

Health from the Ground Up

Garth Graham: Is, um, before we get into the session, um, you know, over the last couple of days have been groups and a specific group and individuals who have been meeting to talk about local solutions. And you know, in case we forget it all, healthcare is local. Everything that matters is what's happening both to individuals and individuals within communities and national numbers. I just aggregate of local numbers. So if you want to figure out the solution that we need, people like the folks who are going to hear from here, um, to, to, to help us define more about what the problem is and as well as what the solution is. But I was remissed if I didn't recognize that would be roommates. I didn't recognize some of the work that others, including the group here had been doing in terms of just thinking and brainstorming through this week. So far we've had a great incubator session. Um, for those of you who are in the room, who were part of the incubator session, Pakistan, you should get up, um, and talking about local solutions. We want to recognize

Garth Graham: we out. You want to recognize certainly the aspen

Garth Graham: foundation of healthy community fellows, um, and those individuals who are part of that group, yes. You're going to have to stand.

Garth Graham: Yeah. No, you're like, oh wow. Jerry, you don't need to stand up. All right. You can set up here. Yeah, it's a group,

Garth Graham: Oh, folks who've been doing amazing work on the ground and, um, we're just working to amplify their visibility, but they're very visible, but just because they'd been so impactful so far. All right. So, um, what you're going to hear over the next 45 50 minutes, um, are, is not, it's going to be about hard discussions. We've gotta talk about the problem and we're going to talk about a mother frontline solutions and the kinds of individuals that will pick for this discussion, um, I think are indicative of what we need to be a part of the solution. I'll start with that. These are all friends, so I, if I just call them by their first name is because it feels weird to say your whole name. Nah, like say my calling. My mom's civil out as Graham. Um, so, uh, Devita the Vizo Davita, um, inspired me to get into a lot more of a lot of grassroots work and lot of things that we should be funding and supporting.

Garth Graham: And what's unique about Davita's vision and work is she's using food as not just part of the problem or part of the solution and using it to identify and mobilize the economy around. Um, there's some of the very entrenched social determinants of health issues and the beat his passion is part of what we see as the motivational part of what we see happening on the ground, but it's actually reflective of impact. I think her work, um, um, uh, I think continues to inspire us off. Similarly, I have to say boy, um, Jerry Blessin game, um, Jerry is CEO of the city or a community development corporation. What Jerry's been doing, um, in

terms of his life's work has been looking at this issue of mass incarceration and the issue of how incarceration has been decimating, um, and really impacting local communities, local economies, um, and redefining a lot of what's happening, particularly in African American men.

Garth Graham: Um, and for those of us who come from communities like that, myself included, um, the kinds of things we'll have seen. Um, it's hard for people to understand because a lot of these, um, men, um, sometimes boys, um, uh, if you look at even some of the, some interesting data, um, are invisible. And what Jerry does is give them visibility, um, and make them known to, um, to the rest of the world. Um, I know old friend also if you'd like to, again, save your whole name feels abnormal. Cause that's why I said, hey, Dave, I'm an old friend and somebody who is Dave, I should say Dave's whole title, um, dates chotskies chief population health officer at the New York City Health and hospitals corporation at sea. You have the New York City Health and hospital accountable care organization. I think at least 40 to 50% of you in this room know Dave.

Garth Graham: Um, so again, just, you know, Steve, um, because he hasn't been a leader both nationally and locally on issues around social determinants of health under served communities and thinking about our policy in a variety of different contexts. Um, he liked myself, just had a recent kids, so I'm just glad you've made it. Um, and um, um, you know, days I think part of the network of what we think about Ab, but an amazing individual who have a tremendous amount of respect for. So here's what we're going to do. Want to start off by getting into the heart issues first. And what I'm going to do is ask each of the panel members to give me a description, give us a description for what you think, what you see. Um, um, as the definition of the problem, I'm on the ground. I'm starting there. I know we'll get into solutions. Devito.

Devita Davison: Yeah. Thanks so much. Um, and it's very hard for me to call you by your first name, Dr. Graham on because you've earned that, I'm sure. Um, and I'm gonna tell you something. Um, your team was out to Detroit and spent a couple of days with me. I know, um, last month and I had a bet with your team because they knew that we were going to be on this panel together. And the bet was I said, y'all, how long is it going to take for Dr. Graham to bring up his mama? Take two seconds before you brought your mother into the conversation. Yeah, that's true. And the reason why I say that, because in order to do this work, you have to love people. Oh, you have to love family. You have to love those who are not family and those who are. And Dr. Graham, I think the reason why you are so effective is because you love your family, you love your mother, you love your children, you love your wife.

Devita Davison: And so that is love really. That is the solution to this problem. And so yeah, I see. I know you know how folks in the room will know me. They know what you Mike me up because I'm a daughter, granddaughter and great granddaughter of a preacher. You normally take y'all to church. So I just wanted to start by saying how much I love you, Dr. Graham and the support of the Aetna Foundation, cvs

cares has been tremendous to help us do work in the community. And so I'll start really quickly before I turn it over to Jerry to identify what the problem is.

Devita Davison: And quite frankly, the problem is we really want to solve the issues that affect individuals as it relates to healthcare. The problem is freedom and we can give folks free and what I mean free, give them choice, give them agency. We can solve the problem. So many people aren't free. And so what I look at the problems in my community as it relates to freedom. I want you all to think about three buckets within the social determinants of health. Three buckets. What do we mean when we mean social and what you want to think about the environment, the social environment that folks who live in. I want you all to think about identity, how folks identify themselves, but more importantly how others identify them. Then I want you to think about folks position in life, their social economic status. Those are the challenges and the problems that I face in the city of Detroit.

Devita Davison: What do I mean by environment? Many of the people in the communities that I serve and I am helping and they are teaching me just as much as I'm teaching them live in communities and many of them not by choice is because due to systematic and institutional racism, the neighborhoods and communities have been red lined and as a result of being red line, many of those communities have been extracted from resources or they haven't been tended to. So the environment that in which they live in and then my case in Detroit, I'm the Executive Director of a nonprofit called food lab Detroit. The environment that many of the community members that I work with every day, their environment looks very bleak as it relates to food retail. Not having access to a full service grocery store or a sit down restaurant or cafe where they can meet friends and family members over a cup of coffee or hot tea.

Devita Davison: The environment last but not least or next is the identity. How we see ourselves and how others see us. Black, Latino, immigrant, this, this other arena that removes us from people who don't look like us. That makes us wash our hands are the problem. So many of the people who are work with identify as African American, Latin X, Latino or immigrants until [inaudible] into our community. And then last but not least, what is their social economic status? Many of them are low income, many of them stay in marginalized communities. And as a result of all of that, if we look at these problems, Dr. Graham and Jerry and Dave through what I would call an equity framework or racial justice framework, many of these problems are because we have failed to deal with racial justice in any quality in this country. And if we can have honest conversation starting today about how we tackle that, we tackled the problems of healthcare. Hmm. Hmm.

Jerry B: [inaudible] you didn't leave me anything to say. I want you to piggy back on what John don't give the ball to use. We can go in and take it home. I just caught it. You caught it. I love being with her. Gosh, so much energy. So one, uh, another problem that I see is, um, the oboe policing of some of our

neighborhoods. I grew up in the inner city and we would see three, four, or five times a day. The police, now I live in the suburbs of Greenville or hardly ever see a police. Um, when you take a bread winner out of the family and incarcerate them, most of the time the person that's been incarcerated is probably the person who's the bread winner. So you're taking finances out of the house, you're taking bread off the table, you're taking transportation may be a way you're maybe taking someone who can, who may be able to help somebody with homework.

Jerry B: Who knows? Um, I was sharing the other day in the inner city, most of the kids don't even go to get checkups. I grew up in a very poor inner city of Greenville and I didn't go to the dentist until I was 18 years old. So those are the type of problem that will live in with, and it's systemic. Most of these men who imprisoned their dads were in prison. And so all you see is you see people that you look up to who are people who are committing crimes at the only way they can survive because there is no chance. Once you get a criminal background, you're mark for life. It's like Heston prayer with the scarlet letter. You know our 48,000 collateral consequences in the United States that bar people from getting jobs, housing, occupational licenses. When I got out of prison, I tried to go back to school to finish my degree in architecture.

Jerry B: They told me that I couldn't get licensed as an architect because of my criminal background. I could not get a pell grant because of a drug charge. Not a murder, not a rape, but a drug charge. So these are some of the problems that our people are facing and it's mostly black and brown people. You know, I gave to Texas yesterday, he, you know, but one is six Hispanics are likely to go to prison, one in three black men. And I say one in 17 white males. But it's mostly the poor who are being affected. That's right. Mostly the poor. So we have got to do and it takes us as citizens and not only at the local level, but also as far as policy. We have to begin to change policy and speak up in those of us who have a voice. We have to speak up. So I'm gonna pass it you date.

Dave Chokshi: Um, well I agree with so much of what has been said already. Uh, I think for me, um, the way that I want to add to the conversation is from my entry point as a clinician, I get to be a primary care doctor at Bellevue Hospital, which is part of the public healthcare system for New York City. And for the patients that I take care of. And really if you ask any clinician in our health system, um, they'll say sure. The social determinants of health. Um, I get it. You know, uh, I understand it when I'm taking care of a patient who, uh, is living in a homeless shelter and therefore isn't able to store their insulin to, um, address their diabetes or I get it when I'm midway through, I'm counseling a patient on healthy eating and I realize they've gotten this glazed look on their face and I dig a little bit deeper and I understand that the problem isn't a volitional in terms of being able to, um, make the right choices to eat healthy, but it's because maybe there's not enough cash at the end of the month, um, to buy, you know, any food, much less healthy food.

Dave Chokshi: Um, and so I think the way that I want to help, um, frame the problem is that we have to start thinking about the, so what, um, there's been so much conversation about social determinants of health, uh, already. And you know, I'll just note, um, this is not a new conversation. The Community Health Center movement in the United States grew out of an awareness that there are social determinants of health. And they are predominant when we think about, um, what actually affects health outcomes. Um, so we should feel a great deal of impatience that things have not changed over the last few decades. Uh, and, and you know, in some ways, over a centuries in the United States. Uh, and so if we take that idea that we really need to get to the core of the, so what, um, I think it helps us think about things a bit differently. Um, one way that I've started to put it together is really we need to take the conversation just as, as my predecessors, um, uh, articulated from social determinants to social justice, um, and figure out what are the, you know, the steps along that road.

Dave Chokshi: So again, just putting on my clinical hat, you know, one, one way that I think about it is you have social needs. You know, any individual patient, it could be, um, housing or education and you move to social services, which is a way of addressing those individual social needs. Um, then you have soulful care, which is really taking a step back and realizing that it's not about point solutions to point problems. It's about recognizing that people come in, you know, uh, in whole packages and their physical health and their behavioral health and their social needs are all intertwined. And we have to reckon with the complexity of the interactions among those things. And then finally we have to go from social care to social justice, which is being very honest about the fact that the reason that there is that complex interplay is because of things like mass incarceration and income inequality and racial discrimination in our country. Uh, and so, you know, one way to just wrap that up is invoking, um, the, the Martin Luther King quote that I'm sure is familiar to so many of you, um, the arc of the social determinants universe is long, but it bends towards social justice. And that's, I think, still more aspirational now than it is a reality. And it's going to take a lot of leadership from people like the folks that are gathered here today to make that transition.

Garth Graham: Thank you for that. Dave, you know, it's funny, uh, whenever a lot of us here, you know, we speak at different places to get interviewed and people always say this new social determinants of health thing that everybody's talking about. I was like, from where I'm from, we'd been living that a long time ago and started, it might be new to you. Um, but it's, um, it's been old and part of our, a lot of our lives for a long time. So it's important to understand the history of this, um, to understand where we're going to go solution. We're going to pivot now towards this concept around solutions for, um, folks here. Um, understanding what's happening on the front lines is the only way to know what to do next. Um, we can come up with theories and, and publications and things that are esoteric, but unless you're engaging people, um, right where they are, right?

Garth Graham: And Stan is local communities, a lot of people feel invisible. They even feel invisible to the world. And these are the kinds of efforts to that allow, um, men who may be in prison, um, people who are in communities that are escalated to feel visible. And that's why I wanted it to have you hear directly from these folks about what their problems are. So now let's turn a little bit to talk about solutions or what I would like for you, each of you starting with Devita to talk a little bit about what you think the ingredients for success are and then take a second to talk about your work specifically. Um, and how that's a part of it.

Devita Davison: Yeah. Um, if I could, um, Dave kind of draw this threat,

Devita Davison: as long as we're quoting people, um, I'm not going to quote him directly, but I do want to lift up something that he talks about all the time. And if you have not heard of a gentleman by the name of Bryan Stevenson, I highly recommend that you do some due diligence. Um, he just created, uh, uh, amazing museum down in Mississippi, the, the, uh, the lynching museum, but he's a lawyer and he only takes cases for young people. That's on death row, but Bryan Stevenson is absolutely amazing and one of the things that he talks about, Dr. Graham, which I believe is part of the solution now, I'll say I believe what has made me so successful, Brian, Steven talks about proximity that you have to be proximate to the problem to be able to solve the problem. So many of people that when they see communities that are in despair, communities like neighborhoods in the city of Detroit that yes may be suffering from blight.

Devita Davison: Yes, may not have the best school districts, yes may be occupied by a majority of black and brown bodies. They say, nope, I don't want to live over there. Not me. I'm not going to say my children to that school system. I'm not going to live on that block because they get get blighted houses. I'm going to live someplace else. They're not proximate to the problem so they can't be proximate to the solution because believe it or not, the community has the answers. They just don't have the resources to solve the problem. But the great thing is that the communities that I work with everyday are finding those solutions. And so I'll say this proximity is super important when you're talking about solving a problem and the work that we do at food lab is really starting to tackle when we talk about social justice, the root problem for us is how can we help folks, not only to access healthy fresh food in their communities, but might we do this in a way that also empowers them and improves their social economic status by taking their ideas, incubating their dreams and helping them to launch fresh, healthy food businesses right in their neighborhoods and their communities.

Devita Davison: So I'm doing two things at one time. I'm bringing fresh, healthy food into the community and I'm doing that via business ownership, entrepreneurship, creating businesses by the people who actually live in those communities and neighborhoods so that they may have agency, they may have an opportunity now to make money. They may now have an opportunity to be small business owners. They now have a say and Jerry, before I turn it over to you, I want to share a story. There is a business within the food lab community. So Food Lab is

a nonprofit organization and we provide incubation, we provide business occasion, technical assistants, finance, helping entrepreneurs launch into food retail businesses. And one of our businesses, the name of it is folk folk to choice and Kiki and Rohani two women, they own folk Detroit and it's a restaurant that serves breakfast and brunch and they pride themselves on locally sourcing their ingredients from Detroit farmers.

Devita Davison: Detroit has about 1600 farms and gardens within Detroit proper. And I'm sitting at folk one morning as I typically do and it's a beautiful morning and I'm sitting outside on the patio out front and the server serves me. My breakfast, I tend to get the same thing every morning. It's called the breakfast brekkie. Rohani is from Australia, so she had to put something on the menu that reminded her of home and is scrambled eggs, wheat toast, salad. I sit there and get my cup of coffee and I taste the salad and I just put my fork down and I'm like, Oh my God, the Salad Greens are so good. They were, they just delivered in the service say, yeah. Devita Greg just dropped him off this morning. I'm like, oh my God. Tell him like the spiciness in the like, I can still taste the flavor, like he just picked him like they're so fresh. I love him. I don't even need any dressing. I can just eat it raw. The ladies that were sitting next to me, now I'm in Detroit, I'm in the hood and I have to say these are two white women from the suburbs. They're sitting next to me and they just stop and look at me like, excuse me? I said, yes. She says, who's Greg? I said, Greg is the farmer. They're like,

Devita Davison: y'all know who the fuck who brought the and we're like, yeah. As a matter of fact, when his name is Greg, his wife's name is Olivia did. His daughter's name is Mila and they lived down the street and around the corner for blacks to the left and the name of the farm is brother nature. They're like, what? We're like, welcome to Detroit. Like it's just kind of like this is what we do in like is this normalization that of course we know the owners. Of course we know the service. Of course we know the farmers. Of course we know the farmers family because when you are proximate you want to make sure that I'm paying to serve a whale, so focus a no tipping restaurant because the servers and the people who are working there or taking care of, of course I'm going to pay \$18 for my breakfast because I know that Olivia and Greg and their family are going to be paid a fair and living wage for the Greens that they dropped off. Dr. Graham, what I'm trying to do is dismantle this whole destructive and global and oppressive food system and make it local, make it personal, make me care about food because I care about the people who made it.

Speaker 7: Yeah, I would tagging. Now I get to tag you.

Jerry B: So I'm gonna quote someone. Yes, let's do it. So Glenn Martin, who started, oh, just leadership, he says it like this, those who are closest to the problem, a closest to the solution, work for this from the resources. Hmm. Empower. And so what we've done it. So tirias been able to take community development, infused it with reentry. 20 years ago, rich, he wasn't even a word. And so I didn't have anything to work with. Someone came up to me one day and say, Jerry,

you're an asset to South Carolina. You're doing affordable housing, Workforce Development, political advocacy. And he went on and on. And these are all key community development resources. And so when you go into a community, you can't tell the community what they need. It's the people who live in the community or the ones who need to be empowered to move. So those of us who've been incarcerated, we know.

Jerry B: So what are the things that we've been able to do is we've been able to take men and women who get out of prison and put resources in their hand and let them take their own lives back. Yes, ma'am. Reintegrate them back into society and their families. A lot of time we forget about their babies and there grandmas and uncles and aunties who need these people who are getting out my own life. I was the first graduate of my program 20 years ago. I had to understand how to balance a check book. I had to get my credit straightened out. I want it to become a homeowner. As we all know, assets. It's power. That's what we have to be able to have access. We have to be able to have financial resources to be owners. Most people who live in the inner city don't own anything and that's why people are robbing and stealing and doing all kinds of crazy things because that's what people do when they don't have anything to do.

Jerry B: So we've been able to take these men and transformed their minds, give them clean, affordable housing, let them become entrepreneurs, teach them that they can balance their checkbooks, they can come home every day and don't have to stay up all night, have a structured environment. A lot of the guys would not go to the bank to cash their checks. When they came to our program, they were afraid. They were afraid the banks are going to take their money because they grew up with somebody putting money on a mattress, on the shoe box. And so we taught them about banking and we had a program banking, the unbanked, you know, helping and women to get back and realize that they can become owners, that they are fathers and they are mothers. So this is what we're doing in Greenville. We have men who graduated from our program who are homeowners and business owners.

Jerry B: Now I want to talk about something else that some of y'all don't even realize. When a person goes to prison, they don't exercise, they don't eat right. And one of the things I found out 15 years ago that people would come into our program with diabetes, high blood pressure, high cholesterol, heart disease. That's not my job. I just want to give somebody a bed that helped them get a job and send them on their way, but how can you watch somebody die who you're taking care of? I had a 65 year old man who did a 20 year sentence come to my program. He had a triple bypass while he was in prison in a stroke, nobody would take him because he was disabled in the first time. His application came across my desk. I denied it. A program manager came back to me. He say, what are you doing?

Jerry B: If we don't take him, he's going to die. I said, he just can't sit around all day. In the first day he came, he came in my office knocking on the door and he said, thank you with tears in his eyes. He graduated from our program. We were able to get him medical attention. He did not have a cane. When he left our program, he got an operation on his hand that was stuck that they did not give him medical attention while he was in prison. He left our program, walk in what of chain had his own place. It was engaged to get married. These are the type things that organizations like so teria do. All of the U S and so we don't realize sometimes that when we locked somebody up, we are paying anywhere from 23 to \$87,000 a year to keep somebody in prison. And then we release them and we expect them to do good.

Jerry B: How? How do we expect somebody to do to do good when we give them a laundry bag with a bar, soap in a, in a tube of toothpaste, in some tee shirts and say bye. That's what we do in America. We need to start setting people up for success and not failure. So organizations like so teary and other transitional houses and reentry services are paramount here. But I'm trying to work myself out of a job. I don't want to do this forever. So I want to start with the children. Teach the children financial literacy, teach them, you know, that they can go to college. Around my table when I grew up, college was never a dinner conversation. People, one of my high school teachers told me that I need to go to college. I didn't have parents in my home. And most of the men that are in prison don't have parents.

Jerry B: So what's the solution? The solution is, first of all, people don't need to go to prison. We are locking up too many people in America for nothing. Nonviolent offenses should not be criminalized in prison. I wish we didn't have a prison at all because I'm gonna go to some, you said his love. Oh yeah. And I'll end with this. When you punish somebody without a relationship, you create rebellion. You do. And that's what we do in America. We are breeding rebellion in our inner city neighborhoods. And so we need to start loving more and caring more about our people, humans, citizens. So that's what I believe. And that's what we do. We love people. And people come to our program and they say, why are you doing this? And we say, because we love you. And they start grown men start crying because nobody has ever told them, I love you. A simple word I love you can change the world. That's too simple. That's fine.

Devita Davison: Yeah. I was just about what I was gonna come in real quick day before you say something. I was going to come into that. Um, there is a saying that we have that if the young people can't feel the warmth and love, they'll burn a neighborhood down just to get close to the flame. It feel warm. Like that's you. Love is the counter intuitive to pain and destruction. And if we can just love to learn to love, you'll be amazed at how many problems we can solve through that.

Dave Chokshi: I feel like I should

Dave Chokshi: start with a quote, but I would really want

Dave Chokshi: tech quote Jerry on agency, um, and Davita on proximity. Uh, and I think, you know, so much has been said that is powerful about the contours of, um, of the solutions that are worthy of these deep, entrenched problems. Um, and I think what I would add briefly to that is, um, is scale and a sense of urgency. And I think the things are, these two things are related. Um, I think about scale again from my vantage point in the healthcare system where we have three point \$6 trillion flowing through the United States healthcare system that is not directed toward health. Um, it's directed toward a healthcare. And this is important. This is important when people are sick. So, um, so don't get me wrong, but a lot of the conversation that we're having during this session presupposes that people care about health and not about healthcare. So a big part of what we're trying to do in changing that, um, where I get to work at New York City health and hospitals is making it so that, uh, the funding, the infrastructure, um, everything that goes into this huge apparatus in healthcare, 20% of our nation's GDP is better aligned with health and not just healthcare.

Dave Chokshi: Um, so, you know, we have embraced the idea that social determinants of health are a fundamental part of our mission. Uh, and we've tried to do that in a way that is, um, concrete and hard nosed. So for housing for example, we look around at the Layton natural resources that exist within our own system. For example, the fact that we have buildings on our hospital campuses that can be turned into housing. Um, and so we've done that at some of our hospitals and you know, to, to Echo my colleagues when, uh, someone who has been living on the street or living in a shelter, uh, comes into their own home for the first time. Um, what they talk about is, uh, is really about dignity. And it's that reflection of love. They talk about what it's like to be able to cook a meal for themselves or for a family member.

Dave Chokshi: They talk about, um, you know, what a nice thing it is to be able to groom oneself in the privacy of their own home. Um, and, uh, so, you know, those are the things that we're trying to redirect the vast resources within healthcare, uh, toward three point \$6 trillion. Um, but paired up with this idea of scale has to be a sense of urgency. And I feel that, and I particularly in conversations about social determinants of health where, um, it's too easy to focus on, you know, the innovative pilots we talk about in the same breath, you know, an APP, um, a new app that helps someone locate food banks, which don't get me wrong is a good development. It's a useful thing. Um, but at the same time we have a policy changes at the federal level, um, that are currently being finalized by the US Department of Agriculture, which would buy their own count, take 755,000 people off of the roles of snap, um, which would be catastrophic for food security in our country. So we need to have a sense of, you know, the relative, um, impact of these things and have a sense of urgency to really direct our energies and our advocacy, um, toward the things that are going to make the biggest impact that are going to affect the people that we are trying to serve at scale.

Garth Graham: Yeah. Wow. Okay.

Garth Graham: We're going to get her up now to go next. [inaudible] thank you for that, Dave. Um, you know what's interesting, I get to run an organization that does pretty cool things like, you know, invest in folks side Devita and help them change the world. Um, and you know, um, it's not as Adelina that's broader organization, but it's more than a billion dollars in housing and do all these kinds of cool things. Sometimes I think back to kind of a whole life started and I want to throw up Mike quote now and then we'll go to the questions. I think about, um, you know, when I was growing, I had, and I wouldn't have even thought of this was possible until this concept or proximity and understanding what's happening locally is a real cause. I know I felt invisible. Um, no, I'm very visible, but back then things are different. I know one quote that changed my life was, um, somebody who said to me, just because things have been doesn't mean that is how it has to be.

Garth Graham: And she hammered dad home all the time. You know, she would always be, you know, I'd always been like, well, nobody's done this. You're like, oh, that's because the way things I haven't doesn't mean it has to be. And that has driven me to be able to kind of do the kinds of things that we're doing now. But you have to understand what's happening in local communities because all health is local. I knew have to know what's happening to be able to do that. Understanding the theory is not good enough. Understanding of people's, what's about, by the way, that person was civil out of this Graham Aka mom.

Garth Graham: [inaudible]. I gotta keep throwing that in there. Yes. Oh, I gotta call her on her way. She just threw the best. All right. We've got to go to Qa. We have 10 minutes, five, 10 minutes, 10 minutes for it to there. Um, Christopher,

Audience Member: um, he called me to Mike. Christopher Robin. Thank you all.

Audience Member: Hello. Hi again. Thank you all for doing this. Um, it's, it's kind of a question for Cherry and that I think, um, this idea that you're close to the problem and that's at the same time for the stay away from the research. Um, and at the same time I was struck with this, the idea of these two white women who were having breakfast with you at this restaurant, um, what had them come there. Did you have more conversation with them? Uh, and after they were struck by the fact that, you know, you knew all the people who are involved in the process. Uh, was there anything interesting that came out of that conversation? And Are we maybe supposed to conclude that the solutions we can really trust and relying

Audience Member: on like the cavalry, uh, has already come. It's the people who are actually on the ground nearest the problem.

Devita Davison: Yeah.

Devita Davison: Yeah. So it's interesting, Huh? Christopher? Um, I'm in my head thinking like how to succinctly answer your question and what I mean by that is when I first started talking about the determinants of health from this social framework of environment, identity and position, I described the environment in the city of Detroit in terms of what was in terms of what was there would I didn't describe to you is that what is coming? And so the reason why I'm sitting in this neighborhood in the city of Detroit at this Abbott farm to table restaurants, that is a breakfast and a brunch location, and the reason why sitting next to me were two white women for the suburbs can be easily summed up in one word. And that one word is gentrification. There are neighborhoods in the city of Detroit that for decades Christopher had been red line resources had been extracted, neighborhoods had been ignored.

Devita Davison: But because of this migratory pattern where people are now leaving the suburbs and want to return back to urban communities and cities, those people who stayed in those cities, those people who stayed in those communities, those people who stayed in those neighborhoods and made a way out of no way urban farmers who too blighted land and turned him into urban agricultural farms. My grandmother had, yeah, no idea. Dr. Graham with farm to table was she was just eating the food that she had grown and many of the entrepreneurs that I've worked with, when I describe these different types of Tran farm to table, nose to tail, they're like, what are you talking about baby? That's just the way we used to know things and so they've made these neighborhoods call again, authenticity and culture, social cohesion and conviviality, all those things that people quite frankly crave for but didn't get them in the cold.

Devita Davison: The sex that you are, I live in and they want that warmth. They want that love. They want that connection. And you didn't get it when you drove to your cold to sac and pushed the garage door opener in your car and went straight from your car into your garage or from your garage to your home. And you didn't even know who your neighbors were. That two was isolation. And you want that warm now and you're coming back to the cities to get it. So the reason why I was sitting next to those women is because they are this desire now to be in community and the neighborhood. There's this desire for authenticity. There's this desire to return back to the neighborhoods and the city of Detroit. And that's exactly what they were doing. Like so many others do. And did we have a conversation? Absolutely we did. Did I recommend more fool at businesses that they should visit? You bet you ID. And so conversations, begging people closer, showing that warm at food lab. Detroit. It starts around the table.

Jerry B: Hmm. So I want to talk about the, so

Jerry B: the leaders in the neighborhood, those who are close until the problem, closer to the solution. We forget about people who live in their neighborhood. A leaders. That's right. We forget about grandma Mabel who sits on the front porch and rock all day long and nobody looks at her as a leader. We forget about the young drug dealers who are actually running the neighborhood. They

are the leaders. People are afraid of them. We forget about near the wine. No who grew up in the neighborhood, but he was traumatized, had PTSD runabout the child where he began to drink out of a wine bottle. But if you go ask near the wine or something, he can tell you. But we don't resource those people. We don't help them. So when I go into a community, I find the Grand Mama's the drug dealers in a wine old and I empower them to help me. But that's what I mean. That's what we mean by those who are closer to the problem is closer to the solution. I was a reformed drug dealer and now I'm leading my community because the people resource me because I gained their trust.

Devita Davison: And you know, Dave, you said something about um, um, like having, having a sense of, of value or are or having agency or sense of self worth. One of the things that coming from and being born and raised

Devita Davison: in the Baptist church, one of the things that I observed even when I was a little girl in grand daddy or daddy or papa, he would preach and we would be in church, is that particularly for men, is that these may have been men outside of the church who are janitors. These may have been men who were outside of the church

Devita Davison: bus drivers or service workers or Pullman porters. People who might have been looked down on or expected to do things for other people. But when they got into the church, they were Deacon Davis. When they got to the church, they were the head of the trustee board. When they get, that's when they found their self worth. That's what they found, their sense of agency. That's where they found their pride, their sense of identity. And it was that that held them.

Devita Davison: And I'm not trying to say that the church is the answer, but we've gotten so far from it. And the thing is, is that, what is that Jerry? What is that thing that is bringing our communities back together? When you take mom out of the house, so daddy out of the house and you lock them up and we're caging bodies. Yeah.

Devita Davison: What is that being Jerry to keeps us together. What is that thing? That is the tuition, that structure that continues the whole family and how it's missing.

Devita Davison: Hmm.

Garth Graham: I know people will have a bunch of questions. Okay. All right. We only got time for one more before somebody's

Garth Graham: going to be a big giant hook and pull me off. Um, I think there was one lady back there. Um, I know, I'm sorry everybody. Um, we've just got to do this one. Um, uh, real quick. Is that fair enough? Uh, okay. Okay. We don't know if the vehicle gonna be,

Devita Davison: I know, I know right now she's not, I'm not even gonna answer anything.

Audience Member: When are the [inaudible] Rodriguez and I love that you guys are up there right now and I feel so humbled by all of your work. Um, I at my question is about the difference between the narrative of the lone ranger and the narrative of the community potluck or coming together. Right. So when in in history class we are taught that we had, uh, the Montgomery bus boycott was the result of Rosa parks standing up. I mean, refusing to stand up, right? Well, she took us down, you know what I mean? But in reality there was this whole network of people that were behind her right fast, the community potluck Besto like we bring things together and we make social movements happen. So could you speak a little bit about the, how we tend to honor and favor the narrative of the lone ranger over the narrative of the power that is contained in the collective,

Garth Graham: if you speak to that?

Dave Chokshi: Yeah. What a thoughtful question. I'm happy to start and I'm sure you guys have thoughts as well. You know, I think about it when, um, we look at something that has worked extraordinarily well, you know, in a particular community or it, you know, in a neighborhood and, um, you know, everyone for good reason, points to that and says, what a, what a valuable effort. You know, I'm so glad that this charismatic leader was able to galvanize their community and figure out how to, um, you know, how to change, uh, this entrenched problem. Um, you know, I'm, I'm a doctor, so I'll use a medical analogy. It's, it's like, uh, you know, I remember when I was a medical student, I would go on, um, transplant missions and what always struck me about that was the, the care, the sophistication, the teamwork that went into, um, transplanting an organ from one person to another person.

Dave Chokshi: And so in my own work, you know, I think about that a lot. Um, just as you said, you know, the, the idea that everyone likes the pioneer, you know, the first to accomplish something, but what is less celebrated are the people who are trying to do that transplanted of innovation of change. Um, the hard work of adapting something that grew out of, you know, circumstances in a particular place and bringing it to another place. And I think what what we should do is figure out how we can celebrate those, uh, those efforts to, to transplant a even more. Um, and I think that's really connected to this idea of scale because to solve something in one community, um, should be looked at as just the beginning. Uh, and then people who are able to bring that from one point of light to a thousand points of light, um, are, are really, uh, people who should be lifted up as heroes as well.

Garth Graham: So on that note, here's what I want you to do. We're going to recognize that the people sitting here are heroes. Um, and you know, quite frankly, are a part of why the future's going to be different. Um, we're gonna have to end on time just because I know I should do that. Um, but, um, I would like you to engage support, they're all come from different backgrounds. Um, continue to lift up, tweet about their work. Um, and what's the other thing people do about tweets? I don't know. I'm asking you here for you. Okay. Instagram about their

work, if you could do that. Um, and stuff like that because, um, this is what needs to be lifted up for things to be different. Good enough. All right. All right, cool. Right. We're done.