

Supporting Equity and Inclusive Excellence using a Social Justice Lens

*Manouchkathe Cassagnol, Pharm.D., BCPS, BCCP, FAHA, FCCP (she/her/hers)
Clinical Professor, Assistant Dean of Community Engagement, Equity and Belonging in College of
Pharmacy and Health Sciences, Executive Director of the Academic Center for Equity and Inclusion at
St. John's University*

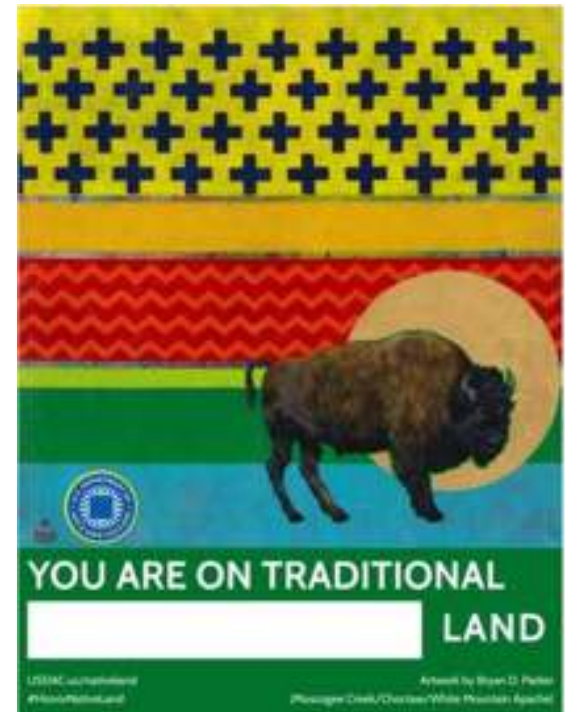


Group Exercise: Setting an Intention



Land Acknowledgment

- We are occupying the ancestral lands of the Matinecock, Rockaway, Lenape and Canarsie.
- We pay respects to their elders past and present. Please take a moment to consider the many legacies of violence, displacement, migration, and settlement that bring us together here today.
- Take a moment to think about why this historical understanding and framework especially matters to the EIC's work. **What do we understand to be the legacy of American policy that has led to dispossession of land and health? How might we begin the process of deep reflection and action to redress this harm?**
- Unsure which lands you sit on? Visit <https://native-land.ca> as a starting point.



*MATINECOCK, ROCKAWAY, LENAPE,
and CANARSIE*

Engaged Humility Practices

Hold in your mind and heart the practice you will focus on today:

1. Differentiate between safety and comfort.
2. Accept discomfort as necessary for social justice growth.
3. Speak authentically from personal experience; speak your truth.
4. Be fully present. Listen respectfully; seek to understand; listen harder when you initially disagree.
5. Encourage others to participate. Be mindful of airtime.
6. Notice your own defensive reactions and attempt to use these reactions as entry points for gaining deeper self-knowledge rather than as a rationale for closing off.
7. Assume good intent; explore the (un)intended impact of comments and behaviors.
8. Commit to unlearning "learned helplessness." Be proactive in educating yourself. Notice the ways in which you react to being unclear about expectations and be mindful about the work you expect others to do for you.
9. As you listen to people share, recognize your social positionality (e.g., race, class, gender, sexuality, ability), and how it informs your perspectives and reactions to the facilitators and co-participants

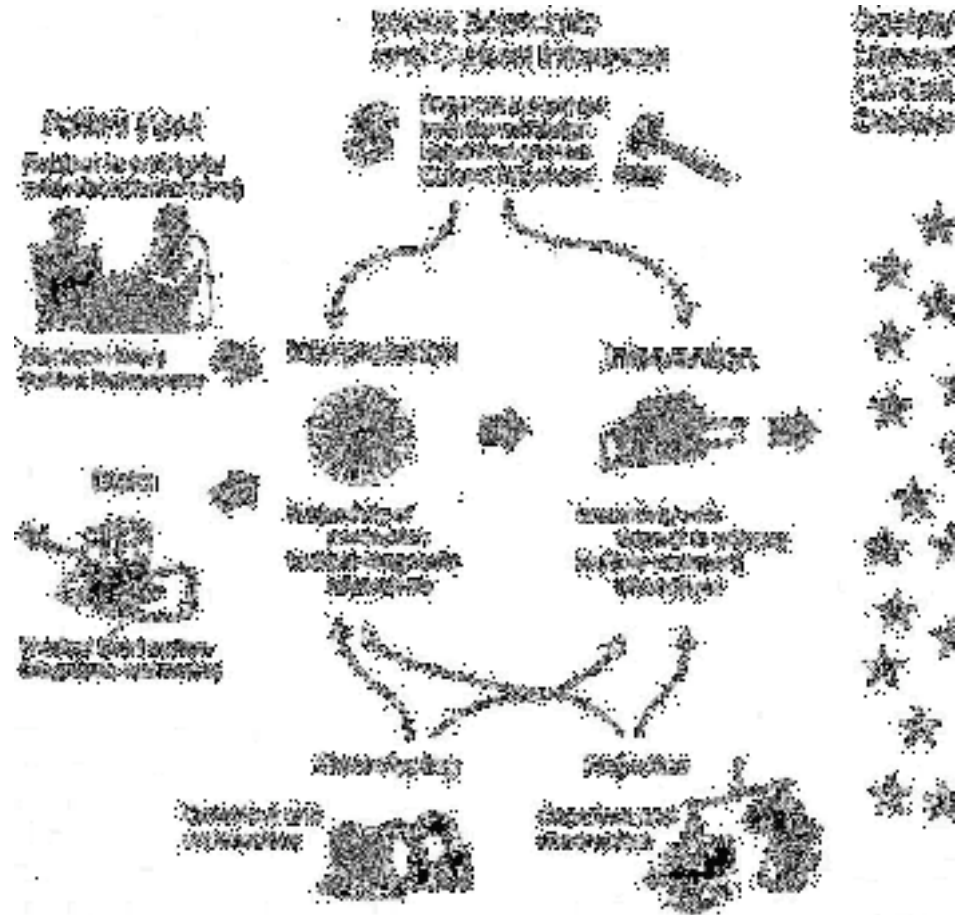
Today's Learning Outcomes

- Describe the impact of inequitable practices, policies, procedures and norms on institutional growth potential.
- Describe the structural barriers to catalyzing change for equity and inclusion within an institution.
- Identify and incorporate key strategies to catalyzing change through a social justice lens.



The IOM report found that^{1,2}:

- Disparities in health care exist and are associated with worse health outcomes.
- Health care disparities occur in the context of broader inequality.
- There are many sources across health systems, providers, patients and managers that contribute to disparities.
- Bias, stereotyping, prejudice and clinical uncertainty contribute to disparities.
- A small number of studies suggest that racial and ethnic minority patients are more likely to refuse treatment.



1. AMA statement: Reducing health disparities in healthcare. Available at: <https://www.ama-assn.org/delivering-care/patient-support-advocacy/reducing-disparities-health-care>; Accessed April 4, 2021; 2. Riley WJ. Health disparities: gaps in access, quality and affordability of medical care. *Trans Am Clin Climatol Assoc.* 2012;123:167-174.

Social Determinants of Health

Figure 1
Social Determinants of Health¹

Economic Stability	Neighborhood and Physical Environment	Education	Food	Community and Social Context	Health Care System
Employment	Housing	Literacy	Hunger	Social integration	Health coverage
Income	Transportation	Language	Access to healthy options	Support systems	Provider availability
Expenses	Safety	Early childhood education		Community engagement	Provider linguistic and cultural competency
Debt	Parks	Vocational training		Discrimination	Quality of care
Medical bills	Playgrounds	Higher education		Stress	
Support	Walkability				
	Zip code / geography				

Health Outcomes
Mortality, Morbidity, Life Expectancy, Health Care Expenditures, Health Status, Functional Limitations

From midtown Manhattan to the South Bronx in New York City, life expectancy declines by 10 years²



KFF

1. Arrtiga et al. Disparities in Health and Health Care: Five Key Questions and Answers. Available at: <https://www.kff.org/racial-equity-and-health-policy/issue-brief/disparities-in-health-and-health-care-five-key-questions-and-answers/> ; Accessed April 3, 2021; 2. Berwick D. The Moral Determinants of Health. *JAMA*. 2020;324(3):225-226. doi:10.1001/jama.2020.11129

Commonwealth Fund Scorecard 2021

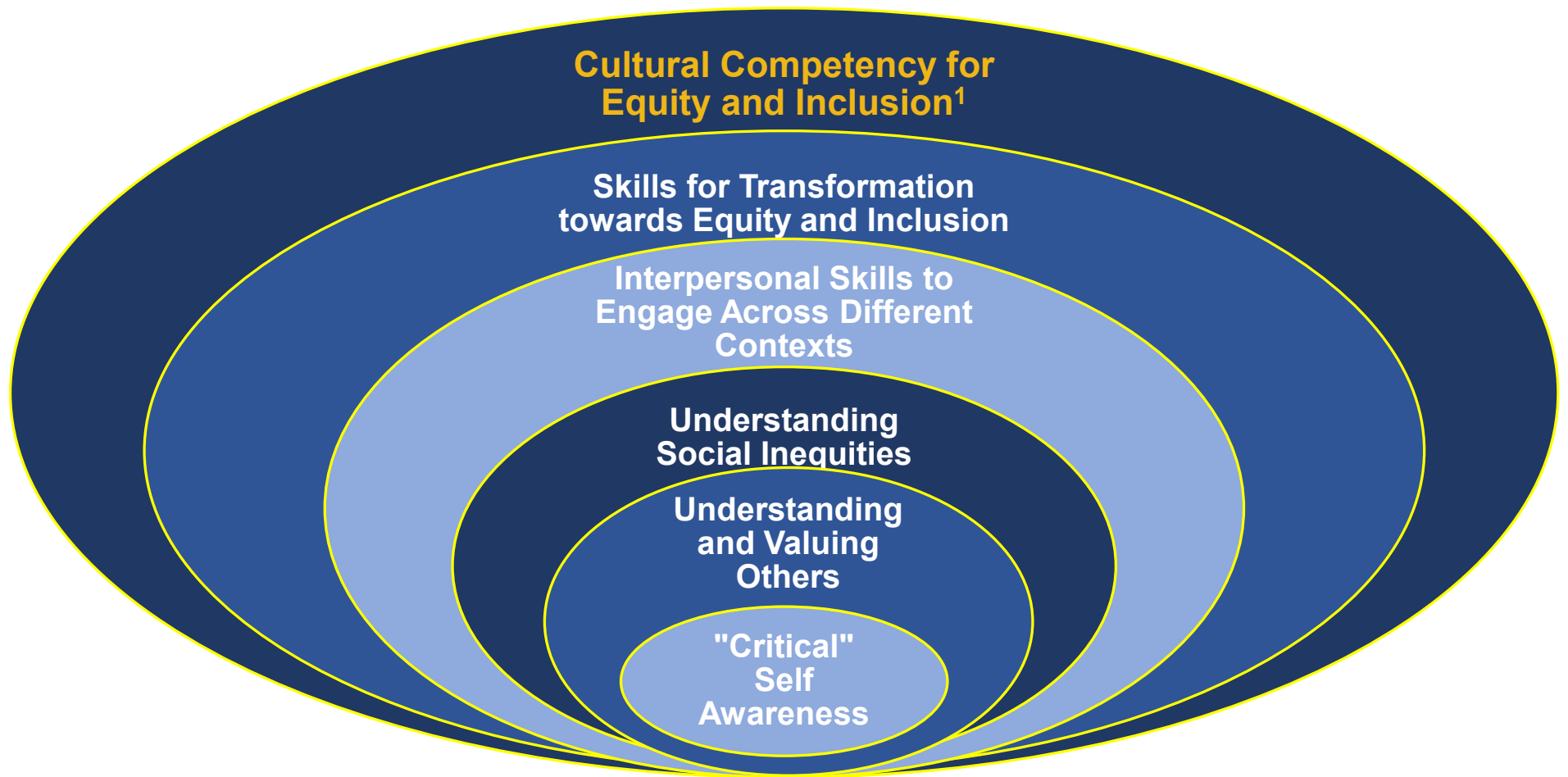
- [Health and health care disparities](#) exist between white and Black, Latinx/Hispanic, and AIAN communities in nearly all states
 - Health Outcomes

- “In most states where data are available, Black people and AIAN people are more likely

“Transformative change will depend on policy and practice changes to make access to care more equitable and to ensure equal treatment in the delivery of care.”

AANHPI and white adults”

- Quality and Use of Healthcare Services
 - “Black Medicare beneficiaries are more likely than white beneficiaries to be admitted to a hospital or to seek care in an emergency department for conditions typically manageable through good primary care”



1. Goodman D. Cultural Competency for Equity and Inclusion: A Framework for Individual and Organizational Change. Volume X, Issue 1, April 2020; pp 6-24

DEI Efforts begin at Critical Self-Awareness



- Critical self-awareness is a primary component of interacting effectively across difference, adequately addressing DEI issues in work, training, teaching, or learning spaces, and enacting a commitment to equity

Pay Attention Now (PAN): A tool for honing your anti-oppression lens

- Involves intentionally observing and noticing your own and others' behaviors, comments, and feelings
- PAN-ing all around us (*and inside of ourselves*) increases our ability to notice the patterns of treatment and experiences of members of both dominant and subordinated groups
- Understanding that you have social identities that frames how you are experiencing a space



Social Intersecting Identities and Positionality

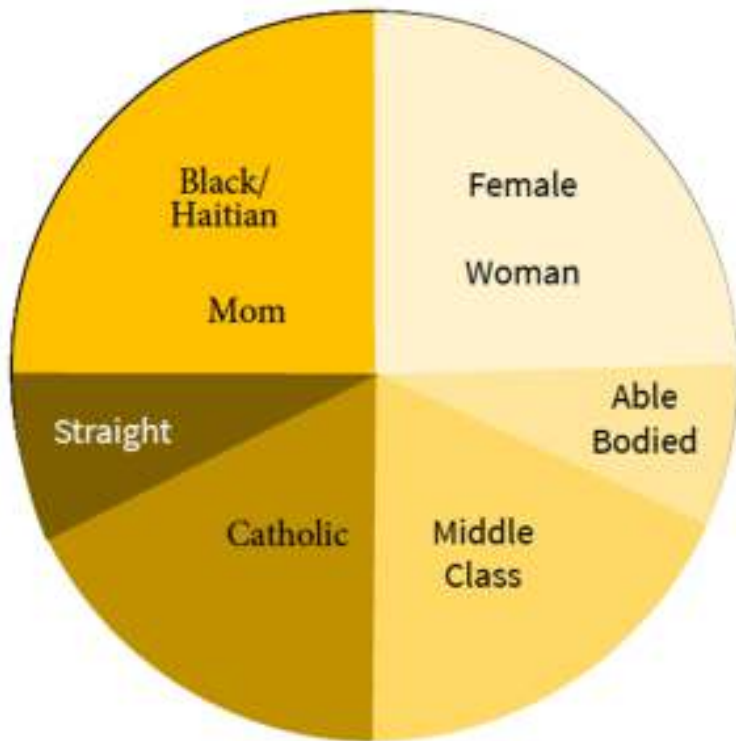
Social identity is a person's sense of who they are based on their group membership(s). See the identity wheel to the right for examples.

Positionality asserts that how you understand the world is *influenced by your own social position in relation* to the people you are live work, and/or are in community with.

Intersectionality a lens, a prism, for seeing the way in which various forms of inequality often operate together and exacerbate each other



Mapping Salient Identities



Race/Ethnicity	Black/Haitian
Sex	Female
Gender Identity	Cis-woman
Ability Status	Currently able-bodied
Class/SES	Middle Class
Religion/Spirituality	Catholic
Sexual Identity	Straight
Other	Mom, 1st gen

Writing Exercise & Break-Out Session

Respond in writing to the below prompts

5-Minute Free Writing Exercise:

List 2-3 social identities that are currently most salient to you. **Reflect** on a meeting or exchange you've recently observed in your work/ training/learning/teaching environments. Then, **explore** how your positionality within the social identities you've listed informs how you experience the meeting or exchange. Name some ways your dominant and subordinate social identities intersect with your role within your work/training/learning/teaching environments.

Next, you will be moved to breakouts for discussion

Share your answers in your small groups. Presenter/reporter (person in the group whose first name comes first alphabetically) should be prepared to speak for ~1 minute during large group share-out.

Understanding Structural Barriers to Full Inclusion and Belonging

- Critical social justice framework for equity, belonging, and justice efforts
- Understanding structural hierarchies and why they pose barriers to equity, belonging and justice work
- Systemic oppression and the “isms”
 - Building competency in racial, equity and justice literacies
 - Implicit bias, systemic racism, microaggressions and other isms that impact health outcomes

INTENTIONAL UNINTENTIONAL

INDIVIDUAL

individual acts of prejudice, ignorance, or hatred

INSTITUTIONAL

Institutional policies, practices, and laws

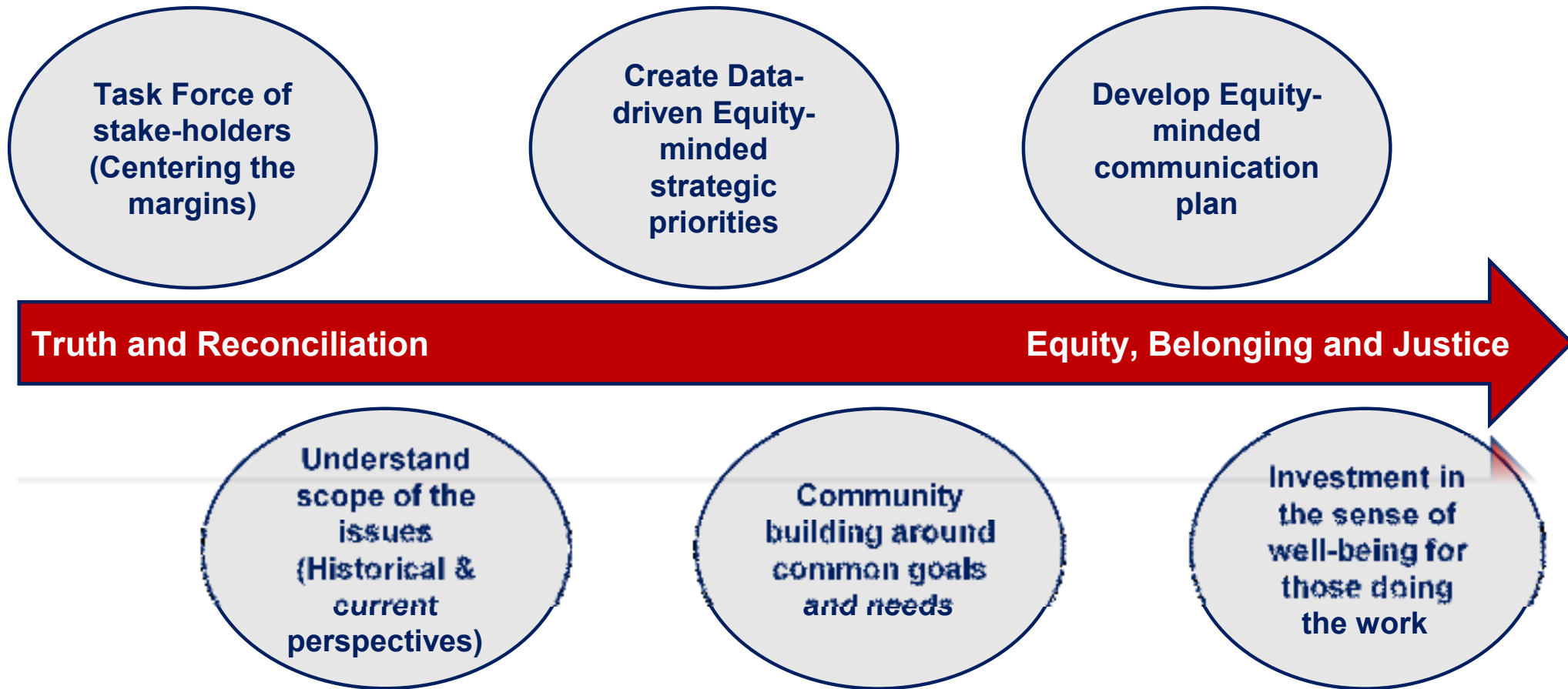
SOCIETAL/CULTURAL

social norms, roles, rituals, language, music and art

**BETWEEN
GROUPS**

INTERNALIZED

Institutional Transformation for Equity and Inclusion Work at St. John's



Key strategies to Supporting Equity and Inclusive Excellence

- Adapt a Critical Social Justice Lens
 - Center those who are marginalized at intersections of their identities
- Ensure alignment of mission/vision/goals with critical social justice values
- Develop equity-minded priority setting and strategic planning
- Build community to cultivate sense of belonging and trust
- Implement equity-minded practices (PAN-ing as core skill)
- Provide education that leads to action/change
- Cultivate climate of agency and ownership

Closing Debrief & Reflection

- Frye's Birdcage: a metaphor for the interlocking forces of oppression
- Failure to address healthcare disparities harms us all
- As healthcare practitioners, and as HUMANS, this is work we all must do
- ***“If you have come here to help me you are wasting your time, but if you have come because your liberation is bound up with mine, then let us work together.” - Lilla Watson***, visual artist, activist and academic working in the field of Women's issues and Aboriginal epistemology.

