The Interplay Between Personal & Organizational Equity Journeys

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By Nasir Husain

About Learning for Action (LFA)

LFA's mission is to partner with social sector organizations to strengthen their learning culture and practice, in service of equity and justice. We do this through **strategic reflection and learning/evaluation, organizational development, and capacity building.**

We support our clients to tackle complex problems, push for structural and systemic change, and address the root causes of inequities. We hold diverse content area expertise, including **healthcare, education, economic mobility, immigration, advocacy, leadership development, arts/cultural programs, and building the capacities and power of communities.**

Our work is **person-centered, grounded in equity, and data driven**. We engage deeply with our clients, collaborating on and facilitating processes that draw on all partners' strengths, while also providing guidance and recommendations based on our extensive experience. We use inclusive and participatory processes that amplify and center the voices, perspectives, and stories of those closest to the work

Over the course of our 24-year tenure, we have conducted more than **900 evaluation, capacity building, and consulting projects for organizations, foundations, and government and county agencies** across the social sector. We have staff in all regions of the United States and experience with organizations doing work everywhere from their own neighborhoods to internationally.
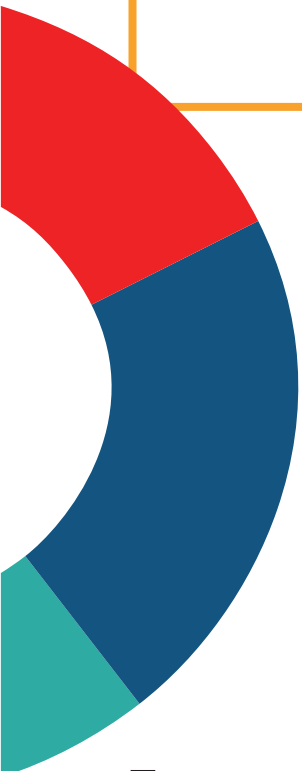
About Public Equity Group (PEG)

Public Equity Group (PEG) is a diverse practice of strategy and management consultants mobilized to help visionary leaders and organizations achieve impact. PEG works with partners poised to make a demonstrable difference on the "big issues of the day" — in service of equity. In particular, we look for clients with the following qualities:

- Deep equity/justice commitment and compatible organization values
- High potential for national or global impact, scale, and/or replication
- Strong leadership (strategic thinking, management, implementation)
- High organization capacity to implement (staff and board quality; planning, monitoring, operations, and systems quality)

About Robert Wood Johnson Foundation (RWJF)

Robert Wood Johnson Foundation (RWJF) is a leading national philanthropy dedicated to taking bold leaps to transform health in our lifetime. To get there, we must work to dismantle structural racism and other barriers to health. Through funding, convening, advocacy, and evidence-building, we work side-by-side with communities, practitioners, and institutions to achieve health equity faster and pave the way, together, to a future where health is no longer a privilege, but a right.

> " We all have to turn and look at ourselves. As long as you're turning and looking at yourselves, we're going to be alright, and we can keep moving forward.
>
> **– adrienne maree brown**
> Artist & Activist

> Equity work connects work and your personal life...and we have dehumanized the workspace for so long, so having that human work be brought into your work life can seem scary. "
>
> **– Stephanie Johnson**
> Research Associate, Data Across Sectors for Health

Introduction

Equity work ultimately strives to achieve justice and fairness for all, and this journey can be a joyous celebration of culture, diversity, and shared humanity. But equity work is also inherently personal and complex, demanding reflection on painful past experiences, the stark realities of societal disparities, one's own potential complicity in systems of inequity, and more. The multifaceted nature of equity work becomes even more dynamic at the organizational level. Each organization has its own mission, history, culture, and way of operating, all of which will necessarily inform and challenge the equity journey. In an effort to drive more equitable outcomes in the world, organizations must transform how they work across a number of dimensions. For example, an organization may make an explicit commitment to equity in its mission and vision statements, develop equity-focused programming, or revamp its human resources (HR) practices to drive increased diversity among job applicants and a more inclusive culture. All of these steps involve changes to organizational policies and practices.

At the same time, organizations are composed of individuals, each with their own personal identities, backgrounds, and experiences that inform their relationship to power and privilege, and thus their orientation toward equity. Some may have lived experiences of exclusion and/or racism, and some may occupy a position of relative privilege. In order for an organization to achieve more equitable outcomes, the individuals within it should, ideally, be committed to the effort, rowing in the same direction. Accordingly, the pace and extent of change for an organization is dependent on personal

growth and evolution among staff, particularly those in formal leadership positions. How can organizations design equity journeys that honor the experiences and perspectives of a diverse array of individuals? In what ways can individual growth support organizational growth, and vice versa?

These questions were core to the design of the Equity Learning Lab experience. In early 2021, nearly 40 organizations funded by the Robert Wood Johnson Foundation (RWJF) embarked on a collective effort to build their organizational capacity around advancing racial+ equity.[1] This project, called the Equity Learning Lab (ELL), involved organizations that were already addressing some dimension of health equity in their work. The ELL program was informed by extensive research into existing models for strategy development, evaluation, and organizational development, including how personal and organizational change happen in relation to equity work. In a 2020 article in the Stanford Social Innovation Review, Mary-Frances Winters of The Winters Group (an organizational development and DEI consultancy), argues that, when it comes to an organization's equity work, "collective accountability starts with personal accountability." Winters recommends that individual work in the form of "self-education, self-awareness, self-inquiry, and personal change" is essential to building an organization's capacity to advance equity internally and externally. There are many mechanisms by which to foster this individual growth, including formal anti-racism training and education, and safe and brave spaces for leadership and staff to engage in honest conversation, peer learning, and healing.[2] Winters' conclusions reflect the broader body of research behind the ELL's fundamental philosophy: to truly transform an organization's policies and practices to focus on equity, the leaders and staff of that organization must also undergo a parallel, personal transformation.

This case study examines the interplay between personal and organizational equity journeys at three health-focused initiatives that participated in the ELL: AcademyHealth, Data Across Sectors for Health, and the Urban Institute's Health Policy Center. These groups have different structures, geographical scopes, and programmatic approaches. But, given America's deep disparities in health care access and health outcomes, all of these entities have identified equity as a key element of their impact.

ACADEMY HEALTH is a national nonprofit dedicated to advancing health policy, programs, and practices by fostering collaboration among researchers, policymakers, and practitioners. Since its inception in 2000, AcademyHealth has been disseminating evidence and convening stakeholders across the health care landscape at events like the Annual Research Meeting, which showcases cutting-edge health services research with an eye towards informing policy and practice.

DATA ACROSS SECTORS FOR HEALTH (DASH) is a regional collaboration between the Illinois and Michigan Public Health Institutes that promotes data-sharing to improve community health outcomes. DASH is engaged in several health data projects, including serving as a partner in the Center for Disease Control's Data Modernization Initiative, which supports state and local health departments in optimizing their data systems.

HEALTH POLICY CENTER (HPC) is a division within the Urban Institute (a large national nonprofit), that serves as a think tank focused on informing health policy decisions through rigorous analysis and data-driven insights. The HPC has released several research-based products, including the Health Insurance Policy Simulation Model, which forecasts the effects of policy changes on insurance costs and coverages for employers and individuals.

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1 The term "racial+ equity" refers to the fact that while racial equity was the primary focus of this project, organizations also had latitude to address other dimensions of equity.

2 Mary-Frances Winters, "Equity and Inclusion: The Roots of Organizational Well-Being," Stanford Social Innovation Review, October 14, 2020.

For each organization, equity has become an essential lens for developing priorities and analyzing changes to health policy and practice.

As part of an organizational effort to advance equity across their work, individual leaders and staff at AcademyHealth, DASH, and the Urban Institute's HPC engaged in deep personal reflection and transformation work. Participants at each organization spoke to the importance of applying ELL resources to their own personal development and the impact this personal growth had on their ability to drive organizational change and community impact. Individuals who participated in the ELL described the experience as perspective-shifting: the work helped leaders deeply understand the causes and implications of structural racism, fostered community and connection between peers, and enabled participants to connect and apply their personal insights to organizational work. Participants also reported seeing concurrent improvements to organizational culture and an increased focus on equity in key strategies and programs. These gains indicate the value of making space and allocating time for staff to reflect on their own personal journeys and connect these insights to their organization's work.

Learning Lays The Foundation For Growth

As its name suggests, the Equity Learning Lab emphasizes the importance of learning and provides a series of resources to facilitate growth. Through their participation in the ELL, each organization was paired with a coach and provided with access to affinity groups, curriculum modules, and other learning opportunities — all of which operated at both the individual and organizational levels. Collectively, these ELL resources are designed to build upon each other, offering a combination of self-directed, one-on-one, and group learning experiences that foster personal growth, ultimately supporting the organization's ability to drive impact in the world. Staff at each organization found these resources to be valuable, providing foundational knowledge on race and equity and fostering meaningful reflection about one's personal relationship to the issue. For example, Lisa Dubay, a Senior Fellow at the Urban Institute's HPC, shared, "I definitely think the ELL learning resources made me think about things from a different perspective...I am a relatively privileged White woman, and these resources presented information to me in ways that really shifted my thinking about my own privilege and what I bring with me wherever I go."

To establish both a baseline understanding of key equity-related issues and a series of concrete resources for advancing equity within an organization, the ELL provides participants with a seven-module curriculum. The curriculum was curated from an extensive scan of available media, frameworks, and tools, with a focus on the health space. Critically, the curriculum includes modules focused on both personal and organizational change.

The first four modules, referred to as the "self-guided curriculum," are as follows:

◆ **Foundational Learning — Structural Racism and Health Equity**

◆ **Making Space for Conversations on Equity and Race**

◆ **Supporting Personal Reflection and Growth**

◆ **Leading Organizational Change**

The content and sequencing of these modules is indicative of the ELL's overall theory of change, with personal growth driving organizational transformation, and in turn leading to improved outcomes for communities. Module One (Structural Racism and Health Equity) provides background on the historical foundations of race and racism in the U.S. and the ongoing impact this history has on health outcomes today. For example, one resource is a podcast from the 1619 Project detailing how the current state of the U.S. health care system is rooted in racist policies that denied Black Americans access to hospitals and doctors.[3] The module culminates in a series of reflection questions, encouraging participants to think critically about their own experiences with oppressive health care systems and how their organizations interact with these systems. The ultimate aim of these reflections is that participants begin to reimagine health care systems so that they better serve communities of color. Module Two (Making Space for Conversations on Equity and Race) helps teams engage in respectful and courageous discussion on the emotionally complex issue of racial equity. Individual leaders are asked to reflect on questions like, "What might you need to do individually and interpersonally to establish a brave space for challenging or 'uncomfortable' conversations within your organizations?" In Module Three (Supporting Personal Reflection and Growth), leaders are specifically asked to reflect on their own "inner work" and "the role of identity, power, and privilege in transformational work." Resources include the "Personal Privilege Profile," which asks participants to reflect on how various aspects of their identity offer privileges or present challenges. Then, after this deep personal work, comes the curriculum's pivot to organizational work. Module Four (Leading Organizational Change) provides actionable guides, toolkits, and case studies on how to lead organizational change efforts focused on racial equity. The structure and order of these modules reflect how the ELL frames foundational learning and personal reflection as key prerequisites to leading organizational transformation and driving more equitable community impact.

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3 1619 Podcast, "Episode 4: How the Bad Blood Started," September 13, 2019.

The final three curriculum modules, referred to as "resource banks," provide more practical tools and resources for embedding equity principles into organizational structures and processes:

Resources for Embedding Race Equity in Organizational Development

Resources for Embedding Race Equity in Strategy

Resources for Embedding Race Equity in Learning and Evaluation

These modules are designed to build upon past lessons on personal and organizational change dynamics and to support leaders in executing their equity journeys.

At ELL-wide convenings, participants also had the opportunity to learn from leading experts and thinkers. Past speakers include adrienne maree brown, a writer, musician, and podcaster committed to transformation and healing through art; and Trabian Shorters, a social entrepreneur and the founder of BMe Community, which uses an asset-framing approach to build caring and prosperous communities. These sessions provided education and inspiration to leaders on their interwoven personal and organizational equity journeys. "The speakers at the ELL convening...were so good that I went back and looked up other presentations they had on YouTube, and we hosted watch parties for the rest of the DASH staff who weren't able to attend the convening," recalled Melissa Moorehead, a Co-Director of DASH. "I really appreciated hearing from people who were able to speak so powerfully about how to take a personal equity journey and what it might look like to embed equity in your organization."

Equity Work is Inherently Personal, Emotional, & Vulnerable

The personal reflection invited by meaningful equity work is not always comfortable. Personal identity and experiences of systemic oppression can significantly affect one's orientation towards an organizational equity journey. Given these personal associations, equity work can be a deeply emotional experience at both the individual and collective level. Reflecting back on her own experience with the ELL, Stephanie Johnson, a Research Associate with DASH, said, "Equity work connects work and your personal life...and we have dehumanized the workspace for so long, so having that human work be brought into your work life can seem scary."

Acknowledging the difficult nature of this work, the ELL aims to create time and space for coaching, community building, and emotional support. ELL coaches represent a diverse group of strategists, researchers, writers, advocates, and leaders, all with deep expertise on organizational change and equity. For example, Ryan Davis, an ELL coach for AcademyHealth, serves as the Vice President of Diversity, Equity, and Inclusion for the National Association of REALTORS; Bess Bendet, a coach for DASH, brings 30 years of experience working for philanthropic foundations and social justice organizations; and Eric Wat, a coach for the Urban Institute's Health Policy Center, is a writer and community advocate with training in both ethnic studies and queer studies. Each of these coaches has engaged in deep personal equity work, and has extensive experience embedding equity principles into organizational programs, policies, and practices. Describing his philosophy around equity-focused coaching, Eric Wat said, "I focus on the personal and relational aspects, as well as the technical aspects of this work...It's not just about what framework to use, but it's also about looking at our own personal histories and experiences and understanding what we bring to the work. Coaching is an opportunity to bring all these things together for me."

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> **– Eric Wat**
> **Coach, Urban Institute Health Policy Center**

Lisa Dubay, a Senior Fellow at the Urban Institute's HPC, was tasked with running a DEI council for the HPC with the charge of incorporating equity into organizational "content, climate, and culture." Dubay is a researcher with over 25 years of experience evaluating the effects of public policies on access to care, health care utilization, health insurance coverage, and health outcomes. But when it came to running the internal DEI council, she initially felt overwhelmed by her charge, which required both personal and organizational transformation. "After George Floyd's murder, I was doing a lot more reading and a lot more examining of the research that I'd done in the past, and I was also charged with running the DEI council. I'm a researcher, not an HR person, so it was kind of a new task for me," Dubay recalled. According to Dubay, Eric Wat's coaching was an essential asset in grappling with the emotional aspects of her leadership role, and situating herself in the discomfort. "We were dealing with a bunch of sensitive topics from staff at a variety of levels in the organization including power hierarchies alone and their intersection with race," said Dubay. "I was just really glad to have Eric as a coach because initially I felt like I didn't know what I was doing."

For DASH — a collaboration between the Illinois Public Health Institute (IPHI) and the Michigan Public Health Institute (MPHI) — much of the equity journey involved bridging the cultural divide between the two institutes. "These are two very different organizations in terms of size, leadership, and culture," said Bess Bendet, DASH's ELL coach. DASH's status as a cross-organizational collaboration came with some inherent challenges. For example, DASH does not have its own HR apparatus; staff members affiliated with IPHI are governed by IPHI HR policies, and likewise for MPHI-affiliated staff. Operating within these confines, DASH had to find ways to mesh very different cultures and advance equity across the

the two. This was an emotional process, involving extensive group coaching and facilitated discussion. "We had multiple perspectives that needed to be shared and heard," recalled Stephanie Johnson, an MPHI-affiliated Research Associate on the DASH team. "We did hours and hours of talking, and, frankly, a lot of venting. That was a year and a half of work with Bess [Bendet]. It takes time. One thing I'm working on personally is patience and compassion, and the ELL coaching helped with that. It was like therapy in a way; we talked about our experiences and processed our next steps together."

Affinity groups were another especially key component of the ELL process for the organizations profiled, providing individual participants with a safe space to learn from and share with peers with similar identities, lived experiences, and/or organizational roles. ELL affinity groups were not held within organizations, instead bringing together interested participants from across multiple organizations. Groups like "White Women and the Power Paradox" and "Black Women and Femmes Care Circle" addressed both the practical and emotional aspects of specific racial and gender dynamics.[4]

In the U.S., nonprofit leadership remains disproportionately White, a reflection of ongoing inequities within the sector. A recent study found that 79% of nonprofit board chairs and executive directors are White (in contrast to 60% of the general population and 68% of the overall nonprofit workforce).[5]

This can create complicated dynamics for organizations pursuing racial equity work, including positional and power imbalances between White senior leaders and more diverse (and less senior) staff members, as well as disconnects between the lived experiences of White senior leaders and the diverse communities their organizations increasingly aim to serve. Experts suggest that a lack of diversity in nonprofit leadership can be a barrier to achieving impact.[6] Margo Edmunds, the Vice President for Evidence Generation and Translation at AcademyHealth, was upfront about this: "Having two White women lead this [equity] initiative...that's a challenge." At the peer-learning convening that concluded a recent ELL cohort, participants were asked to share what has been difficult or scary over the course of the experience. Many highlighted the role of White leaders, with responses including "defensive White leaders" and "White guilt."

Because many organizations participating in the ELL have White women as leaders, one of the key affinity groups offered was called "White Women and the Power Paradox." The goal of this group was to explore the complex dynamics of power and privilege faced by White women, delving into the intersectionality of gender and race, and the challenges and opportunities this identity presents when undertaking equity work. "White women can unintentionally be a part of the [racial inequity] problem, because we believe we are doing all the right things, but we may not have thought about how we're perpetuating racism or racist stereotypes," reflected Bess Bendet, the ELL coach for DASH. "If that's not examined at the individual level, then the organizational or programmatic work will suffer."

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4 Though these affinity groups were focused on specific racial and gender identities, they were open to all.
5 Faith Mitchell, "Nonprofit Leadership is Out of Step with America's Changing Demographics," Urban Institute, December 9, 2021.
6 Sahar Andrade, "Why Diversity on Nonprofit Boards Is Crucial to Their Mission," Forbes, September 27, 2021.

> **❝**
> I appreciate that the ELL recognized that there needs to be a place for us as White leaders to recognize the ways in which we perpetuate inequity... because **I don't think you can be an effective White leader in this century without addressing White supremacy and thinking deeply about your own privilege and how that manifests in your organization.**
>
> **– Madeline McNeely**
> ELL coach for AcademyHealth

Madeline McNeely, an ELL coach for AcademyHealth and a facilitator of the "White Women and the Power Paradox" affinity group, said, "I appreciate that the ELL recognized that there needs to be a place for us as White leaders to recognize the ways in which we perpetuate inequity...because I don't think you can be an effective White leader in this century without addressing White supremacy and thinking deeply about your own privilege and how that manifests in your organization."

The "White Women and the Power Paradox" affinity group is intensive, consisting of twelve hours of content and discussion over six sessions. Several White women leaders at AcademyHealth, DASH, and the Urban Institute's HPC chose to participate in the group; all spoke to its tremendous value. "I did it twice, and I would do it again at the drop of a hat," said Melissa Moorehead of DASH. "It made me much more aware and much more comfortable talking about issues of race, gender, and power, and appropriately situating myself in the conversation." Margo Edmunds of AcademyHealth shared that "the experience [of affinity groups and coaching] has gotten me more comfortable with why White people need to step up and how we can best step up." In addition to participating in the "White Women and the Power Paradox" affinity group, Edmunds received one-on-one coaching from one of the group's facilitators, Madeline McNeely. "One of the things I do as a coach is to help White leaders on multiple levels," explained McNeely. "There's the tactical, practical level of organizational change, where I worked with Margo to figure out a roadmap for how AcademyHealth becomes a thought leader in the field of research on health equity issues...But then there's also the work at the personal, spiritual level... really asking her to track her consciousness about what's happening at the interpersonal level with colleagues of color and other White colleagues, thinking about power differentials in decision-making, and being more bold about interrupting internalized racism." For example, Edmunds and McNeely worked together on how best to handle instances of perceived bias in the workplace, an issue with personal, interpersonal, and organizational implications.

Lisa Dubay of the Urban Institute's HPC also found the affinity group to be very valuable and recalled a specific activity where participants were asked to reflect on their own cultural and leadership traits and how those traits may perpetuate cultural dysfunction, even in subtle ways. "Two of the [cultural traits] that showed up with almost everybody in the group were 'conflict avoidance' and 'perfectionism,'" said Dubay. "And that led us to think, 'Well, what does [conflict avoidance and perfectionism] do in an organization?' And we realized it can put a lot of stress on folks, if senior leaders strive for everything to be perfect and if we don't really want to have conversations about tough things." This exemplifies how ELL affinity groups encourage leaders to consider their own personal positioning within the broader context of race and equity and to apply those insights to the responsibility of organizational leadership. According to Stephanie Johnson, a Research Associate with DASH and a participant in the "White Women and the Power Paradox" group, "A key component of the affinity group was doing personal work, and then zooming out to organizational work, and then zooming back in again." The peer learning and social support element was also seen as essential, as it helped

participants feel supported in this challenging work. "It made me realize that a lot of people were on the same journey as me, maybe in different places, and that was very helpful to me," Dubay reflected.

Equity work can be especially taxing for people of color, who often have direct personal experiences of racism. The ELL offered affinity groups for participants of color, including the "Black Women and Femmes Care Circle." This affinity group focused on providing community and social support to help boost and maintain morale, and to make the work more sustainable. "We met up with other Black women across the ELL about once a month, just to talk about our lives, what we're going through, and share community," said Celestine Emberton, Program Manager at Illinois Public Health Institute, which houses the DASH initiative. The support provided through the affinity group was especially important given the emotional nature of equity work, and the toll it can take on people of color. "It's very personal for me," Emberton said of DASH's equity work, "and so, when we go into those conversations, it can get kind of heavy and deep." The group also facilitated connections between ELL participants at different organizations whose paths may not have otherwise crossed. In some cases, these relationships grew beyond the confines of the affinity group itself. "I took [from the affinity group] that mentorship is so important for someone young in their career, and that can take place in a lot of different ways. The mentor doesn't need to be from your own organization," Emberton reflected. "I reached out to someone through the affinity group who I otherwise wouldn't have known, just for advice, some guidance and mentorship on things in my own professional journey."

At the peer-learning convening that closed out a recent ELL cohort, participants acknowledged the emotional toll of equity work and the value of emotional support along the way. When asked what the biggest struggle of the equity journey was, one participant wrote, "taking care of myself, and not taking it so personal when this is personal work." Another wrote that they sometimes felt "overwhelmed and defeated by the amount of work to do." The ELL community served as a balm, with participants sharing that some of their most beautiful or joyful experiences included "being in community with people who are having similar experiences," and "the affinity group, [which] was a place of such support and ease [that] filled my cup to be able to sustain the work."

Connecting the Personal & Organizational to Drive Impact

Given the inherently personal nature of equity work, a meaningful organizational equity journey requires change at both the individual and collective level, and the most effective journeys will tap into the synergy between the two. Through its curriculum, affinity groups, coaching, and other offerings, the ELL helps participants bridge personal growth and organizational transformation. Of course, the ultimate goal is to achieve impact in the world by reducing disparities and improving health outcomes. For AcademyHealth, DASH, and the Urban Institute's HPC, personal growth contributed to greater awareness of equity issues, a more open and inclusive culture, and significant progress for each organization's equity work.

When asked to consider what AcademyHealth's organizational equity journey would look like without the accompanying deep personal work, Margo Edmunds concluded, "I think it would be very different. I think it would be dialed back." AcademyHealth has gone on to incorporate elements of personal equity work into its overall DEI strategy, which features three pillars: "Model, Lead, and Influence." The "Model" pillar explicitly refers to personal growth at the level of individual staff members, and is implemented via staff training, brown bag lunches, and other learning opportunities. Through these practices, Edmunds has observed a commitment to equity "migrate across people in the organization." This is the foundation for the "Lead" pillar, which refers to advancing equity with partners and peers; and finally, the "Influence" pillar, which refers to broader field-level thought leadership. As an example of the organization's evolving thought leadership work, in 2021 AcademyHealth held a 600-participant workshop on understanding and eliminating bias in health services and policy research, including anti-racist research design, analysis, and dissemination methods. Then, in 2023, AcademyHealth launched the open access Equity and Innovation Resource Hub, which provides curated resources and tools to advance innovation and equity within health services research organizations. The AcademyHealth team has released several research products and resources focused on health equity, including a 2024 report, "Evidence-Based Guidance on Advancing Racial Equity Through Research," which provides a practical roadmap to navigating health research with an equity lens.[7] The development and execution of the organization's DEI strategy represented a major shift for AcademyHealth and was, in many ways, the outward manifestation of personal growth within.

At DASH, staff have noticed a significant improvement in internal culture across both Michigan and Illinois Public Health Institute participants, including greater openness and ability to resolve conflicts. "If it hadn't been for the personal work we've been doing through the affinity groups and coaching, we would definitely not be as open with each other, or as able to have difficult conversations," said Celestine Emberton. "Some interpersonal conflicts would not have been resolved as well as they have been if we didn't have that basis in equity, where we assume best intentions for each other, but we're also able to correct someone if they've said something that is hurtful or false." Melissa Moorehead agreed with her colleague: "It appears to me that people feel safer discussing our team culture openly, and I don't think we would have gotten there without the ELL and getting that individual support." Staff of color spoke specifically to the subtle impact of their White peers attending the "White Women and the Power Paradox" affinity group. "I've noticed some little changes," Celestine Emberton shared. "People will solicit my opinion where previously they maybe wouldn't have. And in terms of the facilitation of meetings, there's an attempt to pace things out more, allowing for some silent pauses for people to collect their thoughts and have space to chime in. I think that's translated to broader participation in team meetings." In terms of the collaborative's external-facing work, DASH incorporated health equity into its mission statement and launched "All In: Data for Community Health," a nationwide partnership of organizations working towards better health equity through multi-sector data-sharing partnerships. DASH helps coordinate the All In network, providing an online community platform, an annual convening, webinars, technical assistance, and more.

7 AcademyHealth, "Evidence-Based Guidance on Advancing Racial Equity Through Research," April 29, 2024.

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>
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> Program Manager, DASH

Finally, the Urban Institute's HPC has developed a more equitable balance between senior and early career staff on its DEI council and is beginning to tackle race equity issues more directly. The HPC's DEI council is now seeking an early career staff member to partner with Margo Edmunds as a co-chair and the DEI council already has significantly more representation from early career staff. "I saw a change in terms of how much more vocal early career staff were becoming [on the council]," said Eric Wat, the HPC's ELL coach. "There's been a big shift in how that segment of the staff is being seen and heard." Wat also conducted a series of focus groups with both senior and early career staff, revealing communication issues and perceived bias. Addressing these issues and encouraging a broader conversation about race within the organization are key priorities going forward for Edmunds and the DEI council.

In its external-facing work, the HPC is focused on integrating more community engagement into its research processes. This involves both participatory research, which emphasizes active engagement and co-learning between researchers and community members throughout the research process, and community advisory boards, through which community members provide valuable insights and guidance to researchers, ensuring that studies align with the needs and priorities of the communities involved. This is yet another example of the symbiotic, mutually reinforcing relationship between personal and organizational equity work. As an organizational priority, community engagement will put individual researchers in direct contact with community members, advancing the individual equity journeys of staff members in the process. In a recent report called "Centering Native Perspectives and Wisdom," HPC researchers make the case for relying on the knowledge, guidance, and experiences of Native communities in projects related to American Indian health.[8]

Given the depth of health disparities in the U.S., all three organizations recognize that achieving population-level impact will take time. Their work to embed equity within and across their work must be ongoing, both at the individual and collective level, and, as such, the pace of change can feel too gradual. "It's a slow-moving process and it takes time," said Lisa Dubay about the Urban Institute HPC's equity journey. "Sometimes I've been frustrated by the slow progress," echoed Stephanie Johnson, reflecting on DASH's journey, "but I recognize I can't rush anyone's process. If you rush, that's where the defensiveness starts creeping in." The ultimate goal of the long journey is to achieve durable change that transcends the tenure of any one leader. "One of the things we're looking at now is making sure that the DEI work continues to be part of what AcademyHealth is known for and committed to…making DEI a part

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8 Laudan Aron and Lizzy Ferrara, "Centering Native Perspectives and Wisdom: Reframing Non-Indigenous Research on American Indian Health," Urban Institute HPC, May 2024.

of our DNA," said Margo Edmunds, looking ahead to the next phases of AcademyHealth's journey. Achieving this sustainability involves ongoing training, and instituting policies and practices that make equity a part of every staff member's experience. By setting this expectation for personal growth, and carving out the time for it, organizations can sustain their equity journeys into the future.

Conclusion

As this case study illustrates, the interplay between personal and organizational equity journeys is a key component of the ELL's holistic and intentional approach. Individual leaders and staff members must undergo personal transformation as a catalyst for organizational change and improved community outcomes. Through a curated curriculum, affinity groups, and regular coaching, the ELL offers a suite of tools and resources that invites individuals to grow together. This process is inherently emotional and vulnerable, as equity work can spur us to face difficult truths about our society and ourselves. Having support structures like coaches and affinity groups can help individuals manage this personal learning journey, provide the grounding needed for leaders to guide organization-wide changes, and help teams navigate complex conversations about equity in the workplace and in the wider world.

At AcademyHealth, DASH, and the Urban Institute's Health Policy Center, personal growth helped shape improved cultures, more inclusive policies and practices, and an increased prioritization of racial equity in programmatic work. However, it is also clear from the experiences of ELL participants that these benefits do not come easily. Organizations embarking on equity journeys must be intentional about providing individual leaders and staff members with opportunities to learn and grow and to make inevitable mistakes along the way. In order to sustain their equity journeys, organizations must continue to provide space and time for personal equity work and to establish policies and practices that embed this in the organization's day-to-day. This takes considerable time and effort, but the experiences of these three organizations suggest that the impact is worth the investment. Through a commitment to ongoing growth, individually and collectively, organizations in health care and beyond can help lead us towards a more inclusive and equitable future.