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Learning From Coalitions' Efforts to Promote Equity and Justice

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Abstract

Coalitions and collaboratives are working to address many of the most pressing contemporary health and social issues. The articles in this special issue provide numerous insights into these complex collaborative processes across different contexts and focal issues. All emphasize and scrutinize the strategies that groups are using in their work. These strategies seek to navigate not only conventional notions of effectiveness but also the challenges of pursuing greater equity and justice. In this concluding article, we distill some of the key insights from these articles as a collective. This special issue on collaborating for equity and justice can serve as a launching point for new efforts by coalitions and researchers pursuing policy, systems, and structural changes, particularly those intent on addressing root causes of health and social disparities.

Collaborative structures such as coalitions and interagency alliances are built for making improvements in specific domains of community well-being, including public education, transportation, neighborhood quality, safety, and the environment. They seek to address economic and housing issues, and a range of other topics related to health promotion, prevention, and health equity. Much therefore depends on the effectiveness of coalitions and collaboratives—both their internal processes and externally focused actions.

This concluding piece provides a synthesis of some of the key insights from articles in this special theme issue related to the six principles for collaborating for equity and justice (CEJ) proposed by Wolff et al. (2017). Our thoughts on the remaining principle (that coalitions should build on extant scholarship) are taken up in the conclusion.

Explicitly Address Issues of Social and Economic Injustice and Structural Racism

Many of the coalitions featured in this special issue are taking actions to explicitly address structural racism and socioeconomic injustices. They are doing so through two primary approaches: (1) by acting on issues that directly confront racial and social injustices, such as environmental justice and criminal justice systems change and (2) by emphasizing steps taken during internal coalition processes to address power imbalances.

One example of the first approach is provided by LeBrón et al. (this issue). The collaborative they studied is tackling an issue that reflects and compounds systemic racism—the frequent "Catch 22" of *requiring* a driver's license or other state or federal government–issued ID to access work, housing, health care, and so on, while effectively *preventing* undocumented residents and many others in need from acquiring such identification. Linking this community-identified issue in Washtenaw County, Michigan, with a growing local ID movement nationally helped county residents, organizers, and university allies explore the feasibility of securing local government ID in their own

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midwestern county with its large immigrant population. As LeBrón et al. observe, "racialization processes, including anti-immigrant sentiments, may inhibit the ability of local ID to mitigate ID-related stressors," just as these pernicious processes limit the reach and effectiveness of countless other efforts to change or abolish programs, practices, and policies rooted in systemic racism and social and economic injustice. Yet, efforts like the Washtenaw local ID project also provide a reminder of what local communities and their allies can accomplish as they work collaboratively to chip away at some of the manifestations of systemic racism and injustice plaguing our society.

Several other articles similarly focus on coalitions' and other collaboratives' efforts to study and address health and social problems rooted in systemic racism and socioeconomic inequities (e.g., Cooper & Christens, this issue; Johnston et al., this issue). Others, while often acknowledging the role of root causes to the problem areas they sought to address, focused more heavily on community capacity and leadership development, and/or partnership dynamics to better understand and address issues of privilege, power, and power sharing within the collaborative itself (e.g., Reid et al., this issue; Wolf, Vigna, Inzeo, Ceraso, & Wolff, this issue).

Several studies also address the roles that research partnerships played in shaping collaborative processes. Wallerstein et al. (this issue) focus on seven case studies to illuminate power within and interactively across multiple domains of community-based participatory research partnerships, including community- and policy-level outcomes. As they conclude:

> These pathways of addressing power in a deliberative fashion contribute to short-term outputs of cultural centeredness and greater community decisions in research, contributing to intermediate outcomes of shared power and community leadership toward changes in structural policies and epistemic justice.

In sum, these articles provide many insights into the utility of the first CEJ principle and how diverse aspects and outcomes of systemic racism and social and economic inequities are relevant to the internal and external work of coalitions and other collaboratives. The authors do this by focusing on health and social problems rooted in systemic racism and injustice; on efforts to build power by strengthening community leadership and capacity; and/or by examining how unequal power and privilege in their own partnerships' functioning may reflect the deeply rooted racial and other systemic injustices that lie at the base of so much of societal history and functioning. As we move forward, both expanding the important work already being done and digging deeper to better understand and address the root causes of the problems we face will be critical.

Employ a Community Development Approach in Which Residents Have Equal Power in Determining the Coalition's or Collaborative's Agenda and Resource Allocation

The articles in this special issue elucidate the challenges of achieving equal power within collaborative processes and offer some examples of overcoming the challenges. Most of the articles address this principle indirectly, while others address power sharing directly, describing how they have succeeded and what barriers they have faced.

Minkler, Rebanal, Pearce, and Acosta (this issue) draw lessons from community organizers highlighting the imperative of working "*with* rather than on communities" to improve health and reduce health inequities. The field of public health has long recognized that this means working intentionally to understand and address systems of oppression rooted in racism, classism, heterosexism and other "isms," and move to more deeply embrace community leadership and control. The community in Minkler et al.'s work made clear their priorities in leadership: as one youth stated, "[We need] young people not just *in* the movement we're building but *leading* the movement." And, in another's words, "The question is not 'Are Black women *ready* to lead?' The question is, 'Is America ready to have us lead?'"

Kazaleh Sirdenis et al.'s (this issue) work on sexual health equity for gay, bisexual, and transgender youth (GBTY) is an excellent example of being serious in intent and actions about building the voice of youth. Their coalition's youth advisory board (YAB) included eight GBTY, aged 19 to 29 years, who were paid as university employees, thereby creating greater parity with others at the table who were being paid by their employers. The YAB was the governance body for the endeavor. Data illuminated changes in YAB members' life circumstances as a main barrier to participating in the project. Many YAB members faced hardships in their personal lives, including economic instability, mental health issues, and food insecurity. Kazaleh Sirdenis et al.'s recommendations for ensuring youth leadership and employing a shared power approach included the following: engaging the partnership in critical discussions regarding the role of oppression in health equity for GBTY; facilitating iterative discussions on roles and responsibilities; ensuring transparency in decision making—specifically ensuring that members understand decision-making processes and roles early on and throughout the project; and providing appropriate pay and capacity development for youth members. In addition, the authors recommend providing education for the adults on how to effectively and respectfully work with youth.

Hilgendorf et al. (this issue) describe an Indigenous health coalition that has increasingly made language, culture, and collective values the focus of their health promotion work. This was due, in part, to participation and influence of local

community organizers in the coalition. Making traditions and values a foundation of health coalition work can ensure that they are more culturally grounded, systems based, and focused on the root causes. The success of this model was facilitated by the inclusion of local resident leaders and organizers, and their involvement likewise creates opportunities for more lasting systems and policy changes.

Wolf et al. (this issue) describe a multiyear effort to train coalition leaders for the purpose of focusing on community power building with those most negatively affected by disparities. They demonstrated increased incorporation of community power building in content, philosophy, and delivery over time. Wolf and colleagues found that for many communities, making headway on issues requires a new way of working. This meant building skills for engaging with the community from the beginning, exploring root causes, thinking about how to create sustainable change, developing an action plan, and building strong multisector partnerships.

Implementing a community development approach requires an intentional and sustained effort and skill building in sharing power, dealing with conflict, and leadership development. In the midst of these challenges, the teams in this project noted that the concept of "failing forward" (i.e., learning from failure) was an important leadership mind-set shift that helped them understand failure as a learning opportunity that is an integral part of the systems transformation process.

As a whole, these articles demonstrate that sharing power equally with those most affected by issues is a significant challenge for collaboratives. They elucidate some excellent examples of how to succeed, principles to guide the work, and an understanding of common barriers.

Employ Community Organizing as an Intentional Strategy and as Part of the Process: Work to Build Resident Leadership and Power

Articles in this issue highlight some of the challenges and complexities of coalitions engaging with (or in) community organizing. Some coalitions interfaced with existing community organizing initiatives. Others sought to inculcate aspects of community organizing into their activities. Some did not mention community organizing, perhaps reflecting the struggle of collaboratives composed primarily of public-sector entities, which may view organizing as too political. A few articles seemed to misinterpret related activities (such as building social capital or ensuring voice and representation within the coalition) as equivalent to organizing. As a whole, not only do these studies underscore the importance of community organizing to coalition action, but they also demonstrate some of the challenges, potential pitfalls, and common misunderstandings.

Clarity is needed on what organizing is and how it differs from other collaborative endeavors. Compared to most coalitions, organizing is distinguished by its primary emphases on deep resident engagement, analysis of power, and capacity for conflict (Christens & Inzeo, 2015). Organizing is field of practice with a long history of building power to combat injustices. As the article by Minkler et al. (this issue) describes, there is much that public health, and coalitions more generally, can learn from organizing, and the complexity and sophistication of organizing should not be underestimated. Although coalitions may employ techniques and perspectives from community organizing, this is much different from partnering with independent grassroots organizing initiatives.

Several articles describe guiding (or requiring) coalitions to commit to greater resident engagement or organizing practices. For example, Reid et al. (this issue) describe the struggles that two coalitions had with including residents most directly affected by their focal issues. In contrast, some of the other coalitions described in the issue were formed in response to community organizing or strategically developed formal relationships with independent community organizing initiatives.

For example, Hilgendorf et al. (this issue) detail the involvement of leaders of the Menikanaehkem community organizing initiative in a coalition in the Menominee Nation in Wisconsin. Involving organizers or leaders of an independent organizing initiative in a coalition is a promising strategy. This can avoid the tokenism that can arise when individual residents are asked to participate on the basis of their lived experience with an issue. It also means that the organizers are representing their initiative and not simply themselves. This is an important equalizer in a context where most other participants are representatives of agencies and organizations.

Another example of formal incorporation of community organizing comes from Cooper and Christens (this issue). The Right on Justice Coalition in Chicago was composed of representatives of multiple community organizing initiatives and organizations focused on restorative justice practice. In this case, although the formal incorporation of organizers meant that the coalition did not need to work to infuse community organizing perspectives, the orientations of organizers tended to differ from those of restorative justice practitioners, which introduced a unique set of challenges. The policy changes influenced by this coalition, however, are indicators of the potential benefits of alliances between community organizing groups and other types of organizations.

As a whole, these articles indicate that there is no simple generalizable approach to realizing synergies between coalitions and community organizing initiatives. Collaboratives should consider how the power of organized residents relates to their goals and how they can work with residents who either are already organized or help catalyze and support new resident organizing initiatives. Strategies that seek to infuse organizing sensibilities into coalitions (such as training coalition members to think more like community organizers) are sometimes useful, yet these approaches face hurdles including limitations on

public sector involvement in advocacy and resistance of professionals to sharing power with volunteer residents. Approaches involving alliances, partnerships, or support for independently constituted community organizing initiatives are likely more promising, although this too tends to be complex.

Focus on Policy, Systems, and Structural Change

Programs can be beneficial to those who participate, for example, by preventing the progression of prediabetes to diabetes. However, their reach is usually modest, program delivery can be intensive, and they are difficult to sustain without ongoing funding for staff. From a health equity perspective, programs do not typically affect the social determinants of health, which we know are the primary drivers of health inequities. Current policies, systems, and structures are creating unfair differences, including widely varying living conditions and enormous gaps in opportunities, which maintain the status quo.

Several articles in this issue describe collaborative efforts to explicitly change policies, systems, and structures with clear implications for health equity. For instance, LeBrón et al. (this issue) describe an effort to create a local government–issued ID and to reduce identity policing. Restrictive ID policies can disenfranchise whole groups of people (e.g., formerly incarcerated individuals, undocumented immigrants, African Americans born during the Jim Crow era in the south, people with severe chronic mental illness) from a range of opportunities and resources, including housing, financial services, voting, school, and safety net programs. Johnston et al. (this issue) chronicle an environmental justice effort in Southeast Los Angeles related to a lead-battery smelting site and its legacy of environmental contamination. These articles and others (e.g., Cooper & Christens, this issue) all describe significant policy successes.

Commonalities included focusing on an existing community frustration or outrage about a particular issue rather than focusing on an issue identified by an outside group. Most describe leadership or meaningful engagement from community-based organizations with deep ties to the community, and training and support for advocacy, including public testimony.

Other articles describe more modest, but still valuable changes focused on organizational policies and practices. For instance, Kazaleh Sirdenis et al. (this issue) describe a structural change intervention by which health care organizations create environments that are more accessible and affirming of GBTY. Youth, paid as employees, were actively involved in advocacy, leadership, presentations, and testimonials on culturally humble care.

An emphasis on changing policies, systems, and structures at the community level does beg the question of where these transformative policy, systems, and structural changes should be taking place. By focusing on community transformation, we must not begin to shift victim blaming language from the individual level to the collaborative/coalition level. Clearly, some of the needed policy and structural changes, including those that shift power to disenfranchised groups, are at the state and federal levels (i.e., redistricting, voter registration, campaign finance reform). Moreover, government funding often comes with restrictions on policy advocacy, creating both real and imagined risks for government agencies and personnel who often play a major role in organizing and staffing collaborative efforts in public health.

Leaders of community-based initiatives, therefore, need to set realistic expectations for policy change at the community level and/or provide guidance and connect local efforts to other communities and groups tacking these issues at the state and federal levels.

Construct Core Functions for the Collaborative Based on Equity and Justice That Provide Basic Facilitating Structures and Build Member Ownership and Leadership

Three common challenges of incorporating the sixth CEJ principle emerged among the collective articles in this issue: (1) the need for time and/or tools to collectively build relationships, goals, structures, and processes from the beginning of the collaborative (Cooper & Christens, this issue; Kazaleh Sirdenis et al., this issue; Minkler et al., this issue; Wallerstein et al., this issue); (2) ambiguity regarding the roles and responsibilities of leaders in the convening group versus other coalition members and leaders (Collura, Raffle, Collins, & Kennedy, this issue; Cooper & Christens; Kazaleh Sirdenis et al.; Wallerstein et al., this issue; Wolf et al., this issue); and (3) sustaining the coalition when coalition member organizations have limited resources and competing priorities (Kazaleh Sirdenis et al., this issue; LeBrón et al., this issue; Reid et al., this issue). These challenges can be overcome by providing funding mechanisms and guidance that allow enough time for meaningful and respectful relationships, open communication, transparent decision-making processes, and leadership development to occur (Butterfoss & Kegler, 2009).

Although they also describe challenges, Reid et al. (this issue) describe key components of how structure and process can be enhanced by the convening group to promote equity and justice. Both coalitions that were the focus of their study—Skid Row Women and Healthy Livable Communities of Cattaraugus County—created a convening group that included people most affected by inequity. Both groups used collaborative engagement tools to build relationships and engage diverse members by active listening, honoring each other's' truths, identifying promising work done across the community, and developing aims and driver diagrams to see how different parts of the work contribute to a shared goal. Skid Row Women focused on developing

an effective meeting process using poetry and creativity to "make sure no voice was left unheard." Cattaraugus County used a subcommittee structure to organize their work around improvement aims, encourage participation in decision making and leverage funds from multiple sources to improve access to community spaces for people with physical disabilities.

Several other articles detail how convener and leadership roles also can be enhanced by offering practical and timely training and technical assistance. Collura and her colleagues (this issue) at Ohio University describe how the nonprofit Prevention Action Alliance formed the Ohio Youth-Led Prevention Network that provided infrastructure for networking among youth-led programs and established the statewide youth council. A developmental evaluation of state and local youth–led programs in Ohio was conducted by the authors, which led to a training and technical assistance program for adults who facilitate youth-led programs.

The evaluation showed that in an effort to allow young people to lead, the adult conveners did not provide the group structures and climate to ensure that young people were equipped for their leadership roles. The first step was to articulate the roles and responsibilities of adults and youth in the coalition. Second, coalitions were urged to critically reflect on the power dynamics between youth and adults, how youth were being engaged as leaders and what else they needed to be successful. The process that resulted from these discussions created space and structure, encouraged active participation, built leadership capacity, and provided resources.

Providing ongoing training and technical assistance that is coalition and issue focused will have lasting impact for any collaborative. Templates, tools, and processes that have worked in similar collaboratives and coalitions to create clear organizational structure and decision-making processes, community engagement, and leadership can be adapted to fit unique circumstances and evaluated for effectiveness. If this onsite or virtual assistance is provided by a neutral organization or individual (and not the funder), coalitions are likely to be more open and willing to share failures as well as successes in future endeavors.

Conclusion

Each of the articles in this issue offers multiple unique insights into complex community-driven processes with differing contextual considerations. Across these diverse settings and focal issues, the CEJ principles provide not only guides for practice but also tools for reflection, evaluation, empirical analysis, and cross-site comparisons. Despite the challenges and complexities, collaboratives must continue to experiment and identify ways that their internal processes and external actions can become more effective in the pursuit of equity and justice.

From a research perspective, many challenges persist in the study of coalition action. Most of the articles in this issue were case studies of one (or a few) collaboratives. Many lacked clear and consistent definition of the outcomes and indicators of progress along the way to addressing health and social issues. Most were unclear about how much effort to invest in various activities and forms of community engagement or how much systemic change would be needed to create the community-level conditions they were pursuing. The fifth CEJ principle proposed by Wolff et al. (2017) suggests that collaboratives build on the extensive community engaged research that shows what works, acknowledges the complexities, and evaluates appropriately. We hope that this special issue will serve as a launching point for new collaborative research and informed practice with coalitions seeking to navigate not only traditional notions of functioning and effectiveness but also the complexities of pursuing equity and social justice.

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