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THE 5 W'S OF PRACTICING EQUITY AS A CENTRAL PART OF ADVOCACY

Public health is an essential part of society that seeks to promote well-being for all individuals, regardless of their background or social position. The stark reality, however, is that structural inequities in public health persist, creating disparities in health outcomes among different populations. Indicators such as race, socio-economic status, gender, age, geographic location, and other identities dictate people's health outcomes. These inequities are deeply rooted in societal structures, policies, and historical injustices, and addressing them is crucial for achieving health.

Just like structural inequity is present in health outcomes, policy and community advocacy spheres have created these same parameters that often hinder communities from meaningful participation. Socially stratified communities are often marginalized from advocacy spheres that have the ability to significantly alter their conditions. While some of these inequities are unintentional, to combat the exclusion of marginalized voices advocacy spaces must intentionally create accessible and accommodating spaces for marginalized voices to advocate for themselves.

In combating structural inequity and empowering communities, it is necessary to actively challenge existing power structures in an intentional and empowering way by engaging in shared and deferred leadership with marginalized communities. By engaging in equitable advocacy, community-based solutions will lead to health outcomes that reflect the true needs of disadvantaged community members.



If you are looking for ways to intentionally integrate equity into your advocacy model, here are the questions you need to ask yourself, your coalition, and other members or folks who are at your table.

WHO?

Who are the communities and individuals that are the most impacted by the issue you are seeking to change?

Chances are, the individuals that are feeling the largest impacts by these health consequences belong to communities that are disparately affected by a host of other inequities. As marginalized communities are often plagued by a wide array of societal issues, understand that the "who" may be a larger population than you anticipated or conceptualized.



WHAT?

What are directly impacted communities experiencing and what are they doing about it?

Often, when conceptualizing negative health impacts as a consequence of policy, policy advocates and organizers do not recognize the unique experiences of health consequences on disparately impacted communities. The magnitude of these impacts typically have implications for marginalized communities outside of health outcomes. It is necessary to think about the impacts of policy that reflects and accounts for people's lived experiences, including experiences that exist outside of direct health impacts. Additionally, what are those directly impacted communities doing to combat these issues they're facing?



WHY?

Why are the directly impacted communities bearing the brunt of the health consequences?

It is important to identify any legislation, systemic practices, or outside entities that are maintaining cycles of inequity and disenfranchisement.



WHERE?

Where are directly and disparately impacted community members in your advocacy structure – are they leading the advocacy efforts?

They should always be at the forefront. Oftentimes, those that are most impacted by an issue have the solutions, they just lack the institutional support and resources to alter the material consequences that are impacting their lives.



WHEN?

When you are developing strategies to challenge the social and disparate health issues, are individuals that are directly and disparately impacted present and assisting in developing policy solutions?

This requires an in-depth look at the strategies and tools you, your organization, and coalition are using to advocate for specific issues. Check to make sure your meeting times and location are accessible, contact direct service organizations, and meet people where they are!



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