



Bridging Partnerships Between Public Health and Racial Justice Groups

Lessons from Partnership Conversations;
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Alberto Espiricueta, Senior Program Assistant
La'Quana Williams, MPH, Associate Program Director

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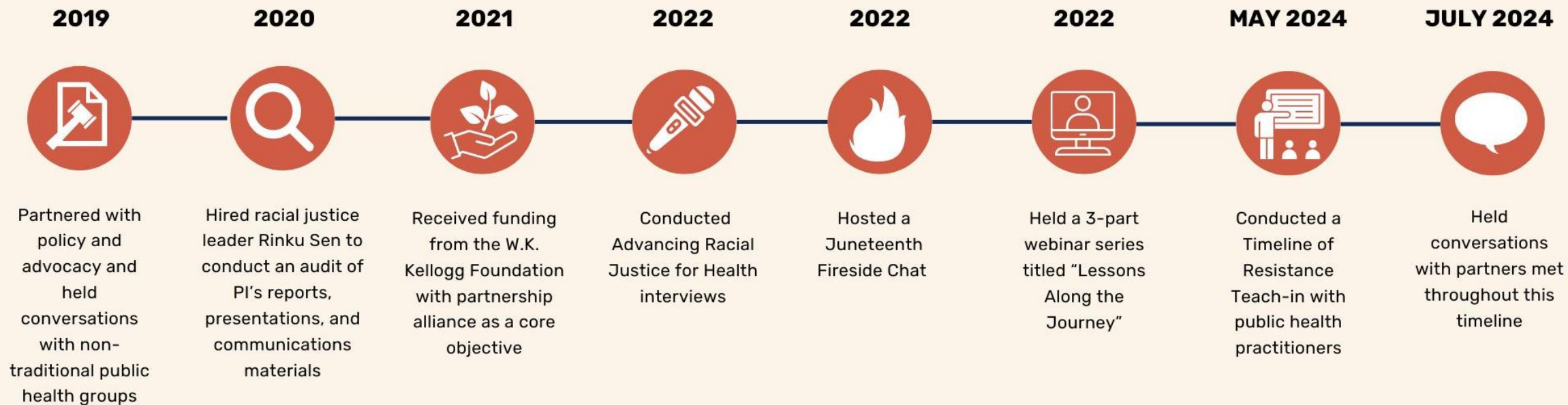
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Objective

Partnership alliance development to enhance strategic connections between racial justice partners and sectors that impact the public's health



Partnership Growth



Questions Asked

What connections do you see between health equity and racial justice?

What opportunities / challenges do you see for public health to partner with racial justice groups?

Do you consider your work / your organization's work to be health related?

In what ways might public health be of benefit to the work you do? Are there trepidations?

What does true partnership look like from your perspective?

Recommendations from RJ Groups

- **Partner** with individuals, groups, and CBOs that are already doing the work
- **Provide** unrestricted resources to racial justice groups so they can experiment
- **Engage** impacted communities and share decision-making power
- **Uplift** racial justice's work on a national and local level by using public health's status as a credible messenger
- **Break** down silos in projects, funding, and training—racial justice is all-encompassing

What We Heard from Our Partners



**On partnering with
individuals, groups, and
CBOs that are already
doing the work...**



“

What does it mean for institutions / policy makers / public health departments to fall in love with the people they serve and trust the community knows what it needs?

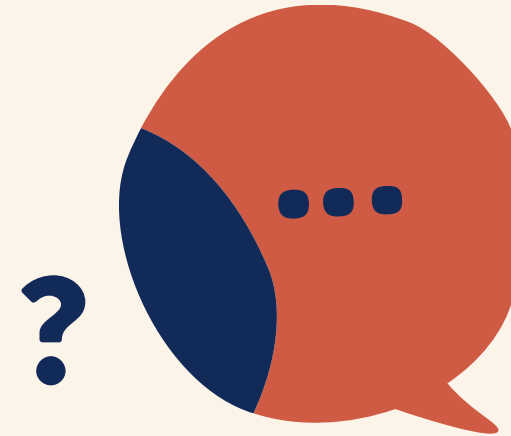
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“

You cannot deliver a quality outcome of any endeavor, program/structure/policy without being in relationship in some way to the people whom it is intended for.

”

**On engaging impacted
communities and
sharing decision-
making power...**



“

So many beautiful things emerge from our communities when we have the opportunity to build them.

”

“

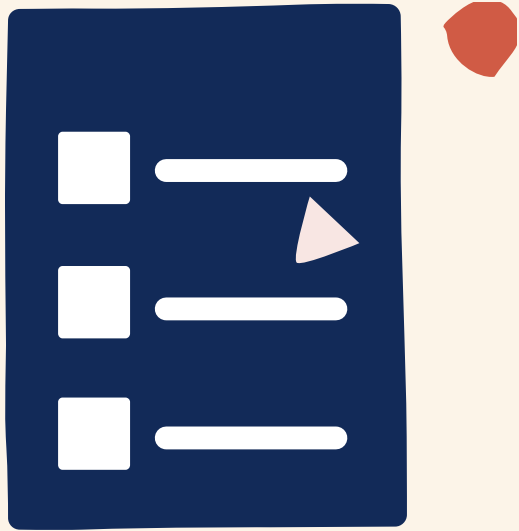
You let your frustrations live on your shoulders enough, you're going to find people that think like you, and are asking the same questions, and trying to push for the same things.

”

“

We believe that you should have something to say for your work, but we don't believe that the burdens placed on organizations doing the work should be so heavy.

”



**On clearing the red
tape for data and
measurement...**

“

Data and the need to produce specific kinds of data stops the most important forms of innovation from advancing because this is what the community can do that no large institution can do – I've seen data used as a weapon.

”

“

What I find incredibly frustrating is the way we burden innovative processes with the requirements of creating crispy clear data before we believe in it, trust in it, fund it, sustain it.

”



On uplifting racial justice's work on a local and national level by using public health's status as a credible messenger...



It's almost like the word "public" (health) has gotten a bad name because it is a proxy for government - and it's not about what people can do structurally for themselves or when structures are well set up what communities can create for themselves.

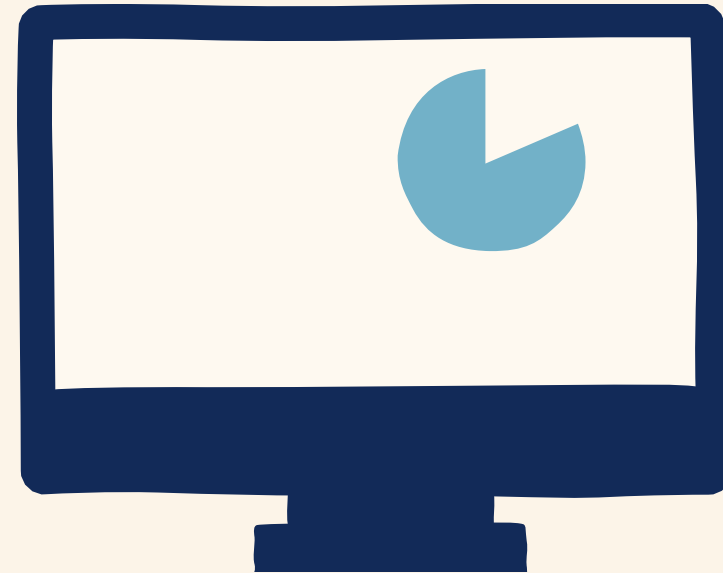


“

You know certain things [that] helps build...
credibility around some of our campaigns we're
leading from a grassroots level or from a national
level.

”

**On breaking down silos
in projects, funding,
and training as racial
justice is all
encompassing...**



“

If we overlook race as a factor, then how can we even understand where we are today? If we don't understand that history, then it makes it hard to understand how we can improve things.

”

“

Structural inequities might have a racial root, but they create the same horrific outcomes for everybody. That's why addressing these structural inequities is a powerful way to advance equity for all.

”

“

To change the world, you first must change your block... Everything is public health.

”

Lessons Learned

- Collectively, these quotes highlight the critical importance of **genuine relationships between institutions and the communities they serve** in the realm of public health and policy.
- They emphasize that successful outcomes are rooted in understanding and **engaging with people**, rather than merely relying on data or institutional frameworks, and that public health should focus on **community-driven solutions** rather than top-down approaches.
- Ultimately, learnings from these conversations centered on the need for institutions to **build trust and respect for the communities they serve**, recognizing their capacity for self-determination and innovation.



Thank You to Our Partners!





For more information, please contact
alberto@preventioninstitute.org

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