The KEY to Success: The Impact of Mentoring on Women of Color Health Educators in Higher Education

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Central Washington University

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UNC Chapel Hill
This presentation will share the experiences of WOC health educators in higher education, who have succeeded professionally due to mentorship. Data collected during my dissertation study, which focused on the lived experiences of WOC health educators in higher education, will also be shared. This qualitative, study examined mentoring’s influence on women of color health educators’ leadership style, effect on competence and confidence in the workplace, and the role race plays in the workplace. Additionally, issues of barriers and challenges within the workplace were examined. This study provided a foundation, to explore experiences through their own voices and contribute to the literature from the practitioner’s perspective. The conclusions of this study are beneficial to the field.

Learning Outcomes

• Explain the benefits of mentoring on Women of Color (WOC) Health Educators in higher education.

• Describe the challenges faced by WOC health educators in higher education.

• Define the differences and similarities between formal and informal mentoring.
Introduction & Purpose of the Study

- Public health does not lack women, but the PHWINS states that before 2020, minorities with less than 10 years of work experience, plan to leave the field. (Jarris & Sellers, 2015)

- Lack of WOC in leadership positions across public health organizations.

- Lack of literature and research around mentoring health educators or within health promotion. (Green, Rivers, & Arekere, 2006)

- The lack of research on health educators, their ethnicity and gender identity, and the perceived barriers they experience as practitioners.

- The purpose of the qualitative phenomenological research study was to examine and better understand the effects of mentoring on women of color, who serve as health educators within institutions of higher education.

- Focus on the health educators’ lived experiences, and if mentoring has an effect on their leadership style, competence and/or confidence in the workplace.

- Finally, the impact of race/ethnicity and gender has on health educators in higher education.
**Problem Statement & the Importance of Research**

Despite ongoing progress in career advancement for women in higher education and areas of public health, women of color remain underrepresented in leadership positions. Causes range from lack of access to mentors, bias, barriers, exposure, gender and ethnicity.

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<tbody>
<tr>
<td><strong>1. Inhale Faith, Exhale Fear</strong></td>
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<td><strong>2. Role Model</strong></td>
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<td><strong>3. Gaps and Finding Synergy</strong></td>
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<td>o Research on Mentoring in Public Health (Health Departments, College Health Promotion) and College Health Promotion</td>
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<td>o Research on health educators’</td>
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<td><strong>4. Adds to my research experience and the importance of having diverse researchers to ensure the breadth and depth of topics are covered.</strong></td>
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<td>o Qualtrics</td>
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<td>o Interviews</td>
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<td><strong>5. Our stories NEED to be told.</strong></td>
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“One of the greatest values of mentors is the ability to see ahead what others cannot see and to help them navigate a course to their destination.”

-- John C. Maxwell
• My family is full of educators and nurses; thus my passion for helping others is innate

• Single Parent household, community raised, father in recovery, 1st Generation College Student

**Educational Background**

**Certifications**

**Career Background**
Shawnté’s Story Continued

• Workforce Barriers and Challenges
  ▪ Being the only one...
  ▪ Expectations of an employee/wife/mother

• Leadership Issues
  ▪ Lack of opportunities
  ▪ Only “useful” when dealing with specific populations
  ▪ Known to “get-it-done”

• Empowerment Issues
  ▪ Imposter Syndrome
  ▪ Automatic Negative Self Thoughts
  ▪ Playing nice in the sandbox

• Educational Issues
  ▪ Afraid of getting doctorate
  ▪ Financial wellness

• How I Have THRIVED In College Health
  ▪ My Faith
  ▪ Family/Friends, Mentors, Allies and Sponsors

Mentoring’s Impact on:
• Leadership style
• Effect on competence in the workplace
• Effect on confidence in the workplace
• The role race plays in the workplace
“Mentorship is more about personal and professional support, whereas **sponsorship is concrete advocacy for advancement.**”

--- *Molly Ashby, Chair and CEO, Solera Capital*
Charla’s Story

• 16 years in Higher Education, always looking for ways to center Health and Well-being

• A beautiful wife and nephew, they keep me grounded

• Black, Queer, and Thriving
Charla’s Story Continued

Workforce Issues
- Systematic Racism...
- Communication misses (misinformation, misalignment, missteps, mismanagement)

Leadership Issues
- Lack of opportunities
- Lack of Brave and Vulnerable Leaders
- Tone Down

Empowerment Issues
- Imposter Syndrome
- Perfectionism (Blessing and a Curse)
- Sandwiched

Educational Issues
- STUDENT LOANS v. Higher Ed Salary

How I Have THRIVED In College Health
- 3 P’s (Pause, Pray (Meditate), Positivity
- Community (Family (blood/chosen), Sisters (chosen), Mentors (multiple types)

Mentoring’s Impact on:
- Leadership Style (reflection in practice)
- Effect on Professional Development
- Effect on problem management
- The role of radical self-care
DISSESSATION RESEARCH STUDY

Literature Review
Theoretical Framework
Participant Profile
Question 1. What is it like for women of color health educators regarding the role of mentoring to build competence and confidence?

Question 2. How do Women of Color who serve as Health Educators within higher education define the barriers they experience in the workplace? Or What role does race play within higher education for Women of Color?

Question 3. How do Women of Color use mentoring to influence their leadership style or skills?
Demographic Survey Findings

Participant Data
- 42 women of color took the Qualtrics demographic survey
- 79% (33 WOC) of the survey participants identified as African American
- 7% (3 WOC) identified as Asian
- 10% (4 WOC) identified as Latina
- 2% (1 WOC) identified as Multiracial
- 2% (1 WOC) identified as Southeast Asian

Participant Experience
- 32% of participants stated they had 6-10 years of work experience as a health educator
- 27% only working as a health educator for less than three years.
- Over 95% of the women were confident they made the right decision to become a health educator.

Mentoring Experience
- 30% had participated in formal mentoring
- 70% participated in an informal mentoring experience
Demographic Survey Findings

Positive Survey Findings

• 64% had the opportunity to observe and learn from experienced health educators.

• 74% had the ability to build a community at work with other women of color at their university.

• Over 70% of the health educators believe their supervisor, staff, and stakeholders have confidence in their abilities as a health educator.

• Over 75% of the women have the CHES/MCHES certification, with another 25% with other certifications.

• Over 80% of the health educators with mentors noted that their mentors…

Points of Concern

• Lack of diverse staff within their department.

• Majority of the health educators do not plan to stay at their current university for the foreseeable future.

• Within the next 5 years, the majority are not sure if they will be working as a health educator.

• Many talked about pay and financial wellness.
## Participant Profiles

<table>
<thead>
<tr>
<th>Name</th>
<th>Age</th>
<th>Race</th>
<th>Years of Experience</th>
<th>Current Title</th>
<th>Education</th>
<th>Certification</th>
<th>Mentorship Received</th>
</tr>
</thead>
<tbody>
<tr>
<td>Erica</td>
<td>36</td>
<td>African American</td>
<td>9</td>
<td>Substance Abuse Program Coordinator</td>
<td>Master’s</td>
<td>CHES</td>
<td>Informal</td>
</tr>
<tr>
<td>Monica</td>
<td>31</td>
<td>African American</td>
<td>10</td>
<td>Human Sexuality Instructor</td>
<td>Master’s</td>
<td>CHES</td>
<td>Formal</td>
</tr>
<tr>
<td>Sydney</td>
<td>28</td>
<td>African American</td>
<td>1.5</td>
<td>Health Educator</td>
<td>Master’s</td>
<td>STI Testing Certification</td>
<td>Formal</td>
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<tr>
<td>Tonya</td>
<td>33</td>
<td>African American</td>
<td>11</td>
<td>Director</td>
<td>Master’s</td>
<td>CHES</td>
<td>Formal and Informal</td>
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<tr>
<td>Nicole</td>
<td>40</td>
<td>African American</td>
<td>15</td>
<td>Assistant Director of Health Promotion</td>
<td>Doctor of Philosophy</td>
<td>CHES</td>
<td>Formal</td>
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<tr>
<td>Rhonda</td>
<td>40</td>
<td>African American</td>
<td>16</td>
<td>Assistant Professor and Chair, School of Public Health</td>
<td>DrPH</td>
<td>CHES</td>
<td>Formal</td>
</tr>
<tr>
<td>Amy</td>
<td>34</td>
<td>Latina</td>
<td>6</td>
<td>Mental Health Educator</td>
<td>Master’s</td>
<td>None</td>
<td>Formal and Informal</td>
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<tr>
<td>Amber</td>
<td>34</td>
<td>African American</td>
<td>10</td>
<td>Senior Lecturer</td>
<td>Master’s</td>
<td>MCHES</td>
<td>Formal and Informal</td>
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<td>Major Themes</td>
<td>Category of Findings</td>
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| The Mentor Experience              | • Psychosocial support *(RQ1)*  
• Career/Professional development *(RQ1)*  
• Authenticity between Mentor and Mentee *(RQ1)*  
• Race and gender significance *(RQ1)*  
• A community/network of professionals *(RQ1)* |
| Institutional Barriers and Challenges | • Concrete Ceiling *(RQ2)*  
• Lack of access and exposure *(RQ2)*  
• Racism and Sexism *(RQ2)*  
• Stakeholder perception of lack of competence *(RQ2)*  
• Underrepresentation of women of color within the institution and administration. *(RQ2)* |
| Paying it Forward                  | • Importance of Giving Back by Mentoring women and students of color. *(RQ3)* |
| Establish Formal Mentoring Programs | • *(RQ1, 2, 3)* |
My mentor has helped me discover my strengths and areas of growth. She has taught me best practices and given me the opportunity to practice what I’ve learned. She also puts a lot of trust in me and has given me many leadership opportunities.

The health educators with certifications were encouraged by mentors and peers, who all had certifications, to get the CHES, MCHES or relevant certifications as it would be needed for career mobility.

She has given me a path and shown me how to have a professional life that is fulfilling and meaningful to me on a personal level.

The Mentor Experience

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Institutional Barriers and Challenges

• Concrete Ceiling (RQ2)
• Lack of access and exposure (RQ2)
• Racism and Sexism (RQ2)
• Stakeholder perception of lack of competence (RQ2)
• Underrepresentation of women of color within the institution and administration. (RQ2)
• Those at PWIs shared it seems like recruiting and retaining diverse staff is not a priority.

Mentors reminded them that they weren't the only ones who have faced struggles or barriers.

Top 7 Barriers

1. Few WOC in their department or they’re the only WOC
2. Hard time finding a mentor/role model who looks like them
3. Having to be the person to bring up concerns or issues...
   ▪ Monica shared: “Why are you always the one talking about race, why do you always see things in a racial lens?” Her response to her colleagues stated, “I have to because I live in this body every day!”.
4. Having to work twice as hard as their Caucasian colleagues
5. Mindful of how they respond to their colleagues (stereotyped)
6. Systemic issues within higher education and the workplace
   ▪ Rhonda shared: “It continues to be a very stacked deck, and I like to say the race card is not a card, it is a fact!”.
7. Low pay ≠ Worth, for amount of time worked, despite education/certification.
• Importance of Giving Back by Mentoring women and students of color. (RQ3)
• Mentoring had a positive effect on each of them and they want to mentor others as it’s their passion and provides an intrinsic reward.
• Attributed their current success to their mentors and their own personal motivation.
• Their motivation to give back is also a reflection of their persistence to validate experiences and ensure others do not encounter the injustices they have faced.

Amber shared: “Mentoring is critical because we have to lift as we climb. We must go out of our way to ensure that other WOC who are interested in public health, get a chance to benefit from my knowledge and experiences, so the world won’t be quite as rough for them”.

Paying It Forward
The Need To Establish Formal Mentoring Programs

• Wished they had a mentor when an undergraduate/graduate student.

• Some of the women experienced bias and barriers as students, that continued into their careers.

• The limited number of faculty who are WOC would require Caucasian men and women faculty to serve as allies, sponsors and mentors.

• Opportunities to engage with other women of color a vital component of formal mentoring programs, especially if there are no WOC within the department.
Definition of A Mentor

• **Mentoring**
  - Traditionally, mentoring is viewed as a dyadic, face-to-face, long-term relationship between a supervisor, and a novice student or professional that fosters the mentee’s professional, academic, psychosocial or personal development (Casimir, Ng, Yuan Wang, & Ooi, 2014; Dominguez & Hager, 2013).
  - A mentor advises wisely, through an active, and engaging process with the intent, purpose, spirit, and passion when helping others (Evans & Forbes, 2012).
  - McGlowan-Fellows and Thomas (2004) emphasized that mentoring is a method of passing knowledge, skills, attitudes, and values in a way that not only helps with initial career development but also has a long-term effect on a person’s personal development.
  - The mentor is often considered as someone in a position of power, with respect to the mentee, who offers career-enhancing guidance, and psychosocial support by offering encouragement, counseling, confirmation, and friendship to help the mentee/protégée develop a sense of professional identity, and greater self-confidence. The mentor often introduces the mentee to key personnel and helps them steer complex systems in their field.

• **Formal Mentoring** is often defined as a structured support system, where a more experienced person is assigned to teach, guide, train, and sponsor (Desimone et al., 2014; Hunter, 2011).

• **Informal Mentoring** is established without guidelines and develops spontaneously. The mentee usually views the mentor as a role model, while the mentor commonly has a vested interest in the mentee (Desimone et al., 2014; Hunter, 2011).
**BENEFITS**

1. Increased self-confidence
2. You can connect with more than one mentor
3. Can enhance values related to field of enquiry or to program of study
4. For women of color, it is the only significant predictor of success (*Faison, 1995*)
5. Helps expose those to opportunities in their fields, offers guidance and advice based on experience, and provides support, encouragement, and access to professional networks for further career development

**CONS**

1. Requires established boundaries, Potential privacy issues.
2. Mentoring with gender and ethnic differences
3. Mentee and Mentor apprehensions and expectations
4. Communication Challenges
   - Listen for nonverbal cues (e.g., long pauses, voice tone, tempo, volume)
   - Push for specific information, clarify meanings
   - Summarize agreements
   - E-mail
STEP ONE: KNOW THE BASICS

- Mentees have to reach out to potential mentors.
- **Three** critical elements:
  - Respect, Trust and Listening Skills
- Types of Mentoring
  - Natural, Situational, Supervisory
- Stages of Mentoring:
  - Initiation Stage, Separation Stage
  - Cultivation Stage, Redefinition Stage
- Know the Myths
  - It only happens on a long term, face to face basis.
  - Mentors need to be older and more experienced.
  - Only the person being mentored benefits.
  - Taking the time to mentor decreases productivity.
  - Professionals are too busy to have time for mentorship.

- You **MUST** establish boundaries for the mentoring relationship.

**Things to Consider:**
- Work ethic
- Compatible hours
- A sense of trust and openness

**Know Yourself**
- Know your industry
- What do you bring to the table?
- What do you hope to accomplish from mentoring? *(expectations)*
- What do you as a mentee need developmentally.

**Common Interview Questions:**
- Why do you want to be a mentor?
- Have you been a mentor before? When? How long?
- Tell me about your career, and the path you took to get here.
- Tell the potential mentor what you need developmentally and what you want out of the relationship.
- Ask them how they can support you.
- Ask if this feels like a good match.
- What are their strengths and areas of growth?
Types of Mentoring

**Natural**
- Natural mentoring occurs all the time and always has.
- It happens when one person (usually senior) reaches out to another, and a career-helping relationship develops.
- Research shows this type of mentoring most often occurs between people who have a lot in common.
- We are usually more comfortable with those who are most like ourselves.

**Situational**
- Situational mentoring is usually short-lived and happens for a specific purpose.
- An example would be when one worker helps another with a new office computer system, or when someone goes on an “informational interview” with someone who is in a career they are considering.

**Team**
- One mentor is unlikely to fulfill all developmental needs...
- Team Mentoring is based on accomplishment as a team effort. One Mentor may work with the Mentee/Protégé in a specific skill/competency area, while another Mentor may be working with the Mentee/Protégé in a networking and career path.
- Usually mentoring is a one-on-one relationship. But by using team Mentors, each Mentee will have several “experienced, well-established members of their profession” who can fulfill the various mentoring roles.

**Supervisory**
- Very important.
- Impactful supervisors mentor their subordinates, in some form.
- Drawbacks
  - May not be a “subject matter expert”
  - Heavily tasked
  - Comfort levels
STEP TWO: USE SOCIAL MEDIA

Seek and yea shall find!

1. What social media platforms work for your industry?

2. Connect with potential mentors via social media.

3. Reach out via social media but don’t go overboard. Leave a comment on a post prompting a discussion, re-tweet an interesting article and look for opportunities for personal connection.

4. Build up a rapport with your targeted mentor, then ask for advice and mentorship.
Finding A Mentor

STEP THREE: BE OPEN TO USING A VARIETY OF COMMUNICATION METHODS

1. Facebook
2. Twitter
3. Skype
4. LinkedIn
5. Instant messaging systems

1. Group vs. Individual
   a. Meetup
   b. Twitter Chats
   c. Google Duo/Hangout

2. Digital Communications
   a. Email
   b. Texting
   c. Phone

3. Online Courses
## Mentor Do’s and Don’ts

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<th>DO</th>
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<tr>
<td>• Have reasonable expectations</td>
<td>• Dominate the relationship</td>
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<td>• Be a resource and provide honest and</td>
<td>• Seek out a protégé</td>
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<tr>
<td>respectful feedback</td>
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<tr>
<td>• Allocate time and energy</td>
<td>• Make promises, and not keep them</td>
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<tr>
<td>• Help the mentee develop an</td>
<td>• Do the work for the protégé</td>
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<tr>
<td>appropriate development plan</td>
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<tr>
<td>• Recognize mentee may be</td>
<td>• Manage the protégé as a supervisor</td>
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<td>uncomfortable asking for help –share</td>
<td>would</td>
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<tr>
<td>some career experiences</td>
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<tr>
<td>• Mentee sets pace of relationship</td>
<td>• Be a Know-It-All</td>
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<tr>
<td>• Extend mentee’s developmental</td>
<td>• Go outside your expertise</td>
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<tr>
<td>network – suggest additional mentors</td>
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<td>to address unique needs</td>
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## Mentee Do’s and Don’ts

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<th><strong>DO</strong></th>
<th><strong>DON’T</strong></th>
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<tbody>
<tr>
<td>• Initiate and drive the relationship</td>
<td>• Be an expert</td>
</tr>
<tr>
<td>• Identify initial learning goals</td>
<td>• Know all the questions they should ask</td>
</tr>
<tr>
<td>• Seek feedback</td>
<td>• Fit all learning into one mentoring relationship</td>
</tr>
<tr>
<td>• Take an active role in their own learning</td>
<td>• Look to the mentor for all answers about their work</td>
</tr>
<tr>
<td>• Initiate monitoring and closure sessions</td>
<td>• Be submissive in their relationship</td>
</tr>
<tr>
<td>• Allocate time and energy</td>
<td>• Unhealthy expectations</td>
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<td>• Follow through on commitments or renegotiate appropriately</td>
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Mentoring Red Flags

• Unhealthy Boundaries
• Poor Communication
• Other un-happy people
• Stress, or anxiousness
• Mismatched priorities
• Lack of trust
• Conflict
• Morals

"There is no lack of KNOWLEDGE out there... Just a shortage of asking for HELP"
### Successful Mentoring Strategies

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<tr>
<th>Strategy</th>
<th>Mentor</th>
<th>Mentee</th>
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</thead>
<tbody>
<tr>
<td>Cultural Competence</td>
<td>• Know biases</td>
<td>• Share knowledge</td>
</tr>
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<td></td>
<td>• Be an example</td>
<td>• Ask questions</td>
</tr>
<tr>
<td>Maximize use of Resources</td>
<td>• Conferences (present, attend, support)</td>
<td>• Conferences (present and attend)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Grant writing/classes</td>
</tr>
<tr>
<td>Use Technology</td>
<td>• BE educated</td>
<td>• Diversify tech skills</td>
</tr>
<tr>
<td></td>
<td>• Practice</td>
<td>• Share knowledge</td>
</tr>
<tr>
<td>Have a TEAM</td>
<td>• Be COMPETENT</td>
<td>• Build your team</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Healthy Boundaries</td>
</tr>
<tr>
<td>COMMUNICATE, Communicate, Communicate</td>
<td>• Be clear, provide timelines</td>
<td>• Provide Agendas</td>
</tr>
<tr>
<td></td>
<td>• Adhere to timelines</td>
<td>• Adhere to timelines, when in doubt ask</td>
</tr>
</tbody>
</table>
Recommendations

- Schools of Public Health/Departments of Health Education & Promotion.
- Be aware of and conscious of the double oppression WOC may or have endured.
- The need for cross-race and cross-gender mentoring relationships, with an emphasis on sponsorships for White colleagues.
- Make diversity and inclusion efforts a part of a leader performance evaluation.
- Professional Associations
  - Develop formal and informal mentor programs (academia, workplace and professional organizations).
  - Conduct and/or expand current studies to include diversity, identity and inclusion.
Implications for Practice

• PWIs should be conscientious of their university and local community’s support for diversity and inclusion, and any areas, departments that can hinder cultural shifts.
  “Amber shared that her race impacted her as she worked at PWIs, who sent her to conduct presentations in areas where racists lived and would hassle her until she left the county.”

• Mentoring helps WOC have upward mobility in their career and leadership opportunities.

• This study exhibits the significance of WOC in all ranks of administrative leadership.

• Provides a lens of inclusivity to administration how to support and retain WOC
  “Understand that when they are hiring, no matter what capacity, if they can look around the room and they don't have anyone that does not look like them, it is problematic!”

• Impacts college health promotion/health educators regarding WOC practitioners

• This research gave voice to the lived experiences of WOC health educators, and mentoring within public health, areas not studied enough.
Summary and Conclusion

• Mentoring efforts within public health academic programs and the workplace are truly needed.
• Professional organizations must ensure diversity and inclusion is more than a statement.
• WOC health educators are resilient, self-determined to persevere even when facing barriers and feeling uninvited and unwelcomed in the workplace.
• Opposition hasn’t stopped these women from advancing in their career but has motivated them to try and ensure no one else must endure what they have, and if they do, they are prepared and supported.

“We are here as mentors to make that path, not just blaze a small path but to make that path wide and as long as possible for them, so that when we move out of the way they can go that extra mile. And more of them can go!” - Rhonda
Q&A
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