



Antiracism Efforts in a Family Medicine Clinic



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Background

Due to ongoing health inequities and disparate quality of health care, antiracism is an initiative of the Society of Teachers of Family Medicine ([link](#))

URMC created Equity & Anti-Racism Action Plan ([link](#)). We determined a need to tailor these efforts within the Department of Family Medicine to track over time.

Highland Family Medicine created position to coordinate antiracism efforts, including forming the Antiracism Change Team in May 2021

Racism = 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.

Antiracism = the practice of actively identifying and opposing racism. The goal of anti-racism is to actively change policies, behaviors, and beliefs that perpetuate racist ideas and actions.

Methods

1) Design survey measuring different aspects of Antiracism Climate and Culture, including: -Leadership/Management (e.g., “My manager collaborates with our team to share decision-making”)

- Team (e.g., “My team demonstrates cultural humility and practice(s) racial awareness and sensitivity in our interactions with one another”)
- Department (e.g., “The DFM/HFM values and empowers staff whose backgrounds, beliefs, and experiences are different from their own”)
- Personal Experiences (e.g., “I am knowledgeable of how racism impacts the lives of our patients, and the larger Rochester community”)
- Department Needs (e.g., “The DFM/HFM should provide trainings and dialogue about racial inequities in the Rochester community”)
- Policies & Procedures (e.g., “The DFM/HFM has a mechanisms in place to address complaints about racial inequities and incidents of discrimination or bias in the workplace”)
- Open-ended questions: how to improve, consequences of lack of implementation, and concerns about focus on antiracism

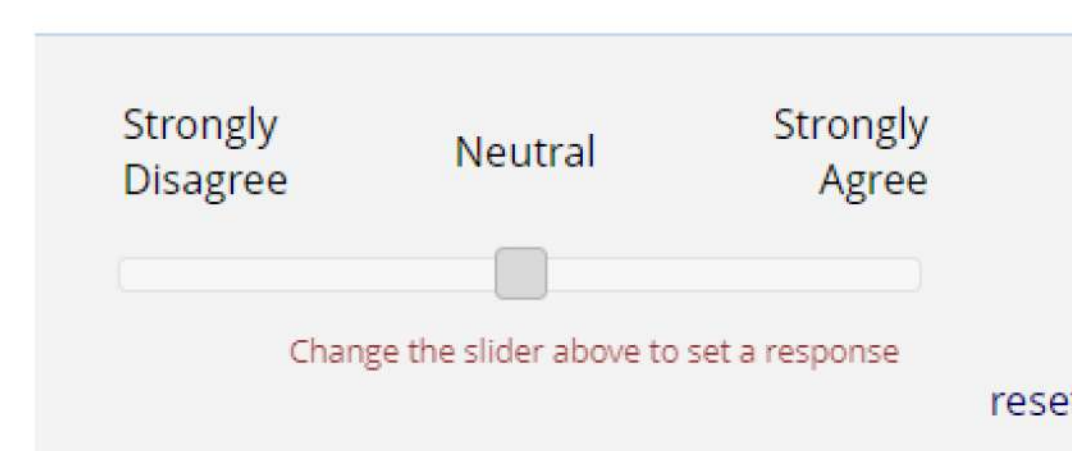
2) Implementation of survey and data analytic plan: Compare BIPOC and non-BIPOC

-Note: statistical confounds of exploratory analysis

3) Follow-up listening groups

4) Use results to help to create 3-year strategic plan

Survey = 102 completed surveys



(BIPOC = 20; non-BIPOC = 78)

Results

In terms of race/ethnicity, independent t-tests revealed noteworthy differences between: 1: BIPOC (68.4) and non-BIPOC (80.4) on perception that manager recognizes the importance of race, racial equity, and inclusion, $t(94) = -1.951, p = .043$

4: BIPOC (61.4) and non-BIPOC (70.3) on perception DFM will take appropriate action in response to incidents of discrimination and/or bias, $t(89) = -1.243, p = .103$

12: BIPOC (53.0) and non-BIPOC (71.2) on perception that DFM/HFM values and empowers staff whose backgrounds, beliefs, and experiences are different from their own, $t(89) = -1.243, p = .103$

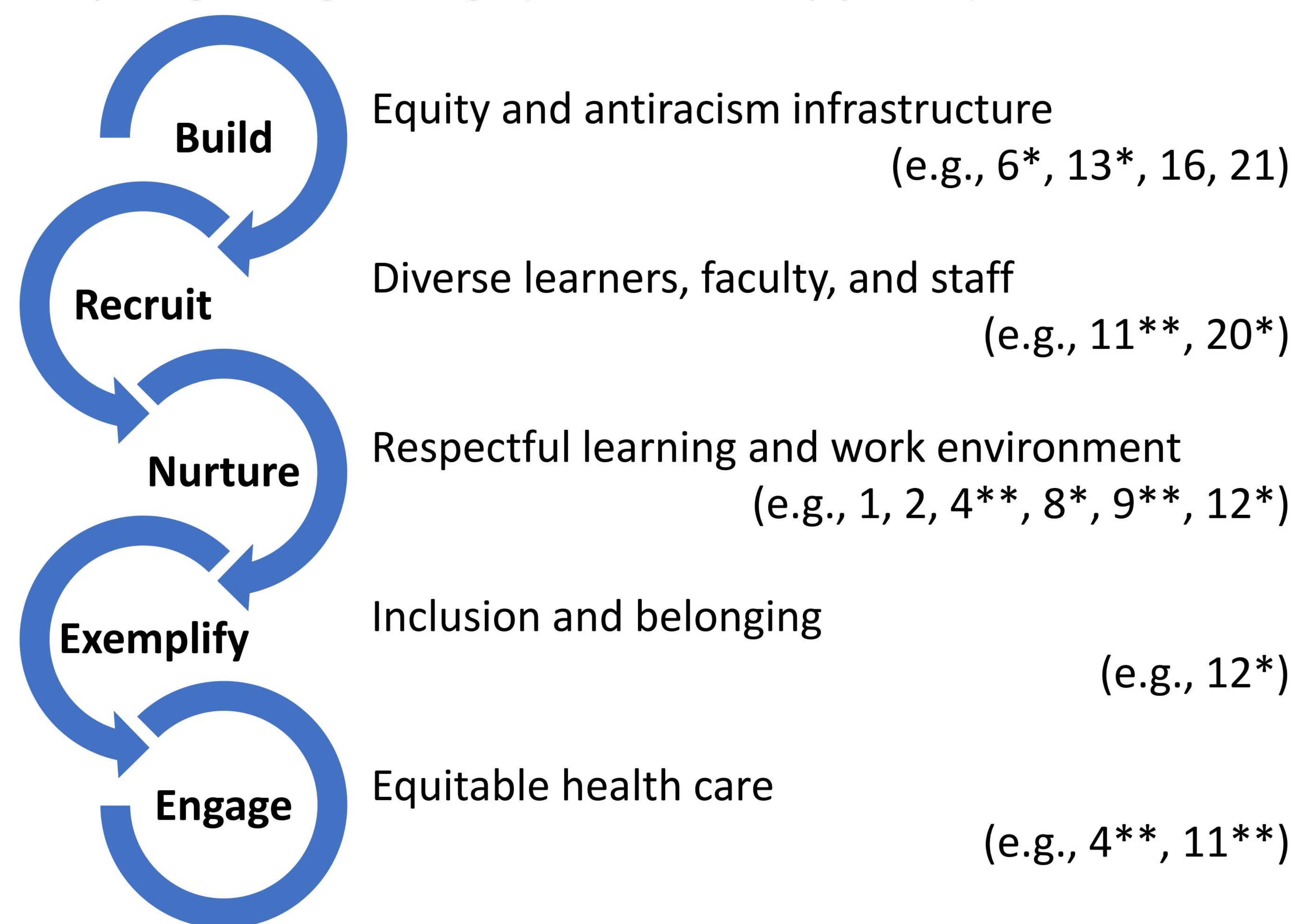
26: I understand the procedures for reporting incidents of discrimination and/or bias in the workplace.

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|--|------------------|-------------------------|
| No = 39 | I don't know = 5 | Yes = 58 |
| I understand the procedures for reporting incidents of discrimination and/or bias in the workplace | | Mean = 71.4 (SD = 21.9) |

In terms of position at HFM/DFM, ANOVAs revealed noteworthy differences between: 1, 2, 3: managers’ (90+) and MA/PRA’s & administrative staff’s (60s) perception of their manager’s leadership (e.g., collaborative, valuing antiracism in decision-making); e.g., 1: $F(6) = 2.781, p = .016$

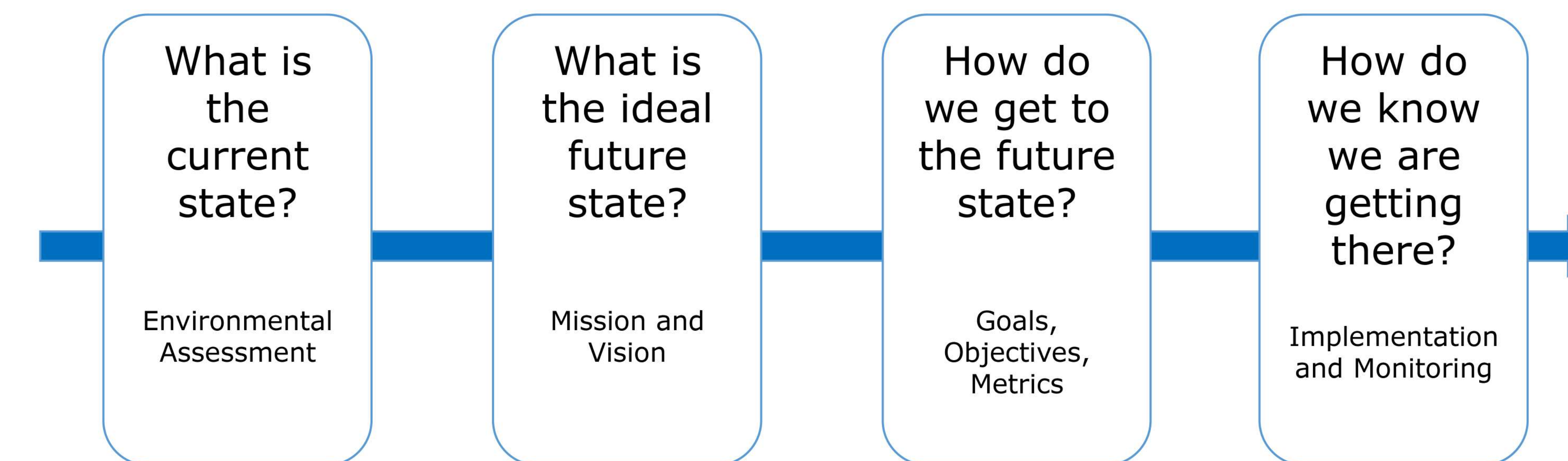
19: MAs/PRA’s (67.94) and Administrative staff (53.71) feel much less empowered to speak up/out against racism than managers (95.00)

Identify strengths and growth edges (w/associated survey questions):



Note. * ≥ 75 ; ** ≥ 70

Discussion



Differences in perception depending upon social positioning and roles within organization (i.e., problem-posing hypothesis)

LARGE interest reported in ongoing training and reflections surrounding antiracism.

Implementations

- 1) ACT and DFM Leadership create 3-year strategic plan
- 2) Facilitation Skills Training based in Nonviolent Communication
- 3) Restorative justice and community building
- 4) Ongoing policy review (e.g., dismissal policy)

Future Directions

- 1) Reassess survey annually
- 2) Disseminate survey for other organizations to use

Limitations

How to co-create sustainable antiracist organization? Culture shift is inevitable with expected (e.g., residents) and unexpected (e.g., change in director) turnover

Acknowledgments

Antiracism Change Team

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