



Strategic Plan 2021-23

Reimagining Child Well-Being:

Harnessing the Power of Partnership to Achieve Child Health Equity in California



Our Core Beliefs

- 1 A child is a child.** Regardless of their race, ethnicity or place of birth, all children have equal value and potential. All children require our greatest efforts to expand the resources and opportunities they need to reach their full potential.
- 2 Dismantling systemic racism is a necessity for children to thrive.** Disrupting cultural norms and values rooted in white supremacy will lead to our collective well-being. In taking a targeted universalism approach to our work, we center the needs of the most marginalized children so all children ultimately benefit from the targeted removal of systemic barriers.
- 3 Community input must guide our work.** Communities know best the solutions to the challenges they face. We invite, engage and design solutions and co-produce knowledge in partnership with them, knowing policies will be strongest if solutions come directly from impacted communities themselves.
- 4 Our work is intersectional.** Families do not lead single-issue lives, and therefore, our work must also be intersectional. We take into account the many identities children and families have, understanding the cumulative impacts of marginalization. We recognize that the success of children is dependent on the well-being of their families and communities.
- 5 Effective partnerships are transformational, not transactional.** Partner relationships are most meaningful when they share power, listen and create a space for creativity, belonging and collective action. Through partnerships and coalitions, community power is multiplied. Working in partnership across issue areas is endemic to our work and helps us meet the needs of the whole child and family.
- 6 A feedback loop allows for continuous improvement.** Public investments, evidence-based policy and systems change are essential levers for improving the lives of children, and successful policy implementation is a vital component of systems change. It is essential to ensure that policies are implemented in, by and for communities of color. It is equally essential that the impacts of those policies are measured and that the feedback of the communities impacted by such policies informs their implementation and continuous improvement.
- 7 Priorities change as social conditions change.** The biggest issues impacting children change as social conditions change. Centering child health equity requires us to recognize that systemic barriers impact communities differently based on numerous factors, including race, ethnicity, gender, income, language, immigration status, identity and ability. We must be responsive to social, economic and environmental changes and adjust our priorities as necessary.



Our 3-Year Vision for The Children's Partnership

- ▶ **The Children's Partnership is the leading voice for children's health equity in the state.** We build power with those most affected by policy decisions to advance a collective agenda. We are a dynamic, robust, statewide advocacy organization that brings the voices of lived experience to the important tables where policy decisions impacting children are being made.
- ▶ **The Children's Partnership is a trusted source of information, data and solutions for policymakers, community leaders, advocates and the media.** Our work is informed by a variety of data, including data disaggregated by race and other demographic factors that allow us to see where disparities lie, as well as qualitative data, such as stories and experiences, that we collect directly from impacted families and communities. The credibility and integrity of our research and policy analysis is respected regardless of party affiliation, and our work drives public discourse on critical issues impacting children and their families.
- ▶ Together with community partners, educators, direct service organizations, health care professionals, youth leaders and faith groups across the state, **The Children's Partnership advances a unified agenda for California children and is considered a trusted convener, collaborative ally and expert partner.**
- ▶ **The Children's Partnership leads efforts to advance child health equity, recognizing racial justice is paramount to well-being.** Racial justice is the systemic and fair treatment of all, resulting in equitable opportunities and outcomes. TCP is a leader and model of integrating racial equity and anti-racist principles in our outward-facing children's advocacy work and internally within the organization.
- ▶ **The Children's Partnership's board and staff consist of engaged community leaders and key influencers** who intentionally share their time, talent and resources to advance the mission of TCP.

FOR MORE THAN 25 YEARS, The Children's Partnership (TCP) has come to represent both innovation and collaboration in the children's advocacy field. The Children's Partnership was founded in 1993 as a different kind of children's organization. Founders Wendy Lazarus and Laurie Lipper witnessed major policy shifts that ignored the needs of children and saw an imminent need for a group to set a children's agenda on emerging issues. In 1994, The Children's Partnership provided the first comprehensive look at how computers and the internet were changing the way children learn, grow, socialize and find opportunity. Ahead of its time, this seminal piece began the national dialogue on the impact of major technological changes on children.

Today, such foresight and innovation define our approach and remain drivers in determining TCP priorities for where to make the most impact for children who have been historically underserved by our institutions and systems: specifically, children of color in our state.

TCP envisions a California where all children—regardless of their race, ethnicity or place of birth—have the resources and opportunities they need to grow up healthy and thrive, and our mission is to advance this vision of child health equity through research, policy and community engagement.

As we look to our thirty-year anniversary, we are excited to present our strategic plan, which lays out how **we will work toward this mission for the next three years by focusing, strengthening and institutionalizing our existing values and organizational strengths.** This plan describes what TCP is committed to, why and how we approach our advocacy work in the fight for children's health equity.

Theory of Change

Our Theory of Change is how we believe TCP will impact social change, through power-building, policy creation and implementation and organizational health investments. These strategic pathways will ultimately help us achieve our vision that all children in California have the resources they need to grow up healthy and thrive.

In order for all children in California to achieve their potential, we believe they need to be healthy; have strong, economically stable and connected families; and grow up in safe and

welcoming communities. The systems change efforts we advance will work toward that end.

The actions noted at the bottom of our Theory of Change infographic on the following page are investments we will make and expect to impact results in the intermediate outcomes. The intermediate results involve advocates, policymakers and community members working collaboratively to ensure our systems work for all, focusing first on communities most marginalized and underserved by the current systems in place—where health inequities are creating the most harm for child well-being.

Ultimate Outcome

The visionary social change we are working toward.

Intermediate Outcomes

What we will achieve over time through our actions.

Actions

Strategic pathways to catalyze outcomes.

Change Starts Here

All California children of every race, ethnicity and place of birth have the resources and opportunities they need to reach their full potential.

Healthy Kids

Strong, Economically Stable and Connected Families

Safe and Welcoming Communities

Systems Work for All

Policy solutions that are grounded in racial equity, driven by data, informed by lived experience and address the many factors that impact the well-being of children, youth and families are being evaluated for impact and continually updated to be responsive to evolving community needs.

Communities Know Their Power and Use It

California's most impacted communities are determining children's policy priorities and solutions (e.g., through increased education, advocacy, voting power and building public will).

Whole Child Approach

A rich network of partnerships/coalitions across issue areas and sectors unite behind an equity-driven agenda that addresses the whole child, centering the leadership of communities impacted by poverty and racism when championing children's issues.

Institutional Transformation

Policymakers prioritize community-driven solutions, having been influenced by advocates who bring a racial equity lens and co-develop solutions with community.

Collective Investment

Advocacy organizations understand the intersection of their main issues and children's issues and proactively invite TCP to the table; philanthropic funders and individual donors understand the essential role TCP plays and commit to invest long-term.

Racial Equity Embedded Within Children's Advocacy

An intersectional approach to eliminating racial disparities and centering the voices of California's most marginalized communities is foundational to all advocacy across the child-serving sector.

Leading by Example as an Anti-Racist Organization

TCP stands as a leader and model of integrating racial equity and building community power both internally within the organization and in its advocacy approach.

Policy Creation & Implementation

- ▶ **Feedback Loops:** Advocate for legislative and budgetary policy solutions being driven by most impacted communities; when policies are enacted, ensure they are properly implemented in these communities; use community input.
- ▶ **Supportive Research/Data:** Collect and/or amplify data that illustrates racial disparities and makes the case for community-driven policy solutions.
- ▶ **Public Support:** Build public will to support and demand systemic changes.
- ▶ **Systemic Racism:** Actively root out systemic racism in and through policies and laws; promote a targeted universalism approach to address disparities.

Power-Building

- ▶ **Trusting Relationships:** Build transformative, long-term relationships with communities facing the highest levels of poverty and racism and amplify voices from these communities across all TCP policy, advocacy and communications campaigns and coalition efforts.
- ▶ **Centering Lived Experience:** Ensure individuals from the most marginalized and impacted communities are well represented and centered as leading voices within TCP (staff and board).
- ▶ **Education & Empowerment:** Equip communities with knowledge, education and advocacy resources to help them harness their innate power.

Organizational Health Investments

- ▶ **Team Capacity:** Enhance staff skills, leadership, wellness and transformational relationships with one another.
- ▶ **Persuasive Communications:** Build an impactful story and strong business case for TCP's essential role in the children's advocacy ecosystem.
- ▶ **Resources:** Increase/diversify funding and build sustainability.
- ▶ **Responsiveness:** Increase capacity to be nimble and adaptive to changing social circumstances when it is strategically expedient to act.

Strategy Map 2021-23

This **Strategy Map** is a representation of our highest-level priorities for the next three years. We will achieve the **OUTCOMES** as a result of our **PROGRAMS** that are supported through investments in **CULTURE & CAPACITY** and further development of **RESOURCES**.

OUTCOMES

- ▶ Create and facilitate implementation of policies that address systemic inequities and contribute to healthy children, resourced families and safe and welcoming communities.
- ▶ Build a bridge between impacted families and policymakers.
- ▶ Increase the power and influence of marginalized voices in policy advocacy.

PROGRAMS

Policy

- ▶ Formulate and advocate for policy recommendations rooted in racial equity that drive systemic change.

Research

- ▶ Conduct, support and disseminate research that values and incorporates community experience.

Community Engagement

- ▶ Support and mobilize community-centered partnerships around a shared agenda for children.

CULTURE & CAPACITY

- ▶ Strengthen financial and operational systems and processes.
- ▶ Build capacity for strategic decision-making.
- ▶ Build and nurture an anti-racist culture that develops leaders.

RESOURCES

- ▶ Improve financial sustainability.
- ▶ Become recognized as the leading voice in California for child health equity.



OUTCOMES

Policy Implementation

- ▶ Create and facilitate implementation of policies that address systemic inequities and contribute to healthy children, strong, economically stable and connected families and safe and welcoming communities.

Community Access

- ▶ Build a bridge between impacted families and policymakers.

Community Power

- ▶ Increase the power and influence of marginalized voices in policy advocacy.



OUR STRATEGY MAP outlines three outcomes that we believe will contribute to the systemic change necessary to ensure all California children have what they need to reach their full potential.

These outcomes directly relate to the actions noted in our Theory of Change. While our Theory of Change is a look at how TCP envisions change happens, our Strategy Map is an overview of what we're focusing on over the next three years. These particular outcomes are the desired end results of our programs. We chose these outcomes because we believe that policy is an essential lever for improving the lives of children and that community engagement must be a part of policy-making.

Policy Creation and Implementation:

Ensure accountability to policy advocacy goals in the creation and facilitation of policy implementation that addresses systemic inequities and contributes to healthy children; strong, economically stable and connected families; and safe and welcoming communities.

The systemic inequities facing California's marginalized children and families require systemic solutions. We will work to advance and implement meaningful local, state and federal policy solutions based on recommendations developed in collaboration with impacted communities. **After legislative advances and policy wins, we will continue to monitor and advocate for proper implementation to ensure accountability**

in effective, long-term change. A feedback loop integrating community input will allow us to further iterate and improve on implemented policies.

Our broad-based understanding of health and the many determinants that impact children's health allow us to **advocate for solutions that address the needs of the whole child.** This includes advocating for policies that build and sustain strong, economically stable and connected families, as well as safe and welcoming communities because we know that the success of children is dependent on the well-being of their families and communities.

Community Access:

Build a bridge between impacted families and policymakers.

In order to advance community-driven policies, **we declare our commitment to building transformational relationships** with partners and communities across California over the next three years. This commitment to transformational relationship-building is shaped by the following tenets:

- ▶ We cultivate mutual **trust**.
- ▶ Partners feel **empowered** in advocacy as a result of our work.
- ▶ Partners feel **valued**, including receiving compensation for their time, effort and contributions. Finding and sharing resources is a core part of what we do.

- ▶ We understand authentic community input requires **continuous dialogue** with community-based partners.
- ▶ We strive for this **relational culture** internally within TCP as well as externally, which means equipping our staff and board to be able to build transformative relationships with each other and external partners.

We build connections with families and community partners alongside those with policymakers and legislators, facilitating a flow of information and resources among parties. **Families participate and contribute in convenings, meetings and offer testimonials in advocacy settings.** This encompasses listening sessions where local, state and national legislative offices and families participate; 1:1 legislative visits where family feedback and the impact in their district is shared with legislative members; and testifying in committee on behalf of a sponsored bill, on a panel in a select committee hearing, capitol briefing, press conference, sign-on letters, and through timely community engagement presentations or events.

Community Power:

Increase the power and influence of marginalized voices in policy advocacy.

As statewide child advocates, we **add to the policy capacity of grassroots organizations, particularly those led by BIPOC community members and located in lower-income and under-resourced areas.** In the spirit of building a bigger table, TCP wants to leverage our connections, access, influence and financial resources to support historically underfunded



BIPOC-led organizations rooted in impacted communities. We will strengthen existing and develop new relationships with grassroots organizations throughout the state, valuing their time and expertise. We will provide modest grants to organizations in each region while also offering ongoing training and technical support, opportunities to engage, as well as up-to-date information and data about state and federal child policy.

In this way, we will uplift community partners as leaders and experts on the issues facing their communities, amplifying the voices of those most impacted by systemic inequities. We will build people power among community-based organizations and help equip families that have been historically denied access with the tools, knowledge and resources they need to advocate for their children.

OUTCOMES IMPLEMENTATION MAP

STRATEGIC OBJECTIVES	ORGANIZATION PERFORMANCE GOALS	EXPECTED RESULTS
1. POLICY IMPLEMENTATION: Create and facilitate implementation of policies that address systemic inequities and contribute to healthy children; strong, economically stable and connected families; and safe and welcoming communities.	A. Create accountability around policy implementation through public awareness and education. B. Enact policy through legislative, budgetary and administrative asks.	Increased funding for priority policy objectives.
2. COMMUNITY ACCESS: Build a bridge between impacted families and policymakers.	A. Facilitate opportunities for and the influence of direct communication between communities and policymakers. B. Strengthen relationships with those in legislative and executive branches of government, particularly at the state level.	More California policymakers engaging directly with impacted families.
3. COMMUNITY POWER: Increase the power and influence of marginalized voices in policy advocacy.	A. Add to the advocacy/policy capacity of grassroots organizations in our priority geographic regions. B. Strengthen existing and develop new relationships with grassroots organizations in our priority geographic regions.	Increased relationships with and funding passed-through to grassroots organizations.

PROGRAMS

Policy

- ▶ Formulate and advocate for policy recommendations rooted in racial equity and intersectionality that drive systemic change.

Research

- ▶ Conduct, support and disseminate research that values and incorporates community experience.

Community Engagement

- ▶ Support and mobilize community-centered partnerships around a shared agenda for children.



OUR PROGRAMS are how we achieve our desired outcomes. We specifically focus on the ways that **policy, research and community engagement intersect to drive a unified agenda for child health equity.** To achieve this, we commit to

continue engaging and designing solutions and co-producing knowledge in partnership with communities as well as uplifting high-quality research and community data. These efforts allow us to promote policies that are responsive to community needs. As social, political and economic conditions change, so must our priorities.

Policy:

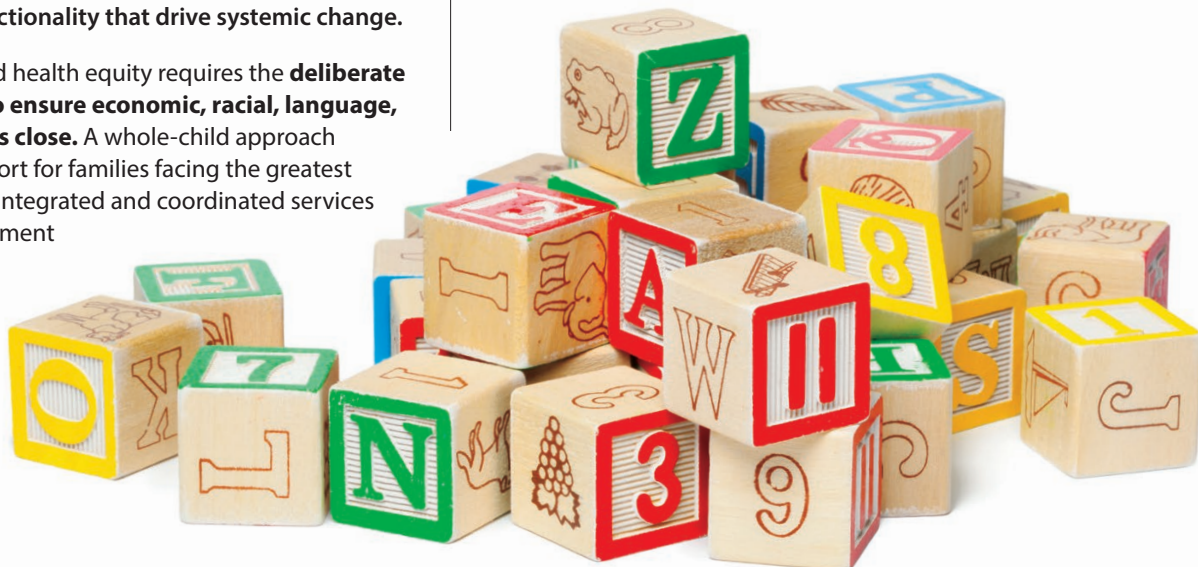
Formulate and advocate for policy recommendations rooted in racial equity and intersectionality that drive systemic change.

The advancement of child health equity requires the **deliberate enactment of policies to ensure economic, racial, language, and other disparity gaps close.** A whole-child approach to equity prioritizes support for families facing the greatest challenges and provides integrated and coordinated services at every stage of development across various sectors: health care, education and social services.

Research:

Conduct, support and disseminate research that values and incorporates community experience.

Data sheds light on the inequities that shape child health across areas that include education, health and mental health coverage and care, discrimination, policing, food, housing, community safety, economic well-being, environmental pollution and more. Data includes the lived experience of community members; surveys; polls; rigorous, peer-reviewed research papers; and publicly-available population and community level data sets.



Community Engagement:

Support and mobilize community-centered partnerships around a shared agenda for children.

The principles below guide our organization in our community engagement work:

- ▶ We engage community with and through our partners. We strive for **long-term, sustainable, transformational relationships** that are not limited to project/grant funding.
- ▶ Engaging community means **hearing from directly impacted people** in communities, not only the professionals who work at partner organizations.
- ▶ Our model is not rigid. **The methods we use for community engagement vary** depending on the circumstances such as the issue, project, community and time. We are, however, always committed to authentically and meaningfully bridging the gap between community members and the policies that purport to serve them.
- ▶ Over the next three years, we will work to **strengthen our reach in lower-income and under-resourced regions and the feedback loop with communities** around our policy agenda and advocacy. We will invest time and resources in building new partnerships and strengthening existing ones as we continue to involve communities in shaping our priorities so we can advocate for legislative and budgetary policies



that are driven by impacted communities. When policies are enacted, we will partner to ensure that they are implemented in these communities, and community experience during implementation influences how policies are further iterated and improved.

PROGRAMS IMPLEMENTATION MAP

STRATEGIC OBJECTIVES	ORGANIZATION PERFORMANCE GOALS	EXPECTED RESULTS
1. POLICY: Formulate and advocate for policy recommendations rooted in racial equity that drive systemic change.	A. Create advocacy plans for each annual policy priority that integrate policy (incl. legislation), research and community engagement components. B. Advance shared policy priorities with BIPOC-led organizations.	More policy solutions that directly address racial inequities.
2. RESEARCH: Conduct, support and disseminate research that values and incorporates community experience.	A. Advocate for increased public access to disaggregated data related to racial inequities in child well-being. B. Share data and information on existing California child well-being inequities with the public to increase support for child health equity. C. Conduct community-level conversations to gather and validate qualitative data, anecdotal data and currently unavailable data.	More opportunities to uplift, invest in and expand research on child well-being.
3. COMMUNITY ENGAGEMENT: Support and mobilize community-centered partnerships around a shared agenda for children.	A. Convene child-serving networks across the state. B. Create feedback loops with partners. .	Increased partnerships with BIPOC-led organizations across the state.

CULTURE & CAPACITY

Efficiency

- ▶ Strengthen financial and operational systems and processes.

Strategic Decision-Making

- ▶ Build capacity for strategic decision-making.

Values-Based Culture

- ▶ Build and nurture an anti-racist culture that develops leaders.



EMPOWERING community members while disempowering staff is a pitfall that many nonprofit organizations experience on the road to achieving their big visions, unfortunately. Over the next three years, The Children's Partnership will need to secure the staffing and environment necessary to achieve the programmatic goals outlined in this plan. This approach will ensure TCP **sustains an organizational culture of health that reflects both its external and internal values.**

Efficiency:

Strengthen financial and operational systems and processes.

To meet the wide range of needs that affect a child's health, TCP has grown a team that accommodates a range of expertise. As we grow, The Children's Partnership must provide strong administrative support to maximize efficiency and enable all our staff to work to their best strengths.

Strategic Decision-Making:

Build capacity for strategic decision-making.

With a whole-child lens, every issue may be a children's issue, but TCP aims to prioritize those that demand timely solutions. By investing in our team, we intend to increase our capacity in order

to be nimble and adaptive to changing social circumstances when it is strategically expedient to act. We will do this by cultivating a problem-solving culture and utilizing a process for deciding how and when TCP engages in issues and projects.





Values-Based Culture:

Build and nurture an anti-racist culture that develops leaders.

A racial equity lens must be applied internally as well as externally. Addressing systemic racism must include disrupting white supremacy culture within our organizations because

white supremacy is institutionalized in our organizational norms, values and decision-making. It also means working to ensure our staff and board members represent the communities we serve. By naming what creates and perpetuates racial disparities, we can challenge harmful narratives and create a more inclusive approach to our work and better support our BIPOC staff.

CULTURE & CAPACITY IMPLEMENTATION MAP

STRATEGIC OBJECTIVES	ORGANIZATION PERFORMANCE GOALS	EXPECTED RESULTS
1. EFFICIENCY: Strengthen financial and operational systems and processes.	A. Successfully implement strategic plan. B. Assess and invest in infrastructure needed for staff to do their jobs well. C. Standardize internal procedures and data-tracking protocols (operational and financials).	Full implementation of project management processes and tools.
2. STRATEGIC DECISION-MAKING: Build capacity for strategic decision-making.	A. Improve and systematize processes/tools for determining what work of ours has the most impact. B. Build an approach to work that links and coordinates advocacy, community engagement, government relations and communications. C. Empower internal experts to lead internally. D. Clarity of roles and responsibilities.	Establishment and use of choice-making rubric that takes into account capacity, strategy and equity.
3. VALUES-BASED CULTURE: Build and nurture an anti-racist culture that develops leaders.	A. Anti-racist primes and protocols are integrated at all levels of the organization. B. Build, grow and track anti-racist competencies among board and staff. C. Actively engage team members in sharing their expertise externally.	Increased average scores among staff and board for anti-racist competencies.

RESOURCE DEVELOPMENT

Sustainability and Growth

- ▶ Improve financial sustainability.

Influence

- ▶ Become recognized as the leading voice in California for child health equity.



OVER THE NEXT three years, The Children's Partnership must secure the financial resources and influence necessary to achieve the programmatic goals outlined in this plan.

Sustainability and Growth:

Improve financial sustainability.

The development of a **culture of philanthropy among the board and staff will strengthen our capacity for the future.**



We will diversify our revenue by sustaining and growing existing relationships with foundation partners while also bringing on new funders, expanding individual giving, increasing our general operating support and investing in a more robust development team. We will also leverage our trust with funders to push for systemic anti-racist philanthropic change to further our commitment to working in partnership to achieve our vision.

Influence:

Become recognized as the leading voice in California for child health equity.

Cementing The Children's Partnership's leadership role in child health equity requires **targeted investment in our brand**, while continuing to invest in our central responsibilities for advocacy. Strengthening our brand will help strategically advance our goals and enable us to further our impact and better meet our mission. Elevating our role as the leader in advocacy for child health equity can translate into more meaningful and useful partnerships with community, statewide and national organizations; acquisition of talented and motivated board members, staff and volunteers; and greater financial support as donors feel more connected to our work.



RESOURCE DEVELOPMENT IMPLEMENTATION MAP

STRATEGIC OBJECTIVES	ORGANIZATION PERFORMANCE GOALS	EXPECTED RESULTS
1. SUSTAINABILITY AND GROWTH: Improve financial sustainability.	<ul style="list-style-type: none"> A. Sustain and grow existing relationships while also bringing on new funders. B. Grow individual giving. C. Have a greater percentage of our budget be general operating funds. D. Leverage our trust with funders to push for systemic anti-racist philanthropic change. E. Establish and consistently grow a financial reserve. F. Develop a culture of philanthropy among board and staff. 	More unrestricted funding.
2. TCP INFLUENCE: Become recognized as the leading voice in California for child health equity.	<ul style="list-style-type: none"> A. Expand our role and recognition as thought leaders/experts in child health equity. B. Serve as an expert at the intersection of child health and racism. C. Serve as an advocacy partner to direct service organizations. D. Build transformational, long-term relationships with organizations working directly with the most marginalized communities and have key “go-to” partners for each issue in each advocacy geographic region. E. Grow the number of team members to enable each to be of highest service, including a shift from the President to focus on external relationship-building. F. Refresh and elevate our brand. 	Increased awareness of TCP and increased volume and quality of public events/speaking engagements/expert panels.



Moving Forward

With this strategic plan, The Children's Partnership will lean more intentionally into an area that has long underpinned our advocacy: child health equity. Over time, we have expanded our definition of child health to include social determinants of health, like poverty, immigration status or access to housing, which are proven to affect a child's health outcomes and access to health care more drastically than health coverage alone. We have seen the well-being of California's children and families impeded by systemic inequities and the urgency of these needs today, in particular amidst the confluence of crises related to the pandemic.

In order for all children in California to have the opportunity to thrive, we believe they need to be healthy; have strong, economically stable and connected families; and grow up in safe and welcoming communities. With this expansive vision of whole-

child health, we can only achieve these goals and make progress for children and families in California if we have an expansive statewide team of cross-sector collaborators. As advocates, we are stronger when we work together. Alongside advocates and impacted families from across the state, we drive a unified agenda for child health that prioritizes our most marginalized communities, empowering and uplifting the expertise and experiences of community partners and families to help eliminate the barriers they face to meeting their children's needs.

Through community power-building, creation and implementation of policy reform, and ensuring our own organizational health, we can reimagine child well-being for all of California's children. By working together and harnessing the power of partnership, we can achieve child health equity in California and serve as a model for the nation.

Key Terms & Definitions

Health: We align with the World Health Organization's definition of health as a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity. On an individual and collective level, a state of well-being is fundamental to opportunity. The healthier we are, the more freedom we have to pursue our dreams and contribute to our families, workplaces and communities. For children, access to quality health care services and a range of family supports is critical to their healthy development, academic success and future opportunities to thrive.

Health Equity: We align with the Robert Wood Johnson Foundation's definition of health equity as everyone has a fair and just opportunity to be as healthy as possible. To achieve this, we must remove obstacles to health—poverty, discrimination and deep power imbalances—and their consequences, including lack of access to good jobs with fair pay, quality education, housing, safe environments and health care. As defined by the National Equity Project, “working towards equity means removing the predictability of success and failure that currently correlates with any social or cultural factor.”

Inequities: Aligned with the Robert Wood Johnson Foundation's definition of health equity, health inequities are differences in health status and mortality rates across population groups that are systemic, avoidable, unfair, and unjust. While the term health disparities is used to describe differences in health status, we use the term health inequities as it acknowledges the historic oppression and marginalization that creates and drives these differences.

White Supremacy: Defined as the belief that white people constitute a superior race, it is the elevation of whiteness to be the standard by which all else is compared. Kenneth Jones and Tema Okun identified twelve characteristics of white supremacy culture in organizations: perfectionism, sense of urgency, defensiveness, quantity over quality, worship of the written word, paternalism, power hoarding, fear of open conflict, individualism, progress is bigger/more, objectivity and right to comfort.

Targeted Universalism: We align with the Othring & Belonging Institute that defines “targeted universalism” as setting universal goals that are pursued by targeted processes to achieve those goals. Within a targeted universalism framework, universal goals are established for all groups concerned. The strategies developed to achieve those goals are targeted, based upon how different groups are situated within structures, culture and across geographies to obtain the universal goal. Targeted universalism is goal-oriented, and the processes are directed in service of the explicit, universal goal.

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TCP Board

Luis Ayala (former)
Ken Chawkins
Rebecca Pleitez
Tamara Ritchey Powers

TCP Staff

Mayra E. Alvarez
Angie Franchino
Aracely Navarro
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