

# centerscene

## Standing on Common Ground

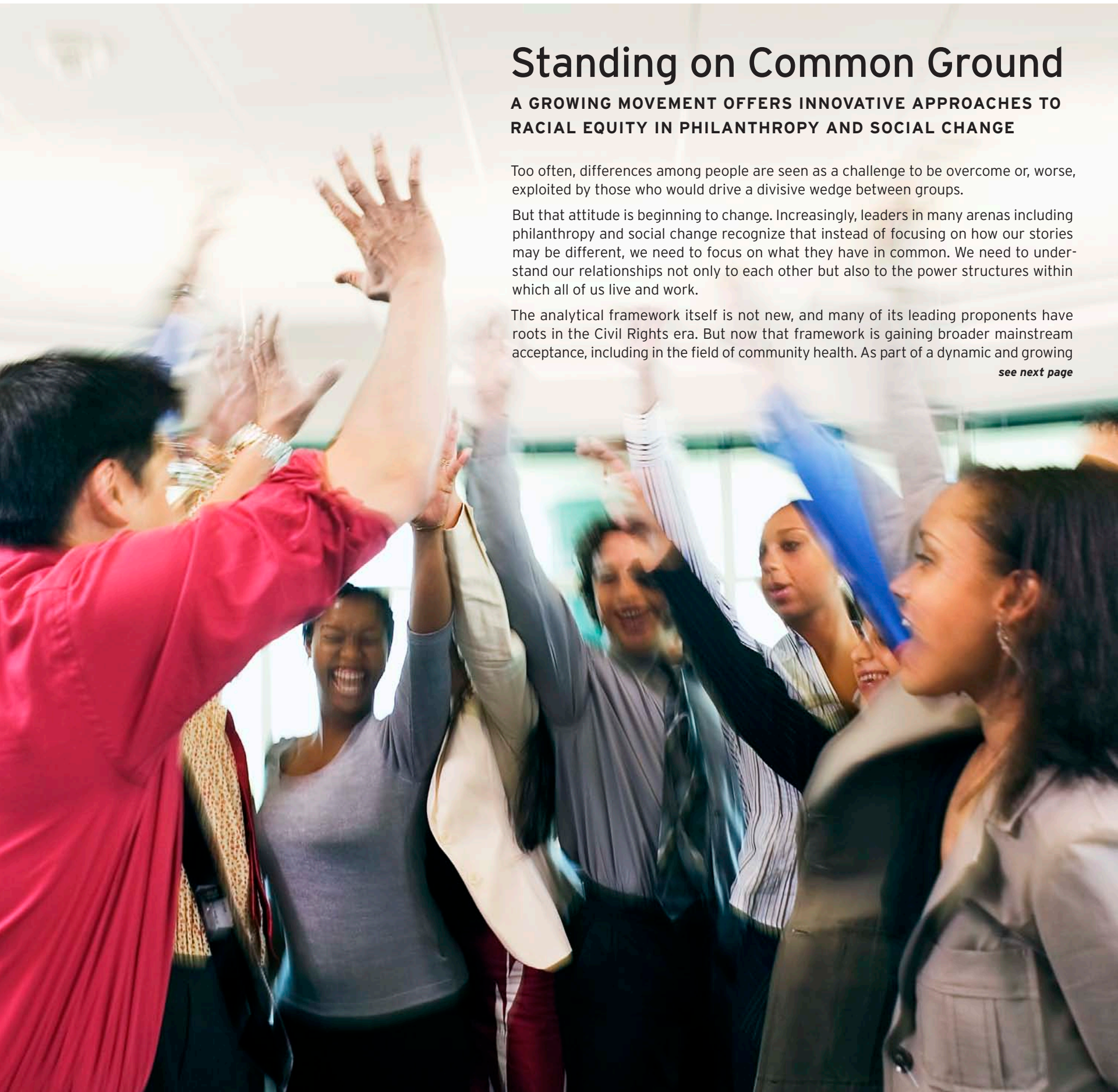
**A GROWING MOVEMENT OFFERS INNOVATIVE APPROACHES TO RACIAL EQUITY IN PHILANTHROPY AND SOCIAL CHANGE**

Too often, differences among people are seen as a challenge to be overcome or, worse, exploited by those who would drive a divisive wedge between groups.

But that attitude is beginning to change. Increasingly, leaders in many arenas including philanthropy and social change recognize that instead of focusing on how our stories may be different, we need to focus on what they have in common. We need to understand our relationships not only to each other but also to the power structures within which all of us live and work.

The analytical framework itself is not new, and many of its leading proponents have roots in the Civil Rights era. But now that framework is gaining broader mainstream acceptance, including in the field of community health. As part of a dynamic and growing

*see next page*



# Message from the Director

## HARNESSING THE POWER OF DIVERSITY

*Having been part of The California Endowment since 2001, I have witnessed firsthand the remarkable changes that are possible when people unite around a common goal. I have seen our grantees and partners throughout the state demonstrate on a daily basis that our differences are not a challenge to be overcome, but a strength to be embraced.*

*Scientific studies bear out this concept: In virtually any arena, from biology to the boardroom, diversity enhances creativity and improves outcomes. All of us together can do better than each of us alone.*

*In my new capacity as director of the Center for Healthy Communities, I am pleased to bring you this latest issue of CenterScene and its cover story exploring fresh insights and innovative efforts among researchers and activists working to advance racial justice in and through the field of philanthropy. Our president and CEO Dr. Robert K. Ross has been a national leader on this front as part of the Council on Foundations' Diversity in Philanthropy Project.*

*Why is this important? The problems we face in community health are systemic problems arising from structures of opportunity in which individuals are differently situated based on race, class, gender and other factors. Because we as individuals and organizations are not separate from those structures, we have an obligation to understand the role they play in our work and how we can change them to advance equity and inclusiveness institutionally, programmatically and in the communities we serve.*

*When it comes to equity and inclusiveness in health care, the 2010 passage of the Patient Protection and Affordable Care Act marks a major step forward for our country and for Californians in particular. Yet, at the same time, our surveys have shown that in some communities nearly seven out of 10 people did not even know that it passed, nor that it contained provisions that could immediately and directly benefit their own families. The Endowment is stepping up to close that awareness and opportunities gap through an ambitious health law consumer education initiative, and on page 5 we talk with some of those involved.*

*Despite last year's significant gains, we still have a long way to go. In the World Health Organization's latest ranking of the world's health care systems, the United States takes 37th place, just above Slovenia. And within the U.S., we know that communities of color are disproportionately affected by the shortcomings of our system.*

*Inspired by the collective efforts of our partners and grantees who confront these realities with optimism and ingenuity, I look forward to working with you as we move toward a healthier, more equitable future for all Californians.*

**Anne-Marie Jones**

Director, Center for Healthy Communities  
The California Endowment

# Common Ground

*continued from front cover*

field of interdisciplinary inquiry and action that looks beyond the traditional paradigm of racism as a problem of *individuals* to a deeper understanding of structural racism as a problem of *systems*, a new generation of advocates is putting theory into practice.

## UNDERSTANDING BARRIERS, PROMOTING DIVERSITY

"For The California Endowment, diversity is both a moral and strategic imperative," says president and CEO Robert K. Ross. "To meet our goal of building healthy communities, we need to acknowledge and understand the structural barriers to opportunity and the importance of engaging all community members regardless of race, ethnicity, age, gender, sexual orientation, religion, or immigrant status."

In a state whose population is 58 percent people of color, The Endowment is among the top grant-makers to organizations led by people of color. Its own professional makeup likewise reflects that diversity—65 percent of its staff, 58 percent of its senior managers, and 69 percent of its board members are persons of color. Across the 14 communities where The Endowment will prioritize its efforts in the coming decade, more than 90 percent of residents are persons of color.

In May 2010, TCE staff and representatives from all 14 of those communities—more than 100 participants in all—came together for a two-day Racial Justice Training Institute coordinated by the Philanthropic Initiative for Racial Equity (PRE), a national project intended to increase the amount and effectiveness of resources aimed at combating institutional and structural racism. Additional trainings are planned through April 2011 for the Northern, Southern, and Central regions of California.

## GEOGRAPHY OF OPPORTUNITY

"Often when different groups come together, we think of ourselves as categorically different—Latino, black, Asian, Native American, and so on. But the reality is much more complicated," says John A. Powell, executive director of the Kirwan Institute for the Study of Race and Ethnicity at Ohio State University. "Regardless of who we are in terms of these fixed categories, the more important fact is that we are all differently situated within a complex web of opportunity structures. Talking about race or ethnicity is really shorthand for talking about social, political, and cultural opportunity and situatedness in society."

A renowned authority on issues of race and poverty, Powell developed a methodology for mapping the "geography of opportunity" that has become the standard in the field. It suggests that the goal of racial equity in health ultimately comes down to a question of place, both physically and socially: Where do opportunities exist and where don't they? What can we do to systematically improve those opportunities?

"Structures and systems, like people, carry explicit and implicit values, but in both cases those values operate at a largely subconscious or implicit level," Powell explains. "That's why, even in the absence of racist intent, we sometimes have racialized outcomes. And it's why I like to say we should be soft on people, hard on structures."

Lori Villarosa, PRE's founder and executive director, says that one of her goals is sharpening the questions raised by funders and activists



## What Is Structural Racialization?

According to the Kirwan Institute for the Study of Race and Ethnicity: "The word 'racism' is commonly understood to refer to instances in which one individual intentionally or unintentionally targets others for negative treatment because of their skin color or other group-based physical characteristics. This individualistic conceptualization is too limited. Racialized outcomes do not require racist actors. Structural racism/racialization refers to a system of social structures that produces cumulative, durable, race-based inequalities. It is also a method of analysis that is used to examine how historical legacies, individuals, structures, and institutions work interactively to distribute material and symbolic advantages and disadvantages along racial lines."

From *Leadership & Race: How to Develop and Support Leadership that Contributes to Racial Justice*, July 2010. A publication of Leadership for a New Era (LNE), a collaborative research initiative launched in 2009 by the Leadership Learning Community. Reprinted with permission. Download full report at [www.leadershipforanewera.org](http://www.leadershipforanewera.org)

concerned with racial justice. “A growing myth of post-racialism is that we can talk about race when it comes to problems but not when it comes to solutions,” she observes. “For foundations, recognizing the need to address race in their solutions and strategies, as well as in problem identification, can be a profound catalyzing step.”

#### NOT JUST A SKIN-COLOR ISSUE

Jesse Mills, assistant professor of ethnic studies at the University of San Diego, has done field work for the past 10 years in the City Heights neighborhood of San Diego. As both an academic and an activist, he is concerned with understanding and challenging the racialization of opportunity structures.

**“Unhealthy places don’t just spring up—systems create them. And when you start talking about health you tug on strings that pull up the whole net.”**

—Jesse Mills, Ethnic Studies Department, University of San Diego

“It’s not just a skin-color issue,” he says. “It’s about policy and infrastructure, often tied to land use. For example, it’s the massive infrastructure investment in the suburbs since the 1960s and the failure to invest in public transportation. It’s the mixed-use zoning that brings chemical hazards into urban residential areas and the red-lining of bank loans to exclude certain neighborhoods.”

In 2008 Mills began working with The California Endowment and the Mid City Community Advocacy Network, a local collaborative, on the planning process for City Heights, one of Building Healthy Communities’ 14 places. “Unhealthy places don’t just spring up—systems create them,” he says. “And when you start talking about health you tug on strings that pull up the whole net.”

#### MOVING PAST FEARS AND MYTHS

As director of the Los Angeles-based Leadership Development in Interethnic Relations (LDIR) program, Carmen M. Morgan works with organizations to develop the skills they need to foster positive and sustainable intergroup relations for social change. “In our trainings what comes up time and time again is that we all want the same thing,” says Morgan. “No matter my race or class or cultural identity—what I want for my family and my community is the same as what you want for your family and your community. We want our individuality affirmed. We want jobs. We want a good education for our kids. We want green spaces and nutritious food. We want health.”

How can ordinary people begin to address a problem as deeply entrenched—and also as personalized—as racial inequity?

“We get in the same room, we break bread, we have difficult conversations. Together we move past our fear. It’s not some holy grail,” Morgan insists. “We discover we’re already standing on common ground.”

#### ADVANCING EQUITY IN PHILANTHROPY

In 2007 The California Endowment helped launch the national Diversity in Philanthropy Project (DPP), a collaborative effort among 35 executives and trustees of leading philanthropic institutions across the country to strengthen voluntary efforts to advance diversity and inclusion in the field. Chaired by TCE’s Ross for the past three years, the project seeks to expand diversity, equity, and inclusion in board and staff representation, grant making and contracting. TCE’s own board of directors adopted a statement of diversity affirming these goals in April 2008 and has since undertaken its own internal diversity audit.

“Strengthening staff and board diversity is one goal but ultimately it’s not about counting heads,” says Dianne Yamashiro-Omi, TCE’s program manager for Equity and Diversity. “It’s about developing a deeper understanding of race and impediments to equal opportunity. It takes courage to ask the hard questions and to address the power imbalance that may exist within our own organizations. It’s not a matter of resources, it’s a matter of leadership and commitment.”



#### FOCUS ON: JESSE MILLS

Growing up in a racially mixed family in the small, mostly white community of Rincon Valley in Santa Rosa, California, 50 miles north of San Francisco, Jesse Mills did not experience overt racial discrimination. “The environment was ideal in many ways, close to nature, very safe,” he recalls, “and no one ever called me a name. But I felt different. The other kids traveled over vacation and had lots of things. I carried shame because of our poverty.”

The introspective teenager experienced an *aha* moment when a friend turned him on to rap music—specifically hip-hop pioneer KRS-One—in the late 1980s. “KRS-One called himself a philosopher, he used that language. Those same ideas and words were in my head, and so when I headed off to college and started looking at courses, I decided to study philosophy.”

At Sonoma State University, Mills—who was also a musician and football player—excelled in philosophy and even became a teaching assistant, unusual for an undergraduate. “I had phenomenal mentors,” he says, “and I caught on fire.” Mills became especially passionate about the connection he saw between logic (analysis) and ethics (values). “It seems abstract but that connection is tied to actual decisions people make—which in turn are tied to how history is made.”

With a graduate fellowship from UCLA’s Afro-American studies department, Mills specialized in ethnomusicology and studied the sociocultural history of jazz, focusing on issues of race, inclusion and exclusion, all the while building his own “interdisciplinary sense of self.” After completing his M.A. at UCLA, he earned a second M.A. and a Ph.D. at UC San Diego, continuing his research on the racialization of history and refugee resettlement.

Today, as assistant professor in the ethnic studies department at the University of San Diego and a self-described “organic intellectual,” Mills integrates his academic research with community service and musical artistry. His main research and fieldwork is with Somalis in San Diego, and he chairs the board of directors for Somali Family Service.

“It can be depressing work,” he admits, “but I’m an idealist and an optimist by nature. I do this work so we can reach better and better versions of the democracy we’re so proud of.”

Additional information and resources:

Applied Research Center (ARC)  
[www.arc.org](http://www.arc.org)

Diversity in Philanthropy Project (DPP),  
Council on Foundations  
[www.diversityinphilanthropy.org](http://www.diversityinphilanthropy.org)

Kirwan Institute for the Study  
of Race and Ethnicity  
[www.kirwaninstitute.org](http://www.kirwaninstitute.org)

Leadership Development in Interethnic  
Relations (LDIR)

*The LDIR program is co-sponsored by the Asian Pacific  
American Legal Center (APALC), the Central American  
Resource Center (CARECEN), and the Martin Luther King  
Dispute Resolution Center (MLKDRC)*  
[www.ldir.org](http://www.ldir.org)

Leadership Learning Community (LLC)  
[www.leadershiplearning.org](http://www.leadershiplearning.org)

Mid City Community Advocacy Network (CAN)  
[www.midcitycan.org](http://www.midcitycan.org)

Philanthropic Initiative for Racial Equity (PRE)  
[www.racialequity.org/](http://www.racialequity.org/)

by Jim Keddy



## Bending Toward Justice

The “bending toward justice” happens when we hold fast to a vision, through the ups and downs, and stand up for what we believe in—a place where everyone has the opportunity to be healthy.

This past October I spent a few days in Detroit at a foundation conference. While serving as our tour guide through Detroit’s neighborhoods, Ed Egnatios from the Skillman Foundation spoke to us about the historical tensions in Detroit between labor and management, black and white communities, and the city and the suburbs. His conclusion? “Conflict is normative. Every now and then peace breaks out.”

Back home in Sacramento, as election season culminated on November 2, Ed’s words continued to resonate as I listened to the increasingly heated rhetoric filling the airwaves and the Internet. It struck me how elections are moments when the ever-present tensions in our society come to a boiling point.

At the center of much of the current conflict sits our new federal health care legislation, which is now the law and as such represents an unqualified victory for underserved families and communities. Still the attack ads have kept coming, stirring the political pot and distorting what the law will actually do.

Fortunately every now and then truth breaks out, and two weeks after the election the public learned that those distortions are deliberate and well funded. It was revealed that private health insurance companies gave the U.S. Chamber of Commerce more than \$86 million to fund an intensive lobbying and media campaign—including those attack ads—to oppose the health law.

The state of California is moving past political divisiveness to embrace the new law and the many benefits it offers families. Children can’t be denied health coverage due to a pre-existing condition, young people can remain on their parent’s insurance plan, and health plans have to provide preventive services at no cost. Additionally, on October 1, Governor Schwarzenegger signed into law legislation creating the framework for a state-administered health exchange that will bring affordable insurance to thousands of Californians.

When it comes to the historic struggle for universal health coverage, one thing we can count on is more conflict. But that’s not necessarily a bad thing. It happens when real social change is set in motion. Conflict can become a positive force for change.

In a recent speech, President Obama recalled the words of Dr. Martin Luther King, Jr. “The arc of the moral universe is long but it bends toward justice.”

The “bending toward justice” happens when we hold fast to a vision, through the ups and downs, and stand up for what we believe in—a place where everyone has the opportunity to be healthy.

*Jim Keddy is Director, Healthy Communities (North Region) for The California Endowment.*



# Health Care Reform a Big Win for Californians

Gregory Knoll calls it “the most important piece of social legislation since the Civil Rights Acts of 1964 and 1968.” As executive director of the Legal Aid Society of San Diego for the past 36 years and a frontline veteran of the battle for health care reform, Knoll believes the provisions embodied in the 2010 Patient Protection and Affordable Care Act are monumental and a victory for all Americans.

President Barack Obama signed the bill into law on March 23, 2010 and key provisions went into effect six months later, on September 23. On that day, The California Endowment launched phase one of a consumer education initiative to ensure that California residents know and understand the health care benefits newly available to them.

Two of America’s best-known physicians and trusted messengers when it comes to health—NBC’s Dr. Oz (Mehmet Oz, M.D.) and Univision’s Dr. Isabel (Isabel Gómez-Bassols, M.D.)—lent their support by appearing in English- and Spanish-language ads on radio, television, and the Internet. Harnessing the power of social networking to reach younger Californians, the campaign also created a Facebook page, “Get Covered California,” that invites visitors to take a pledge “to protect America’s new health law by getting covered” and links to young people’s firsthand stories of why health coverage is so important.

Daniel Zingale, TCE’s senior vice president of policy, communications and public affairs, is overseeing the ambitious statewide campaign, which eschews partisan rhetoric and focuses on the law itself. “California is ahead of the curve, cutting through the politics and moving forward with implementation of the new law,” he says. “But in the ongoing divisions over health care reform, the media has done a better job covering the fight than the facts, so our goal is to make sure the public has the facts they need.”

## OUTREACH TO LATINO COMMUNITIES

The first phase of the campaign targets Spanish-speaking communities, where the need is especially urgent—40 percent of Latinos lack health insurance, double the proportion of the U.S. population as a whole—and awareness of the new law is especially low.



Following a press conference at The California Endowment, Maria, an uninsured cancer patient, tells her story to a reporter with Univision 34 KMEX-TV.

**“The media has done a better job covering the fight than the facts, so our goal is to make sure the public has the facts they need.”**

– Daniel Zingale, The California Endowment

Abel Maldonado, then lieutenant governor and the state’s highest-ranking Latino elected official at the time, spoke at The Endowment’s press conference introducing the campaign. “I’m a farmer,” he said, explaining what the new law will mean to the future of California’s children, “and the only way to have a great crop is to have a healthy seedling.”

But too many families are not able to access the care that they and their children need to be healthy, according to Paulina Gonzalez, executive director of Strategic Actions for a Just Economy (SAJE), a nonprofit serving residents of Los Angeles’ Figueroa Corridor. At the press conference, Gonzalez introduced Maria, a SAJE volunteer in her 50s, who told her story to reporters.

Diagnosed with colon cancer in 2007, Maria underwent surgery to remove two tumors and was advised to return for cancer screenings every six to eight months. But without a job or health insurance she could not afford to do so. “September 23rd is significant for me,” she said. “Now I can continue with treatment.”

Knoll, whose office has been fielding calls generated by the ads, says, “This public education campaign is the only voice out there about what this law can and will do for the public. Without it, so many parts of the Affordable Care Act would go unaccessed.”

Find more information online, including advocacy and education resources:

Get Covered California  
[www.GetCoveredCA.org](http://www.GetCoveredCA.org)

The New Health Law and You  
[www.calendow.org/healthlaw](http://www.calendow.org/healthlaw)

Tú y la nueva Ley de Salud  
[www.calendow.org/salud](http://www.calendow.org/salud)

## What the new health law means to you, your family, and your community

Key provisions of national health care reform are now in effect. For millions of Californians, this means immediate access to better and more affordable health care. Here are five provisions you should know about:

- **No dropping of coverage:** Insurance companies can no longer cancel your insurance policy when you get sick.
- **No discrimination based on existing illnesses:** Children can’t be denied health coverage due to a pre-existing condition, and in 2014 the same will be true for individuals of any age.
- **Coverage for young adults:** Children can stay on their parents’ health insurance plan until they turn 26.
- **Free preventive care:** All new health insurance policies must cover many preventive services (such as annual check-ups, immunizations, mammograms, and cancer screenings) with no co-payment by the consumer.
- **Assistance to those who can’t afford insurance:** Subsidies are available to help people purchase coverage.

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## Healthy Neighborhood Festival 2010

Youth and families from the neighborhoods surrounding The California Endowment's headquarters in downtown Los Angeles get active and learn about healthy eating at the 2010 Healthy Neighborhood Festival on October 23. Organized by TCE, the 5th annual event promotes healthy eating, physical activity and well-being.





During a ceremony at the Center for Healthy Communities on October 4, 2010, Governor Arnold Schwarzenegger signs copies of legislation into law that will make it easier for all Californians and small businesses to access health care coverage.



Nicholas Christakis, author of *Connected: The Surprising Power of Our Social Networks and How They Shape Our Lives*, spoke at the Center for Healthy Communities on August 2, 2010 about the effects of social networks and connections on health and health behaviors.



At the Center for Healthy Communities on August 10, 2010, participants in NAMI WALKS' annual Kick-Off Luncheon learned about National Alliance on Mental Illness programs that work to end the stigma for families and individuals living with severe mental illness.



New York University professor and *The Trouble with Black Boys* author Pedro A. Noguera, Ph.D., discusses race, equity and the future of public education at the Center for Healthy Communities on June 17, 2010. He believes that school, community, health and labor systems are setting boys and young men of color up for failure, a trend that can be reversed by building healthy communities for all youth.



On September 23, 2010, Yvonne Marijimenez, Esq., deputy director, Neighborhood Legal Services of Los Angeles County, participates in a press conference announcing the launch of a consumer education initiative designed to ensure that all California residents know and understand the health care benefits newly available to them. The campaign includes TV, radio and Internet advertising in Spanish and English. (See also page 5)



On July 23, 2010 at the Center for Healthy Communities, participants in the State of the Black Child Symposium commemorate Great Beginnings for Black Babies' 20 years of community service.



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### Center for Healthy Communities

The Center for Healthy Communities builds leadership and capacity within the nonprofit health sector to mobilize communities for social change.

To learn more about the Center for Healthy Communities' programs and resources, or to request use of the Center facilities:

**www.calendow.org**

866.833.3533 or 213.928.8900

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Los Angeles, CA 90012

### The California Endowment

The mission of The California Endowment is to expand access to affordable, quality health care for underserved individuals and communities, and to promote fundamental improvements in the health status of all Californians.

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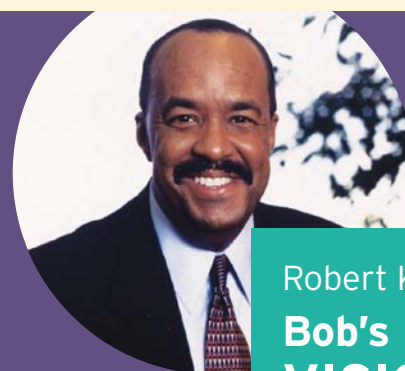
Center for Healthy Communities



## Get the Story. Get Perspective. Get It Now.

Three compelling voices on the cutting edge of community health take you behind the scenes with the people, programs, and policy work of The California Endowment.

Check them out at [www.calendow.org](http://www.calendow.org).



Robert K. Ross, M.D.

**Bob's Blog:**  
**VISION**

Anthony B. Iton, M.D., J.D., M.P.H.

**Tony's Blog:**  
**COMMUNITY**



Daniel Zingale, M.P.A.

**Daniel's Blog:**  
**PREVENTION**