

Duke

MARGOLIS CENTER
for Health Policy

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 <i>“Tools for Prioritizing Health Equity and Anti-Racism in your Research”</i> 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 ~~and~~ enhancing es 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](#) 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.

Affiliation	Name	Division/Title	Expertise	Contact
Duke	Brigit Carter	Associate Dean of Diversity/Inclusion, School of Nursing	Health equity, anti-racism, workforce diversity efforts	Brigit.carter@duke.edu
Duke	Kimberly Johnson	Director, REACH Equity Associate Professor of Medicine	Reducing racial & ethnic disparities in healthcare	johns196@mc.duke.edu
Duke	Nadine Barrett	Assistant Professor in Family Medicine and Community Health	Improving equity & quality of care for cancer pts. of color	nadine.barrett@duke.edu
Duke	Schenita Randolph	Assistant Professor, School of Nursing Co-Director, REACH Equity	HIV & sexual health interventions among Black adolescents	schenita.randolph@duke.edu
Duke	Keisha Bentley-Edwards	Assistant Professor in Medicine	Race, stress, & racism; impact on social & health disparities	keisha.bentley.edwards@duke.edu
Duke Non-Duke	Jonathan Wilson-Hartgrove	Adjunct in Sanford (Duke Divinity grad) Director, School for Conversion	Leader in the Poor People's Campaign, which focuses on health policy as a moral issue (among many other issues)	https://jonathanwilsonhartgrove.com/contact/
Duke	Oluwadamilola Fayanju	Assistant Professor of Surgery Associate Director, Duke Forge	Big data to reduce disparities among breast cancer patients	lola.fyanju@duke.edu
Duke	Charmaine Royal	Associate Professor of African and African-American Studies and Global Health	Intersection of race and genomics/genetics and subsequent ethical, legal, and social issues	charmaine.royal@duke.edu
Duke	Patrick Pun	Associate Professor of Medicine	Chronic kidney disease risk stratification & disparate outcomes	patrick.pun@duke.edu
Duke	Angela Richard-Eaglin	Assistant Professor, School of Nursing	Cultural intelligence & expanding diversity – certified cultural intelligence (CQ) educator	angela.richard-eaglin@duke.edu
Duke	Kathryn Whetten	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	life course events and social/environmental factors that influence health related behaviors and wellbeing	k.whetten@duke.edu
Duke	Jen Zuckerman	Director of Strategic Initiatives at World Food Policy Center, Sanford School of Public Policy, Duke University	-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	jennifer.zuckerman@duke.edu
Duke	Sarah Gaither	Assistant Professor, Psychology & Neuroscience	- Biracial identities & social interactions, - How having multiple identities shapes social behaviors and racial perceptions	sarah.gaither@duke.edu
Duke	Ashleigh Shelby Rosette	Sr. Associate Dean of Executive MBA & Non-Degree Programs; Associate Professor of Management & Organizations	Diversity, leadership, & negotiations in organizational settings	arosette@duke.edu
Duke	Jay Pearson	Assistant Professor of Public Policy	Policies that influence structural inequality & SDOH	jay.pearson@duke.edu
Duke	Adam Hollowell	Director, Global Inequity Research Initiative	Ethics, race, & public policy intersections	adam.hollowell@duke.edu
Duke	Briella Hargrove	Research associate, Samuel DuBois Cook Center	Media & communications	briella@hargrove@duke.edu
Duke	Clinton Boyd Jr.	Postdoctoral associate, Samuel DuBois Cook Center	Race/ethnicity, social inequality, urban sociology, family policy, parenting & African-American families	Clinton.boyd@duke.edu
Duke	Omer Ali	Postdoctoral associate, Samuel DuBois Cook Center	causes and consequences of economic and political inequality	Omer.ali@duke.edu

Duke	Melissa Scott	Postdoctoral associate, Samuel DuBois Cook Center	Environmental/population health, bioethics, race, climate change, energy, & health inequalities	Melissa.scott@duke.edu
Non-Duke	Camara Jones	Senior Fellow, Satcher Health Leadership and Cardiovascular Research Institute	Social epidemiology, research methods, anti-racism	cpjones@msm.edu
Non-Duke	Risa Lavizzo-Mourey	Penn Integrates Knowledge professor	Health disparities & access to care	Risa.Lavizzo-Mourey@pennterapeutics.com
Non-Duke	Loretta Sweet Jemmott	Vice President of Health Equity, Drexel	HIV risk reduction, community-engaged research	jemmott@drexel.edu
Non-Duke	Georges Benjamin	Executive Director, APHA	Public health, population health, preventative care	georges.benjamin@apha.org
Non-Duke	Adaeze Enekwechi	President, IMPAQ Research Associate Professor, Milken Institute School of Public Health	Health workforce, equity & policy, ACA strategy, cost/quality measurement	aenekwechi@gwu.edu
Non-Duke	Laura Gerald	President, Kate B. Reynolds Charitable Trust	Statewide healthcare improvement for Medicaid recipients, social drivers of health	laura@kbr.org
Non-Duke	Monica McLemore	Associate Professor, UCSF School of Nursing	Public health, global health, reproductive justice	Monica.McLemore@ucsf.edu
Non-Duke	Rachel Hardeman	Associate Professor and Blue Cross Endowed Professor of Health and Racial Equity, Division of Health Policy and Management	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	hard0222@umn.edu
Non-Duke	Antonia Villarruel	Dean, Univ. of Penn School of Nursing	Latinx health equity, population health	nursingdean@nursing.upenn.edu
Non-Duke	Leonardo Cuello	Director, Health Policy – NHLP	Medicaid reform/expansion, payment policies	https://healthlaw.org/team/leo-cuello/
Non-Duke	Ericka Hart	Award winning speaker/writer, adjunct faculty at Columbia in sexuality education	Black queer/femme activism, cancer survivorship, race/gender intersections with chronic illness	http://ihartericka.com/
Non-Duke	Paula Lantz	Associate Dean for Academic Affairs; James B. Hudak Professor of Health Policy; Professor of Public Policy and Health Management & Policy	social demographer, studies the role of public policy in improving population health and reducing social disparities in health	plantz@umich.edu
Non-Duke	Marshall Chin	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	Health equity, business case for health equity, clinical medicine	mchin@medicine.bsd.uchicago.edu

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](#).