Disclaimer

• The information shared in this panel discussion and resources shared on today serve as examples of how NICUs, providers and healthcare workers can eradicate systemic racism in their practices and support Black mothers and neonates. We understand that the views expressed today may be uncomfortable but are based in historical fact. In order to achieve health equity for our Black infants, we must have a shared understanding of this historical context and how to move forward to create more equitable and just perinatal care.

• As such, some of the recommendations presented will take an intentional and collaborative effort to be applied to your hospital setting. Guidelines and recommendations should be adapted to best fit your patient population and local community needs.
Disclosures

JC Cowden – Consultant for American Board of Pediatrics
T Lewis – Consultant for MITRE Corporation

Today’s Panelists

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Children’s Mercy Kansas City
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Children’s Mercy Kansas City
History of African-Americans in the US
In February 2020 *The BMJ* published a *themed issue in Racism on Medicine* which was guest-edited by Victor Adebowale and Mala Rao. It aimed to highlight the discrimination and health inequalities related to race and ethnicity experienced by patients and doctors.
### Epistemic Injustice

<table>
<thead>
<tr>
<th>CONDITION</th>
<th>DESCRIPTION</th>
<th>ASPECT OF (IN)JUSTICE</th>
</tr>
</thead>
<tbody>
<tr>
<td>The disadvantage condition</td>
<td>Suffer epistemic and/or socioeconomic disadvantage and inequalities as a result from the discrimination</td>
<td>Unfair outcome</td>
</tr>
<tr>
<td>The prejudice condition</td>
<td>Discrimination must involve prejudiced (i.e., unfair) sentiments about the speaker</td>
<td>Unfair judgment about epistemic capacity</td>
</tr>
<tr>
<td>The stakeholder condition</td>
<td>Must be somehow affected by the decisions that they are excluded from influencing</td>
<td>Unfair denial of stakeholder rights</td>
</tr>
<tr>
<td>The epistemic condition</td>
<td>Possess knowledge that is relevant for the decision that they are excluded from</td>
<td>Unfair denial of knowledge</td>
</tr>
<tr>
<td>The social justice condition</td>
<td>At the same time also suffer from other social injustice</td>
<td>Unfair existing vulnerability</td>
</tr>
</tbody>
</table>

Modified from Table 1; Bykov, *Journal of Social Philosophy*, 2020

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**Diagram A**
- White: 25
- Black: 10
- Graph: 2014-2018

**Diagram B**
- Innovation & creativity
- Group think
- Funds
- Review
- Applicants
- Equity policy
- Antiracist reviewers
- NIH racial funding disparity
- NIH racial funding equity

**Diagram C**
- NIH Annual Budget
- Equity Policy

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Children's Mercy
Health Equity Integration Project

Special HE/DEI efforts ↔ Regular work
Health Equity Integration Project

Health equity, like safety, is everybody’s work.
Health equity, like safety, is everybody’s work.

HEALTH EQUITY
IS OUR RESPONSIBILITY EACH AND EVERY ONE OF US

Primary Tools... standard questions that we always ask

1. DEI Checklist
2. Universal Question(s)
Social Determinants of Health

In many ways, the current approach to the SDOH within medical education positions them as “facts to be known” rather than as “conditions to be challenged and changed.” Educators talk about poverty but not oppression, race but not racism, sex but not sexism, and homosexuality but not homophobia.

Implicit Bias

Structural Racism

• Voting rights
• FHA Loans
• Residential segregation
• Access to education, green space, resources, safety, healthcare, etc.
• Jobs, hiring, & advancement

www.rationalstepsproject.org
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