Building Power, Building Health

By catalyzing the power of people to make change, community organizers equip people at every level to overcome the myriad barriers to health.

BY DORAN SCHRANTZ

By the time PBS aired the documentary Unnatural Causes in 2008, most viewers already knew that “inequality is making us sick.” The series illustrated what decades of research had made clear: our health is affected by the social circumstances in which we are born, work, and live. Health disparities are closely tied to race, class, and gender and rooted in unequal community conditions.

This inequality doesn’t occur by chance. Small groups of people with clout wield the political power to make decisions that benefit themselves and people like them, in city councils, zoning boards, state legislatures, and school boards. The good news is that we can design a new way of organizing our society to promote health equity. But to do so, we need to transform the arrangements of power. This is where the principles and practices of community-based organizing have something to contribute. If powerlessness is contributing to what makes us sick, then building community power can help make us well.

COMMUNITY ORGANIZING

ISAIAH is a faith-based community-organizing project in Minnesota. Our 100 member churches represent about 250,000 people from white, Latino, African-American, and multiracial congregations, including Catholic, Lutheran, Baptist, and Evangelical denominations. We officially began working on health equity in 2008, after our clergy and congregations watched and discussed Unnatural Causes, but we have always understood the connections between our faith, our commitment to racial and economic justice, and the conditions that help communities thrive.

ISAIAH is the vehicle through which a quarter of a million people of faith exercise power. The project amplifies their voices and provides them with tools to articulate their needs and engage in the public sphere. Together, ISAIAH and our member churches pursue (and often win) policy changes that shift the social determinants of health. Here are three examples:

■ Using public transit to improve health. It was evident in the planning stages that the new light rail line connecting Minneapolis and St. Paul had the potential to improve health for those who lived along its path. The service and associated development could connect residents with jobs and schools, bring new businesses into their neighborhood, make streets safer for pedestrians, and create parks. But in 2009, developers cut costs by eliminating three planned stops in low-income neighborhoods of color. ISAIAH swung into action. We joined the Stops for Us Campaign, held neighborhood meetings, alerted the media, and met with city council members, state legislators, and the governor. In the end, we took our demands all the way to Congress to overturn federal guidelines and clear the way for restoring those three stops.

■ Raising the minimum wage. In 2014, Minnesota’s minimum wage was among the lowest in the country, but lawmakers were conflicted about whether to raise it and, if so, by how much. ISAIAH members asked the legislature to explore the health implications of wages. The resulting report from Minnesota’s Department of Health was shocking: low-wage workers died eight years earlier than people earning higher incomes. ISAIAH clergy and congregation members urged lawmakers to consider the health consequences of their actions. The legislature raised the wage to $9.50 an hour, indexed to inflation, without a tip penalty.

■ Ending the school-to-prison pipeline. School suspensions and expulsions disproportionately affect children of color and exacerbate academic achievement gaps between white students and African-American, Latino, and Native American youth. Harsh disciplinary policies restrict education and economic opportunities and push children into the criminal justice system. ISAIAH’s African-American congregations have led the way in seeking a statewide moratorium on school suspensions. In 2014 we persuaded two school districts to join us, and one has already begun to implement a district-level ban on push-out discipline.

BUILDING POWER AND VOICE

Many of our communities suffer from ill health not just because they lack economic resources but also because they lack political power. Powerlessness, in and of itself, is bad for your health. Community organizing has a unique role to play—not just in winning policy changes—but in building the power, voice, and leadership of people themselves to change systems and policies.

Foundations have a critical role to play in supporting health equity organizing. Rather than target their resources solely on improving health care and access, philanthropists can help communities thrive by investing in building the leadership skills and power of individuals and constituencies who have been excluded from public discourse.

Through ISAIAH and other community organizing efforts, people become experts on policies affecting their lives. We provide tools so that our faith community can identify pressing problems, research solutions, build coalitions with allies, and advocate change with public officials. Through training and mobilization, people of faith emerge as skilled, powerful leaders working to advance equity and health for their communities.