

Dialogues About Race Week 3 Antiracist Clinical Practices

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Overview



What is Antiracism?



Why is Antiracist Clinical Care Important?



Antiracist Clinical Practices



Mistakes & Repair



Case Scenarios

What is Antiracism?

Racism: the merging of racist ideas and racist policies which produces and normalizes racial oppression and inequities

Antiracism: a state of mind, feeling, political commitment, and set of actions aimed at eradicating racial oppression and inequities

Why is Antiracist Clinical Care Important?

Racism is an important social determinant of health and mental health disparities

Health and health care disparities adversely impact population health

Clinical interactions are vulnerable to racial bias and discrimination

Providers are more likely to do harm when they deny or are unaware of their racial biases

Antiracist Clinical Practices

Prior to Patient Interactions

**Commit to
Continuous
Education &
Learning**

**Engage in Self-
Reflection & Build
Self-Awareness**

**Consider
Systemic
Manifestations of
Racism**

More Antiracist Clinical Practices

During Patient Interactions

Build Alliances

**Respect
Patient Self-
Determination**

Self-Reflection

Key Reflection Questions

During Patient Interactions

- ▶ How well am I practicing inclusion in this conversation?
- ▶ Am I keeping an open mind, or am I being judgmental?
- ▶ Am I really listening to understand?
- ▶ Should I be asking more clarifying questions?
- ▶ Are we still having a dialogue, or are we having a debate?
- ▶ Are there things being said that are causing me to become defensive?

Following Patient Interactions

- ▶ How did I do? What could I have done differently?
- ▶ What biases did I notice in my thinking?
- ▶ What made me say X or Y?
- ▶ How did I interpret the patient's response?
- ▶ Why did I interpret that situation so differently from the patient?
- ▶ What do I need to learn for these types of conversations to go better next time?

Mistakes & Repair



Mistakes will happen!



Prioritize acknowledging and correcting mistake or repairing the harm



Respond from a place of humility



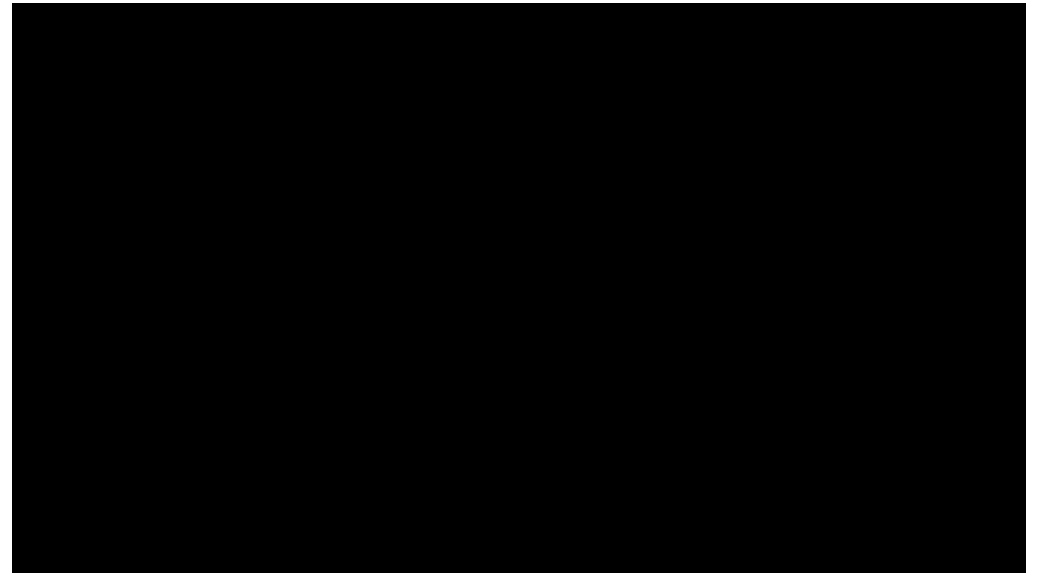
Seek consultation to process challenging feelings you may experience



Case Scenarios

Case #1: Integrating Culture into Treatment & Care

- ▶ What are some ways that we can ask our patients about aspects of their culture and identities?



Case #2: Attending to Rupture & Respecting Patient Self-Determination

- ▶ **Scenario:** You are treating a 57-year-old, Black, cis man (he/him pronouns), Army Veteran with a history of PTSD, Type II Diabetes, and headaches.
- ▶ You are discussing treatment recommendations with the patient and the conversation starts to become tense due to disagreements. The patient begins to shut down stating that he does not feel you are hearing or understanding him and his experience.
- ▶ **What are effective, antiracist ways of responding to this patient's disclosure?**

Case #3: Building Trust & Respect for Patient Self-Determination

- ▶ **Scenario:** You are treating a 34-year-old, Dominican, trans woman (she/they pronouns) with a history of anxiety and chronic neck/back pain.
- ▶ She is a new patient who is hoping to establish care for chronic pain difficulties. Per your review of the patient's chart, you note that they have had previous difficulties establishing rapport with providers and is reportedly non-adherent with prescribed pain medications. When discussing treatments used for pain, the patient reported that she does not like pain medications and prefers the use of herbal, plant-based remedies, stretching, and prayer.
- ▶ **In what ways can you cultivate an environment for effective, cross-cultural dialogue and antiracist care?**

Case #4: Acknowledging & Repairing Harm

- ▶ **Scenario:** You are treating a 22-year-old, Navajo and White, cis woman (she/her pronouns) with a history of depression.
- ▶ During your third follow-up appointment, she discloses that there has been something on her mind since her last visit with you that she wanted to discuss. She expresses that she felt the previous appointment went well until the end when you two were discussing next steps. The patient recounts, how you stated, “We’ll do X, Y, and Z and see what happens, have a pow wow about it, and go from there.” The patient shares that your use of this term in this context was disrespectful and disparaging given the cultural significance of these events for Indigenous communities.
- ▶ **What are effective, antiracist ways of responding to this patient’s disclosure?**



Wrap-Up

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More References & Additional Resources

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