Compounding Oppression: Antiracism in COVID-19 Response

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Panelists & Moderators

• Tanya DeHoyos (she/her)
  Chief People Officer
  National Health Foundation: Los Angeles

• Shontel Lewis (she/her)
  VP, Equity, Inclusion, and Diversity
  Colorado Coalition for the Homeless: Denver

• Renata Robinson (she/her)
  Chief Human Resources Officer
  Colorado Coalition for the Homeless: Denver

• Linda Son-Stone
  Chief Executive Officer
  First Nations Community Healthsource: Albuquerque

• Sonja Spears (she/her)
  Chief Equity & Inclusion Officer
  Boston Health Care for the Homeless Program: Boston

• Michael Durham (he/him)
  Technical Assistance Manager

• Lauryn Berner (she/her)
  Research Manager

  National Health Care for the Homeless Council: Nashville
Polls

• What kind of organization are you with?
• Respond to this statement: my organization has been conscious, proactive, and consistent about racial equity during this pandemic.
Why we’re talking about this

• We are witnessing disturbing, though not surprising, disparities and discrimination.
• We were already in a crisis of racism, specifically in the housing and health care industries. COVID-19 is exacerbating these existing crises.
• Institutional antiracism is more important than ever during a crisis. And if it’s not the priority now, it never really was.
• The Council’s work on racial equity to date provides helpful lessons for the pandemic.
National Health Foundation

Recuperative Care Centers
-2 sites within LA, 1 in Ventura County
-92 bed Pop-up City/County/FEMA shelter
JEDI during COVID-19

Lead with the welfare of our staff. Ask.
-Crisis Pay
-Sick Time Flexibility
-Uber Credits for Public Transportation users
-Lunches/Dinners during shift
-Care packages & stipend for those WFH
-Promoting self-care

Consider the same for our guests. Ask.
Boston Health Care for the Homeless Program

Primary care, respite care, behavioral health, dental, pediatric care, women’s health clinic, immigrant health clinic, transgender program for approx. 11,000 annually. Approx. 600 staff

Early COVID demographic data collection heavily dependent on state and city government with poor tracking initially.

Limited English proficiency supports added to COVID response areas.

Webinar on COVID and structural vulnerability by Dr. Jen Brody and Sonja Spears presented to med school seniors.

Mutual aid fund- brainchild of Equity and Social Justice Committee co-chair Phil Stango.

Board member Dr. Thea James appointed to panel to review and advise on critical standards of care, resulting in successful modifications.

Medical Director, Dr. Denise De Las Nueces appointed to state panel to improve health equity in Massachusetts.
Role of Racial Justice (COVID 19)

- **Recognizing in any response – Need to include racial justice lens**
  - Population we serve – Disparities
  - Racism within our culture
  - Testing
  - Frontline staff – PPE
  - Leadership
  - Health Care Choices
First Nations Community HealthSource

- New Mexico’s Urban Indian Health Center; one of 44 Urban Indian Health Programs
- Core services: Medical, Dental, Behavioral Health, Cultural Wellness/Traditional Healing
- Mission: To provide a comprehensive and culturally appropriate health delivery system that addresses the physical, social, emotional, and spiritual needs of urban Indians and other underserved populations in Albuquerque and the surrounding areas.
- Racial Disparities in COVID-19 Crisis
  - Historical inequities in health care funding have contributed to the health disparities that place Indigenous people at high risk for COVID-19
  - High mortality rates among American Indians due to COVID-19 due to high rates of pre-existing conditions and lower access to care.
Discussion
Additional Resources

• Webinar this Friday, May 29: Consumer Perspectives of Isolation and Quarantine
• All webinars in the COVID-19 series archived online
• Newly redesigned COVID-19 resource page
• Antiracism resource page
• Get in touch: mdurham@nhchc.org