



The Racism Endemic: Addressing the Impact of a Social Virus on BIPOC Youth

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Conflicts of Interest

- We are psychologists providing services in primary care settings in Providence clinics in the state of Oregon
- Planning Committee & Faculty Disclosure: The Planning Committee and Faculty have no relevant financial relationships with commercial interests to disclose



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Defining Racism

- National Institute of Health (2021): Unfair or unjust socially structured action that causes harm to individuals/groups while providing power and protection to other groups/ institutions.
- “Inaction in the face of need” - Camara Jones MD
- Racism is a public health crisis
- Impact not intent



Levels of Racism (resource: Race Forward)

	Level	Definition	Example
Individual	Internalized	<p>Within the individual</p> <p>Personal beliefs and bias</p>	<p>-Within the clinician (belief that race is biological)</p> <p>-Within the client (BIPOC patient's belief that getting into their top college was due to their own merits and abilities)</p>
	Interpersonal	<p>Between individuals</p> <p>Internalized and overt racism coming out in interpersonal interactions</p>	<p>-Clinician dismissing BIPOC patient's subjective pain rating</p> <p>-BIPOC youth no-showing appointment due to fear recurrent discrimination/ mistrust of medical community</p>
Systemic	Institutional	<p>Within institutions and systems of power</p>	<p>-Medical providers and individuals in roles of power are mainly white</p>
	Structural	<p>Among institutions and across society</p>	<p>-Applicants with "ethnic" sounding names are systematically rejected for interviews across institutions</p> <p>-Large efforts to address racism only focus on individual level interventions ("pull yourself up by the bootstraps")</p>



Racism as a Virus

(Adapted from Anderson, Heard-Garris,
& DeLapp, 2022)

	Virus	Racism
Definition	<ul style="list-style-type: none"> - Hard to detect - Harmful to health - Requires host - Symptomatic or asymptomatic 	<ul style="list-style-type: none"> - Hard to detect - Harmful to health - Initially requires host - Implicit or explicit
Reproduction	<ul style="list-style-type: none"> - Replicates using cell's system - Enters host and sheds coat - Expose genetic material to host 	<ul style="list-style-type: none"> - Uses host's (human) system to replicate - Seeks dominance - Relies on patterned behavior
Transmission	<ul style="list-style-type: none"> - Direct, indirect, airborne, vehicular - Replication: copies viral DNA to daughter cell 	<ul style="list-style-type: none"> - Direct, indirect/ vicarious, institutional, and structural - Socialization: Spreads ideas of race/ values to youth
Evolution	<ul style="list-style-type: none"> - Trade genetic material to other viruses and hosts - Characteristics change/evolve/mutate over time - Virus' genes become part of the host's genome and evolution 	<ul style="list-style-type: none"> - Impacts other systems and hosts - Evolved to exist outside of host - Mutates within host, and incorporates self in social DNA



Racism in Medicine (e.g., Hassen et al. 2021)

- Forcing participation/ nonconsensual research
- Forced sterilization and eugenics
- Racial bias in pain assessment and treatment
- False beliefs about biological difference/ race being biological
- Significantly higher rates of analgesics prescribed to White vs. Black patients
- Higher risk for LBW, SGA, preterm births, infant mortality, and maternal mortality
- Underscreening of breast and cervical cancer in Black women
- Children with Medicaid were prescribed antipsychotics four times more than children with private insurance
- Research focusing on racial disparities and not the underlying causes of these disparities



What Does Racism Look Like?

- Can be direct
 - i.e., explicit name calling, excluding from games and activities
- May be indirect
 - i.e., being seen as “bad” or “naughty” due to otherwise normal behaviors
- Children often see the results of structural racism
 - Through where they live, education, economic means, and how their rights are executed
- Vicarious racism (i.e., racism experienced secondhand) can be just as damaging as direct racism (Garris et al, 2018)
 - Children’s parents, family members, or even racism seen on the news or social media



Children's Perception of Racism

- Children are aware of race and differences, even if they aren't able to explicitly state it.
- Children can detect differences in skin color as early as 6 months old.
- Toddlers and children under the age of 5 can detect messages and ideas about race
- By 5, they begin to associate race and skin color with traits and stereotypes and start to internalize messages about race



Impact of Racism on Physical Health

- Several health disparities in children linked to perceived racism that they have experienced
 - Linked to low birth weight, obesity, substance abuse, hypertension, and even insulin resistance.
- Leads to chronic stress
 - Increased and prolonged levels of stress hormones
 - Leads to inflammatory reactions that can predispose people to chronic disease
 - Increased in infant mortality rate
- Increase in negative health behaviors
 - Substance use
 - Decrease in sleep quality



Impact of Racism on Mental Health

- Racism is a major stressor (a traumatic experience) that can lead to both internalizing and externalizing problems
 - Problems often manifest as anxiety, depression, behavioral disorders, and PTSD
- Increase in depression and suicide ideation among youth in general, even worse among BIPOC youth
 - Suicide rates among black youth have increased by 60% for boys and 182% for girls in the past 15 years (Price & Khubchandani, 2019)
- Inequities in the labeling and diagnosing of mental health disorders in the child and adolescent BIPOC population.
 - Children and families who have experienced racism were less likely to be diagnosed with ASD and developmental disabilities (Mandell et al, 2009)



Racism Creates Barriers

- Children being exposed to racism in any form can negatively impact their health and well-being and create additional barriers to accessing care
 - Willingness to engage in care
 - High levels of mistrust in the medical system
 - Health related stigma
 - Lack of representation within health care
 - Physical access to services
 - Disproportionate amount of BIPOC individuals that are living in poverty
 - Access to insurance, transportation, day care.
- The increased need for health services paired with the decreased access to care makes this particularly impactful



In Summary

- When we are ill-equipped, inactive, and mis/uninformed, we end up with widespread transmission- a pandemic
- Ignoring it or not talking about it doesn't make it go away, it tends to make it worse (Carter et al., 2016)
- “Colorblind” attitude is not neutral
 - Can further perpetuate racism and make people feel unheard
- We can sit back and do nothing about the spread of the virus in the hopes it will die out on its own. But that does not stop it, and in fact by doing nothing we allow it to spread and mutate. We must actively eradicate and prevent the spread. Same can be said with racism. With inactivity we allow it to spread insidiously. We must therefore be actively working to recognize, eradicate, and prevent the spread of racism.



What We Can Do as Caregivers (Lingras, 2021)

- "Inquiring about experiences related to race and racism/discrimination should be as common an intake question as learning about developmental and family history"
- Self-reflection: notice personal bias, personal internalized and implicit racism, build awareness of how racism has impacted you (privilege and discrimination)
- Seek out resources created by BIPOC individuals
- Model anti-racist behavior and language
- Focus on racism, as opposed to race, as cause of inequity



Addressing Racism at its Four Levels

	Level	Example	How to address it
Individual	Internalized	<ul style="list-style-type: none"> A provider holds the belief that pain thresholds are different for White and Black patients 	<ul style="list-style-type: none"> Attending continuing education trainings addressing this and other racist medical myths Admit to and own racist actions and commit to anti-racist actions
	Interpersonal	<ul style="list-style-type: none"> A provider is meeting for the first time with a new patient and gathering history, presenting concerns, and demographic information 	<ul style="list-style-type: none"> Instilling confidence (e.g., "I am the expert on ***, but you are the expert on you") Validating their feelings (e.g., "I'm sorry you experienced that racially charged trauma. I'm here for you") Asking specifically about racist events (e.g., "In what ways have the recent events impacted you?")
Systemic	Institutional	<ul style="list-style-type: none"> Medical providers and individuals in roles of power within your clinic are mainly white A disproportionate number of BIPOC patients no-show appointments 	<ul style="list-style-type: none"> Call out microaggressions and name the racism that exists in the institution Create reporting and intervention systems to track and mediate racism and discrimination in the workplace Modify recruitment strategies to broaden applicant pool Conduct community-level needs assessments
	Structural	<ul style="list-style-type: none"> Evidence-based interventions to address racism only target individual-level changes Research focuses on racial disparities as opposed to underlying causes of disparities 	<ul style="list-style-type: none"> Vote in diverse members of large organization (e.g., AAP, APA, AMA) Encourage stakeholders and key funders to allocate resources to research targeting system-level change and underlying causes of racial disparities



Resources to Check Out

Personal Growth and Individual Levels:

- <https://akidsco.com/>
- <https://www.raceforward.org/>
- <http://www.seattlechannel.org/embedvideoplayer?videoid=x59621>
- <https://www.youtube.com/watch?v=GNhcY6fTyBM> (Camara Jones MD Ted Talk)

Systemic Growth in the Field of Medicine

- <https://www.commonwealthfund.org/publications/2021/oct/confronting-racism-health-care>
- <https://guides.usfca.edu/anti-racism-healthcare>



Questions?

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