

# State of Inclusion. Ame Sanders, Equity Warrior

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## Episode intro

### Ame Sanders

To me it offers an opportunity to be hopeful and positive and to see some examples that can be motivating and to listen to people and how they are motivated to make change in the work and their sphere of work or in their own community. And I think that's a key part. I didn't see it at the beginning but now I believe it's a key part of the work I'm doing because people need to have some place where they can feel hopeful and where they can learn from others in terms of how to proceed.

### Health Hats

It's everywhere, it's everywhere. I can't help but see almost everything I do in my advocacy through the lens of health equity. Whether it's making decisions about our health and medical care, managing pain, young adults with complex medical issues transitioning from pediatric to adult medicine, men in caregiving, data sharing, patient access to data. Everywhere. I'm defining equity as people having the same opportunity to achieve best physical, mental and spiritual health no matter their social circumstances, biology, genetics, or physical environment. I wanted to take a look at bias, inclusion and equity from outside healthcare. So, I interviewed Ame Sanders and we talked about our own biases, inclusion or lack thereof in our communities, measuring bias, and taking action to reduce inequities.

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## Podcast Intro 01:19

### Health Hats

[Music] Welcome to health hats empowering people as they travel together towards best health. I'm Danny van Leeuwen. I have worn many hats in my 40 plus years in healthcare as a patient, caregiver, nurse, informaticist and leader. Everyone wears many hats, but I wear them all at once. We will listen and learn about what it takes to adjust to Life's realities in healthcare's Tower of Babel. **Let's make some sense of all of this.**

## Introducing Ame Sanders 02:09

### Health Hats

Ame Sanders and I met at Seth Godin's Podcasting Fellowship, 350 or so people from around the world learning to be podcasters. Ame caught my eye with her podcast, [Equity Warriors](#), and her company [www.stateofinclusion.com](http://www.stateofinclusion.com). See the show notes for further information. We decided to interview each other. You can hear Ame's interview of me at the link above. Being a practical person, I look for what works and what we can learn from other people's experiences. While Ame doesn't work in the health care space, she has much to teach us about the state of inclusion in communities. Please support my blog and podcast at [www.health-hats.com/support](http://www.health-hats.com/support). Here's my interview with Ame Sanders.

## Realizing health was fragile 03:11

### Health Hats

Where were you when you first realized in your life that Health was fragile?

### Ame Sanders

Most of the people around me were reasonably healthy as I was growing up. I didn't lose a lot of people that were close to me. I lost my grandmother, but she was elderly so I would say the first time that I realize that health was fragile, and I can remember where I was at the moment it happened. I was at work. At the office and I got a call that my mom had had a heart attack. Now I was in my 20s and my mom was in her 50s. So, this was pretty unexpected, and it had a big impact on her life going forward. I won't say she was the healthiest person, or you know, super healthy, but it certainly was not something we saw coming. You know at that age when you think about losing your parent you realize that the world that help us fragile in the world is something that can change in an instant.

## Defining community 05:00

### Health Hats

Thank you. I was looking at your website, [www.stateofinclusion.com](http://www.stateofinclusion.com) and I saw that you have *Bias, Detox* and *Equity in Action*. I'm basically an action-oriented person. Continuing that thread that I had before about the magic levers for best health. The magic levers to me are like what can you do to have an outsized influence. I was interested on your website to see your *Community Assessment*, and your *Community Detox*. So, I guess first, I'd like to know more about how you do define *community*?

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Ame Sanders

I'm open to any definition of community and there are many different ways to define community. It can be social media. It can be the LGBTQ community. It can be people that you identify with. But for the work that I do, largely, the way I define community is either city or county. And I'll give you a reason because my mission for my work is to work with communities to help them become more inclusive. I believe you can change the world one community at a time. and I work with a lot of data. There is a certain level of data that's required to do this work. And it's mostly available at the county level sometimes even not at the county level. So, I think it's important for people to see, to assess the where their community is in terms of inclusion and equity and to see it in a parameter that they own. And most people if you say for example that we have inequitable results in education. If you just make a broad statement and you have very large statistics like you often see in the paper. People go, well that's someone else it's not me. It's not our community. It's another community maybe four or five hours away or perhaps it's across the country. When you get it down to the county level people rarely can deny that it's them. Most people own the results of the area that we would call county. I mean that's an artificial boundary, but it's close enough for most people to actually own the outcome and own the effect that happens to people in that space with them. So that's one of the reasons that I've focused on that area from a standpoint of doing analysis and data.

[Measuring equity. Where's the data? 07:01](#)

Health Hats

What data

Ame Sanders

So, one of the objectives that I have is to develop a scorecard that can allow you to compare one community to another in terms of inclusion and equity. I've created a framework for that which has a series of measurements that you might look at. So, at the outcome level meaning the major outcomes that you want to have in education or in health. Then at the system's level to see how our systems are working. Because if you have an inequitable outcome invariably you have an inequitable system. And then there are also some measures that feed into that. That if you want to do more research on what's happening. What might be creating that. Then you can dig a little bit deeper into some data and measures around that.

Health Hats

Are you working off of existing data or are you developing systems to create data?

Ame Sanders

That's a good question. At the moment, I'm working off of existing data. There're tons of existing data out there. There're some gaps, for sure. Like for example, it's a very difficult to measure or quantitatively assess equity in religion. So, there's not very much data out there on that, but there's a ton of data out there on education, on health, on economic equity. So, you can use existing data and work with that.

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### Health Hats

I was at a meeting this weekend and I was sitting next to somebody who was talking about how she's changed how she answers 'race' on surveys and she now puts mixed race. She feels sort of, putting words in her mouth, but outraged that she needs to pick. It seems like a variable in the data is race and it's self-selected. It's fairly unclear. Yet, a lot of information about equity is based on how people fill out race. What are your thoughts about that?

### Ame Sanders

So, you picked on something. It is a bit of a conundrum because in one hand you don't want to ask people that question because it shouldn't matter, right. We should be able to go through life and never be asked that because race is an artificial construct in any case. It's not a factual thing. It's an artificial construct and in some cases, as you pointed out, it's how people perceive themselves and how they define themselves. For sure, over time, more and more people will answer that question differently than our grandparents did or even our parents. But that's okay. I think it still is a tool to help us understand where there might be unfair differences that are happening to a group of people solely because of their race. And we need to understand that and act on it. And so yeah, it is a conundrum and I have mixed feelings like you mentioned but it's still a necessary part of trying to move our communities and our country forward.

### Knowing better and doing better 10:34

#### Health Hats

Okay. What are some of the things people can do in their communities to make a difference in relation to equity or reducing bias?

#### Ame Sanders

There are a number of different things. I would say the first thing that I think is important. Any time you think about affecting change in this area? It doesn't matter who you are or where you came from. There's a quote from Maya Angelou that says, 'when you know better do better.' So each of us, I think the most important thing in this work is that each of us own very responsibly. The need to know better and that includes knowing better about ourselves. And doing better. So, one of the first things I would say that anyone can do is there's a great website out there that has several. I think 14 different types of bias tests that you can go in private and learn a little bit about your own biases. It's called the implicit association test and it's great because you can sit down and take. You know test with your computer about different to explore different biases that you might have. It could be race, could be gender, science and technology, could be different kinds of things. I'll mention one of the things that I discovered when I went through that activity is that I have a bias against women in science and technology. I wasn't terribly surprised because I had had diversity training activity that pointed that out to me before. So I knew that was true and it just reconfirmed that. But what's weird about it is I spent most of my career in technology and I'm a woman. So, it seems odd that you could be biased against.

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You know people who are just like you but it's true you can be and so understanding more about yourself is really an important first step in working forward on this.

Health Hats

Then?

[Establish a basis of trust 12:54](#)

Ame Sanders

Then I think that the next thing to work on is dialogue and trust. Because communities only change in this area if you can establish a basis of trust. And that's really important. There're probably organizations in every Community. But there are a number of them that I know that work with communities to help them build trust and build dialogue. We have one in our community called [Speak Down Barriers](#). And they basically hold book clubs to read challenging books. They have community sessions both for people who are White and want to talk about race and people who are of African American descent who want to talk about race. Then they have sessions together and they have one or two our community potluck dinners and they also have all day sessions where you explore this subject much more in-depth and they have skilled facilitators. So those are things that help. I'll give another example is in Mississippi, the [Winter Institute for Racial Reconciliation](#). They have a program called the Welcome Table and they go in and work with - they have to be invited so they don't go in - they are invited by a community to come and help them, and they go in with that in mind. And they work with the community to build trust. It's usually one- or two-year process. It's not a fast process. But they work with the community to help them find a ways whether that is addressing past racial issues, you know, a lot of communities have historical issues that they've not addressed. Whether that's crimes that were never punished or talking about things that have happened in their past or dealing with, you know, monuments or other kinds of things that are barriers to coming together and trusting each other. They work with them to do that. So, there are organizations out there. Perhaps one in your own community that will help you work through this dialogue and trust and that's a good first place because without trust none of this is going to- it's not going to happen., you know, you can't change and you can't accept members of your community if you don't trust one another so those are going to you know important steps.

So, first understanding about yourself. Being willing to assess where you are and recognize that you may have changes personally. I mean probably will have changes personally to make. And that you begin to work in the broader Community around dialogue and trust. And then after that I would say to do a diagnostic to look and see where your biggest challenges are? Do you have a particular challenge in education or is your work environment less inclusive? I think you need to explore where your community is and how it's doing. And there's fortunately there's a lot of good measurements to help you do that and then you can decide which areas that you need to tackle.

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How did you get to the State of Inclusion? 16:14

Health Hats

I like that. Self-knowledge, identify the local community that you're interested in to build trust, do a diagnostic. I like that. I can pretty much apply to any community; however, you define it at the moment. So, how did you get here? How did you set up this State of inclusion? What was your journey?

Ame Sanders

So, I come from a corporate background. Diversity equity and inclusion are not my professional background. I'm a corporate person and done a lot of different things in the corporate world, but you know, that's my background. Let me start early and then come forward pretty quickly. First, I also like you I'm a person of privilege. I tell people I won the life Lottery when I was born to my parents in the town. I was born, you know, that was a gift that you could never it was just a gift and so I was lucky with that. But I would say unlike you, you probably can tell I have a Southern accent. I was not born into a community or a family that was a very open-minded or motivated towards, you know, racial acceptance or any of that. So, I grew up in an environment that was very different from that. And I also married into a situation that was pretty different from that. When you ask where do people learn biases or where do they learn prejudice? They learn it very early. They learn it starting as infants and they carry that on with them into their life. But you can change that, you know, you can decide that's not who you want to be. That's not what you want to be. That's not how you want to be associated and that's not how you want to live in the world. As I continue through my life, I was fortunate to work for a company who was a very intently trying to work on diversity equity and inclusion. I struggled with it. I'm saying they still struggle with it, but they were very intently working on it and I had the opportunity to work on my own along with them. So that was very helpful. Then I attended a diversity Leadership Institute that was facilitated by a great guy Juan Johnson from Atlanta at the [Riley Institute at Furman](#). And I had requested to go to that class because it was a class made up of a lot of different people from the community. And you could talk about different issues and expose yourself personally in a way that you might not do at work. It was a great class. It was a great was a whole semester long session and. The cool thing about it was we ended up they asked us to do a project. Like a lot of leadership classes, you do a project and because they believe you should step out and do what you're talking about.

I'm from Greenville, South Carolina. Greenville was recognized as a work ready city. And I thought hmm work ready and in my job at that time, I was also doing brand management and we measure brand equity and I thought those are two things that are about as abstract as possible. And if you can measure those things, why can't you assess where a community is in terms of ability to support the diversity of their community and the changes that they're going to face? Why can't you do that? And so, I went back to my team and I said, I got a project for a little six-week project. This is what I think we should do. And they laughed at me because they said that's not a six-week project as like a lifetime journey. And I said, oh, yeah, you're right. So, we picked another project went on. But that one wouldn't leave me. I just kept thinking about it and was a very intrigued by it and felt that it was important to do. And this was several years ago before a lot of the things that we've seen in the news had hit but didn't matter

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whether they've hit the news or not. They were real then just like their real now and so I decided to retire early and work on that. So that's what I've been doing.

### [Wave a magic wand and make a change 20:39](#)

Health Hats

Wow. So, if you could wave your magic wand and make one change that you think would further your efforts, what would that be?

Ame Sanders

Now that's a tough question. I'm going to pick the one that is one of the biggest challenges that we have now. Is that communities are not they don't think of this as something they have to work on. Now I'm not saying all communities. There're some great communities out there who are working on this today and who are making a lot of great progress, but you can make a nice little list of them. There're not thousands of them. I think that the awareness of a community and the people that live in the community is the first step. It's just like anything else that you want to change. If you're not aware of it as an issue and if you don't own it as an issue, then you're not going to change it. And I think that's one of the barriers here. Communities either they don't want to talk about it at all. I tell people that people don't want to pay me for me to tell them things they don't want to know. So, there's a little bit about that where communities really don't want to know. They kind of know, but they don't really want to know. And they don't really want to know how bad it is. That's the other thing because in working on this it's become apparent to me that the results and the challenges we have are quite significant and they range all across in a many facets of our interactions with one another. So, I think that if communities, cities or counties, could become more aware of this issue, then things would change. If they would make this a priority. If they would focus on it, then things would change.

### [Podcasting versus blogging 22:56](#)

Health Hats

Thank you. So, I have a question for you that's totally outside of this topic. So, how's this Podcasting Fellowship going for you?

Ame Sanders

It was interesting hearing you talk about podcasting versus blogging. I share your points about that where I do think that blogging is a way to convey some information and also, has for me been a way to put down some information that is called Evergreen meaning it's useful at any point in time. Like, you know, what are some of the different types of bias and how can you find out about whether you're buying what your biases are and those kinds of things that's in for its information that people might need at any time. It's good to put that down So blogging is interesting to put down some facts and some information and to share some information that people may not think about. The data that I'm working with is one way to show a picture. But the problem I have with the data and to some extent the blogging in this work, is it's very discouraging.

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It can be a negative space 24:15

Health Hats

[laughing] So it's very it's the same in the healthcare world.

Ame Sanders

Okay, so it's a very negative and it's very discouraging. You need to look at it. You don't want to step away from it, but people over and over again, as I've shared in reports with them and information with them. They're like, yeah, but. You know, what do we do? And how do we address this? And this is so this is awful. And so the podcast for me offers an opportunity to talk with people like yourself and others who are who are working on this every day and who are making progress. And as well to talk with certain communities who are making big progress and in different ways how you know how they're changing their community and to me it offers an opportunity to be hopeful and positive and to see some examples that can be motivating and to listen to people and how they are motivated to make change in the work and their sphere of work or in their own community. And I think that's a key part. I didn't see it at the beginning but now I believe it's a key part of the work I'm doing because people need to have some place where they can feel hopeful and where they can learn from others in terms of how to proceed.

Motivating change, a tall order 25:46

Health Hats

My immediate application of this conversation is that I'm on a call tomorrow with the people who are managing this initiative that I'm part of. This clinical decision support artifacts. So, artifacts are tools electronic or not that is a way for people who are making decisions whether it's about preventive health screening, immunization, or managing whatever situation – pain, multiple sclerosis, whatever. Tomorrow, I'm on the phone again with the people managing this. I'm thinking about how to take what I've learned in this conversation with you to that venue. The community being the clinical decision support industrial complex. How can this inform that process? The self-reflection. We talked a lot about trust so that's a big topic already. I think the self-knowledge is not very strong. I think we know what the community is. I don't think we've done a diagnostic. This minute I have no idea what to do about it, but I certainly will not be earning my nickel if I don't come up with at least a couple of things, in the authoring or implementation of clinical decision support related to bias and equity. So that's going to be interesting. I'm going to have to spend some of my time today figuring out how I communicate some of this to them.

Ame Sanders

Well, I would say like I did before I'm really happy that you are committed to that and that you are thinking about it and I'm confident I'm confident that you will arrive at something that will shift the health industrial complex of it. And that's all we can. Do, you know, each of us can chip away at this and we nudge a little bit and we nudge a little bit and then things change and we change.

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Health Hats

Yes, thank you. It's been great.

Ame Sanders

It's been great talking with you too, Danny. Thanks so much.

[Episode conclusion 28:31](#)

Health Hats

Wow. A lot to think about. What do I know about myself? Who is my community? How do I diagnosis that community? How do we move the needle? I've been reading Michael Lewis' *The Fifth Risk* this week. There's a line in it quoting from Kathy Sullivan (the first woman to walk in space): "Working for the government, you need to imagine you are tied down, Gulliver-style. And if you want to even wiggle your big toes, first you need to ask permission. And that if you can imagine that and still imagine getting things done, you'll get things done." Same is true for healthcare equity. Imagine!?