

Beyond the Manuscript: Criminal Justice System Panel Discussion

Karen Calhoun, Will Boles, Thad Tatum, Katie Schwartz, Beatrice Beverly, Ingie Osman, and Antonio Williams

Welcome to *Progress in Community Health Partnerships*' latest episode of our Beyond the Manuscript podcast. In each volume of the Journal, the editors select one article for our Beyond the Manuscript post-study interview with the authors. Beyond the Manuscript provides the authors the opportunity to tell listeners what they would want to know about the project beyond what went into the final manuscript.

In this episode of Beyond the Manuscript, Co-Editor-in-Chief, Karen Calhoun, moderates a panel discussion with Will Boles and Thad Tatum, two of the authors of "A Qualitative Program Evaluation of a Digital Peer Support Group for Formerly Incarcerated People;" Katie Schwartz and Beatrice Beverly, two of the authors of "Lessons Learned in Forming an Academic-Community Partnership with Families Affected by the Juvenile Justice System;" and Ingie Osman and Antonio Williams, two of the authors of "Partnering to Address Health Inequities among Incarcerated Populations: Prisons, Jails, and COVID-19 Vaccination."

Karen Calhoun: Welcome, everyone. We're really excited today to have three very innovative projects, all dealing with incarcerated individuals. Actually, these papers that have been published, in *Progress in Community Health Partnerships* volume 18, issue 2. Of the three papers one includes working in the juvenile justice system.

This podcast will tease out commonalities and differences between our three efforts, but sort of sharing and highlighting what we feel are different aspects of the three papers published that all add value and also share lessons learned on working with those who are incarcerated or their support systems and those who may be on probation or parole just with the whole industry. So, with that, I'll begin and if each team could share your names, if you're a community partner, and also the title of your paper. I'll start with the digital peer support program with Will and Thad.

Will Boles: Hey guys, how are you doing? Good to be here. I'm Will Boles. I'm a MDP candidate between LSU Health Sciences Center and Harvard Kennedy School. Our paper is a qualitative evaluate, program evaluation of a digital peer support group for formerly incarcerated people. And I'll hand it off to Thad.

Thad Tatum: Hey, my name is Thad Tatum and I'm the founder of the peer support group. Looking forward to this podcast.

Karen Calhoun: Great. Welcome. Our second paper I'll hand it off to Katie and Beatrice on the partnership that they have with the juvenile justice system.

Katie Schwartz: Sure. My name is Katie Schwartz. I'm an assistant research professor at IU School of Medicine. Sorry, that's Indiana University School of Medicine. And I had the privilege of working with our local court system to establish a youth advisory council, youth and family advisory council to the juvenile court. And we brought together young people and their families to help bring their voices to the table and justice system reform.

- Beatrice Beverly:* Thank you, Katie. My name is Beatrice Beverly, and I am a community leader who has worked in the community for well over 15 years working with families and youth who are incarcerated in the juvenile center and/or are homebound.
- Karen Calhoun:* Thank you. And our third paper is a paper that supported or worked with incarcerated populations during COVID-19. Ingie and Antonio, please introduce yourselves.
- Ingie Osman:* Hi there. Thanks so much for having us. My name is Ingie Osman. I work at the University of Minnesota in the Department of Pediatrics here as a project director, and our paper was titled *Partnering to Address Health Inequities Among Incarcerated Populations, Prisons, Jails, and COVID 19 Vaccination*. We go a little in-depth into our partnerships and what we learned together. I'll pass it to Antonio.
- Antonio Williams:* Thank you, Ingie. Hey, how y'all doing? My name is Antonio Williams. I'm the founder and co-executive director of Tone Up, a reentry organization serving formerly incarcerated men and women. I myself am justice impacted and I bring my experience to this paper and this conversation. So, thank you for having me.
- Karen Calhoun:* Welcome. Just in general in the journal *Progress in Community Health Partnerships*, we have a strategic focus on the viability of the partnership that drives the work especially focusing on the leadership that's provided, the respect for lived experience, the role of community partners, and the partnership itself. So, for us, the partnership is as important as the work and the research. Again, this project, we found or thought from reviewing all three papers in common, the representativeness involving formerly incarcerated people, individuals or those working their way through various phases of the system was important that all the three efforts included that, whether it be actual individuals who were incarcerated or currently working their way through the system, advocacy organizations, family and loved ones.
- Also, two out of three of the efforts were fairly newly formed partnerships and one was established a while ago back in 2015. So, we're going to ask each partner to kinda share about their or answer each question calling on each of our partner teams to address the questions. So, tell us when you're reflecting on the partnership whether it be a combination or looking at the design elements that you use for collaborative research, whether that be CBPR, community engaged research, participatory action research, tell us why these features and principles of these approaches were important for your efforts. Let's start with our juvenile justice system efforts.
- Katie Schwartz:* Sure, I'm happy to start to answer that question and Beatrice, please jump in as you like. So, our particular paper covers an effort that was not meant to contribute to the research world at the start. We were asked by the juvenile court to help establish a group where we could learn more from youth and families who had been impacted by the juvenile justice system. They wanted to hear what changes folks would make to the system based on their own experience. And they didn't have a plan for how to bring those voices to the table, so they asked us at the university to help reach out to individuals in the community.
- And I think in doing that process and starting from scratch to get buy-in from community partners for an effort that didn't have a lot of shape yet, we had to work really hard to just establish some really structured and continued means of establishing trust, right? We had to make sure that folks knew that our intentions were good and that this wasn't just for the benefit of research and science, that

we were trying to make some change locally and start there before we ever considered this work as part of building on research. I think that trust has been really foundational in helping us determine what we can learn from community groups that are often disenfranchised from the systems where they're impacted by.

Beatrice Beverly:

I think the other thing I would add to that is that when the ask came about, it was around research. And so, we'd throw our hands up when it comes to research because we really don't want to touch it. But we had to, I had to make a decision when I got the message of nothing for us without us, right? Because we knew what it was we needed. Clearly, where we set in Indianapolis, the numbers were high. In the pandemic we went from having close to 300 plus youth in the juvenile justice system, and when the pandemic happened, it went to less than 20, less than 30.

So, clearly there was a problem with the policies, the procedures, the intake of what that looks like. And so, to be a part of the change, I had to step out and say, you know what, let's begin to establish and break the barrier between research and individuals that's coming into our community to help us and start there.

Karen Calhoun:

Wonderful. On the project with the digital peer support group, do you want me to repeat the question?

Will Boles:

I think it was about the history of the partnership and then why choosing certain research methods. Thad, how about you talk about the history of peer support and the partnerships and then maybe I can speak to the research piece?

Thad Tatum:

Okay. Again, my name is Thad Tatum and I'm a formerly incarcerated individual. After serving more than 28 and a half years in Louisiana State Penitentiary, I came and wanted to find in a group guys like myself, somewhere they can come to, a platform where they can express the things that they will be going through, things that, the challenge and all the things that take place coming back home after serving so much time. In doing so I was fortunate enough to hook up with Tulane Medical School students and Tulane Medical Clinic, the Fifth clinic in New Orleans, whereas I was able to start this group and being able to have a place to meet with these individuals.

And then another organization such as the VOTE organization, Varsity Experience. We came and all collaborated and has provided this space and made possible for guys like myself to come home and have a platform to talk about the challenges and stuff that we face upon being released from a place after serving so much time. The peer support group is a group that, our slogan is "us helping us." Whereas, we come together, we talk about things, and we try to figure out ways to be more productive in our community, in our society.

And therefore, through doing these things, we feel comfortable talking about the problem that we have amongst ourselves, our family members, and all those things that, you know, that you're coming back to once you're in society. Meeting Will, it was an ideal partnership. He's very hardworking. He's very diligent in trying to get things done. And it was just hand in hand, with what I needed, what I wanted, and what I was trying to provide for them, for the community.

Will Boles:

Thanks, Thad. Yeah, and just put some more meat on those bones. Those are great points. I think the peer support started in 2015 with Thad, really just getting a bunch of guys from Angola who'd done time together to sit around and talk about what they've been through. And our co-authors on the piece, Anjali Niyogi, who's the founder of the Formerly Incarcerated Transitions Clinic in New

Orleans, and Bruce Reilley, who's one of the directors at Voice of the Experienced, all these community partners came together at that time to really start putting, working together in this Prisoners to Patients Initiative, P2P.

And by the time about 2019, when I come around, I started hanging out with them at that time. I was just starting medical school and I really didn't know nothing about nothing. I had a background in state and health policy at the state level and things like that, but I was really starting medical school. I wanted to know what folks coming home from prison were really going through. And hanging out with Thad and them at Peer Support, really getting to know the mental health challenges of folks coming home and how this partnership and this program of peer support really addressed that on their own terms in a way that institutional psychiatry or other kinds of mental health things are important, but couldn't speak to that experience piece that Thad was so able to capture was really awesome.

And then to the research piece of it, we started formalizing a curriculum at that time. We piloted it over, which is what the paper is about over 2020 and 2021, which is a period of great transition. I'm sure we'll get to about the pandemic, but really just trying to get into what are the core issues of guys coming home? What do they need? What do they need to understand about themselves to go through these life transitions and really lean on each other in this peer support space? And then it was really a privilege to get to hear their perspectives through this qualitative interviews.

And we learned a lot from it, and I think now we're, it was digital when we piloted it. There's a transition to digital when we piloted it. And now we're back in person, which I think a lot of the guys will talk about that. But overall, it's been a great effort. And I think that piece of trust amongst that Katie and Beatrice mentioned was so important with the research design, which is why we landed on community-based participatory methods where guys could feed into the research design and be a part of it.

Karen Calhoun:

Wonderful. Ingie and Antonio, share what you think are important aspects and reflections on the partnership and design features as well.

Ingie Osman:

Yeah. Antonio, chime in as you have thoughts and I'll kick it to you after too. But I think, so this project similar to what other folks are saying evolved around an ongoing need that was coming up out of the pandemic. And so, we were tapped to lead this project and facilitate this space focused on COVID-19 vaccine confidence and uptake among people incarcerated in Minnesota. So, we facilitated this space of formerly incarcerated, directly impacted folks to lead the way and take charge on what it is we were doing together . . . the pandemic inside prisons and jails.

And I think a really key aspect of this partnership was again, echoing what folks are saying, it's really that relationship building and trust building piece. I don't think the work could have happened without it. And given the timeline of the pandemic and how things continue to unfold and unfold quickly there was a lot of urgency around it, but we were only able to move at the speed of trust here. And so, that relationship building and trust building was essential. It was a critical component of this work. And so, I think that foundation really helped us move forward and center that accountability along the way. I think too just thinking about our work and the kind of research design that we selected.

So, we chose CBPR, but I think there's such a wide spectrum of community engagement. And so, we were mostly focused on the values that really resonated with us and that we wanted to incorporate into our work and so, didn't necessarily care about semantics in that way, like what we were calling ourselves, but really wanted to center in on those values. And so, the things that really resonated with

us were mutual benefit, shared knowledge, shared power, those really key constructs and tenets of community-based participatory research and participatory action research that we wanted to kind of work and incorporate it into what we were doing together. Yeah, Antonio?

Antonio Williams:

Yeah. And I would add to that from the lived experience side of things, me having just come home, I came home June 22nd, 2020, after serving 14 years and two weeks. COVID had really just started hitting our facilities really hard, and the mask stuff was becoming in play. And so, what the relationship turned into from my vantage, from my perspective was we needed to build trust. We needed to know that this wasn't the same type of research that was going to be used to harm us, to further control us, restrict us. And we needed to know that it was independent from the state.

Having Ingie, Rebecca, and everyone else that was a part of on the staff side, the school side, University of Minnesota, it allowed us to build the trust, to see the difference between, the relationship between the state and the educational institutions. But allow us as credible messengers, those who have been inside with our people to say, hey, look, this is not about championing someone else's cause. This is about protecting ourselves. This is about giving us real access to real information versus being scared and misled.

So, I think that was the outstanding part for me. It started the conversation, and we may get into this later, but it started the conversation around healing, centering healing, talking about healing from not just the current pandemic, but rehabilitating and healing from incarceration itself and learning that we're actually dealing with a consistent and constant trauma. Thank you.

Karen Calhoun:

Thank you. We're going to stay with Ingie and Antonio since they last presented for the continuity of, just that they were last and the information flows nicely. We know the importance of policy to encourage sustainability of new approaches. Did advocacy for policy changes that you may have inadvertently addressed, not necessarily planned on, did they occur? Did it impact change in policy? For example, educating family on policy, providing feedback on policy. I personally have a young person in the family who was incarcerated for two years at 19.

And as a family member, then better understanding policy around incarceration would have been very helpful for us. Did your policy work? And all three of you inadvertently did have some policy aspects. Did it enable loved ones to better understand policy, and those incarcerated, related to incarceration?

Ingie Osman:

Yeah, that's a really great question. I do think we had some influences here. It was a little tricky given the unfolding nature of the pandemic and how things were constantly changing policies and recommendations, but I do think a lot of our work was focused around education, transparency, getting people the information that they needed that wasn't always, by design, available to people. And so, really kind of focusing on that education piece we supported incarcerated people and their decision to get or not get vaccinated with information that we shared.

We tried to share information widely throughout all Minnesota prisons and jails. We worked on kind of those smaller practice changes to maybe not necessarily bigger policy but practice changes around allowing incentives to be offered to individuals, things like that. We also tried to do some advocacy at the state level around staff roles in COVID-19 response, use of quarantine essentially as solitary confinement, things like that. And so given our relationship with the state department of corrections our group also had the opportunity to meet with our state commissioner corrections at

multiple points to share our concerns, what we're hearing directly from folks and our loved ones inside, really ask questions.

And so, while things were ever evolving I don't know what direct impact we have, but I know that there was influence and impact joining our work. We took an all hands on deck approach to see what we could influence during such a challenging and ever evolving time. Antonio, I know you do a lot of policy work too. What's your perspective on that?

Antonio Williams:

Yeah, no, this was a great question. I think, honestly, what we have been doing and what we do the collateral benefits of it are the conversation around access to the facilities because it's hard for people who have been inside those facilities as prisoners, as inmates to get back in and do positive things and be an example and show people that they're, so this was one of those things that, from my perspective and what I hear from the brothers that are still on the inside and got to see, the brothers and sisters that got to see the videos, got to hear the conversations that we were having, even got to see like my home after being in there with them.

This did a lot to kind of build up that hope, that light at the end of the tunnel. And then the transparency around like how hard it is to get inside, how hard it is to work with the state. The rest of the world I don't think understands that oh, it should be easy. We're bringing in some positive. No. And so, for people to see that it's actually not what they may have thought or been taught or been told did another thing to also help lead the way for other things. Now we're talking about HF 93 which is the removal of the slave Constitution, the slave language out of our Constitution, 13th amendment, right?

These things are now being talked about and I feel like all of the work that we do that centers, currently informally incarcerated people allows for the opportunity for policy shifts. The conversations at the legislator around different access points and humane things to be passed.

Karen Calhoun:

Thank you. Katie and Beatrice, you want to share on the work with juvenile justice system?

Katie Schwartz:

Yeah, Beatrice, do you want to start?

Beatrice Beverly:

Yes, I'll start. It's three areas I wanted to talk about. Great conversation. When I think about that impact, we had impact to the parents and caregivers, we had impact to the internal probation office judges. And then we had impact broadly. And I'll start with the parents and caregivers. When we came about, we quickly discovered that there was a gap of understanding operational deficit definitions, what the expectations were when they were navigating through the system.

So, we were able to create a video that we were able to put in the waiting room for parents and caregivers that was navigating so it wasn't as scary because there was clearly a gap around understanding of some of those institutional terms, processes and everything. In addition to the piece around their policies and procedures and I of spoke to it earlier, we were able as community to set on their committees. They had established internal committees that address racial equity, that address the tension and diversion, that addressed several other items. And so, individuals from the community like me and others were able to set on those committee and provide information, right?

And changes of what was not working from the ground up, because originally the policies always built from top down, but we said, no, we need to look at this from bottom up. And so, we were able to influence that, and we still continue to influence that because it's still in place to today. And then the last point I'll raise is we had an opportunity, Katie and I, had an opportunity to go speak at the

JDAI conference. And so, when they came together, we were able to help other individuals understand what it's like serving as a family member or a caregiver or someone who is navigating the juvenile justice system.

No one wants our kids in juvenile justice, right? So, when we get there, how do we navigate so we don't reentry, right? And what does that look like for the family as a whole, not only the child? I heard that and Thad and Antonio talk about healing, talk about mental health because that's holistic what those long term impacts not only for that child, but for their siblings, because in some cases they were the primary caregiver for some of their siblings. And so, just wrapping ourselves around the entire family, so that they understand how to navigate and then have access to things that they didn't have access before. Katie?

Katie Schwartz:

I think you said all that beautifully. We go into these efforts with such high hopes and big dreams and it's, I think it's really powerful to remember that some of the most important work is increasing visibility for people who have not yet gotten the chance to be heard. And that can happen in really tiny ways and now in bigger ways as the group grows. Thanks, Beatrice.

Karen Calhoun:

Wonderful. And then finally Will and Thad, anything you guys want to add from your digital peer support group work?

Thad Tatum:

Yeah, as far as the policy concerned, things of that nature there, never set out to be that way, but eventually through working with vote organizations, to working with the fit clinic, we have things that we do and we set out to the communities and invite family members inside our meeting to educate them on how to understand guys that's coming home from prison, understand that we become strangers to our own family after serving so much time. Much as they love us, they don't really understand the habits that we done picked up while in prison.

Habits is not necessarily bad ones. It's something that we had to do for survival purposes. And we bring them back and coming back inside a community, a civilian community, they don't really understand a lot of things, how we interact with each other. So therefore, we invite the significant others and family members inside our group meeting so they can be educated on who they are back amongst as a family member, who they are amongst in their community when they see people that's formerly incarcerated, that we're not no animals or anything, we're just people that served a lot of time.

Even people that's working on the job front, we invite different, all sorts of people to our meeting to educate them about who we are and coming back inside this community. We also, I was listening to Antonio speak about that thing as the HF93 and removing the slave language from the Constitution. That's another thing that is very, very important to us too, because we don't want to be seen as a convict or anything of that nature. We want to be seen as a returning citizen.

So, we try to educate on that level. We try to educate the communities, the powers of the courthouses, all these things that we do within our, in our group, which is peer support for us to understand everything that we've gone through, but also to make it applicable to people that's outside our group. So, these are the things we do as far as peer support goes.

Will Boles:

Thanks, Thad. I think the only things I would add to that is some context as far as I see as far as policy goes is peer support fills a policy gap where a lot of guys come on home, don't get a lot of access to mental healthcare and that kind of thing like I mentioned before. And this is kind of a bridge I would

say to those places. We partnered with LSU, with Tulane, local universities. And we've had, we've done like community mental health panels to talk about psychiatry, talk about therapy, talk about these things that like, because peer support is not a clinical program per se.

It is therapeutic, which we talk about in our paper, but it's a different kind, right? It's based in mutual supporting of each other, and it feels very accessible. We've had a great retention with guys. And so, I would just say the peer support is a part of a larger effort to give more resources to folks coming home because our partners at VOTE like that mentioned, been doing a lot of advocacy. Like last session we passed, it was, I think, Act 214, which is a mental healing justice for incarcerated people's act. The vote was really big on that, of like increasing access to mental health for those coming home through funding allocation stuff.

And we're seeing a lot of that threatened right now. Our new governor is very keen on returning Louisiana to its place as the most incarcerated place on the planet. And as he does these things, we're going to continue to see the kind of harm and the kind of negative impact that a lot of the guys in peer support have experienced and that we know from, as peer support, we know that there's going to be a mental toll to that. And so, I think being able to speak to the harm of prisons is another part of what peer support has been doing.

Karen Calhoun:

Wonderful, we're going to stay with Thad and Will and because time is wrapping up, I'm going to ask that only one partner answer question number three. Given that this work occurred during the pandemic, all three of your efforts had that aspect, discuss the role of flexibility and the design and implementation process.

Thad Tatum:

You want to do that, Will?

Will Boles:

You got it, Thad.

Thad Tatum:

Well, the pandemic came at a time when we was already started into what we was doing. And I think it was, as bad as it started out as, it was an ideal situation for us, mainly because again, we're guys just coming home, wasn't too keen on learning about the technology and all the new stuff that's out here. And the pandemic allow us to go move into the Zoom aspect of things, so it was an education within itself. And I think that, due to the pandemic, I think, formerly incarcerated people was more prepared for the pandemic than anybody because we were used to being inside, we were used to being separated from others.

That particular time in the history of what we was going through is very, you gotta stick with us because a lot of guys learned a whole lot about what we're on now, Zoom aspect of things. And just total thing of being isolated, not being affected by it even when you was inside with your family, being able to be that author of showing them how to separate themselves from others, protect themselves from diseases, that stuff that was going on. I think it was very rewarding that we had to go through it, even though it wasn't something that we wanted to go through. I think that, overall, it was an experience that was very much welcome and needed.

Will Boles:

I would only add just within the curriculum itself we built in a lot of flexibility into our units such that we used current events depending on what's a big current event. So, we used that flexibility in the curriculum to use that to flesh out the themes of it. And so, we did make space for guys to talk about the murder of George Floyd, for example, which also happened in 2020, and making space to bring

those kinds of connections home was also an important part of it as Thad mentioned, getting a bunch of guys on Zoom was, it required a lot of flexibility and a lot of patience, but it was really rewarding.

Karen Calhoun:

I'm sure. Katie and Beatrice, flexibility with the pandemic?

Beatrice Beverly:

Ditto to what the other group said. I believe that because we were flexible, because we knew where we were and where we are and where we wanted to go, we were committed to showing up no matter how we did it. Having Zoom, I tell people all the time pandemic was a really great thing for my community. It gave us access, people access to technology that they didn't have before. It gave us a way to communicate and not silo and be working still to ensure that the processes in the juvenile justice system could change to be better for our community as a whole. We stayed the course and having Zoom and the ability to do that was great.

Karen Calhoun:

Add anything, Katie, quickly?

Katie Schwartz:

No, I think we all struggled through it. We set way more reminders and texted a whole bunch and tried to make things as easy as possible. But I really give a lot of credit to the group for trying things that they were certainly not comfortable with before the pandemic, trying to all get online and be heard, and can you hear everybody speaking? All the technical difficulties that now we don't think anything about. It was a lot of adjustment, but everybody really rose to the occasion.

Karen Calhoun:

Wonderful. Ingie and Antonio, thoughts on flexibility during the pandemic?

Antonio Williams:

Yeah. I think that was the keyword, partnering and flexibility. We all had to be flexible to partner. We're talking about system impacted folks partnering with the system, people who run the system, or in our minds, these institutions are a part of the system from where I come from until we're shown that they're different. We had to be flexible with those on the lived experience side enough to take the time to listen and receive the information that we've never had before.

And I credit Ingie to a lot of that. Ingie was flexible. Ingie made the environment flexible on their side so that we could not feel stressed to show up to our meetings, our discussions, our workshops that was getting this work moving. But then the flexibility around, of course, navigating the technology and the schedules, but like the personal story sharing we had to be flexible with each other. We had to be nimble with each other and really hold each other in a different way sharing these personal stories.

We cried together some of us, we laughed, all of that during this process. And just to uplift something Thad said around, many of us were prepared for it, for the pandemic because we had been living in social isolation. We had been forced to do all of the things that the free world had just been forced to do. But allowing us to have the time to sit and think about it from a different perspective and think about how we can use our experience to help other people, that was the greatest flexibility, taking that experience and being able to enlighten and help and advocate for others who are still on the inside.

Karen Calhoun:

Thank you. I'm on mute. We're going to try to squeeze in one more question. Moving forward, discuss any plans that you may have for advocacy and how is your work moving forward? Antonio and Ingie, you guys want to, one of you share?

Ingie Osman:

Yeah. I can get us rolling. I'll try to be quick. So, Antonio can chime in as well. Yeah, so our project sunsetted after this funding stream wrapped up, which I think gets at one of the lessons learned that

we talked about in our paper, which is about the need for long-term investments in this type of work, which is often slow-moving and really tied to projects' outcomes. But we were able to secure funding for kind of an offshoot of this work focused on pandemic-related health disparities among pregnant and postpartum people in prison.

But ultimately, the partnership structure and the lessons learned from this partnership directly informed all of the work that we're doing and continue to do. I think, like the importance of sharing power and space for directly impacted folks to lead this work was just really the key lesson reinforced by what we were all doing together. Ultimately, there are still a lot of barriers that exist to engage currently and formerly incarcerated people as equal partners in the work that are really imposed by the institutions that we're working with, imposed by like higher ed institutions, imposed by the state systems that we're working in.

And so, we're just continuing to explore, learn from and navigate these barriers as we continue to really reimagine what partnership and research looks like in this space and kind of working to dismantle the idea that academic researchers "hold the answers" knowing that people have the information and expertise to liberate themselves but really often lack the resources and power to do so as a result of these systemic barriers and institutions. So, that's what we're taking away from this. That's what we're putting into all of our future work and continuing to move and grow and learn.

Karen Calhoun: Katie or Beatrice? Oh, I'm sorry. We're probably going to have to move forward with one person to be respectful of time. Katie and Beatrice or Beatrice, one thing on how are you guys moving forward?

Beatrice Beverly: We were able to sustain the Family Care Council that we put together when this project first, this initiative, excuse me, initiative first started. We are in the process of bringing someone on part-time to become a parent navigator coach to help parents navigate through the journey.

Karen Calhoun: That's ideal sustainability. Will or Thad, what are you guys doing moving forward?

Will Boles: I would just say that peer support's been going on for nine years now through different kinds of funding cycles. And I think we've been trying to hustle for grants as usual, but I think also finding ways to systematize our volunteer base, which has just been me and Anna Sachs and Claire Mulholland, who are coauthors on a piece, through the pandemic, we couldn't have done it without them. But I think solidifying partnerships with LSU's psychiatry residency program and looking at other local government partnerships is one way we're trying to embed ourselves further and continuing to support VOTE as they go to bat in this legislative session that's trying to kind of make more reasons for peer support.

Karen Calhoun: Wonderful! Thank you all. I want to let you know that you're very skilled speakers to be able to get four questions in with two people per team doing a question in about 35 or 40 minutes. And it was a great discussion and good synergy between you guys and your work. So again, thank you for making the time to share with us and be a part of our podcast.