How Racism is Embodied: A new social determinants of health curriculum

PRRAC Small Grants Program
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Today

• Who is Just Health Action?
• PRRAC grant
• New racism/health curriculum
• Outcomes
• Discussion
Just Health Action advocates for reducing health inequities that result from social, political, economic, and cultural factors.

Through a social justice lens, we teach workshops and classes that review the evidence and facilitate discussion and consensus on how individuals and communities can take action on these root causes.
SDOH model

General socio-economic, cultural and environmental conditions

Living and working conditions

Unemployment

Water/sanitation

Health care

Social and community networks

Work environment

Education

Housing

Food

Individual lifestyle factors

Age, sex, and hereditary factors

Dahlgren & Whitehead, 1991
Case for teaching the SDOH

• Call to action – **Raise public awareness** about the SDOH and train policy actors, stakeholders, and practitioners in the SDOH.
  
  • International – (WHO, 2008, 2009)
  
  • National – (Freedman et al, 2009)

• Reduce health inequities
  
  - Individual behavioral vs societal factors.
  
  - Contextual behaviors
  
  - “Blame the victim”

Raphael, 2003, Health Promotion International, Vol 18, No 4
1. functional

Transmission of factual information (AIDS, drugs, tobacco)

2. interactive

Develop personal skills – problem solving, communication, decision making. Act independently on advice received.

3. critical

Individual and community capacity to understand and change how social, economic, and political forces affect health – social action on policies and practices.

Nutbeam, 2000, Health Promotion International, Vol 15, No 3
Critical health literacy plus empowerment education

CRITICAL HEALTH LITERACY

Ecological focus (upstream):
- SDOH
- Root causes

Friarian praxis: (Action and reflection)
- Advocacy mapping
- Journals

EMPOWERMENT

Community focus (action on SDOH)
- Farmers mkt
- Graffiti coverup campaign

GOAL

Health equity
JHA critical health literacy framework

- Knowledge
- Action
- Tools
- Teaching
- Facilitation
- Dissemination
- Community projects
- Action letter
- Research

- Find your passion
- Vision & goals
- Inspiration
- Unpacking
- Advocacy

Mogford & Gould (2008)
• **Middle school** (Seattle Girls School, Evergreen School, Harbor School)

• **High school** (Running Start - Puget Sound Early College, Everett Community College, Environmental Justice Youth Corps)

• **University** (University of Washington, Western Washington University)

• **Health** (Sea Mar Community Health Centers, Whatcom County Health Department)
teaching action skills and taking action

- Community action project
- Action letter
- Facilitating health equity conversations
- Raising SDOH awareness through art
- Writing advocacy mission statement
EJYC COMMUNITY ACTION: GRAFFITI COVER UP AND LITTER PICKUP

BEFORE

THEN……TALK TO KIDS ABOUT RELATIONSHIP BETWEEN GRAFFITI AND GANGS

AFTER
• Racism - implicitly discussed but not an explicit part of the JHA curriculum
• Students raising the issue
• PRRAC Proposal
  Develop 3-part curriculum on how racism is embodied
• DRCC lost EJYC funding for 2010
Determinants of health

Determine the range of observed contexts

Include capitalism, **racism**, and other systems of power

Societal determinants of context

Social determinants of health (contexts)

Individual behaviors

Determine the distribution of different populations into those contexts

The social determinants of equity

Camara Phyllis Jones, MD, MPH, PhD
Curriculum Development Process

- “Interns” (young, creative, increase capacity)
- Literature review
- Locate venue/s and meet (middle school, university, health clinic)
- Develop Racism/Health curriculum to fit JHA pedagogy
- Pilot at Sea Mar Community Health Centers with Health Corps Volunteers (process evaluation)
- Redevelop curriculum and pilot - Seattle Girls School
- Redevelop curriculum for university (Western Washington University) audience and pilot

Jon Huang, UW MPH candidate
Meghan Brombach, Sea Mar Health Corps volunteer
Jess Barnes, Sea Mar Health Corps volunteer
• 40% of students receive financial aid
• 40% students of color
• Integrated, project-based curriculum
• JHA model - collaborates with core subject teachers (not a separate health curriculum)
• Population Health Curriculum at SGS:
  – Environmental Justice (7th graders, Spring 2006)
  – Advocacy Framework (7th graders, Spring, 2007-2010)
  – How Racism is embodied (7th graders, Spring, 2010)
JHA Racism/Health Curriculum: Knowledge

1. What is race?
2. Historical perspectives on race and how evolved
3. What is racism?
4. Race and health disparities
5. Models to explain health
6. Biology of inequality - stress
7. Racism and the life course perspective
8. Maternal and child health evidence
9. Immigration
SGS pilot: Lesson 1

1. JHA Advocacy continuum

2. Introduction: WHY this class?

3. Three levels of racism: A Gardener’s Tale (Camara Phyllis Jones)
Lesson 2: Health disparities – graph interpretation

Map 2. Female Life Expectancy at Birth for the United States, 1990

- Index of:
  - Life expectancy
  - Math & Literacy
  - Infant mortality
  - Homicides
  - Imprisonment
  - Teenage births
  - Trust
  - Obesity
  - Mental illness – incl. drug & alcohol addiction
  - Social mobility

Lesson 3: How racism gets “under the skin”

Building empathy – the cortisol stress response

– Whistle

– Pink/blue cards
Lesson 4: Racism and the life course—maternal and child health outcomes

Maternal health
- Stress
- Hypertension
- Diabetes
- Stroke
- Kidney disease

Fetal health
- Preterm birth
- Low birth weight
- High reactivity
- Infant mortality

Infant health

Adult health

Childhood health

Women and Racial Discrimination

Women and Birth Outcomes
Lesson 5: Taking Action: The Cliff Analogy and “Pay it forward”

What are some upstream activist ideas you have to move people away from the cliff?
JHA critical health literacy framework

**Knowledge**

social determinants of health

health as a human right

**Action**

PAY IT FORWARD (not racism based)

**Compass**

find your passion

vision & goals

inspiration

unpacking advocacy

**Tools**

dissemination

facilitation

teaching

community projects

action letter

research

Mogford & Gould (2008)
Q1: How do you define racism?

- **Pre-tests**
  - Discrimination and judging
  - Skin color
  - Making jokes or rude comments

- **Post-tests**
  - Dynamics of racism
  - Resources/opportunities
  - Oppression/hierarchy
  - “Engraved in our society”
  - 3 levels
Q2: Describe how racism might affect people

• Pre-tests
  – “It hurts”
  – Makes people feel “less than”, “worthless”

• Post-tests – structural/mechanics of racism
  – “They don’t get jobs and money”
  – “Causes stress”, “leads to shorter life span”
  – “it could affect baby because she (mother) has been discriminated against”
Q3: What are your feelings or reactions about racism now compared to the beginning of these classes on racism?

• Pre-tests
  – Racism is “wrong”, “bad”
  – “I mean like people have followed me in stores to make sure I don’t steal cus I’m black”

• Post-tests – rationale added to their moral claims
  – “I really already knew that racism was bad but I didn’t know it could effect [sic] how babies are when they are born”
  – “less mad about it and more like there’s something I can do about it now that I know more”
Q4: Empowerment to change racism (scale 1-5)

Statistically significant difference between pre and post tests just below capable to just above capable.

- 48% reported positive change
  “Now that I have knowledge, I can speak up”
  “Because even though I’m a kid, I have experienced racism, and it will be more powerful coming from a young and experienced voice”
- 36% reported no change
- 12% report decrease
  “it’s harder than I thought”
• Pilot was not designed to build skills to combat racism
• No statistical difference between pre and post tests
  "I can stand up for those who are racially abused"
  "I can educate people about racism"
• Lack of change fit JHA hypothesis: need to teach skills in order take action on institutional racism and root causes.
What’s next?

• Develop curriculum for the rest of the JHA pedagogy “tree”
• Presentations: Submitted abstracts to:
  – Seattle Race Conference (August, 2010)
  – American Public Health Association (November, 2010)
• Write about it?
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THANK YOU!

PRRAC

JHA INTERNS
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TEACHERS
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VENUES
Sea Mar Community Health Center
Seattle Girls School
Western Washington University