

# Strategy Round Table: DEIA Strategies in Action in RETAIN

Speaker: Trenita Childers, PhD

Moderator: Kirsten Firminger, PhD



**RETAIN**

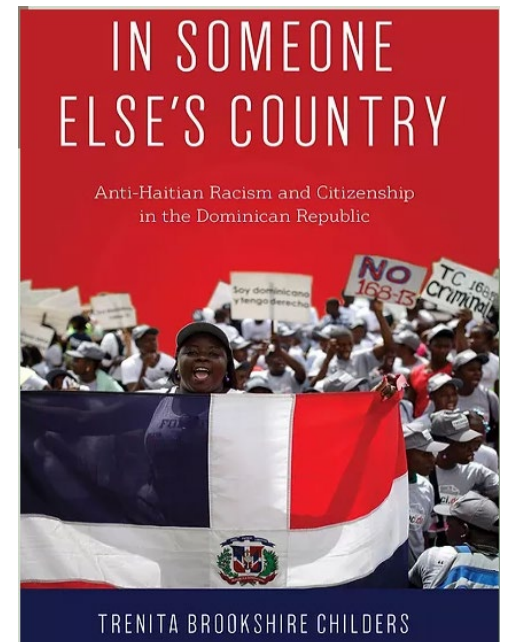
Retaining Employment and Talent  
After Injury/Illness Network

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# Trenita Childers, PhD

- Dr. Childers has extensive experience in research on social determinants of health and health equity in both U.S. and international settings.
- Her work focuses on capacity building to support collaborative partnerships, improving outcomes for historically marginalized populations, and making research results understandable to broad audiences.
- Dr. Childers serves as co-project director for the Health Equity for Afghan Refugees (HEAR) project where she leads project work in collaboration with two community-based organizations.
- In her book, *In Someone Else's Country: Anti-Haitian Racism and Citizenship in the Dominican Republic*, Dr. Childers uses ethnography to connect race, labor, and immigration.
- Previously, Dr. Childers was a Peace Corps volunteer in the Dominican Republic. She holds a Ph.D. from the Department of Sociology at Duke University and a B.A. in Sociology from Davidson College.



# How are you feeling today?



**RETAIN**

Retaining Employment and Talent After  
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# Beginning with intention.....

**What is my motivation for the work I do?**

# Defining Terms

- **Cultural competence** is a set of behaviors, attitudes and policies that
  - come together within a system or agency, or among professionals, and
  - foster improved effectiveness in cross-cultural situations.
- **Linguistic competence** is the capacity of an organization and its personnel to communicate effectively and convey oral and written information in a culturally appropriate manner that is easily understood by diverse audiences including persons of limited English proficiency and those who have low literacy skills or are not literate



# Defining Terms (cont.)

- **Diversity** encompasses the differences and similarities each of us brings to the workplace, including:
  - Gender, gender identity and expression, class, age, race and ethnicity, sexual orientation, as well as having a disability or being a veteran status;
  - Our varied life and community experiences; and
  - Our unique thoughts and approaches.
- **Inclusion** involves bringing together individuals with diverse perspectives and backgrounds to promote a culture that engages everyone and seeks equitable contributions from and opportunities for all.

“Diversity is being invited to the party. Inclusion is being asked to dance.”

Verna Myers,  
author and inclusion strategist

# Five Promising Practices for Community Engagement

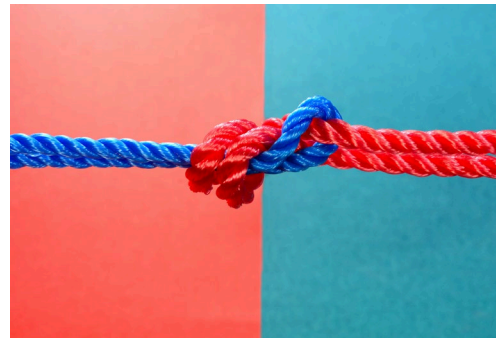
1. Build trustworthiness
2. Make adjustments to address power asymmetry
3. Be transparent with information
4. Be visible to maintain key relationships
5. Give and Get to maintain balance in the relationship



# 1. Build Trustworthiness

## Initiating Relationships

- Visibility + accountability = trust
- Need to give trust to get it
- Assume that trust is earned, not given.



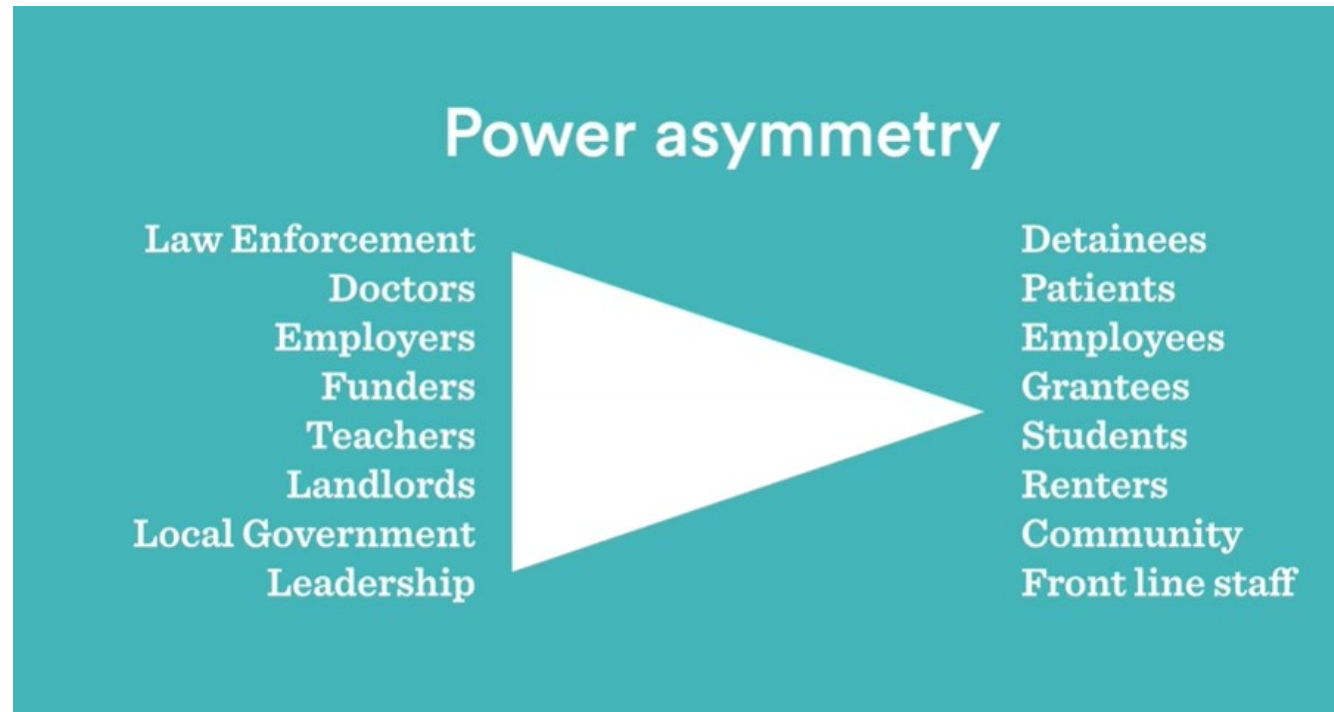
## Maintaining Established Relationships

- Visibility + accountability = trust
- Take care of your relationships [community partners are leveraging their credibility in the community for you]



# 2. Address Power Asymmetry

How can we level the playing field?



## 2. Address Power Asymmetry (cont.)

### **Initiating** Relationships

- training clinicians to provide care differently
- working with employers to be more inclusive and supporting of workers when they're recovering from injury or illness

### **Maintaining** Established Relationships

- safe space for honest agreement/disagreement
- consider the number and range of community perspectives
- identify and use counternarratives

# 3. Be Transparent

## Initiating Relationships

- being clear and forthcoming about what the program can and can't do
- ask partners what value they see in the program for their community



## Maintaining Established Relationships

- Be transparent about updates and changes that impact the program and/or the community
- This work is difficult and messy. Set expectations for the kinds of things that are stable and those that may change.

# 4. Be Visible

## **Initiating** Relationships

- availability to answer questions, co-create, be flexible
- one size fits all can sometimes feel like you don't see the community's unique assets and challenges
- a way to help you tailor what you're offering to what they need

## **Maintaining** Established Relationships

- availability to receive and respond to feedback
- attend events/activities that community partners sponsor

# 5. Give and Get

- **Initiating Relationships**
  - be clear about what the program offers the community and what you're asking the community to offer
- **Maintaining Established Relationships**
  - don't forget about people once you've gotten the response you needed

CONTRIBUTIONS (GIVE)	BENEFITS (GET)
What <b>COMMUNITY PARTNERS</b> will <u>contribute</u> (what community partners expect to contribute)	What <b>COMMUNITY PARTNERS</b> will <u>get</u> (what community partners expect to get)
What <b>CLINICAL PARTNERS</b> will <u>contribute</u> (what academic partners expect to contribute)	What <b>CLINICAL PARTNERS</b> will <u>get</u> (what academic partners expect to get)

“Give-Get Grid”: A tool for community and research partners to bidirectionally identify their expectations and commitment (Southerland et al., 2013)

# Takeaways for Community Engagement

- **Promising Practices:**

- Trustworthiness, Power Asymmetry, Transparency, Be visible, Give-Get

- **Action Steps:**

- Build relationships with community organizations (this also supports validity and reliability of findings)
- Thought partnership: Do not perpetuate the researcher as “brains” and community as “brawn” stereotype
- Help identify and mitigate risks
- Learn and understand the local context. Tailor the program or approach as appropriate.