DIVERSITY, EQUITY AND INCLUSION STRATEGY

EMPOWERING YOUNG PEOPLE TO MAKE HEALTHY DECISIONS
DEAR FRIENDS,

When I joined Peer Health Exchange in 2014, I had the exciting and daunting task of building out the organization’s first Talent team. Coming into a still predominantly white organization, I saw both the challenge and potential of where we could go with a stronger focus on diversity, equity, and inclusion work.

We made strong, early progress on building systems and practices to support our staff. From hiring and retaining folx of color to building inclusive talent systems to bolstering our approach to competitive, equity-based total compensation, I feel proud of how much Peer Health Exchange has changed. Now, as an organization predominantly staffed by people of color, we look ahead to building an organization where a young person we serve could one day see themselves thriving here as an employee.

As Louise shares, we’ve also made important progress on who shows up in classrooms. Our curriculum is now more inclusive and culturally appropriate. We’re building ways to listen directly to young people to deliver even more on impact.

As we look forward to our next phase of growth, our focus is to build on where we’ve been successful while learning from our missteps and improving on them. You are seeing our ambitious plan to shift our organization—by December 2020—to one that fully operates from an equity lens and centers the voices of our core stakeholders—high school students and college student facilitators.

This equity strategy takes us from good to great in work that is important. And we know we can’t do this work alone. To make our vision a reality for young people, we all must play a part. We’re ready to catapult into this next phase of Peer Health Exchange—will you join us?
DEAR FRIENDS,

Peer Health Exchange began as a pilot program in 1999 when a New Haven public school teacher asked Yale college students to fill the gap for health education in his under-resourced school. As a founding college student health facilitator, I saw firsthand the power of young people showing up for other young people on critical health issues. Together, we were able to begin empowering young people with the knowledge, skills, and resources they need to make healthy decisions.

When I co-founded Peer Health Exchange in 2003, my goal was to build on the early promise of this near peer model and partner with other communities to meet their needs. But in the early years of Peer Health Exchange I recruited too many college students and staff who looked like me—white women—and not enough Black and Latinx college students who shared the backgrounds of the young people we served. Not only did that mean we were not getting the best, most diverse talent, but it also meant that we weren’t showing up for young people to the full extent we could.

With that clearly in our minds and goals, over the last five years, we’ve worked hard to close this distance at every level of our work, starting with our college health facilitators and staff.

Today, a majority of Peer Health Exchange college students identify as people of color, and 37 percent share the racial and ethnic identities and backgrounds of the young people they serve. Led by Tina Enagbare, our Vice President of Talent and Equity, and our senior leadership team, we have seen great progress in representation among our staff across race and socio-economic background. Now, a growing number of our staff started with us as college student facilitators. And 98 percent of our team feels like Peer Health Exchange is a supportive and inclusive place to work.

I am humbled by the mistakes I’ve made and learned a lot from those and our successes, too. This equity strategy calls us to action at the next level. If we can deliver, we will show up more, better for young people.
EMPOWERING YOUNG PEOPLE TO MAKE HEALTHY DECISIONS

PEER HEALTH EXCHANGE’S MISSION IS TO EMPOWER YOUNG PEOPLE WITH THE KNOWLEDGE, SKILLS, AND RESOURCES TO MAKE HEALTHY DECISIONS. WE DO THIS BY TRAINING COLLEGE STUDENTS TO PROVIDE A SKILLS-BASED HEALTH CURRICULUM IN UNDER-RESOURCED HIGH SCHOOLS ACROSS THE COUNTRY.

Since 2003, we’ve served more than 150,000 high school students with quality health workshops facilitated by more than 15,000 college students in public high schools across Boston, Chicago, Los Angeles, New York City, the San Francisco Bay Area, and Washington, D.C. Peer Health Exchange is developing and implementing new models to sustainably reach many more young people. Within the last year, we have secured partnerships in four new communities: Dallas, Denver, Detroit, and Stockton through our college affiliate model.
WHY HEALTH EQUITY IS IMPORTANT TO US

SYSTEMS OF OPPRESSION JEOPARDIZE YOUNG PEOPLE’S HEALTH.

Young people of color, queer and trans young people, genderqueer young people and young women, young people from low-income socio-economic backgrounds or with different abilities, and especially those at the intersection of these identities often don’t get to access the health knowledge and resources that they need and deserve.¹

Because of this, they experience worse health and life outcomes in many different ways.

This is not fair, and it is not right. It endangers young people and threatens their futures, damages families and communities, and makes us all less healthy and prosperous overall.

¹To learn more about our commitment to health equity, visit: www.peerhealthexchange.org/equity

EMPOWERING YOUNG PEOPLE TO MAKE HEALTHY DECISIONS
OUR EQUITY STRATEGY

BY THE END OF 2020 OUR GOAL IS TO CENTER EQUITY IN EVERY ROLE AND AT EVERY LEVEL WITHIN OUR ORGANIZATION. WE’VE IDENTIFIED THE FOLLOWING PRIORITIES AND INTENDED OUTCOMES:

1. **REFLECT THE DEMOGRAPHICS OF THE COMMUNITIES WE SERVE.**
   We’re working hard to be a place where high school students see themselves in the college student health facilitators that enter their classrooms. Peer Health Exchange will recruit and retain more Black and Latinx health facilitators, senior leadership, and board members to achieve equitable representation. We will also explore the role this plays with funders.

2. **EQUIP STAFF, BOARD, AND HEALTH FACILITATORS WITH THE KNOWLEDGE, SKILLS AND RESOURCES THEY NEED TO TURN OUR VISION INTO REALITY.**
   Building upon our Diversity, Equity and Inclusion (DEI) competencies, each person at Peer Health Exchange will have what they need to strengthen their DEI fluency.

3. **DEVELOP SHORT-LIST OF ORGANIZATIONAL FOCUS AREAS FOR OUR NEXT STRATEGIC PLAN.**
   Center and strengthen the voices, perspectives and feedback of young people—ninth-graders, college students, and their communities—in our curriculum-design, programming, and impact.

4. **DEFINE EQUITY-CENTERED BEHAVIOR AND HOLD EVERY MANAGER ACCOUNTABLE TO IT.**
   Leveraging our collective strengths, we will cultivate a workplace where every one has access to professional growth and leadership and feels a values-aligned sense of belonging.

5. **IMPROVE ACCOUNTABILITY AND COLLABORATION AMONG SENIOR LEADERS, MANAGERS AND STAFF.**
   Deepening our full team effort—from the board level to each employee—we will achieve greater alignment and transparency around organizational and individual DEI goals, objectives, plans and actions.
JOIN US IN ADVANCING DIVERSITY, EQUITY, AND INCLUSION

HERE ARE JUST A FEW WAYS TO PARTNER IN SERVICE TO THE COMMUNITIES WE ALL SERVE:

- Center and elevate the voices of young people and underrepresented communities, especially those at the intersection of identities.
- Reflect on where diversity, equity, and inclusion does not show up in your organization. Work with those impacted to develop a plan to elevate these efforts.
- Partner with us to hear our successes and lessons learned along the way. Share your lessons learned with us and other organizations.
- Refer diverse talent to all our people-powered work—college students, staff, board, funders—so we can continue to bring our very best to the young people we serve.

ACKNOWLEDGEMENTS

- Our phenomenal Peer Health Exchange team past and present! Thank you for making it possible for us to live our mission in service of young people. The work that we engage in is challenging and personal for many of us, thank you for your commitment, your critiques, your honesty, and desire for us to be a stronger organization for young people.

- Our friends at Mama J Love Consulting and The Collective who partnered with us to build this strategy.
- Our partners in this work whose publications and reports have continued to inspire and guide us in the right direction (not an exhaustive list):
  - Race to Lead
  - ProInspire’s Equity in Center publication
  - Koya Leadership Partners - From Intention to Action and The Governance Gap reports
Nailah, 22

“Representation is key. I want the students to see themselves in me!”

#WhyIPHE