

Health Equity Column: More Than A Moment: Dismantling Racism

Jenné Johns, MPH



In this month's Health Equity Column, I welcome the readers of Neonatology Today to journey with me, as we take a deeper look into health and racial equity issues plaguing our society and impacting Black NICU and Preemie families. As we move to the end of 2020, a year with inequitable outcomes associated with COVID-19, civil unrest, and rising rates of maternal-infant morbidity and mortality rates for Black families, racism is at the core. According to the American Public Health Association, racism is now deemed a public health crisis that must be systematically addressed and dismantled to eliminate health outcomes disparities. This month, I have interviewed Deidre McDaniel, MSW, LCSW, maternal and child health expert with front line NICU and policy/systems change expertise to share insights on addressing health and racial equity in neonatal care.

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Question 1: What is your definition of health equity?

My definition of health equity is when health outcomes and life expectancy are not defined by race and when people of color are valued within healthcare systems and able to operate with the autonomy to determine and engage in the care that we receive.

Question 2: What are your organizational priorities for addressing health and racial equity in neonatal care?

Health Equity Resources & Strategies (HERS) provides training and technical assistance on how to implement equitable quality improvement initiatives, develop strategies for clinical-community collaborations in service delivery, and conducts research and advocacy to eliminate disparities in birth outcomes.

Question 3: What personal and professional experiences led you to focus on health equity in neonatal care?

I learned very early on in my social work career that the best way to address health inequities was to develop strategies that shifted the organizational culture. During my tenure as a neonatal intensive care unit social worker, I witnessed firsthand the impact

of inequitable treatment among families of color. Equity cannot operate within the bubble of one unit; it must be instilled within the entire hospital system. Once I started to provide staff training, serving on NICU Quality Improvement Committees, and engaging in patient advocacy and began to see changes, I enlisted NICU Leadership to continue to foster these strategies across units and within their Leadership Team meetings. In hindsight, I realize that at the time, I did not have the language to adequately name the work that I was embarking on but what I did know is that I was witnessing unfair treatment and needed to do something about it. Those experiences and many others continue to fuel my passion and growth personally and professionally to continue to advocate for and elevate the voices of women of color. My research focuses on anti-racist healthcare practices through collaborative, participatory research. It is important to engage the community as leaders in their care and to provide spaces and opportunities for their voices to be heard and respected.

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Question 4: What is your call to action for the industry as we seek to eliminate health and racial inequities in neonatal care?

Actively work to dismantle racism. Racist policies and practices are embedded in the history of medical practice and are prevalent in medical care today. Organizations such as the American Medical Association and the Centers for Disease Control have cited racism as a “threat” to public health. Therefore, if you are working to eliminate health and racial inequities, you must acknowledge and address the role of racism in medical education and service delivery and be committed to its eradication.

Disclosure: The authors have no disclosures.

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About the Author: Deidre McDaniel, MSW, LCSW:



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Deidre McDaniel, MSW, LCSW is the President and Founder of Health Equity Resources & Strategies (HERS). With over 20 years of experience in maternal & child health, Ms. McDaniel provides guidance to state agencies, healthcare systems, and public/private organizations on how to successfully implement and sustain equitable quality improvement projects to address disparities in maternal morbidity and mortality. Ms. McDaniel's research focuses on anti-racist healthcare practices and eliminating disparities in birth outcomes for African American women. Ms. McDaniel is a Doctoral Fellow at Morgan State University and a Maternal & Child Health Subject Matter Expert with the National Healthy Start Association and has dedicated her career to improving the health and well-being of African American women and children.

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Jenné Johns, MPH is President of Once Upon A Premie, Founder of Once Upon A Premie Academy, mother of a micro-preemie, author, speaker, advocate, and national senior health equity leader. Once Upon A Premie is a non-profit organization with a two-part mission: 1.) to donate Once Upon A Premie books to NICU families in under resourced communities, and 2.) lead virtual health and racial ethnic training programs and solutions to the neonatal and perinatal community through the Once Upon A Premie Academy. Jenné provides speaking, strategic planning and consultation services for fortune 500 companies focused on preemie parent needs from a cultural lens and reading as a tool for growth, development, and bonding. Jenné is also a national senior health equity thought leader and has led solutions-oriented health equity and quality improvement portfolios for the nations' largest health insurance and managed care companies.

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