

Transforming Systems: Achieving Social Equity



Presenting Problem

Social, racial and ethnic cultural groups encounter disadvantages when seeking access to institutional services and community supports. A growing body of research suggests institutional racism as a primary determinant for social inequities. Institutional racism in the U.S. is the persistence of deep racial disparities and divisions across society as evidenced by the routine, often invisible and unintentional, production of inequitable social opportunities and outcomes (2009 Applied Research Center).

Policies, spending decisions, and organizational structures have great impact upon people of color, the poor, women, seniors, people with disabilities and members of the LGBT community. The consequences of institutional racism run throughout the fabric of our history resulting in cumulative and chronic adverse outcomes for marginalized populations.–

Background

Indicators of institutional racism are differential access to the goods, services, and opportunities of society. When the differential access becomes integral to institutions, it becomes common practice, making it difficult to rectify. Institutional racism is distinguished from interpersonal bigotry by the existence of institutional systemic policies, practices and economic and political structures which place non-white racial ethnic and social cultural groups at a disadvantage.

Institutional racism is frequently unintentional and invisible. Limited access to health care, exposure to

unhealthy living or working conditions, overcrowded housing and other economic and societal inequities are outcomes of institutional racism. Additional examples of institutional racism include unequal distribution of school funding and resources, underrepresentation of subpopulations on governing Boards, Councils, and Commissions, economic planning policies that negatively impact low-income neighborhoods, and public services that limit access and eligibility.

Transforming Systems: Monterey County Case Studies

Many programs have been developed to address social inequities. Here are a few examples:

MC Choice: Improving access to health insurance and CalFresh (Food Stamps) for children and families

The Department of Social Services created a specialized program within the Community Benefits Branch to increase outreach, enrollment, retention, and utilization of Medi-Cal and CalFresh program benefits for families throughout Monterey County. The program launched a bilingual website and implemented a countywide schedule of field site visits with community and faith based organizations, school districts, health clinics, and other public agencies. Since inception in 2007 MC Choice outreach workers have assisted 3,925 families apply for Medi-Cal and CalFresh benefits. This institutional change makes it possible for residents unable to visit the Department to apply for benefits via MC Choice outreach workers at various community locations.

Building Healthy Communities – Improving the health of Alisal residents

In 2009 the California Endowment partnered with the residents of East Salinas, also known as the Alisal on their 10 year Building Healthy Communities (BHC) initiative. The goal of the initiative is to have communities work to improve their neighborhoods' overall health. The BHC initiative provides an example of a community driven and lead project specifically designed to engage residents in the planning, development and leadership of the initiative. Through this nontraditional approach the first year accomplishments for the BHC East Salinas initiative include the implementation of the Alisal Health Professionals Workforce Pathway project, which aims to increase diversity among individuals seeking careers in the health field. Youth leadership development and promotion is also taking place through the Alisal BHC AmeriCorps program. And In the Acosta Plaza neighborhood, an area that has experienced crime, resident leadership is being developed. The BHC East Salinas initiative is facilitated by the HUB which is administered through Second Chance Youth Project, a nonprofit community based organization.

Alliance on Aging – Senior Peer Counseling Program

With funding from the Monterey County Behavioral Health Department, in 2007 the Senior Peer Counseling Program (SPC) began expansion of outreach to the Latino Community. The goal was to increase awareness and participation of the SPC services. Strategies to reach this underserved population included making regular and repeated visits to venues where seniors and their families gather. This involved collaborations with local providers, organizations, schools and churches that served seniors. At the sites, staff engaged seniors one on one, in small and large group settings. As many seniors were reluctant to discuss the emotional challenges of aging, initially conversations were focused on general resources for seniors. Each year a "Wellness Series" was offered at several sites and presentations were made by local health care professionals in Spanish. Topics included: *The Effect of Depression on Diabetes and other Chronic Conditions*; *The impact of Chronic Illness on the Family*; and *The*

Relationship of Healthy Eating on Mental Health. In both the small and large groups, food was provided to create a more comfortable and social setting. Over time, the seniors began bringing their own "potluck" to share. As the project evolved over four years, the seniors began to develop trust in the program and the staff. Several were interested in becoming volunteer peer counselors. After certification training, the volunteers were able to provide one-on-one counseling as well as support group facilitation. In some cases because of limited education, these volunteers required additional support from staff in completing the necessary paperwork. The volunteers were then able to provide that same support to the Latino clients they were working with. The bilingual volunteers are provided group support and supervision training twice a month and individually as needed. As many of the volunteers were low income they were offered reimbursement for mileage to training and to their client's home. In 2007 there was 1 bilingual SPC volunteer and the program was serving 10 Latino clients. By June 2011, there were 11 bilingual volunteers serving 201 Latino clients. Seniors and/or family members attended the Wellness series on their behalf. The support groups have proven to be a popular model for these seniors. Often from the support groups, requests have come for one-on-one counseling. In some cases the volunteers were not able to continue their volunteer work. Family crisis, work obligations and other financial stressors were cited as the cause. Training for this group will have to be done more often in order to maintain an optimum number of volunteers.

The Village Project

With funding from the Monterey County Behavioral Health Department, The Village Project in Seaside is designed to address African American youth and families. An outpatient program developed integrating culturally specific values, traditions, and intervention. The Village Project has developed a broad referral network of schools, social service agencies; community based volunteer organization, individuals, families and peer referrals. Located in a community that is home to the majority of African Americans in Monterey County it has expanded its offerings from contract based services to add other services supported by other funding streams,

grants and donations. The Village Project, in addition to the outreach and early intervention counseling services now has after school activities, homework assistance, parent support and advocacy with public services including social welfare, schools, and Probation and law enforcement. The Village Project provides culturally based mental health training of interns interested in working in the African American Community. The organization has served as a hub for the African American Community activities to enable African American youth to overcome obstacles and have better opportunities in school achievement and employment. The Village Project has become a neighborhood access point for community residents interested in behavioral health services for their youth and families. Approximately 20% of mental health program participants are from ethnic or racial groups other than African American.

Steinbeck Institute for Arts and Culture

With funding from the Institute of Museum and Library Services, children in the Niños del Mundo program will explore their environment and culture, and universal themes in John Steinbeck's writing, such as the workingman's struggle for dignity and the resilience of the human spirit. Participants in this program, which will start in October, 2011, will be 4th and 5th grade elementary school students who are Latino and from economically disadvantaged families. The student's work will be coordinated with free-to-the-community professional performances: dance, music, lectures, and readings. This will improve the quality of student projects, involve their families and expose the public to the Niños del Mundo program.

This program will:

- Provide an multi-disciplinary approach to the arts and humanities;
- Improve reading and writing skills and proficiency in English;
- Increase knowledge of history, English, literature and art;
- Promote creative and critical thinking
- Provide a safe after-school environment for children.

First 5 Monterey County

First 5 Monterey County supports community partnerships and programs that serve children 0-5 at risk due to their socio-economic status. Funding is provided to more than 20 organizations serving families in the county.

In 2005, First 5 selected Early Learning Opportunities as a primary focus for funding. In a planning process conducted in 2006, over 1,000 voices from diverse communities contributed their ideas, experiences and perspectives. The group identified 5 characteristics essential to the success of programs: culturally and linguistically appropriate; family centered; community-based; coordinated with each other; and accessible during flexible hours. Since that time, organizations supported by First 5, with continued input from community members, further refined these essential characteristics, conducted internal assessments and implemented changes to their systems and practices.

In subsequent evaluations, an average of 80% of parents surveyed indicated programs always meet their expectations, with improvements in all areas.

Position

NAMC supports efforts to eliminate institutional policies and practices that result in disadvantages for traditionally marginalized populations. In order to end historical patterns of institutional racism we must transform the very systems that govern institutional policies and practices. Social equity is the cornerstone of society, which cannot be maintained for a few at the expense of the many. Achievements in social equity results in decreased spending on prisons, security enforcement, welfare, and social services. (2011, Reliable Prosperity)

NAMC believes social equity empowers all communities to leverage efficient use of economic and social resources for the advancement of all neighborhoods. Social equity depends on a new social realism that accepts diverse, multi-cultural communities as the norm. In a pluralistic society social equity is enhanced.

As in other areas, Monterey County faces its own share of challenges related to social inequity. In a

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2006 report to the County Board of Supervisors the Monterey County Health Department reported “Anticipated changes in Monterey County demographics projected through 2025 underscore the need to resolve our disparate health outcomes. Immigration, economic stratification, racial/ethnic prejudices, and the nature of the health insurance industry are some of the many factors that can influence widening disparities among subpopulations.” (2006, Monterey County Health Department)

Monterey County’s multiracial, multiethnic, multilingual and multicultural features (including gender, age, class, people with disabilities, religion, sexual orientations, military background, etc. in addition to race and ethnicity) have experienced major shifts over the last decade. NAMC believes it is time for a cross section of public and nonprofit organizations to begin the work of assessing the impact of policies and practices that may create social inequity. Increased awareness among decision makers with the capacity to implement inter-institutional policies and practices will result in outcomes of fairness and equality and reduce/eliminate disparities.

Recommendations

1. Make social equity a priority under the administrations of local leaders
2. Engage the general public in the planning, development and evaluation of services

3. Apply Racial Equity Impact Assessments for evaluating organizational policies and practices
4. Develop accountability measures for tracking organizational progress in meeting standards of social equity
5. Incorporate training on social justice in organizational leadership and developmental strategies

In Conclusion

The civil rights advances and progress we have made as a nation are hallmarks that remind us of the heart, talent, and courage required in pursuing systems change. Here in Monterey County we see evidence of great work being done toward the advancement of social equity. The continuing challenges that we face serve as reminders of the opportunities that lie ahead.

References:

2009, Terry Keleher, Applied Research Center; www.arc.org

2011, Reliable Prosperity; www.reliableprosperity.net

2006, Monterey County Health Department, “Health Profile 2006: Disparities”

The Nonprofit Alliance of Monterey County (NAMC) is an association of nonprofit organizations. The mission of NAMC is to increase the capacity and collective power of the nonprofit industry for the benefit of all people in Monterey County.

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