

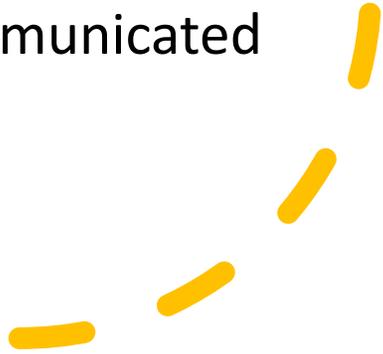
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U.S. Surgeon General's Supplemental Report (2001)

- At first glance African Americans appear to have overall rates of distress symptoms and mental illness similar to those of whites.
 - However, their mental health is difficult to evaluate because of the number of African Americans in high-need populations, such as psychiatric hospitals, prisons, inner cities, and rural areas, where mental illness may be more pronounced.
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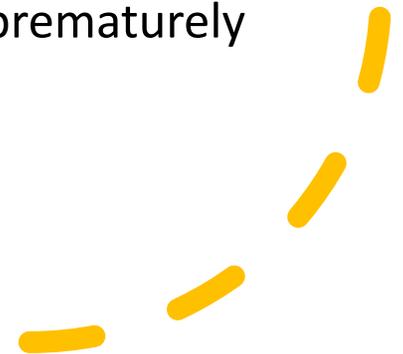
U.S. Surgeon General's Supplemental Report (2001)

- African Americans may present their symptoms differently, making it difficult for mental health professionals who are unfamiliar with a variety of idioms of distress (e.g., somatization, culture bound syndromes) to properly diagnose and treat these individuals.
 - African Americans may use alternative therapies which may not be communicated to mental health providers.
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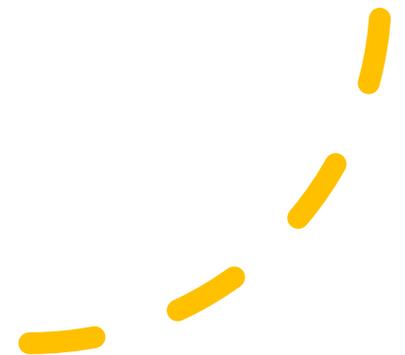
U.S. Surgeon General's Supplemental Report (2001)

- There are disparities in access to mental health services for the following reasons:
 - Financial barriers
 - Few African American mental health providers
 - They tend to seek help for psychological problems from their primary care physicians, emergency rooms, or psychiatric hospitals. They continue to terminate treatment prematurely



U.S. Surgeon
General's
Supplemental
Report (2001)

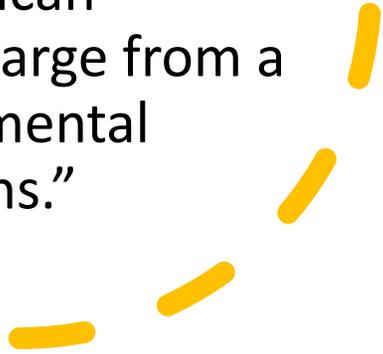
- African Americans are more likely to be misdiagnosed than their White counterparts, and they are more likely to be diagnosed as schizophrenic as opposed to an affective disorder.



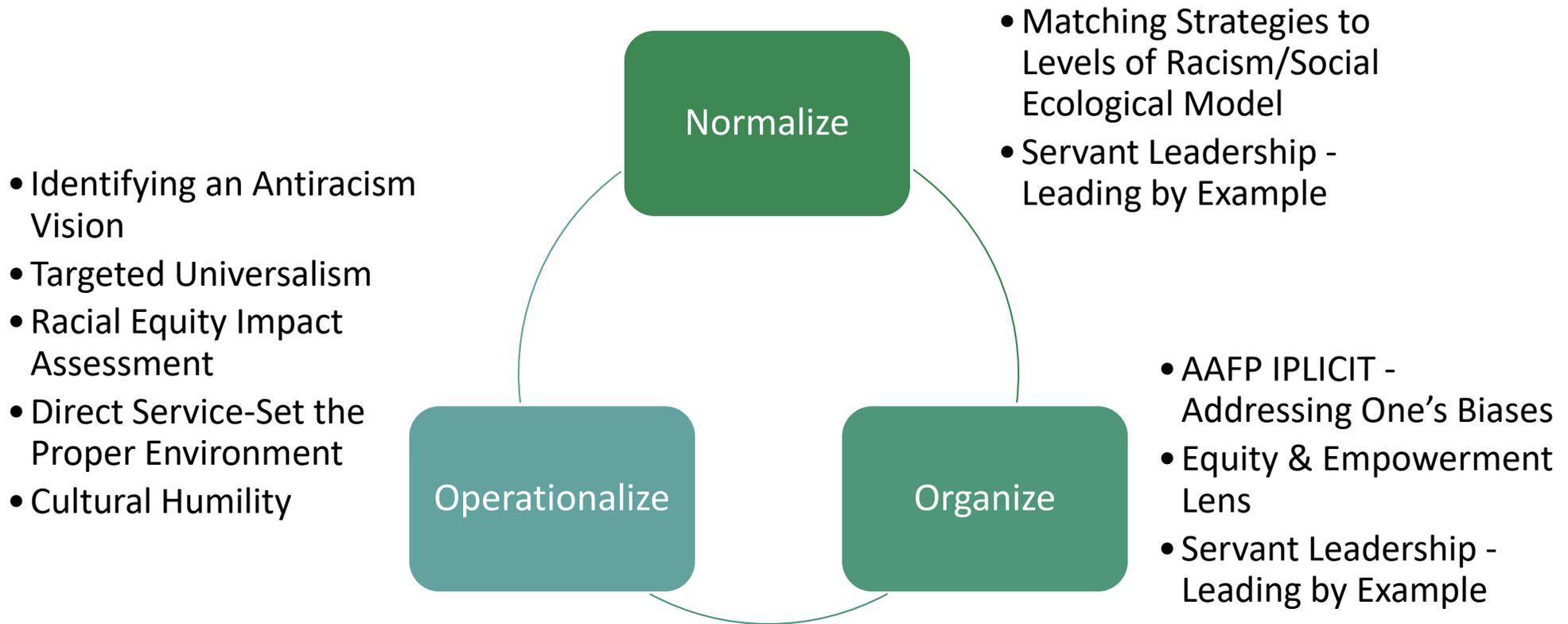
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U.S. Surgeon
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“Adaptive traditions have sustained African Americans through long periods of hardship imposed by the larger society. Their resilience is an important resource from which much can be learned. African American communities must be engaged, their traditions supported and built upon, and their trust gained in attempts to reduce mental illness and increase mental health. Mutual benefit will accrue to African Americans and to the society at large from a concerted effort to address the mental health needs of African Americans.”

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GARE Model: A Framework for Confronting Racism & DHCS Webinar Series Tools



Matching Strategies To Analysis Of Structural Racism/Racialization

**MACRO
LEVEL**

INSTITUTIONAL (bias within an agency, school etc.)

- Change policy (laws, etc.).
- Challenge discriminatory & exclusionary practices.
- Demand inclusive power, decision making, resource sharing.
- Create new equitable institutions & practices.

STRUCTURAL (cumulative among institutions; durable; multigenerational)

- Highlighting history, root causes, cumulative impacts.
- Challenging common stereotypes, biases cultural/media images.
- Exposing myths; explaining justice.
- Advancing socially conscious remedies.
- Promoting values of equity, inclusion, access and dignity for all.

**MICRO
LEVEL**

INTERNALIZED (beliefs within individuals; stereotype threat)

- Mentoring.
- Support groups, mono-racial, gender, identity group causes.
- “Healing” programs.
- Counseling.

INTERPERSONAL (bigotry between individuals; racial anxiety)

- Diversity trainings – prejudice reduction & cultural competency.
- Cross-/inter-identity group dialogues.
- Diverse community events.

Cultural Humility



Tervalon M, and Murray-Garcia J: "Cultural humility versus cultural competence: a critical distinction in defining physician training outcomes in multicultural education," Journal of Health Care for the Poor and Underserved 1998; 9(2):117-124

Your Antiracism Vision

What are the implications of doing nothing/not changing the current situation?

Who benefits if you do nothing?

How might you benefit by the status quo?

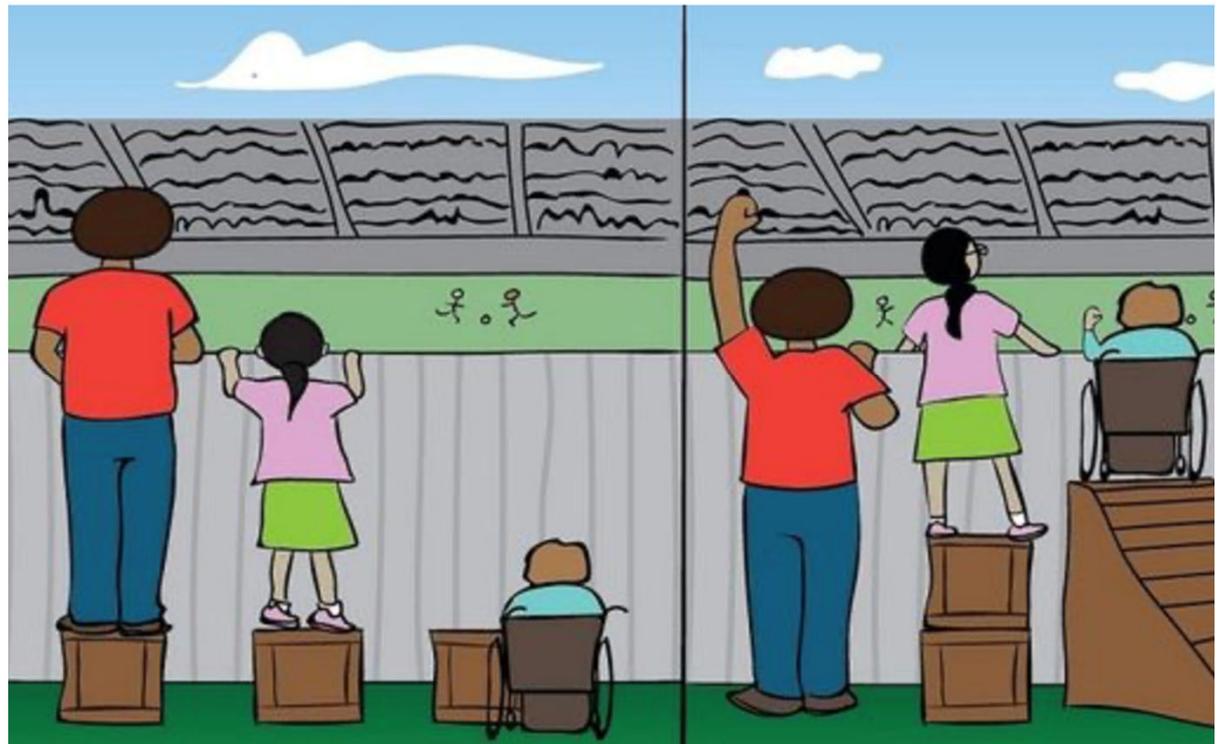
What might be the benefits of achieving your definition of success?

Targeted Universalism

Inclusive of the needs of both dominant and marginal groups but pays particular attention to the situation of the marginal group.

Rejects a blanket universal which is likely to be indifferent to the reality that different groups are situated differently, relative to the institutions and resources of society.

Argues against claims of formal equality that would treat all people the same as a way of denying difference.



American Academy of Family Physicians Aug. 2019

Addressing one's professional biases

- ▶ **I**ntrospection: Explore and identify your own prejudices by taking implicit association tests or through other means of self-analysis.
- ▶ **M**indfulness: Since you're more likely to give in to your biases when you're under pressure, practice ways to reduce stress and increase mindfulness, such as focused breathing.
- ▶ **P**erspective-taking: Consider experiences from the point of view of the person being stereotyped. You can do this by reading or watching content that discusses those experiences or directly interacting with people from those groups.
- ▶ **L**earn to slow down: Before interacting with people from certain groups, pause and reflect to reduce reflexive actions. Consider positive examples of people from that stereotyped group, such as public figures or personal friends.
- ▶ **I**ndividuation: Evaluate people based on their personal characteristics rather than those affiliated with their group. This could include connecting over shared interests.
- ▶ **C**heck your messaging: As opposed to saying things like "we don't see color," use statements that welcome and embrace multiculturalism or other differences.
- ▶ **I**nstitutionalize fairness: Support a culture of diversity and inclusion at the organizational level. This could include using an ["equity lens" tool \(multco.us\)](#) to identify your group's blind spots or reviewing the images in your office to see if they further or undercut stereotypes.
- ▶ **T**ake two: Resisting implicit bias is lifelong work. You have to constantly restart the process and look for new ways to improve.

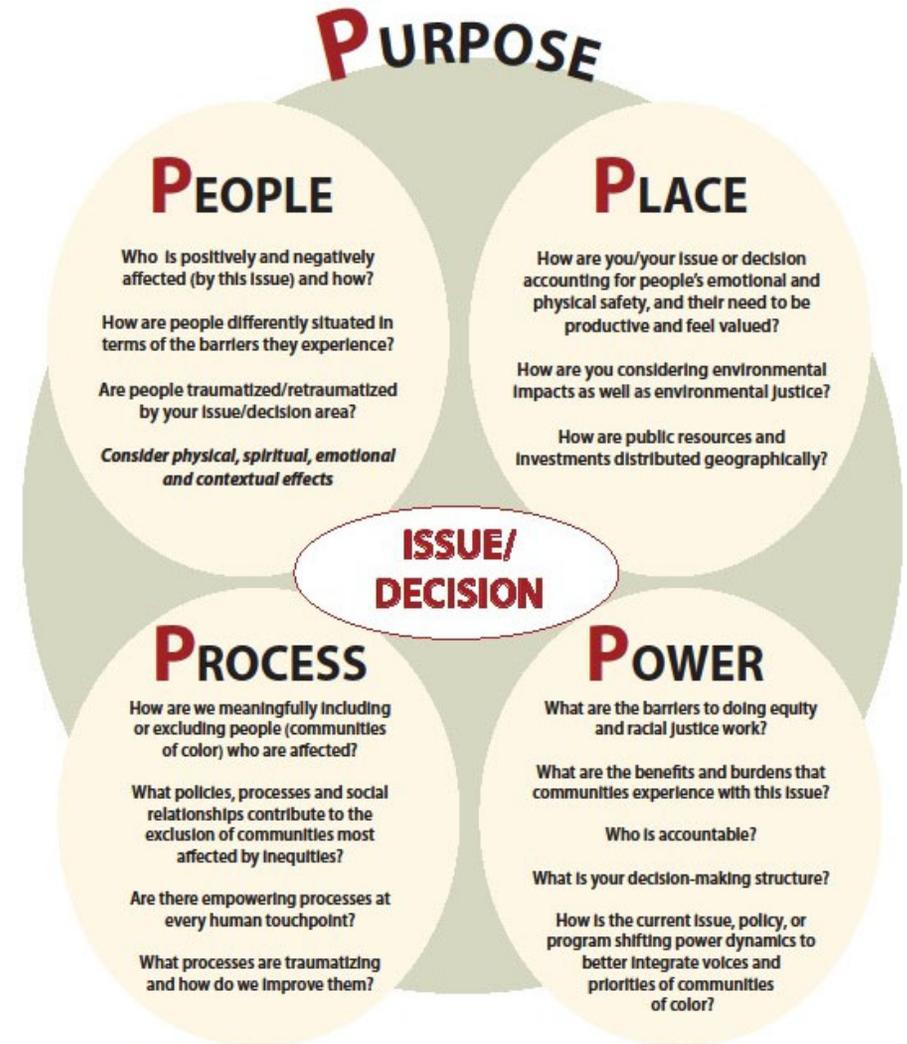
Equity and Empowerment Lens



Office of Diversity and Equity

Revised March 24, 2014

A quality improvement tool used to improve planning, decision-making and resource allocation leading to more racially equitable policies and programs. At its core, it is a set of principles, reflective questions and processes that focuses at the individual, institutional and systemic levels.



Define Purpose Toward Racial Equity

In a purpose-driven system, all partners at all levels align around transformative values, relationships and goals moving towards racial equity, integrating an emphasis on doing less harm and supporting actions that heal and transform.

| | Six Outcome Areas | What steps can we take to create the conditions to better understand equity and apply this lens to our work? |
|---|--|--|
| 1 | Shift in social norms (values, beliefs and behavior) | |
| 2 | Strengthened Organizational Capacity (diversity in staffing, leadership, structure, finance, & planning) | |
| 3 | Strengthened Alliances (improve access, coordination and collaboration among traditional & nontraditional system partners) | |
| 4 | Strengthened Base of Support (diversity in breadth, depth and influence of support) | |
| 5 | Improved Policies (any or all stages of policy change) | |
| 6 | Changes in Impact (improved social, emotional, physical, and environmental conditions for affected populations) | |

Direct Service-Set the Proper Environment (Trust & Empowering)

Create a Trusting Environment (Trauma Informed)

- Meet when the Client is able and where they are able (they are the customer so go to their place first, home, church, school etc.).
- Don't outnumber the youth and families with professionals.
- Be aware of all cultural norms and leverage in their space (respect, food, shoes, etc..).
- Consider whether your office location, hours and staffing are accessible and whether its physical appearance is respectful of different cultural groups.
- Best time to engage the community is evenings and weekends (Saturdays and Sundays).

Develop a community engagement strategy to assist in service planning and delivery. (Churches, schools, neighborhood boards, community centers, etc.)

Develop strong collaborations with others so that your teams reflect a broad base of community members vs. professional staff.

Commit to an ongoing evaluation of services that includes community input and outcome reporting.

Servant Leadership - Leading by Example

Walking the Walk (Trust & Empowering)

- Educate yourself about institutional racism and the African American experience.

Here's a few books to read: Michelle Alexander's "The New Jim Crow," Bryan Stevenson's "Just Mercy," Robin DiAngelo "White Fragility", Richard Rothstein's "The Color of Law" and André Chapman's "Roses in Concrete — Giving Foster Children the Future they Deserve".

- Evaluate – Co-create your agency's value statement – what do you stand for?
- Create an Agency pledge to stand up and speak out against racism, bigotry and hatred.
- Create Safe Places for Courageous Dialog – Climate Survey - Give Permission!
- Diversify your Leadership – Does it reflect your clients or does everyone look the same?
- Engage the Community with Truth, Reconciliation & Healing for courageous dialog!
- Create a Paid Community Advisory Board & invest in the Community thru Agencies of Color.
- Co-Create new Policies and Practices that perpetuate an inclusive healing environment.
- Develop a Training Series on the Legacy of Discrimination with engaged Community experts.



Racial Equity Impact Assessment **GUIDE**

Considerations for anticipating, assessing and preventing potential adverse consequences of proposed actions on different racial groups.

1. Identifying stakeholders.
2. Engaging stakeholders.
3. Identifying and documenting racial inequities.
4. Examining the causes.
5. Clarifying the purpose.
6. Considering adverse impacts.
7. Advancing equitable impacts.
8. Examining alternatives or improvements.
9. Ensuring viability and sustainability.
10. Identifying success indicators.

Call to Action: Have a Conversation in Your Organization About

Expectations and norms of racial scripts you were taught.

How our racial scripts were revised and reinforced through racial privilege, stigma, discrimination, and/or oppression.

Implicit bias and a racial equity outcome you would like to work towards, including outcomes and how you would test the steps.