

UCSF
Division of Adolescent and
Young Adult Medicine,
Department of Pediatrics and
Philip R. Lee Institute for
Health Policy Studies

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Tuesday July 14, 2020

Racism and Xenophobia: Impacts on Youth and the Providers who Serve Them



Berkeley
UNIVERSITY OF CALIFORNIA



Disclosure

I, Marissa Raymond-Flesch, have no financial relationships to disclose.

Disclosures

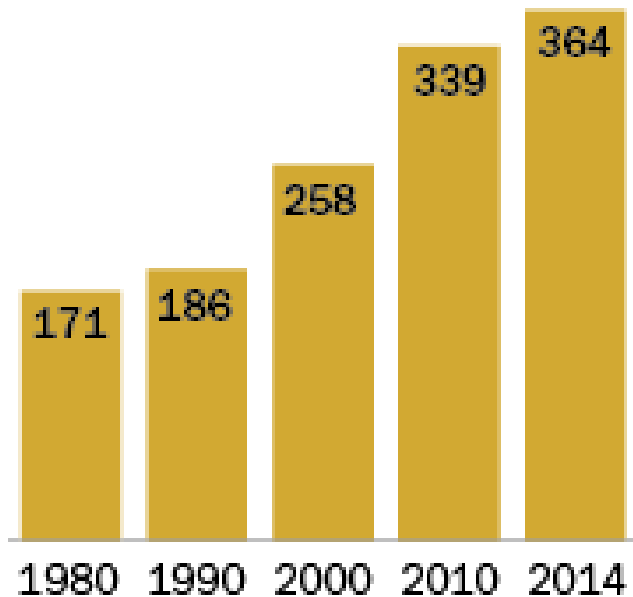


Agenda

- **Shifting United States Demographics**
- **Minority Health Outcomes**
- **Defining Racism**
- **Experiences of Racism**
- **Case Study: Impact of Immigration Policy on Youth**
- **Racism in Academic Medicine**
 - *Society of Adolescent Health and Medicine call to action*
 - *Current UC Policies and Practices*

Shifting Demographics

Majority-Minority Counties Have Doubled Since 1980



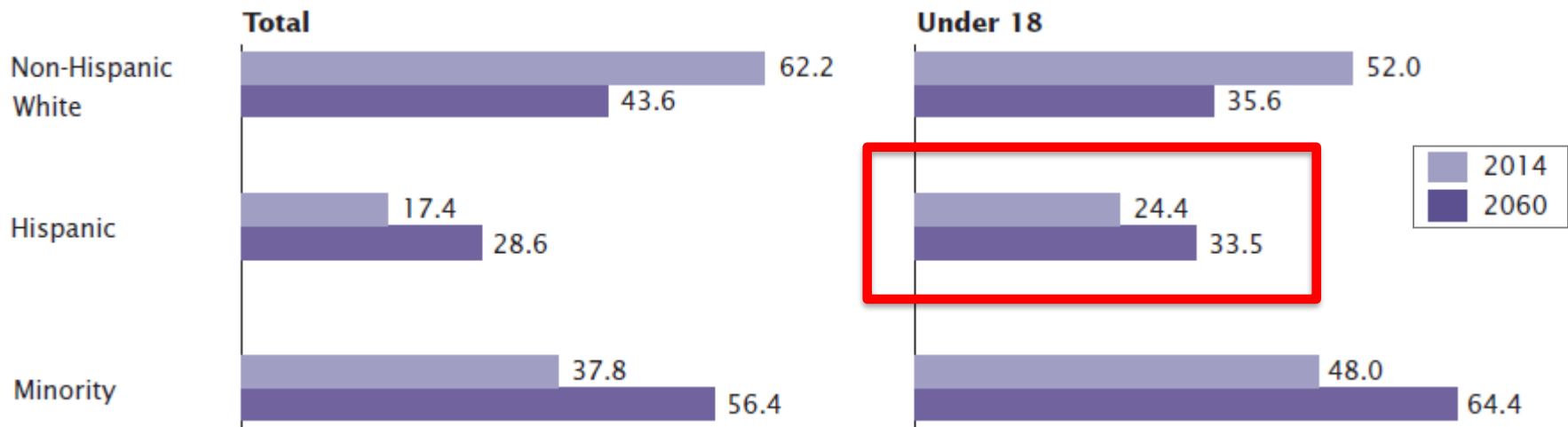
- By 2044 US will be “minority majority”¹

Note: Counts include Washington, D.C.

Source: Census Bureau

PEW RESEARCH CENTER

Young People are on the Leading Edge of Change



- **Most infants born in the US are minorities¹**
- **As of 2020 more than half of children are minorities²**
- **Most children enrolled in U.S. public schools are minorities³**

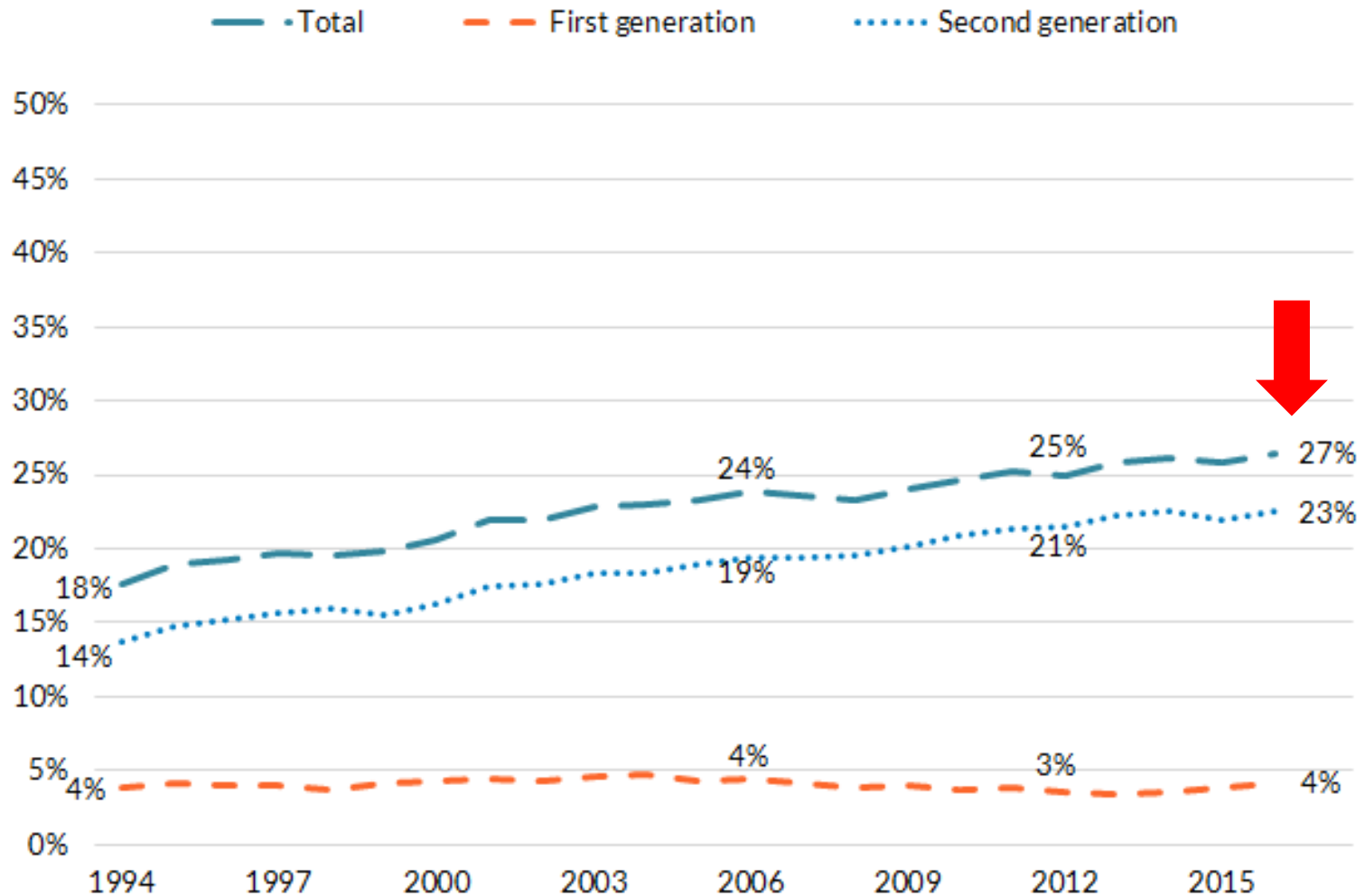


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Hispanic includes all people regardless of race. Minority includes all non-white populations.

1. U.S. Census Bureau: <https://www.census.gov/content/dam/Census/library/publications/2015/demo/p25-1143.pdf>
2. U.S. Census Bureau: <https://www.census.gov/newsroom/press-releases/2018/cb18-41-population-projections.html>
3. National Center for Education Statistics: https://nces.ed.gov/programs/digest/d13/tables/dt13_203.50.asp

1 in 4 U.S. Children in Immigrant Families



* Immigrant children are those with at least one parent born outside of the United States. First-generation immigrant children were born outside of the United States and second-generation immigrant children were born inside of the United States or its territories.

Source: Child Trends' original analysis of data from the Current Population Survey, March Supplement, 1994-2017.

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Minority Health Outcomes

Minorities have:

- **Shorter life spans¹**
- **Higher mortality from¹:**
 - *Heart disease*
 - *Cancer*
 - *Kidney disease*
- **Higher rates of maternal and infant mortality**

1. Cunningham TJ, Croft JB, Liu Y, Lu H, Eke PI, Giles WH. Vital Signs: Racial Disparities in Age-Specific Mortality Among Blacks or African Americans — United States, 1999–2015. *MMWR Morb Mortal Wkly Rep* 2017;66:444–456.

Minority Health: Disparities Begin Early

LATINO HEALTH INEQUITIES: CHILDREN

infant
mortality

47%

more likely to
die as an infant¹⁰
(Puerto Ricans)

asthma

82%

more likely to
have asthma⁴
(Puerto Ricans)

obesity

83%

more likely to
be obese⁷

depression

34%

more likely to
attempt suicide
as a high-schooler¹¹

AFRICAN AMERICAN HEALTH Inequities: CHILDREN

infant
mortality

x2.5

as likely to
die as infants²

SIDS

x2

as likely to
die of
Sudden
Infant
Death
Syndrome
(SIDS)²

asthma

x2

as likely to
have asthma¹

obesity

56%

more likely to
be obese⁵

depression

61%

more likely to
attempt suicide
as a high-schooler⁷

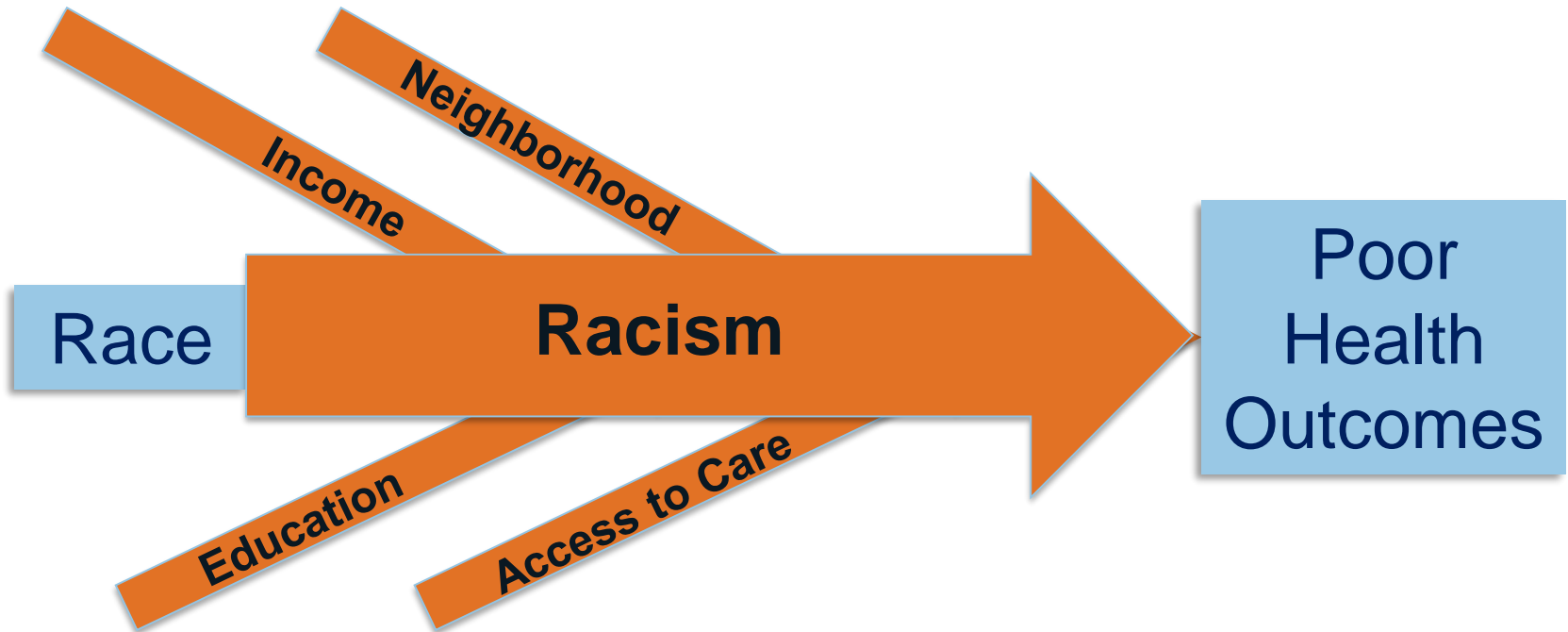


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CDC data with infographic by:

<https://familiesusa.org/product/racial-and-ethnic-health-inequities-among-communities-color-compared-non-hispanic-whites>

So... do Race and Ethnicity Have Health Consequences?



Race vs Racism

“Race is not a biological category. It is a social construct with deep historical roots and ever-metastasizing consequences.”

– *Dr. M. Gabriela Alcalde, Health Affairs*

Race vs Racism

“Race is not a biological category. It is a social construct with deep historical roots and **ever-metastasizing consequences.**”



— *Dr. M. Gabriela Alcalde, Health Affairs*

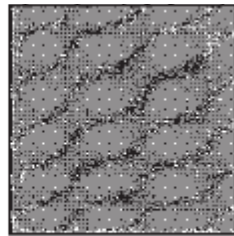
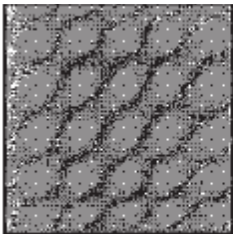
Defining Racism



<https://www.commonwealthfund.org/publications/newsletter-article/2018/sep/focus-reducing-racial-disparities-health-care-confronting>
Jones, C, Am J Public Health. 2000;90: 1212–1215/
Photo credit: <http://magazine.wellesley.edu/winter-2019/2018-alumnae-achievement-awards>

Gardener's Tale

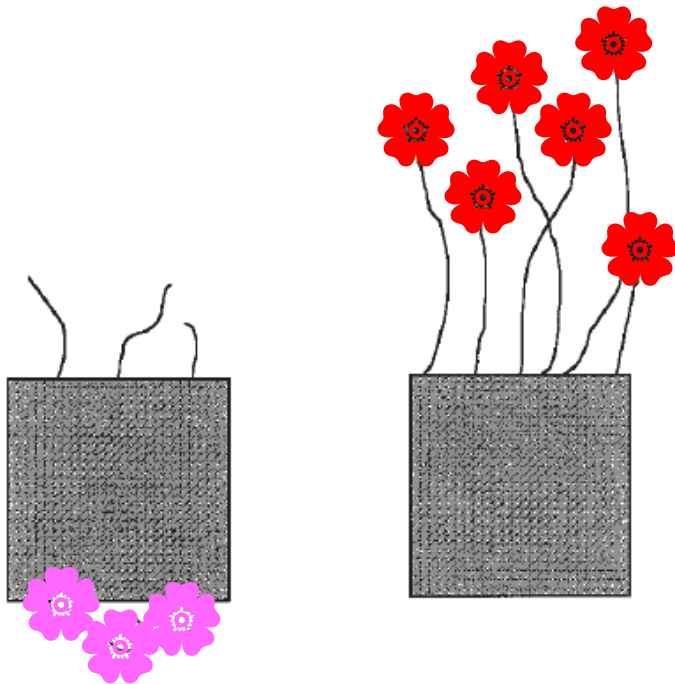
Institutionalized racism



- Initial historical insult
- Structural barriers
- Inaction in face of need
- Societal norms
- Biological determinism
- Unearned privilege

Gardener's Tale

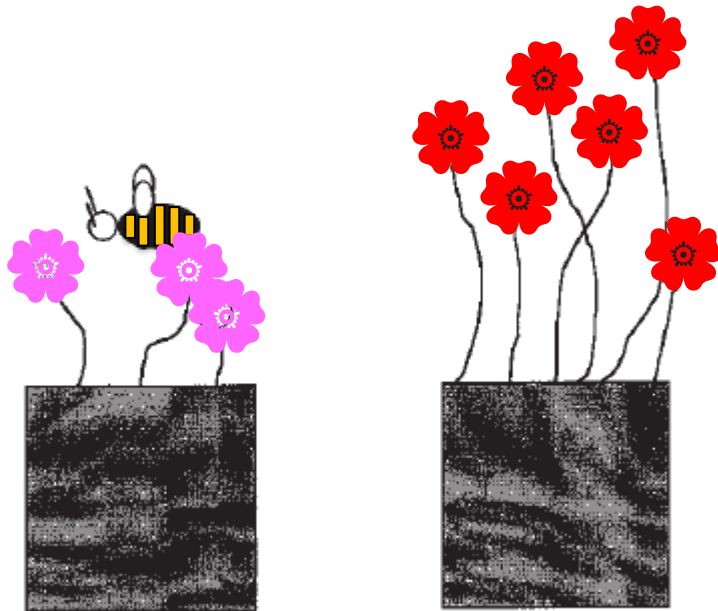
Personally mediated racism



- Intentional
- Unintentional
- Acts of commission
- Acts of omission
- Maintains structural barriers
- Condoned by societal norms

Gardener's Tale

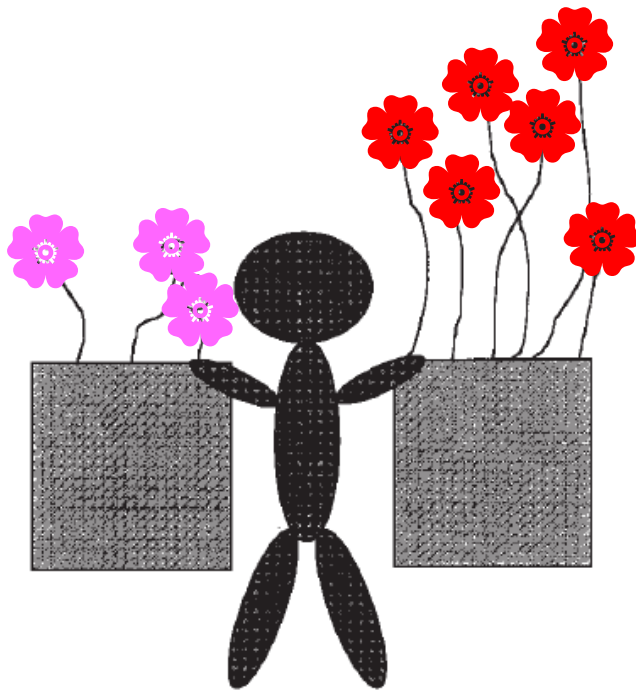
Internalized racism



- Reflects systems of privilege
- Reflects societal values
- Erodes individual sense of value
- Undermines collective action

Gardener's Tale

Who is the gardener?



Government

- Power to decide
- Power to act
- Control of resources

Dangerous when

- Allied with one group
- Not concerned with equity

Levels of Racism

- **Institutionalized/Structural**

- *Societal norms, unearned privilege, inaction in the face of need*
- *Mutually reinforcing systems (health care, housing, education employment, media, criminal justice, etc.)*

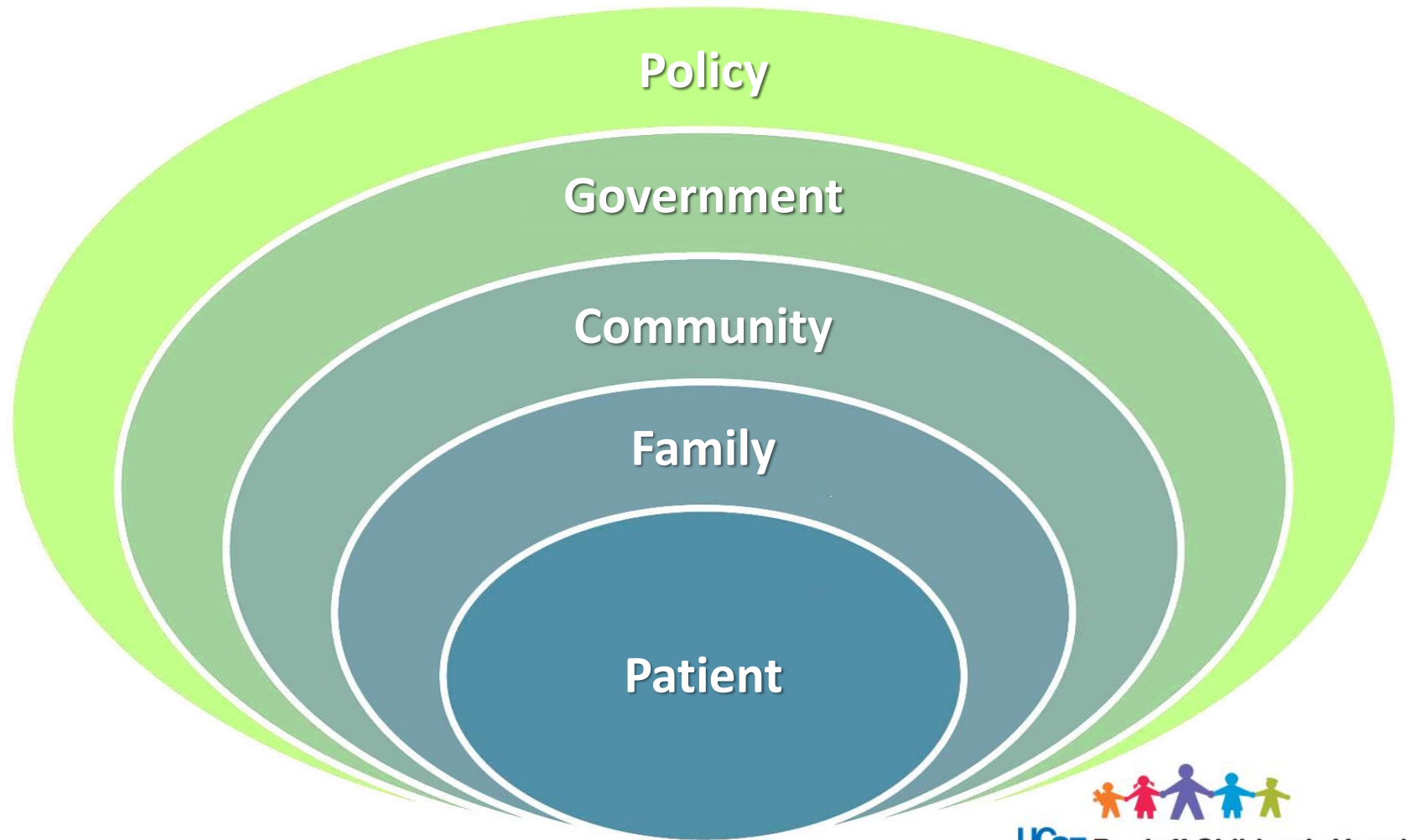
- **Personally Mediated**

- *Maintains structural barriers and social norms*

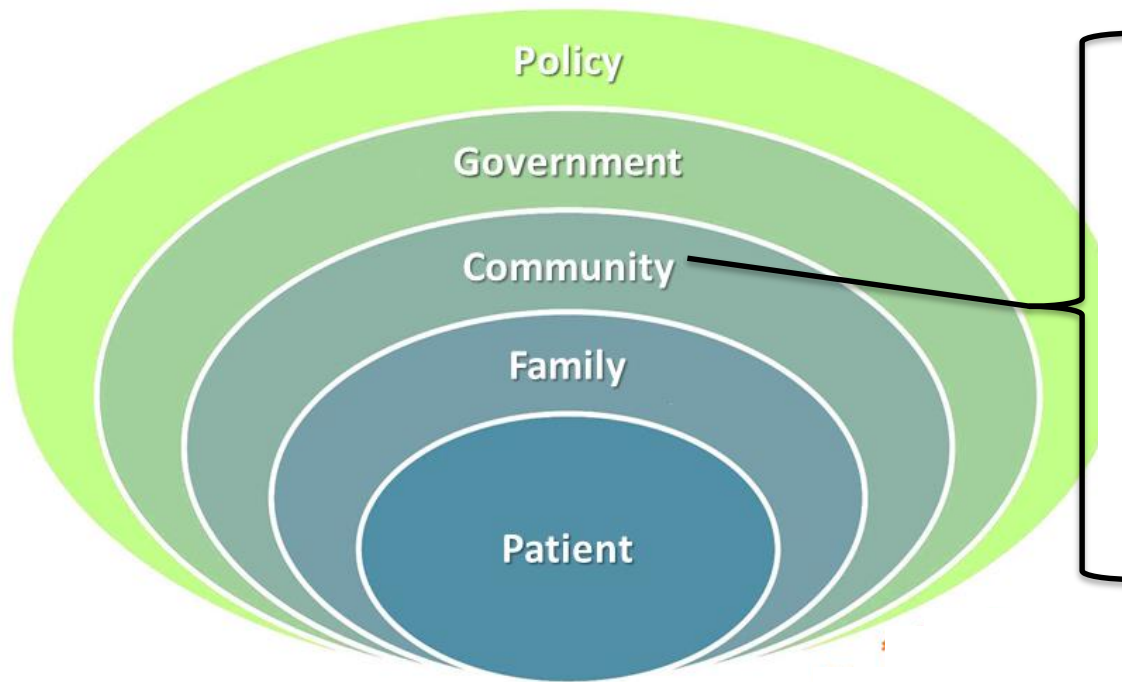
- **Internalized**

- *Erodes individual sense of value and collective action*

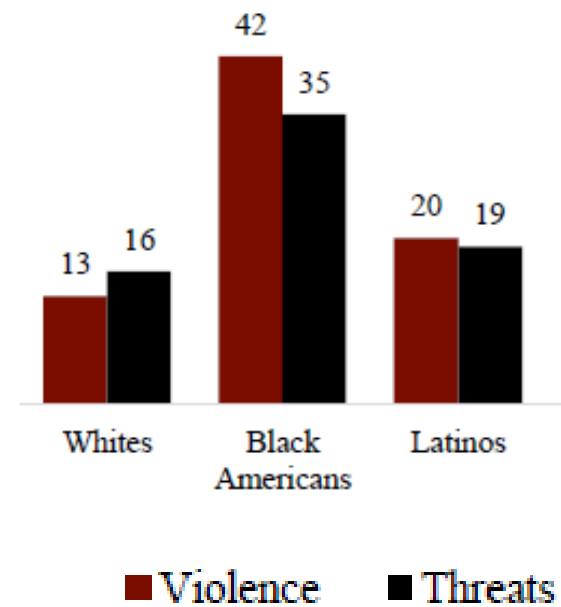
Levels of Racism



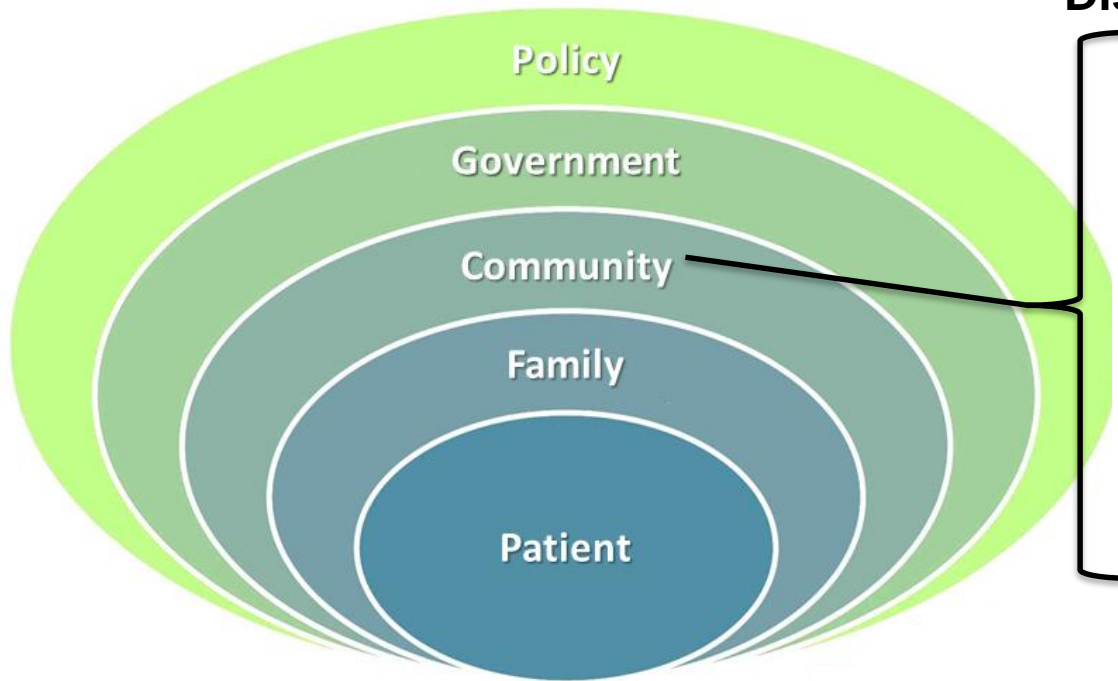
Experiences of Racism: Personally Mediated



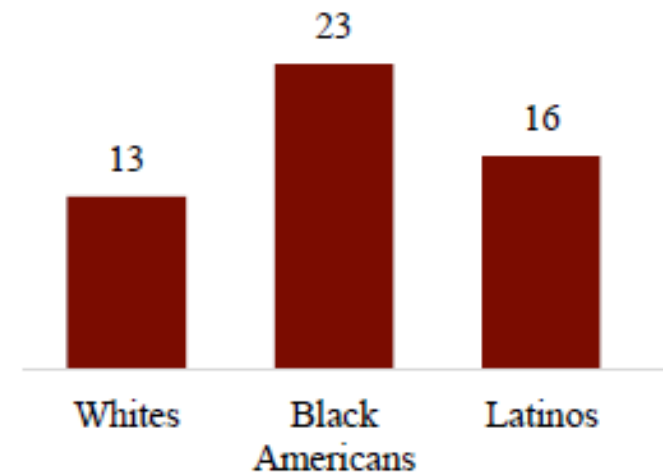
Experienced Race/Ethnicity-Based Violence or Threats



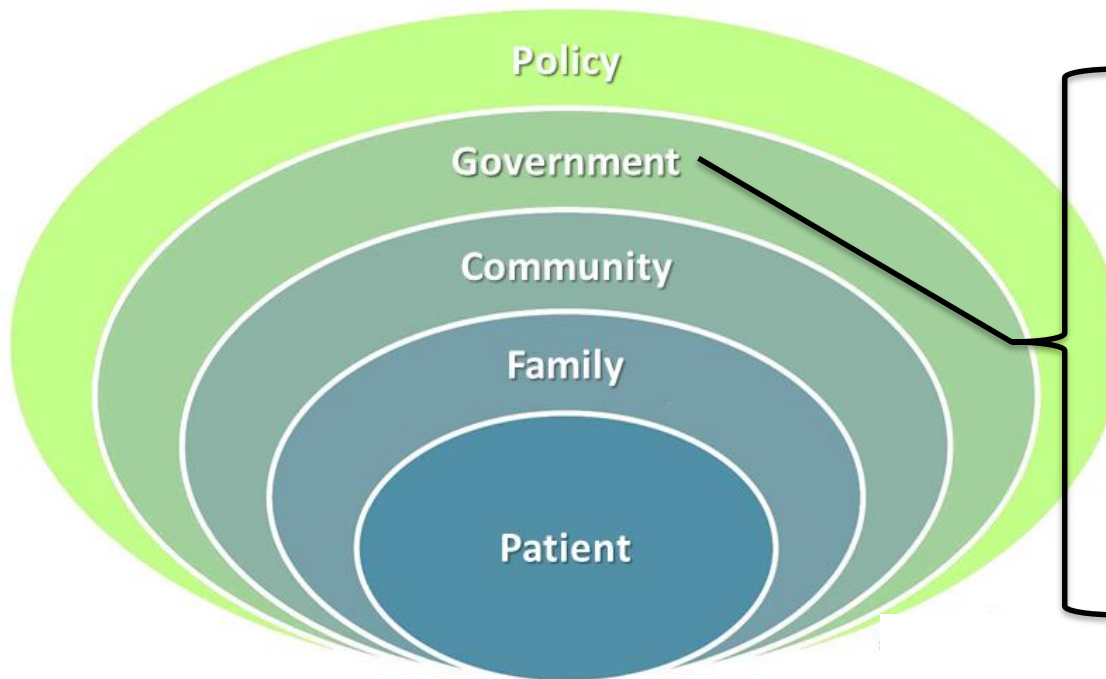
Experiences of Racism: Personally Mediated



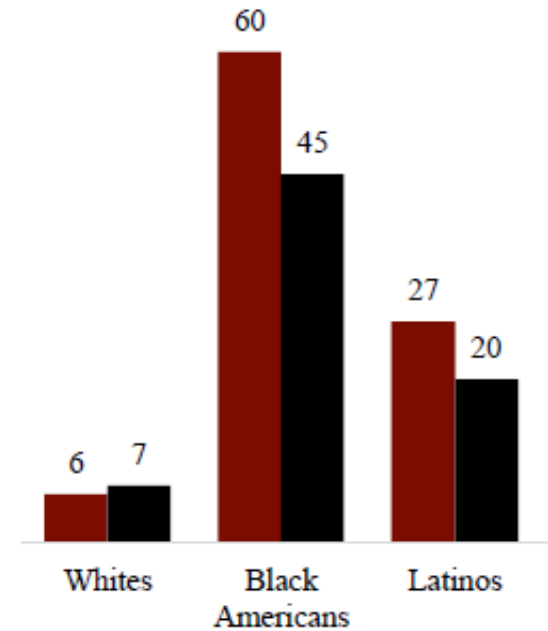
Considered Moving because of Discrimination in Where they Live



Experiences of Racism: Institutional



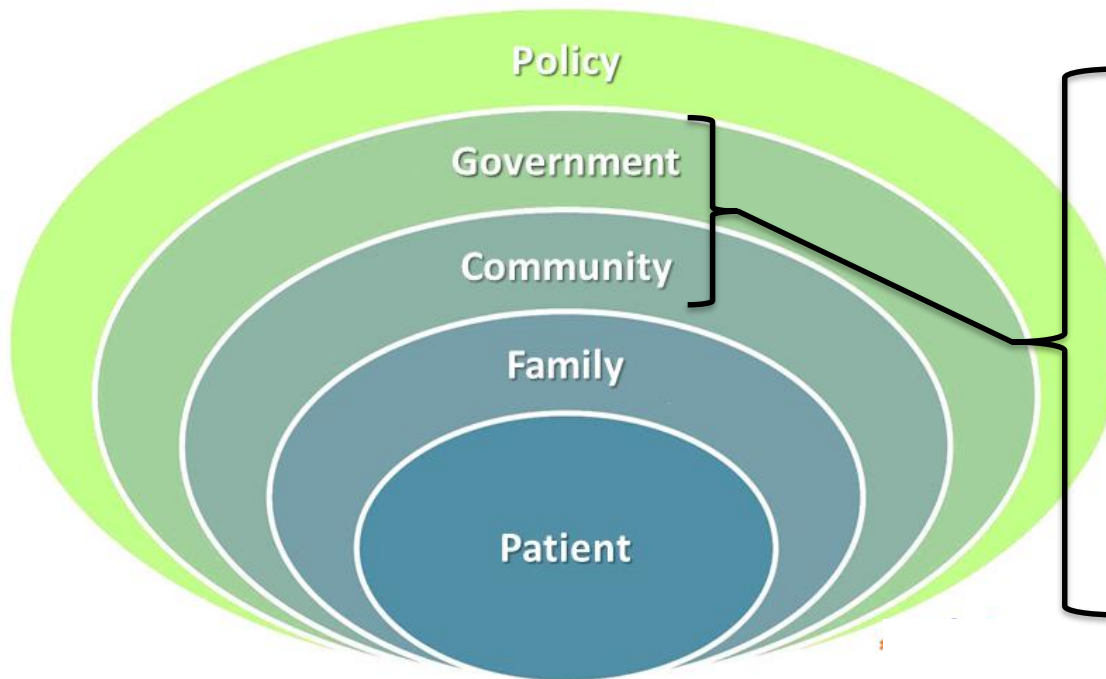
Unfairly treated by the Police or Courts



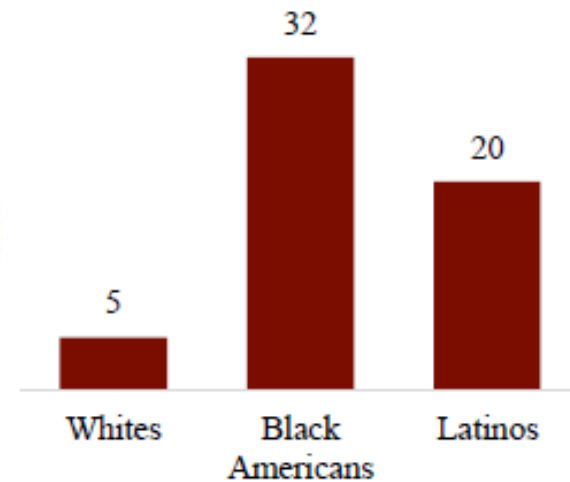
- Unfairly stopped or treated by police
- Unfairly treated by courts

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Experiences of Racism: Institutional

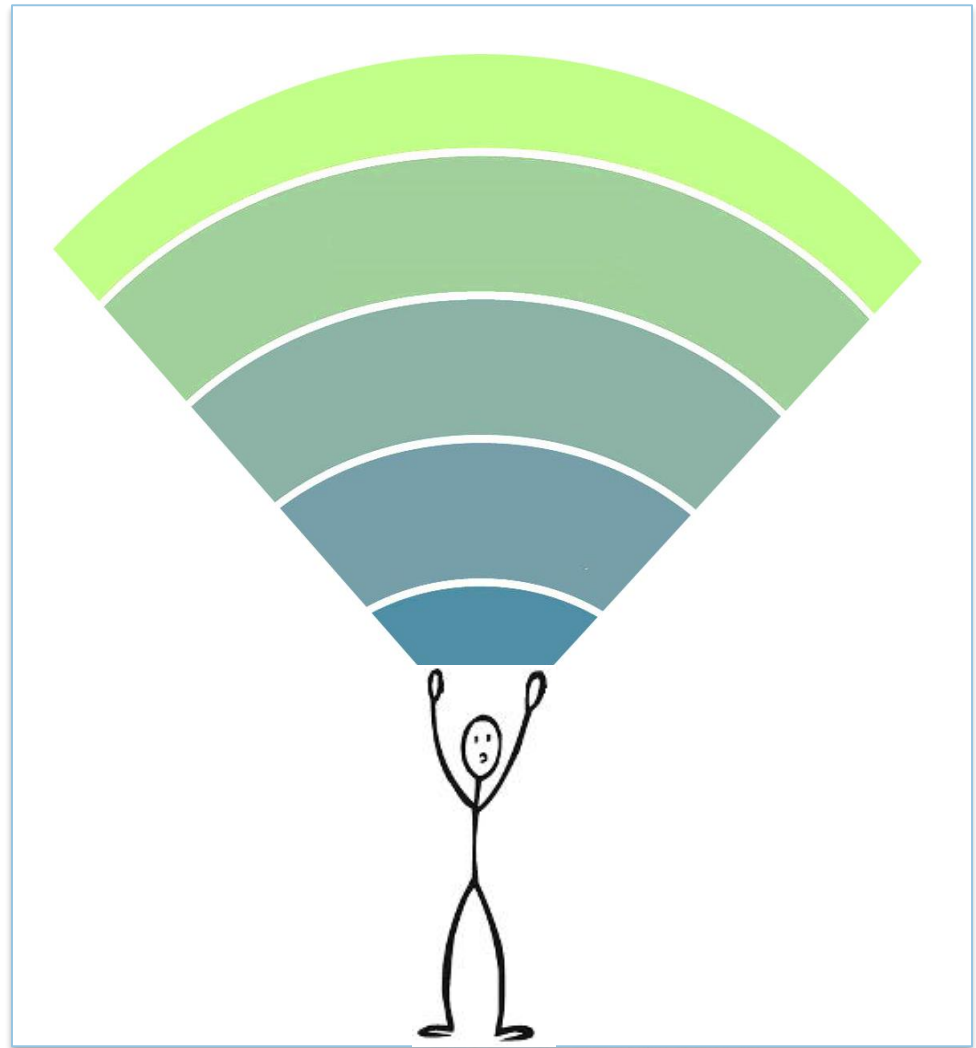


**Experienced
Discrimination in a
Health Care Setting**



Impacts of Racism

- **Limits in access to health care, housing, education**
- **Mass incarceration**
- **Chronic stress/trauma**
 - *Likely mediates poor health outcomes*
- **Health disparities**
- **Injury/violent deaths**
- **Lower life expectancy**

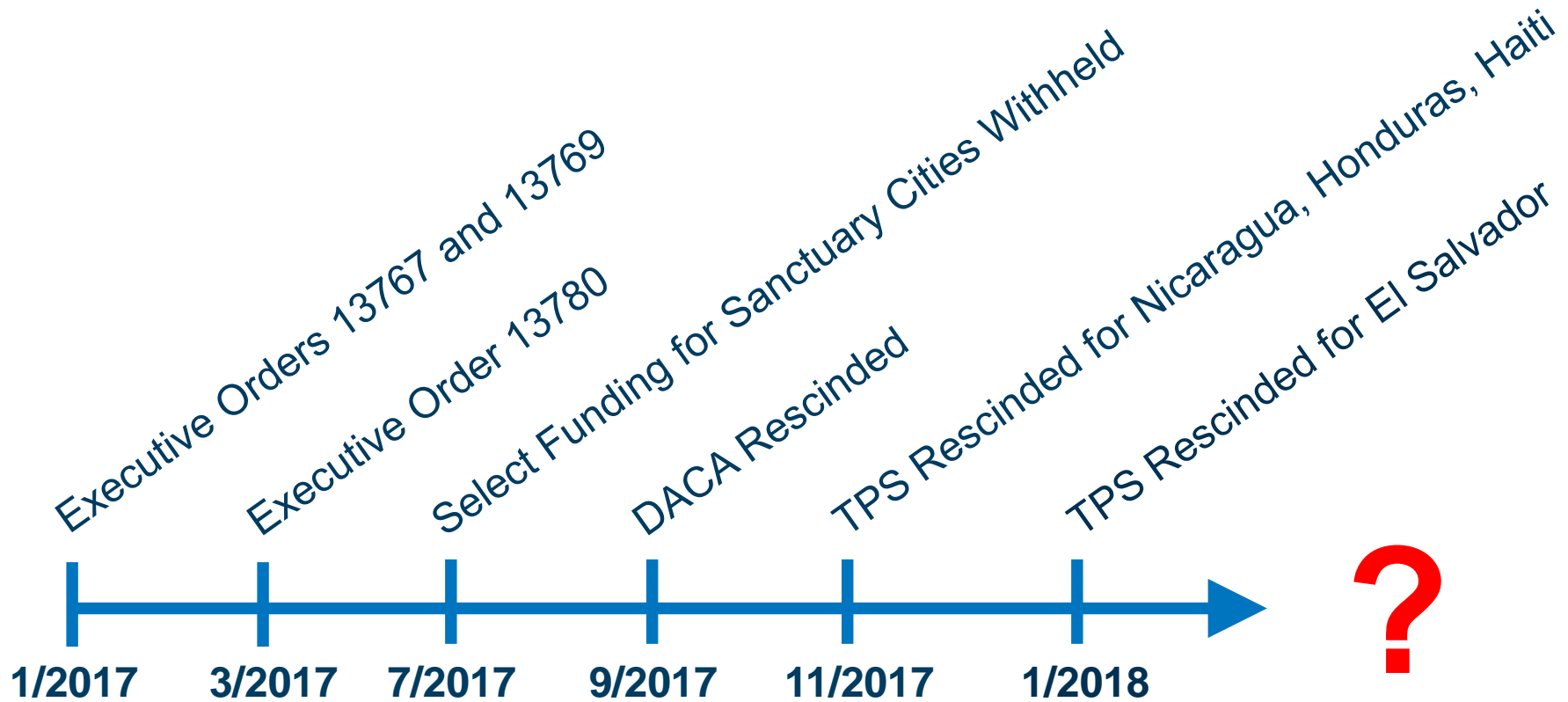


Gee GC, Walsemann KM, Brondolo E. A life course perspective on how racism may be related to health inequities. *Am J Public Health* 2012;102:967–74.
<https://www.americanprogress.org/issues/early-childhood/reports/2018/02/01/445576/exploring-african-americans-high-maternal-infant-death-rates/>

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What are the health impacts of the United States' rapidly changing immigration policies on California's immigrant youth?

Recent Immigration Policy Changes



<https://www.federalregister.gov/executive-orders/donald-trump/2017>
www.uscis.gov/humanitarian/temporary-protected-status

Salinas Teen Health Study

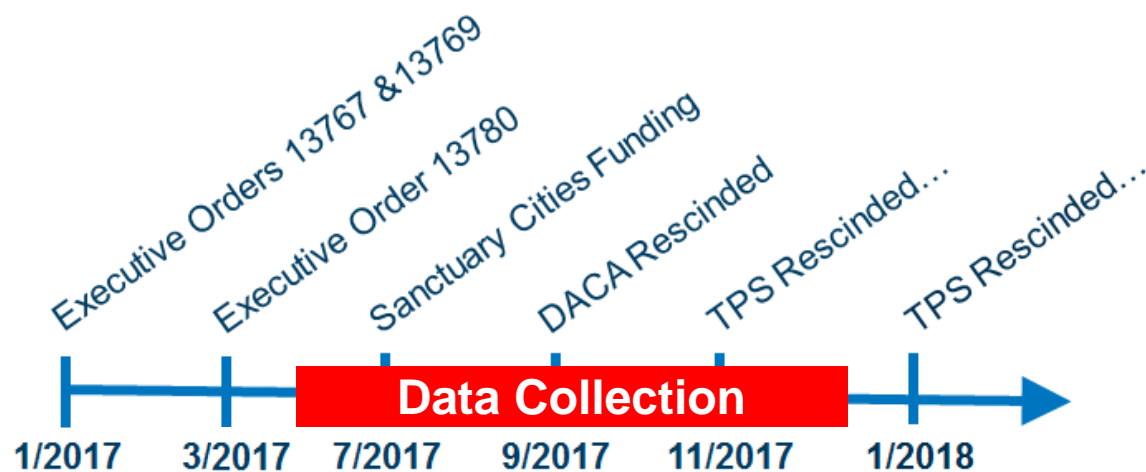
- **Salinas, CA: small urban center of agricultural region**
- **Community-engaged study since 2015**
- **Cohort of 599 13 to 16 year olds**
 - *94% Latino*
 - *53% female*
 - *12% 1st Generation*
 - *71% 2nd Generation*



Image: <http://www.biomonitoring.ca.gov/projects/center-health-assessment-mothers-and-children-salinas-chamacos>

Salinas Teen Health Study: New Question

“In what ways do you see the current U.S. president and political climate affecting your community or neighborhood? What about for your friends? Your family? How about for you, individually?”



Pervasive Climate of Fear

- 50% increase in rise of immigrant-focused hate groups¹
- FBI hate crime data show a rise in last quarter of 2016¹
 - 58% due to race or ethnicity
- 1/3 of teachers reported immigration related bullying in schools in fall of 2016²

“It makes things more fearful in the environment even if we are citizens. Now everyone is afraid...and it gets in the way of things.”

Parenting in a Climate of Fear

- Roche et al, JAH 2018
- 200 Latino parents surveyed in fall 2017¹
 - 2/3 Legally living in US
- 65% worry about family separation
- 47% warned child to stay away from authorities

“My mom doesn't want to watch the news anymore because there is a lot of negativity. It changes the way we feel because we are not safe anymore.”

Disruption to Mobility and Freedom

- Threat to DACA and TPS^{1,2}
- Increased ICE activity³
- Targeting of sanctuary cities by ICE⁴
- High profile cases of deportation⁵
 - *e.g. Multiple cases of parents being deported while taking kids to school*

“I think people are afraid of being deported. They're kind of terrorized because they feel that if they leave their house to go somewhere immigration might come to take them away.”

1. www.uscis.gov/humanitarian/temporary-protected-status; 2. Trump, 2017, Fact Sheet: President Donald J. Trump Restores Responsibility and the Rule of Law to Immigration; 3. Trump, 2017, EO 13767: Border Security and Immigration Enforcement Improvements; 4. ICE News Release September 28, 2018; 5. Castillo, LA Times, March 3, 2017 and Boggs, ABC 15 News, January 25, 2018.

Family Separation

- **Psychological impacts of parental deportation**^{1,2,3}
 - *Depression*
 - *PTSD*
- **Loss of financial stability**⁴
 - *70% of income lost on average*
- **Choice: forced migration or loss of parents**^{3,4}

“My parents are undocumented so they could be taken ...back to Mexico. I will probably have to go there and my dreams here will end.”

Limited Educational Opportunities

- 46% of parents concerned about children finishing school¹
- Reduced financial resources
 - *Family separation*²
 - *Parents' work limited*¹
- Forced relocation → disrupts schooling²
- Educational access depends on DACA³

“There are kids that don’t have papers in my community. The president is trying to take away DACA, and that’s what helps them get an education and they might not be able to do that anymore.”

Health

- **Anxiety and depression with uncertainty about documentation status¹**
- **39% of parents avoid medical care and other services for their children²**
- **Loss of hospitals as sanctuary sites³**
 - *10yo Rosa Maria Hernandez*
- **Immigrant detainees denied abortions⁴**

“The one that will most likely affect me will be defunding planned parenthood, because that will affect birth control and STIs. [That] will affect me in the future.”

Feeling Overwhelmed?

"I would like to speak up about all of this and to change the way things are but I just feel like I don't know where to start from because there are a lot of things to fix."

“I don’t know where to start...”

- What are the privileges that you have?
- What are the institutions where you can use your privilege?

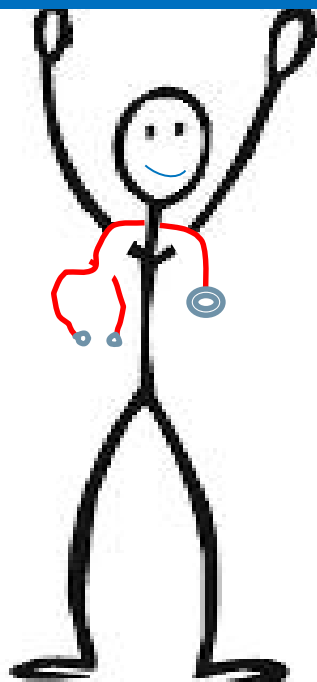
SAHIM

Society for Adolescent
Health and Medicine

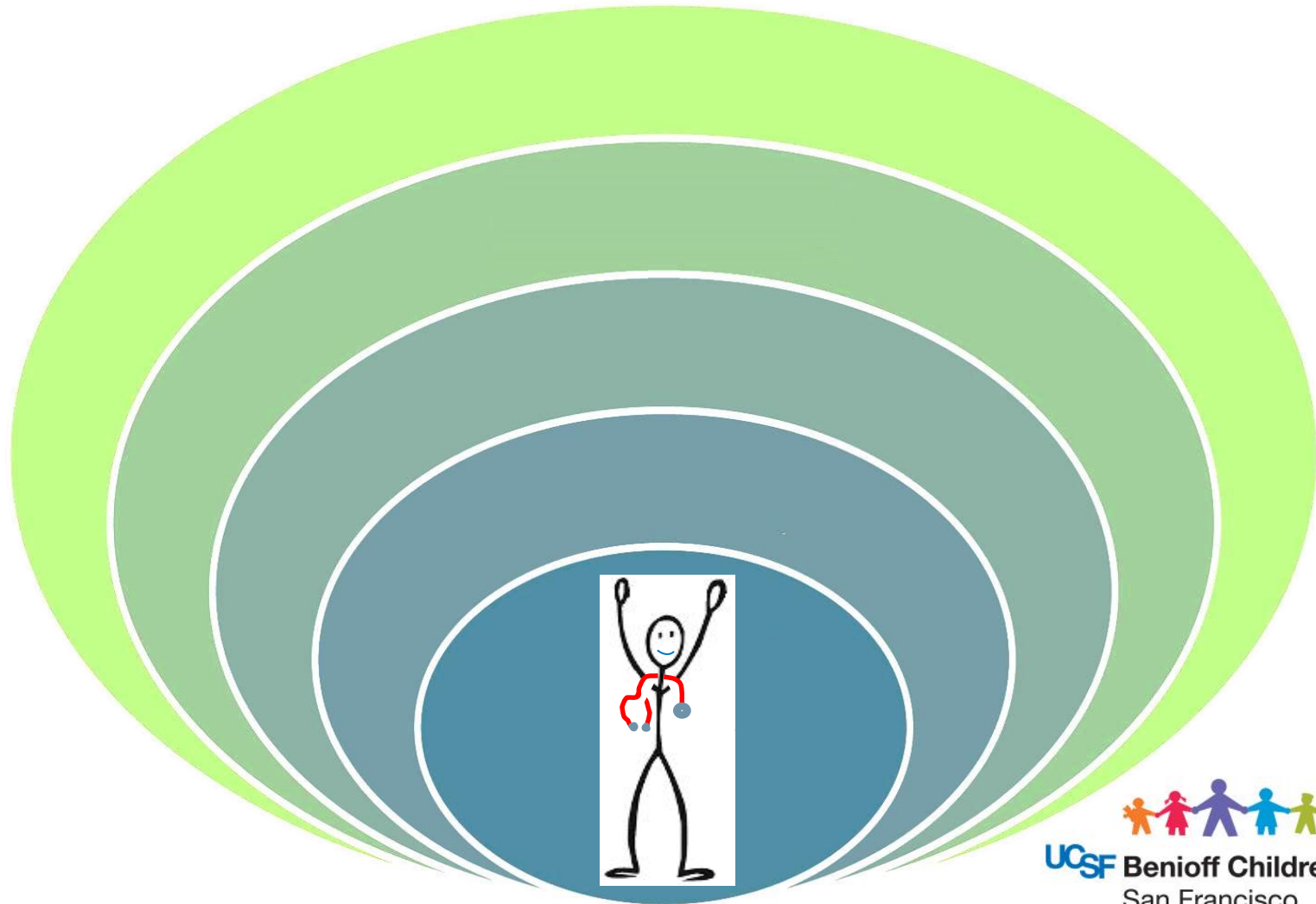


Racism within Academic Medicine

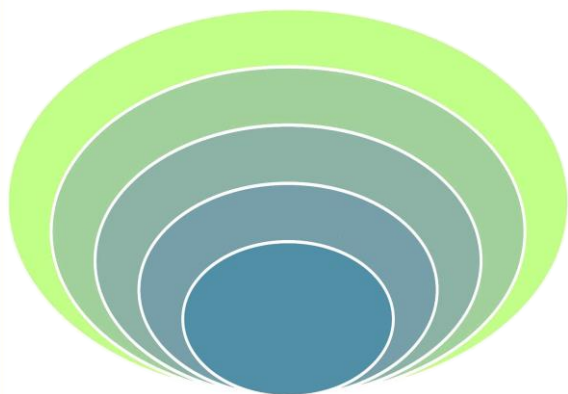
Social Justice!



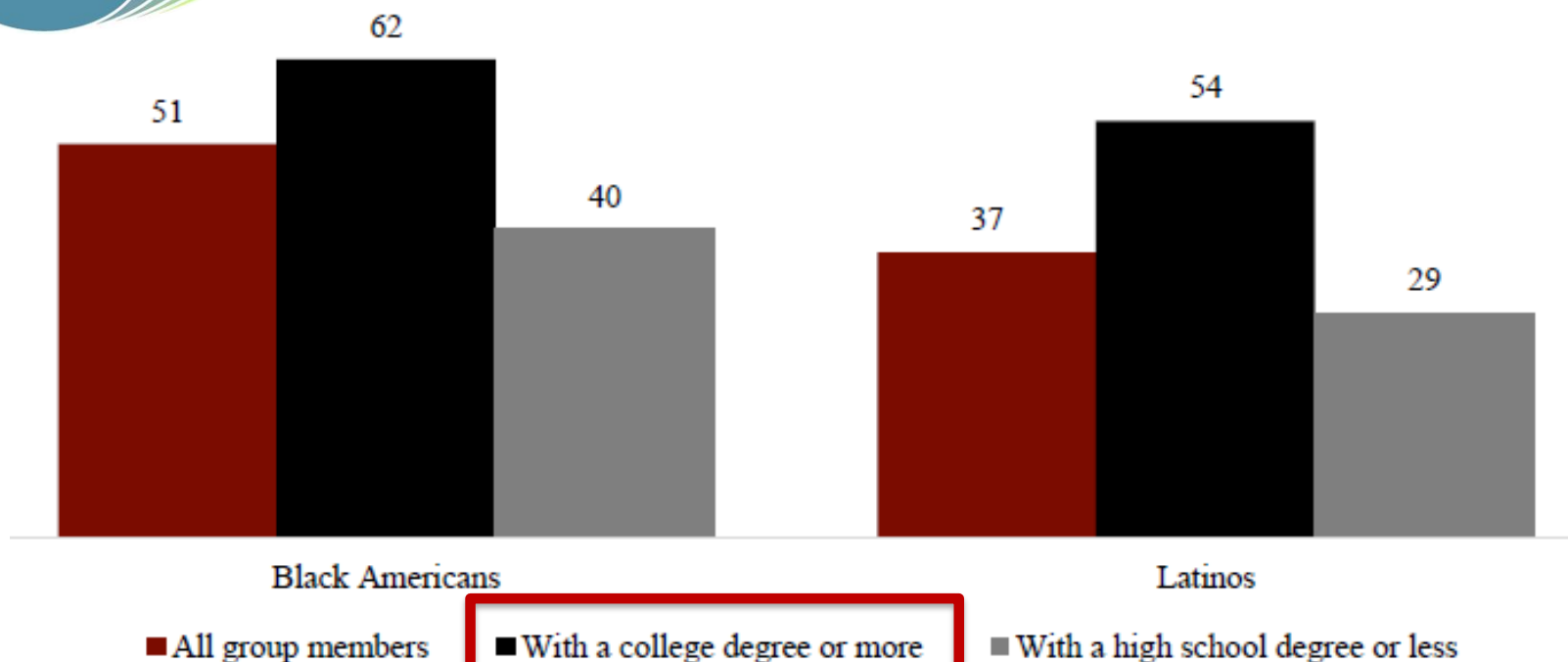
Racism within Academic Medicine



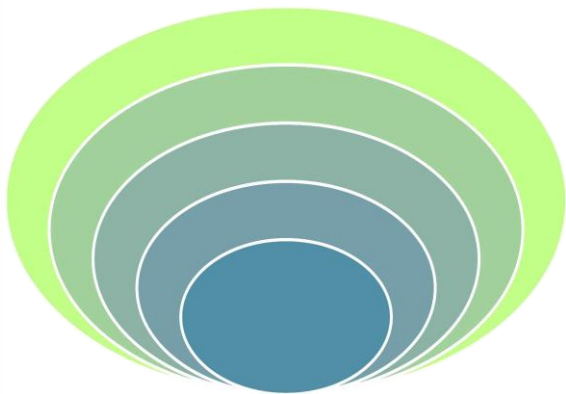
Racism Experiences by Education Level



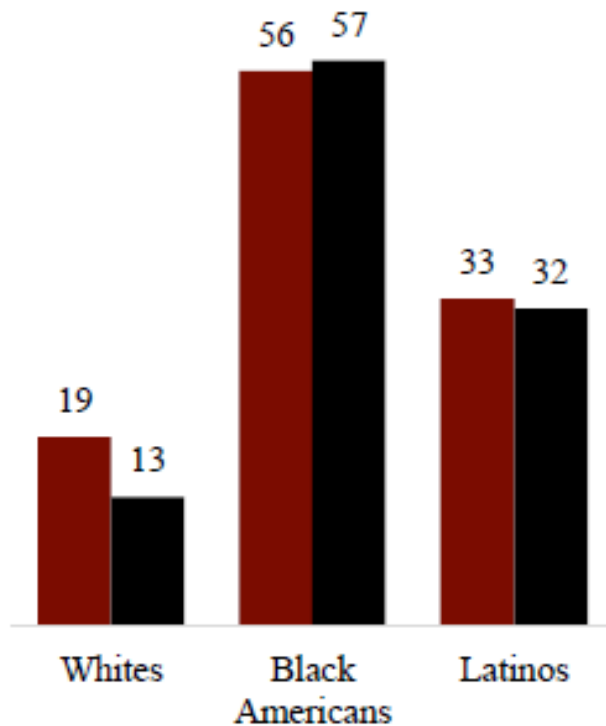
Percent of People Experiencing Racial/Ethnic Slurs by Education Level



Racism Experiences in Employment



Discrimination in Employment



- When being paid equally or considered for promotions
- When applying for jobs



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Levels of Racism within Medicine

Minority Providers:

- **Are more likely to see minority patients. ¹**
- **Are more likely to see non-English speaking patients.¹**
- **May achieve better health outcomes for racially congruent patients. ²**
- **Are paid less than their peers. ³**

1. JAMA Intern Med. 2014;174(2):289-291.

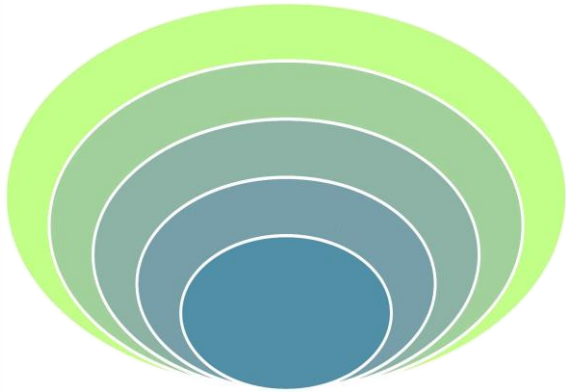
2. National Bureau of Economic Research, 2018 <https://www.nber.org/papers/w24787.pdf>

3. Medscape Physician Compensation Report 2018

Levels of Racism within Medicine: Pipeline

	U.S. Population ¹	Medical School Graduates ²	All Active Physicians ²	Planning to practice in under-served areas ²
White	76.3%	54.6%	56.2%	26.6%
Black	13.4%	6.2%	5.0%	60.5%
Latinx	18.5%	5.3%	5.8%	41.9%
Asian	5.9%	21.6%	17.1%	27.2%

Levels of Racism within Medicine: Salary



Race/Ethnicity and Physician Income



Levels of Racism within Academic Medicine: The Minority Tax ¹

- Disparities in efforts to promote diversity in medicine.
- Disparities in available mentors.
- Disparities in mentorship demands.



Levels of Racism within Academic Medicine

Minority Faculty:

- Are more likely to do health disparities research ¹
- Less likely to receive promotion at every level ²
- Less likely to receive NIH funding ³
- Report lower perceptions of inclusion and institutional efforts to promote equity and diversity ¹
 - *This findings are lessened at intuitions with higher proportions of URM faculty.*

1. Pololi et al., Academic Medicine, 2013.
2. Rodríguez et al. BMC Medical Education, 2015
3. Hoppe, et al, Science Advances, Oct 2019.

Levels of Racism within Academic Medicine: Disparities in Promotion

Table 1 Promotion rates for black, Latino and white faculty

Study author and year	Assistant to Associate		
	Black	Latino	White
Nunez-Smith et al. (2012) [21]	21.7%	26.2%	30%
Fang et al. (2000) [19]	URM* 30%		46%

*URM refers to black, Mexican American, Mainland Puerto Rican and Native American faculty members.

Associate to Full		
Black	Latino	White
18.8%	23.5%	30.2%
URM 36%		50%

Racism within Academic Medicine: NIH R01 Funding

	African American/ Black Investigators	White Investigators
% discussed	44.0%	57.4%**
% of funded if discussed	24.2%	30.8%**
% funded overall	10.7%	17.7%**

Applications from
African American/
Black Investigators

(948)

Applications
(2.53)

Applications
discussed
(1.11)

Applications funded (0.27)

Difference at each step:

83.7%

76.6%

78.6%

Cumulative
difference:
50.4%
(2.0x disparity)

Applications from
White Investigators

(34,218)

Applications
(3.03)

Applications
discussed
(1.74)

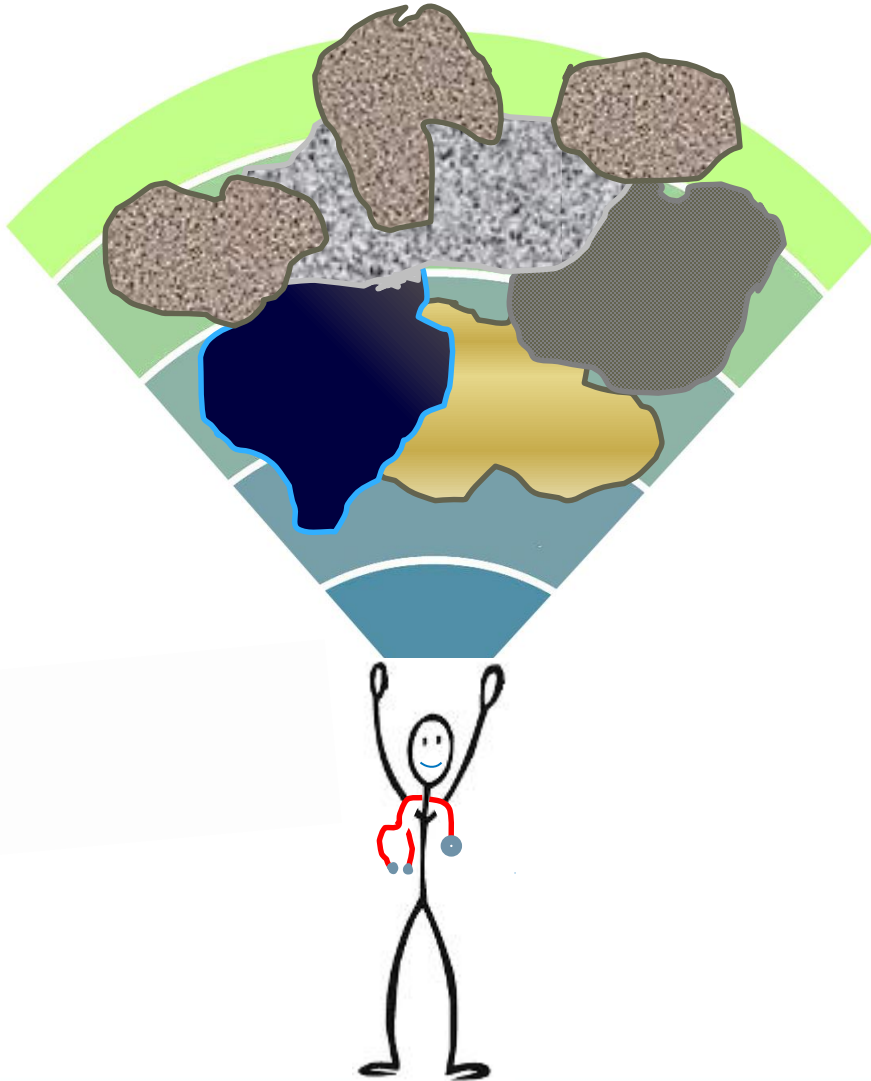
Applications funded (0.54)

Racism within Academic Medicine: NIH R01 Funding

Disparities in:

1. Decision to discuss application
2. Impact score assignment
3. Topic choice
 - *Black and African American PIs study community and population health at a higher rate*

Adding it All Up: The Burden on Minorities in Academic Medicine



- **Racism**
 - *Institutional*
 - *Personally-mediated*
 - *Internalized*
- **Intersectionality**
 - *Gender*
 - *Immigration*
 - *Sexual Orientation*
- **Limited pool of mentors**

Society of Adolescent Health and Medicine

Journal of Adolescent Health 63 (2018) 257–261



ELSEVIER

JOURNAL OF
ADOLESCENT
HEALTH

www.jahonline.org

Position paper

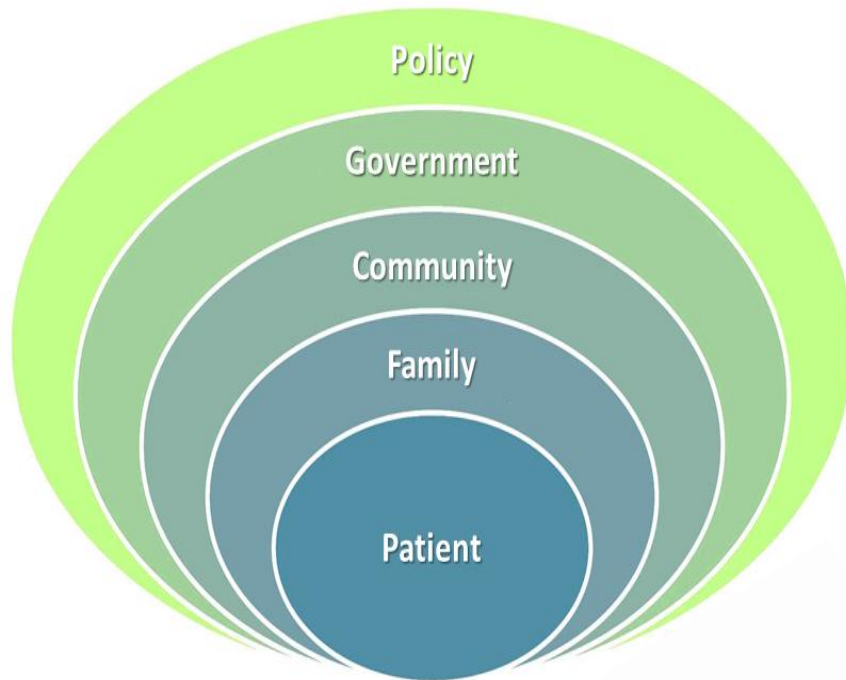
Racism and Its Harmful Effects on Nondominant Racial–Ethnic Youth and Youth-Serving Providers: A Call to Action for Organizational Change

The Society for Adolescent Health and Medicine




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SAHM Positions



- Racism has negative impacts on youth and providers
- Racism functions through structural violence
- Health care organizations should develop evidence-based policies and procedures to address racism.

Position

Organizations should reaffirm their commitment to justice and equity and **actively develop, implement, and evaluate policies and processes to ensure that racism is not embedded systematically.**

UC Efforts

Press Room

CATEGORIES

- All News >
- Research >
- Health >
- Arts & Humanities >
- Students & Alumni >
- Faculty & Staff >
- Administration >

University of California sues Trump administration on unlawful repeal of DACA program

UC Office of the President
Friday, September 8, 2017

The University of California today (Sept. 8) filed suit in federal court against the Trump administration for wrongly and unconstitutionally violating the rights of the University and its students by rescinding the Deferred Action for Childhood Arrivals (DACA) program on "nothing more than unreasoned executive whim."

The lawsuit filed in the Northern District of California against the Department of Homeland Security (DHS) and its acting secretary, Elaine Duke, is the first to be filed by a university seeking to stop the Trump administration's recently announced decision to end the DACA program, which allowed nearly 800,000 undocumented young people to legally live, work and study in the United States.

University of California San Francisco

UCSF Events Calendar

SIGN UP LOG IN

UCSF EVENTS CALENDAR > EVENT DETAILS



12th Annual Chancellor's Leadership Forum on Diversity and Inclusion

Outreach Efforts and the Leaky Pipeline for Students, Faculty and Staff

The Chancellor's Leadership Forum on Diversity offers a platform for community members to hear from senior leadership on diversity initiatives at UCSF. We encourage all to attend and bring your questions.

- **Thursday, April 25, 2019**
- **Noon to 1:30pm**
- **Cole Hall Auditorium, Parnassus Campus**

Lunch will be provided while supply lasts.

Panelists

- Cynthia Chiarappa, Vice President, Administration, UCSF Health
- B. Joseph Guglielmo, PharmD, Dean, School of Pharmacy
- Tung Nguyen, MD, School of Medicine
- Howard Pinderhughes, PhD, School of Nursing
- Don Woodson, MEd, Director, Center for Science Education & Outreach

Moderator: Lisa Cisneros, Senior Director of Strategic Communications, University Relations



UCSF Efforts: School of Medicine

University of California, San Francisco

About UCSF



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Contributions to Diversity Statement

Diversity is a defining feature of California's past, present, and future. Increasing diversity to better reflect the population of California is fundamental to UC San Francisco's mission as a public institution and imperative to achieving its full potential.

University of California, San Francisco



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Dean's Diversity Fund

Award Description

[Printer-friendly version](#)

To assist with recruitment and retention of faculty who share our commitments to diversity and service to underserved or vulnerable populations, each year the Dean's Office will award up to eight grants to support activities related to our educational and scholarly missions. Those receiving the grants will be named the John A. Watson Faculty Scholars.

Chairs and Directors
Council on Diversity

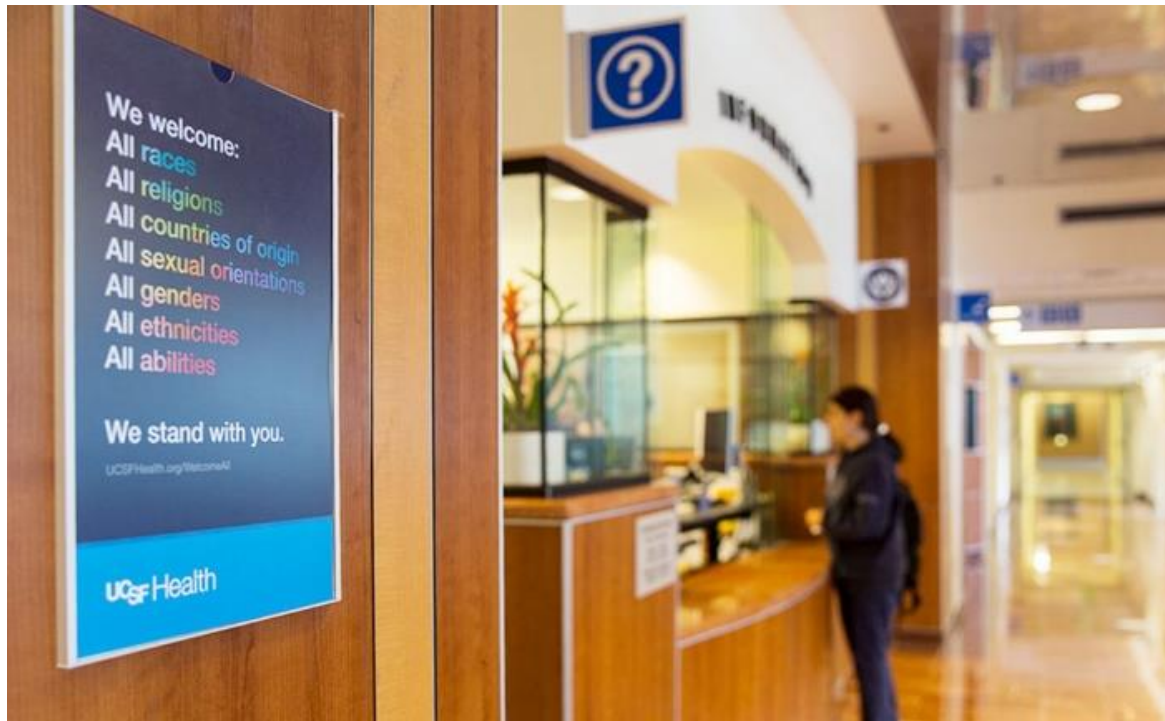
Dean's Diversity Fund

John A Watson Faculty



Position

Organizations should **explicitly pledge to provide equitable care** in ways that are **visible** to youth, families, and the broader community



We welcome:
All **races**
All **religions**
All **countries** of origin
All **sexual** orientations
All **genders**
All **ethnicities**
All **abilities**

We stand with you.

[UCSFHealth.org/WelcomeAll](https://www.ucsf.edu/news/2017/05/407101/ucsf-health-launches-campaign-reinforce-inclusiveness-safety-patients)

UCSF Health

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San Francisco

Position

Organizations should develop, implement, and evaluate interventions at all levels addressing **chronic minority stress and vicarious trauma** affecting nondominant racial/ethnic **providers**.



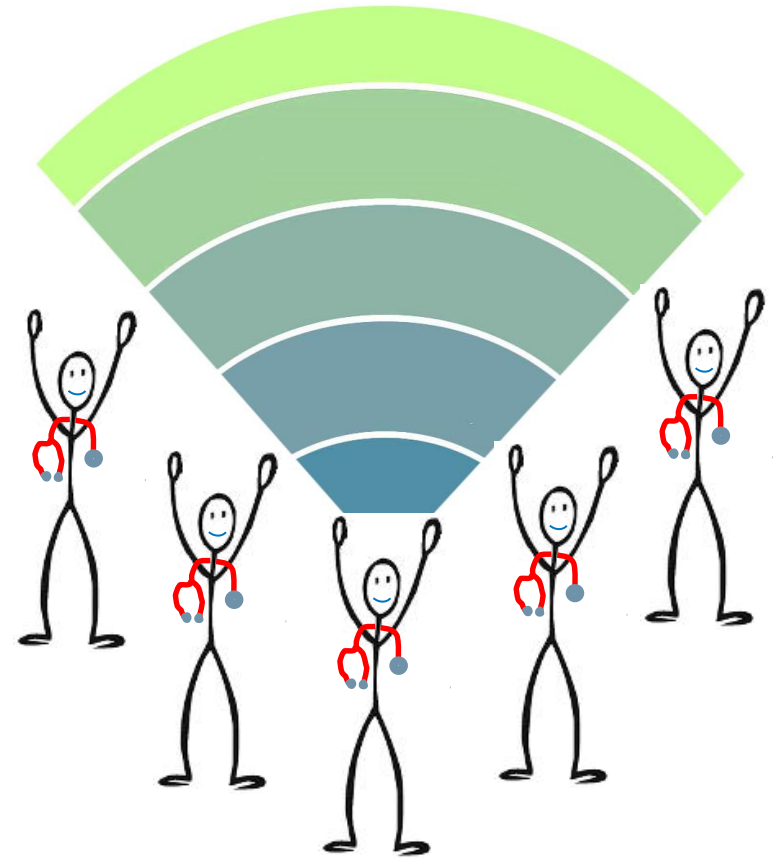
Alicia Fernandez receives grant to establish UCSF Latinx Center of Excellence



The UCSF School of Medicine (SOM) is pleased to announce that the U.S. Department of Health and Human Services (HHS) Health Resources and Services Administration (HRSA) recently awarded [Dr. Alicia Fernández](#) a four-year grant to create a [UCSF Latinx Center of Excellence \(LCOE\)](#). The UCSF LCOE is jointly funded through HRSA and UCSF and will be housed within the UCSF SOM, with close affiliation with the [Center for Vulnerable Populations \(CVP\)](#) at Zuckerberg San Francisco General Hospital and Trauma Center (ZSFG).

UCSF Efforts: Departmental Level

- **Diversity Committee:** curriculum, advocacy, hiring
- **PLUS Program: Commitment to inclusion and social justice**
- **Research profile that includes health disparities research**
- **Individual Efforts**
 - *Identify your privilege and where you can effect change.*



Take Action: Work to Be Done

- **Researchers**

- *Measures of health impacts of policies that marginalize racial and ethnic minorities*
- *Community-engaged design and implementation of interventions to mitigate structural racism*
- *Evidence-based policies to support health*

- **Clinicians and Medical Educators**

- *Support youth and families directly*
- *Advocate for elimination of structural racism*
- *Actively mentor URM colleagues*
- *Foster the educational advancement of minority providers and allies*



Position Papers

Annals of Internal Medicine

POSITION PAPER

Addressing Social Determinants to Improve Patient Care and Promote Health Equity: An American College of Physicians Position Paper

Hilary Daniel, BS; Sue S. Bornstein, MD; and Gregory C. Kane, MD; for the Health and Public Policy Committee of the American College of Physicians*



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Institutional Racism in the Health Care System

American Academy of Pediatrics



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The Impact of Racism on Child and Adolescent Health

Maria Trent, MD, MPH, FAAP, FSAHM,^a Danielle G. Dooley, MD, MPhil, FAAP,^b Jacqueline Dougé, MD, MPH, FAAP,^c SECTION ON ADOLESCENT HEALTH, COUNCIL ON COMMUNITY PEDIATRICS, COMMITTEE ON ADOLESCENCE



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Race and Medicine

A selection of articles on race and medicine, with implications for improving



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Position paper

Racism and Its Harmful Effects on Nondominant Racial–Ethnic Youth and Youth-Serving Providers: A Call to Action for Organizational Change

The Society for Adolescent Health and Medicine



Acknowledgements

- Youth research participants
- Community Advisory Board and Co-Investigators
- Mentors
 - *Claire Brindis, DrPH*
 - *Alexandra Minnis, PhD*
 - *Coco Aureswald, MD*
- Funding
 - *National Institute of Child Health and Development (R01-HD075787-01A1, K23-HD093839-01)*
 - *UCSF Watson Scholars*

Questions?



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