Principles for Addressing Structural Racism Through Public Policy Advocacy



The AHA has developed a set of principles to guide its advocacy and help to provide a roadmap for successful policy agendas focused on mitigating structural racism.



Equity-First Lens ①

Public policy advocacy should be advanced with a lens toward equity, recognizing the complex interaction between intersecting identities (with respect to race, ethnicity, class, gender expression, sexual orientation, etc.) and social determinants of health.



Life Course Approach 4

Public policies to address structural racism should be developed with a life course approach, considering the cumulative influence of social and environmental factors on health and well-being and the critical, intergenerational transition stages where intervention may be most impactful.

Powerful Partnerships ②

To eliminate the impact of structural racism on economic, social, and health inequities, powerful partnerships within communities and across sectors and disciplines must be cultivated and maintained.



Mechanisms to Measure Success 5

Effort should be made to support the development of well-defined goals, indicators and data sources that promote accountability and facilitate the ability to adjudicate the success of policies and the organization's role in its successful adoption and implementation.



Adaptable, Sustainable, and Scalable Frameworks 3

Advocates should prioritize policies that are flexible, adaptable, and scalable.

Prioritize *Lived* Experience **6**

Individuals with lived experience navigating structural racism have valuable insight that can inform the development of inclusive, culturally appropriate policies and interventions that respond effectively and authentically to the needs of communities.

Mechanisms to engage those with lived experience - particularly patients, communities and even colleagues from historically excluded or underrepresented racial and ethnic backgrounds - and incorporate lived experience into decision making around advocacy activities should be developed, implemented, and sustained. However, addressing structural racism and championing health equity should not solely be the responsibility of those individuals or groups with lived experience;

everyone must be involved.