Role of privilege and power in health inequity.

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If you can't explain it **simply,**

You don't **understand** it well enough.

- Albert Einstein
Agreements
All Social Determinants of Health Are Not Equal

**Health Equity Framework**

**SECONDARY DETERMINANTS OF HEALTH**
- Access to Health Care
- Access to Healthy Food
- Good Housing & Neighborhood
- Social Safety Net

**PRIMARY DETERMINANTS OF HEALTH**
- Socio Economic Status
- Education
- Employment

Social Inclusion or Exclusion

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We learn by connecting information to existing framework.

We experience cognitive dissonance when information conflicts with our current framework:

• Deny
• Avoid
• Explain away
• Attack
Process from the People’s Institute for Survival and Beyond
"POVERTY IS NOT AN ACCIDENT. LIKE SLAVERY AND APARTHEID, IT IS MAN-MADE AND CAN BE REMOVED BY THE ACTIONS OF HUMAN BEINGS."

-Nelson Mandela
brief and commonplace daily verbal, behavioral, and environmental indignities, whether *intentional or unintentional*, that communicate hostile, derogatory, or negative racial slights and insults to the target person or group.
1. **Microassault**
   explicit racial derogations that are verbal (i.e., racial epithets), non-verbal (behavioral discrimination), or environmental (i.e., offensive visual displays) attacks meant to hurt the person of color. What people might call old fashioned racism.

2. **Microinsult**
   is characterized by communications that convey rudeness and insensitivity and demean a person’s racial heritage or identity. Microinsults represent subtle snubs, frequently unknown to the perpetrator, but clearly convey a hidden insulting message to the recipient of color.

2. **Microinvalidation**
   communications that exclude, negate, or nullify the psychological thoughts, feelings, or experiential reality of a person of color.

Sue, Bucceri et al., 2007
"You're lucky to be black... so easy to get into college!"
- Old classmate

"You aren't black on the inside"
- Childhood friends

The lack of diversity in this classroom does NOT make me the voice of all black people.

#itooamharvard
That is retarded.

Bisexual people are just greedy.

That is so ghetto.

All White people are racist.

It’s rude to speak Spanish in front of people that only speak English.

I think I have OCD. I’m such a perfectionist.
Microaggressions...

"You're so pretty for a Black girl".

Classmates were upset at needing to read a piece of literature by a Black author.

In speaking about a book that used the n-word, (white) people kept repeating the n word (fully said with the ER)

At a get together at my house, my white friend who met my black friend for the first time kept asking her how she was involved at UMass. She kept explaining she was a medical student, but for some reason he had a hearing block and kept asking, so you are a nursing student?

As chemistry majors, we were joking about Breaking Bad and how chemists are the ones that are able to synthesize drugs. A student proclaimed that we could make a lot of money off doing this at the school because the neighboring city would be a great place to sell drugs. I grew up in that city.

A student of color was struggling in a class I was taking and the professor asked me to talk to her because I am also a student of color. I had to tell her we weren’t really friends and she was shocked and explained that she thought we all were friends with each other.

cause injury.
Microaggressions...

When talking about church a friend told me, "I would be scared to go to a Black church. I don't like dancing around and singing". She hadn't bothered to ask me what my religion, or what kind of church I go to.

Students sharing that because they volunteered in an underserved city that will "pump up" their resumes because they worked in a dangerous setting. I shared that I had grown up in this city and the students were shocked. One asked, "you don’t know anyone who has been shot?"

A friend said the n-word at a party. When I told him I felt uncomfortable with him saying that, he responded by saying "But, you're not even really Black".

I was playing sports during recess and doing better than one of the boys. He then came up to me and whispered in my ear “N*****” I left and cried. I never told anyone until now.

cause injury.
NEW SAFETY REGULATIONS FOR THE EMERGENCY ROOM

NO cell phone use

NO food or drink brought into the department

Patients must remain in the room until visit is complete

2 visitors per patient following the same safety regulations

NUEVAS REGULACIONES DE SEGURIDAD PARA LA SALA DE EMERGENCIA

NO - se permite el uso de teléfonos celulares

NO - comidas o bebidas permitidas en el departamento

Pacientes deben permanecer en el cuarto hasta que la visita esté completa

SOLO 2 visitantes por paciente siguiendo las mismas reglas de seguridad
"For those of you who are tired of hearing about racism, imagine how much more tired we are constantly experiencing it."

--Barbara Smith
Two residents wade through chest-deep water after finding bread and soda from a local grocery store after Hurricane Katrina came through the area in New Orleans, Louisiana.

(AFP/Getty Images/Chris Graythen)

A young man walks through chest deep flood waters after looting a grocery store in New Orleans Tuesday, Aug. 30, 2005. Flood waters continue to rise in New Orleans after Hurricane Katrina caused extensive damage when it hit.

These stories and pictures both appeared on Yahoo! News August 30, 2005.

http://news.yahoo.com/photo/050830/480/ladmin1
http://news.yahoo.com/photo/050830/photos_ts_afp/050830071
THE TRUE FOCUS OF REVOLUTIONARY CHANGE IS NEVER MERELY THE OPPRESSIVE SITUATIONS THAT WE SEEK TO ESCAPE, BUT THAT PIECE OF THE OPPRESSOR WHICH IS DEEP WITHIN EACH OF US.

AUDRE LORDE
Implicit bias in healthcare

Facilitated by Heather Lyn Haley
Bias exists

• Providers are people, raised in social settings, and so they have developed stereotypes about race, sex, age, body type, other factors
• Stereotypes often are applied without conscious thought
• Assumptions based on stereotypes influence interpretation of symptoms and behaviors, clinical and practice decision-making. Influences care through:
  – level of pt education provided
  – post-op pain management decisions, even with children
  – estimation of pt ability to comply with complex med regimen,
  – recommendations for tests and treatment options (inhaler vs nebulizer)
• What we’re doing about it now isn’t working – Healthy People 2010/2020
  – In last decade, 80% of the disparity measures have stayed the same;
  – 13% have gotten worse
  – Regional differences increasing – worse in southern states

Question now is how to mitigate negative effects of implicit bias

Facilitated by Heather Lyn Haley
CDC 2013 review suggests: “Health-promotion efforts have emphasized racial/ethnic disparities in health as part of an approach to risk reduction that focuses on groups at high risk, with little or no improvement in disparities.

The patterns described in this report suggest that interventions and policies that are also designed to take account of the influence of educational attainment, family income, and other socioeconomic conditions on health risks in the entire population might prove to be more effective in reducing health disparities.”

Facilitated by Heather Lyn Haley
Cognitive psych suggests we need strategies and skills to:

• 1) enhance internal motivation to reduce bias, while avoiding external pressure;
• 2) increase understanding about the psychological basis of bias;
• 3) enhance providers’ confidence in their ability to successfully interact with socially dissimilar patients;
• 4) enhance emotional regulation skills; and
• 5) improve the ability to build partnerships with patients.

Burgess et al 2007

Facilitated by Heather Lyn Haley
Goal: Individuation, not categorization

Conceptual Framework

Burgess et al 2007
Facilitated by Heather Lyn Haley
Kleinman Questions

1. "What do you call the problem?"
2. What do you think has caused the problem?
3. Why do you think it started when it did?
4. What do you think the sickness does? How does it work?
5. How severe is the sickness? Will it have a long or a short course?
6. What kind of treatment do you think the patient should receive?
7. What are the chief problems the sickness has caused?
8. What do you fear most about the sickness?"

Facilitated by Heather Lyn Haley
References


• Kleinman, Arthur. Taken from UPenn’s Kleinman’s 8 Handout. http://www.med.upenn.edu/gec/user_docs/PDF/Health%20Equity%20and%20Literacy/Kleinman_s_8_Questions.pdf

Facilitated by Heather Lyn Haley
"I have come to believe over and over again that what is most important to me must be spoken, made verbal and shared, even at the risk of having it bruised or misunderstood."

Audre Lorde
The state of Utah has reduced homelessness by 78 percent in the last eight years. How? It’s simple. They give people homes, no strings attached.