



## Inclusive, just communities

<b>Idea 11</b>	Build our capacity to bridge our differences with those who are not similar
<b>Proposal 11c</b>	Create approaches/systems/models that respect different ways of knowing and traditional modes of healing
<b>Description</b>	Recognize and <b>create approaches/systems/models that respect different ways of knowing and traditional modes of healing.</b> Remove gatekeeping from providing healing or healthcare so that people with direct and lived experience of a culture are healing and leading. Value different modes of learning and alternative career paths. Work from human to human, with respect for others' cultures. Create more culturally diverse treatment options. Question some of the assumptions within American biomedicine and a one-size-fits-all approach—especially within mental health, where cultural understanding is especially important. Provide people with options, matching people to counselors with whom they are comfortable.
<b>How will the proposed action advance equitable health and well-being?</b>	Bridging culture and relationships in systems will enable people to be truly healthy. Disenfranchisement leads to adverse health effects (i.e., people hesitant to take COVID vaccine because of Tuskegee). The vaccine shines a spotlight on mistrust that pervades the system and could be healed with better cultural understanding and relationship building.
<b>Is there work we can build on?</b>	Community Health Worker models FQHC models Inter-generational peer counseling models: Census
<b>Who would have to act? Who would be key partners?</b>	A diversity of voices would be required to design any programs. Medical Schools would need to add cultural healing and history to their curricula Local community physicians who trusted in their community are needed to counter dis- and mis-information Local tribal leadership, community connectors, and “unordained” influencers in community
<b>A few high-level action steps</b>	<ol style="list-style-type: none"> <li>1. Ensure diversity in the communicators at national levels. Doctors and scientists out talking to the public need to look like the American people. Create culturally-relevant, engaging materials that counter mis-information and distrust of science.</li> </ol>



	<ol style="list-style-type: none"><li>2. Focus community-building at the grassroots, local levels. Create venues to discuss and acknowledge historical injustices. Invest in existing community structures. Build bridges and relationships with local community leader, including tribal leaders and faith leaders.</li><li>3. Create a customizable toolkit that can be used widely.</li></ol>
<p><b>Other comments or guidance</b></p>	<p>Disability is an intersectional concept among all people. Disability justice bridges races and “isms.”</p> <p>There has to be truth telling in order for trust to happen. The massive injustices of the past (Tuskegee, immigrant camps) have to be acknowledged before we can move forward; we must surface historical pieces to the table and reckon with them. You have to go through the hurt to start to build trust. Don’t underestimate what it’ll take to address and heal historical trauma so that there is greater trust and receptivity to, for example, the COVID vaccine. Consider highlighting it as an intersectional social justice issue. How might incentives factor in?</p>