

[00:00:00] From the Mount Sinai Health System in New York City, this is Road to Resilience, a podcast about facing adversity. I'm your host Stephen Calabria, Mount Sinai's Director of Podcasting.

[00:00:12] On this episode, we welcome Sean Ginwright, Ph.D. Dr. Ginwright is a professor at Harvard Graduate School of Education. He's also the CEO for Flourish Agenda, a nonprofit consulting firm that works with youths of color, schools, youth-serving organizations, foundations, and local governments to build and implement strategies that allow young people to flourish.

[00:00:33] Dr. Ginwright's efforts have often focused on community resilience--the that underprivileged communities may heal from their traumatic pasts through empowerment and trauma-informed therapy.

[00:00:43] His research and work illustrate the degree to which our collective successes are intertwined, and the possibilities for success that continue to exist for society's most vulnerable. We're honored to welcome Dr. Sean Ginwright to the show.

[00:00:59] **Stephen Calabria:** Dr. Sean Genwright, welcome to Road to Resilience, sir.

[00:01:02] **Shawn Ginwright:** Glad to be here. Glad to be here, Stephen.

[00:01:05] **Stephen Calabria:** If you would, could you kick us off with a bit about your background?

[00:01:09] **Shawn Ginwright:** Well, I started my career really working with young people when I was in college at, at San Diego State.

[00:01:16] And, that was a, a million years ago, right? It was in the, it was in the, um, late eighties, early nineties. When I began working with young people and began to understand that what was happening in San Diego with Black You was new.

[00:01:33] We hadn't seen it before, but it was happening in many urban cities, and that is sort of the influx of crack cocaine and the violence that sort of came from that.

[00:01:41] Unfortunately, I lost a young man during that time. And, from then on, I think I've been fascinated with trying to understand what are the

constraints and barriers and challenges that young people face in their neighborhoods and their schools and their communities.

[00:01:55] And how can we actually support and transform not only the schools and communities, but the lives of young people. And so, I started an organization, I went and got a Ph. D. and really began to write and think about what I was seeing in neighborhoods.

[00:02:10] And so I moved up to the San Francisco Bay Area and Oakland, and those issues were probably tenfold. And then just begin to write about the distinctions that I saw, that, not the, well, the distinctions that I saw, but the issues that young people were forced to navigate that weren't really being theorized and weren't really being addressed.

[00:02:31] And so. I began to think and talk and write about those things in some of my work, because I was doing it in community. I was working with young people, um, and that sort of led me to where I am now.

[00:02:42] **Stephen Calabria:** So much of the American psyche seems geared toward the rugged individualist, the lone wolf go getter who fights the good fight basically all by themselves.

[00:02:53] Your work seems to take a different approach. One where communities are perhaps on par with self determination when it comes to individuals as outcomes. Would you say that's the case? And what is it about this uniquely American approach that that informs your work?

[00:03:11] **Shawn Ginwright:** Well, I mean, I think we've been trained both in the helping field, either if you're a physician or a doctor or therapist, a psychologist, a social worker.

[00:03:21] We've really been trained to think about supporting the disease of the individual that is, you know, an individual can come to you as a needing some therapy, come to you as a physician because they have some kind of ailment, and that you treat that ailment and while that medical model is important, it focuses on our response to the individual's issues.

[00:03:47] It is a myopic and oftentimes incorrect view of understanding the more collective experience that communities and neighborhoods are experiencing. And so when we think about urban neighborhoods that oftentimes are shaped by various forms of structural inequality, those those policies and

practices that create structural inequality have a damaging impact on the people, collective, the people in those neighborhoods and communities.

[00:04:19] Research shows that, for example, there's a significant relationship between exposure to poverty, long time exposure to poverty, and its impact on hopelessness, right there, that that we know from research that there was a significant relationship between poverty and violence.

[00:04:37] And so these things are connected and while we need to treat and respond to individuals, it's also important that we collectively respond to the ways in which young people are exposed to trauma in neighborhoods.

[00:04:55] **Stephen Calabria:** And to that point, in responding to that trauma, your work often focuses on the concept of healing centered engagement. Can you explain what that means and how it differs from a traditional trauma informed approach?

[00:05:08] **Shawn Ginwright:** Yeah, well, a few things. Healing centered engagement is a perspective, and it's a framework that we use to respond to exposure to trauma.

[00:05:17] And, you know, there's a couple of distinctions. The trauma informed approach generally has a medical model. It is responding to some, it sees the disease or it sees the issues at the individual level where healing center and engagement is as a collective response. It thinks about healing, not just responding to the individual, but groups of young people and families and neighborhoods.

[00:05:41] Second, trauma informed approach generally, responds to the sort of pathology that young people experience. They, the question is, is what happened to you?, and oftentimes that behavior or that psychological response, that trauma informed responses are, are trying to address things like depression, anxiety, suicidality, all of those things are important, but those are the deficits that young people and a healing centered approach.

[00:06:10] focuses on the assets. What are your hopes? What are your dreams? What do you, what do you imagine your life to look like? Right? And so we know from research that future goal orientation, that being able to see yourself in the possible future, being able to have pathways to a life that you possibly a life that you imagined that that contributes to a sense of wellbeing and sense of possibility and a sense of psychological stability.

[00:06:34] Third distinction is that In our trauma informed approaches that, you know, it looks at the, the treatment is through therapy, right? You, you, you sort of, you, you have an awareness and you use sort of therapist as the vehicle to provide the response to being harmed. We're healing centered engagement focuses on giving people themselves the tools.

[00:07:07] Opening up the possibility for healing so you don't have to go to a therapist, but that healing happens in community. It happens when you're on the bus. It happens when you have conversations with your barber. It happens when you're having conversations with your peers.

[00:07:20] And what we're trying to do is sort of normalize access to behavioral and mental health using a healing centered approach. Those are a few key distinctions.

[00:07:29] **Stephen Calabria:** Sure. How does this differ from the prescription put forward by a lot of people that, oh, people in these communities, especially marginalized ones, underserved ones, should just pull themselves up by their own bootstraps, and they should solve these problems with a measure of personal responsibility.

[00:07:49] It does seem like there is an element of personal responsibility here, but, uh, as far as your work goes, but it seems like there is a far more hands on approach.

[00:07:59] **Shawn Ginwright:** Well, it's, you know, that, that approach further pathologizes people. It's it sort of says that the conditions of your communities, the conditions of your family is a result of something you didn't do.

[00:08:10] And that's just not correct. Right. We know that, as the saying goes, you say, pull me, pull us up by our bootstraps. Can you give me some boots? Right. And so, the playing field is when we talk about healing centered strategies, we have to first understand the structures, the policies, the practices that actually create inequality in the first place, right?

[00:08:31] So that we don't see harm as episodic, that somehow a young person experienced trauma because they saw a violent act. The violent act is a result of years of public policy that created poverty, that produced violence, that created that event.

[00:08:48] And, so the healing centered approach makes us come step back a bit, right, and not only focus on the symptom, which, which, which is what, what we oftentimes see, but the root cause and try to understand the root cause.

[00:09:00] **Stephen Calabria:** How does community resilience play a role in public health, especially in underserved communities where health inequities are rampant?

[00:09:09] **Shawn Ginwright:** Yeah, and I like, you know, you know, the term resilience is sort of tricky, right? Because it kind of slips into the, the, the idea that, again, kind of pull yourself up by your bootstraps.

[00:09:22] That is resilient. You can be resilient despite the conditions that you're under. A friend of mine said to me years ago, he said, resilience is like saying, if you have your foot on someone's neck, Resilience is sort of saying let's make their neck stronger, right?

[00:09:38] And so, you know, I like the time, I prefer the term community agency, right? Which is saying let's take, let's take your foot off my neck, right? And let's, let's not do that again. It's a sense of empowerment. And so I don't even know if I'm answering your question.

[00:09:53] So let me make sure I'm answering your question. So the concept of, so that's one, I like the, the term community agency. Which really speaks to the ways in which communities define their own sort of goals and a vision for themselves.

[00:10:09] It allows for communities to redefine and advocate for the kind of policies that they want in their neighborhoods and schools. It means that the communities are educated to understand the broader issues that are shaping their daily lives. It means that communities are building a sense of power because they're in relationship with one another and that relationship allows them to see their communities in different ways.

[00:10:33] **Stephen Calabria:** We've spoken about those health inequities. What are some key factors you think that contribute to those communities is health inequities and their greater inequities generally?

[00:10:45] **Shawn Ginwright:** Well, yeah, I used to be the chairman of the board for the California endowment and we've always sort of saw public health as a reason, as a function of lack of power.

[00:10:57] Right. And, you know, one public health lens says that. You know, we can treat communities that have exposure to lead, or we could treat communities that don't have clean drinking water, you know, that's one sort of public health, but the way that I see it is that the treatment is community power, right, by by empowering communities to see the kind of communities that they want to create.

[00:11:25] Allows them to actually respond to any kind of health outcomes or health disparities that they might see.

[00:11:33] **Stephen Calabria:** Let's talk about the cultural and historical contexts of community challenges. You wrote in your book, *Hope and Healing in Urban Education*, Violence and its root causes are not simply experienced as an individual phenomenon, but rather they represent collective experience shared by young people and their families.

[00:11:52] End quote. When these traumas are collective, as well as individual, what does that mean in terms of a given community's ability to achieve success?

[00:12:02] **Shawn Ginwright:** Yeah, it means that we have to, we have to shift our lens from how we respond to trauma. So I'm not suggesting that you, there should not be therapists, right?

[00:12:12] I'm not suggesting that. What I am suggesting is that we, is that the mental health crisis that we're facing, we're not going to be able to therapy our way out of it. In other words, we're not going to hire enough competent therapists. We're not going to. You know, there's all kind of challenges with that pipeline, right?

[00:12:31] So what I'm suggesting in that passage and in my work is that we have to open up and democratize access to behavioral and mental health. That means that we have to train unlikely people like bus drivers and barbers and beauty folks to be able to support the mental and behavioral health of young people.

[00:12:50] My vision is to have You know, in schools across this country, you Stephen, when you were in high school and elementary school, you probably went to P. E. Class physical education, right? It's just normal, but I bet you when you went to P. E. your friends didn't tease you and say, Ooh, what's wrong with Steve?

[00:13:10] He's going to P. E. In fact, P. E. was seen as a strength, right? You're actually getting healthier and stronger. My vision is to make mental health education the same way. Yeah. That it's just as common in schools as P is physical education.

[00:13:26] And that, by opening up the bandwidth that it doesn't require a therapist, but it requires peer support, it requires conversations that happen in a normal day, it requires a shift in our thinking as mental health as being a broken paradigm rather than a health paradigm.

[00:13:43] I don't know if I answered your question.

[00:13:44] **Stephen Calabria:** Oh, you absolutely answered the question. In fact, I would like to go down that rabbit hole a little further. You wrote in the book as well, African American males face major challenges to their psychological development and well being in a lot of these communities.

[00:13:58] Many frequently cope with racism and its associated stressors, including family stressors, educational stressors, and there are barriers to accessing quality mental health services in a lot of these communities, especially when it is compounded by a cycle of delinquency and the juvenile justice system being, let's say, imperfect.

[00:14:21] That's something you don't really hear a lot about in a lot of these communities. The mental health struggle. Could you talk a little bit more about that?

[00:14:28] **Shawn Ginwright:** The mental health struggle is, is so grossly under, under diagnosed in, in our communities, right?

[00:14:35] What's, and oftentimes it's under diagnosed because what we, the way we diagnose it instead of behavioral mental health is, Juvenile delinquency, crime, violence and fighting in schools. These simply, and so we're good at responding to the symptoms of kids getting in a fight in a school. If kids simply don't go to school, if kids are substance abusing, right.

[00:14:59] Kids engaged in various kinds of crime. We're really good at addressing and responding to that. But what we're not so good at is the underlying mental health conditions that are producing that, the stress. right? The anxiety, the uncertainty, the shame. You don't know how many young people I've talked to in my career that have deep shame because of their parents actually being, substance abused, right?

[00:15:27] And being teased at that. And so there's all of these challenges. that are underlying the kind of conditions that we do respond to in our cities. I would like to see cities divert significant resources in addressing the mental health and not see it as an afterthought, but actually as a core component of the restoration of a city and a neighborhood.

[00:15:49] And that's also goes for the, the adults in these communities and neighborhoods as well. It's not just, you know, It's just young people.

[00:15:56] **Stephen Calabria:** You also put forward a model for what you deemed to be radical healing, an acronym known as karma, C A R M A. Could you walk us through it?

[00:16:06] **Shawn Ginwright:** Man, you really read all my stuff, huh?

[00:16:08] **Stephen Calabria:** You got to, it's a great book.

[00:16:11] **Shawn Ginwright:** So radical healing came from work that I was engaged in in the San Francisco Bay Area, where at the time we were really focused on what a class of call youth development, right? How you develop young people into healthy adults and so forth. And we found that man, it's that.

[00:16:30] You know, young people are coming to us with all kinds of mental health challenges, and youth development doesn't really speak to that. And so the term radical healing really came from the idea that healthy development, in order to achieve healthy development, there has to be some healing and restoration of our behavior, of young people's behavioral mental health.

[00:16:52] And the term radical connotes or sort of speaks to the idea that collective power, that when young people come together in collective power, that contributes to a sense of well being, right? So working together, youth organizing, right?

[00:17:11] So we broke it down, and as I went back into the research, I actually stopped reading educational research for quite some time because it was just so, Stephen, it was just so dismal, right?

[00:17:21] It was, it was, Here's why, you know, we have, you know, I used to call it the PPP paradigm, that all the research fell in one of three P categories, the problems of black youth. The pathology of black youth or violence and, you know, and, and prevention of black youth from doing things. But there was nothing, there was nothing aspiring about it.

[00:17:43] And the work that I was doing, I saw young people, despite the fact that they came from, you know, low invested neighborhoods or what, you know, low wealth neighborhoods, they still And Could dance and have joy.

[00:17:56] They still love their mothers. They still had relationships with one another. They still were creative. I mean, this is how we had hip hop hip hop emerged out of of disinvestment, right? So how do we speak to that?

[00:18:10] And so I began to sort of try to articulate a framework. called karma, and it comes out of positive psychology by actually, Martin Seligman, who was the president of the American Psychological Association. So karma stands for culture, agency, relationships, meaning, and aspirations.

[00:18:32] Those principles are rooted in both positive psychology and ethnic studies and the sort of empirical research says that the presence of these things of identity through culture, a sense of agency, we call them transformative relationships rather than transactional relationships, a sense of meaning and purpose and deep and profound future goal orientation.

[00:18:55] I can see myself in the future that the presence of these five dimensions and young persons live in a classroom or in a school, create pathways to well being. And so we've been we've been training teachers and principals and school leaders on these principles so that we could begin to saturate young people with these with these with exposure to these to the karma principles.

[00:19:17] **Stephen Calabria:** Well, that leads to my next question is You are somewhat unique among academics and researchers in that you've actually put a lot of these things into practice, a lot of these ideas, you've actually done out there in the community.

[00:19:33] One inspiring case study in your work that incorporated these themes was the Young Men's Healing Circle. Could you tell us a little bit about it and how that project led to other similar ones?

[00:19:45] **Shawn Ginwright:** All my career I've been working with youth. We had summer camps and I had an opportunity to work with a group of about 15 young men in Oakland that all had various forms of mental health issues.

[00:19:55] And I was trained largely in trauma informed approaches. And so every Wednesday night. I would, go and we would work with these, I would

work with these young men and have them recount the worst thing that ever happened to them, right?

[00:20:10] And they would, you know, they would share and we, I was trying to get them to understand the relationship between their current behaviors and the experience of trauma, which is kind of what trauma informed approaches are trying to get folks to do.

[00:20:25] When one of the young men said, Hey, man, I like coming here, but I don't want to want to talk about the worst thing that ever happened to me all the time. I'm more than my trauma and it shifted the conversation with these young men.

[00:20:37] And it shifted me because I wasn't, I wasn't clearly aware that these young men wanted to be defined in ways that were not just from their exposure to trauma. And when we shifted the conversation and began to talk about their dreams and their hopes, and they went away from that meeting and came back with a different sense of possibility for their lives.

[00:21:02] And so it was that sort of group that I began to play with and sort of reframe the concept of healing center and engagement with some of my own practice and my own research, I think, practice, you always have to be engaged in practice to have meaningful research, right?

[00:21:19] These things have to talk to each other and it's probably why I admire folks in medicine so much because you're constantly practicing and also testing out theory.

[00:21:29] **Stephen Calabria:** Right. They have to work in tandem because otherwise you're just throwing your research into a vacuum. It was very touching actually the Passage about the young men's healing circle.

[00:21:39] They were talking about some of the young men were talking about how just day to day it is really difficult to focus on your aspirations and your dreams when you're just trying to find something to eat, you're trying to find some place to live, some place that you can feel safe.

[00:21:57] And so I imagine it is very difficult to shift that mindset when you've been in this almost. reptilian brain thinking for so long.

[00:22:07] **Shawn Ginwright:** Yeah. And I'm not suggesting, right. And when folks hear me share that story, I'm not suggesting that we abandon the urgency

of survival. We're not that we, that, that there are basic needs, like many of these young men didn't have a place to live.

[00:22:23] Right. And so, I write about the, the comment that these young men said, I'll never forget. He said, gee, you trying to get us to think five years out. I don't know where I'm gonna be in five hours. I don't know where I'm gonna sleep in five hours. You're talking about five years.

[00:22:37] It was a reality check, right? And so, you know, it's not one or the other, but both right that we have to attend to the crisis that's right before us that young people are experiencing, which is survival in many ways, and we have to create the conditions for them to see another way.

[00:22:58] And, this is why, in violence interruption, it's not just about interrupting violence. The cure violence model is also about trying to shift the mindset that produces violence. It's a public health strategy. But it's also sort of a mental health strategy, right?

[00:23:18] **Stephen Calabria:** You've discussed challenges to bridging social justice and healing in these communities whether among activists or other academics What does that pushback typically look like and how do you address it?

[00:23:30] **Shawn Ginwright:** Typically in my social justice circles and this is years ago. It's not so much now I think actually the concept of healing, to my pleasure, is much more centered in conversations now about social justice and social change.

[00:23:44] But in the beginning, social justice and activism was seen as completely, actions that get power that we build power and again, some of my work was saying that young people were going to organizing meetings, but they were hungry, or they would miss organizing meetings because they didn't have a place to live.

[00:24:09] And so secretly a lot of nonprofit organizations were saying, yeah, you know, organizing is good, but this thing that's happening to my young people, like they're not coming to the meeting sometimes because, they feel depressed and I don't know, that's weird.

[00:24:24] Right. And so, early on, we knew that there was a false dichotomy between behavioral health. And justice work, people that are working in justice work to this very day that are organizers talk about the stress.

[00:24:37] The stressors of being out on the front lines, the stressors of trying to build power, the stressors of trying to address policy and political issues.

[00:24:46] And so, now I think it's much more common that to, for folks to think about, like, we can't actually achieve our aims in justice, in the justice work, without attending to the behavioral and mental health needs that that are in our communities and I'll know, Stephen, I'm going to keep talking, man. So you got it, but

[00:25:10] **Stephen Calabria:** Go for it.

[00:25:10] **Shawn Ginwright:** So the reason I wrote the book, my latest book, *The Four Pivots*, was really to call attention to some of the deep challenges that we have in the justice movement.

[00:25:22] That we continue to make the same kinds of sort of leadership mistakes because of unhealed stuff we got. And so I talk about the power of us being able to reflect on our own lives, on our own insecurities, so the pivot from lens to mirror. So I say mirror work is a lot harder than lens work.

[00:25:45] I was trained in lens work, right? Which is to diagnose and analyze everything wrong about the community and the society. But lens, mirror work is a lot harder. Now I got to reflect on my life, my relationship with my own children, relationship I have with folks in my job.

[00:26:01] So mirror work. It's sometimes it's not oftentimes part and parcel of justice work. The other one is, pivot is the pivot from problem, you know, fixing to possibility thinking right to sort of begin to shift our work and justice. We have to fix problems, but that's only half of our mission.

[00:26:21] We also have to be able to see a possible future that does not yet exist. And if we don't see it, then we then oppression wins because all it does is all we are doing is sort of tinkering away at the very problems that we want to transform our relationships need to change.

[00:26:40] Transactional to transformative deep human centered relationships in our movements for justice. And then lastly, we have to shift from hustle to flow from out of this frenzied way of living and working and find a flow I actually talked about in the book.

[00:26:58] One of the greatest forms of inequality that we rarely talk about, we always talk about racial inequality, income inequality, gender inequality, but we

rarely talk about rest inequality, the inequality and the duration, the quality, the frequency of our rest.

[00:27:13] And I'm not just talking about sleep. I'm talking about leisure time, the ability for us to not have to think about work. All of these things are part of the domains of rest. And part of finding flow, I argue in this book, is that we have to recalibrate our relationship with time.

[00:27:32] And you know, when I wrote the, when I wrote this chapter, folks were saying, well, you know, are you saying we shouldn't be hustling, man? You know, cause my father hustled. He needed to work two jobs to put food on the table for me and my brother.

[00:27:45] So I'm not suggesting that you don't work. But the frenzy, this notion that I always have to have days that are full of meaningless tasks. That when, when our lives are full of that, we, we are unable then to achieve and commit our lives to something more meaningful towards justice.

[00:28:07] And that doesn't leave much time for reflection, for that mirror thinking. When your day, to your point, is so chock full of I have to go to this job, then I have to pick up the kids, then I have to cook, then I have to go to the second job.

[00:28:24] It doesn't leave you much time for thinking about the future or making future plans for betterment. It's very challenging to do that. I mean, I ask people to just do micro doses, right? It's like, what can you do?

[00:28:37] Get on a, you know, a diet, sort of a pivot diet where you actually just, you know, for five minutes a day, what might reflection look like on your way? If you're on the bus, how can you shift from thinking about a problem you're facing to what's possible, right?

[00:28:53] And so, you know, it's not like you just change, transform overnight, but these are practices that over time, we begin to shift ourselves, the organizations that we work in, and hopefully the movements that we're committed to.

[00:29:06] Creativity and joy, to that point, are central to much of your work. How do creative expressions, art, music, storytelling, serve as tools for building resilience in communities?

[00:29:21] You know, I got an opportunity to work with a large national arts organization years ago. And I'm like, why are you guys, why do you want me to come in here? I'm not an artist. Right. And they do so just fantastic, , art, art educators. Art is, is central to freedom.

[00:29:37] It's central to our ability, to express stuff that's on the inside without the censorship of the outside. And, you know, I was just talking to my, my graduate students just a couple of nights ago about, you know, we think about hip hop as an art form and hip hop as a form of therapy because it was a way that young, young people can express voice to the conditions that they were facing.

[00:30:09] It was a, it was a microphone to the world about here's what it like, here's what it's like to live in the Bronx and what, what, here's what it's like. And so, art has always played a central role of expression, without the censorship.

[00:30:22] It has played, played a central role in, in, in creativity and freedom. And, you know, part of what healing is. is being in touch with parts of ourselves that may feel unfamiliar and engaging in whatever art, you know, whatever art we choose.

[00:30:42] It's a way that we could explore ourselves without the censorship or without the the shame or without the kind of restrictions that sometimes come with the our academics or come with you know, other other kinds of activities we might engage in

[00:30:57] I forget who said it but art without art Total honesty is just propaganda. And I think that holds absolutely true. If you're not able to fully express yourself, then you're just kind of towing a party line and it becomes that much difficult, more difficult. I imagine to truly realize a bright and better future. Absolutely.

[00:31:18] **Stephen Calabria:** Absolutely. As we face an era of increasing social challenges, whether from pandemics, economic inequality and instability or climate change, what gives you hope about our ability to build resilient, thriving communities?

[00:31:35] **Shawn Ginwright:** What gives me hope is that, you know, I see, I try to see the humanity in, in everything, right. In all people. And I think we're at a point in this country, that if we don't have a national conversation, a

national movement to heal some of the divisions that are eroding away at our democracy, we have a, we have a big challenge in front of us.

[00:32:03] What keeps me hopeful is knowing that, the same issues that are facing someone in the Appalachian Mountains or east side of L. A., that, that, that there's a commonality, you know, that we, we fail to see, and that we use the terms, oh, they have more in common than we have in our differences, but we haven't acted on that, and so what keeps me hopeful is, When I see people talk across difference in my, my graduate school classes, when I see people have those conversations, what keeps me hopeful, there's nothing like a dose of, of, of being in the room with young people to make you hopeful, right?

[00:32:42] It's addictive. And so, this next generation, man, I just feel that, even with my kids, they see the world differently. They're not, you know, like my, my daughter, the other day, she said, dad, I'm, she's my daughter's 20. She's 22 down. I'm going to Mexico city next week.

[00:33:01] She lives in LA, Mexico city. So the way she, they see the world is that they just can, you know, I didn't have a passport until I was like in graduate school. Right. And so, I just think that they see the world differently. They have, they're, they're open to different kinds of change and just being, and listening and learning from young people makes me hopeful.

[00:33:24] **Stephen Calabria:** Outside of your immediate family members, is there a person who you find inspiring with whom you've worked.

[00:33:34] **Shawn Ginwright:** Wow, that's a great question. With whom I've worked with. Oh yeah, man. I can tell you right off the bat. I told you I was the chairman of the board for the large foundation in California, the California Endowment.

[00:33:46] And the CEO, Robert K. Ross was there for 24 years. I was, on that board for 10 years and, just learned, you know, what I really learned, about, I saw him transform from a sort of public health restricted kind of here's how you address public health issues in California, using philanthropy as a way to do it to a spiritual leader for justice.

[00:34:13] I saw it right. And his graceful, powerful leadership, his humility. his ability to see a future, his ability to kind of understand the value of communities.

[00:34:27] Even though he was, you know, the most powerful foundation in California, it's deeply inspiring and I'm deeply grateful for being able to work with him and Learned from him for such a long time. He just recently retired like literally seven days ago.

[00:34:42] **Stephen Calabria:** Last question. For listeners looking to cultivate resilience in their own lives and their own communities What's one key piece of advice you would offer?

[00:34:52] **Shawn Ginwright:** I would say first, you know start with yourself Right? Like, what is your own practice of well being? And, you know, sometimes, for example, when you go to bed at night, sometimes we just can't sleep, right?

[00:35:05] Have you ever thought about just taking a, you know, at the end of the day, take an inventory of your emotions, like what are the emotions you experienced before you go to bed? So just start with yourself, right?

[00:35:16] Start with your own sort of well being practice. The second thing I would say is, you know, find a small group of folks that are committed and interested in, building us, holding us accountable to your own well being. And well being doesn't mean you have to like, take up jogging or swimming.

[00:35:34] It means that you have a place to go to talk about what's on your heart, what's on your mind with people who can hold you right. That could be in your professional setting or your private setting. So I would say those two things are really important.

[00:35:45] Start with yourself and then find a small group of people that, that you could really begin having these conversations with.

[00:35:53] **Stephen Calabria:** Well, so that was it for my questions. Was there anything else you wanted to say?

[00:35:56] **Shawn Ginwright:** We have my organization Flourish Agenda has a number of sort of practices that folks can use at the individual level, tools that they can use in groups and tools that they can use in organizations. If you want to find out more, you just go to flourishagenda.com and we'd be happy to support whatever needs you have.

[00:36:15] **Stephen Calabria:** Dr. Sean Ginwright, thank you so much for joining Road to Resilience, sir.

[00:36:19] **Shawn Ginwright:** Thank you so much. Glad to be here.

[00:36:22] Thanks again to Dr. Sean Ginwright for his time and expertise. That's all for this episode of Road to Resilience. If you enjoyed it, please rate, review, and subscribe to our podcast on your favorite podcast platform.

[00:36:36] Road to Resilience is a production of the Mount Sinai Health System. It's produced by me, Stephen Calabria, and our executive producer, Lucia Lee. From all of us here at Mount Sinai, thanks for listening, and we'll catch you next time.