



Joyce James Consulting

“Equal Treatment Does Not Lead To Equity”

The Black Mamas Community Collective



GROUNDWATER ANALYSIS

Workshop Results



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Joyce James Consulting

Background

Joyce James, the owner and principal in Joyce James Consulting (JJC), is a nationally recognized expert in systemic transformation that address racial inequities and disparities. With her professional career spanning more than three decades, Ms. James provides organizational consulting to systems and institutions at various levels, in both the public and private sectors. JJC has proven successful experience in supporting strategic goals and objectives that focus on reducing and eliminating disproportionality and disparities in health as well as education, child welfare, juvenile justice, and other helping systems and institutions across the country. For the Black Mamas Community Collective *Show Up for Black Mothers* initiative, JJC's contractual work includes professional development training as strategies to create more culturally responsive systems that improve the maternal health outcomes for Black mothers.

Groundwater Analysis© Training

JJC Groundwater Analysis© training facilitates the examination of approaches to systemic transformation and works to increase participants' awareness about racial inequities and disproportionality in maternal health outcomes in the Black mothers as well as across multiple systems serving vulnerable populations and communities of color. In each training session, JJC skillfully creates a safe space to explore an approach to initiatives, programs and services that involve cross-systems collaboration and "turning the mirror inward" on the journey

toward equity. As demonstrated through analysis and evaluation of the nationally recognized Texas model for addressing disproportionality and disparities, awareness of racial disproportionality and inequities is among the most critical first steps to creation of an organizational culture and climate supportive of sustainable and equitable improvements in the outcomes of all systems.

To identify and document shifts in participants' perceptions and knowledge of institutional racism and racial equity because of JJC training participation, pre- and post-training surveys were administered immediately before and after content delivery. Participants were asked to rank their agreement with seven equity statements on surveys using a Likert-type scale of "Strongly Agree," "Agree," "Disagree," "Strongly Disagree," and "N/A Unsure".

Moreover, participants were asked to complete a two-page "Participant Evaluation Form" that included both scaled responses and open-ended qualitative questions.

The topics covered at the training included:

- The groundwater analysis of racial inequities:
 - Racial inequity looks the same across systems
 - Systems contribute significantly to disparities
 - The systems-level disparities cannot be explained by a few 'bad apple' or ill-intentioned officers
 - Poor outcomes are concentrated in certain geographic communities; usually poor communities and communities of color

- Systemic interventions and training works to change thinking, reduce disparities, and improve outcomes for all populations
- Cross systems definitions of racial inequity in outcomes in the health, education, child welfare, and juvenile justice systems
- Key aspects of systems design: decades old, resistant to change, oppressive nature, and best outcomes experienced by whites across all systems
- Cross systems disproportionality and disparities data
- Analysis of racial biases in current thinking about why people are poor

Results & Feedback

Why Undo Racism?

Through individual participant introductions, JJC facilitated dialogue around the question, “Why is undoing institutional and structural racism important to saving lives of Black Mothers?”

Participants responded with many varied views:

- *We learn about all kinds of factors that impact health, but not about racism.*
- *It has been eye opening for me to see skin color make such a difference in care.*
- *We must look at institutional racism because the individual focus has not made a difference,*
- *We talk about micro aggression but rarely the systemic aspect and in the absence of dialogue we don't solve the problem.*
- *The downstream approach is not working so it is necessary to move upstream.*
- *Aware of IR but without language, cannot confront or explain it.*
- *Racism affects everything.*
- *Maternal Morris better as a whole but we need understand the role of IR I'm Black Mothers not getting better.*
- *As a black physician, I experience racism and I see it with patients.*
- *Interrupting racism in women's health and material health is important.*
- *What we have done for the past 50 years has not worked. We must bring black mamas to the table, listen to them, and get to the root cause of what is Hampton them.*
- *Even the black women don't know the magnitude of the racism they face. Racism hinders their treatment often creating a hesitancy to seek treatment or help.*
- *We need to bring discussion on institutional racism into the classrooms of nursing schools.*
- *It's important! I am a black mother. I have black daughters. Racism hurts black Mothers.*
- *Important because black mamas take care of everyone and have since the beginning of time. If institutions continue to destroy black mamas, they will destroy our whole race.*
- *We need the vocabulary to advocate against racism with families and communities.*
- *Individual training on individual racism is not working. We must focus on systemic factors in all systems.*
- *I have seen the effects of inadequate and insufficient health care systems for all blacks.*
- *Undoing racism is not only important to saving lives but to thriving. You can be alive and still be dead.*
- *Because what I see makes my blood boil! A woman in labor should not be subjected to racist comments and racist attitudes. I don't like what is happening to black mamas and I want to change it.*
- *How does medical profession exclude, exploit, oppress, and underserve black Mothers?*
- *Does not believe them*
- *Does not listen to them*
- *Stereotypes them*
- *Cost of care*
- *Lack of cultural competency*
- *Lack of holistic care*
- *Lack of anti-racist care*
- *Lack of accessibility*
- *Lack of diversity in doctors, nurses, and other professionals*

- *Inadequate training and professional development on institutional and structural racism*

Surveys & Evaluation

JJC aggregated surveys and evaluation data from 57 participants across five workshop events. Participants in the training represented many local and regional agencies and organizations with an interest in improving the maternal health outcomes of Black mothers. Those agencies and organizations included:

- Black Momma’s Community Collective
- Cardea Services
- Circle of Health International
- City of Austin Maternal Infant Outreach Program
- Dell Medical School
- Foundation Communities
- Gathering for Success
- Giving Austin Labor Support
- LifeWorks
- Lone Star Circle of Care
- Mama Sana Vibrant Woman
- Mom’s Place Location Support Center
- Northwestern Mutual Insurance Company
- People’s Community Clinic
- Plumeria Counseling
- SAFE Alliance
- Sista Connection
- State of Texas Department of Family & Protective Services
- State of Texas Health & Human Services Commission

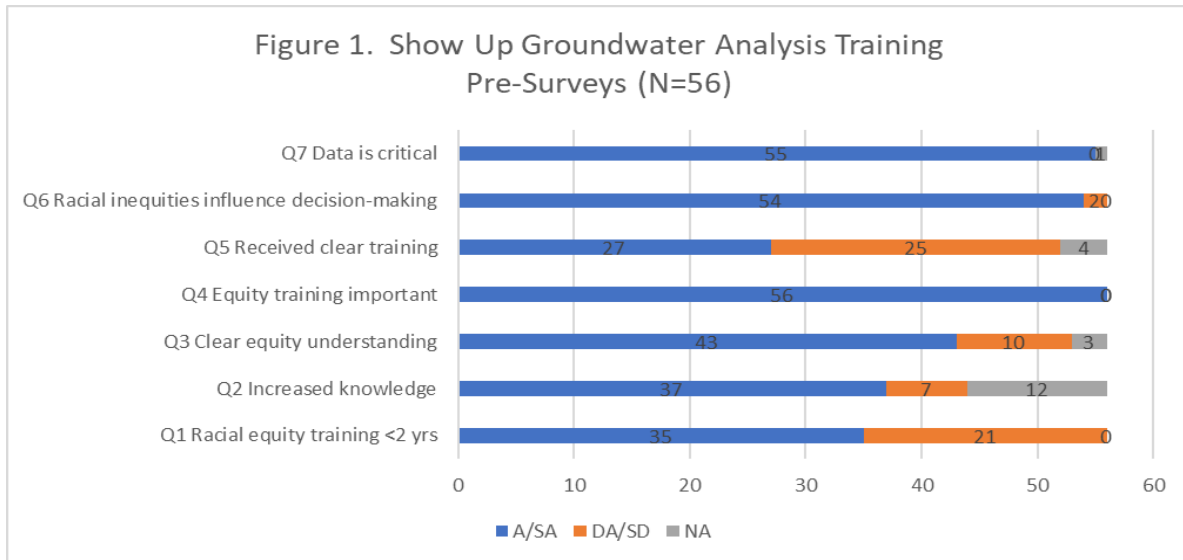
- Texans Care for Children
- Texas Council on Family Violence
- Texas House of Representatives, Rep. Jessica Farrar, District 148
- University of Texas at Austin School of Nursing
- University of Texas Institute of Urban Policy Research & Analysis

A pre-survey form was made available to all participants to gather their baseline perceptions and knowledge of disproportionality and racial inequities across systems serving vulnerable populations. Then, at the end of the training, participants were asked to complete a post-survey form. The surveys contained equity statements that were adapted and modified from other surveys effective in assessing attitudes, perceptions and knowledge of racial disparities and inequities. In addition, participants completed a two-page “Participant Evaluation Form” that included both scaled responses and open-ended qualitative questions.

Pre- and post-survey and evaluation tools were in paper format, gathered no personally identifiable information, and while participants were encouraged to complete each form, their participation was voluntary. The responses of participants from the surveys and evaluation were entered into a Microsoft Excel spread sheet for aggregation and analysis.

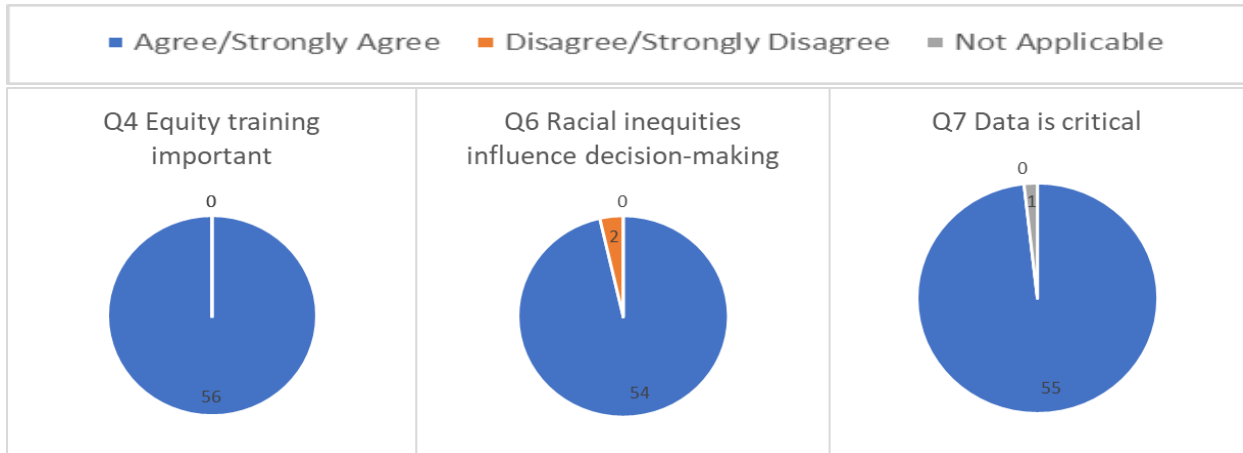
Surveys

The stacked bar graph below shows the varying degrees of agreement and disagreement with the seven equity statements as reported by racial equity training participants in pre-surveys administered immediately before workshop participation (Figure 1). However, after the workshops, most participants completing the post-survey form rated all equity statements at “agree” or “strongly agree.” Research has shown that identifying the existence of systemic disproportionality and racial inequities is a critical first step in addressing them.



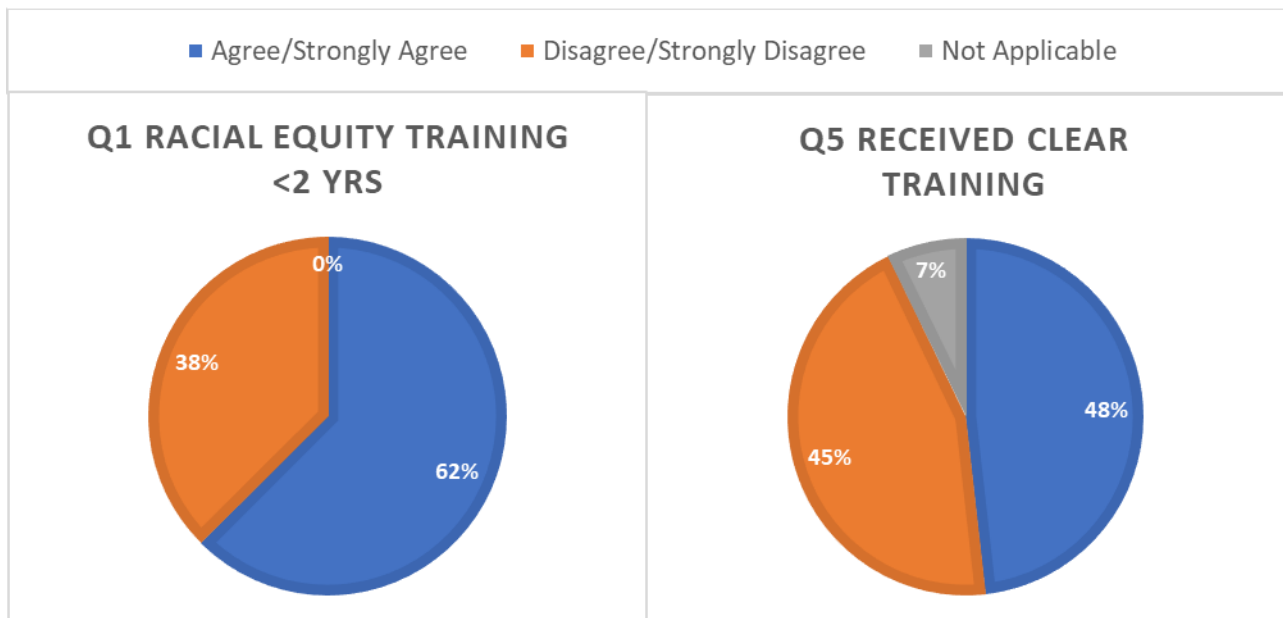
Three equity statements showing the highest level of participant agreement pre-training related to the importance of training cross systems leaders, medical professionals, and community partners about the social determinates[determinants] of health and the manifestations of racism (Equity Statement 4), they had received clear training on the impact of institutional and structured racism on Black mothers, their families, and communities (Equity Statement 5), and that data is critical in identifying racial disproportionality and health disparities (Equity Statement 7). According to participants’ self-reporting, it is important to train cross systems leaders, medical professionals, and community partners about the relationship between institutional and systemic racism, receive clear training on the impact of institutional racism, and use data—disaggregated by race and ethnicity—to identify and understand racial disproportionality and disparities (Figure 2).

Figure 2. Equity Statements w/Most Agreement at Pre-Survey



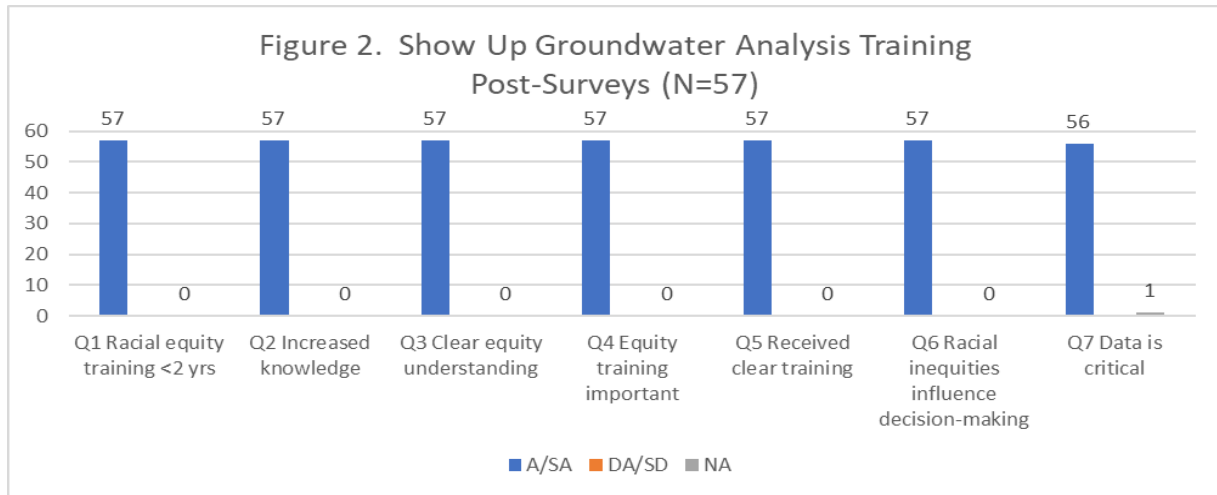
Participants were in the least amount of agreement with Equity Statement 1 (“I have received training within the past two years that has increased my knowledge and understanding of institutional racism and health disparities”) and Equity Statement 3 (“I have a clear understanding of the relationship between institutional racism and maternal health outcomes”) pre-training (Figure 3).

Figure 3. Equity Statements w/Least Agreement Pre-Survey



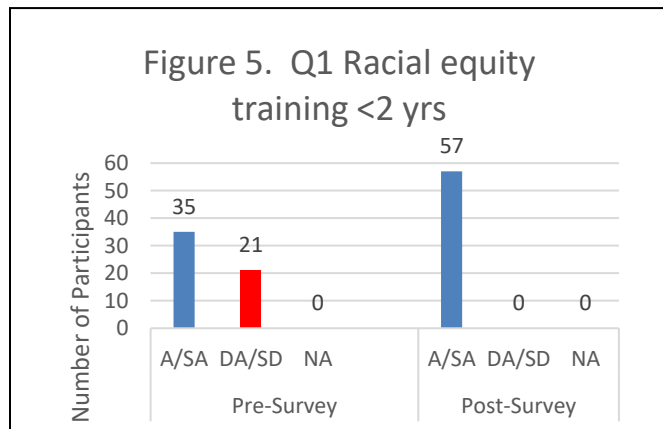
After the training, the baseline perceptions of participants about institutional racism and racial equity changed considerably, reflecting a common understanding and awareness related to systemic barriers and

organizational transformation. Notably, post-surveys show all participants agreed or strongly agreed with six of seven equity statements.

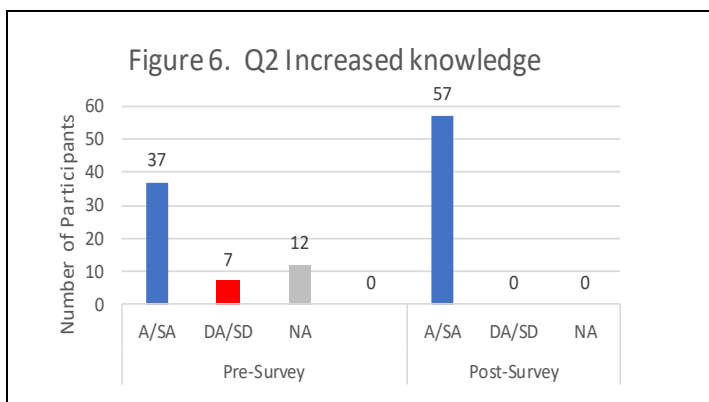


Individual Equity Statements

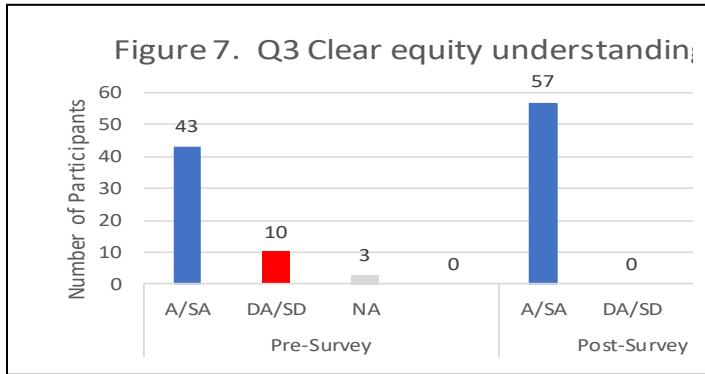
Equity statement number one said that, “I have received training within the past two years that has increased my knowledge and understanding of institutional racism and health disparities.” Participants’ agreement or strong agreement with equity statement number one increased from 63% in pre-surveys to 100% in post-surveys (Figure 5).



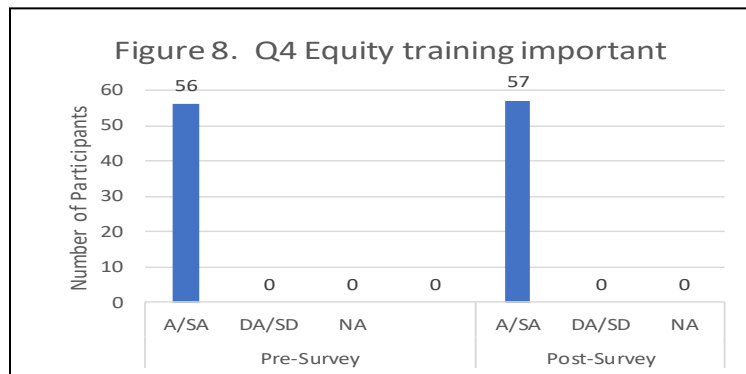
Equity statement number two said that, “The institutional racism and racial equity training that I have received contained information that increased my knowledge about institutional racism.” Participants’ agreement or strong agreement with equity statement number two increased from 66% in pre-surveys to 100% in post-surveys (Figure 6).



Equity statement number three said “I have a clear understanding of the relationship between institutional racism and maternal health outcomes.” Participants’ agreement or strong agreement with equity statement number two increased from 77% in pre-surveys to 100% in post-surveys (Figure 7).

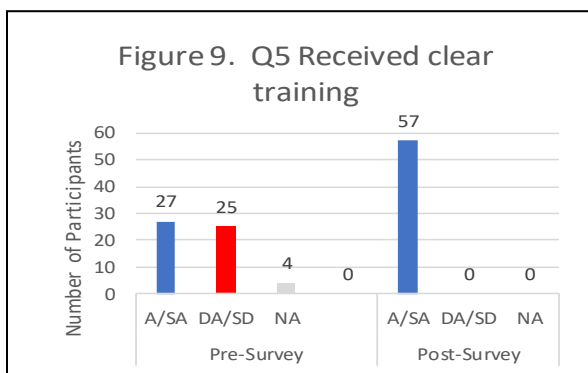


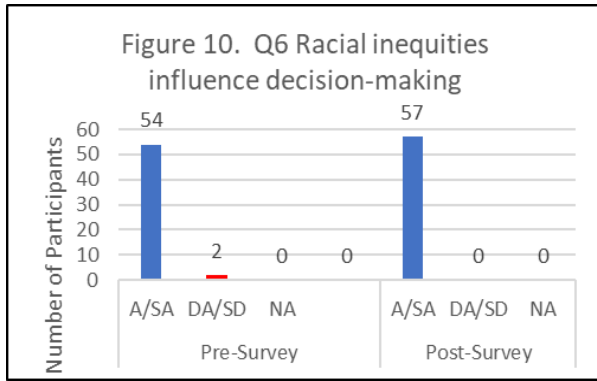
Equity statement number four said “I believe it is important to train cross systems leaders, medical professionals, and community partners about the social determinates[determinants] of health and the manifestations of racism.” Participants’ agreement or strong agreement with equity statement number four from pre-survey to post-survey (*Figure 8*).



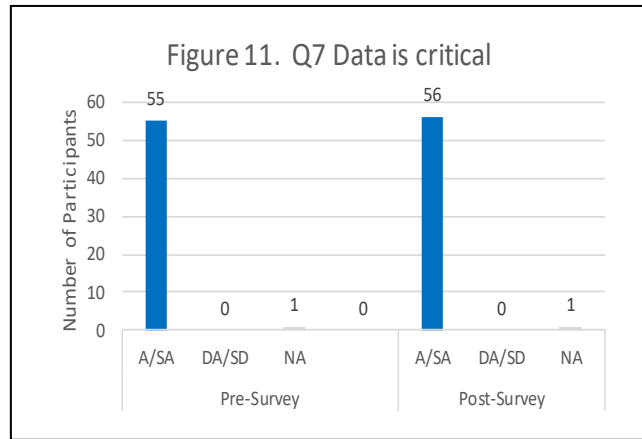
Equity statement number five said that, “I have received clear training on the impact of institutional and structured racism on Black mothers, their families, and communities.” Participants’ agreement or strong agreement with equity statement number five increased from 48% in pre-surveys to 100% in post-surveys (*Figure 9*).

Equity statement number six said that, “Institutional and Structural Racism impacts the decision-making processes of individuals working within healthcare and other family serving system.” Participants’ agreement or strong agreement with equity statement number six increased from 96% in pre-surveys to 100% in post-surveys (*Figure 10*).





Equity statement number seven said that, “Data is critical in identifying racial disproportionality and health disparities.” Participants’ agreement or strong agreement with equity statement number seven stayed the same from pre-survey to post-survey at 98% (Figure 11).

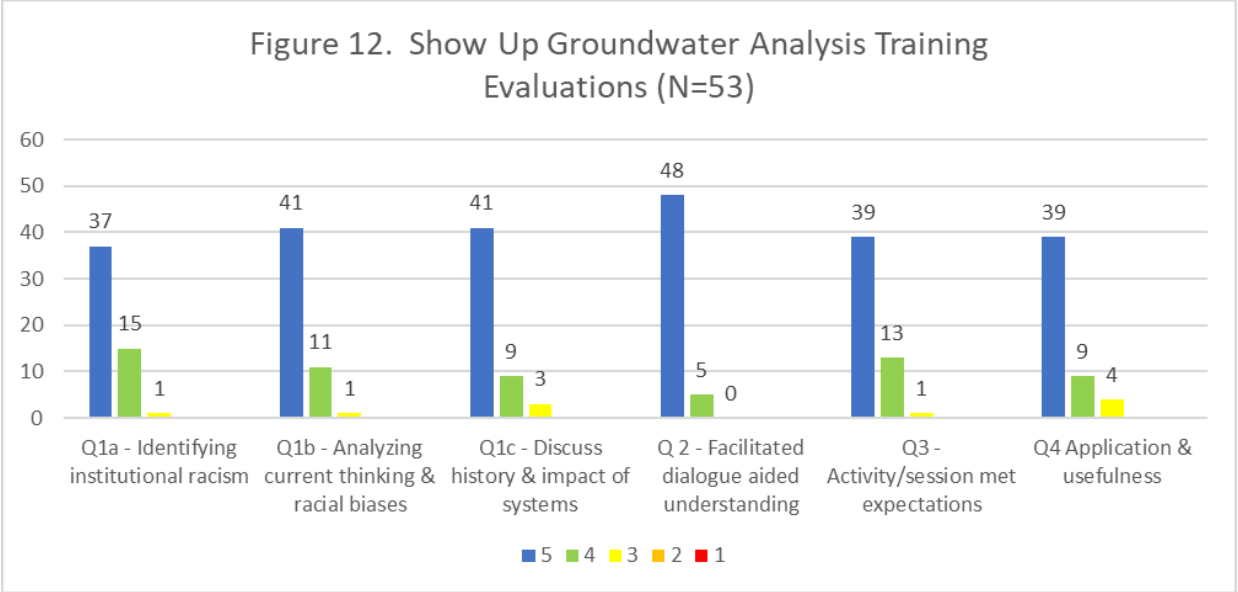


Participants’ Evaluation Responses

The scaled statements on the two-page “Participant Evaluation Form” rated the achievement of learning objectives, usefulness of learning materials and content, and applicability of content to job functions. The open-ended questions gathered information about participants’ perceptions of most impactful information and activities, aspects of the process most helpful in their daily life and work experiences, new skills or ideas, and additional comments.

Scaled Statements

Most participants rated all scaled questions on the evaluation at “5” and “4” on a scale of one through five where “1” is the lowest and “5” is the highest (see Graph 1 below).



Open-ended questions

The Participant Evaluation Form contained five open-ended qualitative questions. The coding and analysis of participants’ responses to qualitative questions is ongoing for the purpose of strategic planning and organizing. However, an initial analysis of participants’ responses highlights the openness and interest of participants in having bold and courageous conversations about race and institutional racism (Appendix A). Below is a high-level summary of questions 5, 6, and 7.

Question number 5 on the Participant Evaluation Form asked, “What information or activities did you find most impactful?” Three themes appeared from the analysis of 55 participant responses on training information and activities most impactful: discussion and learning about the experiences of others, the opportunity to self-reflect and explore new learning around the maternal health outcomes of Black mothers, and activities that deepened participants understanding of institutional racism and systemic barriers.

Question number 6 on the Participant Evaluation Form asked, “As you think about this session, which aspects of the process will be most helpful to you in your daily life and/or work experiences?” The broader messages of participants responses to evaluation question six suggests participants were thinking more critically about institutional racism and systemic barriers to improving maternal health outcomes of Black mothers. For example, some participants found the introduction of new language and learning around institutional racism important to helping them begin to have critical conversations within their organizations, with co-workers, and other advocates for vulnerable populations.

Question number 7 on the Participant Evaluation Form asked, “How this process provides an opportunity for you to be more effective in your work/community?” Participants’ responses show that, for the most part, participants ended the training with a better understanding of the multi-layered and complex issues that are barriers to improving the maternal health outcomes of Black mothers and some sense of commitment to helping to identify and eliminate barriers.

Appendix A

Participant Responses to Evaluation Question 5. What information/activities most impactful?

- Difference language barriers between social/ethnicity groups
- Hearing how effective the work can have
- The discussions
- Talking about the ability to stretch the box
- dot exercise was great illustration
- hearing people's personal stories; dot exercise
- the exercise and pictures demonstrating equality & equity
- the effects institutional racism has internally for communities of color
- differentiation between equality, equity, & institutional barriers, how to approach thinking/conversations
- appreciated learning about all attendees & what brings them here; images of the boxes & fence
- discussion & doll video
- discussion
- group discussion of individual experiences
- the box exercise
- the equity vs equality photoset
- just the general discussion & definition of institutionalized racism
- the picture w/fence, bot & video to end the session
- the dot exercise; introductions
- the dot exercise
- the dot exercise & fence comic
- the box diagram, the YouTube video, hearing other experiences
- intentional way activities led to critical discussion & racial inequalities and unequal systems [outcomes]
- the history of how the institutional programs started and how they now affect the black community
- discussion of history that impacts current issues
- 9 dots and everything that was shared
- the socialization (box activity)
- dot exercise
- discussions among group, sitting as a group in a circle without tables as barriers
- video
- connecting the 9 dots really shared how people live in their own box because of how they were raised or all they know
- the whole thing was great
- engaging everyone to give input; no exclusions
- the fence with 3 boys review; that was an eye opener
- comparing equality vs. equity vs. addressing barriers
- dialogue within the group; being put on the spot!

- in-depth discussion of boxes/fence images--I've seen a similar image before, but haven't heard/thought about all the aspects brought up today
- girl like me video/discussion
- open sharing
- group discussions; history
- Joyce's framework and approach
- the discussion around how systems function
- the fence exercise/discussion
- the introductions--hearing individual experiences
- I enjoyed/appreciated the historical information that were incorporated throughout
- the fence exercise
- the equity vs. equality picture
- the equality/equity picture
- the box activities
- difference between equality & equity
- positive, documented change over the years; reassurance that it's all ...
- I loved the box exercise & how it helped me identify old patterns of thinking
- discussion of how the different systems are related to outcomes
- I really enjoyed the 3rd & 4th introduction questions, I thought it was a great way to begin the conversation and bring people out of their comfort zones
- the story telling and examples; the dot exercise

Appendix B

Participant Responses to Evaluation Question 6. Aspects of process most helpful?

- All
- Need opportunities to think about how to apply the framework on population outcomes
- the participant's life experiences and the showing of the sharing of the presenters
- Remaining open to the possibility of dismantling racism
- the critical thinking of systems
- language to talk about institutional racism
- understanding the difference in the individual versus the institution
- deep dive into understanding & processing daily impact of systems
- having this conversation w/coworkers, my organization & clients & continue to self-reflect on my own privilege
- AS I work with childbearing women, I can reassure them that their experiences are real and valid. I now have words to use to discuss incidents that happen to black women
- background/history
- empowering me to speak out
- looking at the history of policy and how that impacts the future
- understanding how history plays a role in the power dynamics of institutions we see today
- all of it; the organization needs training
- explaining institutional racism from a systemic perspective; impact of stressors
- conversation; the vocabulary to have the dialogue
- definition of institutional racism
- the encouragement to push against the box and think critically about the systems that I am a part of that may be perpetuating racism
- starting a dialogue w/other people & bringing other white people into dialogue
- questions to use to explore what institutional barriers may play a role in health disparities & other disparities
- questions my dot box & exploring beyond the box
- knowing that I am not the only one who sees, feels and are disgusted by the reality of RACISM!
- explaining/motivation of my institution for change
- how to continue to have these conversations at work & community
- true history of institutional racism
- understanding equality vs. equity
- just the urge to undo racism; understanding our clients more
- the equity activity where the fence goes away
- causes/effects of institutionalized racism
- daily life--this session makes me want to continue my research and ways to help the system help other black mothers and children
- even though I don't work in healthcare, this greatly aids in my trying to understand factors that contribute to clients' housing success
- encourages me to ask questions to gauge where others are at.
- some of the exercises/tools used to help demonstrate points will be useful for me in having similar discussions w/other people
- example
- insights gained from presenters and other participants
- resolve to keep questioning and pushing back on institutional racism, even when I'm risking my reputation and livelihood
- knowledge of the systems PowerPoint slide

- getting the workplace to recognize the need to hold up a mirror
- thinking of how to change policies to benefit all, not just white people
- understanding disempowerment
- considering how we bring this language back to our institution to facilitate dialogue, self-reflection, & action
- understanding the thinking of the participants
- continuing to acknowledge institutional racism ...that lean ...positive change
- should I get elected, being able to address legislatively racial equity on healthcare & education
- learning better language to use to communicate these issues to others without them getting defensive
- this session really opened my eyes into how legislation and policy can and not impactful in undoing institutionalized racism way it has been done before in Texas
- learning examples of how to get outside the box of institutional structures
- this workshop encourages me to stay engaged in the community

Appendix C

Participant Responses to Evaluation Question 7. How this process provides an opportunity for you to be more effective in your work/community?

- speaking up! Working intentionally to initiate dialogue
- As I begin to develop policies & interventions, I have new framework to utilize
- give me language and look for opportunities to address institutional racism as well as ways to partner w/ and advocate for black women
- better understanding of institutional racism & empowerment to challenge them
- to be active in supporting and participating in spaces that help build opportunities for healing
- allowed me to think about how does the system need to change
- I will think more critically about places I can effect change
- I will strive to overcome inherent racial biases and be an ally to black people/black women
- I got a deeper understanding of internalized racism that will help me check myself in future situations
- to be able to advocate stronger for myself & my child's others in my life
- help move from individual to systems & help keep others focused in that direction
- I have a better understanding of the different types of racial profiling between ALL the different systems
- see #6 [considering how we bring this language back to our institution to facilitate dialogue, self-reflection, & action]
- educating others
- using a race equity lens
- I will use some elements when I design trainings and work w/black mothers
- being able to recognize institutional racism
- my job involves working with black-lead organizations to support their work but also will involve finding ways to educate white people (donors and ...establishment)
- consider existing biases
- help influence policies at work, influence hiring
- the facilitators did a great job establishing a safe space so we could all speak openly honestly about our views/experiences, despite the awkwardness of doing so
- this will provide me the opportunity to share this impact with others in the institution where I have influence--the church
- be more aware of health disparities across racial lines & how to address in case management
- allow...to be mine concerns of our community and with work
- by educating the women I serve
- I think in making decisions slower--examining first the data, and how the decisions we make may affect the institution
- this will provide an opportunity for me because now that I understand it more clear, it makes it easier for me to better understand my clients & help them
- more information, resources for explanation
- good modeling of safe space conversations while still being real
- communication & sharing the knowledge with data & facts

- gives me more motivation to keep on knowing & believing that things need to change & will change
- I feel like I can be a better ally & use my privilege to shine a light on black maternal health
- understanding what helps families I serve where they are and the thinking also help mothers over their hurdles
- same response as question 6
- it has given me a framework to understand institutional racism & not be mute
- I feel more equipped to engage in dialogues about how internalized racism is in the systems that we are a part of and how my program can push back against them
- awareness, social consciousness
- energized me to get involved in the community more
- be courageous to speak my truth; lighten the burden; be aware of unconscious biases
- the whole process provides an opportunity for work/and community
- knowing my space as an advocate
- helps and allows me to the outside the box
- taking back what I have learned
- move forward & diversity/racism training
- I work with childbearing women. This information is invaluable. So excited to share
- have better language to put a name to racism in my community & read previous answer
- support in sharing of collective experiences and the ability to ...systemic racism/insti. Racism as an underlying cause of health disparities
- understanding, listening

Appendix D

Participants' Additional Comments

- great work! I would love to attend future sessions & would recommend to friends & colleagues
- fantastic--wish we had a part 2 to discuss/brainstorm ways to effect change
- thank you for your work, sacrifice, and commitment to change
- thank you! Very impactful
- this type of training could be useful for leadership at LifeWorks
- I would've loved to have taken notes; however I completely understand the policy. Thank you so much for have this seminar!!
- I will be able to represent the community more effectively because I can't ignore the systemic racial biases in our country
- thank you
- thank you!!
- thank you for providing this education for free!
- thank you for providing this training-keep going
- thank you!
- I did not find the second facilitator (Dina?) as engaging and thought-provoking. I felt her participation distracted

- thank you!
- great!
- I felt uncomfortable yet appreciated being called on sporadically to share my thoughts. I'm a bit shy/introverted in groups and don't always speak up on my own, esp in situations where I feel nervous or uncomfortable. Thanks for gently forcing/helping me move out of my comfort zone
- thank you for opening a door to allow even non-professionals into this conversation
- one of the most interesting/engaging groups I have been a part of!
- thank you
- great session!
- thank you!
- awesome training! Thanks!!!
- thank you for the opportunity to learn, think, and share
- thank you, ladies!!! It was so great to see you'll again! Please keep up the work it is very effective!!! Thank you!!! God bless all your efforts!
- thank you!!
- great workshop
- y'all were fabulous! I appreciate what you do. This is so important & I wish you'd be able to come to SAFE
- quite informative, would love to have written material to direct, too



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