Partnership for a Healthy Durham Quarterly meeting

Wednesday, May 6, 2026
12 – 1:30 pm, Stanford L. Warren Library

Minutes

Topic	Discussion Points	Action Item(s)
Welcome *Shelisa Howard-Matinez*	Shelisa Howard-Martinez welcomed those attending the Quarterly Partnership meeting.	
Lunch and Line Dancing *Saladelia* *Javonna Rozario, Durham County Department of Public Health*	Those in attendance enjoyed lunch provided by Saladelia. Many participants also joined in line dancing led by Javonna Rozario from the Durham County Department of Public Health.	
Changing Systems Through Approachable Advocacy *Zack King, Managing Director, DellaRe Consulting*	Zack King is the Partnership's Healthy People Healthy Carolina's grant coach. **Advocacy: Excitement or Opportunity? Barriers or Concerns?** • Many older adults have no resources, making it difficult to determine how to prioritize needs. Some feel discouraged because advocacy does not always seem effective, but continued effort is essential. • Youth are experiencing significant challenges, and ongoing advocacy on their behalf is critical. • We advocate using data, but our hands are tied with certain framing limitations. • Lack of funding is a major barrier for advocacy groups, including DINE.	

	Policy and Advocacy • "Policy change can let us shift resources and larger structural pieces of the puzzle." • Language matters. • Implementors hold advocacy power; understanding what is and isn't working is key. • Policy defines what we are trying to change; advocacy describes how we get there. Both require extensive coordination. • Understanding systems is essential for effective advocacy. • Example: Providing real-time translation for council meetings to support Spanish-speaking immigrant residents. **Building Understanding** • Education is a form of advocacy. For example, explaining your work clearly to people with different backgrounds or experiences. • "Governing by reels." • Combining data with personal stories is crucial. • Teams should use their collective expertise. • Lean on colleagues and people with lived experience. **Relationships and Power** • Are we giving people the tools they need to do their work effectively? • "Power – she's messy." • Coalitions may need to discuss power dynamics within institutions more openly. • Subgroups and committees examining gaps should ensure this perspective is	

	part of the conversation. • Community engagement leads to relationships, which lead to organizing. • Who you talk to—and how you talk to them—matters. • Power is contextual. For example, someone may feel they lack institutional power, but in their home or community environment, power may look very different. **Messaging and Narratives** • People may disagree on one issue and dismiss someone entirely, even if they share other points of agreement. • Change the way people think—good luck! • Narratives reflect deeply rooted themes, values, and beliefs. They can be addressed, but it takes time and intention. • Advocate using data, but data alone won't change minds when two people both believe they are right. What matters is keeping the door open for ongoing, meaningful discussion. • People learn more when they don't feel attacked or shamed. **Framing and Data** • Explore framing through values, data, tone, and messenger. • When something is said in a "yucky" way, it can derail collaboration. • Example: Are we "feeding people," or are we "providing access to food"? • Example: Kelly spoke with BCBS about the Eating in Durham initiative, and BCBS asked questions recognizing her role as a health leader. • Cherise shared an example from her anti–human trafficking work: She organized a panel in which all the speakers were initially white women, even though social workers doing this work were primarily Black or brown women.	

	Leadership redid the entire event to ensure better representation. • A good way to end a meeting is *not* to ask for something; otherwise, it may feel transactional. • Bootstrap philosophy: The idea that "if people just get it together, they'll be successful," when in reality success is shaped by systems, structures, and institutions. • Prevailing narrative: People who are unhoused experience personal failings. "I am where I am because I did something right." • Prevailing narrative: Confusion about why we support food pantries versus food banks, without realizing the food is sourced similarly. • Prevailing narrative: Restrictions on what SNAP benefits can be used for. People deserve autonomy to make their own decisions; this is ultimately a political choice. • "Well, that's the best thing we can do." We should dig deeper into the narrative behind that mindset. • Prevailing narrative: "People receiving support or aid (Welfare, SNAP) should be doing more and aren't contributing." • "Everybody needs help sometimes." Appealing to common experiences can counter narratives rooted in resource scarcity. • Example: Other countries provide universal healthcare, basic income, and education—viewed not as social services but as community goods. • We must be careful not to fall into false narratives; many are longstanding and deeply ingrained. • Not everyone can advocate due to work obligations or other social factors.	
Announcements		

Partnership for a Healthy Durham Quarterly meeting

I. **Announcements**
   - Email announcements to Bria Miller at briamiller@dconc.gov to share in a post meeting wrap-up

If you are not part of a committee, please consider joining one of the following. Contact Bria Miller at briamiller@dconc.gov or visit www.healthydurham.org for more information.

- **Access to Healthcare-** Increase access to medical and dental care for Durham County residents
- **Health and Housing-** Examine the relationship between housing and health
- **Mental Health-** Increase access to mental health services and public awareness of mental illness
- **Physical Activity, Nutrition, and Food Access-** Address risk factors such as food access and physical activity
- **Strategic Engagement for Action & Transformation-** Partners with health priority committees to uncover and address the root causes of health challenges in Durham County.

Mission: The Partnership for a Healthy Durham is committed to collaboratively improving the health and well-being of its community, and those who live in it.
Vision: All people of Durham have the opportunity and ability to enjoy safety and good physical, mental and social health.