EMPOWERMENT THEORY AND PRACTICE

An empowered organization is one in which individuals have the knowledge, skill, desire, and opportunity to personally succeed in a way that leads to collective organizational success." - Stephen Covey

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Connection to the Lens

Working in a way that promotes the empowerment of individuals, organizations and communities most affected by inequities is a practical method for achieving health equity. The Equity & Empowerment Lens (E & E Lens) itself uses and integrates empowering strategies for employees and community members leading to more diverse representation in the resulting recommendations, and most importantly, the inclusion of community voice most affected by inequities. A key resource for the Moving into Action section is the Empowerment Assessment Tool (see Appendix D) that provides concrete examples of empowering strategies to integrate into recommendations.

We can create empowering strategies simply by improving our individual interactions with one another and consciously activating an equity-based inquiry within our thinking. Ask yourself, how can we avoid hierarchy that creates oppression? (See Concept Paper on *Hierarchy and Root Causes*) How can we be more culturally humble in how we approach and partner with communities of color, immigrants, and refugees? Individual actions make up the relationships that contribute to the strength, resiliency, and effectiveness of organizations.

Background and Basics

Over the last 30 years, it has become increasingly clear that persistent variance in the health status of different communities are the result of environmental, social, and economic conditions. A number of public health researchers have proposed

that the common thread running through all these adverse social conditions is powerlessness. On average, in any relationship between two groups of people, those who have more control and power have better health, while those who have less control and power (vis à vis the other group) have worse health. If powerlessness is the root cause of health inequities, then it follows that the solution is empowerment.

The idea and practice of empowerment grew out of the work of community organizers such as Saul Alinsky, who proposed that oppressed people needed to build "power coalitions" to counter-balance the power of institutions. Although Alinsky focused mostly on governmental institutions, empowerment theory and practice applies to all types of institutions and structures. Many civil rights, international solidarity, and other transformative social movements around the world have worked to eliminate unjust power structures (see Concept Paper on *Hierarchy and Root Causes*) Similarly, much of the current equity work focuses on examining and eliminating the root causes of inequity.

The concept of empowerment entered the social sciences fields via community psychology in the 1980s. Empowerment was introduced as an alternative to the paternalistic philosophy and practice that had guided social services since the nineteenth century. Subsequently, the concept has been used within occupational and stress research and public health.

In the media and in public discourse, the term "empowerment" is often misused to refer to purely individual-level changes, or to imply that one person can "empower" another. In public health, on the other hand, empowerment is viewed as "a process of promoting participation of people, organizations, and communities towards the goal of increased individual and community control, political efficacy, improved quality of community life and social justice" (Wallerstein, 1992, p. 197-205). In public health, empowerment is something you do for yourself with your community, although outsiders to a given community can play a role in creating the environmental and institutional conditions where empowerment becomes more possible. Empowerment is both a process and an outcome.

This Lens is different from other equity lens in that it explicitly addresses the connection between equity and empowerment. Equity is an ideal, a goal. Community empowerment (to distinguish it from individual empowerment) is the vehicle for achieving equity in process and outcome (Wiggins, Johnson, Farquhar, Michael, Rios & López, 2009).

The word "empowerment" can be threatening, since it may suggest that some people will have to give up power so that others can have more. In some cases this will be true. But the concept of empowerment as used here is based on the idea that power is not a finite commodity.

There is enough to go around, as long as some people don't take too much. Ron Labonte has called empowerment a "fascinating dynamic of power given and taken all at once, a dialectical dance . . ." (Bernstein, Wallerstein, Braithwaite, Gutierrez, Labonte & Zimmerman, 1994, p.285)

How can we create conditions in our organizations that promote the empowerment of individuals and communities? One way is to begin thinking about power as something we exercise with others, rather than over others. Hierarchy serves the function of maintaining organization within our structures (See Concept Paper on *Hierarchy and Root Causes*). However, when the 'power over' orientation leads to unfair and unjust policies and practices, we need to reset and reprogram our organizations using 'power with' actions and processes. In order to actualize equity, empowerment needs to occur at three levels (individual, organization and community). If we only focus on individual empowerment (by, for example, building a client's skills to advocate for a particular issue), the outcome will be increased self-efficacy for that individual. However, when we support the empowerment of groups and communities, we move more systemically towards equity. The underlying conditions that cause health inequities won't change unless empowerment occurs at all three levels.

Practicing cultural humility and using culturally responsive communication strategies are two ways to support empowerment at the individual level. Cultural humility is vital to identifying and eliminating social injustices, and is defined as maintaining a lifelong commitment to self-reflection and openness to learning, focusing on understanding one's own assumptions and beliefs in practice (Tervalon & Murray-Garcia, 1998). Culturally responsive communication recognizes and values multiple identities, ways of being, and communication styles. One strategy to strengthen organizational empowerment is to authentically engage employees who experience inequities in the organization's decision-making processes. Organizational empowerment can be either vertical (increasing democratic processes within the organization) or horizontal (increasing the organization's empowerment through the support of other organizations). At the community level, promoting empowerment means building capacity within communities. Public agencies can do this by providing information, acting as a convener to bring community groups together with other organizations (such as universities), using and teaching empowering strategies (such as popular education), and building skills and leadership within communities (for example, by training Community Health Workers).

Recommendations for Lens Implementation and Application from an Empowerment Perspective

• When applying the Equity and Empowerment Lens (E & E Lens), it is important to "walk our talk" around empowerment. This means involving people most affected by racial/ethnic and

other inequities and using practices that promote trust and safety, so that all participants feel comfortable sharing their perspectives and opinions.

- Create conditions that promote participation by a wide range of people. This may mean reducing workloads; providing childcare, interpretation, and/or transportation; and using culturally responsive frameworks and communication styles.

- On an on-going basis, seek to determine whether or not staff and community members feel valued, respected and included in decision-making. Surveys, focus groups, and employee-supervisor meetings are just a few ways to obtain this input.

- Utilize The Empowerment Assessment Tool (Appendix 4) to help promote empowering behaviors and processess in an explicit way.

Individual Reflection Questions

- Empowerment begins in our one-on-one interactions. Thinking about our interactions with community partners, we can ask ourselves a series of questions:
  - How can I avoid hierarchy that creates oppression? (See Concept Paper on *Hierarchy and Root Causes*)
  - How can I approach and partner with communities of color, immigrants, and refugees in ways that reflect cultural humility?

- Individual actions shape relationships that contribute to the strength, resiliency, and effectiveness of organizations. Consider:
  - What are the implications of acting in a hierarchical or disempowering fashion on the quality of your partnerships?
  - Every time you sit with a co-worker, think about the implications of your interaction considering your position in the hierarchy, and what you need to do in order to avoid oppression. *Know that it is possible that the answers to your question may not match the answers of the person with whom you are interacting.*
  - Ask yourself: What barriers to empowerment exist in your organization or community, especially as they relate to the exclusion and unjust treatment of racial and ethnic communities?
  - How can you eliminate these barriers?