

Equity and Inclusion is Good Business

A discussion with Golin and the Greater Washington Board of Trade Members Ken Jenkins and Anita Jenkins

Diversity, Equity and Inclusion (DE&I) is a focus and ongoing discussion among members at the Greater Washington Board of Trade. While the region is one of the most diverse in the country, we have evidence that we are not reaching our potential. According to the Brookings Metro Monitor, over a ten-year period, 2009-2019, Greater Washington ranked 37th for overall economic growth and 51st for racial inclusion.

Here are perspectives of the Greater Washington Board of Trade leaders, Ken Jenkins, of NFP (the 5th largest privately held U.S. insurance agency) and former NFL Running Back (Philadelphia Eagles, Detroit Lions, & Washington Commanders), and Anita Jenkins, of Howard University Hospital/Adventist Healthcare. Their perspectives serve as actionable advice on resolving the disparity of equity and inclusion between the community, business and the economic and performance health of the region.



Anita Jenkins,
CEO, Howard University
Hospital/Adventist Health Care



Ken Jenkins,
Senior Advisor Corporate Services, NFP
Former NFL Running Back (Philadelphia
Eagles, Detroit Lions, & Washington
Commanders)

We've seen the data. According to projections by the U.S. Census Bureau, a majority of the U.S. population will be nonwhite by the year 2050. Diverse companies are more likely to see increases in profit and productivity and prove to be more innovative and more attractive to talent, especially Millennials and Gen Z. It's no wonder improving diversity, equity and inclusion outcomes for companies is an urgent and immediate priority for businesses of all sizes, particularly in these difficult economic times. The reality is that our region is underperforming by not including a potentially productive and contributing population.

Our Greater Washington Board of Trade members, Ken Jenkins and Anita Jenkins (no relation), graciously volunteered to offer some perspective and advice on some real-world experiences and perspectives that can guide thought and action for regional leadership. Here is what we learned:

**“Where representation does not exist, negative outcomes thrive.
We cannot improve if there is not representation.”**

Ken Jenkins witnessed this firsthand during the NFL Concussion Settlement litigation. The algorithm set up to distribute funds to players, identified Black players as starting life with less cognitive function than White players. Although Jenkins did not have a personal claim for compensation under the settlement, he and his wife, Dr. Amy Lewis, felt compelled to take on this fight on behalf of other players who were struggling.

Who would have thought that the NFL would have determined that men who sacrificed their bodies equally on Sundays, were somehow not considered equal when it came to cognitive function. For many, the idea these men were treated differently by the NFL is unthinkable. "I believe it was motivated by money. Seventy percent of the players who are eligible are Black. And if you compromise the largest subclass of the total class, you save an extraordinary amount of money."

Jenkins' advocacy ultimately led to additional compensation for hundreds of former Black players who were previously denied. Thousands more are now being retested and rescored using nondiscriminatory testing. But questions remain and lessons are still to be learned. The solution, although extremely difficult, was to bring all stakeholders to the table to ensure equity and transparency going forward. "Even when faced with a highly charged issue and a powerful adversary, there are ways to strategically level the playing field and find resolution -- representation," said Jenkins.

Anita Jenkins is keenly aware of how bias can cause unintended consequences as CEO of Howard University Hospital. In hospitals, the stakes are high and often urgent. One study concluded that 200 Black people a day would not die if the health of Blacks and Whites were equal. Even the Adventist Healthcare operated Howard University Hospital, which has the highest respect and regard among the Black community, faces challenges of inclusion and understanding every day.

"If someone trusts their healthcare provider, they're more than likely to get the care they need and follow the treatment." Yet care is still impacted by this legacy of a lack of representation. "For years healthcare research was done only on White males, and then implemented on women and other people expecting those outcomes would be the same. We die from heart attacks way more than men, even today. You can still find in medical books that Black people don't feel pain the way White people feel pain, which is ridiculous, and it affects the way pain medications are administered."

There are no easy answers to solving these problems, but DE&I best practices offer a roadmap for success. The first step on this path is to find out where you are in terms of representation and put some basic infrastructure in place to improve that representation.

Three actions companies can start right away and see positive impact in less than a year include:



1. CULTURAL AUDIT

Conduct a cultural audit of your organization to determine where you stand. An outside consultant is recommended to drive this discussion.



2. VALUES FRAMEWORK = RETURN ON INCLUSION

Develop a values framework, your Return on Inclusion, which outlines where and how inclusion activities can impact your finances, culture, and operations.



3. INVESTMENT = REPRESENTATION

Invest resources that yield increased representation. Bring on a dedicated DE&I leader and give them resources to build DE&I programs and activities and invest in partnerships.



WHOLE PERSON EQUITY MINDSET

Anita Jenkins noted, "Sometimes I believe that our businesses feel as though it's something that they can't get a hold of. It's a behemoth. We've got to put to bed that 'I'm this, and therefore you're not'. There are companies and businesses who think diversity is only Black and White people. First of all, they start there, and that's OK, but it's not just race. Human beings come in all kinds. Equity is not just men and women. It's age, its obesity, it's will-care, it's sexual orientation. Education is a very, very good start. For us to just learn, to be patient."

This is referred to as a "whole person" mindset, to think of employees in a non-linear way - rather than seeing the workforce just as employees.

When they are showing up to work, they are bringing their lived realities with them. They are mothers and fathers. They have a special needs child. They are caregivers of an elderly parent. They have an invisible disability like chronic pain or fatigue or learning or mental health differences. They are recent immigrants that may be far from their loved ones or sending money to their home country.

Representation reaps real benefits for your workforce, your customers, and your bottom line. "The intended outcome is for your people to feel supported so that they can be the best version of themselves when they show up at work. Now you have an engaged employee who really wants to sing your praises, and sees a future for themselves there," said Ken Jenkins.

In the coming months, there will be additional resources and materials from the Greater Washington Board of Trade as we continue the conversation on this priority topic. Some members are just starting to implement DE&I programs. Others have programs that could use a boost. Many members have been taking this issue on for some time. Regardless of where you are, we and our members are here to help. The key is to simply start.

