



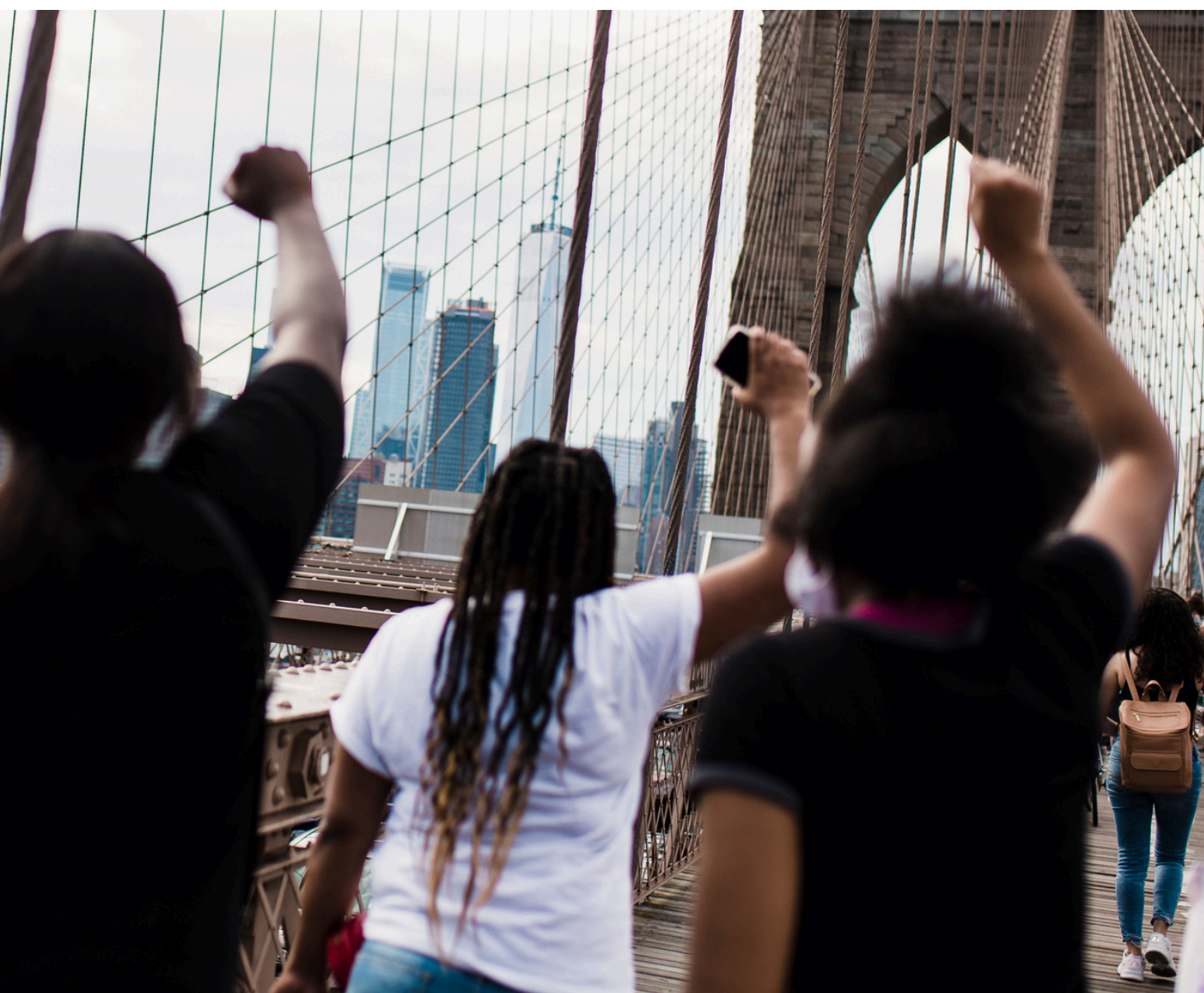
BLACK WOMEN AND FEMMES HEALTH PROJECT

Interview Highlights

Our team interviewed **15** leaders from the **health organization**, **philanthropic**, and **policy** sectors that impact the health of Black women and femmes in Allegheny County, Pennsylvania. Leaders discussed the following six topic areas.

1. Defining Health Equity

- Definitions of health equity were limited but discussions around this term are present at these institutions.
- Leaders mentioned fairness, access to resources, education, awareness, social determinants of health, increasing Black representation, and maternal & child health outcomes when talking about their institution's perceptions of health equity.



2. Discussions of Systemic Racism

- Leaders acknowledged the impact of structural racism in the region and the need for long-term strategies.
- Some philanthropic leaders recognize that many forms of institutional research and investments fail to support individuals oppressed by these systems.
- Health organizations emphasized using data and implementing policies and practices related to training; however, timelines and measurable goals were unclear.

3. Planning

- Leaders at large hospital systems discussed organizational plans to use existing data and community partnerships to develop effective strategies to build trust, increase access, and reduce adverse maternal outcomes.
- University leadership shared efforts to increase the racial diversity and representativeness of faculty and the student population.
- Policymakers commented that planning is often lost in the partisan divide and uncertain timelines make collaborating difficult.



4. Partnerships

- Leaders described partnerships with Black-led organizations and large institutions centered around racial equity. Healthy Start Inc., the Racial Equity Institute (REI), Take Action Advocacy Group (formally called Take Action Mon Valley), and Macedonia FACE were explicitly referenced.
- In some organizations, Black women-led organizations are being added to advisory committees, and Black women are sometimes brought in as consultants.



5. Accountability and Resources

- Leaders from large healthcare systems acknowledged that organizations discuss accountability measures, but were unable to speak beyond increasing racial diversity in hiring.
- University leadership expressed that efforts were still in the planning stage, but included using an equity lens to decide how resources are invested.
- A leader in philanthropic funding expressed that research and investments to address systemic issues were taking place. Still, there continues to be a white supremacist approach that continues to cause harm.



6. Focus on Black Women & Femmes

- A hospital system leader commented that they are not targeting Black women and femmes directly, but all whom they believe are not being treated equitably.
- Policymakers noted that there is little to no focus on Black women and femmes in legislative bodies, but they are working on policies that impact this population. This includes sick leave, pay equity, environmental racism, health insurance, minimum wage, and mental health care.
- In legislative environments, if discussions concerning the well-being of Black women and femmes occur, they are often led by Black female legislators.



University of Pittsburgh team members and a community-based consulting firm conducted all interviews from November 2021 to March 2022.

This work was done in partnership with the following organizations:



Developed by: Adoadaji L, Hall-Russell C, Edmunds-Hunt E, Lusardi E, Smalls M, Scott J, Méndez DD (September 2024)