

# Building Antiracist Policies and Practices into Health Care Settings

CareQuest Institute Continuing Education Webinar

September 30, 2021

# Housekeeping

- All lines will remain muted to avoid background noise.
- We will send a copy of the slides and a link to the recording via email after the live program.
- The slides and the recording will also be available on [carequest.org](https://carequest.org)

## To receive CE Credits:

- Look for the evaluation form, which we'll send via email.
- Complete the **evaluation** by **October 8.**
- You'll receive a certificate soon after via email.

**We appreciate your feedback to help us improve future programs!**



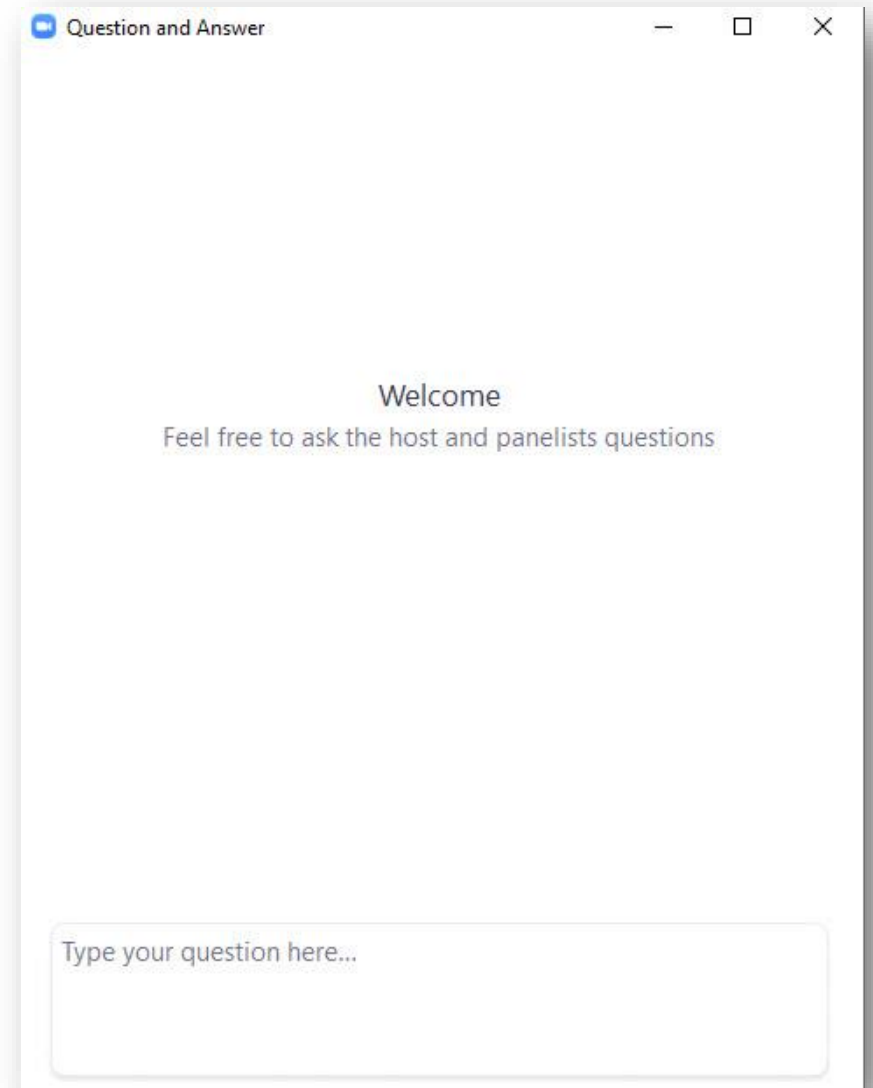
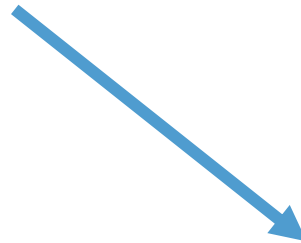
The CareQuest Institute for Oral Health is an ADA CER.P Recognized Provider. This presentation has been planned and implemented in accordance with the standards of the ADA CER.P.

\*Full disclosures available upon request



# Question & Answer Logistics

- Feel free to enter your questions into the **Question & Answer box** throughout the presentations.
- We will turn to your questions and comments toward the end of the hour.



# Learning Objectives

At the end of this webinar, you'll be able to:

- Define racism and antiracism.
- Identify policies and behaviors that promote antiracism in oral and primary health care settings.
- Explain how antiracist policies and behaviors can lead to health equity.

# Our Strategy

## Vision

A future where every person can reach their full potential through optimal health

## Mission

To improve the oral health of all

## Purpose

To catalyze the future of health through oral health



# Today's Presenters

## Building Antiracist Policies and Practices into Health Care Settings



**WEBINAR | Thurs., Sept. 30, 2021 | 1 p.m. (ET) | ADA CERP Credits: 1**

MODERATOR



**Eleanor Fleming, PhD, DDS, MPH**  
Associate Professor, Department of Dental Public Health, Meharry Medical College

SPEAKER



**Derek M. Griffith, PhD**  
Founding Co-Director of the Racial Justice Institute, Professor of Health Systems Administration and Oncology at Georgetown University

SPEAKER



**Sarah E. Raskin, PhD, MPH**  
Assistant Professor, iCubed Oral Health Core and L. Douglas Wilder School of Government and Public Affairs, Virginia Commonwealth University

SPEAKER



**Monica Wang, ScD, MS**  
Associate Director at BU Center for Antiracist Research, Associate Professor at BU School of Public Health

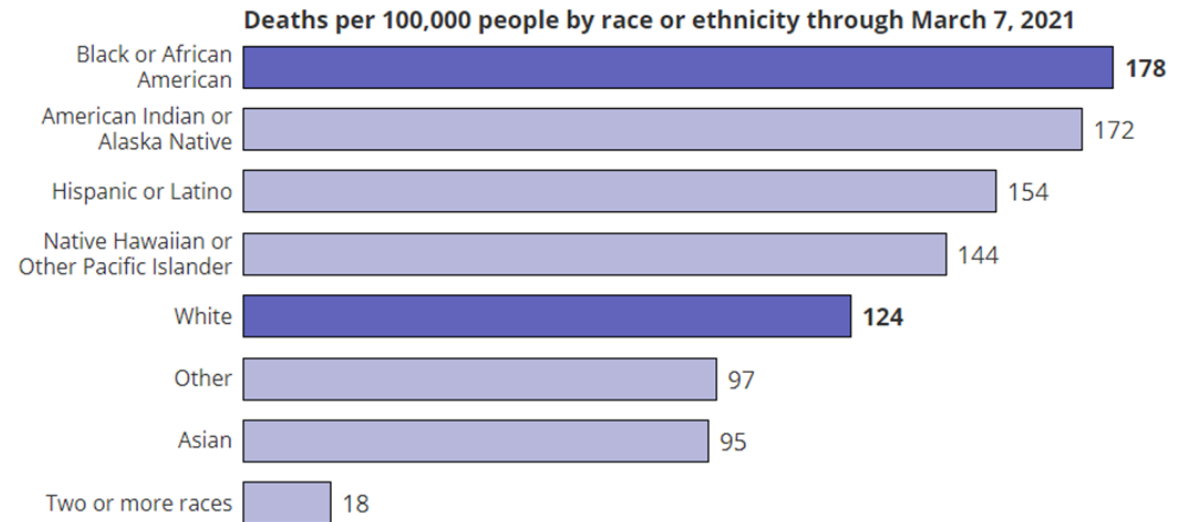
# Racism—Not Race—as a Risk Factor During COVID-19

**One in every 480 Black Americans,  
one in every 390 Hispanic Americans,  
one in every 240 Native Americans  
have been killed by COVID-19.**



## Nationwide, Black people have died at 1.4 times the rate of white people

We've lost at least 73,462 Black lives to COVID-19 to date. Black people account for 15% of COVID-19 deaths where race is known.



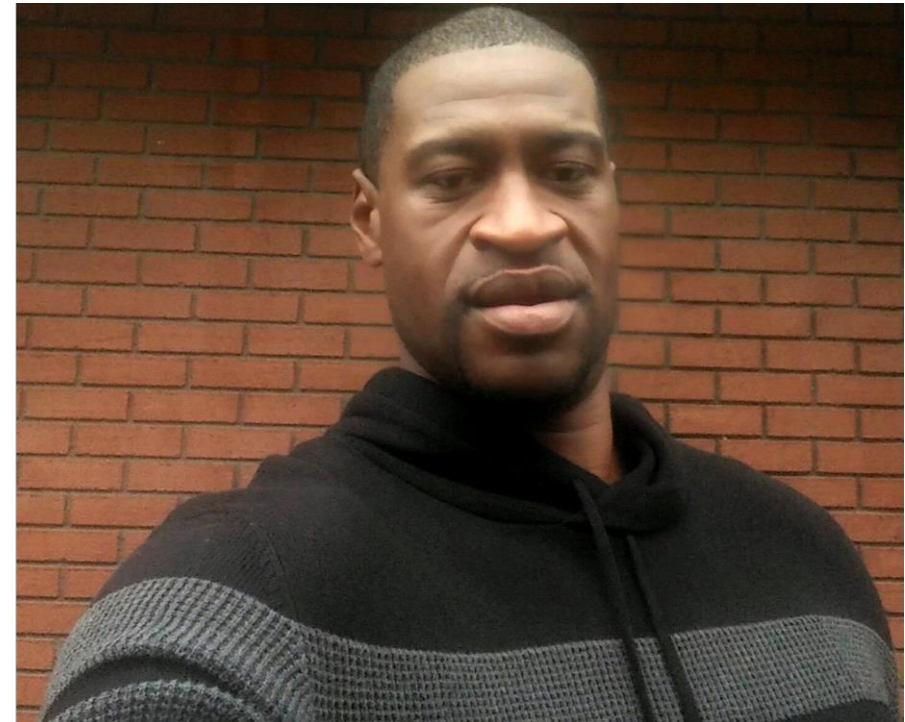
### Notes 1

These calculations are based on data from The Covid Racial Data Tracker and the U.S. Census Bureau. Race categories may overlap with Hispanic/Latinx ethnicity. Rates are not age-adjusted and some rates are underestimated due to lack of reporting of race and ethnicity categories for COVID-19 deaths.



# WE REMEMBER

George Floyd (1973 – 2020)



2020

**BLACK  
LIVES  
MATTER**

“We are not a ‘historically’ underserved population. My history is one of ancestors who survived so I could thrive. My history didn’t start with ‘western civilization’. I am colonially underserved. I am institutionally underserved. And I am historically resilient.”

Abigail Echo-Hawk (Pawnee)  
Director, Urban Indian Health Institute

**#STOP  
ASIAN  
HATE**

*“The problem in America is not race...The problem is not that people look different from each other. The problem is that people are treated differently because of the way they look. The problem is racism.” (Jenkins et al., 2019)*



# Antiracist Policy Strategies for the Oral Health Workforce

Sarah E. Raskin, PhD, MPH

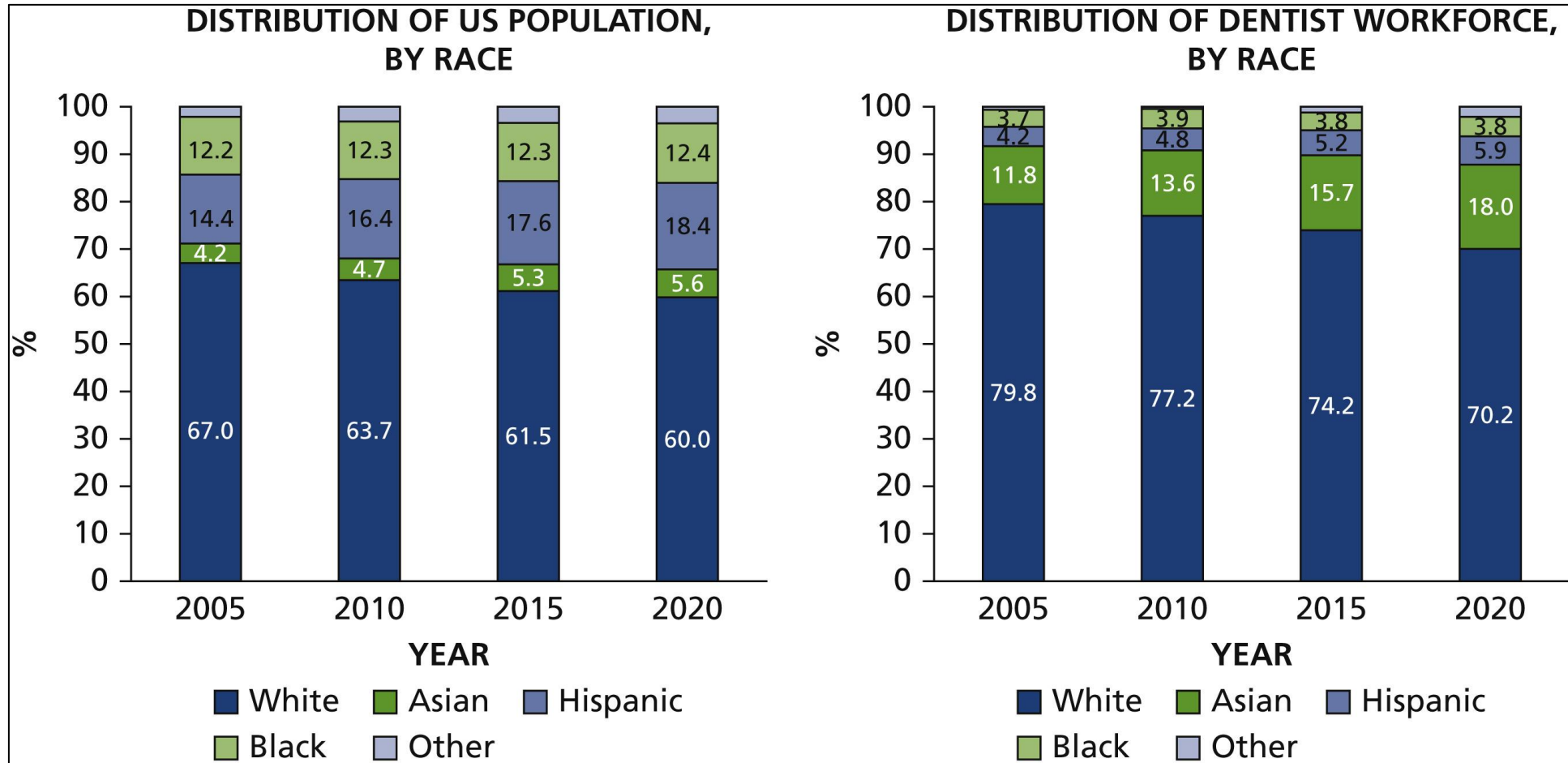
# What I'll Cover

- Oral health workforce snapshot
- Emerging evidence
- Future directions

# Thank You, Collaborators!

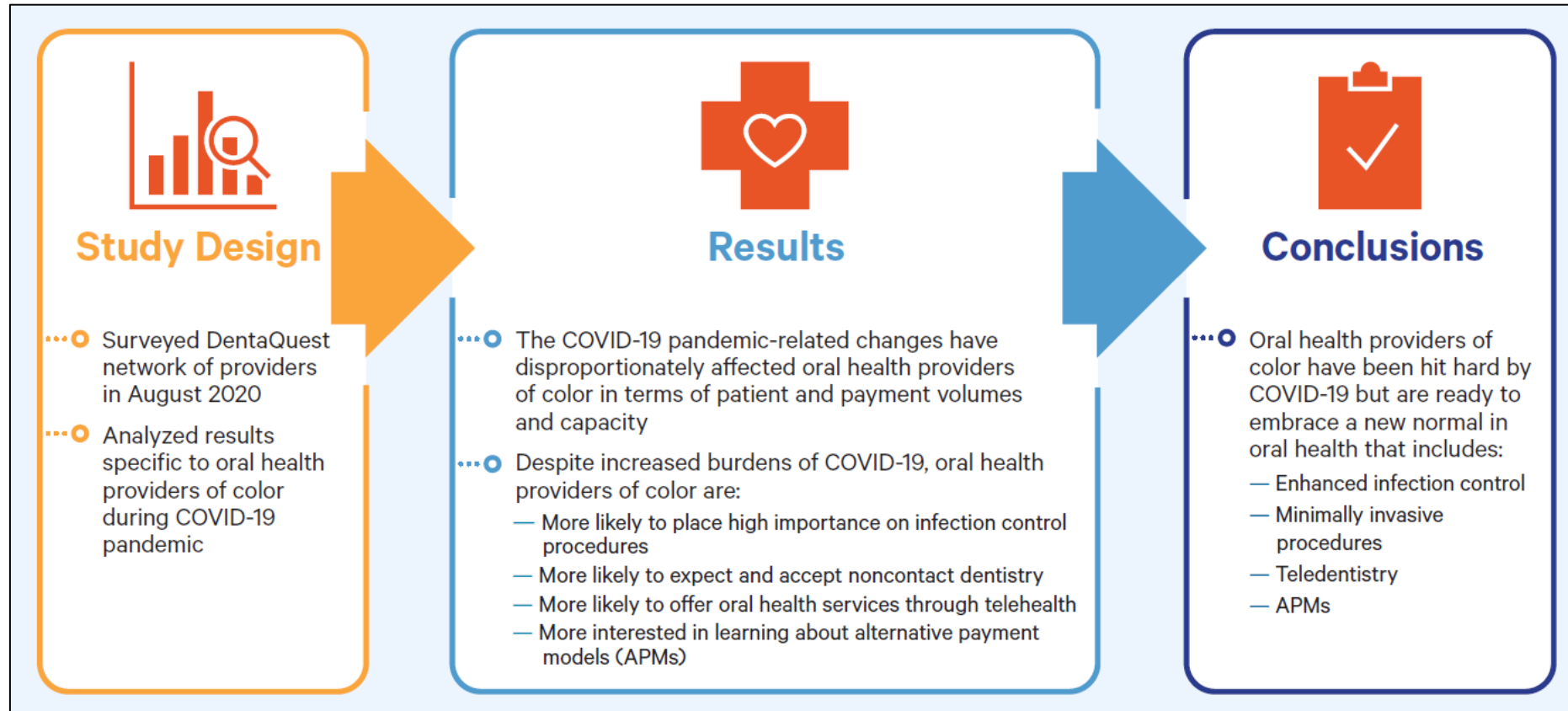
- Dr. Eleanor Fleming
- Partners on DentaQuest-supported project, “Black, Latinx, and American Indian students entering multidisciplinary dental careers”
- Analytics and Evaluation Team—*State of Oral Health Equity in America 2021* survey team, CareQuest Institute
- Future of Public Oral Health Task Force—Workforce Implementation Team, Virginia Health Catalyst
- iCubed Oral Health Core, Virginia Commonwealth University

# Snapshot: Diversity Trends in Workforce vs. Population





# Snapshot: COVID-19 & Racially Minoritized Providers



**How COVID-19 is Affecting Oral Health Providers of Color.** Available at: <https://www.carequest.org/system/files/CareQuest-Institute-Providers-of-Color-Face-Greater-Hardships-Impact-COVID-19-Report-Abstract.pdf>

Tranby E P, Jacobs M, Thakkar Samtani M, Perry K, and Frantsve-Hawley J. *Oral Health Providers of Color Face Greater Hardships from the Impact of COVID-19*. Boston, MA: CareQuest Institute for Oral Health; December 2020. DOI: 10.35565/CQI.2020.2027

See also: García, D.T., Akinkugbe, A.A., Mosavel, M., Smith, C.S. and Brickhouse, T.H., 2021. COVID-19 and Dental and Dental Hygiene Students' Career Plans. *JDR Clinical & Translational Research*, 6(2), pp.153-160. DOI: 10.1177/2380084420984772

“The underlying issue is not lack of vision or options, but a lack of political will and resources to implement change.”

**Mertz E.A. et al. 2016:2198**

Proposition 1: *Ethics and practice are reciprocal.*

Proposition 2: *Pursuing racial justice, and unlearning structural racism and institutional white supremacy, are **proactive** practices of humility, persistence, and optimism.*

# Emerging Evidence: Racially Minoritized Students' Pathways to and through Dental School

## **Student experiences and administrator insights**

- Undergraduate advising
- Application reviews and admissions requirements
- Resources
- “Fit”: Institutions, peers, mentors
- Experiences of racism

# Emerging Evidence: Virginia's Approach

## 2021 Dental Workforce

Race & Ethnicity					
Race/ Ethnicity	Virginia*	Dentists		Dentists Under 40	
	%	#	%	#	%
<b>White</b>	61%	2,787	62%	726	55%
<b>Black</b>	19%	272	6%	66	5%
<b>Asian</b>	7%	971	21%	355	27%
<b>Other Race</b>	0%	169	4%	68	5%
<b>Two or More Races</b>	3%	84	2%	30	2%
<b>Hispanic</b>	10%	246	5%	74	6%
<b>Total</b>	<b>100%</b>	<b>4,529</b>	<b>100%</b>	<b>1,319</b>	<b>100%</b>

\*Population data in this chart is from the US Census, Annual Estimates of the Resident Population by Sex, Race, and Hispanic Origin for the United States, States, and Counties: July 1, 2019.  
Source: Va. Healthcare Workforce Data Center

## 2021 Dental Hygienist Workforce

Race & Ethnicity					
Race/ Ethnicity	Virginia*	Dental Hygienists		Hygienists Under 40	
	%	#	%	#	%
<b>White</b>	61%	3,384	78%	1,342	76%
<b>Black</b>	19%	225	5%	89	5%
<b>Hispanic</b>	10%	233	5%	111	6%
<b>Asian</b>	7%	320	7%	161	9%
<b>Two or More Races</b>	3%	111	3%	55	3%
<b>Other Race</b>	0%	55	1%	15	1%
<b>Total</b>	<b>100%</b>	<b>4,328</b>	<b>100%</b>	<b>1,773</b>	<b>100%</b>

\*Population data in this chart is from the U.S. Census, Annual Estimates of the Resident Population by Sex, Race, and Hispanic Origin for the United States, States, and Counties: July 1, 2019.

Source: Virginia's Dentistry Workforce: 2021 and Virginia's Dental Hygienist Workforce: 2021. Virginia Department of Health Professions -Healthcare Workforce Data Center April 2021. Accessed September 2021.

# Future Directions

## Education

- Reparative action plans
- Early introduction to dental careers
- Holistic applicant reviews
- Research and ed careers training

## Public Oral Health

- Equity and data in all strategies, to advance accountability
- Coalition-building with both anticipated and novel partners

## Private Sector

- Diversify leadership in professional orgs
- Interprofessional association collabs
- Mentorship commitments
- Whole-team approach

# Contact Information

**Sarah E. Raskin, PhD, MPH**

Assistant Professor

iCubed Oral Health Core

L. Douglas Wilder School of Government & Public Affairs

Virginia Commonwealth University

[seraskin@vcu.edu](mailto:seraskin@vcu.edu)







# What Is Structural Racism? Why Should I as an Oral Healthcare Professional Care?

**Derek M. Griffith, PhD**

Washington, DC

September 30, 2021



*GEORGETOWN UNIVERSITY*

*Racial Justice Institute*

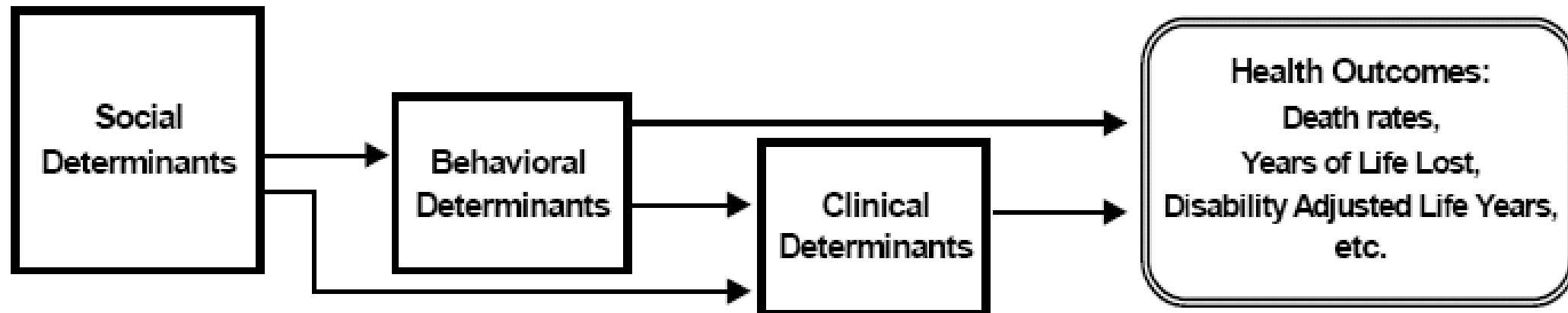
*Center for Men's Health Equity*

# What Determines Health?

“Health is about more than health care, with health care accounting for only an estimated 10% to 20% of health outcomes. As reported in JAMA 23 years ago, the nation’s major diseases have more to do with unhealthful behaviors – for example, smoking – than health care. Overenthusiastic advocates of personal responsibility, however, often blame poor health entirely on individuals and their imprudent habits. **Behaviors... are often influenced by environmental factors beyond personal control.**”

(Woolf & Purnell, 2016)

## Simplified Causal Pathways to Population Health Outcomes



Source: CJ Murray & AD Lopez. On the comparable quantification of health risks: lessons from the Global Burden of Disease Study. *Epidemiology*. Vol. 10, No. 5, pp 594-605, 1999.

# Social Determinants of Health

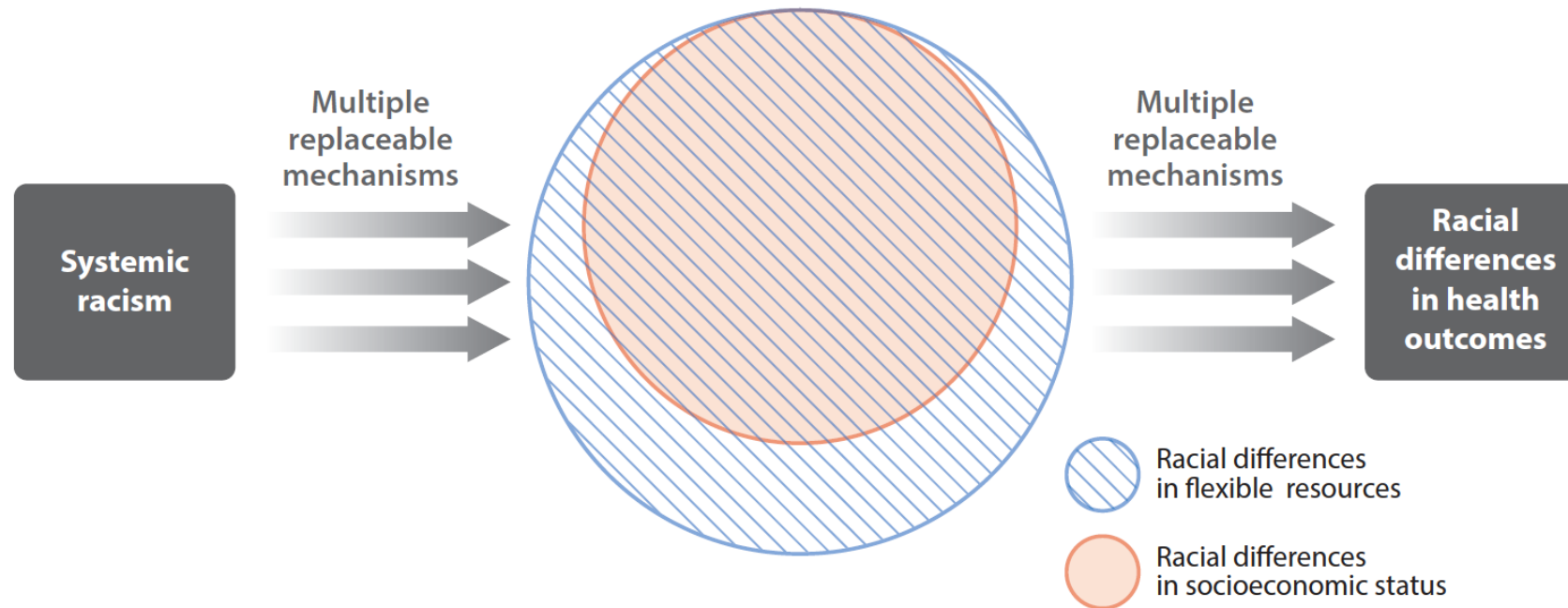


Social Determinants of Health

Copyright-free



# Racism Is a Cause of Other Social Determinants of Health

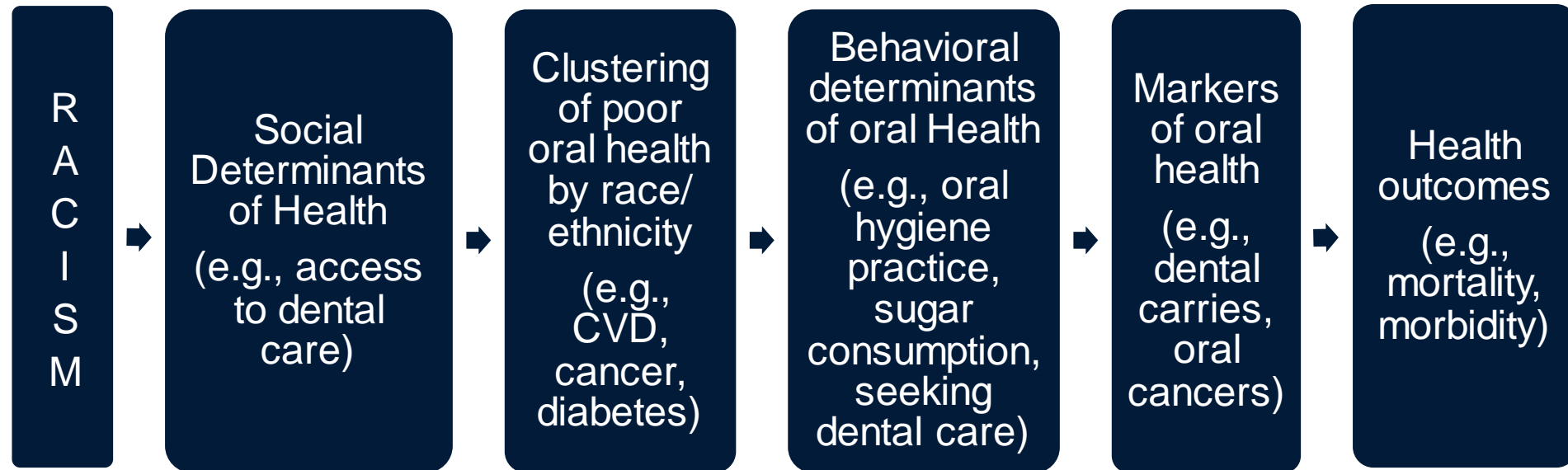


**Figure 1**

Racism as a fundamental cause of health inequalities: conceptual model.

(Phelan & Link, 2015)

# As Someone Interested in Oral Health Care, Why Should I about Racism?



# Racism Defined

“Racism is an **organized social system** in which the dominant racial group, **based on an ideology of inferiority**, categorizes and ranks people into social groups called “races” and uses its power to devalue, disempower, and **differentially allocate valued societal resources and opportunities** to groups defined as inferior”.

(Williams et al., 2019)

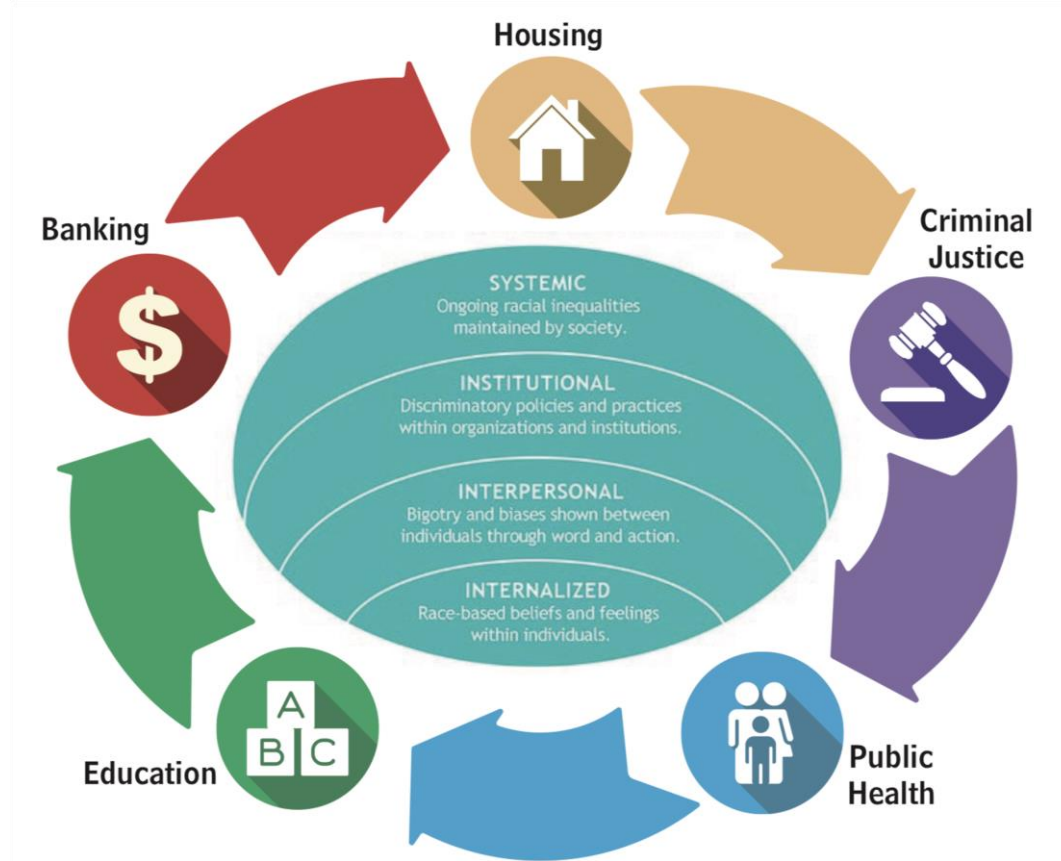


# Racism Is...

- Racism 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
- A frame and an *analytic tool* to explain power systems, patterns and outcomes, not an individual characteristic
- A system of power whose mechanisms are in the structures, policies, practices, norms and values of our decision-making

(Came & Griffith, 2018; Jones, 2019)

# Structural Racism



The totality of ways that societies foster racial discrimination through mutually reinforcing systems. These patterns and practices in turn reinforce discriminatory beliefs, values, and distribution of resources.

(Bailey, et al., 2017; Morgan, 2018)

**Antiracism** refers to the conscious decision to make frequent, consistent, equitable choices daily. These choices require ongoing self-awareness and self-reflection as we move through life.



*Being Anti Racist* by Angela Y. Davis

# ART, ANTI-RACISM AND HEALTH EQUITY: “DON’T ASK ME WHY, ASK ME HOW!”

---

Derek M. Griffith, PhD<sup>1</sup>;  
Andrea R. Semlow, MS, MPH<sup>1</sup>

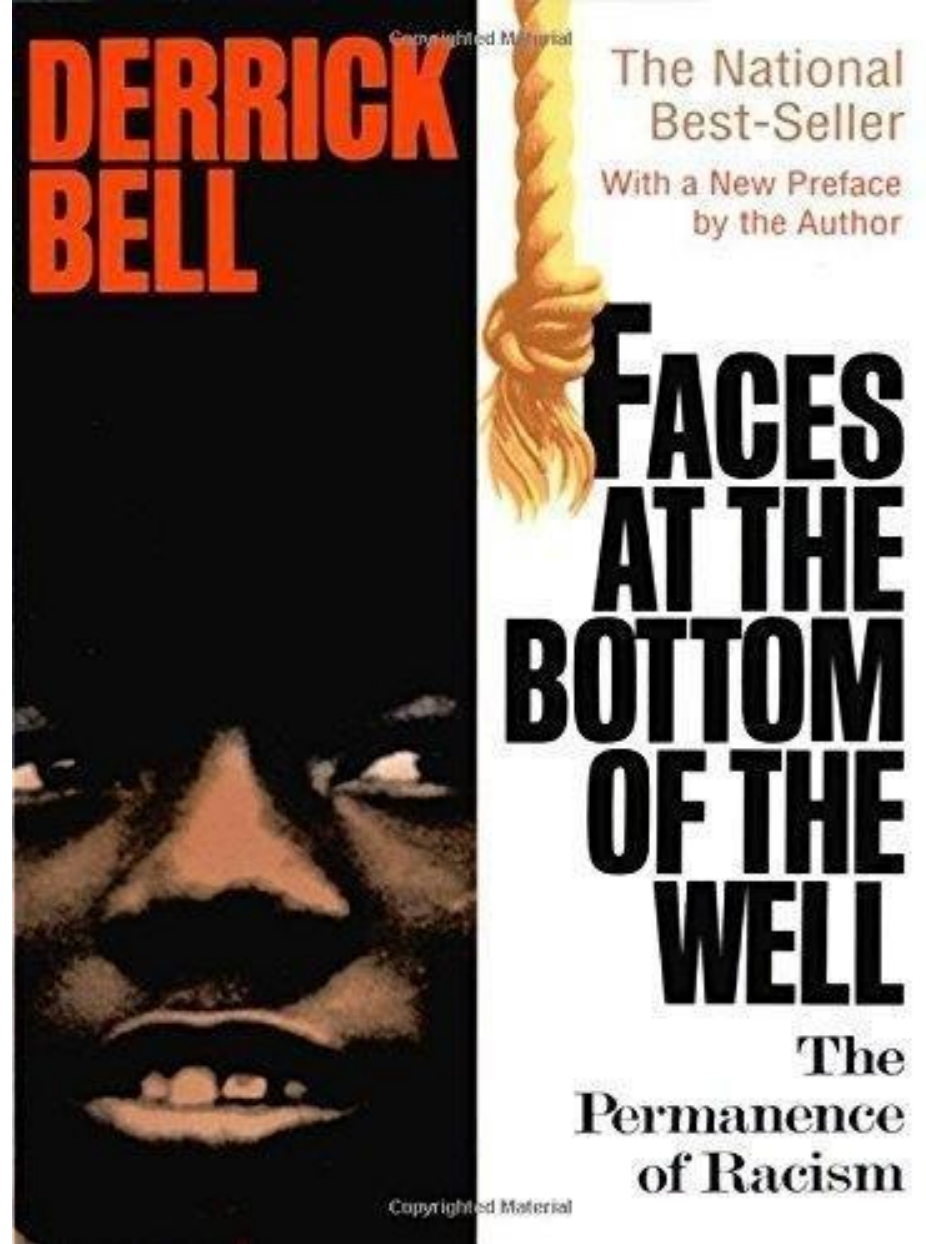
**Conclusion:** Art can be an important tool to facilitate moving past intellectual arguments that seek to explain, justify and excuse racism. Art may be particularly important in efforts to illuminate how racism operates in organizational or institutional contexts and to communicate hope, resilience, and strength amid what seems impossible. *Ethn Dis.* 2020;30(3):373-380; doi:10.18865/ed.30.3.373

*Ethnicity & Disease*, Volume 30, Number 3, Summer 2020

“If we are to seek new goals for our struggles, we must first reassess the worth of the racial assumptions on which, without careful thought, we have presumed too much and relied on too long. Let’s begin.”

– Derrick Bell (1993)

*Faces at the Bottom of the Well*, p. 14



# Contact Information

## **Derek M. Griffith, PhD**

Founding Co-Director, Racial Justice Institute

Founder & Director, Center for Men's Health Equity

Professor of Health Systems Administration & Oncology

Georgetown University

[Derek.Griffith@georgetown.edu](mailto:Derek.Griffith@georgetown.edu)





# Policies and Practices that Promote Antiracism in Oral and Primary Health Care Settings

---

**Monica L. Wang, ScD, MS**

*Associate Professor*  
BU School of Public Health

*Associate Director*  
BU Center for Antiracist Research

*Adjunct Associate Professor*  
Harvard T.H. Chan School of Public Health







How do we build an inclusive and antiracist environment in oral health and primary care settings?

Individual

Interpersonal

Organizational



# How Do We Create a More Inclusive and Antiracist Environment in Oral Health and Primary Care Settings?

## *Individual-level*

---

- Use terms accurately (e.g., racist, racism) and talk about them
- Be curious about your own biases (Project Implicit)
- Learn about the different forms of racism; what coping with it looks like
- Pay attention to the language used to describe people
- Familiarize yourself with the literature on racial/ethnic health inequities in your field
- Ask WHY they exist? What assumptions may be underlying interpretations of data?



## *Interpersonal*

---

### **Be an active bystander/ally**

- Focus on calling out the specific behavior
- Diffuse the situation
- Discuss the situation with a group leader
- Mentor and be a sponsor

### **Treat patients with a health equity lens**

- Recognize the need to build trust
  - Spend quality time (ask more or different questions, encourage dialogue, ask for feedback)
  - Avoid coming across as in a rush or impatient
- Meet patients where they are
- Learn more about different sub-groups and ask; don't assume





## *Organizational-Level*

---

### **Culture**

- Revisit and establish guidelines around work culture
- Establish protocols to address discrimination in the work setting and accountability structures

### **Research, Teaching, and Practice**

- Value and encourage research on health equity
- Integrate health equity into training programs and CME
- Establish or enhance partnerships with community organizations

### **Data and Policies**

- Examine for inequities in the data (patient outcomes, employee data, hiring, promotion, pay)
- Review policies, protocols, algorithms, etc. that might discriminate against certain groups.
- Address under-representation internally (trainees, staff, committees, higher-level positions) and externally (patient population)

# Guiding Questions

How are **race and ethnicity defined and measured** in your health care system?

Which **racial health inequities** are most pressing for your patient population? Most preventable? Are they worse or better than national or regional statistics? What can be done to address them?

To what extent is your patient population **representative** of the community?

Do you have **protocols** in place for addressing discrimination (all types) that occurs in the work setting?

**Opportunities and resources** devoted to cultivating a more inclusive and antiracist work environment?





# Antiracism and Health Equity: An Evidence-Based Understanding of Patients' Health in the Context of Their Circumstances





# Contact Information

## **Monica Wang, ScD, MS**

Associate Professor

BU School of Public Health

Associate Director

BU Center for Antiracist Research

Adjunct Associate Professor

Harvard T.H. Chan School of Public Health

[mlwang@bu.edu](mailto:mlwang@bu.edu)





# Questions

# To Explore More Industry-Leading Research

## Resource Library

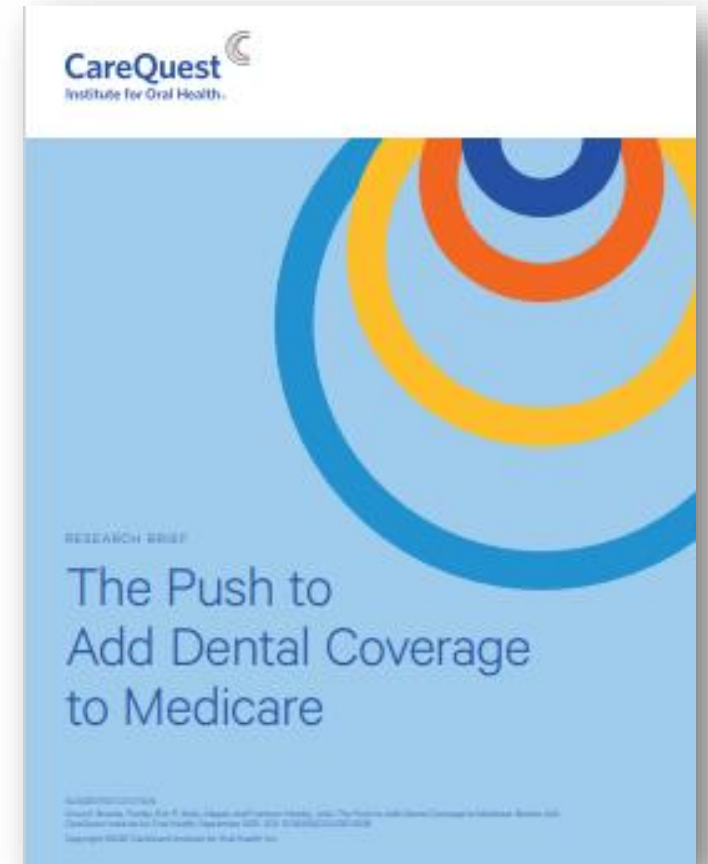
We publish white papers, research reports, briefs, articles, posters, infographics, and tools on topics ranging from adult dental benefits to teledentistry. Use the filters below to find resources by type or topic.

Search by Title Filter by Type Filter by Category

Enter keywords - All - - All - Search

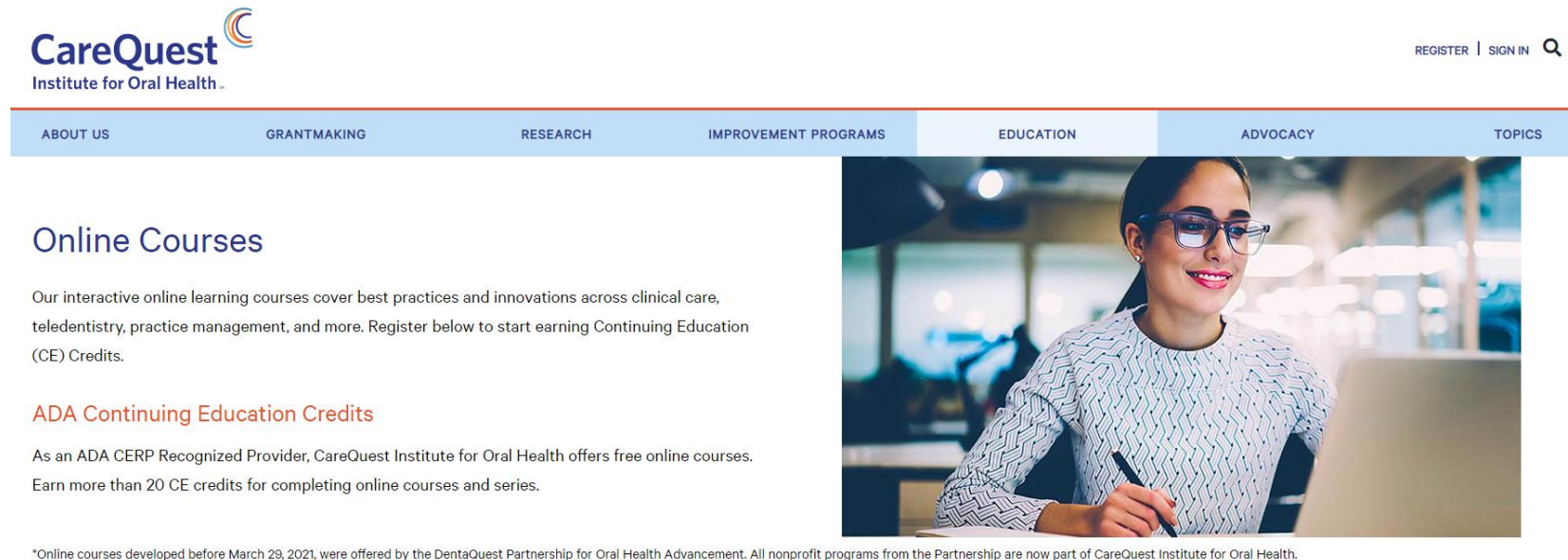
1 of 7 Next >

Title	Category	Type	View
Caries Risk Conversation	General	Video	📺
An Open Ended Question During A Caries Risk Conversation	General	Video	📺
Emergency and Urgent Dental Visits Among Medicaid Enrollees from 2013 to 2017	General	Article	📄
A systematic review of dental-related emergency department visits among Medicaid beneficiaries	General	Article	📄
Dental Visits during Pregnancy: Pregnancy Risk Assessment Monitoring System Analysis 2012-2015	General	Article	📄
The Effect of Well Child Visit Location on Preventative Dental Visit	Research	Article	📄
Teledentistry: Removing Barriers and Moving Toward Implementation	General	Infographics and Dashboards	📄
Teledentistry Use Beyond the Pandemic	General	Infographics and Dashboards	📄



# CareQuest Institute Online Learning Center

- Visit our website to access past webinar recordings and earn CE credits upon completion of the online learning modules. We also have a growing collection of other online learning modules and various resources.
- Sign up for our newsletter to get more information on upcoming webinars.
- <https://www.carequest.org/education/online-courses>



The screenshot shows the CareQuest Institute for Oral Health website. The header includes the logo and navigation links: REGISTER | SIGN IN | SEARCH. The main navigation bar has tabs for ABOUT US, GRANTMAKING, RESEARCH, IMPROVEMENT PROGRAMS, EDUCATION (highlighted), ADVOCACY, and TOPICS. The 'Online Courses' section features a heading, a paragraph about interactive learning, a sub-heading 'ADA Continuing Education Credits', and a paragraph about ADA CERP recognition. A photograph of a woman with glasses working on a laptop is on the right. A footer note mentions that online courses developed before March 29, 2021, were offered by the DentaQuest Partnership.

**CareQuest**  
Institute for Oral Health

REGISTER | SIGN IN | SEARCH

ABOUT US GRANTMAKING RESEARCH IMPROVEMENT PROGRAMS **EDUCATION** ADVOCACY TOPICS

## Online Courses

Our interactive online learning courses cover best practices and innovations across clinical care, teledentistry, practice management, and more. Register below to start earning Continuing Education (CE) Credits.

### ADA Continuing Education Credits

As an ADA CERP Recognized Provider, CareQuest Institute for Oral Health offers free online courses. Earn more than 20 CE credits for completing online courses and series.

\*Online courses developed before March 29, 2021, were offered by the DentaQuest Partnership for Oral Health Advancement. All nonprofit programs from the Partnership are now part of CareQuest Institute for Oral Health.

# Webinar Evaluation

<https://www.carequest.org/node/228744>

*\*Deadline is **October 8** in order to receive CE credit*

## *Upcoming Webinars:*

- **How Value-Based Care Will Change Dentistry's Future**
- **October 21, 2021**

Sign up to receive our newsletter to get more information on future webinars!

**SIGN UP FOR NEWS AND UPDATES**

Email\*

For information on our privacy practices and commitment to protecting your privacy, please review our Privacy Policy. You may unsubscribe from these communications at any time.

**Sign Up**

# Stay Connected!

Follow us on social media and let's get connected!



[carequest-institute](https://www.linkedin.com/company/carequest-institute)



[@CareQuestInstitute](https://www.instagram.com/CareQuestInstitute)



[CareQuestInstitute](https://www.facebook.com/CareQuestInstitute)



[@CareQuestInst](https://www.twitter.com/@CareQuestInst)

