



# Alameda County Health

## *Understanding Our Power to Undo Structural Racism*

**February 26, 2025**

# Today's Facilitator



**Chloé Greene**

she/her  
Black woman  
Sowing Love

# Today's Agenda



**9:00 am**

**Welcome and  
Grounding**



**9:25 am**

**Four Levels of Racism**



**9:50 am**

**Structural Racism:  
the Intersection of  
Race, Homelessness  
and Healthcare**



**10:20 am**

**Intersectionality:  
Understanding  
Societal Power**

# Why We Uplift Pronouns in Introductions

## We hold space to share pronouns because...

- Because pronouns can **sometimes** be a sign of someone's gender identity **but not always**, we **do not want to assume people's gender identity based on expression** (clothing, hairstyle, mannerisms, cosmetics, etc.), instead we **prefer to welcome self-identification** as a normalized part of introductions.
- Including pronouns is an important **first step towards demonstrating respect** for people's identities and **creating a stronger sense of psychological safety** for people of all gender identities.





# Why We Uplift Racial Identities in Introductions



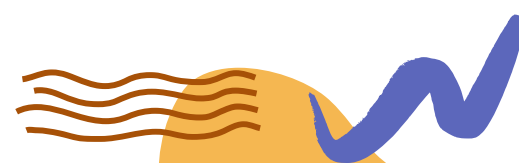
We honor and welcome the acknowledgement of racial identities in introductions because...

- Naming racial identity **focuses our awareness on how we show up with each other**, particularly with people who identify as Black, Indigenous, Asian, Pacific Islander, Native Hawaiian, and people of color.
- Naming racial identity **focuses** our awareness **on who is not present**.
- Naming racial identity **helps to remove our fear of talking about race** and instead normalizes it.
- Naming racial identity **helps us own our racial identity** and what we bring into the space.
- Naming racial identity **reminds us that racial groups sit differently in relation to power** and resources in the U.S. due to **historical and present day manifestations** of systemic racism.
- Naming racial identity **helps us resist habits of white supremacy culture and anti-Blackness** and its constant presence.

# Community Agreements



- Recognize that we all carry wisdom.
- Participate in creating and maintaining a liberated space: space that is grounded in community and love, where you can bring your full self, and take risks and make mistakes.
- Value the process.
- Pay attention to how your words may impact others and how you make meaning of what others say to you.
- Be present, listen actively, and use “I” statements.
- Choose courage over comfort. Remember, being uncomfortable is not the same as being unsafe.
- The goal is not to agree right now but rather gain a deeper understanding. We will not leave today with closure or full understanding.
- Participate to the fullest of your ability – our collective growth depends on the inclusion of every individual voice.



# Community Agreements



- Recognize the emotional tax, extra labor, and burden that Black, Indigenous, Asian, Pacific Islander, and all people of color face in racial equity and justice conversations.
- Instead of invalidating somebody else's story with your own spin on their experience, share your own story and experience.
- Do not be afraid to respectfully challenge one another by asking questions, but refrain from personal attacks – focus on ideas.
- Choose a love based response before a loveless one. Consider your own and others actions and comments with a loving perspective.
- Anything else?



# Today is Deep Work



- It takes a lot to share and be open. It also takes a lot to bear witness.
- If you need a moment, please take it.
- Do what you need to do to take care of **you**. Doing so is a gift to yourself and everyone here in community with you.







# Self and Collective Care



# Self Care

*"I will wrap rest and care around myself like a warm blanket today."*

**Caring for yourself in a way that centers awareness, discipline, and kindness.**

- Awareness of how/what un-care is specifically manifesting, and figuring out the benefit you are receiving from continuing un-care.
- Discipline allows self-care to be radically applied. Discipline starts with the basics: sleep, space, hydration, food, and choices.
- Kindness involves taking many small, tiny breaks. Our capacity to be kind to ourselves and others, to be patient, generous and understanding, tends to be related to a healthy relationship to our own self-care.

**Sources: Tricia Hersey, The Nap Ministry's Rest Deck (2023) and Norma Wong, Radical Self Care (2015)**



# Collective Care

Collective care means to care about each other's welfare as a communal responsibility of the group rather than the lone task of an individual.

Collective care focuses on building spaces grounded in radical justice and lived experiences to form trust. It means that a group commits to addressing interlocking oppressions and reasons for deteriorating well-being within the group while also combating oppression in society at large. It places an emphasis on joint accountability, with the aim of collective empowerment.

***These ideas originate from Queer and Black feminist organizing, such as the Combahee River Collective and the disability rights movement.***

Source: [Briarpatch](#)



# Self and Collective Care Purpose

- We all need space and time to rest.
- As people committed to equity, justice, belonging, and liberation, you give a lot. You are seeking peace, ease, and wellness for everyone else—you deserve and need the same.
- Building more slowness and ease into your day helps to accelerate growth—for the self and collective.
- Important for us to separate care and care practices from material wealth. These practices help us to return to care that is not dependent on financial resources.

*Rest is not a privilege.*

*Rest is a human right.*

*I don't have to earn rest.*

# Grounding Exercise



# Grounding Exercise

## Exercise: Humming

### *The Why Behind Humming*

- Can help to lower blood pressure and heart rate.
- Can reduce anxiety.
- Can enhance breathing and strengthen immunity.
- Stimulates the vagus nerve.
- Can reduce stress.
- Self Love Sound Healing: [link here](#)

Sources: National Library of Medicine and Shape Articles

*“My body  
is my  
teacher”*



# Four Levels of Racism



# Deepening Shared Meaning

## Race: The Power of an Illusion

- Race is a modern idea.
- Race has no genetic basis.
- Human subspecies don't exist.
- Skin color really is only skin deep.
- Most variation is within, not between, "races."
- Slavery predates race.
- Race and freedom evolved together.
- Race justified social inequalities as natural.
- Race isn't biological, but racism is still real.
- Colorblindness will not end racism.

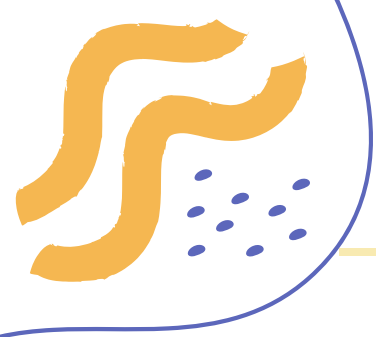
RACE - The Power of an Illusion was produced by California Newsreel in association with the Independent Television Service (ITVS).



# Deepening Shared Meaning

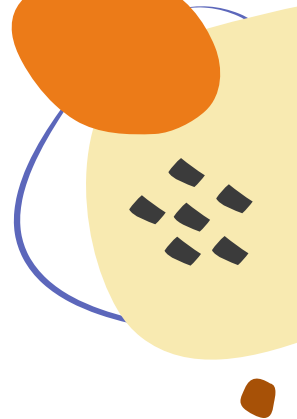
## The Myth of Race Video





# Deepening Shared Meaning

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## What *is* racism?

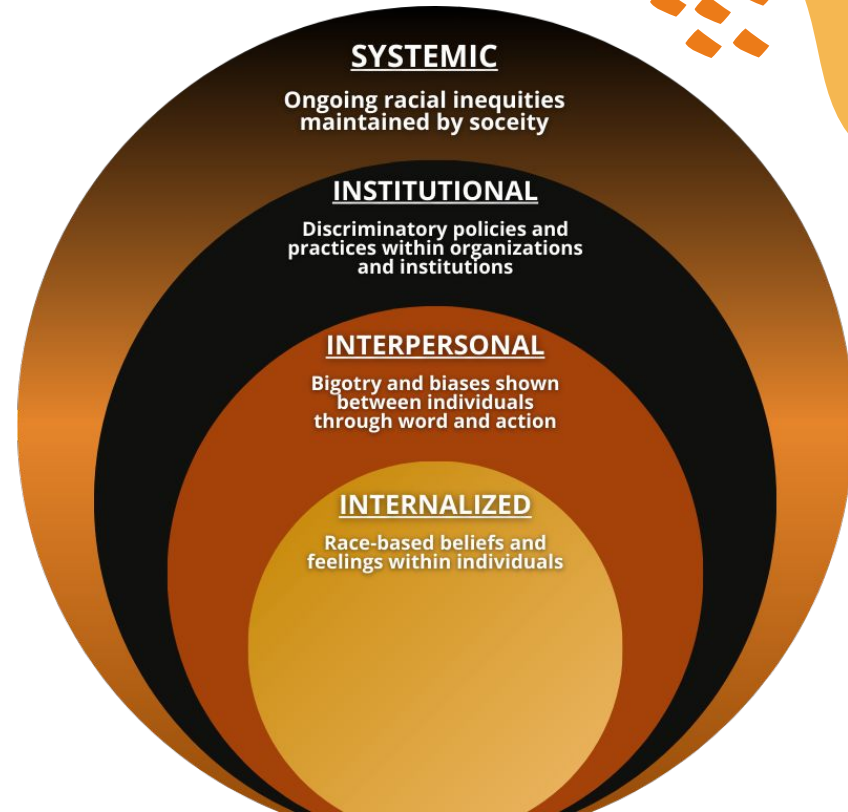
**A system of structuring opportunity and assigning value based on the social interpretation of how one looks (which is what we call “race”), that:**

- Unfairly disadvantages some individuals and communities
- Unfairly advantages other individuals and communities
- Saps the strength of the whole society through the waste of human resources

# Race Forward's Levels of Racism Framework

An analytical tool for unpacking different types of racism that are often interacting and operating simultaneously. It is **helpful to distinguish between individual and systemic racism to focus needed and distinct attention, analysis, and strategies on institutional and structural racism.** It points toward needed systemic change-focused strategies which address root causes and can result in more transformative and lasting change. We need to invest more in institutional and structural change strategies to get to racial justice. Strategies to address individual racism are not sufficient for dismantling structural racism.

Source: Race Forward - [What is Racial Equity?](#)





# Individual Level

## Internalized Racism

lies *within individuals*. These are private beliefs and biases about race that reside inside our own minds and bodies. For White people, this can be internalized privilege, entitlement, and superiority; for people of color, this can be internalized oppression. Examples: prejudice, xenophobia, conscious and unconscious bias about race, influenced by the white supremacy.



## Interpersonal Racism

occurs *between individuals*. Bias, bigotry, and discrimination based on race. Once we bring our private beliefs about race into our interactions with others, we are now in the interpersonal realm. Examples: public expressions of prejudice and hate, microaggressions, bias and bigotry between individuals.



Source: Race Forward - [What is Racial Equity?](#)



# Systemic Level

## Institutional Racism

occurs *within institutions*. It involves unjust policies, practices, procedures, and outcomes that work better for White people than people of color, whether intentional or not. Example: A school district that concentrates students of color in the most overcrowded, underfunded schools with the least experienced teachers.

## Structural Racism

is racial inequities *across* institutions, policies, social structures, history, and culture. Structural racism highlights how racism operates as a system of power with multiple interconnected, reinforcing, and self-perpetuating components which result in racial inequities across all indicators for success. Structural racism is the racial inequity that is deeply rooted and embedded in our history and culture and our economic, political, and legal systems. Examples: The “racial wealth gap,” where Whites have many times the wealth of people of color, resulting from the history and current reality of institutional racism in multiple systems.

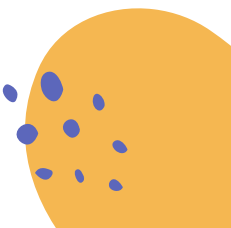



Source: Race Forward - [What is Racial Equity?](#)



# Reflection

*How does this differ from your personal understanding of racism? What are some examples of the four levels of racism in your community?*





# Structural Racism

*Intersection of Race, Healthcare, and  
Homelessness*



# Homelessness and Racial Disparities

Most racially minoritized communities, especially African Americans and Indigenous people, experience homelessness at higher rates than Whites, largely due to long-standing historical and structural racism.

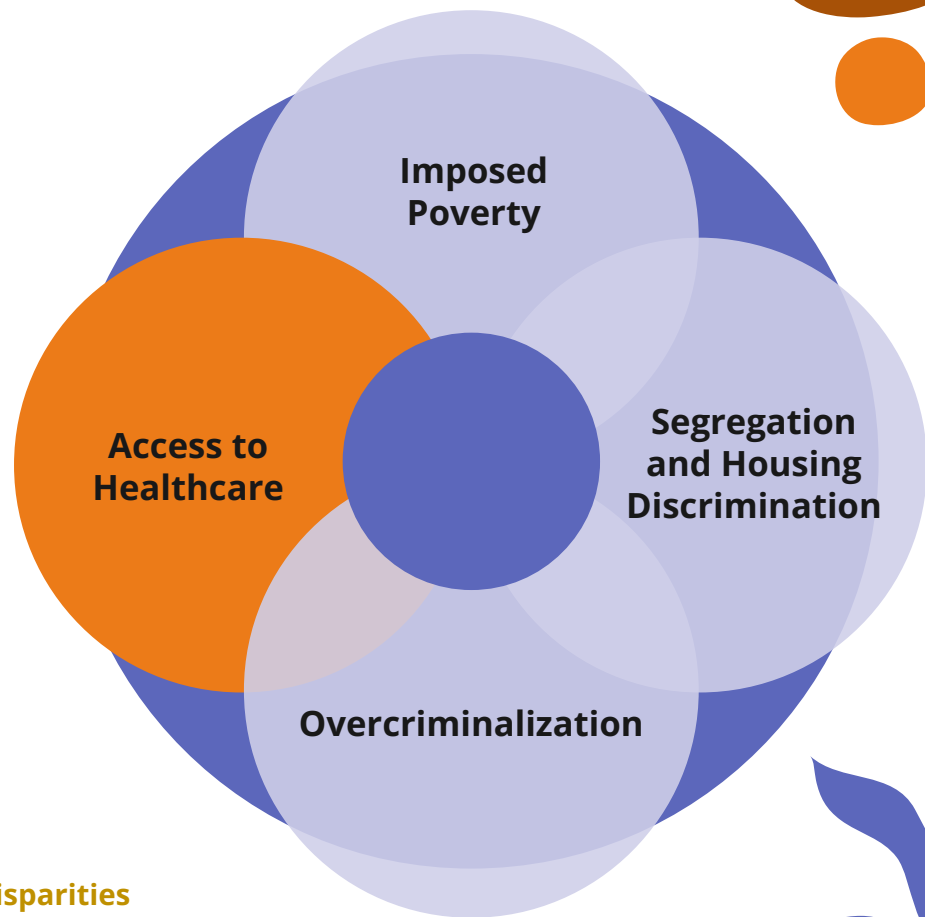
The **most striking disparity can be found among African Americans**, who represent 13 percent of the general population but **account for 36.6 percent of people experiencing homelessness and more than 37 percent of homeless families with children**. This imbalance has not improved over time.

Source: [National Alliance to End Homelessness \(NAEH\)](#)



# Homelessness and Racial Disparities

*Primary Causes*



Source: NAEH - Homelessness and Racial Disparities

# Structural Racism: Healthcare and Black People

**Black Americans experience difficulty accessing health care and treatment, which leads to worse health outcomes. This is due to a number of systemic or structural factors, including:**

- **Historical Medical Racism:** a long [history of medical racism](#) that has impacted Black Americans in every phase of life (e.g. birth to death life cycle) has led to justified skepticism of modern medicine and providers.
- **Residential Segregation:** residential segregation has led to fewer [health care providers, pharmacies, and trauma centers](#) near many majority Black communities, and some of these providers offer [lower-quality care](#). Often this means relying heavily on community health centers, emergency rooms or outpatient care, and community-based providers.
- **Discrimination, stigma, and bias:** Black people are [more likely to be misdiagnosed](#) than white Americans, Black patients are more likely to receive [inadequate pain management](#), and Black women, particularly mothers, report experiencing higher rates of discrimination in health care settings.

# Structural Racism: Healthcare and Indigenous People

Native American experience significant health disparities compared to other racial and ethnic groups in the United States. This is due to a number of systemic or structural factors, including:

- **Disparities in Chronic Disease and Mental Health:** Native people die 12 to 13 years earlier than white Americans. Native people have higher death rates at most ages, but particularly at younger ages, and higher mortality for most of the top leading causes of death (heart disease, cancer, chronic lower respiratory diseases, diabetes, and stroke) and suicide rates for Native youth are significantly higher than the national average.
- **Historical Trauma:** Historical injustices, such as forced relocation, loss of ancestral lands, and the impact of colonization, have had enduring effects on Native American health.
- **Discrimination:** a study involving Native Americans experiencing homelessness individuals who experienced discrimination primarily attribute the discrimination to their ethnicity and second to their homeless status, with these intersections creating a compounding discrimination effect. These experiences of discrimination lead to mistrust, decrease willingness to access care, or to adhere to what is being recommended by healthcare providers.

# Structural Racism: Healthcare and Indigenous People

**Native American experience significant health disparities compared to other racial and ethnic groups in the United States. This is due to a number of systemic or structural factors, including:**

- **Lack of Funding and Access:** there is a constant challenge of [finding resources to meet patient needs](#). Many rely on Indian Health Service (IHS), to best serve the needs of AI/AN health. IHS provides federally-funded health care to nearly 2.6 million Native Americans — but this number represents less than half of the nation's AI/AN population.
- **Lack of Regard for Native Cultural Practices:** Native cultures [traditionally view health](#) as a balance between physical, mental, spiritual, and environmental well-being, often incorporating practices like herbal remedies, ceremonies, a deep connection to the land and storytelling into healing. These practices are not traditionally accepted or integrated into healthcare creating additional barriers for Native people.

# Structural Racism: Healthcare and Hispanic or Latinx People

Hispanic and Latinx Americans face health disparities in access to care, quality of care, and chronic illnesses. This is due to a number of systemic or structural factors, including:

- **Disparities in Health Conditions:** Hispanic Americans were more likely than White Americans to have been hospitalized or died from COVID-19, HIV/AIDS is the fourth-leading cause of death for Hispanic men and women ages 35–44, and Hispanic Americans have a disproportionate burden of liver, stomach, and cervical cancer.
- **Lack of Health Insurance and Imposed Poverty:** Hispanic adults are less likely to have health insurance than other Americans and recent Hispanic immigrants may have higher levels of poverty, which can affect access to health care.
- **Lack of Resources to Address Language Barriers:** Language barriers can make it difficult for some Hispanic Americans to understand their diagnosis and treatment options.
- **Discrimination:** historical and present day experiences of discrimination and lack of culturally sensitive care can lead to distrust of healthcare providers, causing hesitancy to seek treatment.
- **Lack of Regard for Cultural Practices:** strong family ties in Hispanic and Latinx families can lead to collective decision making around health decisions, particularly among older generations; and religion and other cultural practices also impact approaches to health and care-seeking practices.

# Structural Racism: Healthcare and Asian American and Pacific Islander People

Asian American and Pacific Islander communities face a number of health inequities. This is due to a number of systemic or structural factors, including:

- **Lack of Healthcare Access and Involvement in Care:** Asian American and Pacific Islander communities are three times less likely to seek mental health services than other underserved racial and ethnic communities, Native Hawaiians and other Pacific Islanders report having poorer quality care, including receiving less prenatal care in the first trimester and higher infant mortality than white Americans, and Asian American adults are least likely among all racial and ethnic groups to report that their health care provider always involves them in health care decisions.
- **Lack of Regard for Cultural Values and Practices:** Many Asian Americans also believe their doctors do not understand their individual culture and values, making them less likely to be confident about the quality of their care compared to the overall U.S. population.
- **Discrimination:** Although Asian American and Pacific Islander communities are diverse with unique cultural and socioeconomic characteristics, they share a similar history and experience of discrimination and marginalization in the U.S. that was exacerbated by the COVID-19 pandemic with the rise in hate crimes against their communities.



# Care Pause

*Deep Breaths, Reflections, Questions*



# Thrive 18: Belonging in Action







# Reflection

*What did you see in the belonging example that can help to improve systems in Alameda County?*





# Intersectionality

*Understanding Societal Power*



# Deepening Shared Meaning

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## What is Intersectionality?

Intersectionality recognizes that people can experience **multiple forms of oppression**, such as racism, sexism, and ableism. It examines how these systems of oppression interact with each other to create distinct experiences. It's not about ranking different forms of oppression, but rather **understanding how they combine to affect people's lives**, and how power relations are often invisible but have a profound role in shaping injustice.

Sources: [Global Citizen](#), [Scottish Government](#), and the [Intersectionality Research Institute](#)

# Deepening Shared Meaning: Intersectionality

“There is no such thing as a single-issue struggle because we do not live single issue lives.”

**Audre Lorde**

“Intersectionality is the promise that we see each other’s humanity.”

**Eric Ward**

## HISTORY



### Kimberlé Crenshaw

Renowned law professor and civil rights advocate. Credited with coining the term “intersectionality” to explain complex structures of inequality and racism as they relate to multiple factors such as race, gender, class, and more.

**“Intersectionality is just a metaphor for understanding the ways that multiple forms of inequality or disadvantage sometimes compound themselves... they create obstacles that often are not understood within conventional ways of thinking about anti-racism or feminism or whatever social justice advocacy structures we have.” – Kimberlé Crenshaw**

## Deepening Shared Meaning: Intersectionality



# Deepening Shared Meaning

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## What is Positionality?

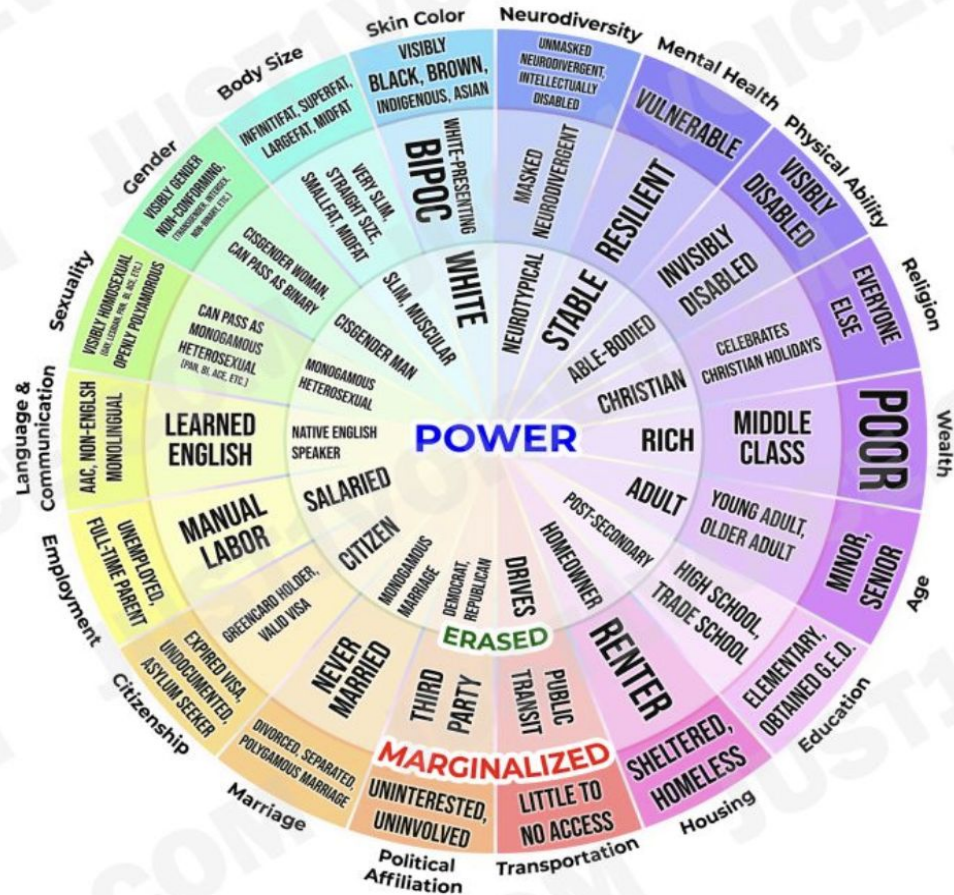
Positionality refers to how differences in social position and power **shape our identities and access in society**. All parts of our identities are shaped by socially constructed positions and memberships to which we belong, and which are “embedded in our society as a system.” Positionality helps us to **identify our degrees of privilege** through various factors (e.g. race, class, educational attainment, income, ability, gender, and citizenship) so we can meaningfully act from our social positions to participate in undoing an unjust world. **In acknowledging positionality, we take steps to better understand intersecting social locations and complex power dynamics (or intersectionality).**

Source: [UBC - Positionality & Intersectionality](#)

# INTERSECTIONALITY WHEEL OF PRIVILEGE

As Observed in the USA


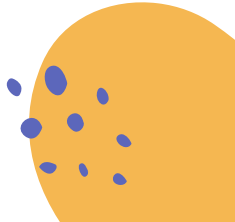
## Positionality: Wheel of Oppression and Privilege





# Wheel of Privilege and Oppression

## Group Reflection

- *What is coming up for you looking at the wheel?*
  - *What are the identities that matter most to you? Has that changed over time?*
  - *How does your identity impact your values and/or your work?*
  - *Have there been times when the areas you experience erasure and marginalization kept you from using your privilege to impact change?*
  - *How do you see this helping to make an impact in healthcare and homelessness?*
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# Resources

- Race the Power of an Illusion Website: [link here](#)
- Vox - The Myth of Race Debunked in 3 Minutes Video: [link here](#)
- TEDxEmory - Dr. Camara Phyllis Jones Allegories on Race and Racism: [link here](#)
- Heather McGhee - Racism Has a Cost for Everyone: [link here](#)
- Race Forward - What is Racial Equity Website: [link here](#)
- KFF How History Has Shaped Racial and Ethnic Health Disparities Timeline: [link here](#)
- NAEH Homelessness and Racial Disparities Article: [link here](#)
- National Alliance on Mental Illness: Identity and Cultural Dimensions - [Black/African Americans](#)
- National Alliance on Mental Illness: Identity and Cultural Dimensions - [Asian American, Native Hawaiian, and Pacific Islander Americans](#)

# Resources

- National Alliance on Mental Illness: Identity and Cultural Dimensions - [Hispanic/Latinx](#)
- National Alliance on Mental Illness: Identity and Cultural Dimensions - [Indigenous](#)
- Stewards of Affordable Housing for the Future: [A Culture of Caring - Compendium of Self-Care Tools and Workforce Support Principles for Front-Line Staff in Service-Enriched Housing](#)
- KFF: How History Has Shaped [Racial and Ethnic Health Disparities](#)
- Kimberlé Crenshaw: [The Urgency of Intersectionality Video](#)
- The Opportunity Agenda: [Ten Tips for Putting Intersectionality into Practice](#)



# Thank You!

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