Recommendations for Prioritizing Health Equity and Anti-Racism

Research Practices and Priorities Subcommittee (of the Anti-Racism and Equity Committee)

William K. Bleser, PhD, MSPH (co-chair); Managing Associate, Payment Reform and Population Health, Duke-Margolis Center
Michelle Scotton Franklin, PhD, MSN (co-chair); Postdoctoral Research Associate, Duke-Margolis Center
Janet Prvu Bettger, ScD, MS; Core Faculty, Duke-Margolis Center
Rushina Cholera, MD, PhD; National Clinician Scholars Program, Dept. of Pediatrics, Duke University School of Medicine
Kamaria Kaalund; Research Assistant, Duke-Margolis Center
Jacqueline Nikpour, RN; RWJF Future of Nursing Scholar, PhD Student, Duke University School of Nursing
Corinna Sorenson, PhD, MHSA, MPH; Director of Graduate Education, Core Faculty, Duke-Margolis Center
Andrea Thoumi, MPP, MSc; Health Equity Policy Fellow, Duke-Margolis Center
Rebecca G. Whitaker, PhD, MSPH; Managing Associate, Duke-Margolis Center
# Table of Contents

Goals of this Document and Research Practices and Priorities Subcommittee ...........................................3

**Recommendation 1**: Revise the Margolis Mission Statement and Adopt Values and Norms ......................4

**Recommendation 2**: Develop a Forum to Disseminate Health Equity, and Anti-Racism Research ..........7

**Recommendation 3**: Expand the Margolis Advisory Board ..........................................................................10

**Recommendation 4**: Systematize use of our “Tools for Prioritizing Health Equity and Anti-Racism in your Research” packet for project leaders .........................................................11
Goals of this Document and Research Practices and Priorities Subcommittee

This document provides recommendations for Duke-Margolis leadership to consider implementing to further operationalize our Center’s commitment to health equity and anti-racism, from the research practices and priorities perspective. It was developed by the Research Practices and Priorities Subcommittee of the Duke-Margolis Center’s broader Anti-Racism and Equity Committee.

Our Research Practices and Priorities Subcommittee has two objectives:

- Facilitate the alignment of Margolis research activities and project development with the Center’s enhanced values related to advancing health equity and anti-racism.
- Expand opportunities for members of the Margolis community to engage in work and discussions about racism, anti-racism, and health equity, while fostering professional connections with BIPOC researchers, academics, and practitioners.

Accordingly, we put together this packet of recommendations. Collectively, this packet will help leaders identify concrete next steps and collaborations that can help the Duke-Margolis Center for Health Policy clearly demonstrate its commitment to health equity and anti-racism. We provide four main recommendations: 1) revise the current Margolis mission statement and adopt norms and values that clearly articulate the Margolis commitment to health equity and anti-racism; 2) develop a forum to disseminate health equity and anti-racism research; 3) expand the Duke-Margolis advisory board to include members who are recognized leaders in addressing health inequities and improving equity; and 4) systematize use of our “Tools for Prioritizing Health Equity and Anti-Racism in your Research” packet for project leaders.

The permanent online link to this packet is: [insert link when finalized]
Recommendation 1: Revise the Margolis Mission Statement and Adopt Values and Norms

The members of this subcommittee recognize the current Margolis Mission Statement was developed carefully and concisely to capture the aims and purpose of the Center. With mounting evidence on the significant impact of structural racism and inequities on health disparities, Margolis has decided to make health equity and anti-racism a cross cutting theme throughout the Centers portfolios. Accordingly, we believe it is important to explicitly add health equity concepts to our existing mission statement.

In addition to the Mission Statement, we recommend adopting a values and norms section to further communicate the Center’s commitment to anti-racism and health equity as well as to a broader set of guiding principles that underpin our work and how we conduct our work.

Below is the revised Margolis Mission Statement and the new Values and Norms we have drafted. These have been revised based on our previous conversation. This subcommittee invites the opportunity to engage with leadership further regarding these suggested revisions and reiterate collaboratively based on these conversations.
Revised Margolis Mission Statement *(track changes emphasize health equity and anti-racism)*

The Center’s Mission is to improve health, health equity, and the value of health care through practical, innovative, and evidence-based policy solutions.

To achieve this mission, the Center:

- Leads problem-focused, interdisciplinary health policy research
- Conducts timely and impactful policy analysis
- Develops and supports innovative educational and training opportunities in health policy across the educational continuum
- Fosters collaborations with a diverse range of campus entities, programs, faculty, staff, and students
- Partners and engages with diverse external stakeholders
- Translates research and evidence into implementable policy guidance
- Evaluates health policy to generate equitable, innovative, and high-value solutions across local, national, and global settings

We prioritize work that:

- Spurs innovation that improves health and health equity while enhancing value
- Transforms health care through innovative use of increasingly rich data and analytics
- Strives to develop evidence-driven strategies to address root causes of health inequities, including structural racism, and behavioral and social determinants of health
- Develops more effective policies to advance health care integration while avoiding the adverse consequences of consolidation
- Informs and improves decision making for patients, community members, providers, product makers, payers, and policymakers
- Provides health policy education for the next generation of diverse leaders in medicine, nursing, business, public policy, law, engineering, and academic research
- Educates current and emerging health care leaders on the most effective and equitable policies and methods to transform health care
Proposed Values and Norms (proposed new statement to accompany our mission)

To advance our mission, we strive to hold ourselves accountable to the following values and community norms:

- **Integrity**: Promote ethical and honest practices in all aspects of our work.
- **Excellence**: Strive for the highest standards in research, education, training, and engagement.
- **Learning**: Foster a growth mentality where individuals are empowered to continuously evaluate and advance themselves, and to bring out the best in others.
- **Inclusiveness & Equity**: Strive to be an equitable and anti-racist organization. Acknowledges that this is a continual process; it is not a state, it is an act. Appreciate cultural values and diversity, treat all people with dignity and respect, and build an educational and workplace as diverse as the challenges and opportunities facing health care, population health, and health policy. Support safe, open, and respectful exchange of ideas, opinions, and experiences in all of our work and throughout our community.
- **Collaboration & Capacity Building**: Foster relationships across the various communities we serve; incorporate multiple perspectives into our research, teaching, and engagement; and empower collaborators to be partners in our work.
- **Social Justice & Health Equity**: Commit to serve the needs of the entire population, regardless of differences or circumstances, and address the barriers and inequities that hinder people’s ability to lead healthy lives through research, education, training, and engagement.
- **Compassion**: Health is a fundamental right of every human being.

By embodying our mission, values, and community norms, we will duly uphold [Duke’s Community Standards](https://www.duke.edu/careers/communitystandards) for its students, faculty and staff.

*Note: we adapt some of the above principles from work from others (including the University of Michigan’s School of Public Health and Department of Health Management & Policy, and the Harvard School of Public Health).*
Recommendation 2: Develop a Forum to Disseminate Health Equity, and Anti-Racism Research

To facilitate Center engagement and leadership in disseminating emerging health equity and anti-racism research with a healthy policy focus, we recommend the following options for consideration. The aim of all options is to enhance: awareness of topical health equity and anti-racism research that focuses on policy, opportunities for research collaborations, and knowledge research methods and best practices for studying health equity and anti-racism through a health policy lens.

1. A new seminar series or forum to occur a few times per semester.
2. Regularly dedicating a few Friday seminars per semester to showcase health equity and anti-racism research and policy.
3. Partnering with other Duke entities—either on a new forum or as a partner in bringing policy-relevant research to an existing health equity forum.
4. Longer-term collaboration with relevant local institutions and organizations to establish a Triangle Health Equity Network (e.g., UNC, NC state, WakeMed NC DHHS, RTI, SAS, BCBS-NC, etc.).

To start, we recommend either option 1 or 2.

- This could start in the Spring 2021 semester and continue indefinitely.
- Logistically, regardless of which is chosen, the dates could occupy Fridays where Margolis seminars are not scheduled, and utilize the same scheduling process and technology platform infrastructure.
- We request a dedicated budget be set aside to cover honorariums for speakers outside of Duke, and have suggested speakers on the following page.

Thinking longer term, we recommend the pursuit of Option 4 with potential kickoff in mid- to late-2021, or early 2022.
Below are thought leaders we have identified who could be invited to participate in this proposed seminar series.

<table>
<thead>
<tr>
<th>Affiliation</th>
<th>Name</th>
<th>Division/Title</th>
<th>Expertise</th>
<th>Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Duke</td>
<td>Brigit Carter</td>
<td>Associate Dean of Diversity/Inclusion, School of Nursing</td>
<td>Health equity, anti-racism, workforce diversity efforts</td>
<td><a href="mailto:Brigit.carter@duke.edu">Brigit.carter@duke.edu</a></td>
</tr>
<tr>
<td>Duke</td>
<td>Kimberly Johnson</td>
<td>Director, REACH Equity</td>
<td>Reducing racial &amp; ethnic disparities in healthcare</td>
<td><a href="mailto:johns196@mc.duke.edu">johns196@mc.duke.edu</a></td>
</tr>
<tr>
<td>Duke</td>
<td>Nadine Barrett</td>
<td>Assistant Professor in Family Medicine and Community Health</td>
<td>Improving equity &amp; quality of care for cancer pts. of color</td>
<td><a href="mailto:nadine.barrett@duke.edu">nadine.barrett@duke.edu</a></td>
</tr>
<tr>
<td>Duke</td>
<td>Schenita Randolph</td>
<td>Assistant Professor, School of Nursing Co-Director, REACH Equity</td>
<td>HIV &amp; sexual health interventions among Black adolescents</td>
<td><a href="mailto:schenita.randolph@duke.edu">schenita.randolph@duke.edu</a></td>
</tr>
<tr>
<td>Duke</td>
<td>Keisha Bentley-Edwards</td>
<td>Assistant Professor in Medicine</td>
<td>Race, stress, &amp; racism; impact on social &amp; health disparities</td>
<td><a href="mailto:keisha.bentley.edwards@duke.edu">keisha.bentley.edwards@duke.edu</a></td>
</tr>
<tr>
<td>Duke Non-Duke</td>
<td>Jonathan Wilson-Hartgrove</td>
<td>Adjunct in Sanford (Duke Divinity grad) Director, School for Conversion</td>
<td>Leader in the Poor People’s Campaign, which focuses on health policy as a moral issue (among many other issues)</td>
<td><a href="https://jonathanwilsonhartgrove.com/contact/">https://jonathanwilsonhartgrove.com/contact/</a></td>
</tr>
<tr>
<td>Duke</td>
<td>Oluwadamilola Fayanju</td>
<td>Assistant Professor of Surgery Associate Director, Duke Forge</td>
<td>Big data to reduce disparities among breast cancer patients</td>
<td><a href="mailto:lola.fayanju@duke.edu">lola.fayanju@duke.edu</a></td>
</tr>
<tr>
<td>Duke</td>
<td>Charmaine Royal</td>
<td>Associate Professor of African and African-American Studies and Global Health</td>
<td>Intersection of race and genomics/genetics and subsequent ethical, legal, and social issues</td>
<td><a href="mailto:charmaine.royal@duke.edu">charmaine.royal@duke.edu</a></td>
</tr>
<tr>
<td>Duke</td>
<td>Patrick Pun</td>
<td>Associate Professor of Medicine</td>
<td>Chronic kidney disease risk stratification &amp; disparate outcomes</td>
<td><a href="mailto:patrick.pun@duke.edu">patrick.pun@duke.edu</a></td>
</tr>
<tr>
<td>Duke</td>
<td>Angela Richard-Eaglin</td>
<td>Assistant Professor, School of Nursing</td>
<td>Cultural intelligence &amp; expanding diversity – certified cultural intelligence (CQ) educator</td>
<td><a href="mailto:angela.richard-eaglin@duke.edu">angela.richard-eaglin@duke.edu</a></td>
</tr>
<tr>
<td>Duke</td>
<td>Kathryn Whetten</td>
<td>Associate Director for Community and Culture, Duke Global Health Institute Professor, Public Policy, Nursing, Community and Family Medicine and Global Health Director, Center for Health Policy and Inequalities Research</td>
<td>Life course events and social/environmental factors that influence health related behaviors and wellbeing</td>
<td><a href="mailto:k.whetten@duke.edu">k.whetten@duke.edu</a></td>
</tr>
<tr>
<td>Duke</td>
<td>Jen Zuckerman</td>
<td>Director of Strategic Initiatives at World Food Policy Center, Sanford School of Public Policy, Duke University</td>
<td>Develop and lead the strategy, structure, and culture for a new university center - Root the work of the World Food Policy Center in North Carolina, leading demonstration projects to create model food communities with a racial equity lens in Durham and Edgecombe counties</td>
<td><a href="mailto:jennifer.zuckerman@duke.edu">jennifer.zuckerman@duke.edu</a></td>
</tr>
<tr>
<td>Duke</td>
<td>Sarah Gaither</td>
<td>Assistant Professor, Psychology &amp; Neuroscience</td>
<td>Biracial identities &amp; social interactions, - How having multiple identities shapes social behaviors and racial perceptions</td>
<td><a href="mailto:sarah.gaither@duke.edu">sarah.gaither@duke.edu</a></td>
</tr>
<tr>
<td>Duke</td>
<td>Ashleigh Shelby Rosette</td>
<td>Sr. Associate Dean of Executive MBA &amp; Non-Degree Programs; Associate Professor of Management &amp; Organizations</td>
<td>Diversity, leadership, &amp; negotiations in organizational settings</td>
<td><a href="mailto:arosette@duke.edu">arosette@duke.edu</a></td>
</tr>
<tr>
<td>Duke</td>
<td>Jay Pearson</td>
<td>Assistant Professor of Public Policy</td>
<td>Policies that influence structural inequality &amp; SDOH</td>
<td><a href="mailto:jay.pearson@duke.edu">jay.pearson@duke.edu</a></td>
</tr>
<tr>
<td>Duke</td>
<td>Adam Hollowell</td>
<td>Director, Global Inequity Research Initiative</td>
<td>Ethics, race, &amp; public policy intersections</td>
<td><a href="mailto:adam.hollowell@duke.edu">adam.hollowell@duke.edu</a></td>
</tr>
<tr>
<td>Duke</td>
<td>Briella Hargrove</td>
<td>Research associate, Samuel DuBois Cook Center</td>
<td>Media &amp; communications</td>
<td>briella@<a href="mailto:hargrove@duke.edu">hargrove@duke.edu</a></td>
</tr>
<tr>
<td>Duke</td>
<td>Clinton Boyd Jr.</td>
<td>Postdoctoral associate, Samuel DuBois Cook Center</td>
<td>Race/ethnicity, social inequality, urban sociology, family policy, parenting &amp; African-American families</td>
<td><a href="mailto:Clinton.boyd@duke.edu">Clinton.boyd@duke.edu</a></td>
</tr>
<tr>
<td>Duke</td>
<td>Omer Ali</td>
<td>Postdoctoral associate, Samuel DuBois Cook Center</td>
<td>causes and consequences of economic and political inequality</td>
<td><a href="mailto:Omer.ali@duke.edu">Omer.ali@duke.edu</a></td>
</tr>
<tr>
<td>Institution</td>
<td>Name</td>
<td>Role and Affiliation</td>
<td>Specialties and Areas of Focus</td>
<td>Email Address</td>
</tr>
<tr>
<td>------------</td>
<td>---------------------</td>
<td>----------------------------------------------------------</td>
<td>--------------------------------------------------------------------</td>
<td>---------------------------------------------------</td>
</tr>
<tr>
<td>Duke</td>
<td>Melissa Scott</td>
<td>Postdoctoral associate, Samuel DuBois Cook Center</td>
<td>Environmental/population health, bioethics, race, climate change, energy, &amp; health inequalities</td>
<td><a href="mailto:Melissa.scott@duke.edu">Melissa.scott@duke.edu</a></td>
</tr>
<tr>
<td>Non-Duke</td>
<td>Camara Jones</td>
<td>Senior Fellow, Satcher Health Leadership and Cardiovascular Research Institute</td>
<td>Social epidemiology, research methods, anti-racism</td>
<td><a href="mailto:cpjones@msm.edu">cpjones@msm.edu</a></td>
</tr>
<tr>
<td>Non-Duke</td>
<td>Risa Lavizzo-Mourey</td>
<td>Penn Integrates Knowledge professor</td>
<td>Health disparities &amp; access to care</td>
<td><a href="mailto:Risa.Lavizzo-Mourey@pennmedicine.upenn.edu">Risa.Lavizzo-Mourey@pennmedicine.upenn.edu</a></td>
</tr>
<tr>
<td>Non-Duke</td>
<td>Loretta Sweet Jemmott</td>
<td>Vice President of Health Equity, Drexel</td>
<td>HIV risk reduction, community-engaged research</td>
<td><a href="mailto:jemmott@drexel.edu">jemmott@drexel.edu</a></td>
</tr>
<tr>
<td>Non-Duke</td>
<td>Georges Benjamin</td>
<td>Executive Director, APHA</td>
<td>Public health, population health, preventative care</td>
<td><a href="mailto:georges.benjamin@apha.org">georges.benjamin@apha.org</a></td>
</tr>
<tr>
<td>Non-Duke</td>
<td>Aduaeze Enekwechi</td>
<td>President, IMPAQ Research Associate Professor, Milken Institute School of Public Health</td>
<td>Health workforce, equity &amp; policy, ACA strategy, cost/quality measurement</td>
<td><a href="mailto:aenekwechi@gwu.edu">aenekwechi@gwu.edu</a></td>
</tr>
<tr>
<td>Non-Duke</td>
<td>Laura Gerald</td>
<td>President, Kate B. Reynolds Charitable Trust</td>
<td>Statewide healthcare improvement for Medicaid recipients, social drivers of health</td>
<td><a href="mailto:laura@kbr.org">laura@kbr.org</a></td>
</tr>
<tr>
<td>Non-Duke</td>
<td>Monica McLemore</td>
<td>Associate Professor, UCSF School of Nursing</td>
<td>Public health, global health, reproductive justice</td>
<td><a href="mailto:Monica.McLemore@ucsf.edu">Monica.McLemore@ucsf.edu</a></td>
</tr>
<tr>
<td>Non-Duke</td>
<td>Rachel Hardeman</td>
<td>Associate Professor and Blue Cross Endowed Professor of Health and Racial Equity, Division of Health Policy and Management</td>
<td>Reproductive health equity researcher whose program of research applies the tools of population health science and health services research to elucidate a critical and complex determinant of health inequity—racism</td>
<td><a href="mailto:hard0222@umn.edu">hard0222@umn.edu</a></td>
</tr>
<tr>
<td>Non-Duke</td>
<td>Antonia Villarruel</td>
<td>Dean, Univ. of Penn School of Nursing</td>
<td>Latinx health equity, population health</td>
<td><a href="mailto:nursingdean@nursing.upenn.edu">nursingdean@nursing.upenn.edu</a></td>
</tr>
<tr>
<td>Non-Duke</td>
<td>Leonardo Cuello</td>
<td>Director, Health Policy – NHeLP</td>
<td>Medicaid reform/expansion, payment policies</td>
<td><a href="https://healthlaw.org/team/leo-cuello/">https://healthlaw.org/team/leo-cuello/</a></td>
</tr>
<tr>
<td>Non-Duke</td>
<td>Ericka Hart</td>
<td>Award winning speaker/writer, adjunct faculty at Columbia in sexuality education</td>
<td>Black queer/femme activism, cancer survivorship, race/gender intersections with chronic illness</td>
<td><a href="http://ihartericka.com/">http://ihartericka.com/</a></td>
</tr>
<tr>
<td>Non-Duke</td>
<td>Paula Lantz</td>
<td>Associate Dean for Academic Affairs; James B. Hudak Professor of Health Policy; Professor of Public Policy and Health Management &amp; Policy</td>
<td>Social demographer, studies the role of public policy in improving population health and reducing social disparities in health</td>
<td><a href="mailto:plantz@umich.edu">plantz@umich.edu</a></td>
</tr>
<tr>
<td>Non-Duke</td>
<td>Marshall Chin</td>
<td>Richard Parrillo Family Professor of Healthcare Ethics in the Department of Medicine at the University of Chicago and Co-Director of the Robert Wood Johnson Foundation (RWJF) Advancing Health Equity: Leading Care, Payment, and Systems Transformation Program Office</td>
<td>Health equity, business case for health equity, clinical medicine</td>
<td><a href="mailto:mchin@medicine.bsd.uchicago.edu">mchin@medicine.bsd.uchicago.edu</a></td>
</tr>
</tbody>
</table>
Recommendation 3: Expand the Margolis Advisory Board

We support the recent expansion of the Margolis advisory board to include Michelle McMurry-Heath, Rebekah Gee, and Esther Krofah.

Additionally, we propose further expansion of the board to include members who are recognized leaders in health equity. Furthermore, we suggest that these members represent organizations with deep commitment to the local communities in which they serve. Ideally, at least one of these members will be based in North Carolina, given our continued work to improve health, health equity, and the value of health care in the state. Below are some individuals that our subcommittee identified that we believe meet these criteria and could be considered.

**Toyin Ajayi, MD**  
Chief Health Officer, Cityblock health

**Uché Blackstock, MD**  
Founder & CEO, Advancing Health Equity

**John Lumpkin, MD, MPH**  
President, Blue Cross and Blue Shield of North Carolina Foundation

**Laura Gerald, MD**  
President, Kate B Reynolds Charitable Trust

**Eugene Woods, MBA, MHA**  
President & CEO, Atrium Health

**Crystal Wiley Cené, MD, MPH**  
Associate Professor, Division of General Medicine and Clinical Epidemiology, UNC School of Medicine

*Represents local organizations
Recommendation 4: Systematize use of our “Tools for Prioritizing Health Equity and Anti-Racism in your Research” packet for project leaders

In addition to this packet of recommendations to leadership, we created a second packet for project leaders, titled “Tools for Prioritizing Health Equity and Anti-Racism in your Research.” That document is meant to be a useful resource for Duke-Margolis staff project leaders. It walks project leaders through how to assess research projects in development or in early stages of implementation for how the work can prioritize health equity, anti-racism, or both. It provides simple 1-2-page tools for thinking through current or in-development project plans, including the community’s voice, and identifying funders. Then it provides a series of detailed appendices to aid in using these tools and designing research. The permanent online link to this packet is: [insert link when finalized]

We recommend that the use of that tools packet become systemized through Margolis’ business development processes. For example, when a project becomes an item in our ongoing business development tracking table during management meetings, it could trigger the dissemination of this packet to that project lead. Further, it could be available to all on the Margolis Resource Portal.