COLLECTIVE IMPACT PANEL SERIES

CROSS-SECTOR LEADERSHIP & HEALTH EQUITY

Guest: Tashia Carter, MA, BBL, Collaborative Community Coordinator, Henry Ford Allegiance Health

Guest: Megan Albertson, MPH, Population Impact Project Manager, Henry Ford Allegiance Health

Guest: Dan Duncan, MSW, Senior Consultant, Clear Impact, LLC

Guest: Phoebe Kulik, MPH, CHES, Director of Workforce Development, Region V Public Health Training Center

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Region V Public Health Training Center University of Michigan School of Public Health 1415 Washington Heights Ann Arbor, MI 48109-2029 rvphtc.org | rvphtc@umich.edu **Laura Power (LP):** It's a pleasure to be here and to moderate the panel today with our focus on leadership for cross-sector collaboration. This panel was created through the work of the Region V Public Health Training Center, which is part of the National Public Health Learning Network, and it aims to strengthen the skills of the current and future public health workforce through continuing education and student development. I'm Laura Power, Clinical Assistant Professor here at the School of Public Health, the University of Michigan, and part of the Region V Public Health Training Center team. So I'm especially excited about today's discussion, because we'll get to hear from three experts; Tashia Carter, from Residents in Action; Megan Albertson and Dan Duncan, who have extensive experience in leading and collaborating in community partnerships.

LP: And this type of work is very important to interprofessional practice and aligns with the Public Health 3.0 model, which emphasizes the need for cross-sector collaboration and leadership to address the complex problems of today. So through our discussion today, we are hoping to describe approaches to cross-sector leadership, such as using the collective impact model through real-world examples to demonstrate some of the skills needed to work effectively with partners, and to describe the way cross-sector leadership can facilitate equity and anti-racism in collaborative partnerships. It's a lot to cover, and we've got a great panel to help us get through this today, so thank you for being here Tashia, Megan, and Dan. For our audience, we do welcome your questions and your comments, and we'll use the chat feature for that. We'll take some time later to really take time for our guests to answer your questions. So first, I'll start by asking each of our panelists to take about three to five minutes or so to introduce themselves and their work. Tashia, could I start with you? Could you start us off by introducing yourself, your work, and maybe an approach to collaboration you find especially important to your work?

Tashia Carter (TC): Oh, hello, my name is Tashia Carter. I am the Community Project Coordinator in Prevention and Community Health at Henry Ford Allegiance Health here in Jackson, Michigan. But I'm really here to represent my butterfly work, and that is my community organization and the work, boots on the ground work, in the community. I was born and raised in Jackson, Michigan, and I'm deeply connected in the community. I'm very involved with grassroot initiatives. I founded a local group called Residents in Action, which is a group of community influencers, and I'm a member of a women's group called Partial to Girls, both of which have been instrumental in boots on the ground community work.

TC: My professional background carries more than 25 years of experience serving in multiple capacities in the healthcare industry, managed care, process improvement, operational performance, community organizing, and authentic engagement. I have a Bachelor's Degree in Business Leadership and a Master's Degree in Organizational Management. I'm excited today to discuss the paradigm shift that is occurring in Jackson



with resident-led work. And when I refer to resident, that is the citizens, the people who live in the community, them working and driving positive change. And my approach is collaborative, keeping the resident community voice front and center. I promote more than authentic engagement, but the concept of being a change agent which places accountability and promotes a sense of agency for the people to lead their own change.

LP: That's great. I was actually gonna ask a quick question. Maybe you could help us set the stage and tell us a little bit about the community of Jackson? I'm not sure how familiar our audiences with Jackson. Could you tell us a little bit about it?

TC: Okay, Jackson County is about 160,000 people. The city has under 30,000. The Black population is about 21%, and a lot of the statistics are grim, to say the least. 75% of the kids there are living in poverty. We do have... On the professional side, we have a network of collaborative professionals who have been working, and their focus has really in the last five to 10 years stemmed towards focus on equity and authentic community engagement. So we're moving in the right direction, but... And I think with me being on the side of the residents, pushing that side so that we can bridge the gaps, I think we'll get there.

LP: Great, well, thanks for helping us set the stage as I think we'll hear some examples from Jackson, so that will just help us know a little bit more about the community. So welcome. And Megan, how about you? Why don't you introduce yourself, some of your work, and then maybe reflect on your approach to collaboration?

Megan Albertson (MA): Sure. Tashia, I'm impressed that you pulled off so many statistics. She asked that question, and I was like, "Oh, I don't know what I'll tell her." 160,000, end of list. You're all invited to drive 45 minutes West of 94, and you'll find us. Yeah, my name is Megan Albertson. I have a Mathematics Degree and a Master of Public Health Degree, both from Michigan. I graduated from The School of Public Health and HMP in 2010, and I spent the last 10 years working at the Department of Population Health at Henry Ford Allegiance in Jackson. I do kinda two separate types of work. One, I work within our clinically integrated network in transitioning our reimbursement to pay for value models. And on the other side, I work in the community with folks like Tashia, trying to develop our capital absorption capacity so that new local resources can actually get to the folks in Jackson who need and deserve them. And so, again, for that, I'm always really happy to work with Tashia. She does a lot of amazing community work, the stuff that's really started to save our community and turn it around. That's always a good part of my day, so I'm glad she's on here with us.

MA: So in thinking about, I guess, a value or governing principle, I try to think of my work as focused on justice. And right now, as we know, every major system in the US, health, education, finance, criminal justice, produces huge disparities, specifically racial disparities.



And so our work right now, rightfully prioritizes equity, because for now, today, we need vastly disparate methods to support folks depending on their melanin level. But it can't always be this way, so for me to hold justice as a central value is to commit to re-designing those systems so that this kind of equity variance that we work in is minimized. Equity is what allows folks to succeed in an inequitable system, but justice is an equitable system. And so in Jackson, I like to think that we use collective impact and similar tools that engage various stakeholders and collaborative design as a way to create those just and equitable systems. And as...

MA: Tashia's right, it's a paradigm shift. It's a much different model then I think what I grew up learning about. Complex adaptive system, Complexity Theory, there are a lot of different types of sciences and theory and methodology that we use, which has been really compelling. And I think for folks who are interested in this work, being in Ann Arbor and us working in Jackson, it's a really cool place. We've been really lucky to have a lot of folks from the program come over and intern with us and spend time with us. We're always happy to talk to folks. So I'm really happy to be here, I appreciate the opportunity talk to you all, so thanks.

LP: Thank you, Megan. And we look forward to hearing more about how we can do that, to keep justice sort of central to the work. So I think it's probably harder than it sounds, so I think that'll be good to bring that out today, so that'll be great. And, Dan, we're happy to have you here too. And I think our class may actually recognize you if they've done the prep work beforehand, watching the components of Collective Impact for Successful Cross-sector Partnerships, available on the Region V Public Health Training Center website as well. So I know they've heard a little bit about your work, but I'd still love to hear an introduction and maybe a focus about what is something that is a principle value as you think about cross-sector collaboration and collective impact.

Dan Duncan (DD): Okay, great. Thank you very much, Laura. Well, good day, everyone. And, again, Dan Duncan, and I'm a senior consultant right now with a company called Clear Impact. I've been with them for a little over five years. And before that, I had my own consulting firm. And before that, I spent about 30 years in the United Way world. And during my United Way work, clearly focused on creating collective impact opportunities before we called it collective impact, because the factors, what we do, is always still engaged in that work, and particularly around the whole idea of co-production, as I call it. And that's my other kind of hat, I'm a faculty member of the Asset-Based Community Development Institute at DePaul University in Chicago. Previously, it was at Northwestern, but we moved it to DePaul a couple years ago. And also I think helpful for this, I spent...



DD: I'm a social worker by training, although my degree is in the public policy side, the community organizing side. In social work we call it macro-practice versus micro-practice, which is the case work side that some of you are probably familiar with in social work. So I also spent about 15 years as an adjunct faculty member in three different universities, helping to teach macro-social work, public policy, and collective impact, again before we called it collective impact. But I think what really brings that together for me is my asset-based community development work, which is the whole concept of co-production. People we serve shouldn't be just seen as clients, patients, students, but be seen as and engaged as co-producers of their own in their community's well-being. Because we need them to make the change, the professionals can't do it alone. And I won't tell you that I'm actually calling you where I live from Florida where it's currently 81 degrees.

LP: That sounds lovely. Alright. Well, thank you all for sharing your introductions and your just introduction to your stories that we'll hopefully hear more about through the panel. I know our audience will learn a lot from you today. And thinking about our students in the audience here, I know they've been learning a lot about leadership styles and the characteristics that are needed for leaders and just about decision making in public health and models to use for that. So first, I just start by asking each of you to reflect on your own leadership style. And that may seem like a simple question, but maybe it depends on the situation, maybe you learned some things, maybe it's changed over time. So, Megan, let's start with you. Could you start and reflect on your leadership style?

MA: Yeah. Sure. So I think the first thing I would say is just kind of the context of leadership and acknowledging that leader, the term leader, the role leader, is really relational, which means that it varies by relationship, which means that it's not static. It's fluid. So leadership is a behavior, not an identity. And I think that's important, because oftentimes as kind of colonized folks, we're taught to believe that there are just leaders among us, that certain people are destined to lead. And that's really clearly not true, that's a specific story meant to support a specific social hierarchy. And I think we use the word leaders, I think, because we admire some of the content and the passion that folks bring to the work. But just acknowledging that oftentimes for us kind of highly-educated experts, an important piece of understanding leadership is knowing when we are not in fact leaders and when to not act as such.

MA: I just wanted to point that out lest I reinforce this myth that getting a Master's degree makes you an objective leader just wherever you go. So, that said, I would say that for me being a leader in spaces where it's appropriate for me to lead has been a lot about just unlearning the stuff I learned about what a leader was. I didn't see many female leaders when I was growing up, I didn't see any openly-queer female leaders, and I certainly didn't see any openly-queer female leaders who were just kinda



bebopping around being fu... Having fun and laughing and being joyful and hugging everyone. But that's really who I was, and that's who I wanted to be.

MA: And so for me I think as, throughout my career as I progressed, the type of leader that I aspire to be is the version of myself that allows me to really delight in my life and in the work. And I think Adrienne Maree Brown's work on pleasure activism has inspired me a lot here. Her work is about making justice and liberation the most pleasurable experience we can have. And really the social justice work, the focusing on equity, has allowed me to find a lot of pleasure in being exactly who I am in a space where that's needed. And to be honest, and maybe Tashia can talk about this too, this work is really hard, right? And it's sad, and it often feels a long way from pleasure. So for me, leading in a way that feels true and honest about who I am has brought me a lot of joy and keeps me going, and that's the type of leadership behavior that I've found I prefer in this work.

LP: That's great. I love those insights, thinking about how leadership is a behavior and not identity, and really bringing out the joy that you can have from that. And then also just thinking about role models and finding what makes sense to you, so that's really great. So I think you kinda led into Tashia then. So maybe Tashia can reflect as well and tell us about her leadership styles and what she's thought about here.

TC: Okay. Well, to me, it's all about communication and building the relationship of trust while promoting team spirit and getting the work done. Because of my personal experience, I think it's a combination of participative democratic style and coaching style and disruptive style. So I like to solicit feedback from people, to hear their perspectives and recommendations. I have been in the position where I was the one knee-deep in details and doing the work, and a superior came in, made or changed decisions without truly understanding what the job entailed and then messed up work or delayed processes. I've also, as a worker, have always been open to constructive criticism and wanted to learn how to do things more efficiently and effectively. So I think the combination of those two is what bubbles up to the top for me. But as far as disruptive leadership, I am also the one who typically asks the questions that everyone wants to ask, or the things have always been done a certain way doesn't mean it's the right or best way. Doesn't mean it's the worst or bad way either, but as a leader, I tend to challenge the normal day-to-day for process improvement.

LP: That's great.

TC: And that's hard, 'cause you have to have hard conversations, right?



LP: Yeah. Yeah, I'm glad you brought up the concept of disruptive leadership and described what that is to make sure our audience is aware of that. And I wonder if you think about which style you will use or if you just find that you naturally gravitate to one style or another depending on what the situation is?

TC: I think that's it. If you think about equity, equity is giving people what they need during those times. And so, depending on the situation, depending on the group, you need to have that ability to adjust and modify to meet the needs of the people and whatever issue you're working on.

LP: You both, Megan and Tashia, have brought out the idea just that sometimes the work is hard or can be challenging, and then the energy that might be needed to be disruptive and to be the one that's asking the questions that nobody wants to ask, I can imagine that takes a lot of energy too. So that's just something I noticed from your comment. Dan, how about you? What about your leadership style? Have you seen with your experience, what works for you?

DD: Hi. Going back to my United Way career as a United Way leader, one of the things that evolved around the Collective Impact work to make a greater difference, 'cause that was certainly our job in the community was to make greater impact, but one of the things we clearly learned is that people's lives are very complex. There's a wonderful book called Getting to Maybe: How the Real World Changed. It talks about three kinds of problems; simple, complicated, and complex. Simple problem, baking a cake, even I could do that. Again, a complicated problem, taking a rocket to the moon. A lot of steps, a lot of ingredients, but if you put it together right, 'cause they're all innate, you can get a rocket to the moon.

DD: But the world that we live in is complex, and we're dealing with people, so what worked for this family is not gonna work for the next family. What worked for this child is not gonna work for the next child. That's why we have so many dilemmas around equity and all of that. And that's why, again, schools don't always work, because we can't assume every student is gonna learn the same way. So what that evolved in for me is really a sign I had in my office around leadership that said, "Make new mistakes", and basically use data, innovate, and try new things. And so I literally told my staff, "Nobody's gonna be fired for mistakes because that's how we learn, that's how we evolve, that's how we develop the strategies that we need as we move forward." And so that was a management principle that really served me well as we looked at this complex work that we're dealing with.



LP: And Dan, to me, that sounds like you're describing an adaptive leadership style; being able to see, get the bigger picture, learn, always changing, trying to continuously improve, that's sort of what connects you.

DD: And we're being very clear that I don't have all the answers, but collectively we can come up with the answers.

LP: Yeah. So I think that's helpful just to kinda think about what the different leadership styles are and the work that you're doing. And our students can reflect on that too and see what speaks to them and what comes natural. Often our leadership styles are things that come naturally to us but then can be adapted depending on the situation. The next question, I'll think about the different tools for collaboration. And we, through this, are focusing in on one tool specifically, the Collective Impact Framework. And I know Dan introduced us to that in the online training that our audience has already watched. But Dan, could you talk a little more about Collective Impact, maybe the strengths of it and how you apply this framework, or even other tools in your work? And then we'll ask maybe Tashia and Megan to reflect on their use of this as well and maybe other tools. So Dan, I'll let you go ahead.

DD: Glad to do that. And I think the essence of Collective Impact, again, dealing in a complex world and with complex problems that we're trying to address, is that it takes partnerships to do that. No one agency, no one organization can do that, that's why they call it collective. And again, and if you read some of the early articles by Mark and John around Collective Impact, they were really focusing more on the professional side and not engaging the community as much as they now realize that they need to. And they've certainly gone back on that and have expanded that. But when we talk about Collective Impact, it's really who needs to be around the table to be effective? And it's always gonna include that the people we serve have to be around the table.

DD: And again, as I highlighted before, as co-producers of their own in their community's well-being, as equal partners around this table so that... Because we can't do it without them. So as I talked about in the previous webinar that we did, I think it's really more important than the term Collective Impact or whatever, are these key things that you can think about, and I call them components initially. And it started with a foundation based on racial equity so that we clearly understand what's causing disparities, so we clearly understand the history of this country and some of those policies and procedures, institutional racism, that are still alive and well, and if we're going to truly make a difference, we have to respond to.

DD: So we need to disaggregate data by race, ethnicity, gender at every point where we can so that we know the true story. And then once we have that data, we have to really be very



clear about what is the common purpose we're trying to achieve. And that's based on the hopes and dreams of the people we serve; not just trying to make our services or our systems better, but it's really about what do we need to do. That common purpose is that North Star that we're trying to achieve, and we have to engage people to truly understand what that is. And then, as both Megan and Tashia have already said, the importance of relationships and trust, because organizations don't collaborate. And I think this is one of the key things to truly understand, is there's not a written agreement in the world that can really help you drive Collective Impact.

DD: Because it's not about the agencies with signed agreements, it's about people, because people are who collaborate based on common purpose, relationships, and trust. And if we can't build that trust, we can't work together. I was telling the story, I was doing a training, and somebody from the for-profit world said, "Well, if they're not living up to their agreement, then why don't you just sue them?" Well, that's not what we're really about too much in this space, is suing organizations. But we have to be clear that when somebody leaves at an organization, the partnership goes to zero. You can't imagine it's gonna... You can't assume it's gonna continue the way it did yesterday, tomorrow. When key people leave, then you gotta build that relationship again and that trust as you go forward. And then the whole co-production piece, which is driven by asset-based community development, as I talked about in the webinar, of really treating everybody as co-producers so that our job becomes removing barriers so they can become effective partners in this work. And then finally, the data and accountability, which is where I bring in results-based accountability, which is a framework that can help you... Help anybody use data in a more effective way. So that's kinda for me rolling it up and kinda taking it forward from what we did on the webinar.

LP: Great. Thank you, Dan. Megan or Tashia, would you like to reflect on this framework of Collective Impact or what has worked with it, what successes or maybe missteps with it, or other frameworks that you may have used?

TC: I'll lead with this quote, and this is something that Megan says all of the time, and I love it. "Individuals fail, communities shouldn't." And so it really is the collective of the community working together, but knowing that the individuals within the community are really the drivers of the relationships.

MA: Yeah, I think Dan covered it well, and Tashia did too. It is relationships. I love the organizations don't do anything, they're just a story. They're just like a grouping of things, they're not an entity that actually acts. It's individuals doing things. And I think Collective Impact, the specific kind of capital C capital I framework that was published in 2011 was tremendously helpful for our community, because I think like Dan said, it helped us articulate some of the things we knew and gave us a working model to actually articulate to



pull into being the methods that we were using in a comprehensive way. Like things that we knew to be true, we actually... We knew like, "There is something wrong with the power here," like, "Our power's screwed-up." And if you map our power, it actually looks a lot like our money, it looks a lot like our best resources.

MA: And that overlay is something that we need to talk about. And Collective Impact helped us organize institutions, organize organizations with resources, around how to hold each other accountable in a different way. And as Dan said, and as the Collective Impact folks have identified, it did that, and it didn't do a lot of other stuff, which they later have come back and there are a lot of other models that have addressed. For us in Collective Impact, it was hugely impactful, because it opened us up to a world of methodology exploration that didn't feel like it had been available to us. And I think it also helped us learn how to find models, take what was useful to us as a community, and leave the stuff that wasn't. Because I think when you look at Jackson, one of the things that is powerful that has set us up for success is that we are just all really kind of rebellious, snotty, self-absorbed folks who live in a town that we love. And we know our community, we know it's gonna work for us, and we're totally comfortable being like, "That's not it. I like this piece, but I'm not taking that piece, because our commun... Because we decide what makes sense in our community." And I think Collective Impact was our first entry into having a more sophisticated way to evaluate the methods that we were applying.

LP: I like that idea of just taking what works, depending on the situation. Collective Impact is one of the models that's gotten a lot of attention. I think other models are sometimes talked about, the Able Change Framework; the Above the Line, Below the Line; or also MAPP, Mobilizing for Action through Planning and Partnerships. There's different approaches that can be used. For any of you, when you are getting started on some of these partnerships, you yourself as experts in this and who have thought about this, you're aware of these models and these frameworks. But when you're getting together with many different partners, they may or may not be aware of the frameworks that you're working with. How do you bring that out? Like here I know I've got this model I wanna follow, but how do you help implement that if you think it's important? So I'll let any of you comment on that.

TC: On the non-professional side, and really when you're working with residents and citizens, it's not really about the model, it's just more or less explaining and outlining what the steps that are. So making sure that you have an aligned agenda or a shared agenda and outlined goals and a set of agreed-upon or clearly-defined deliverables. They don't really care about the model, but being able to articulate and communicate what those shared values are and what your shared goals are, I think that piece is more important than understanding that you have a algorithm or you're following a model.



DD: I think that's why in my paper mailer, I talk more about the components. What do we need to do? Well, we need to have a common purpose, we need to have relationships and trust, we need to engage people as part of the solution, and we need to use data. You call the model. I think almost all of them that are effective are gonna do exactly the same things. So, we don't wanna put them into boxes, 'cause we've put too many people, too many things in boxes.

MA: Yeah, and I think at the end of the day, if it is different, it'll feel different, right? People know if you care about them, or they should. They should know if it's about them, they should know if it belongs to them, they should know if you are giving them something that they themselves get to control or if you're just trying to set up check boxes in a marionette show. People know that. Especially in a town like Jackson where we literally do know each other, right? If you showed up a year ago and you're coming back, we know you. So I think part of it is just, if it's different, it'll feel different. And if it feels the same, then get out of there. Because if we tried it before and we're still here, then the standard of review is pretty high to do that again. So, go home, and tell us why, and we'll try to do it better.

LP: Well, that's helpful. I think putting all the frameworks in perspective, the guiding principles that you as a person or you and your work can bring towards any effort that you are participating in. So, I think that's helpful. One thing that does stand out when talking about partnerships and working together is the importance of building trust and just kind of getting to know the community and finding out the needs and what the assets are and things like that, and that just seems like it can take a lot of time. Of course, with crisis happening, so of course the pandemic, things have to happen quickly. So, what do partnerships look like in a crisis situation like the pandemic? Tashia, maybe I'll start with you on this one, if you could reflect on that, and we'll let the others join in after.

TC: Well, I think it's definitely helpful to have established relationships of trust before a crisis, that way you can hit the ground running and simply mobilize to get work done. Luckily for Jackson, because there were so many individuals and groups that were already doing great work before the pandemic, it was just a case of collectively mobilizing and everyone pulling together to do their part, leveraging the resources, networking, and pulling together their skill sets to fill in the gaps wherever they could. Without the trust, it is slower to morph into action, but you still can get work done with that aligned agenda and those outlined goals. The approach of using the Collective Impact model is critical in that concept, it really promotes the common agenda and the communication and the accountability and activities that reinforce and complement the broader perspective of what needs to be accomplished.



TC: I'll admit though, the process is a lot more fun when you can just hit the ground running. But also when you have those established relationships, when issues arise... And they will, because we're all human and we have good and bad days and sometimes we just simply don't agree. But when the conflict arises, you can now pull yourself back to say, "Okay, wait, what are we trying to accomplish? What is our broader goal?" It's easier to overcome those obstacles. I do give kudos to Jackson for how, during the pandemic, they were able to put together. We have a resident-led group, The Residents In Action, that has been instrumental with partnering with the professional world and helping to bridge those gaps with other grassroot organizations like Partial to Girls and YPOP or Save Our Youth. It's definitely made a positive difference to have those established relationships, those connections. And like I said, it's a paradigm shift, sometimes it's not just the people sitting at the table, which despair population, they rarely are the ones sitting at the table. Sometimes it's as a leader stepping back and letting them lead the change. And so I think that's where the shift in the mindset and the actions that we've historically done in the past changes.

LP: I like that. I think you could use some of those strategies even when you're having to act quickly, if that makes sense. Megan or Dan? Megan, you looked like you were gonna say something.

MA: Yeah, I just wanted to go a little further than what Tashia said to say like our organizations were completely incapable of responding in real time at the beginning of COVID, right? They were absolutely not set up. And it was not because they didn't have resources, it was not because they didn't have a charter with which to act to serve folks in our community, especially he folks experiencing the greatest barriers to their basic needs. It was because they just couldn't do it. They're not set up to do it. Organizations are not set up to leverage resources in the community for what people actually need, at all. And in the beginning days of COVID when people were in our community and they didn't have formula for their babies, they didn't have food, the grocery stores were empty, all of these organizations had their employees at home on laptops. And it was the folks like Tashia and Residents In Action, and women of color who had their Black bodies in the streets going to serve the people who needed care. And as kind of time went on and the acuity of the situation kind of abated a bit, we were able to set up mechanisms for formal organizational resources to be directed to the folks at Residents In Action so that they could distribute things like formula and diapers.

MA: So, the hospital was using economies of scale to buy formula, to buy diapers, and then using Residents In Action to distribute those goods. This wasn't charity. They knew the community needed them. As a healthcare system, they knew that they incurred the financial fall out of poverty of people not getting their basic needs met, and so it was in



their economic best interest to distribute goods into the community to try to keep people safe and healthy in their homes. But they couldn't do it. And actually, I will just say, thinking again about creating just systems, the only thing that the organizations in our community did not fund was the time and labor of those Black women working in the community. That's the one thing we couldn't get funded. Because people love buying formula, people love buying diapers, but they're not just gonna start paying random people.

MA: Like who is it? Are they a W2? Are they like a 1099? Are they a consultant? Who hires them? Organizationally, we couldn't pivot in such a way as to compensate them for their time. So what we had was some women actually living in poverty themselves, living with resource scarcity, whose labor was being used for free by a healthcare system with a multi-million dollar budget. Right, now, think about the injustice of that in a community and when we think about healthcare and what it is that we do and how we support population health, how we frame what that means for us in terms of our competency as a system in supporting people in our community. So it's people organizing in the community, but it's a much deeper conversation about how we generate health and justice. I just... I wanted to bring that in, because there's a lot more to what Tashia said than just they were organized. They were organized, but it was a deeply kind of... It has been a political act of women taking care of themselves, and Black women specifically taking care of Black women. It is a political act to support those bodies.

TC: Thanks, Megan, for keeping it real. [laughter]

LP: Just gonna reflect that it seems like to bring attention to this within the system then, so within the health system that you are working in, to bring that attention, it seems like it would need some disruptive questions disrupting the system. And I think that that in itself is probably a big challenge, but maybe part of the paradigm shift that we're hoping is happening.

MA: Yeah, Tashia's line is always, "Do you really wanna know?" People ask her a lot of questions, and it's like, "I mean, like... But do you really wanna know what we feel about the stealing of Black labor? 'Cause Tashia will tell you." [laughter]

LP: Well, this kind of leads to the next question a little bit, and we've been talking... It's come up a couple of times already through this panel discussion that centering collaboration around principles of equity, even principles of anti-racism, how all that is very crucial to our work in public health. We're talking a lot about this now, and there's a lot of focus on it, but how can we make sure that our practice is really built on these principles? So Megan, I'll ask you first. How can we assure that leaders are using equitable and anti-racist approaches? What have you seen in your own practice?



MA: I mean, I still do think that this is the hardest question.

LP: It is.

[laughter]

MA: But I'm happy to try. I actually had to think about this one a lot, 'cause I didn't have a stock answer. But I think the first thing is to acknowledge that creating anti-racist out... Like working towards equity, creating anti-racist outcomes, these are not normal things. These are not things that I learned how to do in my math education or in my public health education, and that's not because mathematicians and public health practitioners don't have a role. It's just a lot of these are concepts that are emerging, and there's clearly a shift towards integrating these concepts into mainstream work, especially at the public or population level, whether it be policy or health. So I think the first thing is this is not stuff you're gonna get learning, this isn't learning you're gonna get anywhere. When I read that question, I had an understanding of it, but it's because I've invested a lot of my own time, a lot of my own resources into figuring out what that means. And it's meant doing the work in me, in who I am and how I show up as an individual with my experience and my world views and understanding how that is a part of the work also, that this is a deeply personal type of thing.

MA: Being an anti-racist means looking at the things that you've been told for forever and figuring out which parts of them you believe, and that's really hard. So I think the first thing is, if you wanna do this work, it's a personal type of work. You don't do it at work at all. You do it at home, and you do it oftentimes at great personal risk. And so unless you're willing to do that, then I guess then the question... Then you're not ready for the question, if you're not gonna bring your personhood into it. That disclaimer aside, I would say, looking at working in an organization that I love... My dad worked in our hospital system for many years. I grew up in this town. I love the people, I believe in them. I think, when I think of how I can support us actually holding ourselves accountable to something different, something better, I think one is the tactical piece.

MA: And I think that's where collective impact comes in. And I mean certainly there are wonderful tools. I mean, this is I think probably where Dan would identify himself. I mean, the tactical components using the data, even doing things like a strategic equity plan, understanding how to move, holding people accountable, tying incentives to decreasing racial disparities, all that tactical stuff. And then I think the second piece when I was trying to figure it out is the strategic piece. And again, different from a strategic action plan, but kind of the acknowledgement that it can't always be this hard. We cannot always invest this many resources in convincing boards that equity matters. We have to acknowledge that we have the wrong people in power. If you have to be convinced that racial disparities are



endemic of systemic racism, then you actually, at the end of this work, shouldn't be in a position of power. Because that conversation only makes sense if you haven't experienced or humbled yourself to the reality of an existence different than yours, and that's the skill set that we require for you to be in leadership in Jackson.

MA: And I think so having kind of a, "This is what we need to do today, but this is how we need to be in the future," is really important. And then connecting all that is we need to know our roles. Tashia and I work together, I think our vision for the future looks very similar, but we have really different roles in that. Like my role, like Tashia's, is actually to be really disruptive, is to agitate people, to go to those board meetings and disrupt them, to force them to hear things that they don't wanna hear, and to use data and to use their language, this really structured, detached data presentation to get them to see the things that we know in our lives. And that can't be the only role. I also work with people who are very good at coming in and being peacekeepers and doing the really kind of politically savvy stuff. And Tashia, obviously, has a wonderful skill set of doing both of those things on both sides. But those are my main points that I thought of.

LP: Definitely, it's a big question, and there's a lot of components to that, so I do appreciate all your thoughts on that. And I'll give Dan and Tashia a moment too to address this. Go ahead, Dan.

DD: Okay, thank you. It literally has to be the key to our work, and again, at the tactical level, disaggregating data, so you understand the true story so you can begin to look at that. But I think one of the other things that's really a good approach out of the Racial Equity Institute, I think in North Carolina, they talk about this whole concept of, "It's in the groundwater." And so, again, if you look at the lake and you notice fish are dying, and so you start trying to save one fish at a time, this is... And you all know this in the whole healthcare world, we can't just look at this work from one patient at a time. We have to look at the groundwater, because that's what's killing the fish.

DD: And so racism, all of the disparities, the institutional racism, the implicit bias, the explicit bias, all of those kinds of things are in the groundwater of this country. They're in the groundwater in every community, and we have to find ways to really address the groundwater in our work and change that groundwater, change the foundation of, again, as Megan talked about it, around how we look at these things. And we can't do it just saving one at a time. It really is, what are those systemic change? And we have to understand, it's the history of this country. It's a very scary history. It goes back... We don't need to go back to the history of this, of slavery, but it's still alive and well. And just one of the things I like to remind people, the first law, one of the first laws passed by the Continental Congress was that no White person will ever be punished for anything they do to a Black person. And



that's what our legal system was based on from the beginning. We could talk the whole time about that, so I'll jump off.

LP: Tashia, would you like to add anything?

TC: I'll just reiterate, keeping these things front and center, making it normal to disaggregate data so it's in your face, developing strategies to address them. But I think one of the biggest steps, and I think in Jackson this is where we were stuck for a long time, is actually executing strategies. So actually quit talking about it and just do something. You know it's not gonna be perfect when you first implement something, but you have to at some point quit talking about it and just do.

LP: I like that.

MA: Yeah, and I think on that point too, Tashia, just to talking about the data, is to resist the urge to get really obsessed with process measures. Process measures are great, and they can really become a barrier to outcomes if we let them, right? If we celebrate them too much. It's like Yoda, there... Do or don't do, but don't try. In Jackson, it actually doesn't matter how many Black moms breastfeed in Jackson, if the infant mortality rate among Black babies is still six times higher than White babies. Right? So there might be really valuable work going on, and we wanna give people enough so that they stay focused on working on the drivers, the things that we know are going to affect the outcomes, but that's not enough. That's not it. Us trying really hard to figure it out isn't it. It's the outcomes in the population, it's the actual harm or support or care done to actual bodies. That's the thing we're tethered to. That's the thing we celebrate.

LP: Thank you.

Phoebe Kulik (PK): So we have a question from Andrew. How do you manage to build trust and cooperation for change with groups or people who oppose your mission or values?

TC: I'll take that one. Over this last year with the senseless murders of George Floyd, Ahmaud Arbery, and Breonna Taylor, and the acts of US leadership, we really found that the exacerbations of COVID, they were obviously present before the pandemic. And as a result of that, where I am, I found now that I'm more protective and respectful of my time, and I'm willing to work with anyone who is ready. And quite frankly, I don't waste my time, my precious time, trying to convince others that racism exists or that people in circumstances need to be equitable. So I have allies and acquaintances that will work in that space, but for me personally, just to stay sane, the space that I work in is to work with people who are ready so that we can actually make a difference.



MA: I agree with everything Tashia says. There was a point where I think I was willing to try to convince people to work... And again, Andrew, there is a pragmatism to this. Like if it's your boss, or if it's like... There are certainly times when you just have to do the thing that you need to do and you're just... You're kind of in a place where you're forced to work with folks, and then you just do... I think spirituality has always been helpful to me, meditating and learning to let go of things you can't control. But for the instances where we have control... I know Tashia is right, and I... We do this too, we just...

MA: There are people who are actively seeking to do this work, they're out there, and the role is to find those folks, right? And to build a contingent, a cohort, a group of people who understand who can go through the learning together, and no matter what level of kind of organizational structure they're at they can start to develop momentum and power behind a message. And the only other thing I would say is that also understanding our roles. So Tashia is a woman of color living in Jackson, and it is absolutely not her role to work with a bunch of white folks who think they get to disbelieve racism. It is my role as a white person in Jackson to address that among other white people, right? That is a place where I need to engage, I don't get to opt out of that.

MA: I need to be up front in working with white folks to help them understand this journey and get them a deeper level of content. And it's the same... And we do that for each other. It's the same type of thing I expect from folks like Tashia, my cis and straight people, 'cause I don't wanna have to convince people that queer lives are deserving of quality healthcare. I wanna do the work with people who are in solidarity with me, and I wanna leave a lot of that having to defend my humanity to other folks. So you know, I think it's part of it and being in community is that these are all real live things, real live relationships that are deeply contextual within the time and the community in which you live and work.

PK: We have one more question that came in from the chat, maybe if one of you can answer? How can you help create or facilitate buy-in from organizations and employers to focus on substantive equitable community development and not just performative partnerships, like not compensating community members for their valuable time for accountability mechanisms?

DD: Let me just say one thing, 'cause I know we're running out... To help you out, there's a number of answers to the question, or a number of thoughts. But the first one is, start with the early adopters. Start where there is some interest and build from there. Don't try to convince the un-convinceable, but start with the early adopters, get the work going, build energy, build stories of that. Because most of the folks... If you think of it as a bell curve, most of... They're either... You got the early adopters on one side, you got the folks that don't wanna do it and don't believe it on the other side, but the most folks in the middle go where the energy goes. And so create the energy with the early adopters. When they see



you're getting better results, you've got some good things going, you'll get more people to jump on that side of the equation. So grow it over time. We didn't get to where we were in the one year. We're not gonna fix it in one year. So build on where you have the opportunity to build and have successes.

TC: I was just gonna say that I agree with Dan, going with the early adopter. I do also think there's power in numbers, so on the resident side specifically, the standing in solidarity. And historically, you have organizations who have just gotten free information through surveys and whatnot, or they tend to always go to the same people because even though that one Black person doesn't represent all Black people, when you stand in solidarity, when you get those types of requests, you have the power to say no and let's talk or negotiate. So I think with on the community organizing side, pooling the people together so that they have aligned goals and collectively they can respond to getting away from the to circle mindsets of getting free information.

MA: Yeah. And I think in closing, Adrian asked the question. As long as the institutions are still jacked up, filled with people who we need to be convinced that systemic oppression is a thing, like this is the work that we're doing. That's the question I'll spend my entire career trying to answer. And I think it hits on a lot of the things that we've talked about today, like who are you when you show up to that work? Like not just your title, but your person. It took me a while to come into understanding my role as a part of my identity as somebody who was living queer in a small midwestern town, graduating from Loomen Christy High School. That is a part of it. And I need to understand what tools I have at my disposal to do this work in the town in this time.

MA: And I also need to understand how... I need to do work on the background that we were talking about to understand the performative stuff, because it is everywhere, and it is exhausting. But to be able to have the language and the screening mechanism to articulate that and name it when it exists, when you see it, is a powerful part of the advocacy, right? And to use the relationships you have and that truth, that speaking of truth, to facilitate deeper conversations. It's that iterative process of like learning and loving and being in a place as your whole-self and how you can move through re-designing institutions. That is a question I think you will all spend your entire careers trying to answer. How do you do good when the system isn't designed to do that?

LP: And you've all kind of mentioned the idea of bringing people to the table, making sure people are at the table, but you kind of already alluded to the fact that not everybody is at the table. So how can, when we're trying to do these cross-sector collaborations and community partnerships, how can we make sure that everyone who needs to be at the table is at the table, and then when they're at the table, they're actually being heard? I'll open that to all of you.



DD: I can jump in.

LP: Yeah, go ahead, Dan.

DD: I'll jump in. So two things around it. One, organizations should have a clear understanding and a policy that people impacted by a decision should be involved in making the decision. So as an agency, as an organization, if we're gonna make a policy that's gonna impact the people we serve, they need to be involved in that. That's one of the dilemmas. A lot of non-profits, they make all these rules, the regulations, how they deal with clients, patients, but they never live with those rules, just the people they serve do. So we need to be clear about that, people involved. Because number one, they probably have the right answers anyway, so we need to listen to them 'cause they'll know what works maybe better than us. But the second part about that is that we have to be careful around the tables that we create, because sometimes we think, "Okay, what we need to do is invite one or two neighborhood folks to be part of our table, the decision-making table." And there's two problems with that, the first one is so we involve... We invite Tashia to the table.

DD: And then we expect her to represent all the African-American women in the community. And nobody ever asked me to represent all the Anglo-males. We put that unfair burden, number one, on people when we bring them in as tokens, if you will. The other dilemma, when we bring a couple of folks around that table, it's an unequal power balance table. I like to think about this, basically, the professionals are 12 feet tall, and the residents are four feet tall, and that's how it looks to both sides. The professionals are looking down, and the residents are potentially looking up. They can't understand our language, our acronyms, all of that stuff that goes on. So the tables we need to create, particularly at a community level, are the community folks are the only ones around the table, and the professionals step back far enough away from the table so they're on tap, not on top, and they only respond if there are questions. They let the group do their thing and respond. And so, I'm gonna take a quick story, 'cause I think it's helpful. We were doing this work around health disparities, African-American and white babies dying in San Antonio, Texas. And so we were putting community groups of folks together to talk about what they could do. What kind of activities could neighbors themselves do with their skills, their gifts, their... As we call 'em, gifts, in ABCD language.

DD: And so in this one group one Saturday morning, an agency came that really was excited about this work. They were the nicest people. They wanted to be part of this, they wanted to be helpful. And the problem was they weren't helpful, because what they did... So we brought the neighbors together, and two folks from this agency joined the table as they were talking about it. And after about 20 minutes, this one woman got up to leave, this one resident. I said, "Where are you going? Why are you leaving?" And she said, "Well, because you asked us to come up with things we're willing to do and ideas that we could



do, but every time I suggested anything, the guy from that agency said, 'Oh, we've tried that. That won't work.' 'Oh, if you're gonna do that, do it this way, because it'll be better. It'll be more effective.'" So she felt totally dissed, totally put down. And then so she said, "I'm out of here."

DD: Now he was trying to be helpful, but by doing that, he was not helpful. He was stifling to her engagement. And so what I often tell people, don't ever try to be helpful, do not. Only respond if asked, because if she had put the idea on the table and then asked him, "What do you think?" chances are, she wouldn't have been as dissed, if you will. But because he just jumped right in. So that's one of the rules, as professionals, I try to do is the people around the table should be the citizens themselves. We should step back far enough so we're there if they have any questions, but we shouldn't be driving the action. And I apologize for talking so much.

LP: That was an excellent story, I'm glad you shared that. Tashia?

TC: No, I... I'll take it a little further though. I think those with lived experience are the experts. They're the ones who are closest to the issues, they know their problems better than anyone else, and they have the solutions, it's just that they don't have... They quite often don't have the resources or the funding to implement those ideas and solutions or to bring those ideas to fruition. I straddle the fence, 'cause I'm part of the professional world, but I'm also very active in the resident community world. I understand a lot of the nuances, and I'll just be honest, I give the meat and potatoes to the resident side; the little inside secrets to help progress the work on that side. I advocate and I lobby for the people, and I agree, they not only need to be at the table, but they need to lead the change, and organizations need to just step out of the way and give them the resources to let them do the work, the good work that they have always done, but with resources it would be done a lot better.

MA: Yeah, I think I would add an important thing to ask is, can you change the power distribution in the community with changing the financial resource distribution in the community? Can people actually have authentic power in a capitalist neoliberal economic model if they don't have money? And even if... Is it useful, and how is that question useful in what we do? Because I think, again, in perpetuity, if the question is, how do we make sure that people living in generational poverty can show up to decisions that institutions with million dollar budgets make? We could spend generations trying to figure that out and probably still be where we are, because money is power in this kind of society. We've decided that. That is where we are. So partly, there's an economic justice component that needs to be addressed. We're devaluing Black labor in our community, which we are. Then how, on the other side, are we saying, "Well, we really want you involved in these conversations. Gosh, how do we address the power dynamic at this table?" Well, first of all,



stop sealing our labor. Right? Because these things are actually connected, and you can't do it... You can't address these power... Or at least I have never seen. Maybe you can. But I've never seen a substantial model in the United States, extractive capitalist neoliberal economic policy, where people have been able to effectively, in perpetuity, change the distribution of power without addressing economic inequity.

TC: I just wanna share one specific example of just what Megan said. So we're all on this call, the professional world, and we had invited a couple of residents to this meeting. And we're brainstorming about when the pandemic first started, what are the top priority issues or concerns in the community right now? And one of the residents said it. She said, "I've gotten a ton of calls when people were running to the stores and buying up all of the toilet paper, and you go, and there's no toilet paper. Well, there were families who... Young mothers, specifically, were going into the grocery stores with their WIC coupons to get baby formula, and the shelves were empty." Well, if you know anything about WIC coupons, you have certain time periods, and then they expire, and then you just don't... They're no good anymore. So by the time there was milk on the shelves, the WIC coupons had expired, and so then their resource to feed their babies was gone.

TC: So everyone left that call, no one did anything, and so the resident communities kind of stuck with, "We need to do something. Our babies are hungry." So I went to my boss, and I said, "Is there anything at all that the health system can do to help buy formula?" Meanwhile, the resident community, we're taking up any enough dollars here and there, not paying consumers all of the bills to donate some money to buy formula for families. Well, thank God, I have such an awesome boss, and that had power to make decisions and find money in the health system, and she just started buying formula. So yes, the resident community, they knew what the issue was. On their own with their resources they were trying to come up with what they could, but the health system, who had funds, was able to actually meet that need. So...

LP: That's a great example of those two things coming together, and I think that's a great story to end our panel with. If you can believe it, we've actually gone through the whole hour. So I know there's a lot more we could talk about on this, and we were just getting into some really deep discussion. I really appreciate that. I'd like to thank all of our panelists, Tashia Carter, Dan Duncan, Megan Albertson, thank you so much for being here. I hope everybody enjoyed it, and you can take what you learned with you in your future work. So thank you, everyone.



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