

KEY PRIORITY

ELIMINATING STRUCTURAL RACISM

What is the problem?

Equal opportunity is a basic American value that most people strive for and residents of Cuyahoga County are no exception. However, despite progress we have made in our county, opportunities are not the same for everyone, and we remain largely divided by factors such as community conditions, income, skin color, and ethnicity. Many racial and ethnic groups face steep obstacles and barriers to living healthy and prosperous lives. This is because decisions that have been made and continue to be made—both intentionally and unintentionally—oppress certain racial and ethnic groups, limiting their opportunities, and creating extreme disadvantages for health. As a result, many people in our county are not as healthy as they should be and, because of this, they are living shorter lives.

Research shows that improving the conditions where people live, work, learn, and play, will improve their health. Healthy people need healthy places, so place matters. Place is not the only aspect of health that matters. Race also matters to health. People of color, especially those with the lowest incomes, have some of the worst health outcomes of anyone in Cuyahoga County. The statistical portrait of our county, broken down by race, clearly reveals the stark inequities between people of color and their white counterparts.

For example:

- » The poverty rate is 11% for whites, 31.1% for blacks, and 36.7% for Hispanics.
- » The unemployment rate is 9.6% for whites, 21.5% for blacks, and 17.8% for Hispanics.
- » 90% of whites have a high school diploma, compared with 81.8% of blacks, and 69.6% of Hispanics.
- » Three times as many black babies die compared to white babies.

Many racial and ethnic groups face barriers to healthy living that must be addressed to make a real and sustainable difference in the health of Cuyahoga County residents. Institutional and structural racism is at the root of such barriers.

The threads of structural and institutional racism are deeply woven in society. Racial differences in power, status, and access to opportunities are just a few examples. This type of racism also impacts people's views of themselves, their interpersonal relationships, their health, and quality of life. The pathways connecting structural racism to health are complex and multidimensional. Structural racism often is a barrier to economic opportunities, leads to social isolation and exclusion, and becomes a powerful stressor in people's lives leading to negative health effects. In addition, it plays a role in who gets jobs, how schools treat students, and even the availability of transportation in a neighborhood. It's compounding factors like these that lead to racial health disparities, including increased rates of chronic disease and disability, higher rates of infant death, and shorter life expectancy.

Structural and institutional racism are not new issues in Cuyahoga County. In fact, this type of racism is often unintentional, resulting from years of governmental policies and organizational practices that have limited

opportunities for certain people, living in particular neighborhoods. Like other cities nationally, Cleveland, and even some of its inner-ring suburbs, has dealt with this challenge over the course of decades, and it continues today.

Recent research, commissioned by the Cuyahoga County PLACE MATTERS team and conducted by the Kirwan Institute for the Study of Race and Ethnicity at The Ohio State University, uncovered data showing that past housing, real estate, and planning policies disadvantaged communities of color and immigrant groups in our county. It also revealed how these groups could not take advantage of critical opportunities, such as a fair loan toward home ownership in a community of their choice. Discriminatory housing policies, created after the turn of the 20th Century, resulted in a lending system that provided loans to white individuals and families, while denying them to people of color, creating areas in cities where some people could not receive home loans. The color-coded maps, created by the lending system at that time, showed these disadvantaged areas in red and became known as “redlined” areas. *(See Map 4 on page 13)* At the same time, people in areas where they could receive loans (indicated in blue and green) often worked to keep people of color out of their neighborhoods to protect their investments.

As a result, people living in these redlined communities were unable to build personal wealth through homeownership. In what became a vicious cycle, employers denied them access to employment, and banks denied them loans. Today, these redlined communities still have a higher concentration of poverty, fewer resources, more environmental risk factors, lack of access to healthy foods, and few safe places for physical activity—all leading to long-term, elevated stress levels and poor health outcomes.

This is just one important example of how structural racism creates barriers for entire communities. These practices are not limited to the past. Structural racism is still influencing our systems and policies today.

What are the solutions?

To make sustainable improvements in the health of all people in Cuyahoga County, HIP-Cuyahoga understands it must address the root causes of poor health and health inequities, including structural and institutional racism. Structural racism is prevalent and embedded in every system, institution, and policy. Individuals and organizations need to become critically aware of how and why personal and group assumptions can negatively affect thinking, feeling, and actions towards racial and ethnic groups. This concept, known as perspective transformation, is the way to start to understand things differently and, as a result, act in new and different ways.

HIP-Cuyahoga and PLACE MATTERS are examples of two partnerships using perspective transformation as a tool to think differently and act differently to improve opportunities, and in turn, health in Cuyahoga County. Perspective transformation starts with learning about the historical forces and using health equity data to understand the policies and practices involved in creating the current inequities, such as redlining discussed

KEY TERMS

INSTITUTIONAL RACISM: discriminatory treatment, unfair policies and practices, and inequitable opportunities and influence within organizations and institutions, based on race.

LIFE EXPECTANCY: the average number of years a population of a certain age is expected to live, given a set of age-specific death rates in a given year.

OPPRESS/ OPPRESSION: the systematic targeting or marginalization of one social group for the social, economic, and political benefit of a more powerful social group.

PEOPLE OF COLOR: refers to groups of African Americans, Asian & Pacific Islanders, Native Americans, and Hispanics.

PERSPECTIVE TRANSFORMATION: the process of becoming critically aware of how and why people’s assumptions limit the way they perceive, understand, and feel about the world and how they act on this understanding.

KEY TERMS

PLACE MATTERS: an initiative of the National Collaborative for Health Equity focused on building the capacity of leaders and communities around the country to identify and address the social, economic, and environmental factors that shape health and health inequities. Cuyahoga County has a local PLACE MATTERS team (<http://cuyahoga.placematters.com>).

PRIVILEGE: when one group has something of value that is denied to others simply because of the group they belong to, rather than because of anything they have done or failed to do.

SOCIAL DETERMINANTS OF HEALTH: the circumstances, in which people are born, grow up, live, work, and age. These circumstances are, in turn, shaped by a wider set of forces: economics, social policies, and politics.

STRUCTURAL RACISM: racial bias across and within society. It's the cumulative and compounded effects of an array of factors such as public policies, institutional practices, cultural representations, and other norms that work in various, often reinforcing, ways to perpetuate racial inequity.

previously. With this understanding, organizations, institutions, and community leaders must work to address the structural and institutional racism that exists within our organizations and systems by examining current practices and policies, and making the right changes to significantly improve conditions for all people living in Cuyahoga County.

The Eliminating Structural Racism subcommittee understands that perspective transformation must begin with the members of HIP-Cuyahoga. In response, subcommittee members are working with CommonHealth ACTION to develop a tool that will assess the characteristics and capacities of HIP-Cuyahoga to address structural racism as individual HIP-Cuyahoga members and within their organizations. This assessment will become the basis for HIP-Cuyahoga's capacity building efforts related to structural and institutional racism over the next several years. The Eliminating Structural Racism subcommittee hopes that HIP-Cuyahoga member organizations will review their existing values, policies, and practices, and work to transform their organizations by adopting an overarching value system based on equity for racial and ethnic minorities. In short, HIP-Cuyahoga's partners must set goals focused on changing all policies that are not based on values of inclusion and fairness.

The subcommittee's goals include:

- » developing a community-level understanding of the historical forces involved in creating current inequities;
- » using health equity data to illuminate how race-based policies and practices created opportunities for some and restricted possibilities for others;
- » supporting organizational, institutional, and community leaders to work closely with community members to create an awareness of how and why assumptions about racial and ethnic populations can impact their thinking, feeling, and actions; and
- » using an equity-focused approach to develop policies that increase social and economic opportunities for racial and ethnic minorities, change individual and organizational behaviors, and significantly improve conditions for all people living in Cuyahoga County.

Why does it matter?

In Cuyahoga County, we believe that all people should have the opportunity to live healthy and prosperous lives. We understand that our values shape the policies and systems that either create



To show people that you will find love no matter what color! – Photograph and Comment from Boys and Girls Club member, 2012 Youth Photovoice Project

barriers and disadvantages for some or promote prosperity for all. Our current policies and systems create barriers for certain populations that lead to unfair differences in health outcomes; differences that impact us all in Cuyahoga County. By addressing the unfair policies and systems in Cuyahoga County, we will be able to uphold values that we all believe in. We will be able to eliminate structural barriers for communities of color and create a Cuyahoga County where all people are healthy and thriving.

Summary of Goals and Intended Outcomes:

SHORT-TERM (1-2 YEARS)

- » We will have improved knowledge, awareness, and understanding of the role structural and institutional racism plays as a social determinant of health.
- » We will achieve perspective transformation and apply this concept in our organizations to create a change in culture, policies, and organizational practices.
- » We will develop and use clear and intentional messaging about the impact of structural and institutional racism on opportunities for health.
- » There will be a shift in the way local media reports on health topics by using the frame of equity and the social determinants of health.
- » The HIP-Cuyahoga priority subcommittees that are not directly focused on structural and institutional racism will include strategies that address it.

MID-TERM (3-5 YEARS)

- » More organizations will improve their individual and organizational competencies around structural and institutional racism, as well as racial inclusion and cultural competence.
- » More organizations will have an explicit focus on structural and institutional racism and how to address it.
- » More individuals and organizations will acknowledge and discuss the role that structural and institutional racism plays in creating opportunities for healthy people and communities in our county.
- » HIP-Cuyahoga member organizations will begin to create identifiable policies and practices that address structural racism, racial inclusion, and cultural competence. Work will be underway to document these changes, develop incentives, create metrics, and conduct evaluations to ensure accountability.

LONG-TERM (5+ YEARS)

- » After five years, we will start to see an improvement in community conditions and the ability of people in all communities to have fair opportunity to improve their health.
- » Structural and institutional racism will be addressed explicitly in decisions, policies, and organizational and community practices.



Subcommittee Structure

The anchor organizations and individuals responsible for this subcommittee are:

PolicyBridge

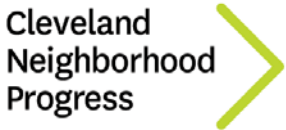
Greg Brown, Executive Director



PolicyBridge is a research and advocacy think tank that prompts and sustains high quality dialogue about public policy issues affecting African Americans and other underserved communities to enlighten community members and catalyze action.

Cleveland Neighborhood Progress

Evelyn Burnett, Vice President of Economic Opportunity



Cleveland Neighborhood Progress is a local community development-funding intermediary with more than 25 years of experience investing in community revitalization work in Greater Cleveland.

For more information on this subcommittee or to get involved, please contact:

Greg Brown, gbrown@policy-bridge.org

Evelyn Burnett, Eburnett@ClevelandNP.org