

# I Have Privilege?

## Exploring Identity and Privilege Among Healthcare Professionals

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**RHONDA DAILEY, MD | ASSISTANT PROFESSOR**

**DEPARTMENT OF FAMILY MEDICINE AND PUBLIC HEALTH SCIENCES**

**WAYNE STATE UNIVERSITY SCHOOL OF MEDICINE**

**RDAILEY@MED.WAYNE.EDU**





## WHO AM I? (My identity)

- Assistant Professor; Dept of Family Medicine and Public Health Sciences
- Scientific Director, Office of Community Engaged Research
- Co-Associate Director, Community Engagement Core of the Achieve Greater Center
- Health Disparities Researcher; research effects of research on health; active in implicit bias training
- Trained in Medicine (M.D.)
- Trained Microaggression Facilitator
- Wife, mother of 2 adult daughters
- Daughter, sister, aunt, cousin, friend,
- Originally from the South (Mississippi)
- Black, American Indian, and White ancestry

# Land Acknowledgement

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- **I recognize that the land on which I live and work has long served as a site of meeting and exchange amongst a number of Indigenous people.**
- **While different tribes from across North America are represented in the population today, many were forcibly relocated to Indian Territories under harmful federal policies.**
- **I honor the diverse Indigenous peoples connected to this territory and I commit to being a better steward of the land for future generations.**

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# Learning Objectives

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- Define the meaning of identity and privilege
- Participate in privilege exercises and engage in dialogue on the personal impact of privilege
- Learn how privilege impacts health equity
- Explore strategies to mitigate privilege in institutional systems

# Group Norms

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1. Co-construct knowledge together
2. Use “I” Statements
3. Reserve the right to change your mind
4. Be comfortable with the uncomfortable
5. Confidentiality
6. Suspend Judgement

Define the meaning  
of identity and  
privilege

# Definition: Identity

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- The distinguishing character or personality of an individual
- The set of qualities and beliefs that make one person or group different from others : individuality
- Condition or character as to who a person or what a thing is; the qualities, beliefs, etc., that distinguish or identify a person or thing
- Example: female, American, professor, artist, physician

Source: Merriam-Webster Dictionary

# 4 Aspects of Identity

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- **Familial Identity** | This facet you may not be aware of, as it's a socially conditioned or patterned behavior from your caretakers beginning at birth.
  
- **Personal Identity** | How you regard yourself as an individual, including personal gender identity, your pursuits, habits, how you see yourself or your relationship with yourself.



# 4 Aspects of Identity

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- **Associative Identity** | The way one identifies with those they associate with. This includes racial identity, physical appearance, or ancestry.
- **Egoic Identity** | The instinctual protective identity, or emotional based memory backlog or psychosomatic response and identifying with things such as physical ailments

Source: Merriam-Webster Dictionary

# Visible/Invisible Identities

## Visible:

- A woman
- Black

## Invisible:

- Sexual orientation
- Nationality
- Immigration status
- [Dis]abilities
- Education
- Socio-economic status
- Religion





# **Your identity is your superpower**

AMERICA FERRERA



**America Ferrera My identity is my  
Super Power | Video #2 [4:17 mins.]**

# Take-aways

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- My identity is my superpower-- not an obstacle.
- Presence creates possibilities.
- Who we see thriving in the world teaches us how to see ourselves, how to think about our own value, how to dream about our futures
- I was never actually asking the system to change. I was asking it to let me in, and those aren't the same thing
- In order for our systems to reflect what our present world looks like, they don't have to create a new reality; they just have to stop resisting the one we already live in.

# Definition: Privilege

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- a right or benefit that is given to some people and not to others based on their identity
- a special advantage, immunity or benefit not enjoyed by all
- a person or thing a right reserved exclusively by a particular person or group (especially a hereditary or official right)

# Definition: Privilege

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## **Privilege Does not mean:**

- That you are rich
- That you had an easy life
- That everything has been handed to you
- That you've never had to struggle or work hard

## **Does mean:**

- You don't have to think of, consider, or be affected by certain situations that are experienced by others who are less privileged

Participate in privilege  
exercises and engage  
in dialogue on the  
personal impact of  
privilege

# Privilege Group Membership

PRIVILEGED GROUP	IDENTITIES	MARGINALIZED GROUP
Late 30's to 50's/early 60's	1. Age	Younger; Older
White	2. Race	Person of Color; People who identify as Biracial/Multi racial
Male	3. Sex	Female; Intersex
Cisgender	4. Gender Identity	Transgender; Gender Nonconforming; Gender Queer; Androgynous
President, Vice Presidents, Deans, Directors, Faculty, Supervisors	5. Hierarchical Level	Students, Graduate Teaching Assistants, direct service staff
Heterosexual	6. Sexual Orientation	Gay; Lesbian; Bisexual; Queer; Questioning
Upper class; Upper middle class; Middle class	7. Social Class	Working class; Living in poverty
Graduate or 4-year degree; highly valued school; private school	8. Educational Level Credential; Certificate	college; less valued school; public school
Christian {Protestant; Catholic}	9. Religion/Spirituality	Muslim, Jewish, Agnostic, Hindu, Atheist, Buddhist, Spiritual, LDS, Jehovah Witness, Pagan,...
U.S. born	10. National Origin	"Foreign born," Born in a country other than the U.S.
Not disabled	11. Disability Status	People with a physical, mental, emotional and/or learning disability; People living with AIDS/HIV+
"American;" Western European heritage	12. Ethnicity/Culture	Puerto Rican; Navajo; Mexican; Nigerian; Chinese; Iranian; Russian; Jewish...
Fit society's image of attractive, beautiful, handsome, athletic...	13. Size, Appearance, Athleticism	Perceived by others as too fat, tall, short, unattractive, not athletic...
Proficient in the use of "Standard" English	14. English Literacy	Use of "non-standard" English dialects; have an "accent"
Legally married in a heterosexual relationship	15. Marital Status	Single; divorced; widowed; same sex partnership; unmarried heterosexual partnership...
Parent of children born within a 2-parent heterosexual marriage	16. Parental Status	Unmarried parent; do not have children; non-residential parent; LGBTQ parents...
More years on campus	17. Years of experience	New; little experience on campus
U.S. citizen	18. Immigration Status	People who do not have U.S. citizenship, are undocumented
Suburban; valued region of U.S.	19. Geographic region	Rural; some urban areas...less valued region
Light skin; European/Caucasian features	20. Skin color; phenotype	Darker skin; African, Asian, Aboriginal features...
Nuclear family with 2 parents in a heterosexual relationship	21. Family Status	Blended family; single-parent household; grandparents raising grandchildren; foster family...
Extrovert; task-oriented; analytical; linear thinker	22. Work Style	Introvert; process-oriented; creative; circular thinker

## Directions:

- In the 2<sup>nd</sup> (middle) column you will see a list of identities, please use this column to identify what your privilege groups are
- In the 1<sup>st</sup> column, check-off any privilege groups you self-identify with
- Save your responses on this sheet, plan to review and make note of this checklist throughout the workshop



**SNL**

**SNL Privilege | Video #2** [2:30 mins.]

# Pre-activity: Privilege Exercise

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From Dr. Vicki T. Sapp's Implicit Bias Series

7 types of privilege: completed Qualtrics survey.

- 1. Ability
- 2. Class
- 3. Gender
- 4. Nationality
- 5. Racial
- 6. Religion
- 7. Sexuality



Link: [https://waynestate.az1.qualtrics.com/jfe/form/SV\\_oudGKJ6FeXGms8S](https://waynestate.az1.qualtrics.com/jfe/form/SV_oudGKJ6FeXGms8S)

# Small Groups

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# Small Groups: Privilege Exercise and Video feedback

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## PART 1 |

- Share with your small group the privileges that are very important to you.
- What insight could learning about your privileges impact how you engage with colleagues, patients, and learners (students, interns, fellows and residents)?
- What identities/systems of privilege were not represented? If we had them how would that impact the boxes you checked?
- Why is it important for us to be aware of concepts of identities/experiences/privilege, isms, and oppressive institutional structures?

# Small Groups: Privilege Exercise and Video feedback

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## PART 2 |

- I asked you to check the boxes to provide insight to the privileges you have. You did not ask for the privileges. However, you have these privileges based on systemic institutional oppression. What would it mean if your grand total of privileges were displayed on your person, noticeably for the rest of the day? What assumptions/messages could others take from your grand total of privileges?
- How noticeable, to us and others, are our privileges on a daily basis? Can we and how do we hide/NOT display our authentic self (deny, justify, or ignore) our privileges on a daily basis? Why or why not do we do this?
- What does it mean for us to have multiple, intersecting identities – where we experience some privileges (around some identities) AND some oppression (around others)?
- How can you use your super power to change your behavior to positively impact others?



# Report Out

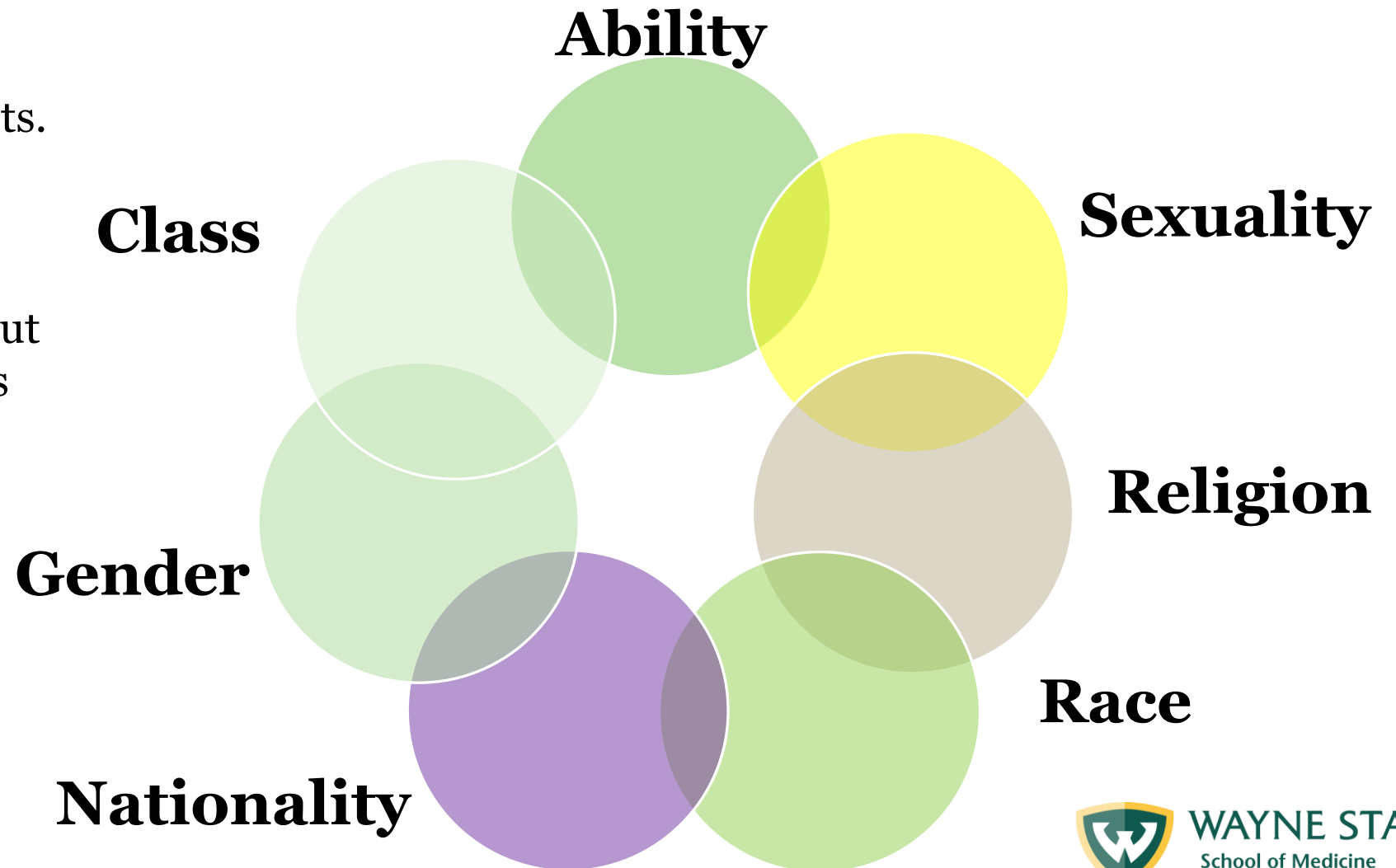
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# Intersectionality

Each person's **identity** is complex and made up of several different components.

Because of this-

- People may experience privilege in some areas but lack of privilege in others

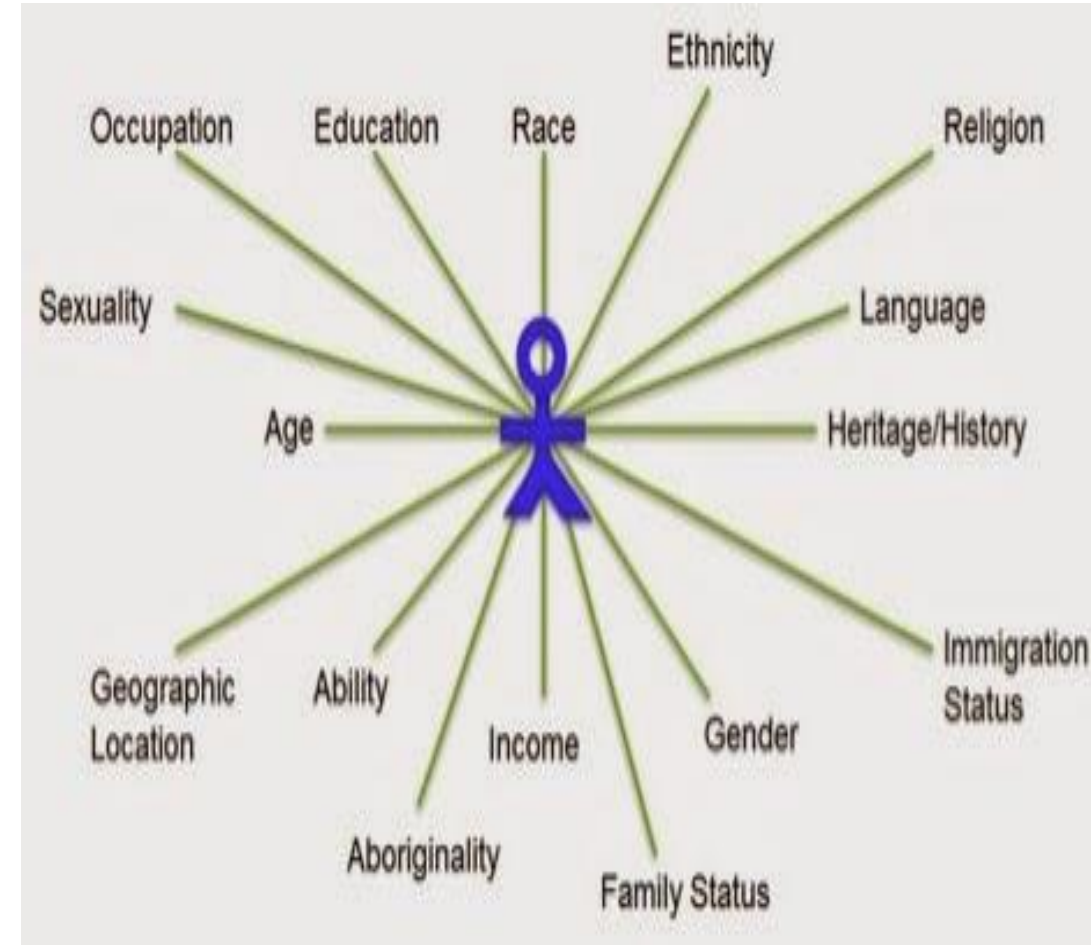


# Kimberle Crenshaw, JD coined the term Intersectionality.

If you want to know how many intersections matter, you have to look at the **CONTEXT**

**You have to ask yourself the questions:**

- What is **HAPPENING**?
- What **KIND** of discrimination is going on?
- What are the **POLICIES**?
- What are the **INSTITUTIONAL STRUCTURES** that **PLAY A ROLE** in **CONTRIBUTING** to the **EXCLUSION** of some people and not others?

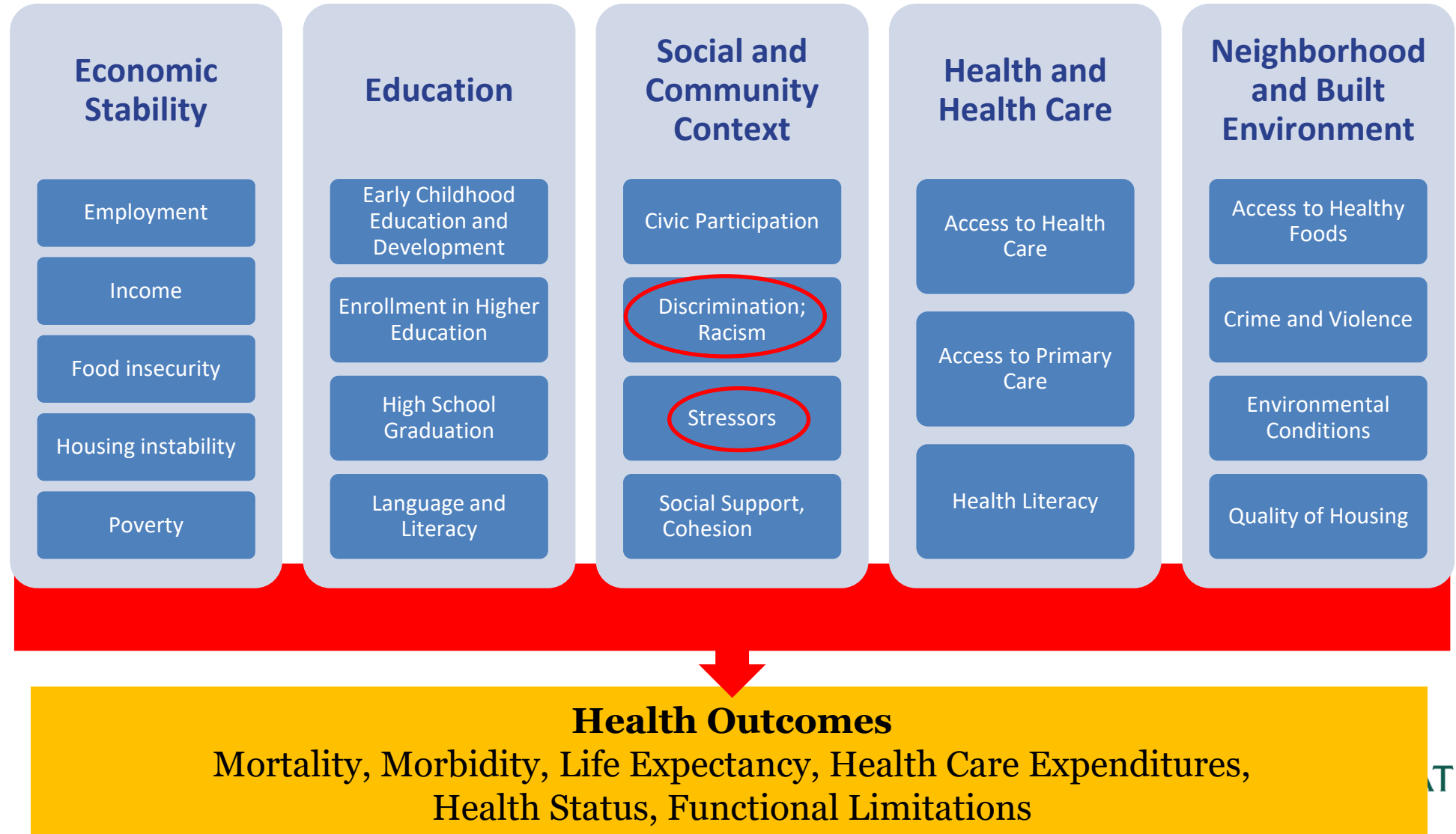


Learn how privilege  
impacts health  
equity

# What is my Why?

- **SDOH** and Health outcomes
- Interventions through **education**
- **Focus:** Teachers, Learners, and Healers

## Social Determinants of Health (SDOH)



# African Americans & Black Statistics and Health Disparities



## 14 Studies acute pain

3,125 (40%) Black and 1,538 (25%) Hispanic patients in US emergency rooms are less likely to receive medication to ease acute pain than their 7,070 White counterparts



## 400 hospitals in US

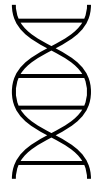
400 hospitals in the US showed that Black patients with heart disease received older, cheaper, and more conservative treatments than their white counterparts



## Less likely newer medicine

Black people are less likely to be prescribed newer medicine for mental disorders. Rather, they tend to be offered older medicine with worse side effects.

# American Indians and Alaska Natives Statistics and Health Disparities



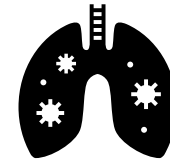
## **2x HIV infections**

Have a rate of HIV infection 2x as high as that of non-Hispanic Whites



## **3x diabetes 2x death**

Adults were almost 3x more likely to have diabetes and 2x more likely to die from diabetes than non-Hispanic Whites



## **Liver Disease 4<sup>th</sup> cause of death**

In 2018, chronic liver disease is 4<sup>th</sup> leading cause of death

# Asian Americans Statistics and Health Disparities

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**35x more**

Tuberculosis was 35 times more common in Asian Americans than among non-Hispanic Whites



**8x die from hepatitis B**

Asian Americans 2x more likely to develop chronic hepatitis B and 8x more likely to die



**No medication**

3.6% adults received prescription medications for mental health services compared with 15.4% of non-Hispanic white adults



# Hispanic/Latinx Statistics and Health Disparities



**25% high blood pressure**

Approximately  
25% have high  
blood pressure



**40% cervical cancer &  
20% deaths**

Hispanic women are  
40% more likely to  
have cervical cancer  
and 20% likely to die  
from cervical cancer  
than non-Hispanic  
White women



**6.8% meds for  
mental health**

6.8% received  
prescription  
medication for mental  
health services  
compared with 15.4%  
of non-Hispanic White  
adults

# LGBTQIA Statistics and Health Disparities



## 2020 New Law

To protect workers from being fired for being gay. Prior to 2020, in **29** states, it was legal to fire someone for being gay and in **34** states, someone identifying as transgender



## 33% negative Px

1/3 of survey respondents reported having a negative healthcare experience, based on their sexual orientation or gender identity



## 1 in 5 denied

1 in 5 transgender individuals have been denied healthcare because of their gender identity

# Native Hawaiian or other Pacific Islander Americans Statistics and Health Disparities



## Low medication mental health

In 2018, 6.3% compared to 15.4% received prescription medication for mental health services



## High rates Tuberculosis

Highest incidence rate of tuberculosis than in any other populations



## 10% more coronary Heart disease

10% more likely to have diagnosed coronary heart disease than non-Hispanic whites

# Other Marginalized Groups Statistics and Health Disparities

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- Elderly Community
- Immigrant Community
- Jewish Community
- Southeast Asian Community
- Refugee Community
- Religious Community
- Veteran Community

Explore strategies to  
mitigate privilege in  
institutional systems

# 4 Levels of Oppression

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- **Personal** (Values, beliefs, feelings)
- **Interpersonal** (Actions, behaviors, and language)
- **Cultural** (Beauty, truth, right)
- **Institutional** (Rules, policies, procedures)



**Mitigating Privilege | Video #3 [3:30 mins.]**

# Re-Cap: 5 Tips for Being an Ally

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## **Understand your privilege**

- Privilege does not mean that you are rich
- That you had an easy life
- That everything has been handed to you
- You've never had struggle or work hard

Listen and do your homework

Speak-up But NOT over; be supportive

Be aware that you will make mistakes! Apologize when you do

Ally is a VERB

**What you see in the following  
picture?**



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# Do You See a Cow?

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1. Strongly agree – YES, I can definitely see a COW!
2. Agree – Maybe, that could be a COW...
3. Somewhat agree – I kind of, sort of, see a COW...
4. Somewhat – It could be a COW???
5. Somewhat disagree – I am still trying to figure out what I see...
6. Disagree – Not sure, I see something, but not sure if it is a COW...
7. Strongly disagree – NO, I don't see a COW!



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# Understanding Your Privilege

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- For most, it must be pointed out (could not see the cow)
- It may take some a while to see it
- Others still cannot see it
- What has been revealed cannot be unseen
- Once we learn better, we must do better
- How?

# 4-E™ Approach to Cultural Competence

## Exposure:

Increased contact  
with difference

## Experience:

Creating  
transformative  
experiences to  
build relationships  
and shared  
meaning

## Education:

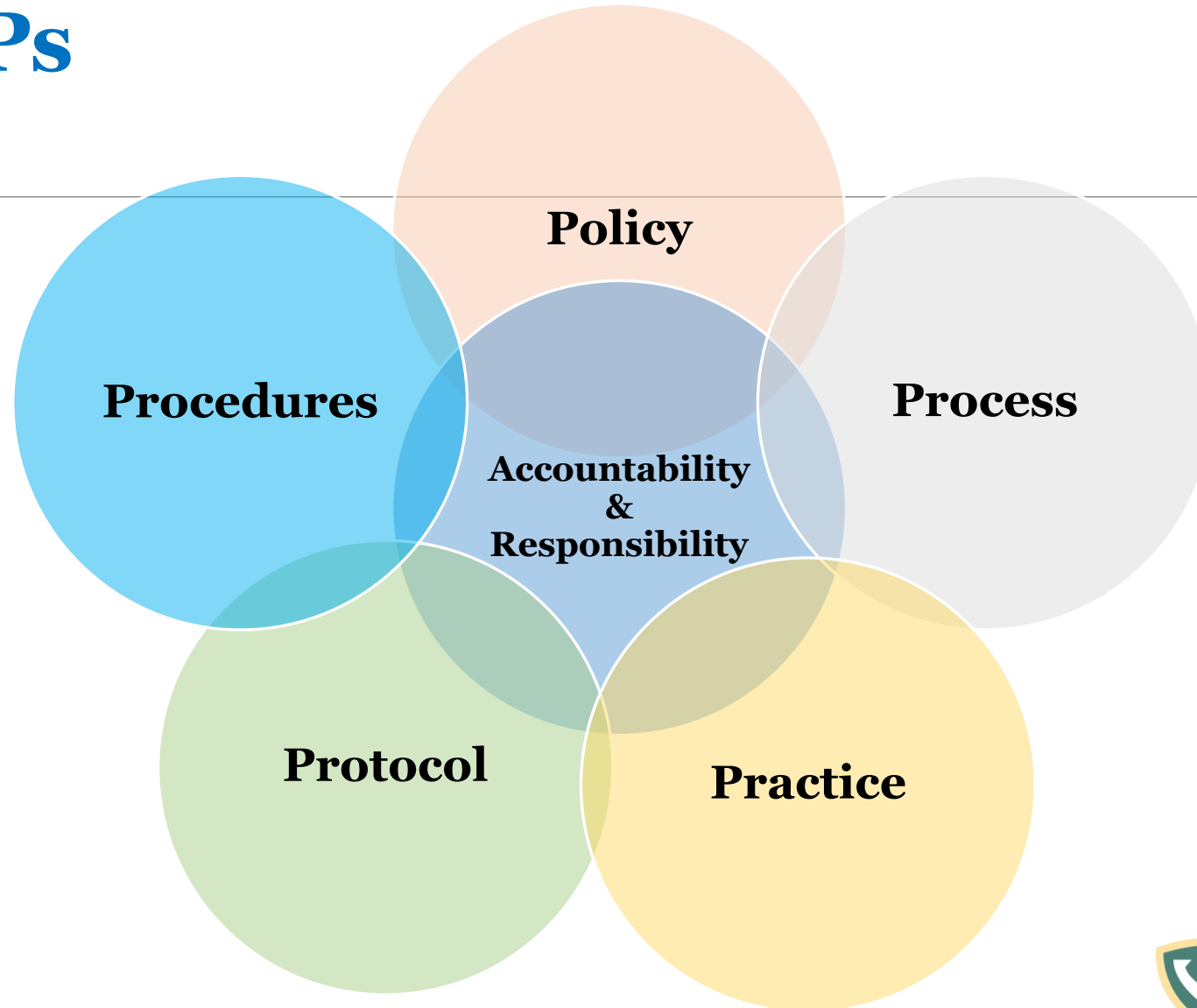
Developing new  
skills, knowledge  
and ways of  
thinking

## Empathy:

Practice  
understanding  
others from  
their  
perspective

# Dr. Sapp's 5Ps Model™

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This work requires a “radical reorientation of our consciousness” ~Ibram X. Kendi

~~I am here to  
“fix” and  
“dismantle”  
racism.~~

“I recognize that I must understand **who I am** in relation to the system of racism in order to disrupt and dismantle it”

# Call to Action

## Expanding YOUR Knowledge of Social Inequities

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1. Take **personal account** for growing your understanding of the history, ideology, and present manifestations of systemic inequity
2. **Reflect** on how history and structural inequities influence your community and workplace
3. **Learn** how different forms of oppression operate on interpersonal and institutional levels
4. **Ask yourself:** Am I complicit with my silence?

# Thank you!

## Pre-Post assessment link:

- Anonymous, voluntary
- No identifying, personal information
- Data presented in aggregate
- **Link**
- [https://waynestate.az1.qualtrics.com/jfe/form/SV\\_bOZ8bC4ugsovUq2](https://waynestate.az1.qualtrics.com/jfe/form/SV_bOZ8bC4ugsovUq2)

QR CODE





# Questions?

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## Rhonda Dailey, MD

- Assistant Professor, Department of Family Medicine and Public Health Sciences
- Scientific Director, Office of Community Engaged Research;
- **Wayne State University School of Medicine**
- Office: 313-577-6860
- [rdailey@med.wayne.edu](mailto:rdailey@med.wayne.edu)