Race and racism affect health outcomes. One does not have to spend much time researching health disparities to discover that racial and ethnic minorities lag behind in almost every single health indicator. Everyone can help transform and create a healthy community where people live, work, and play. We need to envision a picture of health that begins with our infants all reaching their first birthday. The infant mortality rate is commonly accepted as a measure of community health. In our community, African Americans have an infant mortality rate three times higher than whites. As health care professionals, we are accustomed to delivering innovative and comprehensive programs based on best practices to improve infant health. However, to eliminate the disparity in infant mortality between African American and White infants and other racial/ethnic health disparities we have to apply additional strategies. This includes strategies to braid cultural competency, health equity and social justice frameworks into our health care delivery models. At the forefront, we have to begin addressing the issue of unequal treatment. The fact that some people receive disparate health care due to misunderstandings and misconceptions should be unacceptable. The goal of all who serve in the health care environment should be to provide sensitive, competent, and effective care to all.

*Knowing is not enough; we must apply. Willing is not enough; we must do.*” - Goethe.

This toolkit provides a practical framework for understanding the intersection of racism and health. The toolkit includes strategies that individuals and organizations can implement to help reduce racial/ethnic health disparities. Use this toolkit as a guide. Become familiar with the resources provided. Access the resource information regularly and share with colleagues. Integrate concepts and strategies into practice. Acknowledging that disparate health outcomes and a significant burden of disease exists among racial and ethnic groups is pivotal to understanding the construct of racism, inequity, social injustice and their correlation to health. As providers, we challenge you to use a different lens and adopt a new practice or strategy in delivering care. Learning and applying the information provided contributes to a “patient-centered and culturally-tailored” service delivery model that seeks to improve overall patient health.
This toolkit was developed by the Kent County Health Department (KCHD), Strong Beginnings (Federal Healthy Start), Healthy Kent 2020 Infant Health Implementation Team, Responding to Racism Action Team with financial support from KCHD, Strong Beginnings and the Genesee County Racial & Ethnic Approaches to Community Health (REACH) Legacy grant. If you would like additional copies of this toolkit or have questions, please contact Karyn Pelon, Public Health Educator at 616/632-7216 or karyn.pelon@kentcountymi.gov. You can access the toolkit online at: www.accessKent.com/HealthDepartment/HealthEquity

For a list of Health Equity definitions from the Centers for Disease Control and Prevention go to: http://www.cdc.gov/socialdeterminants/Definitions.html

Why treat people...without changing what makes them sick?
Image from the World Health Organization
http://who.int/social_determinants/en/

Framing the Relationship between Race and Health
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Introduction