

A THREE-PART VIRTUAL SERIES

BATTLING RACIAL HEALTH DISPARITIES IN EMPLOYER-SPONSORED HEALTHCARE

January 21, 2021 | 9:00 AM - 11:30 AM

INCLUDED
HEALTH

lyra

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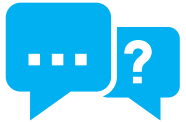
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Webinar Procedures



All lines will be muted



Please submit all questions using the “Q&A” dialog box



Email Diane Engel at dengel@nebgh.org with any issues during this webinar



The recording and a PDF of the slides will be shared



Q&A

You have no question.

What h

☐ Send Anonymously

Send

Shining a Light on Social Injustice and Racial Disparities in Health



Karinn A. Glover

Attending Psychiatrist, Adult
Outpatient Psychiatry Department;
Assistant Professor
Albert Einstein College of Medicine

HEALTH EQUITY NOW: WHERE DO WE GO FROM HERE?

Karinn Glover, MD, MPH
(She/Her)

Assistant Professor, Albert Einstein
College of Medicine

Attending Psychiatrist, AOPD

January 21, 2021

01

Explore ways
history informs
current sociological
conditions

02

Consider impact of
discrimination on
physical health of
marginalized
populations

03

Learn ways
discrimination
affects the mental
health of
marginalized
populations

04

Examine
approaches to
address the mental
health of Black and
Brown people

OBJECTIVES

ACHTUNG!

This may be disturbing

This is deeply uncomfortable

You may feel embarrassed, angry, ashamed, guilty, and sad

Explore the emotions and reflect on them

Let's use this time as an opportunity to engage ourselves and others differently

CAVEAT

I am a cis-het Black woman of African-American heritage and recognize potential inherent challenges in speaking for another group

Not all Black/Indigenous/People of Color (**BIPOC**) will understand issues of racism and discrimination in the same manner

I endeavor to do my best

ME:

Psychiatrist

Past Medical Director at Montefiore

Trained in Public Health



ALSO ME:

- **Descendant of enslaved West Africans**
- **Grandparents = refugees**
- **Parents : Harlem in the 60's**
- **Sister to two Black men**

BACKGROUND:

We're related to someone who endured this: "...early racial socialization experiences often include listening to their parents' and grandparents' stories of living through different periods of racial tension in the U.S., including the Civil Rights movement, Jim Crow laws, and for some slavery (Shenk, 2000)."

Conversations about survival and trauma get passed down.

There is an underlying fear/anxiety of the consequences of discrimination: death? Physical harm? Job loss? Unemployment? Separation from therapist?

RACISM REFRESHER:

Interpersonal:

- **Occurs between individuals**
- **Public expressions of prejudice, hate, bias, and bigotry**
- **Burning a cross on someone's lawn, lynching, calling them a derogatory name**

Systemic:

“...the totality of ways in which societies foster racial discrimination through mutually reinforcing systems of housing, education, employment, earnings, benefits, credit, media, health care, and criminal justice” (Krieger, 2017)

These patterns and practices in turn reinforce discriminatory beliefs, values, and distribution of resources.

RACISM REFRESHER 2

Black Codes

Jim Crow

Redlining - Discriminatory lending practices

Loss of generational wealth available to most Americans (see more on the Social Security Act of 1935)

SO, WEATHERING AND ALLOSTATIC LOAD

allostatic load = the cumulative wear and tear on the body's systems owing to repeated adaptation to stressors

Evidence of early health deterioration among Blacks and racial differences in health are evident **at all socioeconomic levels**. (Geronimus, [Am J Public Health](#). May 2006)

THEMES THAT SEEM TO NOT DISAPPEAR

Criminalization

Hair, complexion, and body habitus

- Children suspended in greater number for same offenses as non-Black children
- Rules around natural hair styles, reinforcing acceptability of white traits
- Black youngsters routinely assumed to be older than stated age, incarcerated at higher rates than non-Blacks for similar crimes

HOW DOES THIS AFFECT THE BODY?

Chronic exposure to stress:

- Hypothalamic-Pituitary Axis
- Weight
- Hypertension
- Respiratory health
- Glucose metabolism

EVERY DAY DISCRIMINATION SCALE

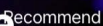
How is it currently being used?

What kinds of results are being obtained?

- Measure:
In your day-to-day life, how often do any of the following things happen to you?
 1. You are treated with less courtesy than other people are.
 2. You are treated with less respect than other people are.
 3. You receive poorer service than other people at restaurants or stores.
 4. People act as if they think you are not smart.
 5. People act as if they are afraid of you.
 6. People act as if they think you are dishonest.
 7. People act as if they're better than you are.
 8. You are called names or insulted.
 9. You are threatened or harassed.

Recommended response categories for all items:

 - Almost everyday
 - At least once a week
 - A few times a month
 - A few times a year
 - Less than once a year
 - Never
- Follow-up Question (Asked only of those answering "A few times a year" or more frequently to at least one question.): What do you think is the main reason for these experiences? (CHECK MORE THAN ONE IF VOLUNTEERED).
RECOMMENDED OPTIONS
 1. Your Ancestry or National Origins
 2. Your Gender



The problem with race-based medicine

Notes + references

views

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RACE-BASED MEDICINE VS ANTIRACIST MEDICINE

Dorothy Roberts' 2015 TED Talk

TED

Ideas worth spreading

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David R. Williams | TEDMED 2016

How racism makes us sick

Details

Transcript

About the talk

21 languages

Why does race matter so profoundly for health? David R. Williams developed a scale to measure the impact of discrimination on well-being, going beyond traditional measures like income and education to reveal how factors like implicit bias, residential segregation and negative

1,587,413

views

TEDMED 2016 |

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The problem with race-based medicine

1.4M views

14:36

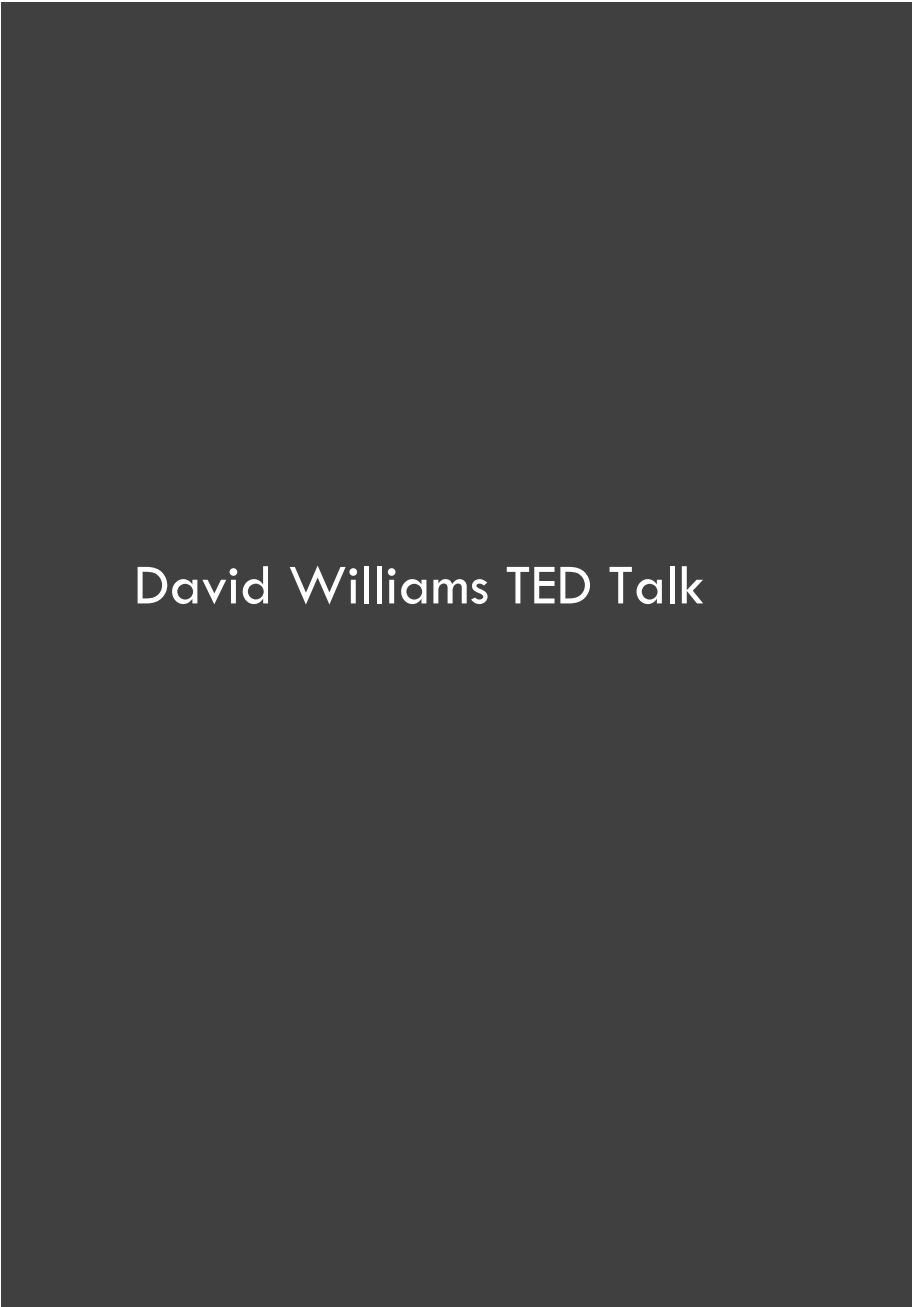
Why your doctor should care about social justice

1.2M views

13:49

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RACE-BASED MEDICINE VS ANTIRACIST MEDICINE



CARDIOVASCULAR HEALTH

Blacks have a higher odds of reporting discrimination than Whites and report discrimination in nearly all aspects of experiences in public and private institutions, including health care and the police. (Bleich, 2019)

Participants with a history of mood disorder who reported high levels of racial discrimination had the greatest risk of cardiovascular disease (Chae, 2012)



SHUR STUDY:

2017 Survey of the Health of Urban Residents (SHUR) identified connections between police brutality and **medical mistrust**.

Novel measures of population-specific stressors include a range of negative encounters with the police, frequency of these encounters, and respondents' assessments of whether the encounters were necessary. SHUR assessed the likelihood of calling the police if there is a problem, worries about incarceration, and cause-specific stressors such as race-related impression management.


Definition of **Brutality**: Not merely use of force; police action that dehumanizes the victim, even without conscious intent

ANTI-RACIST CLINICAL SPACES

It's really important to make the clinical environment a place that doesn't mirror the racial trauma of the outside world.

Here are some ways tech is making that happen


APPS FOR DIVERSE FOLKS



Liberate: Black Meditation App
Meditation For Us By Us

4.8 ★★★★★
223 Ratings

9+
Age



Doctor On Demand
Video doctor visits, 24/7


4.9 ★★★★★
67K Ratings

#35
Medical

17+
Age

See a doctor face-to-face, 24/7

Board-certified licensed ps & psycho



Ayana
Finding The Ideal Therapist

3.2 ★★★★★
11 Ratings

12+
Age

3:25

3:26

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FAQ's



Pride Counseling
Online LGBTQ Counseling

4.6 ★★★★★
722 Ratings

12+
Age

Accepting and accessible

Get match licensed co

PRIDE COUNSELING

Are you currently experiencing overwhelming sadness or depression?

No

Yes

Psychotherapy is an effective treatment for depression.

Today Games Apps Arcade Search

The Difference

the right talk at the right time can make all The Difference

www.thedifference.co | info@thedifference.co

A WOMAN- OWNED STARTUP


Doesn't require an app

Powered by Alexa

Quick turnaround time for initial session
and follow up

Diverse staff, trained in structural
competency

Available to frontline workers and first
responders



Black women are **2 to 3 times**
more likely to die from a
pregnancy-related cause than
white women

Source: Centers for Disease Control and Prevention

SMALL BUSINESS SPOTLIGHT

EMPOWERING BLACK WOMEN IN HEALTH CARE

"HEALTH IN HER HUE" CONNECTS WOMEN OF COLOR WITH "CULTURALLY COMPETENT" PROVIDERS

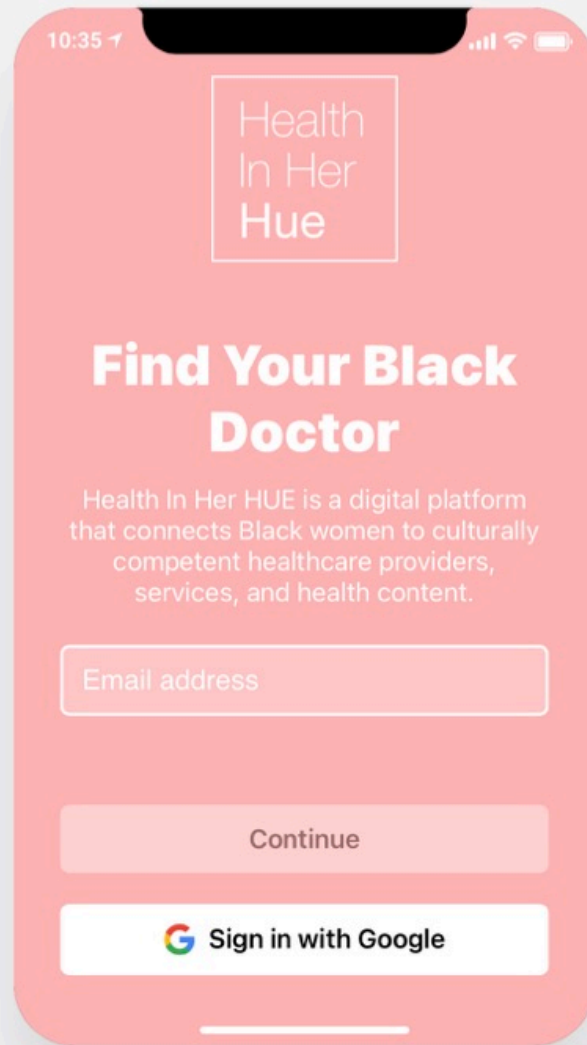
CBSN

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Health in Her Hue connects Black women to "culturally competent" health providers





Health In Her HUE

by Health In Her HUE

New app to be released in Apple and Google Play stores December 21, 2020

SHARE APP



Scan with camera to install app.

www.therapyforblackgirls.com

www.therapyforlatinx.com

<https://www.ngttcn.com/> (Queer and Trans Therapists of Color)

<https://openpathcollective.org/> (for lower cost options)

<https://www.beam.community/> for online mental health resources for BIPOC

<https://www.asianmhc.org/> For Asian community members

ONLINE DIRECTORIES FOR BIPOC TO
FIND THERAPISTS: BE THEIR PARTNERS!



1. Gather data, looking retrospectively at retention rates of BIPOC employees.



2. Gather data on patient satisfaction scores by cultural identity and employee satisfaction scores

TWO CONCRETE STEPS

LINKS

Bryan Stephenson: <https://hub.jhu.edu/2018/05/24/commencement-2018-stevenson/>

Krieger: The Lancet 2017

[https://www.thelancet.com/pdfs/journals/lancet/PIIS0140-6736\(17\)30569-X.pdf](https://www.thelancet.com/pdfs/journals/lancet/PIIS0140-6736(17)30569-X.pdf)

socialized racial trauma:

https://www.bc.edu/content/dam/files/schools/lsoe_sites/isprc/pdf/racialtraumaisrealManuscript.pdf

Bleich, et al: Discrimination in the United States: Experiences of black Americans Health Serv Res. 2019 Dec;54 Suppl 2(Suppl 2):1399-1408

Tynes, et al: Race-Related Traumatic Events Online and Mental Health Among Adolescents of Color

Arline Geronimus: “Weathering” and Age Patterns of Allostatic Load Scores Among Blacks and Whites in the United States

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1470581/>

LINKS

David Williams on the Ezra Klein Podcast 2020:

<https://www.stitcher.com/podcast/vox/the-ezra-klein-show/e/69533249>

David Williams “Everyday Discrimination Scale”

[Racial differences in physical and mental health. Journal of Health Psychology. 1997](#)

Neville, H: on Racial Trauma:

<https://psycnet.apa.org/fulltext/2019-01033-001.pdf>

Alang, S: [J Racial Ethn Health Disparities](#). 2020 Aug 24 : 1–20.

Dismantling Racism:

<https://www.dismantlingracism.org/>

THANK YOU TO THESE SUPPORTERS AND LEADERS:

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Race, Equity and Health – Strategies for Using Data to Act



K. Andrew Crighton, MD

Chief Executive Officer

CEO Roundtable on Cancer



CEO ROUNDTABLE
ON CANCER

Race, Equity and Health

Using Data to Act

K. Andrew Crighton, M.D. Chief Executive Officer

Dr. Martin Luther King, Jr.

"Of all the forms of inequality, injustice in health is the most shocking and the most inhuman because it often results in physical death."

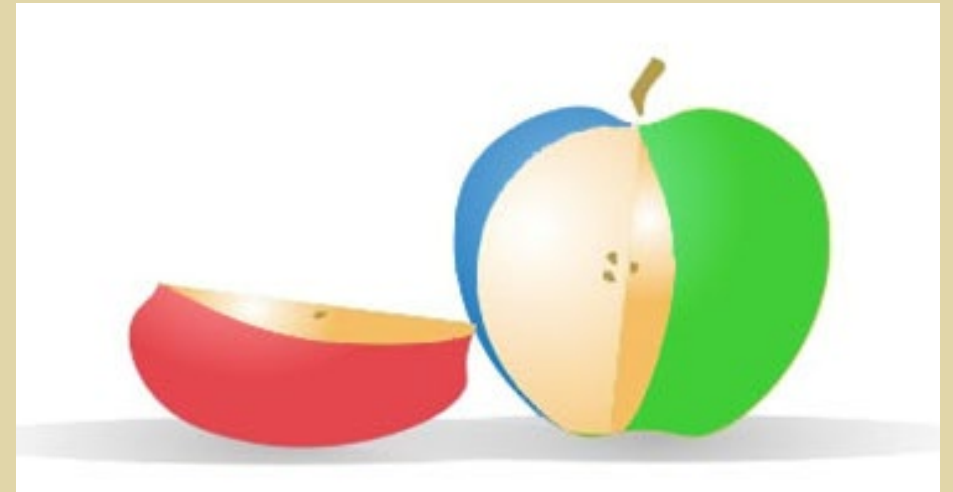


CEO ROUNDTABLE
ON CANCER

Definition of Health and Well-being

Health and well-being can be defined by how people think, feel and function at a personal and social level and how they evaluate life

Develop a Holistic Approach





This is Not New

- Health People 2010 – January 2000
 - Eliminating racial and ethnic disparities in health and health outcomes as one of two overarching goals
- Institute of Medicine – March 2002
 - Unequal Treatment: Confronting Racial and Ethnic Disparities in Health Care
- Office of Minority Health and NBGH – December 2003
 - Why Companies Are Making Health Disparities Their Business
- NBGH – July 2009
 - 18-page brief on how companies can address health disparities





Why are We Still Here?

- No sustainable solution yet
 - This is a big problem, but we are satisfied with short-term incremental programs
- A few employers can't do this alone
- Health and health care are local, not national
- Health is more than just medical benefits
- Don't measure health with the focus on health equity





Prudential's Journey Using Data

- 2003 started an integrated data warehouse
 - Medical, Prescription Drug, Disability, Workers' Comp, Health Risk Assessment, Lab Results Data, On-site Clinic, On-site Fitness Centers
 - Incorporated custom questions to HRA as they were developed
- Multiple views of health equity
 - Job level, Race, and Gender
- Created a framework and process to track health inequities
 - We followed a three-year trend since we did not have statistically significant sampling





Racial and Ethnic Disparities Among Employees at Large Firms

- 46 Large employers with study set of over 1.3 Million employees
- Looked at 15 conditions for 6 ethnic and racial groups
- Results
 - Native Americans and African Americans had a significantly higher prevalence for almost half of the conditions
- Conclusion
 - Employers should be cautious when initiating programs that may unfairly discriminate against employee groups with inherent medical conditions associated with certain race or ethnic groups



Call to Action

- C-Suite has to be engaged
 - It takes more than HR and Benefits, which is why you see the call for a Chief Health Officer emerging
- We must have the correct data to measure impact on health equity
 - More holistic view of health and well-being
 - It must become the norm
- Look beyond our employee population to influence community health
 - We must work together through coalitions to influence local health outcome



Panel I:

Finding the Gaps in Meeting Health Needs of Black Indigenous People of Color (BIPOC) Populations

Panelists

Danielle Shanes

Head of Benefits and Global
Well-Being
NBA

Cynthia Williamson

Senior Director, Benefits
Ralph Lauren

Moderator

K. Andrew Crighton, MD

Chief Executive Officer
CEO Roundtable on Cancer

Panel II:

Identifying Resources and Partners to Help Address Disparities

Panelists

Danielle Cottonham, PhD

Clinical Lead, DE & I Initiatives
Lyra Health

Michael C. Sokol, MD

Senior Vice President of
Clinical Strategy
Quantum Health

Shilpa Patel

Chief Business & Legal Officer
Kindbody

Moderator

K. Andrew Crighton, MD

Chief Executive Officer
CEO Roundtable on Cancer



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February 11, 2021