Creating an Inclusive Workspace through an Anti-racism Lens

an Example of Consensus Process in Academic Public Health

November 18, 2022



Created by the ASPPH Framing the Future 2030 Inclusive Excellence through an Anti-racism Lens Expert Panel





Context

In 2020, the Association of Schools and Programs of Public Health (ASPPH) launched the <u>Framing the Future:</u>

<u>Education for Public Health 2030 (FTF 2030) initiative</u>. With the vision to

"ensure equitable, quality education in public health for achieving health equity and well-being for everyone, everywhere,"

the effort builds on the work of ASPPH's original Framing the Future initiative conducted between 2011 and 2015.

Working closely with the ASPPH leadership, the FTF 2030 steering committee charged three crosscutting expert panels to examine key issues and develop recommendations to realize the FTF 2030 vision via the following priorities:

Inclusive Excellence through an Anti-racism Lens

Transformative Approaches to Teaching and Learning

Expanding the Reach, Visibility, and Impact of the Field of Academic Public Health.

Specifically, the panels were asked to: gather data from a wide range of constituents and collaborators, check assumptions and clarify definitions; assess the current state of the academic public health environment; and envision future developments that consider the inherent uncertainty and complexity of public health systems and structures. Each panel convened in September 2021 to develop recommendations and strategies to transform and improve education for public health.

The Inclusive Excellence through an Anti-racism Lens panel, composed of 14 representatives from academia and practice, collaborated to develop a consensus process to guide their interactions and path to fulfilling their work. With the understanding that the process could adjust as the group matures, the panel offered its example to others for reference and for potential adaptation or adoption for advancing similar group processes.



Many organizations, including schools and programs of public health, have committed to diversity, equity, and inclusion (DEI) as organizational values. DEI principles charge organizations to achieve a culture that supports the access, participation, and value of all organizational members, especially those from groups that have experienced systematic marginalization. Academic institutions are now appointing leaders to oversee DEI initiatives ranging from addressing structural and systemic policies and procedures; hiring and retention practices; faculty and staff training; student success programming; community-based research and practice; and many others.

DEI offices, programs, schools, and universities are becoming more explicit about their DEI initiatives. Many are adopting an inclusive excellence framework that incorporates DEI initiatives into their core operations. **But are we doing all we can to make a difference?** More and more, faculty, staff, and students are engaging in this critically important work and are advocating strongly for racial justice and equity, which has expanded DEI discourse to include principles of anti-racism. While DEI has focused on expanding accessibility to - and participation in - dominant structures, anti-racism principles call for a reimagining of structures that is led and/or grounded in the ways of being of those at the margins.

DEI and anti-racism (DEI-AR) work requires collaboration around a shared understanding and shared meanings. The panel suggests three essential first steps in any DEI-AR initiative:

- Definition of key terms
- 2 Surfacing of assumptions
- Explicit recognition of history, context, and actions that both perpetuate and disrupt inequities.

Defining the issue



What is inclusive excellence through an anti-racism lens in higher education?

There are a number of definitions that feature various aspects of the issue. The panel endorses the following definitions:

Inclusive Excellence:

A scientific environment that cultivates and benefits from a full range of talents.[1]

Anti-racism Principles: [2]

- Center the leadership, expertise, and voice of those most impacted by racism
- Recognize the fundamental role of macro-level forces in driving and sustaining inequities across time and contexts
- Engage in disciplinary self-critique of our conventions and impacts on the broader society
- Avoid the tendency of dominant group members and institutions to make decisions or take actions that preserve existing power hierarchies.



In academic public health, inclusive excellence promotes success not just for a few, but for all—leaders, faculty, staff, students, and community partners. But building and sustaining an inclusive environment where all can be successful requires intention, action, and commitment. This goes beyond DEI-AR goals and statements and must include very specific activities and actions that authentically support, advance, and sustain an inclusive environment.

^[1] Valantine HA. NIH's scientific approach to inclusive excellence. The FASEB Journal. 2020;34(10):13085-13090.

^[2] Ford CL, Airhihenbuwa CO. The public health critical race methodology: praxis for antiracism research. Social science & medicine (1982). 2010;71(8):1390-1398.



Recognizing history, context, and actions that perpetuate and disrupt inequity

The work of creating and sustaining inclusive environments is challenging, important, and ongoing.

It is a process that may not always run smoothly. This process will undoubtedly include setbacks, diversions, and acknowledgement of the need to pivot when what we are doing unintentionally causes harm. This kind of process requires consistent attention, openness, and commitment.

Before delving into the specific plans outlined by the steering committee, the expert panel determined that it was essential to articulate the issues and context from the beginning. The panel also determined it was important to agree upon a process for decision-making within the panel and to define values, norms, and principles for collective work. Specifically, the panel agreed to a participatory decision-making approach and committed to the following:

We make decisions by agreement, ensuring inclusiveness, accountability, flexibility, and shared commitment to decisions

We recognize all members of the expert panel as equal, all issues are open for discussion, and we respect other opinions and timelines/deadlines

We hold ourselves accountable to share and gather input from partners to ensure that we are grounded appropriately in reality The expert panel also articulated the following values, norms, and principles:

- Authenticity
- Honesty
- Inclusion
- Humility
- Strive to do no harm
- Be intentional about our own positionality and how we are coming into, and sharing, space
- Seek to understand; ensure that all voices are heard
- Assume positive intent in group contributions

 many are still learning; acknowledge impact
 when harms occur
- Give space for responses of racial trauma or harm (persons of color) and discomfort (white people); if these responses occur, explore what they mean to the space and the work
- Acknowledge that harm is not the same as discomfort; seek to repair harm when possible

- Center the ordinariness of anti-Black racism and as well as other forms of racism
- Normalize naming white supremacy culture and its manifestations in society
- Surface privilege, power, and discrimination
- Commit to centering the expertise and perspectives of Black and Indigenous persons, and persons of color
- Commit to decolonizing and anti-racist approaches and conceptualizations
- Recognize that "isms" occur at personal, interpersonal, and structural levels
- Recognize intersectionality occurs
- Recognize that the diversity (e.g., racial, ethnic, economic, gender, disability, religious, generational, institutional, professional—this starter list is not exhaustive) of faculty, staff, and students enhances the work/academic environment
- Honor pain presented by people carrying structurally marginalized identities

The values, norms, and principles outlined here continue to evolve as the panel deems appropriate. The expert panel also documented that embodying the decision-making approach, values, norms, and principles will take time and patience to build and sustain trust and will require vigilance on the part of all.

After a few months of meeting and the continued national tragedies of gun violence, the panel found benefit in opening their bimonthly meetings by checking in with each other, sharing both professional and personal updates, debriefing the current sociopolitical moment, and connecting it all back to the goals of the panel.

We offer these details in recognition that process deeply matters, and this expert panel is of the belief that this s will directly impact the success of our collective work. The panel is committed to specificity by first defining a process for our own work, and then embodying that process as we work to develop recommendations for inclusive excellence through an anti-racism lens by dismantling systems and structures that disadvantage some, and being direct and clear about why and how this occurs and what can be changed. We are committed to authentic conversations and deliberations, and these are not possible without clarity, specificity, personal accountability, and commitment to these values, norms, and principles.

Members of the expert panel have broad experience, expertise, and skill in developing and sustaining inclusive environments and are committed to this vision as well as appreciative of the opportunity to promote and elevate this important work. As one example of adoption, the University of Washington's Center for Anti-Racism and Community Health (ARCH Center) is following the principles listed above in its development and implementation of a collaborative approach for health equity action. The expert panel humbly offers its experience and process to others who engage in creating and sustaining inclusive environments.

Framing the Future 2030:

Inclusive Excellence Expert Panel Members

Wendy Barrington, PhD, MPH

Expert Panel Co-chair

University of Washington School of Public Health

Lisa Sullivan, PhD

Expert Panel Co-chair and Chair, ASPPH Framing the Future 2030 Steering Committee

Boston University School of Public Health

Kathryn Cardarelli, PhD

University of Kentucky

Sherma Charlemagne-Badal, PhD, MS, MSN, RN

Suburban Hospital - Johns Hopkins Medicine

Theodore Gideonse, PhD, MFA

University of California, Irvine - Public Health, Epidemiology, Environmental Health Sciences

Trinidad Jackson, PhD, MPH, MS

University of Louisville School of Public Health and Information Sciences

Laura Rasar King, EdD, MPH, MCHES

Council on Education for Public Health

Joanne McGriff, MD, MPH, JM

Emory University Rollins School of Public Health

Keshia Pollack Porter, PhD, MPH

Johns Hopkins Bloomberg School of Public Health

Grisel Robles-Schrader, MPA

Northwestern University Feinberg School of Medicine Program in Public Health

Darcell Scharff, PhD

Saint Louis University College for Public Health and Social Justice

Mary Ann Smith, PhD

The University of Texas Health Science Center at Houston School of Public Health

Diane Marie St. George, PhD

University of Maryland School of Medicine Public Health Programs

Donald Warne, MD, MPH

University of North Dakota Master of Public Health Program

ASPPH FTF 2030 Project Team

Elizabeth M. Weist, MA, MPH, CPH

Director of Education

Linda Alexander, EdD

Chief of Academics

Laura Magaña, PhD, MS

President and CEO

Victoria Wyant, MA, MPH, CPH

ASPPH Framing the Future 2030 Fellow