Speaker 1 ([00:19](#)):

The

Speaker 2 ([00:32](#)):

Welcome to Let's Examine This: Unpacking Young Male Health. Our podcast is sponsored by the Partnership for Male Youth. I'm Dennis Barbour, the Partnership's President. Our podcast series is designed to answer questions parents, coaches, caregivers, and others may have about the health of young males in their lives. In each episode, we'll explore a different health issue for which young males are at particularly high risk. Today, we are joined by Dr. Wizdom Powell and Dr. Rhonda Bryant, who will discuss this subject of boys of color. We will discuss a number of issues, including environmental inequity, its lasting impacts and what parents and others can do to address it. Dr. Powell is the director of the University of Connecticut Health Disparities Institute and Associate Professor of Psychiatry at University of Connecticut Health. She serves as the 2020 president of the American Psychological Association Society for the Study of Men and Masculinities, and is an Honorary Professor at the University of KwaZulu-Natal in Durban, South Africa. Her local national and international health research investigates the interplay between race related stress, social constructions of masculinity and black male health disparities.

Speaker 2 ([01:41](#)):

In addition to having been a White House fellow, she is an American Psychological Association, minority Robert Wood Johnson Foundation, Kaiser Permanente, Burch Leadership Institute of African American Research and Ford foundation fellow.

New Speaker ([01:55](#)):

Dr. Bryant is president CEO of the Moriah group. Her company helps foundations, government entities and policy advocacy organization, and uses a lens of racial equity to understand the complexities of various issues that impact children, youth, and their families. Currently, she serves as co-director of the Forward Promise initiative, a national program of the Robert Wood Johnson foundation that is focused on dehumanization, trauma and healing for boys and young men of color. In 2013, she was appointed as Senior Policy Analyst for the White House Initiative on Educational Excellence for African Americans. In this role, she provided leadership on early learning education issues and connected the White House to key researchers and stakeholders to improve outcomes for African American children. Welcome Dr. Bryant and Powell.

New Speaker ([02:41](#)):

Thank you for having us great to be here Dennis, thank you.

New Speaker ([02:46](#)):

Well, let's start off today with a threshold question and that is: what is environmental inequity and how prevalent is it among young males of color? Dr. Paul?

Speaker 3 ([02:56](#)):

Sure. Well, when I think about environmental inequities, I think about the full range of exposures, both social ones attributable to the built or physical environment, also the familial environment. And I think about the constellation of adversities that often present themselves in the lives of young men, boys of

color. To me, I think that we have failed to think fully about the range of those exposures and also what it takes for boys to overcome them. So environmental adversities can look like more heightened or prolonged exposure to racism, which is, and of itself a significant environmental contributor to poor health outcomes in this population. I also think about the fact that many of our boys and men of color are located in geographies or ecologies that are compromised by air pollutant exposures or poor or lower or limited access to high quality foods. So they live in food swamps and food deserts. And they're also navigating context where there's high violence, alcohol and other drug activity. Now this isn't the case for all boys and men of color, but a significant majority of our boys are navigating landscapes that are not therapeutic. And I think for that reason, attention to those factors is a key priority for anyone who's supposed to be fighting to move the needle on advancing health equity for this population.

Speaker 4 ([04:30](#)):

And, you know, we frame this very similarly to the ways that Dr. Powell talked about when we think about this work as a part of our Forward Promise project, we talk about how healthy villages and healthy village raising is central to ensuring that boys and young men of color are able to thrive. Healthy village raising really is that connection to environmental injustice that you're talking about. What do the communities that they live in look like? What are the services and activities and opportunities that are a part of that community that enable them to thrive. And then what are the limiters that prevent them from thriving and how are those limiters put in place because of racism and dehumanization that exist in the community? How are, is the narrative about who they are influence the decisions that are made about what opportunities can be made available in a community. And then what does that entire community landscape look like over the course of generations in terms of the ways that boys and young men of color are able to access opportunities and realize of the dreams that they have for themselves,

Speaker 2 ([05:45](#)):

How do you balance the issue of environmental inequality and seeking to have young males thrive? That is a strengths based approach? How do the two of them intersect?

Speaker 3 ([05:58](#)):

I think that, you know, first of all, we often start this conversation thinking about the problems that boys and men of color have to navigate. And I think that that problem focused lens has limited our capacity to reimagine landscapes where boys and men of color can heal, grow and thrive. It is highly important for us to talk about the strengths and the assets because boys and men of color have tremendous potential to contribute to our economic vitality, our innovation in this nation. And so when we talk about reducing their exposure to negative environmental condition, this is not just about boys and men, it's about whole communities, a nation thriving and moving forward. And for that reason, starting with the why of why we're investing is because boys and men of color matter, they have tremendous strengths and assets that we should harness, not just for them, but for our entire nation. And I think starting there leads us to more of the kinds of interventions that are designed to meet boys and men of color, where they are both in their head space and their heart space.

Speaker 4 ([07:14](#)):

Absolutely. Because when we begin to think about these environmental injustices as structural, then there really isn't a dichotomy between environmental injustices and young men, thriving young men, thriving is the goal, but the reasons that they are not thriving are structural. And when we accept that and stop blaming them on an individual basis for inability to thrive, then we can really begin to have a

meaningful conversation about what are the things in our systems that we need to fix in order to clear the past for them to have opportunities to thrive.

New Speaker ([07:51](#)):

How do you get your arms around that?

New Speaker ([07:54](#)):

We have to, first of all, stop relying on methodology and approaches that don't serve this wicked problem. Addressing these issues requires sort of multi-level multidimensional cross-sectoral approach. You know, you think who do you need at that table? You need urban planners, right? You need policy wonks people who can translate the evidence that we accumulate in the scientific community into reasonable action. And you also need to be thinking about approaches that allow us to address the whole person, the challenges that we are relying on. Unidimensional methodologies that don't fit the problem. And we're not harnessing all of the creative ways that we might be able to solve this problem. So we address at the health disparities Institute, much of the work that I do outside of the institution, we address issues of environmental adversity using art, right?

Speaker 3 ([08:53](#)):

We have a arts and health equity initiative because we recognize principally that the chief challenge we have before us are those myths of complexity around this issue, right? The idea that we can't solve, this is just too big to solve and those limit our radical imagination so much so, and we don't even see the value of boys and men of color until they're dead. Everyone rallied around George Floyd when he was laying on the ground for those nine minutes and whatever seconds. And I'm sure before that navigating the streets of Minnesota, he was fairly invisibilized and that's the problem, right? So we need to be thinking beyond the usual approaches and think about what do communities do to heal? What are the ways that we, as a black brown and indigenous set of communities, how do we come to these problems and how do we solve them? We don't solve them in the ways that we traditionally put forward. We have a range of creative methodologies and that wisdom is on the ground. So the first thing we have to do is ground truth solutions and stop relying on folks who are so far removed from the problem. They can't see the forest for the trees.

Speaker 4 ([10:01](#)):

I'm so glad you raised that example because that is so much of the grounding that we talk about also in Forward Promise, there are three things that we really need to be doing to address this issue. We have to be addressing the narrative, have to be creating safe spaces for our boys and young men to heal from all of the trauma that is connected to inequity. And we have to be tackling the systems at the same time. And that work around using art, using storytelling is the healing work that has to happen in community that even prepares us. It's the groundwork that happens to create the opportunities for systems reform to occur. You know, when we talk about the healing work that happens for young people in direct service, it is those cultural and indigenous forms of healing practices that are so essential to them.

Speaker 4 ([10:59](#)):

Being able to return to themselves in the face of a society that tells them that they're nothing, but their people wanna wrap their arms around them and tell them that you're everything. So that work has to be happening at the same time that we're telling systems, you can no longer dehumanize young people. So the ways that you have structured your discipline policies to kick kids out of school, the ways that you've

structured your justice policies, to keep them behind bars, the ways that you've structured your child welfare policies that pull them away from their families and pull them away from even their kin, all of those are things that have done such extreme damage. And they're rooted in a mindset that people of color are unworthy. So tackling that while you tackle the healing work indirect service and addressing the narrative that the entire community uses to talk about people of color, that simultaneous work is the only way that we'll get to healing for a whole community.

Speaker 3 ():

Amen to that. <laugh> I mean, I feel like a sermon has been spoken. I mean, there's so much richness in what you've just shared. And I think that it happens to black boys, brown boys, indigenous boys, and men of color is that they experience a level of what we call epistemic violence as a result of racism and other forms of structural inequities and epistemic violence has this peculiar way of fragmenting, the self, the making it such that you don't even know who you are, right? So boys and men of color are becoming in a context that doesn't even see their humanity and you don't solve a problem creatively for a community or population that you don't radically love. And so that's the missing ingredient. I'm about like, love. I think we can do that, right? And I think we can create systems that radically heal and that are rooted in agape love for these young men and boys of color.

Speaker 2 ():

How do you engage young men in this process?

Speaker 4 ():

So it starts with trust, with building trust. And you know, when we talk about youth development theory, that whole notion of trust and connection is a part of that, right? But when you take it down to the granular level of looking at boys and young men of color, you have to understand that there's been so much harm inflicted, that there is more work that has to happen to create trust. So what we have found is that organizations led by people of color who share the same lived experiences of these young men are the best suited to build those spaces of trust and the best suited to think about healing modalities that actually resonate with them subconsciously. So the ways that we begin to approach healing with young people look like the ways that our grandparents and our great grandparents and our great, great grandparents created healing modalities.

Speaker 4 ():

So whether it is the circle or whether it is the sweat lodge, whatever examples that we use, these are culturally rooted, examples of healing practice that create trust and brotherhood and sincere caring. And what you begin to see is that young people open up, they begin to tell their stories. They begin to talk freely about the injustices that they are experiencing. A fire is ignited in them to want to do something about the injustice. And so they want to engage in activism. They have a new level of empathy for their friends and the people in the community that they live in and they see their community through new eyes. And then they rise up to become the next set of leaders that are gonna tackle these problems. But it all begins with trust and connection.

Speaker 3 ():

I so agree with that because I think that a lot of times we forget at that our boys and men of color are doing healing work. Momentously like to be a black male, a brown male, an indigenous male, a non-binary male in this context is an extraordinarily difficult thing to do. It requires a reservoir of not just

resilience. I really think we overuse that term, but this reservoir of self worth and value that keeps them coming back. Imagine what it's like to navigate a context every day, where you are variably invisible, but hyper-visible at the same time. And our boys are straddling that fence. Our males are straddling that fence every day. So I think that sometimes we think we need do something more. What we need to do is actually observe, listen with a third ear to what boys and men of color are telling us about what they actually need.

Speaker 3 ([16:01](#)):

When I started this work back in the late 1990s, I was going into barbershops along with a group of other folks who were in my circle at a time when we weren't doing barbershop work, it was not popular yet. We didn't have the, you know, American Medical Association writing about these <laugh>, you know, modalities or approaches in their major scientific journals. But that is the truth today. But back then, it was really about going into those spaces. First of all, my mother used to say something like, you know, if you wanna enter a situation, enter as a child, right? Enter as a learner, as a student, as opposed as a teacher. And so when I go into those spaces, I'm aware of my positionality one, I'm a black woman, right? One, I am a woman who, despite my humble upbringings is in a now and another socioeconomic strata.

Speaker 3 ([16:45](#)):

So I bring with me all of that stuff that needs to be put on the back burner so that I can hear clearly what boys and men of color are to telling us about their needs. I don't think that we recognize the true talent and capacity. Our boys have to tell us what they need and also to instruct us in the methodologies that would best reach them. We learned very early on in those barbershop studies, that what men wanted was a brave space, right? Us space, where they could show up, be themselves, talk to each other, you know, catch up, but really peer counsel, one another. I mean, I would be in the barbershop and I would just sit back and men would be talking about, yeah, man, you got your prostate checked. No I haven't gotten my prostate checked yet. Well, what are you waiting for? Like, you know, I wouldn't have to say anything. So I think that we need to do lot less talking and a whole, whole lot more listening. And I think that also applies to youth development organizations who are not led by people of color who are endeavoring to do this work in our communities. There's a lot more listening that needs to happen because the ways and the practices that are being employed are not as effective. And there's some learning that could happen from the models and the culturally responsive and so sensitive ways of entering into our communities and doing this work. And there's some lessons to be learned that organizations have to be humble enough to know that they need to absorb.

Speaker 2 ([18:21](#)):

How do you create these communities of trust where young men can feel comfortable and they can feel cherished?

Speaker 3 ([18:30](#)):

You know, one of the things that comes to mind for me, Dennis, is I'm gonna do a little heady academic thing. And I promise I'll get back to the real. I am always reminded that theorist Kramer, who's an organizational theorist who talks about theories of trust. And mistrust says that trust, thickens and thins with cumulative interact actions, trust is not imutable like mistrust is not imutable like we can do something about that. So when folks talk about mistrust as if it's like something we can't overcome, we can't. And in fact, in early research with black men, and barbers, we learned that black men who held

high mistrust of medical organizations were less likely to hold on to that trust, embody that is trust, if they actually had an experience, a reason experience with a provider that was patient centered, which are experiences or transactions rooted in respect, you know, spending enough time, you know, talking to people, meeting a man eye to eye those subtle things and messages to boys and men about their worthiness and whether or not they can trust the person on the other side.

Speaker 3 ([19:34](#)):

So, you know, something we've been saying in medicine is that we need to think less about how do we get black men and boys, or boys and men of color to trust and more about how do we build trustworthy systems, right? So first it starts with respecting the positionality of these young men and boys. I think that sometimes we can't hear their voices, cuz we're so busy talking over them. They come in and they say, I need this. And we say, Nope, you need that. And I can't say how frustrating that is to bear witness to so I can only imagine what it feels like to be in that position to finally brave, you know, the storms, if you will. And all the ridicule that comes with admitting that you're in emotional distress, you know, braving, you know, the possibility of losing your so-called man card to seek therapy, getting yourself ready for that, showing up at a clinic and having someone in that initial transaction demean you or showing up at that clinic and not seeing anyone who looks like you or reflects your values, that is a systems level failure. And that happens every single day. That's about building systems where transactions, those ones that thick and thin are more rooted in love, respect and caring than they are in those other forms of dehumanization.

Speaker 4 ([20:53](#)):

Absolutely. And it's across all of the different systems that our young men have to navigate every single day. You know, I always ask people think about what your end goal is for the interaction or the service that you're going to provide to this young person. And does every step along the way with their interaction with that system lead to that outcome or does it lessen the chance that that outcome will occur? You know, when we talk about juvenile justice, the end result is to be a young person who has learned a lesson and is able to get back on a path to achieving their dreams and thriving. That's not going to happen. If the experience with the justice system means they're more likely to be incarcerated versus having a community based solution. They're more like to spend longer amounts of time incarcerated because of punitive punishments that happen within the system.

Speaker 4 ([21:55](#)):

They're more likely to be tried as adults rather than juveniles, without any regard to their developmental stage or age. All of those are things that are barriers to us getting to the end goal. So if we really focus on that end goal and we plan every unit of service leading up to that in a way that demonstrates that love and compassion and that desire to see them thrive, that Dr. Powell was talking about, we would approach all of our systems interactions differently with young people. And we would see the outcomes that were least looking for, but we have to deem them worthy. And we have to believe in our heart of hearts, that thriving is possible for them. And if you don't believe that, then you're not gonna change your practices.

Speaker 3 ([22:42](#)):

What are some of the barriers in the healthcare system?

New Speaker ([22:45](#)):

So there's a structural barrier to just general access that we have at really remedied, even with the really expansive healthcare legislation that occurred during the Obama administration, right? So we saw some increases, but then there are also things like time. One of the things that we did, you know, in North Carolina was we piloted a flip the clinic initiative where we started to offer primary care in the evenings and weekends recognizing that for men and boys, especially men who are taking care of families as women take care of families, providers don't take time off for themselves. They'll take a day off for their children to go take them to the doctor. But it's very hard sometimes to get folks who are oriented towards being the provider and the breadwinner to put, that role, you know, responsibility aside to get their cholesterol checked.

Speaker 3 ([23:35](#)):

Especially if there's no limb, you know, broken as my husband would say, there's nothing broken. You know, I don't need stitches so I can wait on that. So that watchful waiting piece is not just rooted in masculinity norms, which discourage health seeking. They're also rooted in the ways that we design health systems, health systems are designed in feminizing ways. Like you have to have a sort of orientation and navigate a health system. You have to, first of all, you have to make the appointment <laugh> then you have to follow up and make sure that you do everything after the appoint. And, you know, I don't think we've yet got to the point in our society where we're socializing boys early in the life course to take that kind of charge of their healthcare. Remember that girls get an introduction to health systems through reproductive needs, and unless boys are playing organized sports, they don't even get a physical for a long while. So we have to reorient the health system so that it is gendered and that it's equitable for boys and girls early in the life course. I do think if we did that, we socialized them early by creating well boy visits, for example, that we might even create a generation of men who are comfortable with seeking care and navigating a complex system.

New Speaker ([24:46](#)):
What has been the role of the pandemic in all of this?

Speaker 4 ([24:51](#)):
Oh, there's so many ways the research that was done, I believe it was by Mott showed that adolescence and particularly adolescence of color experienced significant issues with mental health there, the pandemic, and with very little resources to be able to support them the loss of freedoms. And at the same time, the inability to be connected to peers has just been detrimental to them. But in addition to the mental health pieces that they've been navigating, just being teenagers, they're all of the mental health piece around the economics of the pandemic. So our families of color are more likely. The parents are more likely to be unemployed during the pandemic and also more likely to be essential workers. They fit into those two buckets. And so our children are either living in households where their parents are unemployed. Food is scarce. They're not sure about homelessness. And they're so worried about their economic situation that they're unable to even function in academic spaces, or they are concerned about the fact that they have to care for the, because their parents are essential workers and never at home.

Speaker 4 ([26:11](#)):
And when they are at home, they're at greater risk for exposure. So all of that is creating a heavy mental load for our children of color, regardless of gender. In addition to that, we saw all of the issues around digital divide and young people, not access to devices to be able to be engaged in school. So children of

color were least likely to log to virtual learning. Many of them didn't have laptops at home, or if they had a laptop, it was shared among multiple children in the household. Cuz there was only one. They don't know how to use zoom, cuz it's not something that they're accustomed to. And there is no parent at home able and available to help them to log in older siblings are helping younger siblings to log in and older siblings are falling by the wayside in terms of their academic.

Speaker 4 ([27:03](#)):

So we saw all of that and we saw the heightened hunger among our families of color. We saw heightened inability to pay bills over the course of any given seven day period. All of the data pointed to the fact that our families of color were the most fragile during this time and children feeling the weight of responsibility to help if they can. And just the weight of the frailty of their families and not knowing what the next day is going to bring and that mental load over the course of now, nearly two years has been devastating as elders sometimes who take for granted like what this is period will mean and is meaning for our children. And I, as someone who thinks, you know, every day about the emotional and psychological wellbeing of our boys, men of color am really frightened actually and alarmed by the shadow pandemic being produced around mental health or unmet mental health needs. And I think boys, because of all the reasons we know here, boys are less likely to tell people when they're in pain and when they tell them it's not usually with words, people misinterpret, they get misdirected into disciplinary, you know, action as opposed to therapeutic services. So we are creating right now this moment, a perfect storm and as Kwami Ipa tells us, this is what future generations iare going to condemn us for. They're gonna say, where were you? Didn't you know, we were in pain. I mean you were struggling to stay on zoom, right?

Speaker 3 ([28:34](#)):

And to stay focused during the pandemic as an adult, what do you think we were doing down here? We were also struggling. We have to really be thinking about the implications of COVID 19, not just, but the latent impacts of COVID 19 in this period,. Dennis, black males have lost already three years of life expectancy. I just want folks to let that sit in because those of us who have been labored in that vineyard know that it took us a long time for black men to get, even to the seventies, our life expectancy. And now we have lost that in less than a year.

Speaker 4 ([29:11](#)):

Yeah. And you know what I think about too, doc Powell is specifically the south in all of this. I think about that because we know that more than half of our black children live in Southern states. And I think about all of the ways that this pandemic has been politicized that has made living in the south more difficult during this time. And so all of the things around masking or unmasking vaccine or UN not vaccinated have made families more fragile in Southern spaces while at the same time. So much of the racial unrest has been happening in Southern spaces and children feel like they're in a powder keg. And what are we going to do about that for that region of the nation specifically? Because they are digging out from years of all of the politics around an administration that riled up the south and then went into a pandemic and then went into all of this racial unrest. What are we going to do about that? How are we gonna focus our attention on that region? Because so much of the narrative has been about the ways that the south is slower than everybody else they're behind the eight ball, but it's not that it is about political leadership at the top that is made it difficult for the people in this region of our nation to effectively get the care and the support and the protections that they needed during this pandemic.

New Speaker ([30:51](#)):

Are there any other comments that either one of you might have that we haven't talked about?

Speaker 3 ([30:56](#)):

If I wanted to leave our listeners with something to think about, it would be that we have to be willing to confront the deep abiding empathy gap that we hold either consciously or subconsciously for this population. We have to own that, that we have not really been capable as a nation to take perspective, to put ourselves in the shoes of, and to hear the needs, wishes, and desires of this population. It's in emitting that at a structural level, that in of itself could be healing for young men of color who walk through the world every day, wondering who cares about me? I think when we start with that recognition that we haven't done right by a population that deserves our attention, then we can begin to ask ourselves the other kinds of critical questions, like what has happened to this population? How can we course correct? What are the resources needed to mitigate this problem? And what can we do to galvanize the population? To me, that is what we need to be thinking about and owning in this moment, if we're gonna do something that's going to set our boys up for success. There is no fierce or urgency than that. In my opinion, in this moment,

Speaker 4 ([32:13](#)):

You know, I always tell people it's all about humanity. That is the starting point. It's humanity. And we can't talk about an American dream without talking about the humanity of every single person who lives here on this land. And if we are going to really commit ourselves to the lives of boys and young men in our country, we have to see them in their full humanity. And we have to commit ourselves to the work of ensuring that they feel loved and cherished and valued by the nation that they live in. And every policy decision that we make has to reflect that commitment to humanity. That is the starting point. If we begin there, we will see that our schools will be different. Our justice system will be different. Our workforce will be different. Our families will be different and our communities will be made home.

Speaker 1 ([33:19](#)):

I.