

# INCLUSION MATTERS: BUILDING STRONGER ORGANIZATIONS AND COMMUNITIES & NAVIGATING KIDNEY HEALTH

Versiti Podcast: Season 3 - Episode 7 – Part 2

Host: Edgar Daggett

Guest: Kobena-Marcus J. Collins

## INTRO CLIP

**KOBENA:** You know, I got 15 hours a week back, you know, that's 60 hours a month that I was missing of life where I was sitting, just watching TV and, you know, it's not like, I mean, I can listen to books and, and I can do some reading and things like that, so I did. Did that while I was there. But it's also, I mean, it's just time away from the family.

## BUMPER

**EDGAR:** Welcome back to a two-part special. We are back with Kobena now, where he's going to be talking about what he's doing today and a little story about his health and how that impacted his life. If you have not caught up on part one of this special, go back. GO to our Versiti page. Check it out. Like. But we're going to go jump on in. Kobena, welcome back. Let's get this started. And how long has this new interest, how have you been working on, how long has this been?

**KOBENA:** Well, the seeds were sewn in 2016. Okay. When I just created the LLC in 2016 for when I did speaking engagements. Over the past two years, I've been doing more and more speaking engagements, you know, especially as the pandemic grew and a lot of people were doing much more virtual speaking engagements. I was being brought into many more rooms. And then just actually just this year, January of this year, I said, well, this is what I'm doing. And I don't even have my website up yet, so that'll be coming in the, probably by May. It's in the works right now. But I wanna make sure that it's set up to be successful as well. So now this is what I do full-time. I've got a couple client some clients, you know, locally and nationally, and I'm really excited to work about the work that we're doing. It's not even really about my organization, it's about the end result and the impact that we're able to do, you know, partnering

with other people. A lot of this stuff doesn't have to be. You know, recreate it. I don't have to be, oh, it's all under my brand, which I understand branding, but I also understand relationships a hundred. And that's what I'm focused on.

[00:02:46]

**EDGAR:** And that's amazing and I wanted to reach out more, a little bit about that first pillar the aspect of it. Because, you know, it's still in huge growth stage all across businesses in general from small, little business of 10 to 15 people, to those thousand employee organizations. The impact that DEI has on communities has on the actual organization itself. What are your thoughts on it and what is the impact that a DEI either group or sector with a DEI executive at the top, what does that, what impact could that have on organizations and also the communities around it?

**KOBENA:** Yeah, absolutely. I, one thing that you've said is, is having that DEI executive, I feel very strongly and research will, will also back this up, that the most evolved DEI organization is one that has a DEI executive on the C-suite because DEI is not just a people organization. You know, oftentimes it starts off in human resources, which. That it's okay to start there, but that should not be the end. If we're thinking about, you know, the end in mind, I think it's also a good idea to start straight at the C-Suite. Now I say that it, the organizations should have the C-Suite executive as a DEI executive, because, you know, you think about the field that you're in, marketing, you know, if, if marketing is the goal and you don't have diverse perspectives, You know, in the marketing process, how are you actually marketing to diverse people? You're going based on what you think, or even some, you know, there's, there's research, but then there's also the, the anecdotal research. And there's the cultural research. And, you know, numbers don't lie. But you can make 'em talk different languages. Right. And so, there's one, there's you know, creating that buy-in from an executive level. There's another area where having DEI actually embedded into the performance of all employees or all associates within the organization. I think that's incredibly important because, you know, we, how else will we hold people accountable? Yep. Right. And we know, and, and what needs to really be shared is this is one, this is a journey, and two, these organizations are not gonna make a turn in 180 degree turn in a month, a year, two years, three years. It's gonna take some time, but we need to make sure that there's accountability on. Progress on each one. You know it, we're not talking about a jet ski, we're talking about the Titanic. Correct? Yep. It's gonna take a while for that, that big ship to make that turn. And there's gonna be failures. I think there's a lot of times organizations are so afraid of failure and afraid of the perception of failure, both internally and externally. They are really hindered and not able to. Try things at a, at a higher level, at a higher scale. And, and I understand it, especially when you're thinking about publicly traded organizations. Yep. You

know, it's not just the organization. They, the corporation could, could absolutely get it, but they're also beholden to their, you know, their share shareholders. Mm-hmm. Exactly. And, you know, so there, it's not always as easy as just flipping a switch internally. So I get that. And, I think also in addition to that is organizations trying to figure out where are they going? What, who are they gonna be? Are they gonna be the leaders? Are they gonna be the followers or are they gonna kind of be somewhere in the middle? Or are they gonna say, look, or are they gonna be the resisters? Right? Yeah. And deciding where an organization is trying to be will help set that goalpost, so I think those are important things. Ultimately, in order for any of it to work, everybody in the organization, especially the leadership needs to be vulnerable. They need to be transparent and authentic. And again, they need the most important thing, say to create a space where DEI can flourish is being vulnerable. [00:07:32]

**EDGAR:** A hundred percent. And I just actually recently last year was talking about vulnerability. Vulnerability. And it's not just for like that D and I space for everyone as well. Absolutely. And being able to understand, be able to take information in or even just say, I don't know. Yes. And being able to accept that and continue to grow yourself there in that space. And that's something that even myself learned that last year, you know, as you continue to evolve yourself, you know, how do you keep moving forward? How do you keep getting better? And I've seen this from businesses as well, where, you know, they're showing me some kinds of D and I, showing me some. Some intention and whatever they're trying to target. And one year, I'm not gonna say the business's name, but one year, you know, it got a lot of backlash. Sure. But then you saw next year they did the same thing with but with different intentions or maybe a different way. Mm-hmm. And everybody loved it. And they were like, okay, what was the difference? And an article actually came out that they did focus groups, but they also had people just inside the organization that, you know, gave their opinion. Yes. And they were listening. There was a leader at the top, but they were listening to people from the bottom. Like, okay, what do you guys think? What do you guys think? Absolutely. What it all? And it worked. Yep. And they loved it. It was amazing. People the outside community loved it. And I'm assuming this is it. The way they're gonna go. Absolutely. Continue to go and continue to get better.

**KOBENA:** Absolutely. You bring up a good concept of well, a couple things. One is allyship. And so, especially when we're talking about most of corporate America is predominantly white. Mm-hmm. And if that's the case, and in many cases you're talking about from a global perspective, less than 15% culturally diverse people in the entire corporation. So it's almost as if you don't have enough diversity to even create any change within, or to really dive into diversity side or inclusion because you just don't even have the numbers, even

though it's the right thing to do. It makes sense business wise. You just don't have the numbers. So I always recommend organizations to start with allyship. You know, I create talk about an analogy of. We can sow seeds, right? So if you take a perfectly good seed, say you want an apple tree and you put it in a desert, it's not gonna grow. No matter how much water you give it, no matter how much sun you give it, it's not going to grow because it doesn't have the right the, the soil is not fertile, the foundation, right? And it doesn't have. You know, the nutrients it needs. So if organizations want these seeds to grow, and that's the recruitment side, right? So you recruit people, you bring 'em in, but they can't grow because there's not enough nutrients. Nutrients being mentorship, sponsorships, training, development, not just for them, but for their peers. Oftentimes we think about, you know, organizations creating training programs for, you know, the underrepresented. A lot of times they're already trained. It's not them that needs the training as much as those who are making the decisions who are not underrepresented, right? Correct. Their biases, their lack of understanding of cultural competency to recognize the talents that people have from different cultural backgrounds, you know, so adding all those nutrients into the soil in addition to, you know, the sun and the water, you'll end up having a tree in no time at all. [00:11:15]

**EDGAR:** Yeah. I love that representation. And again, it starts from that foundation of what you add in. Yep. Is what you're gonna receive. Yep. And that goes with all aspects of life, not even business, but that goes with everything. Absolutely. The effort that you add you'll get with any, with anything sports, you know business school. If the effort's there, you'll get what you, what you need.

**KOBENA:** Yeah. I, the one thing I'll add to that is direction and intentionality, right? Yep. I used to do a training, a workshop on you know, keys to success. And one of those keys was direction. Cuz I could take a hundred steps and if I'm going in a little circle, I haven't made much progress. Correct? Yeah. But if I know where the direction I need to be going. And I'm taking those a hundred steps. I'm a hundred steps closer to my goal.

**EDGAR:** Yep. Right? You don't have to be by yourself. You can have somebody to lead you there, a mentor, whatever it is, as long as that direction is there.

**KOBENA:** Yep, another thing, just to throw this other thing out in regards to the DEIB stuff, you know, I have, you know, I have what I call the five Hours. Okay. In a general DEI process and strategy is, you know, you've got recruitment, retention, reputation, representation, and resources. You know, we

talk, a lot of times we forget about those resources cuz people aren't on different points in their journey. So we can't expect everybody to, you know, be at phase six at the same time. So we have to give them resources to start at phase one. Right. And so if we don't have those resources for people to, you know, discover it on their own, in some ways we're gonna create an environment for us that's psychologically unsafe for them as well. Yeah. So you know, the other ones I think are a little bit more explanatory, but you, you touched on representation, you know, when decisions are being made are the people that this decision. That are gonna be affected and impacted by this decision? Are they in the room? Yep. And if they're not in the room, have they at least been consulted prior to the conversation and prior to the decision? [00:13:36]

**EDGAR:** Yeah, I think there's a lot of companies that should be asking themselves that question.

**KOBENA:** Absolutely. And part of it's cuz they don't have the people in the, you know, they don't have the people in the organization, let alone in the actual departments. And at the levels, which I think there's value in having people at different levels.

**EDGAR:** Hundred percent. Yep.

**KOBENA:** Because again, it's different perspectives and it gives you, it helps you to instead of, you know, checking boxes, you get to, you know, completely saturate all levels within the decision making process. So you have a more broad perspective and a deeper understanding of how this, this decision is going to. One impact, but how is it gonna be implemented?

**EDGAR:** Yep, exactly. That's when they need to start reaching out to you for that diverse talent.

**KOBENA:** Hey, I'm right there for you. Now, I also have, you know, partners and colleagues that are doing really, really good work in this space as well, that they do more of the executive and the leadership type talent acquisition. You know, it's a organization in Milwaukee called Colorful Connections and they do some fantastic work from a diversity recruitment space. They also do audit DEI audit work. You know, they're, they're a great organization. Their CEO just got finished being honored as Forty Under 40, you know, wow. Doing great things. [00:15:07]

**EDGAR:** That's incredible. No, I'd love to hear all this great work that you're doing. I know the viewers and the listeners are, are enjoying as well because the

impact that you're having on your community from where you came from to where you are now and you didn't have the smooth sailing, you didn't have the, I know exactly what I'm gonna do out of high school, going to college exactly for it, and then I'm gonna get the career right away and be awesome. Live and then retire eventually. It went from, you know, you were like, okay, going to school. Like this teaching. Yeah. Not for me. Then we go a whole other direction and to starting your own consulting LLC, which is amazing. But, and what, you know, what we do here at Versiti is, you know, we have an impact on our community through a medical site. You know, we do the blood donation, we did the transplant kind of OPO side, organ procurement side of things. And even you see people walking around you see the achievements that they've done, but you never see kind of that some of the harder hits that they've had in the future. And you've had one of those hard hits with a transplant that you've had. How did that impact, you know, what went through your mind when you found out that you needed a transplant, and then how did that impact what you were doing at the time?

**KOBENA:** Yeah, thank you. And it, it's a crazy, crazy story. So, I mean, you look like you're in good shape. I wasn't nearly as good shape as, as you are, but I was still relatively active. I was still working out, I was still, you know, physically strong and I went to the doctor for my 40th you know, my 40th my year, my annual checkup. When I turn 40, I do it around my birthday and everything was, you know, mostly fine, you know, a little bit higher blood pressure. But you know, nothing, nothing off of the chart. About two months later, I was doing recruitment at the time. I was at an event. I had a really bad toothache and I came back and was, I went to the dentist and at the time I didn't have really good health insurance. I had insurance, but it wasn't great. And which is, you know, one of those things in, in our health disparities within our communities, where if you don't have really good health insurance, it's another reason not to go. Cause you're gonna have to pay for that. Right? That higher deductible or that, you know, higher bill. And so I went to the Marquette's Dental School and they have their safety guards, which. Thank goodness that they do, because when I got there, I said, went in, my tooth was hurting and they, as a part of their practice, they take your blood pressure and so they took my blood pressure. The young lady looks at me and said, 'how you feeling?' I said, my tooth hurts. Like 'You don't have a headache?' No, my tool TURs are you dizzy? No. My tooth hurts. Mm-hmm. Okay. Well, 'we're gonna give you five minutes and we're gonna take your blood pressure again.' All right. It's high, but sometimes it'll come down. All right. Cool. So, you know, 15 minutes later to take it again. She looks at me again. 'You still don't have a headache?' No. My tooth hurts though. Yeah. 'Is your chest hurt?' No, my tooth does. So she goes, gets a doctor the doctor comes down. Looks at my blood pressure. She takes it again. She says, 'how you feeling?' I said, fine, but my tooth hurts. And

they said, 'we can't do anything for you.' Your blood pressure is 213 over 137. Wow. Whoa. So for those who don't know what that means, I didn't know. I was like, okay, so what are we gonna do about my tooth? But they said, well, anything over 160. Is at high risk of a stroke or a heart attack. And they told me if I didn't have seen to be in such good spirits, they would've had me in the emergency room via a an ambulance. Yeah, they wouldn't even let me drive out. So they made me promised to go see the doctor. I went and saw the doctor some tests, a couple tests later they found, I found out that I had end-stage renal failure. And I needed a new kidney, and within a couple, within a month, I would probably need to be on dialysis. And for those who don't know what dialysis is, dialysis is a process where your blood is taken out of your body, puts filter through like a sponge to get things like phosphorus and proteins and potassium out of your blood, which can cause other health issues. Mm-hmm. And then they put the blood back into your body and it takes anywhere from three to five hours. And you have to do it three days a week, or you can do it for shorter time, five days a week, and again, insurance, all those things. I said, mm, not, not ready to do that. Long story short. And on August 5th, after another second, it was probably like my fifth, second opinion. I was, my numbers were so high, they said, yeah. This is not good. I called my doctor and said, you need to come in today or tomorrow at the latest. And so I went in and started dialysis, an emergency dialysis setup, and they told me, had I not come in that day, I had no more than two days left to live. Wow. And from that day, three days a week for who? The whole process was about five hours. And from travel, getting set up, doing my treatment, being taken off of the treatment, and then getting back to the house. It was five hours, approximately five hours, three days a week, so 15 hours a week. I was still able to work full-time, which many people aren't able to work during this because it can be draining. Like physically draining. A lot of people will fall asleep and not be able to do anything for another four or five hours. And so they can't work. I was very fortunate and you know, again, I was still fortunate, you know, two and a half years later when, on January 25th, 2022, I got the call that there was a young lady who was brain dead and was of match. And so I received my kidney on January 25th, 2020. Two. So this past year, I just celebrated one year with my new kidney, and I am so incredibly thankful for, you know, everybody who's been a part of my process. My family, the clinic, all the ladies at the clinic, all the guys at the clinic. That really became an extended part of my family. Seeing them I see. Saw them more than I saw my own daughter. Mm-hmm. Most of the time. And more than I saw my wife most of the time during less, especially during the week. And so, you know, I use it as an opportunity to make sure that I just share my story so that people know, like, just go get checked out. You know? Yeah. Make sure you pay attention if you, if you're getting headaches, if you're getting you know, nose bleeds or anything like that, just check. Don't wait. Just get it

taken care of. Cuz they could literally say, be the difference of life and death.  
[00:22:54]

**EDGAR:** Yeah. Did you need a blood transfusion during that time?

**KOBENA:** I didn't need a blood transfusion. I just had to, you know, these so it, there was a certain part of it that's kind of scary if you're not a needle person. Okay. There are different ways to do dialysis. There's three main ways. Or two main ways really. One is through like your stomach, they have a setup where they connect to your stomach, your abdominal area. Really, it's not your actual stomach, but your abdominal area. And they filter it out. You can do it in the clinic or you can do it at home or you can use, do it with needles. And those needles go into your arm and they take the blood out. And put the blood back in. Usually it's the arm. It can also be glued. Yeah. But no transfusion. Just a lot of filtering. [00:23:56]

**EDGAR:** Okay. Now and that's, and super thankful that, for, for yourself, for sharing that story. Cuz again, you never know you're, you can be healthy, you can think you're healthy. Everything. You thought it was a toothache. Or maybe it was, but there, there was something way bigger over it. And you never know. It could be you, it could be your friend. And sometimes these things do need transfusions and people like don't understand like what, what will require transfusion? It could be anything. Yeah. Some can need transplant do require blood transfusions cause your levels aren't high enough or too high. And they just need, you know, your body can't withstand having too much blood out of it at a, at a time. So they gotta start get you a transfusion or a car accident. That could be not even your fault. So that's why we always, you know, the importance of health, importance of. Going to hospitals. And the hospitals are there for you. Yeah. And even though sometimes they could be, you know, some information can be out there, meaning they're not there, they're not, you know, with you because of how you look. Yeah. But they're there and because of amazing hospitals are medical team that helped yourself. You were able, you're here today. To be honest, and you're here, you're thriving, and now you're helping out other people in other ways. So we really are thankful for that, for that.

**KOBENA:** Absolutely. It's, it has definitely increased my quality of life. You know, I got 15 hours a week back, you know, that's 60 hours a month that I was missing of life where I was sitting, just watching TV and, you know, it's not like, I mean, I can listen to books and, and I can do some reading and things like that, so I did. Did that while I was there. But it's also, I mean, it's just time away from the family. Yeah. [00:25:48]



**EDGAR:** That, that's amazing. But I wanna say this has been amazing and, you know, when we always end these podcasts, you know, we heard a little bit stories about your career, how you came up, and a little bit on the health side of things. But I want to ask you one question before we start wrapping this up. How do you stand out from the inside?

**KOBENA:** I stand out from the inside by really just being wide open from the inside. Yeah, being as transparent as I can, authentic as I can, sharing and giving of myself to all those around me and not, not really worrying about. You know what people are gonna think if I share my vulnerabilities. [00:26:40]

**EDGAR:** That's awesome.

**KOBENA:** I think that's probably the biggest thing.

**EDGAR:** I want to say thank you so much for joining. For tuning in and for sharing your story and a little bit about your personal and your professional life. I want to thank all the viewers and listeners for tuning in. Like and subscribe is you haven't already. And I want to remind you all of this. How do you stand out from the inside? This is the Stand Out From the Inside Podcast Presented by Versiti