

Log In

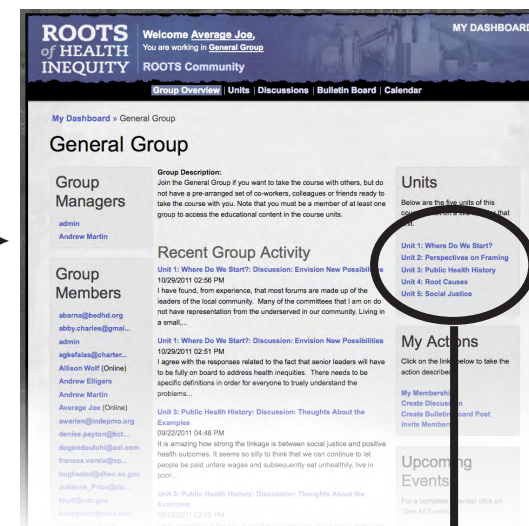
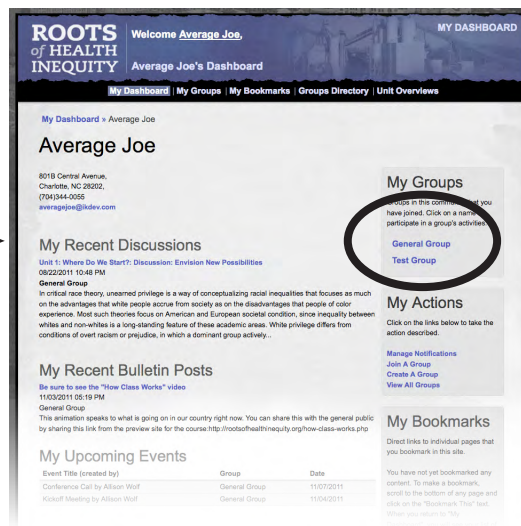
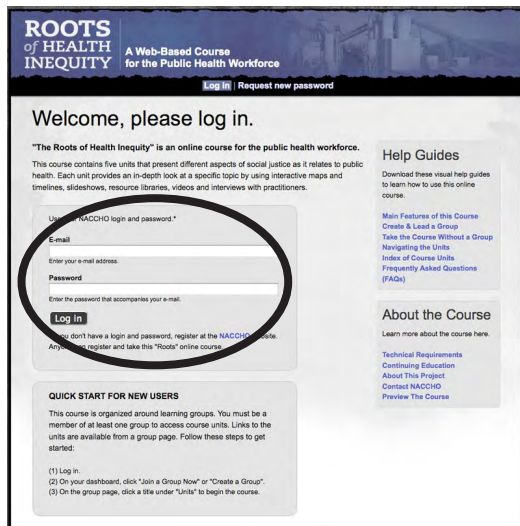
Use your NACCHO email & password

My Dashboard

After joining or creating a group, you'll find a group name here. Click on the name to go to Group Page.

Group "Overview" Page

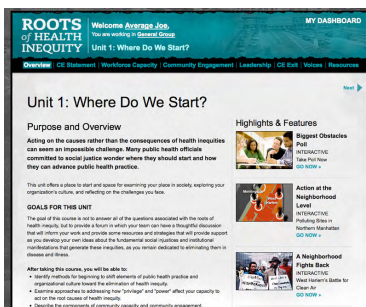
Click on a title to go directly to that unit.



["Roots" Community Section]

[Course Units Section]

Unit 1



Unit 2



Unit 3



Unit 4



Unit 5



ROOTS of HEALTH INEQUITY Welcome Average Joe, You are working in General Group **MY DASHBOARD**

Unit 1: Where Do We Start?

Overview | CE Statement | Workforce Capacity | Community Engagement | Leadership | CE Exit | Voices | Resources

Unit 1: Where Do We Start? [Next](#)

Purpose and Overview

Acting on the causes rather than the consequences of health inequities can seem an impossible challenge. Many public health officials committed to social justice wonder where they should start and how they can advance public health practice.

This unit offers a place to start and space for examining your place in society, exploring your organization's culture, and reflecting on the challenges you face.

GOALS FOR THIS UNIT

The goal of this course is not to answer all of the questions associated with the roots of health inequity, but to provide a forum in which your team can have a thoughtful discussion that will inform your work and provide some resources and strategies that will provide support as you develop your own ideas about the fundamental social injustices and institutional manifestations that generate these inequities, as you remain dedicated to eliminating them in disease and illness.

After taking this course, you will be able to:

- Identify methods for beginning to shift elements of public health practice and organizational culture toward the elimination of health inequity.
- Examine approaches to addressing how "privilege" and "power" affect your capacity to act on the root causes of health inequity.
- Describe the components of community capacity and community engagement.
- Describe how political pressure influences public health practice.

This course was built for you to become a co-creator of knowledge. Groups should initiate discussions; you should respond to others in your Learning Group, and hopefully, continue to discuss and explore these ideas offline.

Highlights & Features

Biggest Obstacles Poll
INTERACTIVE
Take Poll Now
[GO NOW](#)

Action at the Neighborhood Level
INTERACTIVE
Polluting Sites in Northern Manhattan
[GO NOW](#)

A Neighborhood Fights Back
INTERACTIVE
West Harlem's Battle for Clean Air
[GO NOW](#)

Exposing Hidden Interests
SLIDESHOW
Smallville Case Study
[GO NOW](#)

Index of Content for this Unit

Click on a title to jump to that page.

Workforce Capacity

- Let's Start
- INTERACTIVE: Biggest Obstacles Poll
- Inspire Change From Within
- SLIDESHOW: Doak Bloss
- DISCUSSION: Confront Uneared Privileges (CE)
- DISCUSSION: Envision New Possibilities

Community Engagement

- Authentic Community Engagement
- Action at the Neighborhood Level
- INTERACTIVE: Polluting Sites in Northern Manhattan Interactive
- INTERACTIVE: A Neighborhood Fights Back
- DISCUSSION: Thoughts about the Presentation
- DISCUSSION: Share Your Experience (CE)

Leadership

- Competing Interests and Political Pressures
- DISCUSSION: Political Pressure Points
- DISCUSSION: Sharing Strategies
- Exposing Hidden Interests
- INTERACTIVE: Smallville
- DISCUSSION: Focusing on Smallville
- DISCUSSION: Scrutinizing Decisions (CE)
- Statements, Assumptions and Actions
- COMPARISONS and DISCUSSION: Statements, Assumptions and Actions

Voices from the Field

- Index of Voices
- Dr. Renee Canady
- Vernice Miller-Travis (CE)
- Dr. Umair A. Shah
- Doak Bloss

Resources

- Index of Resources
- A Starting Place
- Recognizing Community Strengths
- Community Relationships: A Self-Assessment
- Rajiv Bhatia: Using Our Voice Excerpt

Conclusion

- The Last Word
- Satisfaction Survey

Printer-friendly Version Unbookmark This [Next](#)

Header contains links to your dashboard and your group page. (See page 3 for details)

Chapter titles and links.

"Next" link goes to next page in the unit.

"Go Now" links to the featured content in this unit.

Index with links to every page in this unit

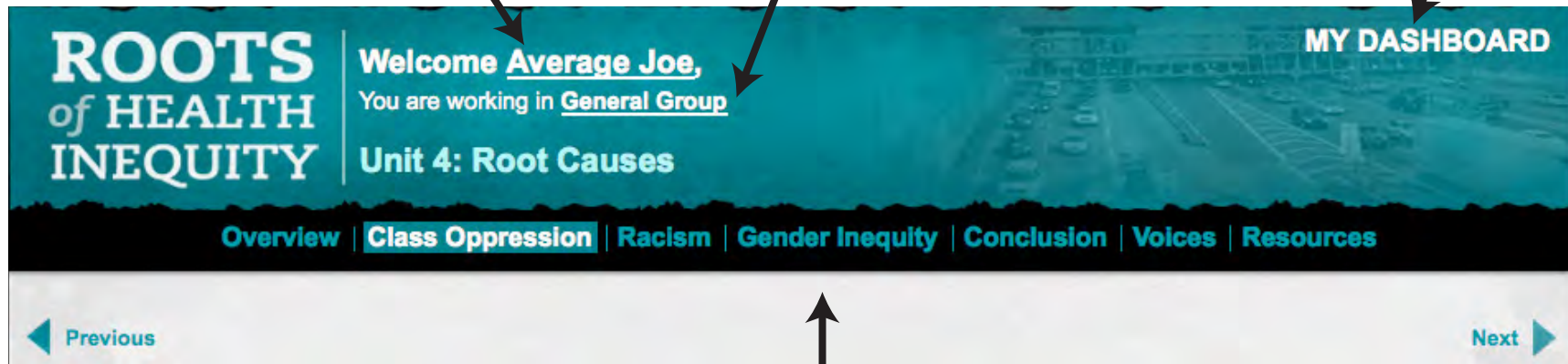
"Next" link goes to next page in the unit.

Your current group's name. Links to the group overview page.

IMPORTANT: To work on a different unit, click here then chose a unit from the group page.

Your user name. Links to your Dashboard.

Links to your Dashboard.



Click on this to see the previous page.
Works like turning pages in a book.

Chapter titles within this unit.
Click on one to jump to that chapter.

Click on this to see the following page.
Works like turning pages in a book.

Unit page with sidebar link to “Voices from the Field”

ROOTS of HEALTH INEQUITY Welcome Lou Kinard,
You are working in General Group
Unit 1: Where Do We Start?

MY DASHBOARD

Overview | CE Statement | **Workforce Capacity** | Community Engagement | Leadership | CE Exit | **Voices** | Resources

Previous Next

Inspire Change from Within

Developing a productive, creative, and accountable workforce is an important first step toward achieving health equity. This type of workforce development involves shifting organizational culture to align daily work principles of social justice.

Organizations focusing on internal capacity building have found that ongoing staff dialogue is essential. Their experiences suggest that before engaging and allying with colleagues outside of an organization, it is critical to support staff members in examining social injustice.

Using Dialogue Process to Inspire Change

The Ingham County (MI) Health Department used a dialogue process to engage employees and community members in health equity work. The department trained a team of facilitators, led by health equity and social justice coordinator Doak Bloss, who now regularly conducts four-day workshops examining social justice concepts and strategies for mobilizing for change. In these workshops, participants' own experiences inform the group's exploration of how privilege, oppression, and power affect a community's health.

In the slideshow below **Doak Bloss** leads an interactive workshop for local public health leaders ready to tackle the root causes of health inequity. Review the slideshow and then begin a discussion on **Confronting Unearned Privilege** on the next page.

Quick Tip
Building Internal Capacity
Dialogue occurs over time as staff members share ideas and build collective knowledge about the link between social justice and public health work. In the process, we notice things we may not have noticed before. We inspire others to action by sharing our successes and the lessons we learned.

Additional Resources
Voices From The Field

Doak Bloss
Health equity and social justice coordinator Doak Bloss regularly conducts four-day workshops examining social justice concepts and strategies for mobilizing for change. In these workshops, participants' own experiences inform the group's exploration of how privilege, oppression, and power affect a community's...

[Learn More >](#)

Clicking on a “Learn More” link in the sidebar of a unit will take you to a detail page in the “Resources” or “Voices from the Field” chapters.

In this case, the “Previous” button will not work accurately. Use your browser’s “BACK” button to return to the unit page that you were reading.

If you get lost, click on a chapter title or the “Overview” button to start over.

Detail page inside “Voices from the Field”

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Overview | CE Statement | Workforce Capacity | Community Engagement | Leadership | CE Exit | **Voices** | Resources

Previous Next

Doak Bloss

Doak Bloss Summary

Health equity and social justice coordinator Doak Bloss regularly conducts four-day workshops examining social justice concepts and strategies for mobilizing for change. In these workshops, participants' own experiences inform the group's exploration of how privilege, oppression, and power affect a community's health. Bloss states that, "We're trying to get people at a personal and interpersonal level to understand where this stuff comes from, and how we're all in it. It's not about someone out there somewhere. It's about our own institutions. It's about us." If an organization welcomes the challenges to privilege and oppression – what would that look like?

Some of the topics that Bloss explores in this video:

- Target and Non-Target Identities
- What keeps us from seeing privilege?
- Our guilt or shame and fear of being cast as the oppressor
- Four Levels of Oppression: Personal, Interpersonal, Institutional, Cultural
- Why We Must Tackle Racism, Classism, Sexism Explicitly

Related Voices

Dr. Renee Canady
The work involved in achieving social justice as it relates to health inequity is not linear. That is, there are many places to start the work and many organizations who can take the lead in their particular field. But genuine dialogue among leaders in public health, education, criminal justice, employment and other fields is...

[Learn More >](#)

Dr. Umair A. Shah
Every public health department needs to have access to a group of colleagues who can share their ideas about what a future health equity-related strategy might look like. These ideas can begin on a theoretical level but need to be transformed into practical strategies that create a roadmap toward the future. The roadmap must... [Learn More >](#)

Vernice Miller-Travis (CE)
A critical role of the local public...