A community is the place where we live, work, and play. It serves as the bedrock of health, shaping lives and behaviors, and as the foundation for achieving important goals and building a productive society. Many communities in the United States face significant challenges—such as high rates of poverty, high unemployment, and substandard school conditions. This lack of opportunity is particularly evident in the disparities that exist in health status and outcomes between different zip codes or census tracts.

To address the underlying conditions and root causes of health inequities, new partners in education, housing, public health, faith organizations, business, and beyond are joining forces with community members to promote health equity.

The work done to improve high school graduation rates, or access to transit, or more affordable housing options works to improve a community’s health. So whether health is the ultimate goal or the means to an end, communities can benefit by pursuing health equity.

Faith-based organizations are often deeply invested and engaged in equity work in their communities.

**How can faith-based organizations promote health equity?**

**Why Faith-Based Organizations?**

- For many communities, faith organizations represent credible and caring members in which the community has confidence.

- In almost all faith organizations, a critical call to provide service for those in need and those most vulnerable is integral to their doctrines of faith.

- Faith organizations are already on the front lines where community issues are first identified at a point when they can be resolved.

- Faith organizations are a key partner in advocating for and developing or providing health care services as well as addressing the social determinants of health.

**Community Organizing**

Faith-based organizations can cultivate three important elements of community organizing to guide their health equity activities. (These are from ISAIAH’s mechanisms of change—learn more on the back of this page.)

1. **Grassroots leadership development**
   This can be thought of as the “invisible work” in neighborhood settings that often drives community organizing.

2. **Democratic, accountable, sustainable, community-driven organizations**
   This includes participants who are exercising democracy with each other and creating meaningful partnerships.

3. **Building power to act**
   This involves the collective and community responsibility to negotiate for the power and resources needed to achieve goals and drive change.
Examples of Action

ISAIAH

As part of the PICO Network, ISAIAH is an organization that acts as a vehicle for congregations, clergy, and people of faith to act collectively toward racial and economic equity in the state of Minnesota. ISAIAH believes that leadership development unites and allows people to take powerful steps to improve the quality of their community. ISAIAH’s mechanisms of change include the three components of community organizing (see page 1 of this brief).

ISAIAH’s multi-sectoral efforts target multiple determinants of health shown in the model at right, including education, employment, health systems and services, housing, income and wealth, the physical and social environments, and transportation. Among ISAIAH’s activities aimed at income and wealth are health impact assessments related to the impact of “pinklining” on the wealth and future of women, the need for payday loan reforms, and organizing for paid family leave.

The work on paid family leave policy has resulted in many positive outcomes for communities in Minnesota. ISAIAH’s organizing contributed to the introduction of paid family leave legislation, a fiscal and implementation study on the policy, and paid leave granted to state employees, with other cities following suit. Importantly, the work also catalyzed coalitions and campaigns to advocate for paid leave and put it on the election agenda in 2016.

IndyCAN

IndyCAN is a multiracial, nonpartisan organization in central Indiana that catalyzes marginalized people and faith communities to act collectively for racial and economic equity. IndyCAN seeks to achieve its vision of “Opportunity for All” by building the power of traditionally excluded communities through leadership development, amplifying the prophetic voice, awakening the electorate, and creating strategic partnerships that reshape the environment to advance regional, state, and national policy campaigns. The organization seeks to improve many of the social determinants of health to achieve its mission of equity.

Conclusion

Faith-based organizations are a key partner in promoting health equity in communities. Working to tackle unemployment, concentrated poverty, and school dropout rates can seem overwhelming to communities, but when actors in the community—residents, businesses, state and local government, and other local institutions such as faith organizations—work together across multiple sectors, communities have the power to change the narrative and promote health equity through enduring community-driven interventions.