

GROUND TRUTH: A CURRICULUM IN PLAIN SIGHT FOR OUR LEARNERS

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University of Maryland Schools of Medicine and Public Health

compassion | discovery | excellence | diversity | integrity

***Association of Pediatric Program Directors
Fall Meeting
September 21st, 2023***



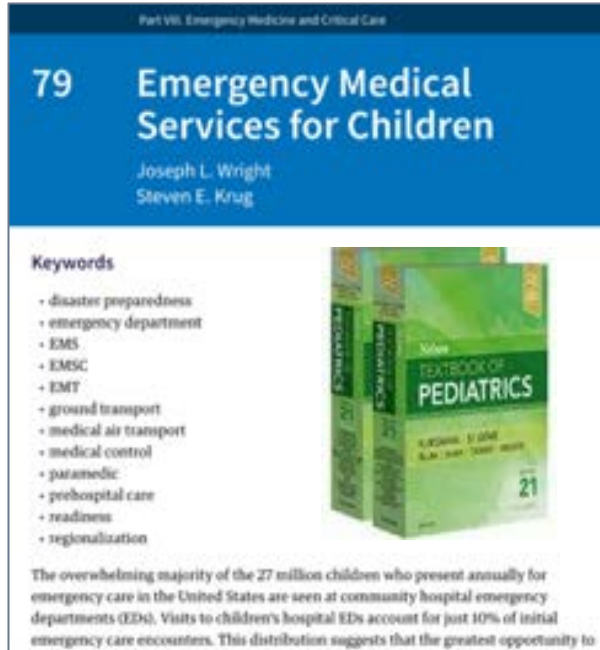


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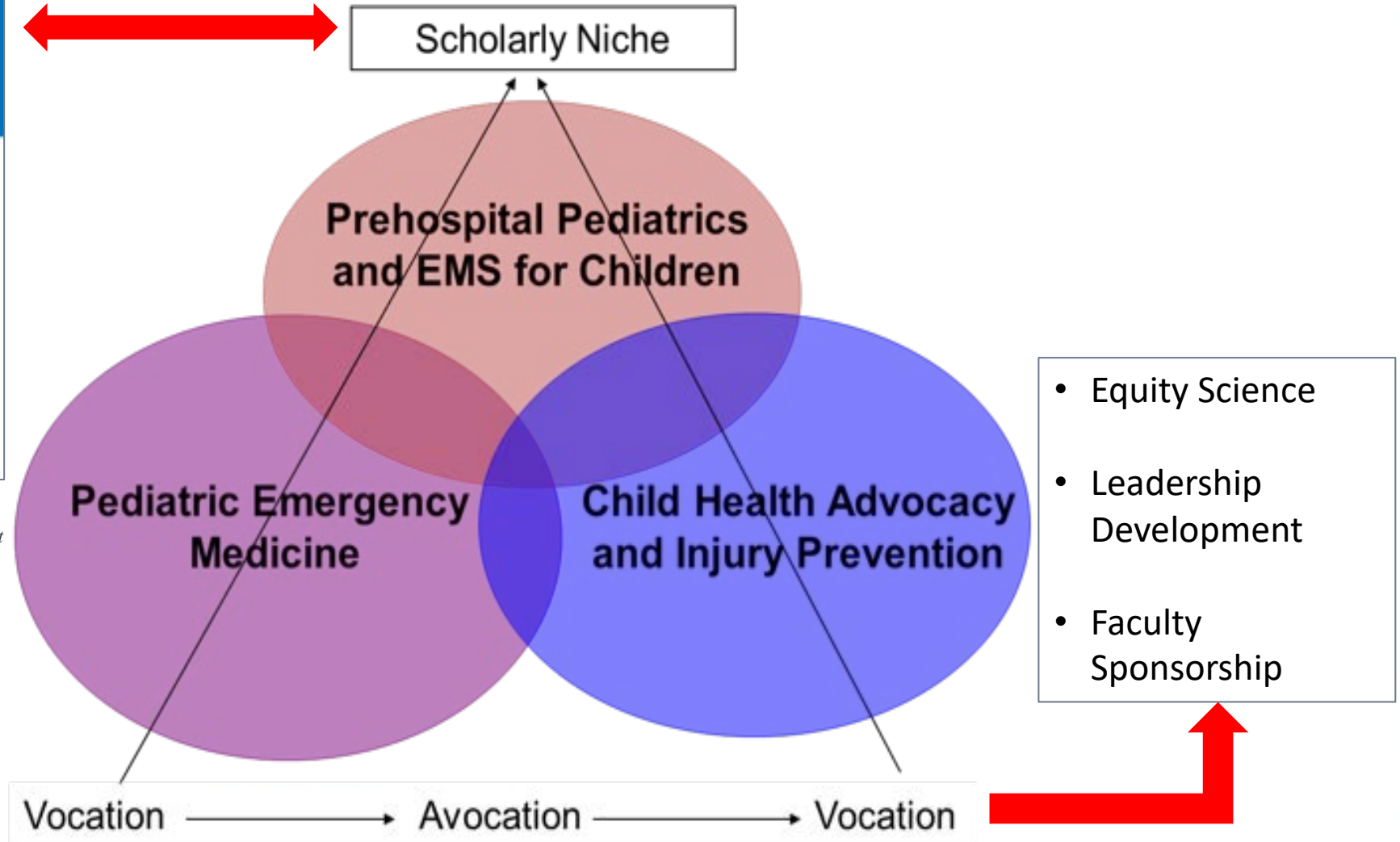
- In the past 12 months, I have not had a significant financial interest or other relationship with the manufacturer(s) of the products or provider(s) of the services that will be discussed in my presentation.
- This presentation will not include discussion of pharmaceuticals or devices that have not been approved by the FDA.



CONTEXT FOR PERSPECTIVE – PROFESSIONAL JOURNEY



Wright JL and Krug SE. *Nelson Textbook of Pediatrics*, 19th, 20th and 21st editions, Philadelphia: Elsevier





CURRENT CONTEXT

- Immediate Past At-Large Member, American Academy of Pediatrics (AAP) Board of Directors and Chair, AAP Board Committee on Equity
- Co-Chair American Pediatrics Society Committee on Diversity, Inclusion and Equity
- AAP Chief Health Equity Officer and Senior Vice President, Equity Initiatives



SECTION ON PEDIATRIC TRAINEES – AWARD WINNING ACTIVITIES



- Health Equity 101 Series
- 30-day EDI Challenge: An Exploration of Pediatric Equity, Diversity and Inclusion
- Section on Pediatric Trainees (SOPT) Health Equity Grant Program

- Tatiana Ndjatou, MD
- Britt Nagy, MPH



IMPORTANT LEVEL SET

- The work of advancing equity and anti-racism is necessarily iterative and incremental. It requires commitment, courage, humility, introspection, and resolve.
- This is uncharted territory and moving forward can feel challenging, disruptive, frustrating and polarizing.
- We can't expect to immediately have all the answers. We're at unique places on our individual journeys and must embrace the opportunity to learn from our collective fits and starts.



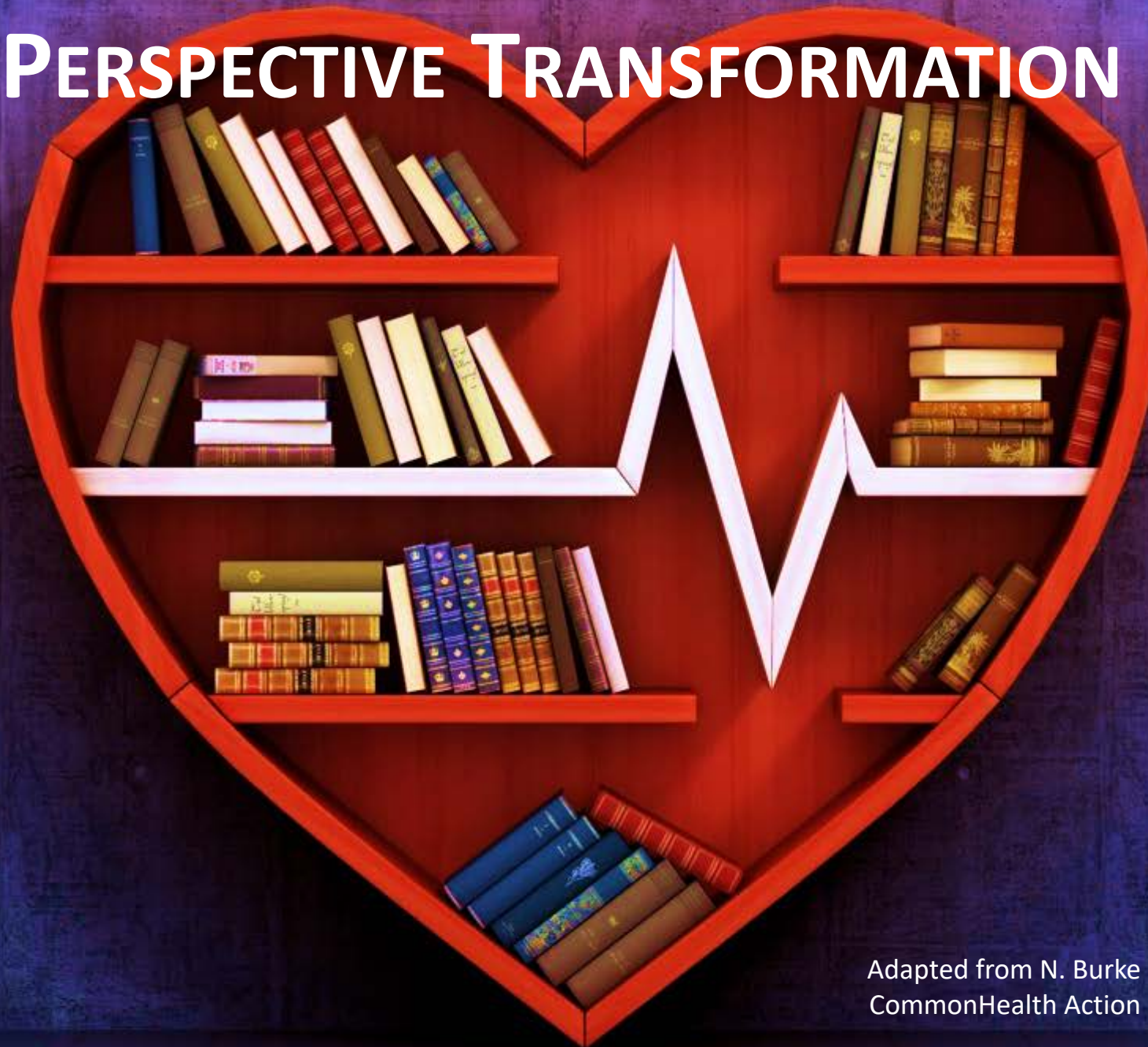
Wright JL, Johnson TJ. Child Health Advocacy: The Journey to Anti-Racism. *Pediatric Clinics of North America* 2023;70:91-101

PERSPECTIVE TRANSFORMATION



Head

- Logic
- Data
- Facts



- Fairness
- Justice
- Meaning

Heart



Adapted from N. Burke
CommonHealth Action



GROUND TRUTH: A CURRICULUM IN PLAIN SIGHT FOR OUR LEARNERS

- Learning Objectives:
 - Recognize the fallacy of race as a biologic proxy.
 - Identify inequities embedded in practice guidelines.
 - Define the pathway for moving from race-based to race-conscious medicine



Pediatrics 2022;150(1):e2022057998



IN PLAIN SIGHT: WHY HISTORY MATTERS – A JUNETEENTH STORY



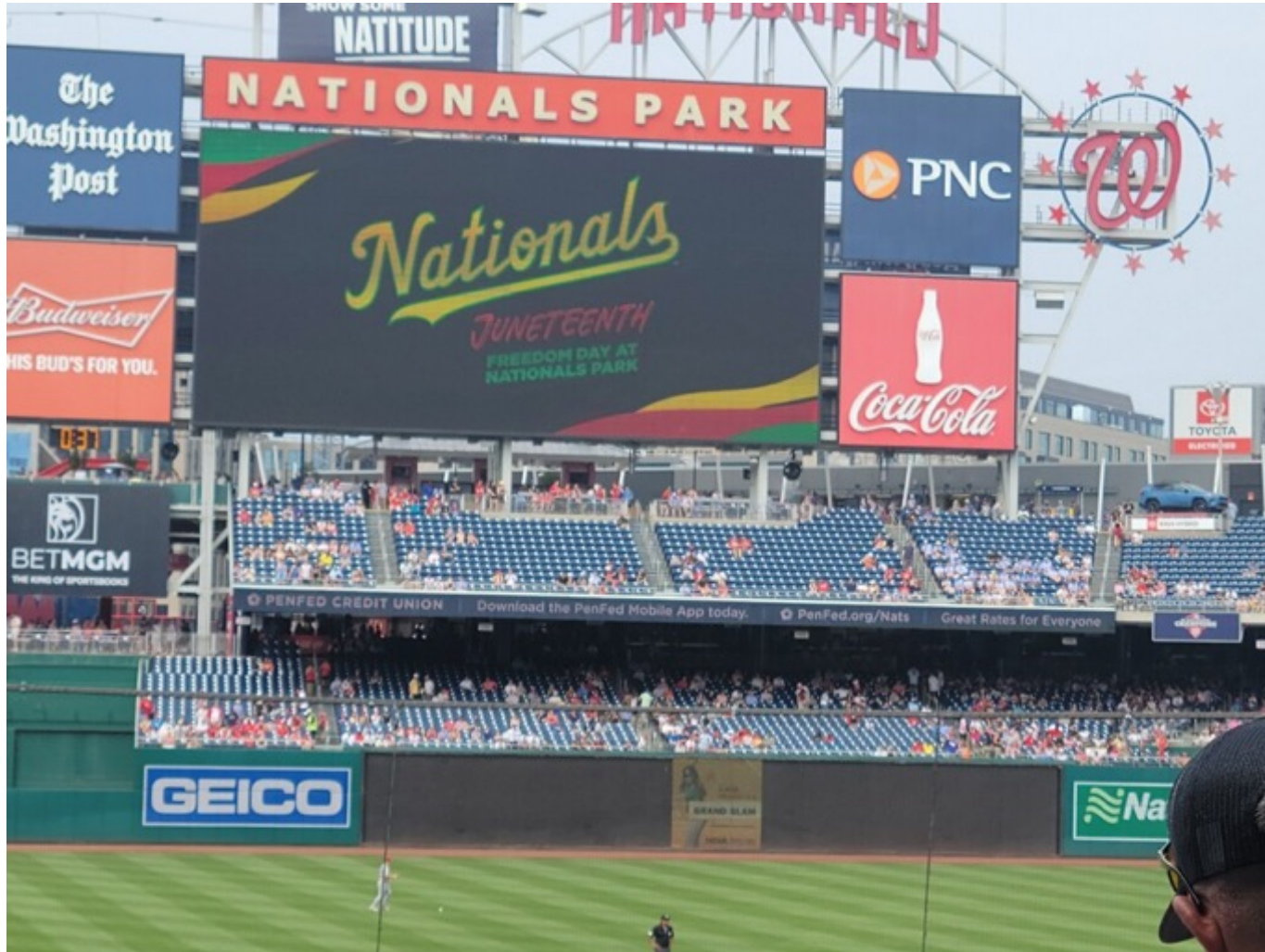
What is Sankofa?

Sankofa is an Akan word from Ghana that means "go back and fetch it". It is a symbol of a bird with its head turned backward, carrying an egg in its mouth, representing the idea of looking back at our past to learn from it and move forward.

<https://ayeeko.africa>

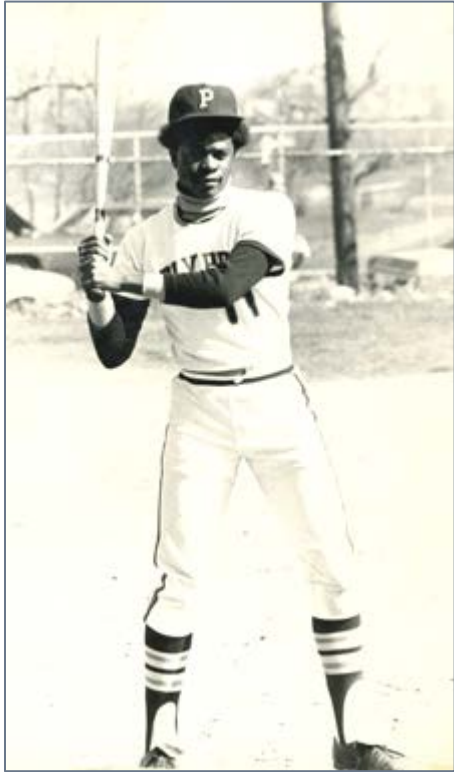


JUNETEENTH: PERSONAL REFLECTION





PERSONAL REFLECTION ...AND TRANSGRESSIONS IN PLAIN SIGHT



People to Meet In Heaven
Roberto Clemente, #21
1934 – 1972



PIRATES
roberto clemente • of

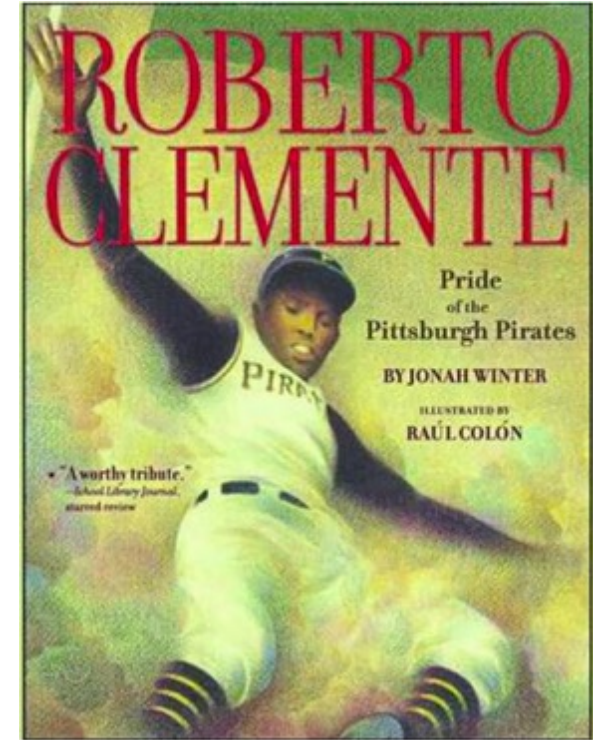
Roberto Clemente

➤ Hall of Famer
➤ Humanitarian

Clemente, Pirates' Star, Dies in Crash Of Plane Carrying Aid to Nicaragua

Special to The New York Times
SAN JUAN, P. R., Jan. 1—

was aboard the plane because feet of water. There was no he suspected that relief sup- sign of survivors.



Florida school district pulls children's book about Roberto Clemente off shelves

(<https://secure.pittsburghlive.com/ttm/contribute.php>)



EQUITY AND ANTI- RACISM JOURNEY: ADVOCACY

TOP TEN RESOLUTION

Resolution #LR10	2023 Leadership Conference
TITLE:	Opposing Legislation that Bans Offices of Equity, Diversity and Inclusion (EDI) and Restricts EDI Education for Learners at State Medical Schools
SPONSORED BY:	Texas Chapter
DATE:	August 2, 2023
DISPOSITION:	ADOPTED
Whereas,	two recent state bills (Florida State Senate Bill 266 and Texas State Senate Bill 17) are the first passed of numerous bills introduced across the country banning state institutions of higher education from employing offices of Equity, Diversity and Inclusion (EDI), and banning mandatory diversity training of learners; and
RESOLVED,	that the Academy be an unequivocal voice of support for the on-going education of all learners in areas of equity, diversity and inclusion; and be it further
RESOLVED,	that the AAP oppose any legislation that might result in reduced diversification of the physician workforce.
FISCAL NOTE:	None
REFER TO:	2023 Leadership Conference
LEAD AUTHOR:	Bethany Nunez, MD, FAAP



IN PLAIN SIGHT...

LOCAL // HEALTH

Texas Children's pediatrics chief abruptly departs after 7 months in role

Julian Gill, Rebecca Carballo, Staff writers

April 28, 2022 | Updated: May 2, 2022 5:18 p.m.

HOUSTON★CHRONICLE

Nikole Hannah-Jones Denied Tenure at University of North Carolina

Her hiring brought a backlash from conservatives concerned about her involvement in The Times Magazine's 1619 Project, which examined the legacy of slavery in America.

The New York Times

Share full article



University of South Carolina Removes 'DEI' From Top Diversity Official's Title

By INSIGHT Staff - August 23, 2023



<https://www.insightintodiversity.com/university-of-south-carolina-removes-dei-from-top-diversity-officials-title/>



RACIAL SOCIALIZATION – PART OF LONGITUDINAL CARE

American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN®



Recommendations for Preventive Pediatric Health Care

Bright Futures/American Academy of Pediatrics



Bright Futures®

promotion and health protection for healthy children, adolescents, and their families™

Each child and family is unique; therefore, these Recommendations for Preventive Pediatric Health Care are designed for the care of children who are receiving nurturing parenting, have no manifestations of any important health problems, and are growing and developing in a satisfactory fashion. Developmental, psychosocial, and chronic disease issues for children and adolescents may require more frequent counseling and treatment visits separate from preventive care visits. Additional visits also may become necessary if circumstances suggest concerns.

These recommendations represent a consensus by the American Academy of Pediatrics (AAP) and Bright Futures. The AAP continues to emphasize the great importance of continuity of care in comprehensive health supervision and the need to avoid fragmentation of care.

Refer to the specific guidance by age as listed in the Bright Futures Guidelines (Hagan JE, Shaw JS, Duncan PM, eds. *Bright Futures: Guidelines for Health Supervision of Infants, Children, and Adolescents*. 4th ed. American Academy of Pediatrics; 2017).

The recommendations in this statement do not indicate an exclusive course of treatment or serve as a standard of medical care. Variations, taking into account individual circumstances, may be appropriate.

The Bright Futures/American Academy of Pediatrics Recommendations for Preventive Pediatric Health Care are updated annually.

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AGE*	INFANCY								EARLY CHILDHOOD						MIDDLE CHILDHOOD						ADOLESCENCE												
	Prenatal†	Newborn†	3-5 d†	By 1 mo	2 mo	4 mo	6 mo	9 mo	12 mo	15 mo	18 mo	24 mo	30 mo	3 y	4 y	5 y	6 y	7 y	8 y	9 y	10 y	11 y	12 y	13 y	14 y	15 y	16 y	17 y	18 y	19 y	20 y	21 y	
HISTORY	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•
Initial/Interval																																	
MEASUREMENTS																																	
Length/Height and Weight		•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•
Head Circumference		•	•	•	•	•	•	•	•	•	•	•	•	•	•																		
Weight for Length		•	•	•	•	•	•	•	•	•	•	•	•	•	•																		
Body Mass Index†												•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•
Blood Pressure†		★	★	★	★	★	★	★	★	★	★	★	★	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•
SENSORY SCREENING																																	
Vision†		★	★	★	★	★	★	★	★	★	★	★	★	•	•	•	•	★	•	•	•	•	★	•	★	•	★	•	★	•	★	•	★
Hearing		•†	•†	→	★	★	★	★	★	★	★	★	★	•	•	•	•	★	•	•	•	•	→	→	→	→	→	→	→	→	→	→	→
DEVELOPMENTAL/SOCIAL/BEHAVIORAL/MENTAL HEALTH																																	
Maternal Depression Screening†				•	•	•	•																										
Developmental Screening†								•			•	•	•																				
Autism Spectrum Disorder Screening†											•	•	•																				
Developmental Surveillance		•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•
Behavioral/Social/Emotional Screening†		•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•
Tobacco, Alcohol, or Drug Use Assessment†																						★	★	★	★	★	★	★	★	★	★	★	★
Depression and Suicide Risk Screening†																							•	•	•	•	•	•	•	•	•	•	•

BEHAVIORAL/SOCIAL/EMOTIONAL

The Psychosocial/Behavioral Assessment recommendation has been updated to Behavioral/Social/Emotional Screening (annually from newborn to 21 years) to align with AAP policy.



RACIAL SOCIALIZATION – A LEARNING CURVE

The New York Times

<https://www.nytimes.com/2023/02/05/travel/african-american-historical-landmarks.html>

8 Places Across the U.S. That Illuminate Black History

Over the years, many important African American landmarks have disappeared or fallen into disrepair. An effort to restore them promises a fuller understanding of American history as a whole.

By Shayla Martin

Feb. 5, 2023

- Buffalo Soldiers National Museum – Houston
- Louis Armstrong Museum – New York City
- 16th Street Baptist Church – Birmingham
- African American Heritage Trail – Martha's Vineyard
- Hayti Heritage Museum – Durham
- Anne Spencer House and Garden – Lynchburg
- South Side Community Arts Center - Chicago
- Historic Mitchelville Freedom Park – Hilton Head



SEPTEMBER 15, 1963 – FOUR LITTLE GIRLS

Alabama Race Horror

CHILDREN BOMBED

THE WEATHER
BIRMINGHAM: Partly cloudy, 80 to 85. High 80. Low 70. Windy. Partly cloudy, 80 to 85. High 80. Low 70. Windy. Partly cloudy, 80 to 85. High 80. Low 70. Windy.

San Francisco Chronicle **FINAL**
THE VOICE OF THE WEST

9th YEAR No. 359 MONDAY, SEPTEMBER 16, 1963 10 CENTS

**Alabama Church Blast--
4 Negro Girls Blown Up**

**Quints Are Speedboat
Fine-- Runs Wild,
1st Photos Hits Crowd**

A boatload of speeders
over the water at about
120 miles an hour were
out of control and fire
was taking place but



From left, Addie Mae Collins, Carole Robertson, Denise McNair and Cynthia Wesley were killed in the Sept. 15, 1963, bombing of the 16th Street Baptist Church in Birmingham. The church had been used to stage civil rights marches and activities in downtown Birmingham before being bombed by the KKK. (Photo: PBS)



RACIAL SOCIALIZATION – A LEARNING CURVE

The New York Times

<https://www.nytimes.com/2023/02/05/travel/african-american-historical-landmarks.html>

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Historic Mitchelville Freedom Park

Hilton Head, S.C.

Founded in 1862, Mitchelville was the first self-governed town of free Black people in the United States. At its height, 3,000 formerly enslaved residents lived on 200 acres. The residents elected their own officials and had compulsory education and their own system of laws — rights that had previously been denied to them. Their West African heritage is the foundation for the region's Gullah Geechee culture, a distinct blend of West African art, crafts, cuisine, music and language influenced by life on the Sea Islands and the coastal plains of the Southeast.

Today, Mitchelville is a park and archaeological site where visitors can embark on self-guided tours to understand a time when newly freed African Americans successfully pursued self-governance. Visitors can also explore several reconstructed buildings from that era, including a homestead house, and see a bateau riverboat. Future plans include a commemorative park with an 18,000-square-foot visitors' center, event lawn and up to 10 reconstructed houses that represent the cluster of homes during the 1800s.

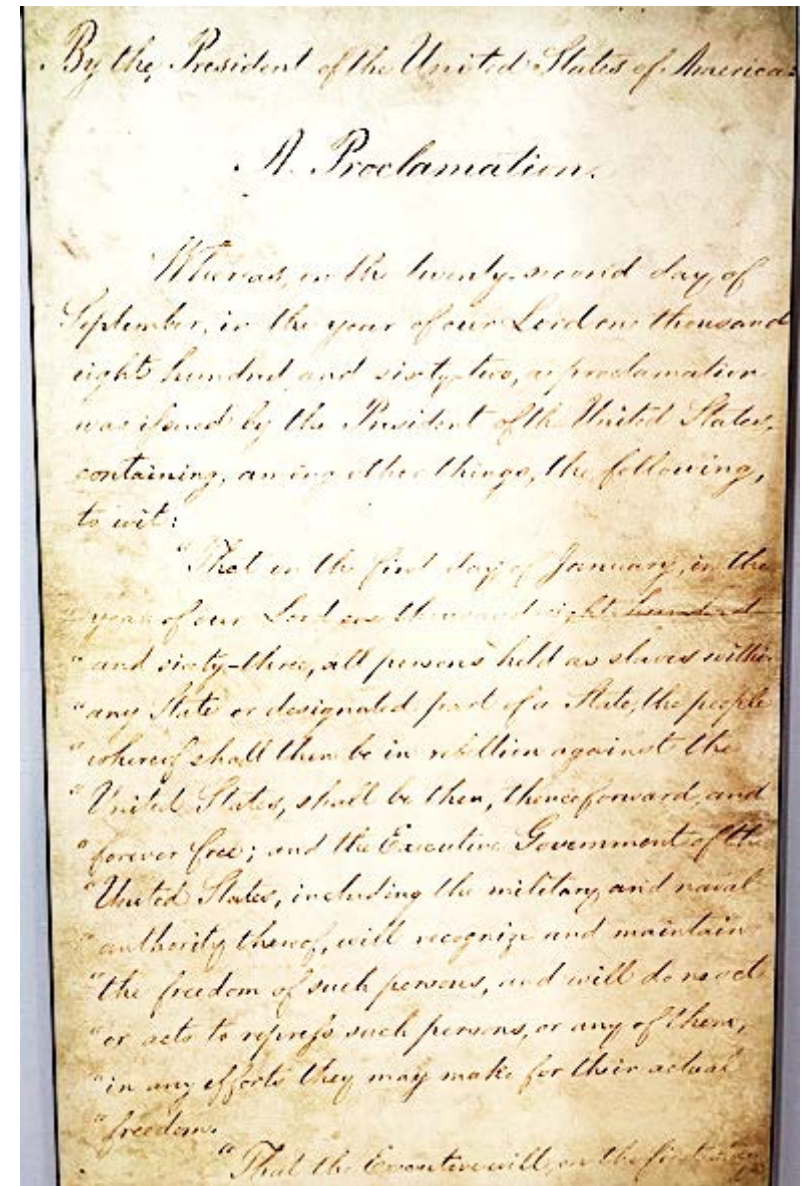




RACIAL SOCIALIZATION: SELF-LEARNING REQUIRED



National Museum of African American History and Culture (NMAAHC), Washington, DC

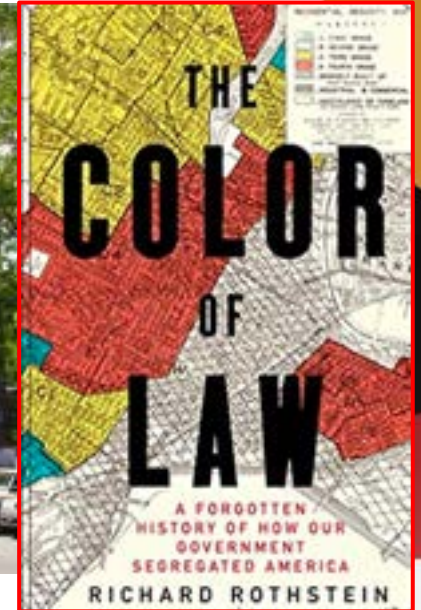
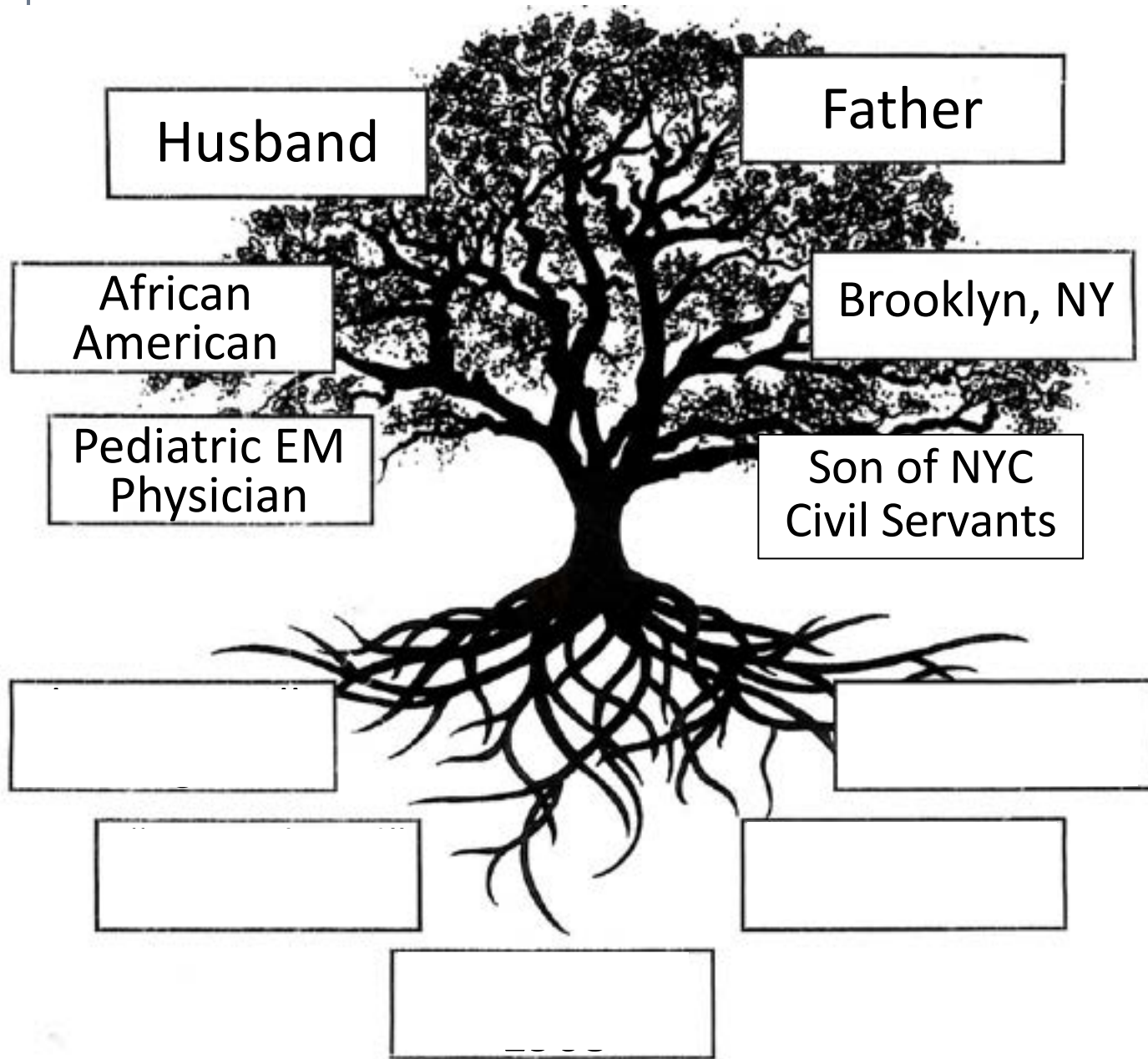


International African American Museum (IAAM), Charleston, SC

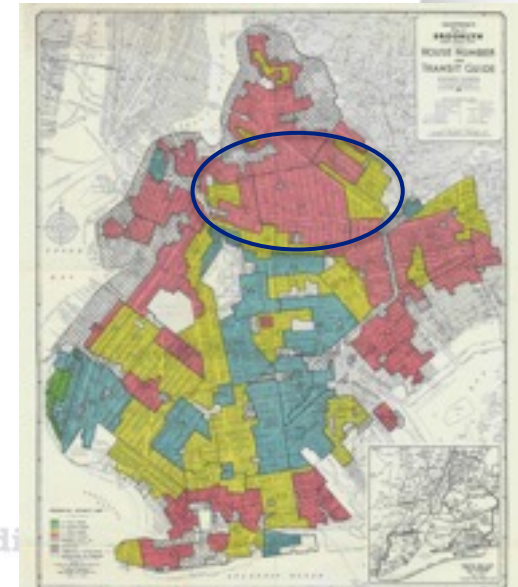


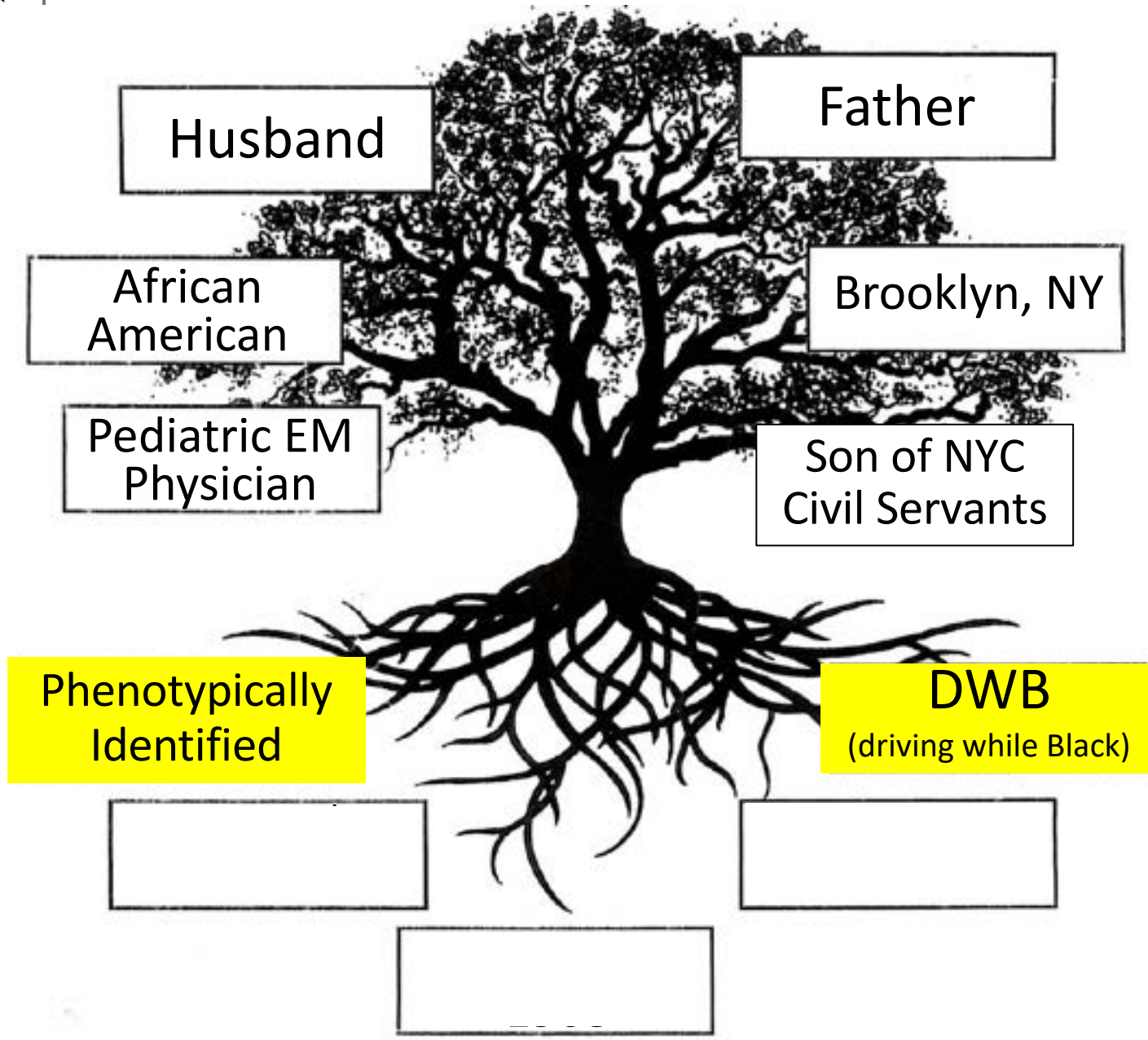
LIVED EXPERIENCE: LEAVES AND ROOTS

- **WHAT:** a networking activity to foster deeper connections and share as much as you like with colleagues that you may know really well or are meeting for the first time.
- **LEAVES:** Things about you that **are readily visible** (hobbies, demographic information, important people in your life, distinguishable personal traits, favorite music, things you do well, etc.)
- **ROOTS:** Things about you that **are not easily visible** (where you are from, values, important life events, achievements, things you struggle with, long term goals, secret dreams, etc.)

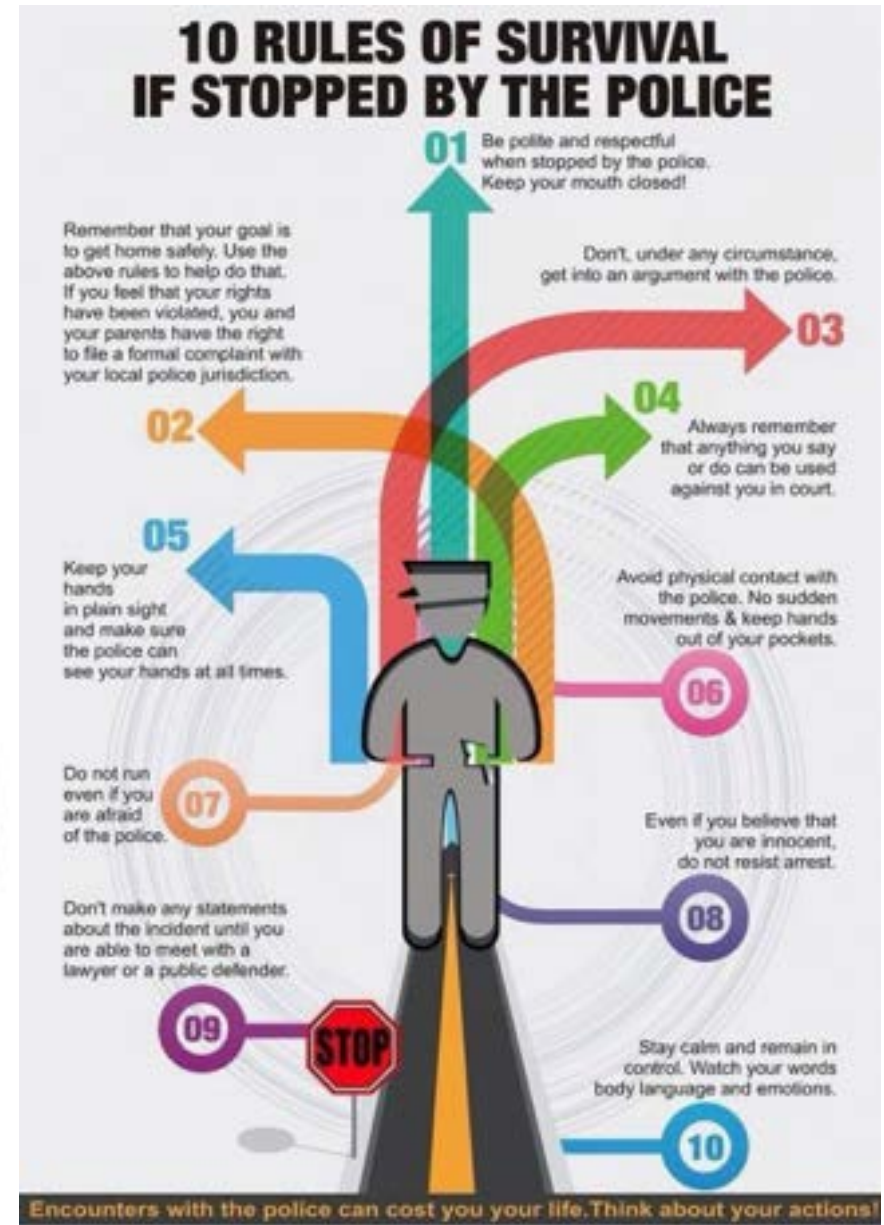


Brevoort Projects:
'do or die" Bed-Stuy





THE TALK





THE TALK – IT'S REAL

Executions and Police Conflicts Involving Children, Adolescents and Young Adults

Tiffani J. Johnson, MD, MSc^{a,*}, Joseph L. Wright, MD, MPH^b

KEYWORDS

- Police violence • Policing • Race • Racism • Disparities • Discrimination
- Implicit bias

Pediatr Clin North Am. 2021 Apr;68(2):465-487






PNAS

RESEARCH ARTICLE

SOCIAL SCIENCES

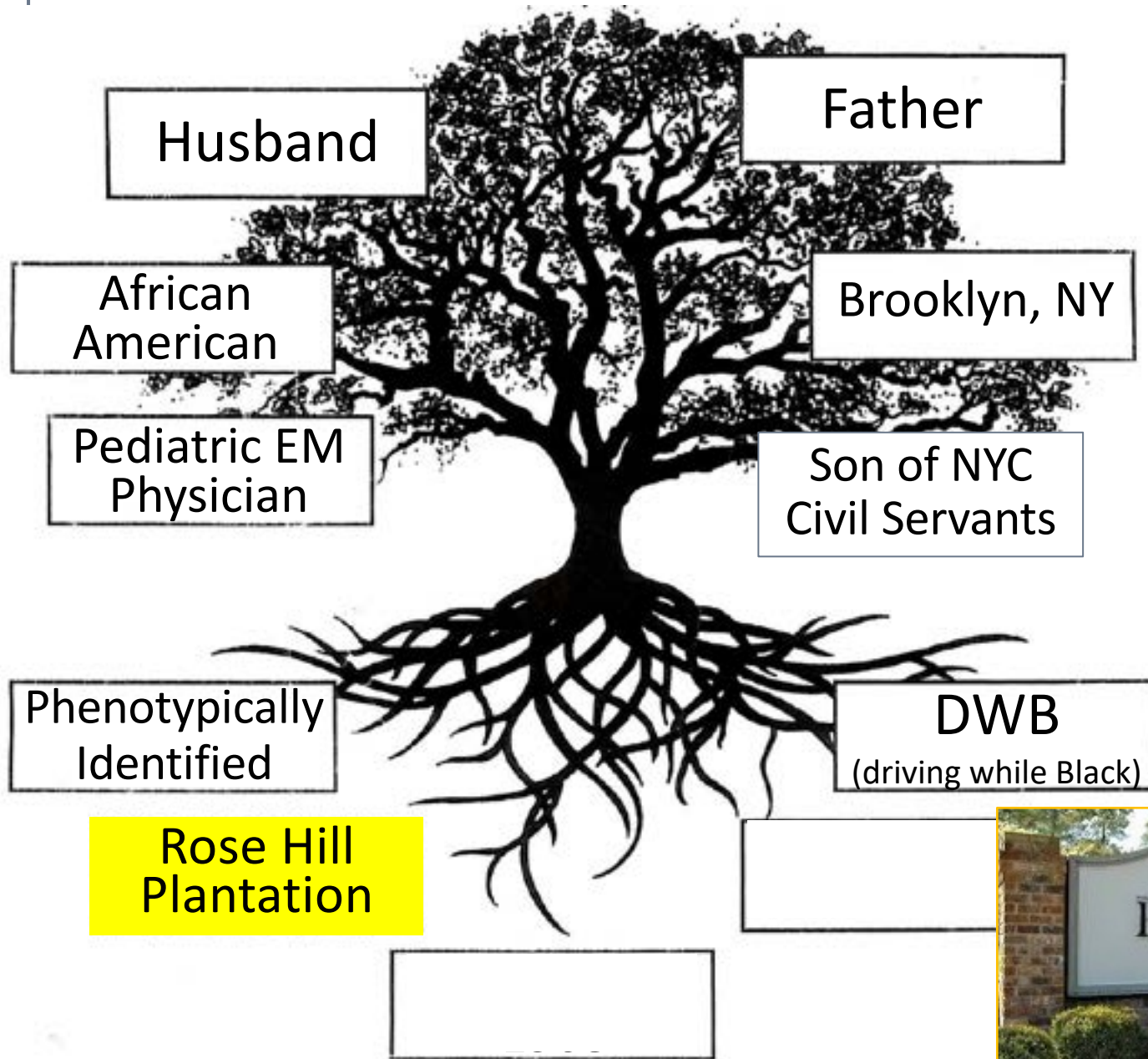
 OPEN ACCESS

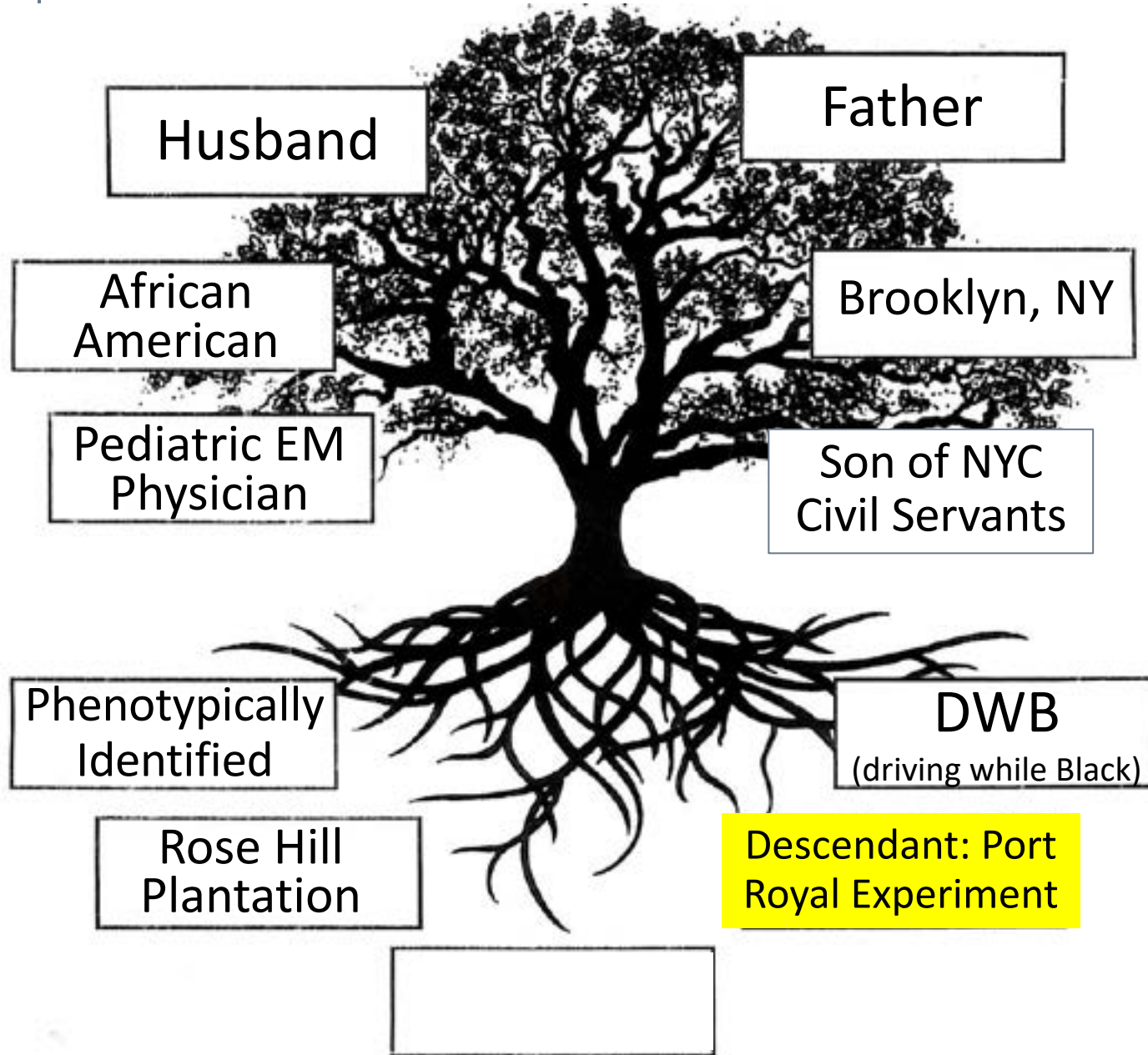
Escalated police stops of Black men are linguistically and psychologically distinct in their earliest moments

Eugenia H. Rho^{a,1} , Maggie Harrington^b, Yuyang Zhong^c , Reid Pryzant^d, Nicholas P. Camp^c, Dan Jurafsky^{d,e,1} , and Jennifer L. Eberhardt^{b,f,1}

Disposition of a traffic stop is determined within the first 45 words

Proc Natl Acad Sci U S A. 2023 Jun 6;120(23):e2216162120





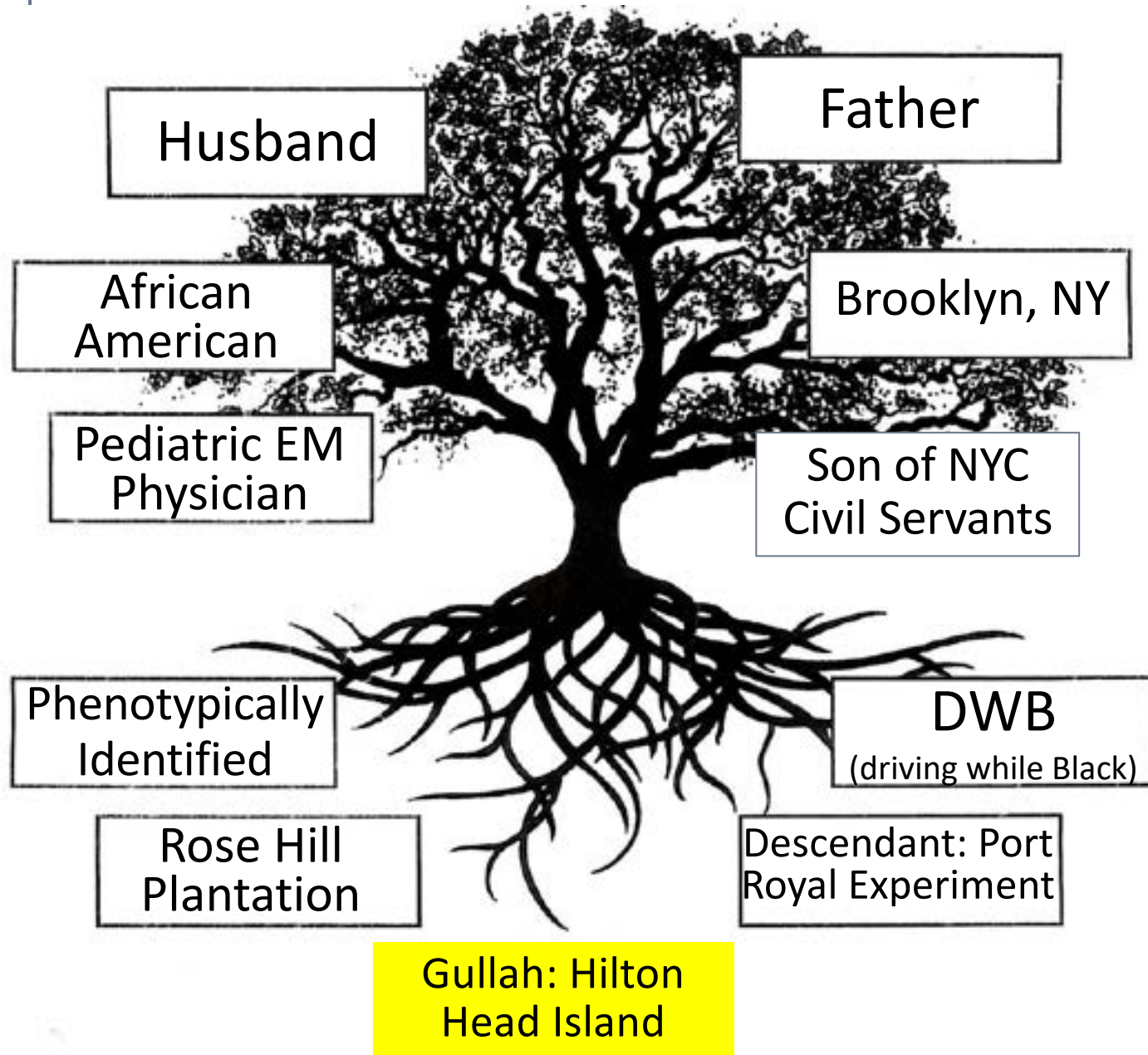
RESTORATIVE HISTORY





RESTORATIVE HISTORY



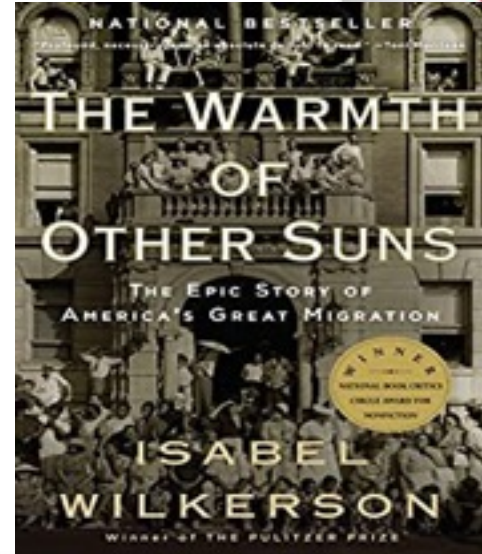


MITCHELVILLE: CULTURAL PRIDE REINFORCEMENT





LEARNING THE LOW COUNTRY: AN *INTERGENERATIONAL* LIVED EXPERIENCE





| SANKOFA – THE IMPORTANCE OF REMEMBERING OUR COLLECTIVE PAST TO BUILD A BETTER FUTURE





MUTUALISM

“Injustice anywhere is a threat to justice everywhere. We are caught in an inescapable network of mutuality. Whatever affects one directly, affects us all indirectly.”

- MLK, *Letter from a Birmingham Jail*, 1963





A CURRICULUM IN PLAIN SIGHT FOR OUR LEARNERS

- Presentation Outline

- Truth

- *What are we talking about?*
- *How did we get here?*

- Reconciliation

- *Why is this important?*

- Transformation

- *What is the task at hand?*



American Academy of Pediatrics Board of Directors. Truth, Reconciliation and Transformation: Continuing on the Path to Equity. Pediatrics. 2020 Sep;146(3):e2020019794.

Eliminating Race-Based Medicine:

Truth - What are we talking about?

➤ *Assumptions vs. Reality*





TRUTH: FLAWED ASSUMPTIONS

- Race is a biologic category
- Race is a construct for genetic difference
- Equivalency between genes that determine race and health





TRUTH: REALITY

- **Race** is a not a biologic category based on innate differences. Rather, it is a social construct that reflects differential and often inequitable lived experiences and should not be used as a biologic proxy for disparities.

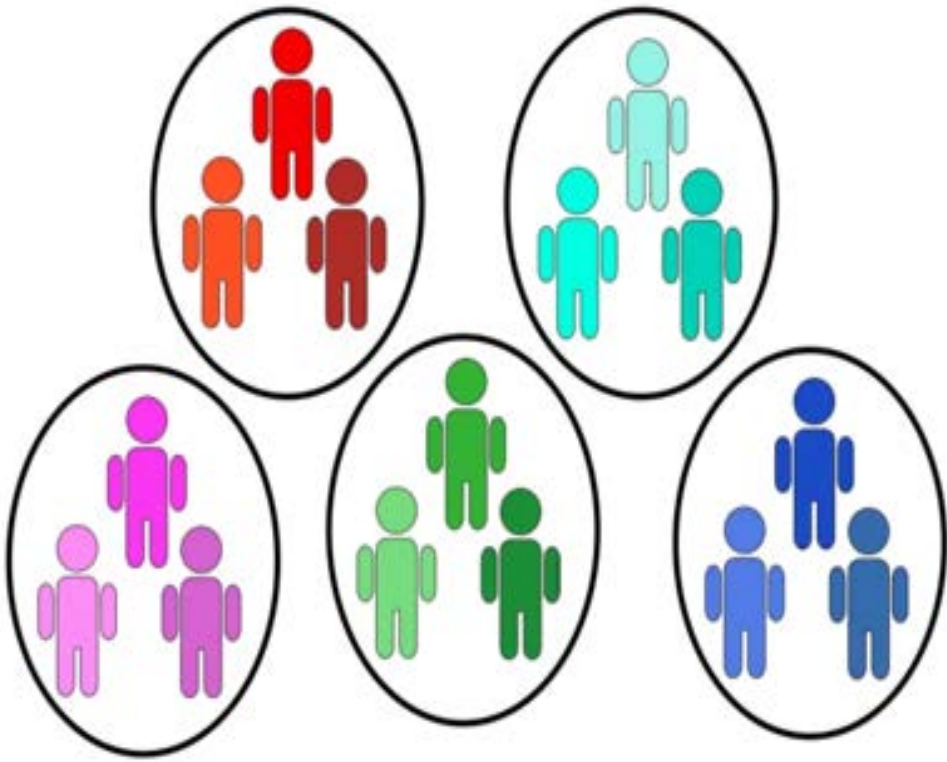




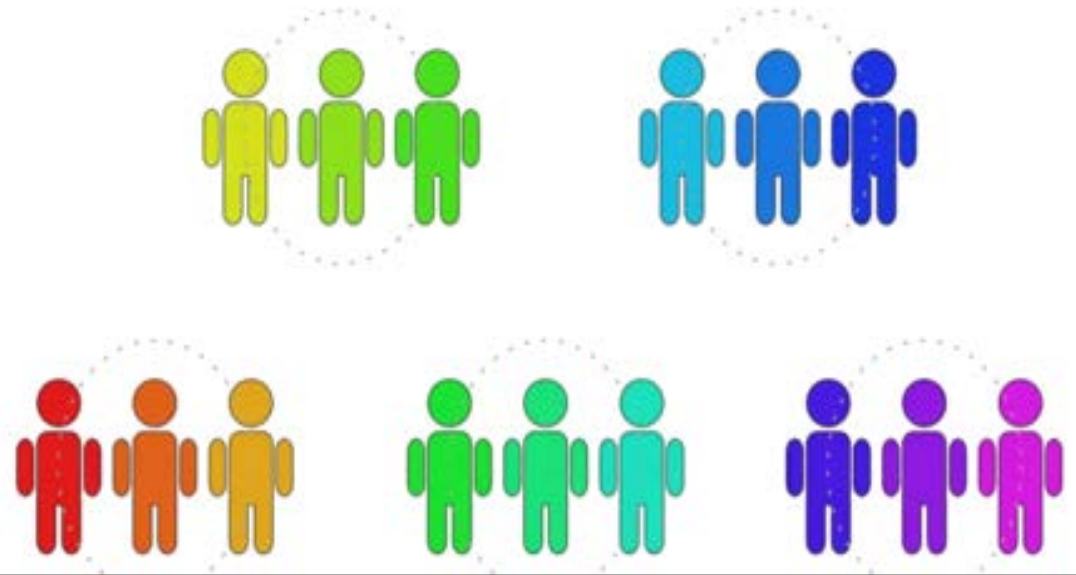
TRUTH: RACE, ANCESTRY, AND GENETIC VARIATION

The greatest fraction of genetic diversity is found within populations, rather than between them.

Popular conception of genetics



Actual genetic variation



Adapted from: <https://sitn.hms.harvard.edu/flash/2017/science-genetics-reshaping-race-debate-21st-century>



TRUTH: BOTTOM LINE

- We share 99.9% of DNA with one another; only 0.1% varies between individuals.
- Stratification based on the minute portion of that 0.1% variation responsible for the phenotype of skin color has been used throughout history to justify a belief in human hierarchy.

Courtesy: Child Health Advocacy Institute, Children's National Hospital





RACE-BASED MEDICINE

- Inappropriate use of race as a corrective, risk-adjusting, or dichotomizing variable in algorithms, practice guidelines, or policies that influence the clinical decision-making process.





PEDIATRIC URINARY TRACT INFECTION

CLINICAL PRACTICE GUIDELINE

Urinary Tract Infection: Clinical Practice Guideline for the Diagnosis and Management of the Initial UTI in Febrile Infants and Children 2 to 24 Months

Pediatrics 2011;128(3):595 reaffirmed 2016

Individual Risk Factors: Girls	Probability of UTI	No. of Factors Present	
White race Age < 12 mo Temperature $\geq 39^{\circ}\text{C}$ Fever ≥ 2 d Absence of another source of infection	$\leq 1\%$	No more than 1	
	$\leq 2\%$	No more than 2	

Individual Risk Factors: Boys	Probability of UTI	No. of Factors Present	
Nonblack race Temperature $\geq 39^{\circ}\text{C}$ Fever > 24 h Absence of another source of infection	$\leq 1\%$	Uncircumcised	Circumcised
		a	No more than 2
	$\leq 2\%$	None	No more than 3

FIGURE 2

Probability of UTI Among Febrile Infant Girls²⁸ and Infant Boys³⁰ According to Number of Findings Present. ^aProbability of UTI exceeds 1% even with no risk factors other than being uncircumcised.

Probability of UTI based on clinical characteristics

Enter child's clinical characteristics below (all fields are required)

Age < 12 months

☐ Yes ☐ No

Maximum temperature $\geq 39^{\circ}\text{C}$ (i.e., 102.2°F)

☐ Yes ☐ No

Self describes race as black

☐ Yes ☐ No

Female or uncircumcised male

☐ Yes ☐ No

Other fever source*

☐ Yes ☐ No

Probability of UTI

—

Calculate

Clear

Eliminating Race-Based Medicine:

Truth - How did we get here?

- *Historical Transgressions*
- *Organized Pediatrics' Equity Journey*





ROOTS OF RACE-BASED MEDICINE

- “On the dysfunction of the pulmonary apparatus in Blacks...among the real distinctions which nature has made is a lack of lung capacity.”

- Thomas Jefferson, 1781

Library of Congress

Notes on the state of Virginia.

582 382

NOTES ON THE STATE OF VIRGINIA.

BY THOMAS JEFFERSON.

LC

BOSTON: PUBLISHED BY LILLY AND WAIT.

<https://www.loc.gov/item/03004902/.pdf>

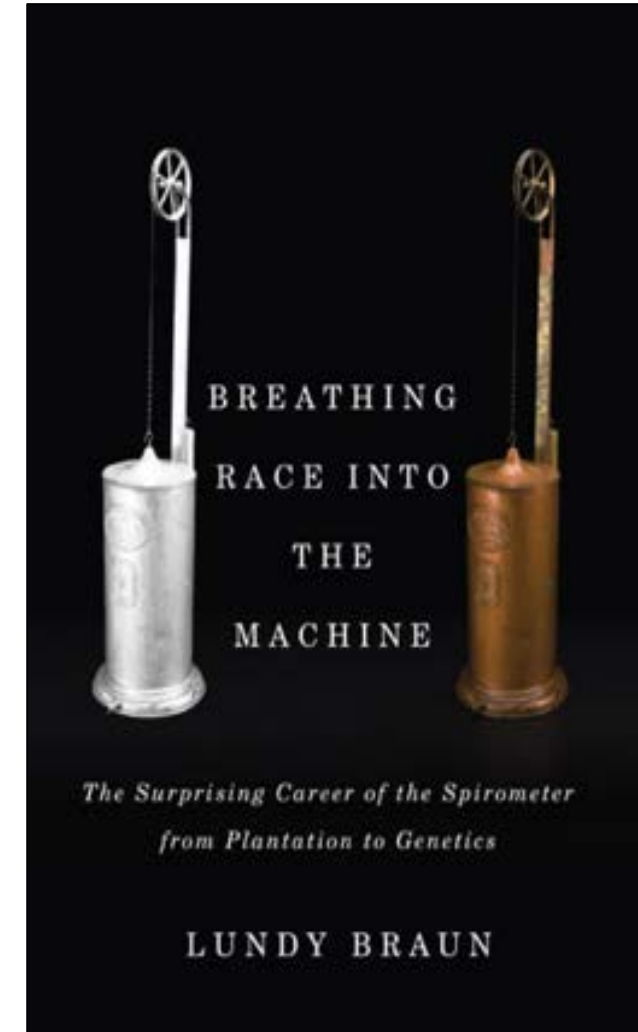


PSEUDOSCIENCE OF RACE NORMING IN LUNG FUNCTION ASSESSMENT

- "Lung capacity in the Negro is 20% deficient...because small lungs prevent Blacks from inhaling enough air forced labor is a way to vitalize the blood and correct the problem."

- Dr. Samuel Cartwright, 1851

Cartwright SA. Report on the diseases and physical peculiarities of the negro race. *New Orleans Medical and Surgical Journal*. 1851;VII:692-713.



Braun L. Race correction and spirometry: Why history matters. *Chest*. 2021;159:1670.



Race- and Ethnicity-Based Spirometry Reference Equations



Are They Accurate for Genetically Admixed Children?

Jonathan Witonsky, MD; Jennifer R. Elhawary, MS; Celeste Eng, BS; José R. Rodríguez-Santana, MD; Luisa N. Borrell, DDS, PhD; and Esteban G. Burchard, MD, MPH

INTERPRETATION: Guideline-recommended spirometry reference equations yielded biased estimates of lung function in genetically admixed children with high variation of African ancestry. Spirometry could benefit from reference equations that incorporate genetic ancestry, either for more precise application of the current equations or the derivation and use of new equations.

Chest. 2022 Jul;162(1):184-195



Race and Ethnicity in Pulmonary Function Test Interpretation

An Official American Thoracic Society Statement

Recommendation for PFT Reporting and Interpretation

A majority (30/33) of workshop participants recommend using a race-neutral average reference equation instead of race-specific equations in PFT laboratories and clinical practice. The majority cited limitations and problems with classifying individuals by race, the lack of evidence for benefit of race-specific equations, and the growing scientific evidence that supports both the use of a single reference equation and the concerns about norming social and environmental risk factors for reduced pulmonary function.

“HOT OFF THE PRESS”

Among the three who disagreed, one cited the harms in not comparing a person's results to those of other people who self-identify with the same race or ethnicity, as well as the recommendation's conflict with their view of heritable differences in body proportions between people that were set by different ancestral climates.

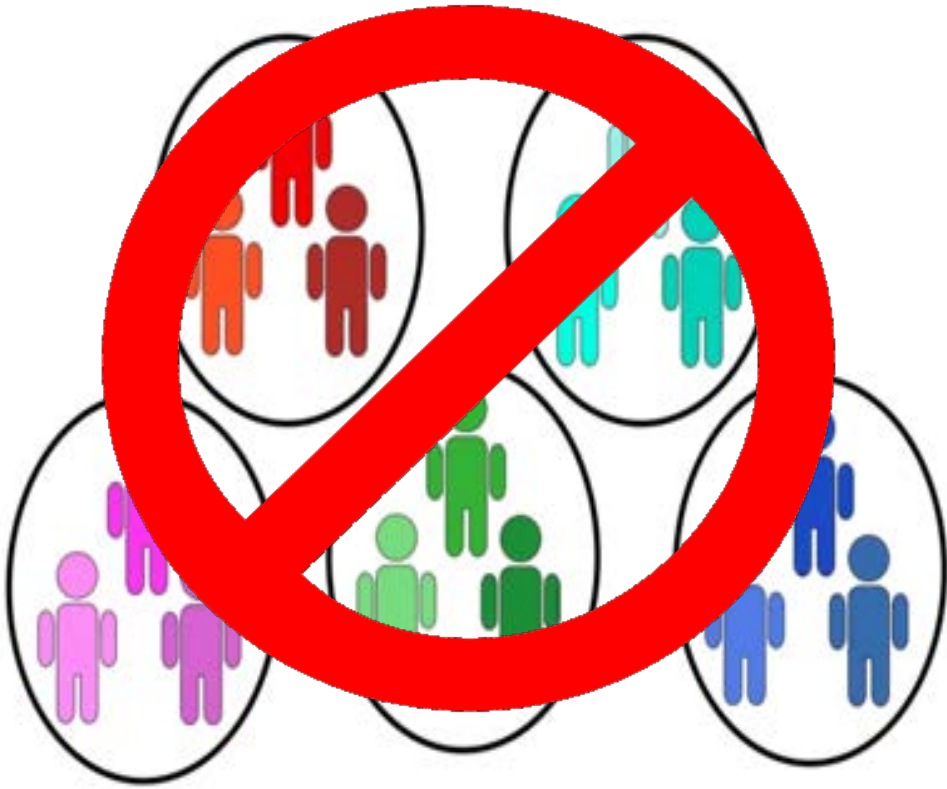
American Journal of Respiratory and Critical Care Medicine Volume 207 Number 8 | April 15 2023



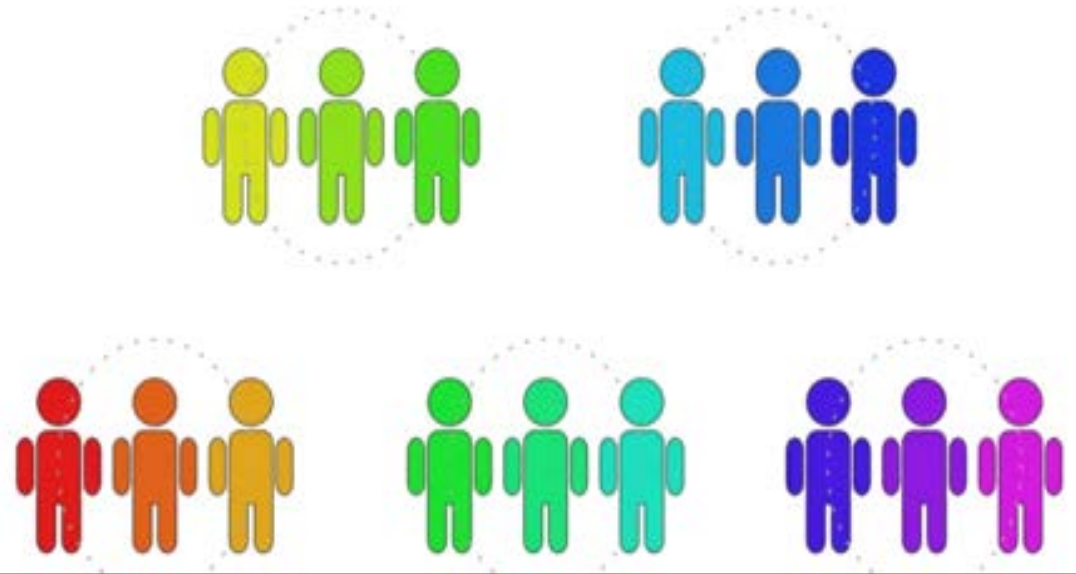
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CHALLENGING DOGMA, DEBUNKING MYTH:

REMOVING RACE/ETHNICITY FROM CLINICAL ALGORITHMS AND PRACTICE GUIDELINES

Opportunity

Problem

Health Equity Consequence

- Staging of Chronic Kidney Disease (CKD)



- Black patients with advanced CKD experience referral delays.

- Black patients now likely to be younger and healthier upon referral.

- Vaginal Birth After Cesarean (VBAC) Calculator



- Race/ethnicity negatively 'correct' calculation predicting lower likelihood of success.

- Objective and safe promotion of vaginal birth in populations already beset w/ disproportionate morbidity.

- Neonatal Hyperbilirubinemia Clinical Practice Guideline (NH CPG)



- Black infants at risk for kernicterus, i.e., hazardous hyperbilirubinemia with encephalopathy, neurotoxicity

- Eliminates algorithmic minimization for Black infants of risk leading to dangerous, irreversible disparity.

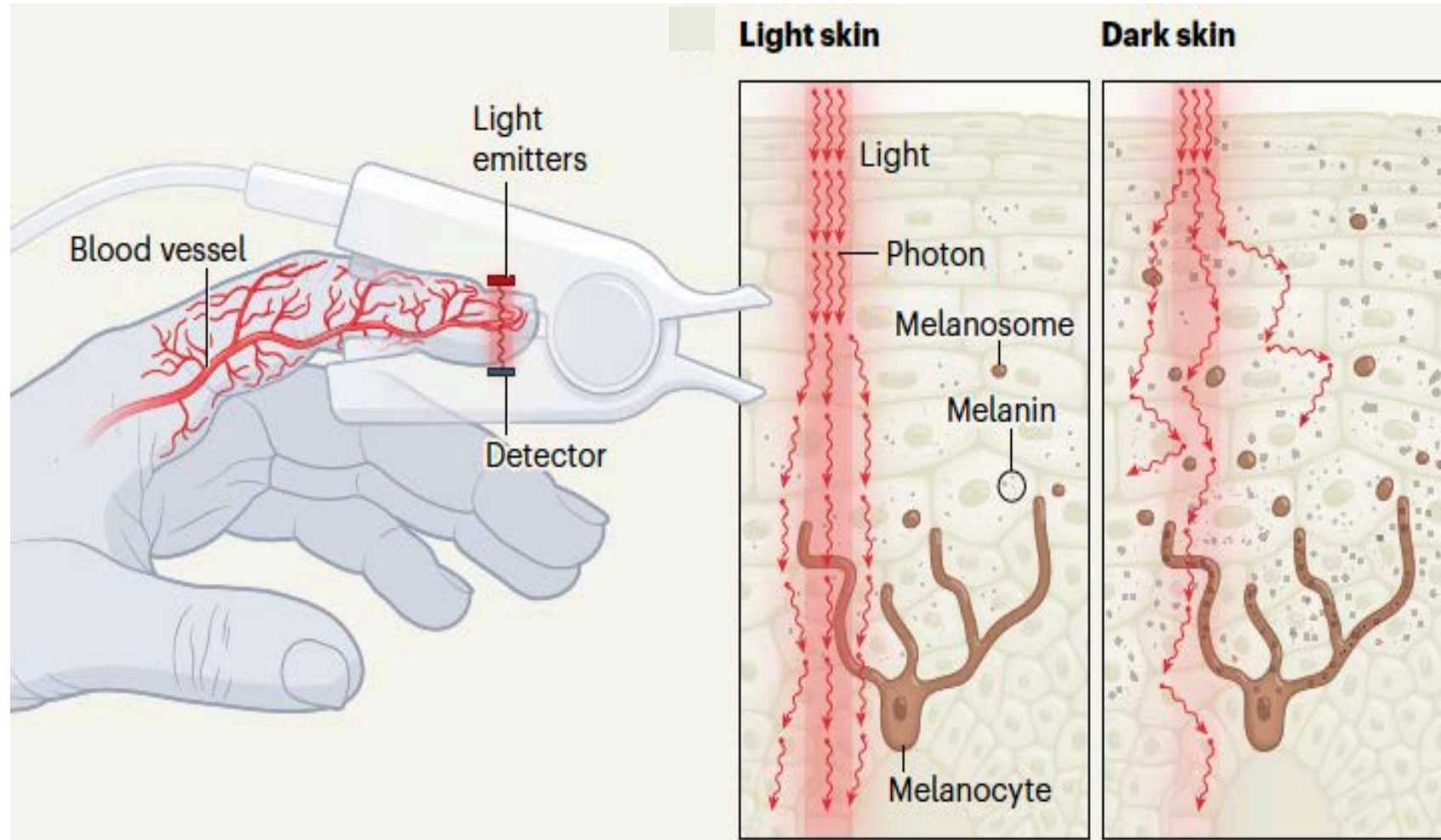
- Atherosclerotic Cardiovascular Disease (ASCVD) Risk

- Substantial and biologically implausible differences, i.e., up to 23%, found based on race alone.

- More accurately calibrated tool to direct appropriate care for all patients.

Adapted from *NEJM* 2020;383(9):874-82

BIAS IN THE TECHNOLOGY



Undetected (Occult) Hypoxemia in Pulse Oximetry



EVALUATING THE ACCURACY OF PULSE OXIMETRY IN CHILDREN

EDITORIAL

JAMA Pediatrics Published online March 20, 2023

Effects of Racial Bias in Pulse Oximetry on Children and How to Address Algorithmic Bias in Clinical Medicine





Keyaria D. Gray, DO; Hamsa L. Subramaniam, PhD, MPH; Erich S. Huang, MD, PhD

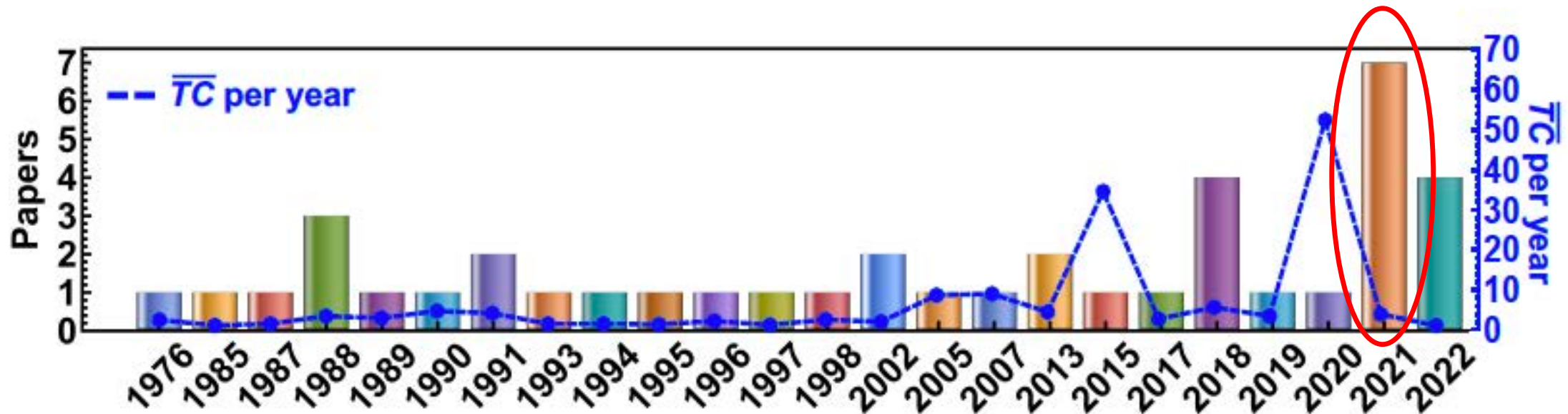
In this issue of *JAMA Pediatrics*, Ruppel et al⁴ perform an electronic health record (EHR)-based review of the accuracy of pulse oximetry in children according to race by comparing results from arterial blood oxygen saturation (SaO_2)—the criterion standard—with pulse oximetry (SpO_2). All arterial blood oxygen saturation samples were obtained within 1 minute of an SpO_2 reading during a pediatric cardiac catheterization, and the accuracy was compared among Black and White infants. Consistent with other studies, pulse oximetry overestimated the oxygen saturations in children of Black or African American race more often than in White children.



JAMA Pediatr. 2023 Mar 20:e230071
Epub ahead of print.

Skin Pigmentation Influence on Pulse Oximetry Accuracy: A Systematic Review and Bibliometric Analysis

Ana M. Cabanas ^{1,*} , Macarena Fuentes-Guajardo ² , Katina Latorre ² , Dayneri León ³
and Pilar Martín-Escudero ⁴ 





“HISTORY NEVER REPEATS, BUT IT DOES OFTEN RHYME”

— MARK TWAIN



“
Rigorous,
authoritative
and honest
science
acknowledges
what came
before.”

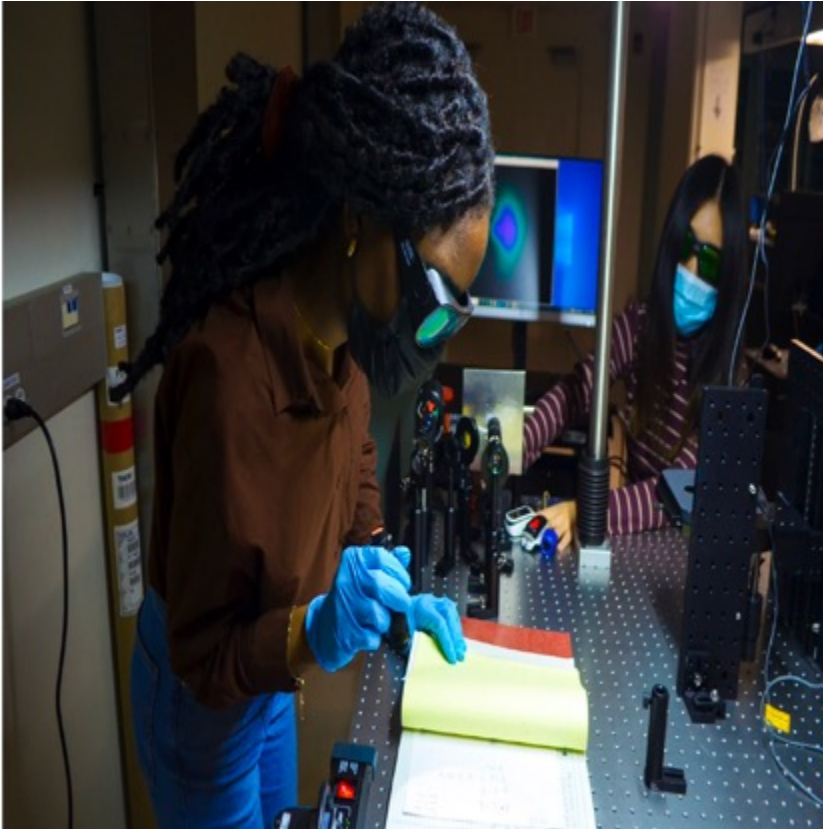
*How do we hold
academia,
industry,
regulators,
policy-makers
accountable?*

A Nature special issue 20 October 2022

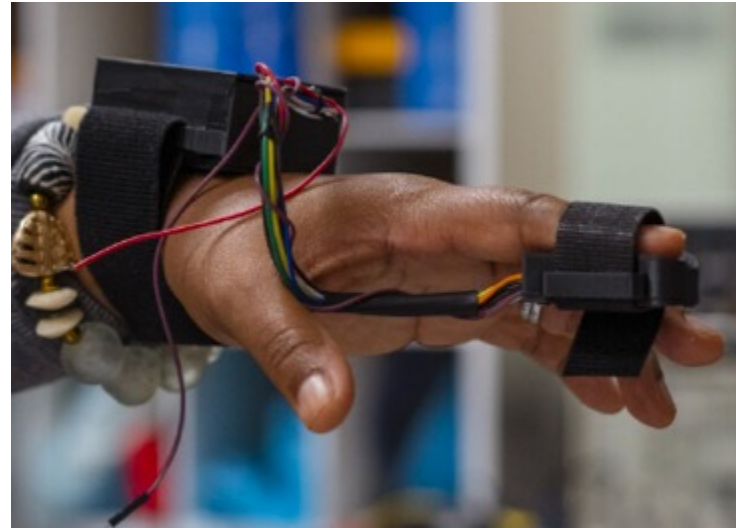


INCLUSIVE SCIENCE: INVESTIGATORS MATTER

‘A poster child’ for diversity in science: Black engineers work to fix long-ignored bias



Kimani Toussaint, a professor and senior associate dean of engineering at Brown



Brown University doctoral student Rutendo Jakachira is helping to develop a next-generation pulse oximeter

Eliminating Race-Based Medicine:

Truth - How did we get here?

- *Historical Transgressions*
- *Organized Pediatrics' Equity Journey*





ORGANIZED PEDIATRICS – CALLING THE QUESTION

The Road to Tolerance and Understanding
Peter G. Szilagyi, Benard P. Dreyer, Elena Fuentes-Afflick, Tamera Coyne-Beasley
and Lewis First
Pediatrics 2017;139;
DOI: 10.1542/peds.2017-0741 originally published online May 3, 2017;

2017



2019



2020

American Academy
of Pediatrics
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**The Impact of Racism on Child and
Adolescent Health**
Maria Trent, MD, MPH, FAAP, FSAHM,* Danielle G. Dooley, MD, MPhil, FAAP,* Jacqueline Dougé, MD, MPH, FAAP,* SECTION ON
ADOLESCENT HEALTH, COUNCIL ON COMMUNITY PEDIATRICS, COMMITTEE ON ADOLESCENCE

www.nature.com/pr

Pediatric RESEARCH



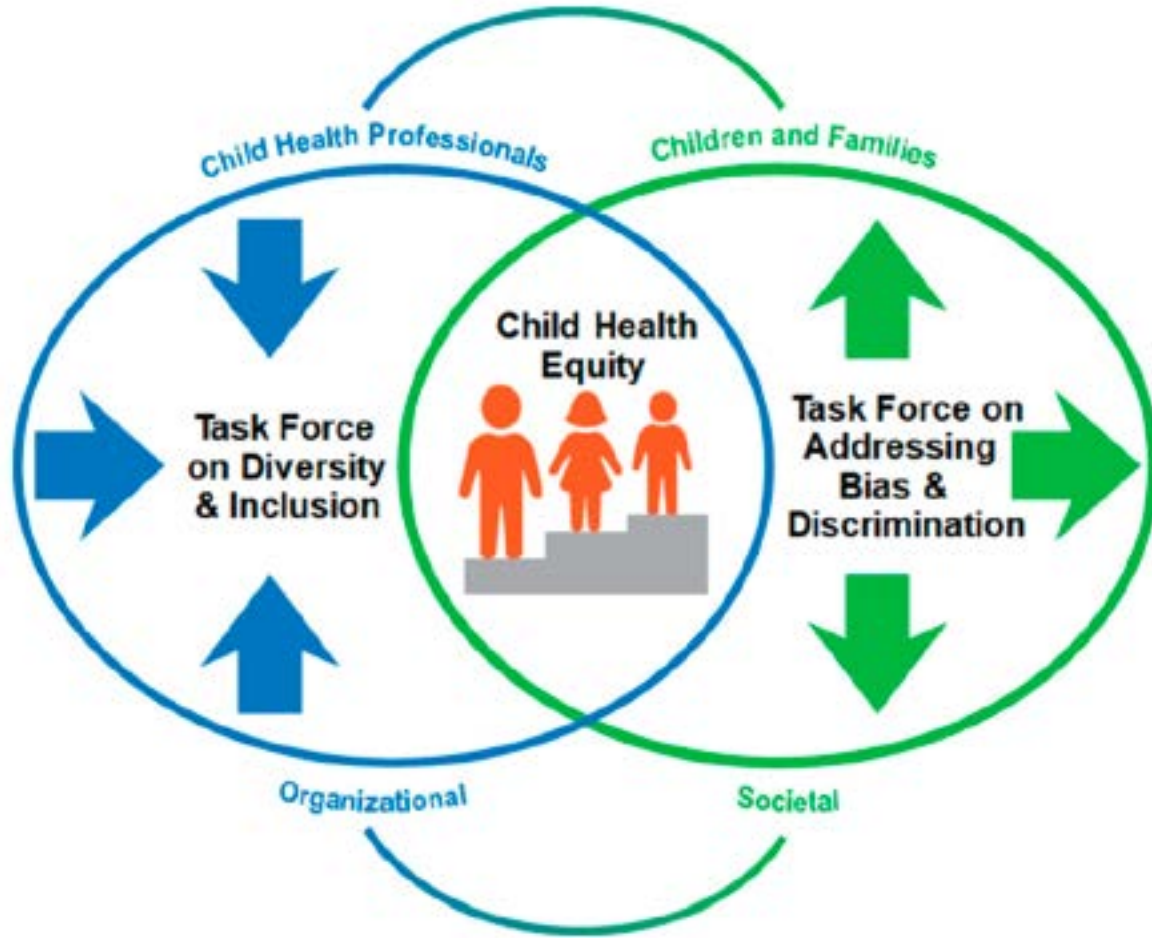
COMMENT

**“Racism as a public health issue” APS racism series: at the
intersection of equity, science, and social justice**

Joseph L. Wright^{1,2}, James N. Jarvis³, Lee M. Pachter^{4,5} and Leslie R. Walker-Harding⁶



AAP EQUITY JOURNEY: STRATEGIC AGENDA PLANNING



2016 - 2019



Task Force on Diversity and Inclusion



Task Force on Addressing Bias & Discrimination



AAP EQUITY JOURNEY: POLICY DEVELOPMENT



Pediatrics 2019 Aug;144(2):e20191765

- Landmark statement:
 - Authoritative
 - Pre George Floyd
- Bibliometrics:
 - 700 citations
 - 97,442 views



POLICY STATEMENT

Organizational Principles to Guide and Define the Child Health Care System and/or Improve the Health of all Children

Sept 2020

American Academy
of Pediatrics



DEDICATED TO THE HEALTH OF ALL CHILDREN®

Truth, Reconciliation, and Transformation: Continuing on the Path to Equity

American Academy of Pediatrics Board of Directors

Oct 2021

American Academy
of Pediatrics



DEDICATED TO THE HEALTH OF ALL CHILDREN®

AAP Perspective: Race-Based Medicine

American Academy of Pediatrics Board of Directors and Executive Committee

POLICY STATEMENT

Organizational Principles to Guide and Define the Child Health Care System and/or Improve the Health of all Children

July 2022

American Academy
of Pediatrics



DEDICATED TO THE HEALTH OF ALL CHILDREN®

Eliminating Race-Based Medicine

Joseph L. Wright, MD, MPH, FAAP,^{a,b} Wendy S. Davis, MD, FAAP,^c Madeline M. Joseph, MD, FAAP,^d Angela M. Ellison, MD, MSc, FAAP,^{e,f} Nia J. Heard-Garris, MD, MSc, FAAP,^g Tiffani L. Johnson, MD, MSc, FAAP,^h and the AAP Board Committee on Equity

Pediatrics 2020;146(3):e2020019794

Pediatrics 2021;148(4):e2021053829

Pediatrics 2022;150(1):e2022057998

AAP EQUITY JOURNEY: POLICY DEVELOPMENT



DR. ROLAND B. SCOTT

The New York Times

August 25, 2020

Account ▾

Pediatrics Group Offers 'Long Overdue' Apology for Racist Past

The American Academy of Pediatrics recently joined other prominent medical organizations in confronting its history of discrimination.





RESOLUTION FOR AMENDMENT TO THE BYLAWS OF THE AMERICAN ACADEMY OF PEDIATRICS

RESOLVED, that the Bylaws of the American Academy of Pediatrics shall be hereby amended to include a first new article pertaining to anti-discrimination. The article in its entirety is as follows:

ARTICLE I

Anti-Discrimination: Embracing equity for all children and families as well as for the pediatricians who care for them is central to the mission of the Academy. The AAP is committed to achieving meaningful diversity and inclusion and to combat bias and discrimination in all its forms, including structural and systemic racism.

AAP does not discriminate on the basis of race, ethnicity, religion, sex, sexual orientation, gender identity, disability, and national origin.



AAP EQUITY AND ANTI-RACISM JOURNEY: EDUCATION

Resolution #71 2020 Annual Leadership Forum

TITLE: Prohibit the Use of Race-Based Medicine

SPONSORED BY: District VI

DATE: October 31, 2019

DISPOSITION: ADOPTED

RESOLVED, that the Academy shall end the practice of using race as a proxy for biology or genetics in all their educational events and literature, and be it further

RESOLVED, that the Academy require race be explicitly characterized as a social construct when describing risk factors for disease with all presentations at AAP sponsored conferences including a slide certifying their content does not teach race-based medicine.

Chomilo N. Available at: <https://collaborate.aap.org/alf/Documents/Prohibit%20the%20use%20of%20Race-Based%20Medicine.pdf>



EQUIPPING AUTHORS AND CONTRIBUTORS: *WORDS MATTER*

Words Matter: AAP Guidance on Inclusive, Anti-biased Language

The AAP encourages the use of inclusive, anti-biased language in [all](#) its publications and communications in order to mitigate and combat bias, avoid stereotypes, remove stigma, and promote strengths. The use of inclusive, anti-biased language is consistent with the [AAP Diversity and Inclusion Statement](#) and supports the Academy's Equity Agenda by reflecting diverse lived experiences and acknowledging the oppressive systems.

“...not only do words matter but so does context – both social and situational. It is important to note that words do not exist in a vacuum. They are contextualized by history, politics, social position, geography, and other variables. ***Recognizing that these factors are dynamic, so too is language.***”

General Considerations

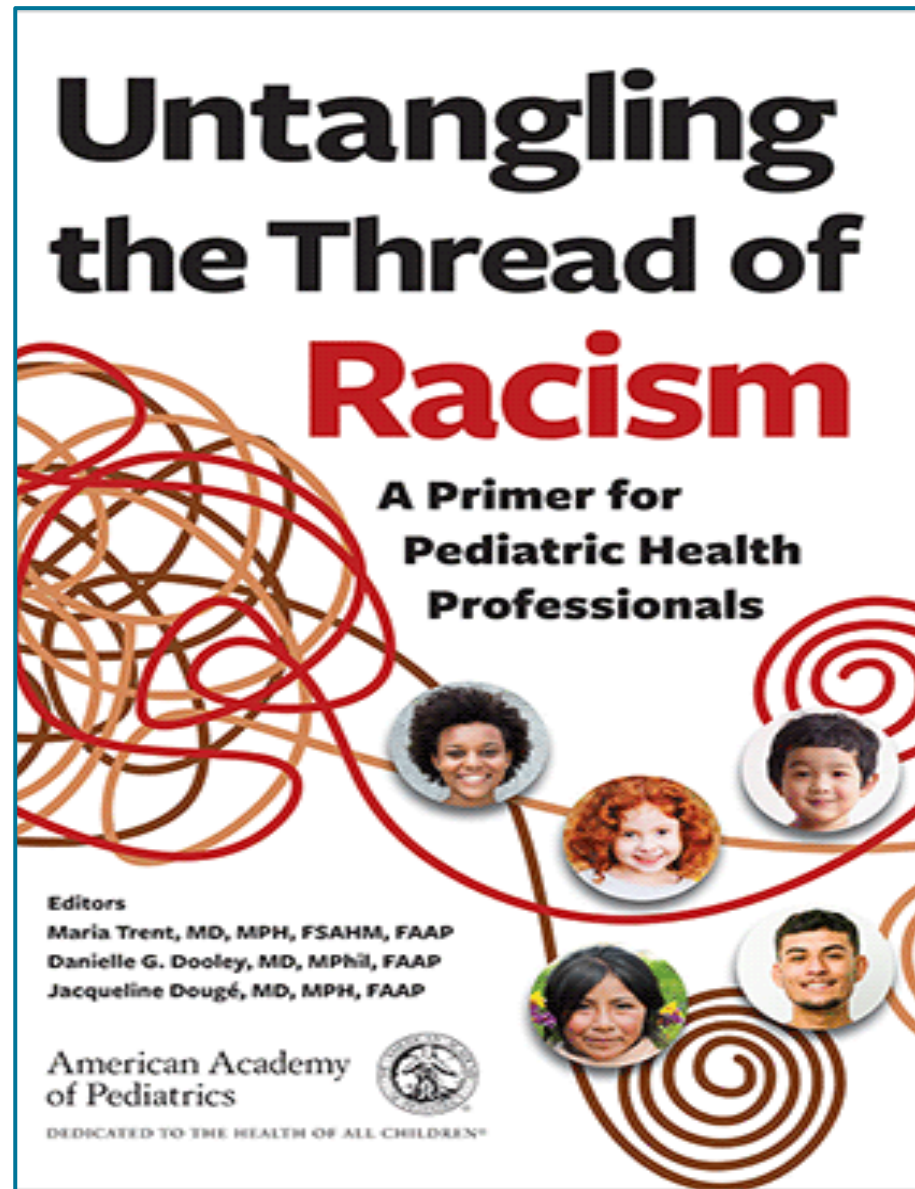
- Be as specific as possible when referring to groups or subjects. Specificity provides clarity and avoids multiple interpretations or misinterpretations.
- Use terms like “vulnerable,” and “marginalized” sparingly as general descriptors. They can obscure meaning. For example, instead of using “vulnerable” consider using “people experiencing barriers or people with less resources”. As a rule of thumb, these terms should be avoided if the populations

***Amendment to
the AAP Board
Policy Manual***

American Academy of Pediatrics. Words matter: AAP guidance on inclusive, anti-biased language. Available at: <https://services.aap.org/en/about-the-aap/american-academy-of-pediatrics-equity-and-inclusion-efforts/words-matter-aap-guidance-on-inclusive-anti-biased-language>.



Maria Trent, MD, MPH



Available October 15th, 2023



Danielle Dooley, MD, MPhil



Jacqueline Dougé, MD, MPH



EDUCATION: EQUITY AND ANTI-RACISM – AN EMERGING CORE COMPETENCY



Entrustable Professional Activities **EPA 14 for General Pediatrics**

EPA 14: Use Population Health Strategies and Quality Improvement Methods to Promote Health and Address Racism, Discrimination, and Other Contributors to Inequities Among Pediatric Populations

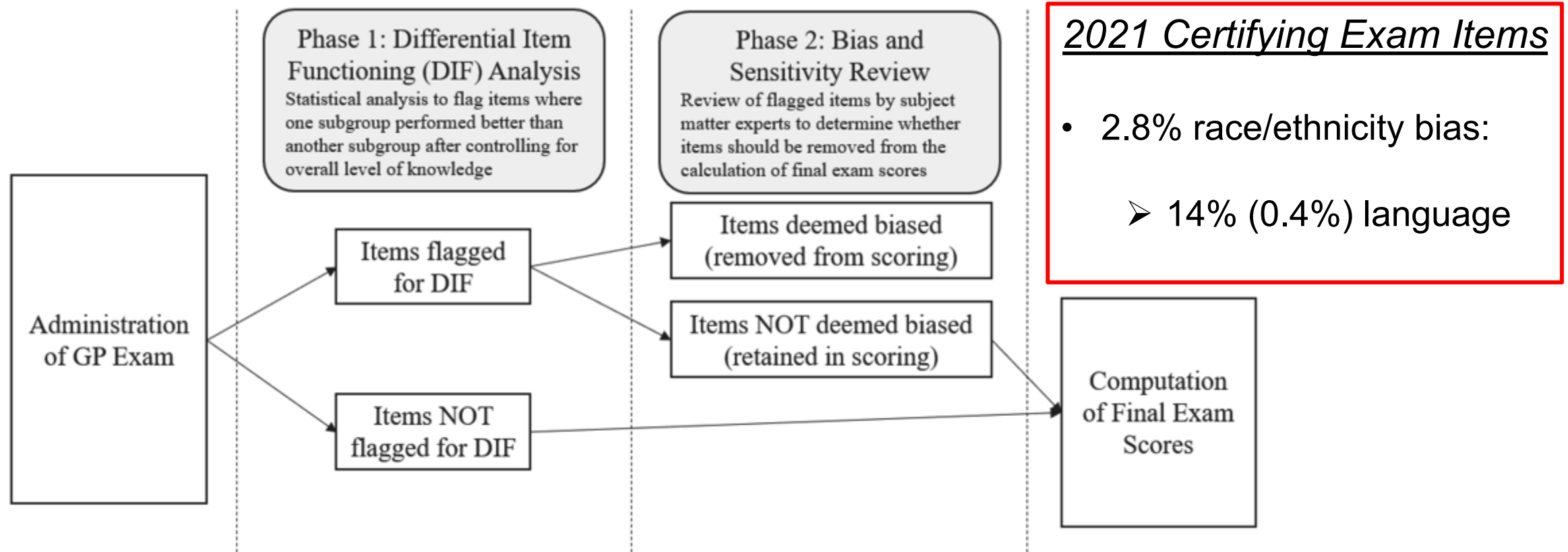
An Entrustable Professional Activity Addressing Racism and Pediatric Health Inequities

Ndidi I. Unaka, MD, MEd,^{a,b} Ariel Winn, MD,^{c,d} Adiaha Spinks-Franklin, MD, MPH,^e Patricia Poitevien, MD, MSc,^f Franklin Trimm, MD,^g Brenda J. Nuncio Lujano, MS,^h David A. Turner, MD^h

Pediatrics. 2022 Feb 1;149(2):e2021054604



IDENTIFYING AND ADDRESSING ITEM BIAS IN THE CERTIFYING EXAMINATION



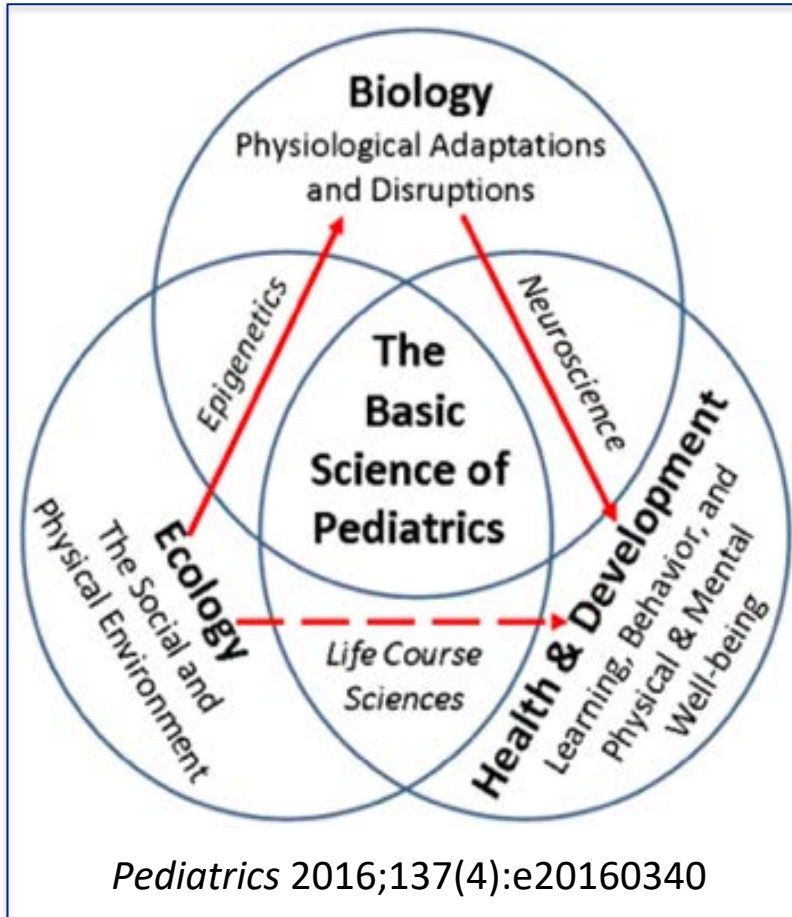
Process to identify and remove potential item bias from the General Pediatrics Exam

Eliminating Race-Based Medicine: Reconciliation – *Why is this important?*

➤ *Biology*

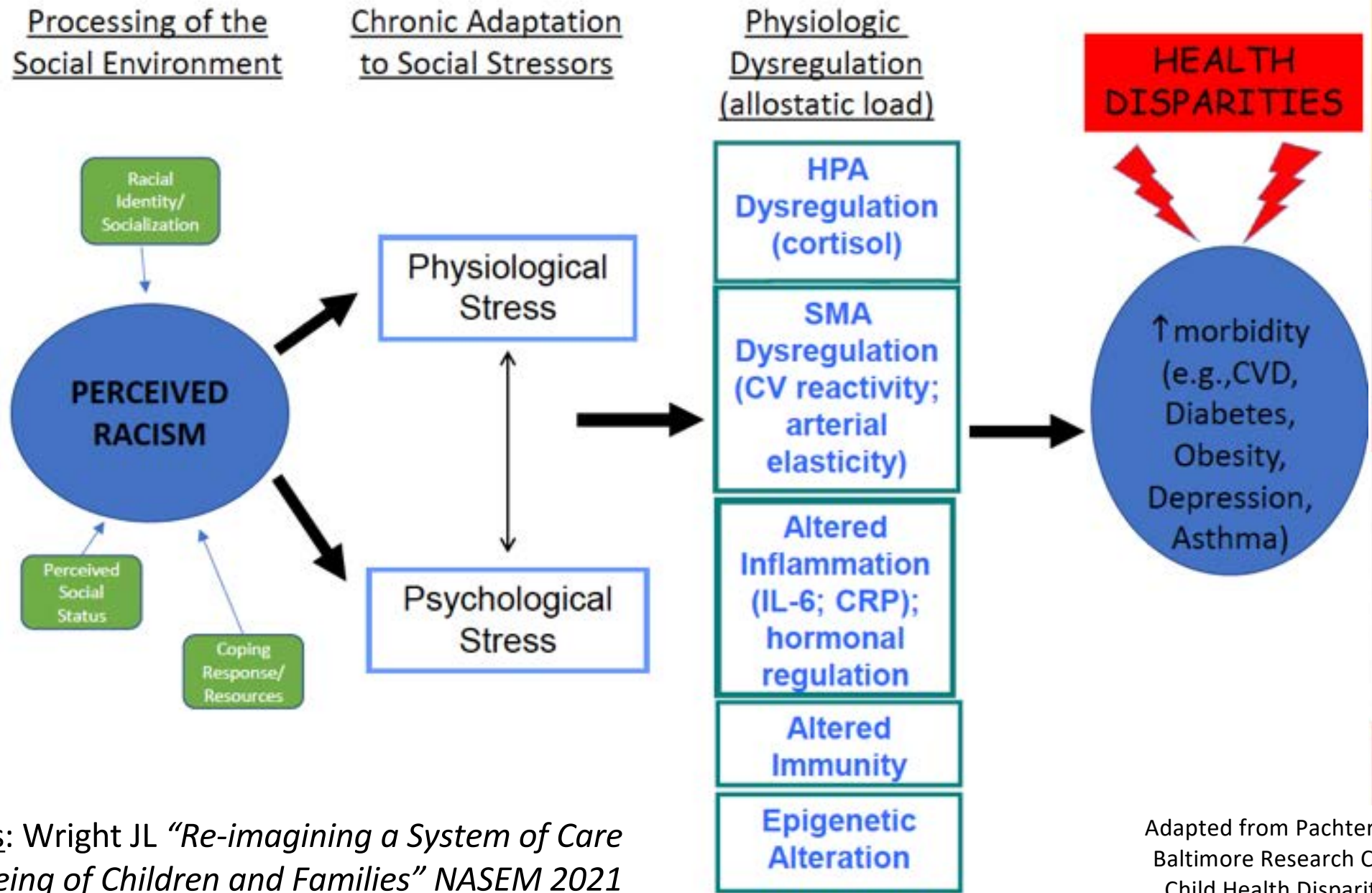


RACISM IS TOXIC TO CHILDREN





LIFE COURSE MODEL OF INTERNALIZED RACISM ON DISEASE RISK

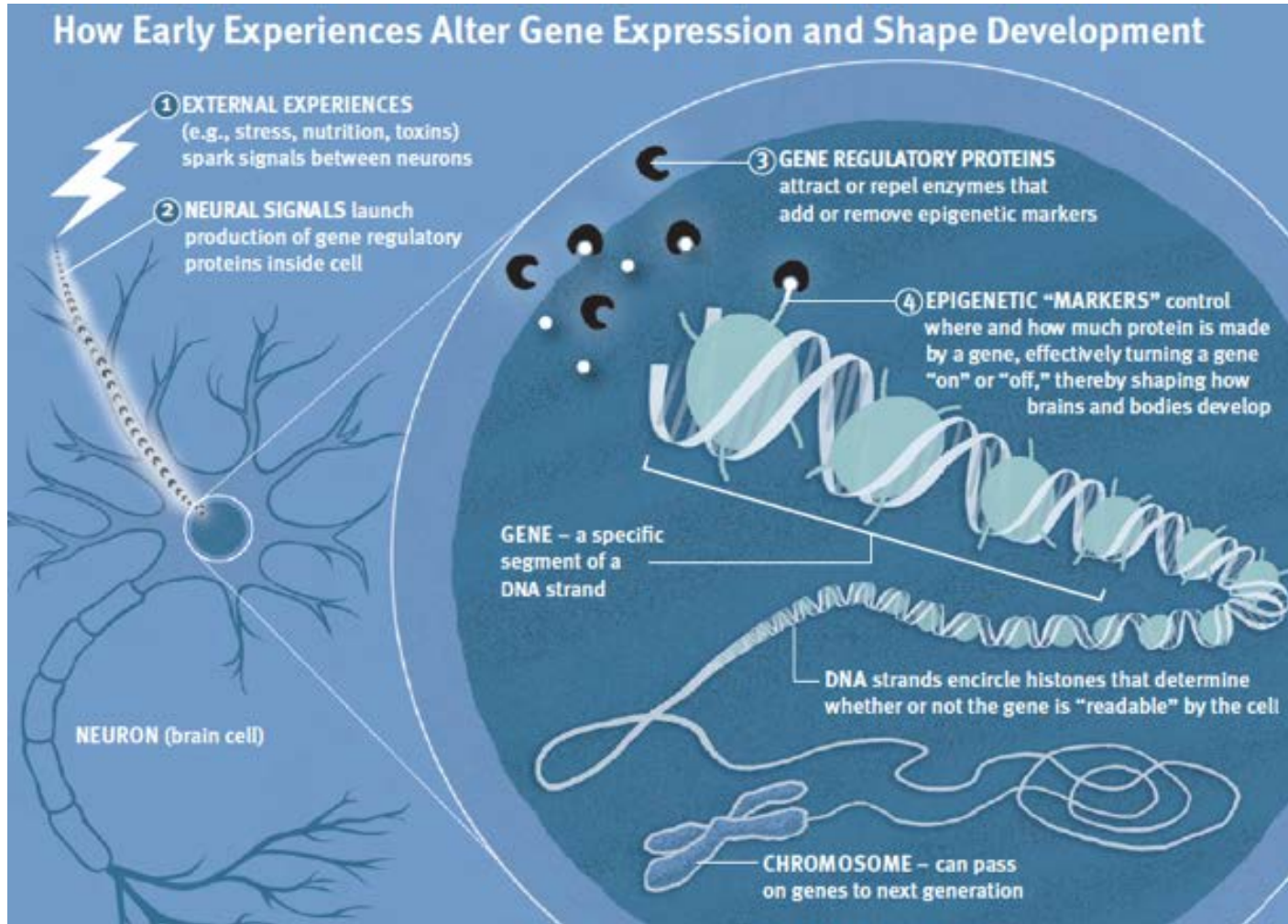


Workshop Proceedings: Wright JL "Re-imagining a System of Care to Promote the Well-Being of Children and Families" NASEM 2021

Adapted from Pachter LM, DC-Baltimore Research Center on Child Health Disparities 2016



EPIGENETICS



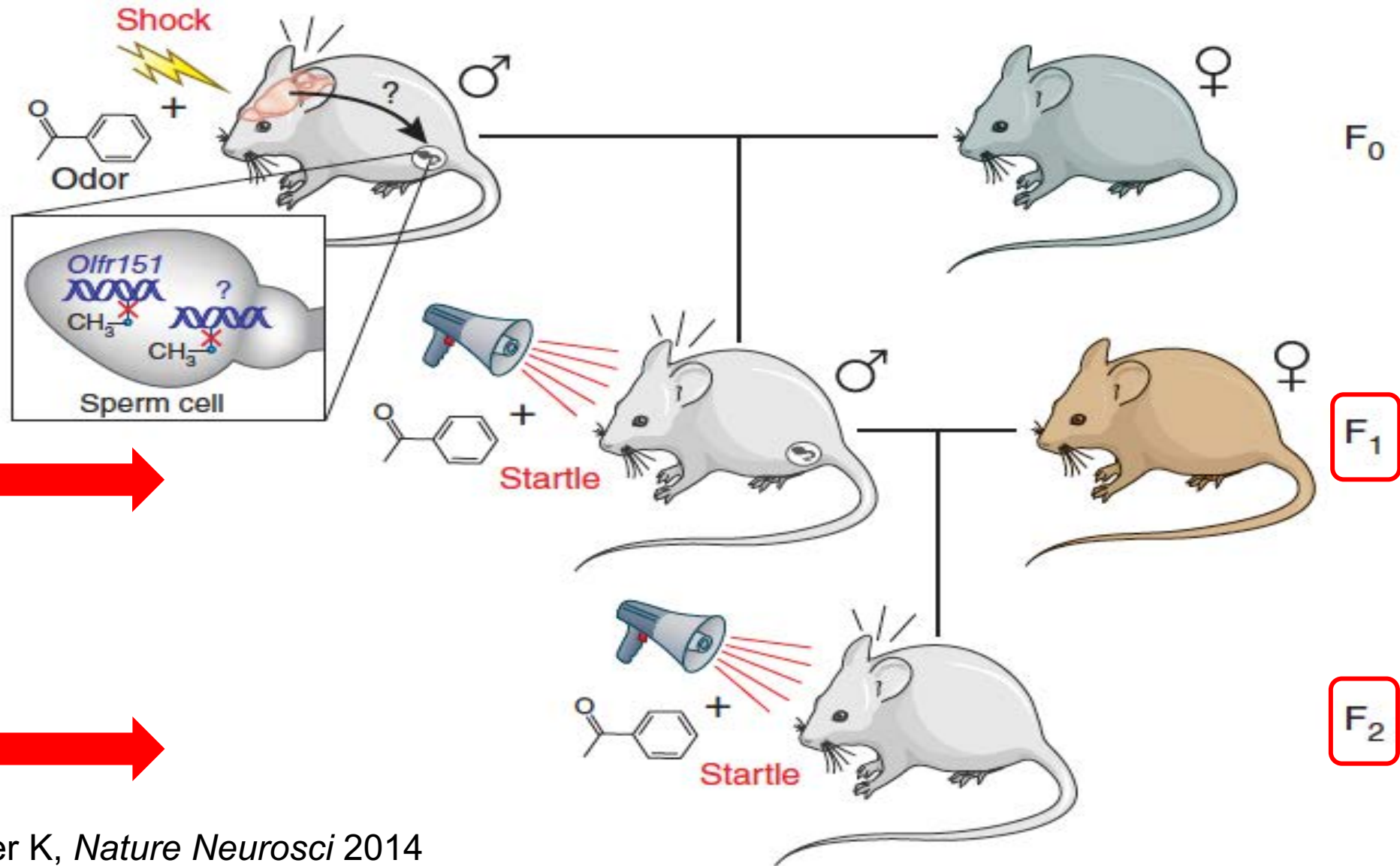
Adapted from the Harvard Center on the Developing Child

"We are beginning to understand the underlying biology of chronic stress, including the stresses that accompany racism. The biological effects of historically mediated trauma such as slavery may linger even in individuals who have seemingly escaped the more toxic environments to which their ancestors were exposed".

Wright et al. *Pediatric Research* 2020
Nov;88(5):696-698.



EPIGENETICS: THE INTERGENERATIONAL TRANSMISSION OF HISTORICALLY MEDIATED STRESS



UNDER THE MICROSCOPE

VIEWPOINT

Corinna J. Rea, MD, MPH
Division of General Pediatrics, Boston Children's Hospital, Boston, Massachusetts; and Harvard Medical School, Boston, Massachusetts.

Francisco J. Alvarez, MD
Lucile Packard Children's Hospital, Palo Alto, California; and Stanford University School of Medicine, Stanford, California.

Joel S. Tieder, MD, MPH
Seattle Children's Hospital, Seattle, Washington; and University of Washington School of Medicine, Seattle, Washington.

The Silent Crisis of Pediatric Clinical Practice Guidelines

Current State of Clinical Practice Guidelines

The number of Clinical Practice Guidelines (CPGs) has expanded tremendously over the past decade. There have been parallel efforts to develop and ensure their quality, but the important role in improving the quality of care by synthesizing large amounts of evidence into standardized recommendations for professionals and patients. When CPGs are not updated regularly, CPGs can become outdated and processes and outcomes.¹

The National Academy of Medicine's International Network provide support for guideline development.^{2,3} Core coordination efforts, and robust processes for these standards, including (1) a team of experts and skilled, (2) transparent process of development, (3) evaluation and synthesis of evidence, (4) evidence and strength of recommendations that are implementable, for professional and external stakeholders, and (7) periodic updates.

JAMA Pediatrics | Review

Use of Race in Pediatric Clinical Practice Guidelines: A Systematic Review

Courtney A. Gilliam, MD; Edwin G. Lindo, JD; Shannon Cannon, MD; L'Oreal Kennedy, DNP, CNM, ARNP; Teresa E. Jewell, MLIS; Joel S. Tieder, MD, MPH

IMPORTANCE National clinical practice guidelines (CPGs) are used to guide clinical practice. The use of race in CPGs has the potential to perpetuate racial and health inequities.

OBJECTIVE To review the use of race in pediatric clinical practice guidelines.

EVIDENCE REVIEW A literature search of PubMed, Institute Guidelines Trust, and MetaLib.gov yielded 1,000 guidelines addressing patients younger than 21 years. The study team systematically identified and extracted ethnicity terms and then used a critical race theory lens to assess the potential to either positively or negatively impact health care.

FINDINGS Of 414 identified pediatric clinical practice guidelines, 145 were included for full review because of the use of race or ethnicity terms. The use of a race term occurred in 87 (59.3%) across 73 CPGs and 45 CPGs.

Race in the Reading: A Study of Problematic Uses of Race and Ethnicity in a Prominent Pediatrics Textbook

Alice Li, Andrea T. Deyrup, MD, PhD, Joseph L. Graves Jr, PhD, and Lainie Friedman Ross, MD, PhD

Abstract

Purpose

Aspects of medical education and clinical practice continue to reflect the antiquated notion that race is a biologically valid distinction among individuals rather than a social construct. The authors analyzed the use of race and ethnicity in a popular pediatrics textbook to determine if these concepts were being used consistently and correctly.

Method

In May 2021, using the search function on the American Academy of Pediatrics (AAP) eBooks platform, the authors searched for 29 race- or ethnicity-related terms (e.g., African, Asian, Black, race) in the AAP Textbook of Pediatric Care, 2nd Edition, which was published in

2016. One researcher independently coded each quote as problematic or not problematic with respect to the use of race or ethnicity, excluding example phrases that were used in irrelevant contexts. A black box warning was then identified that used race or ethnicity problematically.

Results

The search produced 1,000 quotes across the search terms. Of these, 49.7% (497) were relevant to race or ethnicity. Of these, 49.7% (497) used race or ethnicity

"A use of race with a potential negative effect occurred in 49.7% of CPGs"

Are Black Girls Exhibiting Puberty Earlier? Examining Implications of Race-Based Guidelines

Adeloye O. Osinubi, MD,* C. Paula Lewis de los Angeles, MD, PhD,*^{1,2} Patricia Potevien, MD, MSc,^{4,5} Lisa Swartz Topor, MD, MSc^{2,3,6}

From 1977 to 2013, the average age of thelarche, the first sign of puberty in girls, decreased by nearly 3 months per decade.¹ This trend, along with rising rates of precocious puberty in girls, has significant implications for girls' physical and psychosocial development, especially because early puberty has been linked to future health risks.^{2,3}

In 1997, the Pediatric Research in Office Setting study introduced race into the discourse surrounding pubertal timing

as a factor in the pubertal timing of girls and has been included in recent American Academy of Pediatrics (AAP) clinical reports⁴ and Pediatric Endocrine Society guidelines.⁷ As a result, many patients, caregivers, medical students, and physicians have been taught that Black girls experience puberty at earlier ages. In addition, in scientific and educational resources^{8,9} and the lay media,^{10,11} race continues to be associated with precocious puberty without considering the potential causes of this association, including the impact

*Warren Alpert Medical School of Brown University, Providence, Rhode Island; and ²Department of Pediatrics and ³Division of Endocrinology



NEONATAL HYPERBILIRUBINEMIA

JAMA Pediatrics | Review

JAMA Pediatr. doi:10.1001/jamapediatrics.2020.1767

Combating the Hidden Health Disparity of Kernicterus in Black Infants A Review

Francesca Okolle, DO, MPH; Jeannette E. South-Paul, MD; Jon F. Watchko, MD

IMPORTANCE Kernicterus is a devastating, permanently disabling neurologic condition resulting from bilirubin neurotoxicity. Black neonates account for more than 25% of kernicterus cases in the US, despite making up only approximately 14% of all births. This is a largely overlooked health disparity.

Variables Used in Predictive Logistic Regression Model:
ETCO_c, feeding type, birth weight, ***race***, parity,
maternal diabetes, maternal blood type, and bruising.

TABLE 2. Risk Factors for Development of Severe Hyperbilirubinemia in Infants of 35 or More Weeks' Gestation (in Approximate Order of Importance)

Major risk factors

- Predischarge TSB or TcB level in the high-risk zone (Fig 2)^{25,31}
- Jaundice observed in the first 24 h³⁰
- Blood group incompatibility with positive direct antiglobulin test, other known hemolytic disease (eg, G6PD deficiency), elevated ETCO_c
- Gestational age 35–36 wk^{39,40}
- Previous sibling received phototherapy^{40,41}
- Cephalohematoma or significant bruising³⁹
- Exclusive breastfeeding, particularly if nursing is not going well and weight loss is excessive^{39,40}

East Asian race^{39*}

Minor risk factors

- Predischarge TSB or TcB level in the high intermediate-risk zone^{25,31}
- Gestational age 37–38 wk^{39,40}
- Jaundice observed before discharge⁴⁰
- Previous sibling with jaundice^{40,41}
- Macrosomic infant of a diabetic mother^{42,43}
- Maternal age ≥25 y³⁹
- Male gender^{39,40}

Decreased risk (these factors are associated with decreased risk of significant jaundice, listed in order of decreasing importance)

- TSB or TcB level in the low-risk zone (Fig 2)^{25,31}
- Gestational age ≥41 wk³⁹
- Exclusive bottle feeding^{39,40}
- Black race^{38*}**
- Discharge from hospital after 72 h^{40,44}

* Race as defined by mother's description.



NEONATAL HYPERBILIRUBINEMIA – REVISED CLINICAL PRACTICE GUIDELINE

American Academy
of Pediatrics



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Clinical Practice Guideline Revision: Management of Hyperbilirubinemia in the Newborn Infant 35 or More Weeks of Gestation

Alex R. Kemper, MD, MPH, MS, FAAP,^a Thomas B. Newman, MD, MPH, FAAP,^b Jon M. Jeffrey Maisels, MB BCh, DSc, FAAP,^d Jon F. Watchko, MD, FAAP,^e Stephen M. Randall W. Grout, MD, MS, FAAP,^f David G. Bundy, MD, MPH, FAAP,^h Ann R. Stark, Alison Volpe Holmes, MD, MPH, FAAP,^k Lori B. Feldman-Winter, MD, MPH, FAAP,^l Steven R. Brown, MD, FAAP,ⁿ Gabriela M. Maradiaga Panayotti, MD, FAAP,^o Kym Peter D. Rappo, MD, FAAP,^q Terri L. Russell, DNP, APN, NNP-BC^r

Pediatrics. 2022;150(3):e2022058859

“Family history or genetic ancestry suggestive of inherited red blood cell disorders, including G6PD”

TABLE 1 Risk Factors for Developing Significant Hyperbilirubinemia

Risk Factors

- Lower gestational age (ie, risk increases with each additional week less than 40 wk)
- Jaundice in the first 24 h after birth
- PredischARGE transcutaneous bilirubin (TcB) or total serum bilirubin (TSB) concentration close to the phototherapy threshold
- Hemolysis from any cause, if known or suspected based on a rapid rate of increase in the TSB or TcB of >0.3 mg/dL per hour in the first 24 h or >0.2 mg/dL per hour thereafter.
- Phototherapy before discharge
- Parent or sibling requiring phototherapy or exchange transfusion
- Family history or genetic ancestry suggestive of inherited red blood cell disorders, including glucose-6-phosphate dehydrogenase (G6PD) deficiency
- Exclusive breastfeeding with suboptimal intake
- Scalp hematoma or significant bruising
- Down syndrome
- Macrosomic infant of a diabetic mother



AAP receives \$2 million grant to help eliminate race-based medicine

by **Alyson Sulaski Wyckoff** • Associate Editor

The Doris Duke Charitable Foundation has awarded the AAP a two-year, \$2 million grant to launch a project to support the elimination of race-based medicine.

Several other medical organizations also received grants for this purpose.

The AAP project, “Establishing a Race-Conscious Approach to Clinical Guidance in Pediatric Care,” will create a process for identifying and correcting race-normed clinical algorithms and test a revised

For the latest updates from the AAP Board of Directors, see page 4.

algorithm in an emergency department setting. Funding from the foundation, whose mission is to improve the quality of people’s lives through grants supporting the performing arts, environmental conservation, medical research and child well-being, extends from March 1, 2023, to Feb. 28, 2025.

Results of the project will be used to guide the development of clinical recommendations from the AAP and other medical organizations seeking to

eliminate race-based medicine and improve health outcomes for children. The effort will address individual-level factors at the patient-physician level as well as system and policy-level factors.

Leading the project is Joseph L. Wright, M.D., M.P.H., FAAP, who will become AAP chief health equity officer and senior vice president of equity initiatives on Sept. 11.

A former member of the AAP Board of Directors (2020-’22), Dr. Wright is immediate past chair of the Committee on Equity. He is an emergency medicine specialist, currently serving as senior vice president and chief health equity officer for the University of Maryland Medical System, where he is a professor of pediatrics and of health policy and management.

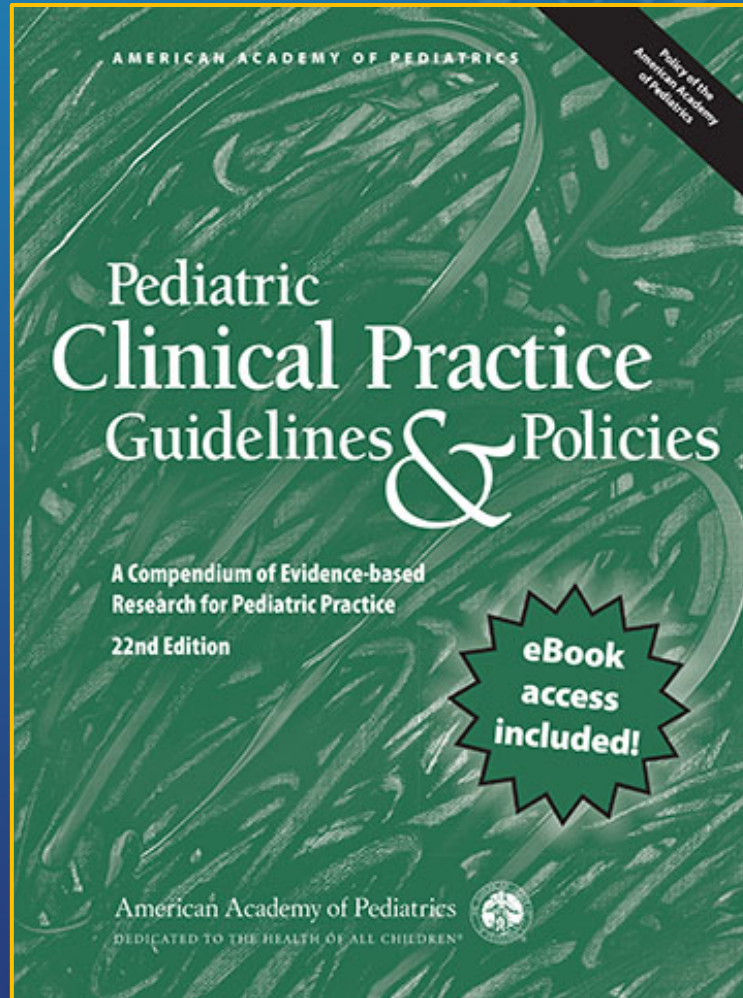


Dr. Wright

Recognition of AAP efforts

The AAP has been taking steps to correct the inappropriate use of race in clinical decision-making, medical education and research such as in *Clinical Practice Guideline Revision: Management of Hyperbilirubinemia in the Newborn Infant 35 or* See Grant, page 10

Eliminating Race-Based Medicine: Transformation - What is the task at hand?



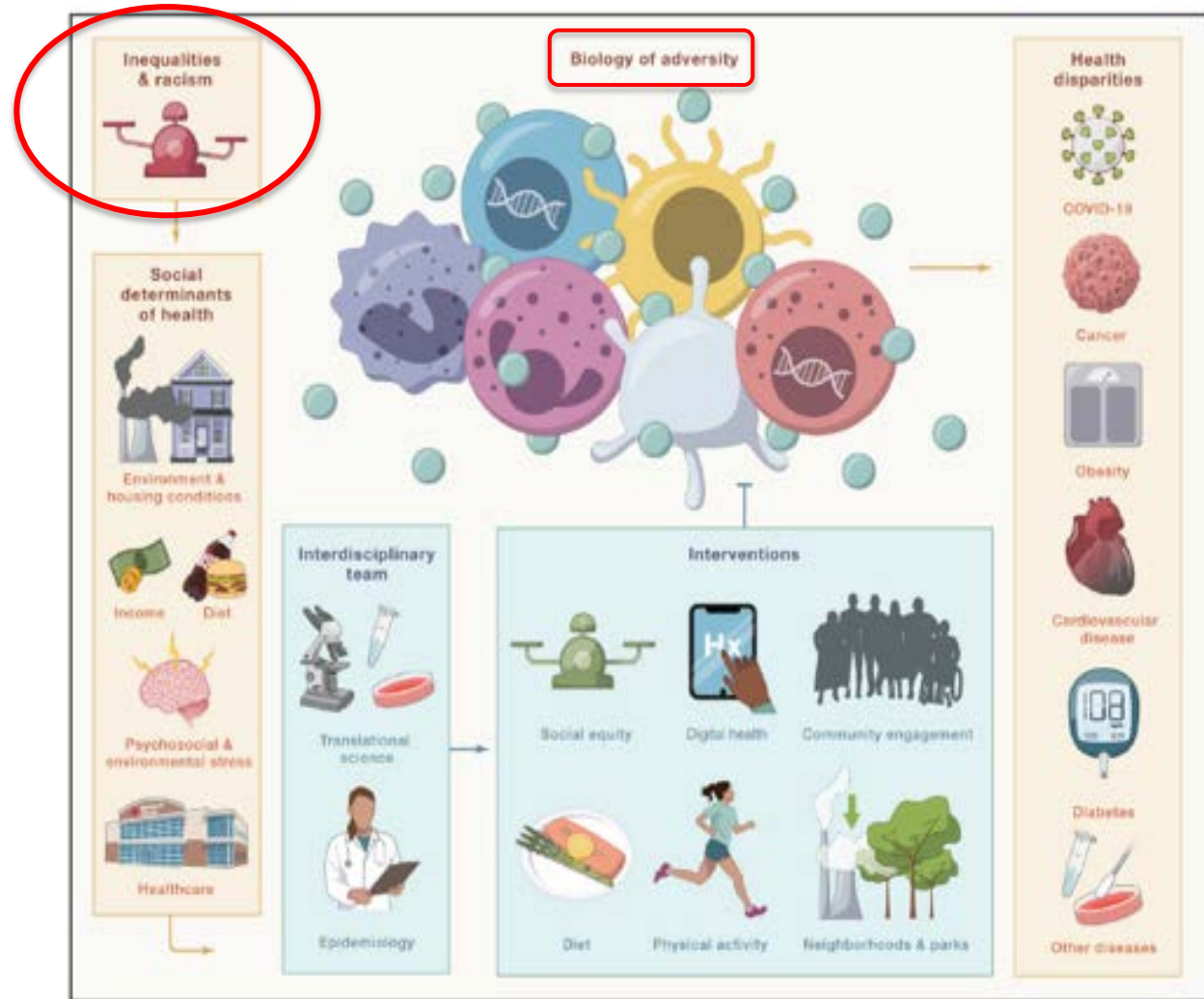
American Academy of Pediatrics
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MOVING TOWARDS EQUITY AND ANTI-RACISM

- Recognize it
- Name it
- Oppose it
- Replace it



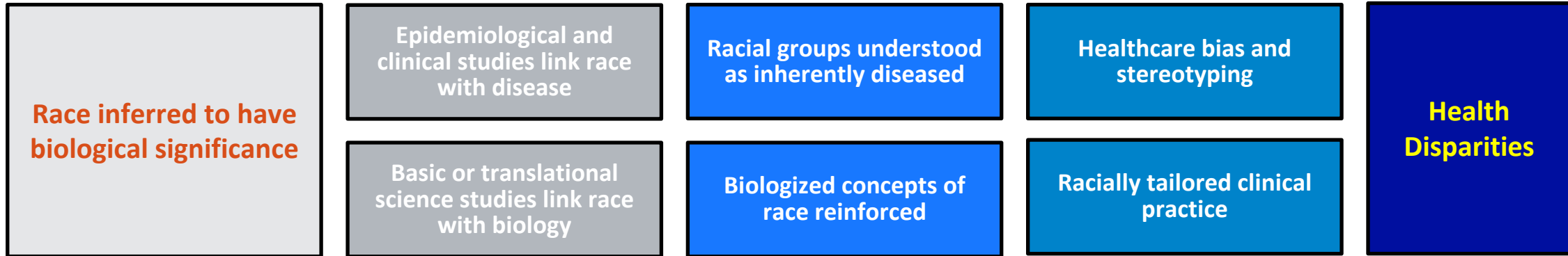
Ward JV. *The Skin We're in: Teaching Our Teens to be Emotional Strong, Socially Smart, and Spiritually Connected*. New York, NY: Free Press; 2002

Cell 2021;184(11):2797



IMPLEMENTATION: MOVING FROM RACE-BASED TO RACE-CONSCIOUS MEDICINE

RACE-BASED MEDICINE



RACE-CONSCIOUS MEDICINE



adapted from Cerdana JP, Plaisime MV, Tsai J. *Lancet* 2020;396(10257):1125

Plaisime MV, Cerdana JP, Belcher HE, Wright J. *Pediatrics* in press



INTRODUCING RACE-CONSCIOUS MEDICINE INTO DISCOVERY AND THE SCIENTIFIC LEXICON

JAMA Pediatrics | [Original Investigation](#)

2022 Jun 1;176(6):569

Reassessment of the Role of Race in Calculating the Risk for Urinary Tract Infection A Systematic Review and Meta-analysis

Nader Shaikh, MD, MPH; Matthew C. Lee, BA; Lynissa R. Stokes, PhD; Elizabeth Miller, MD, PhD;
Marcia Kurs-Lasky, MS; Isabella Conway, BS; Timothy R. Shope, MD; Alejandro Hoberman, MD

IMPORTANCE A previously reported prediction model included a child's race to estimate risk of urinary tract infection (UTI), but race-conscious medicine encourages investigating how race is likely to be a proxy for other factors that should instead be used for risk prediction.

“...race-conscious medicine encourages interrogating how race is likely to be a proxy for other factors and that those factors should be considered for inclusion in decision making processes”.



PEDIATRIC UTI: EQUITABLE CARE DELIVERY

Emergency Medicine I

External validation of the UTICalc predictive model for pediatric urinary tract infections

Sunday, April 24, 2022 10:45 AM – 11:00 AM US MT

Location: Convention Center: 708/710/712 Enduring CME: 0.25

Anna G. Smith, Ann & Robert H. Lurie Children's Hospital of Chicago, Chicago, IL, United States; **Lindsay H. Boles**, Ann & Robert H. Lurie Children's Hospital of Chicago, Chicago, IL, United States; **Anisha Kshetrapal**, Ann & Robert H. Lurie Children's Hospital of Chicago, Chicago, IL, United States; **Norma-Jean E. Simon**, Ann & Robert H. Lurie Children's Hospital of Chicago, Chicago, IL, United States; **Timothy R. Shope**, UPMC Children's Hospital, Gibsonia, PA, United States; **Nader Shaikh**, University of Pittsburgh School of Medicine, Pittsburgh, PA, United States; **Sriram Ramgopal**, Ann & Robert H. Lurie Children's Hospital of Chicago, Chicago, IL, United States

- The variable ***race*** was replaced with ***history of UTI*** and ***duration of fever***. Accuracy compared to previous risk prediction models was similar.

UTICalc

Version 3.0

For children 2 to 23 months of age.

Probability of UTI based on clinical characteristics

Enter child's clinical characteristics below (all fields are required)

Age < 12 months	<input type="radio"/> Yes	<input type="radio"/> No
Maximum temperature $\geq 39^{\circ}\text{C}$ (i.e., 102.2°F)	<input type="radio"/> Yes	<input type="radio"/> No
History of UTI*	<input type="radio"/> Yes	<input type="radio"/> No
Female or uncircumcised male	<input type="radio"/> Yes	<input type="radio"/> No
Other fever source**	<input type="radio"/> Yes	<input type="radio"/> No
Duration of fever ≥ 48 hrs	<input type="radio"/> Yes	<input type="radio"/> No

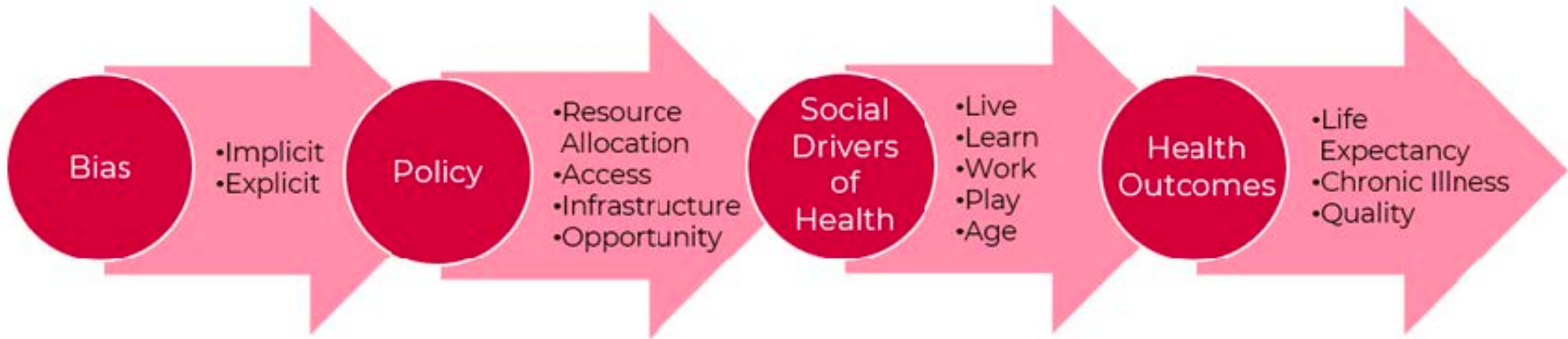
Probability of UTI

CalculateClear



CAN'T THROW THE BABY OUT WITH THE BATH WATER

- Even in the face of insurmountable evidence that race is not a biologic proxy, there is definitely a role for what race represents in terms of differential lived experiences.
- Rigorous consideration of the *social drivers that frame health status* is necessary to eliminate disparities and achieve more equitable outcomes.



<https://www.rwjf.org/en/library/research/2019/02/medicaid-s-role-in-addressing-social-determinants-of-health.html>



RACISM NOT RACE: INEQUITIES IN CHILD WATER SAFETY

POLICY STATEMENT

Organizational Principles to Guide and Define the Child Health Care System and/or Improve the Health of all Children

American Academy
of Pediatrics



DEDICATED TO THE HEALTH OF ALL CHILDREN™

Prevention of Drowning

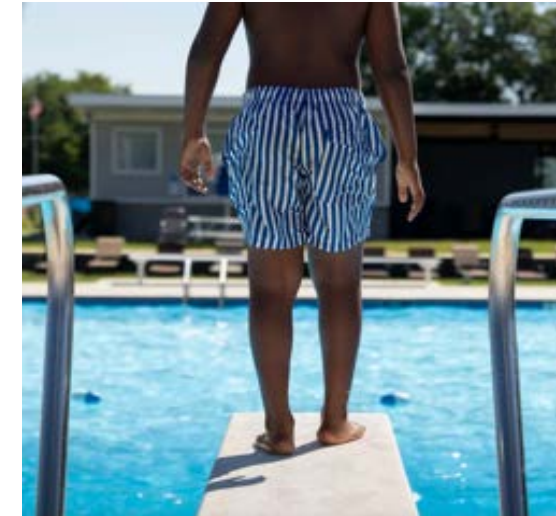
“Overall, African American children have the highest drowning fatality rates, followed in order by American Indian an/or Alaskan Native, white, Asian American and/or Pacific Islander, and Hispanic children”

Pediatrics. 2019;143(5):e20190850

The New York Times

‘Swimming Wasn’t for Us’

The nation’s first Black-owned pool club aims to teach hundreds of children to swim this summer, helping to close a dangerous racial gap in the process.



<https://www.nytimes.com/2022/07/04/us/segregation-nile-swim-club.html>



CORRECTIVE ADVOCACY: ACCESS TO PUBLIC POOLS CAN PREVENT DROWNING

“With no physiologic differences to explain the difference in drowning risk, race and ethnicity are likely a proxy for social and cultural differences...underlying reasons are not well understood, but may include historical (such as segregation and lack of access) and environmental influences”.

- Prevention of Drowning
AAP Technical Report

Pediatrics. 2021;148(2):e2021052227

The New York Times

<https://www.nytimes.com/2023/07/27/opinion/drowning-public-pools-america.html>

When It Comes to Swimming, ‘Why Have Americans Been Left on Their Own?’

July 27, 2023



By Mara Gay

Ms. Gay is a member of the editorial board.

At long last, a once-segregated beach reopens on the Chesapeake Bay

Published on: May 09, 2023 5:30 AM EDT | Updated on: May 09, 2023 7:20 AM EDT





Racial Health Equity and Social Needs Interventions

A Review of a Scoping Review

Crystal W. Cené, MD, MPH; Meera Viswanathan, PhD; Caroline M. Fichtenberg, PhD; Nila A. Sathe, MA, MLIS; Sara M. Kennedy, MPH; Laura M. Gottlieb, MD, MPH; Yuri Cartier, MPH; Monica E. Peek, MD, MPH, MS

Abstract

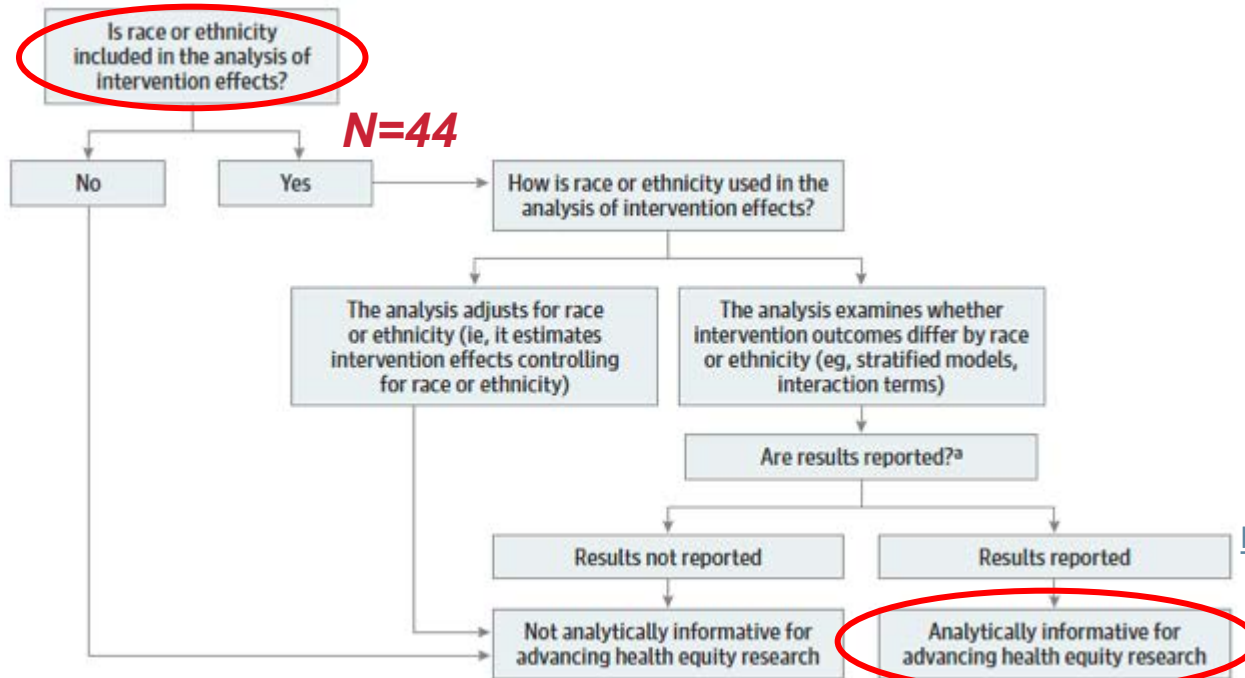
IMPORTANCE Social needs interventions aim to improve health outcomes and mitigate inequities by addressing health-related social needs, such as lack of transportation or food insecurity. However, it is not clear whether these studies are reducing racial or ethnic inequities.

Key Points

Question To what extent do studies of social needs interventions explain how race and ethnicity are conceptualized and used in analyses of intervention

SOCIAL DRIVERS OF HEALTH

N=152



SDoH research lack race data, study finds

January 24, 2023

Researchers are calling for studies on social determinants of health (SDoH) to include race in their analyses to advance racial health equity.

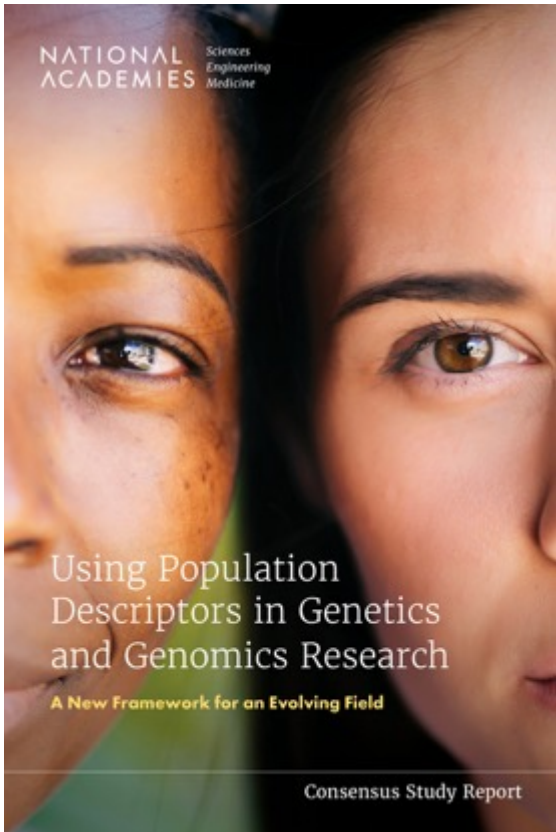


<https://www.risehealth.org/insights-articles/sdoh-research-lack-race-data-study-finds/>

N=21 → N=4 conceptually thoughtful



A FRAMEWORK FOR CHANGE



PRINCIPLES

Respect

Beneficence

Equity & Justice

Validity &
Reproducibility

Transparency
& Replicability

REQUISITES

Avoid Typological
Thinking

Measure
Environmental Factors

Engage
Communities and
Participants

GUIDANCE FOR RESEARCHERS

Gene
Discovery

Trait
Prediction

Cellular &
Physiological
Mechanisms

Health
Disparities

Human
Evolutionary
History

IMPLEMENTATION

Study
Participants

Funders

Journals &
Professional
Societies

Research
Institutions

Journalists
& Media



APPLYING SCIENTIFIC INTEGRITY

Achieving equity through science and integrity: dismantling race-based medicine

Joseph L. Wright^{1,2}, Gary L. Freed^{3,4}, Karen D. Hendricks-Muñoz⁵, James N. Jarvis⁶, Yvonne A. Maldonado^{7,8}, Jean L. Raphael⁹, David Schnadower¹⁰, Brian Sims¹¹, Clifford W. Bogue¹², Mary B. Leonard^{7,13}, Tamera D. Coyne-Beasley^{11,14} and Committee on Diversity, Inclusion and Equity on behalf of the American Pediatric Society*

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Pediatric Research (2022) 91:1641–1644; <https://doi.org/10.1038/s41390-022-02041-8>

- Comprehensive
- Collaborative
- Transdisciplinary

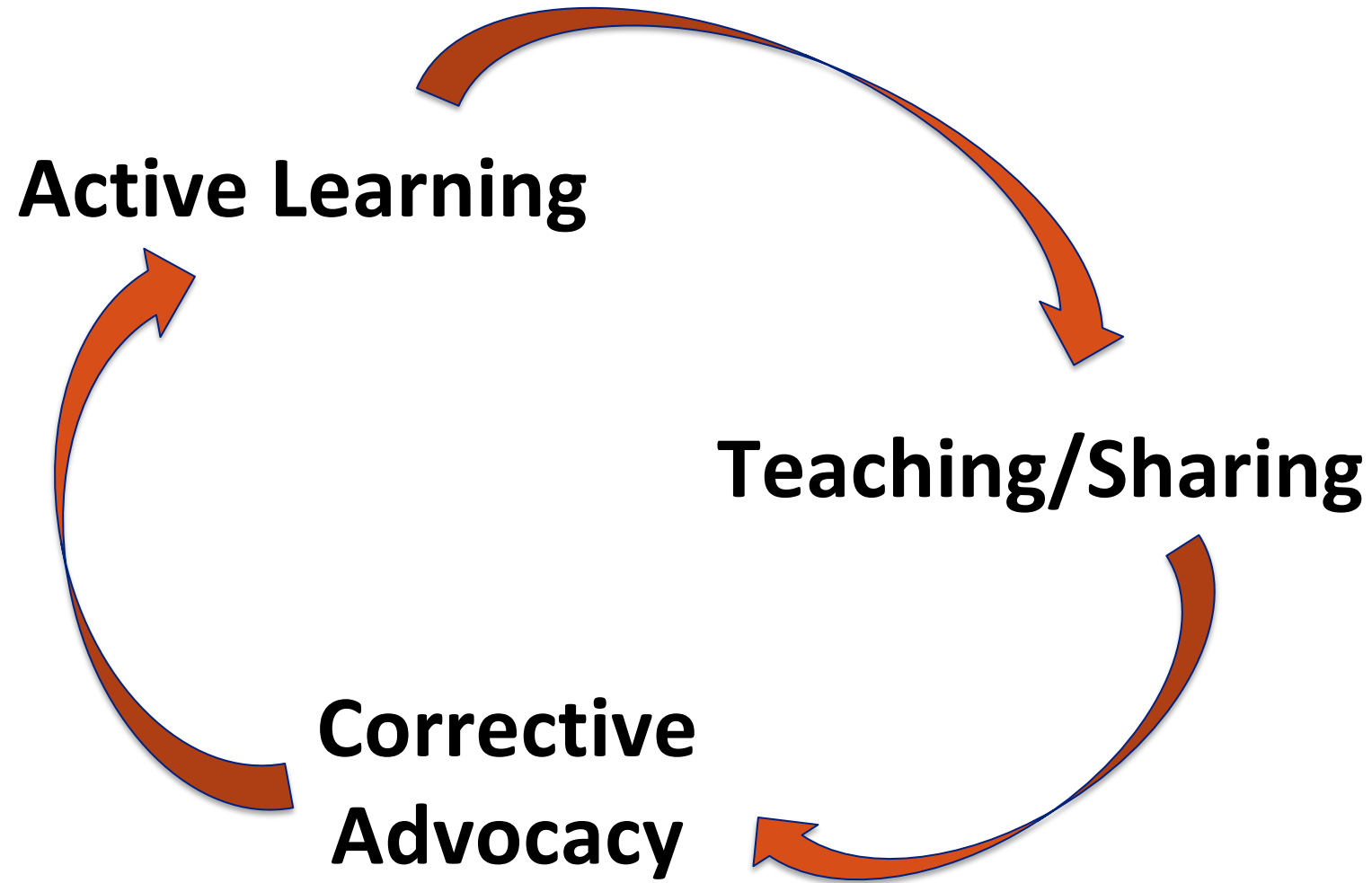


Convergence
Science





REROUTING THE JOURNEY





REROUTING THE JOURNEY – STRATEGIES AND TACTICS

- **Skew to the evidence:**

- Appeal to the inherent scientist and life-long learner in us to build fund of knowledge.
- Expand awareness of surreptitiously hidden history.

- **Emphasize differential lived experience:**

- Leverage collegial relationships to better understand synergistic value of diversity.



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Wright JL, Johnson TJ. Child Health Advocacy: The Journey to Anti-Racism. *Pediatric Clinics of North America* 2023;70:91-101



*"Awareness is the greatest
agent for change."
-Eckhart Tolle*

***Until the lion tells the story, the
narrative will always glorify the hunter.***
- African proverb