Addressing Historical and Ending Contemporary Racial Inequities
How to Ask a Question

All functions are located at the bottom of your screen
• Unmute yourself and ask aloud
• Type in the chat box or use the Q&A function
  – You can choose who to send a chat or question to
Please provide your feedback on the meeting at the link below.

Scan the QR code or type the URL into your browser.

https://www.surveymonkey.com/r/KYNJLHX
Today’s Presenters

Ciara Hill

Linda Henderson-Smith, PhD, LPC
Agenda

• What is Historical Trauma and its impacts?
• What is Systemic Trauma and its impacts?
• What can we do?
What is Trauma?

Definition (SAMHSA Experts 2012) includes three key elements

Individual trauma results from an event, series of events, or set of circumstances that is experienced by an individual as overwhelming or life-changing and that has profound effects on the individual’s psychological development or well-being, often involving a physiological, social, and/or spiritual impact.
Intergenerational (Historical) Trauma

“Cumulative emotional and psychological wounding, over the lifespan and across generations, emanating from massive group trauma experiences.”

Yellow Horse Brave Heart, 2003
Rethinking Historical Trauma: Narratives of Resilience
Aaron R. Denham, 2008

Historical Trauma and Cultural Healing, University of Minnesota Extension
<table>
<thead>
<tr>
<th>Event Type</th>
<th>Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intergenerational/Historical Trauma</td>
<td>Genocides, Slavery, Pandemics, Massacres, Prohibition, Forced relocation</td>
</tr>
<tr>
<td>Events</td>
<td></td>
</tr>
<tr>
<td>Genocides</td>
<td></td>
</tr>
<tr>
<td>Slavery</td>
<td></td>
</tr>
<tr>
<td>Pandemics</td>
<td></td>
</tr>
<tr>
<td>Massacres</td>
<td></td>
</tr>
<tr>
<td>Prohibition/destruction of cultural</td>
<td></td>
</tr>
<tr>
<td>practices</td>
<td></td>
</tr>
<tr>
<td>Discrimination/Systemic prejudice</td>
<td></td>
</tr>
<tr>
<td>Forced relocation</td>
<td></td>
</tr>
</tbody>
</table>
Intergenerational/Historical Trauma Response

- Fear and Anxiety
- Sadness
- Grief
- Anger
- Guilt
- Regret
- Change in behavior
- PTSD/Depression
Survival Mode Response
Trauma Shapes Beliefs

➢ Worldview
➢ Identity
➢ Spirituality

We do not see things the way they are.

We see them as we are.

Heather Marcus
Trauma’s Impact on the Body

FIGHT or FLIGHT

NOTICEABLE EFFECTS
- Pupils dilate
- Mouth goes dry
- Neck and shoulder muscles tense
- Heart pumps faster
- Chest pains
- Palpitations
- Sweating
- Muscles tense for action
- Breathing fast + shallow - hyperventilation
- Oxygen needed for muscles

HIDDEN EFFECTS
- Brain gets body ready for action
- Adrenaline released for fight/flight
- Blood pressure rises
- Liver releases glucose to provide energy for muscles
- Digestion slows - or ceases
- Sphincters close - then relax
- Cortisol released (depresses the immune system)
## Impact of Trauma on Behavior Triggers

<table>
<thead>
<tr>
<th>External reminders of traumatic event</th>
<th>Internal reminders of traumatic event</th>
</tr>
</thead>
<tbody>
<tr>
<td>• <em>Smell</em></td>
<td>• <em>Emotions</em></td>
</tr>
<tr>
<td>• <em>Sound</em></td>
<td>• <em>Thoughts</em></td>
</tr>
<tr>
<td>• <em>Sight</em></td>
<td></td>
</tr>
<tr>
<td>• <em>Touch</em></td>
<td></td>
</tr>
<tr>
<td>• <em>Taste</em></td>
<td></td>
</tr>
</tbody>
</table>
Common Types of and Prevalence Estimates for Exposure to Traumatic Stressors

Behavioral Health Disparities for Minority Populations

• According to the Agency for Healthcare Research and Quality (AHRQ) racial and ethnic minority groups in the U.S. are
  – Less likely to have access to mental health services
  – Less likely to use community mental health services
  – More likely to use emergency departments
  – More likely to receive lower quality care

• African American consumers are diagnosed with psychotic disorders at a rate of 3 - 4 times higher than White consumers

• Latino American/Hispanic consumers are diagnosed with psychotic disorders on average approximately 3 times higher than White consumers
Impact of Trauma on Minority Populations and SDoH

• Minority populations are exposed to higher rates of trauma and are less likely to receive adequate mental health treatment due to service barriers and the lack of culturally informed treatment providers (Turner et al., 2016).

• There are numerous identified barriers for minority communities in accessing the broader healthcare system such as:
  – Limited insurance coverage
    • More than half of uninsured U.S. residents are people of color
  – Logistical barriers
    • People with limited resources may find it more difficult to take time off of work, secure child care, or finding appropriate transportation
  – Linguistic and cultural differences
    • Particularly for immigrant populations—can result in breakdowns in communication that lead to poorer health outcomes


https://nursing.usc.edu/blog/discrimination-bad-health-minority-mental-healthcare/
Barriers to Pursuing Mental Health Care

- Cost/Insurance
- Prejudice/Discrimination
- Low Perceived Need
- Structural Barriers
- Concerns Over Effectiveness

*Low precision; no estimate reports

Substance Abuse and Mental Health Services Administration, Racial/Ethnic Differences in Mental Health Service Use among Adults. HHS Publication No. SMA-15-4906. Rockville, MD: Substance and Mental Health Services Administration, 2015
Intergenerational (Historical) Trauma Effects
Intergenerational Trauma Perpetuated Today

Microaggressions are everyday experiences of discrimination, racism, and daily hassles that are targeted at individuals from diverse racial and ethnic groups (Evans-Campbell, 2008). Health disparities, substance abuse, and mental illness are all commonly linked to experiences of historical trauma (Michaels, Rousseau, and Yang, 2010).
### Important Definitions and Differentiation

<table>
<thead>
<tr>
<th>Term</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Discrimination</strong></td>
<td>- the unjust or prejudicial treatment of different categories of people or things, especially on the grounds of race, age, or sex</td>
</tr>
<tr>
<td><strong>Prejudice</strong></td>
<td>- preconceived opinion that is not based on reason or actual experience</td>
</tr>
<tr>
<td><strong>Oppression</strong></td>
<td>- unjust treatment or abuse carried out by leadership to maintain power</td>
</tr>
<tr>
<td><strong>Racism</strong></td>
<td>- Racism involves one group having the power to carry out systematic discrimination through the institutional policies and practices of the society and by shaping the cultural beliefs and values that support those racist policies and practices.</td>
</tr>
<tr>
<td><strong>Systemic Oppression</strong></td>
<td>- the practices, laws and customs embedded within society’s institutions and upheld by police, government and society meant to keep certain social categories in power while unjustly restricting other groups based on difference</td>
</tr>
</tbody>
</table>
Four Sources of Systemic Trauma

- Institutional Based
- Intergroup Conflict Based
- Social Structural Violence Based
- Globalization Based
Dynamics of Systemic Trauma

Social exclusion and rejection

Linear and Non-Linear Cumulative

Systemic Trauma

Intersectionality

Identity Annihilation
Anxiety
Symptoms of Systemic Trauma in Communities

- **Equitable Opportunity**
  - Economic and educational environment

- **People**
  - Social-cultural environment

- **Place**
  - Physical/built environment
Effects of Systemic Trauma
What is Implicit Bias?

**Implicit Bias is...**

*Attitudes, Stereotypes, & Beliefs that can affect how we treat others.*

Implicit bias is not intentional, but it can still impact how we judge others based on factors, such as:

- Race
- Ability
- Gender
- Culture
- Language
<table>
<thead>
<tr>
<th>Step 1</th>
<th>• Recognize that you have biases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Step 2</td>
<td>• Identify what those biases are</td>
</tr>
<tr>
<td>Step 3</td>
<td>• Dissect your biases</td>
</tr>
<tr>
<td>Step 4</td>
<td>• Decide which of your biases you will address first</td>
</tr>
<tr>
<td>Step 5</td>
<td>• Look for common interest groups</td>
</tr>
<tr>
<td>Step 6</td>
<td>• Get rid of your biases</td>
</tr>
<tr>
<td>Step 7</td>
<td>• Be mindful of bias kick back</td>
</tr>
</tbody>
</table>

Cultural Humility is another way to understand and develop a process-oriented approach to competency.

“the ability to maintain an interpersonal stance that is other-oriented (or open to the other) in relation to aspects of cultural identity that are most important to the [person]”

Hook et al, 2013

- Tervalon & Murray-Garcia, 1998
We need to have...
<table>
<thead>
<tr>
<th>Trauma-Informed</th>
<th>Resilience-Focused</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>REALIZES</strong> the widespread impact of trauma and understands potential paths for recovery</td>
<td><strong>IDENTIFIES</strong> programs and best practices proven to build resiliency at both individual and systemic levels</td>
</tr>
<tr>
<td><strong>RECOGNIZES</strong> the signs and symptoms of trauma in individual and systemic levels</td>
<td><strong>INOCULATES</strong> the system culture from the effects of stress and trauma <em>proactively</em> rather than reactively by having a strategic plan</td>
</tr>
<tr>
<td><strong>RESPONSDES</strong> by fully integrating knowledge about trauma into policies, procedures and practices</td>
<td><strong>INSTILLS</strong> a shared vocabulary and skills for resiliency into every aspect of the life of the system</td>
</tr>
<tr>
<td><strong>RESISTS</strong> re-traumatization</td>
<td><strong>IMPROVES</strong> the health of the entire system by promoting restoration, health and growth in ongoing ways</td>
</tr>
</tbody>
</table>
Common Strategies for Addressing Historical and Systemic Trauma

- Teaching cultural and community history
- Teaching how intergenerational trauma creates risk for health, social and relationship problems
- Supporting opportunities for developing self-awareness, self-worth and cultural identity
- Teaching life skills
- Teaching strategies to cope with stress and regulate emotions
Continuum of Cultural Competency

Cultural Destructiveness: Forced assimilation, subjugation, rights and privileges for dominant groups only.

Cultural Incapacity: Racism, maintain stereotypes, unfair hiring practices.

Cultural Blindness: Differences ignored, “treat everyone the same”, only meet needs of dominant groups.

Cultural Pre-Competence: Explore cultural issues, are committed, assess needs of organization and individuals.

Cultural Competence: Recognize individual and cultural differences, seek advice from diverse groups, hire culturally unbiased staff.

Cultural Proficiency: Implement changes to improve services based upon cultural needs.
Cultural Adaptation of Interventions

- **Relevance**: Is this health topic relevant to the target population?
- **Evidence base**: What is the best intervention to address this health topic within this population?
- **Stage of Intervention**: What stage(s) of the intervention program should be adapted?
- **Ethnicity**: What elements of ethnicity are most important to consider for this population?
- **Trends**: What are the shifting trends within this population?

Liu, et. Al, 2012
Assumptions of the Equity Lens

1. Oppression and injustice are human creations and phenomena, built into our current economic system, and therefore can be undone.

2. Oppression (e.g. racism, colonialism, class oppression, patriarchy, and homophobia) is more than just the sum of individual prejudices. Its patterns are systemic and therefore self-sustaining without dramatic interruption.

3. Systemic oppression exists at the level of institutions (harmful policies and practices) and across structures (education, health, transportation, economy, etc) that are interconnected and reinforcing over time.

4. Systemic oppression has historical antecedents. We must face our national legacy and current manifestations of racism and economic inequality in order to transform them.

5. Without rigorous examination, behavior is reproductive. By default, current practices, cultural norms and institutional arrangements foster and maintain inequitable outcomes.

6. To undo systemic oppression, we must forge multi-ethnic, multi-cultural, multi-lingual alliances and create democratic processes that give voice to new organizing systems for humanity.

7. Addressing oppression and bias (conscious and unconscious) inevitably raises strong emotions in clients, and we must be prepared and trained to address these feelings.
Questions to Ask

✓ How do we understand the economic and racial forces behind the inequities we see? How might we name the “system” in which we are all sitting?

✓ What level of consciousness do colleagues, partners and affiliates possess about the forces underlying inequity?

✓ How are we talking about the problem we are trying to solve? Is the conversation digging down to root causes in a way that could lead to productive action?

✓ *Who* are the people affected by the current structure of oppression? Are they at the table?

✓ Who shapes the dominant narrative about those being served at any given moment? How are different constituents described? How would they tell their story? Is there a counter-narrative coming from those being served?

✓ What are the specific disparities/inequities we seek to eliminate through this collective focus and action? What barriers stand in the way of achieving more equitable outcomes?
✓ What are the population and geographic targets for our effort? Specifically, for whom and where are we trying to make a difference?
✓ What will an equitable OUTCOME look like? How will we KNOW we have made progress? When do we expect to see results? What is our timeframe?
✓ Who does and does not have power in this institution, in the community? What is power based on here?
✓ How safe is it here for different people to share their truths here, and how can I foster a culture of safety and relational trust to move forward?
✓ How can I build my practice as a leader of equity, starting with who I am and how I understand my own experiences around oppression?
✓ How can I build the alliances to move forward in making decisions that interrupt reproductive practices?
## ABC’s of Community Response

<table>
<thead>
<tr>
<th>Acknowledge</th>
<th>Build</th>
<th>Create</th>
<th>Develop</th>
<th>Expand</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acknowledge history and be specific and accurate</td>
<td>Build community</td>
<td>Create safe space for open, honest, dialogue and education</td>
<td>Develop plans of action to dismantling systemic racism</td>
<td>Expand beyond diversity, equity and inclusion to justice</td>
</tr>
<tr>
<td>As a country we are grappling with the result of hundreds of years of systemic racism and violence against people of color.</td>
<td>Ask what people need. Share options. Encourage collaboration, mutuality, empowerment, voice, choice, trustworthiness, safety (physical, psychological and social)</td>
<td>Hold space for different experiences and journeys. Allow for non-people of color to examine their role in combating racism.</td>
<td>Ask yourselves what is your vision for a new system and develop an action plan for dismantling what is for what you want in the future</td>
<td>Examine your systems and external impact. Assess where you are on the racial equity journey ad get clear on how you serve to advance justice</td>
</tr>
</tbody>
</table>
Conversations that Matter

START HERE: CONVERSATION ESSENTIALS

1. BEFORE YOU RAISE THE ISSUE:
   - Adopt a real sense of curiosity
   - Do your homework
   - Unpack your own baggage first
   - Know that words matter

2. EXTENDING THE INVITATION:
   - Be clear about your purpose
   - Share a little about your own fears

3. OPENING THE CONVERSATION & WORKING THROUGH THE ISSUES:
   - Assume good intentions
   - Play out the “what ifs”
   - Well begun is half done
   - Don’t expect too much at once
   - Start with values
   - Know that your questions can be just as powerful as your statements
   - Pay attention to non-verbal communication

   - Listen as if you might be wrong
   - Use stories to illustrate your meaning
   - Use stories to illustrate shared values
   - Beware of intent vs. impact
   - Encourage elaboration
   - Take a break
Conversations that Matter

ESSENTIALS FOR GROUP MEETINGS

1. BEFORE YOU BRING THE GROUP TOGETHER:
   - Know when to call on a facilitator
   - Two is better than one
   - Know thyself

2. BRINGING THE GROUP TOGETHER:
   - Cultivate a sense of belonging
   - Set working agreements
   - Be clear about confidentiality
   - Establish a common language
   - Determine a decision-making method

3. WORKING THROUGH THE ISSUES:
   - Get people talking early in the meeting
   - Use resources already prepared for this purpose
   - Create a safe environment
   - Make data accessible
   - Validate the work of the group
   - Keep the group memory
   - Stay on track
   - Use humor, but never at anyone’s expense
   - Wrap it up
Conversations that Matter

ESSENTIALS FOR PLANNING TEAMS

1. BRINGING THE TEAM TOGETHER:
   - Share vested interests
   - Share strengths
   - Use paired conversations to build community

2. WORKING THROUGH THE ISSUES:
   - Check with colleagues between meetings
   - Encourage shared ownership
   - Practice full-vision leadership
   - Help the group stay organized
   - Revisit the need for facilitation
   - Use well-designed group activities to take your group to the next level
Equitable Opportunity
Restorative justice, healing circles, economic empowerment & workforce development, increased community wealth and resources

People
Rebuild social relationships & broken social networks; strengthen social norms that encourage healthy behaviors, community connection and community oriented positive social norms

Place
Create safer public spaces through improvements in the built environment through addressing parks, housing quality and transportation; reclaim and improve public spaces

Strategies for Building Community Resilience
Build Protective Factors

- Behaviors, characteristics and qualities inherent in some personalities that will assist in recovery after exposure to a traumatic event
- Environment
  - A reliable support system (friends, family)
  - Access to safe and stable housing
  - Timely and appropriate care from first responders
- Behaviors
  - Good self care, such as sleeping at least 8 hours a night
  - Eating nutritious foods
  - Exercise
  - Practicing good boundaries
  - Using positive coping mechanisms vs. negative coping mechanisms
Equality

The assumption is that everyone benefits from the same supports. This is equal treatment.

Equity

Everyone gets the supports they need (this is the concept of “affirmative action”), thus producing equity.

Justice

All 3 can see the game without supports or accommodations because the cause(s) of the inequity was addressed. The systemic barrier has been removed.
Questions
Please provide your feedback on the meeting at the link below.

Scan the QR code or type the URL into your browser.

https://www.surveymonkey.com/r/KYNJLHX
THANK YOU FOR JOINING!

Please join us on July 9, 2020 at 3:00pm EST to continue the discussion in our Racial Equity Office Hours! We look forward to continuing the dialogue.

Registration Link – https://thenationalcouncil-org.zoom.us/webinar/register/WN_feJ4WlIrTrKNaWh8RHi0rQ