

Sacramento County Racial Equity Summit

From Words to Actions to Outcomes

10/18/2023

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Office of Health Equity

California Department of Public Health

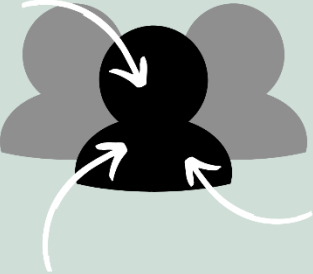
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PRECISE IMPACT

PRECISELY IMPACTS THE RACIALLY MARGINALIZED GROUP(S)




SYSTEMS CHANGE

FOCUSSES ON CHANGING POLICIES, SYSTEMS, OR ENVIRONMENTS, AS OPPOSED TO CHANGING PEOPLE



LONG TERM

SUSTAINABLE AND/OR INSTITUTIONALIZED FOR LONG-TERM IMPACT



REPARATION

SEEKS TO REPAIR HISTORICAL INJUSTICES BY SHIFTING RESOURCES, POWER, & OPPORTUNITIES TO RACIALLY MARGINALIZED GROUPS



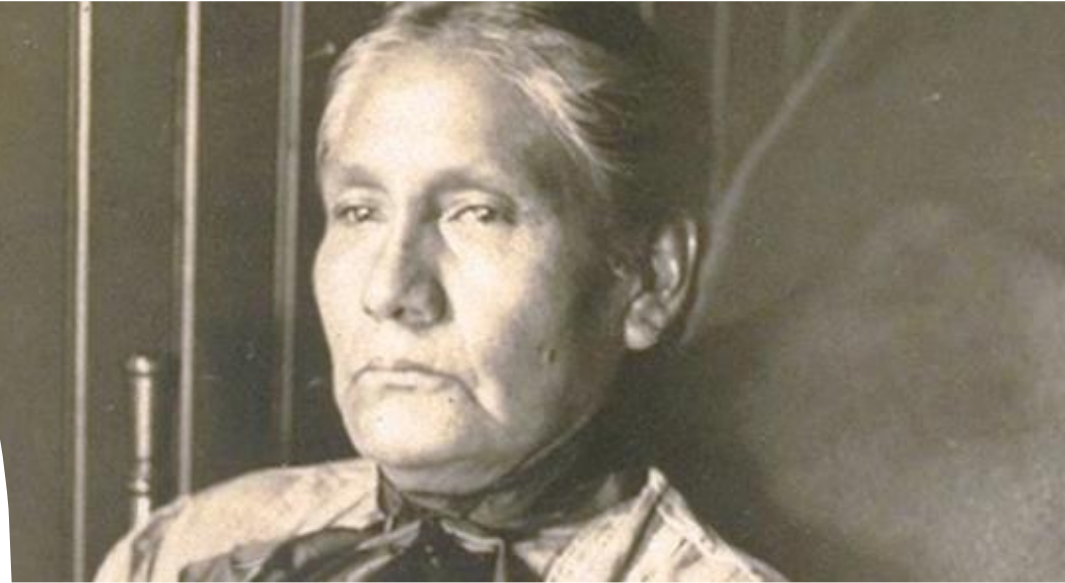
A solutions-centered framework for public health practitioners to directly address racism as a root cause in health disparities

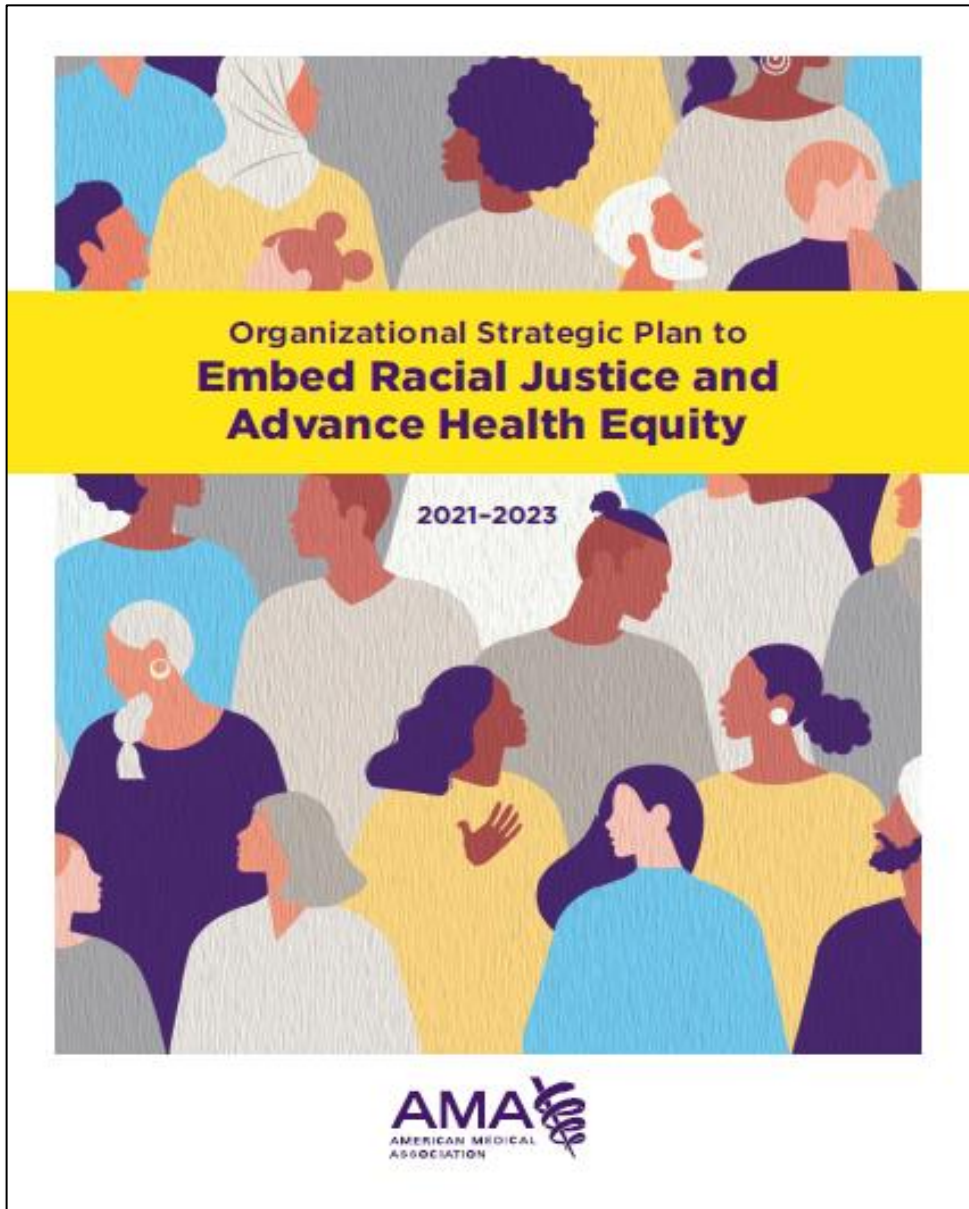
Malawa, Z., Gaarde, J., & Spellen, S. (2020). Racism as a root cause approach: A new framework. *Pediatrics*, 147(1), 1–6. <https://doi.org/10.1542/peds.2020-015602>

Land and Labor Acknowledgement

We acknowledge that we are all living off the taken ancestral lands of Indigenous peoples for time immemorial. We acknowledge the extraction of brilliance, energy and life for labor forced upon people of African descent for more than 400 years.

We celebrate the resilience and strength that all Indigenous people and descendants of Africa have shown in this country and worldwide. We carry our ancestors in us, and we are continually called to be better as we lead this work.





"We envision a nation in which all people live in thriving communities where resources work well; systems are equitable and create no harm nor exacerbate existing harms; where everyone has **the power, conditions, resources** and opportunities to achieve optimal health; and **all physicians are equipped with the consciousness, tools and resources to confront inequities and dismantle white supremacy, racism, and other forms of exclusion and structured oppression**, as well as embed racial justice and advance equity within and across all aspects of health systems"

Let's Get Humble California

Cultural humility—commitment to personal and institutional transformation by realizing and redressing power, privilege, and prejudice

In 1998, Melanie Tervalon and Jann Murray-García published a groundbreaking article that challenged the concept of “cultural competency” with the concept of “cultural humility” (Tervalon, 1998). Accepting cultural humility means accepting that we can never be fully culturally competent. Cultural humility means

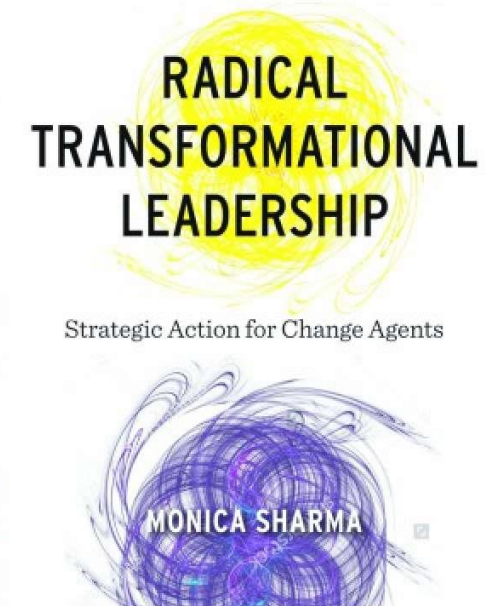
1. committing to *lifelong learning* and *critical self-reflection*;
2. realizing our **power, privilege, and prejudice** (bias);
3. redressing *power imbalances* for *respectful partnerships*; and
4. promoting *institutional accountability*.

Humility is the noble choice to forgo your status, and to use your influence for the good of others before yourself. It is to hold your power in service of others. (Dickson, 2011).

INSPIRED BY DR. MONICA SHARMA, FORMER DIRECTOR OF UNITED NATIONS LEADERSHIP DEVELOPMENT

Radical transformational leadership is leading change from the universal values of dignity, equity, compassion and humility to transform self, people, systems and cultures towards equity, antiracism, and sustainable results.

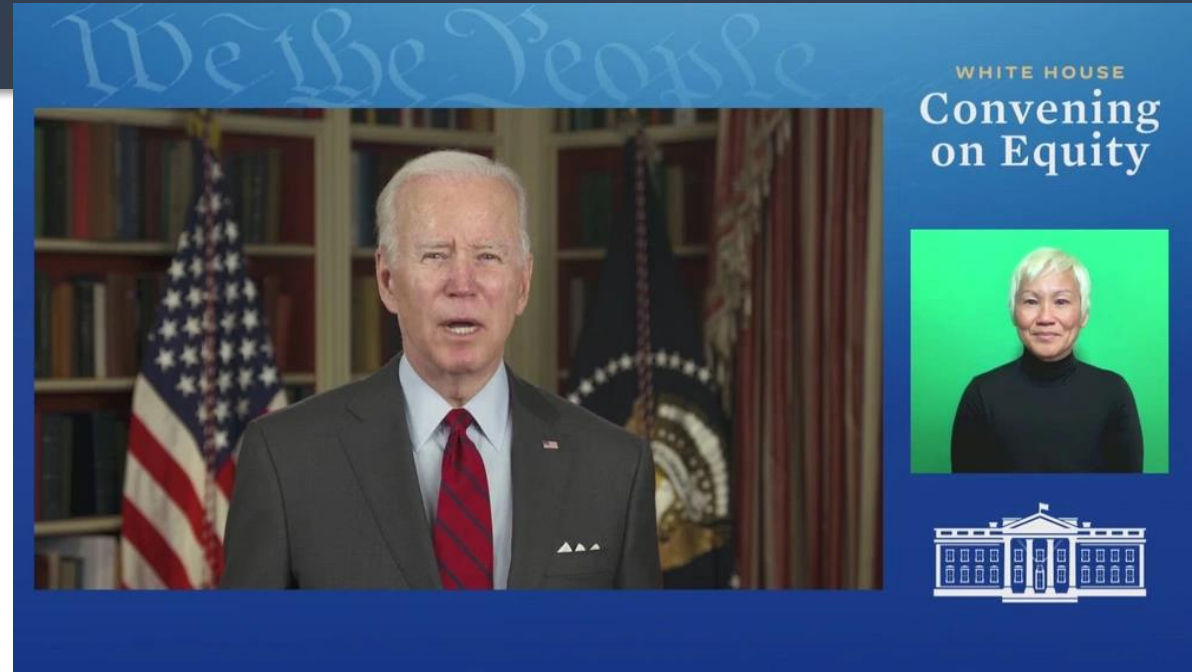
Universal values are values that apply to everyone, everywhere, and leaves no one behind, including your worst enemy. Universal values enable us to transcend differences, to find common ground, and to solve problems together. We strive to embody and promote universal values in every interaction and in every conversation.



<https://www.radicallytransform.org/>

White House Virtual Convening on Equity

In April 2022 the White House held a [virtual convening](#) to announce the release of its racial justice and equity plan.



This proceeds President Biden's signed January 2021 [executive order](#) on Advancing Racial Equity & Support for Underserved Communities. In this order more than 90 federal agencies have come together to release over 300 concrete & intentional actions in addressing systematic barriers to equality, opportunity and prosperity nationwide.



Office of Governor
GAVIN NEWSOM

Governor's "Equity" Executive Order

9/13/2022

1. Equity in Strategic Plans (mission, vision, goals, data tools, policies, programs; engage communities)
2. Diversity in state hiring
3. Apply for Federal Infrastructure Investment and Jobs Act (IIJA)
4. Equity in Procurement through training for the Target Area Contract Preference Act (TACPA)
5. California Health and Human Services Agency and Government Operations Agency to develop recommendations to improve language and communications in state government services and program
6. Improve programs utilization, review regulations, and address pay disparities through authority of Civil Rights Department
7. Develop standardization of state-wide equity data
8. Creates a Racial Equity Commission in the Office of Planning and Research





California Task Force to Study and Develop Reparation Proposals for African Americans

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- VII. Racism in Environment and Infrastructure.....
- VIII. Pathologizing the Black Family
- IX. Control Over Creative Cultural and Intellectual Life.....
- X. Stolen Labor and Hindered Opportunity
- XI. An Unjust Legal System.....
- ★ XII. Mental and Physical Harm and Neglect.....
- XIII. The Wealth Gap
- XIV. Key Findings.....
- XV. Preliminary Recommendations for Future Deliberation.....

Chapter 12 - Mental and Physical Harm and Neglect .

- I. Introduction.....
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- III. Health and Healthcare during Slavery.....
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- VII. Medical Experimentation
- VIII. Medical Therapies, and Technology.....
- IX. Mental Health
- X. Reproductive and Gender Identity Responsive Health
- XI. Child and Youth Health
- XII. Public Health Crises
- XIII. Impact of Racism on Black Health
- XIV. Conclusion



Our North Star

- Where equity is not just a word or a concept but the core value
- **Where we constantly pursue social and racial justice by not only lifting all boats but especially those boats that need to be lifted more**
- Where we **prioritize prevention and the upstream factors** that impact and individual's health and well being
- Where necessities like housing and childcare are complimented by access to physical and behavioral health services
- Where we see the whole person and where **programs and services address the social, cultural and linguistic needs of the individuals they serve**
- Where climate threats collide with forward leaning health practices and policies that visibly turn the tide toward **community resilience**



Strategic Priorities

Person Centered. **Equity Focused**. Data Driven.

Create an Equitable Pandemic Recovery

- Strengthen California's safety net programs to disrupt the inequities and disparities that fueled the pandemic in order to lift families out of poverty and create economic self-sufficiency.
- ★ Work to achieve a California where race, ethnicity, gender identity, sexual orientation and other forms of social categorization no longer predict a person's or community's health and life outcomes.
- ★ Build new and innovative paths to train and hire culturally competent workers to meet the full diversity of California's health and human services needs.
- ★ Develop a 21st century public health system that builds on a core set of functions that are disease agnostic and support the work of local public health departments.



The Office of Health Equity

- **Vision** - **Everyone** in California has equal opportunities for optimal health, mental health, and well-being.
- **Mission** - Promote equitable social, economic, and environmental **conditions** to achieve optimal health, mental health, and well-being for all.
- **Central Challenge** - Mobilize understanding and sustained commitment to **eliminate** health inequity and improve the health, mental health, and well-being for all.
- **Statute** – Established in 2012, as authorized by Section 131019.5 of the California Health and Safety Code, to provide a key leadership role to reduce health and mental health disparities to disproportionately affected communities.





Office of Health Equity Priorities

- 1. Advancing Racial & Social Equity in Government**
- 2. Behavioral Health Equity**
- 3. Climate Action for Health Equity**
- 4. Equitable COVID Recovery through Health in All Policies, Cross-Sector Planning and Partnerships**
- 5. Housing and Homelessness**

EQUITY

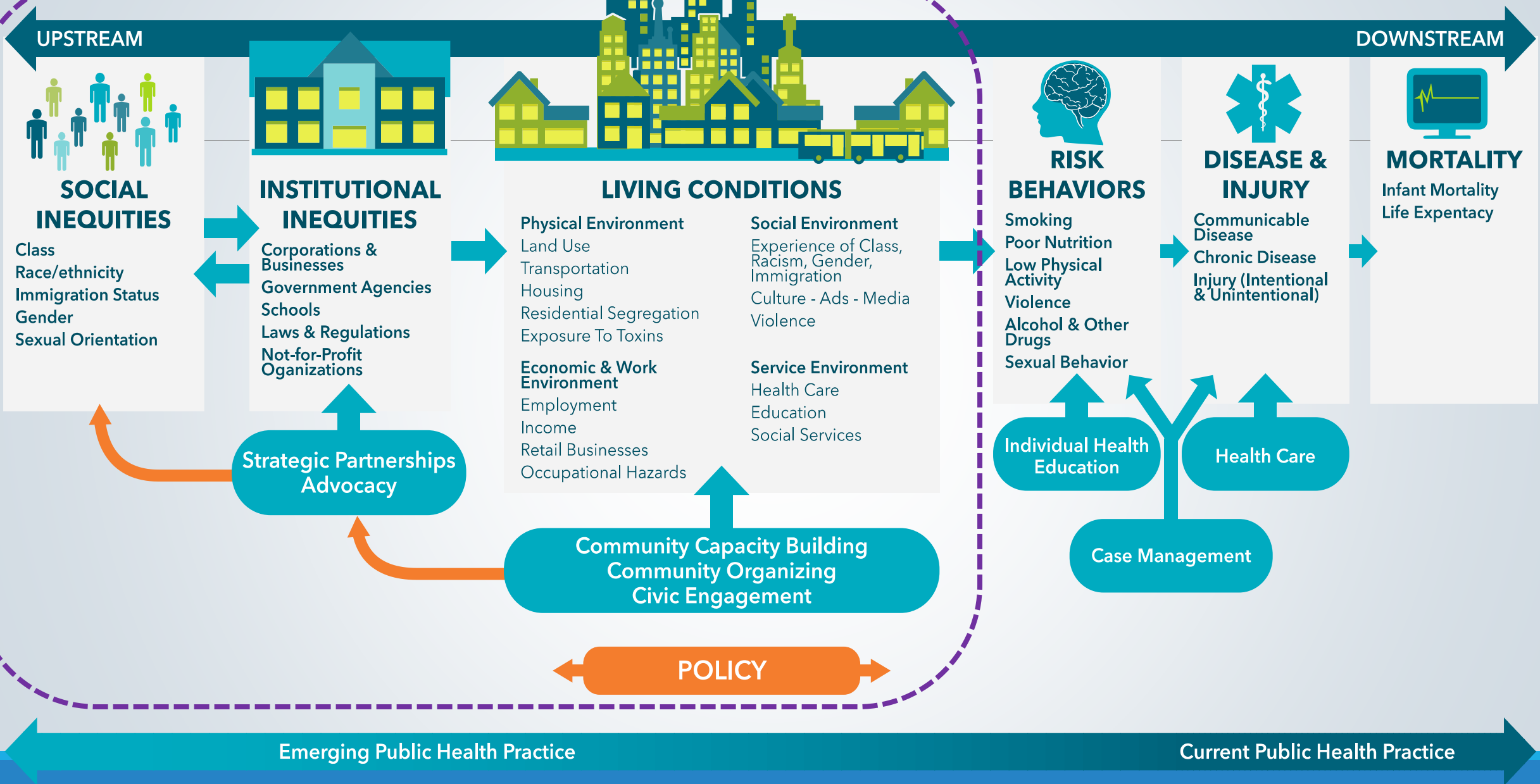
- Recognizes that because different individuals or groups have **different histories and circumstances**, they have **different needs** and **unequal starting points**.
- Using an equity approach, individuals and groups receive different resources, opportunities, support, or treatment **based on their specific needs**. By providing what each individual or group needs, they can have **equal or fair outcomes**.

RACIAL EQUITY



- Racial Equity is the condition achieved when race can **no longer** be used to **predict life outcomes** and conditions for **all groups** are **improved**.
- What would exist if our society no longer assigned advantages and disadvantages, through society's institutions, policies, practices and cultural beliefs, based on a person's skin color. Racial equity looks at the **root causes** of inequities, not just the manifestation of the inequities itself, and focuses on the **restructuring of institutional policies and practices and cultural beliefs**. In this way, racial equity is central to health equity and achieving the healthiest nation. To achieve racial equity, we must address injustices caused by racism and support **actions at all levels** to ensure equal opportunity for all." (*American Public Health Association*)

A PUBLIC HEALTH FRAMEWORK FOR REDUCING HEALTH INEQUITIES
BAY AREA REGIONAL HEALTH INEQUITIES INITIATIVE



Governing for Racial Equity

Leading with Race because:

Racial inequities are structural

Leading with an institutional and structural approach on race makes room for an intersectional approach

Capital Cohort on Race and Equity

community of California state government leaders integrating racial equity into institutional culture, policies, and practices

500+ in 50

state departments, agencies, offices, boards, and commissions

Government Alliance on Race & Equity

network of governments working to achieve racial equity and advance opportunities for all

98

members

44

cities

23

counties

11

state departments

REACH ACROSS CALIFORNIA STATE GOVERNMENT

Since 2018, over 500 people in 50 California state departments, agencies, offices, boards, and commissions have enrolled in State of Equity's Capitol Collaborative on Race & Equity (CCORE) capacity building program:

- Department of Finance
- Health and Human Services Agency
 - Department of Public Health
 - Department of Aging
 - Department of Developmental Services
 - Emergency Medical Services Authority
 - Department of Health Care Services
 - Department of Managed Health Care
 - Department of Rehabilitation
 - Department of State Hospitals
 - Office of the California Surgeon General
- Department of Motor Vehicles
- Department of Health Care Access and Information
- Department of Social Services
- Conservation Corps
- Department of Parks and Recreation
- Department of Aging
- Department of Conservation
- Conservation Corp
- Fi\$Cal
- Department of Fish and Wildlife
- Department of Food and Agriculture
- Department of Forestry and Fire Protection
- Housing Finance Agency
- Mental Health Services Oversight and Accountability Commission
- Governor's Office of Planning and Research
- Public Utilities Commission
- Tahoe Conservancy
- Transportation Agency
 - High Speed Rail Authority
 - Department of Motor Vehicles
 - Highway Patrol
 - New Motor Vehicle Authority
 - New Motor Vehicle Authority
 - Department of Transportation
- Transportation Commission
- Department of Water Resources
- Arts Council
- Coastal Commission
- Department of Public Health
- Department of Housing and Community Development
- Department of Transportation
- Department of Education
- Department of Correction and Rehabilitation
- Department of Community Services and Development
- Department of Social Services
- Environmental Protection Agency
 - Air Resources Board
 - Department of Resources Recycling and Recovery
 - Department of Pesticide Regulation
 - Department of Toxic Substances Control
 - Office of Environmental Health Hazard Assessment
 - State Water Resource Control Board
- State Lands Commission
- Strategic Growth Council
- Governor's Office of Planning and Research

OUTCOMES FROM CA GOV PARTNERS (2020-PRESENT)

Racial Equity Structures: Government partners have established a range of new organizing structures, with support from State of Equity.

- All 50 participating organizations have established racial equity action **teams** with **staff leads and executive sponsors**
- Strategic Growth Council's **Racial Equity Working Group** engages representatives of 7 cabinet-level Secretaries to coordinate racial equity action and leadership
- Governor's Office of Planning and Research is establishing a statewide **Racial Equity Commission**
- California Department of Food & Agriculture has established a BIPOC Advisory Committee
- California EPA's "Cross-Boards, Departments, and Offices Racial Equity Working Group" addresses Workforce Equity, Workforce Capacity, Language Access, Data, and Communications

OUTCOMES FROM CA GOV PARTNERS (2020-PRESENT)

Budget, Staff Positions, and Program Priorities: Government partners have established a range of new staff positions, budget allocations, and supported projects to advance their racial equity work, with support from State of Equity.

- Government Operations Agency (GovOps) established a Statewide Chief Equity Officer position
- Caltrans established a new [Office of Equity](#), including 10 positions
- California Health and Human Services Agency established a Chief Equity Officer position and required all their departments to also identify **Chief Equity Officers**. An internal Equity Dashboard is live.
- Department of Finance is developing **budget tools** and capacity to support equity in the budget process
- Strategic Growth Council's public-facing [Racial Equity Resource Hub](#) disseminates contributions from across state agencies



CalHHS Agency Equity Infrastructure

Chief Equity Officers and JEDI (Justice, Equity, Diversity, Inclusion) Committee



A Vision of Racial and Health Equity for All Californians

Realizing the California Health and Human Services Agency's (CalHHS) vision for a healthy California for all where equity is not just a word or concept but the core value.



Press Release

Resources



Getting Started

Explore our Resource Hub 101 Guide

[more info](#)



Creating Your Roadmap

Explore Racial Equity Action Plans and Statements

[more info](#)



Diving Deeper

Explore resources that provide in depth information and analyses

[more info](#)



Taking Action

Explore initiatives geared towards advancing racial equity

[more info](#)



Drawing Connections

Explore resources that build knowledge on racial equity

[more info](#)



Assembling the Toolbox

Explore datasets, maps, and resources to guide and inform racial equity work

[more info](#)



Growing Awareness

Explore public knowledge building resources that increase accessibility and engagement with the communities we serve.



Funding Solutions

Explore grant programs and other opportunities that address factors related to racial equity



Other Resources

Explore various other tools, resources, and helpful information

OUTCOMES FROM CA GOV PARTNERS (2020-PRESENT)

Public Accountability for Racial Equity. Government partners have publicly posted racial equity commitments and invited community accountability, with support from State of Equity:

- Coastal Conservancy and [California Arts Council](#) released public strategic plans that reference their Racial Equity Action Plans and identify racial equity activities
- Caltrans publicly posted their [Racial Equity Action Plan](#) on their website
- SGC adopted a [Racial Equity Resolution](#) including a commitment by 7 cabinet secretaries to publicly share their racial equity plans and progress updates twice per year
- California Transportation Commission (CTC) unanimously approved a [Racial Equity Statement](#) including 6 specific commitments to center racial equity in the organization.
- State Coastal Conservancy Board publicly adopted Justice, Equity, Diversity, and Inclusion (JEDI) [Guidelines](#)
- CA Air Resources Board publicly adopted a racial equity and social justice [resolution](#) establishing a Diversity and Racial Equity Task Force
- Department of Housing and Community Development reported highlights from their organizational racial equity survey in their public [2019-2020 annual report](#)

Racism is a Public Health Threat: Centers for Disease Control & Prevention

Racism and Health



Source: <https://www.cdc.gov/media/releases/2021/s0408-racism-health.html>

Declarations of Racism as a Public Health Crisis or Emergency California: 30+ Nationally: 200+



Sources: https://www.apha.org/-/media/Files/PDF/topics/racism/From_Declaration_to_Action.ashx

http://64.166.146.245/docs/2020/BOS/20201110_1582/43674%5FBO%5FDeclaring%20Racism%20as%20a%20Public%20Health%20Crisis%20Epdf

Dr. Radhakrishna Appointed Deputy Director of the Office of Health Equity at California Department of Public Health

written by ECT | Feb 26, 2021

15 COMMENTS



RICHARD

🕒 Feb 26, 2021 - 2:25 pm

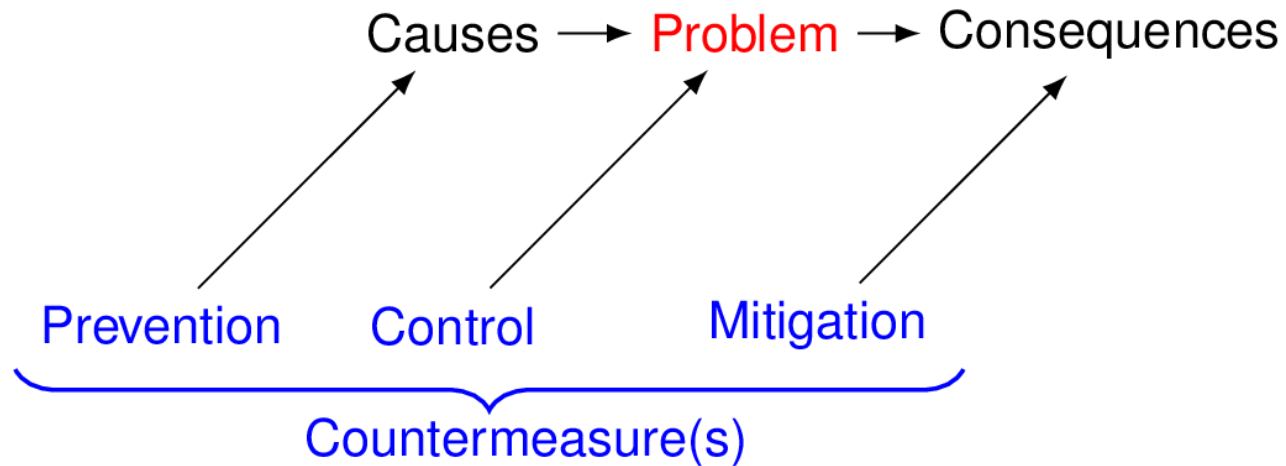
When my wife was seen by him, I commented after to her that he was the best doctor that I'd ever met, in my 69 years. My wife agreed.



ELIZABETH STERN

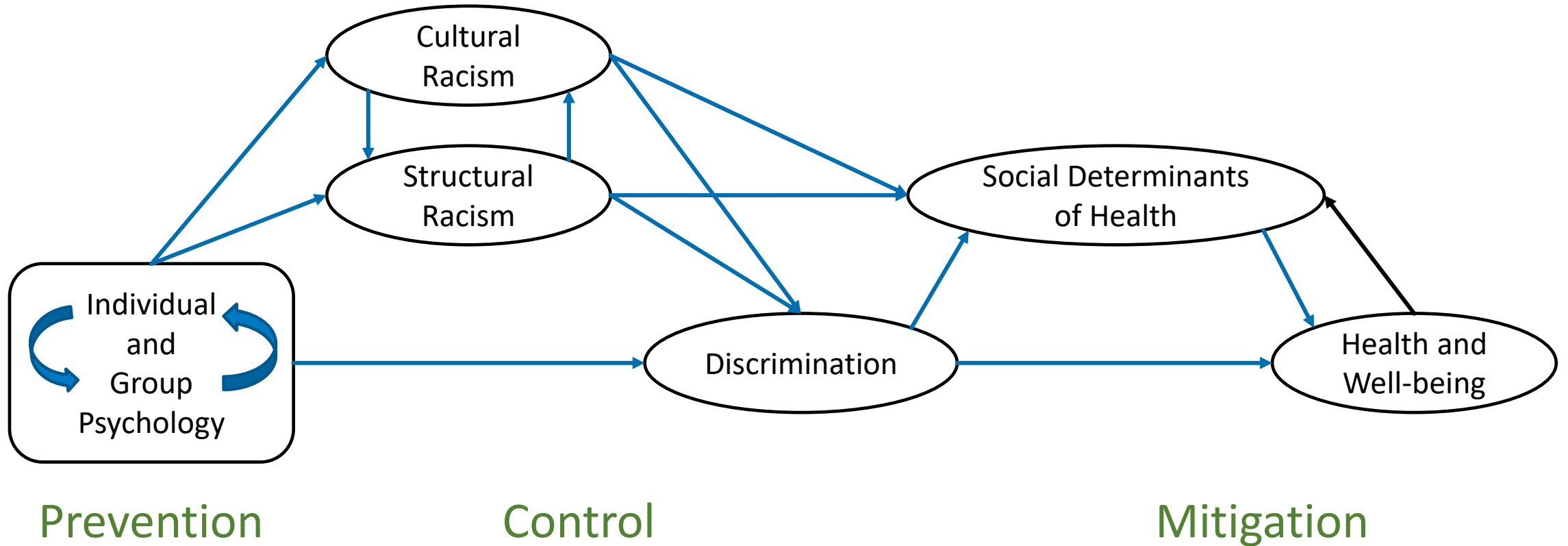
🕒 Feb 26, 2021 - 5:21 pm

When will a doctor with a name like SAM JONES be appointed to head such an agency? Why is it always someone with an unpronouncable name — and a foreigner! I don't care how "good" he is. By the way, a patient really cannot judge a doctor to see whether he's competent or not. Only another doctor could do that.



1. **Plan:**
 - Problem definition
 - **Root cause analysis**
 - Consequence (risk) analysis
 - Countermeasure selection
2. **Do:**
 - Countermeasure execution
3. **Study:**
 - Countermeasure evaluation (causal analysis)
4. **Act:**
 - Act on what you learn to improve.

Source: Aragón TJ, et al. Crisis decision-making at the speed of COVID-19: Field report on issuing the first regional shelter-in-place orders in the United States. J Public Health Management and Practice. 2020.
https://journals.lww.com/jphmp/Fulltext/2021/01001/Crisis_Decision_Making_at_the_Speed_of_COVID_19_.aspx



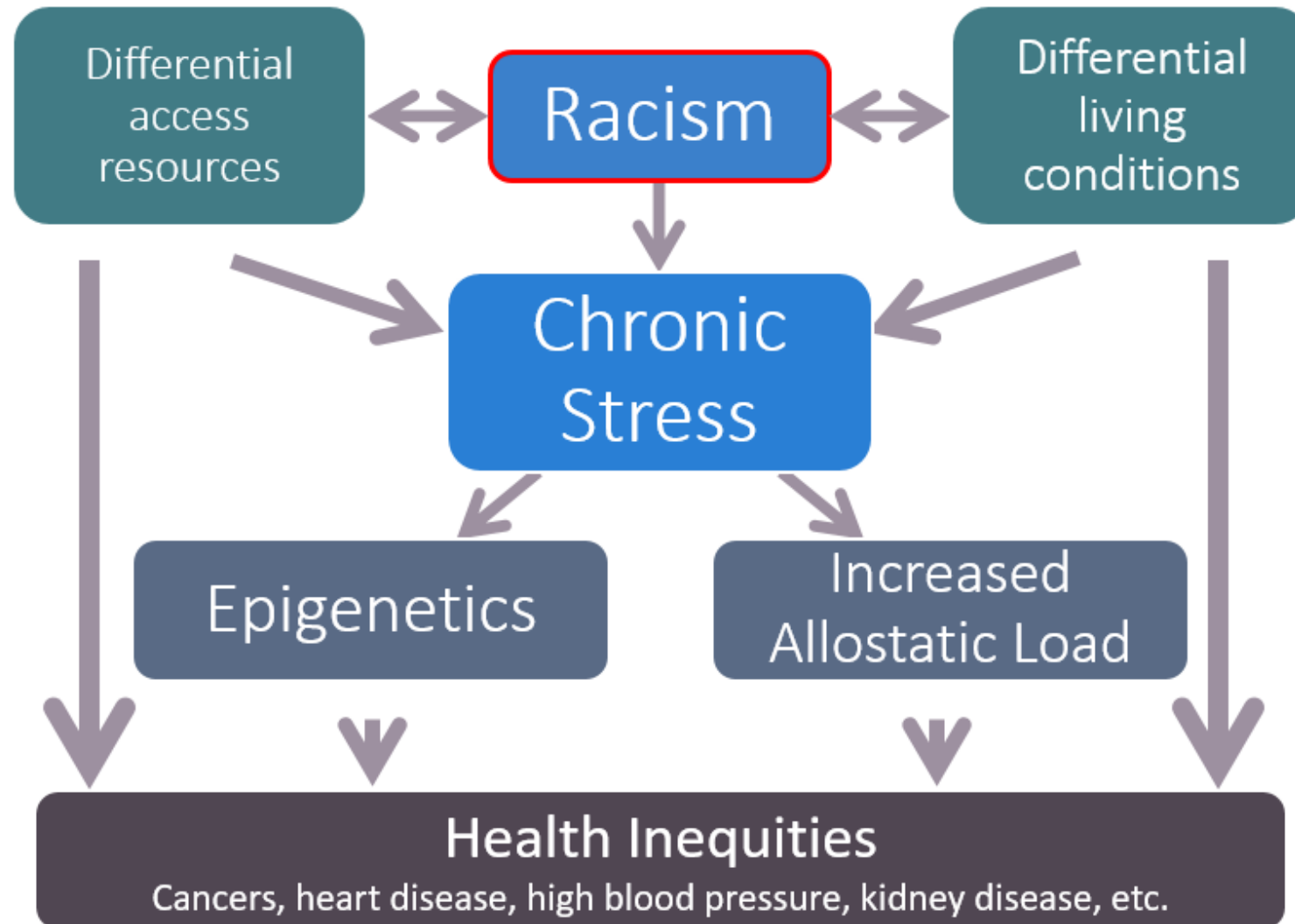
^a David Williams. Racism and health: Evidence and needed research (<https://doi.org/10.1146/annurev-publhealth-040218-043750>)

^b Steven Roberts. The Psychology of American Racism (<http://dx.doi.org/10.1037/amp0000642>)

^c Jonathan Haidt. The Righteous Mind: Why Good People Are Divided by Politics and Religion

^d Lisa Feldman Barrett. How Emotions Are Made: The Secret Life of the Brain

Chronic Stress and Racism: Impacts on Health Equity





CDPH transformation: "Becoming the Best at Getting Better"

1. Becoming a learning organization

- Lean management system ("lean")
- Results-Based Accountability (RBA)

2. Becoming a healing organization

- Equity and anti-racism
- Trauma informed and responsive

Healing, Equity for all, Anti-Racism, Trauma
Responsive Transformation (**HEART**)



3. Developing our people

- Professional development
- Core public health competencies

Healing, Equity for all, Anti-Racism, Trauma
Responsive Transformation (HEART) Initiative

- Trauma Responsive Trainings
- Can We CHAT sessions
- Equity, Diversity, Inclusion Training Expansion for All Staff
- Racial Equity Organizational Assessment



STATE INFRASTRUCTURE: CROSS CUTTING HEALTH EQUITY LIAISONS EMBEDDED IN CENTERS & OFFICES



Gia Lewis
*Human Resources
Division*



Sharon Eghigian
*Center for Infectious
Diseases*



JaRita Pichon
Center for Family Health



Tara Payne-Steele
*Center for Healthcare
Quality*



Linda Baggio
Office of Policy & Planning



Kristen Lovett
*Center for Healthy
Communities*



Kemi Shamonda
*Center for Environmental
Health*



Vacant
*Center for Preparedness
& Response*



Vacant
*Legislative &
Governmental Affairs*

4 Domains & 12 Competencies for Equity Infrastructure

Domain 1: Workforce and Capacity	Domain 3: Equity in Organizational Policies and Practices
Competency A: Diversity & Inclusion	Competency A: Organizational Commitment
Competency B: Dedicated Equity Staff	Competency B: Funding and Resource Allocation
Competency C: Training, Development, and Support	Competency C: Embed Equity Principles
Domain 2: Collaborative Partnerships	Domain 4: Planning and Shared Decision-Making
Competency A: Structures to Build Collaboration	Competency A: Data Collection and Usage
Competency B: Community Based Organization & Resident Engagement	Competency B: Shared Analysis
Competency C: Partner Across Sectors	Competency C: Inclusive Decision-Making

Development Level Scale

Early		Established		Strong	
1	2	3	4	5	6
Not yet, or learning stage	Planned but not started or in initial/pilot stages of implementation	Working towards this but not fully achieved	Fully achieved	In place with evidence of its use (e.g., policies, procedures, robust evaluation plan)	Practices are sustainable and ongoing and may be shared with others as “best practices”

[Learn more about our Organizational Assessment for Equity Infrastructure](#)



Home > **Virtual Equity Toolkit 2.0**

Quick Guide

Overview

Advanced Search

Competencies

Equity Development Levels

Resource Types

LHJ Spotlights

Addendums

Additional Databases

Overview

Virtual Equity Toolkit 2.0



The Virtual Equity Toolkit 2.0 is brought to you by the Regional Equity Technical Assistance (TA) Team at the Office of Health Equity (OHE) of the California Department of Public Health (CDPH). This version of the toolkit is an update to the original VET 1.0, which can be found in the [Equity Portal](#). The intended audience for this toolkit is local health jurisdiction equity leads and colleagues who are tasked at building equity infrastructure throughout their jurisdiction. For that reason, resources are divided into 12 competencies as defined in CDPH's Organizational Assessment for Equity Infrastructure. The toolkit complements the assessment, provides and helps through the planning of interest

2023 California Equity Convening



Local Health Jurisdiction Equity Leads

2023 CALIFORNIA EQUITY CONVENING WELCOME AND WINS



ROHAN RADHAKRISHNA



TOMÁS ARAGÓN

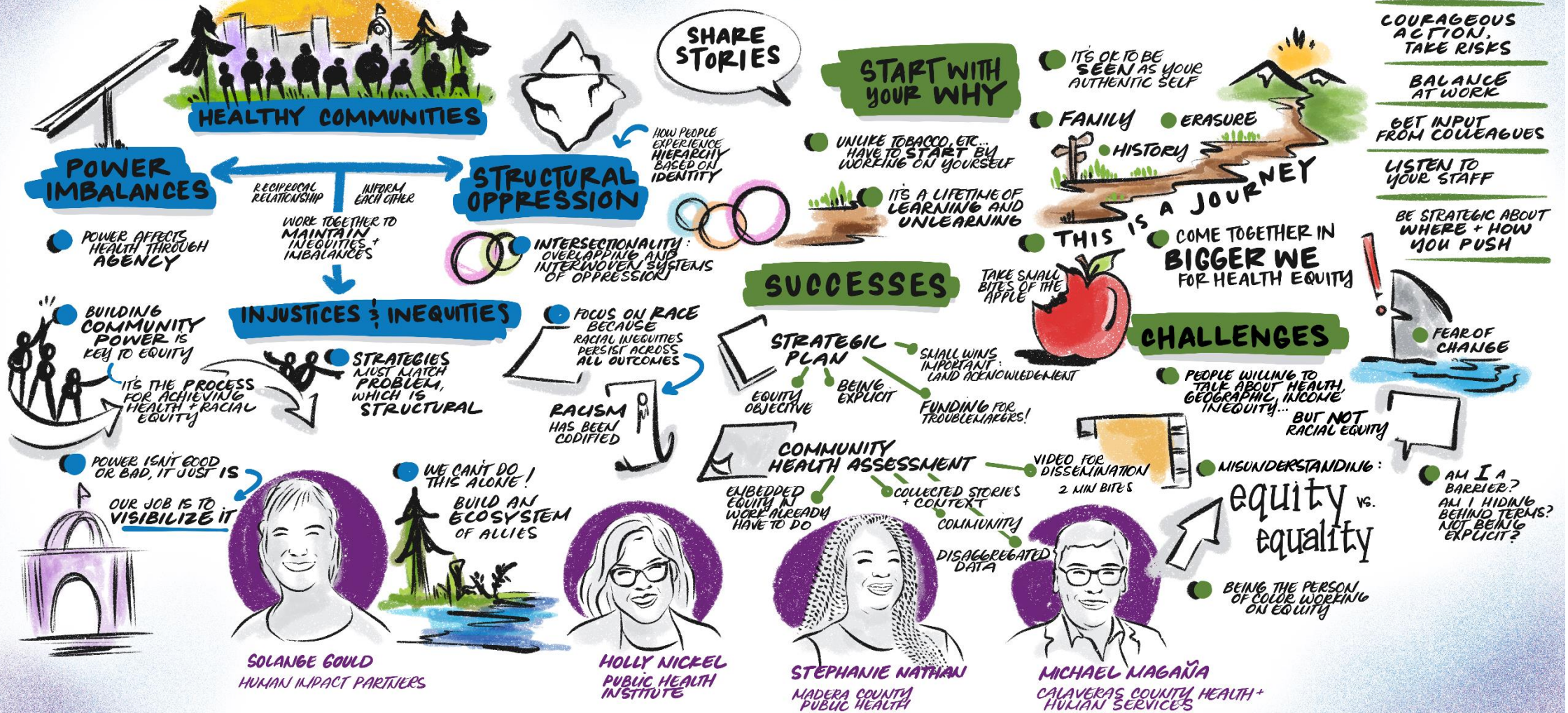


DANIEL TORRES

— THE RELATIONSHIP BETWEEN HEALTH EQUITY AND RACIAL EQUITY —

LEVEL SETTING

PANEL DISCUSSION



SOLANGE GOULD
HUMAN IMPACT PARTNERS

HOLLY NICKEL
PUBLIC HEALTH INSTITUTE

STEPHANIE NATHAN
MADERA COUNTY PUBLIC HEALTH

MICHAEL MAGAÑA
CALAVERAS COUNTY HEALTH + HUMAN SERVICES



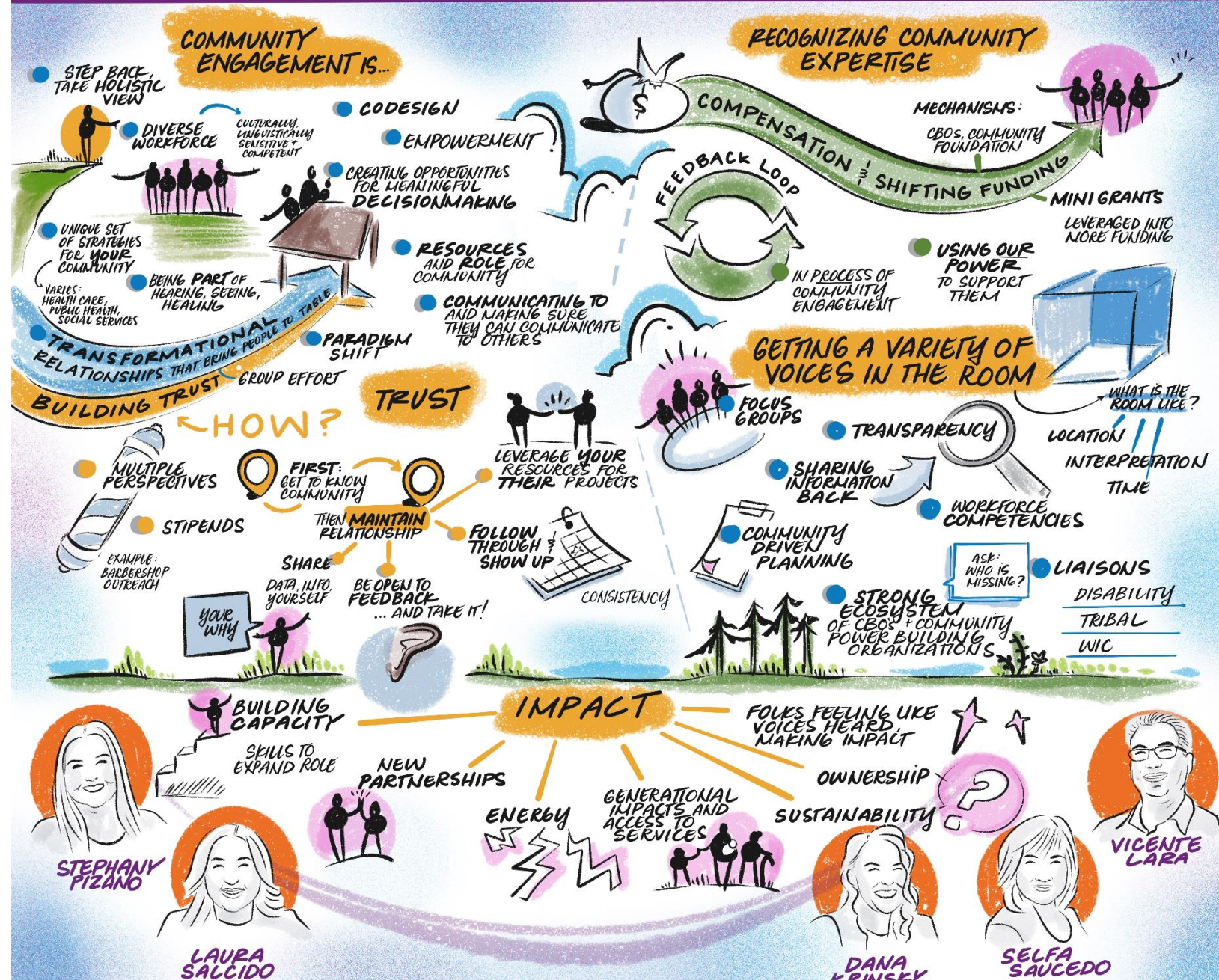
COMMUNITY ENGAGEMENT PANEL

- Recognizing community expertise

- Getting a variety of voices in the room

- Trust

- Impact



Challenges of Racial Equity Journeys

- **Rarely resourced** in a robust way.
- Chief equity officers often **face isolation and backlash** in their role
- Continuous emergence of DEI approaches that focus on attempting to only change the way people think vs. **changing institutional processes & practices**
- Often **white bodies get centered** in this work in ways that cause harm to black and brown bodies
- Shifting an institution's culture, practices and impact is **life-long work**

Enabling Factors for Racial Equity Journeys



**Public or External
Accountability**



**Growing Numbers of
Racial Justice
Practitioners and
Leaders *within*
Institutions**



**Staff Organizing and
Executive leadership
Being on Board**

Enabling Factors for Racial Equity Journeys



**Increased Use of Racial
Equity Frameworks &
Tools**



**Building the Container to
Process and Metabolize the
Discomfort that comes from
doing Anti-Racist work
(Somatic Abolitionism)**

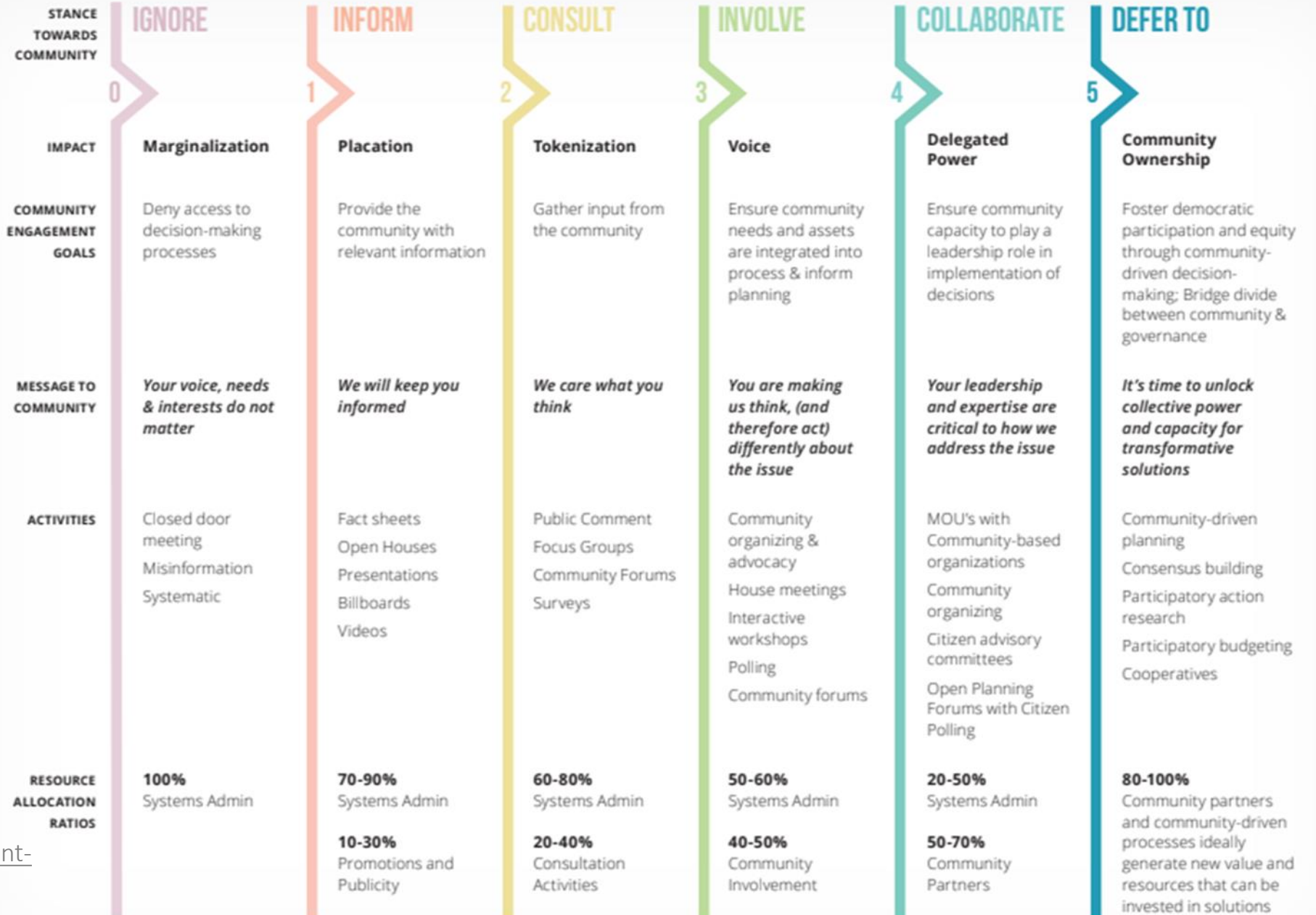
Continuum on Becoming an Anti-Racist Multicultural Organization

MONOCULTURAL ==> MULTICULTURAL ==> ANTI-RACIST ==> ANTI-RACIST MULTICULTURAL

Racial and Cultural Differences Seen as Deficits ==> Tolerant of Racial and Cultural Differences ==> Racial and Cultural Differences Seen as Assets

Exclusive An Exclusionary Institution	2. Passive A "Club" Institution	3. Symbolic Change A Compliance Organization	4. Identity Change An Affirming Institution	5. Structural Change A Transforming Institution	6. Fully Inclusive Anti-Racist Multicultural Organization in a Transformed Society
<ul style="list-style-type: none"> Intentionally and publicly excludes or segregates African Americans, Native Americans, Latinos, and Asian Americans Intentionally and publicly enforces the racist status quo throughout institution Institutionalization of racism includes formal policies and practices, teachings, and decision making on all levels Usually has similar intentional policies and practices toward other socially oppressed groups such as women, gays and lesbians, Third World citizens, etc. Openly maintains the dominant group's power and privilege 	<ul style="list-style-type: none"> Tolerant of a limited number of "token" People of Color and members from other social identify groups allowed in with "proper" perspective and credentials. May still secretly limit or exclude People of Color in contradiction to public policies Continues to intentionally maintain white power and privilege through its formal policies and practices, teachings, and decision making on all levels of institutional life Often declares, "We don't have a problem." Monocultural norms, policies and procedures of dominant culture viewed as the "right way" business as usual" Engages issues of diversity and social justice only on club member's terms and within their comfort zone. 	<ul style="list-style-type: none"> Makes official policy pronouncements regarding multicultural diversity Sees itself as "non-racist" institution with open doors to People of Color Carries out intentional inclusiveness efforts, recruiting "someone of color" on committees or office staff Expanding view of diversity includes other socially oppressed groups <p style="text-align: center;"><i>But ...</i></p> <ul style="list-style-type: none"> "Not those who make waves" Little or no contextual change in culture, policies, and decision making Is still relatively unaware of continuing patterns of privilege, paternalism and control Token placements in staff positions: must assimilate into organizational culture 	<ul style="list-style-type: none"> Growing understanding of racism as barrier to effective diversity Develops analysis of systemic racism Sponsors programs of anti-racism training New consciousness of institutionalized white power and privilege Develops intentional identity as an "anti-racist" institution Begins to develop accountability to racially oppressed communities Increasing commitment to dismantle racism and eliminate inherent white advantage Actively recruits and promotes members of groups have been historically denied access and opportunity <p style="text-align: center;"><i>But ...</i></p> <ul style="list-style-type: none"> Institutional structures and culture that maintain white power and privilege still intact and relatively untouched 	<ul style="list-style-type: none"> Commits to process of intentional institutional restructuring, based upon anti-racist analysis and identity Audits and restructures all aspects of institutional life to ensure full participation of People of Color, including their world-view, culture and lifestyles Implements structures, policies and practices with inclusive decision making and other forms of power sharing on all levels of the institutions life and work Commits to struggle to dismantle racism in the wider community, and builds clear lines of accountability to racially oppressed communities Anti-racist multicultural diversity becomes an institutionalized asset Redefines and rebuilds all relationships and activities in society, based on anti-racist commitments 	<ul style="list-style-type: none"> Future vision of an institution and wider community that has overcome systemic racism and all other forms of oppression. Institution's life reflects full participation and shared power with diverse racial, cultural and economic groups in determining its mission, structure, constituency, policies and practices Members across all identity groups are full participants in decisions that shape the institution, and inclusion of diverse cultures, lifestyles, and interest A sense of restored community and mutual caring Allies with others in combating all forms of social oppression Actively works in larger communities (regional, national, global) to eliminate all forms of oppression and to create multicultural organizations.

Community Based Organization & Local Leader Partnerships Activities



Source:
<https://movementstrategy.org/wp-content/uploads/2021/08/The-Spectrum-of-Community-Engagement-to-Ownership.pdf>

Advice from the Contra Costa Core Committee Office of Racial Equity & Social Justice ORESJ

- Philanthropic funding enabled resources and time to gather, listen, and reveal a truer picture of resources to achieve aims
- Naming root causes in process and findings
- Multiple engagement platforms: listening, community café, 1:1
- Honorarium for community time and participation
- Multilingual translation and outreach beyond census threshold
- ★• Co-Directors (internal/external): the work is monumental isolating and can bring harm on leaders and practitioners

How can I be a Racial Equity Champion? On Monday?

Structural

- Talk about it at work and at home, weekly then daily (Normalize, Organize, Operationalize)



Institutional

- Suggest or get involved in a JEDI / DEI Committee
- Connect with your Chief Equity Officer
- Request or lead an Organizational Assessment & REAP: Racial Equity Action Plan
- Apply tools from the Racial Equity Resource Hub: <https://www.sgc.ca.gov/programs/racial-equity/>

Interpersonal

- Observe your daily thoughts, words, actions with clients, patients, and co-workers
- Start a 21-day Racial Equity Challenge <https://21dayequitychallenge.com/>

Internalized

- Read *How to Be An Anti-Racist* by Ibram X. Kendi
- Check-in with yourself and Ask “*How did I practice and promote anti-racism today?*”

THANK YOU

- Align
- Collaborate
- Words Matter
- Accountable Action Matters More
- Outcomes Matter Most



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