



A Model for Addressing Racism and Belonging

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hot topics in practice www.nccph.org/hot-topics

Northwest Center
 FOR PUBLIC HEALTH PRACTICE

Question for the Viewers

What does belonging mean to you?

Please share your response in the chat box.

Dying to Belong: Exploring Racism as a Public Health Crisis





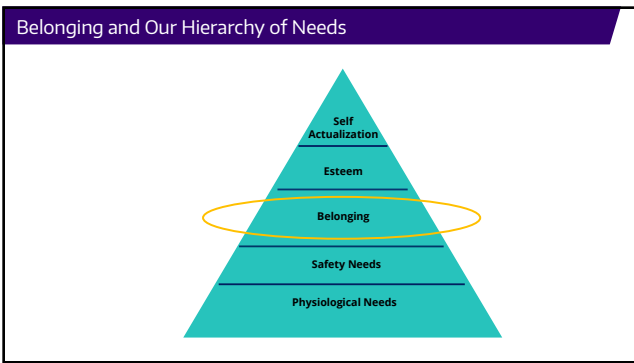


NCCPHT: Who We Are

- 1 New England Public Health Training Center
- 2 Region 2 Public Health Training Center
- 3 Mid-Atlantic Regional Public Health Training Center
- 4 Region IV Public Health Training Center
- 5 Region V Public Health Training Center
- 6 South Central Public Health Training Center
- 7 Midwestern Public Health Training Center
- 8 Rocky Mountain Public Health Training Center
- 9 Western Region Public Health Training Center
- 10 NorthWest Public Health Training Center

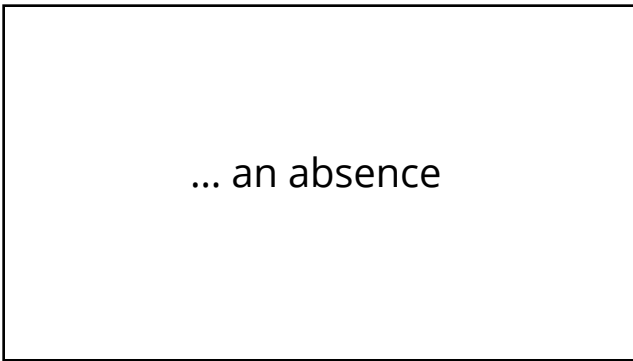
"NCCPHT supports lifelong learning and knowledge sharing among public health professionals to help address complex issues and serves as the national voice of the 10 HRSA funded Regional Public Health Training Centers."













According to the Washington Post, depression and anxiety spiked among African Americans after George Floyd's death.



Asians and African Americans show sharp increases in mental health problems amid protests, while white Americans were relatively untouched, Census Bureau finds...

Source: Washington Post article by Alyssa Fowers and William Wan, June 12, 2020.
<https://www.washingtonpost.com/health/asians-and-african-americans-show-sharp-increases-in-mental-health-problems-amid-protests-while-white-americans-were-relatively-untouched-2020-06-12/>



Will Jawando,
Montgomery County
(MD) Councilmember

"[W]hether it is police-involved killings or disparate health outcomes where [Black-American] patients can't get treatment because they are not seen as being sick, or financial redlining in certain ZIP codes, food deserts, or people of color getting hit by cars more often because their communities aren't walkable -- it's all ultimately due to racism."

According to the Los Angeles Times, in June 2020, an Ohio lawmaker and ER doctor asked if hygiene is why 'colored' people get COVID-19.



A Republican lawmaker questioned on the Ohio Senate floor if "the colored population" is contracting coronavirus at disproportionate rates because they do not wash their hands "as well as other groups"...

Source: Los Angeles Times article by Associated Press, June 11, 2020.
<https://www.latimes.com/news/nation/story/2020-06-11/ohio-lawmaker-asks-if-hygiene-is-reason-colored-people-get-virus>



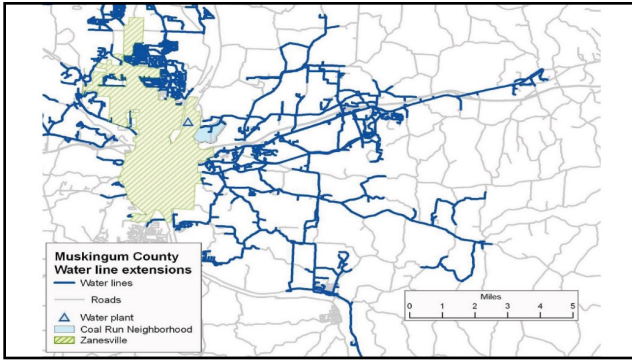


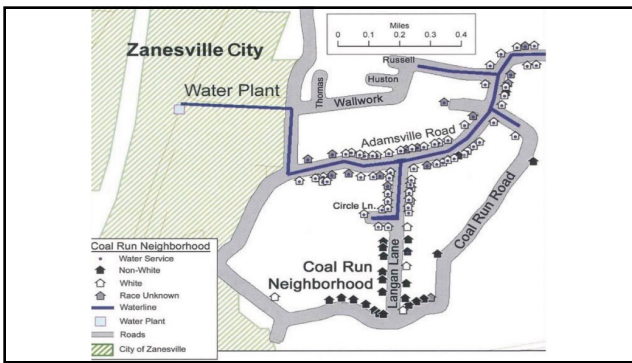












Case No. 2:03-cv-1047
United States District Court, S.D. Ohio

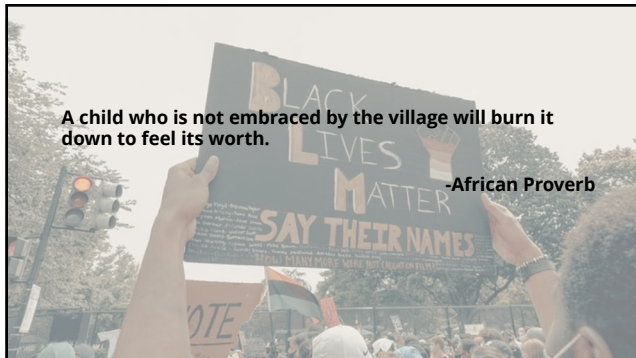
Kennedy v. City of Zanesville

505 F. Supp. 2d 456 (S.D. Ohio 2007)
Decided Sep 7, 2007

Case No. 2:03-cv-1047.
457 September 7, 2007. *457

Rachel Kimberly Robinson, Kimberly M. Skaggs, Equal Justice Foundation, Kerstin Sjoberg-Witt, Shawn J. Organ, Jones Day, Stefan J. Schmidt, Stephanie R. Bostos Demers, Ohio Attorney General, Columbus, OH, Stephen M. Dane, Reiman Dane PLLC, Perrysburg, OH, Beth A. Wilson, Jennifer W. Steves, Cooper Walinski LPA, Toledo, OH, Joshua M. Thibault, LLC

Judgment of Defendants Washington Township, Clint W. Cameron, Paul R. Bunting and Douglas Culbertson ("Township Defendants"); (3) Motion for Summary Judgment of Defendants Muskingum County, Don Madden, Ed Kenily, and Dorothy Montgomery ("County Defendants"); and (4) Plaintiffs' Motion for Partial Summary Judgment on the Liability of Muskingum County for the East Muskingum Water Authority. After thorough review, this Court **GRANTS** Plaintiffs' Motion for Partial Summary Judgment. **GRANTS**



Belonging and the Public Health Workforce

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Second, I see a workforce that is competent in applying health and racial equity principles across public health policies and practice.

Third, I see a workforce that is prepared to serve as advocates for public health.

Belonging and the Public Health Workforce

- Our interests, motivation, happiness, and health are tied to the feeling that we belong to a greater community that may share common interests, aspiration, goals, or mission.
- Belonging is the gateway to full self-esteem and self-actualization.
- And, that should be our goal for each and every one of the people we serve in public health, regardless of race.

Question for the Viewers

Is your organization active in operationalizing racial justice principles in your work?

- A. Yes, at a cross-sector or cross-departmental level
- B. Yes, at an individual or internal organizational level
- C. No
- D. I'm not sure

NOTE: If you answered "Yes," please share details in the chat box.



Moving from Conversation to Action

Nationwide declarations by public health agencies that racism is a public health crisis has been an important first step to advance racial justice in health.

Rooting these declarations in strategic planning with adequate resources ensures that they are effective.

Racial Justice Competency Model (RJCM)

A collaboration between the 10 regional PHTCs and their partners, RJCM gives public health practitioners a tool to challenge organizational policies and equity initiatives that uphold institutional and structural racism.

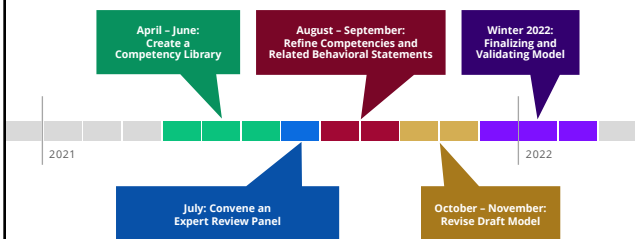
Our Goal

Establish clear, specific, consensus-based recommendations and produce a competency set.

Applicable to the PHTCs, our partners, and local and state health departments to:

- Develop training
- Write job descriptions, and
- Evaluate performance

Timeline: 2021 - Present



Phase 1: Compile a Competency Library

Solicited Competency Models, Frameworks, etc. from:

- All 10 Regional PHTCs
- Community Based Training & Technical Assistance Partners
- Expert Review Panel
- Included over 650 statements

Phase 2: Convene Expert Review Panel (ERP)

Comprised of 35 public health practitioners from:

- State, local, and tribal public health departments
- Federal government agencies (HRSA)
- Non-governmental organizations
- Schools of public health

Role of the ERP: Prioritize competencies and provide feedback on the competency model development process.

Phase 3: Refine Competencies and Behavioral Statements

The Competency Prioritization by the ERP included:

- Survey administered to 35 participants of the Expert Review Panel
 - Received 16 responses (46% response rate)
 - Respondents indicated "Yes" or "No" if they believed a given competency is a priority, and had opportunity to provide open-ended comments about sets of competencies

Phase 4: Refine Competencies and Related Behavioral Statements

Starting with over 650 competency statements or standards, we have since:

- Narrowed down to just over 70 statements
- Categorized them into Individual Statements and Leadership/Organizational Statements
- Revised statements to ensure there is no redundancy
- Used 10 EPHS as overarching framework for organization

From here, the ERP reviews the second draft model, leading to further refining, revising, and development.

Phase 5: Validate Model

In Winter 2022, content validation examples will be presented at virtual town halls. This will bring together an appropriate focus group to:

- Check for ease of understanding and implementation
- Confirm that statements and behavioral language are the best indicators for performance across tiers
- Further refine competency statements and behavioral language, as necessary

Following this, a pilot training will be developed to assess the model.

Phase 6: Finalizing and Disseminating Model

In the final phase of development, we will:

- Check for ease of understanding and implementation
- Confirm that statements and behavioral language are the best indicators for performance across tiers
- Further refine competency statements and behavioral language, as necessary

Following this, a pilot training will be developed to assess the model.

Future of the Model

We see the competency model as a living document. In the future, we will evaluate its use and uptake in:

- Trainings
- Publications
- Books, articles, presentations
- Professional development
- Job descriptions, Individual Development Plans, etc.

This model will become a part of the National Coordinating Center evaluator and will continue to receive ERP feedback.

Key Takeaways

The RPHTC and Racial Justice Competency Model can be used to help all of us in the field:

- ✓ Cultivating cultures of belonging in our public health workplaces
- ✓ Improve our understanding of health equity, racial disparities, and racial justice
- ✓ Build the competency of the workforce to use principles of health equity and racial justice in the everyday practice of public health

To help us move this forward, please:

- ✓ Sign up to be a pilot tester
- ✓ Promote the competency model
- ✓ Practice the competency model

A Chat with Montrece Ransom and Tamira Moon



Allene Mares



Montrece Ransom



Tamira Moon

QUESTIONS?



To ask a question, please click the  icon in the Zoom toolbar to open your Q&A Pod.

Resources

Moving from Conversation to Action: Developing a Racial Justice Competency Model for Public Health Professionals

National Network of Public Health Institutes
<https://nnpi.org/moving-from-conversation-to-action-developing-a-racial-justice-competency-model-for-public-health-professionals/>

Implicit Association Test

Project Implicit, Harvard University
<https://implicit.harvard.edu/implicit/about.html>

Public Health Law Academy

ChangeLab Solutions
<https://www.changelabsolutions.com/coal-sequence/ohio>

Open Data as Evidence: Ohio, USA: Kennedy V. City of Zanesville (Coal Run case)

Open Data's Impact, GovLab
<https://openimpact.org/wp-content/uploads/2019/04/Kennedy-V.-City-of-Zanesville-United-States.html>
