

Bridging the Gap: Collective Healing & Systems Change

February 11, 2021

Housekeeping

- You will be on mute. Please use the chat & Q&A features. CPEHN staff will be monitoring the chat and Q&A.
- ► To raise your hand to speak, please:
 - click on "more" icon in the side bar below.
 - "participants"
 - Then click on the orange red hand.
- If you need technology help
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 - https://zoom.us/j/97748180307?pwd=emFBYjJNZFJ0T2k3VUM1N W92ZjU3UT09
 - Call (510) 832-1160 ext. 308
 - Click "Community" and "ask organizers anything" on the lefthand side navigation bar
- All sessions will be recorded and recordings and slides will be available after the conference
- Please show consideration and respect for attendees (active listening, disagreement with civility, awareness of your audio, etc).

Equitable COVID-19 Response, Vaccine Distribution, and Recovery

Tue. Feb 9, 2021 © 10:15 AM - 11:15 AM 44 Attending 0 Questions

Add to My Agenda Like session Rate Session

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video screen to complete an evaluation!

California Pan-Ethnic

HEALTH NETWORK

#VoicesForChange2021



Getting Started...

- Please include in the Chatbox: Introduce yourself. Where are you coming from (city, Counties, communities...) and to <u>WHOM</u> do you do this work for?
- Moderator & Speaker Introduction & Opening Remarks
- Body Scanning Meditation

#VoicesForChange2021



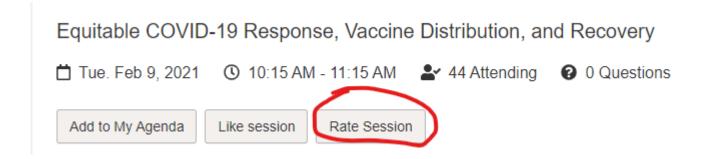
Learning Competencies

- Increasing **AWARENESS** of how/specific cases/examples of how systems continue to "traumatize" and "harm" people of color + LGBTQ+. How does it show up in dealing with the "systems" continuously?
- UNDERSTANDING on HEALING. What is it? How do you contextualize it in 'Health Equity'
- REFLECTING on how SYSTEMS must change to integrate itself with "Healing." From where you sit, what can we all do in order to start marrying Healing and Systems Change?



Thank you!

➤ Session Evaluations – click "Rate Session" below the video screen. There is no Evaluation for the entire conference. Please take 1 minute to go to each workshop/planery and "rate" sessions. It helps us to improve our future conferences!



Racism as a Public Health Crisis:

On the work to heal and be made whole



February II,202I
RheaW Boyd MD,MPH
California Pan-Ethnic Health Network Conference Workshop
@RheaBoydMD

Racism kills people.

"But all our phrasing—race relations, racial chasm, racial justice, racial profiling, white privilege, even white supremacy—serves to obscure that racism is a visceral experience, that it dislodges brains, blocks airways, rips muscle, extracts organs, cracks bones, breaks teeth. You must never look away from this. You must always remember that the sociology, the history, the economics, the graphs, the charts, the regressions all land, with great violence, upon the body."

-Ta-Nehisi Coates, Between the World and Me

Health Disparities

Population-level differences in health.

Health Inequities

Population-level differences in health that are avoidable, unnecessary, unfair, and unjust.

Health Inequities arise when certain populations are made vulnerable to illness or disease, often through the inequitable distribution of protections and supports.

To heal and be made whole, we must *first*, tell the truth about the breaking.



The Atlantic Editors. Scenes from an American Insurrection. The Atlantic. Jan 6,2021.

Los Angeles Times

At protests, mostly white crowds show how pandemic has widened racial and political divisions



1/30 Over 1,500 people attended a rally at the capitol in Sacramento, May 1, 2020. asking for the reopening of the economy, closed due to the coronavirus. (Carolyn Cole/Los Angeles Times)

CORONAVIRUS)

His plane-disinfecting invention didn't take off - until COVID-19 hit

Tom Brady holds group workout with teammates days after NFLPA recommended against it

How will the COVID-19 pandemic end?

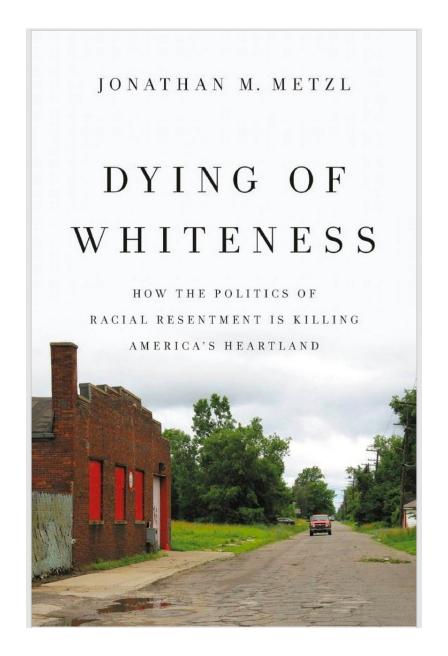
What we are wondering: Updates, goals, links, numbers and distractions (free)

These governments tamed COVID-19. They're keeping social distancing in place

Cases statewide »

196,044 confirmed

5,725



Metzl J.Dying of Whiteness. Basic Books. 2019.



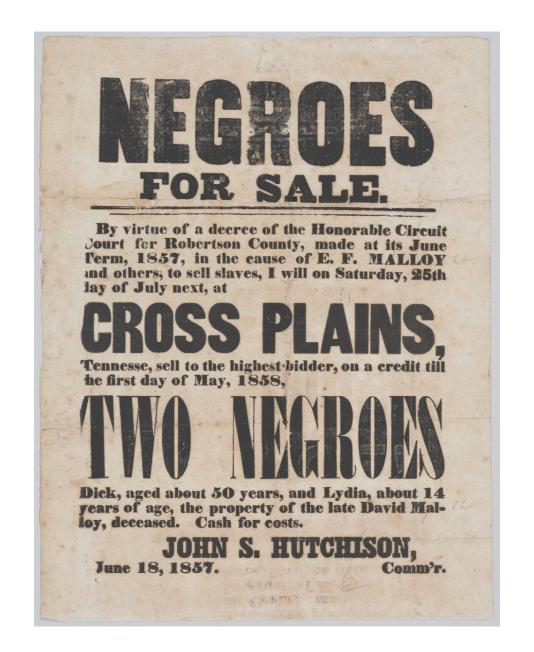
Time Magazine. The Roots of Baltimore's Riots. Photo by Devin Allen. 2015.



Don Hogan Charles. The New York Times.



Wikipedia Commons. Street car terminal Oklahoma City, Oklahoma. 1944.



Extracts and re-locates resources away from those with greatest need.

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Relies on policing to reenforce social hierarchies.

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Relies on policing to reenforce social hierarchies.

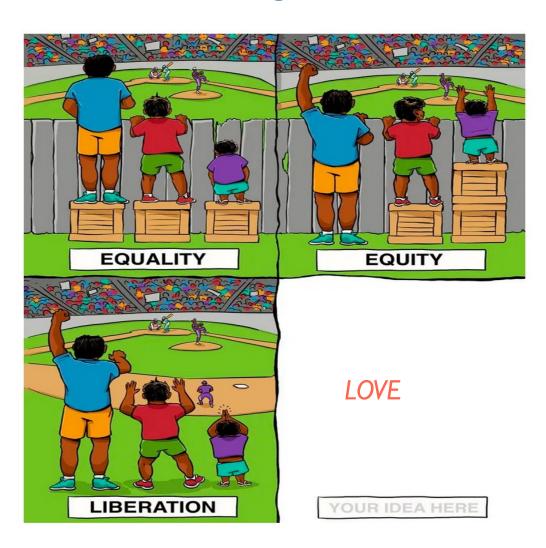
Together, these structures systematically divest from communities, separate families, and disproportionately pathologize and criminalize minoritized groups.

White Supremacy is dangerous.

"White nationalism and authoritarianism imperil democracy; democracy and equality are co-constitutive; equality is essential to health; the social, economic, and political conditions necessary to advance equality safeguard the planet."

To adequately respond, at scale, to racism as a public health crisis, we must move towards abolition.

Abolishing Racism?



Abolishing Racism



Copyright 2020 by Nicolás E.Barceló and Sonya Shadravan (Artist:Aria Ghalili)

Barceló NE, Shadravan S. Race, Metaphorand Myth in Academic Medicine Acad Psychiatry. 2020 Oct 21.

We have to confront the ways inequality is "constructed and



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Annals of Internal Medicine

Academic Health Centers' Antiracism Strategies Must Extend to Their Business Practices

Shawn F. Johnson, BS*; Ayotomiwa Ojo, BS*; and Haider J. Warraich, MD

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Annals of Internal Medicine

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"Low-wage jobs in healthcare are disproportionately held by Black laborers. [The wage disparities] are staggering: Approximately half of Black female healthcare workers earn less than \$15 an hour, a % almost double that of their white counterparts."

Himmelstein KEW, Venkataramani AS. Economic vulnerability among US female health care workers: potential impact of a \$15-per-hour minimum wage Am | Public Health. 2019;109:198-205.

Truth, Reconciliation, and

Repation Apologizes After Vaccine Allocation Leaves Out Nearly All Medical Residents

December 18, 2020 · 8:04 PM ET

LAUREL WAMSLEY



Truth, Reconciliation, and

Repation Apologizes After Vaccine Allocation Leaves Out Nearly All Medical Residents



"We take complete responsibility and profusely apologize to all of you. We fully recognize we should have acted more swiftly to address the errors that resulted in an outcome we did not anticipate," they wrote.

"We are working quickly to address the flaws in our plan and develop a revised version," the executives and deans wrote. They said they anticipate being able to vaccinate "a substantial segment of our community" once a larger shipment of vaccines arrives, hopefully next week.

Advance Anti-Racism

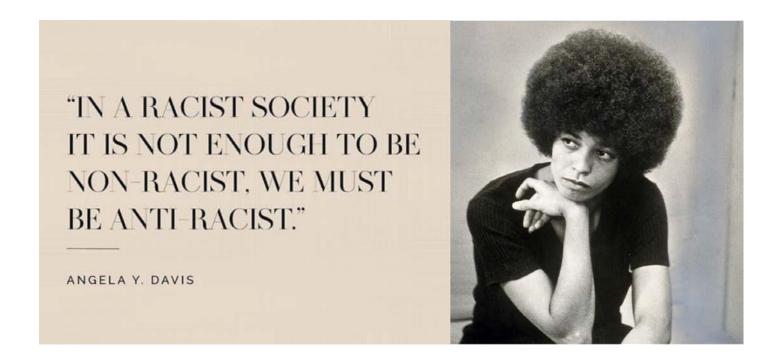


ANGELA Y. DAVIS



"Institutionalized Racism is often evident as inaction in the face of need."

Advance Anti-Racism



"[Anti-racism] requires more than being *passive* within a system or institution that harms others."

Build Sanctuary

"Black people live without sanctuary in the United States..."

- Professor Leah Wright Rigueur, Harvard University

Build Sanctuary

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...from the intersecting forms of violence that threaten and shorten their lives.

Hardeman RR, Medina EM, Boyd RW. Stolen Breaths. N Engl J Med. 2020 Jul 16;383(3):197-199. 2020 Jun 10

Build Sanctuary

A PIECE OF MY MIND

Oluwadamilola "Lola" M. Fayanju, MD, MA, MPHS

Duke University, Durham, North Carolina; and Department of Surgery, Durham VA Medical Center, Durham, North Carolina.

Hiding in Plain Sight

I have a superpower. I can become invisible. But I can't usually control when and where I do.

Sometimes it's on a plane, when the flight attendant fails to offer me a snack or a beverage even though my tray is down, and my eyes are seeking hers.

Sometimes it's in a meeting, when my hand is overlooked while others are called upon to speak, my arm lingering and eventually dropping, having wilted from neglect.

But in the halls of my hospital, on the dedicated research days when I dare to wear jeans, boots, and a fleece, when I can masquerade as anything but a doctor as I make my way to my office for a day of writing, I can truly hide in plain sight.

So I do. And I watch.

I watch the way no one makes space for me in the hall and contrast it with the small but impregnable berth my white coat typically provides. I watch the way that students and residents continue their beelines in my direction, assuming I will be the one who swerves when the time comes. I watch the way security guards try to

hustle me along if they perceive me to be in the way of a patient they are escorting. I watch the custodian continue to mop as I walk by, even as he stopped mopping for the young male surgical resident who had just walked in front of me.

But the people I watch most closely when I'm invisible are the other black women in the hall.

I watch them cede right of way to those walking toward them. I watch them make change in the gift shop in order to have the exact bus fare for their long, winding, multistop rides home. I watch them corral small children through maze-like, light-filled halls lined with floor-to-ceiling windows and expensive artwork, keeping them in line, fearful that others will interpret their rambunctiousness as a sign of a dangerous nature or substandard upbringing. I observe that they do with their children what I do with mine: view them through the eyes of people who might judge their brown bodies and pray that the children give onlookers no reason to judge.

Confront Whiteness

INTRODUCTION

The summer of 1967 again brought racial disorders to American cities, and with them shock, fear, and bewilderment to the Nation.

The worst came during a 2-week period in July, first in Newark and then in Detroit, Each set off a chain reaction in neighboring communities.

On July 28, 1967, the President of the United States established this Commission and directed us to answer three basic questions:

What happened? Why did it happen?

What can be done to prevent it from happening again?

To respond to these questions, we have undertaken a broad range of studies and investigations. We have visited the riot cities; we have heard many witnesses; we have sought the counsel of experts across the country.

This is our basic conclusion: Our Nation is moving toward two societies, one black, one white—separate and unequal.

Reaction to last summer's disorders has quickened the movement and deepened the division. Discrimination and segregation have long permeated much of American life; they now threaten the future of every American.

This deepening racial division is not inevitable. The movement apart can be reversed. Choice is still possible. Our principal task is to define that choice and to press

for a national resolution.

To pursue our present course will involve the continuing polarization of the American community and, ultimately, the destruction of basic democratic values.

The alternative is not blind repression or capitulation to lawlessness. It is the realization of common opportunities for all within a single society.

This alternative will require a commitment to national action—compassionate, massive, and sustained, backed by the resources of the most powerful and the richest nation on this earth. From every American it will require new attitudes, new understanding, and, above all, new will.

The vital needs of the Nation must be met; hard choices must be made, and, if necessary, new taxes enacted.

Violence cannot build a better society. Disruption and disorder nourish repression, not justice. They strike at the freedom of every citizen. The community cannot—it will not—tolerate coercion and mob rule.

Violence and destruction must be ended—in the streets of the ghetto and in the lives of people.

Segregation and poverty have created in the racial ghetto a destructive environment totally unknown to most white Americans.

What white Americans have never fully understood—but what the Negro can never forget—is that white society is deeply implicated in the ghetto. White institutions created it, white institutions maintain it, and white society condones it.



Healing, as systems change work, ultimately requires truth, reconciliation and reparations.

It looks like processes to unlearn and dismantle, which occur in concert with processes to imagine and build.

It feels like sanctuary from oppression and passive harms.



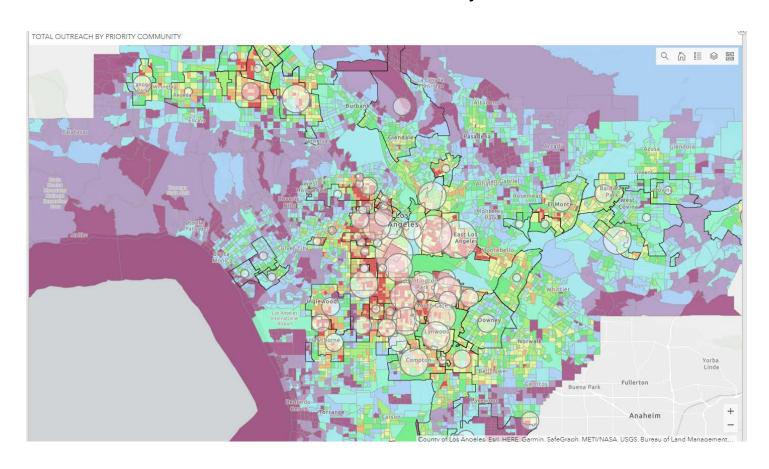
Bridging the Gap: Collective Healing & Systems Change

Rose Veniegas, Ph.D.

Senior Program Officer for Health CPEHN Bi-Annual Conference 2021

CCF and the COVID-19 Pandemic

- CARES Act Community Health Worker Outreach Initiative
- LA County COVID-19 Vaccine Work Group
- California COVID Community Health Project



CCF and the COVID-19 Pandemic

- \$24+ million in awards
- 486 grants
- Telehealth transition during crisis

