Anti-Racism in Nursing

Wendy E. Barrington, PhD, MPH
Associate Professor
School of Nursing
Seattle Campus

Sharon S. Laing, PhD, MS
Assistant Professor
School of Nursing and Healthcare Leadership
Tacoma Campus
Outline

> What is anti-racism?

> Multi-level framework for ACTION
  - Individual
  - Community
  - Organizational

> Anti-racism in research and practice
  - Building accountability
  - Relevance for all communities
The Role of Research and Medicine in Perpetuating “Race”

- Differences in intellectual and physical characteristics ascribed to phenotype and ancestry
- Bogus findings used to assert that non-white people were less than human as well as innately and intellectually inferior to whites
- Justified both legal and tacit systems of racial oppression and privilege to perpetuate white supremacy
- Resulted in discrimination throughout societal structures (e.g., housing, healthcare, etc.)

Why Center Anti-Racism

> The formation of the United States occurred as a direct result of traumatic insults to Indigenous and Black peoples

> These historic acts have not been undone and continue to shape the lives and health of Black and Indigenous peoples as well as People of Color

> We come together in the spirit of reconciliation and repair
Why Anti-Racism Promotes Health for All

“Racism has been defined as a system of structuring opportunity and assigning value based on the social interpretation of how one looks (which is what we call “race”), which unfairly disadvantages some individuals and communities, unfairly advantages other individuals and communities, and saps the strength of the whole society through the waste of human resources.”

Definitions

> **Racist**: One who is supporting a racist policy through their actions or inaction or expressing a racist idea.

> **Anti-racist**: One who is supporting an anti-racist policy through their actions or expressing an anti-racist idea.

Tenets of Leadership for Anti-racism

> Leaders need to recognize the various forms of racism takes in the lives of communities and individual constituents

> Need to co-produce policies and procedures with white and constituents of color that are accountable with outcomes of equity

Social Justice in Nursing

> Fairness in the distribution of wealth, opportunities, and privileges within society

> Collective well-being and responsibility

> Changing social norms and institutions to promote equitable relationships

> Social beings are to give and to receive using equity as a framework for relating to one another

Implications for Social Justice

> Equal does not mean just

> Will not rectify disparities generated from historic injustices

> Populations who have been marginalized need to receive our collective and concentrated support to achieve full status in society

Racism is a public health crisis: The transformation starts here. It starts with us.

Crossposted from Public Health Insider

By King County Executive Dow Constantine and Public Health
— Seattle & King County Director Patty Hayes

“There’s nothing new under the sun but there are new suns.”
Octavia E. Butler, Parable of the Trickster

Today, we declare that racism is a public health crisis. Public Health – Seattle & King County and all of King County government are committed to implementing a racially equitable response to this crisis, centering on community.

King County government and Public Health – Seattle & King County are committed to working in stronger and better resourced partnerships with community organizations and leaders to disrupt and dismantle racism and protect the health and well-being of Black, Indigenous People and People of Color. We recognize that historically and currently King County has been complicit in maintaining and perpetuating structural racism, and that as an institution we must be a vital player in dismantling oppressive systems that are grounded in white supremacy.
What is Cultural Humility?

A multi-level approach, philosophy, or tool to facilitate understanding of diverse experience and rectify power imbalances

> Cultural standpoint:
  - Belonging to a certain group imparts advantages or disadvantages

> Personal standpoint:
  - What I think it is like for others is different from what it really is like for others

Elements of Cultural Humility

1. Lifelong learning and critical self-reflection
   – Recognize and honor diversity
   – Openness to understanding
   – Acknowledge own lack of experience
   – Recognize when transferring own beliefs and experiences onto others
   – Know your “blind spots” and attend to them

Elements of Cultural Humility

2. Recognize and Challenge Power Imbalances for Respectful Partnerships

– Value and foster functional relationships

– Setting anti-racist priorities and recommendations for change that privilege voice of patients and communities

– Sharing decision-making power with patients and communities

Elements of Cultural Humility

3. Institutional accountability

– Continual evaluation of policies, practices, and norms to align with equity

– Institutional and policy change to rectify identified disparities and racist mechanisms

– Diversification at all levels of healthcare workforce to reflect populations served
  > Build trusting relationships to promote health
  > Diverse perspectives to problem-solving

Applying Anti-Racism to Heal Racial Trauma (Individual and Community)
“The body is where we live. It’s where we fear, hope, and react. It’s where we constrict and relax. And what the body most cares about are safety and survival. When something happens to the body that is too much, too fast, or too soon, it overwhelms the body and can create trauma. Trauma always happens in the body. It is a spontaneous protective mechanism used by the body to stop or thwart further (or future) potential damage.”

- **Resmaa Menakem** *(Trauma Specialist and New York Times Best Seller; work specializes in the physical and emotional impact of racial trauma)*
Racial Trauma

- The author speaks about how racialized trauma is present in all our bodies regardless of race, and ethnicity.

- We have all inherited the legacy of historical and transgenerational trauma attributed to racism.

- The lasting impact:
  - Trauma in a **person** over time can begin to look like **personality**
  - Trauma in a **family** over time can look like **family traits**
  - Trauma in a **people** over time can begin to look like **culture**

(Resmaa Menaken, 2019)
Thus, trauma is working in the body and we must find a way to navigate this trauma and heal using available strategies...
Framing Implementation of Strategies to Address Racism – Anti-Racism
Based on Resmaa’s model, and ongoing anti-racism work, three specific guidelines are proposed to address the *trauma of racism* using an *anti-racism* orientation (individually and collectively)

- Educate
- Experience
- Commune
Educate

- Confront the historical occurrence of racism
- Learn about historical and contemporary impact of racism (generally and especially in the healthcare industry)
Experience

- Confront and experience the physiological embodiment of racism
  - Discomfort
  - Body tightening
  - Constriction
  - Vibration
  - Temperature change
  - Racing heart
Experience

- Slow down and listen to physiological reactions

- When we speak the word “racism” we experience the physiological manifestations of racism...
Commune

- Permit the pain and experience to move through our bodies, out of our bodies and into a space permitting connection with others

- Share the experience – empathize, feel, grieve, emote, and connect

- Exact individual-level, community-level and institutional-level changes
Applying the Steps: Individual and Collective Approaches
Anti-Racist Strategies for Whites
Educate

- History of racism in the US
- A review of timeline of racist events in US history
  - Timeline of Protests (theroot.com)
- A reckoning with moral debts
  - The Case for Reparations by Ta-Nehisi Coates - The Atlantic
Educate

- Consistently and concretely incorporate anti-racist education and reflection into your daily life

- Anti-Racism Resources
  - White parents raising anti-racist children
  - Understanding the individual-level barriers
Reflect (Experience)

- Reflect on individual-level *implicit and explicit biases*

- Reflect on how you might experience *white privilege*
  - Does not mean SES
  - Does mean
    - Hoodie vs scrubs for Black men
    - Interaction with discordant medical providers by Black women
**Take Action (Commune)**

- Don’t be a silent partner
  - If you witness a racist act, you can engage

- Talk to white friends and family about racism – avoidance of these conversations can perpetuate racism; be willing to challenge racist jokes

- Spend time with white people in your community who are at ‘precontemplation’ - acknowledge your own challenge and imperfections engaging in anti-racism and invite them to join you
Anti-Racist Strategies for Blacks
Acknowledge Trauma of Racism (Educate)

- Know that the trauma of racism involves physical trauma evident by heightened physiological responses
- Know that there are also emotional repercussions including psychological distress
- Give ourselves grace and seek out supports to remedy the problem
Practice self-care (Experience)

- Use mindfulness to engage in contemplation of the trauma and freeing the body of that trauma
- Make space to reflect on internal experiences
- Express emotions and a physical release
- Understand your body’s response to racial trauma
- Make a plan for how to heal and be prepared to use this plan

Adapted from report from The Conversation, https://theconversation.com/grief-is-a-direct-impact-of-racism-eight-ways-to-support-yourself-91750
Engage with Community *(Commune)*

- Do not keep trauma in your body, build safe spaces within your community
- Create community support with information sharing
- Make space for transgenerational teachings (elders and children)
- Engage with different social media to connect or re-connect with your community
Anti-Racist Strategies for Non-Black People of Color
Reflect (Educate)

- On why it is important for Asian Americans to talk about anti-blackness in their communities
- Learn about anti-Black racism
- Understand how non-Black identity intersects with anti-Black racism
Reflect (*Educate*)

- Learn how to dismantle racism in your own way
- Learn how to overcome biases
  - Including micro-aggressions
- Make time to reflect on internal experiences
Take Action *(Commune)*

- Have difficult conversations about race with others within your community

- Take action by contacting local elected representative about observations in your communities
  - Using resist.bot app, Resistbot

- Take action by educating children
  - (See end of presentation to link to resources for talking to kids about race)
Recognizing Racial Trauma Patients
The goal is not to continue to pathologize racial and ethnic groups. Objectives are:

(1) Cease blaming
   - A clinical designation will allow healthcare professionals to recognize the experience of racism and better able to work with individuals

(2) Provides data
   - Data permits investment in anti-racism within communities and institutions
A Tool to Diagnose Racial Trauma

**UConn Racial/Ethnic Stress & Trauma Survey (UnRESTS)** – used to uncover racial trauma

- Clinician-administered semi-structured interview that is designed for a stigmatized or a racial group
  - Questions about racial and ethnic identity development
  - Person’s experience of direct overt racism
  - Person’s experience of racism by loved ones
  - Person’s experience of vicarious racism
  - Person’s experience of covert racism

A Tool to Diagnose Racial Trauma

- Questionnaire ends with a checklist designed to determine if symptoms are present in critical areas that are indicated for PTSD

- Permits the identification of racism as a health crisis with clinical evidence of harms which can permit resources allocated to instill anti-racist policies and practices

Work With Communities
Community Partnerships

Photo credit: Winona Hollins Hauge
Lessons Learned--Building

> Building Health Equity Partnerships:
  – Attend meetings or events convened by community members or organizations
  – Don’t come with an agenda
  – Be present and ask questions
  – Identify common goals
  – Know what strengths, assets, and opportunities you have to offer
  – Share yourself
  – Show up. Often. Consistently.
Lessons Learned--Preparation

Preparation For Health Equity Action:

- Prioritize community-identified needs and strategies
- Match your strengths, assets, and opportunities to those needs
- Gather support from decision-makers or those with power
- Be transparent, clear, and intentional with your communication
- Identify appropriately scaled and measurable strategies
  - Affect policies, practices, or norms
  - Think “baby steps” ➔ break down into focused and scaffolded activities
  - Activities are appropriate and acceptable to, informed, or driven by community
Lessons Learned--Implementation

> Health Equity Action Implementation:
  – Go hard or go home
  – Set up ways of showing impact (e.g., data)
  – Be nimble; be responsive
  – Share your successes inside and outside the community
  – Ask how the community feels about your work together
  – Consider completing several community “asks” without asking in return
Lessons Learned--Sustainment

> Sustaining Health Equity Action:
  – Keep showing up. Often. Consistently.
  – Set up ways to institutionalize action
  – Continue to identify new resources and opportunities for partners
  – Ask partners how they feel about your work together
  – Find synergies with your other efforts
  – Be open to change
  – Find ways to leverage change to build capacity
Typical Group Leadership Models

- No leader
- One leader
- Hierarchical leaders

> One leader is often not sustainable
> Variation of stakeholder/partner capacity may still limit those willing and able to take leadership
> Build capacity among members with goal of shared leadership
Shared Leadership Model

> Process to build relationships so that everyone feels involved

> Goals of group are defined collectively

> Work to be done is identified and valued by all

> Work responsibilities are shared

> Group leadership may be shared or may rotate

> Transparent and open communication among all
Organizational Work
Anti-racism in Institutions and Systems: A “Healthy” Approach

> Systemic racism is a symptom of disease—treat it!
> Interrogate racist mechanisms at work in your setting
> Co-design interventions to disrupt racist mechanisms
  – Partner with patients and stakeholders
  – PDSA cycles to test ACTION
  – Open and transparent communication
> Advocate for and strategies to rectify disparities
> Address social determinants of health in clinical and community settings
Transforming UW School of Nursing

January 13, 2021

Update on UW School of Nursing Anti-Racism Workgroups

Last spring, the UW School of Nursing asked for feedback from students, staff, faculty, and community stakeholders about areas and ways to promote anti-racism. Based on this input, a number of anti-racism workgroups were formed; see here. Workgroup efforts began this past late summer or early autumn. Below is an update of some areas that have been pursued.

- An Anti-Racism Pledge was drafted on November 2, 2020, and presented to the school’s Shared Leadership Council. Feedback was solicited through Faculty Council, Staff Council, and Student Leadership Board. It is still under review. A link to the draft pledge is posted on the school’s new DEI homepage and can be directly accessed here.

- A plan for school-wide training is presently being determined. Budgetary allocations were being determined during autumn 2020. Discussions with external experts and speakers were initiated and will be further pursued during Winter 2021 to arrange a training plan and schedule.

- On October 2, 2020, a training on diversity and equity best practices for hiring faculty and staff was conducted. This was led by Dr. Chadwick Allen, Associate Vice Provost for Faculty Advancement and was attended by both faculty and staff. UW School of Nursing Associate Dean for Diversity, Equity and Inclusion Butch de Castro has been and is presently advising ongoing faculty and staff search committees on implementing these best practices.
Taking an “Equity Pause”

“When big decisions in tight moments with big impacts are being contemplated, it is sadly not surprising to me that the consequences of racism are not accounted for.”

-Dr. Ben Danielson

> Worked with clinic staff to establish process for making decisions differently

> A “time out” moment like process established in operating rooms
  – Are communities most impacted a part of this conversation?
  – What are unintended consequences we can think of here?
  – Are we making assumptions about people’s capacities, desires, strengths, or needs when making this decision?

Dr. Ben Danielson. Available at: https://www.facebook.com/uwsph/videos/614907405840743.
Anti-racist Implementation in Clinics

> Implementation of health systems-level evidence-based interventions (EBIs) to increase cancer screening rates using an anti-racist lens

- Partners:
  > WA Department of Health
  > Federally Qualified Health Centers (FQHCs)
  > University of Washington

- EBIs:
  > Patient reminders
  > Provider assessment and feedback
  > Removing structural barriers

- Focus on anti-racist implementation strategies that will ameliorate racial disparities in service outcomes
Activating Nurses to Address Social Determinants of Health

> Identifying barriers and facilitators for nurses to assess and address SDOH at point of care
  
  – Partners:
    > Washington Center for Nursing
    > University of Washington
  
  – Anti-racist research approach:
    > How does my [insert phase of research] potentially align or contribute to racist or hegemonic ideas, methods, or approaches?
    > How does my [insert phase of research] incorporate ways of thinking or doing that is grounded in the experiences or priorities of oppressed, marginalized, or excluded peoples?
    > What is the impact of my research on oppressed, marginalized, or excluded peoples?
Resources
Resmaa Menaken

My Grandmother’s Hands (NYT Best seller)

Importance of our bodies in processing trauma
Resmaaa Menakem — ‘Notice the Rage; Notice the Silence’ - The On Being Project

National Wellness Institute (2019 Interview)

Arizona Center for Compassion Studies (Podcast 2020)
Resources to Support African American Healing

Podcasts

- Black girls heal (an online community to address effects of unresolved trauma from childhood),
  - Podcast (blackgirlsheal.org)

- Melanin and mental health
  - Session include, healing, gratitude, finding Black or Latinx therapists
  - Between Sessions Podcast | Melanin & Mental Health® (melaninandmentalhealth.com)

Books

- My Grandmother’s Hands (Resmaa Menaken)
Anti-Racist Resources for Everyone

TedTalks, Readings, Podcasts

- Overcoming anti-black bias
  - Vernā Myers: How to overcome our biases? Walk boldly toward them | TED Talk

- Racism in Healthcare (podcast)
  - Racism, Medicine and the COVID-19 Vaccine (buzzsprout.com)
Anti-Racist Resources for Everyone

TedTalks, Readings, Podcasts

- How to dismantle racism in your own way
  Racial-Microaggressions.pdf (purdue.edu)

- How to overcome biases
  Vernā Myers: How to overcome our biases? Walk boldly toward them | TED Talk

- Talking to kids about race
  - How to Talk to Kids About Race: Books That Can Help (readbrightly.com)
Anti-Racist Resources for Everyone

Topics

Why important for Asian Americans to talk about anti-blackness in your communities
- Asian Americans need to talk about anti-blackness in our communities (msn.com)

Indigenous women write about beauty standard and anti blackness
- Beauty Standards and Anti-Blackness | Indigenous Womxn's Politics and Resistance (brown.edu)

- Contact local rep
  - https://resist.bot/
Questions...
Thank You!

WENDY E. BARRINGTON, PHD, MPH
Pronouns: she/her
Associate Professor

Child, Family, and Population Health Nursing
Health Sciences Building, Box 357263
1959 NE Pacific Street, Seattle, WA 98195
206.616.6298 (office)
wendybar@uw.edu / nursing.uw.edu

Black Lives Matter

SHARON S. LAING, PHD, MS
Pronouns: she/her
Assistant Professor

School of Nursing and Healthcare Leadership
University of Washington, Tacoma
1900 Commerce St., Tacoma, WA 98402
253.692.4470 (office)
laings@uw.edu / nursing.uw.edu

Black Lives Matter