DISRUPTION

Dismantle, undo and rebuild

Recognizing and ~~Working~~ with Power at Individual, Interpersonal and Structural Levels

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National Collaborating Centre
for Determinants of Health

Centre de collaboration nationale
des déterminants de la santé

National Collaborating Centre for Determinants of Health

Our focus: Social determinants of health & health equity

Our audience: Public health practitioners, decision makers, & researchers

Our work: Translate & share evidence to influence work on the social determinants & health equity

BOOSTING MOMENTUM
Applying Knowledge to Advance Health Equity

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Centre de collaboration nationale de la santé autochtone
Prince George, B.C. | www.nccah.ca

National Collaborating Centre for Infectious Diseases
Centre de collaboration nationale des maladies infectieuses
Winnipeg, MB | www.nccid.ca

National Collaborating Centre for Determinants of Health
Centre de collaboration nationale des déterminants de la santé
Antigonish, N.S. | www.nccdh.ca

National Collaborating Centres for Public Health
Centres de collaboration nationale en santé publique

National Collaborating Centre for Environmental Health
Centre de collaboration nationale en santé environnementale
Vancouver, B.C. | www.ncceh.ca

National Collaborating Centre for Methods and Tools
Centre de collaboration nationale des méthodes et outils
Hamilton, ON | www.nccmt.ca

Centre de collaboration nationale sur les politiques publiques et la santé
National Collaborating Centre for Healthy Public Policy
Montréal-Québec, QC | www.ncchpp.ca

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- Analyze how power is enacted through personal, organizational and structural processes that create and reinforce social and health inequities

- Reflect on strategies to address power imbalances in practice

- Identify specific interventions to address racism and colonialism

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On Power

Power is about one's ability to influence or control people, events, processes or resources.

Power	Privilege
• Comes from being in a dominant group and/or is relative to circumstance and context • Power relations are central to shaping how resources are made available.[1]	• Inherent in our social structures, in the way society is organized and how it functions. • Not equally distributed.[2]

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Matrix of Oppression

Social Identity Categories	Privileged Social Groups	Border Social Groups	Targeted Social Groups	Ism
Race	White People	Biracial People (White/Latino, Black, Asian)	Asian, Black, Latino, Native People	Racism
Sex	Bio Men	Transsexual, Intersex People	Bio Women	Sexism
Gender	Gender Conforming Bio Men And Women	Gender Ambiguous Bio Men and Women	Transgender, Genderqueer, Intersex People	Transgender Oppression
Sexual Orientation	Heterosexual People	Bisexual People	Lesbians, Gay Men	Heterosexism
Class	Rich, Upper Class People	Middle Class People	Working Class, Poor People	Classism
Ability/Disability	Temporarily Abled-Bodied People	People with Temporary Disabilities	People with Disabilities	Ableism
Religion	Protestants	Roman Catholic (historically)	Jews, Muslims, Hindus	Religious Oppression
Age	Adults	Young Adults	Elders, Young People	Ageism/Adultism

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Health Equity

Health equity means all people (individuals, groups and communities) have a fair chance to reach their full health potential and are not disadvantaged by social, economic and environmental conditions.

Absence of unfair, systemic and avoidable differences in health

NCCDH Glossary of Essential Health Equity Terms
http://nccdh.ca/resources/glossary/

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ZIP CODE 90002 Life Expectancy 72
ZIP CODE 94301 Life Expectancy 86

health happens here

www.calendow.org

Picture from:
http://kerncta.blogspot.ca/2013/04/obesity-prevention-summit-2013.html

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Reflection

How can understanding racism and colonialism make you a more impactful nurse?

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http://nccdh.ca/resources/entry/lets-talk-racism-and-health-equity

FIGURE 1: PATHWAYS TO RACIAL HEALTH INEQUITIES[14-16]

COLONIAL AND RACIST IDEOLOGY (WORLDVIEW)	STEREOTYPES BASED ON RACE (BELIEFS)	PREJUDICE (ATTITUDES)	RACIAL DISCRIMINATION (BEHAVIOUR)	RACIAL INEQUITY (IMPACT)
White supremacy ———— Settler colonialism ———— Structural racism	Often negative, exaggerated belief, fixed image, or distorted idea held by persons, groups, political/economic decisionmakers - is embedded in, and reinforced by oppressive power relations	A way of thinking based on stereotypes - is embedded in, and reinforced by oppressive power relations	Action or inaction made possible implicitly or explicitly by oppressive power relations ———— Individual behaviours ———— Institutional practices ———— Societal policies and norms	Inequitable social and health outcomes and experiences

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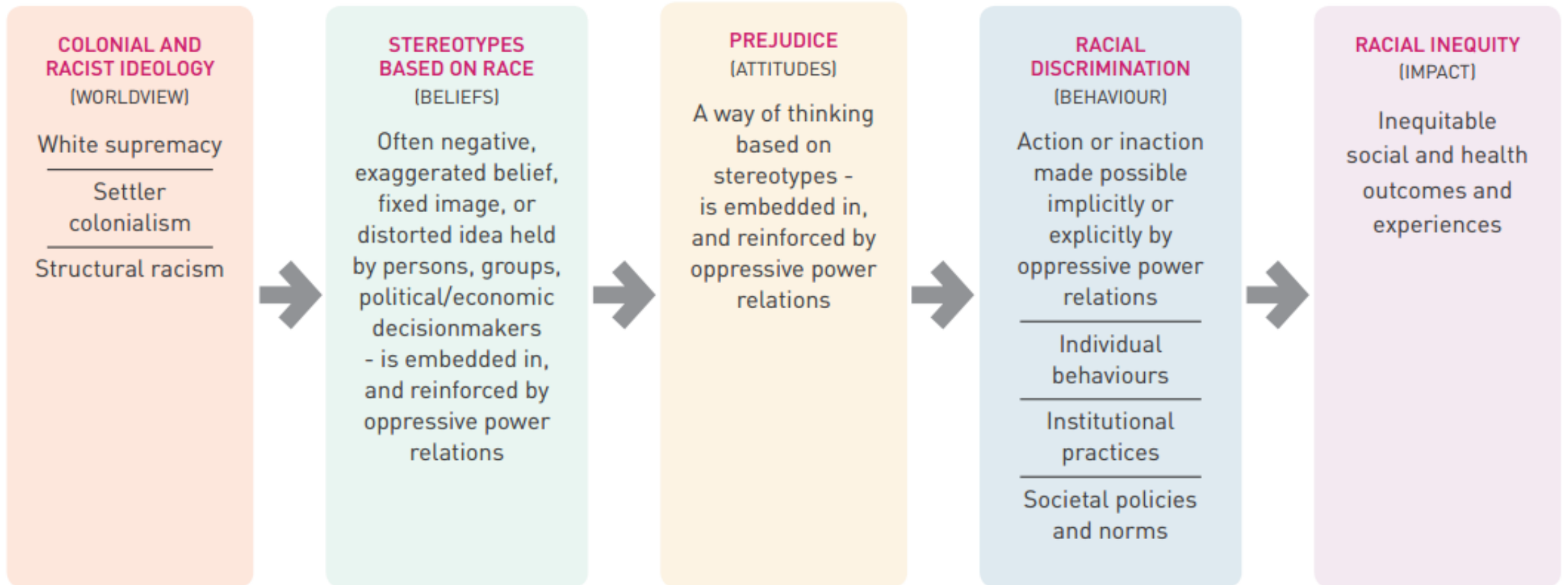http://nccdh.ca/resources/entry/lets-talk-racism-and-health-equity

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"But race is the child of racism, not the father. And the process of naming "the people" has never been a matter of genealogy and physiognomy so much as one of **hierarchy**. Difference in hue and hair is old. But the belief in the preeminence of hue and hair, the notion that these factors can correctly organize a society and that they signify deeper attributes, which are indelible—this is the new idea at the heart of these new people who have been brought up hopelessly, tragically, deceitfully, to believe that they are white."

— Ta-Nehisi Coates, Between the World and Me

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Anti-indigenous racism

Settler colonialism
Dispossessions

White supremacy

Slavery
Capitalism
Colonialism

Islamophobia
Anti-immigrant sentiments
Justifies wars and invasions

Anti-black racism

Orientalism

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http://nccdh.ca/resources/entry/lets-talk-racism-and-health-equity

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White supremacy

"a system that assumes that the practices of Whiteness are the right way of organizing human life" [3]

- Assigns value and grants opportunities and privileges based on race

- Exists in all aspects of society: politics, history, culture, economics social systems and institutions.

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Systemic/structural racism

- Assigns value and grants opportunities and privileges based on race

- Exists in all aspects of society: politics, history, culture, economics social systems and institutions.

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"the permanent occupation of a territory and removal of indigenous peoples with the express purpose of building an ethnically distinct national community"[4]

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- Racism that targets Black people/people of African descent

- Blackness defined as the antithesis of Whiteness

- Histories of slavery, colonization, ongoing policies

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Orientalism

- Defining non-White people as "Other", exotic and different
- As inferior
- E.g. Islamophobia; anti-immigration sentiments

Would the real Canadians please stand up

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How does racism affect health?

- state-sanctioned violence and disruption of relationships with traditional lands;

- racism-induced psychosocial trauma;

- economic and social deprivation and inequality such as reduced access to employment, housing and education;

- increased exposure to toxic social, physical, and environmental environments;

- inadequate or inappropriate health and social care;

- racially motivated individual and structural violence; and

- harmful changes to internal biological processes

- Inequities not the result of single, distinct factors.

- They result from intersections of different social locations, power relations and experiences

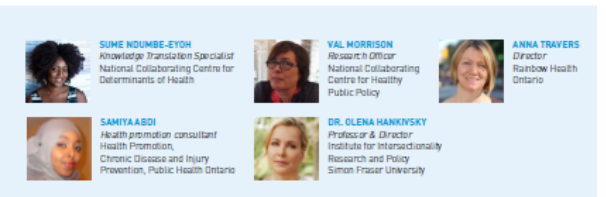- Intended to move beyond silo, single issue analysis and action

INTERSECTIONALITY AND HEALTH EQUITY

Intersectionality is an approach to understanding and influencing the multiple forces that shape social inequalities and discrimination. As such, it can serve as a useful framework for public health action to improve the social determinants of health and health equity. In spite of this uptake in public health research, practice and policy appears to be low.

The National Collaborating Centre for Determinants of Health and National Collaborating Centre Healthy Public Policy hosted a conversation to explore the relevance and application of intersectionality in public health practice and action to improve health equity. The group interview has been edited for length and clarity.

"Intersectionality is a theoretical framework that posits that multiple social categories (e.g., race, ethnicity, gender, sexual orientation, socioeconomic status) intersect at the micro level of individual experience to reflect multiple interlocking systems of privilege and oppression at the macro, social-structural level (e.g., racism, sexism, heterosexism). Public health's commitment to social justice makes it a natural fit with intersectionality's focus on multiple historically oppressed populations."

(BOWLEG, 2012)

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http://nccdh.ca/resources/entry/public-health-speaks-intersectionality-and-health-equity

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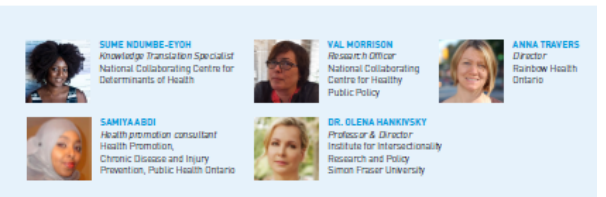- Intended to move beyond silo, single issue analysis and action

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PUBLIC HEALTH SPEAKS

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Action-oriented

Political strategy

Systemic and political change

Addresses racism and interlocking systems of oppression

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EMBRACING DECOLONIAL ANTI-RACIST PRACTICE

1. Settler colonialism and racism ≠≠ Diversity and multiculturalism

2. Stay focused on settler colonialism and racism (+ intersectionality)

3. Centre the leadership of Indigenous and racialized peoples

4. Broaden how you think about racism

5. Focus on impact not intent

6. Address internalized, interpersonal and institutional racism

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DECOLONIAL ANTI-RACIST PRACTICE

Be attentive to both micro and systemic expressions of power

Micro-Aggressions [5]

brief and commonplace daily verbal, behavioral, and environmental indignities, whether intentional or unintentional, that communicates hostile, derogatory, or negative slights and insults to the target person or group.

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"good relations across differences take time and care, and a willingness to live in contention." [6]

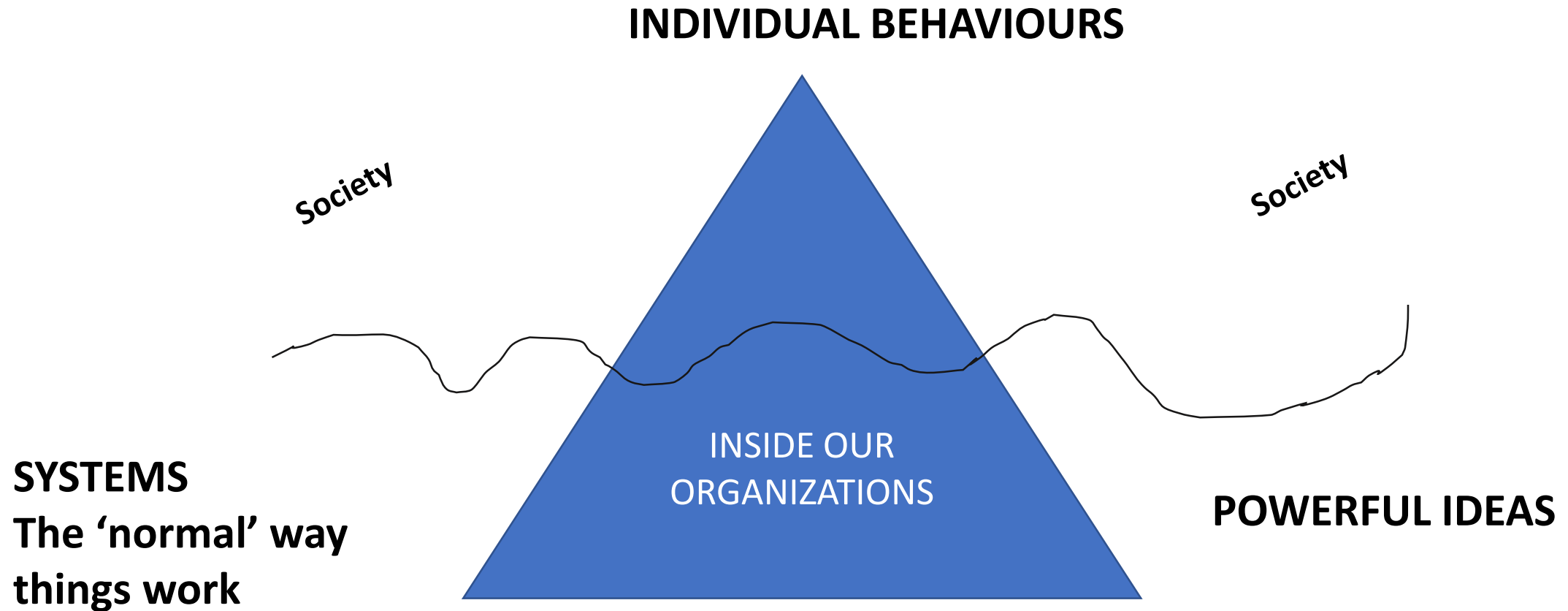RESOURCE: Qualities of Authentic Relationships across Differences
http://pace4change.org/includes/documents/AR_Qualities_Pace_and_Pizana.pdf

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How is power working? The triangle tool

INDIVIDUAL BEHAVIOURS

Society   Society

INSIDE OUR ORGANIZATIONS

SYSTEMS
The 'normal' way
things work

POWERFUL IDEAS

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How is power working? The triangle tool

INDIVIDUAL BEHAVIOURS
e.g. denial of treatment to Indigenous man in an emergency room

SYSTEMS
The 'normal' way things work
Lack of appropriate services
Staff not adequately trained
Lack of supportive policies support staff discrimination

INSIDE OUR ORGANIZATIONS

POWERFUL IDEAS
Indigenous people are alcoholics

IMPACT

- Policy, research and evaluation
- Sustainability and accountability
- Public education and awareness
- Community collaboration
- Population-specific anti-racism initiatives:
  - Indigenous-focused anti-racism strategy
  - Anti-Black Racism Strategy
  - Ontario Public Service Anti-Racism Strategy

A BETTER WAY FORWARD

Ontario's 3-Year Anti-Racism Strategic Plan

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https://www.ontario.ca/page/better-way-forward-ontarios-3-year-anti-racism-strategic-plan

Truth and Reconciliation Commission of Canada: Calls to Action

94 Calls to Action

How are you acting on these?

http://www.trc.ca/websites/trcinstituti on/File/2015/Findings/Calls_to_Action _English2.pdf

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15 ideas for decreasing the impact of racism on health

(feel free to steal any of these)

Wellesley Institute
advancing urban health

#stopracism15
@wellesleyWI

1. Decrease Geographical Segregation	**2. Ensure Youth from Different Groups Interact with Each Other**	**3. Get Involved in Politics**	**4. Use Race Impact Assessments for New Policies**	**5. Get Into People's Fantasies to Change Their Realities**
6. Decrease Racism in the Workforce	**7. Strengthen Hate Crime Law in Canada**	**8. Avoid Unnecessary Mention of Race in Media**	**9. Create Public Awareness Strategies**	**10. Start or Join a Local Anti-Racism Group**
11. Teach Resilience in Schools	**12. Legislate Positive Race Relations in Public Services**	**13. Fund Programs Based on Equity Compliance**	**14. Collect Data**	**15. Get the Right Research**

"Resurgence cannot occur in isolation. A collective conversation and mobilization is critical to avoid reproducing the individualism and colonial isolation that settler colonialism fosters"

- Leanne Simpson, Nishnaabeg scholar

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HOW DO WE MEASURE PROGRESS?

By the extent to which the material and symbolic wellbeing of racialized peoples is improved.

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