

WHEN YOU KNOW BETTER, DO BETTER

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INTRODUCTIONS

- Kristina Johnson
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LET'S BEGIN...



Speak from your experience



Understand that we are individuals AND a part of systems



Be present...in this moment



Expect a range of emotions



Take a seat at the table



I am so happy you're here



A CULTURE SHIFT

- FSSA as an agency is creating a charter to increase equity and cultural competency among its team members and leadership
 - Equity Workgroup
 - Equity Charter
- FSSA Leadership has committed to doing the work to ensure we are well-versed in how healthcare disparities affect marginalized populations, and how we can address these
 - Systemic issues – public health
 - Starts with us
- You will be seeing increased discussion and metrics related to equity
- Addressing these disparities is our responsibility- if not us, then who?

DEFINE

- **Diversity-** differences in racial and ethnic, socioeconomic, geographic, and academic/professional backgrounds. People with different opinions, backgrounds (degrees and social experience), religious beliefs, political beliefs, sexual orientations, heritage, and life experience.
- **Equality-** When everyone has the same amount of something
- **Equity-** “In operational terms, and for the purposes of measurement, equity in health can be defined as the absence of disparities in health (and in its key social determinants) that are systematically associated with social advantage/disadvantage.” (Paula Braveman, University of California San Francisco’s Inclusion)
- **Inclusion-** Inclusion is a sense of belonging. Inclusive cultures make people feel respected and valued for who they are as an individual or group. People feel a level of supportive energy and commitment from others so that they can do their best (Global Diversity Practice)

COMMITMENTS

- Approach this conversation with a sense of curiosity and openness
- Understand that we all are coming from spaces that may include past wounding and current emotional activation
- Give each other the benefit of the doubt
- Use the language you have – we would rather you speak than stay silent because you are trying to find the perfect phrasing
- Ask questions, speak about internal conflict you are experiencing
- When you have moments that feel emotionally charged- dig deeper
- Cameras on! (Helps with discussion)



GOALS

- The CMHCs are seen as the leaders in issues affecting the mental health and SUD populations in the state
 - We must be well-versed in issues affecting the populations we serve
 - Systemic barriers for marginalized groups affect their physical and mental health
- CMHC Leadership should be working to feel comfortable in conversations around disparity, systemic issues, and experiences of discrimination/microaggressions experienced within their own agencies
- We develop a culture where we are all willing to learn together



“Segregation now, segregation tomorrow, segregation forever” –
George Wallace



ROAD TO...FREEDOM?



Slavery

Are we really free?



Civil Rights

I don't see color. We did it!



War on Drugs

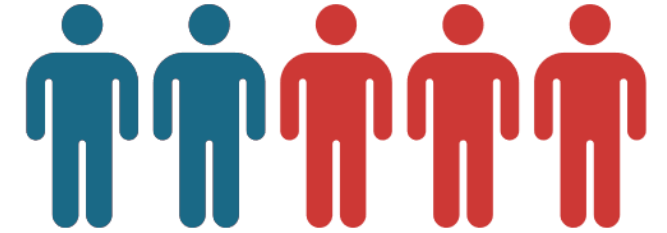
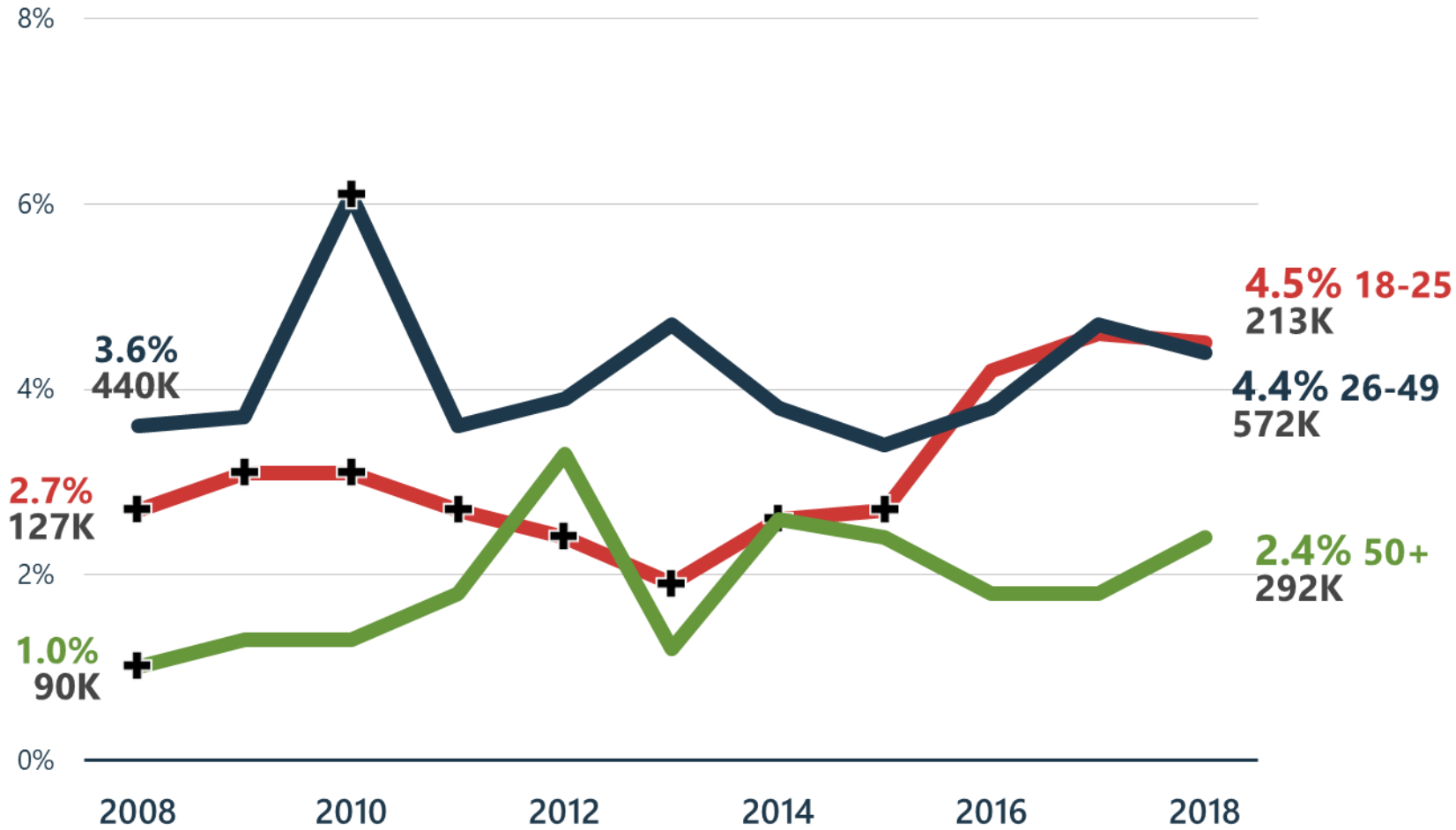
Is the system broken or is this how it was designed?

RACE AND HEALTHCARE

- Approximately 11% of African Americans are not covered by health insurance, compared with about 7% for non-Hispanic whites
- Death rate for African Americans is higher than whites for heart diseases, stroke, cancer, asthma, influenza and pneumonia, diabetes, HIV/AIDS, and homicide
- CDC estimates that African Americans represented more than one-third (40% or 498,400 persons) of all people living with HIV and almost half (45%) of all persons with newly diagnosed infection in 2015.
- About 27% of African Americans live below the poverty level compared to about 10.8% of non-Hispanic whites.

SERIOUS MENTAL ILLNESS (SMI) RISING AMONG AFRICAN AMERICAN YOUNG ADULTS (18-25 Y.O.)

PAST YEAR, 2008-2018 NSDUH, African American 18+



41.8%
89,000 AFRICAN AMERICAN YOUNG ADULTS WITH SMI RECEIVED TREATMENT IN 2018

58.2% got NO treatment

49.9%
285,000 African American adults (26-49 y.o.) with SMI received treatment;

50.1% got NO treatment

+ Difference between this estimate and the 2018 estimate is statistically significant at the .05 level.

RACE AND MENTAL HEALTH CARE

- Compared with whites, African Americans are:
 - Less likely to receive guideline-consistent care
 - Less frequently included in research
 - More likely to use emergency rooms or primary care (rather than mental health specialists)
- Compared with the general population, African Americans are less likely to be offered either evidence-based medication therapy or psychotherapy.
- Compared with whites with the same symptoms, African Americans are more frequently diagnosed with schizophrenia and less frequently diagnosed with mood disorders. Differences in how African Americans express symptoms of emotional distress may contribute to misdiagnosis.
- Physician-patient communication differs for African Americans and whites. One study found that physicians were 23% more verbally dominant, and engaged in 33% less patient-centered communication with African American patients than with white patients.
- Black people with mental health conditions, particularly schizophrenia, bipolar disorders, and other psychoses are more likely to be incarcerated than people of other races.^{16,17}

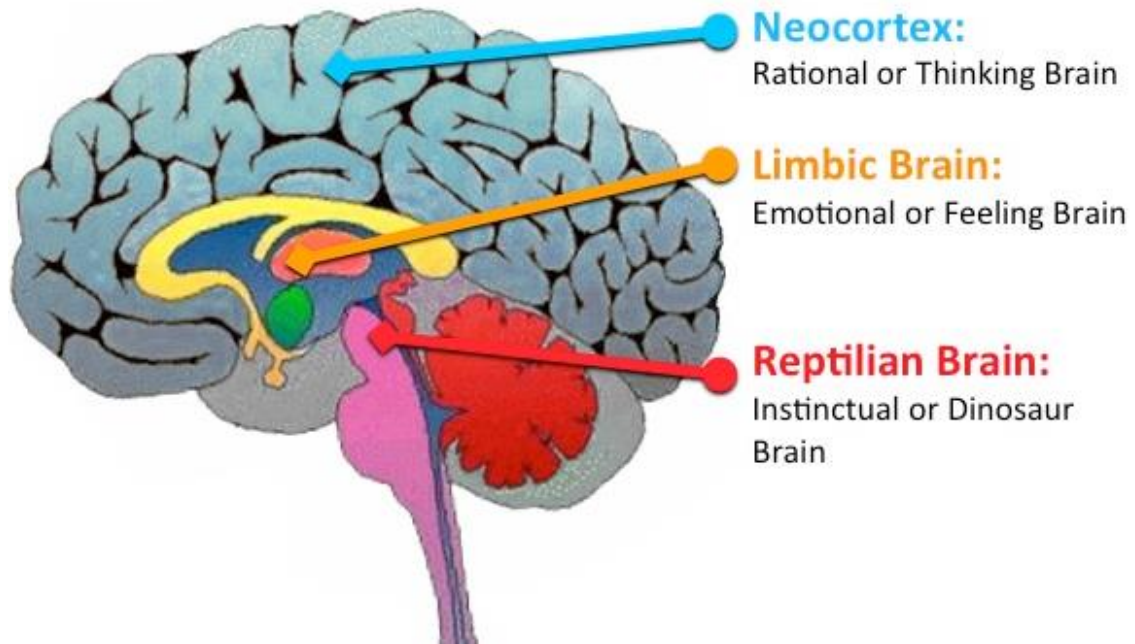


BARRIERS TO TREATMENT

- Stigma associated with mental illness
- Distrust of the health care system
- Lack of providers from diverse racial/ethnic backgrounds
- Lack of culturally competent providers
- Lack of insurance, underinsurance

WHAT'S THIS HAVE TO DO WITH US?

- We are the front line in addressing mental health/SUD issues in our state
- We design things based on our own experience and blind spots (including research)
 - Ex: the deluge of funding for OUD
- Without examining our own blind spots (we all have them!) we will inadvertently perpetuate existing disparities (at best) and exacerbate them (at worst).



Neocortex:

Rational or Thinking Brain

Limbic Brain:

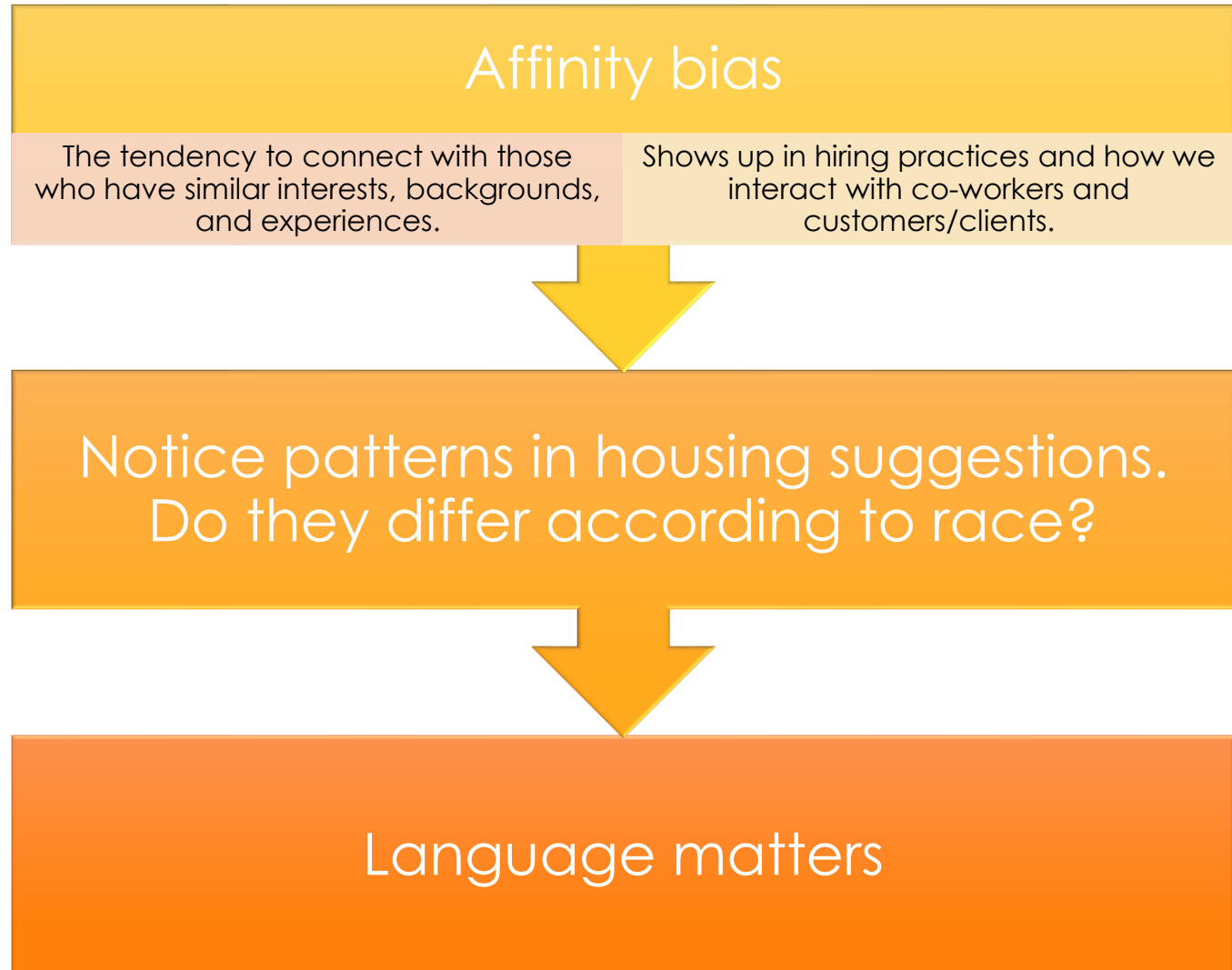
Emotional or Feeling Brain

Reptilian Brain:

Instinctual or Dinosaur Brain

IMPLICIT BIAS AND THE BRAIN

IMPLICIT BIAS IN THE WORKPLACE





BUT I'M NOT
RACIST

“I feel that if we don't take seriously the ways in which racism is embedded in structures of institutions, if we assume that there must be an identifiable racist who is the perpetrator, then we won't ever succeed in eradicating racism.” – Angela Davis

GOOD/BAD BINARY

- Reduction of what it means to be racist
 - Individual vs structural/systemic
 - Consciously does not like people based on race
 - Intentionally harmful
- Makes looking at socialization difficult
- White privilege (White body privilege)
 - White – may cause discomfort if you aren't used to being referred by your race.
 - Privilege – defensiveness might arise if one believes it negates struggle.

10 richest Americans:
100% white

US Congress: 90%
white

US governors: 96%
white

Top military advisers:
100% white

President and vice
president: 100%
white

US House Freedom
Caucus: 99% white

Current US
presidential cabinet:
91% white

People who decide
which TV shows we
see: 93% white

People who decide
what books we read:
90% white

People who decide
which news is
covered: 85% white

People who decide
which music is
produced: 95% white

People who directed
the one hundred top
grossing films of all
time, worldwide: 95%
white

Owners of men's
professional football
teams: 97% white



LET'S EXPLORE

“No one ever talks about the moment you found that you were white. Or the moment you found out you were black. That’s a profound revelation. The minute you find that out, something happens. You have to renegotiate everything.”

- Toni Morrison

Write about your experience figuring out you were a part of the race in which you identify. What did it mean? How did it feel?



PASSIVELY NOT RACIST

- Identifies as “not racist”
- Believes in equality and minimizing barriers for other races and cultures
- Tries to be well-versed in issues affecting POC
- Struggles to speak up when faced with friends/peers/colleagues/etc that make racist comments of varying degrees of intensity
- Often prefers to “keep the peace” rather than speak up when hearing a comment that perpetuates racism or harmful stereotypes

ANTI-RACIST

- Understands that implicit bias requires an ever-present level of awareness
- Believes in equality and minimizing barriers for other races and cultures
- Tries to be well-versed in issues affecting POC
- Directly addresses friends/peers/colleagues/etc. that make racist comments of varying degrees of intensity
- Speaks up when hearing a comment that perpetuates racism or harmful stereotypes
- Initiates conversations about diversity and inclusion
- Names lack of diversity in various spaces and communities occupied

...SILENCE

“We can learn to work and speak when we are afraid in the same way we have learned to work and speak when we are tired. For we have been socialized to respect fear more than our own needs for language and definition, and while we wait in silence for that final luxury of fearlessness, the weight of that silence will choke us.

The fact that we are here and that I speak these words is an attempt to break that silence and bridge some of those differences between us, for it is not difference which immobilizes us, but silence. And there are so many silences to be broken.”

-Audre Lorde – The Transformation of Silence into Language and Action*

DIVERSITY IS GOOD FOR BUSINESS!

- Workplaces that prioritize inclusivity and diversity are
 - twice as likely to meet or exceed financial goals
 - six times more likely to innovate
 - six times better at anticipating and responding effectively to change
 - generate 30% more revenue per employee.
- Diverse organizations earn 35% better results than those that are more homogeneous.
- When workplace teams reflect their target customers, the entire team is more than twice as likely to innovate effectively for their end users.

<https://lifespeak.com/15-steps-you-can-take-to-build-a-more-diverse-workforce/>

WORKPLACE ISSUES

- 59% of Latino men and women experienced slights and snubs in the workplace
 - a number that jumps to 67% when looking at just Latinas.
- 63% of Latino men and women do not feel welcome and included, do not feel invited to share their ideas, or do not feel confident their ideas are heard and valued at work — a figure that rises to 78% for just Latinas.
- 46% of Black women feel their ideas are not heard or recognized. They are also less likely than straight white men to have their ideas endorsed.
- 67% of job seekers believe diversity is an important factor when considering companies and job offers.”
 - In other words, candidates are very aware of which organizations are making an effort to champion diversity, and they’re using that information to influence whether they apply or not.

SO WHAT DO WE DO...???

- Educate yourself- modeling from leadership is incredibly powerful
- Publicly state, and restate, and restate, and restate... (you get it) the importance of this focus and work
- Start making an improvement plan:
 - Allocating budget
 - Sourcing educational materials
 - Forming a diversity committee
 - Setting a timetable for committee meetings
 - Hiring a consultant
 - Set and track metrics
- Address possible reactions, especially those that signify resistance to overall diversity efforts

SO WHAT DO WE DO...???

- Pay attention to racial diversity at various levels
 - For example, if you have a Direct Service Professional staff that is very diverse, but leadership isn't- you probably need to work on agency leadership development
- Require that questions about diversity and inclusion are included in every interview
 - Ex: "Give us your definition of diversity, and your definition of inclusion. Describe what you do to ensure that the diversity of your team members is celebrated and incorporated into the work of the agency."
- Do NOT use quotas- quotas can actually stifle diversity
- Conduct exit interviews to find out why BIPOC, LGBTQ+, and other staff leave. Review these regularly.
- Ensure that your leadership is educated on workplace microaggressions- including how to prevent and respond to them

SO WHAT DO WE DO...???

- If your teams/leadership is lacking in diversity, it is often because the space isn't intentionally inclusive
 - Homogenous spaces are never neutral for someone who doesn't match the norm
- Recruitment for diversity has to be intentional
 - If you have a largely homogenous team, it will take work to diversify it
 - What genuine connections do you have with subgroup organizations in your area?
 - What training and knowledge has your team had to ensure they know how to talk about issues around race and other life variations?
- Check your social media/marketing
 - Is it representative of who you serve, and who you *might* serve?



Questions?