

Leading Public Health: Data-Driven Leadership

Episode 2: Developing and Nurturing Partnerships

Liz Kidwell (LK): Welcome to Leading Public Health, a podcast from the Region IV Public Health Training Center at Emory University. Through this podcast, we explore current leadership challenges, strategies, and ideas to help build the capacity of the current and future public health workforce. In this series, Data-Driven Leadership, we explore the essential role leaders play in incorporating fairness into program evaluations. You'll gain valuable insights from experts who share practical tools and strategies for measuring and enhancing program impact. This series features pre-recorded sessions from a Project ECHO initiative offered by the Region IV Public Health Training Center, the Injury Prevention Research Center at Emory, and Safe States Alliance.

In today's episode, we're diving into a crucial aspect of public health—developing and nurturing strong partnerships. Whether working across organizations, sectors, or communities, collaboration is essential to driving meaningful change.

We will hear from two experts with extensive experience in building and sustaining partnerships: Johnny Williams, Executive Director of the Denver Youth Program, who leads violence intervention and prevention efforts across Denver, and Dr. Virginia "Ginny" McCarthy, Director of Development for GRASP—the Gang Rescue and Support Project.

They'll share insights on the motivations behind partnerships, common challenges, and the key elements of effective communication to ensure long-term success. Any resources shared in the episode will be linked in the show notes, so be sure to check that out after you listen. Let's get started.

Kady Pecorella (KP): So this week, like I said, we're focusing on— it's technically the second step—but this engaging of partners can be done throughout the entire process and should be because we know that a hallmark of this framework is that it aims to address power imbalances. By partnering with communities in the evaluation process and considering social, cultural and historical contexts that impacts outcomes. So, this stage really emphasizes building trust, fostering collaboration and showing that diverse perspectives shape equitable outcomes. Our speakers today are here to talk to us about how to develop and nurture these partnerships and their experience in that area. Our subject matter experts are going to present together, they'll introduce themselves, but just

really quick. Johnny Williams is the executive director of the Denver Youth Program overseeing violence intervention and prevention efforts across Denver. With over 25 years of experience working with youth, he specializes in crisis intervention, group facilitation and violence prevention leading initiatives like a hospital based violence intervention program and Citywide Unity Council. Virginia McCarthy or Ginny is a doctoral candidate and research assistant at the Colorado School of Public Health, focusing on community and behavior health. She's the director of development for the gang rescue and support project, or GRASP, and in that role she prioritizes community input to inform violence, intervention efforts and guide funding strategies aimed at reducing firearms injuries and death. So, I will turn it over to both of you. Thank you so much for being here.

Johnny Williams (JW): Thank you. Good morning. Um, I guess I just have to to jump in there because she's so humble. But during the process of preparing this presentation and uh, introduction bio, she has become an actual doctor in there. She's done she so umm, I'll turn it over to Doctor Ginny McCarthy and let her get us kicked off.

Ginny McCarthy (GM): Good morning. I feel like nothing actually really changed, so there's that, but it's good to be with you all. Thank you for having us. And it's nice of you Johnny to say that. These are a few of the entities that we represent, and we'll talk through a little bit of the structure of Denver Youth Program as well as now I'm an assistant professor role in the Department of Surgery, which aligns with our AIM program at the bottom and AIM is our hospital based violence intervention program. So we serve at the level 1 trauma centers in the region. In the Denver Metro area, I should say, and we respond. Our team response when someone's been shot or stabbed or assaulted. So that's why I'm in the Department of Surgery. Not that you were all that curious. But the a lot of the partnership elements will revolve around those hospital partnerships. Our partnership in the work that we do together and then all of at the service of the work of Denver youth program. So for today we have a few learning objectives. But we wanted to talk a little bit about thinking about the cultural response or culturally responsive and equitable wheel. We want to talk about the few different ways that this takes shape and takes form in good ways and in bad ways, not bad ways, good ways in ways that could be different for everyone's satisfaction. And then the key components of what those communication and facilitation and monitoring plans look like. So that notion we're engaging partners might be step #2, but it really runs that whole ring, which is really important to consider throughout. And then also talk about how these shared goals take place and when and how they might look different in different forms in different circumstances.

JW: So kind of starting out with the structure of our organization and some of our community partnerships that we've had, you know, thus far we our organization consist of

five different programs that work in the community. We work in the city metro area, which takes us into three different counties. So we're we're partnering with different counties. You know we're working with the hospitals. So we've been partnering with the medical field and then we're in the school. So we're partnering with the schools and we're in the community and that's our biggest partner is the community partners that we are working with. But then we have our young people that we are using to um I would say to navigate some of the situations that are happening in the Community that we serve with the young population through social media. So we have partnerships there and these are all organic partnerships and you heard me say that a couple of times throughout the presentation because some of those partnerships are very important to the work that we do from the community aspect of them and how they organically grew because of the work that we were doing and who was at the table. So as we start to go into this, I want you to think a little bit about the stages of change, you know, similar to the the equity wheel that you were just looking at the stages of change. When it comes to partnerships or relationships, I treat them in that same way, you know pre contemplation to contemplation to actually, you know, taking action and moving into that partnership and then after that partnership happens, there's gonna be maintenance. Right. And sometimes you run into problems and then you relapse. You gotta you gotta go back to the drawing board to figure out, like, yes, this partnership working. Is this what we really need? And then you start the cycle all over again. So that's something that will bring up throughout the presentation to kind of layout when partnerships have to be maintained. And what are some of the things you need to do to re set when partnerships go astray.

GM: And so a lot of the considerations that we make in these partnerships come within these 4 categories and I started to think of all these different examples, but honestly they all exist within the structure that we're working in. So thinking about pre-established relationships, when I moved to Denver for studies, I was looking for a program that was working in social enterprise and working. Specifically. In the area where social enterprise is an opportunity to give employment to youth and young adults, community members who have been affected by violence, either personally or approximately, and so I stepped into this relationship that I didn't really actually know existed. I found this great organization didn't quite realize they were running the hospital based violence intervention program, and so I started asking some questions about how I could be further involved and not really realizing all the dynamics of that relationship either within the hospitals and the h vit program within the programs of Denver youth program, but also within all the community organizations that DYP partners with. So that was something where I had this, this idea like oh this is these things are already in place and I, as a new person, have to learn these dynamics and learn who knows who and who's working together how. In terms of newly

established relationships, these are ongoing, right? So I'm seeing during my time with DYP, they were in the process of expanding to Children's Hospital for the AIM program. So seeing what those new relationship dynamics were, how they were being navigated, what form that would take in a way that's productive and what the barriers were to establishing those relationships in a new hospital, especially compared to the two hospitals where AIM is already working. Creative spaces. I am a huge fan of learning where everyone's assets are and championing those and then that frees the burden for others and so understanding an asset based leadership model where in a creative space we might do things that aren't necessarily the traditional or the way things have always been done in this relationship or the orthodox way to do things. But, if we can leverage interests and talent and resources in ways that benefit everyone, that's the way a place we want to be in. And then these multicollaborator partnerships. So we'll talk a little bit about our Reach clinic, which is our post discharge, wound care and holistic wrap around services model. But that is really. While these relationships happen informally, formalizing these in different ways as different projects evolve has been something that we've noticed through these relationships and partnerships.

JW: And it's a very important piece, which what Ginny just said. It was they happened informally, but then at some point you formalized them. Isn't that kind of like a relationship? Like you meet, you date, you know, you get engaged and then you formalize it by getting married, right. And then you understand what the partnership is going to mean for the rest of your life. Right. So for the rest of the, you know, collaboration, you, you know, informally talk about, like, what are the options? What other possibilities can this work? Now, are we going to be able to navigate the issue that we might run into here or there? And then at some point you formalize it, you know, and your the formalization of some of these partnerships is the MOU, it's the marriage license. Like we figure it out and we, we sign on the dotted line and then we have to operate under those, you know those agreements throughout the relationship and we got to make sure that this is something that we can both do as partners.

GM: And so throughout our presentation, we'll talk a little bit about previous partnerships in contrast with the current partnership model that we're working under. And again, just to kind of reiterate, I think I wear both hats by design. And so you have my faculty role, but I also work with DYP and through my studies and through my work in both realms, my job then became to bridge that gap and to maintain that community academic partnership, but we'll tell you about it because I don't like using that term. We'll tell you a little bit more about how that looks in our world. So, what happened was a colleague of mine said "you know you have this great community academic partnership with DYP. We should present on it together" and I have this partnership with another organization and we ended up getting a

reduced time slot for a conference presentation, we all know how that goes, and they said "can you interview Johnny about the Community academic partnership?" So we like get to this semi quiet space which look here and I said he's like "OK, what are your questions?" And I was like, "OK, well, tell me about the community academic partnership." So I'm we're going to tell you about that right now.

JW: To be honest with you, I didn't even know that I was a part of an academic partnership until we were well into it.

GM: OK, so then I panicked because I was like, oh, no, we're in this to I'm asking him about commitment, partnership. We don't use those words. We've never used those words like is he, is it over? Is he like gonna be like actually I'm out, like he kept talking to me but like so I had full panic and the way the only the human brain can do in two seconds. I had 1000 questions, 1000 things that this went wrong and that one wrong and did I trick him and those types of things but then...

JW: To be honest with you, I didn't even know that I was a part of an academic partnership until we were well into it. It kind of happened organically.

GM: So my brain slows down a minute. It's like, OK, OK. So like, there wasn't, like a were not in this partnership. Maybe we don't use those words, but like it did happen organically. And then I was like, Oh my gosh, this is good or bad. It wasn't quite sure. And then..

JW: To be honest with you, I didn't even know that I was a part of an academic partnership until we were well into it. It kind of happened organically, which I believe is the best way for any kind of partnership like that to occur.

GM: So I look at him and I said, "Oh my gosh, I feel like we never really talked about this and here I am interviewing you about this partnership that we've never really discussed explicitly in these ways." And I thought or when he's thinking about community academic partnership, is he now I'm wondering, is he thinking about like what we're doing together? Is he thinking about all the ways that partnership has evolved over time? Like I remember these horrifying stories that he told me about being called into meetings by the university and other stakeholders, governmental stakeholders, to be invited to participate in the program that he runs, and like they didn't know he ran it. And I was like ohh wow, that's like really bad and wrong. And so all these things are haunting me in my brain and meanwhile...

JW: Yeah. So you might ask yourself, so how did this happen then if you didn't know if there was no discussion about? And the thing that I talk about the organic way that it happened is when you're, you know, getting ready to do a community academic partnership with a CBO, again, we talked about what are what are you gonna get from that and what does that partnership look like? So Ginny started coming to our group, our Thursday night group, and

our Thursday night group consist of the community and young people we work with and we do have volunteers that come and they show up and sometimes they bring food and they sit with the young people and they give young people guidance and that's what she was doing for apparently quite some time before I ever knew that she was there. I just happened to be, you know, coming to group one night to check it out and see how it was going and she was bringing cheesecake and I thought she was like, one of the groups that we have is Moms Demand Action, and she was kind of fit in with that group. She was a white lady with cheesecake. I'm like, OK, let me help out. And while we were there, I just watched the engagement of how she was moving around with the group and that felt organic, It felt real to me. It was something that the youth needed. They knew her. They was able to communicate with them. So I, you know, she came and stood by me and I said " So who are you and why are you here?" And that was the beginning of our conversation. And then she kind of shared with me a little bit how you know that she's mentioned before that she was looking for an opportunity with the social enterprise and she heard about us and she came. And she never came and asked can I meet with Johnny so I can talk to him about this opportunity? She never came and knocked on the door and said, hey, I want to do this and that never happened. She came and she became a part of our community and became a part of our family. And then organically, from that point on, and even when our conversation, she said she never said "Can I meet with you? Can I sit down with you?" She said "If there's anything I can do to help, let me know." And at that particular time I just lost a grant writer and so many other things were going on and I just, you know, offered her some opportunity to as to how she could be involved. And then she became involved with the work that we were doing and became a part of our team before she even ever asked for anything. And then that's when we started formalizing the relationship. That's when we started to figure out how this is going to work, and then we grew into this academic partnership that we are in now and I can let her add her piece to uh, how that felt for her.

GM: I was just that you were the one that said I was the white lady who showed up with cheesecake because I worked so hard not to be that person and then in a panel, it's something no presentation much like this and we're being recorded so this is great, I said "He had seen me around for like a year." And he's like, "I had never seen her before. She just looked like every other white lady who showed up to our group." And I was like. Uh, OK. So like, can you pass the humble pie? Cause I actually ran out and I need like a lot more. So that was a really great public realization or realization that happened in public. But I had a few luxuries and I have to tell you about this because I was a student, I was a full time student, as a midlife crisis style student, and I had time for the first time in a long time, and I had previously worked in community engagement and I had been thrown into that collection of relationships that we talked about earlier, pre established ongoing creative

collaborative. I had never been had the freedom to just show up, and so my first conversation with a colleague at DYP when I first started volunteering was, she's like, "what do you what do you want to do?" And I was like, "honestly, I just want to show up." Like, I don't need anything from this. I've managed volunteers my whole life, and they're we're a lot of work. I like I don't need to be work for you. I just want to see how I can help and that will present itself over time. And I just want to name that as a privilege because in this group, I know that you're engaged in partnerships in a lot of different ways. And to show up with no expectations and just see what happens is not a privilege we show up with all the time, but I would encourage us to find the freedom that transforming relationships happen and to follow those and to allow those to be what they are, but also to dream about what they could be and what they should be.

So this is something that we developed as part of this Community academic partnership model and this is really the ways in which we hope to approach cross sector partnership. We won't spend a ton of time on this right now, but there's a worksheet that's in the resource folder that you can look at and I would encourage you the way that we've used this with groups is to say: go through these steps with your current partnerships, your perspective partnerships, understand like the big why, like why in the world are we been sitting here together, how? And then I want to highlight that third line of decide whether or not to partner. You don't have to partner. That isn't always the right answer. And we'll talk about degrees of partnership, but it isn't always yes, and it isn't always to the same degree and in the same format. And then the other point I would make from this before we continue to go forward and then Johnny, if you have stuff you want to say about this too, is begin with community members. Community leads initiatives. And those are the sectors where community can be leading and should be leading. And if we really our deposit, if we really want community to be at the front of the work where community is engaged, then we experts in other ways look to the community as the expert in their space to lead and as a non-negotiable for some of these community academic partnerships. If community isn't leading we are not doing it right.

JW: And the the decide to partner piece of it is coming to the table understanding that it's ok not the partner. You can support other partnerships without actually being a partner of that particular collaboration, right. So I think that sometimes knowing that behind the scenes sometimes can be the most important role that you can play if you don't have anything to bring to the partnership that's going to be productive and engaging in that way. Right. So that was one of the things that was super important for us is that if I don't do this, then will you not do this? Right, that is that, that give and take like I'm only doing it, I have a a saying that I teach my young people "people change to gain the goods or they gain the change for good and if they change to gain the goods and they change back." So if the only

reason that you're here and doing this is so that you can gain something, once you get what you came to get, you're gonna be gone. But if you gain the change for good, then it's a new relationship. You're a new person. It's a new era, and then we can move forward with that. That means if you never get anything out of it, then you're still at the table because you came for the purpose of being here, not the purpose of getting something from it while you were here.

GM: And so that's this is how we discussed our shared work and like Johnny said, I kind of said you know whatever you need help with, I have a little bit of experience in everything. I know I'm not alone in saying I feel like a pocket knife like I feel like a Swiss army knife where I'm not the only tool you want, but in a pinch I'll do so I can figure anything out. I've done a lot of everything. When Johnny said they lost the grant writer, I was like, great. Well, actually, what happened was he said we could use some help with grant writing. And so in our first meeting with the grant writer, the grant writers, like, actually, I'm leaving. And I became the grant writer and I was like that wasn't the practicum I think I envisioned, but it was this moment where I said I could use a practicum experience, he said "Here's your practicum experience." It changed and we rolled with it and I learned and I was a student, and I asked a lot of questions. And at one point, even Johnny said to me, "you're not using your public health language in these grants. Why not?" And I said, "because you don't use that language when you talk about your work." And that's important to me, to speak how you would speak and so I spent a lot of time learning about how we talk about the organization, things we don't say about the work things that are, you know, prioritize things that are less important. And so my learning was like through the organization through observation. Again, it's that gift of time. But I don't ever want to represent the organization in a way that Johnny wouldn't or that the team wouldn't when they stand up. And now I feel super comfortable doing that. But that was a process and I I poor Johnny, had to read all these grants like I thought this was your job. And I was like, no, I just wanna make sure that if we get enough of these right, then I won't have to ask you in the same way. But if I get them wrong, then we have a problem.

JW: And that was important even in coming into the rooms in different communities. She never assumed just because she was with me she had the right to be at certain tables or be in certain spaces. And oftentimes we would navigate that because on the flip side, I don't want to take her to places where she would be uncomfortable and that she would have to explain her purpose of being in in certain spaces. Because if you've ever worked in communities, sometimes community can be very harsh because they've been wounded. They've been wounded so many times and lied to and disappointed with these types of partnerships, so to have a one more time where someone has promised them something that they're not going to get would just be damaging. So we would have to make sure that

these spaces were welcoming and there, there was even times where we would both go together and there's been times where she can go into a space and make sure that it was OK for me to go into the space. Because again, back to what I said, you don't have to be all the way into the partnership or into the space to be effective, right? So I could be effective from the parking lot if that's what the case rather than certain situation, and she could as well. But it when we did our presentation, I used this as an example. I and anyone own a House? OK. Yeah, great. If I come and spend the night at your house, do I get equity in your house? Who's gonna give me equity in their house? No, no one is giving me, exactly. So just because Jenny came and she was at the table with us and she came and started doing the work didn't mean that she assumed that she has some of our community equity. The equity that was built up from my organization and from my personal experiences, she didn't assume any of that equity. So she had to develop her own equity. By, you know, showing up and doing, which was promised that was going to be done. And I all I did was simply make space for that and and then in an academic world she made space for me to come in and develop my own equity in those spaces as well.

GM: And there are times when we get no's. Right. And he? I thought you were tell the story about when I sat literally sat in the parking lot and he called me like "You can come in", but I'll just tell it for you on my own. But just being, yeah, being just because Johnny wants to be in that space or thinks it's OK for me to be in that space doesn't mean that I can be in that space. And and likewise guys like, oh, hey, I'm going to bring him to this conference and everyone is like this is not that that open to the community and I'm like OK, I have a bigger problem with that, but also I get it and so navigating those places in the way and knowing when we're speaking in a group, it was pretty apparent very quickly if the group is responding to whoever's speaking and we can actually just look at each other and the other person starts talking or that you can tell someone's not quite hearing something and we can do that exchange. We'll talk a little bit about how this has kind of played out in our relationship, it went from me getting a practicum and grant writing to a little bit of dissertation research, which I'll tell you a bit about, but I want to walk you through this part first. This is the Health Equity Community Involvement Spectrum and you can see those 3 categories at the top participation engagement and partnership. You can see those five subcategories. I love this diagram because it isn't like where they're stepping stones. It's not a ladder, it's not a staircase. It's not like you move beyond and you never go back. It's that, you can see at the bottom the activities are particularly salient here, the need to partner varies. The activities vary. If you go up a row the outcome varies. We don't need to waste communities time, which is what happens if you take everyone to that far right of the spectrum and partnership. We need to be mindful of what the goals are, and these aren't really, you know, we'll keep you informed says that first column message to the community

under informed. But maybe community didn't ask for it that way. So this doesn't capture the dynamic nature of the conversation that leads to this is the outcome, right? This could be the starting point and the framing like what do you think on this spectrum where we should be for this particular project? And then also touching base over time like how did this change? But understanding that these activities change, so we might start with the fact sheet and be like, do you know what we learned so much by sharing this fact sheet that we need to have a focus group and then in the process of having a focus group, we ended up taking this all the way up to participatory action research. Because we saw that this was something or not everything of it, this one little piece. And so this is this iterative cycle.

JW: And when we talk about the fact sheets. The reason that we talk about fact sheets is because our community has been surveyed to death, right? So when you come in like "So what's the problem? So what are you doing and how" It's ad nauseum, I mean and they don't want to hear that. So whenever we're going into a new room, especially with communities that are involved, we come with what we already know, we come with what we've already gathered from the research. We come with the information that is the baseline and we share with them. This is what we've heard and now and this is what we understand about your community. How can we change the dynamics of this? How can we help change the narrative? What is it that you need from us? Because now we already got their ear. We didn't come in asking a bunch of stupid questions. We came in saying this is this is the floor plan of what's going on in your community. And we know that you're needing help with that. How can we move forward? And so now we can move forward at the open houses and the presentations and the billboards and the videos. Around what we already know, rather than wasting the Community's time surveying about something that's been surveyed and mapped to death.

GM: To produce the same fact sheet again. And it's a pleasant surprise in our world. This is from Colorado Health foundation, these are the only two categories of projects they're currently funding for us. This is huge. So to understand that community owned projects and approaches and research are the top priority, community driven or considered, this is the world that we're living in right now and it's a gift. And they actually they're supporting the development of our reach clinic. They mean it. They're actually following through on this. So community engagement for us in our world led to the next step where I was like, I don't really need anything from you. And then I had a practicum and I was like, I don't really need anything for be different from the last time our team was interviewed?" Because I said that, you know, "our hospital based violence intervention program is so effective and the ways that we talk about its effectiveness come from narrative and personal story." And we don't have cold, cold, hard data, right, quantifiable data. Also

looking at the merits of qualitative data and saying there are voices and there's expertise here in our lived experience of our team that needs to be shared and the experiences of clients and healthcare collaborators at these various hospital sites of why this program matters. The difference that it makes. And so we looked at this spectrum and I was like "This is great. This is actually fantastic." Like we can talk about the ways in which we arrive at shared leadership. So, I had a little research meeting, our little meeting with our team, and say, hey, we're a little research like come and just see what research is about. And you know if you can't, if you want to participate, that's great. If you don't, you know that's OK, just come learn about research a little bit, it'll be good for the organization. So the team shows up, we train 7 frontline workers in qualitative research. Not just interviewing, not just focus groups, data analysis. So they're doing thematic analysis where they're coding, having developing a code book, doing thematic analysis. Understanding what the answers to these questions are, but they also did develop, our Train team together, we developed the interview guide and we conducted the interviews and I was present for the interviews. But then also we had a team member for each and every interview because they're asking questions differently than I am. They're hearing answers differently than I am. Like I'm wellintentioned and I'm in the mix, but I'm not in the mix in the same way, and both perspectives are important.

JW: And we did that because with our outreach workers in our in our frontline workers, it's like having a conversation and if they understand what they're trying to get out of the questions, they can have a conversation with the community and get the questions answered without the community feel like they're being interviewed. Right. So that was one of the ways that we were able to again change the narrative about how these partnerships happen and how mapping and how research happens in our community. And then because they understand coding now because they did the code book because they were a part of, you know, creating the dynamics of the research that we were doing, they knew how to ask the right questions during the conversation to get to the outcomes that we were needing for at the research project that we were working on.

GM: And then things happen, like the team would say, if I were to code this or if I were in an interview. And they're, like, asking questions from our interview guide for other things and like, Oh my gosh, we made it. And so where we found that we landed with community led research, not community engaged research. But going back to that Colorado Health Foundation model, where its community owned. Similarly, with research that's more project based, this is community led research. So the more that community knows about the ways in which research can and should be done, like Johnny said, the more informally it can be done and then the more formally or the more impact formal results will have. So we're being approached nationally to be doing these trainings for in the violence

intervention and prevention space, little plug if you need some training where we got you, but our team is loving it. Our team is leading these conversations about how this work can and should be done, and the ways in which doing this work doing qualitative research has changed their perspective. But this was all possible, this was never my intention and I felt like I had to say it, like confession style to Johnny with some regularity, like I didn't mean for my research to be undertaken in your programs, but I will do it if you think there's a benefit to it. And Johnny, of course, is not no, of course, of course, there's nothing but supportive. And so that's those were the fruits of a partnership that I feel like I benefited from, but then also now the team is continuing to benefit from.

JW: And then the important part of that was I had to be willing to say no if I didn't think that it was going to work for my staff or for the community that I serve and I cannot be afraid that if I said no that she would walk away. So understanding that she was there for, you know, the community and for the purpose and everything that she was doing, was coming from a good place. Sometimes my no's were just more informative. Like, that's not going to work in this community or that's not what we need in the agency right now. It wasn't the no's that were coming out of, you know, just shutting off the idea all together. And then the presentations and the, the ask or the opportunity that we had to work together again was for the greater good and not for individual gain.

GM: So just the few takeaways keep asking the why. Identify the necessary outcomes, the things we're actually pursuing, and allow us to change over time. Just decide the degree to which the process itself has an outcome. So part of my research was actually what in what the training and engagement in the research process to this degree, what the, what the effects were on the team. And we did these Likert scale questions like very useful to not useful at all or you know very much to not very much. And the only decline in knowledge or decline in in self report from the team at the end of the project was I understand and have been engaged in in research, and it went from higher like yes, I have been engaged in research to lower which I didn't anticipate because the team was like oh, wait now I haven't been engaged in research like this. And so we're kind of working through that in subsequent projects, but the teams like, oh, this is research, I haven't been doing it. Which wasn't my intended outcome, but it was something that we could actually unpack together as a team. And then what do we do with these data? These data changed our presence in the hospital real time. We would interview a healthcare collaborator, you know, an ED Doc, head of trauma services in a hospital and they would say we need to see more of you, we need you at the bedside more. And our response over the past year to the bedside went up by over 100 cases. And so, like, we're looking at probably a 30% increase in bed side response. So the invitation to be more present, the recognition of the value of the work. These

conversations were made possible through the project and that in and of itself helps the project go forward.

JW: And the question that I asked Ginny when she first, you know, talked to me about doing the interviews, look like what happened to the last interviews that we did? We don't have to ask that question anymore because now we own the data because we were the ones that gathered the data. So we have it at our fingertips and our staff can articulate it because, you know, the outcome is the way that, you know, we were able to gather the information.

GM: And so this is the kind of where we ended up at the end of the day, I think where we are maybe currently looking at that trust, like Johnny said, I had to trust that if I said no I that I wasn't going to walk away if you said no to things that I had to trust that his gut on things and I could present things in a way to the team that were able to be modified if they weren't quite what we needed. Understanding the ways in which community is present in the work, what does community mean? I think going back to the very basics, what does trust mean and what do relationships look like? The overarching goal of reducing health disparities and in figuring out those parameters, both of the partnership but also action and evaluation and defining roles, making sure communities leading and then that final step of ensuring that community hears back from what has been done in in the realm of research.

EK: We hope you enjoyed this episode of Leading Public Health, a podcast from the Region IV Public Health Training Center at Emory University. We value your feedback, so please take a minute to complete the evaluation located in the show notes. Thank you for joining us.

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