# YCCTPP Regional Network Health Equity Planning Tool

Adapted from the Wisconsin Tobacco Prevention and Control Health Equity tool and the Healthy Wisconsin Leadership Institute Community Engagement Toolkit.

***Nothing about us, without us.***

Creating a fair and just opportunity to be healthy should be the goal of any public health effort. Cannabis & commercial tobacco\* prevention and control is no different, and many networks, coalitions and partner organizations across Washington have begun to address cannabis and tobacco-related disparities in pursuit of health equity.

*\*Note: Commercial tobacco includes any product that contains tobacco and/or nicotine, such as cigarettes, cigars, electronic cigarettes, hookah, pipes, smokeless tobacco, heated tobacco, and other oral nicotine products. Commercial tobacco does not include FDA-approved nicotine replacement therapies or traditional tobacco used by American Indians or Alaskan Native tribes.*

Complete the required aspects of the Healthy Equity Planning tool for your Regional Network. Utilize the check list provided to keep track of each task. As per your contracts, the equity planning tool must be completed **90 days after your workplan is approved.**

**Equity Assessment Check List:**

[ ] Assess Network’s Health Equity Competencies

[ ] Select **TWO** Health Equity Competencies to focus on

[ ] Worksheet A: Who is in your network?

[ ] Worksheet B: Centering Voices in Our Work

**Review & disseminate to network:** Building the Network’s Health Equity Knowledge - Resources

|  |
| --- |
| **Health Equity Competency Assessment** |
| **Equity Knowledge** | **Competency Rating:** |
| **Health Equity** |  Comfortable with the basic understanding of health disparities, terminology, and concepts of health equity and social justice |  |
| **Intersectionality** | Basic understanding of intersectional social categorizations and adopting an intersectional approach to health equity and prevention efforts |  |
| **Network Building** | **Competency Rating:** |
| **Recruitment** | Build a network of individuals and organizations that are comprised of and/or serve populations most impacted by substance use related disparities |  |
| **Engagement** | Actively engage individuals and organizations that are comprised of and/or serve populations impacted by substance use related disparities in network planning, decision making and implementation |  |
| **Policy, Systems and Environmental Change** | **Competency Rating:** |
| **PSE Impact** | Assess potential and existing PSE strategies impact on health equity  |  |
| **PSE Education** | Educate decision makers, and decision-making bodies on health equity and how potential and existing policies, systems and environments that contribute to health equity or health disparities  |  |
| **Facilitation** | **Competency Rating:** |
| **Conflict Management** | Facilitate effective, proactive, and healthy conversations, address unhealthy conflicts, and create an inclusive space for network partners |  |
| **Power Dynamics** | Acknowledge interpersonal, institutional, and systemic power differentials and address them within network and workplan activities |  |
| **Youth Leadership** | **Competency Rating:** |
| **Youth Informed** | Ensure youth including representation from youth impacted by substance use related disparities inform and guide network activities  |  |
| **Youth Collaboration**  | Build spaces for youth leadership development and collaboration with youth, youth led organizations and/or coalitions to implement network prevention efforts |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Beginner | Novice | Capable | Confident | Expert |
| This concept is new or unfamiliar. I need a lot of education and guidance putting it into action. | I am starting to understand this concept. I need some support and practice | I understand this concept but still need some support putting it into action | I understand this concept and can put it into action with little to no support | I understand this concept and can put it into action. I could teach someone else about this concept and support them in putting it into action. |

**Our network’s two competencies of focus will be:**

# Worksheet A: Who is in Your Network?

**Purpose:** To think critically about network membership and uncover gaps and opportunities for engagement and recruitment, both in the formal and informal key partners.

**Instructions:** Complete the table below with your network.

|  |
| --- |
| **Population(s) of Focus: [Region]** |
| Describe your region: *(Demographic data disaggregated by race, ethnicity, sexual orientation, gender identity, age, disability status, and socioeconomic status. Information regarding the geographic area, political climate, and social norms.)*  |
| Please list all involved in your network: *(Formal and informal members, subcontractors, etc.)* |
| What are the strengths in the present network membership?*(Who are you able to reach with your network members, what are the strengths of your individual network members)*  |
| What is the WIIFM for your network members? *(WIIFM = What’s in it for me? i.e. decision-making capabilities, resources reflecting population needs, training, support, etc.)* |
| What are the gaps in our present membership?*(Who isn’t at the table? What are the barriers to engagement? i.e. language, technology, capacity, timing, etc.)*  |
| Who else from the region do we need to engage? *(Community Based-Organizations, Schools, Coalitions, Youth-Led/Serving Organizations)* |
| How can we use our strengths to recruit new network members? |

#

# Worksheet B: Centering Voices in Our Work

**Purpose:** To work toward approaches where those who are most impacted are a part of leading, identifying solutions, setting priorities, creating policy agendas, and shifting narrative. Centering voices helps coalitions increase collaboration and avoid tokenism.

Structures for collaborative relationships within networks should be inclusive of key stakeholders while remaining flexible to allow the involvement of organizations and individuals that may or may not have the capacity to participate consistently. These structures should be collaborative and avoid tokenism. They should provide a mechanism for communication and decision making that includes the perspectives of a diverse (race, class, gender, etc.) membership, allows for variations in commitment and pace, and is reliable to support accountability and focus.

**Instructions:** Use the [Centering Voices](https://uwphi.pophealth.wisc.edu/wp-content/uploads/sites/316/2019/04/Centering-Voices-Principles_MATCH_Sept-2018.pdf) document from UW-Madison Population Health Institute and the table on the following page to identify which actions your network will focus on to increase collaboration in your network.

|  |
| --- |
| **Our network will implement a minimum of 4 actions to increase authentic collaboration, share power, and intentionally involve populations of focus:** |
|  |
|  |
|  |
|  |

|  |  |
| --- | --- |
| **Tokenism** | **Collaboration** |
| * Expecting the person from the marginalized group to “fix” your organization’s “diversity problems”
* Inviting a person to diversify your coalition/organization, but not actually taking their advice/guidance
* Saying you want to serve a group/community, but not addressing the needs THEY have identified
 | * Getting investment from your entire network/organization to do better by X community
* Asking for and *accepting* the guidance of the community you want to serve
* Trusting representatives from the community to be the expert on their needs, even when it doesn’t make sense to you
* Showing up for X community in ways THEY agree are helpful
 |
|
| * Accepting funding to serve X community without investing resources into that community
 | * Compensating culturally-specific organizations and members of the community for their time and expertise
* Finding other ways to get funding into the hands of culturally-specific organizations and service providers
 |
| * Saying you want to serve a group/community, but not acknowledging any history of harm
 | * Acknowledging any history of harm and working to make amends on THEIR terms, OR accepting that the people harmed need space
 |
| * Trying to signal your “woke-ness” (“I loved Black Panther,” “My nephew is gay,” etc.)
 | * Building genuine relationships based on shared passion, interests, goals
 |
| * Ignoring or remaining silent when a coalition member causes harm
* Giving up when it gets hard or when you make a mistake
 | * Setting expectations in your network that members will hold each other accountable for mistakes
* Being humble, apologizing for mistakes, and acknowledging you have a lot to learn, but being in it for the long haul
 |
| * Having the attitude that you are trying to help those “less fortunate”
 | * Having the attitude that the community you want to serve has resources and strengths you may not yet understand
* Understanding that equity is not something extra you do on the side; rather, equity is the core of your work and addressed in every aspect
 |

# Building Our Health Equity Knowledge - Resources

The resources outlined below can help you and your organization/network begin, deepen, and sustain your efforts to embed health and racial equity into your work.

|  |  |
| --- | --- |
| **Network Readiness** | **Resources** |
| **We are ready to begin.** | Web-based materials:* [Health Equity Modules](https://uwphi.pophealth.wisc.edu/match/health-equity-training-modules/)

*Note: These modules were originally created by Wisconsin and will be updated and adapted for Washington States needs.* * [Office of Health Equity](https://equity.wa.gov/)
* Implicit bias resources
	+ [Project Implicit](https://implicit.harvard.edu/)

* + [Kirwan Institute Implicit Bias Module Series](http://kirwaninstitute.osu.edu/implicit-bias-training/)

* + [Institute for Humane Education](https://humaneeducation.org/)
* [Native Education Curriculum Materials](https://www.k12.wa.us/student-success/access-opportunity-education/native-education/native-education-curriculum-materials)
* [Pulitzer Center 1619 Project](https://pulitzercenter.org/projects/1619-project-pulitzer-center-education-programming)
* [Racial Equity Tools](https://www.racialequitytools.org/)

Documentaries:* [Unnatural Causes](https://unnaturalcauses.org/)

* [Race: The Power of an Illusion](https://www.pbs.org/race/)

Videos to watch: * Heather McGhee, [Racism Has a Cost for Everyone](https://www.ted.com/talks/heather_c_mcghee_racism_has_a_cost_for_everyone?language=en)
* Kimberlé Crenshaw, [The Urgency of Intersectionality](https://www.ted.com/talks/kimberle_crenshaw_the_urgency_of_intersectionality?language=en#t-1083925)
* [A Tale of Two Zip Codes](https://www.youtube.com/watch?v=Eu7d0BMRt0o)

Resources to explore:* [Haas Institute for a Fair and Inclusive Society](https://vcresearch.berkeley.edu/research-unit/haas-institute-fair-and-inclusive-society)
* [Race Forward](https://www.raceforward.org/)
* [Bay Area Regional Health Inequities Initiative](http://barhii.org/)
* [Policy Link Health Equity Resources](https://www.policylink.org/our-work/community/health-equity/health-equity-resources)
* [Robert Wood Johnson Foundation](https://www.rwjf.org/)
* Fakequity Blog Post: [Hey Orgs, It’s Time to Get Real About Racial Equity](https://fakequity.com/2020/02/27/hey-orgs-its-time-to-get-real-about-racial-equity/%20Listen%20and%20discuss%20this%20podcast%3A%20https%3A//soundcloud.com/alfredomorabia/ajph-october-2019-lingering-imprint-of-slavery-on-american-public-health-english)
* [Health Equity and Social Justice 101](https://www.naccho.org/programs/public-health-infrastructure/health-equity) (NACCHO): Collection of trainings, tools, and readings aimed at advancing the capacity of local health departments to confront the root causes of inequities
* [Social Determinants of Health: Know What Affects Health](https://www.cdc.gov/socialdeterminants/) (CDC): Collection of CDC research and data on the connection between the circumstances under which people live, learn, work, and play, and their health and well-being
* [Health Equity](https://www.apha.org/topics-and-issues/health-equity) (APHA): Collection of issue-specific resources and fact sheets through a health equity lens

Resources that focus on the Histories of Exploitation: * Podcast: [Since 1619: Lingering Imprint of Slavery on American Public Health](https://soundcloud.com/alfredomorabia/ajph-october-2019-lingering-imprint-of-slavery-on-american-public-health-english)
* [8 Ways People of Color are Tokenized in Nonprofits](https://medium.com/the-nonprofit-revolution/8-ways-people-of-color-are-tokenized-in-nonprofits-32138d0860c1)
* [The unbearable whiteness of American charities](https://www.vox.com/future-perfect/2019/7/1/18715513/philanthropy-people-of-color-racial-wealth-gap-edgar-villanueva)
* [3 Ways to Decolonize Your Nonprofit as Told by a Black Queer Feminist Organizer](https://everydayfeminism.com/2018/05/decolonizing-nonprofits/)
* [Beware of Equity Traps and Tropes](http://www.ascd.org/publications/educational-leadership/mar21/vol78/num06/Beware-of-Equity-Traps-and-Tropes.aspx?fbclid=IwAR3BZY8ERwdcJ-DIfRtN05QiLNvRjyJksJ0CJy7doR_8pHDvY3SPtg_FDqc)

Articles to read: * [What is Health Equity?](https://www.rwjf.org/en/library/research/2017/05/what-is-health-equity-.html) (RWJF): Report designed to increase consensus on the meaning of health equity, including essential definitions
* [Power: The Most Fundamental Cause of Health Inequity?](http://www.healthaffairs.org/do/10.1377/hblog20180129.731387/full/) (Health Affairs): Article detailing the importance of understanding and addressing the role of power in health outcomes
* [Beyond Health Care: The Role of Social Determinants in Promotion Health and Health Equity](https://www.kff.org/disparities-policy/issue-brief/beyond-health-care-the-role-of-social-determinants-in-promoting-health-and-health-equity/) (Kaiser Foundation): Issue brief providing an overview of social determinants of health and emerging efforts to address them
* [What Are Health Disparities and Health Equity? We Need to Be Clear](https://journals.sagepub.com/doi/pdf/10.1177/00333549141291S203) (Paula Braveman): Journal article helping to define and distinguish between disparities and equity

Learning, growth, and action are deepened by finding others to learn with and hold you accountable:* [Showing Up for Racial Justice](https://www.showingupforracialjustice.org/)
 |
| **We are ready to go deeper.** | Health equity organizational assessments:* [Racial Equity Readiness Tool](https://www.raceforward.org/practice/tools/workforce-development-racial-equity-readiness-assessment)
* [BARHII Organizational Assessment](http://barhii.org/resources/barhii-toolkit/)

Organizational Practices:* [Deep Diversity Inclusive Workplace Continuum](https://drive.google.com/file/d/1FtOE0Cw5LklTV3x0ofySzAqB4iKQIA-e/view?usp=sharing)
* [Othering and Belonging Institute](https://belonging.berkeley.edu/)

Training opportunities and training plans:* [YWCA Racial Justice Programs](https://www.ywcampls.org/racial-justice/)
* [Roots of Health Inequity](http://www.rootsofhealthinequity.org/)
* [Health Equity & Environmental Justice 101](https://healthequityguide.org/case-studies/colorado-organizes-health-equity-and-environmental-justice-101-training/)

Establishing a learning community or community of practice:* [Government Alliance on Racial Equity](https://www.centerforsocialinclusion.org/our-work/our-programs/government-alliance-race-equity/)

Explore resources from the [Health Equity Guide](https://healthequityguide.org/), including [Strategic Practices](https://www.unescap.org/sites/default/files/pub_2377_ch6.pdf) and [Case Studies](https://en.wikipedia.org/wiki/Case_study) * Recommended Strategic Practice for this stage: [Build Organizational Capacity](https://www.councilofnonprofits.org/tools-resources/what-capacity-building)
 |
| **We are ready to sustain efforts.** | Health and racial equity organizational strategic plan:* [Racial Equity Action Plan](https://www.racialequityalliance.org/resources/racial-equity-action-plans-manual/)

Explore resources from the [Health Equity Guide](https://healthequityguide.org/), including [Strategic Practices](https://www.unescap.org/sites/default/files/pub_2377_ch6.pdf) and [Case Studies](https://en.wikipedia.org/wiki/Case_study)* Recommended Strategic Practices for this stage: [Prioritize Upstream Policy Change](https://healthequityguide.org/strategic-practices/prioritize-upstream-policy-change/) and [Change Internal Practices and Processes](https://www.smartsheet.com/8-elements-effective-change-management-process)
* Index of [resources](https://healthequityguide.org/resources/) from other organizations
 |