

Rippel — Unsung Stewards Podcast Transcript

Season 4 | Episode 3 | Nate Boateng

Strong Partnerships Are Helping to Create a Thriving Lehigh Valley

[00:00:00] **Becky Payne:** Welcome to season four of Unsung Stewards, a podcast series presented by the Rippel Foundation. I'm Becky Payne, President and CEO of Rippel, which is dedicated to fostering equitable health and well-being. This series spotlights and celebrates individual stewards, people committed to working with others to create the conditions that everyone needs to thrive.

[00:00:22] At Rippel, we pursue a future where everyone thrives with no exceptions. Rippel and our partners have dedicated ourselves to building that future, which starts with building the will among others to join a growing movement to thrive together. This season on Unsung Stewards, we're talking to some of our strongest colleagues from within that movement.

[00:00:42] They are advancing equity and thriving in their communities and bringing others into this work.

[00:00:49] Today, I'm pleased to welcome Nate Boateng to the podcast. Nate is Vice President of Community Impact and Engagement at Valley Health Partners in Lehigh Valley, Pennsylvania. Nate understands that working towards a thriving community must be a shared goal, and spends his days weaving the vested interests of his own and other organizations to, as he says, row in the same direction towards a healthier community for all people.

[00:01:14] Nate's story of stewardship walks us through the family legacy he upholds, his work, and how he sees himself in the movement to thrive together.

[00:01:21] Nate, welcome. And thank you for being with us. I'd like to start with giving our listeners an opportunity to hear a little bit about your story of how you came into this work, your personal reasons for why you began the work that you do.

[00:01:38] **Nate Boateng:** Let's see where to start. I've been in healthcare administration kind of my whole career. I would say the last 10 or 15 years specifically in the more administrative and community health oriented side. I think my mom and my grandfather, I think were my two biggest influences. When I was a kid, my granddad was a lifelong civil rights activist.

[00:02:02] He was born in Springfield, Illinois, and his parents were involved in the committee that Helped form the original NAACP and in my family roots has been just the desire to work towards the betterment of humanity, right? That's just what the family business has been in all sorts of facets. And in all kinds of sectors.

[00:02:26] And so he was just a huge inspiration to all of us, my entire family. He passed away when I was 14, which I will say definitely, I don't want to say it threw my life off track, but it certainly was a major sort of disruption in my path. I had struggled in school. I was like one of the kids in the eighties that was like, it was very clear that I had ADHD before that was really a thing, but he was a guiding light in terms of keeping me on track.

[00:02:54] And so without sort of guidepost, I struggled in school, ended up dropping out in high school, met my then girlfriend, now wife. So we had a baby when we were teenagers. So there was a lot of sort of things in the mix and through a lot of family support, I had a wonderfully supportive family as did she. Our moms together helped us figure out what our path was, start our undergrad degrees, and get through school, and end up in careers that we may not have seen ourselves in originally when we were kids. But certainly I think for both of us, me and my wife Jenna, both were oriented towards, again, that idea of just working on behalf of folks and just trying to better our communities.

[00:03:41] And so that's how I got into healthcare. Initially, I worked in a pharmacy and then slowly got an interest in community health, started my undergrad degree, moved into community health, did some data and communications and program development. And was in that work for over 10 years, and then the FQHC thing came up.

[00:03:59] I didn't really know much about them, but there was one almost literally next door to where I had been working, and I decided to make the switch and landed at Valley Health Partners Community Health Center, which is an FQHC look-alike based in Allentown, Pennsylvania, and have been there for two and a half years, and I will say it's been, you know, the last five years of my career has been definitely the most rewarding time.

[00:04:21] I think I've gone through getting my education and learning along the way and just the combination of life experience and meeting folks along the way has landed me in a spot where I feel privileged to continue to work in this space on a more senior leader level.

[00:04:36] **Becky Payne:** So that's a really powerful story. You are a living example of someone who had a lived experience, emerged through that experience with a lot of support.

[00:04:47] Family support and are now working in settings where you have a real opportunity to relate, but also give back and shape, make decisions. So I wonder if you could, before we go deeper into that, help our listeners understand what is an FQHC or a federally qualified health center.

[00:05:06] **Nate Boateng:** Sure, Federally Qualified Health Center is known as a community health center.

[00:05:11] It was a program started by the federal government in the 60s under the Johnson Administration. It's an anti poverty, it was a sort of safety net health care provider. And so there are thousands of community health centers across the country. There's 50 in Pennsylvania. Valley Health Partners is a Federally Qualified Health Center look-alike, which is a little bit of a mouthful.

[00:05:32] And without getting into the nitty gritty details there, look-alike does all of the same things that a standalone community health center does. We're just not eligible for federal grant funding. That's the only functional difference. And so Valley Health Partners was started in 2020, and we were designated as an FQHC look-alike in 2021.

[00:05:54] **Becky Payne:** So, for those in communities who may not be aware of their qualified health centers or any community health centers, I think it's really important for them to seek them out, to learn a little bit more about them, especially when you tie back to the origins in the war on poverty and the broad context in which they were created.

[00:06:16] They're natural allies in this movement to thrive together. Their natural understanding of what the vital conditions and social determinants of health are and mean and how to address them. I wonder if you want to say a little bit more about that baked into a community health center's DNA to think about the whole community.

[00:06:34] **Nate Boateng:** Yeah, certainly. We view the way that the National Association of Community Health Centers talks about FQHCs is that we're in a movement, like we're in a movement together and we're all I agree with what you said. I think that folks should seek out their community health centers. They're pretty cool places.

[00:06:54] Community health centers across the country take care of a total of about 31 and a half million patients per year. It is the biggest primary care, sort of, network that there is in the country. I didn't really know about them until, you know, 2019 or so, and it has been some of the most, like I said, some of the most rewarding work that I've done in my career at the Community Health Center that we've got.

[00:07:16] So I, my, last two roles at Lehigh Valley Health Network, which is, for the listening audience, it's a large health network, in the Lehigh Valley, sort of Eastern Pennsylvania, that the closest you could get to the kind of work I wanted to do was in the Department of Community Health and what was then called the Office of Transformation.

[00:07:39] And so I worked on a team that did a couple of things, managed the Network's Community Health Needs Assessment under the Director I was working under with our small team managed that across the entire network. And the cool part of that is you're doing community collaborations, you're working with community organizations in the sort of SDOH and vital conditions focused areas.

[00:08:03] Again, trying to improve the factors that affect health, right? That was the goal. But what I really, when I turbocharged that is when the Leonard Parker Poole Institute for Health was created. So that was a former sort of philanthropic trust organization that was sunseting, but had some significant funding still available.

[00:08:23] They would take ideas from national experts and try to apply them where appropriate locally and do that sort of place based work on the neighborhood level, like not necessarily trying to tackle an entire city or zip code. Their belief was, and our belief at the time, was that if you focus on the block level, you can start to affect change at that level and then take it to other neighborhoods.

[00:08:50] And so I was doing some data work for them and some communications. But what I found myself missing was really supporting the people on the ground. And so when the role at Valley Health Partners came up, I reached out to the CEO and asked her about it. And she said, I absolutely think you should apply.

[00:09:07] And the role that I started in oversaw the communications work, community partnerships, which was definitely the coolest part of the job, and the government relations work. And so the community partnerships, the coolest thing about it was FQHCs are mandated to at least attempt to forge community partnerships with local organizations.

[00:09:32] Again, focused on sort of vital conditions, SDOH type work. And so it's like a puzzle, like you're trying to figure out how can both organizations work together in a way that's meaningful for both organizations versus, We did not want to approach our partnerships from a perspective of, hey, send us patients and they'll be healthier and that will help you.

[00:09:52] And so we have over 120 and counting. And I would say about half of those we are actively, regularly working with and have some sort of active partnership with that, again, is on a regular basis affecting folks coming to both organizations. So that's definitely been the most rewarding work. I think the government relations stuff is cool because you get to advocate. elected officials about community health centers and the services we provide. We like to tour folks around cause we are ranked in the top 10 percent for health center quality across the country and the communication side, I oversee the department that has that sort of is the voice of the health center, right?

[00:10:32] Like I got to tell our story publicly along with my team. And again, I think the cool thing about FQHCs is you find that no matter where you go, other FQHCs have a similar story. So you find like minded folks, you build a little community across community health centers. There are three community health centers in the Leon Valley.

[00:10:52] There's no competition. We try to collaborate wherever possible. So it's just been really like the pinnacle for me in terms of the work I've wanted to do in healthcare.

[00:11:02] **Becky Payne:** It's really fascinating, and I think it's a compelling story about coalition building, and you're really shining a light on that lack of competition and finding the way you structure those partnerships.

[00:11:15] We've talked a little bit about, this growing movement to thrive together. We believe that it is on the rise, there's momentum, and it involves people like yourself, people who we would refer to as stewards, working with each other and within communities towards collective well being. So you just gave a wonderful example of that.

[00:11:34] But it's not to be taken for granted, and it really does require transforming the way systems work, which are not currently set up for all people to thrive. So I wonder if you could reflect a little bit on where you see yourself in that movement.

[00:11:48] **Nate Boateng:** So it's a wicked problem, right? Trying to change a system.

[00:11:52] I think where I see myself personally is when I applied for my job and was asked, what would your approach be to telling the health center story? And I said, we're just trying to improve the health of our community and specifically our most underserved community members, right? Traditionally underserved community members.

[00:12:13] And what my approach would be from everything I've seen is I want to tell the authentic story of the health center. There doesn't need to be any spin. There doesn't need to be any like marketing shine. It's really about collecting stories of patients, clinicians, staff, and telling sort of a mission driven story.

[00:12:33] Everyone here is working really hard to take care of folks who need it. And so the way I think we've successfully put so many partnerships together is organizations across. The spectrum are trying to do that same thing. And so when you talk about coalition building, obviously we do healthcare really well.

[00:12:51] There are some folks that do housing really well. There are some folks who do legal assistance really well, veteran support, right? So like, how can we all

be rowing in the same direction? And it's hard when nonprofit work is tough because everyone's on a tight budget. You're always worried about the next grant or the next series of funding that you have, but when you break it down to the base level of trying to improve the lives of our community, that's what everyone's doing, and so you just try to find common ground.

[00:13:20] So, I see my role, personally, as trying to build as large a coalition.

[00:13:28] **Becky Payne:** It's wonderful. And we talk often about how do you bring others off the sidelines into the movement. And I think you're hitting on something. I wonder how you feel about this, that so often we set up that opposition or that competition, especially in the non profit space where you, our systems have forced us to compete for that.

[00:13:49] Similar pots of resources, but it sounds like you're approaching making the case, bringing people in, in a very different way that speaks less to what we can't do together and more about the values we share and the vision for the future and the work that we can do that is building off of each other. Do you want to say a little bit more about how you approach that and what you think it takes for others listening who may not have The current coalition that you have in place, where could they get started?

[00:14:22] **Nate Boateng:** I think understanding where you are, right? So if you are working in a small organization, perhaps you're underfunded, you're struggling to make things work. That can be a real hard situation, but what we try to do when things get hectic, which certainly they do in the community health center world, is just reorient to where we want to go.

[00:14:45] And then again, you can try to find resources that may be able to assist you. So we regularly are sort of just doing I guess for lack of a better term market research about what organizations are out there doing what because folks pop up all the time sometimes folks go away and so you just need some sort of understanding of what's in your community currently and so it's a good practice just to find that out.

[00:15:09] So staying in contact with any partners that you're working with and also if you have the ability to offer volunteer opportunities or things like that. There's always folks who, you'd be surprised how many folks there are that just maybe they can only give you an hour or two, but like they're, they have some sort of utility expertise that they can bring to your organization that may be helpful.

[00:15:32] And then for folks who are, I want to help, I don't know how to get involved. I feel out of the loop. I would advise you to just check with your organization. There might be things happening at your organization that you're not aware of that are ways for you to get involved. If you have the capacity, I do not like, I do not have the capacity to volunteer between kids and work. I just don't have it. So

I want to be respectful and not just say that folks should volunteer, but if you have that capacity and want, you can do that. If you're struggling at your organization, I would advise you to just look around and see others in the space or spaces that can support you and ask for help.

[00:16:07] Do not be afraid to ask for help. What I have found over the years time and time again is when there are folks working in like the good fight, there's always folks that are willing to lend a hand. And even if it's talking things out like that can sometimes be helpful. So just, I would say get, if you need help, get help where you can get it.

[00:16:29] And if you want to help seek it out.

[00:16:31] **Becky Payne:** I love that you added volunteering into the mix. Admitting not everybody can volunteer, but I think the point of coalition is having clarity that there are lots of things that need to happen. Everybody doesn't need to do all the things. But having a conversation and knowing enough about what each other needs and has in terms of assets lets you piece it all together into a whole. And we know that those investments and belonging and civic muscle are how we have abundance versus scarcity in our communities.

[00:17:07] I want to go back to your sort of arc of your story, going back to your grandfather, your experience as a teenage parent, supportive family systems, and where you and your wife and your family are today.

[00:17:24] You've referred to the systems failing you, having undiagnosed ADHD and just all the many ways that as a youth growing up in a community, systems failed you. So I want to invite you to reflect on, can you imagine Nate growing up in a community, same life experiences, but in a community that had invested in the vital conditions?

[00:17:48] If you think aspirationally about what we're all working toward in that, how might your experience have been?

[00:17:55] **Nate Boateng:** I always remember one of my undergrad professors talking about diversity and this was like way back before we were having national conversations on diversity and inclusion, right? But the way she would put it is like the day that we have overcome our systemic issues around race and gender is not necessarily when we are all the same, but like more when we're celebrate, we're all just automatically celebrating the diversity that we have and honoring traditions and, and not trying to beat those down in ourselves and get to some sort of flat sameness.

[00:18:32] And so I think the same thing with, with, to your original question, what would it have looked like in a community that sort of is peaking on the vital

conditions, it would be just supportive. It's the amount of headwinds you face as a teen parent. I was a teen dad, which is probably 20 times easier than being a teen mom. We just, you just face systemic headwinds. All of the social supports that are built in have these rough edges that sort of are, I don't think designed, but in nature just deter you from taking advantage of them.

[00:19:09] So I think like a place where we have social supports in place for folks. And they don't have to feel shame going to utilize them where it's just sort of part of the natural order that it's okay to have a system where you have folks who are well off and folks who are less well off, but there's not such a delta that folks are suffering under those conditions, right?

[00:19:33] There's four or five of those conditions that if you have, you can have this sort of thriving community. And I feel like when I was a teenager, if a couple of things were different, I would have likely been on a slightly different path that may not have been so bumpy. And again, if I didn't have the family supports.

[00:19:50] Who knows where I'd be today, right? Certainly not on this podcast.

[00:19:53] **Becky Payne:** I'm glad you're here. I'm glad you're sharing our story. And it's a wonderful story. It's a beautiful story of you and your wife and your family. And now you're both giving back in careers in your community in ways that we're all enriched for.

[00:20:07] I want to spend just a minute talking a bit more about how you see, how you think about "all" as a word, as a concept. We talk about thriving, all people in places thriving with no exceptions. You mentioned diversity, equity, inclusion. There's a lot of upheaval and controversy and blowback, some retreating from commitments, and some leaning harder into commitments.

[00:20:37] And I think a lot of questioning about where does all fit in our society, in our values as a country. I'm not going to ask you to tackle the whole country unless you want to, but when you think about your community and think about, The long arc of getting to all, laying the breadcrumbs on what has to happen, what the investments need to be first in order to achieve all. Why is it so important that we prioritize those communities who are struggling and suffering the most? Which our systems, our data, looking around, clearly tell us are people of color, people who do not have access and means to wealth. and the vital conditions, but it's disproportionate for people of color in this country.

[00:21:31] So can you talk a little bit about how you balance the vision, the aspiration, the value of getting to all? But what it calls for us to do in prioritizing specific populations and actions in this moment first.

[00:21:45] **Nate Boateng:** The country has never really dealt with, in a serious way, the legacy of how it started, right?

[00:21:51] We have this idealistic vision of how the country started. Working hard and revolution and all these things, but we just separate the slavery part. There's some fighting in the history area about in schools today about what we teach. But the folks are aware of slavery, but they don't necessarily view it as the foundation of why the country was successful out of the gate.

[00:22:15] And I think we obviously feel the lingering effects of not looking at that seriously and not taking that seriously today. And I think my struggle has always been the fact that I'm realistic in my view of acknowledging that I don't think that us as a collective will ever get to a point where we can rectify that history.

[00:22:39] But that does not mean that we can't continue to build a wide, broad coalition of trying to better our community and get to that all that you mentioned, right? We may never get there, right? It's like Martin Luther King famously said, I'm not going to get there with you, but that doesn't mean we stop.

[00:22:57] So I think if we can move a yard in my lifetime, that's better than not. And so I think when you find other like minded folks who have that same sort of general orientation to their work and the way that they see themselves in society, you can inch towards all. Again, because I think I'm not, I am idealistic and I'm optimistic.

[00:23:23] But I'm not optimistic enough to think that we will ever seriously fix some of those problems, but maybe we can overwhelm them, in time.

[00:23:33] **Becky Payne:** I like that concept of overwhelming. Part of what you're giving voice to is the idea of legacies and really thinking about what kind of ancestors we want to be for future generations.

[00:23:43] So in that frame, when you think about being a good ancestor, how do you approach sharing your vision for what that means, and how do you find and spot the other people who share that?

[00:23:58] **Nate Boateng:** In terms of, how I view legacy, I've talked about them a bunch, but my grandfather is really my idealistic view of how I want to leave the world.

[00:24:08] And I think what, as I've grown older, what's funny is you have this mythic vision of somebody like that when you're a kid, but as you get older, you get all the anecdotes about the incredible stuff he did and the work he did in the day in day out grind that he did similar to what we're all doing now in this space, but that he was a guy.

[00:24:28] He's just like a guy. And so, if he's just a guy and he made this massive impact in his community over time, then I may not make as big an impact, but I should try, right? I should absolutely try to do that. And I think our influences and our ancestors definitely influence what we do and where we go.

[00:24:50] And that's how I view it. We all come to it differently, but I think that again, when you can find like-minded folks in your community, big, small, rural, urban, there are folks doing the good work in this space and they stick out if you look.

[00:25:06] **Becky Payne:** And what's so important. So I would honor your grandfather as a steward.

[00:25:12] And one of the things we talk about, the reason we talk about stewardship versus leadership is to honor the fact that everyday people who can be just guys, just girls living their lives in whatever role they're in an organization, in a community, everyday acts and stubbornness over time can result in transformation.

[00:25:36] And you may not see it in the day to day, and you may not put that mantle on yourself, but everybody can show up and contribute their talent, their ideas, their contributions to their community. And when you pull all of that together into one, it's orders of magnitude bigger and capable of taking on the change that we are all aspiring to do.

[00:25:59] Time will tell. The long arc of looking back is when you get to say the day to day grind so hard, doesn't feel like I'm making progress. And then suddenly you look back 10 years, 20 years, 30 years. You're like, wow, we did that. Who would have thought? And that's, I think, one of the beautiful things of the concept of stewardship and why talking to people like you and being able to share your story, because in sharing your story, you are sharing multiple other people's stories.

[00:26:29] And suddenly people listening can see "Oh, I don't have to be the person who wins the Hero award and is on national television. I can keep doing the thing that I'm doing to connect to my neighbors, to help, to speak up in city council meetings, to contribute my talents." That counts.

[00:26:46] We could talk for a long time, but I want to bring us to a close.

[00:26:50] And although we can all acknowledge they're many, no shortage of problems to tackle and lots of things standing in our way of the future we are looking for. I actually want to ask you to close us out with sharing a little bit about when you think about the future and the work that you're doing and the path that you and your community are on, what's giving you hope?

[00:27:11] **Nate Boateng:** The work we're doing collectively is working. I think folks sometimes get bogged down and feeling progress is not big enough. We're not

making big enough leaps in our space, but it's working. If you look at where we are now versus where we are, where we were, let's just go back to COVID. Let's go back into the depths of the pandemic.

[00:27:32] We've made progress to get back on track to where we were before that. So that's from a healthcare perspective. And so I think I'm most optimistic at that like this work works. The famous saying progress is not a straight line, right? Sometimes we go backwards, sometimes we get knocked down, but if you keep plugging along, you will.

[00:27:52] The slow progress is the important part, and just trying to move the needle forward is what keeps me going.

[00:27:58] **Becky Payne:** Nate, thank you so much for being here.

[00:28:00] **Nate Boateng:** Thanks. Yeah, of course.

[00:28:02] **Becky Payne:** Thank you for listening to this episode of *Unsung Stewards*. I want to thank today's guest for joining us and for all their work to improve the communities they serve.

[00:28:12] I'd also like to thank the team that makes this podcast possible, including Molly Belsky, Brad Girard, Laila Hussain, and Amanda McIntosh. If you liked this episode and want to hear others, [click here](#). You can rate and review this podcast or follow us on your favorite podcast app so you'd never miss an episode.

[00:28:29] I'm your host, Becky Payne, President and CEO of the Rippel Foundation. To learn more about our guests and their work, please refer to the links and information on our website at [www. Rippel. org](http://www.Rippel.org). That's R I P P E L dot O R G. We all hold deep gratitude for those who have been willing to share their stories with us.