



Elevating Our Work by

Building and Maintaining

Authentic Relationships

2021 MPHI ANNUAL REPORT



Advancing
Population Health
Through Public
Health Innovation
And Collaboration





A Message From Our CEO



Relationships are the fuel that propel us on our journey to equity and social justice. Authentic relationships honor our identities, listen to our ideas, and inspire our passions. At MPHI, authenticity is essential to how we address the pressing needs of public health. It is a formula that has brought us success and reinforced who we are individually and organizationally.

Renée Branch Canady, PhD, MPA
Chief Executive Officer, MPHI



Our **Commitment**

In 2021, we increased our organizational commitment to anti-oppressive actions, internally and externally. These actions were in response to the murder of Mr. George Floyd and other police-involved deaths of African Americans. We took a step of solidarity with our staff of color, the MPHI Board, and our CEO publicly stating the outrage, pain, and collective commitment to address systemic issues.



We have remained steadfast in our commitment to fostering a professional community rooted in anti-oppression. Anti-oppression, like anti-racism, is moving beyond simply being against oppression to being active, accountable agents who work to dismantle oppression. The ultimate goal of becoming an anti-oppression organization is a demonstrated commitment to an ongoing journey of self-exploration and alignment with anti-oppression values in every aspect of our systems and culture. This year, we established the Anti-Oppression Leadership Team (AOLT), which includes 15 staff members from every leadership level in the Institute. The AOLT members participate in monthly facilitated sessions.



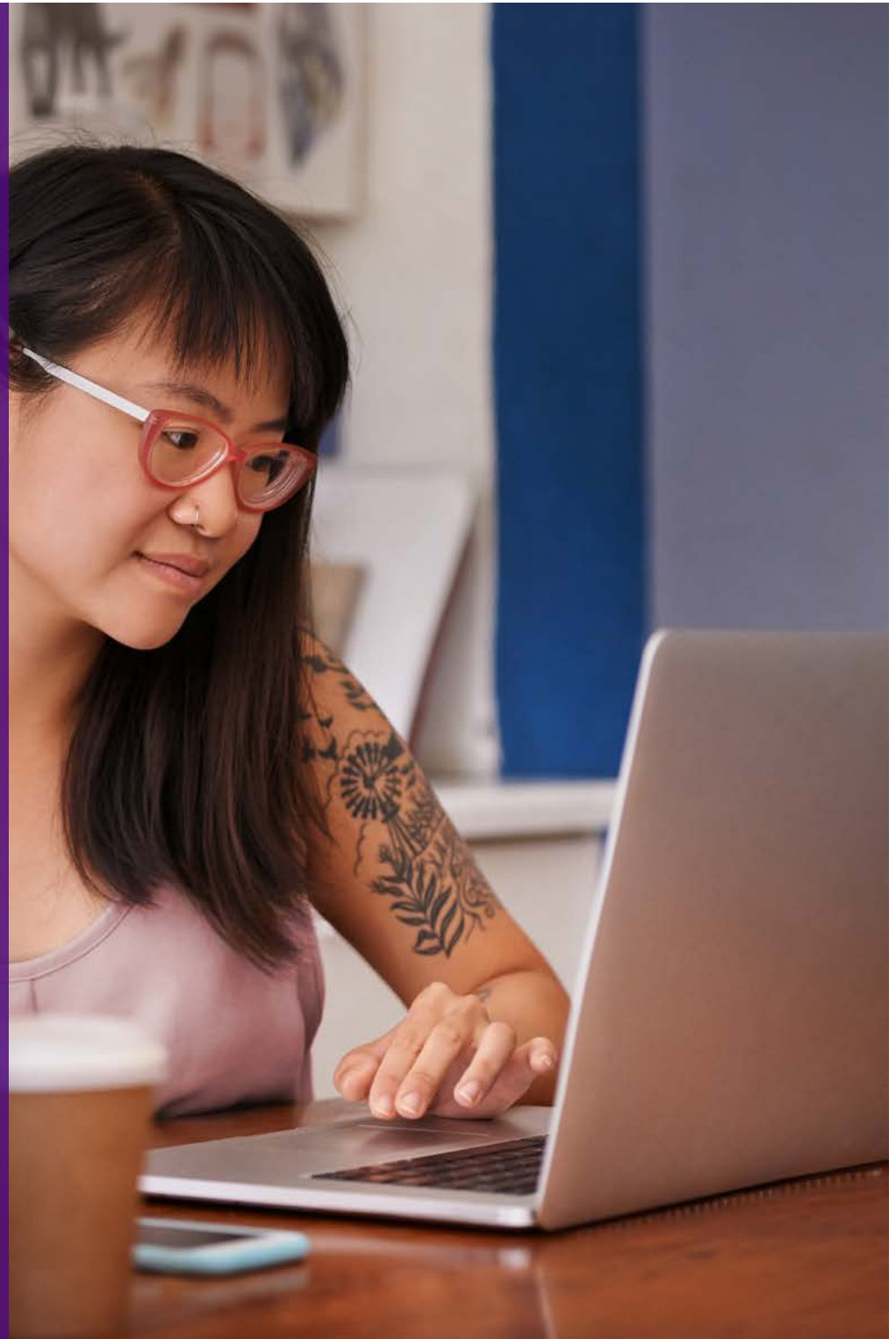
Aspiring to become anti-oppressive moves beyond our internal culture and helps us partner with both our employees and clients to acknowledge and challenge the inequities in our world while holding ourselves accountable to do more than “talk the talk.” Through this effort, we are equipping ourselves to become a more effective advocate in the work of actively dismantling oppression.

Transformational and sustainable change begins with an intentional effort to evolve as an institute and society. It requires culturally responsive radical inclusion of those most impacted by oppression within our organization. This effort is a necessary step to ensure that everyone has the opportunity to come to work as their authentic self and reach their full potential. We remain committed to this journey and the promising impact it holds.

—Mphi Staff



Project Work





The Following Project Highlights Are a Small Sample of the **Impact of Our Work**

In 2021, we saw time and time again that current health challenges require a public health approach. Everyone deserves the opportunity to lead their healthiest life. We bring our authentic selves to our job, using our experiences, identities, cultures, and knowledge to inform our actions.

Achieving Birth Equity through Systems Transformation Roadmaps for Birth Equity

Center for Health Communities (CHC)

The Achieving Birth Equity through Systems Transformation (ABEST) project sought to disrupt racial inequities in maternal and infant mortality. ABEST focuses on root causes, including the role of racism, and addressing relationships and power within systems. This project aimed to change how we talk about and act on maternal and infant health. Through a partnership with two communities and systems leaders from across Michigan, the ABEST project built capacity among state and local leaders to lead systems to change, and shift mental models and narratives through a series of birth equity workshops. The two community partners – Berrien County Raising Up Healthy Babies Task Force and Inter-Tribal Council of Michigan Asabike Coalition – worked with the ABEST team to develop Roadmaps for Birth Equity. These Roadmaps included specific, actionable strategies for transformative systems change to achieve birth equity. The Roadmap for Birth Equity in Berrien County is guided by a vision of building authentic connections that break down division and make community power to achieve progress toward birth equity. Inspired by

the core principles of Birth Detroit, the roadmap focuses on affirming that BIPOC are “leaders in our own care.” The Roadmap for Birth Equity developed by the Asabike Coalition is guided by a vision of systems change that supports whole-person birth experiences that hold tradition and culture at the center. The roadmap focuses on creating equitable options within existing systems by incorporating Indigenous cultural practices and belief systems to establish an elevated standard of care.

Key Impact:

The Inter-Tribal Council of Michigan Asabike Coalition and the Berrien County Health Department Raising Up Healthy Babies Taskforce have specific, actionable strategies for advancing birth equity in their communities. Both coalitions have used their Roadmaps for Birth Equity to engage key partners in the work and secure additional funding to implement the strategies.

Assessing Hospitals and Health Systems for Equity

Center for Social Enterprise (CSE)

This project is funded by the Michigan Health Endowment Fund (MHEF). It includes partnerships with the Michigan Health and Hospital Association (MHA) and the MSU Institute for Health Policy (IHP). The primary goal is to support two hospitals in their efforts to more effectively collect and utilize Race, Ethnicity, and Language (REAL) data, Sexual Orientation and Gender Identity (SOGI), and Social Determinants of Health (SDOH) data for improved quality and patient care.

Key Impact:

CSE solidified partnerships with key organizations (MHA, MSU IHP) and established new working relationships with two hospital partners (Spectrum Lakeland and Bronson Methodist). We collaborated with LGBTQIA+ subject matter experts/advocates to bring important information to hospital staff from folks with lived experience trying to get quality healthcare. This project also allowed us to engage in a cross-center partnership. We are now working with CHEP to develop SOGI-specific training for acute care providers that can be leveraged for future engagements. We also hosted the Michigan Health Equity Summit on November 3 and are planning for a second summit in 2022.

Extension for Community Healthcare Outcomes

Center for Strategic Health Partnerships (CSHP)

In 2021 the Center for Strategic Health Partnerships introduced the MPHI Precision Public Health (PPH) Extension for Community Healthcare Outcomes (ECHO) model. The cornerstone of ECHO programming is to build authentic relationships, democratize knowledge and embrace “all teach, all learn.” Project ECHO is a guided-practice model that reduces health disparities in underserved and remote areas of the state, nation, and world. The ECHO model uses a hub-and-spoke knowledge-sharing approach through innovative telementoring. Expert teams lead virtual groups, amplifying the capacity to deliver improved access, knowledge, and best practices in their communities. CSHP is funded through a Health Resources and Services Administration (HRSA) grant to implement the ECHO Hub. A partnership agreement has been finalized with the ECHO Project at the University of New Mexico Health Sciences Center, allowing CSHP-trained staff to replicate the ECHO model in its Center and projects. CSHP has fully trained ECHO facilitation, administration, evaluation, and IT staff to support the Institute’s ECHO projects and ensure model fidelity.

Key Impact:

The ECHO Hub at MPHI is built to meet the needs of our Center and projects. This model allows us to deliver telementoring, training, support, and growth opportunities within our projects and the communities we serve.

Brother-to-Brother

Detroit Health Initiatives (D-HI)

Black families disproportionately experience infant deaths due to unsafe sleep circumstances and environments. The role of Black fathers in preventing such tragedies is often overlooked and warrants considerable focus when seeking solutions to this problem. The implementation of the Brother-to-Brother initiative, funded by the Michigan Health Endowment Fund, began in June 2021 by identifying fathers to be trained as peer mentors to facilitate conversations on infant safe sleep at various community venues where men gather in Detroit. However, the team soon discovered the need to address other issues critical to fathers before engaging them in discussing the importance of regularly practicing the infant safe sleep guidelines. For this reason, the team felt it necessary to expand the scope of the Brother-to-Brother initiative to include more topics for peer-to-peer engagement, specifically for Black fathers.

Ten fatherhood educational forums were held to include the following topics:

- How to support women during pregnancy
- Co-parenting conflicts/re-branded “Bitter baby Mommas”
- Understanding women and their pregnancy pt. 1
- Infant/toddler first aid and CPR
- Work-Life Balance
- The importance of black mothers breastfeeding week
- Breaking every chain: My brother’s keeper
- Men and learning infant milestones

Key Impact:

This work aims to create educational materials that resonate with Black fathers and motivate them to work in partnership with the mothers of their children to adopt the infant safe sleep guidelines consistently.

Community Engagement and Collective Impact Project

Center for Data Management and Translational Research (CDMTR)

The Community Engagement and Collective Impact (CE-CI) project explores the practices and ideas that make community engagement work “authentic.” During the project’s first phase, CDMTR staff conducted an environmental scan of health equity-focused community engagement efforts in the United States. During phase 2, we will conduct interviews and focus groups with people participating in community engagement projects that are positively impacting health and well-being to learn from their work. During the project’s final phase, we will put all of the lessons we have learned in a final report. We hope that the final report will be helpful to people working in organizations and agencies committed to improving their community engagement practices and working toward health equity.

Key Impact:

The findings from the [phase 1 environmental scan \(http://bit.ly/48Sr4eC\)](http://bit.ly/48Sr4eC) can be applied to community engagement in Michigan across different areas and populations, including urban, rural, youth, Black, Indigenous, persons of color, and more. The report supports any person, group, or organization who wants to learn how to engage community members and key players in making communities healthy – from grassroots organizations to funders.

W.K. Kellogg Foundation HEAL Initiative Administration and Evaluation

Center for Culturally Responsive Engagement (CCRE)

CCRE launched a new partnership with the W.K. Kellogg Foundation (WKKF) as the grant administrator for HEAL, WKKF's racial healing initiative focused on racial healing grantmaking and capacity building. The CCRE is also the learning and evaluation partner for the HEAL Initiative. Using a culturally responsive engagement approach, the focus of our 2021 work has included co-design of the HEAL grantmaking strategy and supporting WKKF in identifying potential grantees. In addition, CCRE assisted the launch of the nation's first Racial Healing Certificate program at the Center on Community Philanthropy at the University of Arkansas, Clinton School for Public Service. We provided thought partnership on the certificate program design and planning in collaboration with our national partners. We also used a culturally responsive, participatory approach with our partners to develop a theory of change, logic model, evaluation work plan, and evaluation measures. CCRE also started the development of a racial healing tool for the field that offers a racial healing perspective on evaluation – specifically how the evaluation process can explicitly advance racial healing in communities that have historically been harmed by research and evaluation.

Key Impact:

By the end of 2021, members of the inaugural cohort of the Racial Healing Certification Program had participated in the first post-session evaluation survey. The partners used the survey findings to identify areas of progress/success and areas that required focus for continuous improvement efforts. CCRE also developed recommendations to guide the selection of grantees to be funded via the WKKF Racial Healing Initiative.



Institute **Year in Numbers**

The following numbers reflect the critical need to prioritize public health in every sector. We value the public transparency that these numbers provide, while informing data-driven decision-making.



915 Employees

Our Institute continues to grow, reaching nearly 1,000 employees last year.



92 Funders

Our funders include partners across academia, government, community organizations, and healthcare.



\$128M Project Funding

Our project funding remains strong, sustaining work that serves many communities.



250 Presentations Delivered

Our staff presented at conferences and other events to promote public health initiatives.



350 Professional Development

Our employees participated in over 300 trainings, workshops, conferences, and other learning opportunities.

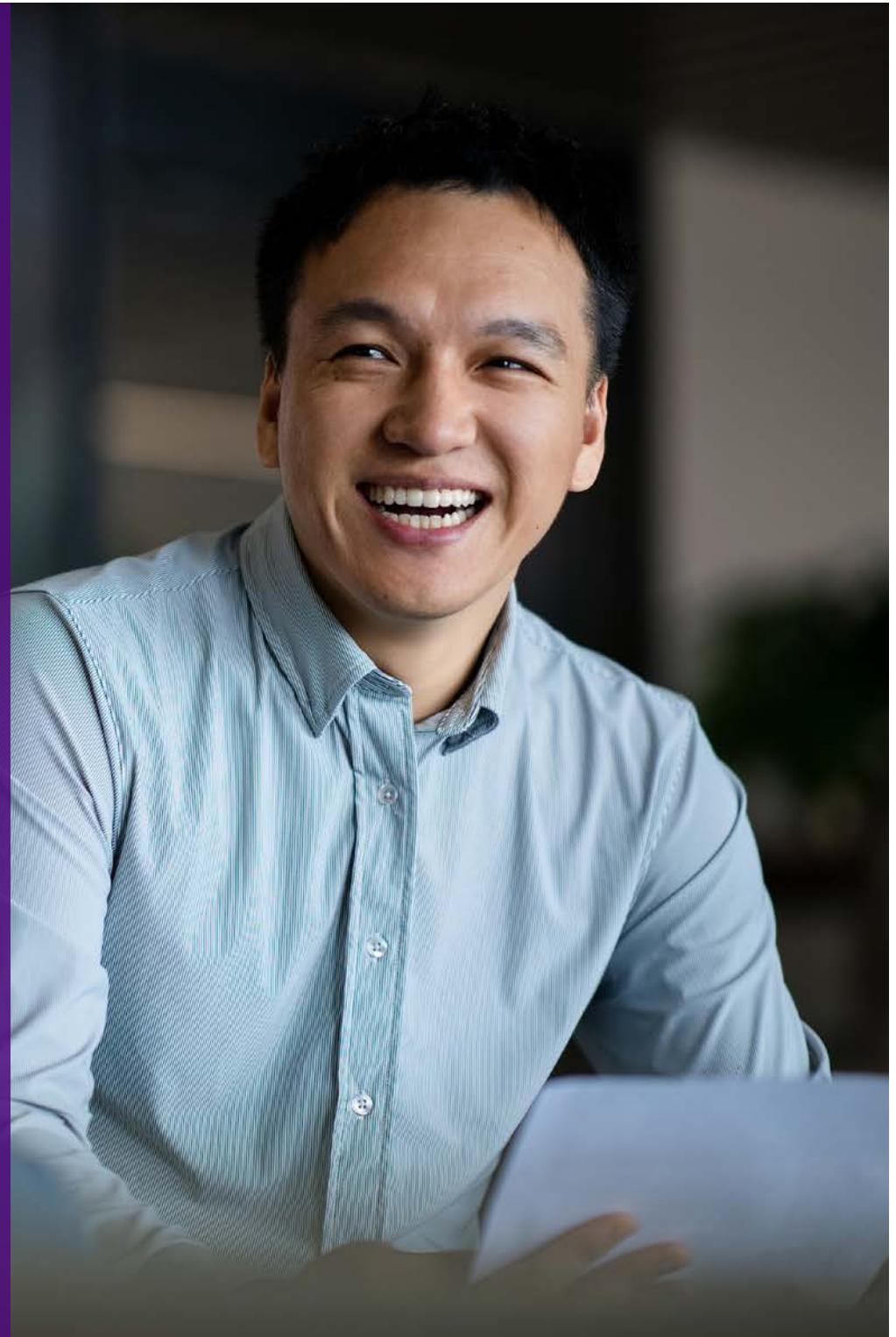


35 Publications

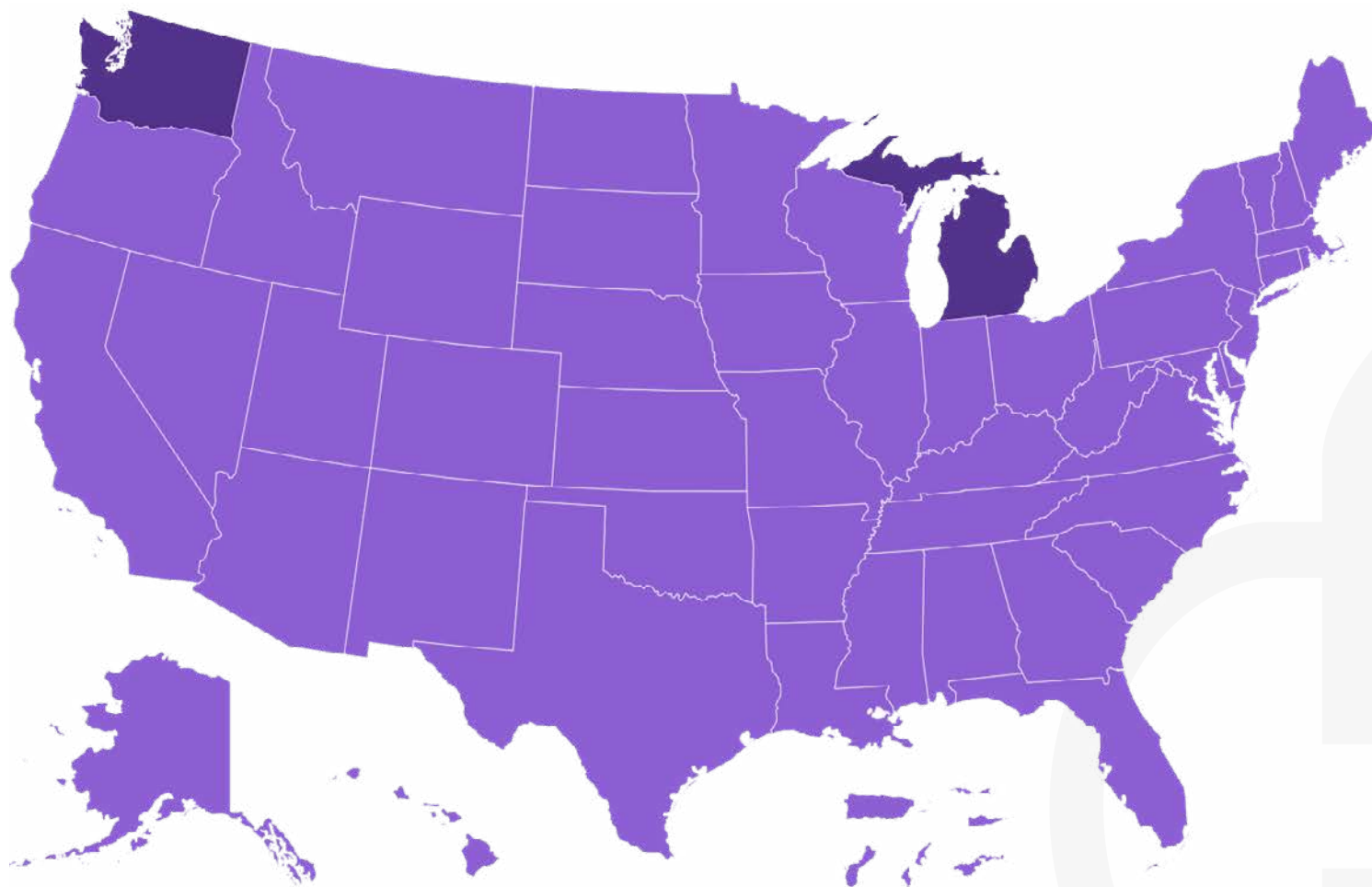
Our subject-matter experts shared their knowledge by publishing research, reports, and articles.



In 2021, Our Work
Had a National Reach



MPHI Is a Michigan-Based, **Nationally Engaged** Public Health Institute



- MPHI Offices
- MPHI Engaged

Map includes US Territories

US Territories



Leading the Way

Public health needs are constantly evolving, but some have lasted centuries. Collectively, we work with our staff and partners to evaluate and identify new resources required to create sustainable systemic change.

The Greater Detroit Area Health Council (GDAHC) Joins MPHI



The GDHAC joined our institute in 2021 to better connect our office in Lansing with the greater Detroit area. We welcome and value the over 75 years of experience GDAHC has served the greater Detroit area. GDHAC is now part of the newly formed Detroit Health Initiatives at MPHI.

Dr. Renée Branch Canady is Recognized as a Diversity Champion



Dr. Renée Branch Canady, CEO of MPHI, was selected as a Diversity Champion by *Corp! Magazine* for their Salute to Diversity Award. The award recognizes businesses, organizations, and leaders who champion diversity, equity, and inclusion initiatives and achievements within their organization or community.

Introducing the Center for Diversified Government Solutions (CDGS)



CDGS is led by Carmen Thomas, DTL, Chief Government Relations Officer of MPH. In 2021, Carmen restructured Affiliate Services (former name) to CDGS. This effort strengthened customer service and leveraged the team's skills to implement state and national initiatives to improve public health. CDGS specializes in identifying opportunities for partners to troubleshoot barriers, facilitating internal/external collaborations, financial, technical assistance, and recruitment and training.

Equity In Action (EIA) Workshop Series



MPHI piloted the EIA workshop series. The series is offered to public health professionals to learn how to apply health equity and social justice to their work. Health equity is a continuous practice maintained by monitoring, evaluating, and adopting new behaviors. This year we offered three different workshops: *ADJUST: Health Equity and Social Justice Workshop*, *Advancing Equity Through Quality Improvement*, and *Utilizing Culturally Responsive and Racially Equitable Evaluation*.



Thank You To Our Amazing Staff!

We work with fantastic people that have a tremendous dedication to public service. In 2021, we celebrated two employees who have worked at MPHI for 25 years.

Kirstan Jolin, Senior Education and Training Manager

Education and Communication Services (ECS)



Kirstan is the Senior Education and Training Manager for the Education and Training Team in ECS at MPH. During her 25-year tenure, Kirstan has accumulated a wealth of event planning experience and public health knowledge that supports the growth of her colleagues. She has tremendous historical knowledge about State of Michigan contracting, financial budgeting, risk mitigation, and monitoring. Kirstan is a Certified Meeting Planner and member of the Society of Government Meeting Planners (SGMP).

As the Senior Education and Training Program Manager, she provides contract monitoring, reviews all invoices, approves purchase order payables, conducts budget-monitoring analysis and reporting, and supervises event planners who provide onsite staffing. In addition to her administrative responsibilities, she is a leader, always supporting her staff with professional development and guidance.



I have been very fortunate to have my career with MPH. Throughout my tenure I have had the opportunity and support to grow as a professional and expand my skills and knowledge. That support is also the heart of my longevity at MPH. I feel that the people make the company and the relationships built have been an amazing benefit for me.

Heidi Hilliard, Senior Program Advisor

Center for Child and Family Health (CCFH)



Heidi received a Bachelor of Science in Psychology from Central Michigan University and a Master of Public Health from the University of Massachusetts, Amherst. Heidi is currently the Senior Project Coordinator for Michigan Child Death Review, Fetal Infant Mortality Review, and Medical Examiner System projects.

She is part of a national network of state Child Death Review coordinators and regularly participates in National Center for Fatality Review and Prevention initiatives.



MPHI's commitment to excellence and the high caliber of professionals who work here are two of the biggest reasons. Being surrounded by coworkers with a wide variety of skills and areas of expertise makes me even more motivated to bring my best to the work that I do.



2025 Walk/Run **Virtual 5k**

357 staff members, family, and friends, showed up to support MPHI at the annual walk/run virtual 5k.



Our Values Drive Our Work

Our theme for this annual report is authentic relationships and how living that value is essential to our work.

-  Authentic Relationships
-  Servant Leadership
-  Health equity & Social Justice
-  Quality & Excellence

We asked our staff how the core value of Authentic Relationships supports the success of their projects. [Here are a few of their stories.](#)

Authentic Community Engagement

Center for Data Management and Translational Research (CDMTR)



Authentic community engagement is the central theme of the Community Engagement and Collective Impact Project. One of our key findings shines a light on the many ways power dynamics need to be explicitly addressed in community engagement efforts with and from people directly impacted by inequities—including in the language that we use. To put this into effect, CDMTR’s team embraced plain language in our first report, to make the material we provided more accessible to everyone across the community-engagement spectrum. We look forward to continuing this approach as the project moves forward.

Building Relationships

Center for National Prevention Initiatives (CNPI)



As the pandemic wore on, CNPI quickly recognized that everyone - the review teams, our partners, and the public health workforce - was experiencing increased levels of stress and vicarious trauma. Even after the initial stay-home orders were lifted, the workforce faced new remote work requirements and the reassignment of key staff to support the COVID-19 response. Building on the relationships we had established with our teams, CNPI held regular “check-in” calls and virtual “listening” sessions to encourage attendees to engage with each other, provide support, do mutual problem solving, share successes, and promote self-care.

Learning and Collaboration

Center for Strategic Health Partnership (CSHP)



CSHP team members met with a group of PCORI Ambassadors from across the country for over a year to talk about how research teams could improve their relationship-building skills. The group tackled difficult issues, such as why populations that experience health disparities are often excluded from the research process. Participants have developed real relationships and learned from each other's perspectives. This collaboration resulted in a funded project that will train researchers on how to engage stakeholders who have historically been underrepresented in the research process.



Our **2021 Board**

Our board of directors are professionals in the academic, media, and governmental sectors who share our dedication to public service.



MPHI Board of Directors

Elizabeth Hertel, MBA

Bengt Arnetz, MD, PhD, MPH, MScEPI

James Giordano, MBA

Angulique Outlaw, PhD

Renée Branch Canady, PhD, MPA

Beverly Allen, CPA

Denise Anthony, PhD

Tim Becker, CPA

Debra Furr-Holden, PhD

Phillip Levy, MPH, MD

Sarah Mayberry, MPH

Phyllis Meadows, PhD, MSN

Laura Power, MD, MPH

Lewis Roubal, MSCJ

Lisa Stefanovsky, MEd