Racism and Its Impact on Child Health: The Role of Pediatricians and Pediatric Providers

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District III Diversity and Inclusion Champion
Chief Medical Officer, Total Health Care, Inc
I have no actual or potential conflicts of interest.
Learning Objectives

- Understand the AAP policy statement: The Impact of Racism on Child and Adolescent Health
- Understand Racism as a social determinant of health
- Discuss the importance of talking to children about race
- Understand how pediatric providers can help parents and families address issues of race and racism
Definition of Racism

A “system of structuring opportunity and assigning value based on the social interpretation of how one looks that unfairly disadvantages some individuals and communities, unfairly advantages other individuals and communities”
Experiences with Race and Racism
Levels of Racism

* Institutionalized Racism
  * Defined as differential access to goods, services, and opportunities in society by race
  * Normative, structural, sometimes legalized
  * Inherited disadvantages

* Personally-mediated Racism
  * Defined as prejudice and discrimination
  * Intentional and Unintentional
  * Acts of commission and acts of omission

* Internalized Racism
  * Defined as acceptance by members of stigmatized races of negative messages about their own abilities and intrinsic worth

The Impact of Racism on Child and Adolescent Health

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The American Academy of Pediatrics is committed to addressing the factors that affect child and adolescent health with a focus on issues that may leave some children more vulnerable than others. Racism is a social determinant of health that has a profound impact on the health status of children, adolescents, emerging adults, and their families. Although progress has been made toward racial equality and equity, the evidence to support the continued negative impact of racism on health and well-being through implicit and explicit biases, institutional structures, and interpersonal relationships is clear. The objective of this policy statement is to provide an evidence-based document focused on the role of racism in child and adolescent development and health outcomes. By acknowledging the role of racism in child and adolescent health, pediatricians and other pediatric health professionals will be able to proactively engage in strategies to optimize clinical care, workforce development, professional education, systems engagement, and research in a manner designed to reduce the health effects of structural, personally mediated, and internalized racism and improve the health and well-being of all children, adolescents, emerging adults, and their families.

abstract

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Policy statements from the American Academy of Pediatrics benefit from expertise and resources of liaisons and internal (AAP) and external advisory committees.
Social Determinants of Health

- Primary drivers of health
- Conditions in which people are born, grow, live, work and age
Social and Economic Factors Drive Health Outcomes

<table>
<thead>
<tr>
<th>Economic Stability</th>
<th>Neighborhood and Physical Environment</th>
<th>Education</th>
<th>Food</th>
<th>Community and Social Context</th>
<th>Health Care System</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employment</td>
<td>Housing</td>
<td>Literacy</td>
<td>Food security</td>
<td>Social integration</td>
<td>Health coverage</td>
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<tr>
<td>Income</td>
<td>Transportation</td>
<td>Language</td>
<td>Access to healthy options</td>
<td>Support systems</td>
<td>Provider availability</td>
</tr>
<tr>
<td>Expenses</td>
<td>Safety</td>
<td>Early childhood education</td>
<td></td>
<td>Community engagement</td>
<td>Provider linguistic and cultural competency</td>
</tr>
<tr>
<td>Debt</td>
<td>Parks</td>
<td>Vocational training</td>
<td></td>
<td>Stress</td>
<td>Quality of care</td>
</tr>
<tr>
<td>Medical bills</td>
<td>Playgrounds</td>
<td>Higher education</td>
<td></td>
<td>Exposure to violence/trauma</td>
<td></td>
</tr>
<tr>
<td>Support</td>
<td>Walkability</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td>Zip code / geography</td>
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</tbody>
</table>

**Health Outcomes:** Mortality, Morbidity, Life Expectancy, Health Care Expenditures, Health Status, Functional Limitations
Conceptual model of the impact of racial discrimination on child health outcomes and disparities.

**Exposure to racial discrimination**

Exposure at the microsystem (individual) level:
- Childhood experiences of racial discrimination (e.g., teasing, bullying, isolation)
- Observation of parent, family member, and peer experiences of racial discrimination
- Quality of parenting and racial socialization

Exposure at the macrosystem (structural) level:
- Media
- Schools (e.g., teachers)
- Social, political, and economic policies
- Police and other adults

**Psychological and biological responses**

Psychological distress:
- Decreased self-efficacy
- Depression
- Hopelessness
- Anxiety
- Anger/aggression
- Perceptions of injustice/lower levels of empathy

Changes in allostatic load:
- Decreased immune function
- Increased cortisol levels
- Increased blood pressure
- Increased heart rate

**Child health outcomes and disparities**

Health outcomes and disparities related to:
- Increased likelihood of low birth weight or premature birth
- Increased risk behaviors such as drug use and/or sexual risk-taking
- Increased aggression/violent behaviors
- Increased risk of chronic illness such as cardiovascular disease
- Increased susceptibility to infectious diseases such as HIV/AIDS

Racism can have deleterious effects and should be treated by pediatricians as an adverse childhood experience with significant physical and behavioral ramifications, according to Adiaha Spinks-Franklin, MD, from Texas Children's Hospital in Houston.

"By far, the number one stressor for black Americans is racism," Spinks-Franklin told *Medscape Medical News*. "And that stress has an effect on the entire physiologic system, including the nervous system, the immune system, the endocrine system, and the end organs."

Racial stress has been directly linked to preterm labor and birth, infant mortality, and maternal mortality, she reported during a symposium at the Pediatric Academic Societies 2019 Meeting in Baltimore.
## Philadelphia Urban ACE Study

<table>
<thead>
<tr>
<th>The Philadelphia Expanded ACE questions look at Community-Level Adversity</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Witness Violence</strong></td>
</tr>
<tr>
<td>How often, if ever, did you see or hear someone being</td>
</tr>
<tr>
<td>beaten up, stabbed, or host in real life?</td>
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<tr>
<td></td>
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<tr>
<td><strong>Felt discrimination</strong></td>
</tr>
<tr>
<td>While you were growing up...How often did you feel that</td>
</tr>
<tr>
<td>you were treated badly or unfairly because of your race or</td>
</tr>
<tr>
<td>ethnicity?</td>
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<td></td>
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<tr>
<td><strong>Adverse Neighborhood experience</strong></td>
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<tr>
<td>Did you feel safe in your neighborhood? Did you feel</td>
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<tr>
<td>people in your neighborhood looked out for each other,</td>
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<tr>
<td>stood up for each other, and could be trusted?</td>
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<tr>
<td></td>
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<tr>
<td><strong>Bullied</strong></td>
</tr>
<tr>
<td>How often were you bullied by a peer or classmate?</td>
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<tr>
<td></td>
</tr>
<tr>
<td><strong>Lived in foster care</strong></td>
</tr>
<tr>
<td>Were you ever in foster care?</td>
</tr>
</tbody>
</table>
# Table 10. Urban ACE Indicators by Race

<table>
<thead>
<tr>
<th>Indicator</th>
<th>White</th>
<th>Black</th>
</tr>
</thead>
<tbody>
<tr>
<td>Witnessed violence</td>
<td>25.9% (n=203)</td>
<td>52.0%*** (n=390)</td>
</tr>
<tr>
<td>Felt discrimination</td>
<td>15.8% (n=124)</td>
<td>49.5%*** (n=372)</td>
</tr>
<tr>
<td>Adverse neighborhood experience</td>
<td>19.3% (n=152)</td>
<td>29.2%*** (n=221)</td>
</tr>
<tr>
<td>Bullied</td>
<td>9.0% (n=70)</td>
<td>6.4% (n=48)</td>
</tr>
<tr>
<td>Lived in foster care</td>
<td>1.0% (n=8)</td>
<td>4.1%*** (n=31)</td>
</tr>
</tbody>
</table>

Notes: *p<.05 **p<.01 ***p<.001, Chi-square
Data Source: Philadelphia Urban ACE Survey, 2013
Data Prepared by: The Research and Evaluation Group at PHMC
Role of the Pediatrician and Pediatric Providers
Role of the Pediatrician and Pediatric Providers

* Optimize Clinical Practice
  * Create a culturally safe medical home
  * Assess patients for stressors
* Optimize Workforce Development and Professional Education
* Optimize Systems Through Community Engagement, Advocacy, and Public Policy
* Optimize Research
Becoming Anti-Racist

Fear Zone
- I identify how I may unknowingly benefit from Racism.
- I recognize racism is a present & current problem.
- I deny racism is a problem.
- I avoid hard questions.
- I strive to be comfortable.
- I talk to others who look & think like me.
- I listen to others who think & look differently than me.
- I surround myself with others who think & look differently than me.

Learning Zone
- I promote & advocate for policies & leaders that are Anti-Racist.
- I seek out questions that make me uncomfortable.
- I understand my own privilege in ignoring racism.
- I educate myself about race & structural racism.
- I am vulnerable about my own biases & knowledge gaps.
- I yield positions of power to those otherwise marginalized.

Growth Zone
- I sit with my discomfort.
- I speak out when I see Racism in action.
- I educate my peers how Racism harms our profession.
- I don’t let mistakes deter me from being better.

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Important to Talk to Children about Race

- Children learn about racial differences and racial bias at an early age
  - As early as 6 months, a baby's brain can notice race-based differences
  - By ages 2 to 4, children can internalize racial bias
  - By age 12, many children become set in their beliefs
How pediatric providers can help parents and families address racism

- Encourage parents and families to have conversations about race and racism that are developmentally appropriate
- Stress the importance of role modeling appropriate behavior about race and racism
- Encourage parents to be their child’s best advocate---get involved their child's school, place of worship, and politics
There are various levels of racism: institutional, personally-mediated, and internalized.

Racism is a social determinant of health and adverse childhood experience (ACE).

Pediatricians and pediatric providers have a tremendous role in combating racism and its impact on child health.
Thank You!


