



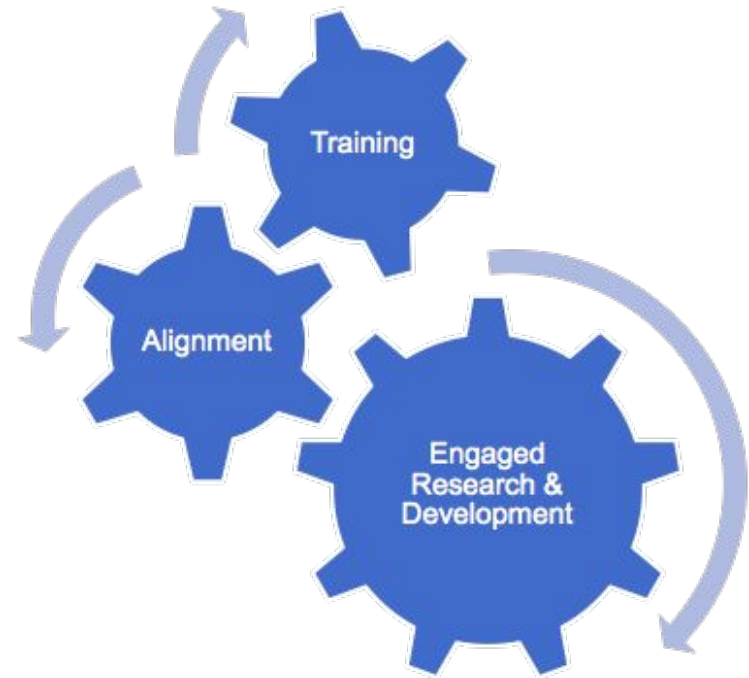
Health Equity Reflections

**Northwoods Northwest
Region**
May 13, 2021

Lesley Wolf (she/her/hers)

Mobilizing Action Toward Community Health (MATCH) Group

Through a field building approach, we work to *evolve practice, focus priorities* and *shift power* to support collective action on root causes of health and equity.





Our Vision

We work toward a world in which we value each other, honor our connectedness, and build communities where everyone can thrive.

Our Values

Collaboration – Build and sustain diverse partnerships that prioritize respect, mutual benefit and meaningful engagement.

Integrity – Ensure that we are honest, accountable and responsible with the power we have.

Excellence – Aim high, seek feedback, and continually improve.

Innovation – Create, test, refine, and promote new ideas and approaches at the leading edge.

Inclusion – Ensure work has a wide reach, is meaningful, accessible and impactful.

Courage – Seek diverse perspectives and experiences that challenge our assumptions and worldviews, recognize systemic harms and commit to making positive change, even when it's uncomfortable.

Our Vision

We work toward a world in which we value each other, honor our connectedness, and build communities where everyone can thrive.

Land acknowledgement

- In Wisconsin, we are on the ancestral lands of the:
 - Ojibwe
 - Dakota
 - Menominee
 - Ho-Chunk
 - Potawatomi
- Today, WI is home to 11 Federally recognized tribes and Brothertown Nation, who is not currently Federally or State recognized.

Resources:

- Honor Native Land: A Guide and Call to Acknowledgement. PDF can be accessed [here](https://usdac.us/nativeland). Link: <https://usdac.us/nativeland>.
- UW Land Recognition. Black Cultural Center and Multicultural Student Center. PDF can be accessed [here](#).
- Wisconsin First Nations Map: <https://wisconsinfirstnations.org/map/>



Operating Agreements

- **Complexity:** A truth is not the same as The Truth
- **Confidentiality:** Share learning, not stories
- **Accountability:** Trust intent, acknowledge impact
- **Curiosity:** Struggle together
- **Voice:** Participate thoughtfully, make space
- **Experimentation:** Lean into discomfort
- **Flexibility:** Practice both/and thinking
- **Presence:** Stay in the room
- **Non-Closure:** Allow things to be unfinished, “first drafts”
- **Others?**



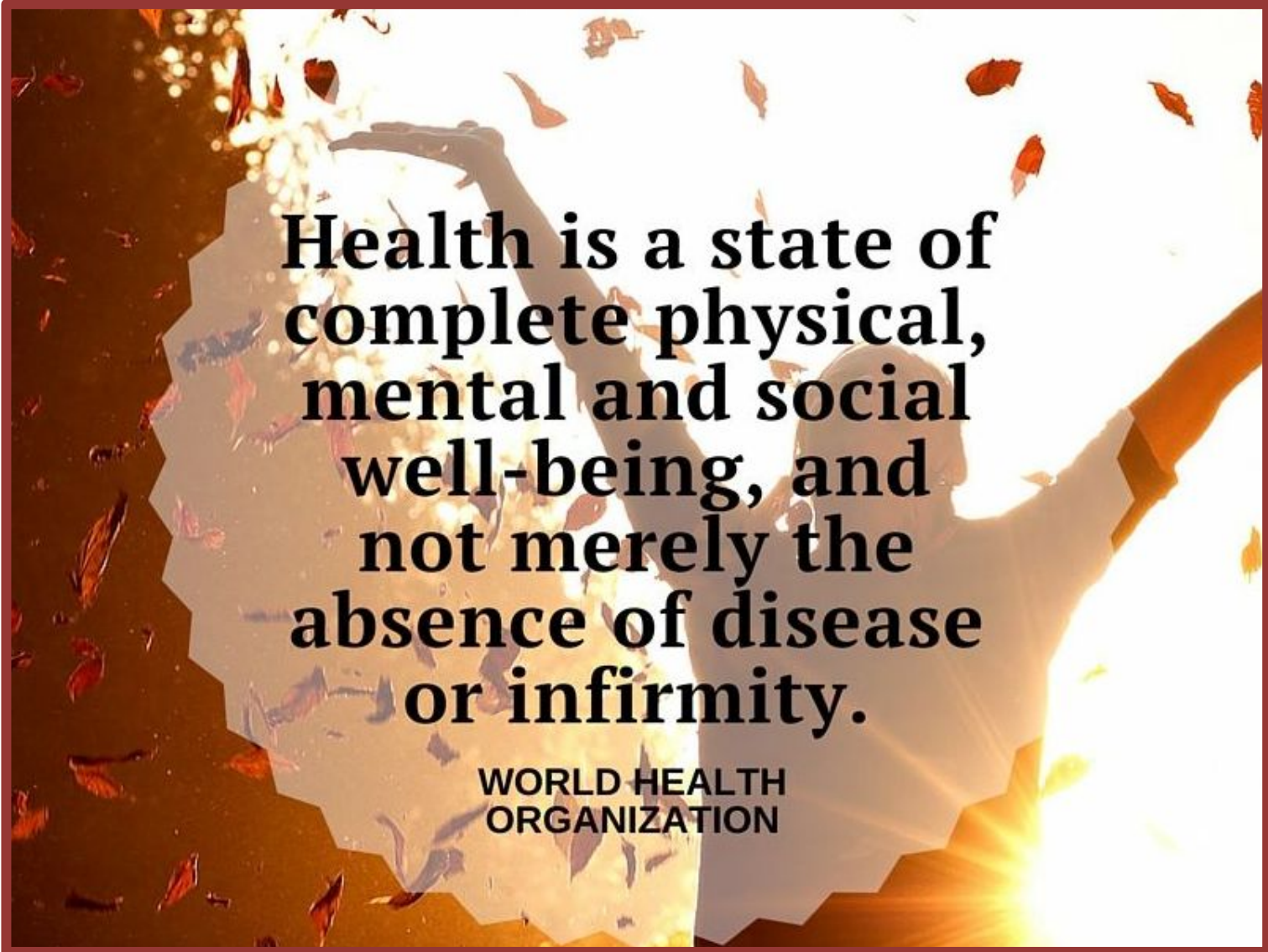
Group Introductions

- Name
- Community
- **What does it mean to be healthy (looks like and feels like)? What do you imagine when you think of a healthy community?**



Photo by [Eyitayo Adekoya](#)

What is Health?



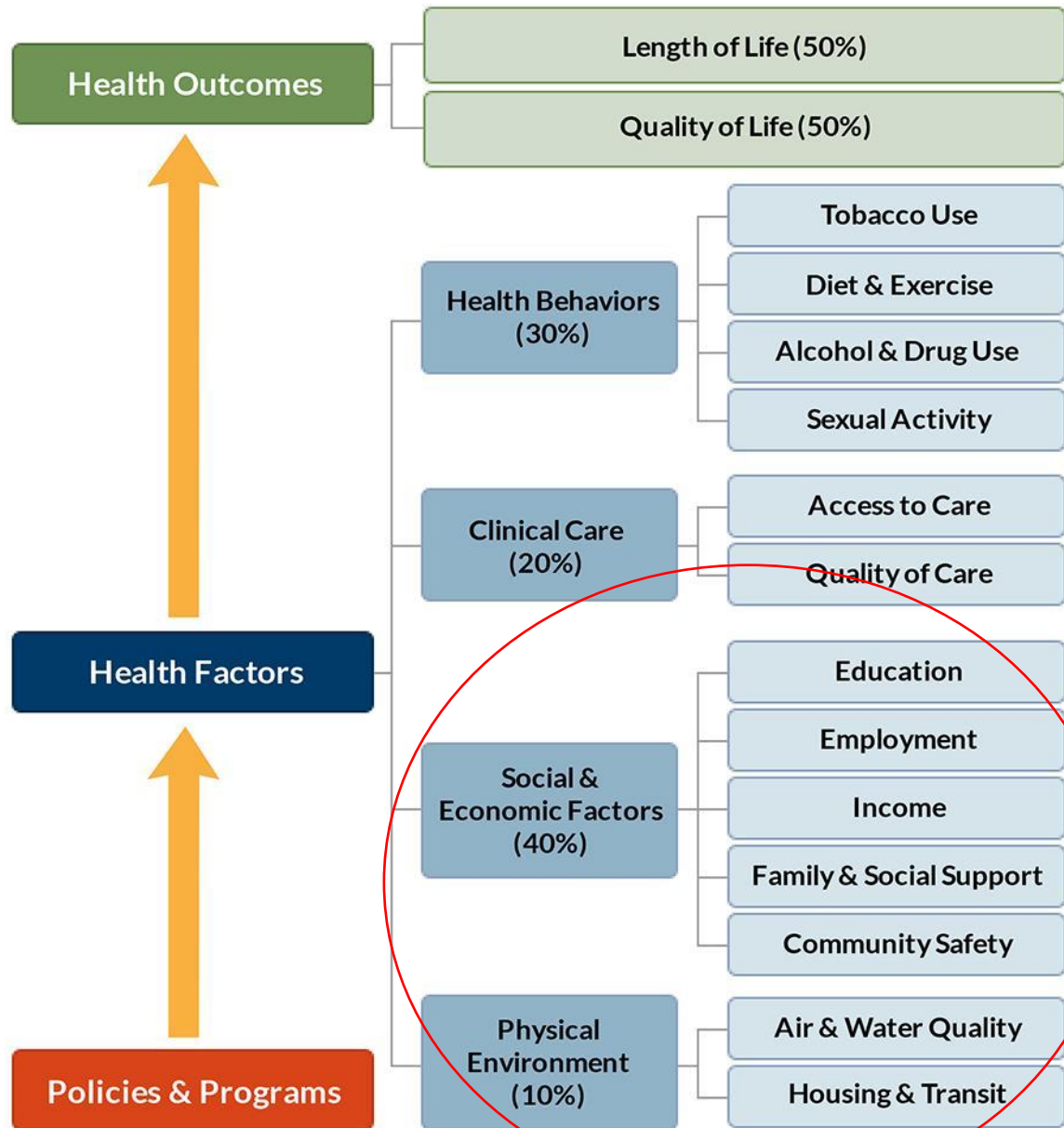
**Health is a state of
complete physical,
mental and social
well-being, and
not merely the
absence of disease
or infirmity.**

**WORLD HEALTH
ORGANIZATION**

Social Determinants of Health

Conditions in which people are born, grow, live, work and age - including health systems

Shaped by distributions of **power** - which drives allocations of dollars and resources at local, national, and global levels







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Reflection:

What opportunities have you and your family had to be healthy?



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Reflection:

What kinds of personal and community resources does your family have access to that helps you be healthy? (Think about social, economic and environmental conditions)



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Reflection:

Who are the people in your community who can't access these opportunities and resources? Who are the most vulnerable in your community?

Framing Health Equity



Definitions

Health Disparity

A population-based difference in health outcomes (e.g., women have more breast cancer than men).

By itself, *disparity* does not address the chain of events that produces it.

- MN Dept. of Health, 2015

Health Inequity

A health disparity based on unfair, socially-determined circumstances (e.g. American Indians have higher rates of diabetes due to the disruption of their way of life).

Because health inequities are socially determined, change is possible.

- MN Dept. of Health, 2015

Health Equity

Health equity means that everyone has a fair and just opportunity to be healthier. **This includes a fair, just distribution of the social resources and social opportunities and requires removing obstacles to health** such as poverty, discrimination, and their consequences, including powerlessness and lack of access.

[Braveman P](#), [Arkin E](#), [Orleans T](#), [Proctor D](#), & [Plough A](#), 2017; ASTHO, 2000

Equality



Equity



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It's not Either/Or its MORE!

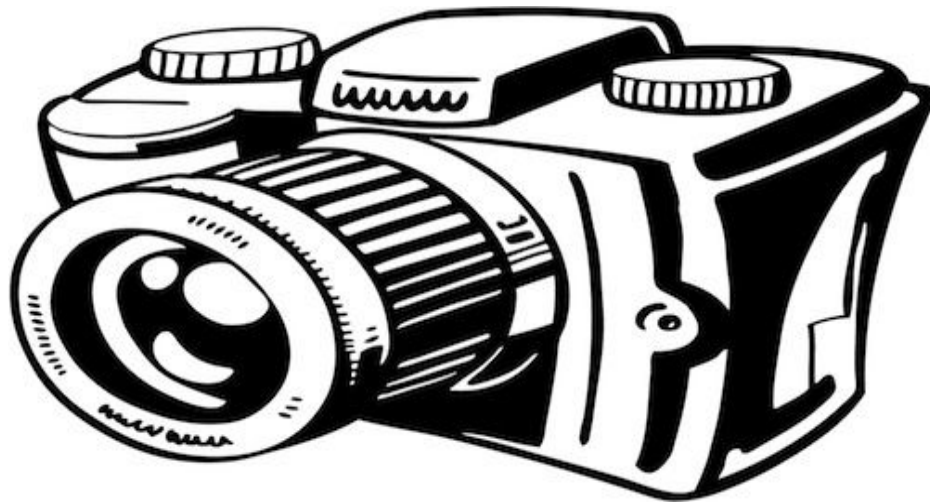


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Reflection:

Think of an example where you or the coalition has use strategies that have been unequal in order to ensure sufficiently similar opportunities for individuals and communities to achieve their full health potential?

A health equity lens requires adjusting how we look at and consider individual and population health issues *and* solutions – we need to consider power.





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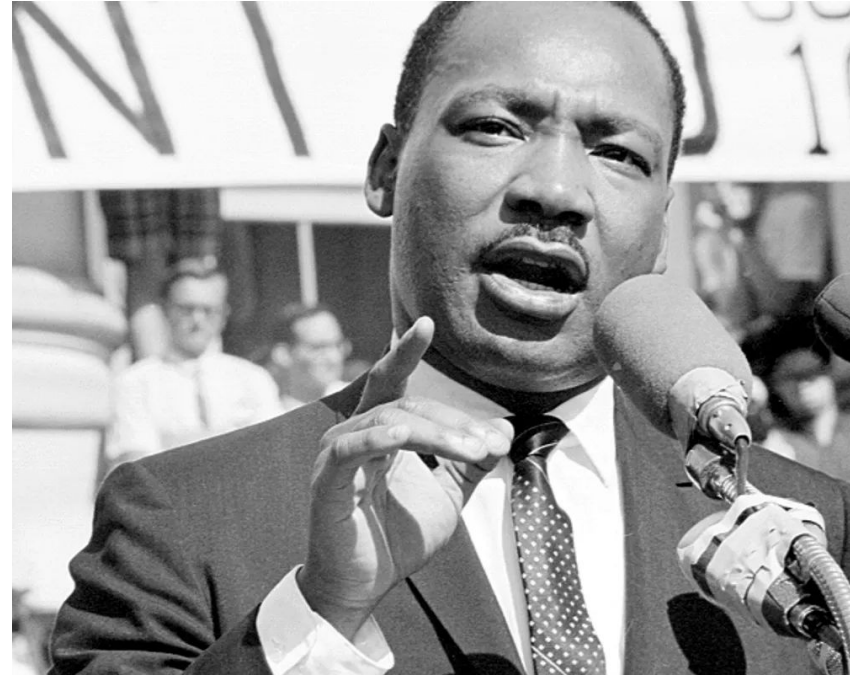
Reflection:

What does power mean to you?

***“Power, properly understood,
is the ability to achieve
purpose.***

*It is the strength required to
bring about social, political, or
economic changes.*

*In this sense power is not only
desirable but necessary in
order to implement the
demands of love and justice. ”*



wages

WORK

education

HOUSING

food

safety

**“POWERLESSNESS IS MAKING
US SICK.”**

STRESS

DR. ANTHONY ITON

incarceration

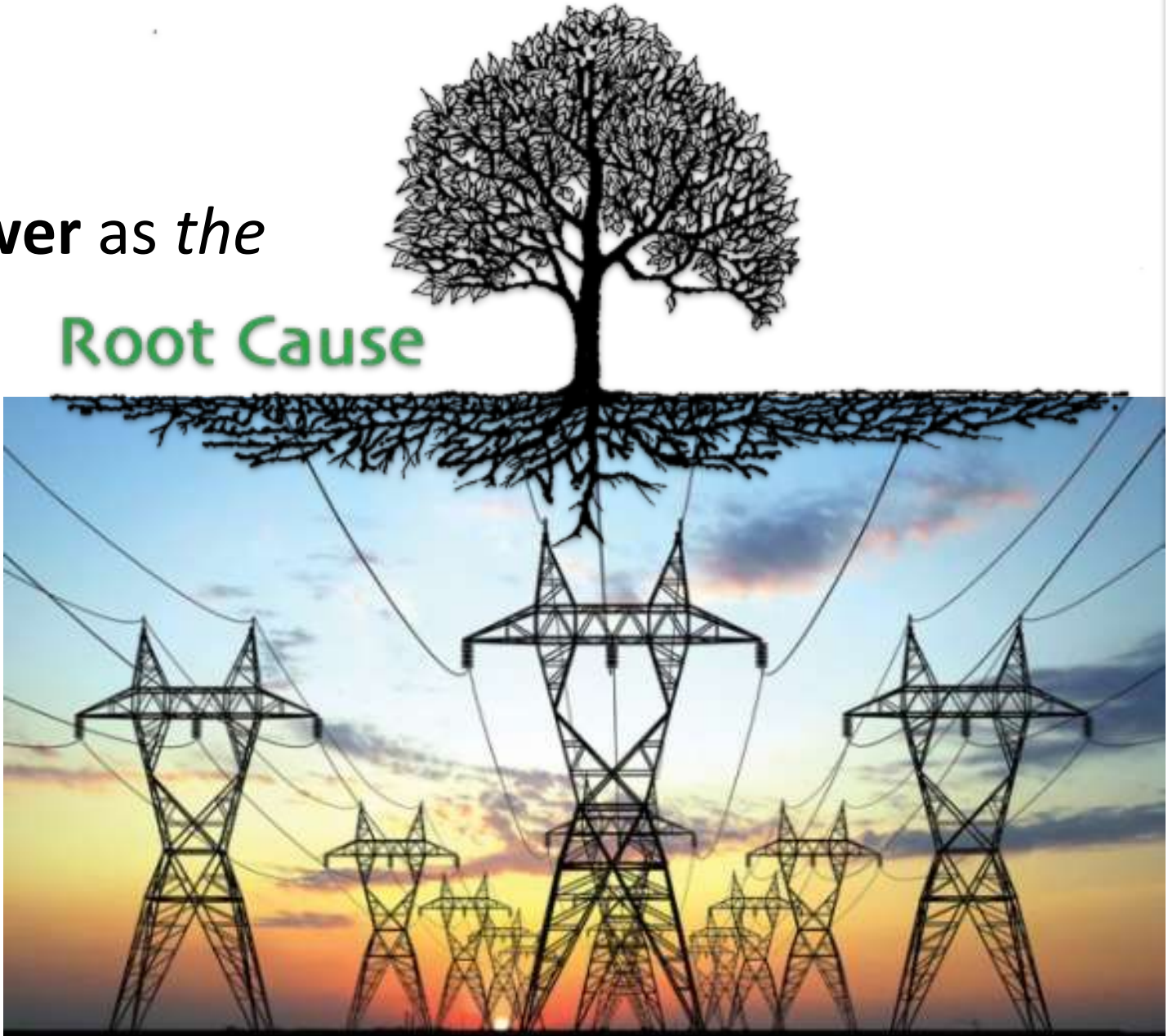
NEIGHBORHOOD

access

WEALTH

Power as *the*

Root Cause



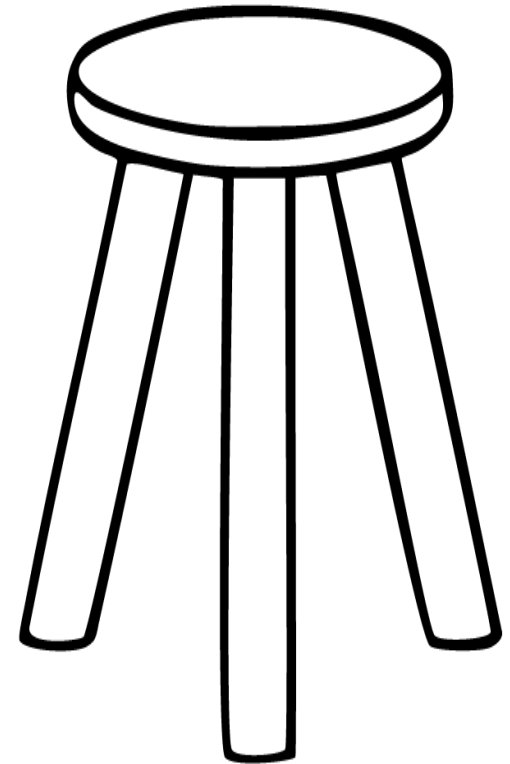
Advancing the conditions for all communities to flourish

Equitable Conditions of Power

What: Target root causes and social determinants

Who: Engage and build capacity with affected communities and work across sectors

How: Ensure structures, systems and processes that embed equity (e.g. democratic decision-making) at all levels



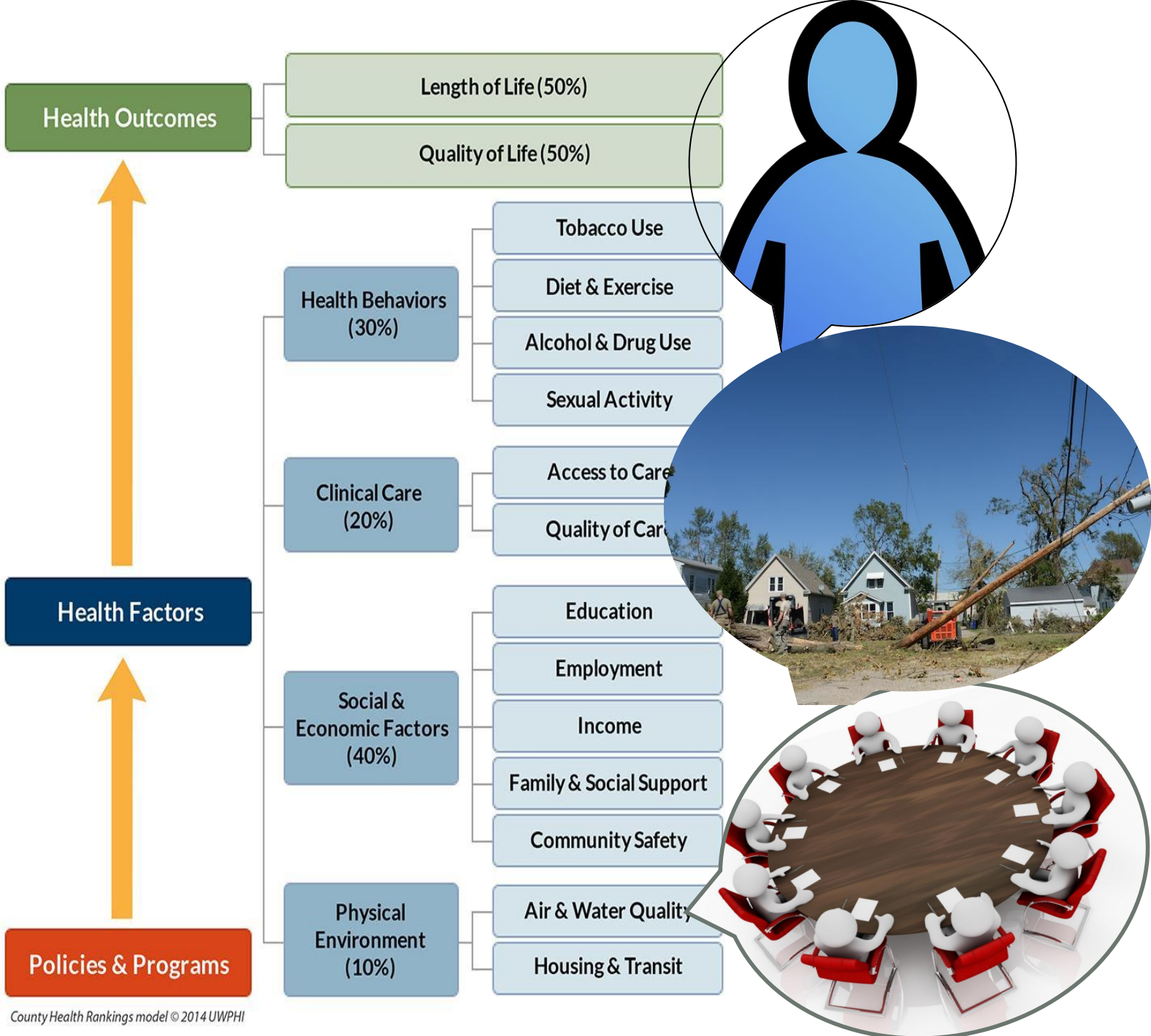
Equitable Conditions of Power



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Reflection:

What is an issue that you are trying to address? What ways is it being addressed?





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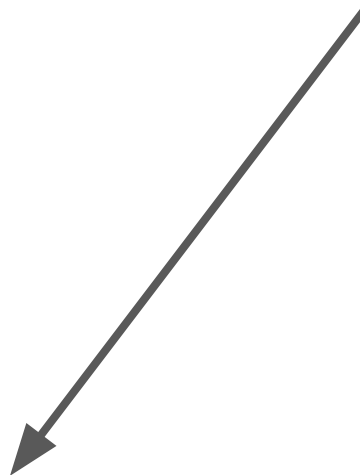
Reflection:

What are the inequities related to the issue that you are trying to address?

Inequities often have similar **root causes**

Rural counties: Unable to find child care **within a reasonable distance** from my home

Urban counties: Unable to find child care **I can afford**



A shortage of quality, affordable child care is negatively impacting communities across Wisconsin



Reflection:

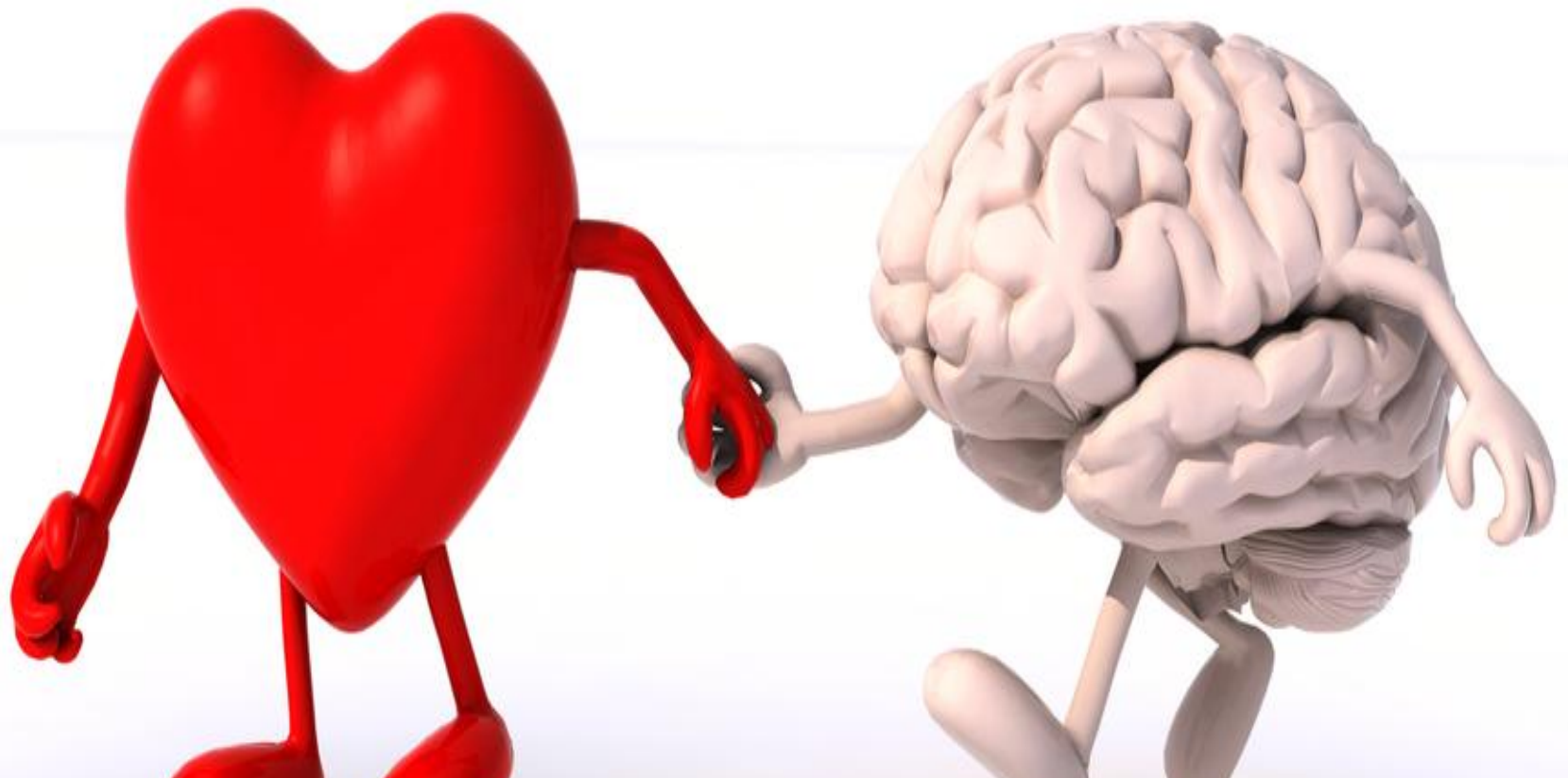
What are the root causes that relate to the issue? What needs to be considered to address root causes and their inequitable distribution across the population?

Equity Leadership

“Health equity is an ethical principle to guide our work. It requires value judgements related to thorny concepts including fairness, justice, power and privilege.”

--Sheri Johnson, PHI Director





**Motivation for Change
is Self Interest**

Self-interest is your concern for your priorities, your health and safety, and those of people that are connected to you (friends, family, neighbors).



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Reflection:

What is your personal stake in advancing health equity? Why is this so important to you?



Reflection:

What is your greatest challenge to bringing a health equity lens into your work?

What is your greatest opportunity to bring a health equity lens into your work?



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Reflection:

What are the spaces in which you have power/influence?



Reflection:

What's your next step in your work (and your personal life) to address health equity?

From Service to Social Justice

Evolving from helping communities *beat* the odds, to **WORKING WITH** communities to CHANGE the odds

--THRIVE Training





Questions?

References

Adelman, L. (2007). Unnatural causes: Is inequality making us sick?. *Preventing Chronic Disease*, 4(4).

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