

The Intersection of Effective Chronic Disease Management & Health Equity

Black Maternal Health Crisis

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Eliminating Racism in HealthCare: Lived Experiences, a Paradigm For Change

Joycelyn Thomas DNP, ARNP, FNP-Board Certified
Assistant Teaching Professor UW School of Nursing

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“A people without the knowledge of their past history, origin and culture, is like a tree without roots” Marcus Garvey



Trail Blazers in Washington State

- > **Dr. Michele P. Andrasik - Psychology & Women and HIV**
- > **Dr. Doris Boutain - Community Health & CBPR**
- > **Dr. Kemi M. Doll - Gynecology & Cervical Cancer**
- > **Dr. Monica McLemore - Nursing & Reproductive Justice**
- > **Dr. Wendy Barrington - Public Health Director ARCH**
- > **Dr. Rachel Issaka - Gastroenterology & Population Health
Colorectal Cancer Screening Program**
- > **Dr. L'Oréal Kennedy - CNM/4th year Med Student - Breast
Cancer**



Who is Joycelyn

Bremerton, WA

West Seattle

Federal Way

1984 UW

Boeing

Alumnus

96', 2013', 2014'




Who is Joycelyn



ON

“Our mission is to advance nursing science and practice through generating knowledge and educating future leaders to address health for all. Our vision is to pioneer improvements in health and health care through innovative nursing science, education and practice”



Community Engagment

- > African American Reach and Teach Health
- > Mary Mahoney Professional Nurses Organization
- > Mt Zion Baptist Church, Health Ministry
- > New Beginnings Christian Fellowship Ministry
- > Track Coach Discus Shot



Professional Engagement – Early Career

- > Leadership Council Perinatal Unit**
- > Created culturally specific childbirth education classes for Somali population**
- > Wait One Year Project, funded by March of Dimes**
- > MLK Jr. Service Award**



Academic Engagement

- > **GAAN Fellow 2012 – 2014**
 - TA for Dr.'s Voss, Boutain, Sadak, and Walker
 - Pedagogy courses required
 - Lectures included
 - > Perinatal Mood Disorders
 - > HIV Pregnancy



Post Graduation



WHO Safe Childbirth Checklist

1 **1. Antenatal**

Has a midwife or other health worker seen her during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she been seen by a health worker during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a tetanus toxoid injection during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a malaria test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a blood test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a weight check during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a blood pressure check during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a glucose test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a hemoglobin test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine protein test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine albumin test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine creatinine test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine urea test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine sodium test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine potassium test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine calcium test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine magnesium test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine phosphorus test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine sulfur test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine nitrogen test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine oxygen test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine hydrogen test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine carbon test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine hydrogen sulfide test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine ammonia test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine nitrate test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine nitrite test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine urobilinogen test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine bilirubin test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine glucose test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine ketone test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine pH test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine specific gravity test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine osmolality test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine specific heat test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine freezing point test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine boiling point test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine refractive index test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine density test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine viscosity test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine surface tension test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine capillary action test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine adsorption test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine absorption test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine desorption test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine permeability test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine diffusion test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine osmosis test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine dialysis test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine reverse osmosis test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine ultrafiltration test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine dialysis test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine reverse osmosis test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has she had a urine ultrafiltration test during pregnancy?	Yes <input type="checkbox"/> No <input type="checkbox"/>



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Post Graduation

Safe birth matters: facilitators and barriers to uptake of the WHO safe childbirth checklist tool in a Tanzania Regional Hospital

Joycelyn Thomas,¹ Joachim Voss,² and Edith Tarimo³



African Health Sciences

Makerere Medical School

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Post Graduation

- > Employed ARNP Family Practice**
- > Medical Director**
- > Regional Leadership Council –King Region**
- > Compensation Committee**
- > Advanced Practice Council**





Messages

- > **Are disproportionately affected by...than their white counterparts**
- > **Have more aggressive disease related to...**
- > **African Americans have the highest rate of...**



Efforts

- > **Culturally Competent**
- > **Cultural Humility**
- > **Cultural Bumps**
- > **Cultural Clues**
- > **White Privilege**
- > **Diversity Equity and Inclusion**
- > **Implicit Bias**
- > **Antiblackness**
- > **White Fragility**



COVID-19

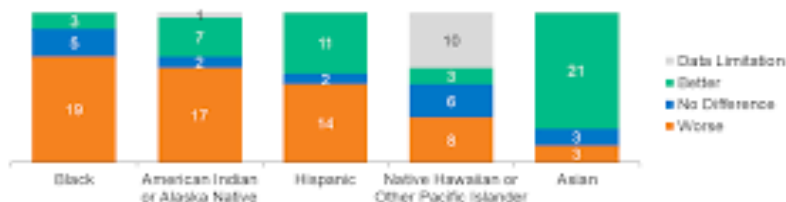
RACIAL DISPARITY AND IMPLICIT BIAS



Figure 2

People of Color Fare Worse than their White Counterparts Across Many Measures of Health Status

Number of health status measures for which group fared better, the same, or worse compared to White counterparts:

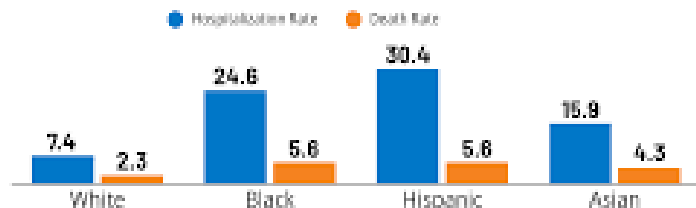


Note: Measures are for 2015 or the most recent year for which data are available. "Better" or "Worse" indicates a statistically significant difference from whites at the p<0.05 level. "No difference" indicates no statistically significant difference. "Data limitation" indicates data are so sparse that a comparative group, insufficient data for a reliable estimate, or comparisons not possible due to overlapping samples. Persons of Hispanic origin may be of any race but are categorized as Hispanic for this analysis; other groups are non-Hispanic.

KFF

COVID-19 Hospitalization and Death Rates among Active Epic Patients by Race/Ethnicity

Rate per 10,000, as of July 2020



Race/Ethnicity	Total Active Patients (Millions)
White	34.1
Black	7.0
Hispanic	5.1
Asian	1.4

Note: Rates for Black, Hispanic, and Asian patients are statistically significantly different from White patients at the p<0.05 level. Percent of Hispanic origin may be of any race but are categorized as Hispanic; other groups are non-Hispanic. Data for other racial groups not shown due to insufficient data. SOURCE: Epic and KFF analysis of Epic Health Record System COVID-19-related data as of July 2020.

KFF

Racial Disparity in Preterm Birth: A Better Chance Project



Jane Hitti MD, MPH & Doris Boutain, PhD

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Increased rate of preterm birth among African Americans

- > **Chronic social and psychological stressors, including but not limited to racism, may up regulate the maternal inflammatory response to reproductive tract infection and thereby increase the risk of preterm birth.**
- > **Genetic predisposition to a heightened inflammatory response in either mother or fetus appears to increase risk of preterm birth particularly in women preexisting infection. May be interrelated.**



Aims

- > **#2-Examine the correlation of maternal stress with inflammatory arousal, stratified by race and prior pregnancy history.**
 - Perceived stress stressful events, social isolation and racial discrimination result in chronic inflammatory arousal characterized by elevated C-reactive protein, increased cytokine production in response to endotoxin stimulation, increased vaginal neutrophils and pro-inflammatory cytokines, periodontitis, endometritis, chorioamnionitis, and preterm birth.





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Experiences

- > Did not feel “heard”, ex. when calling in for preterm labor symptoms or addressing concerns with health care provider**
- > Procedures not explained, did not fully understand risk**
- > Isolation due to regentrification**



Negative outcomes

- > **Disengagement**
- > **Delayed care**
- > **Not following advice**
- > **Discriminating and disrespect**
- > **Providers not aware of biases**



Enhancing Provider Training Regarding Communication with African American Patients

- > **Need was identified by and agency**
- > **Current materials did not have content addressing communication with African Americans**
- > **Evidence based recommendations**



Review of the Literature

- > **Negative experiences**
 - Not being involved in decision making
 - Confusing terminology used by providers
- > **Enhance provider communication**
 - Increase provider insights in the values and culture
 - Practice shared decision making
 - Provide relationship-center care



Conceptual Framework

- > **Critical Race theory (CRT) guided the development of the recommendations**
 - **CRT articulates various and subtle forms of racism that can inhibit effective communication**
- > **Four main concepts**
 - **Race consciousness**
 - **Contemporary mechanisms**
 - **Centering the margins**
 - **Praxis**



Recommendation I

- > **Those designing and presenting training focused on provider communication with AAs should have preparation in the form of content regarding the lived experiences of AAs and participate in a group racial self-awareness exercise.**
 - **AA lived experiences (~3-1/2 pages of outlined content) include the legacy of slavery, continued experiences of discrimination, and cultural values.**
 - **Racial self-awareness exercises foster awareness of unconscious racial biases and stereotypes.**



Recommendation II

- > • **Training sessions should incorporate content and skill-building exercises regarding microaggressions into the refresher course**
 - **Microaggressions: often unconscious words or behaviors of one person received as racial snubs or insults by the AA.**
 - **Recommendation II contains ~4 outlined pages of content on microaggressions.**
 - **Recommendation II contains a group racial self- awareness exercise & 2 skill building exercises**



Recommendation III

- > **Training sessions should incorporate literature regarding provider communication with African Americans into the Four Habits Approach currently used for the communication courses.**
 - Recommendation III contains ~6 pages of outlined content presenting evidence supported approaches to enhance provider communication with AAs.



Recommendation IV

- > **Utilize AA actors and actresses as patients in role-playing activities used to develop participant skills regarding provider communication with AA patients.**



Essential Considerations

- > **Centrality of culture in communication with *every* patient.**
- > **Considering culture only for AAs and not other cultural groups is a form of marginalizing AAs.**
- > **Diversity exists among African Americans based on factors such as age, the geographic region of residence, and education.**
- > **Positive AA lived experiences are vastly underrepresented since negative experiences likely contribute to poor patient-provider communication to a greater extent.**



Overdue Reckoning on Racism in Nursing

Launched in September 2020 to open discussion that focused on coming to terms with racism in nursing – a “reckoning” that acknowledges the reality and begins with a process of healing and change...the intention of this project is to bring the voices of Black, indigenous, Latinx and other Nurse Of Color to the center, to explore from that center the persistence of racism in nursing, and to inspire/form actions to finally reckon with racism in nursing.



A black and white photograph of Audre Lorde. She is shown from the chest up, wearing a dark jacket over a striped scarf. She is holding a microphone in her left hand and pointing her right hand towards the viewer. Her expression is serious and engaged. The background is a plain, light-colored wall.

“When we speak
we are afraid our
words will not be
heard or welcomed.
But when we are
silent, we are
still afraid.
So it is better
to speak.”

—Audre Lorde



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