

Change Agents Unite!

Leveraging Your Skills and Power for Transformation Through Policy & Advocacy



Rohan Radhakrishna MD, MPH, MS (he/him)

Chief Equity Officer and Deputy Director

Office of Health Equity

California Department of Public Health

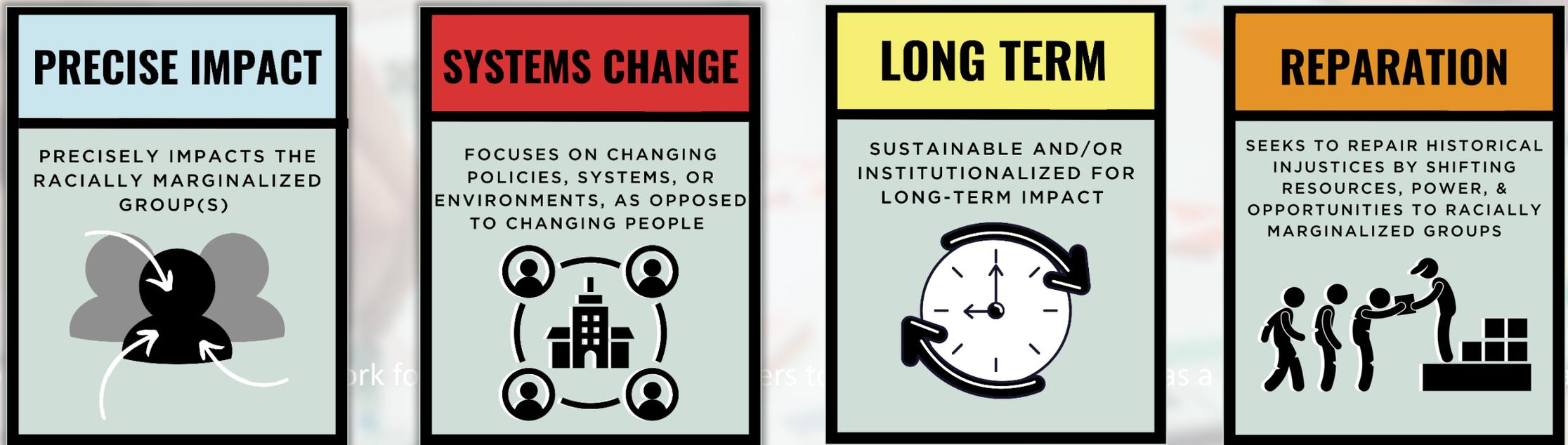
UC Global Health Day 2024

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[@DrRohanRad](https://twitter.com/DrRohanRad)

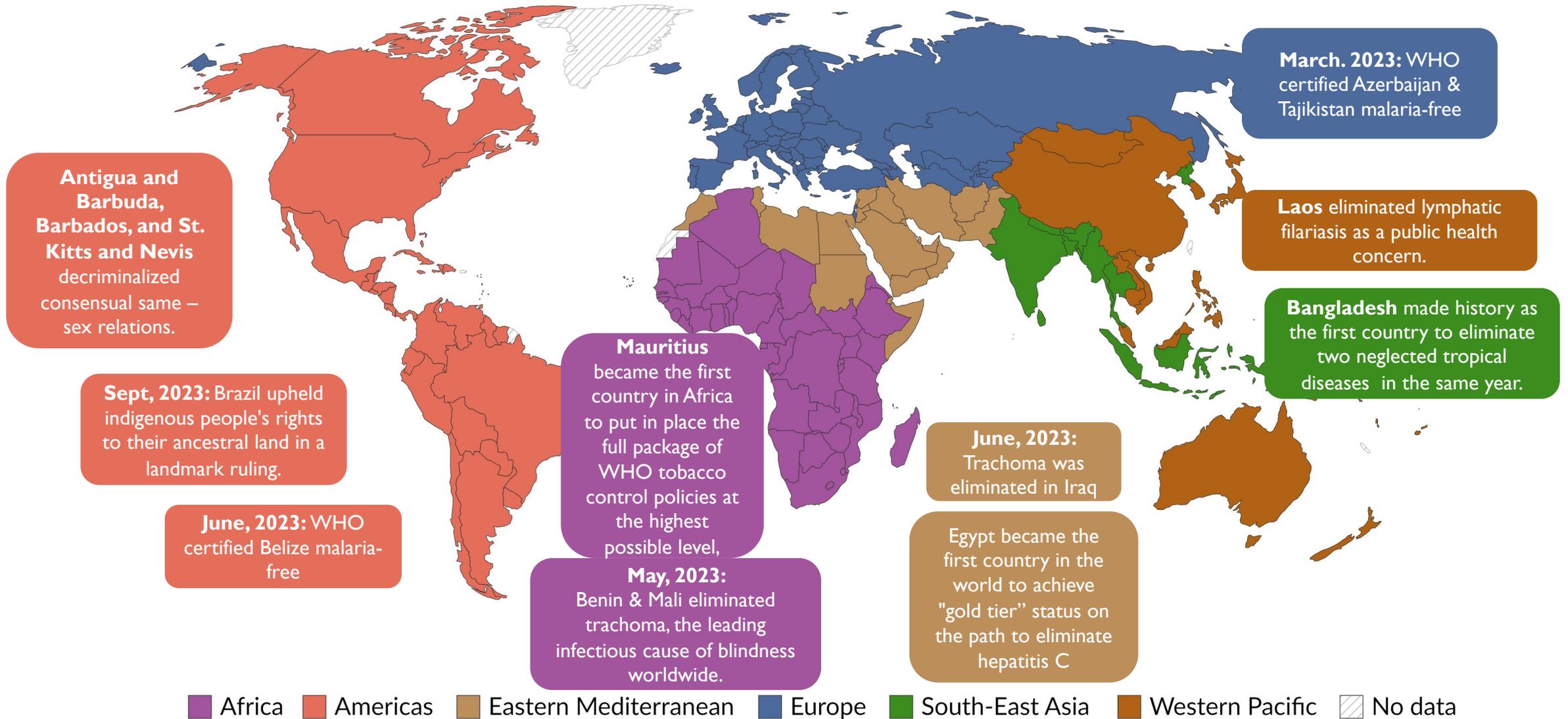






A solutions-centered framework for public health practitioners to directly address racism as a root cause in health disparities

2023: Policy Driving Global Health Achievements



WHO member states are grouped into six regions. The list of countries by regions is published here: <https://ourworldindata.org/grapher/who-regions?tab=table>

Data source: World Health Organization

[OurWorldInData.org/world-region-map-definitions](https://ourworldindata.org/world-region-map-definitions) | CC BY

BIGGEST GLOBAL HEALTH CHALLENGES



- 1. Healthcare access**
- 2. Impact of climate change**
- 3. Strengthening healthcare systems**
- 4. Poverty and food security**
- 5. Displacement and migration**
6. North-South health inequities
7. Mental Health
8. Infectious diseases
9. Gender equity
10. Incorporation of non-Western knowledge





Most diverse state in the nation. 27% (10.5 million) are foreign-born. CA remains one of the states receiving the largest # of refugees.



Recent immigrants in California are among the **most educated** residents in the state.



Racial diversity is growing in the **California legislature.**



Younger Californians are demographically distinct from older Californians. This generation **will shape our future.**

Our state's diversity is one of our greatest assets.

“The health of people around the globe is the health of California.”

- Governor Arnold Schwarzenegger

California is a microcosm for the globe, and we have the opportunity to **learn and lead**, here at home.



**POLITICAL
DETERMINANTS
OF HEALTH**

**GLOBAL
HEALTH
TRENDS**

SKILLS

**SCIENCE
TO ACTION**

IMPACT

TRUST | RECOGNIZING & OWNING OUR POWER | POLICY & ADVOCACY

Inequality

Unequal access to opportunities



With apologies to Oshii Shirota from @sunshine

2018 Design in Tech Report | Addressing Imbalance

Equality?

Evenly distributed tools and assistance



With apologies to Oshii Shirota from @sunshine

2018 Design in Tech Report | Addressing Imbalance

Equity

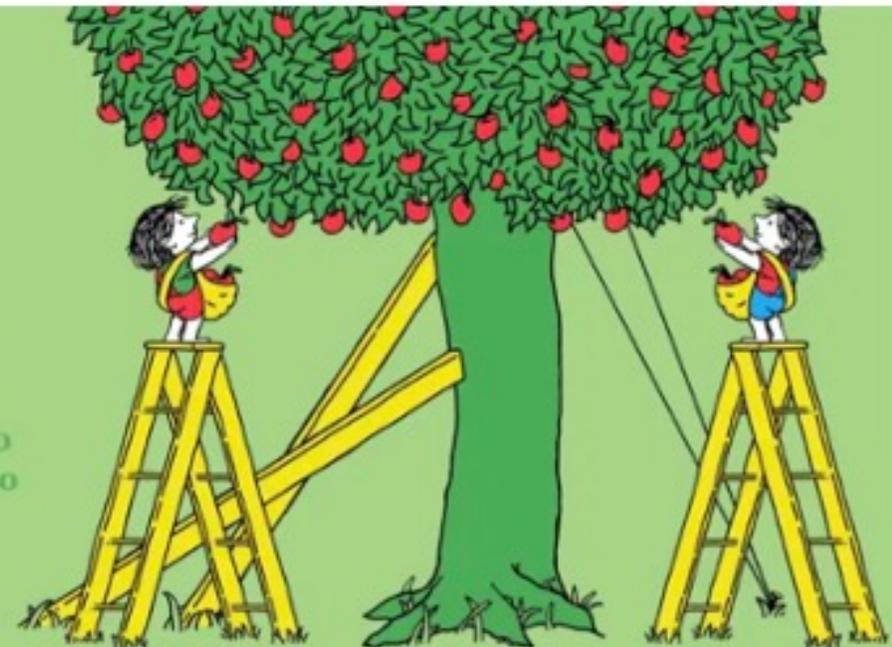
Custom tools that identify and address inequality



Sources: Ruth 2019 <https://workplace.msu.edu/psychological-safety-and-dei/>

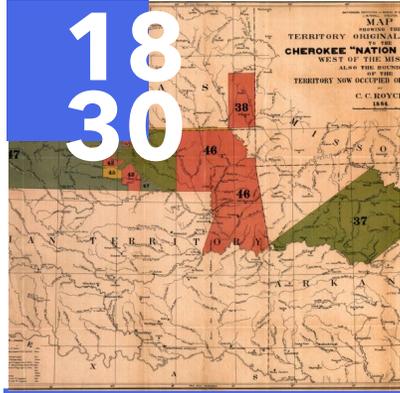
Justice

Fixing the system to offer equal access to both tools and opportunities



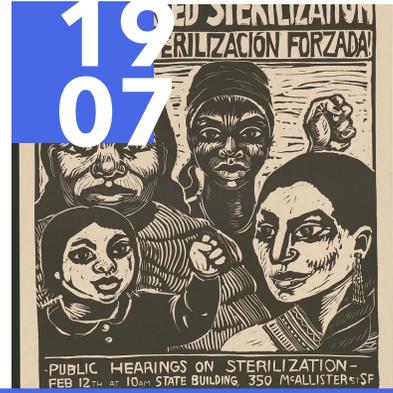
2018 Design in Tech Report | Addressing Imbalance

POLICIES HAVE AND CONTINUE TO DIRECTLY CONTRIBUTE TO HEALTH DISPARITIES.



The Indian Removal Act & the Trail of Tears

The Indian Removal Act of 1830 led to the forced relocation of American Indian Tribes, resulting in the genocide of thousands, and the loss of homes and lands.



American Eugenics & the Forced Sterilization of Women of Color & Low-Income Women

Eugenic sterilization laws that targeted low-income communities of color as well as people with disabilities.



“Operation Wetback”

The derogatory termed “Operation Wetback” initiative resulted in the deportation of at least one million Mexican people.

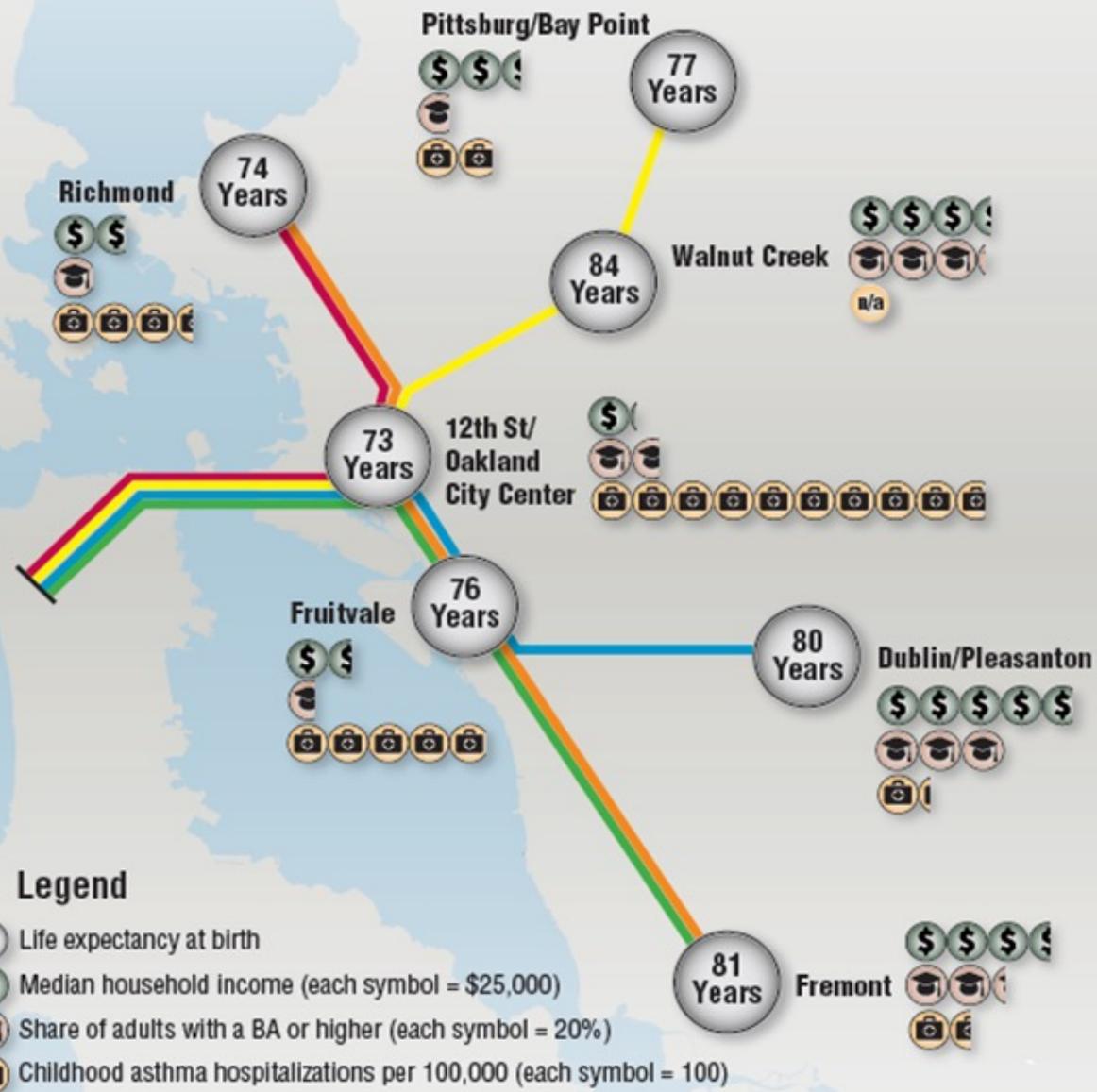


Muslim Travel Bans (Executive Order 13769 & 13780)

The Trump Administration’s policy actions prohibited travel and refugee resettlement from primarily Muslim-majority countries.

Health and Wealth inequities across Bay Area Rapid Transit (BART) stations

The short distance between a few BART stations can mean an 11-year difference in life expectancy and dramatic differences in physical and economic well-being.



“What’s the point of treating people only to send them back to the conditions that make them ill?”

-Sir Michael Marmot

"Medicine is a social science"

"The physician is the natural attorney of the poor"

-Rudolf Virchow

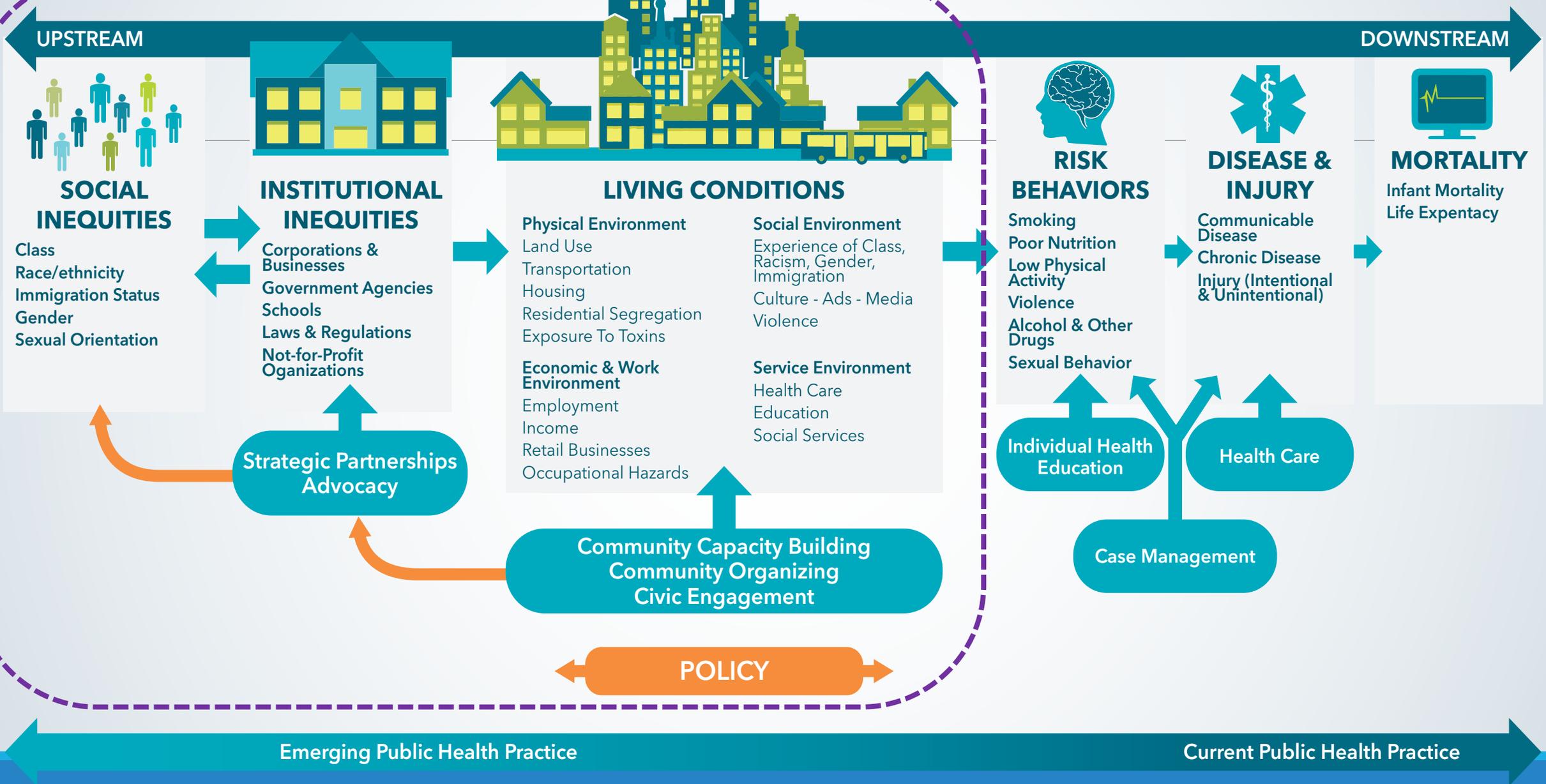
Title 17 Section 1276 California Code & Regulations

"The health department shall offer ...

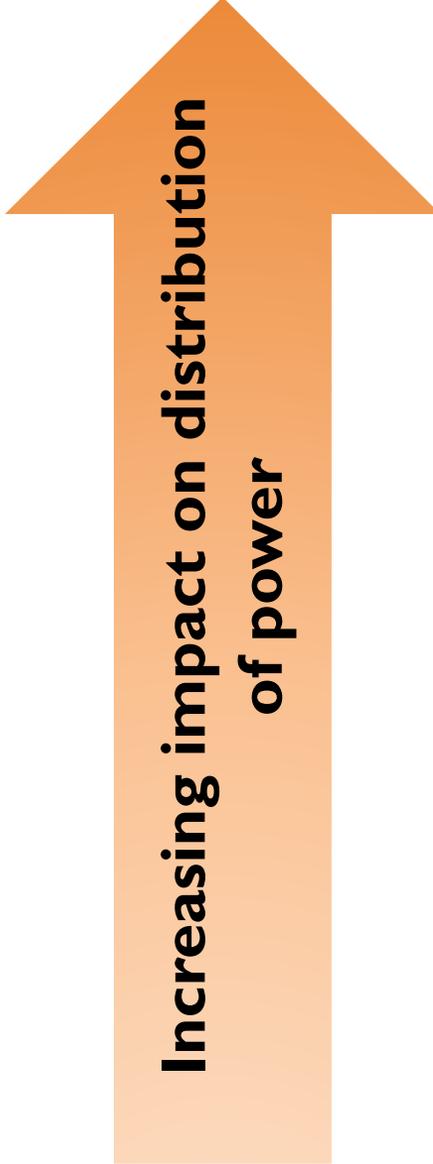
(i) Services directed to the **social factors affecting health ...**"

A PUBLIC HEALTH FRAMEWORK FOR REDUCING HEALTH INEQUITIES

BAY AREA REGIONAL HEALTH INEQUITIES INITIATIVE



Interventions into the structural determinants of health



- **Change belief** that housing is naturally a commodity to be owned, bought, and sold privately.
- **Change belief** that racial housing segregation occurs naturally or reflects only individual preference.

- **Build coalitions** between groups advancing housing justice (organized residents, service providers, affordable housing developers, etc.) across racial, minoritized, and other dimensions of shared or imposed identity
- Organize people facing housing issues

- **Change laws about land ownership** so community residents have more control (than developers)
- Change **laws, policies, and practices to prevent segregation, displacement and gentrification**

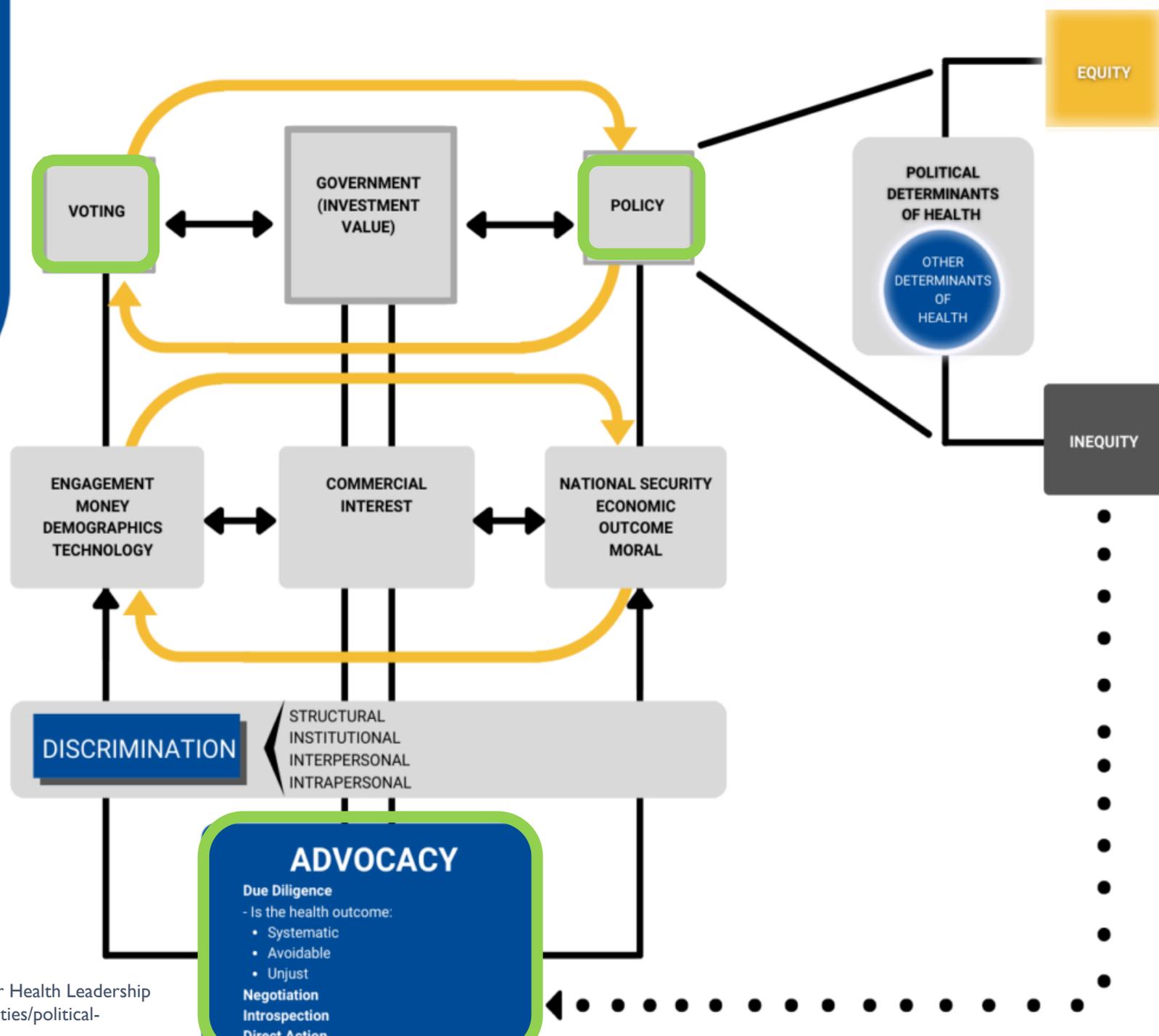
- **Require housing developments** to include a minimum number of affordable units
- **Change zoning** to allow for construction of more multiunit housing to increase housing supply
- **Increase budgets** for subsidized housing programs
- Build more housing for low income residents near hospitals

- **Provide shelter and services** for people who are unhoused (address a health-related social need)

Interventions into the social determinants of health

Image condensed from this source for brevity. Source: Heller, J. C., Givens, M. L., Johnson, S. P., & Kindig, D. A. (2024). Keeping It Political and Powerful: Defining the Structural Determinants of Health. The Milbank Quarterly.

POLITICAL DETERMINANTS OF HEALTH MODEL



Source: *Political determinants of health*. Daniel Dawes. Satcher Health Leadership Institute. (2022, August 3). <https://satcherinstitute.org/priorities/political-determinants-of-health/>



OFFICE OF HEALTH EQUITY



Office of Health
Equity



VISION: Everyone in California has equal opportunities for optimal health, mental health, and well-being.



MISSION: Promote equitable social, economic, and environmental conditions to achieve optimal health, mental health, and well-being for all.



CENTRAL CHALLENGE: Mobilize understanding and sustained commitment to eliminate health inequity and improve the health, mental health, and well-being for all.



STATUTE: Established in 2012, as authorized by Section 131019.5 of the California Health and Safety Code, to provide a key leadership role to reduce health and mental health disparities to disproportionately affected communities.

OHE PRIORITIES

1. Advancing Racial & Social Equity in Government
2. Behavioral Health Equity
3. Climate Action for Health Equity
4. Equitable COVID Recovery through Health in All Policies, Cross-Sector Planning and Partnerships
5. Housing & Homelessness



2023 CALIFORNIA EQUITY CONVENING WELCOME AND WINS



ROHAN RADHAKRISHNA



TOMÁS ARAGÓN



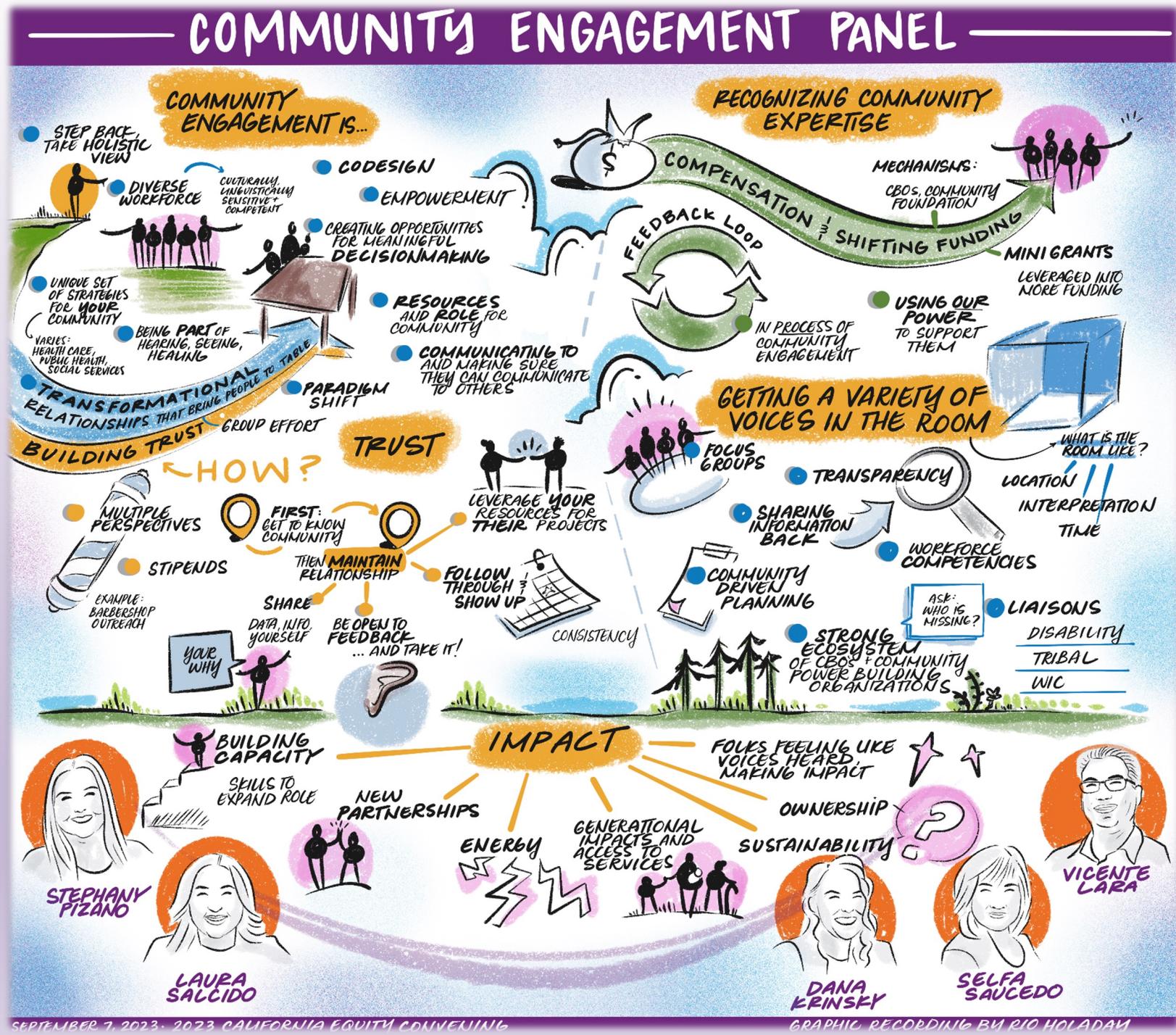
DANIEL TORRES

Recognizing community expertise

Getting a variety of voices in the room

Trust

Impact





THE FRESNO CENTER : HMONG VILLAGE GRAND OPENING

<https://fresnocenter.org/news/hmong-village/>



SWEET POTATO PROJECT

WEST FRESNO FAMILY RESOURCE CENTER

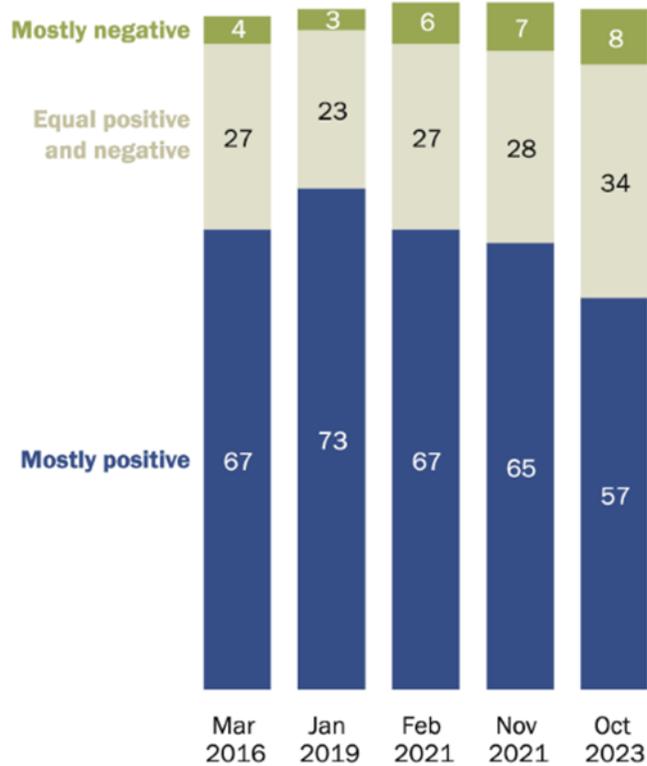
<https://www.wfresnofrc.org/sweet-potato-project>



TRUST & TRAUMA

Fewer Americans now say science has had a mostly positive effect on society

% of U.S. adults who say science has had a(n) ___ effect on society



CHILDHOOD VACCINATION RATES
Decreases in rates.

REPRODUCTIVE HEALTH
Misinformation.

A growing mistrust in science, medicine, and public health

Source: 1. Kennedy, B., & Tyson, A. (2023, November 14). Americans' trust in scientists, positive views of science continue to decline. Pew Research Center Science & Society. [https://www.pewresearch.org/science/2023/11/14/americans-trust-in-scientists-positive-views-of-science-continue-to-decline/#:~:text=As%20trust%20in%20scientists%20has,in%20ratings%20of%20scientists%20generally](https://www.pewresearch.org/science/2023/11/14/americans-trust-in-scientists-positive-views-of-science-continue-to-decline/#:~:text=As%20trust%20in%20scientists%20has,in%20ratings%20of%20scientists%20generally.). 2. Ranney, M., & Jetelina, K. (2023, November 17). *Opinion: Trust in science is declining. here's how we can regain it.* CNN. <https://www.cnn.com/2023/11/17/opinions/public-trust-in-scientists-ranney-jetelina/index.html>

Dr. Radhakrishna Appointed Deputy Director of the Office of Health Equity at California Department of Public Health

written by ECT | Feb 26, 2021

15 COMMENTS



RICHARD

🕒 Feb 26, 2021 - 2:25 pm

When my wife was seen by him, I commented after to her that he was the best doctor that I'd ever met, in my 69 years. My wife agreed.



ELIZABETH STERN

🕒 Feb 26, 2021 - 5:21 pm

When will a doctor with a name like SAM JONES be appointed to head such an agency? Why is it always someone with an unpronounceable name --- and a foreigner! I don't care how "good" he is. By the way, a patient really cannot judge a doctor to see whether he's competent or not. Only another doctor could do that.



“La vacunación no es solamente para algunos individuos, sino para toda **la familia** y este mural ayudará a que la comunidad entienda que **la salud es parte de su cultura** y estar sanos ayuda a todos”, agregó el doctor Radhakrishna.

“En comunidad podemos actuar todos para uno y uno para todos; el mural es parte del **bilingüismo** de Los Ángeles y es una **herramienta poderosa para informar** a la comunidad y recordar que no podemos bajar la guardia, porque **solo una vacuna no es suficiente**”.



1. Hurtado, J. (2022, July 6). Un mural para promover dosis de refuerzo contra el covid-19 | video. CNN. <https://cnnespanol.cnn.com/video/refuerzo-covid-19-vacuna-mural-pkg-jaqueline-hurtado/>

2. Macias, J. L. (2022, June 16). Develan Mural “boost la familia.” La Opinión. <https://laopinion.com/2022/06/16/develan-mural-boost-la-familia/>

*“Clear, accurate, and timely risk communication can help build the public’s trust during a crisis, and so can investing in **community engagement strategies** to respond to the specific needs and concerns of **marginalized subgroups**”*

- COVID-19 data from 177 countries/ territories, and 181 subnational locations was extracted.
- Greater interpersonal and government trust associated with lower infection rates & higher vaccine coverage, among middle-income and high-income countries.

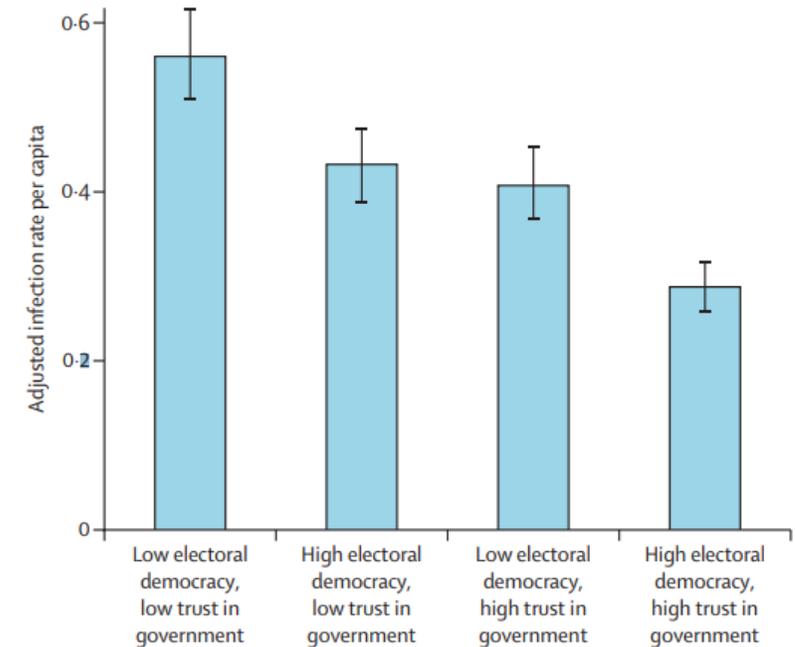


Figure: Adjusted SARS-CoV-2 infection rate given low and high levels of electoral democracy and trust in government, from Jan 1, 2020, to Sept 30, 2021

TRUST makes the difference.

1. Bollyky, T. J., Angelino, O., Wigley, S., & Dieleman, J. L. (2022). Trust made the difference for democracies in COVID-19. *The Lancet*, 400(10353), 657. 2. Bollyky, T. J., Hulland, E. N., Barber, R. M., Collins, J. K., Kiernan, S., Moses, M., ... & Dieleman, J. L. (2022). Pandemic preparedness and COVID-19: an exploratory analysis of infection and fatality rates, and contextual factors associated with preparedness in 177 countries, from Jan 1, 2020, to Sept 30, 2021. *The Lancet*, 399(10334), 1489-1512.

Trauma

The emotional, psychological, and physiological residue from unrelenting, unmitigating toxic stress.

It is how a person experiences an event or environment that is traumatizing.

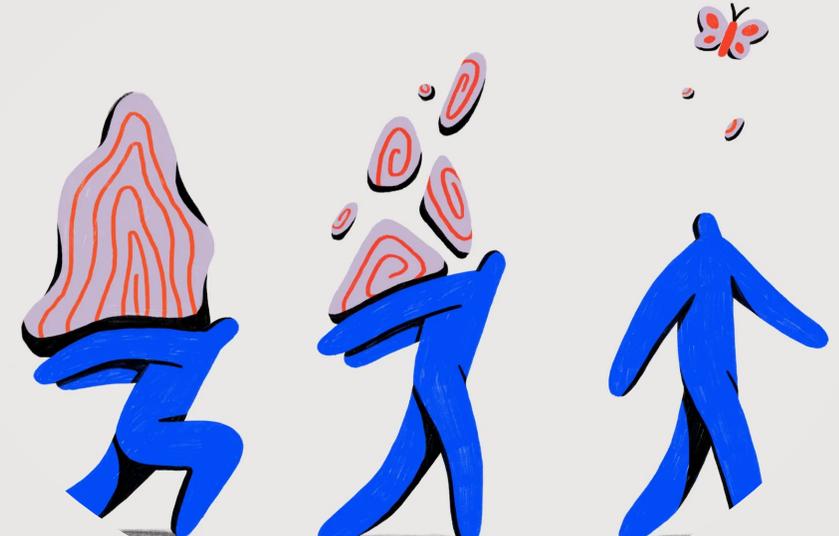
Secondary Trauma

Professionals working with traumatized populations are at high risk for secondary trauma.



Particularly true for those expected to hold space for those experiencing the effects of *personal, community, institutional, or compounding traumas.*

What traumatizes one person may have little or no impact on another.



“The idea that we can be immersed in suffering and loss and not be harmed is as unrealistic as expecting to walk through water without getting wet...”

Rachel Naomi Remen, MD



COVID-19 PANDEMIC: BEYOND BURNOUT

Government public health workers & other essential workers played a crucial role in pandemic response.

Their **mental health** suffered in the process.

Public health workers were more likely to report COVID related post traumatic stress.

Almost a quarter of public health agency employees (24.7%) reported at least 3 symptoms of posttraumatic stress.

Post traumatic stress may have been driven by experiences such as:

41% felt **bullied, threatened, or harassed.**

Insufficient access to life-saving equipment (f.e. Personal Protective Equipment)

Public health and health care leaders should invest in systems-level interventions to promote a healthy workplace environment.

32% reported intent to leave in the next year.

The mental health effects of the pandemic on public health and frontline workers remain and require vigilance to ensure the country **is ready to address the next health crisis.**



TRAUMA RESPONSIVENESS & TRUST

THE 6 R'S AND 5 N'S

Realize trauma is universal.

Remember every encounter carries risk of activation.

Recognize expressions of trauma when they present.

Respond from an expanded skill set.

Resist re-traumatization.

Restore: agency, trust, safety, connection, well-being.

NOTICE

Self awareness. Awareness of others

NAME

Identify the emotion. *Name it to tame it*

NORMALIZE

I/we are not alone. Universality of experiences.

NAVIGATE

Choice. Self-regulation.

NURTURE

Self-compassion. Care of others



~~*What's the matter
with you?*~~

***What matters
most to you?***



62%



59%



56%



51%



50%

Icons from FlatIcon



Food as Medicine

Validated 2-Item Food Security Screen

If positive Rx:

- 1 CalFresh enrollment
- 2 Food Banks / Resource Sheet
- 3 Food onsite



Resource
Connections
15,000+



Social Needs
Screen
50%

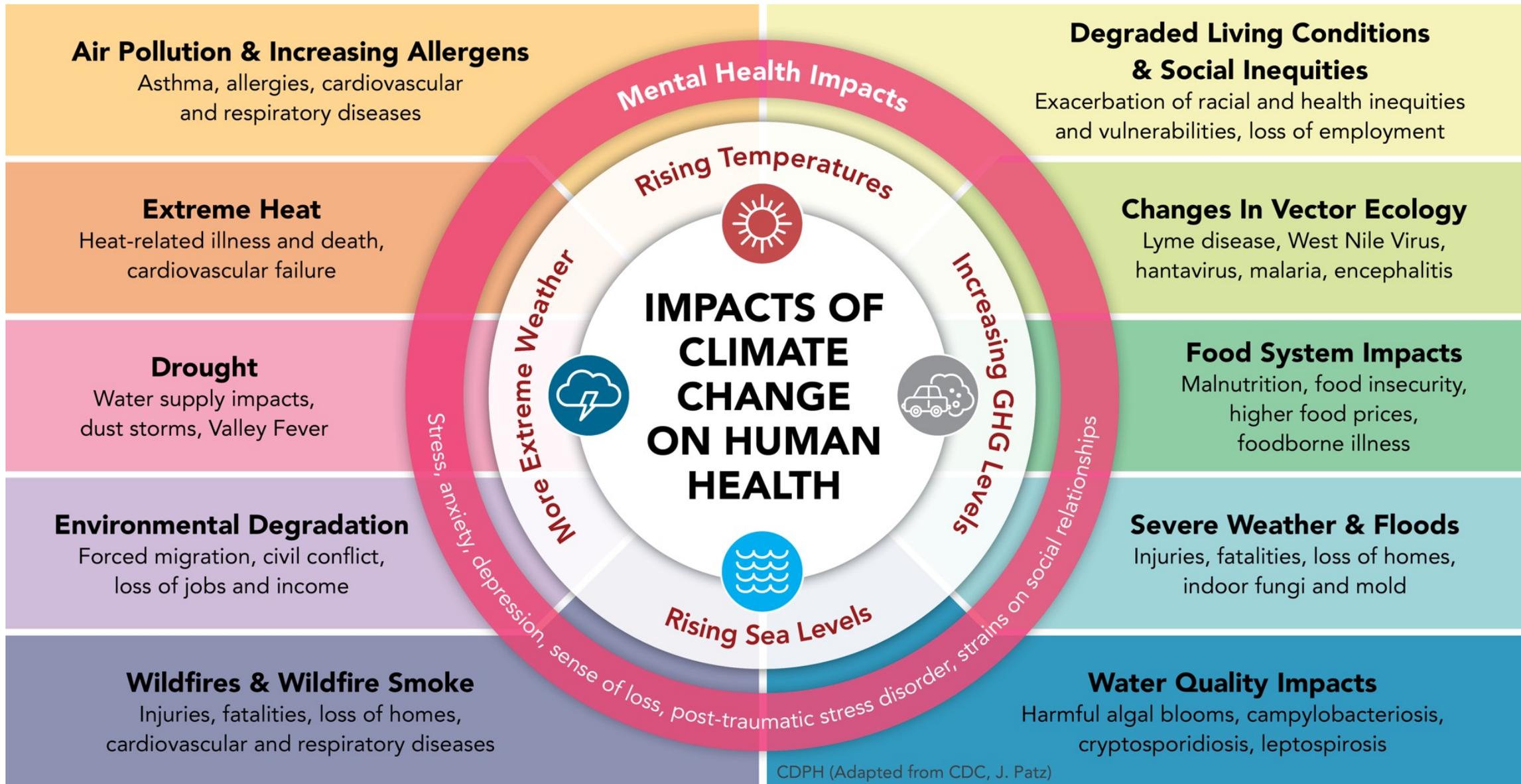


SUSTAINABLE DEVELOPMENT GOALS





GLOBAL HEALTH TRENDS



Sources: 1. Crimmins, M. A., Balbus, J., Gamble, J. L., Beard, C. B., Bell, J. E., Dodgen, D., Eisen, R. J., Fann, N., Hawkins, M. D., Herring, S. C., Jantarasami, L., Mills, D. M., Saha, S., Sarofim, M. C., Trtanj, J., & Ziska, L. (2016). *The impacts of climate change on human health in the United States: A scientific assessment*. U.S. Global Change Research Program. <http://dx.doi.org/10.7930/J0R49NQX> 2. National Institute of Mental Health. Mental Illness. November 2017. <https://www.nimh.nih.gov/health/statistics/mental-illness.shtml#3>. Centers for Disease Control and Prevention. "Mental health surveillance". 2011. https://www.cdc.gov/mentalhealthsurveillance/fact_sheet.html 4. Dodgen, D., D. Donato, N. Kelly, A. La Greca, J. Morganstein, J. Reser, J. Ruzek, S. Schweitzer, M.M. Shimamoto, K. Thigpen Tart, and R. Ursano, 2016: Ch. 8: Mental Health and Well-Being. *The Impacts of Climate Change on Human Health in the United States: A Scientific Assessment*. U.S. Global Change Research Program, Washington, DC, 217–246. <http://dx.doi.org/10.7930/J0TX3C9H>



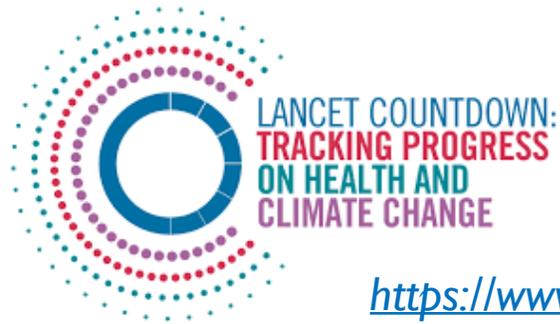
UN News

Global perspective Human stories

A liveable future for all is possible, if we take urgent climate action: flagship UN report

20 March 2023 | Climate and Environment

<https://www.ipcc.ch/report/sixth-assessment-report-cycle/>



The New York Times Nov. 14, 2023

Health Risks Linked to Climate Change Are Getting Worse, Experts Warn

The latest Lancet Countdown report underscores the imperative for a health-centred response in a world facing irreversible harms.

<https://www.lancetcountdown.org/2023-report>



NOVEMBER 14, 2023

No place is safe: New national report on climate change details sweeping effects



FIFTH NATIONAL CLIMATE ASSESSMENT

15. Human Health

<https://nca2023.globalchange.gov/>

Dec 13, 2023 12:00 PM EST



At COP 28, global consensus on how climate change affects health

COP28 UAE Declaration on Climate & Health:

<https://www.who.int/publications/m/item/cop28-uae-declaration-on-climate-and-health>

One Health

One Health is the idea that the health of people is connected to the health of animals and our shared environment.



When we protect **one**,
we help protect **all**.

www.cdc.gov/onehealth



Climate Change Through a One Health Lens

- **Wildfires** displace wild animals → lead to hazardous air quality for humans and animals, and disrupt the human-animal bond during emergency evacuations
- **Hurricanes** can lead to an increase in zoonotic diseases such as leptospirosis
- **Flooding** on farms can increase the spread of antimicrobial resistance onto crops
- **Warmer weather** expands tick habitat, increasing risk of vector-borne diseases
- **Drought** reduces agriculture production and food security
- **Forced migration** of prey species alters coyote prey-seeking behaviors, increasing human bite risk
- **Harmful algal blooms** are a health hazard to humans and fatal to companion animals

One Health at CDPH Center for Environmental Health

- Filling the gap: Convening a statewide **One Health** collaboration
- Prioritizing representation from **environmental groups**
- Understanding the need for **improved One Health efforts** in CA through State agency One Health focus groups
- Building and strengthening local and State **partner networks**
- Promoting a **One Health approach** through guidance, input, and outreach

Contact: **Kim Conway, DVM, MPVM**, One Health Lead
Center for Environmental Health, CDPH | Kim.Conway@cdph.ca.gov



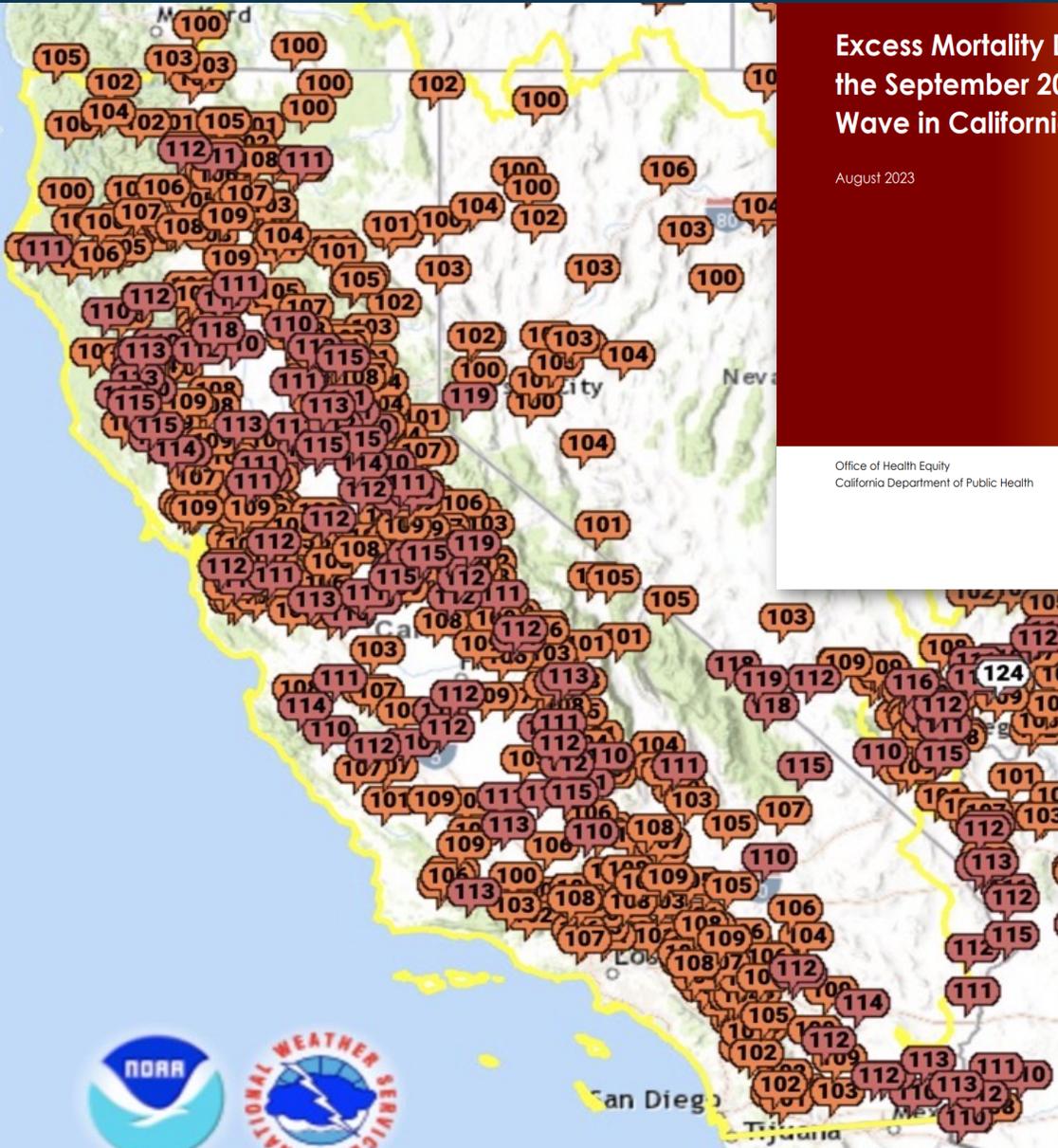
*KQED NPR Radio Sept 4, 2020
How to Survive the California
Heat Wave*

“We’re at the center of an unfortunate Venn diagram with multiple overlapping emergencies. We have racism, social inequity, climate change, poor air, and a virus.”

Q: “As a health expert, what can you tell people drinking hot tea and eating spicy food during a heat wave?”



CDPH Analysis: Excess Mortality During September 2022 Heat Wave



Excess Mortality During the September 2022 Heat Wave in California

August 2023

Office of Health Equity
California Department of Public Health



- **Extreme heat is increasing with climate change and has significant health impacts – it kills more people directly than any other climate-related hazard**
- In California, high summer temperatures are projected to result in **~11,300 excess deaths a year by 2050**
- September 2022's record-breaking, widespread extreme heat was associated with **395 excess deaths** (5% more than would be expected) during this time period
- Highest increases in deaths among those **aged 25-64, Hispanic or Latino**, and from **South Coast region**
- **Heat impacts are not felt equally** - disproportionate consequences for Californians facing inequities, those medically vulnerable, and other population groups



www.cnrfc.noaa.gov

Sources: 1. CDPH Extreme Heat Resources & Guidance: https://www.cdph.ca.gov/Programs/EPO/Pages/Extreme%20Heat%20Pages/BI_Natural-Disasters_Extreme-Heat.aspx 2. <https://www.cdph.ca.gov/Programs/OHE/CDPH%20Document%20Library/Climate-Health-Equity/CDPH-2022-Heat-Wave-Excess-Mortality-Report.pdf>



Image: Pablo Blazquez Dominguez / Getty Images

“Racism – not race – is the risk factor for [the rapid] spread [of COVID among communities of color].”

– Thomas Sequist

“Racial injustice and climate injustice are both rooted in the evil notion that some lives are more important than others.”

– David Lammy

Source: CAT-PHWG; COVID-19 Equity Lessons for the Climate Crisis (Recording): <https://www.youtube.com/watch?v=YJZ3b9R4AnA>

"Jay Wit Da Trey"

(Spoken Word

Artist &

MO)

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workshops and more!



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Jaywitdatrey3@gmail.com

Health Professionals Must Motivate Climate Action

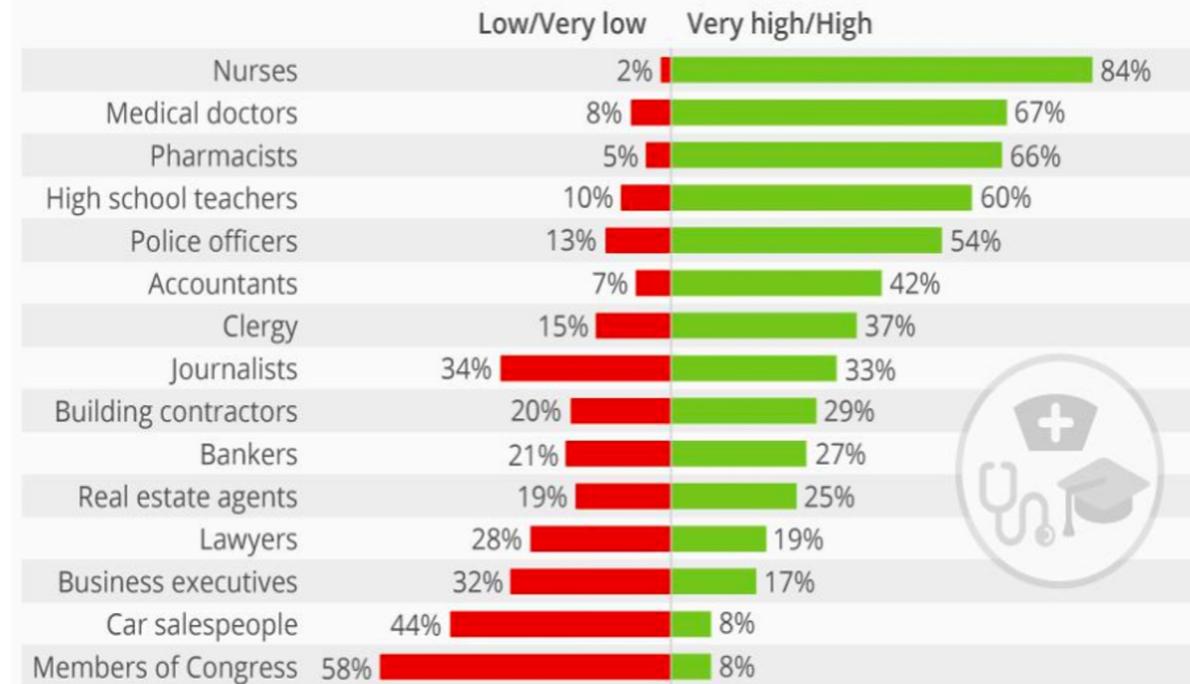
Protecting health is the top reason Americans select for supporting climate solutions:

- **76%** motivated by health
- **71%** motivated by good paying jobs

68% of Americans trust health professionals for information on climate change

America's Most & Least Trusted Professions

Rating of selected U.S. professions in terms of honesty and ethical standards in 2018



 n=1,025 U.S. adults
@StatistaCharts Source: Gallup

Forbes  statista





Dr. Diana Ramos Appointed Surgeon General

Governor Gavin Newsom today announced the appointment of accomplished public health leader Dr. Diana Ramos as California Surgeon General. Dr. Ramos has more than three decades of cross-cutting experience and expertise with a focus on health equity and reproductive health. She currently serves at the California Department of Public Health's Center for Healthy Communities, where she oversees the state's public health and prevention programs.

California Expands Access and Protections for Reproductive Health Care

politics SCOTUS Congress Facts First 2024 Elections

California Gov. Gavin Newsom signs legislative package protecting and expanding abortion access into law

Los Angeles Times

CALIFORNIA

Newsom signs 13 abortion protection and reproductive health bills



PROTECTING ABORTION RIGHTS IN CALIFORNIA
EYEWITNESS NEWS



Abortion is legal and protected in California

Abortion remains safe, legal, and accessible in California, whether or not you live in the state. This website has current and accurate information about how you can access abortion services in California.

Find a provider 🔍

<https://www.abortionfinder.org/>

ARTIFICIAL INTELLIGENCE & GLOBAL HEALTH



Potential for impact on global health

- AI-enabled population health
- Virtual Health Assistant for Frontline health workers (clinical decision support) and Patients



Challenges

- Data Availability & Quality
- Data Privacy & Ethics
- Regulatory & Policy Challenges
- Health System Integration & Capacity



Equity

- Potential to amplify racism, sexism, ableism, and other forms of discrimination, if unchecked.
- Equitable AI requires people have agency and control over how they interact with it.
- Continuous oversight – policy & advocacy.
- Respect human life, dignity, and rights.

Leveraging Artificial Intelligence in Global Health

1

Diagnosis



Researchers internationally (f.e. USA, China, Belarus) applied **machine learning and signal processing methods to digital chest radiographs** to identify tuberculosis cases and drug-resistant tuberculosis cases

3

Disease Outbreak Prediction & Surveillance



Remote sensing data and machine learning algorithms were used by researchers in China to characterize and **predict the transmission patterns of Zika virus globally**

2

Patient Morbidity & Mortality

To **quantify the risk of dengue fever severity, researchers applied machine learning algorithms** to administrative datasets from a large tertiary care hospital in Thailand



4

Healthy Policy & Planning



Machine learning models were applied to administrative data from South Africa to **predict length of stay among health-care workers in underserved communities**



WHAT CAN I DO?

LET'S GET HUMBLE – GLOBAL HEALTH LEARNERS & LEADERS

Office of Health
Equity

Cultural humility—commitment to personal and institutional transformation by realizing and redressing power, privilege, and prejudice

In 1998, Melanie Tervalon and Jann Murray-García published a groundbreaking article that challenged the concept of “cultural competency” with the concept of “cultural humility” (Tervalon, 1998). Accepting cultural humility means accepting that we can never be fully culturally competent. Cultural humility means

1. committing to *lifelong learning* and *critical self-reflection*;
2. realizing our **power**, **privilege**, and **prejudice** (bias);
3. redressing *power imbalances* for *respectful partnerships*; and
4. promoting *institutional accountability*.

Humility is the noble choice to forgo your status, and to use your influence for the good of others before yourself. It is to hold your power in service of others. (Dickson, 2011).

acknowledge

reflect

language

intersectionality

messengers

platforms



ACKNOWLEDGE

Acknowledge the past and present harms. Accountability. Trauma responsiveness.

REFLECT

Reflect on lessons learned – from COVID19 pandemic & throughout history.

LANGUAGE

Accessible language and combine facts with real stories.

INTERSECTIONALITY

The interconnected nature of social categorizations (race, class, gender), our identities, and our systems.

MESSENGERS

Different communities trust different messengers.

PLATFORMS

Social media has power in amplifying credible messengers.

Tools & Skills for You



Emotional Intelligence

Kindness, empathy &
compassion

Inclusive leadership

Building trust

Trauma responsiveness

Thinking

Adaptability

Resilience

Creativity

Going Deeper

Data disaggregation

Analytic skills

Curiosity

Problem Solving

Engagement

Communication & collaboration

Cultural humility, Gender literacy

Redefining who the experts are

Listen & Learn

Systems

De-colonization beyond theory

Unlearning white saviorism

Intersectional approaches

Leveraging Technology

Artificial Intelligence

Promoting accessibility

Data, Narrative, Action



One Health Workforce Academy

Free, comprehensive, and available in several languages.

UC Education Resources

Bay Area Global Health Innovation Challenge

Annual competition for student teams from universities worldwide to present their ideas for low-cost, high-impact, and scalable global health innovations

Big Ideas@Berkeley

Annual contest to provide funding, support, and encouragement to interdisciplinary teams of UC undergraduate and graduate students

Case Studies in Planetary Health

A suite of interactive case studies provides real-world examples of global health issues

Child Family Health International (CFHI) Global Health Education Programs

Internships, electives, and rotations in international communities

ONLINE COURSES



Outbreak Investigation and Response

ONLINE COURSES



Fundamentals of One Health Practice

ONLINE COURSES



One Health and Gender

ONLINE COURSES



Introduction to Health Care Quality and Quality Improvement

ONLINE COURSES



Antimicrobial Resistance in One Health: Advanced Level

ONLINE COURSES



Antimicrobial Resistance in One Health: Introductory Level

Calling all Bureactivists & Advocrats!

Internships

and

Opportunities

FALL COHORT (Sep 4 to Dec 13, 2024) Applications open in March 2024

Please visit the webpage for the latest program information.

Contact

CDPHInternships@cdph.ca.gov

Resources

- [California Interns Network](#)
- [Internship Program Video](#)

Internship Program

The California Department of Public Health (CDPH) offers paid internships for undergraduate and graduate students. Internships provide opportunities to work in a variety of different public health disciplines such as health education, epidemiology, health statistics, laboratory sciences, public policy, healthcare administration, human resources, information technology, data science, informatics, and communications. An internship with CDPH offers exposure to state-level public service and equips aspiring public health leaders with professional development opportunities and a career pathway.

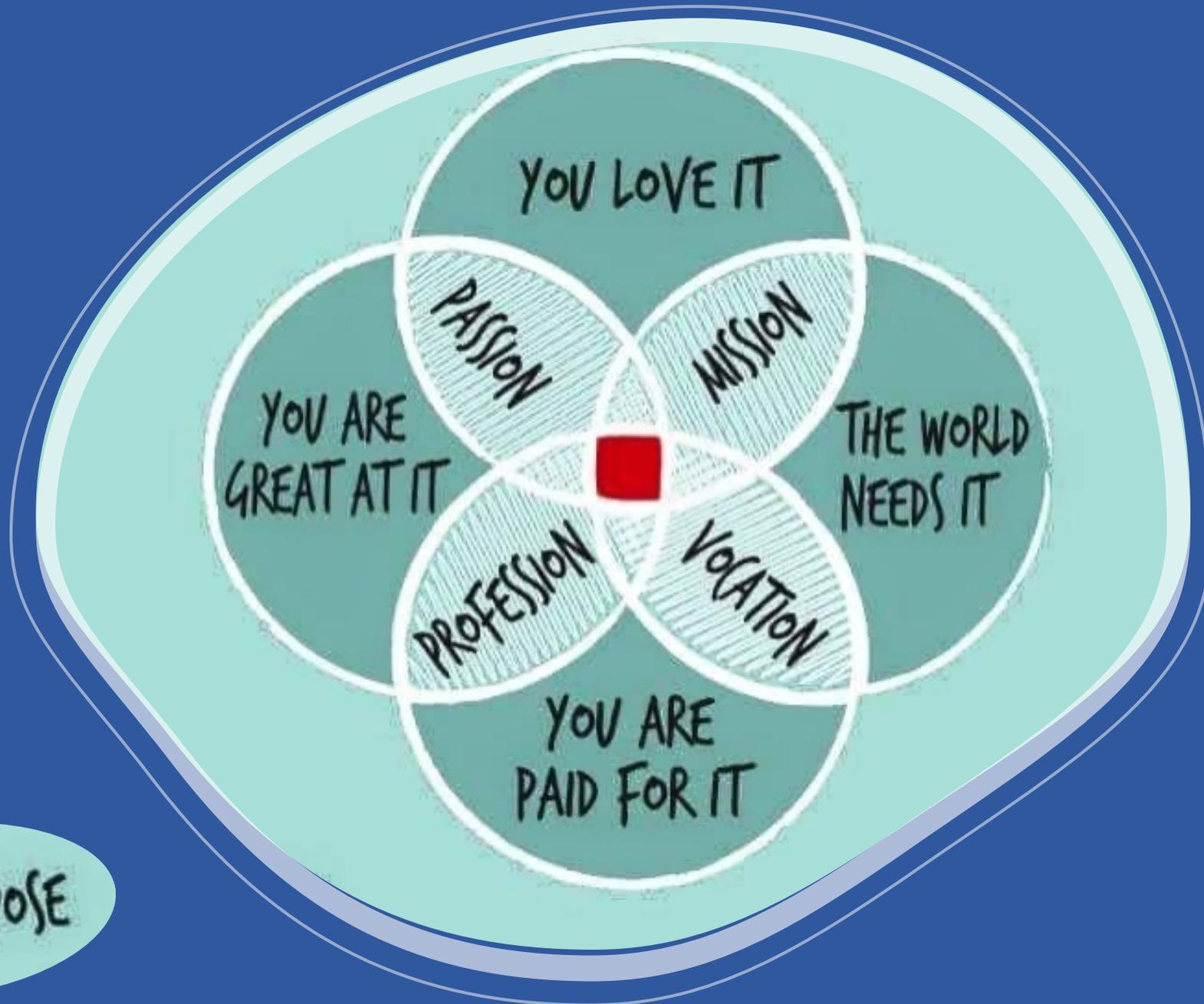


[Frequently Asked Questions \(PDF\)](#)



[Volunteer Internships](#)

<https://www.cdph.ca.gov/Programs/OPDE/Pages/Internship-Program.aspx>



 -PURPOSE

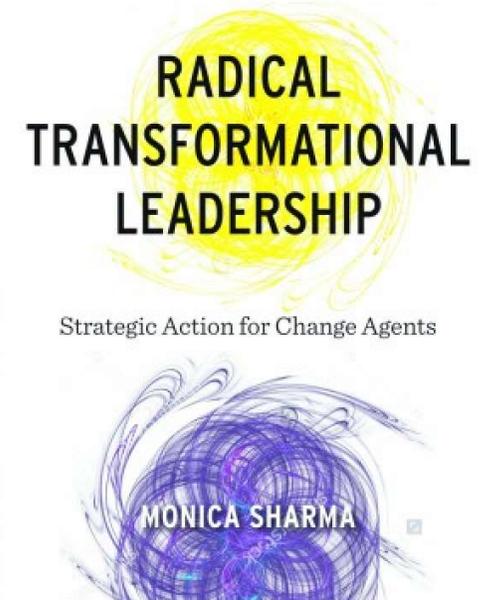


SCIENCE TO ACTION

INSPIRED BY DR. MONICA SHARMA, FORMER DIRECTOR OF UNITED NATIONS LEADERSHIP DEVELOPMENT

*Radical transformational leadership is leading change from the universal values of **dignity, equity, compassion and humility** to transform self, people, systems and cultures towards equity, antiracism, and sustainable results.*

Universal values are values that apply to everyone, everywhere, and leaves no one behind, including your worst enemy. Universal values **enable us to transcend differences, to find common ground, and to solve problems together.** We strive to embody and promote universal values in every interaction and in every conversation.



<https://www.radicallytransform.org/>



Personal Change



Workforce Change



Institutional Change



**Policy, Systems, Environment
(PSE) Change**



How can I be a Racial Equity Champion? **On Monday?**

Structural

- Talk about it at work and at home, weekly then daily **(Normalize, Organize, Operationalize)**



Institutional

- Get involved in a club or organization doing connected work.
- Connect with community voices & those who have been leading the work
- Join or lead in action – protests, advocacy groups, volunteering.
- Apply tools from the Racial Equity Resource Hub: <https://sgc.ca.gov/tools/racial-equity/getting-started.html>

Interpersonal

- Observe your daily thoughts, words, actions with clients, patients, and co-workers
- Start a 21-day Racial Equity Challenge <https://21dayequitychallenge.com/>

Internalized

- Read, watch, and listen. F.e. *How to Be An Anti-Racist* by Ibram X. Kendi
- Check-in with yourself and Ask “*How did I practice and promote anti-racism today?*”

Continuum on Becoming an Anti-Racist Multicultural Organization

MONOCULTURAL → MULTICULTURAL → ANTI-RACIST → ANTI-RACIST MULTICULTURAL

Racial and Cultural Differences seen as deficits → Tolerant of Cultural Differences → Racial and Cultural Differences Seen as Assets

EXCLUSIVE

An Exclusionary Institution

Intentionally and publicly enforces the racist status quo throughout institution. Openly maintains the dominant group's power & privilege.

1

2

PASSIVE

A "Club" Institution

Continues to intentionally maintain white power & privilege with formal policies, practices, teachings, and decision making.

"We don't have a problem"

3

SYMBOLIC CHANGE

A Compliance Organization

Makes official policy pronouncements regarding multicultural diversity.

But..

"Not those who make waves"

Is still relatively unaware of continuing patterns of privilege, paternalism, and control.

4

IDENTITY

An Affirming Organization

Growing understanding of racism as barrier to effective diversity.

But..

Institutional structures and culture that maintain white power and privilege still intact and relatively untouched.

5

STRUCTURAL CHANGE

A Transforming Institution

Implements structures, policies, and practices with inclusive decision making and other forms of power sharing on all levels of the institutions life and work

6

FULLY INCLUSIVE

Anti-Racist Multicultural Organization in a Transformed Society

Future vision of an institution and wider community that has overcome systemic racism and all other forms of oppression

The Spectrum of Community Engagement to Ownership

STANCE TOWARDS COMMUNITY	0	1	2	3	4	5
	IGNORE	INFORM	CONSULT	INVOLVE	COLLABORATE	DEFER TO
IMPACT	Marginalization	Placation	Tokenization	Voice	Delegated Power	Community Ownership
COMMUNITY ENGAGEMENT GOALS	Deny access to decision-making processes	Provide the community with relevant information	Gather input from the community	Ensure community needs and assets are integrated into process & inform planning	Ensure community capacity to play a leadership role in implementation of decisions	Foster democratic participation and equity through community-driven decision-making; Bridge divide between community & governance
MESSAGE TO COMMUNITY	<i>Your voice, needs & interests do not matter</i>	<i>We will keep you informed</i>	<i>We care what you think</i>	<i>You are making us think, (and therefore act) differently about the issue</i>	<i>Your leadership and expertise are critical to how we address the issue</i>	<i>It's time to unlock collective power and capacity for transformative solutions</i>
ACTIVITIES	Closed door meeting Misinformation Systematic	Fact sheets Open Houses Presentations Billboards Videos	Public Comment Focus Groups Community Forums Surveys	Community organizing & advocacy House meetings Interactive workshops Polling Community forums	MOU's with Community-based organizations Community organizing Citizen advisory committees Open Planning Forums with Citizen Polling	Community-driven planning Consensus building Participatory action research Participatory budgeting Cooperatives
RESOURCE ALLOCATION RATIOS	100% Systems Admin	70-90% Systems Admin 10-30% Promotions and Publicity	60-80% Systems Admin 20-40% Consultation Activities	50-60% Systems Admin 40-50% Community Involvement	20-50% Systems Admin 50-70% Community Partners	80-100% Community partners and community-driven processes ideally generate new value and resources that can be invested in solutions



DATA

NARRATIVE



Framing, Storytelling, Messaging



Advocacy, Civic Engagement, Social Enterprise

ACTION



WEALTH EQUITY



HOW CAN WE USE POLICY & ADVOCACY TO IMPACT CHANGE?



- Civic agency and association
- Collective efficacy
- Equitable access to information
- Opportunities for civic engagement
- Vibrant arts, culture, and spiritual life
- Freedom from stigma, and oppression
- Social support for civil rights and human rights



Source: I. Dean, — Stacy, Regan, — Michael S., & Dillard, — Maria. (n.d.). Framework. <https://health.gov/our-work/national-health-initiatives/equitable-long-term-recovery-and-resilience/framework> 2. https://www.flaticon.com/free-icon/civil-rights_4464159?related_id=4464160&origin=search

POWER IN OUR SYSTEMS: UC DIVESTMENT HISTORY



APARTHEID SOUTH AFRICA

In July of 1986, the UC Regents voted to divest \$3.1 billion from companies doing business with the apartheid government. It was the largest university divestment in the country.



SUDAN

In 2006, UC Regents voted to divest from companies that contributed to the Sudanese government's genocide against the Black African population.



FOSSIL FUEL INDUSTRY

Fully divested >\$1 billion from fossil fuel industry, becoming the largest school in the USA to do so.



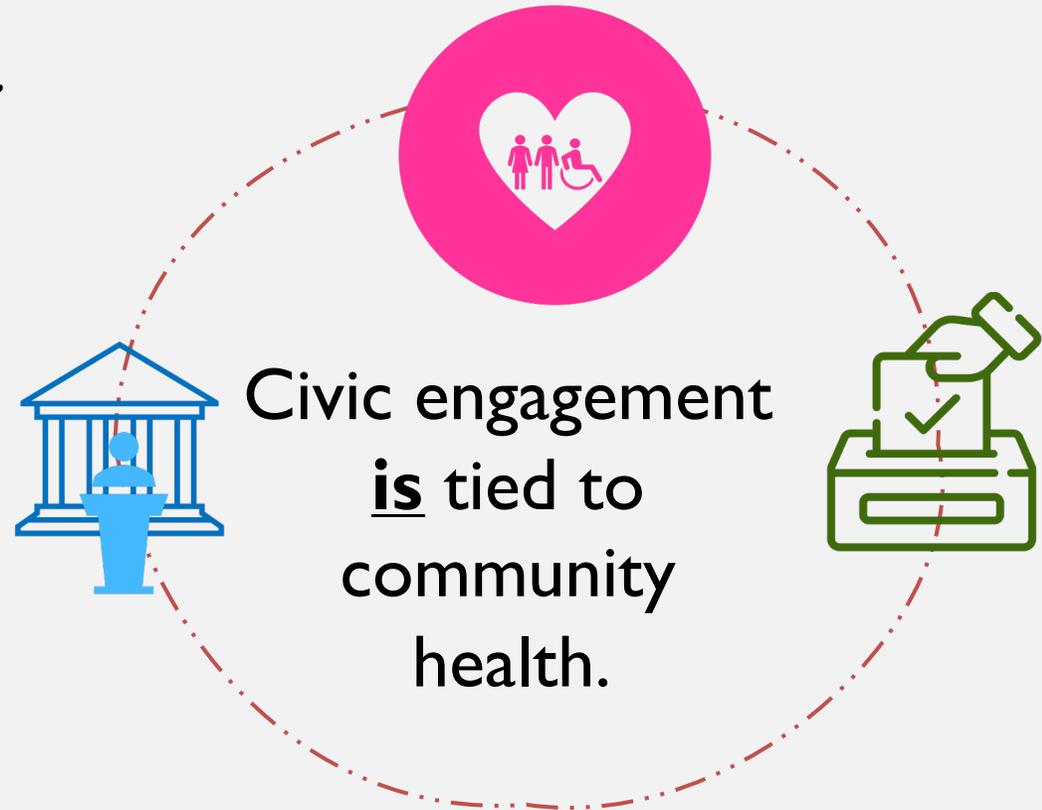
TODAY?

What is within our power? As students? As researchers? As an institution?

How can our advocacy influence policy?

Health is political.

"When we fight for safety for the marginalized, what we're talking about is safety from being discriminated against, harassed, assaulted, fired, or killed by the system and supremacist culture, which has historically criminalized, subjugated, exploited, and violated them and continues to do so." - Michelle Mijung Kim



WHAT IS THE ROLE OF HEALTH CARE PROFESSIONALS IN CIVIC ENGAGEMENT, IF AT ALL?



Florence Nightingale (1800s) was a strong advocate for her patients, writing thousands of letters about the awful conditions her patients endured.



Dr. Mona Hanna Attisha sounded the alarm on the **Flint Water crisis (2015)**, having discovered thousands of children were being poisoned lead, even after state officials attempted to discredit her.



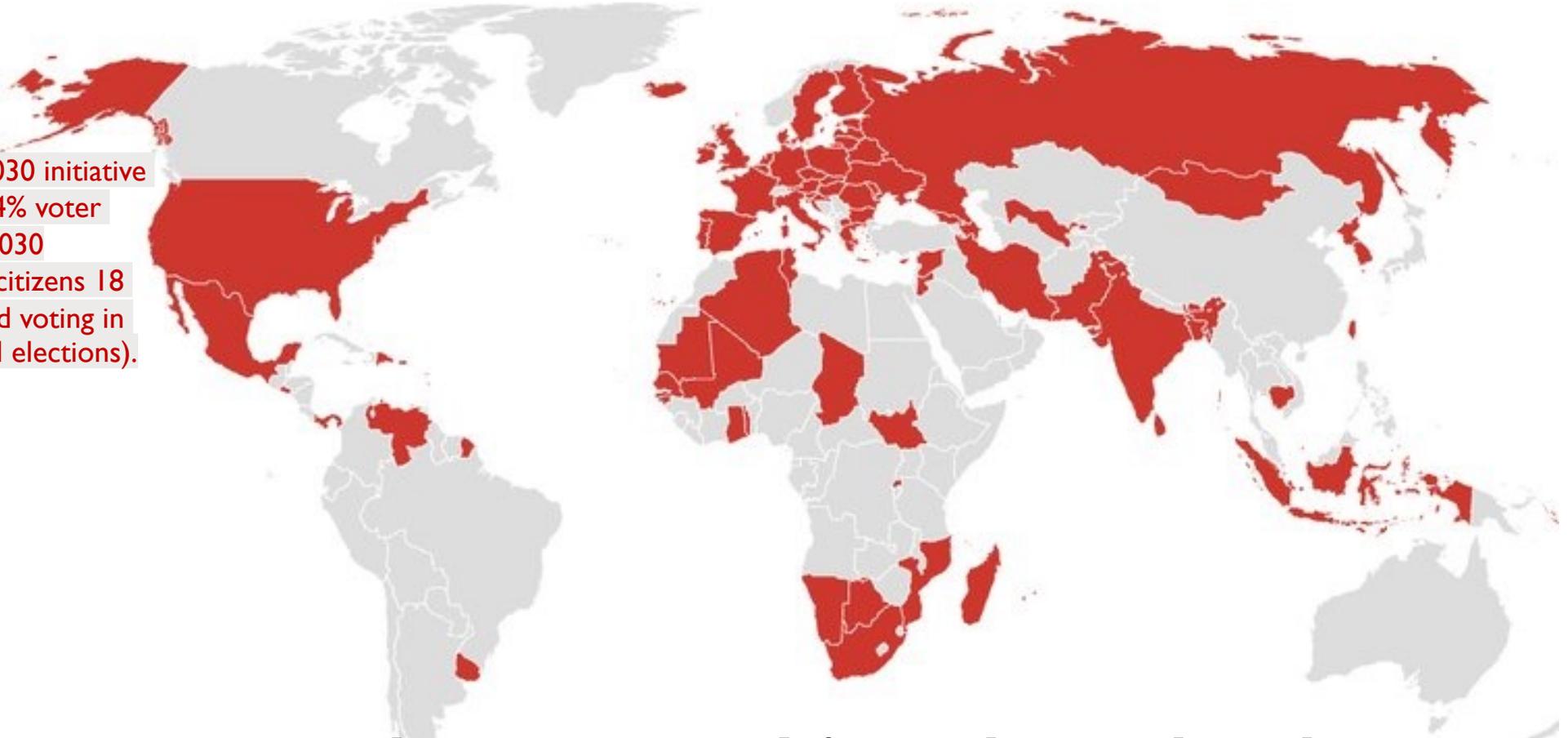
Healthcare workers around the world became advocates for health during the **COVID-19 Pandemic (2020)**, demanding action on vital concerns and needs such as inadequate Personal Protective Equipment (PPE).



In Myanmar (2021), doctors and nurses led the “white coat revolution”, defying the military coup, protesting the systems that did not allow them to prioritize care for their patients.

2024: The Ultimate Election Year Around the World

National elections are scheduled or expected in at least 64 countries, as well as the Europe Union, which all together represent almost half the global population.



The US Healthy People 2030 initiative has set a target of 58.4% voter participation by 2030 (2018 was 53.4% of US citizens 18 years and older reported voting in federal, state, and/or local elections).

"2024 is not just an election year. It's perhaps the election year."



Disruptive Power

The ability to disrupt the status quo, challenge business as usual, and dramatize what's wrong with current conditions.



Narrative Power

The ability to tell the story of what's happening in the world and why, capture the imagination of growing numbers of people, and change mass consciousness and culture.



Political Power

The ability to mobilize voters, elect movement-aligned and responsive representatives in government, and influence legislative agendas at local, state, and national levels.



Economic Power

The ability to redirect resources at the system level—from local to state to national—away from unfavorable policies, programs, or institutions and toward movement-aligned alternatives.



Modeling Power

The ability to build, demonstrate, and promote alternatives to existing institutions, systems, and practices.



Healing Power

The ability to alleviate and repair harm at the level of the individual, community, or society.

Source: The 6 Power Framework was originally produced by Labor Activist, Ai-Jen Poo, and expanded upon later by the Ella Baker Center for Human Rights.

HOW DO WE MAKE CHANGE?



“There is an art to flocking:
staying separate enough not
to crowd each other, aligned
enough to maintain a shared
direction, and cohesive
enough to always move
towards each other“
- adrienne marie brown