Head Start Heals: Episode 6 – Our Role in Equity

Dr. Neal Horen: Hello, everyone. Welcome to the "Head Start Heals" Podcast Series. I'm Dr. Neal Horen, codirector of mental health at the National Center on Early Childhood Health and Wellness. Our goal here is to help Head Start leaders and staff address key issues you may be facing so we can all help children, families, and communities heal. Today, we'll be talking about how Head Start and Early Head Start programs can support equity through the services they offer. I'm pleased to be joined by Dr. Eva Marie Shivers, who's the founder and Executive Director of the Indigo Cultural Center in Phoenix, Arizona.

Well, we're super excited to have Eva Marie Shivers, with us today. Dr. Shiver, I just call Eva because I'm a fan.

Dr. Eva Marie Shivers: Aw, thanks, Neal. I have to say that I love the title of this series, "Head Start Heals." And I love that I'm talking today about race and equity. The philosophy that we use at Indigo Cultural Center, which is my organization, we are part of the Healing Justice Movement. So, the way we talk about equity is definitely through a frame of healing and hope.

Dr. Horen: What do we mean when we are referring to equity? When we say equity, what are we actually talking about?

Dr. Shivers: Yeah, that's a great place to start because part of our journey in healing racism, or really, adopting antiracist approaches – a big part of it has to do with shared language and shared meaning. So, I always like to promote a definition, and the definition that I like to promote – you've probably heard me say this before, Neal – that racial equity is both an outcomes picture, but also a process picture. So, in terms of outcomes, I think that's the part of the equity definition that a lot of people resonate with. But let's be very clear about this. Racial equity, as an outcomes picture, is the happy and more hopeful version of racism and inequality. Racial equity – it is an outcomes picture that is full of hope.

Anyway, the Aspen Institute has offered us a definition. They say racial equity is "a substantive alternative to structural racism." So, right there, we've got some hope. And it's a social outcomes picture in which race is not consistently associated with privilege and disadvantage. It's also how we do our work. I think this is a really big theme for those of us in the early childhood field because we know that that's where the magic happens. How we do our work.

Dr. Horen: Let's maybe bring it down a level, to at a programmatic level, for a Head Start program or an Early Head Start program, what would that look like?

Dr. Shivers: Well, I think Head Start has been attending and attuning to equity for a very long time. I think the inception of the program came from systems and policies and visionaries in our country that understood equity way before the rest of us started using that word, so I think in its bones, in its DNA, equity lives as both process and outcomes. There's a beautiful longitudinal data on outcomes for children who have been in Early Head Start and Head Start. That's our outcomes picture. We know that it's closing historical racialized gaps. And not just children's outcomes, but family outcomes as well. I come across policymakers ... Just the other day, I came across a legislature in the State of Washington. And she grew up in Head Start. She watched her mom. Her mom was involved with the parent council. So, I still hear these stories from people who have had those early experiences. And you see how that thread carries on in their life, so I think Head Start, that so much – about its history, its inception, its philosophy – has been there from the beginning. And that being said, there are things that we can continue to do within the Head Start world that can continue to make sure that we have a strong legacy around race and gaps and outcomes.

So, what does a program look like? Well, lots of different levels. We can talk about the organizational level, like a specific program, right? That historically has to do with things like family engagement, authentic engagement.

Authentic, authentic engagement, right? Giving families real voice and real power. And there's so many procedures that go along with Head Start, that I think so much of around the organizational culture, how do we communicate with families and creating a nonjudgmental climate for families, providing training and support for teachers to implement and continue to pay attention to things like cultural responsivity. So, this has to do just with a programmatic level, the organizational level.

I think equity and Head Start, we can't forget about teacher preparation. I think the requirements for teacher education have a lot to do with the quality of Head Start that's delivered. We do need to start looking very closely at the type of pre-service education that teachers receive. Specifically, around issues related to diversity, equity, inclusion. And so, yeah, the organizational climate, there are things. In terms of teacher characteristics, teachers' own personal experiences with things like past discrimination and bias, their cultural, ethnic, racial background, these things show up in their work in really meaningful ways, depending on the makeup of the families that are in their classroom. So, I think this is another place where when we think about racial equity, who is in the classroom? Who's there?

Do we know each other's stories? Are we allowed to tell them? What is the appropriate place to share stories?

How do we become aware of our stories? And if I could just put in a plug for mental health consultation, I think that's one of the strengths of having access to a mental health consultant. Because those are the kinds of conversations that can be uncovered in the context of a mental health consultation.

Dr. Horen: So, let me pick up on one piece that you said. There's a lot to pick up on. I'm going to pull at one thread if that's OK? That's this reflection piece, that you mentioned that the mental health consultant can do. Is the expectation that in order to really address equity, one thing is that teachers need to get to a place where they've been able to reflect and explore what they're showing up with, in order to then be able to do all the other things that you talked about?

Dr. Shivers: Yes. I think it's super, super important. But then when you think about the conditions that need to be present for a teacher to be able to engage in that kind of reflection, it takes us back to the organizational climate. It takes us back to how are our staff getting along with each other. Is the director or the manager of the program, is there time for reflective supervision? Is that program manager supported in learning how to do reflective supervision, or reflective mentoring? More and more of us are hearing about reflective supervision.

We have a ton of great resources about anti-bias education, anti-racist education, culturally-responsive education. There are so many amazing resources. We don't need to keep reinventing that, but there is a reason why we have this plethora of resources, but nothing seems to be sticking in this country.

There is a reason why. In my personal opinion, is because I don't think we're slowing down enough to listen to ourselves, to uncover our stories, to give ourselves opportunities to heal, to figure out how to help advocate for those work environments that give us the space to do that sort of reflection. Because healing, healing racism, moving towards equity, it's not an intellectual process. This stuff doesn't just exist in our heads.

We can't just have a fact sheet and say, "Oh, there you go – culturally-responsive education!" There's a reason why these gaps persist. And I think if we slow down and allow for more of that reflection, allow for more transparency and vulnerability, it can open something up.

Dr. Horen: So, I'm a Head Start Director. What are two steps I should take, if you were the queen of – this title doesn't exist, but I'm working on it. If you were the queen of Head Start, what would you say to directors? You have all the program directors in a Zoom chat. What would you tell them, here's the two things I want you to do? You're going back. I want you to address equity. Do this.

Dr. Shivers: They have to start with themselves, and they have to be committed to doing their own work around healing these issues. For directors who identify as White, those steps involve acknowledging White privilege, acknowledging power, learning or relearning history, and then starting to have the kinds of conversations where you

can say the unspeakable. Or where you can allow your voice to shake. Or you can ask the question that you think is stupid. And I don't want to use the word "safe space," but it requires being in a kind and brave space.

Having an equity partner who can open up reflection in that way is so key that you almost can't help but to start to see the places in your program that are just ripe for infusing with more equity or more intentionality. So, I think this is why those strategies and those lists are really hard, because people are at different places in their work. As a leader, when we start to do our own work and we make our own work transparent to our staff, we all can come together and start to have these conversations about, "Oh look, we're already doing this with families. Why don't we just add on this other layer?" But in terms of the leadership level, of Head Start, of any organization, it really has to start with doing the work yourself and then either finding or creating some kind of a community where you can have that dialogue, where you can have shared meaning around language, where it can be completely relationship-based, and you've got these trusting relationships because the centrality of relationships is everything in this work. So, for administrators, I think it's finding or creating spaces to do their own work. And then, having opportunities to start to apply their new understanding to leverage points in their programs.

Dr. Horen: So, I mean, I guess even the question then is, are we then going to expect that a Head Start Director knows how to set up a brave, kind space ... is willing to do the reflective work on themselves, and then provide that for staff? And that happens, we know. As you said, Head Start is a place where this is not novel. There are places in Head Start programs and leaders in Head Start that have been doing this kind of work for years. If that's not happening, are there things staff can do that might help them work towards increased equity in their work with families or children?

Dr. Shivers: That's really hard, right? Because we know that it's all connected. And there's not a lot of research, but some research about organizational climate and its connection to higher quality, and its connection to teacher self-efficacy. So, we know that the organizational climate does matter. But we know that probably more often than not, Head Start programs, preschool programs, child care programs, they're just really hard places to work. The level of stress is high. The level of emotional labor is really high. I think for staff, I think it could be similar, starting with yourself. Not only is this work hard, but at this moment in our country, holding space for race, if you are a person who identifies as Black, Indigenous, or a person of color, it is so hard right now to hold what is happening in this country and to bring it into work and to feel, simultaneously, the need to do something differently, or to protect children, or to prepare children for this world and also protecting yourself and your own sanity. I think everybody has to figure out what well-being means for them. And to try to find ways to implement that into your life and to request it, either from your colleagues, from your family, from your program administrators.

Beyond the well-being part of it and the self-care part of it, I think being aware of our own stories, where we came from – this is the big part of the storytelling – why we're here, why do we do what we do? Where are we going? And to start to have honest and transparent and vulnerable discussions about what we bring and who we bring into our classrooms. How is this playing out in everyday practices? In our interactions with children, especially those children who are really challenging.

Dr. Horen: You've mentioned mental health consultants a few times here, and we think that that's a huge aspect that should be promoted. You did mention, a little bit ago, a racial equity consultant. I don't know that folks are oftentimes as familiar with what that is. I want this racial equity consultant. What is that? What am I going to do? I'm going to program him. That sounds like something that might be helpful.

Dr. Shivers: Yeah. Well, in this day and age of lots of social media, Instagram is a great place to start. I'm not a big social media user, but I will say, there are five people/organizations related to social justice and racial equity that I follow. Find those voices that resonate with what you believe because there are many voices now in this social justice world, racial equity consultants who understand our world of early care and education? Now we're talking about a more narrow field, but they're out there and they're doing a ton of webinars right now. They're on social media. In our world, that's how it often starts. You start by listening to a person deliver training and you really resonate and you say wow, is this person available to work with our program?

But it can't end there. Because our ultimate goal is to increase the internal capacity for programs to be able to continue this work on their own. A good racial equity consultant, that will be their goal, and getting you there so you can really take this and move it forward in your own way, for your own community, tailored for the families and the teachers in your program. That's what would happen, is that really increasing that internal capacity.

Dr. Horen: One of the things that we know Head Start is oftentimes doing is trying to help families advocate for themselves. So, what is it that we can do in our Head Start world – staff, directors, managers, all these folks – that can help families advocate for themselves around addressing equity?

Dr. Shivers: Boy, I mean, that question, I feel we're still trying to figure that out. I just don't have a lot of confidence with where we are right now, as a country, with authentic family engagement and really encouraging and supporting family advocacy. I think Head Start is the system in our field is doing the best job at that.

But this is what I always think about. So, you're a parent. And your child goes to this Head Start program. You have your conversation with the teacher. You attend a program. You attend some kind of an event. Then you've got all these conversations with families in the hallway, or in the yard, or in the parking lot. So, I think our goal of authentic advocacy and engagement is to bring those parking-lot conversations into our meetings, into whatever structured activity we have with families, have that be a space and a place where those parking lot conversations are OK. So, I think, depending on your community, you'll know to have food there or to have a parent running it or to send out surveys ahead of time and create an agenda that is responsive to those surveys.

I think depending on knowing your community and what conditions need to be present for families to really just bring themselves and to feel safe doing that. I feel vulnerable, even doing what I do. I don't feel like I can always be completely honest with my son's teachers. I have to pick my battles. But I have plenty of conversations in the parking lots with other parents. You know? So, I think yeah, how do we create an environment where those parking-lot conversations can come inside? And I don't think that there's a formula. I think that you have to have authentic knowledge of the families and the communities that you're serving. You need to know there, the taboo things. What are the things that we just never say? How do they think about children's development? And how can we just open up this space where parents can just bring themselves?

In our field, and I'm going to include myself, we do a lot of "I know what's best for you." "I know what's best for you." And there is a very limited body of knowledge that we value. How do we open up things that we value? How do we open up wisdom? What is wisdom? What are different ways of knowing things? Can we truly say our families have legitimate ways of knowing things? How do we find out what those things are? How do we shift ourselves so that the families get and feel, "Oh, when I'm in that space, you get me. You know that my way of knowing things is OK. You know that that's legit." How do we get to that place?

Dr. Horen: It's so interesting. Because when I think about just Head Start in general, it's really, there's two major factors, I think, that really are involved in healing. The first is strong trusting responsive relationships. And yet, in your discussion, what you've really pointed out is, who's deciding what a strong, trusting, responsive relationship looks like? And is it an equitable discussion and decision about what that might look like? Secondly, safe, consistent, predictable, nurturing environments. Promoting equity seems to be critical for those two things. How does promoting equity and getting at the process and the outcomes of that in Head Start and Early Head Start, how does that really support healing?

Dr. Shivers: Well, I guess we can open up, what is healing? What does that look like at the individual level? What does healing look like for a child who might be already, at the tender age of 3 or 4, carrying around internalized oppression? What does healing look like for the child? What does healing look like for the teacher, who has her own stuff happening at home with his or her family and let's say a chaotic work environment or an unpredictable work environment? What does healing look like? So, yeah, I think healing is really a very personal kind of a journey. I don't think anybody can say for you, this is how you need to heal, Neal. These are the areas where you need to heal.

Dr. Horen: That's a whole other podcast, Dr. Shivers. [Laughter]

Dr. Shivers: I think it is a really personal journey. And I'm just going to bring up just reflective spaces, having opportunities to reflect, even if it's with our peers, even if it's with our colleagues. It doesn't always have to be this hierarchical, oh, I reflect with my supervisor or my director. Reflection, meaningful, sometimes the most meaningful reflection happens with our peers and colleagues. So, I think having those kinds of trusting relationships, where we can be reflective and we can explore, what am I bringing with me today? Where are the points? Where are the tender spots inside of me? And how is this showing up in my work?

Having a space to be in touch with that, and then to pause and breathe and try to figure out how to stop that automatic flow that happens when we're stressed out and how that plays out in our interaction with children, I think it's just key. And teachers, regardless of their racial or ethnic background, teachers that are spending time being curious about the meaning of behavior, having conversations that are sticky and icky and yucky, but there's somebody there who's listening and who's not judging you, somebody who is saying, "I will be here consistently for you. You can depend on me, week after week. I will show up." Those kinds of things that the teacher starts to internalize. We call this the parallel process. Then they can, in turn, be that way with children and families.

Well, what we're seeing is teachers' reflections about children, the negative attributions they make towards children, and in particular, those children who society commonly sees as difficult, they tend to be brown and they tend to be boys – not always – but this is the intersectionality that we're seeing. We're seeing that teachers' attributions of those children start to shift, start to shift. So, this is where we're seeing the coming together of reflective practice, of knowing who you are, knowing who you're bringing to your work, having relationships that you can count on. What does that have to do with equity? Well, it shows up in our work. It shows up in these subconscious ways we think about particular children in our society. And all of us, regardless of our background, we are somehow taking in these subconscious societal messages, and it comes out in a split second, when we're stressed, when we're under pressure, when we have a million things going on, we go straight to those automatic patterns, those automatic judgments that are heavily influenced by subconscious messages, and it shows up in the way we interact with certain children, and the way we discipline certain children. So, then you see when you spend time slowing down, breathing, you've got those practices. You know you've got your person who's coming, and you can talk to them during your lunch break. That seems to slow down that automatic biased way of interacting with children and families.

Dr. Horen: I think you've given a lot of good, concrete strategies, Eva, that are oftentimes the hardest thing for people to wrap their heads around, but you've also laid out very nicely, part of it is just getting on that process path towards those outcomes. So, thanks so much for joining us today. It's always great to talk with you.

Dr. Shivers: Oh, it was my pleasure, Neal. Thanks so much for inviting me to be on this conversation, "Head Start Heals."

Dr. Horen: For more information about Head Start and Early Head Start's role in equity, check out the links to Resources in the podcast notes. Thanks for listening to the "Head Start Heals" podcast from the National Center on Early Childhood Health and Wellness.