A Community Conversation was hosted by the Minnesota Department of Health Center for Health Equity in St. Paul, MN on June 26, 2017. There were 177 individuals in attendance. As an activity, attendees were asked to write on flipchart paper what they can offer MDH and what they need from MDH. Below are the responses. An asterisk (*) indicates a comment that was raised multiple times. Comments are listed in order by those comments raised most often to least often.

What I can OFFER MDH is...

- Student/local/new perspectives ****
- Community input ***
- American Indian advocacy to eliminate cancer inequalities *
- Family medicine/traditional medicine perspective
- Dissertation on community healthy data science
- Knowledge of our community (American Indian experience)
- American Indian Cancer Foundation can offer cultural competency training to non-native entities working with indigenous populations
- Personal experiences working in cultural communities
- Engagement
- Community connections
- Coordinated community action efforts/events
- Culturally tailored resources
- Qualitative data expertise
- Data and focus group results from local HEDA outcomes
- Data based on experience as a service provider
- Data science on community health
- Data from a state health insurance and assessment program
- Leveraging big data science to optimize care regarding health issues
- Survey info shared with the department
- Knowledge about integrating care for people living with mental illness
- Bridging the gap between healthcare community and other health care stakeholders
- Frontline healthcare provider with a broad perspective on creating a healthy community
- Physician support for prioritizing health equity
- Experience with peer recovery support specialists
- Experience bringing commercial tobacco cessation and wellness opportunities to people living with mental illness
What I NEED from MDH is...

- Health data that is broken down by ethnicity for research purposes **
- Training, standards, data *
- Connections to cultural leaders for community engagement *
- Listen to community voices *
- No more grants where we have to bill for services *
- TOP facilitators that are from different cultural groups as part of our activities
- To tackle/address social determinates of health
- Real, equal partnership for priority populations
- Valuing the skills of non-mainstream populations
- Long-term grants (3-5 years)
- Better understanding of American Indian/Native Americans; we have a large population that is underserved; then money to help with programs for preventive health
- A collaborative approach to working with American Indian people
- Working with the American Indian Cancer Foundation to reduce and eliminate cancer inequities
- Community input to MDH legislative report
- MDH partner with community during legislative session to develop information pipeline of what is happening to inform community groups
- Supportive services for those with problematic backgrounds; an all-inclusive rehabilitation program
- Continued funding to address issues of housing stock in north Minneapolis and Saint Paul
- MDH develop pool of diverse, ethnic consultants for paid projects
- MDH develop a speakers’ bureau
- Healing trauma, effective next step after the conversations
- Mni Ki Wakan Sacred Water
- More resources and support for local upcoming public health professionals
- Advocacy for incorporating alternative and complementary medical treatments that are covered by insurance or sliding scale rates
- Information on starting an organization
- Guidance and support as I take on unfamiliar projects
- A job
- Innovation in using social media and technology to engage young parents and teen about their health and resources as well as push-back against bad/misinformation and alternative facts
- Experience assisting seniors in connecting with needed support and medical services
- Help to create a narrative for mass incarceration as a public health problem
- Evaluation technical assistance