

There is a sign outside of the School of Nursing that lists the core values- respect and integrity, equity and justice, wellbeing and sustainability and innovation and discovery, with the hashtag UMB to the Core. The sign reminds me of an old Baltimore saying, “**Baltimore to the Core**”. In this phrase is a message that reveals a deep love for our city and its beauty in good times and bad. I feel extremely blessed to be at home in Baltimore and at UMB. As a child, I walked, shopped, and passed this very street on my way to the library on Cathedral Street. The library was my favorite place, my safe haven where I hid out reading books and old newspapers. Looking at this neighborhood now, a lot has changed, including me.

Being here in person with you all is so exciting, there is so much life and energy in this space. It is so hard to believe that many of us have been unable to connect in this way for nearly three years. We have all experienced total or partial social isolation. Like so many of you, I have loved ones, colleagues, and friends that I missed seeing and hugging. My 79-year-old mother refused all visitors, including me, for a year and instead opted to wave hello to us from her door. I called her, sent her virtual hugs and text messages, but none of this could replace a real in-person interaction. We all have our stories of isolation because social isolation became a household word during the pandemic. I felt it, you felt it, we all felt it.

But what if the social isolation that we all just experienced was a way of life? What if your experience of isolation from family and friends continued long-term? What if you were afraid to let your child out to play because you knew the loud boom you just heard was not a car backfiring? What if you are an aging adult who prefers to hide behind a bolted door rather than catch two buses for a two-hour journey to a health provider to get your blood pressure checked. This depicts social isolation in my childhood neighborhood. Experiences with social isolation are concerning because social isolation is as deadly as smoking 15 cigarettes a day and increases the risk of mental distress and premature death, especially for people who were socially isolated as children.

People in the neighborhood where I grew up and now work understand social isolation and its health impacts. The impact that you now understand because of what you just experienced during the pandemic. Because of my experiences as a child, I remained curious about social isolation as a nurse researcher. I wondered if families still experienced social isolation and if so, I wanted to see what we could do about it.

So, prior to the pandemic, my research team started listening to community residents in West Baltimore to understand community level social isolation. In these conversations community members shared stories of good times, times when grandmothers brought everyone together, and when it was customary to know your neighbors. They remembered the beauty of Baltimore, from the Afro Clean Block competitions to the painted screens in East Baltimore. They recalled having meaningful social connections with family, friends, and neighbors as children. **Their comments reminded me of the many Sundays that I traveled by bus to visit my grandmother Eliza in Cherry Hill. She worked as a housekeeper at University Hospital. I would arrive, and she would greet me and my sisters with candy and offer us a game of cards. She purposely invested time and energy in us. In exchange, she had some pretty high expectations. She fondly called me Doctor Yolanda and insisted that she could hear**

my name being called overhead in the hospital as she cleaned patient rooms. Like many other grandmothers in the community, my grandmother believed in the saying that it takes a village to raise a child.

My grandmother knew then what I now know about Baltimore's greatest assets – the real power of Baltimore is in its people. Growing up West Baltimore meant my neighbors looked out for me while my parents were at work. Teachers encouraged me to let my light shine even when I felt too shy to raise a hand or say a single word and local librarians guided me to books to answer life's toughest questions. Fast forward to my time at UMB, I was fortunate to have professors like Jeff Johnson and Susan Wosenski in the School of Nursing who listened and helped me explore the root causes of health disparities in communities. They guided me from academic concepts to explain my experiences, introducing me to the concepts of social justice and health equity. Words that I now use to explain why so many negative outcomes that we witness in healthcare and academia today are preventable, avoidable, unfair, and unjust. It is my social connections with my professors, grandmother, and special mentors (like Esther McCreedy and Senator Shirley Nathan Pulliam) that opened the doors for a better tomorrow.

Despite the strong connections of yesterday, many of the community members we spoke to reported that social bonds like those with our grandmothers have diminished over time. They say weakened social ties have occurred not as a personal choice or individual problem but as one that is deeply rooted in community design, social norms, and systemic injustices. One father said, “imagine living on a street with 20 homes; 12 of the homes lie empty, 4 have aging neighbors who are bolted behind their doors for fear of venturing out, so yes, I feel isolated. As a parent, I worry daily about safety, so I resist letting my children play outside even though I know that making social connections is important.” Where you live can impact the social connections you make or do not make and your ability to access the resources you need.

Baltimore is not alone in the challenge it faces. Social isolation is a global epidemic that has been growing in cities all over the US and throughout the world. It's also not just a challenge for older adults or something that happened just because of the pandemic. It has been here for years.

Community members made it clear, that they are not victims who need our sympathy. Instead, they want action and recommended solutions to address the challenges. **They asked that people, like us in academia, listen to them more before acting.** Their recommendations included creating safe places for community members to convene, mentor each other, and have shared discussions on common experiences. They asked that partners advocate with them for increased access to affordable, safe housing, reliable transportation, better schools, healthy food, and healthcare positioned in their neighborhoods. They imagined a day when they did not have to travel out of the community to the social resources that they needed. They wanted recreation centers for their children and effective local bus transportation. **They are no different than any of us! Our neighbors want what we all want, safe places to connect, live, love, work, and play.**

Let me share two projects that are examples of what we can do together when we walk alongside our neighbors. After listening to community members, we wanted to focus on belonging and

wellbeing and The Belong to Baltimore program emerged. The program provided support groups and a family navigator to with parents of young children from West Baltimore to increase social connections and access to needed social resources. After one year, families reported they felt more connected and had diminished social need related to food, housing, income generation, education, and physical and mental health resources. The West Baltimore RICH collaborative is a new project that we are starting soon working with a group of community and healthcare organizations to reduce social isolation and hypertension for residents in our neighboring communities. Partnerships with School of Social Work, the School of Pharmacy, the School of Medicine, and the Master's in Public Health Program were instrumental to the development and implementation of the projects. Most importantly, community members have been actively engaged, as participants and through employment as part of the research team – they are the best! and keep our team grounded and focused on the realities of living in the community. **Janette North Kabore, our program manager, a resident of West Baltimore, raised an interesting point related to the need for tighter social connections between organizations and communities. She called for a movement above and beyond traditional community engagement. Janette coined the term “community marriage” to suggest the need for more deliberate, publicly expressed, and long-term commitments from organizations to the community.**

The time for innovation and discovery to address social factors that impact health is now. In this pivotal turning point, where we all understand social isolation in its negative impacts, now is the time to act. Some of you may think that addressing the social factors impeding health is too big, that the work is beyond what we do at UMB. That the ideas and programs presented are ambitious, and that the expectation and stakes are too high. Yes, this work is hard, but being hard does not mean that it is impossible. After all, boldly facing critical challenges is who we are at UMB! **Tackling big problems and finding innovative approaches is the soul of who we are at UMB.** We were audacious enough to make a difference in the battle against HIV/AIDs at home, in the United States, and across the globe. We were bold enough to say we could help find a vaccine for COVID. And I believe that we can boldly address the social factors that impede health, especially for our neighbors who live just blocks from where we are standing.

We can all start by strengthening our own social connections. Ensuring that staff, students, faculty, and community members entering our environments feel like they belong; by teaching about social justice, health equity, and social isolation in our curriculums; by hiring community members and purposely partnering and investing our time and money in sustainable community-centered innovations. I am grateful that we could gather here today. I do not take social connections for granted given the past few years. I am proud to be here at UMB, to work with great faculty and staff in the SON and across the campus staff and to have the privilege of working closely with our community members. All of us have something to offer creating stronger social connections, none of us can do great work in isolation. I am optimistic about tomorrow and look forward to the future where we at UMB, can look back and say that we played an important role in improving social connections here at UMB and in the neighborhoods we work. I close with the **African Ubuntu saying, “I am, because we are” Thank you!**