

THE CHILDREN'S TRUST  
RACIAL EQUITY SOCIAL JUSTICE AD HOC COMMITTEE MEETING  
BOARD TELECONFERENCE  
"VIRTUAL MEETING VIA ZOOM WEBINAR"

The Children's Trust Racial Equity Social Justice Ad Hoc Committee Meeting was held on February 3, 2021, commencing at 3:30 p.m., in teleconference via Zoom Webinar. The meeting was called to order by Tiombe Kendrick-Dunn, Chair.

**ORIGINAL**

BOARD MEMBERS:

Tiombe-Bisa Kendrick-Dunn, Chair (Zoom)  
Dr. Daniel Bagner (Zoom)  
Constance Collins  
Richard P. Dunn II (Zoom)  
Lourdes P. Gimenez (Zoom)  
Mindy Grimes-Festge (Zoom)  
Pamela Hollingsworth (Zoom)  
Steve Hope (Zoom)  
Dr. Monique Jimenez-Herrera (Zoom)  
Marissa Leichter (Zoom)  
Karen Weller  
Kenneth C. Hoffman (ex-officio) (Zoom)

## 1 STAFF MEMBERS:

2 Ashley Pugh

3 Bevone Ritchie

4 Destiny Westbriij

5 Donovan Lee-Sin

6 Imran Ali

7 James Haj (Zoom)

8 Jennifer Ulysse

9 Joanna Revelo

10 Juana Leon

11 Lisanne Gave

12 Lisete Yero

13 Lori (Katherine) Hanson (Zoom)

14 Maria Paula

15 Muriel Jeanty

16 Rachel Spector

17 Sabine Dulcio

18 Sebastian del Marmol

19 Sheryl Filippova

20 Stephanie Sylvestre (Zoom)

21 Tatiana Canelas

22 William Kirtland

23 Ximenea Nunez

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GUESTS:

Diana Lores

Leigh-Ann Buchanan, Facilitator (Zoom)

## 1 PROCEEDINGS

2 (Recording of the meeting began at 3:30 p.m.)

3 MS. KENDRICK-DUNN: So, welcome everyone to our  
4 Ad Hoc Committee Meeting. And we're going to hear  
5 from Leigh-Ann today, some very interesting and --  
6 information. But before we get to the recap of the  
7 Ad Hoc Committee and community listening sessions, I  
8 need to ask if there are any public comments.

9 Muriel?

10 MS. JEANTY: No, there are no public comments.

11 MS. KENDRICK-DUNN: Thank you, Muriel.

12 Okay, since we don't have any public comment,  
13 unless Stephanie says otherwise, I think we can hear  
14 from Leigh-Ann.

15 MS. SYLVESTRE: I don't have anything to say.

16 MS. KENDRICK-DUNN: Leigh-Ann, how are you?

17 MS. BUCHANAN: Great, great. Well, I'm so  
18 excited to see everybody. I feel like we're having a  
19 long lost reunion because it's been such a long time  
20 since we were last together. And I hope you're doing  
21 well. If you just want to give a thumbs up, thumbs  
22 down, to show me how you're doing or drop it in the  
23 chat, I would love to know how everybody is doing.  
24 And also, with the slide presentation, can we put the  
25 slide presentation up? Awesome.

1           So just so we're all on the same page, as you  
2           guys know, it's been a while. So what I thought  
3           might be helpful before we actually make this  
4           interactive, as you know by now, I think this is our  
5           seventh session together, this is not me presenting,  
6           this is going to be a bit of a group conversation.  
7           But I thought it would be helpful just to do a little  
8           bit of a refresher, a recap on where we left off and  
9           what has happened in the interim.

10           Pam says all good with the most adorable little  
11           angel behind you on your background, I absolutely  
12           love it. But I'll just do a bit of a recap on where  
13           we've been and what has happened in the interim. And  
14           then, we'll just get started into having a bit of a  
15           discussion for the remainder of our time about some  
16           of the priorities that surface from the community,  
17           how that resonated and aligned, and also what we're  
18           doing next.

19           Does that sound good with everybody? Nod your  
20           head, give me a double thumbs up. Awesome. So just  
21           a bit of a recap, if you will go to slide four.  
22           There we are. A look back. So, if you remember, we  
23           started off, what seems like two years ago, but  
24           really it was just last summer, with a series of  
25           conversations focused on what we now know as

1 REDIness. It's probably the easiest acronym for us  
2 to use, standing for Racial Equity Diversity and  
3 Inclusion. And we started talking about purpose and  
4 vision. And the goal was really to identify what our  
5 REDI pillars were and some of the principles that we  
6 wanted to guide this reenvisioning of how to ensure  
7 that The Children's Trust, both in an external and  
8 internal framework was really operating through a  
9 lens of REDI.

10 Then we looked a little about the impact  
11 framework. Looking at how we can activate the  
12 different points of human capital both internally and  
13 externally. We talked a little bit about that  
14 concept of value creation, which was that point  
15 between the opportunity and the challenge where we  
16 can actually begin to see an intervention, not in the  
17 clinical sort of word, but a way that we would play a  
18 role. And that, we looked at the ready opportunities  
19 that existed and this intervention model.

20 We moved on because some of us said, "We want  
21 action. We want some tangible outputs and outcomes."  
22 And we moved on to our roadmap where we talked a  
23 little bit about what are the platforms that we have  
24 as a funder, as a convener, as an organization that's  
25 engaging with providers, potentially for training, as

1 a repository of so much rich data, what are the  
2 platforms and specific tactics that The Trust might  
3 use to really lead with REDIness. And then where we  
4 left off -- we decided to take a pause. We were able  
5 to identify priorities from this committee around  
6 what are the things we might be able to do in terms  
7 of a ready action plan.

8 And one of the things that came up, and I know  
9 Tiombe was really clear about making sure that we  
10 weren't creating priorities in an echo chamber, in a  
11 silo of just this committee. And so what we opted to  
12 do was pause and allow the team, the engagement team,  
13 the staff, and some of the other consultants that are  
14 working with The Trust, to help lead some community  
15 listening to really understand, one, whether or not  
16 the priorities that we had identified aligned with  
17 what the community had experienced and identified.

18 So if we'll just go to the next slide. So we're  
19 on community listening sessions. And then now we're  
20 at the final -- the final point, which is action  
21 plan. Now that we've heard from the community, and  
22 we'll talk a lot today about where there's alignment,  
23 distinction and some clear focus areas that were  
24 raised by the community as well as this committee,  
25 then it's time to put that into action. How can we

1 benchmark our strategic REDI priorities into long-  
2 term accountability and something we can put into  
3 practice.

4 So, any -- before I get into a little bit of a  
5 recap of the community listening sessions, any  
6 questions or feedback or comments at this point? I  
7 just want to pause and make sure we can hear from  
8 anybody that's got a point to raise. I'll check in  
9 the chat. Other than good afternoon, hi, everybody,  
10 good to see you. I'm assuming it's good to give you  
11 a little bit of a recap of the community listening  
12 sessions? That work for everybody?

13 MS. SYLVESTRE: Leigh-Ann, Reverend Dunn has his  
14 hand up.

15 MS. BUCHANAN: I have way too many screens, so  
16 if you --

17 MR. DUNN: My apologies, I was actually trying  
18 to give a thumbs up and hit the wrong button. That's  
19 a long ways off, but thank you anyways. I'm  
20 listening attentively.

21 MS. BUCHANAN: Excellent. Thank you, Reverend  
22 Dunn, and I'm glad you got the thumbs up for us to  
23 move forward.

24 So, if we'll just go to the next slide, I want  
25 to just talk a little bit about the community



1 listening sessions.

2 Actually, you know what, go back one slide. Can  
3 you -- stay on the slide that we're on.

4 Just a bit of a recap, the pillars that we  
5 identified coming out of those first six sessions, we  
6 have four main pillars. Equity, and so some of the  
7 focus areas we thought about was seeking social  
8 justice, acknowledging the historical context for  
9 racial inequities, addressing systemic racism.

10 We talked about having a holistic approach, so  
11 eliminating some of those silos. So connect a series  
12 of intervention programs, preventions as well, some  
13 of the language that we talked about in preparing for  
14 this, to address multiple nodes of the problem cycle.  
15 You all remember that 'Why' exercise we did when we  
16 thought about why, why, why. We realized that this  
17 problem often goes deeper and is very interconnected.  
18 So we looked at a holistic approach.

19 Third we said, who do we need to center? We  
20 need to center the children. This is after all, The  
21 Children's Trust and our primary goal is to make sure  
22 that we provide for the general welfare and positive  
23 and best outcomes for the children and families in  
24 our community. So centering children around service  
25 delivery, thinking about the physical, psychological,

1 and opportunistic wellbeing, was one of the pillars  
2 that we landed upon.

3 And then finally this idea of an ecosystem, that  
4 no one element, whether it's internal, external  
5 provider, the board, the opportunity to be a thought  
6 leader, none of that works on its own, nothing  
7 operates in a silo. And so we thought about, how do  
8 we have more of an ecosystem or systemic approach.  
9 Because one of the things that I say all the time and  
10 we all talked about was, we're dealing with systemic  
11 problems, so ecosystem type solutions are the best  
12 approach to addressing systemic problems, instead of  
13 just focusing exclusively on programs.

14 And so where we got to with the community  
15 listening sessions was, I got a chance to work with  
16 the internal team and we developed a framework to  
17 facilitate community listening sessions. And who we  
18 heard from were teams of providers from the  
19 leadership, through the entire staff. We heard from  
20 the provider leadership. We actually heard from  
21 youth that are served by programs that are funded by  
22 The Trust as well as active engagement from the  
23 internal community engagement team, who help to lead  
24 those conversations.

25 So overall we had about 41 providers participate

1 in this community listening sessions, over 11  
2 sessions. And I'll tell you, I think we should give  
3 a round of applause to the internal team. They  
4 really worked hard to facilitate those sessions, to  
5 take really good copious notes. And from that,  
6 that's where we got a lot of this qualitative data,  
7 where we're able to identify some trends and collate  
8 that with your priorities.

9 But a couple of things I want to share about the  
10 community listening sessions, if we'll just go to the  
11 next slide, perfect, is the primary goals. Primary  
12 goals of these sessions were to really identify  
13 community derived priorities around REDIness and  
14 social justice for The Trust to consider as well as  
15 the broader system of eco impact that The Trust has.

16 Second goal was to identify gaps. So a lot of  
17 the conversations focused around identifying where  
18 there might be a gap in service, in opportunities for  
19 improvement. Yes, I agree, Jennifer was amazing in  
20 leading it and keeping everybody -- can you imagine  
21 11 sessions, multiple sessions a day being  
22 facilitated by a ton of those groups we mentioned. I  
23 think they did a fabulous job.

24 And last but not least, one of the things that  
25 we wanted to boil down on, which actually mirrors the

1 process that we did earlier on in the year, was to  
2 develop a shared vocabulary around the concept of  
3 REDI and social justice. Because if we're not  
4 speaking the same language, then we're not going to  
5 be sure we're talking about the same thing. And so  
6 one of the things I'll also add about these community  
7 listening sessions was, we also thought about  
8 collecting data, qualitative data points, to  
9 understand equity of access more broadly to resources  
10 and opportunities in our community, understanding  
11 solutions and ideas.

12 So part of the listening sessions that I really,  
13 really loved and we're about to dive into that now,  
14 was this idea that we asked, if you were the  
15 leadership of The Children's Trust, what would be  
16 your statement of action. And I know the last thing  
17 that we're going to be doing today is actually  
18 walking through some of the statements of action that  
19 we have. But I thought I would just share a couple  
20 of them, and most of you probably received the  
21 feedback summary in addition to materials for  
22 preparing.

23 But what we were able to do was divide these  
24 statements of action around topics that came up. So  
25 one of the topics, for example, was small community-

1 based organizations access to Children's Trust  
2 funding. Another topic that they said we needed  
3 action was environmental resilience. Another topic  
4 was mental health. One of the action statements  
5 said, "To address mental health among the youth, The  
6 Children's Trust should implement more  
7 mentorship/counseling programs and the result would  
8 be improving youth development."

9 So what we saw in those community listening  
10 sessions was actually statements that you can adopt,  
11 adjust, refine, that came from the community.  
12 Another one around community engagement said, "To  
13 address community relations, The Children's Trust  
14 should engage in a productive dialog with community  
15 members and law enforcements".

16 So one of the biggest takeaways out of the  
17 community listening sessions that we really heard  
18 was, "This is great, let's do more." Let's do more  
19 of these listening sessions so there can be a two way  
20 source of dialog in a more regular cadence between  
21 The Trust and the community, not around an agenda for  
22 programming opportunity or an RFP, but really just a  
23 space to share experience.

24 So before I get into just talking about the  
25 alignment of the Ad Hoc Committee priorities and the

1 community priorities, I just want to pause to see if,  
2 Tiombe, you wanted to weigh in or any other members  
3 of the Ad Hoc Committee on just this entire community  
4 listening session process before we get into the nuts  
5 and bolts?

6 No? I think Tiombe might have left us. Okay,  
7 so --

8 MS. KENDRICK-DUNN: No, no, no, I'm here. I'm  
9 sorry.

10 MS. BUCHANAN: I was just saying if you wanted  
11 to weigh in about just the overall scope of the  
12 community listening sessions before I just share --  
13 we share and walkthrough some of the priorities.

14 MS. KENDRICK-DUNN: The overall scope, well --  
15 you can go ahead and share. And then maybe I'll  
16 share after because as I read through the information  
17 that was shared, I thought that it was very  
18 interesting, the information that was provided by the  
19 various community members related to The Children's  
20 Trust and ways that we can include REDI, so. But I  
21 can speak after you. Go ahead.

22 MS. BUCHANAN: Excellent. So what I want to do  
23 for the last part of our discussion, the bulk of  
24 today, is talk about three main areas. And so this  
25 is where it gets interactive. And if you remember

1       our norms from last time, Socratic methods, so I  
2       might call on you to jump on in and share. Also, I'm  
3       going to ask for your feedback after we get through  
4       each of these sections. What I want us to talk  
5       through the priorities, so the collation of the  
6       community priorities with the priorities that this  
7       committee created. I also want to touch on briefly,  
8       the distinctions. Interestingly enough there were  
9       more -- there was more alignment than distinction.  
10      And then last but not least, I want us to dive into  
11      some of these focus areas that were really elevated  
12      as things we might think about focusing on topically.

13             Does that sound good with everybody? I'm seeing  
14      a lot of nodding heads, thumbs up, awesome.

15             So I want to walkthrough just a little bit of  
16      the priorities. And as I walk through them, I want  
17      you to think about the question, which priority or  
18      priorities resonate the most with you, and then we're  
19      actually going to talk about it. So be prepared.

20      I'm giving you forewarning that we'll call on you.

21             So there's two main slides around priorities.  
22      Let's see -- there is, yeah -- six main buckets of  
23      priorities. And what you see on the slide deck that  
24      I shared is the overall priority. And the document  
25      that you had received in advance, and I can walk

1 through some of the tactics right now, indented under  
2 each priority is some of the tactics.

3 So if you remember in our conversation from way  
4 back in the fall, we talked about the distinction  
5 between the priority, the priority statement, and the  
6 tactics, which are kind of the execution. So the  
7 what and the how. And the why is all about REDIness.  
8 And so we've got that piece covered. So the  
9 priorities are really the what, what are we focused  
10 on. And the tactics are really the how.

11 So some of the priorities that came up were --  
12 that aligned with the 12 priorities that this  
13 committee stated was to address systemic racism and  
14 justice. And some of the ways that was suggested we  
15 do that is through provider -- through provider and  
16 broader community engagement, training, and  
17 revisiting funding guideline.

18 Some of the specific things that were mentioned  
19 was creating a platform, to ask different  
20 stakeholders and youth how to improve services. So  
21 how can we create those feedback loops where we have  
22 more than the community listening sessions, but a  
23 regular feedback. Another suggested tactic was  
24 diversity sensi -- diversity sensitive materials that  
25 could be used to educate families, sensitivity



1 training for an agency staff, as well as community-  
2 based workshops.

3 The second main priority area that, again, was  
4 the same for the community and the same for the Ad  
5 Hoc Committee, was to adopt a cultural humility lens,  
6 with the idea that adopting this cultural humility  
7 lens, you can evaluate, improve internal structures,  
8 culture and processes, as well as provider  
9 requirements to develop best practices, ready  
10 curriculum that's evidence based, and incorporate  
11 parent liaisons and consultants. So that was  
12 adopting a cultural humility lens. And Stephanie  
13 just let me know that the folder document that I'm  
14 referencing has not been shared yet, they're going to  
15 share it for the retreat. So we're just going to do  
16 an overview, and actually what you're going to do at  
17 your board retreat is put this into action, which  
18 we'll talk about in a moment.

19 The third area that was of alignment was  
20 advancing systems change. And I know we talked a lot  
21 about this idea of do we want to do programs or would  
22 we want to change the entire culture and system of  
23 how things operate. And one of the ways to do that  
24 is through evaluating and improving, again, internal  
25 structures, culture and processes, beginning to have

1 a systems changed lens.

2 Fourth, this idea of holistic health of  
3 children, so mental, emotional, physical, through  
4 revisiting guidelines and incentives of existing  
5 funding processes, as well as looking at the  
6 performance of the funded programs. And that had a  
7 lot of different tactics underneath and we'll go into  
8 all of them.

9 The other area that really came up as a point of  
10 alignment was racial equity for children's and  
11 family, just generally. We want to see racial equity  
12 for our children and family. The way that you saw  
13 alignment between what the community suggests and  
14 what the Ad Hoc Committee suggested was revising  
15 guidelines again, incentives of existing funding  
16 processes as well as looking at the performance of  
17 funded programs to include also an audit of diversity  
18 of demographics of those who are currently served.

19 And then last but not least, the other area  
20 priority we saw alignment along was strengthening  
21 ready, just generally. Racial equity, diversity, and  
22 inclusion. And the way in which we saw the same  
23 suggestions from the Ad Hoc Committee and the  
24 community was, again, revisiting guidelines and  
25 incentives of existing funding processes and

1 evaluating performance of funded programs in addition  
2 to more community engagement.

3 So I want to pause there, as we think about  
4 those six main priorities, and ask, which of those  
5 resonates the most with you and why? And I'll start  
6 with -- actually, it looks like, Pamela  
7 Hollingsworth, you volunteered --

8 MS. HOLLINGSWORTH: Yes. I clicked and then my  
9 dog barked, but I think he's okay now. I think what  
10 resonated with me was the term that I don't recall us  
11 using inside of some of our earlier meetings, which  
12 was culturally humility. And that deeply resonates  
13 with me because coming in with that perspective is so  
14 fundamental, not only to equity work, but it also  
15 speaks to the power structure and the lens through  
16 which the power of any kind of relationship is  
17 viewed. And often in a funding relationship, we know  
18 who typically has the power. So that totally  
19 resonates with me and I'm really pleased to see that  
20 included.

21 MS. BUCHANAN: Excellent. I want to go next to  
22 Dan, because I see you're nodding your head. Which  
23 one of these six --

24 MR. BAGNER: Oh, I got called on. So I echo  
25 what Pamela said. That did resonate with me. In our

1 field we certainly talk about cultural humility in  
2 providing services for kids and families. The other  
3 one that I also think resonated with me was the  
4 racial equity for children. I think if we think  
5 about centering this on children, I think that's  
6 really important to consider, so that resonated with  
7 me as well as the details under that heading. So I  
8 think hearing things like incentives and audits of  
9 who we're providing services for and how do we expand  
10 to make sure we're providing equity in our services,  
11 that really resonated with me in something that I  
12 don't think we necessarily need to do more, but we  
13 need to see what we're doing and how we can better --  
14 if we're going to do more, how we can target who we  
15 need to target. So that's what my initial reactions  
16 are.

17 MS. BUCHANAN: Why don't we go to -- and I have  
18 a bunch of screens here, why don't we go to  
19 Constance. You're right under Dan under my  
20 arrangement. And, Constance, you're still on mute.

21 MS. COLLINS: Right, sorry, just unmuted. I  
22 agree both with what Pamela and Dan said. I would  
23 also just, again, emphasize the holistic health,  
24 because I think when we look at the impacts of  
25 systemic racism and social inequity and injustice,

1 we're looking at impacts across every dimension of  
2 human beings and their experiences. And ensuring  
3 that we are seeing children holistically, I think  
4 it's incredibly important for their healing and  
5 growth and to ensure that they thrive. So, I guess  
6 that would be my thought.

7 MS. BUCHANAN: Holistic, excellent. Why don't  
8 we go to Monique, because you're actually right under  
9 Constance.

10 MS. JIMENEZ-HERRERA: So I agree with what has  
11 been said. The one that resonated the most to me was  
12 also holistic health of children. Being able to look  
13 deeper on how we do the processes and how we engage  
14 and provide incentives to the individuals and  
15 providers, making sure that this child is being  
16 looked at completely and not just pieces of what we  
17 need we think we need to address. I think it's the  
18 key. So that's the one that was most important to  
19 me.

20 MS. BUCHANAN: Excellent. Why don't we hear  
21 from one more? Anybody want to volunteer or be  
22 voluntold? No volunteers? Why don't we hear from  
23 Steve?

24 MR. HOPE: Hi there. Good afternoon, everyone.  
25 Thanks for the opportunity to participate. Two areas

1 that I think resonates with me are the racial equity  
2 for children and families and system changes. And  
3 just to briefly talk a little bit about racial equity  
4 for children and families, I think that if we look  
5 at, as an example, what has happened since COVID-19,  
6 we see that minority families have been impacted much  
7 more as a result of some of the social and economic  
8 consequences of COVID-19.

9 While some of these impacts may not have been  
10 intentional, but I think because of the system that  
11 is in place, a lot of minority families have been  
12 overlooked when it comes to some of the services,  
13 when it comes to access of the services. And just to  
14 give you a quick example, I was looking at the news,  
15 I think it was this morning, and they were talking  
16 about the simple things such as registering for  
17 receiving the vaccination. And they were saying to  
18 families, all you need to do is go online and  
19 register, without taking into consideration that a  
20 lot of these families may not have access to the  
21 internet, may not have access to technology.

22 So I think while some of the -- the intention in  
23 some cases may be well intent, recognizing that there  
24 are disparities that exist in the community, I think  
25 addressing some of those key issues. And I think

1 putting in place the appropriate systems and controls  
2 and protocols to address some of those inequities is  
3 something that hopefully as a board we can come  
4 together and formulate ideas that The Trust, as a  
5 major funder in the community, can impact. Thank you  
6 very much.

7 MS. BUCHANAN: Yeah, I loved that you mentioned  
8 specifically looking at -- if you all remember, we  
9 talked a lot about the different systems that where  
10 we see the inequities, where we see a lot of the  
11 discriminatory practices. At the way, way back in  
12 the beginning, we talked about banking, education,  
13 health care, housing, and then we also realized that  
14 culture was also the system that kind of permeates  
15 all of it. And beginning to think about the role  
16 from a systemic change, what are the specific things  
17 that we're doing with the lens of systems change.

18 I know in my space, we talk a lot about the  
19 economic costs of racism or lack of inclusion. And I  
20 know some city group issued a report at the end of  
21 September, that basically said that the US economy  
22 lost 16 trillion dollars because of discrimination.  
23 And the specific areas where we saw the most economic  
24 quantification of that was in education. And then  
25 access to economic opportunity.

1           And if you think about the contrast, you know,  
2           last year, I went to say in 2019, the last full  
3           fiscal year in 2019, US GDP was 19.5 trillion  
4           dollars. So it's a significant economic cost. So  
5           what does it look like to quantify these things as it  
6           relates to children and families and wellbeing. I  
7           think that's really, really important. So thank you,  
8           Steve.

9           I want to quickly talk about the distinctions.  
10          There weren't a lot, but there were a couple areas of  
11          distinctions that I definitely want to have Stephanie  
12          weigh in. But one of the main distinction areas that  
13          showed up in terms of priority and tactics -- and I  
14          included the tactics in this one because it was short  
15          and we're able to kind of walk through that.

16          One of the area of distinctions, this was a  
17          community priority that wasn't reflected in the Ad  
18          Hoc Committees was this priority to evaluate and  
19          improve internal structures, culture, and processes,  
20          as well as revisiting guidelines incentives of  
21          existing funding to, one, they talked about the board  
22          members who are also affiliated with providers. And  
23          I don't necessarily know about the veracity about  
24          that, but this is the communities impressions, so I  
25          love to tag Stephanie to jump in on that one in a



1 moment.

2 Secondly, there's this idea that ensuring all  
3 organizations have equal opportunity to access Trust  
4 funds and resources. And third, programs should be  
5 funding -- programs should be funded considering  
6 local challenges and needs, understanding that we  
7 vary by neighborhood. What may be important for  
8 perhaps the Homestead community, may not be the exact  
9 same concerns of Little Havana, Overtown, Liberty  
10 City, Downtown, Miami Gardens. So looking at a  
11 hyperlocal, almost neighborhood based approach, to  
12 funding specific needs.

13 Stephanie, before you jump in, one of the things  
14 that came out of the listening sessions, and just  
15 kind of debriefing, was a unique opportunity to think  
16 about messaging. You think about that second point,  
17 not all organizations may be at the level to be able  
18 to meet the requirements in terms of data reporting,  
19 cost reimbursement of a lot of the funding programs,  
20 I think, maybe, with the exception of innovation  
21 program, to get Trust funding. So how might we  
22 better message the role of The Trust, maybe what the  
23 funding requirements are, that some of the  
24 opportunities that exist. But, Stephanie, I want you  
25 to weigh in here before we jump over to focus areas.

1 MS. SYLVESTRE: Thanks, Leigh-Ann.

2 I just want to create some context around this,  
3 and I promise you I'm not plugging Jimenez's budget.  
4 But as you can see, that some of these feedbacks is -  
5 - that we need to do a little bit more in the  
6 community to get the community understand how we  
7 work. Because when we talk about, we talk about  
8 board members, none of our board members are allowed  
9 to get -- to receive funding from The Children's  
10 Trust. And if your organization gets funding,  
11 there's a cap to what it is. But because people  
12 aren't aware of these rules and guidelines, they  
13 might just make stories up and it just kind of goes  
14 to maybe us spending a little bit more money  
15 marketing and PR to talk about how we function and  
16 what we function.

17 We have been doing a number of these things a  
18 number of years, addressing these bullet points. And  
19 so it's clear that our efforts are not fully visible  
20 in the community and that means that we might need to  
21 look into that. And I'm not plugging anything, but I  
22 just want to create some context so that you don't  
23 think that The Trust is not doing these things. We  
24 do have the small CBO direct result from ensuring  
25 that people have access in preparing or funding. We

1 provided capacity building and supports.

2 We fund -- we do small grants in the community  
3 throughout the year, especially during summer for  
4 summer camps. And we acknowledge that different  
5 parts of the communities are different and we do fund  
6 and expect -- have different expectations based on  
7 where in the community some programming is happening.

8 So I just wanted to put that there so that we --  
9 that the conversation around it can come from a  
10 position of positivity and realizing that while we  
11 really -- sometimes when we do these exercises, what  
12 we really need to focus on is not maybe doing more,  
13 but just being more deliberate and intentional about  
14 ensuring that people are aware of what is it that  
15 we're doing.

16 MS. LEICHTER: I'd just like to add to that  
17 because I -- I hear my voice echoing, I'm not sure  
18 whose computer is doing that to me. But I ironically  
19 was part of kind of like a situation that happened  
20 several years back when there was a lot of public  
21 outrage on that first point issue with the small  
22 CBCs, not CBCs, the small nonprofit. I was the only  
23 person on the board, pretty much, at that time, that  
24 worked at a small nonprofit. And there's kind of a  
25 catch 22 to it because if you don't -- because a lot

1 of the small nonprofits in our community that receive  
2 money from The Trust -- if you want representation  
3 from the small nonprofits on the board, then you --  
4 most of them, their budgets, a lot of their budget is  
5 made up of The Trust because they're not FIU and  
6 they're not Miami-Dade.

7 So your -- if you cap the amount of what an  
8 organization can receive to have representation on  
9 the board of The Children's Trust, you're eliminating  
10 a lot of employees from smaller community based  
11 organizations because The Trust is looking for them  
12 and looking for these smaller grassroots  
13 organizations that budgets are going to be maybe more  
14 predominantly coming from funds from The Trust.

15 So it's like when you do need to be educated  
16 more because I know it's kind of complicated what I'm  
17 saying, but, you know, when you look at the budgets  
18 of FIU and Miami-Dade and these bigger things, what  
19 they are getting from The Trust is like peanuts  
20 compared to the smaller organizations that The Trust  
21 might be funding.

22 So I think it's important, you know, that's a  
23 really complicated and very specific detailed message  
24 to get out there, but it's the truth. So, you know,  
25 I don't know how we could explain that clearer or

1 more concisely, but I don't think you should remove  
2 board members who are funded by The Children's Trust  
3 because at the end of the day, there are those of us  
4 who are at the smaller community based organizations  
5 that, you know, are trying to represent that  
6 demographic. And it's not just, like, the big  
7 conglomerate folks.

8 MS. BUCHANAN: And, Marissa, that speaks to the  
9 -- if you even think about this REDI acronym, that  
10 speaks to having an inclusive, accessible  
11 composition. And there are multiple ways for us to  
12 engage the community. And I think to Stephanie's  
13 point, messaging is definitely one of the biggest  
14 light bulb moments of maybe there's a disconnect  
15 between how and the way we're messaging and how its  
16 landing on the community and that came out from the  
17 community listening sessions in terms of their  
18 impressions, where they saw as gaps versus what we  
19 know is how things are operating.

20 So that presents, I think, an opportunity for  
21 focus to align. And I think that's a great segue to  
22 talking a little bit about this focus areas that came  
23 up from the community. The question was, you know,  
24 if you were The Children's Trust, where would you  
25 focus, what would you focus on. That was a literally

1 a question that they were asked and these are some of  
2 the responses. So as I walk through some of these  
3 responses -- oh, Ken, if you wanted to --

4 MR. HOFFMAN: Leigh-Ann, before you go into that  
5 area, so I read both of these when you were  
6 explaining them as being fairness issues. It doesn't  
7 -- unless you heard otherwise, it doesn't -- you  
8 haven't articulated here as an equal opportunity  
9 being a CBO versus large versus a process issue. I  
10 do agree with Stacy -- I mean, Stephanie, sorry, that  
11 we've come a long way, you know, we have processes,  
12 we communicate with the community.

13 We do, I think, a pretty good job of trying to  
14 ensure that we're able to fund a broad base of  
15 programs, including setting aside funds for, you  
16 know, smaller organizations. But both of those seem  
17 to be, again, an equity and a fairness type of  
18 comment as much as big organizations. So it is big  
19 organization versus small because, you know, somebody  
20 from the outside could see we fund \$10,000,000 to  
21 FIU, for example, for certain things, or more or  
22 less, and so it looks like they get a lot of money.  
23 And I agree there's an educational process that goes  
24 to that. But there's also, again, just those two  
25 seem to me to be a fairness of maybe the equity side,

1 not big versus small. And maybe we're not -- maybe  
2 its partly solved by the listening sessions and the  
3 little bit more community engagement on the processes  
4 versus that.

5 I do not -- I also agree, for different reasons,  
6 that The Trust is built with a large board with a  
7 certain type of representation, some comes from the  
8 community, some comes from the specific  
9 organizations. We have a very stringent conflict and  
10 ethics policy. So I think, again, maybe you can  
11 educate the community in general about that, but I  
12 think that sharing with people how the processes work  
13 a little bit more in terms of fairness is important.  
14 People that, you know, if we're listening, we see  
15 that we may not be doing a good a job as we think we  
16 are by having the right processes in order. So to  
17 me, again, those are just two complete fairness  
18 issues, have nothing to do with necessarily the size  
19 of funding and the like.

20 MS. SYLVESTRE: I agree, Ken. I think where the  
21 size of the funding comes in is that if you're a  
22 small organization and there's a cap of 10 percent,  
23 more than 10 percent from The Trust, you can't have a  
24 board member. So then what you've done is you've  
25 pretty much alienated a small entity having a

1 representation on the board.

2 MR. HOFFMAN: Right, but for better or worse,  
3 The Trust doesn't have a lot of influence on who its  
4 directors are. I mean, we're subject to a very  
5 specified list of who our representatives are and  
6 then some come from the community, whether it be the  
7 governors nominees or those that are appointed by the  
8 commissioner, the county commission or the like. So.

9 MR. HAJ: Madam Chair, if I may? I just want to  
10 point out, you know, I do think it's a messaging.  
11 There's a lot that we're going to bring back at the  
12 retreat, but just to clarify the 10 percent rule,  
13 this is something else that we did a couple of years  
14 ago. We increased the 10 percent rule because of the  
15 small CBO issue. We had the bylaws committee, we  
16 passed the bylaws and raised it, so that we can have  
17 small CBOs represented on our board. So that was  
18 changed two years ago with this board's input at the  
19 bylaws committee.

20 MS. BUCHANAN: That's a great -- Steve, did you  
21 want to jump in?

22 MR. HOPE: Madam Chair, I'm sorry. Yes. Would  
23 it help, maybe, if The Trust had, maybe, quarterly  
24 meetings that would bring together the CEOs of the  
25 smaller not-for-profits or all of the not-for-



1 profits, which gives them a forum to express their  
2 views, concerns, recommendation, and based on the  
3 outcome of what takes place at these quarterly CEO  
4 meetings, that information can then be communicated  
5 to the board and hopefully could play a role in maybe  
6 influencing some of the decision.

7 I don't know there is a quorum currently that  
8 brings together CEOs from the not-for-profit  
9 community, those that we fund and those that we do  
10 not fund. And would that -- I would say, would that  
11 have any impact in giving a greater voice to some of  
12 these smaller organizations?

13 MS. BUCHANAN: Steve, that's an excellent point.  
14 And what we're going to do in a moment is talk about  
15 the action, but I do want to flag that the community  
16 listening exercise that we just went through, 41  
17 providers across 11 sessions, was only a sliver of  
18 the total universe of potential community listening  
19 opportunities that we identified. So this was an  
20 opportunity to get a sample size.

21 But I think the biggest take away, and I'm sure  
22 that maybe Stephanie or Donavan or Imran want to  
23 weigh in, or Jim, the biggest take away was we need  
24 to keep doing this. The community said we want --  
25 the providers said we want to keep meeting, the

1 leadership from the providers said we'd like to do  
2 this more often, this was helpful, this was great for  
3 the providers to get together and have a forum to  
4 share.

5 And so your point about this not being an  
6 isolated exercise, that perhaps one of the action  
7 items could be an ongoing quarterly, regular  
8 frequency cadence of those community feedback loops.  
9 Because there's only so much you can gather from a  
10 survey or from the Ad Hoc conversations you have with  
11 a provider on the fly, but having a dedicated forum  
12 for real dialog was definitely something that was  
13 recommended in the actual priorities, but recommended  
14 by those that participated as well. Okay.

15 MS. SYLVESTRE: So as part of our timeline, we  
16 are planning to do a share out with the community in  
17 May to talk about the results of what we heard from  
18 the listening sessions and then also combine it with  
19 the board's recommendation for moving forward. So  
20 normally we get input from this community, but we  
21 don't always have a forum to talk about it. We  
22 publish out the information, but we're going to be  
23 more intentional and convene the people again to  
24 share out what they've told us.

25 MR. BAGNER: Madam Chair, can I ask a question

1 about the, maybe you'll present this data, but the  
2 makeup of the folks who participated in this in terms  
3 of racial ethnic diversity? And why I'm asking that  
4 is, I agree a lot of the comments that were stated.  
5 And I think what's important is the perception,  
6 right, and the perception of the inequities that are  
7 happening. I heard FIU being raised. I'm a white  
8 male representing FIU.

9 And so I think, you know, that perception is  
10 important. And I think we have to consider that. I  
11 mean, the messaging is important, but maybe we can  
12 think about other ways to address those perceived  
13 inequities. But I think some of that depends on, did  
14 the group who participated in this, was it mostly  
15 providers from racial and ethnic minority  
16 backgrounds.

17 MS. BUCHANAN: I can speak a little bit to that  
18 because I got a chance, I had the privilege of  
19 helping architect what this looked like and we were  
20 really intentional about designing a process that was  
21 REDI, in terms of who we spoke to. So in the summary  
22 that you're going to receive in connection with the  
23 retreat, you'll actually have the exhibit shows the  
24 participating organizations and the matrices that  
25 breakdown, but I give you the sample pool. So the

1 aim was to reach stakeholders that were familiar with  
2 The Trust and as well as the extended community. So  
3 the main stakeholder groups that we identified were  
4 providers, recipients of service by funded providers,  
5 so the beneficiaries. Some of the corporate  
6 entities, nonprofits, particularly focusing on direct  
7 service nonprofits, faith-based organizations, local  
8 government.

9 And then for the winter round of the listening  
10 sessions, we specifically got representation from  
11 youth development, parent and family support, public  
12 health and mental services, early childhood, youth  
13 and foster care, LGBTQIA Initiatives, youth homeless,  
14 as well as youth whose parents were incarcerated.  
15 And then we attempted to ensure that there was -- the  
16 groups were split in consideration of power dynamics,  
17 potentially, so making sure that perhaps the CEO and  
18 then the executing manager were not in the same  
19 group, so that we would feel comfortable speaking  
20 freely as well as making sure that there was  
21 representation across the spectrum, in terms of  
22 gender and racial equity as well.

23 Does that answer your question? Okay, great.  
24 So that, I think, was a great, little robust  
25 discussion around the point of distinction. But one

1 of the things I wanted to emphasize was even just  
2 looking at the slides, there were much more points of  
3 alignment than there were points of distinction. If  
4 you look at it, there was really one main point of  
5 distinction with three subitems, whereas when you get  
6 the full summary, you will see that there was so much  
7 alignment both in the priorities and tactics from the  
8 community to the Ad Hoc Committee.

9 So from that I would say, that, I think our  
10 exercises of really opening up our minds and thinking  
11 deeply, really gave us a great pulse on what the  
12 community was concerned with and then we see more  
13 opportunities for further engagement.

14 I want to touch on and have us think on these  
15 focus areas. So the question is, again, that we  
16 asked in these community listening sessions was, if  
17 you were The Children's Trust, you're The Children's  
18 Trust board members, what would you pick as an area  
19 of focus? And so I just wanted to share the list of  
20 areas of focus that came up in response to that  
21 question, because then it also presents the universe  
22 of topics that were of concern to some of the  
23 community representatives and the target populations  
24 that we just spoke of.

25 So some of the specific suggested areas of focus

1 were black representation injustices, inequalities  
2 and broader acceptance of the black community members  
3 and their struggles. Second, income gap and economic  
4 insecurity. Third, increase the definition of age.  
5 So thinking about, specifically, students that age  
6 out of the system that need resources and programs to  
7 assist them, so 18 to 24 year olds. I think that  
8 came up a couple of times in some of our  
9 conversations earlier on last year.

10 Environmental resilience issues and how that  
11 interplays with children and family welfare.  
12 Inclusion and quality generally, and specifically for  
13 LGBTQIA, in a more nuance cultural awareness  
14 perspective.

15 Capacity building for individuals and community  
16 advocacy and engagement, so looking at how we can  
17 take more of a role in advocacy in providing tools  
18 for active participation. Criminal justice issues  
19 such as gun control, gang violence, cyber bullying,  
20 human trafficking, and police brutality. Health,  
21 generally, including mental and depression and  
22 service access. So mental health challenges and  
23 issues. Accessibility. This was an interesting one  
24 that came up quite a bit, was accessibility,  
25 including specific disabilities.

1           And then equity for funding, I think we just  
2 mentioned the idea of equity and fairness and  
3 perception of the availability of funding. And then  
4 another focus area was basic needs insecurity:  
5 housing, homelessness, food, transportation.

6           I recall in one of our earlier conversations we  
7 talked about looking at the whole child, because if  
8 they are hungry, its very difficult for them to  
9 learn. If they're not getting regular checkups,  
10 we're not thinking preventatively. And then, also,  
11 the educational experience in terms of equity.  
12 Mainly looking at college readiness.

13           So a couple of things I want to mention as it  
14 relates to this focus area, before I turn it back to  
15 you all to share which of these focus areas really  
16 resonate and standout with you the most, is that this  
17 language is based off the community. You have the  
18 opportunity as you develop your action plan and you  
19 go into your retreat mode, to refine, expand, clarify  
20 the language, but one thing I didn't want to do was  
21 editorialize or change much of the language that came  
22 out because this is the data for you to really  
23 interpret.

24           Some of the things that we might want to take  
25 into consideration is when we think about, you know,

1 educational experience and outcomes, what does that  
2 look like, who is that for, are there specific  
3 nuances for specific elements for the population.  
4 Maybe not every student is a college bound. Looking  
5 at entrepreneurial or perhaps service in the armed  
6 forces, is opportunities we think about holistically.  
7 Thinking about our pillar.

8 Another area that maybe a point to consider is,  
9 you know, readiness, including financial literacy.  
10 We just gave the stat about economic impact of  
11 discrimination. So beginning to think, again,  
12 holistically around some of these topics. And  
13 another area we might want to think about is black  
14 representation came out, at the top, one of the major  
15 priorities. And how do we look at black to maybe  
16 expand, think about BIPOC, for example, or looking at  
17 the intersectionality around the black experience and  
18 what that looks like in South Florida.

19 And then finally, as we think about the health  
20 focus area, there's an opportunity to maybe looking  
21 at combining health and mental health under one  
22 umbrella versus segregating them. So that's the  
23 focus areas that came out of the listening sessions.

24 I want to turn it over to you all to share, and  
25 maybe I'll start off with you, Tiombe, what were some



1 of the, one, just give us one, we'll try to get to  
2 everybody that's participating, what's one of the  
3 focus areas that resonated or stood out to you the  
4 most and why?

5 MS. KENDRICK-DUNN: Okay. Probably the health,  
6 including mental health, where it says depression and  
7 service access. I know in many communities of color  
8 there are health disparities and they have been  
9 occurring for generations. And I think that this is  
10 something that should be addressed. And it resonates  
11 with me, particularly, because being an African  
12 American, I've experienced a lot of health  
13 disparities -- well I've experienced the outcomes of  
14 health disparities within my own family. And so  
15 losing family members way too early, including both  
16 of my parents. And a large part of that was due to  
17 health disparities of what I know now, going back to  
18 like way back when they were children, because they  
19 were both born in the forties.

20 And so, you know, both my parents went through  
21 segregation and all these things that I'm just even  
22 starting to grapple with it now. Because I didn't  
23 even think about that, like one generation removed  
24 from segregation from both my parents. And so that's  
25 why it resonates because I think, for example, so

1 many black people, they transition much earlier than  
2 people in many other groups and that leaves a loss in  
3 the community, a loss of information that can be  
4 passed on, knowledge that can be passed on. There's  
5 just, you know, so many things that are missed  
6 because of that, so that's one that resonates with  
7 me.

8 MS. BUCHANAN: Excellent. Why don't we hear  
9 from a couple of folks that we didn't hear from.

10 Lourdes, I was just about to loop you in the  
11 conversation, so you read my mind.

12 MS. GIMENEZ: Okay, for me, I think there's two  
13 areas which are probably equal as important in focus  
14 areas, which is what Tiombe was saying, I agree the  
15 health one, including the mental piece of it, and the  
16 service. I think we do a great job sometimes in  
17 certain communities of identifying problems of  
18 depression or any health issues, but we don't do that  
19 great a job of following up or following up with  
20 really great services that can make an impact to the  
21 children and families that we are serving. So to me  
22 that's very important. And the basic needs, and  
23 security, housing, homelessness, and food,  
24 transportation, its critical. It's like the basic.

25 If children and families don't have that

1 security, it's going to impact their health, it's  
2 going to impact their mental health, and depression.  
3 And it's also going to be something that if we don't  
4 provide the services that we need to, in order to  
5 make a change in those areas, then we're going to  
6 have a problem with the health of the people that we  
7 are servicing, and the children, and also with the  
8 mental piece of it as well. So I think those two for  
9 me, you know, I was looking at them all, and I'm  
10 like, you know, when I read them, I said, these just  
11 -- like one that's combined for me.

12 MS. BUCHANAN: Excellent. Excellent. Why don't  
13 we also go to Karen.

14 MS. WELLER: Good afternoon, everyone. I'm  
15 going to agree with Lourdes. The first one that came  
16 to mind is the health, the one that says health,  
17 including mental health and depression. But for me,  
18 it also -- in order for people to be healthy, you  
19 need to be able to meet their basic needs of security  
20 and food and housing and homelessness, so all of that  
21 does, for me, it goes hand in hand along with  
22 accessibility.

23 So when I think of those three things, because  
24 if you are not able to get the food that you need, if  
25 you're not able to feel secure in your home, then

1       you're not going to be healthy and you're going to  
2       suffer from so much chronic diseases. I have the  
3       health background, so those are the things that come  
4       to mind. So those are things that resonate for me.  
5       Also, when I think about the previous area, when we  
6       talked about the different distinctions, I just see  
7       that these two areas would need to be changed along  
8       with systemic change because you have -- even when we  
9       were discussing about COVID and what's happening with  
10      that and the resources.

11             If you have a neighborhood where you can go, I  
12      think Dan put that Publix was going to be an area  
13      where people can go and get vaccines. Well, you  
14      know, you have certain areas that don't have that  
15      accessibility, so that's not going to work. You  
16      know, so those are the different areas that really,  
17      when I look at systemic, it seems that we don't  
18      really -- there seems to be a disconnect.

19             And I'm so glad we're doing this because we're  
20      really looking at where we need to go because it just  
21      seems that if we don't do the systemic change, we  
22      just keep repeating the same thing over and over and  
23      over. It's like we know where we need to go, but  
24      sometimes we don't always have the power to make  
25      those changes. So I'm so glad that we're able, at

1 least in this group, to be really looking at that and  
2 be able to see where we can make those changes  
3 systemically.

4 MS. BUCHANAN: Why don't we also hear from, who  
5 haven't I seen? I think Lori, you're on my top  
6 right.

7 MS. HANSON: I would defer to the board members  
8 who haven't shared their preferences yet.

9 MS. BUCHANAN: Who else have I not heard from?  
10 Well, in this round, why don't we just loop back to  
11 the other folks. So Steve, Constance, Dan --

12 MS. KENDRICK-DUNN: Leigh-Ann, can I just add  
13 one more, I'm sorry? I should have said something.  
14 Is that okay?

15 MS. BUCHANAN: Yes.

16 MS. KENDRICK-DUNN: I just wanted to add  
17 educational experience. I want to say, also, with  
18 education, the outcomes and equity. I'm just  
19 mentioning that because, I guess, in our culture and  
20 in our society and education, happens to -- education  
21 or lack of education can really make the difference  
22 for people of racial and ethnic minorities, can make  
23 a difference in their lives. And when we're looking  
24 at, like some people are talking about the basic  
25 needs, education levels, unfortunately, they are tied

1 in our society to needing basic needs.

2 So if you don't have a certain level of  
3 education, then your chances, especially for people  
4 of color, in particular, then your chances of meeting  
5 your basic needs are probably going to suffer. And  
6 the more educated, I guess, you are, in a sense, your  
7 health can improve because you're going to have  
8 access to, I guess, I shouldn't say better doctors,  
9 but probably, definitely better service. And you'll  
10 get to choose, you know, opposed to if you're on  
11 something like, for example, Medicaid, well -- or if  
12 you're on Section 8, someone's going to tell you  
13 where you can go or where you can't go, or which  
14 doctors you can see and which ones you can't. And  
15 when you have a certain level of education, that is  
16 different.

17 And then for just the children, just the level  
18 of the educational experience, I think, in our  
19 community, and definitely not here, but across the  
20 nation, it's still just very much different between  
21 children who are black and children who are white,  
22 and some children who are Hispanic and some  
23 communities, not so much here, but in other places.  
24 There's still huge gaps of experience and who gets  
25 into a magnet program, school of choice, and who

1 doesn't, and college readiness, it's still -- we  
2 still have significant issues. And with that in this  
3 country, and in our community too -- and so I think  
4 educational experience makes a huge difference.

5 I can say education made a difference in my  
6 life, right, because neither one of my -- my father  
7 didn't even graduate high school, he never -- he grew  
8 up in Georgia in the forties. Every opportunity he  
9 could have had, it was stolen from him. But for me  
10 to have had somewhat better experiences than him, put  
11 me in another -- on another level that, you know, it  
12 just wouldn't have happened. But we still too many  
13 that are not able to access just basic education,  
14 starting from kindergarten, forget college, can't get  
15 to college if you don't have the readiness, you know,  
16 way before, so.

17 MS. BUCHANAN: Exactly. That was one of the  
18 initial focus areas, was to think about what equity  
19 looks like in practice. And I also think to your  
20 point, Tiombe, in context of the experiences and some  
21 of the other factors that come into play, I think  
22 there's a couple folks that don't have their videos  
23 on, but I'm just looking through the participant list  
24 to make sure we can hear from you. I see Mindy is  
25 also here. Mindy, if you want to -- if you're able

1 to maybe chime in on which of the focus areas  
2 resonate with you.

3 MS. GRIMES-FESTGE: So I'm going to kind of  
4 piggyback on what Tiombe said. Because being an  
5 educator, I think education is extremely important  
6 and we know that students of color don't typically  
7 have the same educational experiences that students  
8 that are not of color have. So that's something  
9 that's important to me as an educator, but I also  
10 feel that the mental health, the depression, and  
11 meeting the basic needs is so very important because  
12 if we're not meeting their basic needs, when they go  
13 to school, they're not going to be ready to learn,  
14 they're not going to be prepared. We know that  
15 students that are hungry and students that are  
16 afraid, do not learn.

17 So to meet basic needs, that has to come first,  
18 to be able to get that educational experience. So  
19 everything is so tied together, but there's different  
20 tiers, there's different levels. So, you know, I'm  
21 going to agree with everybody when they were talking  
22 about basic needs, and healthcare, and all of that  
23 ties into education.

24 MS. BUCHANAN: Excellent. And I know, Monique,  
25 you put something in the chat, but I'd love, also,



1 for you to weigh in as well, about the focus area  
2 that -- maybe even the personal context, why does  
3 this focus area resonate beyond just the topic.

4 MS. JIMENEZ-HERRERA: Yes. So I'm an educator.  
5 And I had the opportunity to collaborate with not-  
6 for-profits in the transit field. For the first  
7 time, facilities psychology came together to look at  
8 the social deterrents of health and mental health and  
9 how not having appropriate access, transportation  
10 within our community in Miami, it was creating  
11 additional barriers to --within communities. So,  
12 food deserts, health deserts became their focus. And  
13 it wasn't just psychology or health professionals  
14 thinking about it, but it was engineers that work  
15 within not-for-profits to figure out what could be  
16 the next thing that Miami needs.

17 So communities that have been divided by  
18 highways can connect and can access the basic needs,  
19 which are food, you know, be -- get into health care,  
20 the communities relations. And so I am now looking  
21 at it beyond my psychology training, but more  
22 understanding how working with fields that would  
23 focus on only transportation, are now being provided  
24 this information.

25 So I think -- thinking -- considering projects

1 and partners that typically wouldn't have to be  
2 funded by The Trust. As long as those services are  
3 to help those families and those children access  
4 education, access food, those basic needs.

5 MS. BUCHANAN: Thank you. You touched on an  
6 interesting point and I think we've talked a lot  
7 about what is our ecosystem of REDI impact look like,  
8 just to use a catchphrase, what does that look like,  
9 and I think that's what we're trying to get to with  
10 the action plan. One of the interesting things that  
11 I've been thinking about a lot is what makes up an  
12 ecosystem. We've talked about a lot of things but  
13 I'll share.

14 I realized at the minimum there are six P's --  
15 six P things that represent the ecosystem. So they  
16 require principals. So what are those guiding  
17 principles that everybody can get behind that really  
18 represent the vision and the why. Priorities, which  
19 is this whole process that we're finally at the tail  
20 end of. Priorities that can be implemented across  
21 the board. You can say these are the community  
22 priorities around the welfare of children and family  
23 and everybody can look to see where their  
24 organization measures up or is executing along those  
25 community priorities.

1           The idea of partnerships, as you just mentioned,  
2           healthy food is not just the job of service  
3           organizations, but, you know, I work with a developer  
4           that's putting freight farms, which is a startup that  
5           does hydroponic gardens in a freight that could be  
6           put on any property. If you've been to Overtown and  
7           saw hammit greens at Red Rooster, you know that the  
8           fresh greens that you eat at Red Rooster are grown  
9           right on site on the hydroponic freight. Very easy  
10          to put on any development, very easy. That's  
11          something that Reef Technologies is working on with  
12          those vacant lots, how do you create access to  
13          healthy food.

14                 And then also what we've talked about programs.  
15          What are the programs that actually, when aligned,  
16          when you're looking at the continuum, can begin to  
17          address the gaps in service delivery and the places  
18          where we see inequities creep up. And then we've  
19          talked a lot about platforms, The Children's Trust is  
20          a platform, advocacy is a platform. One of the  
21          things that we're going to use to actually advance  
22          REDIness.

23                 And then last but not least, the people. Who  
24          are we hearing from? That's the community listening.  
25          So this idea of the ecosystem being the connectivity

1 of all these, you know, six P components, I would  
2 say, is something we might want to think about as we  
3 put our plan of action into place.

4 I want to also hear from a couple of folks.  
5 Monique, I loved your point. Just to hear maybe two,  
6 three more people, around which focus area resonated  
7 with you, personally, and why. Let's see. Why don't  
8 we -- Pamela, you're right at the bottom of my  
9 screen, so why don't you jump in.

10 MS. HOLLINGSWORTH: Sure, I'd be happy to. I  
11 just actually put a comment in the chat box. Sitting  
12 with these focus areas, it's a lot, you know, it's  
13 been sitting with them for the last 15 minutes really  
14 speaks to very broad need. I mean, they're also  
15 different, even though there's also an  
16 intersectionality between them. I guess my main  
17 observation is that I find equity for funding being  
18 nested inside of these focus areas that are basically  
19 personal community based and yet funding drives the  
20 response to all of these focus areas.

21 And so, its perhaps an invitation to consider  
22 priorities, community based priorities. To consider  
23 current funding recipients. To be sure that current  
24 funding -- funded recipients are truly meeting the  
25 community based needs in the best way possible. Are

1 we funding the right entities? And I know there's  
2 always a tension between that, you know, especially  
3 given the perceived and actual challenges of many of  
4 these smaller based -- place based community  
5 entities, but at the same time, there's also an  
6 equally strong argument to be made that smaller  
7 agencies that understand the communities that they're  
8 serving. And perhaps a microcosmo the community that  
9 they're serving. That's just a challenge when you  
10 consider, you know, where your very precious dollars  
11 are being spent. So that's really my observation.

12 MS. BUCHANAN: That's a point and observation,  
13 and I think it's also reflected, interestingly  
14 enough, in the priorities. When we looked at those  
15 priority sections, there was a call to evaluate the  
16 performance and mechanisms of funding around some of  
17 the specific topics. So it may be in the next -- you  
18 know, in your next time together, you begin to think  
19 about what are those specific action statements that  
20 shape that benchmark of your ready plan. Let's hear  
21 from one more.

22 MS. GIMENEZ: I'd like to say something, Leigh-  
23 Ann, real quick. To piggyback on what Pam just said,  
24 and I totally believe, yes, the funding does make all  
25 the other one move in getting things done. But I

1       also think that we need to monitor how that funding  
2       is being used, so that we make sure that it is being  
3       used in the way that we feel it needs to be used, or  
4       that it really needs to be used to help impact  
5       whatever it is, if we're trying to impact the housing  
6       or homelessness of our family or providing food, how  
7       are we doing that. So I think, you know, in addition  
8       to the equity for funding, I would add to that focus  
9       area and monitoring the use of that funding that's  
10      being given.

11           MS. BUCHANAN: Yeah, Lourdes, you've raised a  
12      good point. And I think this is the concept, what  
13      are your KPIs, Key Performance Indicators for REDI.  
14      And maybe the way the existing funding is structured,  
15      there was this vision that we would achieve racial  
16      equity, diversity inclusion in the impact, but we  
17      know now that if we're not intentional about  
18      designing that end to each element of the process,  
19      after all of our conversations that we had last year,  
20      then there's no accountability and no assurance that  
21      it's going to actually happen.

22           We talked a lot about unintentional, you know,  
23      there's bias that exists, sometime we miss things,  
24      something we're not even thinking. We did that 'Why'  
25      exercise of all these deep levels of where these

1 systemic inequities and barriers impact. And so now  
2 that we're a little bit more aware, we've got our  
3 REDIness awareness has improved, then we can evaluate  
4 with fresh eyes, what are our KPIs, is the way the  
5 funding performance metrics stated in alignment with  
6 this vision for a ready organization.

7 I think, Dan, you may have been trying to jump  
8 in?

9 MR. BAGNER: Yeah, I was going to jump in just  
10 to -- to definitely echo to what Pam and Lourdes  
11 said, that I think the equity is critical to all  
12 these other areas. What I would add to that is, I  
13 think what we probably struggle at The Trust, is The  
14 Trust is an organization for all children and  
15 families in our community. But simultaneously, we  
16 know that all these focus areas that we're talking  
17 about, that I think resonate with most of us, that  
18 while our black and brown communities are  
19 disproportionately needing these services more, right.

20 And so I think we have to really consider that  
21 strongly when we're thinking about funding and we're  
22 thinking about prioritizing our funding. And I know  
23 it goes at odds with our vision statement of being  
24 "service for all children and families." I think we  
25 have to really think hard about that. In order to

1 truly create equity, we have to put our money where  
2 our mouth is, so to speak.

3 MS. BUCHANAN: And this idea, it's interesting,  
4 I was having a conversation about the distinction  
5 between equity and equality. And we often conflate  
6 those two concepts. So when you say "for all", the  
7 first thing that comes to someone's mind is quite  
8 often equality. Everybody's the same, but when we're  
9 talking about equity, that doesn't actually mean that  
10 everybody is the same because we have to recognize  
11 that for a lot of the reasons we discussed, the  
12 systemic barriers, we are starting the race from  
13 different starting points. We're not all -- the  
14 playing field has not yet been leveled. And so  
15 equity to Dan's point might mean, you know, a  
16 differential allocation of funding, resources, to  
17 level the playing field.

18 I used to run track and I know I've given you  
19 guys this example before, but when you run track, if  
20 you've ever seen track and field, the starting blocks  
21 are not all at the same place because in order to run  
22 a fair race, you have to be staggered. And that's  
23 when you run the full 400 meters or whatever it is.  
24 And so that's an important point, right, how do we  
25 achieve equity, which may not mean equality,



1 numerically, or quantitatively.

2 This is great. I love the personal context and  
3 thinking about the focus areas that the community has  
4 identified. And in the couple minutes we have left,  
5 I think the next question is, what's next, right.  
6 What is next for this process, for the Ad Hoc  
7 Committee. If we'll just go to the next slide, what  
8 I wanted us to think about is action steps.

9 So this is the art where I leave you in the very  
10 capable hands of Tiombe, of Ken, and all of the board  
11 members, really, to define your action plan, like, if  
12 the goal is a cultural shift within this organization  
13 and the ecosystem that it impacts, we got to put  
14 these steps into action. Recently, my organization  
15 just rebranded, so our name is Aire Ventures. People  
16 ask me, why Aire? And the way I explain it is, one,  
17 Aire, A-I-R-E, is an acronym for Access Inclusion and  
18 Racial Equity, so we never forget the lens through  
19 which we are doing ecosystem strategy and ecosystem  
20 building.

21 But the second reason why is simply that, you  
22 know, these things don't come out of fire and thin  
23 air. A REDI organization does not just happen like  
24 that. It requires intentional design, it requires  
25 just to think deeply about our KPIs, our data driven

1 outcomes, it requires us to think about what  
2 partnerships need to exist, what things do we need to  
3 adjust, because it doesn't act, unfortunately come  
4 naturally.

5 So the next step, and I'll just have you advance  
6 the slide, is when you all have a chance to  
7 reconvene, I just created this one, two, three, easy  
8 three step process for you to begin to think about  
9 what are our REDI priorities and how are we going to  
10 put them into action. And when Stephanie and I were  
11 talking about it, I said, let me also add a diagram  
12 for those of you that love math or love putting  
13 things together.

14 So step one, you're going to select the top REDI  
15 priorities, which we actually did when we last left  
16 and now you've got some collative priorities based  
17 off the community feedback. Step two, you want to  
18 identify the tactics or action steps that correspond  
19 with each priority. You're going to get a summary  
20 that actually shows some examples of action steps and  
21 tactics that were raised by the community and also  
22 that you all identified when we last came together  
23 and developed that priorities document.

24 Step three, this is the part we just kind of  
25 ended on, you want to define the accountability

1 metrics, or KPIs for each of those things. So what  
2 you'll end up with is, priority, plus tactic, plus  
3 KPIs, then you've got a little bit of a roadmap for  
4 action on each of the priorities. And often times  
5 when we talk about setting priorities, if they're not  
6 combined with the tactics or the how, as well as what  
7 you're going to measure, what are your key  
8 performance indicators, then we're setting ourselves  
9 up for failure because we haven't thought  
10 strategically from vision to implementation.

11 So this three step process will enable you, when  
12 you go to your board retreat, or the next time you  
13 convene, to begin very easily, put together strategic  
14 action plan for each of those priorities. And I say,  
15 the simpler the better. We're not talking about  
16 dissertations or paragraphs, we're really wanting to  
17 get to -- cut through the noise and get to the real  
18 heart of the matter. We're talking about health, it  
19 means mental health, physical, you know,  
20 opportunistic well-being, what are the tactics, maybe  
21 three tactics, and then we're going to measure each  
22 one of them. And that will allow the team and the  
23 staff side and partners and providers in the  
24 community to get real clarity around this is what we  
25 talk about when we say we want to be a REDI

1 organization both culturally and in practice.

2 So that is it. That is literally all I have for  
3 you. This is actually the end of my time with this  
4 group. It's been a real pleasure to walk through  
5 this. And I don't know if we identified any  
6 observers at the outset, because we haven't done this  
7 in a while, but we got five minutes left, I'd just  
8 love to hear from you in a very free for all manner,  
9 maybe what's the takeaway that you have from this  
10 entire process.

11 MS. HOFFMAN: Leigh-Ann, I'd just like to start  
12 by thanking you for your participation and guidance  
13 in this whole process, because I think this has been  
14 invaluable, having a facilitator like yourself. For  
15 the board as a whole, we will be going into a  
16 strategic planning session in a couple of weeks from  
17 now. Since the board will have just gotten a report  
18 from the committee and it won't necessarily have a  
19 digested list of priorities, I think there will be a  
20 discussion of this output.

21 We're talking with -- staff is working on the  
22 agenda and how to present. And I think that what's  
23 more important is that the board understand this  
24 feedback as well because it should inform us as we --  
25 in that strategic planning, talk about what the

1 priorities of The Trust are as we've done several  
2 times over the past strategic planning sessions. So  
3 I think this is very timely in tying up for us those  
4 priorities. I don't know that we'll be able to do  
5 the A plus B plus C in the board meeting context, but  
6 I think this is, again, very helpful, and I thank you  
7 for your participation and guidance in this.

8 MS. BUCHANAN: Thank you. Thank you. Other  
9 takeaways from the process?

10 MS. KENDRICK-DUNN: I'll just mention, real  
11 quickly, that as far as the takeaway for me, is  
12 probably a very humbling experience, but also a very  
13 emotional experience at the same level. I'm very  
14 grateful to the staff and to all of the board members  
15 that made the decision to either be on the committee  
16 and also to participate in conversations and to help  
17 us get to where we are today.

18 Leigh-Ann, you're amazing, very talented.  
19 Stephanie and Jim, I just want to thank both of you  
20 for your support because I know that behind the  
21 scenes, that both of you have to meet with staff and  
22 you have to do a lot of things to move this, that the  
23 board members don't see. And so my hope is for the  
24 children and families that reside in Miami-Dade  
25 County, that this is going to be something that is

1 going to benefit them, not just now, but for  
2 generations to follow. And that's the feedback that  
3 I have.

4 MS. BUCHANAN: Excellent. I think we have time  
5 to hear from one more person before we close out. If  
6 anybody has any general points of takeaway before we  
7 adjourn.

8 MS. SYLVESTRE: Can I just do one update? So I  
9 believe in January we talked about we're applying for  
10 the Kellog Foundation Racial Equity 2030 grant.  
11 Since then we've made great strides. We're -- I  
12 believe we're going to have the first version of the  
13 grant tomorrow for us to review. But I think even  
14 more exciting about this is our team is around  
15 addressing racial inequities in grant making while  
16 raising antiracist children. And we have over 10  
17 other funders who have joined in with us to be part  
18 of this effort. So we have the ELC that's partnering  
19 with us and is helping to write -- and all of their  
20 time and energy is going to be covered by the ELC, so  
21 we're going to be able to write the grant and also  
22 talk about the monetary equivalent of what the ELC is  
23 going to be providing for us.

24 And then we have the county, the Miami  
25 Foundation United Way Woman's Fund, Allegany

1 Ministries, Key Biscayne Community Foundation,  
2 Freduluca Foundation, and Help Foundation of South  
3 Florida has all signed on. And Thriving Minds has  
4 signed on as our mental health and behavioral health  
5 supports, so that if we, during this process, the  
6 staff of either organizations experience duress, they  
7 are able to get services if they have -- if they  
8 don't have the ability to pay or they have a low  
9 resource to be able to pay.

10 So, I just wanted everybody to be able to know  
11 that this is morphed into a really exciting community  
12 activity and whether or not we get the grant, the  
13 other funders have asked that we form an affinity  
14 group and stay in touch with what we're doing with  
15 racial equity in the communities so that there is an  
16 alignment. So very, very excited and much  
17 appreciated and humbled by all your support and  
18 partnership over the last six months. So, thank you.

19 MS. LEICHTER: Thank you, Leigh-Ann.

20 MS. KENDRICK-DUNN: Should I ask if there are  
21 any other comments, or is it appropriate for me to  
22 ask the committee for permission to adjourn? Okay.  
23 Stephanie, it's okay for me to ask --

24 MR. HAJ: Yes.

25 MS. KENDRICK-DUNN: Okay. So I just want to say

1       thank you all for your participation and being able  
2       to meet today.  Sorry, I'm at work, so that's where  
3       you see me at, but I had to be here.  So I make a  
4       motion to adjourn.

5               MR. HOFFMAN:  Second.

6               MS. KENDRICK-DUNN:  Okay, thank you.  So I hope  
7       that all of you have a wonderful rest of the week.  
8       Goodbye.

9               (Whereupon, at 5:00 p.m., the meeting was  
10      adjourned.)

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Signed this 15th day of April 2021.



Christy Caldera, Transcriptionist