



# Prevention Practices to Reduce Disparities and Increase Positive Outcomes

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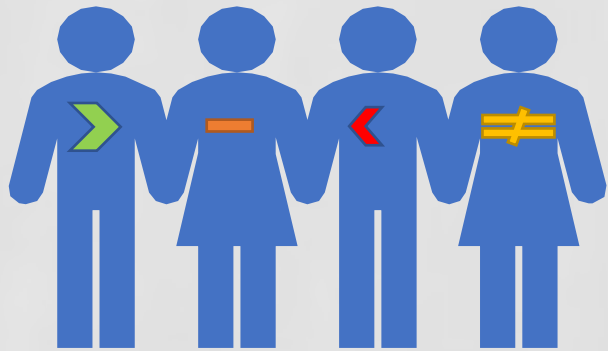
11/3/2020

# Learning Objectives

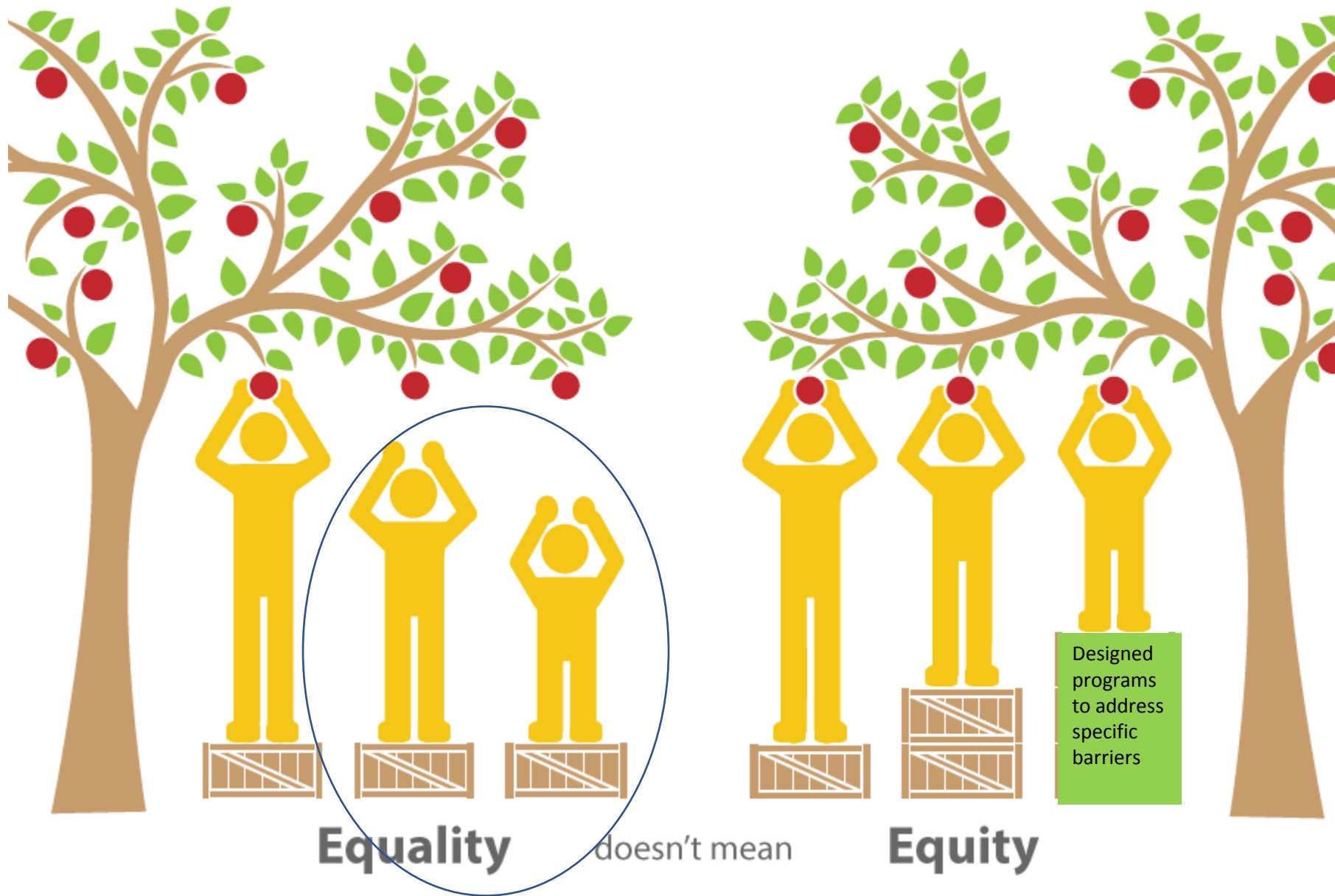
1. Understand the impact of bias and discrimination (Empathy)
2. Realize the need for Cultural Humility as an individual and Cultural Competence as an organization. (Attitude and Knowledge)
3. Understand CLAS Standards (Skill)
4. How to use the Public Health Approach and the Strategic Prevention Framework effectively (Applied Skill)

# Facing Health Disparities

- “...of all the forms of injustice, inequality in healthcare is the most shocking and inhumane.”
- -- Dr. Martin Luther King Jr.



# Equality vs. Equity



Vulnerable  
populations  
include



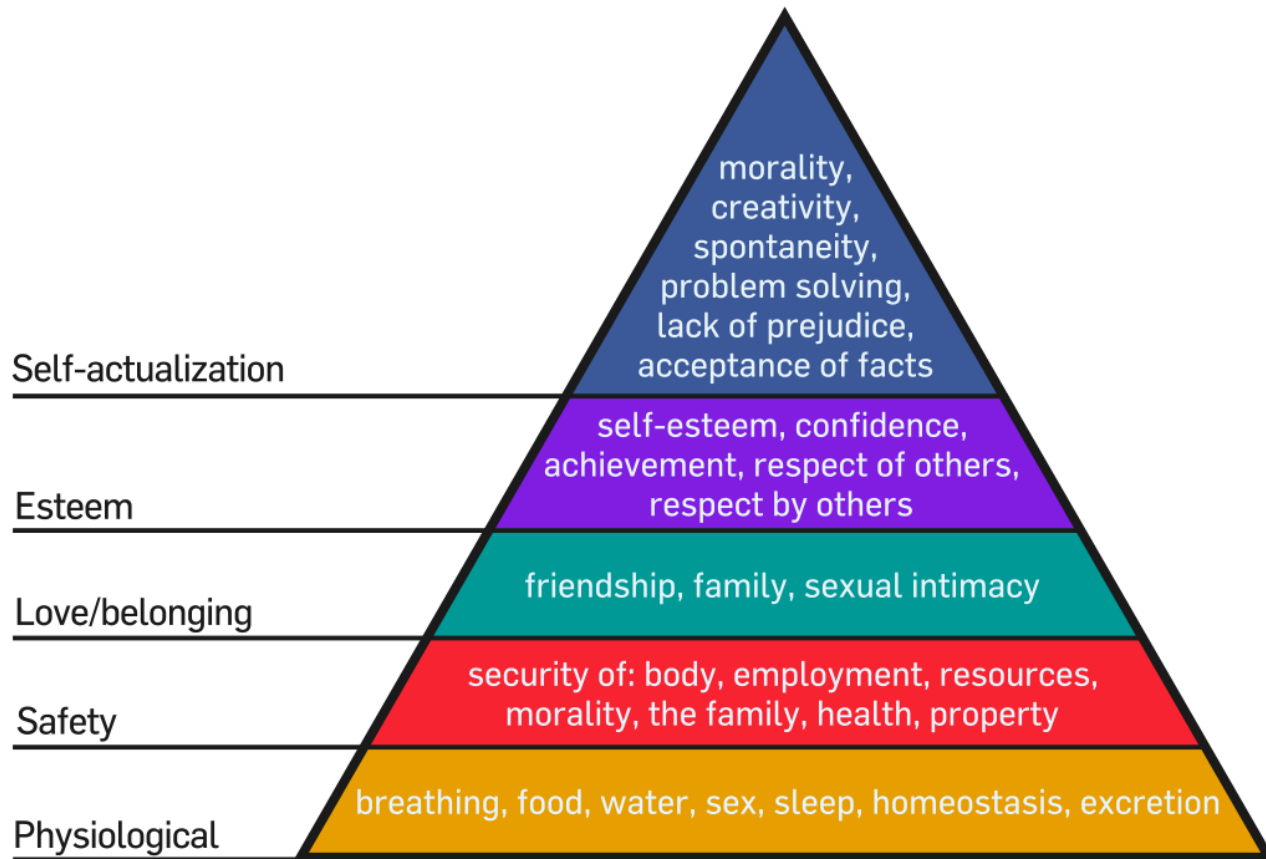
- Economically disadvantaged,
- Racial and ethnic minorities,
- LGBT
- The uninsured,
- Low-income children,
- The elderly,
- The homeless,
- Veterans of armed forces
- Those with chronic health conditions,
- Individuals who have severe mental illness.
- Rural or urban residents
- Incarcerated individuals (families members)
- Children in foster care
- Etc.

# The Experience of Barriers to Health

- High-quality education
- Nutritious food
- Decent and safe housing
- Affordable, reliable public transportation
- Culturally sensitive health care providers
- Health insurance
- Clean water and non-polluted air

- Race and ethnicity
- Gender
- Sexual identity and orientation
- Disability status or special health care needs
- Geographic location (rural and urban)
- Income level

# What do Vulnerable Populations Experience?



- Disrespect
- Victimization
- Attack
- Assault
- Frustration
- Anguish
- Disappointment
- Oppression (external / Internal)
- Trauma (Historical)
- Insecurity

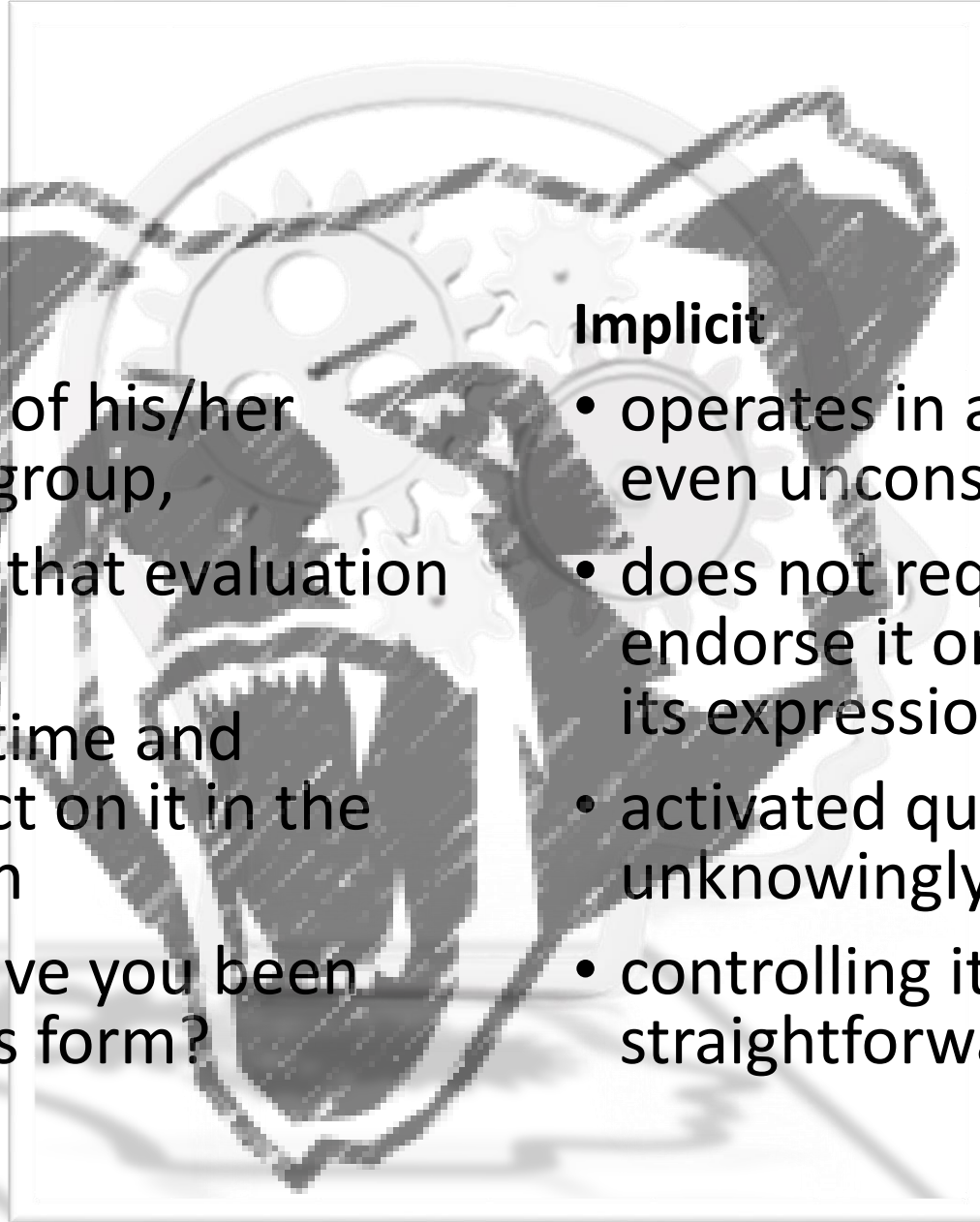
# Bias

## Explicit requires

- Person is aware of his/her evaluation of a group,
- Person believes that evaluation to be correct
- Person has the time and motivation to act on it in the current situation
- In what ways have you been impacted by this form?

## Implicit

- operates in an unintentional, even unconscious manner.
- does not require the perceiver to endorse it or devote attention to its expression.
- activated quickly and unknowingly by situational cues
- controlling it is not a straightforward matter





# Collective Integrated Bias

- Bias unchecked leads to
  - Stigmas
  - Fears
  - Dangerous Myths
  - Prejudice
  - Discriminatory Practices





# Discrimination

- Business Dictionary Definition:
  - Bias or prejudice resulting in denial of opportunity, or unfair treatment regarding selection, promotion, or transfer. Discrimination is practiced commonly on the grounds of age, disability, ethnicity, origin, political belief, race, religion, sex, etc. factors which are irrelevant to a person's competence or suitability.
  - Unequal treatment provided to one or more parties on the basis of a mutual accord or some other logical or illogical reason.
  - Differences in two rates not explainable or justifiable by economic considerations such as costs.



# THE IMPACT OF BIAS IS HARM

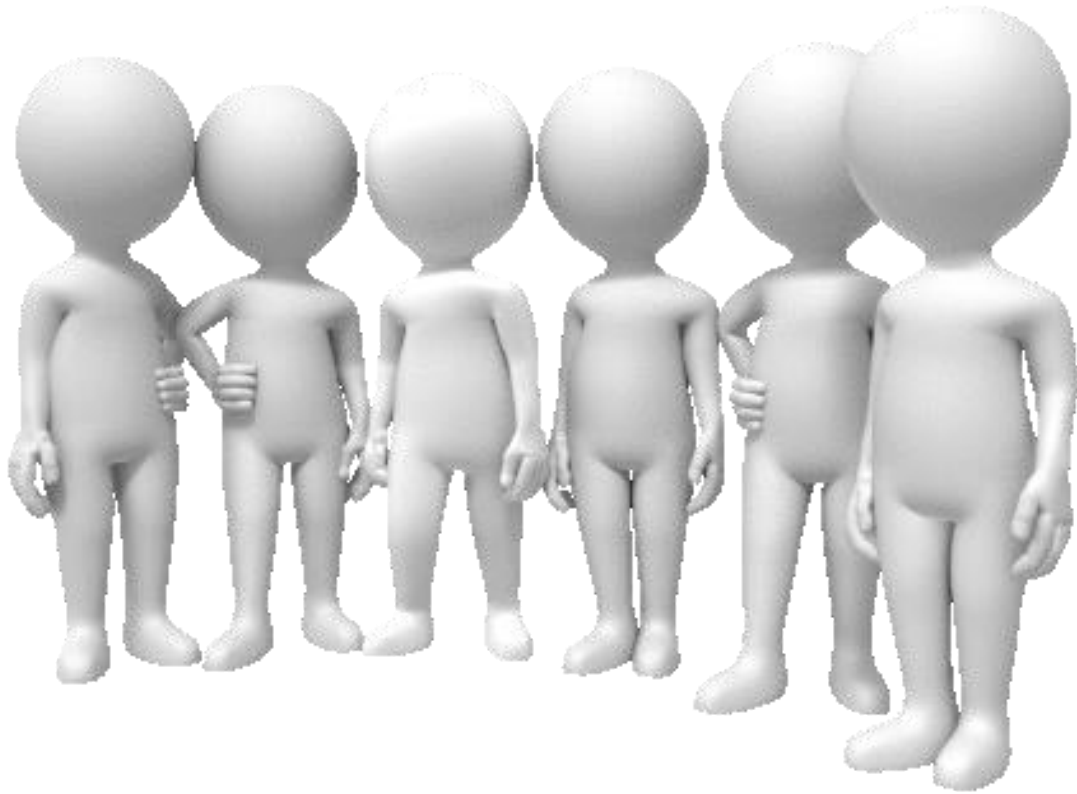
*Disparities, Inequities, Policy Violence, Injustice*



# Health and Health Care

- Access to Health Care
- Access to Primary Care
- Health Literacy

# Social and Community Context



- Civic Participation
- Discrimination
- Incarceration
- Social Cohesion



# Education

- Early Childhood Education and Development
- Enrollment in Higher Education
- High School Graduation
- Language and Literacy



## Economic Stability

- Employment
- Food Insecurity
- Housing Instability
- Poverty

# Neighborhood and Built Environment

- Access to Foods that Support Healthy Eating Patterns
- Crime and Violence
- Environmental Conditions
- Quality of Housing





HERE COMES TROUBLE

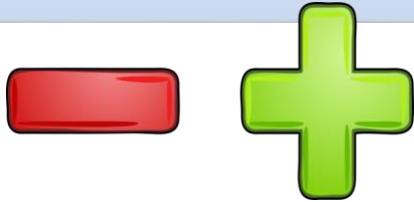
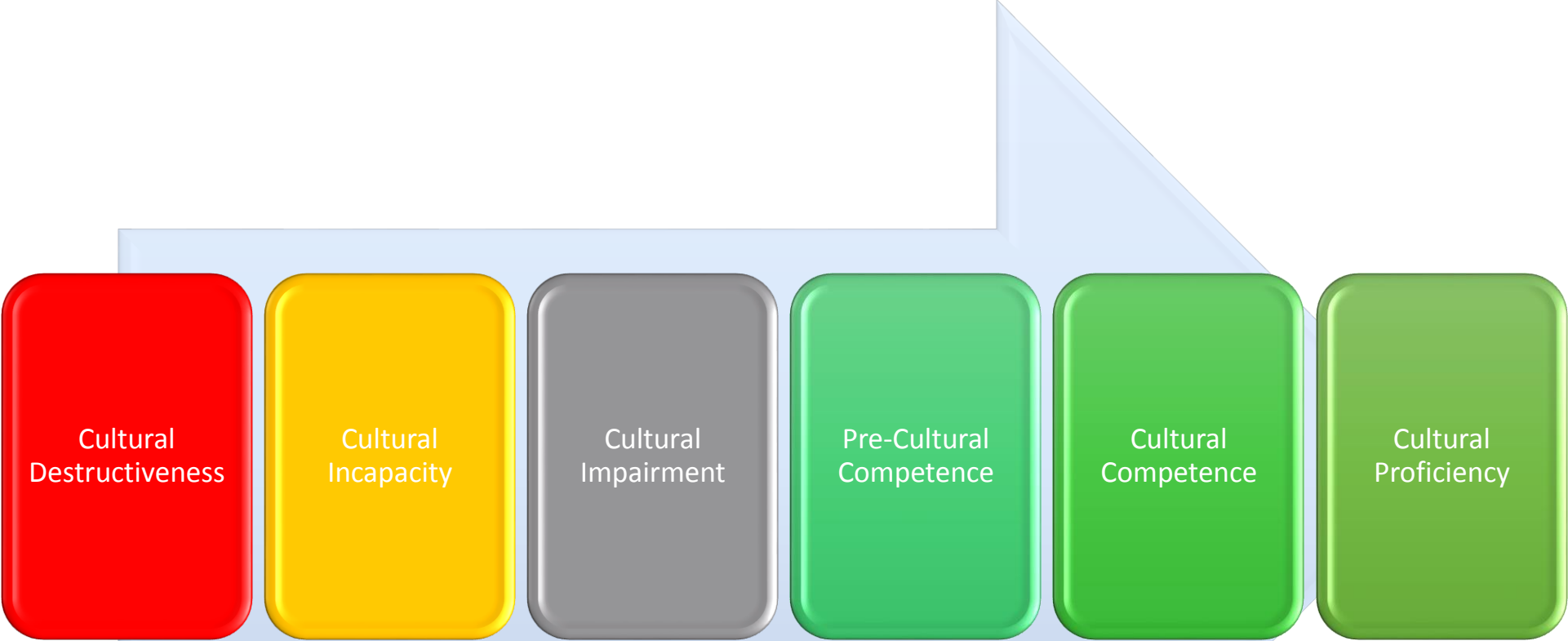


# Group Discussion Questions

- In what ways does bias for a group help that group in achieving access and resources within this determinant of health? - What are some ultimate outcomes that result?
- In what ways does bias against a group impede people from achieving access and resources within this determinant of health? – What are some ultimate outcomes that result?
- Name specific institutions /or systems that directly affect groups favorably or unfavorably within this determinant.



# Cultural Competence Continuum



Outcomes Speak Louder Than Words

# How Bias Works in Healthcare



## Interpersonal Interactions

- Reception of patients
- Warmth/ Bedside manner
- Diagnosis
- Treatment
- Pain management



## Internal Dynamics of Organizations

- Hiring practices
- Performance reviews
- Compensation
- Promotions
- Communication
- Collaboration



## Systemic Cost/Waste

- \$310 billion / year for racial bias alone



# Ways to Reduce Disparities

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# Cultural Competence

having the capacity to function effectively – individually and as an organization – within the context of the cultural beliefs, behaviors, and needs of a community or population group.






# Why is it Important?

Culturally responsive skills can improve participant engagement in services, relationships between populations of focus and providers, and retention and outcomes.

Cultural competence is an essential ingredient in decreasing disparities in behavioral health.

Provides more opportunities to access services that reflect a cultural perspective on and alternative, culturally congruent approaches to their presenting problems.



Culturally responsive services will likely provide a greater sense of safety from the participant's perspective, supporting the belief that culture is essential to better behavioral health outcomes.

# A Question of Competence or Humility





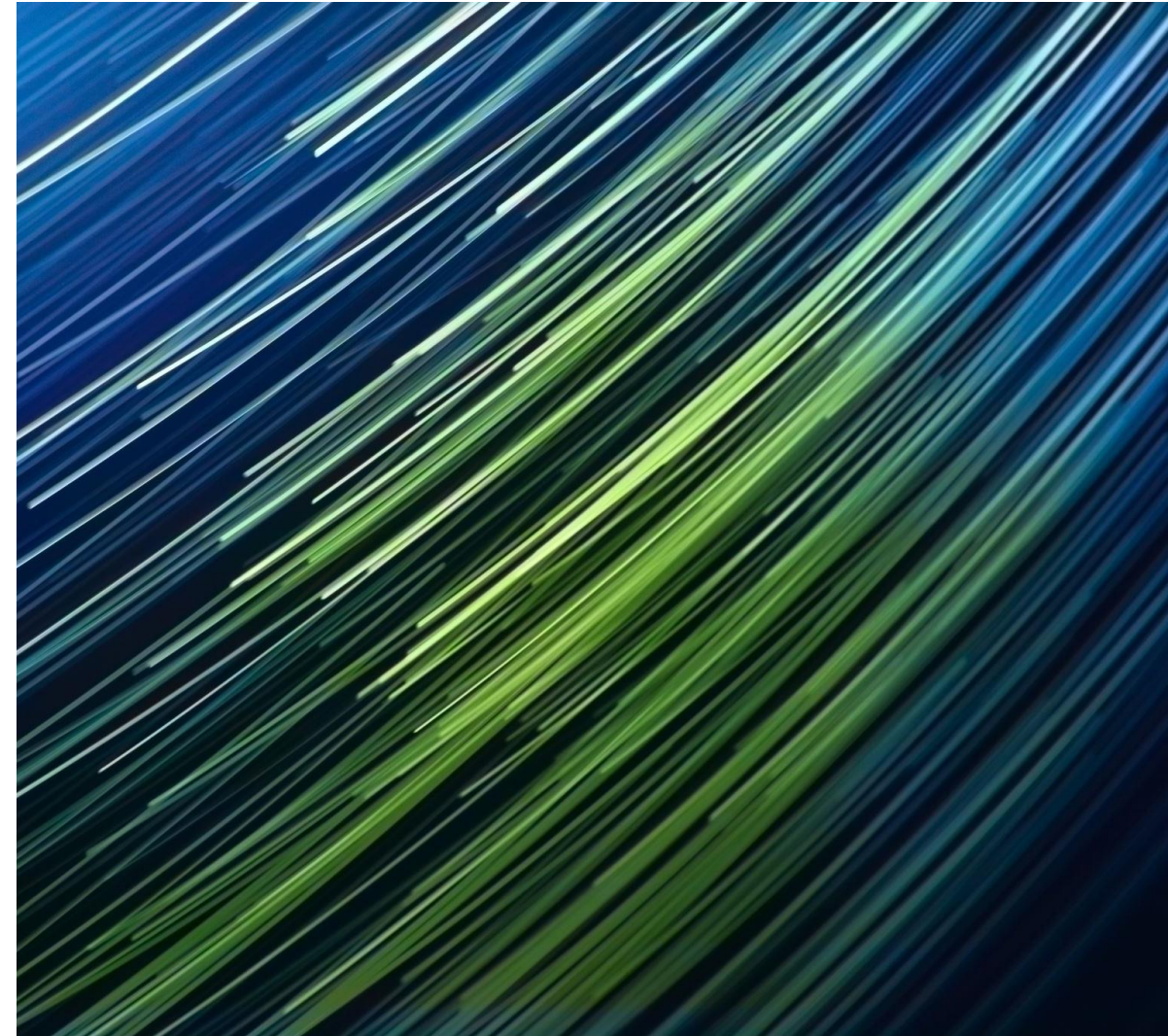
# Discussion Questions

Why Consider Culture?

Benefits With Cultural Considerations?

Consequences without Cultural Considerations?

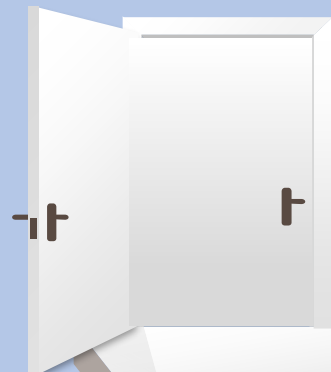
Why Would Organizations Not Want to Acknowledge Cultural Considerations?



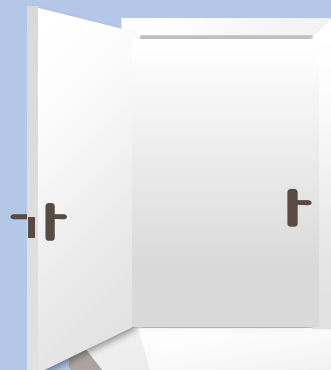
# The Route towards Cultural Humility



**STEP 1 - Learning**  
lifelong commitment to self-  
evaluation /critique



**STEP 1 - Listening**  
lifelong commitment to  
critique & learning from  
others



**STEP 2 -  
Challenge Power**  
Hold Institutions accountable  
Fix the Imbalances



**STEP 3 -  
Partner & Ally**  
Recognize that problem  
is larger than ourselves  
& advocate for systemic  
change



# Application #1: Know Thy Self

Cultural groups to which you belong. And what aspects are Healthy vs unhealthy

- Language/s preferred
- Values
- Norms
- Beliefs
- Symbols
- Practices
- Sanctions

# Prevention Code of Ethics

**Ethical Obligations**

**Confidentiality**

**Integrity**

**Nature of Services**

**Competence**

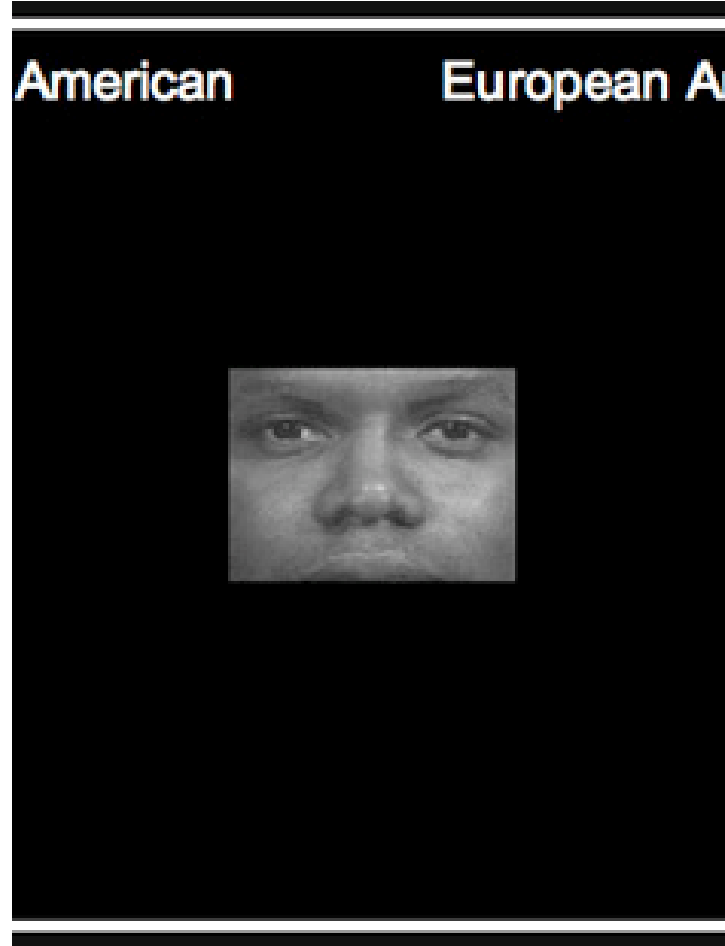
**Non-Discrimination**



# Self-Assessment (part 1) - Activity

Awareness		Never	Sometimes/ Occasionally	Fairly Often/ Pretty Well	Always/Very Well
Value Diversity	I view human difference as positive and a cause for celebration.				
Know Myself	I have a clear sense of my own ethnic, cultural, and racial identity.				
Share my culture	I am aware that in order to learn more about others I need to understand and be prepared to share my own culture.				
Be Aware of areas of discomfort	I am aware of my discomfort when I encounter differences in race, color, religion, sexual orientation, language, and ethnicity.				
Check my assumptions	I am aware of the assumptions that I hold about people of cultures different from my own.				
Challenge my stereotypes	I am aware of my stereotypes as they arise and have developed personal strategies for reducing the harm they cause.				

# Step #1 (Continued): Know Thy Self . . . In Relation to Others & Profession



- Ethical Stance
- How do others view me?
- How do I view others?
- Privileges?
- Biases (implicit)?
  - Project Implicit through Harvard University:  
<https://implicit.harvard.edu/implicit/takeatest.html>

# Step #1 (Cont.): Learn at the Feet of Your Focus Population



- Ask permission to enter
- Be willing to be rejected
- Drop your guard & title
- Move past fear, stigma
- Become the learner



## Step #2: Recognize and Challenge Power Imbalances

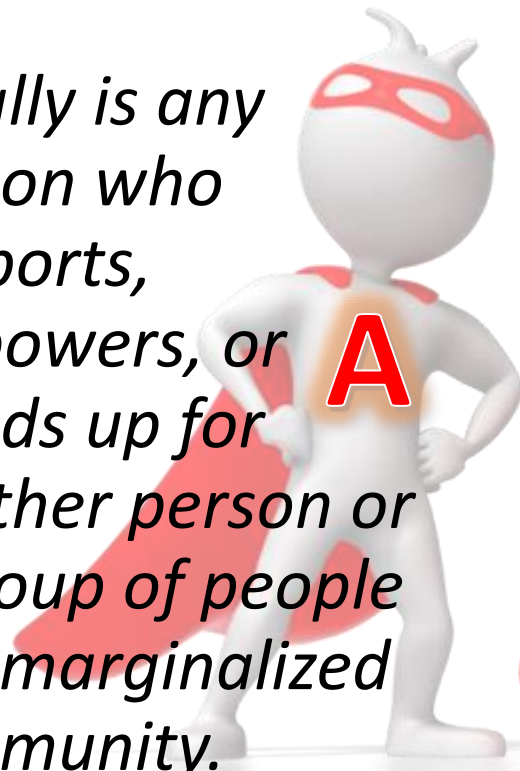
- Acknowledging and challenging the power imbalances inherent in our practitioner/client dynamics
- Holding Institutions Accountable



# Step #3 Transform into an Allied Partnerships

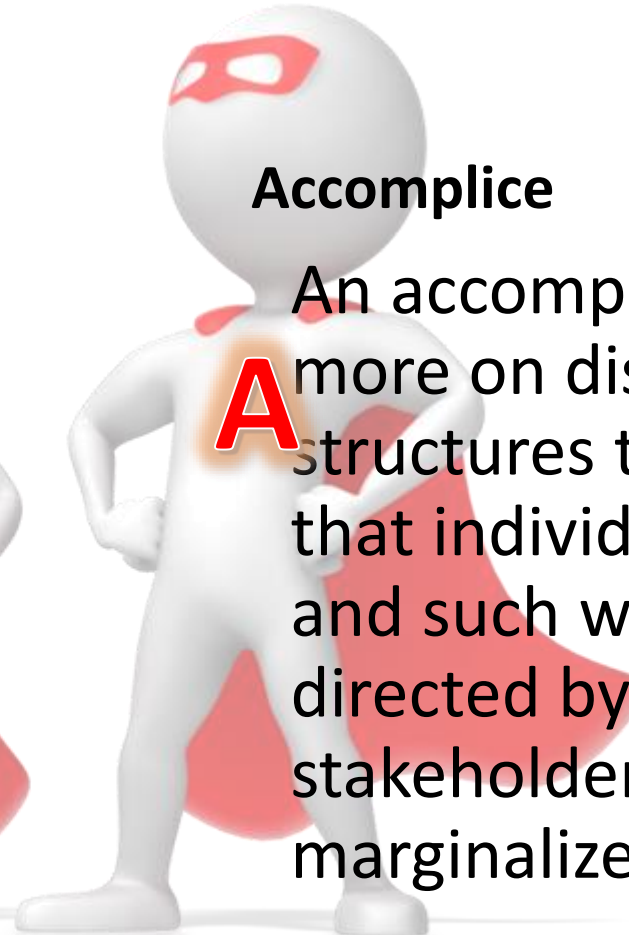
## **Ally**

*An ally is any person who supports, empowers, or stands up for another person or a group of people in a marginalized community.*



## **Accomplice**

An accomplice will focus more on dismantling the structures that oppress that individual or group—and such work will be directed by the stakeholders in the marginalized group.



Source:

[https://www.codepink.org/be\\_accomplices\\_not\\_allies](https://www.codepink.org/be_accomplices_not_allies)

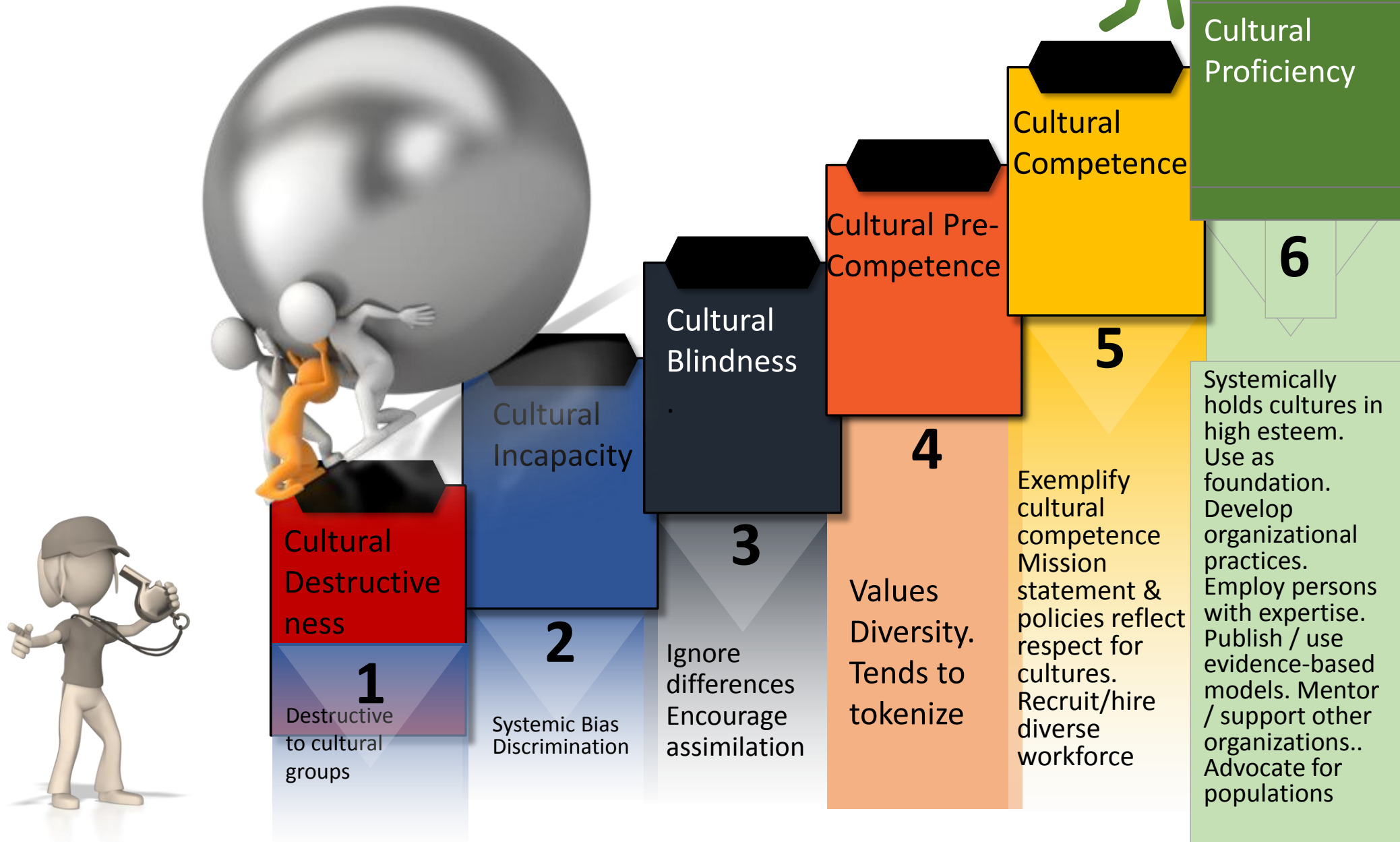
# How Does Bias Affect the Internal Dynamics of Organizations?



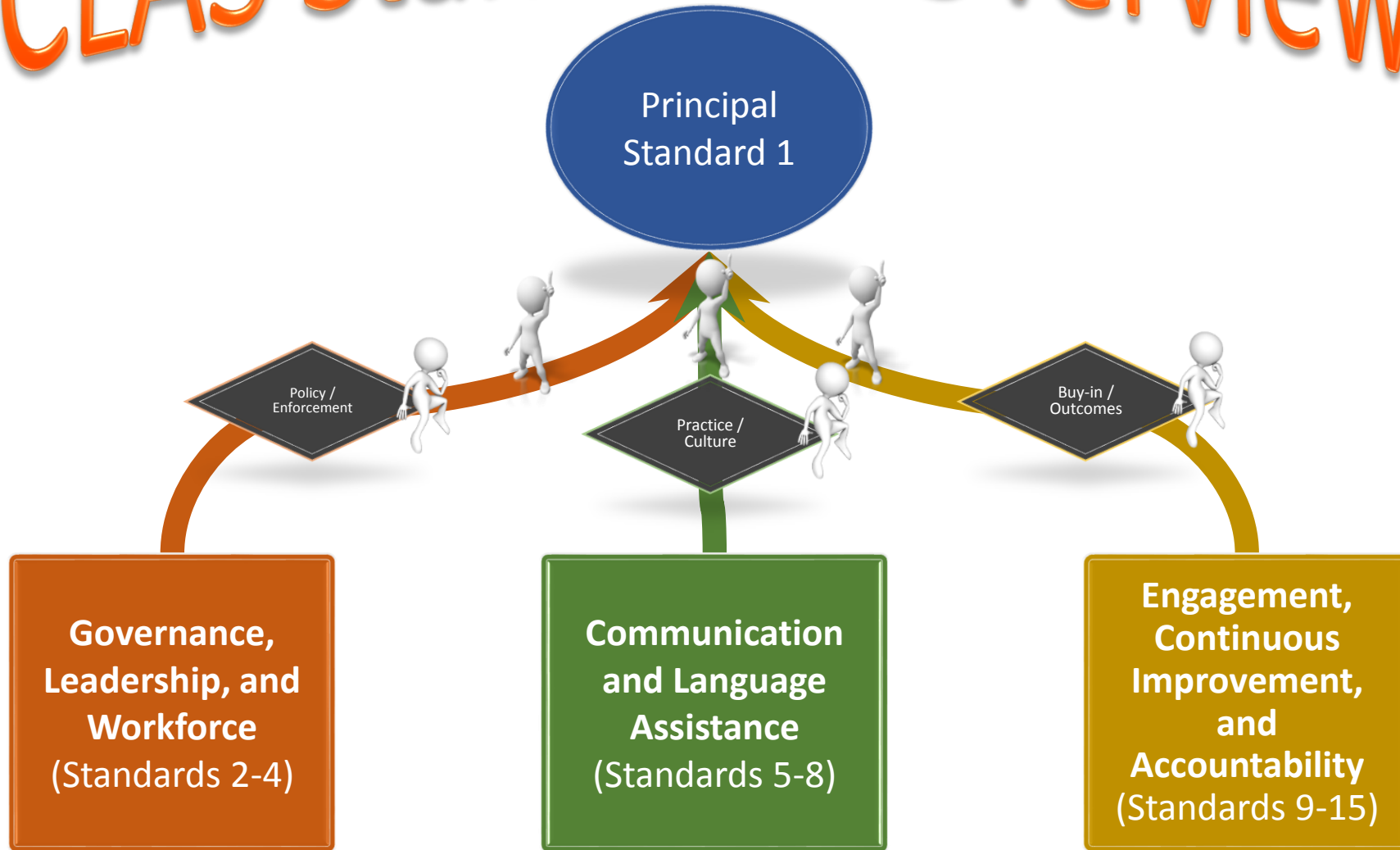


**CLAS**  
Standards

# Cultural Competence Continuum



# CLAS Standards Overview

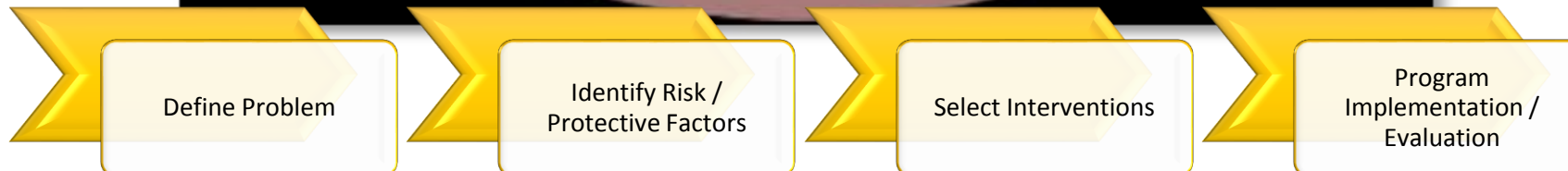
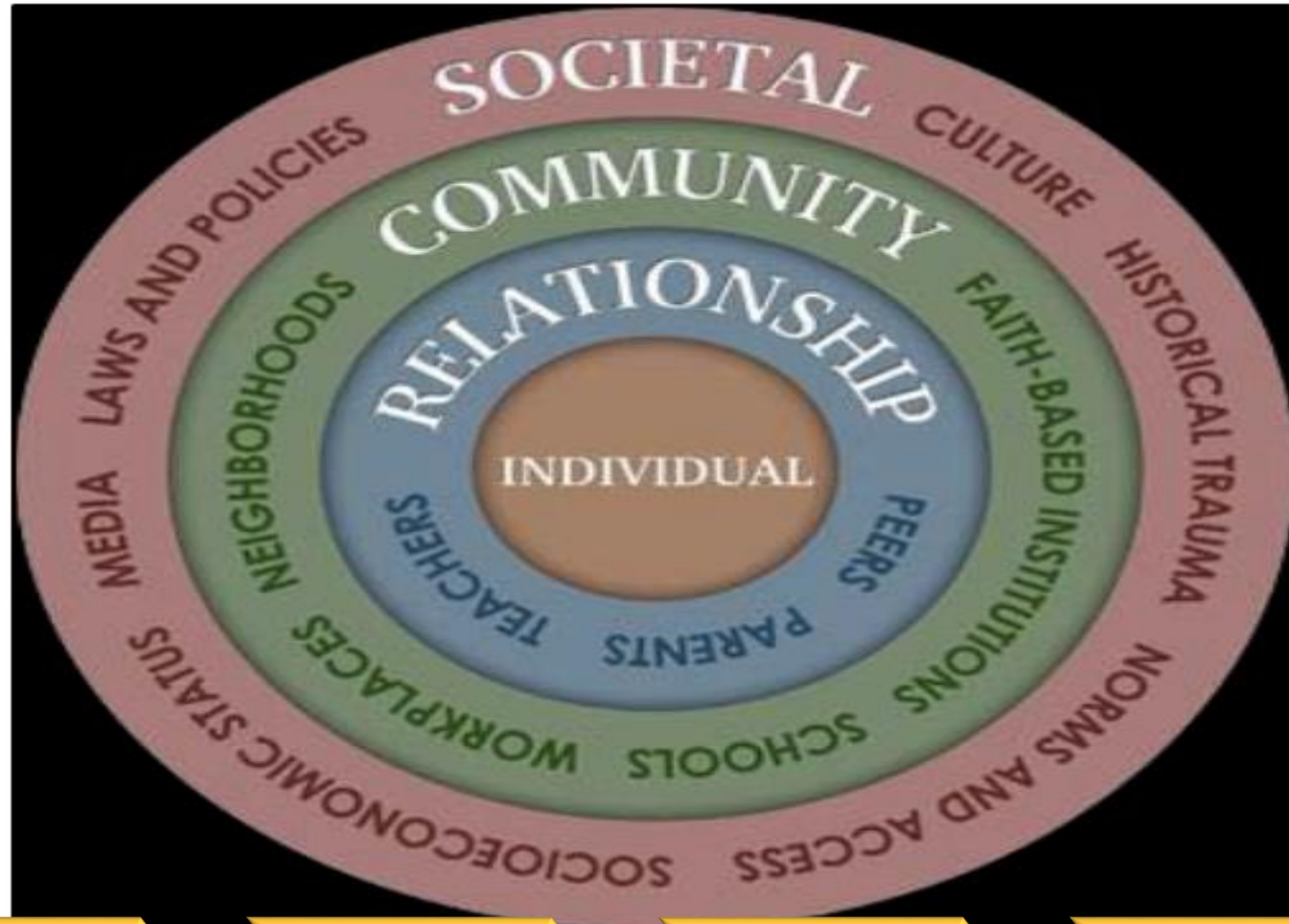


□ Provide effective, equitable, understandable, and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy, and other communication needs.

# The Framework



# The Public Health Approach is Coalition Work



# Leverage is the Name of the Game

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- Controlling the course of the community
- Transforming systems
- Altering the historic course of outcomes
- Lowering Risk
- Increasing Protection





# Risk & Protection Linked with the SDOH





## Recruitment of Community Resources for SDOH

- Identify key leaders within each sector
- Notoriety
- Outcomes
- Passion
- Decision makers/ influencers
- Culturally Competent Approach
- Shared interests/values/goals
- Culturally Responsive
- Clear responsibilities
- How coalition benefit sector
- Positive outcomes (Win – Win)

# Where Are Those Resources Found Within The Community?

- **Youth**
- **Parents**
- **Businesses**
- **Media**
- **Schools**
- **Youth Servicing Orgs**
- **Law Enforcement**

- **Religions/FBO**
- **Fraternal**
- **Civic/Volunteer**
- **Healthcare Field**
- **Government**
- **Other Organizations**
- **Champions**



# National Prevention Strategy

1. Ensure a strategic focus on communities at greatest risk.
2. Reduce disparities in access to quality health care.
3. Increase the capacity of the prevention workforce to identify and address disparities.
4. Support research to identify effective strategies to eliminate health disparities.
5. Standardize and collect data to better identify and address disparities.



**THANK** you

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