



HEALTHY OUTCOMES
FROM POSITIVE EXPERIENCES

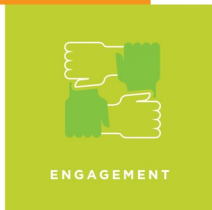
as an Anti-Racism Framework in Action



The Four Building Blocks of HOPE—supportive relationships, safe, equitable, and stable environments, social and civic engagement, and emotional growth—can be incorporated into decision making at every level and in every sector to ensure that all children, including children of color, have what they need to thrive.



Access to the Four Building Blocks is often disrupted by systemic racism, historical trauma, and adverse childhood experiences. HOPE-informed agencies can partner with their communities, and together identify existing resources to promote HOPE and identify unmet needs. Working together, HOPE and our partners seek to ensure that every family and child can have those key experiences that promote resiliency.



[Racism is harmful to all of us](#). Anti-racism frameworks intentionally upend racist policies and practice in an effort to combat White supremacy. As author and anti-racism activist Ibram X. Kendi describes it, a racist policy is “any measure that produces or sustains racial inequality.” This work requires tacit acknowledgement that systems, institutions, policies, practices and norms privilege White people, even when they do not explicitly mention race. While bias operates at the individual level, providers, practitioners, and educators are also operating within

systems built on racist foundations. In this resource, we will be focusing specifically on systemic racism and unconscious bias.

This resource walks the reader through the process of thinking about policy and practice change from an anti-racist, HOPE-informed lens grounded in [CommunityWise Resource Center’s document on Anti-racist Organizational Change](#). Let’s take a look at how a HOPE-informed organization might address two notable racial disparities in systems that serve children and families.

In each of the following scenarios, the same process will be followed:

1. **Start with Data:** What is the racial disparity you are trying to address, and how does it connect with access to a HOPE Building Block?
2. **Engage the Community:** How do those most affected by the disparity feel? What do they see as the problem? What would they like to see in the solution?
3. **Prioritize and Change Policy:** What change can you make to increase access to one or more of the HOPE Building Blocks?



As you work through each problem, keep in mind that effective change processes require the active engagement and inclusion of people from diverse racial, ethnic, economic, and social groups—especially including those most impacted by the disparity at hand. Make sure that your process includes colleagues and other stakeholders from the community you serve, so that brainstorming and problem solving are based on relevant values and experiences.



Early Childhood Education

Ezra is a 3-year-old Black child in preschool who is playing with blocks with another child. The other child snatches the block away from him. Ezra, in an attempt to take the block back, accidentally pushes over the other child. Because this is the third time that Ezra has been involved in a “violent” incident, Ezra is suspended from preschool.



1. Start with Data: What is the racial disparity you are trying to address, and how does it connect with access to a HOPE Building Block?

[Black preschoolers are disproportionately expelled and suspended from preschool in America.](#) These disruptions can have [long-lasting effects](#) on children’s educational attainment. School expulsion has unintended consequences: in unstable homes, it can increase the risk for child abuse or neglect; in low income homes, it can worsen financial hardship by forcing parents to decide between going to work and caring for their child; in food insecure homes, children lose out on the meals provided during school hours.

Access to quality preschool can bolster resiliency in children across all of the HOPE Building Blocks.

- **Relationships:** A strong relationship between a child and a preschool teacher increases the number of supportive relationships a child can depend on.
- **Safe, Equitable, Stable Environments:** The school setting serves as a safe, stable, and (hopefully) equitable environment for playing and learning.
- **Social and Civic Engagement:** Preschool is one of the first spaces away from home where children develop a sense of belonging.
- **Emotional Growth:** Children develop emotional regulation through interaction with peers.



2. Engage the Community: How do those most affected by the disparity feel? What do they see as the problem? What would they like to see in the solution?

Based on this data, you and your colleagues host a community forum with current and previous families of color from your school. What you hear is unsettling. You know that there is currently no written expulsion policy in your preschool. Families state loudly and clearly that the absence of a of policy requires individual

providers to make their own determinations, which can be grounded in implicit bias. This lack of a standardized policy is fertile ground for the infiltration of racist practices. Parents share that their children's challenging behaviors are often interpreted as these very young children being willfully disobedient, with little insight into the lives of the children and their families. One parent shares a research article showing that, in fact, [children of color are seen as more culpable for misbehavior and receive harsher punishments than White peers](#). Often, parents or family members, also living through the same systemic racism as the child, face the provider's judgement, rather than being welcomed as partners to redirect the child's behavior.

The community is asking for a clear policy around expulsion and an all-staff training on implicit bias.



3. Prioritize and Change Policy: What change can you make to increase access to one or more of the HOPE Building Blocks?

As an educator, you make a commitment to decreasing the number of expulsions in your school and increasing access to all four of the HOPE Building Blocks by creating a taskforce to develop a clear, objective policy. This taskforce includes teachers, administrators, and parents of kids of color. Additionally, you find a trainer who can offer implicit bias and anti-racist training to preschool teachers.



Pediatric Practice

Sally is an 8-year-old black child with asthma who lives in an apartment by the freeway with cockroaches and mold in the bathroom. She has missed several days of school for asthma symptoms this year.



1. Start with Data: What is the racial disparity you are trying to address, and how does it connect with access to a HOPE Building Block?

[Black children are nearly five times more likely than White children to die from asthma-related complications](#). This disparity is the effect of a conglomeration of systemic and [environmental racism](#) from decades of racist redlining practices. [Redlining](#), actually drawing red lines on maps around neighborhoods considered "less desirable" by mortgage brokers and insurance providers, resulted in communities of color today more often living in areas with high pollution, poor living conditions, and unresponsive property owners.

This disparity directly affects children's access to the second Building Block.

- **Safe, Equitable, Stable Environments:** Managing asthma effectively often requires changes to living environments to ensure that the child has a home free of habitability issues. Cockroaches and other pests, mold, mildew, dust mites, and otherwise substandard housing conditions can worsen asthma control and trigger exacerbations, despite adequate medical compliance.



2. Engage the Community: How do those most affected by the disparity feel? What do they see as the problem? What would they like to see in the solution?

You begin systematically asking parents of Black children with asthma about their experience with their child's diagnosis at the end of their medical appointments. Parents share their frustration that despite being compliant with their children's medication, they are still experiencing attacks and flare-ups. As you inquire further, you learn that often, the families are living in homes with severe asthma triggers. When you share that the environment may be making their child's asthma worse, many parents report that this is new information to them. They seem eager for more information about the safety of their homes but overwhelmed at the idea of remedying any identified issues. Parents clearly state that they will need support convincing the property owner that changes are necessary.



3. Prioritize and Change Policy: What change can you make to increase access to one or more of the HOPE Building Blocks?

Helping families assess their home environment is the first step to better control of their child's asthma diagnosis. At a practice level, providers don't always screen for assess the habitability of a child's home environment. You work with the Department of Public Health to create a screening check list that parents can complete in the office. When these results suggest substandard housing or code violations, parents are connected with a visiting nurse to support them in addressing the concerns. They are also provided with a template letter from a local legal aid agency to request remediation of the conditions from the property owner.

At the systems level, your clinic educates local officials about this health disparity and advocates for the development of an automatic referral system for a housing inspection when children are hospitalized for asthma. Additionally, you partner with a local legal aid agency and host evening clinics to support families through medical-legal partnerships that can assist with addressing habitability and code-violation issues when property owners are not initially responsive.



Now you try it!

Go through the four questions above and see if you can proactively use a HOPE-informed lens to upend a racist policy or decrease racial disparities by decreasing the impact of systemic racism on those affected. And remember, the process is only truly effective in decreasing disparities when it's representative of the communities you're serving! Ask yourself who is missing from decision-making processes, and then invite them to be part of the solution.

All of us here at HOPE encourage all of you to put on your HOPE lenses and commit to infusing HOPE in your community. Stuck? We'd love to brainstorm with you. Reach out to Amanda at awinn1@tuftsmedicalcenter.org to figure out how your organization can use HOPE as an antiracist framework.