Advancing Health Equity and Assessing Diversity, Equity, and Inclusion in the Multidisciplinary Team Context

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National Center for Fatality Review and Prevention

Global Organization for Protecting Kids from Unintentional Injuries

Children's Safety Now Alliance

Federal Partners
- CDC
- FDA
- NIH
- SAMHSA

State Agencies
- CT DoMH
- MA DoH
- MD EMS
- NH DoH
- RI DoH
- WI Children's Health Alliance

Hospitals
- Children's Hospital of Philadelphia
- University of Oklahoma
- Rhode Island Hospital

Universities
- Clemson
- Georgetown
- Johns Hopkins
- University of California Irvine School of Medicine
- University of Minnesota
- University of New Hampshire

National Organizations
- AAP
- ANA
- Family Voices
- Gender Spectrum
- Impact Research
- National Farm Medicine Center
- National EMSC

Funding Sponsor

Objectives

- Identify the advantages of using the social ecological model in injury prevention activities.

- Explore ways that the CSN Health Equity Planner can be used to focus ongoing program and agency efforts on advancing health equity.

- Explore ways that the DEI Guide can be used to assess and support DEI practice in multidisciplinary teams, including Safe Kids coalitions.

Presenters

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Associate Director

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Senior Project Coordin

National Center for Fatality

Defining DEI

- **Diversity -** All aspects of human difference, social identifiers, and group differences including but not limited to race, ethnicity, sex, gender, sexual identity.

- **Equity -** Fair and just practices and policies. Equity is different from equality because equality treats everyone the same. Equity acknowledges and addresses inequalities, creating equal access to opportunities.

- **Inclusion -** Ensuring everyone is respected, can fully participate, and feels a sense of belonging.

Where Was the Gap?

The needs of multidisciplinary teams are unique.

- Resources to support individuals and internal work teams in understanding and adopting DEI concepts are readily available.

- Multidisciplinary teams have different needs.

- Multidisciplinary teams' DEI work is impacted by the policy and practice of each of their participating agencies and organizations.

- Multidisciplinary teams operate at the systems level.

What is Health Equity?

Health equity is the attainment of the highest level of health for everyone and no one is disadvantaged from achieving this potential because of any socially defined circumstances (Whitehead & Dahlgren, 2007).

Addressing the role of social determinants of health (i.e., economic and social conditions in the places where people live, learn, work, and play) can advance health equity in child safety work.

Health Inequity Versus Health Disparity

INEQUITY	DISPARITY
• Avoidable differences in health outcomes that are unfair and unjust • We Ask: Is the disparity in rates due to differences in social, economic, environmental or	• Differences in healt outcomes between • We Ask: Is there a difference in rates b population groups?

Injury Disparities

Injury Death Disparities Across Race/Ethnicity
Rate Per 100,000 Children and Adolescents Ages 0-19
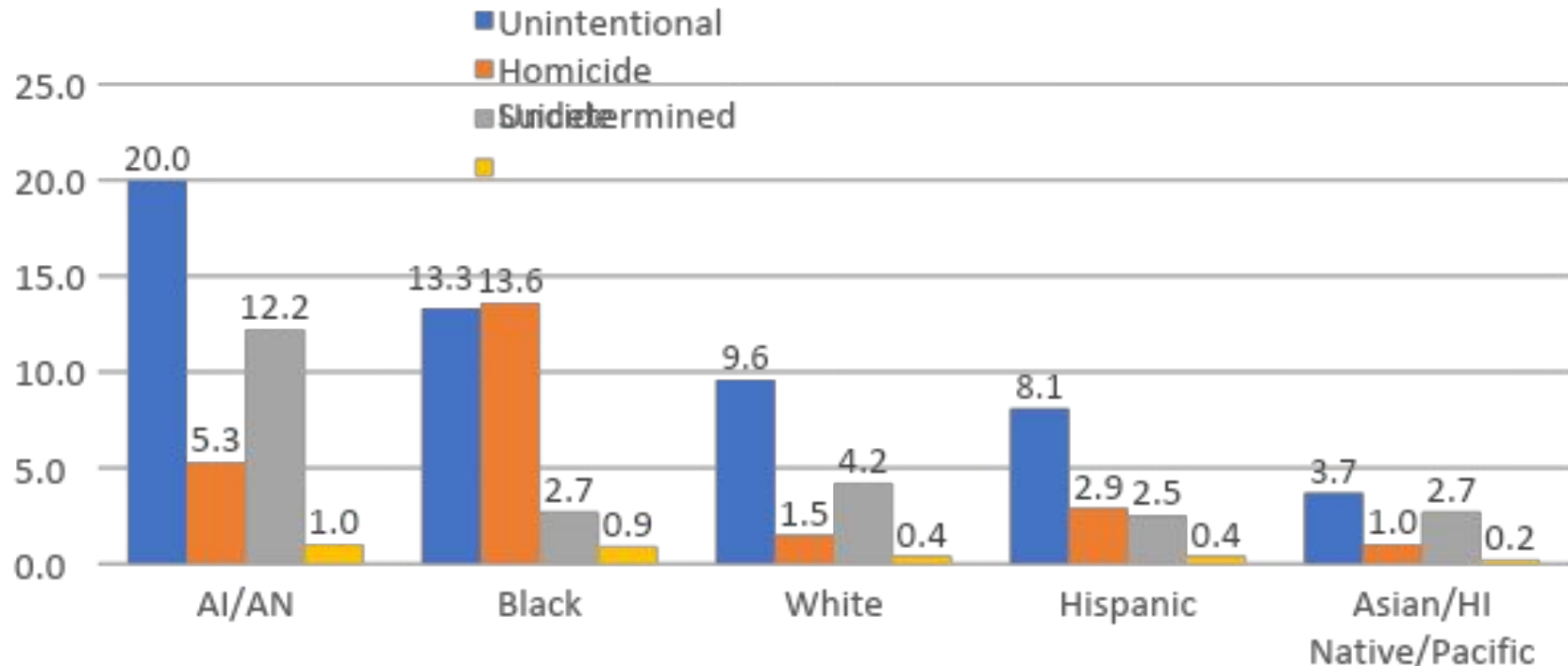
Source: CDC WISQARS, 2018-2020

What do you Need to Start Working on Equity?

Working Knowledge of Equity

Partnerships

Lead...
Sup...

Tools and Resources

Staff Capacity

Fina...
Su...

Identify Prevention Strategies at Multiple Levels

Social-Ecological Model

- Societal
- Community/Organizational
- Relationship
- Individual
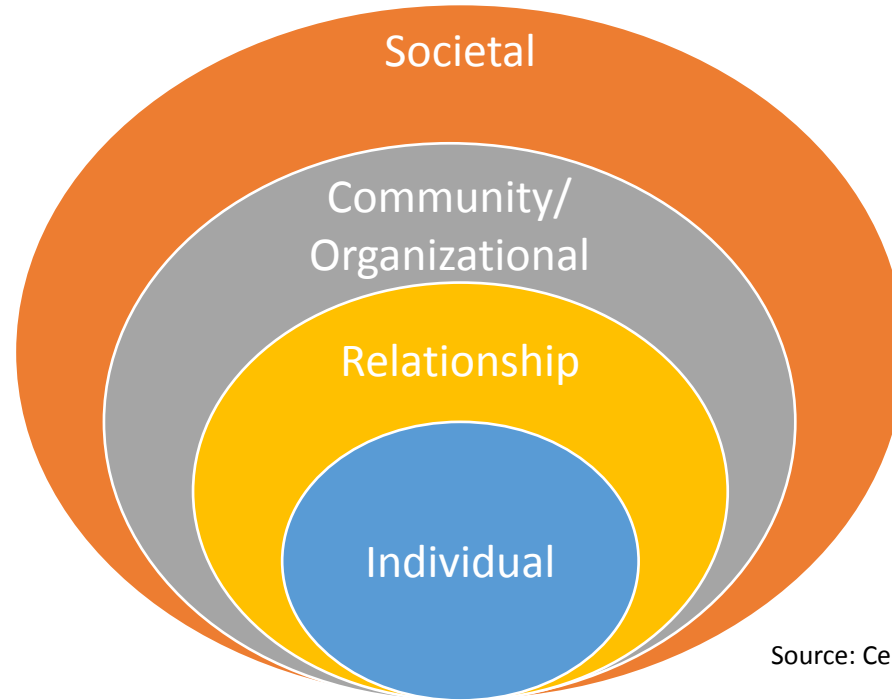
Source: Centers for Disease Control and Prevention, 2015

Identify Prevention Strategies With Multiple Stakeholders

The Spectrum of Prevention

Source: The Prevention Institute

The CSN Health Equity Planner to Implement and Spread Child Safety Strategies in Communities

Our Strategy: CSN Framework for Quality Improvement and Innovation in Child Safety

CSLC helps state/jurisdiction teams strengthen these three components

State/jurisdiction teams experience these improvements

Effective state/jurisdiction teams increase child safety

Child safety expertise

Leadership and management

Systems improvement

Workforce development

Outcomes

Improved injury and violence prevention systems

Health impact
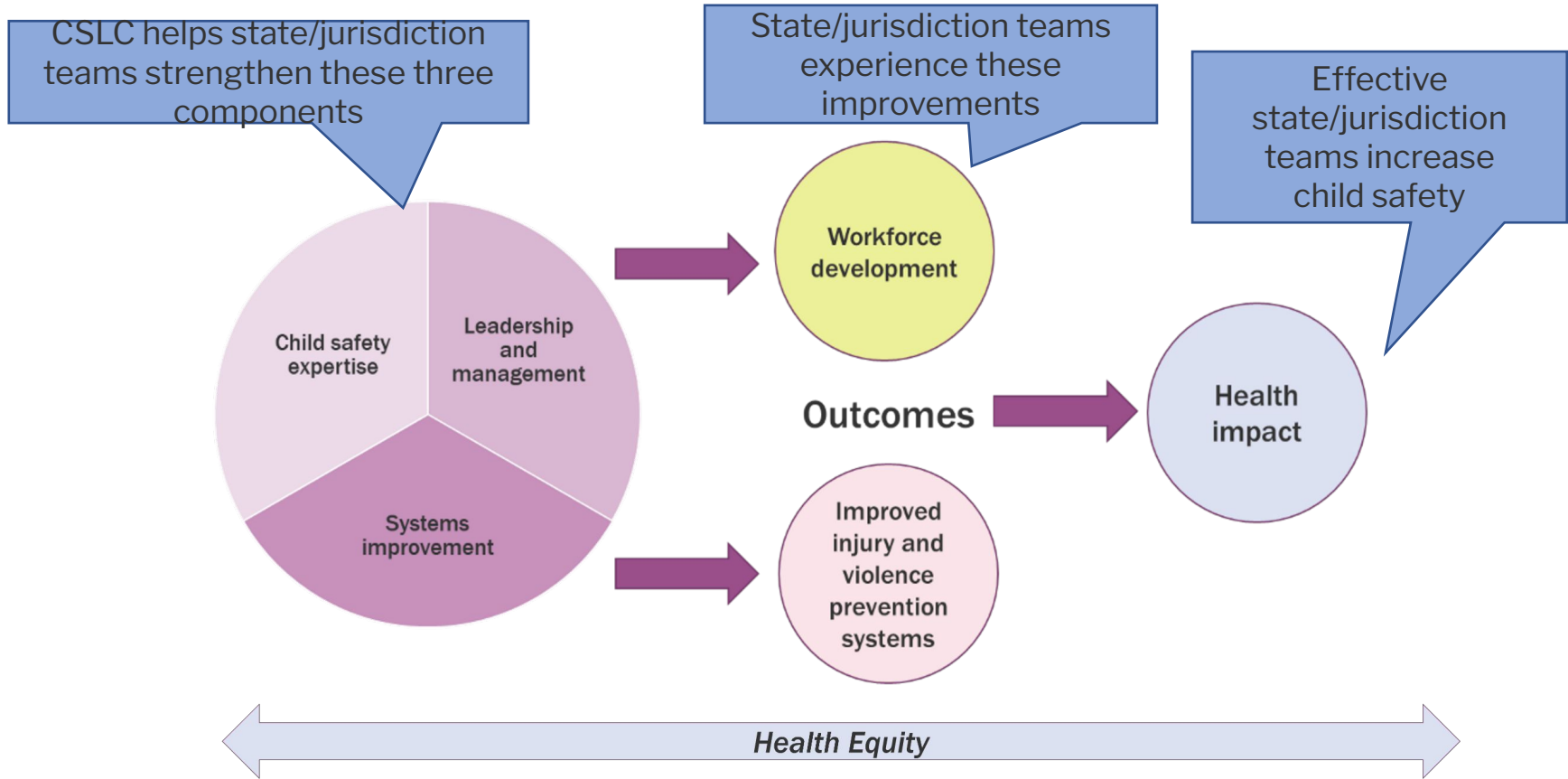
Health Equity

Health Equity Planner to Implement and Spread Child Safety Strategies in Communities

Five sections
- Social determinants of health
- Scope of work
- Leadership and management
- Child safety expertise
- Systems improvement

- Three phases
  - Assess
  - Plan and test
  - Monitor, revise and adapt

Health Equity Planner to Implement and Spread Child Safety Strategies in Communities

A TOOL FOR PUBLIC HEALTH AND TITLE V AGENCIES

SEPTEMBER 2021

SCAN ME

Using the Health Equity Planner

- Department/Agency or Program/Work unit

- Individual or team

- All or a combination of sections

- All or a combination of phases

Planner Navigation

While the planner is designed as a comprehensive tool we want you to focus on where your work is now, To get started, click the section(s) that best fits your child and adolescent safety work.

Health Equity Planner: Key Questions

- What social determinants of health most affect the communities you serve?

- Does your department or program have a shared aim statement for addressing health inequities? Do your partners share this aim statement?

- Who will champion and institutionalize health equity in your department or program? How?

- Are you engaging a diverse community of stakeholders and spreading evidence-based and evidence-informed culturally tailored child safety strategies?

- What indicators will you use to assess progress on reducing inequities?

Health Equity Planner Example: Social Determinants of Health

Consider the social determinants of health affecting the communities/populations you are serving (e.g., housing, quality and access to social services, education and healthcare, geographic location, economics, discrimination, etc.).

Work with your epidemiologist or data managers to obtain health disparities data for the population(s) you are addressing. At each phase, identify any next steps you need to take.

Example: Assess

1. Assess	Department/Agency	Program/Work Unit
Broadly identify the social determinants of health for your population(s) of interest		
Identify health disparities data for your population(s) of interest		
What are your next steps (e.g., who will you share and discuss these determinants and data with)?		

Example: Plan and Test

2. Plan and Test	Department/Agency	Program/Work Unit
Which of the social determinants of health will you prioritize addressing for your population(s) of interest?		
Which health disparities data will you monitor?		
What are your next steps (e.g., do you have an epidemiologist or data manager on your team)?		

Example: Monitor, Revise, and Adapt

3. Monitor, Revise, and Adapt	Department/Agency	Program/Work Unit
What does your data trend tell you about the work you are undertaking?		
How can you use your data over time to drive decision making?		
Are there other data representing social determinants for your population that would be helpful to monitor?		
What are your next steps?		

Pilot: Nebraska Teen Driver Safety

Initial Analysis & Data Linkage
- Development of the motor vehicle safety linked database
- Additional analysis and overlying of data through GIS mapping

Identify pilot communities and features
- Utilizing data, two communities will be identified as pilot communities
- Qualitative data will be captured from the pilot communities to better understand the unique risk and protective factors

Community-Level Implementation
- Communities will conduct PDSA cycles around injury prevention initiatives
- As needed/able, communities will implement injury prevention intervention

Nebraska Teen Driver Safety: Identifying Communities

Team decided to focus on SDOH

Counties with the highest rate of youth-related crashes were identified

Socioeconomic status, race/ethnicity, geography, and age are being analyzed

Correlational analysis is being conducted for crashes, alcohol use and speed

Time of crash is being analyzed

Data are being mapped to identify counties with the greatest need and specifi

Nebraska Teen Driver Safety: Working with Communities

- Identify community partners in each selected county

- Work with communities to share and confirm data and identify risk and protective factors

- Work with communities to apply quality improvement methods to test evidence based and evidence informed practices and programs

- Implement selected practices and programs and collect feedback

- Be willing to modify our approach as we learn

Pivot to Progress
Diverse Partnerships

- Community-based organizations
- School districts
- Law enforcement
- Universities
- Safe Kids coalitions
- Hospitals
- Home Visiting Programs
- State Departments of Motor Vehicles (DMV)
- State Departments of Transportation (DOT)
- State Departments of Mental Health (DMH)
- Youth Advisory Groups

Introductions

Project Partners

National Center for Fatality Review and Prevention

- Abby Collier, Director

- Susanna Joy, Senior Project Coordinator

Children's Safety Network

- Jenny Stern-Carusone, Associate Director
- Bina Ali, Director, Economics and Data Analysis Resource Center

Safe Kids Worldwide

- Morag MacKay, Research Director

Consultants

- Krista Rowe, *Event Garde* -Director, Diversity, Equity, and Inclusion
- Terri Wright, Racial Equity Consultant

Characteristics of Multidisciplinary Teams

Focused on Childhood Injury Prevention

Prevention Focus

The diverse partners convene for the shared goal of decreasing childhood injuries across their communities.

Balanced Power

Group and individual outcomes are influenced by the team, and all members have equal input.

Partnership and Process

They have shared agreements, formalized partnerships, and predictable processes and protocols to guide their work.

Shared Decision-Making

The entire team participates in the decision-making process, sharing information, and sharing success.

MULTIDISCIPLINARY TEAMS

Examples

- **Safe Kids Coalitions:** Action-oriented teams that provide proven and practical ways to keep kids safe. They host safety events, provide education, advocate for policy, and distribute safety devices, including helmets, smoke detectors, and life jackets.

- **Fetal, Infant, and Child Fatality Review Teams:** State or local level Fetal and Infant Mortality Review (FIMR) or Child Death Review (CDR) teams that review the circumstances of fetal, infant, or child deaths to identify risk and protective factors to inform prevention recommendations and activities.

MULTIDISCIPLINARY TEAMS

Examples

- **Child Safety Learning Collaboratives:** State and jurisdiction led action-oriented multidisciplinary teams that test, implement, and spread evidence-based child safety prevention practices to save lives and reduce injuries in areas including suicide, motor vehicle crashes, and sudden unexpected infant deaths.

- **Injury Prevention or Mortality Reduction Task Forces:** Often led by public health agencies, these task forces are often focused on prevention of child injuries broadly, or cause-specific mortality reduction, such as suicide prevention or promotion of infant safe sleep.

Common Members

Multidisciplinary Teams

Child Welfare

Pediatric Medicine

Medical Examiners or Coroners

Legal Representatives

Public Health Departments

Law Enforcement Agencies

Schools

Mental Health Professionals

Community Advocacy Organizations

Emergency Response Agencies

Unique Agency-Level Objectives

Shared Team Goals

Prevention, Safety, Well-being

Problems Teams Address

Matters of equity often drive outcomes multidisciplinary teams work to prevent.

- Preventable injuries
- Preventable deaths
- Disparities in outcomes

The Social Ecological Model (SEM)

Public Policy

Community
(cultural values, norms)

Organizational
(environment, ethos)

Interpersonal
(social network)

Individual
(knowledge, attitude

Why should the SEM matter to multidisciplinary teams?

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Equity can be advanced, or oppression can be perpetuated, at each level of the Social Ecological Model.

Organizational, Community, Public Policy	• Institutional and structur... oppression • Equitable policies, practi... norms that advance dive... and inclusion
Interpersonal	• Discrimination • Acceptance and belongi...
Individual	• Biases and prejudice • Identifying and addressi...
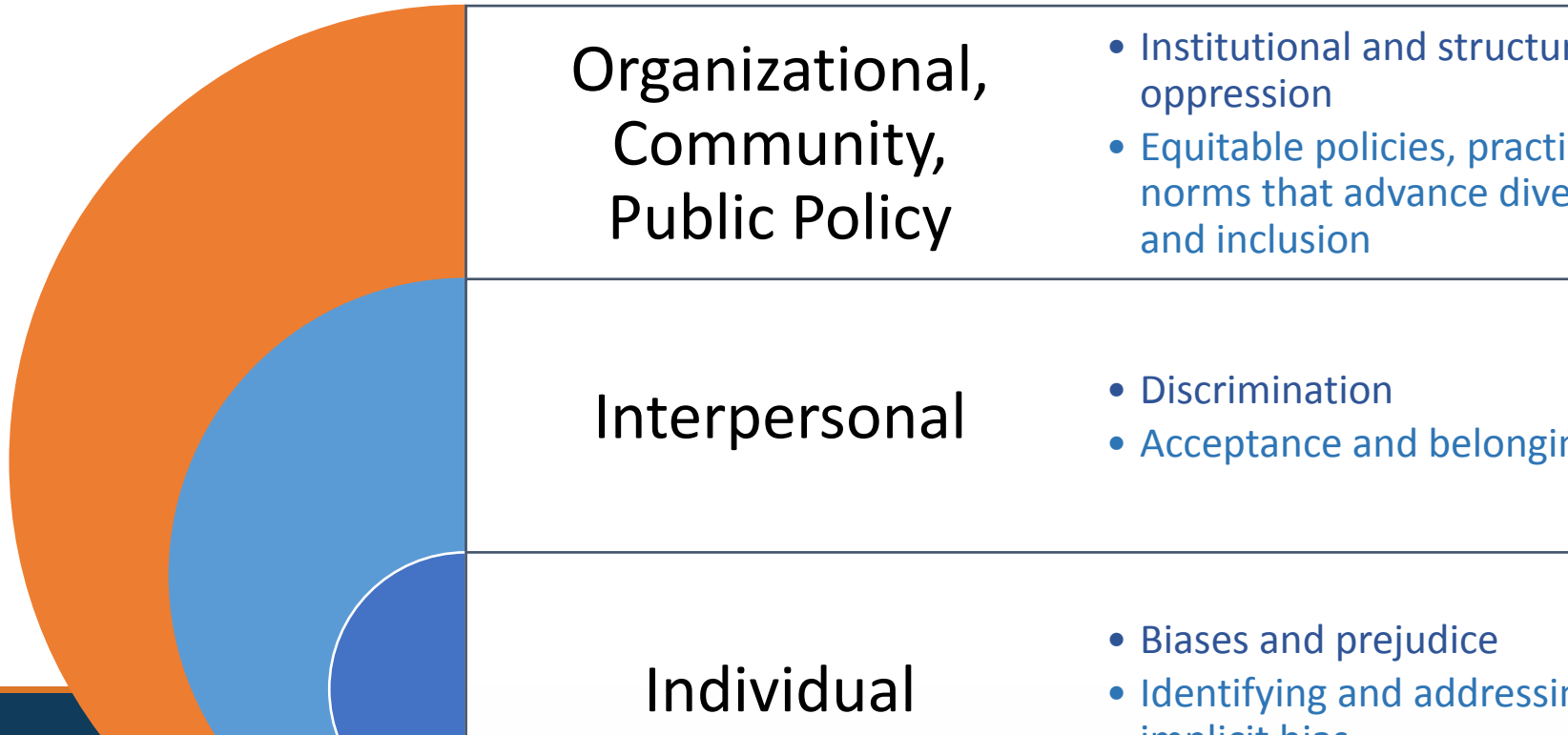
Identifying and Addressing a Gap in Resources

The needs of multidisciplinary teams are different than the needs of organizations.

- Resources to support individuals and internal work teams in understanding and adopting DEI concepts are readily available.

- Multidisciplinary teams have different needs.

- Multidisciplinary teams' DEI work is impacted by the policy and practice of each of their participating agencies and organizations.

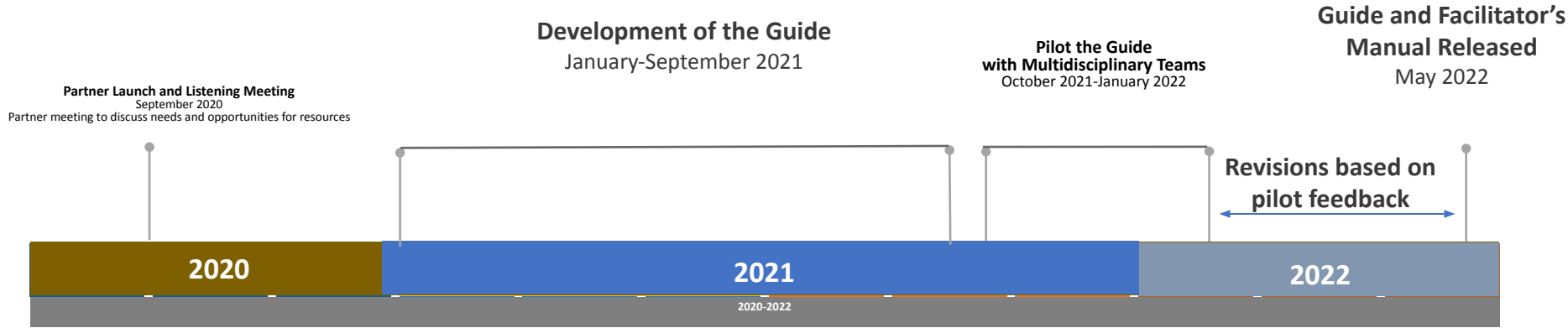- Multidisciplinary teams operate at the systems

DEI Guide Goals

Health Equity: Diversity, Equity, and Inclusion Assessment Guide for Multidisciplinary Teams

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- Yield insights into ways partner agencies from the multidisciplinary team context approach DEI in their home agency context.
- Guide multidisciplinary team participants to move from internal DEI assessment to a discussion of DEI within multidisciplinary teams.

Development of the Guide

2020-2022

Development of the Guide
January-September 2021

**Pilot the Guide
with Multidisciplinary Teams**
October 2021-January 2022

**Guide and Facilitator's
Manual Released**
May 2022

Partner Launch and Listening Meeting
September 2020
Partner meeting to discuss needs and opportunities for resources

**Revisions based on
pilot feedback**

2020	2021	2022

2020-2022

Pilot Sites

Safe Kids Oregon

Rhode Island Child Death & Pregnancy/Postpartum Death R

Nashville Fetal and Infant Mortality Review Team

Indiana Statewide Child Fatality Review Committee

Safe Kids Pennsylvania

Palm Beach County Fetal and Infant Mortality Review

Health Equity: DEI Assessment Guide for Multidisciplinary Teams

A Resource to Support Multi-agency Collaborations

_____

- Dialogue-based

- Grounded in the SEM

- Key Concepts and Terms to establish shared understanding

- Action-oriented for teams to identify next steps at organizational, community, and public policy levels

National CFRP
Center for Fatality Review & Prevention

May 2022

Health Equity: Diversity, Equity, and Inclusion Assessment Guide for Multidisciplinary Teams

CSN Children's Safety Network at Education Development Center

CSNA Children's Safety Now Alliance

SAFE KIDS WORLDWIDE

Facilitator's Manual

Supporting Multidisciplinary Team Leaders

- Proposed implementation strategies and timelines
- Conversation prompts and examples for facilitators
- Additional resources for all phases of Guide implementation and planning, including DEI resources for individuals and internal teams

Selected Participant Feedback

Themes and Examples

Enriched Understanding

"We found it very beneficial to work through the questions together because of the conversations that occurred to further develop the understanding of needs in the community."

Next Steps

"The questions help to guide the development of goals into a framework that is solutions-focused."

Additional Resources

"…many users of this tool may not have a strong understanding of how various systems have historically impacted communities. Having a brief introduction of systems that historically lent to disparities or segregation would be beneficial to be able to make comparisons in the different systems in place in our communities today."

Opportunities for Shared Learning

"[The Guide] stimulated meaningful conversations between agencies in regard to varying methods/strategies that are being employed to assess and engage organizations in DEI efforts. Several of the strategies shared were easily transferable to other organizations that were not as far along in their DEI work and may serve as important first steps to engage others in this work."

Selected Participant Feedback

Themes and Examples

Discussing Power and Oppression

"I love that the definition of oppression talks about power, because that is vital to an accurate understanding of how it works (and it's too often left out of discussions)."

Advancing Health Equity

"This pilot sparked great conversation on the inequities that many of the agencies are struggling with in our community. It led us to consider the importance of advancing health equity through our work as a coalition."

First Internal Dialogue

"This was really the first discussion-based meeting focusing on health equity… Hopefully people who haven't done much work around DEI/health equity got some ideas from those who have been doing that work."

Opportunities for Shared Learning

"This was the first discussion our team had specifically about DEI. We often discuss DEI in relationship to cases, but it was very helpful to have the structure to step back and view the larger DEI picture and how it influences our process on a macro scale… Our members shared their experiences… and highlighted the need for our team to recruit more diverse members."

What Is Happening Now

Learning Collaborative for CDR, FIMR, and Title V

- Using the DEI Assessment and Facilitator's Manual
- Dr. Terri Wright, Ph.D.

LET'S PRACTICE

Please gather in small groups to walk through questions from the DEI Guide.

Organizational Questions

Health Equity: Diversity, Equity, and Inclusion Assessment Guide for Multidisciplinary Teams

Organizational Questions

This portion of the assessment aims to understand your home agency in terms of operationalizing organizational policies and practices to achieve Diversity, Equity and Inclusion (DEI).

1. To your knowledge, has your home agency completed or participated in a training or internal organizational assessment as it relates to its current policies and practices to achieve diversity, equity and inclusion in your home agency? If so, when?

2. To your knowledge, has your home agency completed a needs assessment or similar assessment to determine the extent to which strategies and activities to achieve health equity are embedded in your agency's work? If so, when?

3. If you recall, what was the previous assessment tool(s) you or your home agency completed?

4. Are you aware of champions for DEI in your home agency? If so, what are their roles?

5. Is there a diversity of social identities and perspectives at different levels of your home agency? (Examples of social identifies may include race, ethnicity, heritage, sexual orientation, physical ability/disability, or gender identity.)

6. Are you aware of dedicated time, resources, and effort to understanding and employing practices and policies that promote DEI in your home agency? If so, please provide an example.

Organizational Questions

Health Equity: Diversity, Equity, and Inclusion Assessment Guide for Multidisciplinary Teams

7 When it comes to DEI efforts in your home agency, what is going well? (Examples of work in this area include but are not limited to strategies to ensure equity in wages and benefits, diversity in professional service contracts and procurement, diversity in leadership, discussion and adoption of more equitable language and labels.)

8 What resources may help improve your home agency's efforts to integrate DEI as a philosophy with intentional practices and policies? (Examples may include technical assistance/expertise, leadership, human capital, etc.)

9 What areas might need improvement? Please be specific. (Examples may include strategies to ensure equity in wages and benefits, diversity in professional service contracts and procurement, diversity in leadership, discussion and adoption of more equitable language and labels.)
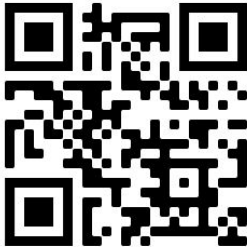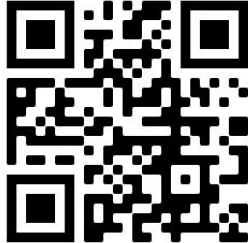
TAKEAWAY: What actionable issues related to DEI have you/your team identified in the Organizational discussion that you may want to focus efforts on in the future?

_____

_____

_____

_____

REPORT OUT

Tell the larger group about the organizational discussion you had using the DEI Guide.

Resources to Advance Health Equity Work

Thank you.

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Associate Director

Children's Safety Network

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Senior Project Coordinator

National Center for Fatality Review and Prevention

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Questions?

Thank you.