

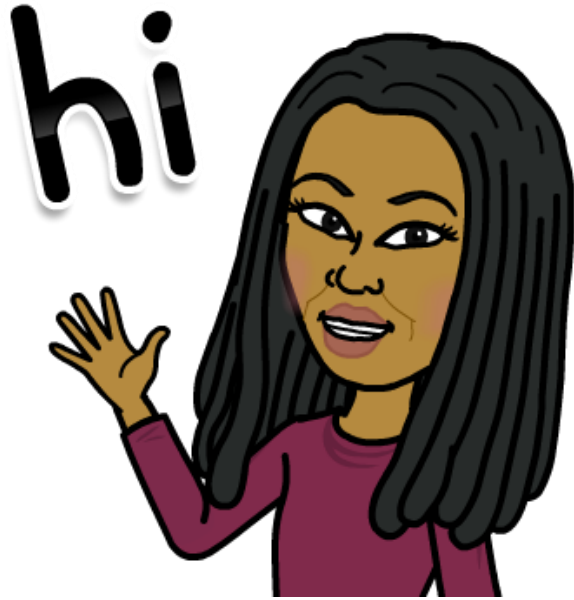
Racial Equity and Social Justice in Health

Four horizontal bars of different colors (blue, green, red, and purple) are stacked vertically, spanning most of the width of the slide.

Center for Health Equity

Introductions

Jacqueline Kennedy
(Jackie)



- San Diego, CA
- Crown Heights Brooklyn

Kristin Woods



- Pasadena, CA
- Prospect-Lefferts, Brooklyn

Group Agreements

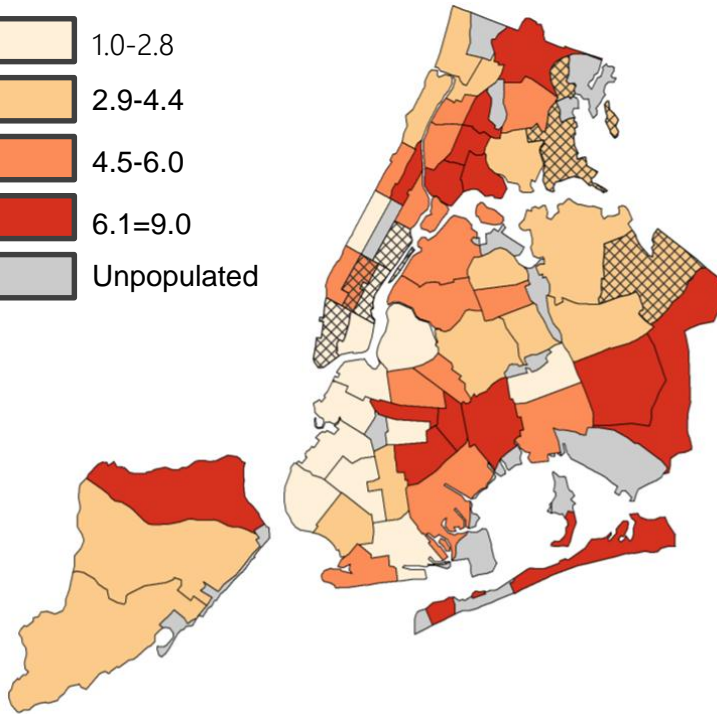
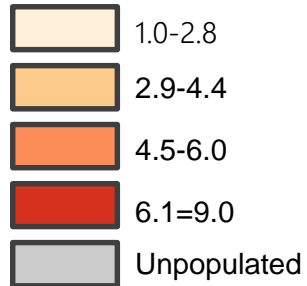
- Stay engaged.
- If, when in racially-mixed groups discussing race, you usually hold back, **speak up**. If, when in racially-mixed groups discussing race, you tend to speak often, **take a pause**.
- Expect and accept **non-closure**.
- Listen for understanding.
- Maintain confidentiality.
- Keep phones at bay- step out for urgent matters
- Others?

Across Neighborhoods

BABIES AND ADULTS ARE DYING TOO EARLY

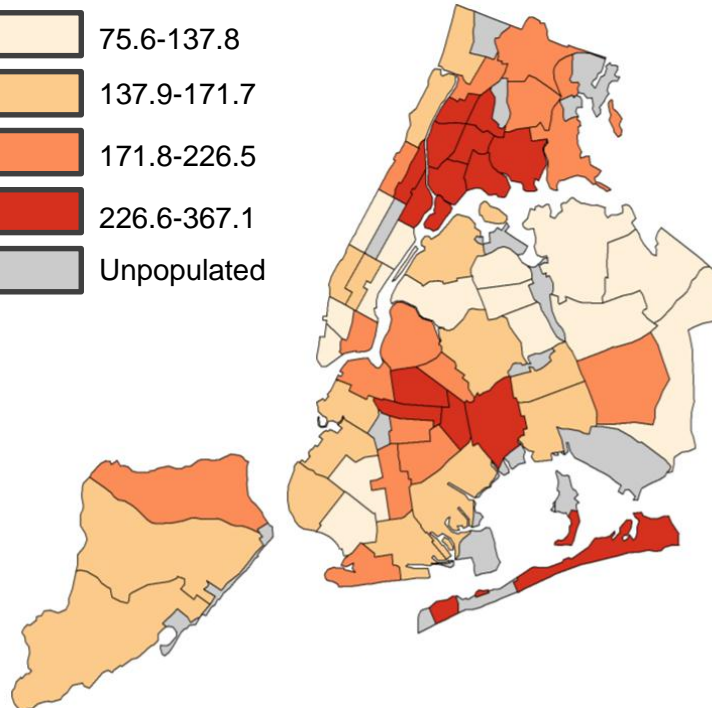
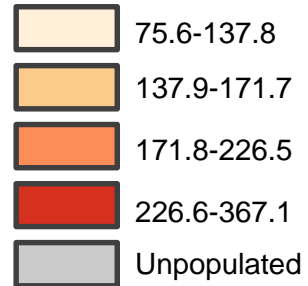
Infant Mortality

Rate per 1,000 live births



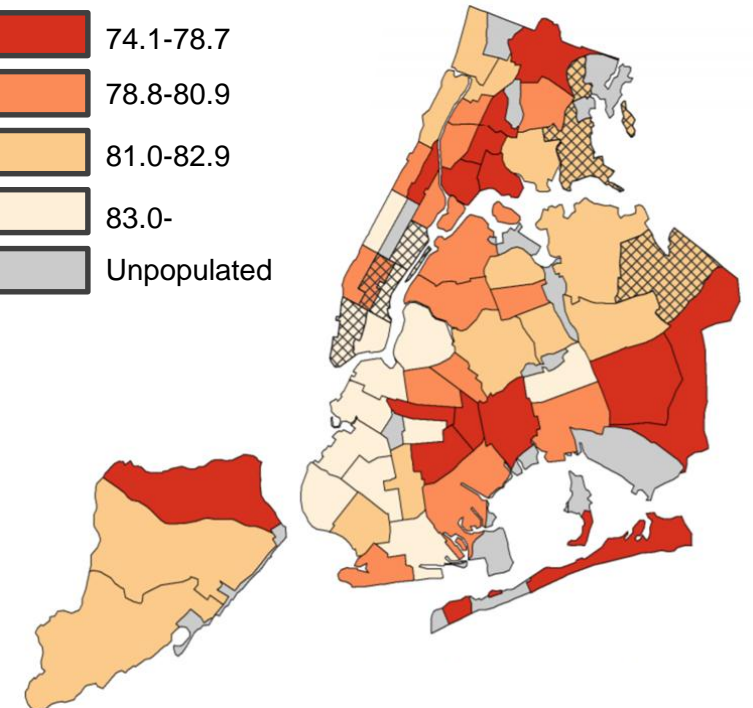
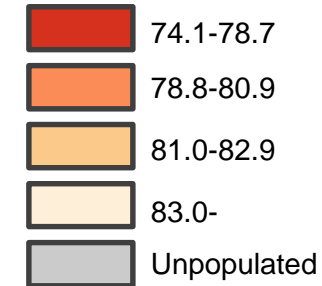
Premature Mortality (death before age 65)

Rate per 100,00 population



Life Expectancy

Years



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Source: NYC Dept. Health: Community Health Profiles — 2015 Atlas

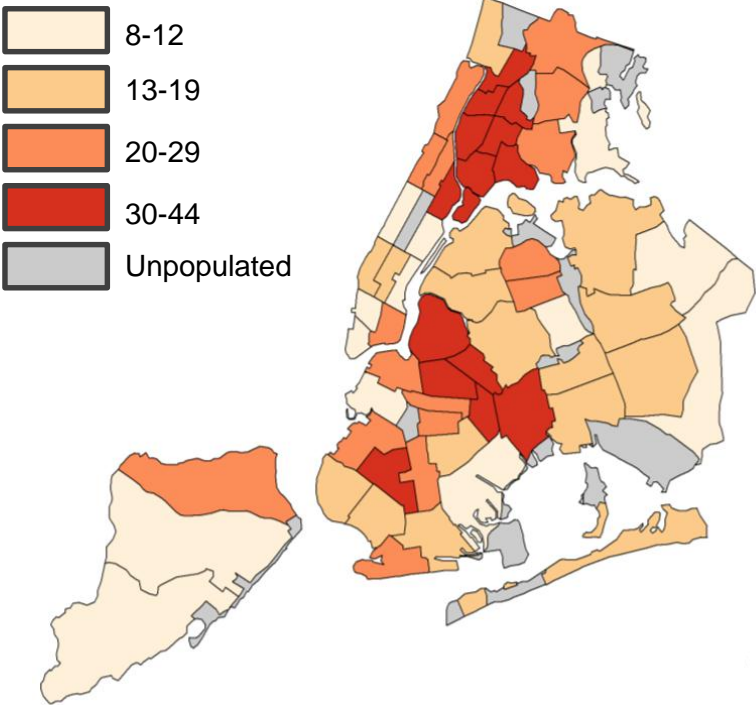
NYC
Health

Center for Health Equity

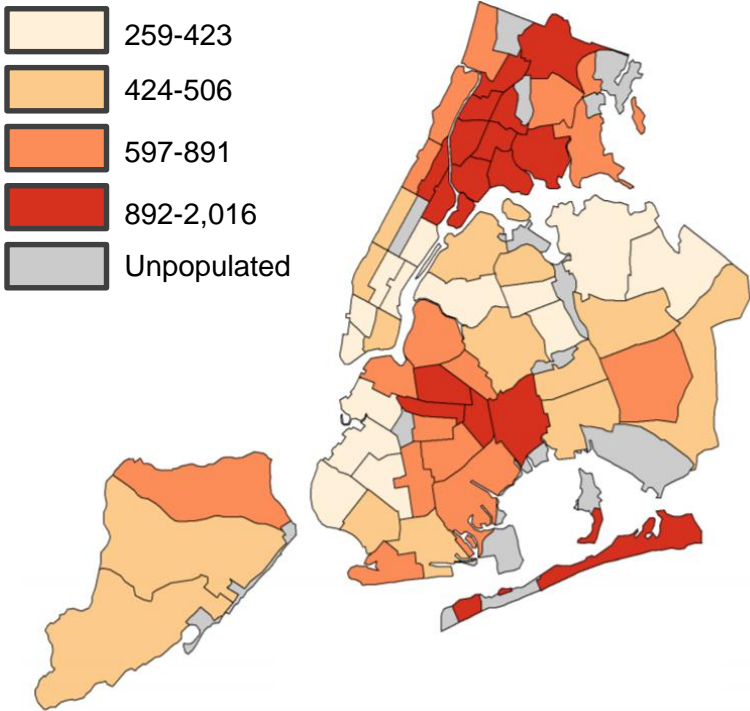
Across Neighborhoods

PEOPLE FACING TOO MANY BARRIERS TO HEALTH

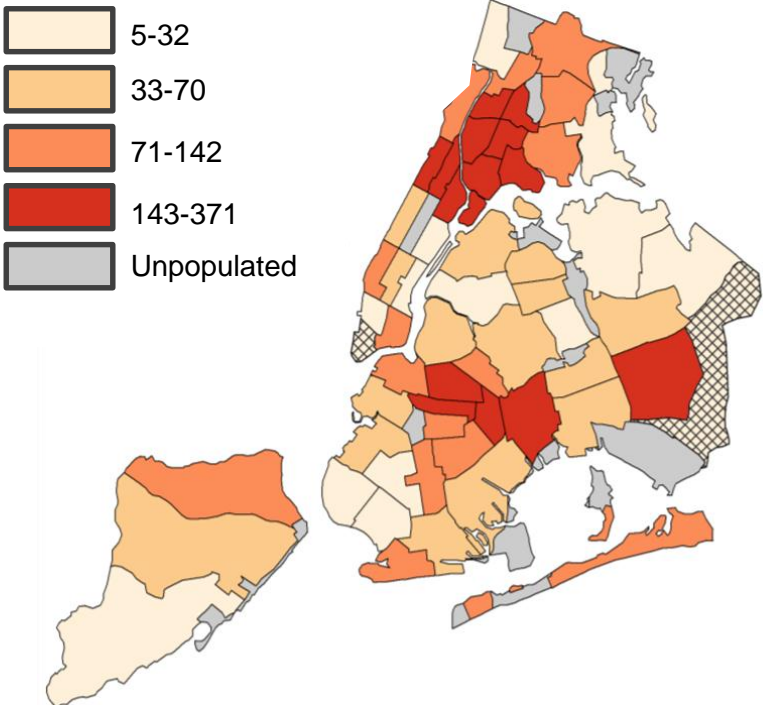
Poverty
Percent below federal poverty level



Elementary School Absenteeism
Percent of elementary students (Missing 20+ Days)



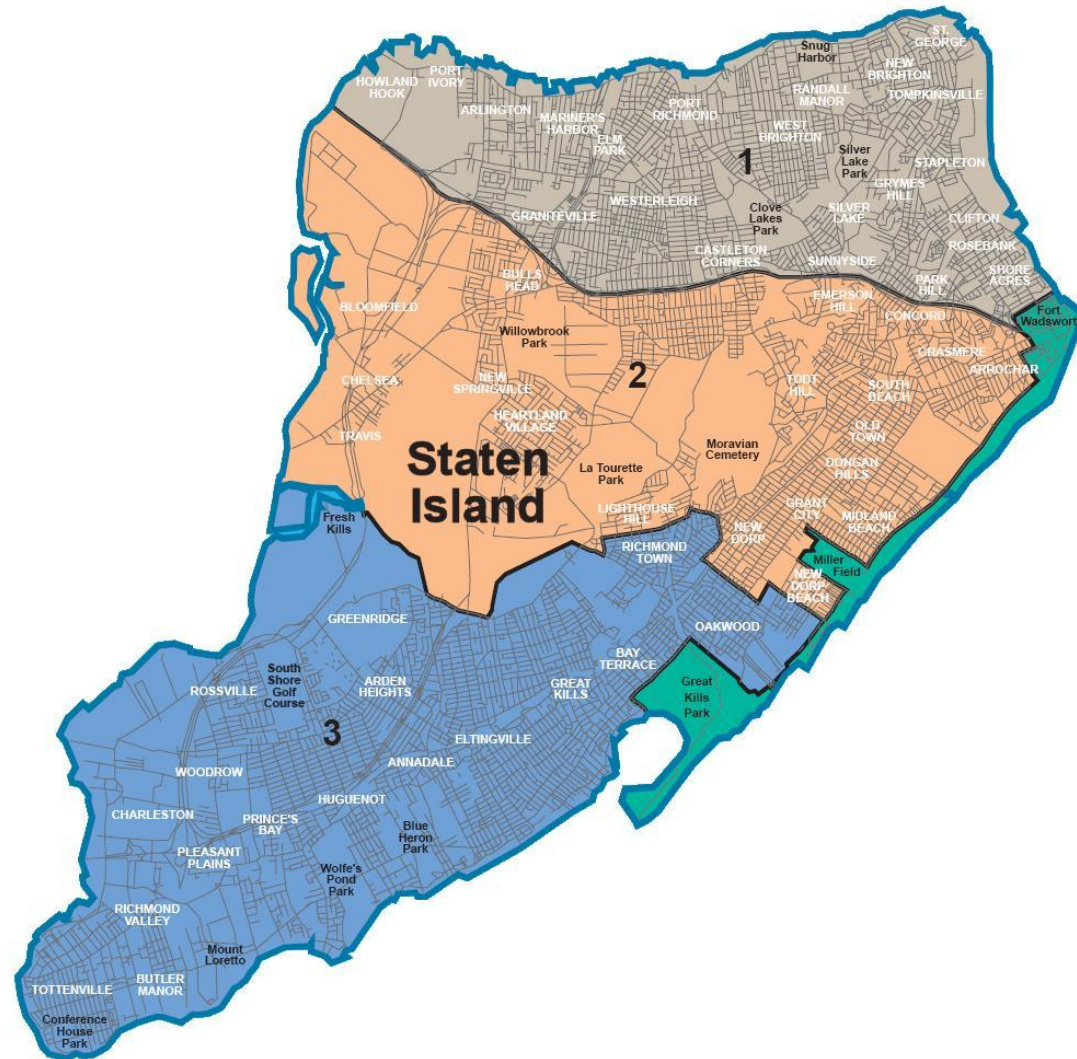
Jail Incarceration
Rate per 100,00 adults (ages 16+)



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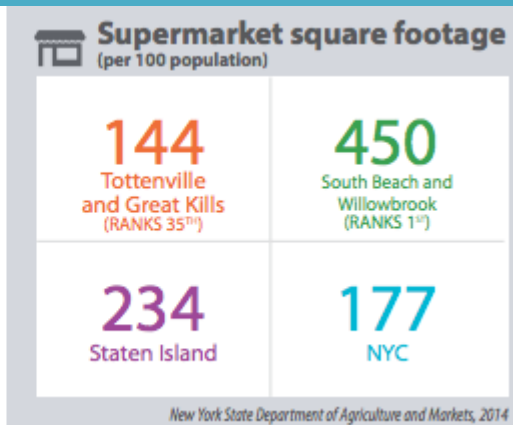
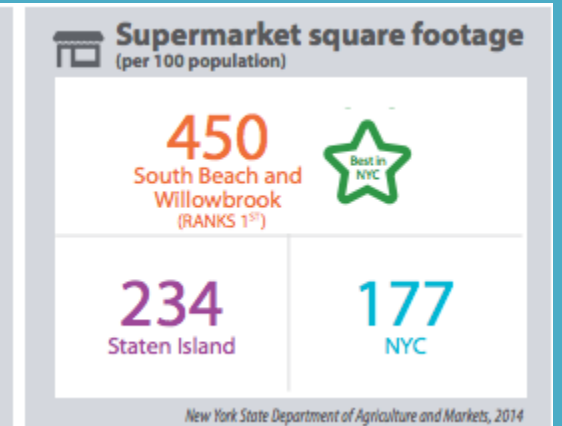
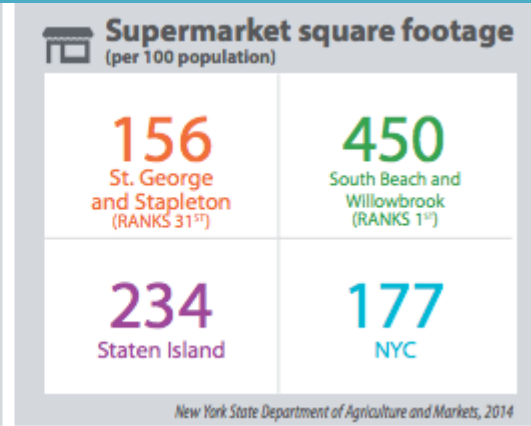
Source: NYC Dept. Health: Community Health Profiles — 2015 Atlas

A look into Staten Island



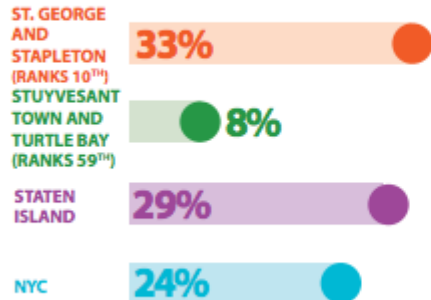
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Retail Environment: Tobacco and Grocery Stores



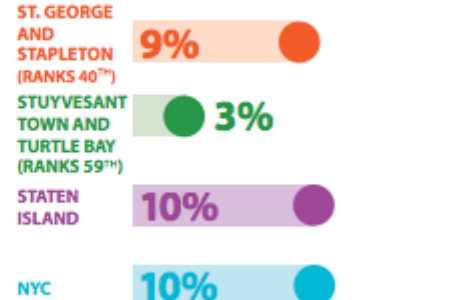
Obesity & Diabetes

Obesity (percent of adults)



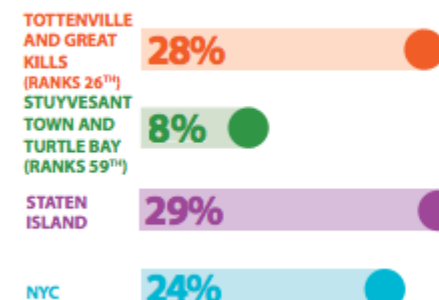
NYC DOHMH, Community Health Survey, 2011-2013

Diabetes (percent of adults)



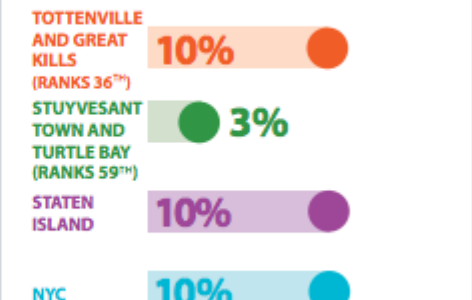
NYC DOHMH, Community Health Survey, 2011-2013

Obesity (percent of adults)



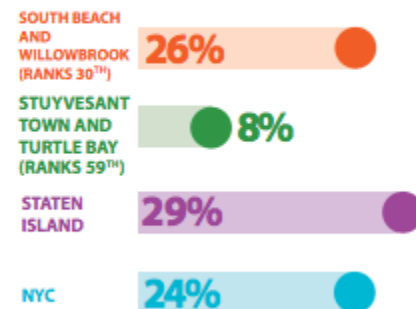
NYC DOHMH, Community Health Survey, 2011-2013

Diabetes (percent of adults)



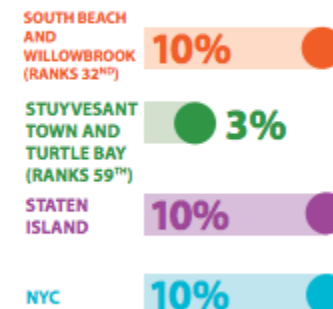
NYC DOHMH, Community Health Survey, 2011-2013

Obesity (percent of adults)



NYC DOHMH, Community Health Survey, 2011-2013

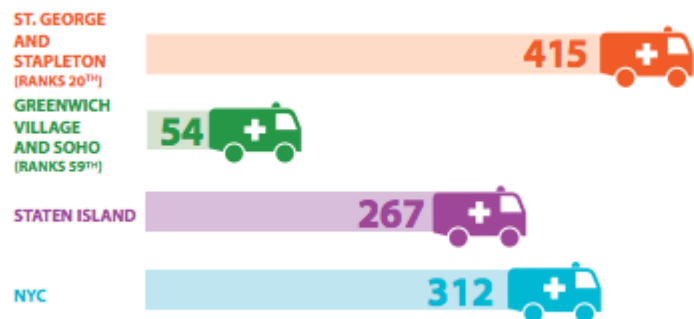
Diabetes (percent of adults)



NYC DOHMH, Community Health Survey, 2011-2013

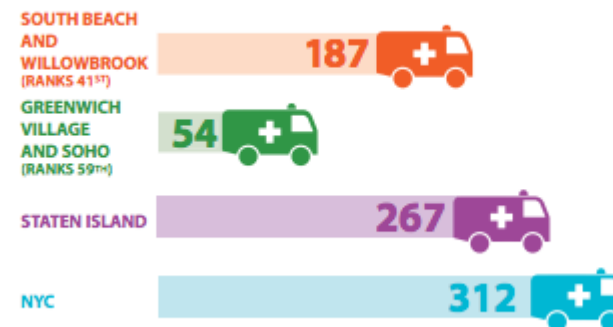
Diabetes Hospitalizations

Avoidable diabetes hospitalizations (per 100,000 adults)



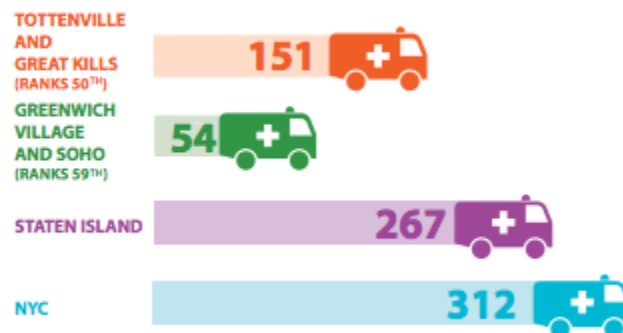
New York State Department of Health, Statewide Planning and Research Cooperative System, 2012

Avoidable diabetes hospitalizations (per 100,000 adults)



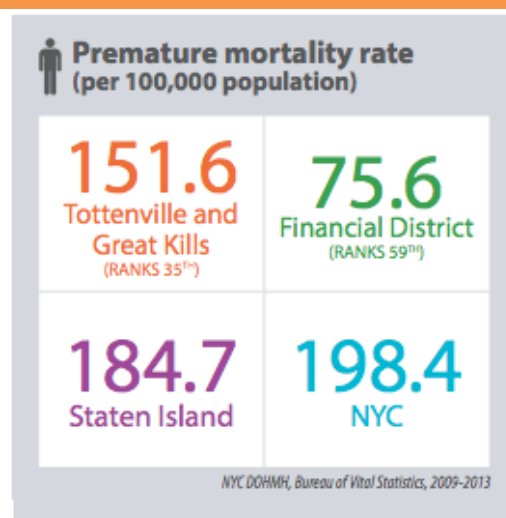
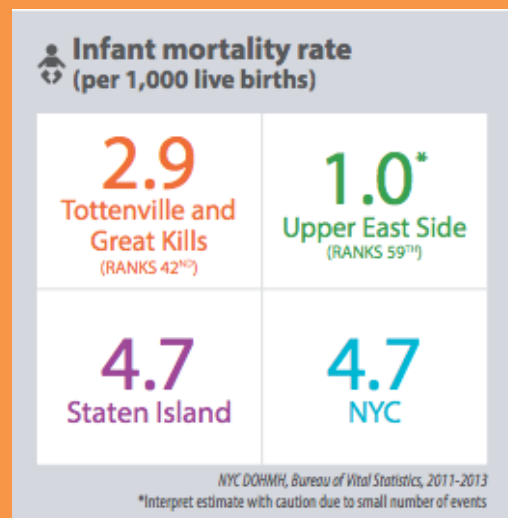
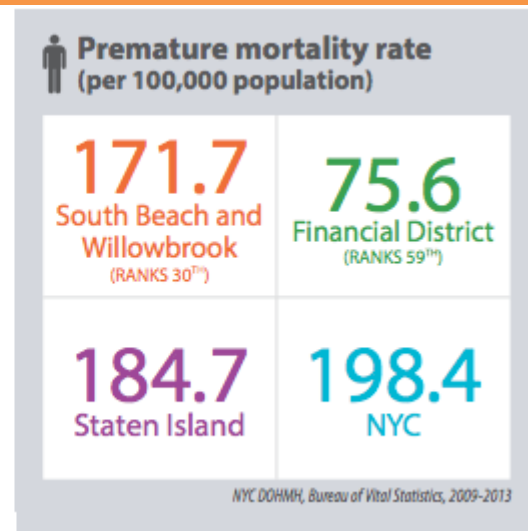
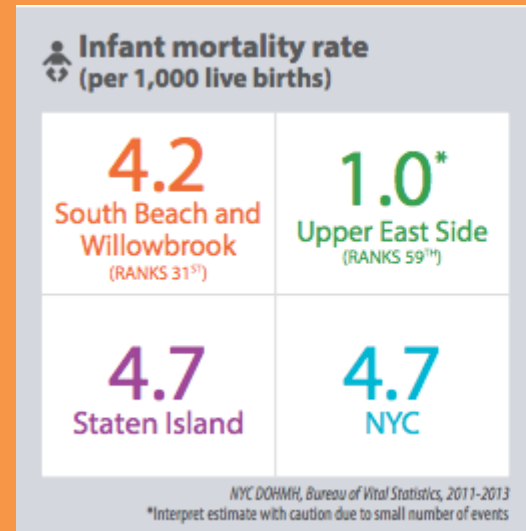
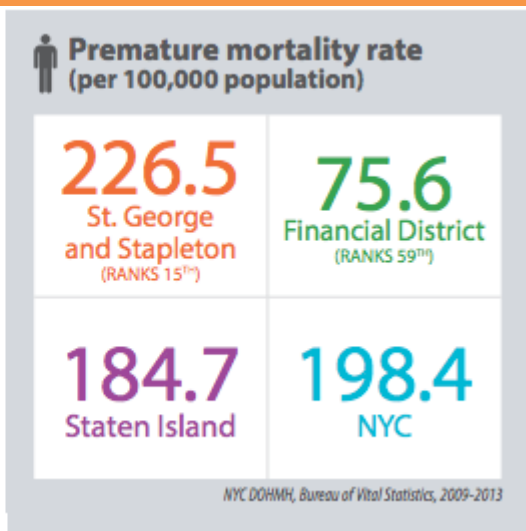
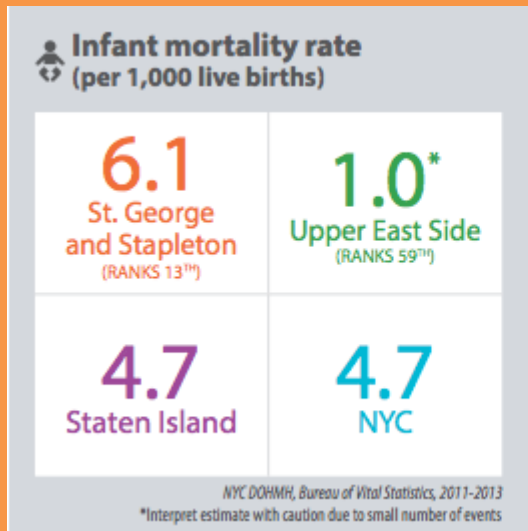
New York State Department of Health, Statewide Planning and Research Cooperative System, 2012

Avoidable diabetes hospitalizations (per 100,000 adults)



New York State Department of Health, Statewide Planning and Research Cooperative System, 2012

Infant and Premature Mortality



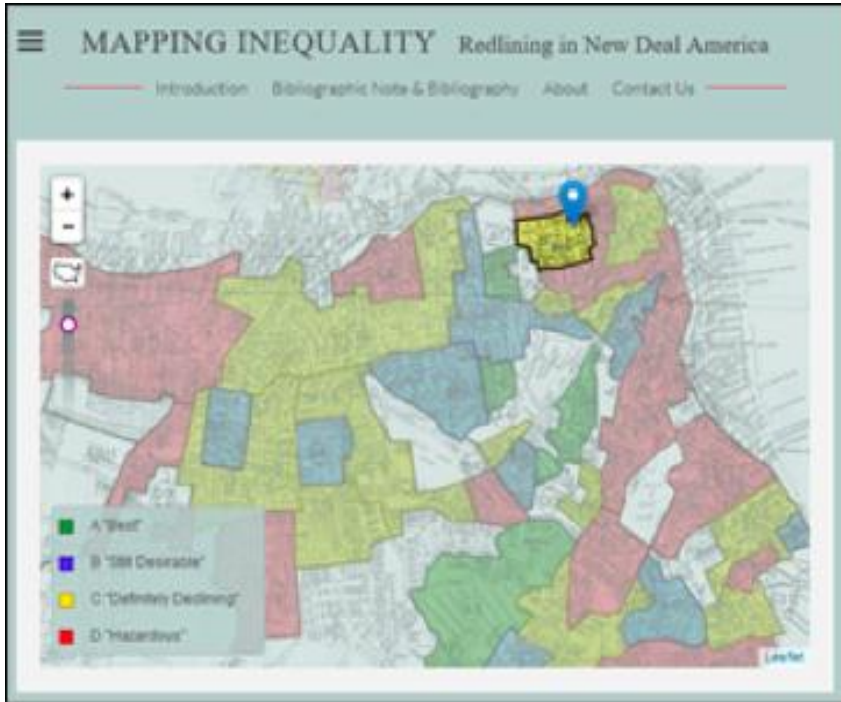
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Group Discussion

Give us an overview of Stapleton, Port Richmond, Mariner's Harbor & St. George's characteristics:

- Who lives there?
- What does the neighborhood look like?
- What are the neighborhood's greatest challenges?
- What are the assets of the neighborhood?

Things to consider...



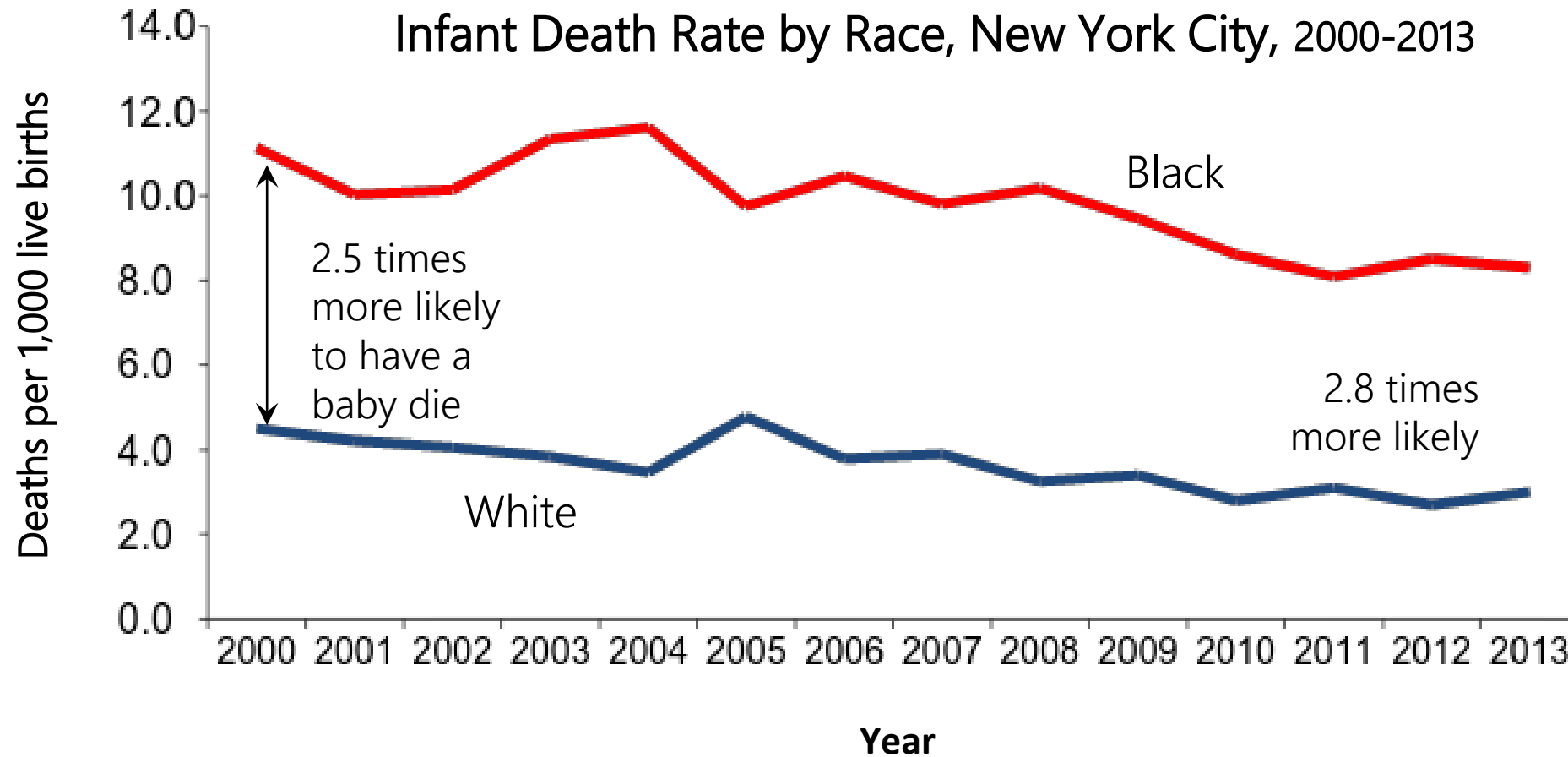
- The Civil War draft riots spread from Manhattan to Staten Island on July 14, 1863, and lasted six days. Houses owned by blacks were torched in Stapleton (in the neighborhood where the Stapleton NYCHA houses are now). Many blacks were hunted down and beaten; the *SI Advance* reported five deaths.

A researcher from SI Arts & Sciences found additional deaths and property destruction documented in the museum's historical archives. One man escaped by jumping into the Kill and swimming to Bayonne, she said.

- Looking at the Home Owners Loan Corporation (redlining) maps from the 1940s, the sites chosen for the NYCHA developments were either "in decline" or "hazardous," (but primarily because of Italian, not African-American, tenancy).[1]

[1] "Mapping Inequality: Redlining in New Deal America,"
<https://dsl.richmond.edu/panorama/redlining/>

Health Inequities – Infant Mortality



Health Inequities – Differences in health outcomes that are **avoidable**, **unfair**, and **unjust**, and driven by **social factors**.

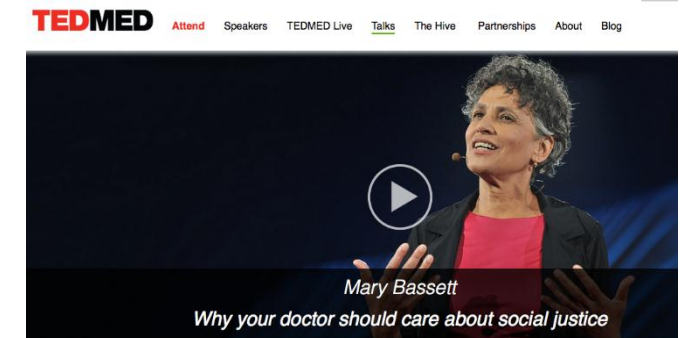
A Call to Action

"Inequities in health are unfair, unnecessary and avoidable. New York City is the most unequal city in the United States and one of the most segregated. It is no surprise that these everyday realities are reflected in our health. A more deliberate effort to name and address these disparities will frame all that we do."

-Mary T. Bassett

NYC Health Commissioner

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Center for Health Equity

Mission

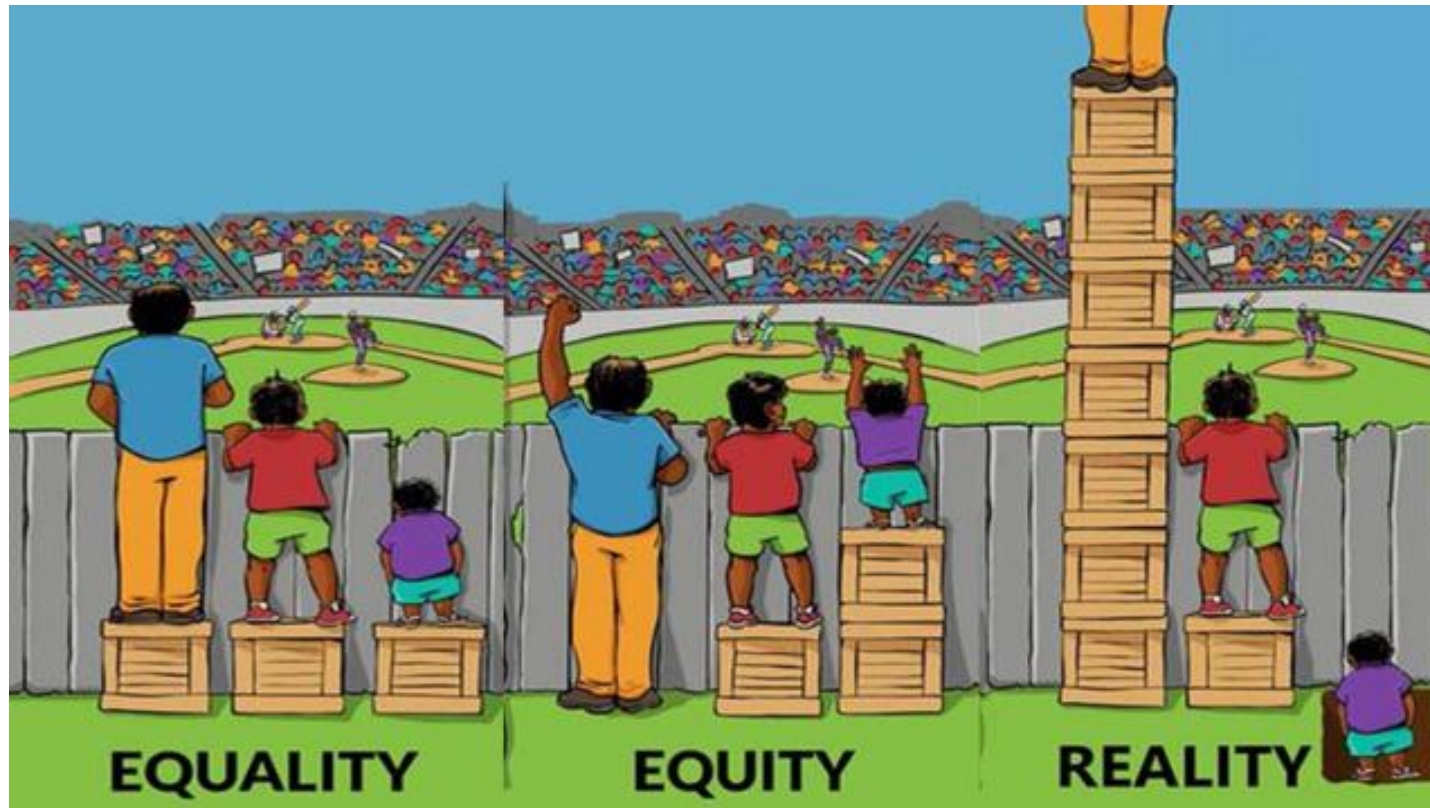
To strengthen and amplify DOHMH's work to eliminate health inequities, which are rooted in historical and contemporary injustices and discrimination, including racism.

Values

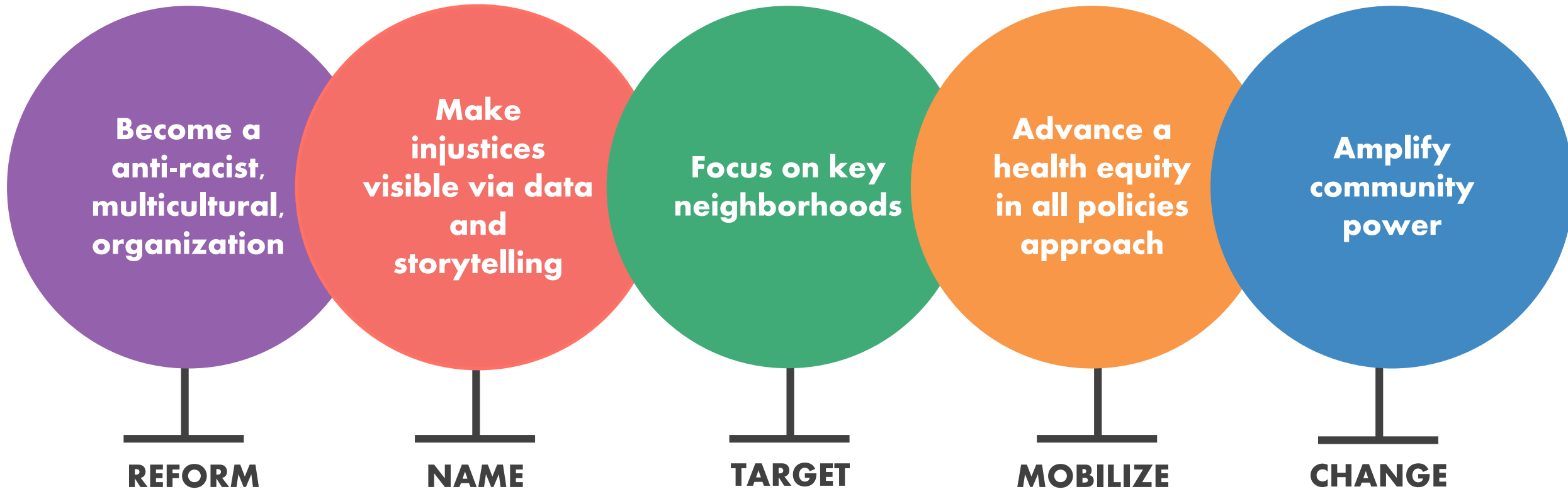
- Racial & Social Justice
- Community Power
- Accountability
- Diversity & Inclusion
- Data & Community-informed Practice

Health Equity Is...

- Achieving the **highest level** of health for all people.
- No one is kept from reaching the highest level of health because of **social position** or **social identities**.

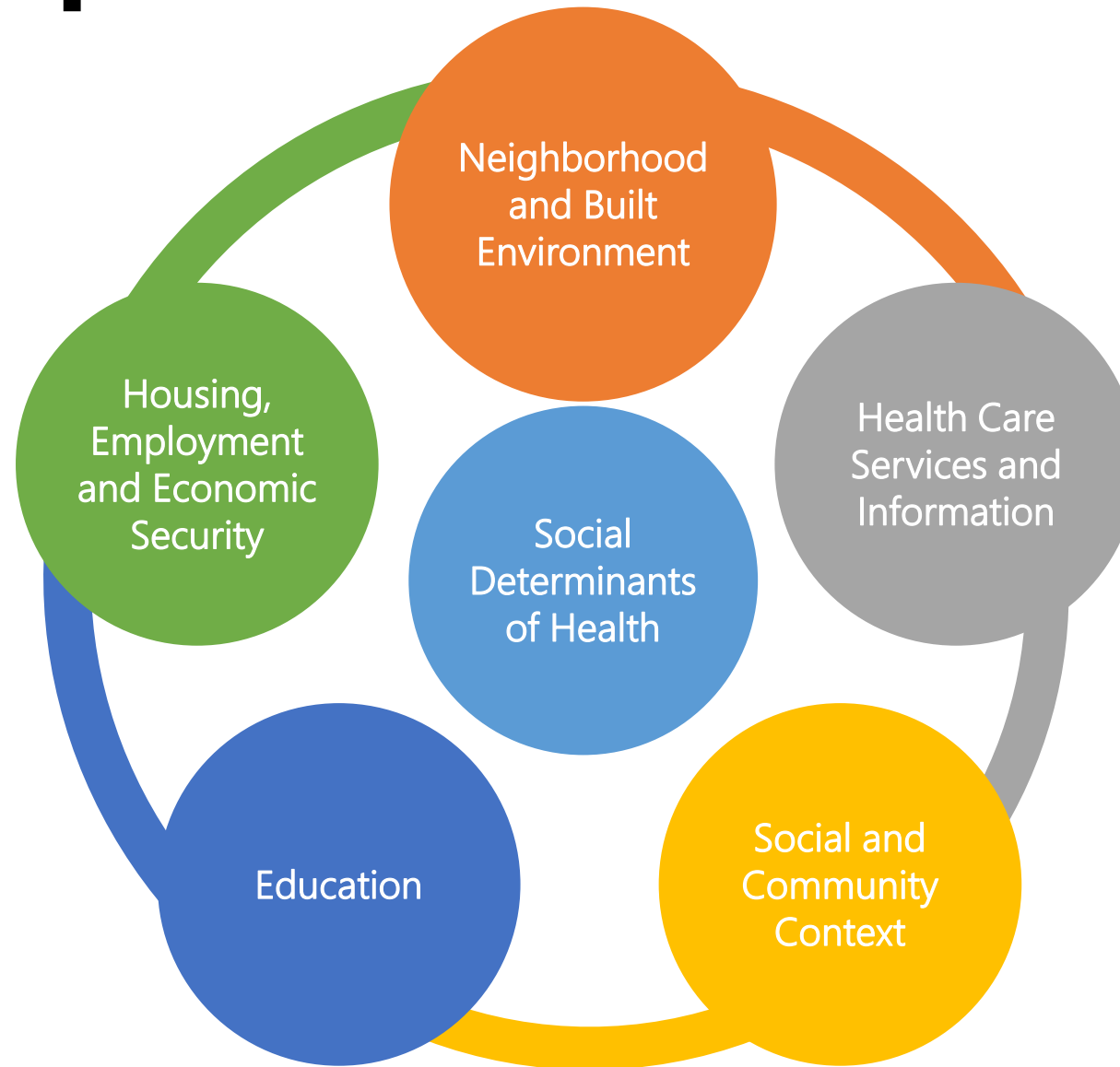


Our Approaches to Advance Health Equity



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What shapes health?



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~~UNEMPLOYED~~



Housing,
Employment,
and Economic
Security

Neighborhood
and Built
Environment

Health Care
Services and
Information

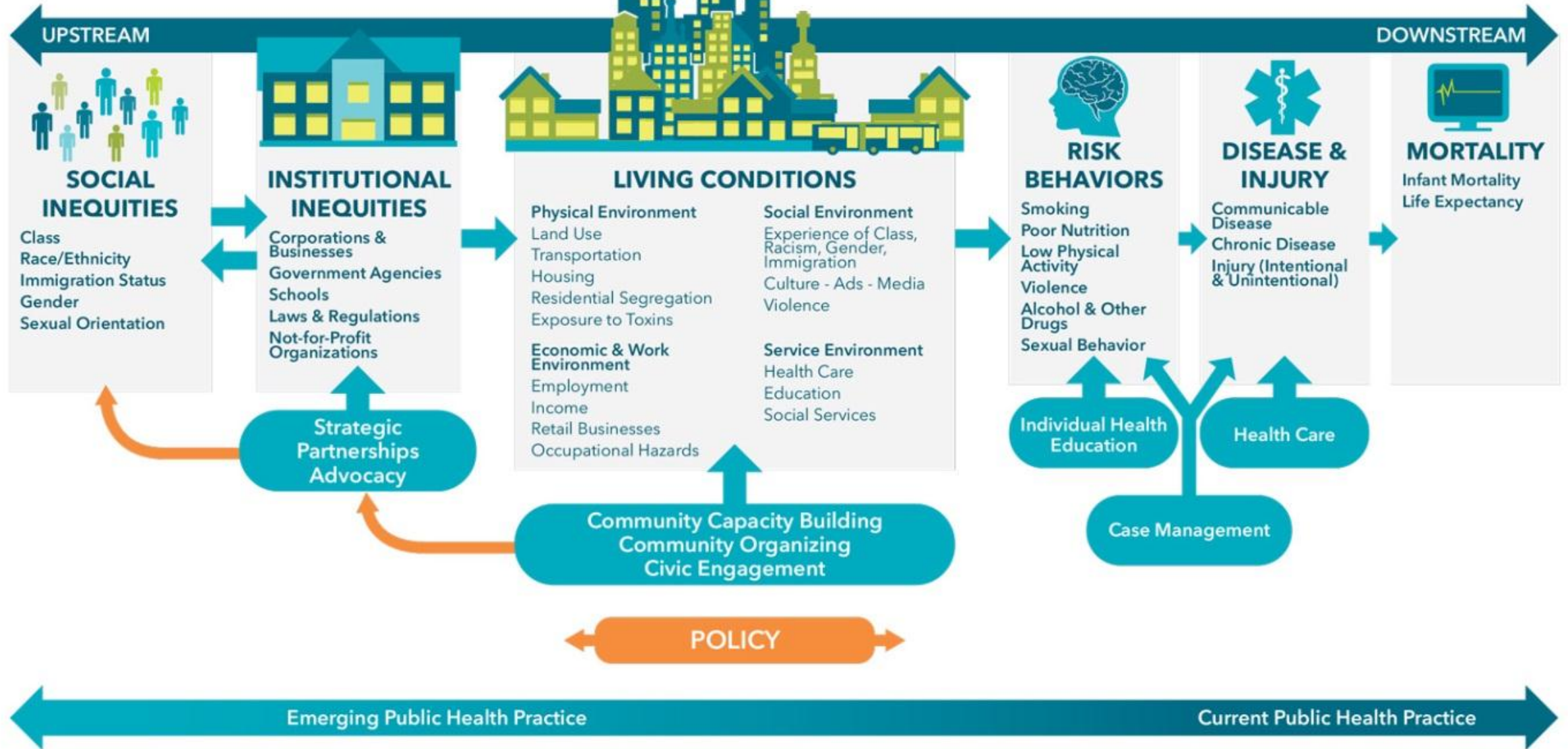
Social
Determinants
of Health

Education

Social and
Community
Context



A PUBLIC HEALTH FRAMEWORK FOR REDUCING HEALTH INEQUITIES
BAY AREA REGIONAL HEALTH INEQUITIES INITIATIVE



What creates health inequities?

Racism is:

- a *system* of power and oppression that:
 - structures opportunities and
 - assigns value based on race, unfairly disadvantaging people of color, while unfairly advantaging people who are White.

racial prejudice + power = racism

Race is:

- A socially constructed way of categorizing people based on observable physical features, such as skin color and ancestry
- No scientific basis for racial categories

Levels of Racism

Internalized

Operates on a psychological level within individuals. These may be conscious or unconscious beliefs about ourselves and others based on race.

Interpersonal

Occurs between people. Interpersonal racism exists when we bring our private beliefs and biases into our communications and interactions with others of a different race.

Institutional

Occurs on the level of institutions. This is when policies, practices, and systems within institutions create and sustain racialized outcomes.

Structural

Is a racial bias across institutions and society. It is the system of structures, institutions and policies that work together to advantage White people and disadvantage people of color. It is the broadest manifestation of racism and encompasses multiple dimensions: history, culture, interconnected policies and institutions.

Unnatural Causes Video:

Living in Disadvantaged Neighborhoods is Bad for your Health



[Living in Disadvantaged Neighborhoods is Bad for Your Health](#)

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Root Causes of Inequities

- Policies that created all types of systems of unbalanced power and privilege
- Caused by historical practice of exclusion & discrimination across the life course
- Led to geographic concentration of poverty and hyper-segregation

Structural Racism

A system in which public policies, institutional practices, cultural representations, and other norms work in various, often reinforcing ways to perpetuate racial group inequity. It identifies dimensions of our history and culture that have allowed privileges associated with “whiteness” and disadvantages associated with “color” to endure and adapt over time. Structural racism is not something that a few people or institutions choose to practice. Instead it has been a feature of the social, economic and political systems in which we all exist.

- *Aspen Institute, Roundtable for Community Change, Glossary for Understanding the Dismantling Structural Racism/Promoting Racial Equity Analysis*

Injustice is bad for your health

There is no such thing as a single-issue struggle because we do not live single-issue lives.
– Audre Lorde



"The health inequities we see are the embodied expressions of social inequality. They are not about just individual bad choices: *they are about things not being fair.*"

– Dr. Nancy Krieger
Harvard School of Public Health

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The Stroop Test

Blue

Red

Green

Black

Green

Red

Blue

Black

Black

Blue

Green

Red

Green

Green

Black

Blue

Schemas and Stereotypes

- Schema is a mental structure to organize information around us. Our brains make judgments efficiently and quickly.
- Stereotypes are what we associate with a group of people

Stereotypes:

What we associate with a group of people

Attitudes:

How you feel about a group of people

We can hold positive stereotypes and negative attitudes about the same group and vice versa.

Unconscious Bias/Implicit Bias:

- The brain's automatic, instant association of stereotypes or attitudes toward particular groups, without our conscious awareness.
- The split-second decisions our brains make (e.g. reactions to or assumptions about someone) without our realizing it.

"All of us, despite the best of all possible intentions, are affected by unconscious processes. It affects what we see, how we react, how we feel, how we behave. If we're not aware of it and taking measures to counter it, it affects quality of care."

-Michelle van Ryn

Director of Mayo Clinic's Research Program on Equity and Inclusion in Health Care

Advancing Racial Equity & Social Justice



- Build/raise awareness and develop skills
- Examine how structural racism and other systems of oppression shape health inequities
- Strengthen collaborations with New York City's communities

"Cities have the capability of providing something for everybody, only because, and only when, they are created by everybody." - Jane Jacobs



Reflection Questions

- How might having a racial equity and social justice lens be applied to better inform the work you do around health in Staten Island?
- What role do ALL residents play in responding to health inequities?
 - Are there ways to elevate and amplify the role of residents?

Questions?

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Resources

Racial Equity & Social Justice

- Compassionate Activism Webinars
 - [Healing from Marginalization](#)
- Roots of Health Inequity course
 - <http://www.rootsofhealthinequity.org/>
- Racial Equity Tools
 - <https://www.racialequitytools.org/home>
 - <http://www.racialequityresourceguide.org/>
- Colorlines.com & Race Forward
 - <http://www.colorlines.com/>
 - <https://www.raceforward.org/>
- Center for Social Inclusion
 - <https://www.centerforsocialinclusion.org/>
- Government Alliance on Race and Equity
 - <http://www.racialequityalliance.org/>

Films

- Unnatural Causes
 - www.unnaturalcauses.org
- Race Power of Illusion
 - www.pbs.org/race/

Racial Equity & the Health System

- NYC Coalition to Dismantle Racism in the Health System
 - <https://nyccoalitiontodismantleracism.wordpress.com/>
- Separate and Unequal: Medical Apartheid in New York City
 - https://www.researchgate.net/publication/252066315_Separate_and_Unequal_Medical_Apartheid_in_New_York_City

Thank you!

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