Background

AIDS United’s Public Policy Council updated its operating principles in 2018 to thoroughly integrate racial justice into all aspects of its work. At the insistence of Black HIV advocates and with unanimous support of the Public Policy Council, AIDS United launched the creation of an index that would measure each participating organization’s responsiveness to racial justice.

There was a consensus to center Blackness in the survey, as race in the United States is structured around a racial hierarchy that created and perpetuates the white and Black binary to justify the oppression of Black bodies. This system marginalizes anyone who is not white and thus, anti-Blackness also negatively impacts non-Black communities of color. AIDS United and our Public Policy Council began implementing the index in the fall of 2022 and applied the meaningful involvement of people living with HIV principle from the inception of the index.

Acknowledgments

We thank our current Racial Justice and Equity Committee chair Omar Martinez Gonzalez of AIDS Foundation Chicago and our previous Racial Justice Index Committee co-chairs Christina Adeleke and A. Toni Young for their persistent advocacy for racial justice. We commend all their work to end the HIV epidemic and for their unapologetic leadership of this committee and in our field.

We also extend gratitude to each organization who participated in the pilot and implementation phases for this index.
Organizations that implemented the Racial Justice Index
(November 2022-March 2023)

- AIDS Alabama
- AIDS Foundation Chicago
- AIDS United
- American Academy of HIV Medicine
- Cascade AIDS Project/Prism Health/Our House of Portland
- Center for Health Law and Policy Innovation
- Center for HIV Law and Policy
- DAP Health
- Delaware HIV Consortium
- Equality Federation*
- Housing Works
- Intercambios Puerto Rico
- North Carolina AIDS Action Network
- San Francisco AIDS Foundation
- Sero Project
- Southern AIDS Coalition
- The Aliveness Project
- The Project of the Quad Cities
- Thrive Alabama
- Treatment Action Group
- Vivent Health
- Whitman-Walker Health

*Organizations that participated in the pilot phase and submitted their pilot results to be included as part of the official index results.

Organizations that piloted the Racial Justice Index
(Summer 2022)

- AIDS Foundation Chicago
- DAP Health
- Equality Federation
- Legacy Community Health
- Multicultural AIDS Coalition
- My Brother’s Keeper
Appreciating Black staff

We offer full and unapologetic appreciation to Black staff across the Public Policy Council, for their participation. The famed novelist Toni Morrison once spoke of racism and its impact on Black people. Morrison said, “The function, the very serious function of racism is distraction. It keeps you from doing your work. It keeps you explaining, over and over again, your reason for being.” AIDS United and the Public Policy Council’s Racial Justice Index Committee was thoroughly mindful of this observation throughout the index implementation process. This index was a distraction for many participants and especially Black participants, because this racial justice index exercise should not have had to occur.

We also have to admit that our index process has also been informed by inequity. We did not make this index available in varying languages and we acknowledge the lack of accessibility hindered the full participation of non-English speakers and pledge that any future iteration of the index will support index participation for monolingual Spanish speakers.

Prior to launching the index in November 2022, AIDS United and the Public Policy Council pledged to release the aggregated index results to hold our organizations accountable to our staff and the communities we serve. After a years-long process of community engagement and thoughtful implementation of this index, we finally have results to share with each of you.

Since 1619, Black people have experienced the brutal impacts of anti-Blackness and white supremacy in this nation. De jure segregation might be outlawed, however, the effects of Jim and Jane Crow have yet to be fully reckoned with. The legacy of white supremacy ensures that these same concepts are deeply baked within our institutions and in the application of political, social, and legal processes. The HIV field is not immune from the impacts of white supremacy and anti-Blackness. Our index results show this quite vividly.
INDEX RESULTS

472 people across 22 organizations submitted index surveys anonymously on Google Forms. When analyzing our results, we combined Maintenance, Action, and Preparation counts to create an “Action” readiness step. Similarly, we combined Pre-Contemplation, Contemplation, and Unsure counts to create an “Inaction” readiness step. Applying this binary reveal that participating Public Policy Council organizations scored the highest in the Direct Service category with 86% of respondents selecting that their organization was in a state of action in this category. The lowest scoring category was the Data Collection and Use category, with only 57% of respondents selecting their organizations were in a state of action in this category (See Appendix A).

Quantitative index results found organizations on average are well informed by the meaningful involvement principles established in 1983 that established that people living with HIV have the right to participate and be centered in decisions that impact them and their communities. Furthermore, participating organizations on average are committed to hiring a diverse workforce that is reflective of communities most impacted by HIV.

However, there was a stark contrast in participating organization’s external commitments to racial justice through their direct service partnerships and their ability to articulate internal processes and systems that support their Black staff members. 80% of respondents believe that their organizations are in an action state of providing racial justice training to staff, however this reality has not fully translated into effective practices and procedures that support Black staff and that support our racial justice efforts in the communities in which we work. Qualitative responses underscore this inconsistency, as participants across organizations noted their racial justice offerings are no longer offered, inconsistently offered, or could be improved by retaining Black racial justice consultants to deliver those trainings.

Results demonstrated some organizations have not prioritized providing mentoring opportunities for staff to hone their skills and to advance in the field. This gap is especially harmful for Black staff, who navigate anti-Black and white supremacist societal structures that either limits or excludes access to educational and professional networks that can enhance one’s ability to ascend in the workplace. This gap is an especially difficult hurdle for Black transgender and cisgender women and Black LGBTQ people at-large.

Further, more than a quarter of respondents believe their organizations are in a state of inaction about salary and wage justice, cultivating an environment where staff want to continue working at their organizations, and curating a seamless onboarding process for new staff. Notably, 25% of respondents are unsure if their organizations provide specific emotional wellness resources for Black staff to cultivate a culture of communal care.
The Data Collection and Use category represented the lowest scoring category, precisely because a third of respondents (33%) selected unsure across all questions in this category (See Appendix B). The qualitative results detail that organizations vary quite considerably in data collection methods and in the staff members that are privy to how data are used to inform organizational decisions.

CONCLUSION

The results indicate that our field's collective understandings about racial justice approach performativity and tokenism, if our efforts to engage and hire Black persons of lived experience are not appropriately solidified into policies that support those same staff members. The lack of tangible opportunities for advancement and mentorship, salaries that afford them the ability to thrive and lack of clarity around whether organizations provide atmospheres of communal care for Black staff are highlights of considerable concern for participating organizations. Further, a third of respondents were unsure of how their organizations applied data collection methods and this suggests that organizations should aim to reduce siloing within organizations and can better clarify how data are used to inform programmatic decisions and advocacy efforts.
APPENDIX 1: QUANTITATIVE RESULTS BY CATEGORY

Direct Service

1. We cultivate accessible and affirming spaces for communities with which we work.
   Maintenance – 103 (26.3%)
   Action – 218 (55.8%)
   Preparation – 17 (4.3%)
   Contemplation – 25 (6.4%)
   Pre-contemplation – 6 (1.5%)
   Unsure – 22 (5.6%)

   Total: 391

2. We provide and/or work with organizations that provide flexible and accessible services (e.g. extended office hours including weekends, virtual visits, mobile clinics, child care assistance, transportation).
   Maintenance – 82 (23.7%)
   Action – 179 (51.7%)
   Preparation – 21 (6.1%)
   Contemplation – 36 (10.4%)
   Pre-contemplation – 6 (1.7%)
   Unsure – 22 (6.4%)

   Total: 346

3. We hire skilled, culturally-responsive, compassionate providers who represent the communities in which we work.
   Maintenance – 113 (29.1%)
   Action – 216 (55.7%)
   Preparation – 23 (5.9%)
   Contemplation – 12 (3.1%)
   Pre-contemplation – 10 (2.6%)
   Unsure – 14 (3.6%)

   Total: 388

4. We design programs and quality services that address anti-Black racism and the impact on HIV prevention, care, and treatment.
   Maintenance – 63 (16.2%)
   Action – 188 (48.5%)
Preparation – 46 (11.9%)  
Contemplation – 37 (9.5%)  
Pre-contemplation – 22 (5.7%)  
Unsure – 32 (8.2%)  

Total: 388

5. We provide and/or connect our community members with supportive services (e.g. housing, child care, transportation).
   Maintenance – 170 (43.7%)  
   Action – 178 (45.7%)  
   Preparation – 12 (3.1%)  
   Contemplation – 7 (1.8%)  
   Pre-contemplation – 3 (0.8%)  
   Unsure – 19 (4.9%)  

Total: 389

6. We provide and/or connect our community members to free/low-cost services.
   Maintenance – 193 (49.7%)  
   Action – 169 (43.6%)  
   Preparation – 9 (2.3%)  
   Contemplation – 2 (0.5%)  
   Pre-contemplation – 0  
   Unsure – 15 (3.9%)  

Total: 388

Partnerships

7. We develop community partnerships to address anti-Black racism and oppression.
   Maintenance – 53 (11.4%)  
   Action – 195 (41.9%)  
   Preparation – 66 (14.2%)  
   Contemplation – 46 (9.9%)  
   Pre-contemplation – 27 (5.8%)  
   Unsure – 78 (16.8%)  

Total: 465

8. We foster relationships with Black leaders, LGBTQ+ and other communities with which we work to improve HIV prevention, care, and treatment.
   Maintenance – 106 (22.9%)  
   Action – 232 (50.1%)  
   Maintenance – 46 (11.9%)  
   Contemplation – 37 (9.5%)  
   Pre-contemplation – 22 (5.7%)  
   Unsure – 32 (8.2%)  

Total: 388
Preparation – 38 (8.2%)  
Contemplation – 27 (5.8%)  
Pre-contemplation – 15 (3.2%)  
Unsure – 45 (9.7%)  

Total: 463

9. We seek opportunities, allocate funding/resources, and invest in initiatives to address anti-Black racism and oppression.
   Maintenance – 54 (11.6%)  
   Action – 186 (40.1%)  
   Preparation – 53 (11.4%)  
   Contemplation – 37 (8%)  
   Pre-contemplation – 34 (7.3%)  
   Unsure – 100 (21.5%)  

Total: 464

10. We engage in community organizing to support policy and advocacy to address anti-Black racism and oppression in HIV prevention, care, and treatment.
    Maintenance – 82 (17.7%)  
    Action – 220 (47.5%)  
    Preparation – 30 (6.5%)  
    Contemplation – 35 (7.6%)  
    Pre-contemplation – 21 (4.5%)  
    Unsure – 75 (16.2%)  

Total: 463

11. We work with existing and new community partners to support policy and advocacy to address anti-Black racism.
    Maintenance – 64 (13.8%)  
    Action – 195 (42.2%)  
    Preparation – 42 (9.1%)  
    Contemplation – 30 (6.5%)  
    Pre-contemplation – 25 (5.4%)  
    Unsure – 106 (22.9%)  

Total: 462

12. We seek out multi-year (3+ years) funding opportunities to sustain community partnerships that represent the communities with which we work and address anti-Black racism and oppression.
    Maintenance – 47 (10.2%)
Action – 113 (24.5%)
Preparation – 29 (6.3%)
Contemplation – 39 (8.4%)
Pre-contemplation – 31 (6.7%)
Unsure – 203 (43.9%)

Total: 462

13. We ensure intellectual ownership for contributions made by community partners.
   Maintenance – 59 (12.7%)
   Action – 98 (21.2%)
   Preparation – 21 (4.5%)
   Contemplation – 16 (3.5%)
   Pre-contemplation – 25 (5.4%)
   Unsure – 244 (52.7%)
   Total: 463

14. We use inclusive language in all interactions, publications, and resources.
   Maintenance – 163 (35%)
   Action – 224 (48.2%)
   Preparation – 35 (7.5%)
   Contemplation – 17 (3.7%)
   Pre-contemplation – 7 (1.5%)
   Unsure – 19 (4.1%)
   Total: 465

Education and awareness

15. We make conscious efforts to involve community members with lived experience to
    advocate and inform HIV-related policy change.
   Maintenance – 165 (35.7%)
   Action – 204 (44.1%)
   Preparation – 29 (6.3%)
   Contemplation – 19 (4.1%)
   Pre-contemplation – 4 (0.9%)
   Unsure – 41 (8.9%)
   Total: 462

16. We cultivate awareness of sexual health and reproductive justice through centering the
    human rights of the communities with which we work.
   Maintenance – 155 (33.5%)
   Action – 201 (43.5%)

9
Preparation – 36 (7.8%)
Contemplation – 13 (2.8%)
Pre-contemplation – 7 (1.5%)
Unsure – 50 (10.8%)

Total: 462

17. We train staff on implicit bias and racial justice at all levels in our organization.
   Maintenance – 109 (23.6%)
   Action – 207 (44.9%)
   Preparation – 54 (11.7%)
   Contemplation – 28 (6.1%)
   Pre-contemplation – 31 (6.7%)
   Unsure – 32 (6.9%)

Total: 461

18. We train our organization’s board members on implicit bias and racial justice.
   Maintenance – 45 (10.3%)
   Action – 86 (19.7%)
   Preparation – 0
   Contemplation – 24 (5.5%)
   Pre-contemplation – 29 (6.6%)
   Unsure – 253 (57.9%)

Total: 437

19. We work to address HIV stigma at all levels in our organization.
   Maintenance – 203 (44%)
   Action – 195 (42.3%)
   Preparation – 18 (3.9%)
   Contemplation – 7 (1.5%)
   Pre-contemplation – 11 (2.4%)
   Unsure – 27 (5.9%)

Total: 461

20. We provide mentorship and leadership opportunities to our community partners to support their scaling and growth.
   Maintenance – 61 (13.2%)
   Action – 139 (30%)
   Preparation – 38 (8.2%)
   Contemplation – 26 (5.6%)
   Pre-contemplation – 21 (4.5%)
21. We provide and share opportunities for continuous learning and training centered on racial equity for staff at all levels of our organization.
   Maintenance – 100 (21.6%)
   Action – 213 (45.9%)
   Preparation – 48 (10.3%)
   Contemplation – 28 (6%)
   Pre-contemplation – 29 (6.3%)
   Unsure – 46 (9.9%)

   Total: 464

Workforce strengthening

22. We recruit and hire those who reflect the communities with which we work across all levels of our organization.
   Maintenance – 120 (25.8%)
   Action – 230 (49.5%)
   Preparation – 54 (11.6%)
   Contemplation – 22 (4.7%)
   Pre-contemplation – 15 (3.2%)
   Unsure – 24 (5.2%)

   Total: 465

23. We promote a culture of mentorship for staff across all levels of our organization.
   Maintenance – 67 (14.5%)
   Action – 134 (28.9%)
   Preparation – 59 (12.7%)
   Contemplation – 64 (13.8%)
   Pre-contemplation – 57 (12.3%)
   Unsure – 82 (17.7%)

   Total: 463

24. We provide livable salaries/wages and incorporate wage equity in our strategic plan to engage in economic justice.
   Maintenance – 66 (14.2%)
   Action – 179 (38.7%)
   Preparation – 79 (17.1%)
   Contemplation – 34 (7.3%)
25. We value a combination of education, work, and lived experience in recruitment, hiring, and opportunities for promotion.

- Maintenance – 115 (24.9%)
- Action – 192 (41.5%)
- Preparation – 41 (8.9%)
- Contemplation – 28 (6.1%)
- Pre-contemplation – 29 (6.3%)
- Unsure – 57 (12.3%)

Total: 462

26. We foster a culture that balances organizational and staff needs.

- Maintenance – 101 (21.8%)
- Action – 180 (38.8%)
- Preparation – 60 (12.9%)
- Contemplation – 41 (8.8%)
- Pre-contemplation – 33 (7.1%)
- Unsure – 49 (10.6%)

Total: 464

27. We promote activities that build retention among staff to strengthen the culture of our organization.

- Maintenance – 62 (13.4%)
- Action – 157 (33.9%)
- Preparation – 81 (17.5%)
- Contemplation – 54 (11.7%)
- Pre-contemplation – 57 (12.3%)
- Unsure – 52 (11.2%)

Total: 463

28. We structure our on-boarding process to ensure that new staff are supported as they transition into our organization and their new roles.

- Maintenance – 76 (16.6%)
- Action – 169 (36.8%)
- Preparation – 81 (17.6%)
- Contemplation – 42 (9.1%)
- Pre-contemplation – 42 (9.1%)
29. We use plain, person-centered, non-stigmatizing, anti-racist, and culturally responsive language in our recruitment, hiring, and on-boarding processes.
   Maintenance – 143 (31%)
   Action – 193 (41.9%)
   Preparation – 38 (8.2%)
   Contemplation – 21 (4.6%)
   Pre-contemplation – 11 (2.4%)
   Unsure – 55 (11.9%)

   Total: 461

30. We provide an array of benefits that promote agency, health, and well-being among our staff.
   Maintenance – 140 (30.2%)
   Action – 231 (49.9%)
   Preparation – 28 (6%)
   Contemplation – 23 (5%)
   Pre-contemplation – 14 (3%)
   Unsure – 27 (5.8%)

   Total: 463

31. We provide emotional health services and/or connections to wellness resources for staff who work on racial justice issues, particularly Black staff and staff of color, to cultivate an atmosphere of communal care in our organization.
   Maintenance – 67 (14.5%)
   Action – 149 (32.3%)
   Preparation – 39 (8.4%)
   Contemplation – 33 (7.1%)
   Pre-contemplation – 58 (12.6%)
   Unsure – 116 (25.1%)

   Total: 462

Policies and procedures

32. We collectively create policies and procedures to combat institutional racism and bias, and advance equity in organizational decision-making.
   Maintenance – 60 (13.1%)
   Action – 158 (34.4%)
33. We design and implement policies, procedures, and practices that center people living with and vulnerable to HIV across our organization.
   Maintenance – 157 (34.1%)
   Action – 192 (41.7%)
   Preparation – 28 (6.1%)
   Contemplation – 22 (4.8%)
   Pre-contemplation – 7 (1.5%)
   Unsure – 54 (11.7%)

   Total: 460

34. Our board of directors and executive leadership have clearly defined processes to guide executive leadership transitions.
   Maintenance – 42 (9.1%)
   Action – 77 (16.8%)
   Preparation – 32 (7%)
   Contemplation – 35 (7.6%)
   Pre-contemplation – 35 (7.6%)
   Unsure – 238 (51.8%)

   Total: 459

35. We have clearly defined processes for promotions and professional development that combat racism and advance equity.
   Maintenance – 43 (9.4%)
   Action – 100 (21.8%)
   Preparation – 51 (11.1%)
   Contemplation – 57 (12.4%)
   Pre-contemplation – 62 (13.5%)
   Unsure – 145 (31.7%)

   Total: 458

36. We use language that is affirming, person-centered, non-stigmatizing, anti-racist, and culturally responsive when communicating with others.
   Maintenance – 162 (35.3%)
   Action – 234 (51%)
Preparation – 26 (5.7%)
Contemplation – 8 (1.7%)
Pre-contemplation – 9 (2%)
Unsure – 20 (4.3%)

Total: 459

37. We allocate funding and/or seek resources to work on racial justice issues.
   Maintenance – 63 (13.7%)
   Action – 151 (32.9%)
   Preparation – 43 (9.4%)
   Contemplation – 27 (5.9%)
   Pre-contemplation – 21 (4.6%)
   Unsure – 154 (33.5%)

Total: 459

Data collection and use

38. We monitor and evaluate programs to ensure that we are centering communities with which we work, including people living with and vulnerable to HIV.
   Maintenance – 137 (30%)
   Action – 191 (41.9%)
   Preparation – 33 (7.2%)
   Contemplation – 15 (3.3%)
   Pre-contemplation – 11 (2.4%)
   Unsure – 69 (15.1%)

Total: 456

39. Co-create data collection methods with communities with which we work
   Maintenance – 79 (17.2%)
   Action – 121 (26.4%)
   Preparation – 28 (6.1%)
   Contemplation – 24 (5.2%)
   Pre-contemplation – 29 (6.3%)
   Unsure – 177 (38.6%)

Total: 458

40. We use evidence-informed data findings from monitoring and evaluation activities to co-design programs with communities with which we work, including people living with and vulnerable to HIV.
   Maintenance – 94 (20.5%)
Action – 154 (33.6%)
Preparation – 25 (5.5%)
Contemplation – 19 (4.1%)
Pre-contemplation – 15 (3.3%)
Unsure – 151 (33%)

Total: 458

41. We use data findings to guide internal organizational decisions related to racial equity.
   Maintenance – 58 (12.7%)
   Action – 123 (26.9%)
   Preparation – 40 (8.8%)
   Contemplation – 24 (5.2%)
   Pre-contemplation – 27 (5.9%)
   Unsure – 185 (40.4%)

Total: 457

42. We regularly share findings from monitoring and evaluation activities with the communities with which we work to honor their participation and collaboration.
   Maintenance – 58 (12.7%)
   Action – 116 (25.3%)
   Preparation – 32 (7%)
   Contemplation – 28 (6.1%)
   Pre-contemplation – 33 (7.2%)
   Unsure – 191 (41.7%)

Total: 458

43. We share findings with policymakers to combat anti-Black racism and advance equity, including people living with and vulnerable to HIV.
   Maintenance – 78 (17%)
   Action – 126 (27.4%)
   Preparation – 22 (4.8%)
   Contemplation – 22 (4.8%)
   Pre-contemplation – 31 (6.7%)
   Unsure – 180 (39.2%)

Total: 459

44. We use data to inform funding and resource allocation decisions to support people living with and vulnerable to HIV.
   Maintenance – 132 (28.8%)
   Action – 163 (35.6%)

16
Preparation – 24 (5.2%)
Contemplation – 13 (2.8%)
Pre-contemplation – 8 (1.7%)
Unsure – 118 (25.8%)

Total: 458
Appendix 2: Qualitative Results, Notable Findings

Centering Blackness in survey and in HIV programming

The nature of anti-Blackness itself polarizes and places a stigma upon the concept of Blackness. This stigma does not begin or end with Blackness as a race alone, as it even extends to how the English language has conceptualized negative experiences as “black” and has conferred positive attributes with “white” and/or lightness. It is important to note that there were no questions on the survey to assess individual reactions to Blackness as a concept. However, a few respondents across organizations volunteered their own opinions about the survey’s focus on Blackness. These responses were few but elicited some important considerations for organizations serving people living with HIV. Examples of qualitative comments are below:

- “I strongly feel and have also observed that anything "diversity" is exclusively (in nature of the term exclusive of others) African American/ Black centered. Let me be clear, I am very much an advocate and in solidarity always with the the African American community and most aware and sensitive to the black American experience in this country. As someone, who is BIPOC I passionately feel much more needs to be done to include the VERY MUCH overlooked experiences, and contributions of other BIPOC communities, which also I might add, a majority minority in some of the places we are present as an organization. VISIBILITY, REPRESENTATION, we need to work on this in our organization, URGENTLY”

- “I think that using the term "anti-Black racism" will give people pause. They may think that, for those who are not Black and may come from predominately White communities, the survey is just saying they are against black people. I think that for racial justice, it can’t be only about those who are black and those who are white. Depending on where you live, the issue may be about inclusion of Asians, Hispanics, Native Americans, etc. Also, there is religious discrimination as well. In the past I have worked on disparities issues and this same question routinely - is it only about one race being discriminated against and is it only one race that discriminates?”

Other respondents spoke about their organization’s focus on Blackness and invoked a gap in programming for specific populations of Black people and responses also invoked the nuances of cultural Blackness. Examples of qualitative comments are below:

- “I think our agency can provide more services tailored to African American women and the African American community as a whole and not just "MSM"”

- “My organization had made efforts to be more inclusive of afro-latinx communities and to highlight them. I do not feel my organization has a specific way to address racism that exist within the Latinx community. I believe we need to have more conversations about anti-blackness and more anti-racist trainings.”
Racial justice climate

Individual respondents spoke of their own experiences with racism and anti-Blackness at their organizations. Some respondents spoke of feelings as if their organizations did not value their lived experience as a Black person. Other respondents spoke of the nuances of anti-Blackness, including how white supremacy is perpetuated by white women. Examples of qualitative comments are below:

- “…are only at the precipice of understanding how white women maintain white supremacy, especially in the non-profit space. I don’t know that upper leadership has even thought about how anti-black racism is perpetuated in our work, especially within the medical clinic.”
- “I think we allocate resources and invest in partnerships to address anti-Black racism and oppression, however, I think this is done most comprehensively through individual programs or initiatives. I think we could benefit from having an overarching organizational strategy for how we will make this commitment & investment, so that it is integrated throughout our work…”
- “Racial justice efforts have been noticeably increased since BLM movement/George Floyd murder.”
- “I see our organization as having single initiatives or committees, rather than embed racial justice throughout all of our work. This is an area for improvement.”
- “The upper management staff is either blind to or ignores the underlined racist tones they present to their Black/African American consumers and staff.”
- “They’ve jumped on the bandwagon with just about every other agency in addressing racial justice”
- “Anti-Black racism has become a more prominent goal only in the last year.”
- “Their is a lack of cultural sensitivity to our African American staff and our need. There is not a lot of equity; although it is said to be.”
- “I do think more needs to be done in terms of creating a black affinity space that is cross generational and supportive of all black staff regardless of gender presentation.”

Existence of racial justice training and the quality and content of trainings

80% of respondents claimed their organizations offer or are preparing to offer racial justice training to staff, however, the qualitative results reveal these trainings occur far too infrequently (if at all). Further, qualitative data reveal some organizations have failed to retain Black consultants to deliver racial justice trainings and have instead retained consultants who fundamentally lack the lived experience of Blackness in the United States. Examples of qualitative comments are below:

- “The agency provides an abundance of training opportunities to increase awareness and growth, but I can’t speak to how well they address accountability.”
• “Would have liked an option for indicating that our org has engaged in actions in the past, but that I am not sure we have plans to do so in the future...”
• “It would be great if our organization provided continuous racial justice trainings for staff and board members and included racial justice as a framework incorporated in and through the work that we do.”
• “We are in the process of integrating racial justice and equity training into existing training systems such as New Hire Orientation and required annual trainings.”
• “The staff participated in a DEI training in 2020 that was eye opening and educational. While we still follow guidance from this training, we should make more of an effort to provide continuous education to staff.”
• “Training around racial justice are workshops that we have been a part of in the past but are planning to reengage with, particularly since new staff have joined. We would also like to include this in trainings for advocates and community members, as well. As with the previous section, sustainability continues to be an area where growth is needed.”
• “This area is one where we are committed to being more intentional about our staff’s ongoing education in these areas. It can be a delicate balance for a staff that is majority Black—balancing and knowledge, skill building and avoiding traumatization”
• “RE: Training and opportunities for continuous learning.. we do offer but it’s not executed well”
• "I think we've acknowledged the need to provide ongoing training to staff and board members but have not yet put it in action. I also think that we are intentional to engage community in our work but have opportunities to institutionalize this and routinize this so it is a regular part of our operations.”
• “The efficacy of these efforts vs. their existence are two different questions.”
• “We aren't fully connected to folks doing the work to facilitate a training. We did a racial justice training in 2018 that left staff of color feeling left out because the facilitator was White and then were asked to identify our own facilitator which felt well-intentioned but also unjust because it's 2023 and we never identified someone. Our org is going through a lot of internal transition but this is one loose thread that I think it will unravel our other attempts to solidify our collective understanding for community if we don't come to an alignment as staff.”
• “We have done some trainings with staff and our Board with regards to racial justice, but it is not clear to me how much that will continue. Will new staff be provided with DEI training? Will the Board continue to receive this training? I know there is personal commitment from leadership around this topic, but I don't know if there is a low plan.”

Lack of racial diversity (not consistent across organizations)

Examples of qualitative comments are below:

• “Despite having a racially diverse staff, we have a small number of black staff and even fewer volunteers, compared to our membership. Especially not many black women or black queer people.”
• “I've only recently started (first week), but I think that the quality of services to Black and Brown communities would improve if there were more Black people, Latinx people, Indigenous people, hired at our office, (the office seems to be overwhelmingly white). I think that people have the best knowledge and info on their own communities. The reality is that the office is mostly white though so we should be able to provide the best services we can to Black and Brown communities, so I think extra trainings on anti racism, specific oppression different groups face, subconscious biases etc, would be helpful…”

• “…We have room to grow in hiring providers who reflect those we serve, especially for medical services and at certain sites. There is a particular lack of Black medical providers at our clinics…”

Inconsistent mentoring

44% of respondents believe their organizations are in a state of inaction with regards to providing continuous mentoring opportunities for staff. The qualitative results reveal that when mentoring does occur at participating organizations, it is often siloed to particular teams who provide mentoring. These results are indicative of a patchwork approach to offering mentoring at our organizations and this is an inequitable reality that does not afford benefits to all Black staff at our organizations.

Examples of qualitative comments are below:

• “As a leader of a department, I do this with my staff, but I'm not sure if other departments/teams are doing this. My sense is they do not. But I could be wrong.”

• “I don't believe mentorships and connections to wellness resources have been considered but further guidance would be needed.”

• “Our onboarding needs work across the board. Our recruiting seems to strongly prefer work experience over lived experience, particularly in entry-level roles, which creates barriers to entry. We need to have more intentional effort around culture of mentorship and making sure new hires have what they need to be successful in their roles.”

Inconsistent application of language justice

Examples of qualitative comments are below:

• “There are plans underway to translate paperwork into languages that will make information more accessible to migrant (POC) communities.”

• “I answered unsure because not all of our site or resources are translated into spanish... I also wonder about other languages.”

• “I haven't ever seen anything from [redacted] translated into another language. I know we have Spanish speaking clients and bilingual English/Spanish speaking staff but it seems like that effort is only to fulfill grant requirements not as an attempt at inclusivity"

• “…Particularly around language, an area that we struggle with is language justice, particularly for folks with whom English is not their first language…”
Salary and wage justice

Examples of qualitative comments are below:

- “…I don’t believe there is anything in our strategic plan around wage equity or economic justice.”
- “The salary ranges also do not support any individual being able to sustain their lifestyle equitably…”
- “our pay equity is abysmal…”
- “…a number of staff members were not fairly compensated for their position…”
- “For the question about providing livable wages, I believe we do provide livable wages, but I’m not sure the reason we do it is to engage in economic justice.”

Culture of care and wellness for Black staff

51% of respondents across participating organizations believe their organizations are in a state of inaction in providing emotional wellness resources for Black staff to create an atmosphere of communal care. Half of those respondents reported being unsure of their organization’s wellness offerings to Black staff. The quantitative data is well supported by qualitative responses, which revealed that creating an atmosphere conducive to the holistic wellbeing of Black staff has not been prioritized in a meaningful way for organizations.

Examples of qualitative comments are below:

- “the question about emotional and wellness resources really underscored a need in our org”
- “I don’t believe mentorships and connections to wellness resources have been considered but further guidance would be needed.”
- “We just changed our benefits to include access to free virtual mental health visits with no number of visits cap, as well as a health insurance option that for our lowest paid staff is free. In addition, we changed our EAP provider which has an easier to use platform. Some items on this section, like hiring and org culture, are in planning stages or have had deadlines extended to account for HR capacity issues.”
- “This is an area where things are in practice that center staff holistic wellness that need to be better captured in policy to ensure that they are sustained.”
- "We provide emotional health services and/or connections to wellness resources for staff who work on racial justice issues, particularly Black staff and staff of color, to cultivate an atmosphere of communal care in our organization. " Black staff yes, the rest of us who are minorities, no.”
- “Not certain what policies would look like that center PLWHIV. But definitely desire for policies to be inclusive and considerate of wellness needs of all staff (without “othering” staff who are living with HIV)”
### Appendix 3: Aggregated Scores by Category

<table>
<thead>
<tr>
<th>Rediness Step</th>
<th>Data collection and use</th>
<th>Partnerships</th>
<th>Education and awareness</th>
<th>Workforce strengthening</th>
<th>Direct service</th>
<th>Policies and procedures</th>
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<td>28%</td>
<td>14%</td>
<td>33%</td>
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<td>65%</td>
<td>72%</td>
<td>72%</td>
<td>86%</td>
<td>67%</td>
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</table>
### Appendix 4: Aggregated Percentage Scores for Each Readiness Step

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<th>Readiness Step</th>
<th>Data collection and use</th>
<th>Partnerships</th>
<th>Education and awareness</th>
<th>Workforce strengthening</th>
<th>Direct service</th>
<th>Policies and procedures</th>
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</thead>
<tbody>
<tr>
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<td>23%</td>
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<td>7%</td>
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<td>Pre-contemplation</td>
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<td>4%</td>
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<tr>
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<td>6%</td>
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<tr>
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