



Centering Resources and Approaches in Cultural Knowledge: Exploring Connection Among Health Departments and Communities Served

BY PHIG PARTNERS



SHAPING TOMORROW'S PUBLIC HEALTH TODAY.

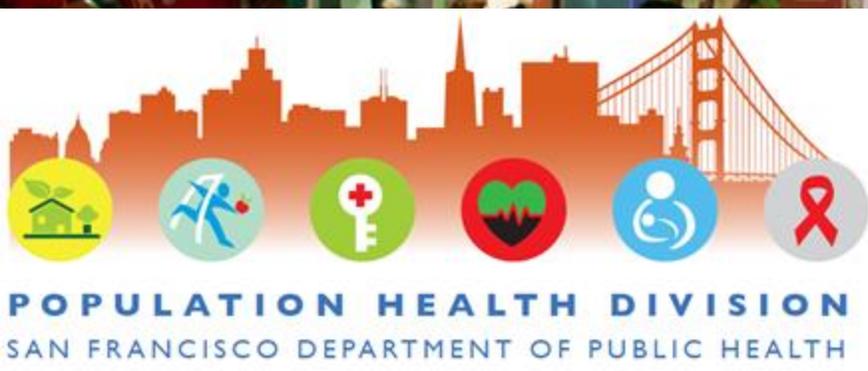
The Enduring Legacy and Evolving Impact of Promotores in San Francisco (SF): From Community Tradition to Public Health



Berta Hernandez, PhD (Center for Learning & Innovation)

Vincente Cordero, MPH (Office of Equity and Community Engagement)

San Francisco Department of Public Health
Population Health Division



Land Acknowledgement

The Population Health Division acknowledges that we are on the unceded ancestral homeland of the Ramaytush Ohlone who are the original inhabitants of the San Francisco Peninsula.

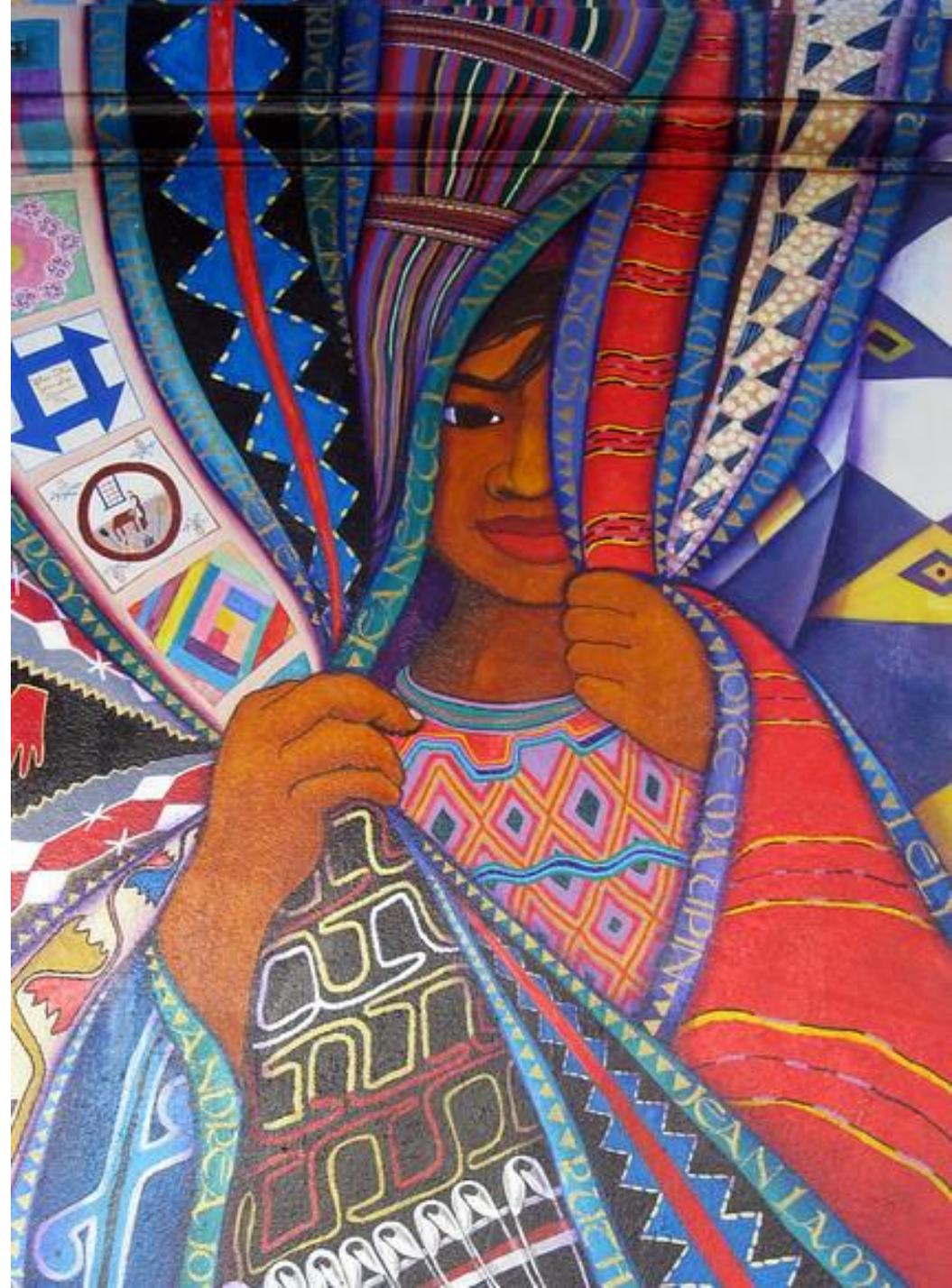
As the indigenous stewards of this land and in accordance with their traditions, the Ramaytush Ohlone have never ceded, lost nor forgotten their responsibilities as the caretakers of this place,

We pay our respects to the Ramaytush community and pledge our commitment to participate in the process of dismantling ongoing legacies of settler colonialism and recognize the hundreds of indigenous nations that continue to resist, live, and uphold their sacred relations across their lands.



PROMOTORES

- Promotores are trained community health workers that serve as a liaison between health and social services and their community
- They share common language, culture, and life experiences with the communities they serve, allowing them to build trust and effectively communicate health information and resources to individuals who might otherwise have difficulty accessing them.





Honoring Roots and Building Bridges



Pre-Contact Complex Health Care Systems

- Community based healthcare
- Holistic approach to health
- Trusted community members
- Extensive herbal knowledge
- Empirical observation and experimentation
- Surgical practices
- Spiritual and ritualistic practices





A Historical Tapestry: The Enduring Tradition of Community Health in Latin America

- From colonization to the wars of independence
- Mexican Revolution
- Cuban Revolution
- The 60's and beyond



The Emergence and Evolution of Promotores in US: Bridging Divides

The first formal community health worker programs in the United States were established in 1950 as a strategy to deliver accessible health resources to communities not being served by the traditional medical system, specially in the border with Mexico and in agricultural areas.



Promotores' AIDS Pandemic Work



Promotores' COVID-19 Work



The COVID-19 Pandemic: Innovation and Recognition

- SF Latino community experienced highest rates of infection, hospitalization, and mortality during Pandemic
- SFDPH and community orgs initiated formal Promotores Network in response
 - Contact tracing/case investigation
 - Culturally responsive health promotion
 - COVID-19 testing and vaccine access

CORONAVIRUS ESPAÑOL, HEALTH

Covid-19: San Francisco's Latinxs are infected at higher rates than Latinxs in harder-hit cities



SAN FRANCISCO

Coronavirus hits San Francisco's Mission District hardest of all city neighborhoods



San Francisco Promotores Referral Network wins APHA Community Health Workers Award



The Public Health Infrastructure Grant: Sustaining and Amplifying Impact



Framework has shifted from pandemic response to enhance capacity of promotores



Promotores Community of Practice (CoP)

- Collaboration between OECE and Center for Learning & Innovation
- Funded through PHIG
- Programming includes:
 - Wellness and trauma informed care projects
 - Leadership development
 - Informational sessions
 - Strategic coordination
 - Workforce development
- **Goal is to increase engagement and trust between staff**



and promotores

SF LATINO COMMUNITY

- Latinos comprise 16% of the total population of SF
- Mexican (7%)
- Central American (7%)
- South American (2%)
- Over 43,000 are undocumented



Promotores Distress Amid Immigration Actions

Current situation:

- Increased fear and anxiety
- Fear of public charge
- Overdose risk
- Reduced access to and knowledge of resources

Needs and Challenges:

- Vicarious trauma and emotional burden
- Lack of organizational support
- Need for mental health aid
- Desire for safe spaces and peer support

Immigrants fearful as ICE nabs at least 15 in S.F., including toddler
Detainees transported to facility in Texas after major enforcement action

NEWS ►
San Francisco drag queen Hilary Rivers detained by ICE after asylum hearing

'I don't want to be detained by ICE:' Fear permeates S.F. immigration court
Court staff 'shaking and in tears' after ICE agents drove through protesters last week

The SF migrants retreating from public life under Trump

'Like a legal guardian': SF immigrant parents turn to summer camp counselors for critical help

Immigrants carry passports ahead of potential Bay Area crackdown



2024 Promotores Leadership Conference



Primera Conferencia Anual de Promotores de San Francisco
Promotores de Salud facilitando el bienestar comunitario
21 de Septiembre, 2024

Informational Sessions

- Held virtually
- Latest evidence-based information for dissemination
- Space for promotores to share out their own resources

Info Session Topics:

- Measles
- Office of Civic Engagement and Immigrant Affairs
- Asylum Seekers Health Program (SFDPH)
- Public Charge
- Family Emergency Planning



The flyer features a header with the San Francisco Department of Public Health logo, including icons for various health and community issues. The main text is in Spanish, inviting all promotores to a monthly session. It lists topics such as emergency family planning and public charge. The date and time are specified as August 1, 2025, from 12:00 to 1:00 p.m. Zoom and contact information are provided at the bottom.

POPULATION HEALTH DIVISION
SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH
OFFICE OF EQUITY AND COMMUNITY ENGAGEMENT

¡LLAMADO A TODOS LOS PROMOTORES!
Únete a nosotros en la sesión informativa de este mes

Reúnete con otros miembros de la Red de Promotores de San Francisco para una sesión mensual atractiva e informativa.

- Presentación sobre Planificación Familiar de Emergencia con Guadalupe y Amparo de PODER.
- Mantente al día con las últimas noticias, pautas y oportunidades del Departamento de Salud.
- ¡Trae tus recursos, anuncios e información para compartir con el grupo!

Fecha: 1 de agosto de 2025
Hora: 12:00 a 1:00 p.m.

Enlace para Zoom: <https://us02web.zoom.us/j/81004698787>

Preguntas: oece@sfdph.org

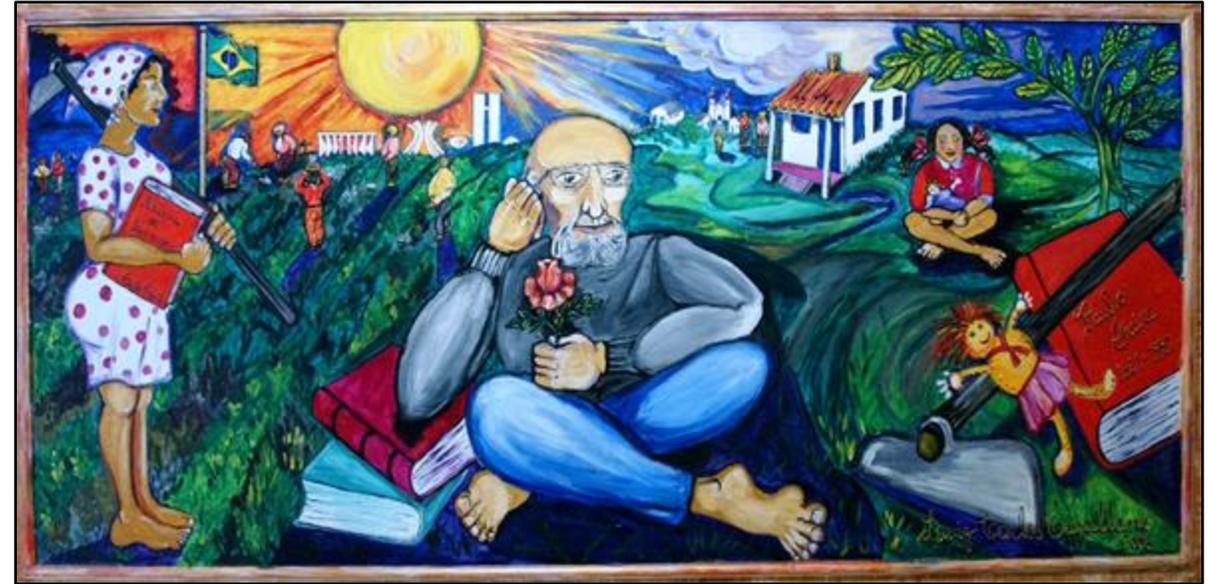
Wellness Groups

- To address promotores needs related to burnout and to foster self-care
- Other DPH staff attend to support and highlight programs
- Wellness Retreat being planned for this fall
- Working to identify clinical support



Popular Education Seminars

- Includes a small cohort of promotores from different community orgs
- Focuses on educating promotores on *Pedagogy of the Oppressed* by Paulo Freire
- Serves to build their capacity to engage community
- Most recent cohort graduated in June



Reencuentro y Bienestar

"I felt full of energy, heard, safe, and very grateful"



"Being able to share feelings and hear nourishing words was a great gift for my being".



"It especially helped me lessen the feelings of social insecurity we are going through."



"A beautiful experience, a thousand thanks."





A Model for Sustainable Community Engagement and Health Equity

The success of this initiative underscores the importance of:

- Valuing community strengths and traditions
- Investing in the capacity and wellbeing of health workers
- Building genuine partnerships between public health agencies and community-based organizations
- Adopting a long-term, sustainable approach to community engagement

Thank you!

“Education is an act of
love, and thus an act of
courage”
Paulo Freire

Berta.Hernandez@sfdph.org

Vincente.Cordero@sfdph.org



MISSION CULTURAL CENTER

Tribal Workforce Cultivation Center (TWCC)

Growing Indigenous Knowledge & Relationships



Agenda Overview



01

Introduction to the Presenter via a Positionality Statement

02

The Three Sisters

03

TWCC Parallel: Gentle Twist of Three Sisters

04

Overview of the TWCC: Purpose, Features & Timeline

05

Indigenous Frameworks Intergrated

06

Tribal & Data Sovereignty

07

We need & want your input! Survey Time!



MY *Walking in Two Worlds* POSITIONALITY

- Cherokee Identity & Relational Roots: Cherokee woman, mother of four, Gigi, and relative connected to my Tribal lands & people as well as the Yuchi and Muscogee Nations—guided by ceremony at Polecat grounds and grounded in relational accountability.
- Lived Experience & Education as Medicine and Resistance: My path was shaped by loss, survival, and love—transforming intergenerational trauma into purpose and perseverance through education and community healing.
- Walking Between Two Worlds: I bridge academic rigor and Indigenous knowledge systems, ensuring data and research reflect community values, sovereignty, and ceremony.
- Relational Leadership & Purpose: As a scholar-practitioner and founder of Rising REZilience, I walk as a researcher, evaluator, and teacher-relative dedicated to reciprocity, healing, and the wellbeing of now and future generations.



Soon to be.....

Miss
Ms.
Mrs.
Dr.





Indigenous Symbolism

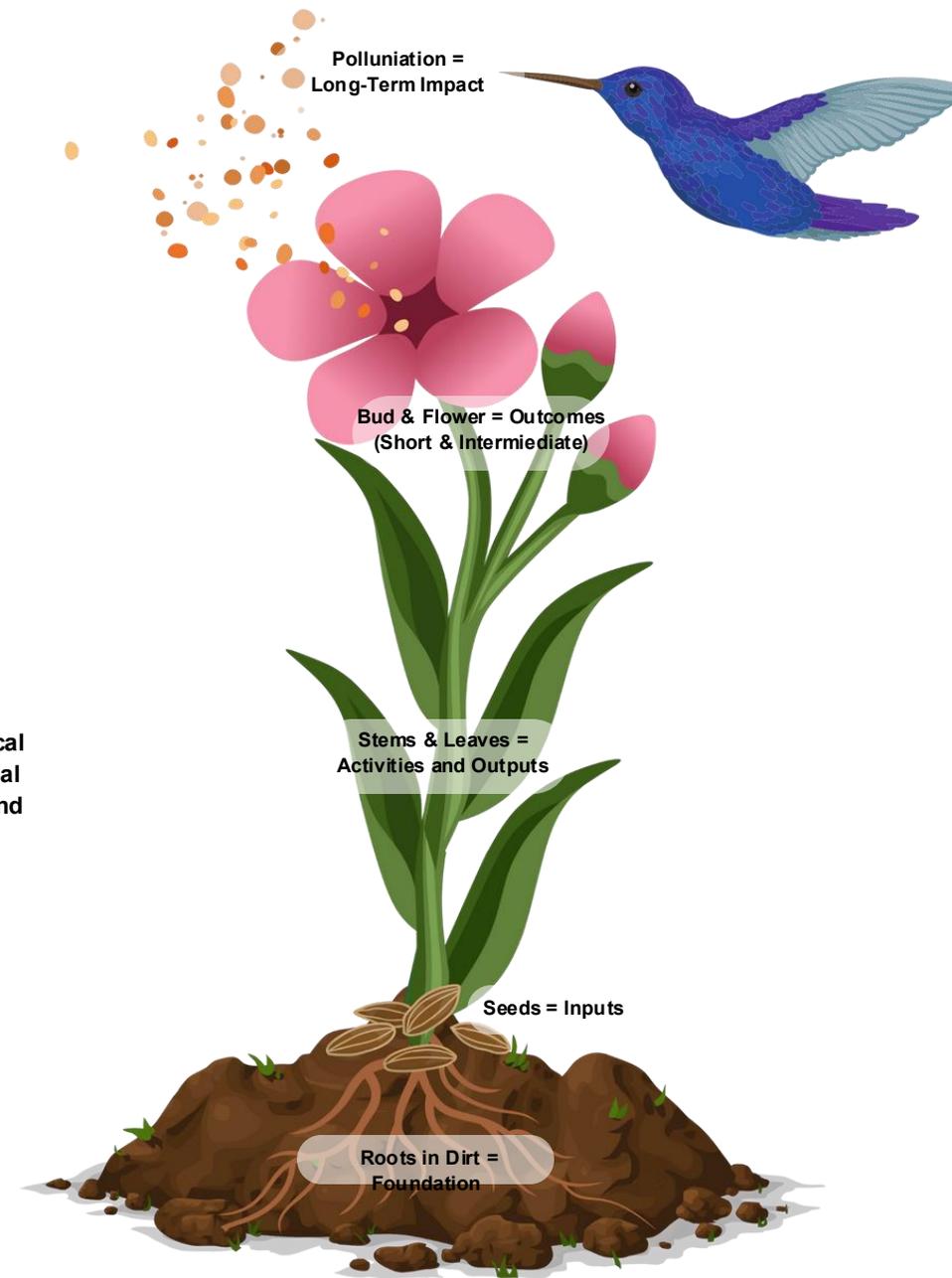
Represents: Connectivity to the earth & all living beings, rebirth, relational healing, sustainability, and intergenerational renewal.

Represents: Emerging beauty, realization, health, strength and sharing of gifts.

Represents: Action, growth, and learning that is reciprocal in nature, conducted with mutual respect, relevant to Tribal communities, recognizes Native history & sovereignty and (re)powers Tribal communities.

Represents: Hope, vision, reclamation of the Native narrative and the beginning of new knowledge & life.

Represents: Ancestral knowledge, cultural teachings, land-based healing, and Indigenous sovereignty.



TWCC Parallel

Parallel: Future Tribal public health leaders equipped to teach, train, and regenerate systems, PHIG recipients informed & educated about Tribal public health, Indigenous knowledge & being, both groups coming together to make exponential impact in health & well-being.

Parallel: Expanded Tribal PH workforce, Culturally educated & informed PHIG HD workforce, Strengthened partnerships & collaboration between Tribal PH & PHIG recipients, Increased retention, Strengthened career pathways.

Parallel: Building & growing the TCC Resource Hub, Gathering and curating culturally grounded training providing unique Indigenous learning pathways, developing interactive maps to inform, connect people & provide a Knowledge Growers hub.

Parallel: CDC/NNPHI funding, Rising REZilience facilitation, Tribal Public Health & PHIG HDs synergistic relationships, and vision for TCC.

Parallel: Grounded in Indigenous epistemology, partnerships & collaborations with HDs, efforts nourished from Indigenous traditions & wisdom.

Overview of the Tribal Workforce Cultivation Center (TWCC)

The TCC is an initiative under the National Coordinating Center for Public Health Training (NCCPHT) at the National Network of Public Health Institutes (NNPHI).



This initiative aims to strengthen public health systems through:

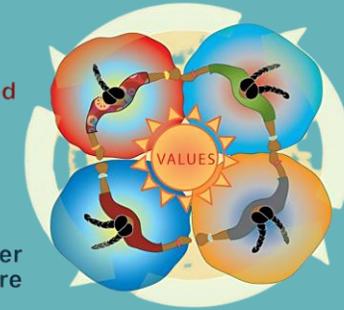
1. Relationship building

2. Reciprocal knowledge exchange



Resilient and strengths-based

Community is created wherever Native people are



Centering of the community

Decolonizing data

3. Collaborative infrastructure development between Local and State health departments (HDs), Tribal Nations and Tribal public health organizations.



4. Support both emerging and experienced public health practitioners who serve Native communities.

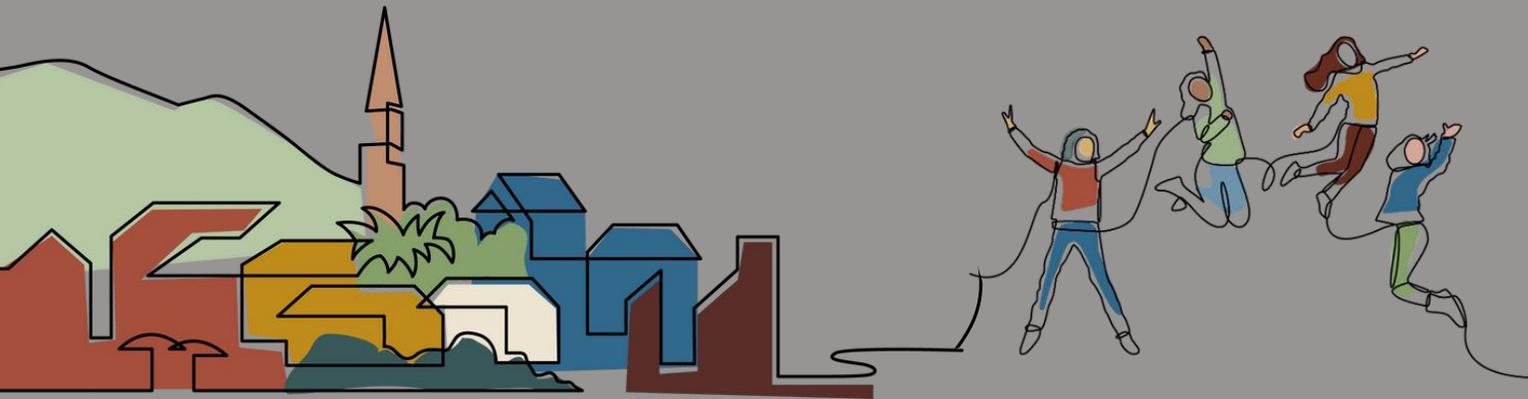
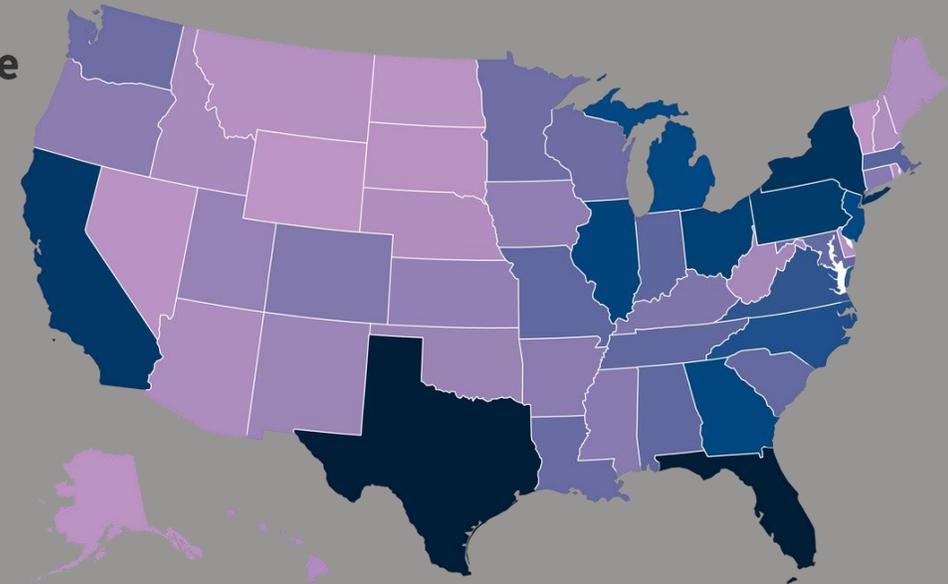


Funded by the Public Health Infrastructure Grant (PHIG)

The TCC is funded by the Centers for Disease Control & Prevention's (CDC) PHIG funding, a five-year investment from 2022 to 2027 that supports health departments in expanding their workforce and modernizing their infrastructure.



Public Health
Infrastructure
Grants Workforce
Funding by
State Recipient

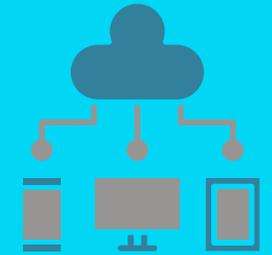


Core Features of the TCC



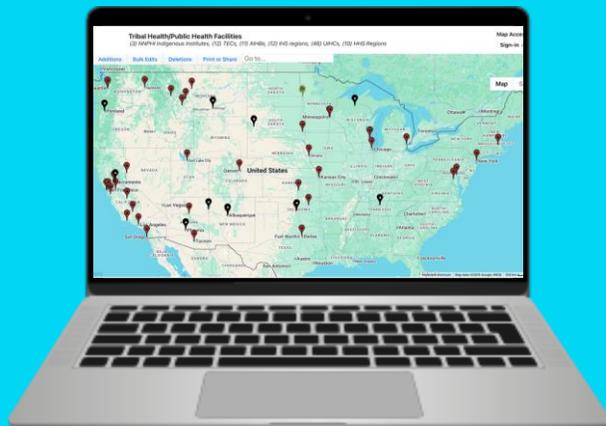
1. Online Resource Hub

- **What it Offers:** Centralized digital platform housing resources for Tribal public health professionals and HDs.
- **Why it Matters:** Enables equitable access to tools and guidance; encourages cross-sector collaboration.



2. Menu of Virtual Trainings and Learning Pathways

- **What it Offers:** Training on public health core competencies taught with a Tribal lens, including culturally respectful engagement strategies featured on the NNPHI Public Health Learning Navigator platform.
- **Why it Matters:** Provides culturally relevant, skill-building opportunities for both Tribal and non-Tribal practitioners.



3. TCC Interactive Map

- **What it Offers:** Displays Tribal Health Departments, Tribal Epidemiology Centers, and Indigenous Health Programs with contact information.
- **Why it Matters:** Promotes outreach and relational bridges between HDs and Tribal partners; lifts visibility of Indigenous health systems



Additional TCC Features

4. Learning Opportunities for Tribal Public Health Professionals

- **What it Offers:** A directory of certifications, training programs, and continuing education tailored for careers in Tribal public health.
- **Why it Matters:** Facilitates professional growth, workforce retention, and long-term sustainability in Tribal communities.



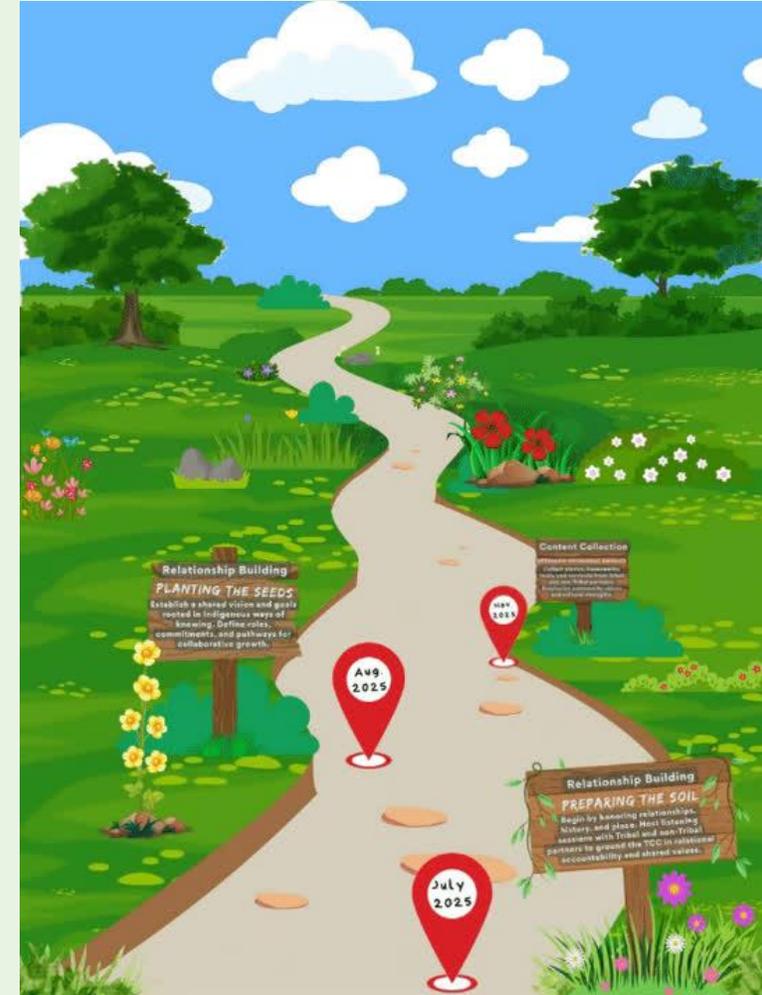
5. Tribal Public Health Knowledge Growers Hub

- **What it Offers:** A curated network of Indigenous public health leaders, mentors, and advisers.
- **Why it Matters:** Encourages peer learning, mentorship, and knowledge exchange; fosters cross-sector trust and collaboration.



Timeline for the TWCC

Month	Phase	Theme Title	Logic Model Alignment	Description / Intent
July 2025	Relationship Building	“Preparing the Soil”	Inputs: Partnerships, Leadership, Core Team	Begin by honoring relationships, history, and place. Host listening sessions with Tribal and non-Tribal partners to ground the TCC in relational accountability and shared values.
August 2025	Relationship Building	“Planting the Seeds”	Activities: Partner engagement, Governance formation	Establish a shared vision and goals rooted in Indigenous ways of knowing. Define roles, commitments, and pathways for collaborative growth.
November 2025	Content Collection	“Gathering Knowledge Bundles”	Activities: Content development, Data gathering	Collect stories, frameworks, tools, and curricula from Tribal and non-Tribal partners. Emphasize community voices and cultural strengths.
February 2026	Pathway Design & Development	“Cultivating Pathways”	Outputs: Resource hub structure, Training roadmap	Build out the TCC platform and curricular pathways. Organize training modules, mentorship connections, and resource categories with cultural responsiveness.
May 2026	Website Review	“Nurturing the Infrastructure”	Short-Term Outcomes: Validated structure, Trust building	Conduct internal review of platform functionality and alignment with cultural and accessibility standards. Invite feedback from early advisors.
August 2026	Website Testing	“Walking the Path Together”	Activities: User testing, Pilot engagement	Launch beta testing with cross-sector users. Document feedback loops and ensure the platform supports Tribal public health growth and mutual learning.
November 2026	Wrap-Up & Dissemination	“Harvesting the Knowledge”	Outcomes: Knowledge-sharing, Workforce strengthening	Celebrate the TCC as a living cultivating center. Share impact stories, launch the public version, and initiate seeding efforts for future training and replication.



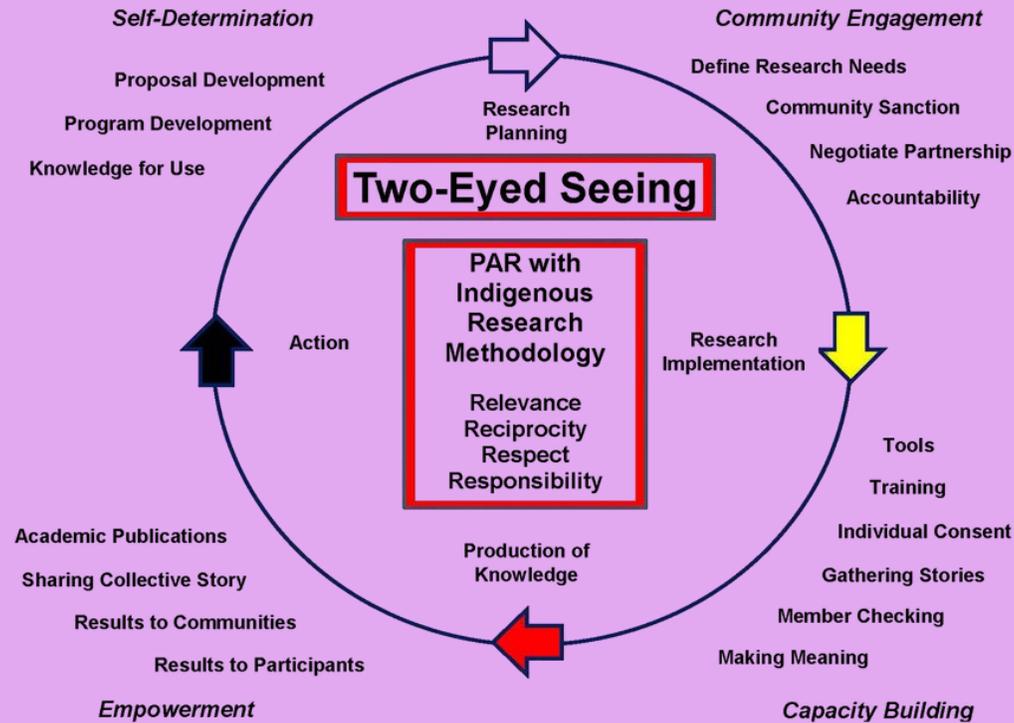
Indigenous Frameworks

Two-Eyed Seeing
(Etuaptmum)

k)
Two-Eyed

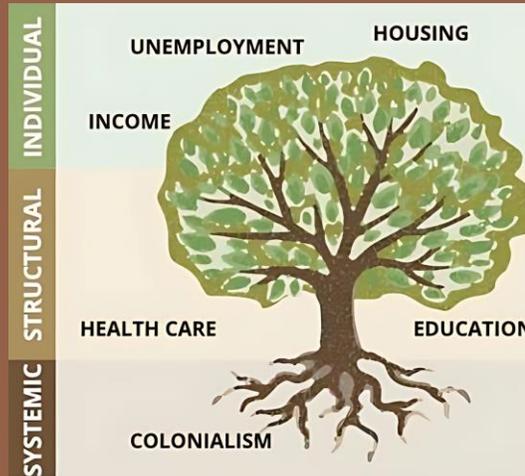


Seeing



Indigenous Frameworks

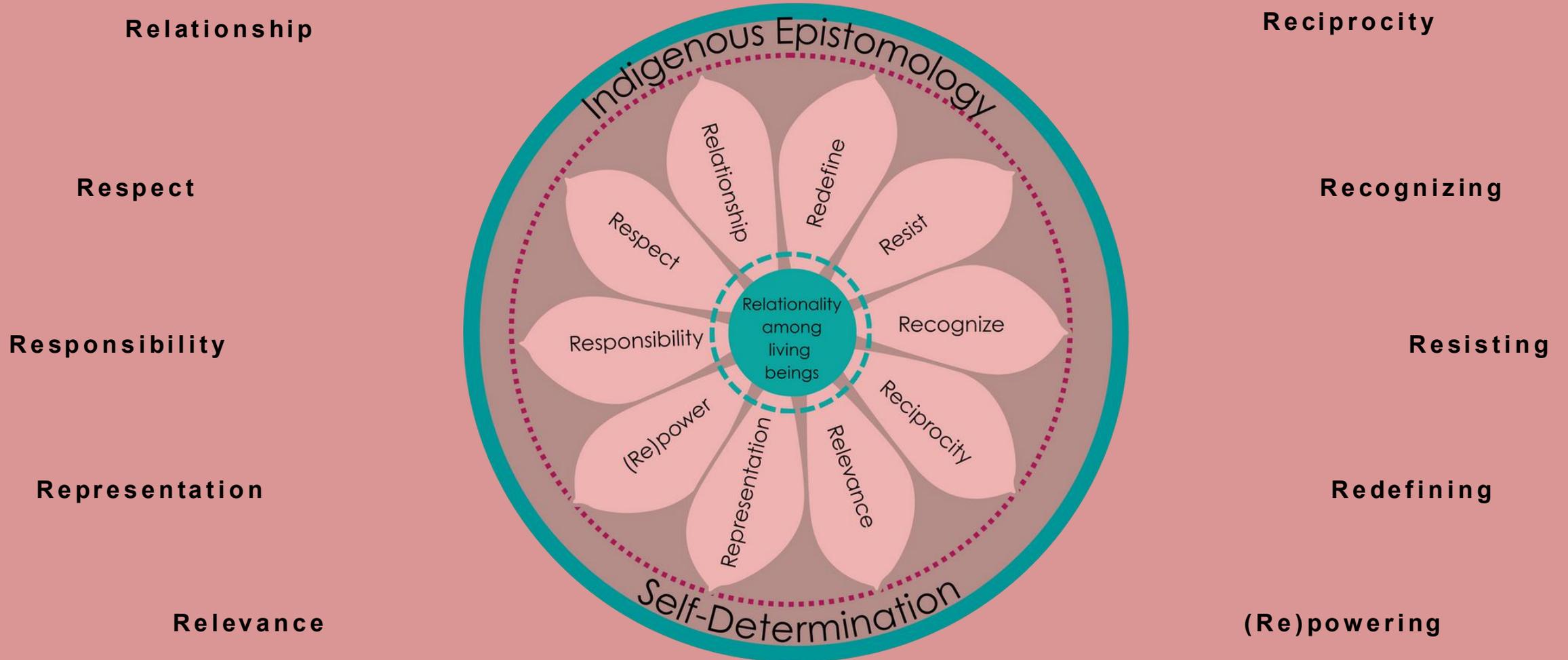
Indigenous Social Determinants of Health (ISDoH)



ISDoH	Descriptions
1. Historical	The impacts of colonization, forced displacement, forced assimilation, and cultural erasure.
2. Cultural Determinants	The importance of cultural identity, language, traditions, and spirituality in maintaining well-being.
3. Indigenous Knowledge & Education Determinants	Ways to process, understand, teach, and take collective actions (Gone 2019). Ways to be in community, including but not limited to benefiting from prayer, mutual aid, togetherness, cultural connectedness, and other shared experiences that support wellness (Straits et al., 2019).
4. Sovereignty & Political Determinants	Indigenous governance, self-determination, and the right to shape policies.
5. Resource Access & Stewardship Determinants	Ability to access, manage, and benefit from natural, cultural, and societal resources (land, water, food, medicines). Connects the idea of the economy to land and relationality, rather than money alone.
6. Relational Determinants	Family and community support systems, including kinship networks, both human and non-human.
7. Ecological Determinants	Interactions between living beings and the environment. How humans and non-human beings coexist, impact, and interact with one another.
8. Health & Healing Systems Determinants	Access to culturally appropriate, community-driven health services including the role of spirituality, ceremonies, and sacred practices in promoting well-being.
9. Psychosocial Determinants	The impact of historical trauma, mental health, substance use, and suicide rates.
10. Structural, Systemic & Racial Determinants	Access to resources and consideration of various factors such as historical trauma, exposure to racial discrimination, and microaggressions based on skin color and/or Tribal membership (Lewis et al., 2023).
** Seven Directions influenced model (Parker et al., 2023)	

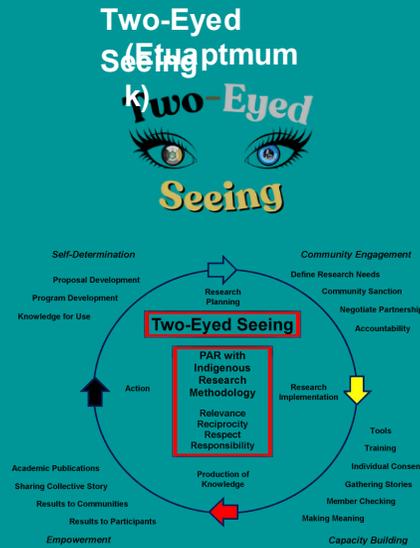
Indigenous Frameworks

10 Rs of Indigenous Research & Practice



Indigenous Frameworks

The TCC will center Indigenous paradigms and concepts:



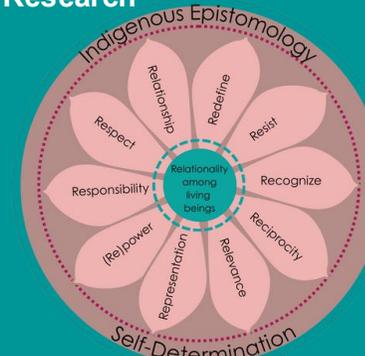
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** Seven Directions influenced model (Parker et al., 2023)

10 Rs of Indigenous Research



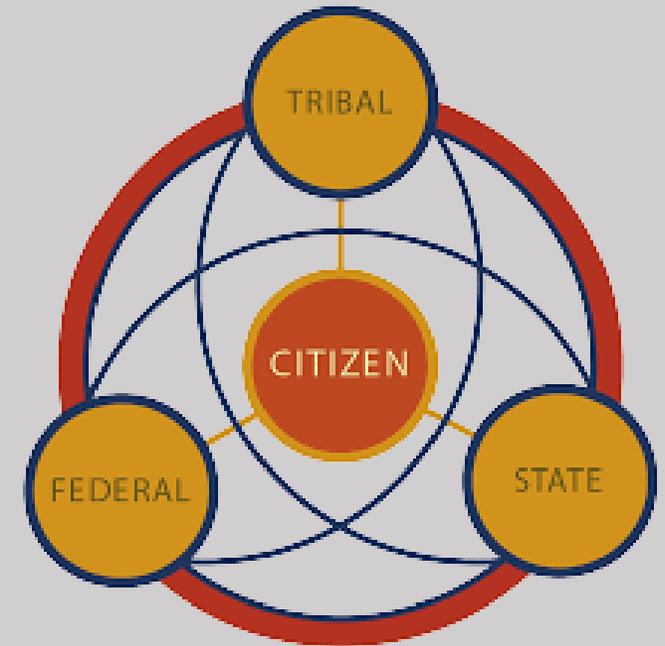
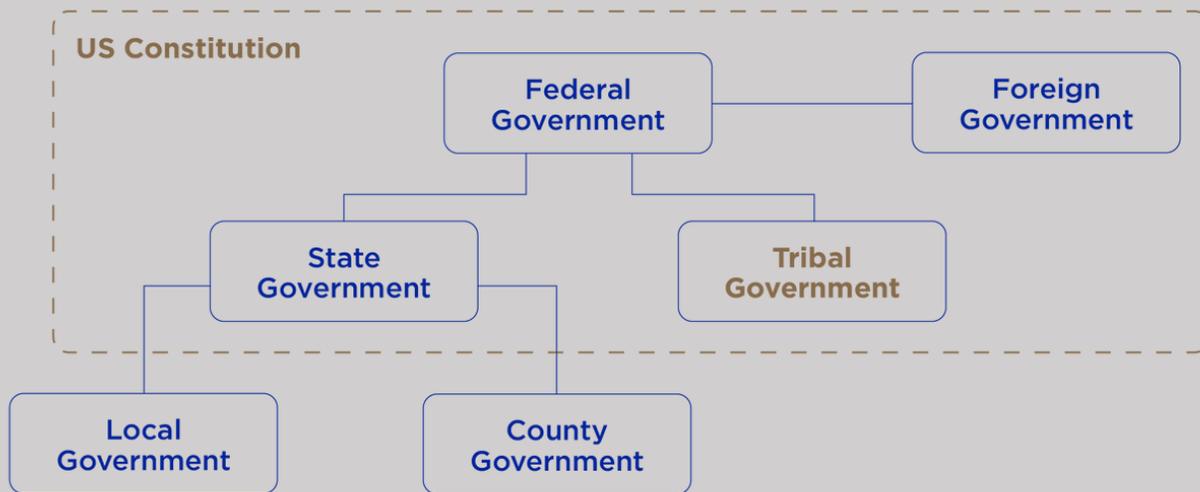
Why it Matters: Understanding Indigenous frameworks helps Tribal and non-Tribal public health professionals build respectful, culturally responsive partnerships, address root causes of health inequities, and promote outcomes that are not only effective but deeply resonant with Indigenous worldviews.

These outcomes carry the spirit of Indigeneity: they reflect our stories, honor our ancestors, and make space for future generations. When Native people can see themselves, their values, and their knowledge systems embedded in public health efforts, trust is restored, healing begins, and true transformation becomes possible.

Tribal Sovereignty

Tribal Nations are Recognized Sovereigns

The US Constitution explicitly recognizes four sovereigns:



Tribal/Indigenous Data Sovereignty



Next Steps for Health Departments

Let us know what you would like to see reflected in this resource to support relationship building between your health department and Tribal health:

- Complete a brief survey (link/QR code)



Wado, Mvto, s@nIAk'ayasOTa (Thank you)!



3rd Year
PhD Student

Rising REZilience; LLC:
Laura Sawney (Relational Leader)

 [laura.sawney@risingrezilience.c](mailto:laura.sawney@risingrezilience.com)

 [om
https://www.risingrezilience.com](https://www.risingrezilience.com)

 [www.linkedin.com/in/laurasawne](https://www.linkedin.com/in/laurasawney)

 Broken Arrow, OK



NNPHI:
Upama Aktaruzzaman (Project Lead)
uaktaruzzaman@nnphi.org



NNPHI:
Garlie St. Cyr (Project Support)
gstcyr@nnphi.org



Thank you for joining us today!

What's Next

- Take a movement break.
- Check the Schedule tab on the event platform for your next session.

