

100 Million Healthier Lives is an unprecedented collaboration of change agents pursuing an unprecedented result: 100 million people living healthier lives by 2020. Our vision is to transform the way we think and act to create health, wellbeing and equity globally. We believe that through unprecedented collaboration, innovative improvement and system transformation, meaningful change is possible.

Working on equity is the price of admission in 100 Million Healthier Lives and is reflected in our strategies, processes and interactions. We are committed to working to achieve the conditions in which all people have the opportunity to attain their highest potential for mental, physical, social and spiritual wellbeing. This commitment stems from three sources: **1) a recognition that it is not possible to achieve the health outcomes we seek without addressing equity; 2) a recognition of the tremendous waste in human potential that results from inequity; and 3) a belief in our interconnectedness, common opportunity and destiny.**

It is not possible to meaningfully improve our health status without addressing equity. When two children who grow up a few miles apart can have a difference of up to 25 years in life expectancy¹, it is not possible for us to simply improve our health rankings without improving health outcomes for those who are not thriving. To do so requires that we address the social, behavioral and environmental drivers of health and wellbeing, which account for 60% of the gap.

When racial segregation and a school to prison pipeline devastates the future potential of communities of color; when inadequate access to housing, education and safety threatens national security, community integrity and economic vitality, then equity must become a common priority. We have the opportunity to unleash a wealth of trapped and untapped human and community potential by removing the barriers that prevent a large proportion of our population from contributing their fullest to our global world. We cannot realize this opportunity without addressing the racism that infects our institutions and mindsets and recruits us as unwitting participants in perpetuating a system of prejudice and privilege and trauma that harms us all and robs us of our fundamental human right—to be part of a thriving, interconnected, global human family, beautiful and strong in its diversity.

In 100 Million Healthier Lives, we found our work on equity on a belief that we are interconnected, striving to become a beloved community. In the words of Rev. Dr. Martin Luther King, Jr,

“[We] are caught in an inescapable network of mutuality, tied in a single garment of destiny.”

This recognition of interconnectedness in our shrinking global world is critical to understanding why we need to achieve equity. There are economic, national security, and environmental reasons why we need to be concerned about equity. In 100 Million Healthier Lives, we acknowledge these and found ourselves sharing a more fundamental understanding of interconnectedness, that we need each other to achieve



¹ <http://www.rwjf.org/en/library/infographics/new-orleans-map.html>

our full potential for human destiny. The gifts we each bring to this table, the pieces of the puzzle we hold, the threads we bring to this garment of destiny we are creating together are **necessary**. Our wholeness and opportunity as a society requires that we release the trapped and untapped potential of people and places whose capacity to contribute to the growth and healing of the world is currently being stifled. This is agency-- the individual and community capacity to dream and act to create a better future for oneself and to engage in the processes and solutions of a living democracy and a thriving community. This vision requires all of us to transform our approach to be in relationship with one another in a way that promotes agency. If we can recognize and respect the resourcefulness and potential of people who are trapped by inequity, if we see that a primary goal of our work is to create spaces and processes that unlock the leadership and contribution of everyone, from formal community leaders to people with lived experience, to address the challenges we face together, then we have the opportunity to together to create abundant, thriving communities of solution.

This will require us to change our ways of being and doing this work—our mindsets, behaviors, and actions. We will need to do our work in ways that strengthen community capacity to assure the conditions necessary for health and wellbeing are available to all. changing our mindsets, our behaviors and our actions. To do this, we will need to understand the drivers of human thriving, the “leading causes of life”—things like agency, coherence, intergenerativity/blessing, connection, hope, and joy—and learn how to grow these in our communities (Gunderson, T, & Cochrane, 2015). We must acknowledge the social, historical and structural drivers of poor health outcomes and develop solutions at the level of the person, the population, the community and society—the complex ecosystem that creates health, wellbeing and equity. We will need to learn how to build new systems that promote equity and support the interconnectedness of the human family.

We have approached these new ways of being and doing into a few strands

- 1) **leading from within** - know and understand our own story and how it has worked within us to lead to our beliefs, to understand how prejudice has shaped our histories and our lives; understand the implicit bias we have gained through these experiences; and develop the agency to choose to act to change the system;
- 2) **leading together** – to know, love and value one another in our diversity; to share our stories; to create discourse, reconciliation and social integration that spans from our community discourse to our day to day lives; to come together to address equity in our own contexts; to share what is working with those trying to address equity around the world;
- 3) **leading for outcomes** – to co-design and co-develop solutions equitably; to measure outcomes equitably; to learn our way into what works to address complex system change;
- 4) **leading for sustainability** - map, understand, and address the structures and systems that are perpetuating inequity; to understand how to integrate the leading causes of life into our work on creating equity; to grow the people, policies/environment and change process needed to create sustainable outcomes and an equitable society, including both the work of restorative justice and reparation and the work of creation that might be needed to develop a new social compact that achieves a more equitable and abundant society.

What often holds us back is our belief that these problems are too big, too complex to solve. If we were alone, that might be true. However, people in every community are trying to address equity, often in silos. By bringing our pieces of the puzzle together, we realize we are far more abundant in resources and solutions than we imagined. Change is not only possible, it is happening already. In communities across the country, people have found ways to dismantle a part of the system. From reduced reincarceration rates for youth from 60% to 5% to reduced community violence by 50-75% to improved elementary, middle and high school graduation rates of between 65%-100%, change agents across the world are showing that it is possible for people and communities experiencing inequity to become people of possibility and communities of solution. By _____

understanding what is happening in these bright spots—these leading causes of life—we have the opportunity to become illumined. The words of Policy Link’s Equity Manifesto resonate deeply with our approach (PolicyLink, 2016):

It begins by joining together, believing in the potency of inclusion, and building from a common bond. It embraces complexity as cause for collaboration, accepting that our fates are inextricable.

It recognizes local leaders as national leaders, nurturing the wisdom and creativity within every community as essential to solving the nation’s problems.

It demands honesty and forthrightness, calling out racism and oppression, both overt and systemic. It strives for the power to realize our goals while summoning the grace to sustain them.

It requires that we understand the past, without being trapped in it; embrace the present, without being constrained by it; and look to the future, guided by the hopes and courage of those who have fought before and beside us.

This is equity: just and fair inclusion into a society in which all can participate, prosper, and reach their full potential. Unlocking the promise of the nation by unleashing the promise in us all.

The next sections describe our approach in greater detail to support your work in the field—how we “define” equity, foundational concepts, our approach and guiding principles.

Defining Equity

There are many definitions of equity in normal parlance and in the literature. Some of our favorites:

“Just and fair inclusion into a society in which all can participate, prosper, and reach their full potential. Unlocking the promise of the nation by unleashing the promise in us all.” Policy Link, Equity Manifesto

“*Equity* is the absence of avoidable or remediable differences among groups of people, whether those groups are defined socially, economically, demographically, or geographically. *Health inequities* therefore involve more than inequality with respect to health determinants, access to the resources needed to improve and maintain health or health outcomes. They also entail a failure to avoid or overcome inequalities that infringe on fairness and human rights norms.” World Health Organization⁴

In the financial world, equity refers to ownership in a business or a property. We adapt this concept to think about who has ownership in the change process and how the change process builds ownership and capacity in people with lived experience to improve health and wellbeing. Each of these definitions—and many others—offer key elements relevant to our work together; each adds nuance and texture. Rather than contribute a new definition of equity to the field, we invite people to ask generative questions, like:

“Who isn’t thriving? What led to this and who benefits? How might racism, prejudice and power be playing a role?”

“Who is thriving within the same community? How could we change the system so that these bright spots become the new normal?”

“How can those with lived experience help us to understand the system that is producing inequity? How might they help to create and shape the solutions?”

“What systems, beliefs and structures perpetuate inequity? How might these be interrupted or redesigned to create different outcomes? What will it take to create sustained improvement?”

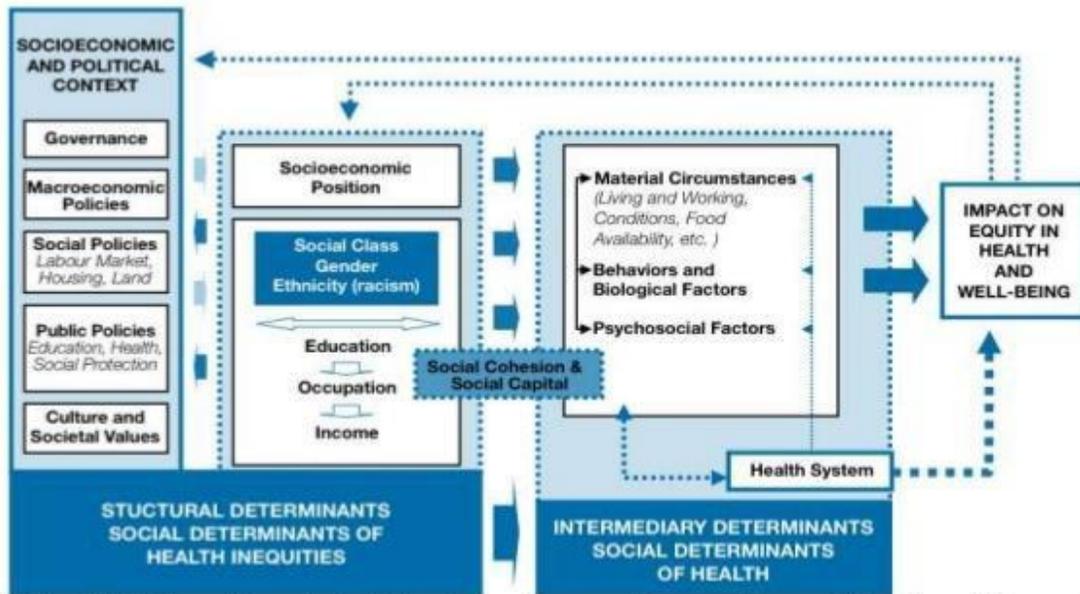
By engaging in these questions, we hope to offer a practical approach to discourse and improvement.

Foundational Concepts

In 100 Million Healthier Lives, we acknowledge that everyone defines health for themselves. We ground ourselves in the dimensions of the adapted World Health Organization definition of “mental, physical, social and spiritual wellbeing.” We acknowledge that health care is but one driver of health, accounting for no more than 20% of health outcomes in developed countries, with social, behavioral and environmental factors influencing an additional 60%. The World Health Organization Commission on the Social Determinants of Health Conceptual Framework describes the complex interaction of the “system” of equity and its interaction with the health system. This framework acknowledges that socioeconomic and political context and socioeconomic position—the structural determinants and social determinants of health inequity. These determinants interact with material circumstances, behavioral, biological and psychosocial factors to drive health, wellbeing and equity, as shown below.

World Health Organization Commission on the Social Determinants of Health Conceptual Framework

Figure A. Final form of the CSDH conceptual framework



Solar & Irwin (2010) http://www.who.int/sdhconference/resources/ConceptualframeworkforactiononSDH_eng.pdf

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Collaborative For Health Equity Cook County WHERE PEOPLE PLACE AND POWER MATTER

22

Figure 1 World Health Organization Conceptual Framework on Social Determinants

Toward a Community of Solutions: Leading from Within, Leading Together, Leading for Outcomes, Leading for Equity, Leading for Sustainability

To achieve 100 million healthier lives in a way that grows equity, we commit to approaching this work by building Communities of Solutions. This means changing how we relate to ourselves, one other, and those who experience inequity; how we approach the process of creating change; and how we create abundance. This requires us to be leading from within (the inner and reflective work of leadership), leading together (the skills of working together), leading for outcomes (the skills of innovation, improvement, implementation) and leading for sustainability (changing the systems that perpetuate inequity, growing the people, resources and change process in a way that grows a movement). These are described below.

Leading from Within

We recognize that the journey to create equity will require us to transform our own thinking, create new partnerships, develop the ability to hold tension in generative ways; to do this, we need to develop new skills, ask open and honest questions of ourselves and others, and learn to listen with our whole beings, not just our minds, to a diversity of voices. We embrace the idea that it will not be simple and we may fail forward many times in this journey, but we will learn—and fail—our way forward together. The Five Habits of the Heart, offered by the Center for Courage & Renewal based on the writings of Parker Palmer, offer us a powerful way to lead from within in our work on equity:

Five Habits of the Heart

1. An understanding that we are all in this together.
2. An appreciation of the value of "otherness."
3. An ability to hold tension in life-giving ways.
4. A sense of personal voice and agency.
5. A capacity to create community.⁵



The art of giving and receiving story, of asking ourselves and others open honest questions, the gift of tolerating discomfort to listen with our whole hearts, even when it makes us uncomfortable, the adoption of practices to create safe space for meaningful and challenging conversations—these are among the foundational practices we recognize are needed to create equity.

Leading Together

Equity is not only a civil right, it is a human right. Equity in and of itself creates health and human development. Therefore, we found our compelling vision of health equity on a compelling vision of human life. We wish to posit that love and the capacity to love is what is most compelling about life; love is therefore necessary to achieve equity on our journey toward health and wellbeing. Second, to speak of

⁵ Palmer, P. *Healing the Heart of Democracy* (2011)

health equity is to imply the communal nature of health and wellbeing. Health is not only an individual matter; the overwhelming body of evidence suggests that health and wellbeing outcomes are driven by

social and structural context, we recognize that family⁶, peers⁷, community⁸, and larger society have a profound influence on our own beliefs, actions and opportunities. Our community drives our health outcomes.

In addition, to dismantle the system and structural factors necessary to create equity, we need to develop an unprecedented collaboration across sectors and with people with lived experience of inequity. To do this, we need to develop trust, skills of collaboration, sharing of assets, and community capacity to contribute to the solutions. Many different groups have been working to improve equity in myriad ways for decades, with faith communities, community organizers, and people outside health and health care usually leading the way. Rather than supplant these efforts, we seek to contribute to the weaving of the rich tapestry of insight and opportunity created by our mutual efforts. We commit to walking and learning with others on this path and with people with lived experience, who are already offering critical leadership and insight for the journey.

Leading for Outcomes

We have begun to apply the science of innovation, improvement and implementation to our approach to addressing equity. We use data to identify those who might not be thriving and use stories, co-design and mapping of the lives of people with lived experience to understand the system. We then invite people with lived experience and partners who hold different pieces of the puzzle across sectors to help design potential solutions and try them out together, always asking the question, “Whose lives are getting better because we’re here?” We assure that the way we measure whether life is getting better is from the perspective of those who are most affected—using [simple, powerful measures of wellbeing](#) applied with an equity lens. Rather than feeling overwhelmed by magnitude or complexity, we systematically identify the bright spots that have been shown to interrupt these systems and try out what could work using [plan-do-study-act cycles](#), led by community residents, youth, and system leaders together.

Leading for Sustainability

Leading for sustainability means that we recognize the historical context that has led to structural inequalities which has created profound inequity, that represent a production system for inequity (see Figure 2), and requires that we understand how we dismantle the systems that are perpetuating inequities, systems which rob all of us of our full human potential.⁹ Leading for sustainability means that we not only disrupt these systems, but grow the people, the resources, and the change processes needed to develop new systems that perpetuate equity.

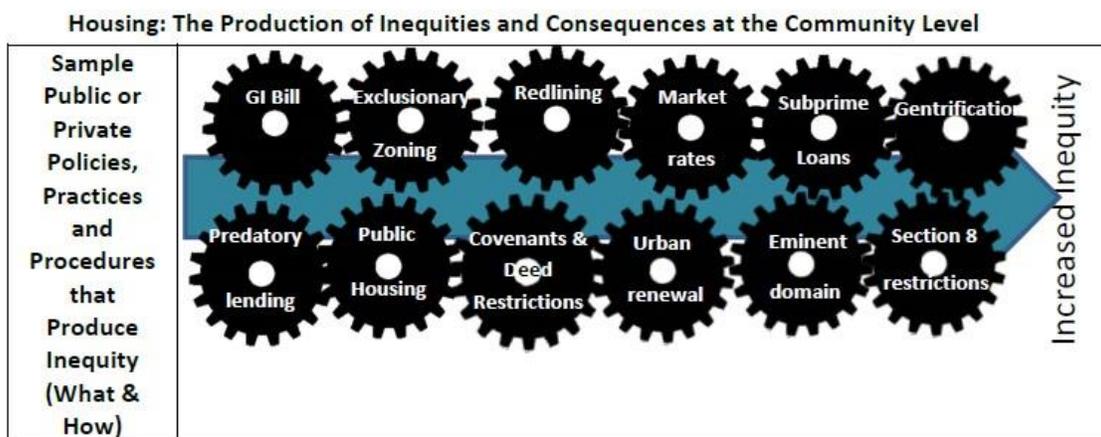


Figure 2 Systems that Contribute to Inequitable Housing

Putting it all together

In 100MLives, we created the following driver diagram (Figure 3) of some of the common factors that drive health inequity at a high level and bright spots that show how to interrupt these systems.

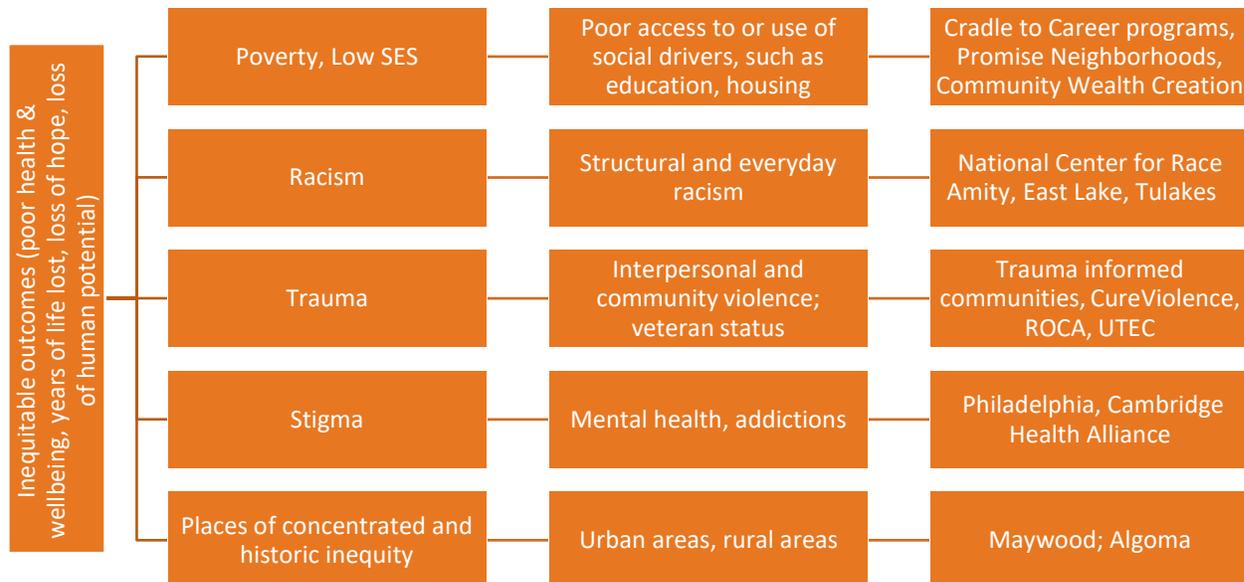


Figure 3 100MLives Driver Diagram for Health Inequity

For each driver, we are identifying key opportunities for system change, based on a bright spot and asset mapping approach. For every driver, we could identify bright spots at multiple levels that had achieved major transformation and breakthrough results. Our hope is to be able to scale these bright spots to achieve impact and offer hope. Some area of focus in our work on equity include:

1. Supporting all members of 100MLives to apply an equity lens to their work, develop equity action plans and equitable measurement
2. Supporting all children and their families to thrive throughout the life course
3. Supporting places of concentrated poverty and historic inequity to become communities of solutions
 - a. Urban – transforming neighborhoods of concentrated poverty to communities of solutions; interrupting the school to prison and reincarceration pipelines
 - b. Rural – turning the tide on the opioid epidemic; addressing food insecurity

⁶ Brown, H. E., Atkin, A. J., Panter, J., Wong, G., Chinapaw, M. J., & Sluijs, E. M. F. (2016). Family-based interventions to increase physical activity in children: a systematic review, meta-analysis and realist synthesis. *Obesity Reviews*.

⁷ Ramis, M. A., Chau, J. P. C., Lo, S. H. S., Sanders, L., & Chang, A. M. (2015). The effectiveness of peer-based interventions on health promoting behaviors in older people: a systematic review protocol of quantitative evidence. *The JBI Database of Systematic Reviews and Implementation Reports*, 13(9), 177-186.

⁸ Sallis, J. F., Cutter, C. L., Lou, D., Spoon, C., Wilson, A. L., Ding, D., & Mignano, A. (2014). Active Living Research: creating and using evidence to support childhood obesity prevention. *American journal of preventive medicine*, 46(2), 195-207.

⁹ Davis, R. et al. (2016). Countering the production of health inequities: a framework of emerging systems to achieve an equitable culture of health. *Report prepared for Robert Wood Johnson Foundation*

Guiding Principles for Our Work

We adopt the following guiding principles for our work together.

Table 1 Guiding Principles

<p>1. APPROACH THE JOURNEY TO EQUITY AS A PROCESS OF UNLEASHING TRAPPED AND UNTAPPED HUMAN POTENTIAL</p> <p>Through a strength-based approach, focus on growing the leadership of people and communities experiencing the greatest health inequities in a way that grows their leadership, confidence, agency and contribution to the process and the solutions.</p>
<p>2 . HUMAN INTERCONNECTEDNESS SERVES AS A FOUNDATION</p> <p>When we approach this journey toward equity recognizing that we are interconnected as a human family and a global community, we realize that the unleashing of trapped and untapped human benefits us all.</p>
<p>3. THINK IN TERMS OF MOVEMENTS</p> <p>We will not achieve equity through one effort or one focused strategy (even though we will have those); we need to build a generative, growing movement of people, organizations and communities that both adds a growing set of unusual solutions and has the ability to capture minds and hearts. Asking generative questions is one example of how we will continue to invite new ideas and people and solutions to the movement.</p>
<p>4. EMPLOY A STRENGTHS AND ABUNDANCE BASED APPROACH</p> <p>We will build on strengths and recognize abundance as we focus on potential solutions. We will focus on developing and unleashing community capacity, and build on and connect where useful the hundreds of people, organizations and communities who are already working on creating equity. A systematic process of uncovering strengths and assets will help us to accomplish this work.</p>

5 . IDENTIFY AND LEARN FROM BRIGHT SPOTS

Rather than focus on what doesn't work, we will identify bright spots and pursue a positive deviance methodology to learn from them and spread and scale these learnings through the 100 Million Lives Movement. This is not simply about the spread of best practices; it is founded on the recognition that people and communities with lived experience have been solving these challenges for hundreds of years; our ability to draw out this insight, our approach to seeing and growing communities of solution is one way to unlock the potential of people and communities to address health, wellbeing and equity. A bright spot library will help us to do this.

6. DEVELOP UNPRECEDENTED COLLABORATION AND BUILD UNITY IN DIVERSITY

We will develop unprecedented collaboration among members of 100 Million Healthier Lives and others who are committed to working on equity together. We will build on each other's strengths, assets and lessons learned rather than reinventing the wheel. We will above all partner with people with lived experience who can guide us on this journey. We will begin by creating a map of aligned efforts already taking place in equity to explore opportunities for unprecedented collaboration We believe that people hold pieces of the puzzle. We can only see the whole picture if we are able to create an environment which welcomes diverse viewpoints and insights and appreciate dialogue as crucial to the journey.

7 . CULTIVATE UNUSUAL PARTNERSHIPS

Health and wellbeing are created where we live, work, play, pray and learn. Whether it is partnerships with faith communities, human services, business, or schools, we recognize that sustaining partnerships will require that the relationship be generative for all involved. This means we need to understand what matters to each other and build measurement systems that support our mutual goals.

8 . INNOVATE ON COMPLEX PROBLEMS

It is possible to bring our understanding of the science of improvement and complex adaptive system change and apply it to create improvement and transformative change. Without being able to see the system, we cannot be successful as most systems which have been in place for hundreds of years have mechanisms to preserve the status-quo.

9 . APPROACH STRUCTURAL CHANGE IN PRACTICAL WAYS

It does not serve us to ignore the system changes that are needed. Where it is clear that system change is needed, we commit to pursuing it in a practical way, leveraging pathways and assets and strategies that can accomplish meaningful change.

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