

Getting Equity Advocacy Results (GEAR)



Identifying and tracking the essential components of
equity advocacy for policy change

Multiple Racial Identities and What They Mean for Health
Atlanta, June 8-9, 2017

Using the GEAR framework, participants can:

- Discover four essential **components** of equity advocacy
- Explore four major **stages** of an equity campaign
- Examine specific **wins** associated with equity advocacy at each stage of a campaign
- Identify various **methods** for planning, tracking, and measuring success

Campaign

- A **campaign** is the connected series of activities and events designed to bring about policy change

Policy

- **Policy** is a course or principle of action adopted by a government, organization, or individual—formally or informally—to guide future actions or decisions

- *How can advocates tell, midcourse, if their campaign efforts are making an impact for equity?*
- *How can advocates elevate, motivate, and sustain their work, when political energies slow or external conditions obstruct planned strategy?*

Getting Equity Advocacy Results





Four essential, ongoing components of an equity campaign





Ongoing *Organizing*

assures that those closest to community challenges are central to seeking solutions and building power to bring them about.



Ongoing *Capacity Building*

involves strengthening the knowledge and skills of equity advocates and their organizations to effectively engage in efforts for change.



Ongoing Research

is needed to inform every aspect of the advocacy process, from documenting conditions and soliciting community participation to assessing prospective solutions and projecting the impact of change.



Ongoing *Communications*

activities involve a range of tools to strategically disseminate ideas and information and to educate stakeholders and decision makers to advance equity.



Four major stages of an equity campaign



Get Ready: Build the Base

Engaged community residents, leaders, and organizations are the foundation of thriving communities. They are also at the base and in the leadership of efforts for equitable change.



***Get Set:* Name and Frame the Equity Solutions**

Finding a promising target for change requires understanding the problem and potential solutions, as well as the possible pathways to get there. Making plans to reach that target can require research, communications, and community engagement



***Go:* Move the Equity Proposal**

Advancing equity advocacy requires applying the results of organizing, capacity building, research, and communications to a campaign.



Grow: Build, Advance, and Defend

A vision for equity can be achieved only when the interpretations, processes, and implementation of a proposal for change are carried through and critical components supporting equity are functioning.



interconnected

Benchmark

- **Benchmarks** are points of reference useful for making comparisons. They are typically set in advance to help track progress.

Indicator

- **Indicators** are the specific, measurable signs that a benchmark has been accomplished.



***Get Set:* Name and Frame the Equity Solutions**

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- Research and Identification of Change Objectives
- Framing the issue and Change Objectives
- Identification and Cultivation of Allies
- Identification and Development of Strategies to Decrease Opposition

www.policylink.org/gear

**Making the Case for Data Disaggregation to Advance a Culture of Health:
Understanding the Health of Racially and Ethnically Diverse Populations**

WORKING GROUP SESSION: Action Items - “What changes do you want to see? What does the field need for better research, practice, and public policy to understand the health of racially and ethnically diverse populations?”

<p>What changes do you want to see? Research, data collection/management practice, and policy recommendations</p>	<p>Rec #1: Support CA’s AB 1726 - Accounting for Health and Education in API Demographics (AHEAD) Act (Bonta) – requiring higher education institutions and public health agencies to disaggregate data for additional API groups. Support replicable AB 1726 efforts across other states.</p>	<p>Rec #2: Engage with OMB Commenting Period on Race & Ethnicity to affect the 2020 Census (combined race and ethnicity question format; detailed American Indian or Alaska Native (AI/AN) population; adding Middle Eastern or North African (MENA) category; ...)</p>
<p>Name and Frame the Solution</p> <ul style="list-style-type: none"> • What are the key policy and practice proposals when it comes to the health of racially and ethnically diverse populations? • What is the state of knowledge about this topic; is there a strong basis on which to proceed on a specific path, or is research still needed? • How do you communicate this issue to a general audience? • Who are the allies and where might you expect push-back? 	<ul style="list-style-type: none"> • Adding 8 AA and 2 NHPI categories (affecting 439,809 Californians) to CA Community Colleges, CA State University, UC, Dept. of Public Health, and Dept. of Healthcare Services data collection and release • Build knowledge on admission, enrollment, completion, graduation & disease rates, insurance coverage, birth and death rates • Advocacy campaigns (postcards, legislative visits, Sacramento visits, social media) • Co-Sponsors (SEARAC, APIAHF, CPEHN, EPIC) w/ 100 orgs, ... VS Gov. Brown, conservative opposition (anti-affirmative action, ...) 	<ul style="list-style-type: none"> • Federal Registrar process for affecting OMB Directive 15, OMB Interagency Working Group for Race and Ethnicity • 2015 National Content Test Race/Ethnicity Research: write-ins helpful for Native American tribes, new detailed disaggregation for Blacks and Whites, ... • <i>‘Anything can be legislated, but any rushed legislation limits the time available to test its effects.’</i> • Allies & Push-back illustrative in Federal Registrar comments: many form responses, Heritage Institute, subgroup advocates, ...
<p>Build the Base</p> <ul style="list-style-type: none"> • Who are the key decision makers or stakeholders who can influence this topic and should be in the room, but is not currently involved? • What organizing has been done? • Is there something about the current climate that lends itself to building a coalition around this topic? 	<ul style="list-style-type: none"> • CA Governor, CA State Legislature, CA Budget (\$326K for DPH to) • LA Times, media, and journalism • Advocacy, 18MR, #AllCaliforniansCount • Utah Dept. of PH MAHINA Pilot Program, shown birth outcomes disparities among PI communities 	<ul style="list-style-type: none"> • OMB has greater decision making power than the Census: OMB Director, Office of the Chief Statistician, ... • The Census Bureau eventually submits the final content and question wording to US Congress for approval

**Making the Case for Data Disaggregation to Advance a Culture of Health:
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WORKING GROUP SESSION: Action Items - “What changes do you want to see? What does the field need for better research, practice, and public policy to understand the health of racially and ethnically diverse populations?”

<p>What changes do you want to see? Research, data collection/management practice, and policy recommendations</p>	<p>Rec #3: Support and create guidelines for oversampling small populations; collect, analyze, and report disaggregated data; maintain security and privacy of respondents</p>
<p>Name and Frame the Solution</p> <ul style="list-style-type: none"> • What are the key policy and practice proposals when it comes to the health of racially and ethnically diverse populations? • What is the state of knowledge about this topic; is there a strong basis on which to proceed on a specific path, or is research still needed? • How do you communicate this issue to a general audience? • Who are the allies and where might you expect push-back? 	<ul style="list-style-type: none"> • Provide funding and education to train survey leaders and data users • Provide guidance for ‘roll up’ of racial and ethnic subgroups for reporting • Lack information regarding cost & consequence of oversampling <i>inaction</i> • Necessity and struggle of “some data is better than no data” vs. “some data is better than no data <i>if the data is good.</i>” • Allies at local and regional level, maybe push-back in states and regions that lack small populations
<p>Build the Base</p> <ul style="list-style-type: none"> • Who are the key decision makers or stakeholders who can influence this topic and should be in the room, but is not currently involved? • What organizing has been done? • Is there something about the current climate that lends itself to building a coalition around this topic? 	<ul style="list-style-type: none"> • OMB, Census, DHHS, other federal agencies • State and local health surveys • Partnerships with local governments, university researchers, and centers • Data hubs, data collectors, data users, monitoring & evaluation professionals • Volunteers in local surveys: door knocking, phone banking, collecting specialized lists of small populations • Extreme sensitivity to protect individuals and communities from retaliation, discrimination, and surveillance (e.g. MENA population and “national security”)