Alameda County Public Health Department's Pedagogy for Social Justice

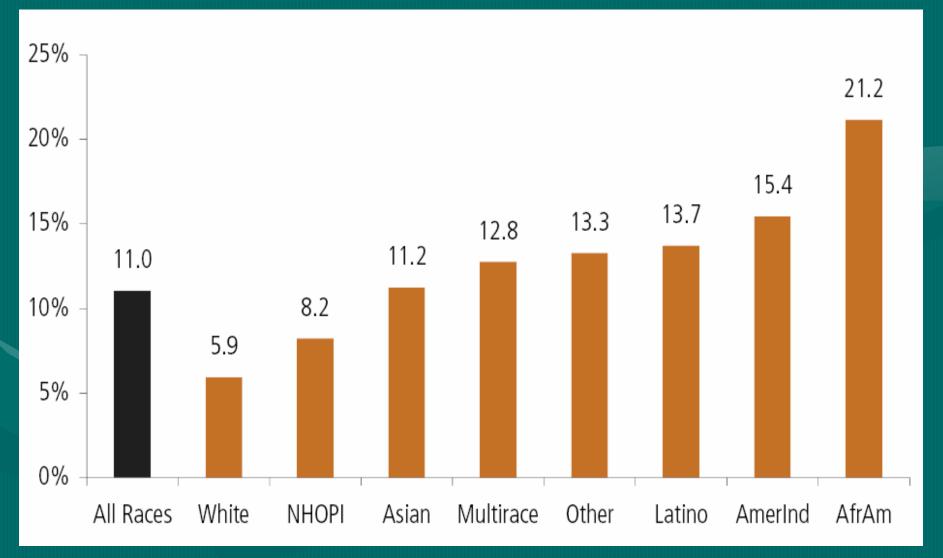
Mia Luluquisen, DrPH, MPH, RN; Sandra Witt, DrPH; Sandi Galvez, MSW; Katherine Schaff, MPH (c)



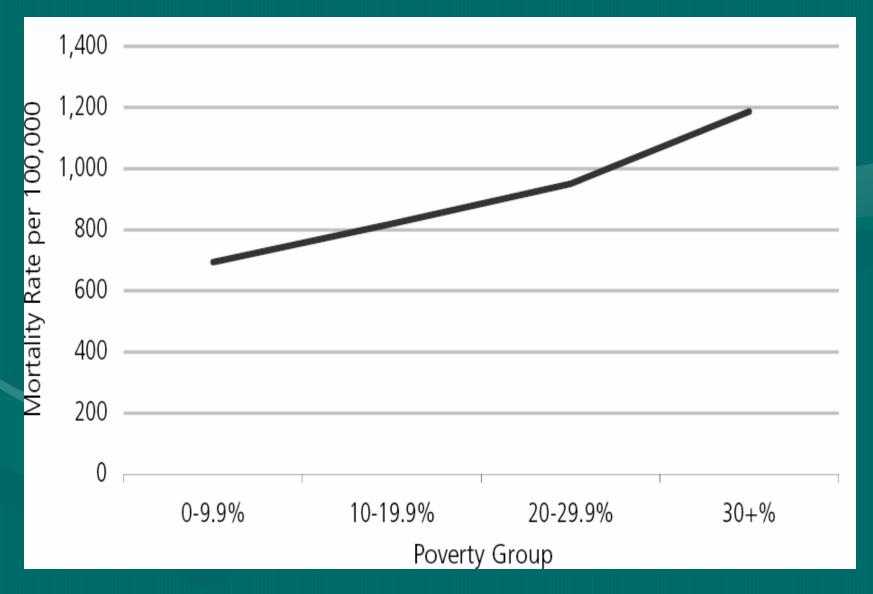
Presentation Outline

- Context: Health inequities in Alameda County
- ACPHD approach
 - Freirian/ popular education
 - TOP (Technology of Participation)
- Focused Activities
 - Strategic planning, PH 101, social justice dialogues, sessions on institutional racism
- Challenges, questions and lessons learned

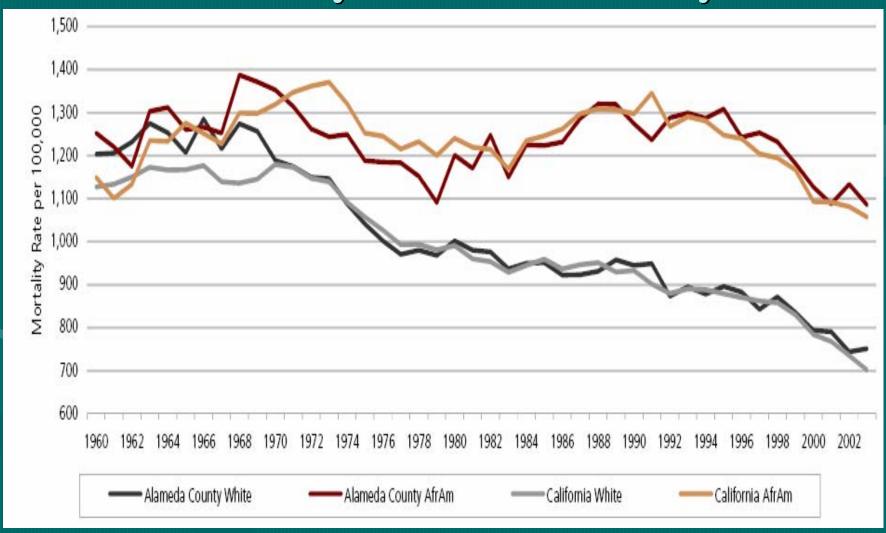
Poverty by Race/Ethnicity



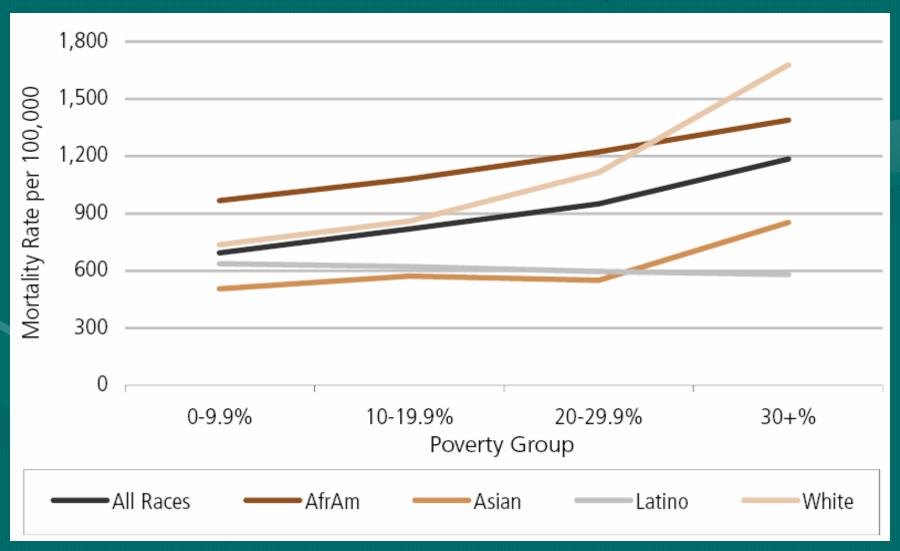
Mortality Rate by Poverty Group



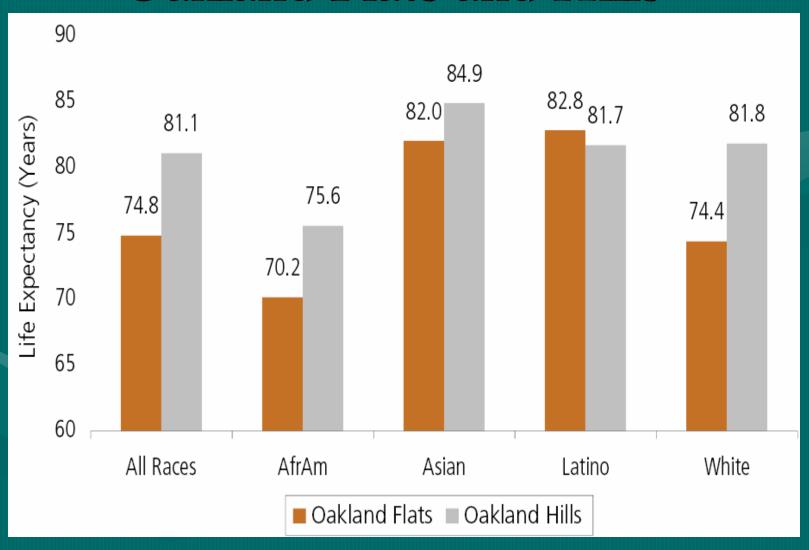
Alameda County and CA Mortality Rates by Race/Ethnicity



Mortality Rate by Poverty Group and Race/Ethnicity



Life Expectancy: Oakland Flats and Hills



African-Americans: Highest rates of Illness and/or Death

- All cause mortality
- Coronary heart disease
- Stroke
- Diabetes
- Lung cancer
- Prostate cancer

- AIDS
- Infant mortality
- Low birth weight
- Assault/Homicide
- Unintentional injury
- Motor vehicle crash
- Asthma

Health Disparities Among Other Groups

Native Hawaiian/Other Pacific Islander

lowest rate of early prenatal care

Latino

highest teen birth rate

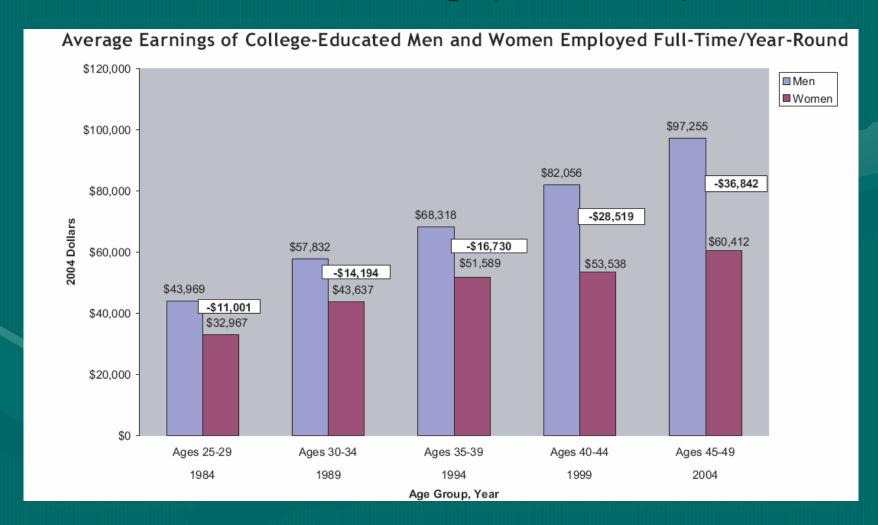
Asian

highest tuberculosis incidence rate

White

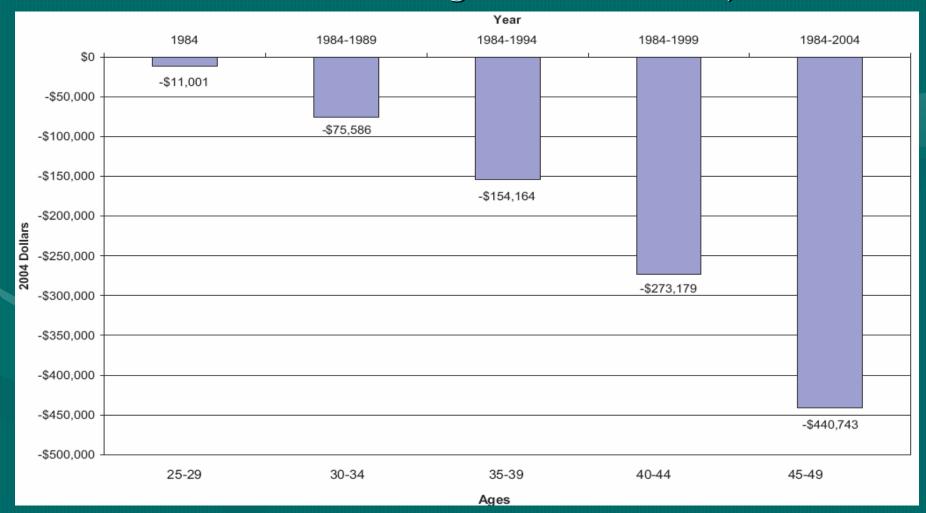
- highest all cancer and breast cancer incidence rate
- high rate of hospitalizations due to self-inflicted injury

National Average Earnings (of college-educated men and women employed full-time/year-round)



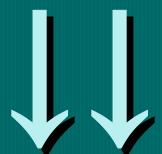
"Memo to John Roberts: The Gender Wage Gap is Real." http://www.iwpr.org/

Average Cumulative Losses from Gender Wage Gap (for a college-educated woman who was between ages 25 and 29 in 1984)



"Memo to John Roberts: The Gender Wage Gap is Real." http://www.iwpr.org/

Social Inequities



Health Inequities

Pedagogy for Social Justice

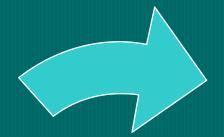
Approach

- Freirian/ popular education pedagogy
- Technology of Participation

Goal

 Create learning activities that foster a deep understanding of social determinants of health and build commitment to eliminate health inequities in our diverse population.





Listening

Dialogue



Wallerstein, N., Sanchez, V., & Velarde, L. Freirian Praxis in Health Education and Community Organizing. In M. Minkler (Ed.), *Community Organizing and Community Building for Health* (2nd ed., pp. 219-236). New Brunswick: Rutgers University Press.

• "A *trigger* is a concrete physical representation of an identified issue in any form," such as: videos, pictures, experiential exercises, or a brief series of slides.

- Wallerstein, N. (1993). Empowerment and health: The theory and practice of community change. *Community Development Journal*, 28(3), 218-227.

• Conscientization is engaging in critical reflection "to analyze the societal context for personal problems and their own role in working on problems."

- Minkler, M., & Wallerstein, N. (2005). Improving health through community organization and community building: A health education perspective. In M. Minkler (Ed.), *Community Organizing and Community Building for Health* (2nd ed., pp. 219-236). New Brunswick: Rutgers University Press.

• *Praxis* can be attained, which is "the ongoing interaction between reflection and actions that people take to promote individual and community change."

- Minkler, M., & Wallerstein, N. (2005). Improving health through community organization and community building: A health education perspective. In M. Minkler (Ed.), *Community Organizing and Community Building for Health* (2nd ed., pp. 219-236). New Brunswick: Rutgers University Press.

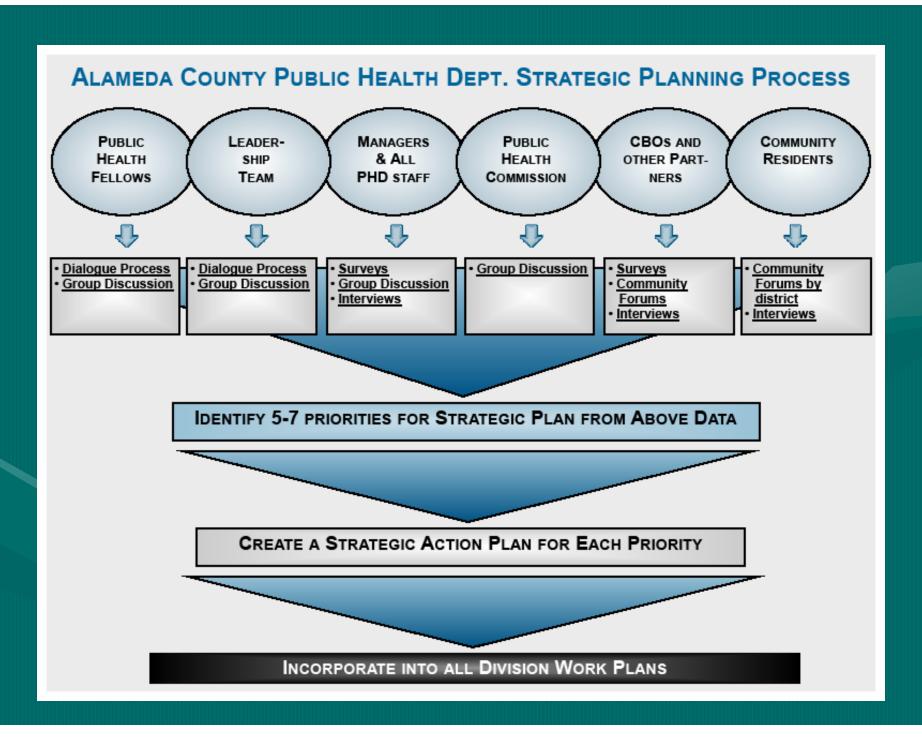
- Problem-posing or liberating education "consists in acts of cognition, not transferals of information...the teacher is no longer merely the-one-who-teaches, but one who is himself taught.
 - Freire, P. (2005). *The Pedagogy of the Oppressed*. New York: The Continuum International Publishing Group Ltd.

Technology of Participation

- A highly participatory technique with specific frameworks for:
 - Focused conversation
 - Consensus workshops
 - Strategic planning
- Fosters creative thinking, consensus-based decision making, and team building
- Generates ownership of decisions

Activities to address social justice

- Strategic planning
 - Social Justice Dialogues
- PH 101
- Institutional Racism Sessions

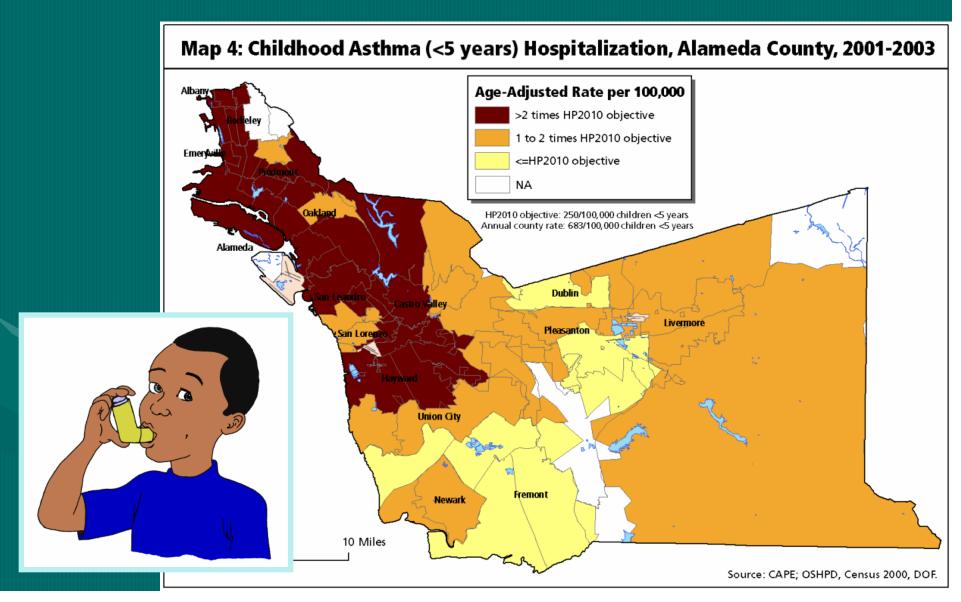


Building Internal Capacity to Address Social Inequities

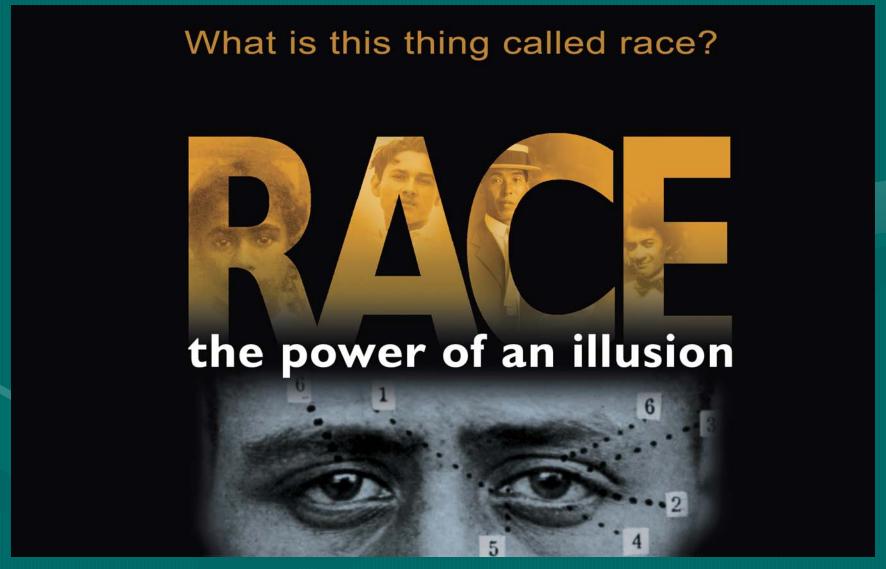
PH 101

- An Overview of Public Health (includes social justice history)
- Cultural Competency and Cultural Humility
- Health Inequities
- Undoing Racism
- Community Capacity Building

Module 3: Health Inequities



Module 4: Undoing Racism

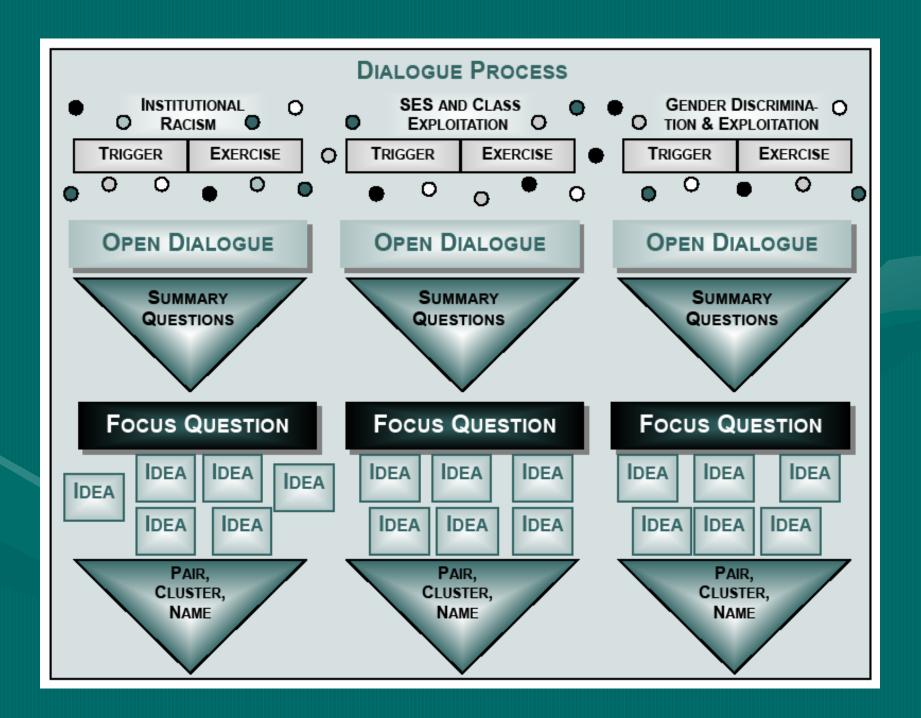


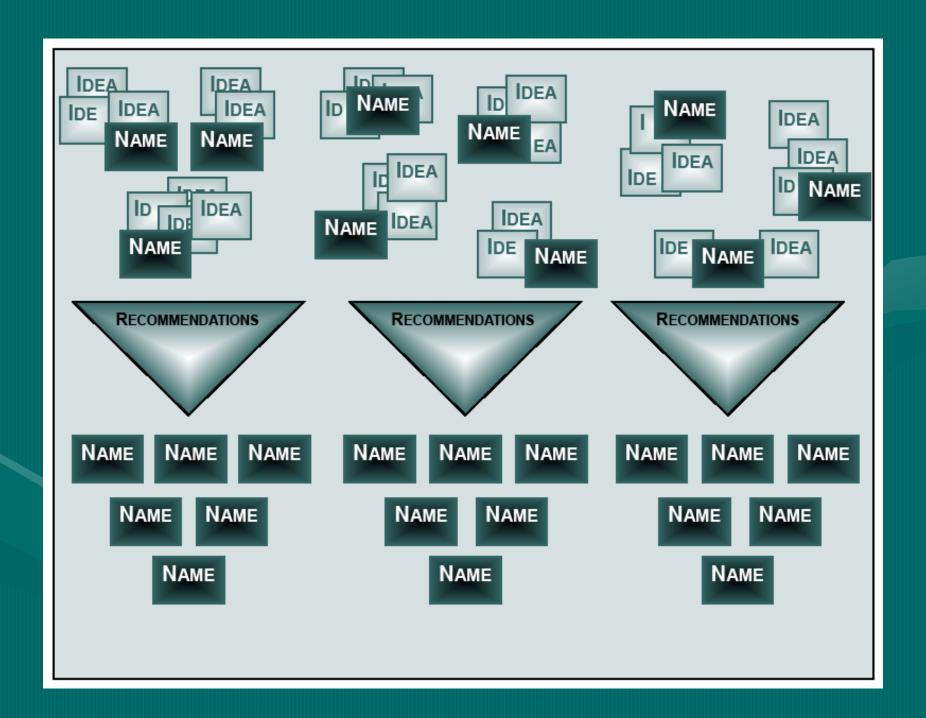
Courtesy of California Newsreel

Social Justice Dialogues

With 20 ACPHD Leadership Three areas:

- —Institutional racism
- -Gender exploitation and discrimination
- -Class exploitation





Institutional Racism Sessions

Participants:

CAPE Staff (Community Assessment, Planning, Education/Evaluation),

Leadership Team, Senior Managers, Community Health Services managers and staff, Public Health Nurses, Community Health Outreach Workers

Sessions begin with Race: Power of an Illusion and proceed to in-depth dialogues

CAPE Institutional Racism Discussions

Goal

• To undo racism at individual, interpersonal, and institutional levels to achieve social justice by raising consciousness, improving practices, and empowering communities.

Example of Problem-solving during Institutional Racism Sessions

Racism Dialogues for Staff and Community

- Show the 3 films to all new hires
- •Share with school-age kids

Effect Legislation Process to Address Racism

•Be part of the legislative process to change the current laws which perpetuate racism

Improve Hiring Process

- Strive for staff diversity to match county diversity
- •Speed up hiring process to allow more people ability to access jobs

Examine Policies for Racism

• Examine our policies to see if they perpetuate racism

Challenges and lessons learned

Challenges:

- Groups are diverse and not conducive to "pure" Freirian/popular education
- Difficult discussions: topics can provoke emotional reactions
- Facilitating awareness to conscientization to praxis takes time and ongoing effort
- Evaluation of modified Freirian and ToP methodology

Challenges and lessons learned (cont'd)

Lessons learned thus far:

- Pay attention to participants' reactions, growth, comments, feedback
- Be flexible and revise scripts, dialogues, formats continuously
- Necessary to have experienced facilitation

Resources

- Alameda County Health Status Report 2006 <u>www.acphd.org/User/data/DataRep_Listby</u> <u>Cat.asp?DataRepdivId=2&DataRepdivcatid=46.</u>
- Race: The Power of an Illusion <u>www.pbs.org/race</u>
- Unnatural Causes: Is Inequity Making Us Sick?
 - www.unnaturalcauses.org

Resources

Institute for Cultural Affairs (Technology of Participation)

www.ica-usa.org

• NACCHO's Health Equity and Social Justice webpage

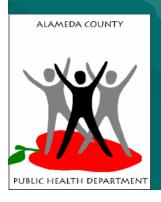
www.naccho.org/topics/justice/index.cfm

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