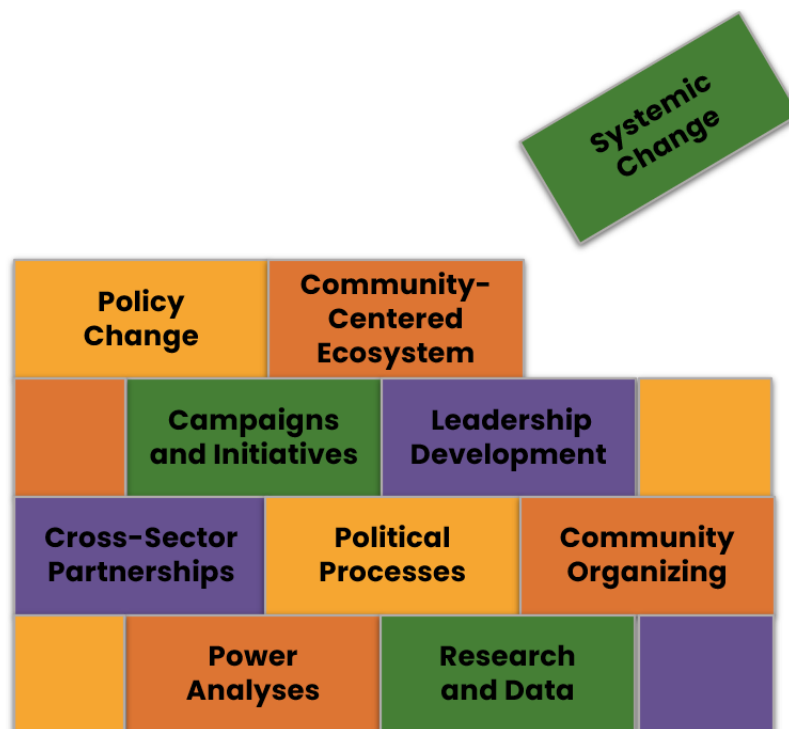
Restructuring power dynamics requires examining how to change the larger system surrounding decision-making for health issues. Shifting political power to communities places value on their perspectives and leverages their lived experiences to develop policies and make decisions. Communities can build their power though leveraging cross-sector partnerships to drive power analyses and engage in the political process in ways that address the structural barriers impeding their path to health equity. Identify various avenues of change through cross-sector collaborations that can help shift power to communities that are impacted by inequities. Through establishing partnerships between communities and outside organizations, partners can collectively work to correct the power disparities that contribute to ongoing cycles of health inequity.

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› Empower community organizing for the advancement of health equity.

When members of a community come together and bond over shared experiences, they can affect greater change toward health equity. Community organizing groups bring people of shared identities together, helping to build and foster relationships among likeminded individuals. Through organizing, members realize the larger systemic health problems they encounter as a collective, marginalized group, identify potential solutions based on their common analysis of the problems, set agendas and strategies for their work, train and develop leaders, and mobilize resources, all for the purpose of improving equity and justice for their community. Such groups also serve as political homes for communities as members can engage in civic learning to gain knowledge on the system and structural causes of inequities and acquire political skills to leverage in campaigns for systems change. It is important for outside organizations and entities to uplift organizing groups' efforts to shift power to communities.

"Organizing brings people of a shared identity together, building relationships among them. It reveals that those people aren't facing individual problems…these are bigger, systemic problems." Jonathan Heller, Senior Health Equity Fellow, Population Health Institute, University of Wisconsin

Community organizing is central to sustainable health equity. Community organizations garner and maintain momentum to build community power and make systemic change to advance health equity for marginalized populations. The work of community organizing groups reflects the perspectives of communities which often go unnoticed and unvalued under the current power imbalances surrounding decision-making in health. Organizations who have historically held more influence over health polices, practices, and resources must recognize the need to step back and let community groups take the lead. Flip the power dynamics by expanding local and grassroots groups' capacity and reach so that they can grow their base and execute more initiatives. Larger originations and those in positions of power can use their platforms to amplify the voices of grassroots organizations doing on-the-ground work to tackle health issues. Larger organizations can work alongside community organizing groups to develop innovative projects and collaboratives that confront the root causes of health inequities by leveraging lived experiences and expertise on community health needs into health programs.

> *"We can all get more together than we can apart. And this is the way we gain power. Power is the ability to achieve purpose, power is the ability to effect change, and we need power."*
>
> – Martin Luther King Jr.

> Involve multiple lenses to address social and structural determinants of health.

Social and structural drivers of health have grown in prominence in national conversations about health equity. To fully address the social and structural determinants of health, it is important to incorporate power analyses in health equity work. First, analyze the power dynamics surrounding particular drivers of health, including the distribution of power among actors involved and how this power both influences and is influenced by the drivers of health. For example, systemic racism has been institutionalized by people in power and enforced by those in power to perpetuate health inequities on far less powerful, marginalized communities. Acknowledge this reciprocal relationship between structural determinants of health and power as each work together to further the cycles of inequities. Identify ways to shift power to communities so that they can be the ones in charge of shaping and correcting the unjust systems to tackle the root causes of health inequities.

"We are now defining structural determinants of health as a set of rules – written and unwritten rules that influence conditions. Power is involved because who gets to set those rules? The rules actually determine who has the power. There is a reciprocal relationship between structural determinants of health and power." Jonathan Heller, Senior Health Equity Fellow, Population Health Institute, University of Wisconsin

In addition to power analyses, it is essential to recognize that drivers of health are inherently political. Don't depoliticize structural determinants of health as they are directly impacted by the political process and the decisions of policymakers. Understand the difference between being political and being partisan. Addressing determinants of health through the political process does not necessarily mean siding with one political party over another but instead realizing that truly making change toward health equity requires engaging in political decisions and policy changes. In doing so, such engagements with the political process can and should be evidence-based.

Deeper Dive

A Framework for Understanding Power Building

Gigi Barsoum, one of the speakers on this webinar, developed a framework for understanding how power is built, leveraged, and expanded over time. To create this framework, she draws on her experiences interviewing and observing organizing groups and their partners involved in campaigning for the elections of reform-minded district attorneys in Cook County, Illinois and Harris County, Texas both of which experienced pivotal moments of systemic racism and injustice in the criminal legal system and subsequent mass protests. Her case studies examined the organizing groups The People's Lobby and Texas Organizing Project to evaluate how they engaged and

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mobilized communities of color in the campaigns for elections that sought to build community power. In her analysis of the work in both counties, the following major themes emerged: the importance of viewing achievements in context of a long-term agenda, the need to create a diverse ecosystem of organizations to advance goals, recognizing that the "wins" are not the end goal, the importance of building power to leverage toward future goals, power is about both capacity and influence, and organizations and their partners will continue to face challenges in co-governing and power building. Her resulting power building framework involves the continuous cycle of building power through ecosystem capacities, exercising power building strategies, having power outcomes, and expanding power growth, in which actors reflect and recalbrate in between each step of the cycle. This power building framework can be incredibly useful for community organizations and their partners within the larger ecosystem in their efforts to center community voices in improving health outcomes for all.

Sourced from: *A New Framework for Understanding Power Building* by Gigi Barsoum

Applying a Power Lens to Public Health

It is critical to consider power relations in public health to advance health and racial equity. The call for public health to help change structural drivers of health through interventions that recognize power, analyze power, and shift power seeks to move beyond consideration into action. For public health to increase its capacity to recognize power, it must understand what power is. The article notes useful frameworks for the public health field to study and use to conceptualize power in order to inform how it recognizes power, including Steven Lukes' three faces of power and Patricia Hill Collins' four domains of power. Then, public health can understand how to better analyze power by creating and answering guiding questions that are informed by such power frameworks, as part of their analyses of the power dynamics that perpetuate health inequities. After recognizing and analyzing power, the authors explain that the public health field needs to identify and execute community interventions that will shift power to the marginalized communities facing health inequities, building power among these communities and amplifying their voice and influence. Such interventions by public health departments can include providing services, build relationships with

marginalized individuals, working with communities to identify root causes and solutions to health inequities, and engaging cross-sector collaborations, such as the Health in All Policies initiative. Public health professionals and actors in other sectors must use a power lens in their efforts and partnerships to advance health equity in order to transform structures of oppression and build power for communities impacted by health inequities.

About P4HE

The P4HE Collaborative harmonizes goals, advances learning, and facilitates collaboration to improve health equity. It is led by the Tulane University School of Public Health and Tropical Medicine and is part of the Tulane Institute for Innovations in Health Equity. Support for this program is provided by ICF. Funding is provided by a grant from the Robert Wood Johnson Foundation.

Foster
the co-creation and spread of knowledge.

Sharpen
our research tools to focus on solutions; facts and stories.

Disrupt
traditional research approaches.

Harmonize
our voices.

Challenge
the status quo.

Shine
light on practices that are indefensible, irrationional and inconsistent.

To learn more about these issues, or Partners for Health Equity's calls to action, a resource library including a full recording of this, and all previous P4HE Webinars, can be found on the P4HE website.

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