

Anti-Racism in the SON

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UNIVERSITY of WASHINGTON





Wendy Barrington, PhD, MPH (she/her)

Director, Center for Anti-Racism in Community Health, School of Public Health Associate Professor, Child, Family, & Population Health Nursing Adjunct Associate Professor, Depts. of Epidemiology & Health Services

Butch de Castro, PhD, MSN/MPH, RN, FAAN (he/him)

Associate Dean, Diversity, Equity, & Inclusion Professor, Child, Family, & Population Health Nursing

Rebecca O'Connor, PhD, RN (she/her)

Associate Professor, Child, Family, & Population Health Nursing Fellow, Betty Irene Moore Nurse Leaders & Innovators







We would like to respectfully acknowledge that the University of Washington was built on the traditional land of the Coast Salish peoples—land which touches the shared waters of all tribes and bands within the Duwamish, Suquamish, Tulalip and Muckleshoot nations—and pay our respects to elders both past and present.

Seattle Area: https://www.realrentduwamish.org/

U.S. https://native-land.ca/

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Why We Do This

- > The formation of the United States occurred as a direct result of traumatic insults to Indigenous and Black peoples
 - Colonization
 - Slavery
- > These historic acts have not been undone and continue to shape the lives and health of Black and Indigenous peoples as well as peoples of color
- > We come together in the spirit of reconciliation and repair



Social Determinants of Equity

Systems of power that allocate resources and distribute people into contexts

- Economic system
- Laws and policy
- Social norms
- Discrimination







Why We Center Anti-Racism

"Racism has been defined as a system of structuring opportunity and assigning value based on the social interpretation of how one looks (which is what we call "race"), which unfairly disadvantages some individuals and communities, unfairly advantages other individuals and communities, and saps the strength of the whole society through the waste of human resources."

Jones CP. Confronting institutionalized racism. Phylon. 2003;50:7–22.

Levels of Racism





Institutionalized	Personally-mediated	Internalized
 Initial historical insult Structural barriers Inaction in face of need Social norms Biological determinism Unearned privilege 	 Intentional Unintentional Acts of commission Acts of omission Acts of omission Maintains structural barriers Condoned by social norms 	 Reflects systems of privilege Reflects social values Erodes individual sense of value Undermines collective action

Jones CP. Levels of Racism: A Theoretic Framework and a Gardener's Tale. American Journal of Public Health. 2000;90(8):1212-1215.

Definitions

- > <u>Racist</u>: One who is supporting a racist policy through their actions or inaction or expressing a racist idea.
- > Anti-racist: One who is supporting an anti-racist policy through their actions or expressing an anti-racist idea.







Racism is a Public Health Crisis

Racism is a public health crisis: The transformation starts here. It starts with us.

Crossposted from Public Health Insider

By King County Executive Dow Constantine and Public Health — Seattle & King County Director Patty Hayes

"There's nothing new under the sun but there are new suns." Octavia E. Butler, Parable of the Trickster

Today, we declare that racism is a public health crisis. Public Health – Seattle & King County and all of King County government are committed to implementing a racially equitable response to this crisis, centering on community.

King County government and Public Health – Seattle & King County are committed to working in stronger and better resourced partnerships with community organizations and leaders to disrupt and dismantle racism and protect the health and well-being of Black, Indigenous People and People of Color. We recognize that historically and currently King County has been complicit in maintaining and perpetuating structural racism, and that as an institution we must be a vital player in dismantling oppressive systems that are grounded in white supremacy.



Patty Hayes, MN, RN





UW SCHOOL OF NURSING VALUES

- > Collaboration
- > Social Responsibility
- > Integrity
- > Respect
- > Accountability
- > Diversity*
- > **Excellence**





"...justice, equity, diversity, and inclusion are fundamental human rights that can and <u>must be honored everywhere</u> in order to facilitate wellness. Health does not exist outside of equity and diversity."

- Dean Azita Emami UW School of Nursing



UW SCHOOL OF NURSING DIVERSITY STATEMENT

We are committed to fostering a climate that is inclusive and welcoming of all groups. We recognize that this effort is a multi-dimensional one that includes: recruitment efforts, policies, curriculum, pedagogy, norms, practices, faculty/staff promotions, decision making, and continuing multicultural and anti-oppression education for faculty and staff members.

We also recognize that nursing education and practice in the United States occurs within the social, cultural, and historical context of institutionalized racism (among other forms of oppression). Meeting our purpose thus requires a sustained and multi-dimensional effort.

CRUCIAL CONVERSATIONS HAPPEN WHEN...

- > Stakes are high
- > Opinions vary

- > Emotions run strong
- > Outcome greatly impacts our lives
- These conversations can be uncomfortable and are an essential step toward personal growth.
- Our time together and this activity is just an introduction to frame our work within and beyond the SON.
- Expect these crucial conversations to continue.



Disclaimer:

- 1) Educating others about how your identity is stereotyped/marginalized/discriminated against is a burden & exhausting. Discussions about bias can be hard/irritating/etc.—especially in large groups. Thank you all in advance for listening and participating and do what you need to do to take care of yourself.
- 2) I am a white, gay, cis-gender, over-educated.... woman. I am talking about racism and other -isms because it's everyone's responsibility. I will get things wrong—please correct me when I do.

IF BEING GAY IS A CHOICE, THEN WHEN DID YOU DECIDE TO BECOME STRAIGHT?

https://www.pinterest.com/pin/13721911987

1687382

White people, stop asking us to educate you about racism

Signed, Every POC you've burdened with this question

https://medium.com/@realtalkwocandallies/white-people-stop-asking-us-to-educate-you-about-racism-69273d39d828



http://www.pbs.org/wnet/religionandethics/2016/06/24/bring-friend-mosque/26499/

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How Whiteness Shows Up^{1,2}

- White-centering (bringing back to us); monopolizing air time
- Defensiveness
- Seeing race as something people of color have making conversations about race and the role of whiteness very difficult
- Protecting ourselves, others from race-based stress & the reality of our own biases (losing 'presumed innocence')
- Getting our ally cookies

IN ORDER TO CREATE A SAFE SPACE (TO BE UNCOMFORTABLE):

- > Be respectful, but speak your truth
- > Foster a climate of sharing without asking for specific perspectives
- > Don't devalue other peoples' experiences or contributions
- > Monitor 'air time'





INTENT OF DIVERSITY ACTIVITY

The Diversity Vignettes are real experiences that have occurred in various academic institutions. These selected vignettes are merely examples and are not meant to be an exhaustive representation of experiences for faculty, staff, and students.

The goal of this activity is to reflect on and discuss situations where a lack of consideration of differences in social contexts and social position intentionally or unintentionally promoted a negative interpersonal exchange or institutional climate.

Through this activity, we hope to stimulate an open and ongoing dialogue about diversity and its impact and value to our SON community. Engaging in this discourse may be uncomfortable for all of us on some level. Let us all acknowledge and accept this discomfort in ourselves and others as we participate in this activity with respect and authenticity.

ACTIVITY INSTRUCTIONS

- 1. Please read and reflect on the group's assigned vignette.
- 2. Discuss with your small group:
 - A. Compare the actions of each person in the vignette to your own predicted response or action. Are there commonalities or differences?
 - B. What would you do as a bystander?
 - C. What policy or practice needs to be changed for the environment to be antiracist and/or inclusive?





VIGNETTE #1

An African-American student made a complaint about a non-African-American student who touched her hair while commenting that her hair was exotic and beautiful. When they were invited to have a conversation about the situation, the non-African-American student explained that she didn't have any idea that her admiration of the African-American student's hair would be offensive and that it was meant as a compliment. She further suggested that her behavior did not have any racial undertone and should not be perceived as such.





VIGNETTE #2

A woman and infant were being admitted by a nurse to an inpatient pediatric unit. While taking a medical history, the nurse asked what the woman's relationship was to the child. The woman responded, "I'm Jane, her mom." After looking at the chart, the nurse replied, "In the chart, the mother's name is Mary." Jane responded, "Yes, she has two moms." The nurse then asked, "But who's the real mom?"





HEALS Model







What is HEALS?

- > Structured approach to identify, deconstruct, and address bias, stereotyping, or exclusionary behavior
- > Proactive steps to cultivate and nurture a respectful, inclusive learning and working environments
- > <u>GOAL</u>: Establish community norm; demands personal and organizational engagement





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Halt	Pause / Ask to clarify / Focus on the idea Use "I" language to express concern
Engage	Let's talk about the issues embedded in this concept. Who might be affected? What are the health care implications?
Allow	Trade opinions, stories, perspectives, and reactions.
Learn	Learn from one another through engaged and active listening.
Synthesize	Connect the dialogue to health equity/quality of care





Facilitating Emergent Discussions:

By emergent, we mean when a comment or action raises an assumption about another person or group of people that could alter how care (or education) is provided or received.

Start the course by establishing an atmosphere of humility, respect and shared ownership: "This class is about xx, but issues of diversity or difference may come up. Things may be communicated that cause offense, and I may miss it – or I may communicate something that you believe needs to be discussed. One process I may use to facilitate discussion is the HEALS Model."

University of Washington School of Nursing - Diversity, Equity & Inclusion: https://nursing.uw.edu/about/diversity-equity-and-inclusion/



This text is a derivative of the original card text (https://nursing.ucsf.edu/about/DIVA-projects#HEALS) by Regents of the University of California, used under CC BY NC SA (https://creativecommons.org/licenses/ by-nc-sa/4.0/). This text is licensed under CC BY NC SA by: University of Washington School of Nursing



OTHER TOOLS







WHAT IS CULTURAL HUMILITY?

An approach, philosophy, or tool to facilitate understanding and respectfulness of others

- Cultural standpoint:
 - Belonging to a certain group imparts advantages or disadvantages
- Personal standpoint:
 - What you think it is like for others is different from what it really is like for others





ELEMENTS OF CULTURAL HUMILITY

1. Lifelong learning and critical self-reflection

- Recognize and honor diversity
- Openness to understanding
- Acknowledge own lack of experience
- Recognize when transferring own beliefs and experiences onto others
- Rinse and repeat





ELEMENTS OF CULTURAL HUMILITY

2. Recognize and challenge power imbalances for respectful partnerships

- Rigorous research describing relationships
- Community-based participatory research
- Setting priorities and recommendations for changes





ELEMENTS OF CULTURAL HUMILITY

3. Institutional accountability

- Institutional and policy change to rectify identified disparities
- Many roles (personal and professional) at many levels
 - > Practice
 - > Advocacy
 - > Communication



STAGES OF COMPETENCE

- > Unconscious incompetence
- > Consciously incompetent painful
- > Consciously competent involves risk and practice
- > Unconscious competence







I identify how I may unknowingly benefit from Racism.

I recognize racism is a present & current problem.

I promote & advocate for policies & leaders that are Anti-Racist.

l deny racism a problem	n is make	out questions that me uncomfortable.	l sit with my discomfort.	
	l avoid hard questions.	I understand my own privilege in ignoring racism.	I speak out when I see Racism in action.	
Becoming	Fear Zone	Learning Zone	Growth Zone	
Anti-Racist	l strive to be comfortable.	l educate myself about race & structural racism.	I educate my peers how Racism harms our profession.	
I talk to others who look & think like me. I am vulnerable about my own biases & knowledge gaps. I don't let mistakes deter me from being better.				
	ten to others who thin ook differently than me		•	
		self with others who lifferently than me.		7
			www.SurgeryRedesign.com	

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BEST PRACTICES

- > Discover and reflect on your own implicit biases https://implicit.harvard.edu/implicit/takeatest.html
- > Be authentic, respectful, and transparent with yourself and each other
- > Provide constructive feedback about missteps or mistakes
- > Allow space for yourself and others to apologize and move toward resolution
- > Seek additional trainings to help you ameliorate oppressive acts
- Hold yourself and your institution accountable for fostering equity and inclusion & interrupting racism

UW SON DIVERSITY COMMITTEE

- > Gives recommendations to SON governance for diversity-related issues
- > Delivers programs and workshops to promote equity, diversity, and inclusiveness in SON for faculty, staff, and students
- > Provides vision and evaluation of diversity-related efforts within the SON



UW SON DIVERSITY STRATEGIC PLAN

- > All UW units have been tasked by UW Diversity Council to develop a Strategic Diversity Plan
- > School-level effort within SON
 - Faculty
 - Staff
 - Students





INSTITUTIONAL ACCOUNTABILITY

Please communicate experiences that do not reflect SON values:

- THE OFFICE OF DIVERSITY, EQUITY & INCLUSION Butch de Castro, Associate Dean Diversity, Equity & Inclusion butchdec@uw.edu
- Patrick Tufford, Director of Student and Academic Services ptufford@uw.edu
- Cher Espina, Director of Admissions and Student Diversity cherelyn@uw.edu
- Helaina Sorey, Director of Human Resources hsorey@uw.edu
- Any SON faculty/instructor/staff





AVAILABLE INFO & RESOURCES

> DEl webpages: <u>https://dei.nursing.uw.edu/</u>

> 10 Things You Can Do to Promote AR/DEI; here





ON ANOTHER NOTE: SON SURVEY

- Help us improve our clinical nursing education by completing a brief research survey (~30 minutes) & receive up to \$90 plus a chance to win 2 additional \$100 gift cards!
- > This is part of a research study, participation is completely voluntary, answers are anonymous, & no one in the SoN knows who completed & who did not
- > For incoming ABSN & BSN students
- > Please complete by September 26th
- > Questions or didn't receive the email?
 - <u>SONsurvey@uw.edu</u>



