



MAY 7, 2024, PEER-TO-PEER SHARING WEBINAR

Applying a Social Justice Framework to Arthritis Management and Well-being



**NATIONAL ASSOCIATION OF
CHRONIC DISEASE DIRECTORS**

Promoting Health. Preventing Disease.



Agenda

- Welcome
- Arthritis Council Election Process
- Social Justice Framework Presentation
- State Sharing and Q&A
- Wrap Up



Webinar Objectives

1. Provide an overview of the development of the Social Justice Framework
2. Engage participants in discussion around health equity and how state arthritis programs can use the Social Justice Framework to help advance arthritis efforts
3. Provide a platform for peer-to-peer learning and sharing



Housekeeping

Rename

Rename yourself to include state or organization

Use

Use the chat box for questions during the presentation or present questions via speaking during Q&A

Visit

Visit the Action on Arthritis website for recording, notes, and resources, and the Engage platform for continued conversation on this topic

NACDD Technical Assistance Opportunities - Arthritis

- Engage
 - Discussion platform
- Meetings and Webinars*
 - Monthly webinars, 1st Tuesday/month @2pm ET
 - Strategy 1 workgroup, 2nd Thursday/month @2pm ET
 - Strategy 2 workgroup, 1st Thursday/month @2pm ET
- Open office hours June 27 @12pm ET

**Registration required*





Arthritis Council Elections



Arthritis Council

The Arthritis Council provides a forum for CDC-funded state arthritis programs, national organizations, and other partners to come together for peer-to-peer sharing and learning to increase state capacity to advance arthritis public health efforts.

Any NACDD member, associate member or friend is eligible to join the Arthritis Council.

And NACDD membership is FREE!



Arthritis Council Objectives

- **Represent** State Health Department arthritis programs and related issues and concerns within NACDD.
- **Link** state/territorial/tribal program directors/coordinators, and others in a national forum to act collectively in the promotion of Arthritis health.
- **Exchange** ideas, strategies, materials, and policies and procedures to improve and enhance comprehensive public health programs/policies for Arthritis diseases and their risk factors.
- **Advocate** for legislation, policies and programs to reduce the burden of Arthritis diseases and their risk factors.
- **Provide** comments and recommendations to federal agencies and the membership on issues for which comment has been solicited or for which the Council feels comments are required.
- **Offer** leadership and develop partnerships with affiliates, private and public associations and industry to catalyze promotion of Arthritis health.



Arthritis Council Steering Committee

Virtual Meeting Schedule

- The Steering Committee meets for 30 minutes each month
 - In the past this has been the third Wednesday of each month at 4pm ET.
- The Steering Committee meets quarterly (Jan/Apr/Jul/Oct) with the CDC arthritis team for 30 minutes
 - In the past this has been preceding or following the Steering Committee call.



NACDD Arthritis Council Steering Committee Elections

- Nomination period for the Arthritis Council Steering Committee is May 6-17, 2024. **NOW OPEN – Click [HERE](#) to nominate candidates.**
- Election of Steering Committee representatives takes place June 3-14, 2024, with newly elected representatives notified on June 24, 2024.
- The first meeting of the newly elected Steering Committee will be held in July 2024.



Social Justice Framework Presentation



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CENTER FOR JUSTICE IN PUBLIC HEALTH

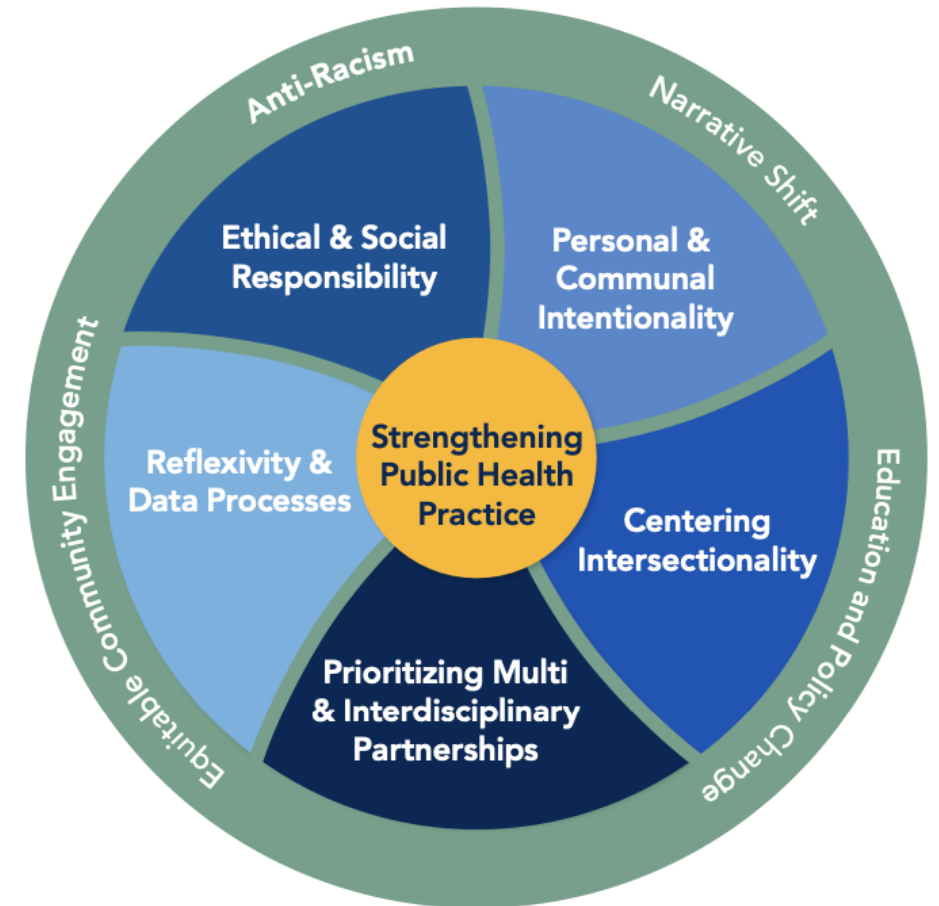
The Social Justice Framework

May 7, 2024

*Social
Justice is
Public
Health*

Objectives:

- Define Social Justice
- Social Justice and Public Health
- Overview of the Framework
- Discussion



How do you define Social Justice?



Social Justice Defined

- Justice in terms of the distribution of wealth, opportunities, and privileges within a society
- Individuality gives way to the struggle for social change
- Oxford Dictionary



Adriana Garriga-Lopez: Social Justice Conscience About Public Health

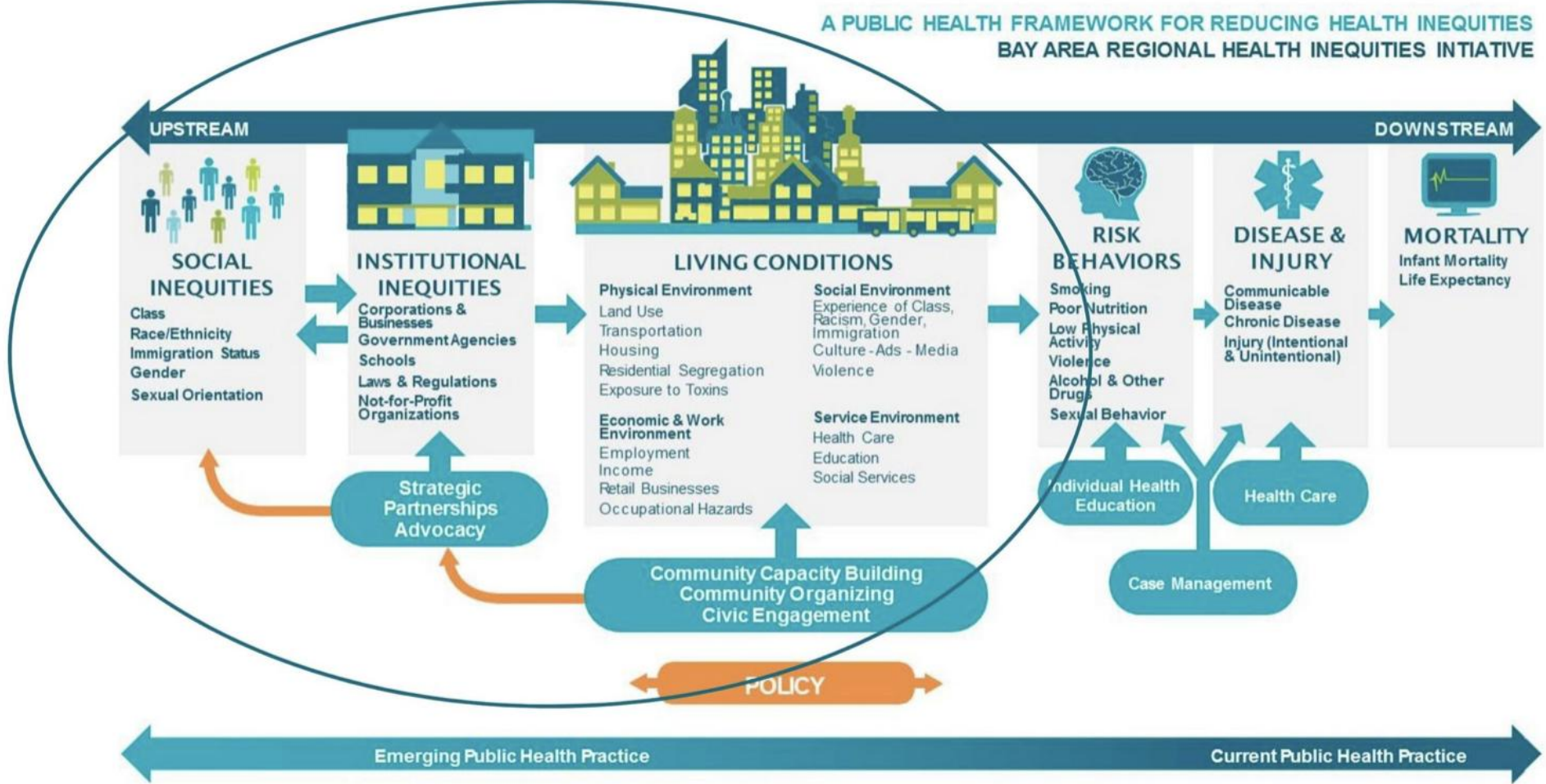


Public health is what we, as a society, do collectively to assure the conditions in which people can be healthy

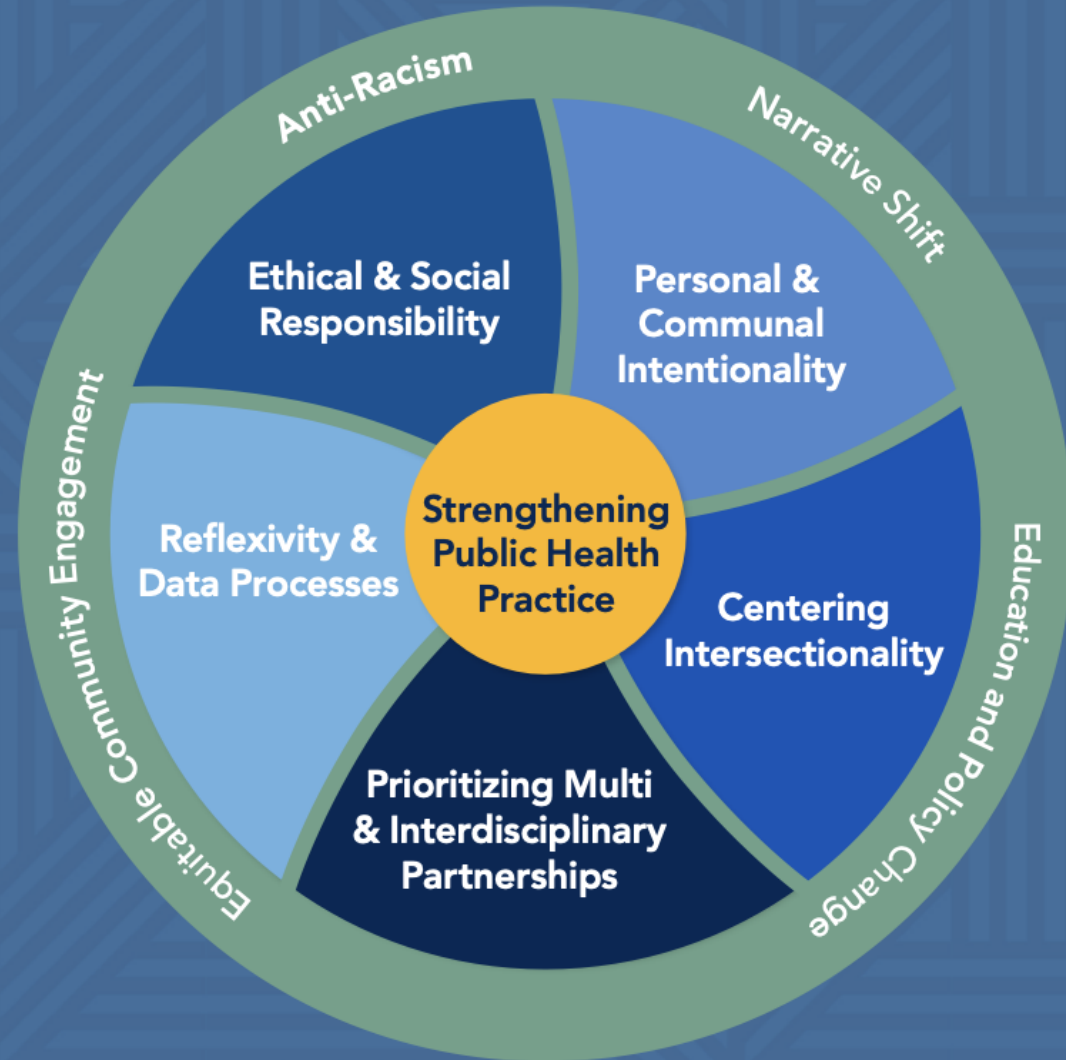
-Institute of Medicine (1988), Future of Public Health



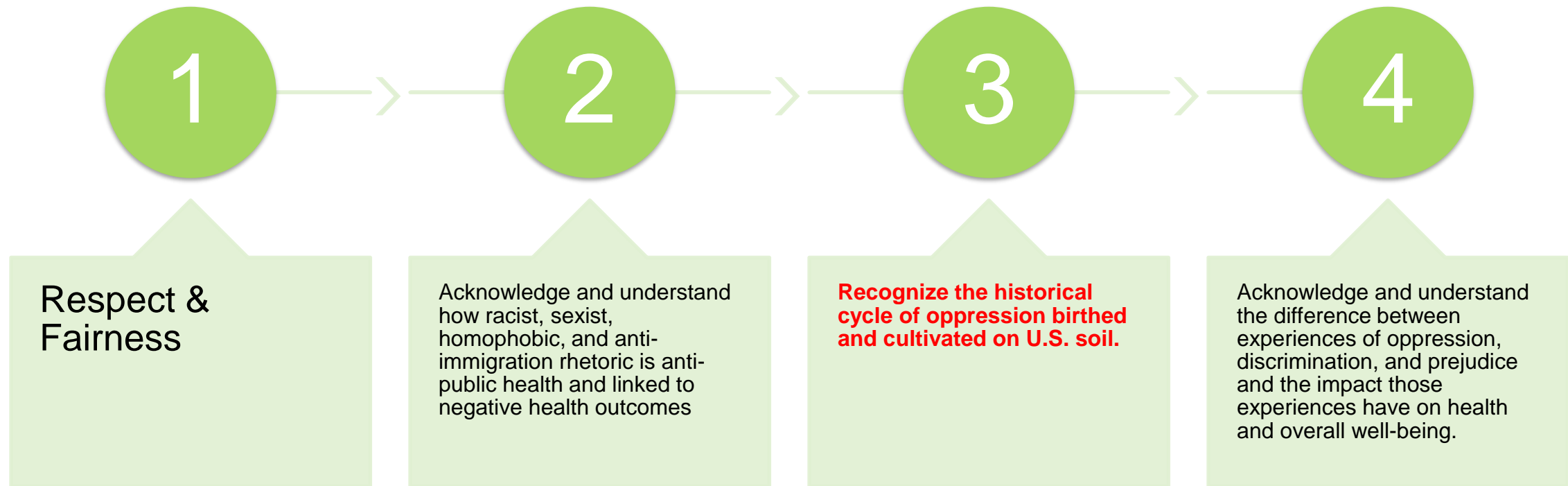
A PUBLIC HEALTH FRAMEWORK FOR REDUCING HEALTH INEQUITIES
 BAY AREA REGIONAL HEALTH INEQUITIES INITIATIVE



NACDD's Social Justice Framework for Public Health Professionals



Pillar #1: Ethical and Social Responsibility



Perspective Transformation: Examining Bias



- Why do I believe What I believe?
- Head vs. Heart
- What were my racial experiences or interactions growing up?
- With whom do I feel safest?
- Who feels safest around me?
- Who is in my current sphere of influence?



Principles of Ethical Practice of Public Health

1. Public health should address principally the fundamental causes of disease and requirements for health, aiming to prevent adverse health outcomes.
2. Public health should achieve community health in a way that respects the rights of individuals in the community.
3. Public health policies, programs, and priorities should be developed and evaluated through processes that ensure an opportunity for input from community members.
4. Public health should advocate and work for the empowerment of disenfranchised community members, aiming to ensure that the basic resources and conditions necessary for health are accessible to all.
5. Public health should seek the information needed to implement effective policies and programs that protect and promote health.
6. Public health institutions should provide communities with the information they have that is needed for decisions on policies or programs and should obtain the community's consent for their implementation.
7. Public health institutions should act in a timely manner on the information they have within the resources and the mandate given to them by the public.
8. Public health programs and policies should incorporate a variety of approaches that anticipate and respect diverse values, beliefs, and cultures in the community.
9. Public health programs and policies should be implemented in a manner that most enhances the physical and social environment.
10. Public health institutions should protect the confidentiality of information that can bring harm to an individual or community if made public. Exceptions must be justified on the basis of the high likelihood of significant harm to the individual or others.
11. Public health institutions should ensure the professional competence of their employees.
12. Public health institutions and their employees should engage in collaborations and affiliations in

Essential Public Health Services ²	Ethical Principle
1. Monitor the health status to identify community health problems	(5) collect information (7) act on information
2. Diagnose and investigate health problems and health hazards in the community	(5) collect information
3. Inform, educate, and empower people about health issues	(4) advocacy and empowerment (6) provide information
4. Mobilize community partnerships to identify and solve health problems	(12) collaboration
5. Develop policies and plans that support individual and community health efforts	(1) protect and promote health; address fundamental causes of health risks (3) processes for community input (5) collect information
6. Enforce laws and regulations that protect health and ensure safety	(2) achieve community health with respect for individual rights (3) feedback from the community (7) act upon information
7. Link people to needed personal health services and assure the provision of health care when otherwise unavailable	(4) advocate for and empower; basic resources available to all (8) incorporate diversity
8. Assure a competent public health and personal health care workforce	(11) professional competence
9. Evaluate effectiveness, accessibility, and quality of personal and population-based health services	(3) community feedback (5) collect information
10. Research for new insights and innovative solutions to health problems	(5) collect information
No corresponding essential public health	(9) enhance physical and social environments



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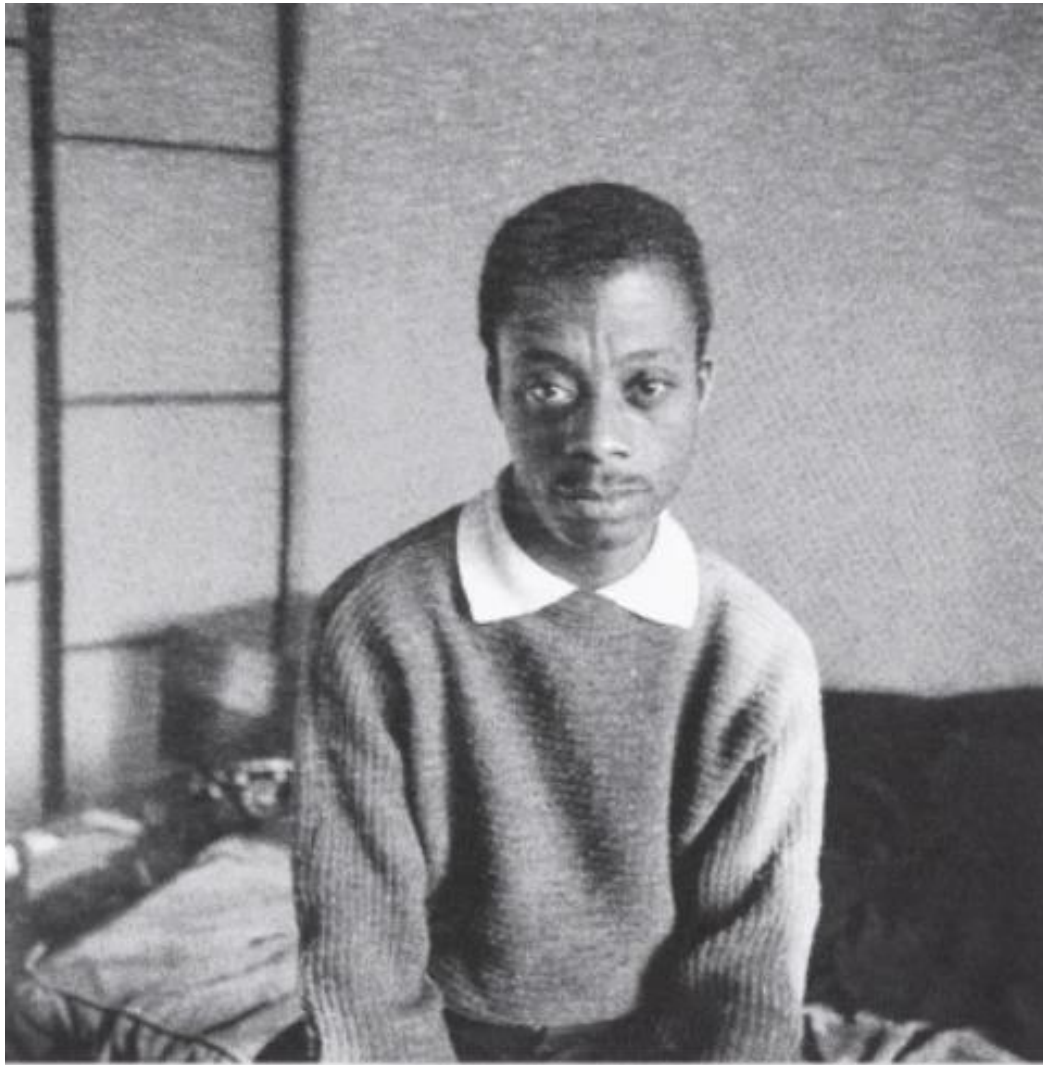


Pillar #2: Personal and Communal Intentionality



- Engage in a purposeful and thorough understanding of the environments in which people are born, raised, and live
- Recognize barriers to health stem from practices, policies, and structures purposefully built to exclude and harm (e.g., racism, sexism, etc.)
- Individual and collective action that intentionally centers community voice and incorporates lived experience is critical to achieving social justice



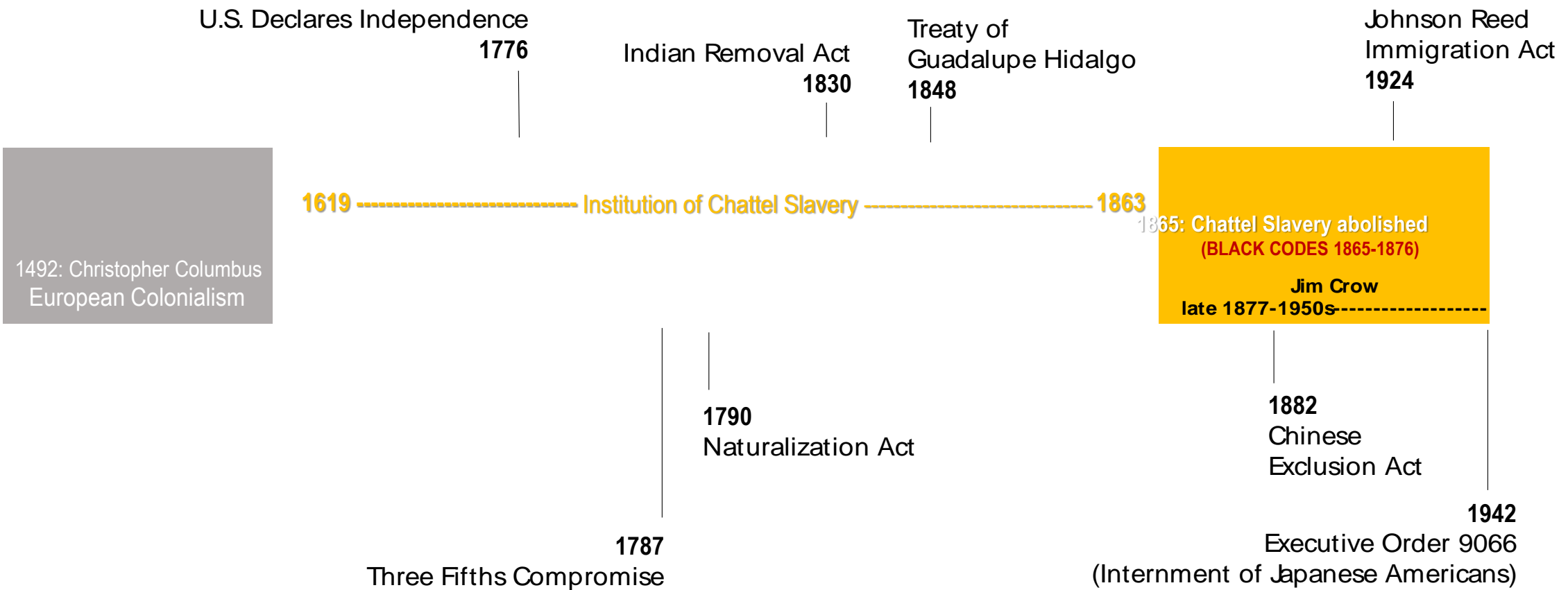


*People are trapped
in history and history
is trapped in them.*

**James
Baldwin**



AMERICA I AM RACE



Building our Racial Equity Muscle

- Understand how the isms works.
- Start with an understanding of history and structural conditions.
- Take responsibility for eliminating institutional racism.
- Confront your own biases.
- Lift up intersecting oppressions.
- Remember institutional racism favors White people at the expense of Black, Latinx, Asian Americans and Indigenous People.
- Talk about how racism harms all of us.
- Shift the culture.
- Make it a life practice.



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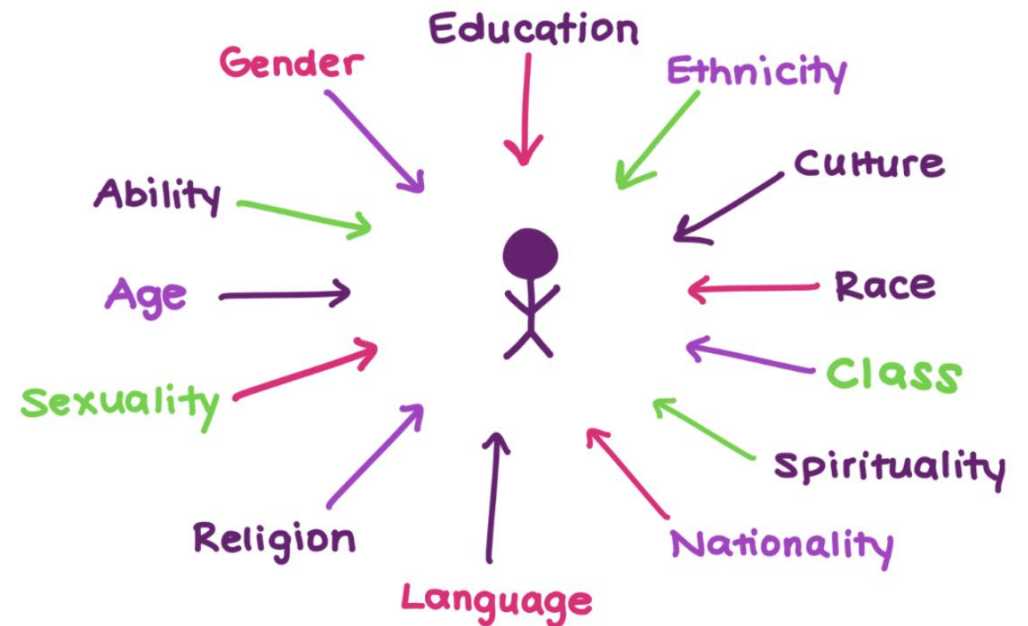


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Pillar #3: Centering Intersectionality

- Promote the celebration of people's identities.
- Promote inclusivity for communities experiencing multiple forms of oppression.
- Ensure the needs of communities facing overlapping and intersecting forms of oppression are met
 - Develop, implement, evaluate efforts that promote inclusivity
 - Prioritize groups



She has many affiliations



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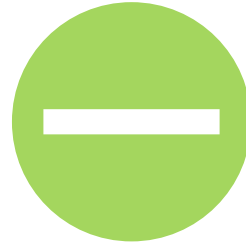
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Pillar #4: Prioritize Multi and Interdisciplinary Partnerships



Diversify Partners



Remove Barriers to Non-traditional partnerships



Lift & Center Community Voice



Centering Equity in Collective Impact

1. *A common agenda*, shaped by collectively defining the problem and creating a shared vision to solve it;
2. *Shared measurement*, based on an agreement among all participants to track and share progress in the same way, which allows for continuous learning, improvement, and accountability;
3. *Mutually reinforcing activities*, integrating the participants' many different activities to maximize the end result;
4. *Continuous communication*, which helps to build trust and forge new relationships;
5. A *"backbone" team*, dedicated to aligning and coordinating the work of the group.

Five Strategies for Centering Equity

Fortunately, many collective impact efforts around the world have already made progress in centering equity. In studying equity-focused collective impact efforts across regions and issues, we see five strategies in particular emerging as critical to centering equity:

1. Ground the work in data and context, and target solutions.
2. Focus on systems change, in addition to programs and services.
3. Shift power within the collaborative.
4. Listen to and act with community.
5. Build equity leadership and accountability.

<https://ssir.org/articles/entry/centering-equity-in-collective-impact>



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5. Reflexivity and Data Processes



The practice of being self-aware and acknowledging personal biases when developing scholarship



Determining which data collection method – qualitative, quantitative, or both – can best tell the story of people’s lived experiences and inform the development of relevant programs and policies



Reflexivity relates to sensitivity to the ways in which the researcher and the research process may shape the data collected, including the role of prior assumptions and experience - NIH



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Reflexivity and Data Processes	Understand and discuss how different data collection methods (e.g., surveys, interviews, quantitative research, qualitative research, focus groups, etc.) might limit the social justice goals of public health.



Policy Level	Operationalization of Pillars
Ethical and Social Responsibility	Join or create groups to strategize against injustices; historically, grassroots movements have been key to fighting different forms of oppression.
Personal and Communal Intentionality	Establish and uphold people-centered policies (e.g., community, employees, volunteers).
Centering Intersectionality	Develop policies highlighting the harmful effects and consequences of engaging in hazing culture, hierarchical culture, and respectability politics* within the workplace or community.
Prioritizing Multi and Interdisciplinary Partnerships	Create pathways to readily access and consult with social justice leaders to identify, limit, and prevent the weaponization of respectability politics.
Reflexivity and Data Processes	Ensure reports informing policy and practice are equitably disseminated into the community.



Discussion Questions

1. How can Public Health leverage the pillars to realize a narrative shift in Public Health?
2. How can Public Health leverage the pillars to promote anti-racism in public health practice?
3. How can Public Health leverage the pillars to realize a shift in education and policy?
4. How can the Public Health leverage the pillars to center community voice and equitable community engagement?
5. What tools would be helpful with applying the SJ Framework in your public health practice?



**CENTER FOR
JUSTICE**
IN PUBLIC HEALTH

Thank you!

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State Sharing and Q&A





Wrap Up and Closing



Thank you!



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