



Build Healthy
Places Network

GUIDE TO

RACIAL HEALING

The **REPAIR** Framework for Community-Institution
Solidarity in Racial Healing

Acknowledgments

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Community Innovations for Racial Equity Partners

The Community Innovations for Racial Equity (CIRE) initiative focuses on building local BIPOC-led community development capacity, supporting community power, exploring innovative community ownership models, and addressing the barriers and gaps within community development and health partnerships to effectively propel racial equity.

The following CIRE partners contributed their time, effort, and knowledge through participation in (1) tailored monthly cohort sessions around racial healing, (2) a [Network Commons webinar session in April 2023](#), and (3) individual feedback calls and surveys that helped the Build Healthy Places Network team develop the framework for this tool. You can learn more about each organization throughout this resource.

[African Economic Development Solutions](#) *St. Paul, MN*
[Cihuapactli Collective](#) *Phoenix, AZ*
[Communities First, Inc.](#) *Flint, MI*
[Co-op Dayton](#) *Dayton, OH*
[Miami Workers Center](#) *Miami, FL*
[Power Center Community Development Corporation](#) *Memphis, TN*
[Rise Community Development](#) *St. Louis, MO*
[Sankofa Community Development Corporation](#) *New Orleans, LA*
[Song Community Development Corporation](#) *New Orleans, LA*
[Virginia Community Voice](#) *Richmond, VA*



**Build Healthy
Places Network**

The Build Healthy Places Network is the national center whose mission is to transform the way organizations work together across the health, community development, and finance sectors to advance racial equity, and improve health in neighborhoods across the United States.

buildhealthyplaces.org

The Build Healthy Places Network is a program of the Public Health Institute in Oakland, CA.

INTRODUCTION TO RACIAL HEALING

To understand America's history with race, we need to be open and honest. How did we get here?

History tells us that individuals with power in this country—and the institutions they controlled—worked together to marginalize specific groups of people. The aim was to legally or illegally take away their rights, discriminate against them, and devalue their personhood. This type of racism, built into how a society works, is known as structural racism.

Historically, this unequal distribution of power created and continues to worsen the poor physical, mental, and economic [vital conditions](#) many individuals who are Black, Indigenous, and People of Color (BIPOC) face every day, compared with White Americans. Over the generations, trauma and harm have left their mark on BIPOC communities. Because of this reality, race is linked to people's quality of life.

We believe a way to help solve this inequitable reality is to aim for racial healing. We need to implement ideas and programs that are community-led and involve many different sectors and institutions. We need to rectify past harms done to historically marginalized and under-resourced communities in ways that are both tangible and sustainable.

Whether we realize it or not, [we are all impacted by racism](#). And, in turn, in need of healing. Heather McGhee speaks about [“drained-pool” politics](#), recalling when White-controlled communities closed their public pools entirely instead of desegregating them. The result: No one could enjoy the pool.

Racism heavily contributes to the lack of resources and opportunities for BIPOC communities but also in poor White communities as well. The illogical nature of racism has White people in America [fighting against their own interest](#). Because of racist viewpoints, some White Americans are less likely to [support benefit programs](#) that they might otherwise want to use because of racist viewpoints. Dr. Martin Luther King Jr. [summarized it best](#) when talking about his experience interacting with White prison guards while he was in a Birmingham jail:



“Until we reckon with our compounding moral debts, America will never be whole.”

—TA-NEHISI COATES

“And when those brothers told me what they were earning, I said, “Now, you know what? You ought to be marching with us. [laughter] You're just as poor as Negroes.” And I said, “You are put in the position of supporting your oppressor, because through prejudice and blindness, you fail to see that the same forces that oppress Negroes in American society oppress poor white people. [Yes] ... And all you are living on is the satisfaction of your skin being white, and the drum major instinct of thinking that you are somebody big because you are white. And you're so poor you can't send your children to school. You ought to be out here marching with every one of us every time we have a march.”

Combating racism and addressing its wide-reaching effects on everyone will take solidarity among individuals and institutions. Solidarity allows the pool to remain open. Then, we can acknowledge past and current harms, repair relationships, and heal together.

REPAIR is necessary for belonging. Belonging leads to relationship building and trust. Long-term, these are the foundation upon which health and equity is created and sustained.

The REPAIR framework uses five parts to frame how institutions can implement long-term, sustainable community-institution solidarity for racial healing.

REPAIR FRAMEWORK

Restoration

Prioritize

Accountability

Imagination

Resources



HOW WE DEVELOPED THE REPAIR FRAMEWORK

We set out to explore racial healing with partners across the field. In 2022, we launched the [Community Innovations for Racial Equity \(CIRE\)](#) initiative with support from the W.K. Kellogg Foundation and The Kresge Foundation. CIRE supports 10 BIPOC-led community development corporations (CDCs) across the country to advance racial equity through partnerships with healthcare organizations.

Build Healthy Places Network (BHPN) and our BIPOC-led CDC partners recognize the importance of lifting up and implementing community-led racial healing models, which are essential to the work of racial healing. Together, we offer this framework.

We hope the REPAIR framework amplifies the transformative work already in progress. Our colleagues leading CDCs across the country are looking deeply at the role institutions can play in reconciling past harms. Here, we discuss their approaches to heal the impact of systemic racism by building relationships, trust, and collective community power.

This framework, with questions for institutions in each component, is intended to spur specific, tangible action. Our conversations with groups and individuals doing this work have clearly shown a need for repair, acknowledgment, and healing. Racial healing requires following the lead of marginalized communities: How should repair and, in turn, health and well-being, look and feel? How can institutions listen to the needs of the people they serve?

This can take shape through authentic, long-term partnerships across sectors and between communities and institutions. Forming these partnerships takes intention and solidarity.

We developed the REPAIR framework with our CIRE partners, and we include examples of their field-leading efforts. As we continue to build trust, we are committed to testing this framework and adapting it to meet the needs of leaders in communities interested in pursuing deeper solidarity toward racial healing.



WHY WE NEED COMMUNITY-INSTITUTION SOLIDARITY TO ACHIEVE RACIAL HEALING

To truly engage in racial healing, working separately isn't enough. The effects of racial inequity touch almost every part of our lives, so we need to think about our communities as a whole. This leads to the question: who is responsible for the repair?

Historically marginalized BIPOC communities feel the crushing effects of structural racism first and often hardest. Many White neighborhoods routinely have what they need to thrive: quality housing, parks or green spaces, high-quality schools, medical care, and healthy food options. Communities of color have long faced racist, discriminatory practices in housing. For example, Black Americans endured [redlining](#), [blockbusting](#), [exclusionary racial covenants](#), [contract buying](#), limited access to housing credit, and inequitable business lending practices. Indigenous communities experienced land theft, broken promises/treaties, and limited or inadequate access to public/green spaces, medical care, and education. Communities of color also face increased incarceration rates, which prevent full involvement in society: restricted voting rights, less access to well-paying jobs, and decreased physical and mental health due to time spent in jail/prison. We need to work to permanently heal these emotional and structural wounds.

These inequities result in the [life expectancy](#) of Black Americans being four years lower than White Americans.

The gap is even wider in historically redlined and segregated cities: the difference in life expectancy by zip code can be [measured in decades](#).

Structural racism and racial segregation in housing continue to cause harm. Negative effects include [premature birth rates](#), asthma, cancer, and other environmental exposures. For example, a [National Academy of Sciences](#) study found in 2019 that Black Americans are exposed to 56% more pollution than they produce, and they are 75% more likely than White Americans to live near industrial facilities.

The documented and real trauma felt by BIPOC communities means that institutions find themselves in a difficult situation. Members of these communities continue to feel and express mistrust because of harms these institutions have committed for generations. People in these communities often feel like institutions try to have all the answers and don't want to work with them. And institutions are not always willing to share decision-making power equitably with the people they serve.

In our view, institutions have the opportunity to more effectively partner with BIPOC communities to build trust and, ultimately, solidarity. Now is the moment for institutions to more intentionally work together with marginalized communities and develop a shared vision of racial healing.



WHO CAN USE THIS FRAMEWORK

This framework is for healthcare institution leaders who recognize the harms of racist practices and outcomes in medicine and want to see healthcare systems prioritize health and wellness over profit, step away from the “bottom line,” and share their wealth and power with communities.

This framework is for community development institution leaders who want to combat the history of redlining and create neighborhood spaces that heal.

This framework is for philanthropic institution leaders who want to dismantle paternalistic practices to shift ownership of resources into communities.

This framework is for community leaders to lift up even more stories that help us imagine what community-institution solidarity would look like across the country.

When we acknowledge the impact of racism on every one of us, we see that we all have a role to play in addressing the harms and creating a new future.

BHPN brings together community development, healthcare, philanthropy, government, and other sectors to collaborate on shared problems and solutions. Within each of these sectors, institutions have an opportunity to set the groundwork for healing by naming the harms caused by institutional and systemic racism. Owning those harms is the first step toward redressing them and creating trust between institutions and communities. **We invite you into solidarity across sectors.**

FRAMEWORK FOR CROSS-SECTOR SOLIDARITY IN RACIAL HEALING

The REPAIR framework builds on existing work to center racial healing by shifting power and centering a community vision for health. Our work to uplift opportunities for community-institution solidarity in racial healing does not happen alone.

Many efforts and resources support partnerships to meaningfully and authentically repair past harms. We lean on those resources at the intersection of healthcare and community development to place our efforts in the broader context of racial healing efforts nationwide and globally. For example:

- **Kindred Southern Healing Justice Collective** focuses on cultivating a network centering the wellness and healing of local organizers and movement changemakers in the South.
- **The Fireweed Collective** framework brings together those working in the healing justice space.
- **Enterprise Community Partners** published a [Framework for Healing-Centered Community Development](#) aimed at community development sector leaders who want to apply a healing lens for investment in housing, wealth-building, and neighborhood revitalization initiatives.
- **The W.K. Kellogg Foundation** helped spearhead the [Truth, Racial Healing & Transformation framework](#), including a guidebook and lessons from communities applying the framework to local racial healing efforts.
- Building on these efforts, the **National Collaborative for Health Equity and the de Beaumont Foundation** created resources to support [healing through policy](#), including examples of policies focused on racial healing.
- **Calls for a Truth and Reconciliation Commission** approach to foster racial healing in the United States include [healthcare](#) as a sector that might benefit from this intentional process to foster healing.

Our work honors these racial healing efforts and the lessons they have surfaced across the United States. We build on them by bringing a healing lens specifically to the intersection of sectors and communities. Coupled with this framework, we offer the innovations and visions of our CIRE partners as examples of how we might collectively put the REPAIR framework into action. Finally, we include an actionable tool with questions for institutional leaders who are responsible for equity work, to deepen analysis and actions aimed at racial healing and equity. We invite you to start the process, and make intentional movement over time.

REPAIR FRAMEWORK

Restoration

Cross-sector solidarity for racial healing is **guided by the wisdom of BIPOC leaders to restore dignity, tradition, and relationships.**

Prioritization

Cross-sector solidarity for racial healing **requires clear action, active learning, awareness building, acknowledging harms without delay.**

Accountability

Cross-sector solidarity for racial healing **rests on building trusted relationships over time, resolving conflict, and acting with care.**

Imagination

Cross-sector solidarity for racial healing **centers a sense of hope of what is possible, going beyond the status quo.**

Resources

Cross-sector solidarity for racial healing **demands tangible resources, investments, and power sharing with communities.**

Restoration

Cross-sector solidarity for racial healing is guided by the wisdom of BIPOC leaders to restore dignity, tradition, and relationships.

Restoration may be the most important part of any racial healing approach. BIPOC leaders in our CIRE cohort stress the vital need to restore the dignity and tradition of marginalized people and their communities.

Restoration starts by first acknowledging the varied and systematic ways that racism and inequity pull apart the very fabric of BIPOC life. Marginalized communities continuously face disinvestment and barriers that impact their ability to live their lives to the fullest. This is why the racial wealth gap is seen as a [generational challenge](#). Black families, in particular, have lived for generations with only a fraction of the assets and resources of the average White family in this country.

Restoration requires full investment in the communities impacted by the ills of systemic racism. To accomplish this, institutions need to work across sectors to put racial healing efforts into action, guided by the wisdom of BIPOC leaders and communities. Institutions have an opportunity to work together with communities to restore trust, joy, hope, and traditions that may lay dormant due to the impact and control of racism in their lives.

Once historically disenfranchised communities begin to see material gains in their lives, they may be more willing and able to build their communities that reflect their culture and interests. Ultimately, institutions that invest in racial healing models have a chance to restore the faith that many BIPOC communities lost in them throughout the years due to harm and trauma.

“[Why community development sectors should consider racial healing] Because land, space, and water remember... it has just been waiting for us and other people to do this healing work”

—ENJOLIE LAFAURIE
(CIHUAPACTLI COLLECTIVE)

“By coming together across all sectors, we can restore dignity, traditions, and relationships. There is a collective wisdom and experience within BIPOC communities that grounds us in a shared understanding of injustice, which then leads us to restorative actions.”

—TAP BUI AND MAI TRAN (SONG CDC)

RESTORATION IN ACTION

The [Cihuapactli Collective](#) in Phoenix, Arizona, works “womb to tomb” supporting Indigenous women. The Collective plans to launch a seven-acre healing and wellness center incorporating birth work, land restoration, and food justice efforts and partnerships. The project aims to center traditional and ancestral knowledge and ceremonies, as well as intentional relationships grounded in the land and healing.

[Virginia Community Voice](#) propels community engagement and neighborhood leadership, promoting community voices to shape healthy, vibrant communities. Virginia Community Voice is creating a Southside Healing Hub with community members to prioritize healing the mind, body, and spirit of Richmond, Virginia, a city with racial wounds as old as this nation. The hub will provide communities of color a space to heal, offering rest and renewal for those working to positively transform themselves and the south Richmond community. It will also include offices, space for community-led projects, urban agriculture, and accessible healthcare.

Prioritization

Cross-sector solidarity for racial healing requires clear action, active learning, awareness building, and acknowledging harms without delay.

Institutions involved in racial equity work with communities need to recognize the urgency of racial healing. BIPOC communities across the country, in the CIRE initiative and beyond, continually report how hard it is to convince institutions that racial healing is important for advancing racial equity **right now**.

People in marginalized BIPOC communities can sense when institutions are complacent. They can feel when their needs are not prioritized or heard. Racial healing, like other racial equity work, requires active listening and learning, awareness building, and acknowledgment, plus demonstrable action. BIPOC leaders know the dangers of waiting to address the racial harms and trauma of their communities.

Attempts to convince institutions to commit to this work are also strained by a power imbalance: Institutions hold the power to set priorities and make investment decisions that don't always reflect what is important to communities. Institutions working with BIPOC communities to engage in racial healing have to recognize and overcome this power difference.

“Those close to the issues, understand the issues the best. How are we centering our knowledge on the most marginalized – the people that experience and understand the outputs of these structures and systems?”

–**AMAHA SELASSIE**
(CO-OP DAYTON/T.R.I.B.E.)

Youth listen to a facilitator lead a group discussion at the Uplift Westwood Summer Program in Memphis, TN with Power Center CDC. Organizers promote racial healing by providing a culturally relevant curriculum that prioritizes Harambee - which means “all pull together” where participants engage in a tradition of community self-help and solidarity. (photo credit - Power Center CDC)



PRIORITIZATION IN ACTION

Miami Workers Center in Miami-Dade County, Florida, builds power with working-class tenants, workers, and families through leadership development and grassroots campaigns. Miami Workers Center offers additional resources through its Emergency Operations Center and Sisters in Struggle Mutual Aid programming, which includes trauma-informed peer supports. The Center plans to build a community hub with meeting rooms and wraparound services.

Power Center Community Development Corporation in Memphis, Tennessee, works to prioritize the community's economic, educational, and social needs through sustainable urban development and empowering initiatives. Power Center is working with the community to design a wellness center for residents, with a food market, health services, nutritional training, a gym, affordable housing, and green space

Accountability

Cross-sector solidarity for racial healing rests on building trusted relationships over time, resolving conflict, and acting with care.

Accountability requires institutions to own up to the fact that many BIPOC communities they serve continue to have poor health outcomes and living conditions. It is okay to acknowledge this—it just shows how much more work there is to do.

Institutions that want to work with BIPOC communities to improve lives have to be willing to try radical approaches and take new points of view. The evidence shows that much work remains to be done to eliminate racial disparities in wealth and wellness.

To find the solutions that work, institutions need humility and willingness to not know everything, or even to be wrong. Only then can they work to improve.

Cross-sector solidarity allows institutions and BIPOC communities to build trust and hold institutions accountable for upholding those relationships. BIPOC leaders in the CIRE initiative often note the mistrust present against institutions in their communities. Without trust between communities, CDCs, and institutions, racial healing cannot begin.

Trust building is not easy, but it is necessary. Because of the generations of trauma and harm, it will take time for marginalized communities to allow any institution to share and believe in their long-term vision of healing and restoration.

Sincerity, honesty, and acknowledgement of past harms need to be key components of trust building. Ultimately, the community

will know if institutions are dedicated partners based on their level of care and attention.

This work has to go beyond basic diversity trainings and public statements declaring racism a public health crisis. It requires more than marketing shared values or offering funding with high barriers to entry, controlled by institutional priorities.

Accountability means taking real action toward repairing past harms and creating new, more equitable systems. Cross-sector solidarity requires everyone involved to eventually see, trust, and respect the value in each other. Relationship-building moves at the speed of trust, so this is a core component of the framework around racial healing. When these things happen, people know and feel that they belong. This opens opportunities for shared power and collaboration to move toward racial healing and reconciliation.

“I would invite those that work in institutions to think about this - communities aren’t the problem. They’re a true partner and we need to see them that way. We have to do more than just listen. We have to step aside and let the community lead and that’s how we build and repair trust in communities.”

—DR. ICELA PELAYO (W.K. KELLOGG FOUNDATION)

ACCOUNTABILITY IN ACTION

In Louisiana, **Song CDC** works in and around New Orleans East to pursue the full liberation of BIPOC communities across all intersectional identities. Song CDC is spearheading community engagement, developing affordable senior housing with transportation and services including home healthcare and culturally competent healthcare services, and building workforce development with community members. Song’s model is built around equitable health outcomes and uses the built environment to support seniors aging in place.

Rise Community Development, Inc., in Missouri, focuses on supporting neighborhood revitalization efforts, including housing, community building, and planning support across St. Louis. Rise was selected for the CIRE program to support their efforts in mostly Black communities in the Spanish Lake area of North St. Louis County through housing and multisector engagement to build a sustainable local economy, leverage institutional resources, and limit gentrification and displacement. Ultimately these efforts aim to ensure that wealth is created and equally distributed and prioritized for community members.



Imagination

Cross-sector solidarity for racial healing centers a sense of hope of what is possible, going beyond the status quo.

Marginalized communities are often left to imagine alone. And, even if they develop new ideas about how their communities could look and feel with sustained investment and care, they are used to institutions and government entities protecting the status quo through disinvestment and an overall lack of imagination.

Racial healing requires radical change. Institutions need to create space with communities to imagine how they can work together to build a future of racial equity and belonging. This cross-sector solidarity and collaboration requires institutions to share power and decision-making directly with communities building hope for the future.

To increase trust, organizations need to listen to the voices of marginalized communities. Invite community members into the conversation, and hear their voice and imagination. Co-create spaces to imagine the possibilities. Then, make changes and take action aligned with their vision.

Cross-sector solidarity centers marginalized voices to imagine what a community’s potential could be if we listened to everyone, regardless of social status. There is power in developing new ideas for the future.

“In order to heal generational cultural trauma, individual and collective, and how it presents in white bodies, BIPOC bodies of color, and in society as cultural norms, we must balance the capacity to see the hard truths and metabolize the energy of suffering that white male supremacy culture has caused and continues to cause, with the hopeful vision of the more beautiful world that we wish to create for our children’s children’s children where all people are truly safe, seen, heard, dignified, honored, cherished, nourished, and protected.”

—AMY REBEKAH CHAVEZ (T.R.I.B.E.)

IMAGINATION IN ACTION

African Economic Development Solutions (AEDS) builds wealth and community well-being for African communities in the Twin Cities metropolitan area, through business lending, entrepreneurship, housing, and community building. AEDS purchased a vacant building in the Little Africa district and is securing capital to redevelop it into a retail and cultural asset called the Little Africa Plaza. The project will house a pan-African grocery store, retail spaces for small cultural businesses, AEDS offices, and the nation’s first community-owned pan-African cultural museum.

The **Trauma & Resilience-Informed Birth Education Collective (T.R.I.B.E.)**, part of Co-op Dayton in Ohio, brings together interdisciplinary perinatal and parenting support professionals from a range of backgrounds, dedicated to offering trauma-informed and healing-centered care to transform the culture of birth and parenting in their communities.



Resources

Cross-sector solidarity for racial healing demands tangible resources, investments, and power sharing with communities.

Overall, institutions must make a fundamental shift in how they work with communities to support their needs. To improve life outcomes, institutions have to work with marginalized BIPOC communities to provide tangible, long-lasting financial resources.

Structural racism has shaped how neighborhoods look and operate. Healing means countering centuries of disinvestment and associated inequities. This requires investing in a built environment envisioned and created by communities. To craft a new direction for neighborhood investments, institutions need to share power and resources with communities.

Healthcare institutions, specifically, hold important resources to invest in healthy communities, such as land holdings, political clout, local hiring and purchasing power, community benefit grants, and investment dollars. Shifting these resources into community ownership is a critical step toward reconciling past harms and repairing the damage of racism.

Increasing investments to repair past harms and support the innovative visions of health led by BIPOC communities will help institutions build solidarity with BIPOC leaders, community development organizations, and local organizers.

Institutions can take a range of actions:

- Directing financial resources to BIPOC communities
- Making long-term investments in BIPOC communities
- Dedicating resources for community-owned assets
- Investing time and capacity to build meaningful relationships
- Choosing to share power and decision-making with BIPOC community members

“As fundraisers for a community engagement organization, we see that right now there are still too many barriers between the people working to heal the wounds of racism and the people controlling power and resources. Institutional funders, particularly those in the public sector, need to examine and reevaluate their practices for funding racial healing work, if that is actually what they intend to do. Ask us which practices do not feel healthy, supportive and generative. And then actually change those harmful practices.”

—BEKAH KENDRICK, LEA WHITEHURST-GIBSON, PEACE BOWLES, AND VERONICA REID (VIRGINIA COMMUNITY VOICE)

Institutions must fundamentally shift how they work with BIPOC communities. They need to set up practices and policies for residents to drive priority setting, governance, and ownership of community assets (land, funding, policy platforms, and others). They also need to regularly ask marginalized communities what investments would center community healing, and then invest in those efforts.

RESOURCES IN ACTION

Communities First, Inc. (CFI), in Flint, Michigan, advances affordable housing, economic development, and community well-being. CFI is launching a community enrichment center featuring large and small auditoriums, a learning lab, a childcare center, flexible meeting spaces, leasable offices, a gymnasium, a dance room, classrooms, and a commercial community kitchen.

Sankofa Community Development Corporation Sankofa builds health, justice, and community-rooted initiatives in New Orleans’ Lower Ninth Ward. Sankofa is spearheading a community-owned land trust and holistic revitalization and sustainable economic development efforts at a neighborhood level. This effort builds on work to establish a community produce hall and learning kitchen, a wetland park and nature trail, the Lower Ninth Ward Main Street program, and a community health ambassadors program.

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A PATHWAY TO TEST THE FRAMEWORK

Racial healing is not easy work, but it is necessary. It involves truth telling, surfacing and holding the harms of the past.

We may find ourselves and our organizations uncomfortable at times. Still, we have to take risks and build new capacities, skills, processes, and strategies over time. The results have great potential to change inequitable systems and create more equitable communities where people can thrive.

BUILDING SOLIDARITY TOWARD RACIAL HEALING

Restoration

1. How has your organization clearly named and acknowledged past and present harms toward BIPOC communities? How will you continue to name and acknowledge harms?
2. How has your organization stated publicly and internally why racial equity matters to your work and the BIPOC communities you serve? How has your organization publicly committed to advancing racial equity in actionable and visible ways?
3. How has your organization gone beyond surface-level approaches and trainings to build institutional support for deeper commitments to racial healing? What is needed within your institution to build the case for deeper commitments to racial healing in partnership with communities?
4. In what ways have you invited BIPOC leaders to include their wisdom in the co-creation of your institution's racial healing efforts? How will you continue to do this in the future?

Prioritization

1. What would it take to prioritize racial healing within your institution and accelerate partnerships with BIPOC communities?
2. What capacity are you building within your institution—both among individuals and at the organizational policy level—to expand the discussion, prioritize racial healing, and seek tools to apply a racial equity lens to your work?
3. Where are your internal processes delaying or denying access to community-rooted cooperation that would further more equitable aims?
4. What commitments can you make now to demonstrate your intention to act in partnership with BIPOC communities? What about over the next six months?

RACIAL HEALING

Accountability

1. How do you plan to assess and evaluate actions to eliminate racial disparities in health/economic outcomes in the BIPOC communities you serve? What data/metrics do you collect to demonstrate trust and relationship strengths with BIPOC communities?
2. What accountability measures does your organization have in place to ensure that you are listening, engaging, and partnering in the ways that BIPOC communities need?
3. How do you invite BIPOC community members into the data analysis process? After the data is analyzed, how do you share the information with BIPOC community members? How can community leaders and organizations use the data to effectively advocate for change and a vision for health?
4. In what ways do you work collaboratively with BIPOC communities to set racial healing and health equity goals? How are BIPOC communities involved in defining what the success of a partnership with your institution looks like? What is your role in achieving that success?

Imagination

1. How can your organization actively support, create space for, and uplift a vision of healing and health that is created and led by local BIPOC communities for their neighborhoods?
2. How can your organization respond to, promote, and honor the community-led vision for healthy neighborhoods? How can your institution influence other organizations to do the same?
3. How do local community leaders frame what it will take to achieve racial healing? What roles do community leaders want organizations to take in deepening racial healing? If you don't know, how will you find out?
4. How might BIPOC communities define success of a partnership and envision your institution's role in achieving it? Whose voices still need to be heard and invited into the conversation?

Resources

1. How have you centered BIPOC community priorities and ideas in designing and making investments to create thriving neighborhoods?
2. What specific resources and assets held by your institution might be positioned for community ownership or collaborative, participatory action with community partners?
3. What are five ways your organization can create, expand, and sustain meaningful investments at a neighborhood level, beyond a project-by-project approach?
4. What are five ways your organization can share power and decision-making with BIPOC communities?
5. What are three specific, intentional ways that you can work with BIPOC community leaders to transform institutional policies on investments, funding, data, and other assets?



Build Healthy Places Network

BHPN and our CIRE partners invite you and your organization to start or enhance your own racial healing process. This framework is a work in progress, and we welcome the opportunity to learn from your experience.

Please get in touch with us to contribute to our collective learning at info@buildhealthyplaces.org.