

The Fifth Annual Symposium  
on the Social Determinants of Health

# Race, Racism, and Baltimore's Future: A Focus on Structural and Institutional Racism



## Lessons from the Small Group Discussions

**#SDH2016**



Engaging communities, Improving health



## Introduction

After the death of Freddie Gray on April 12, 2015, and the protests and demonstrations that shook the city soon after, Baltimore became a symbol of racial strife and inequity and gained the media attention of not just the United States but the entire world. This was not news for the people of Baltimore or for many of the organizations that work tirelessly toward positive change in this city. To many, the death of Freddie Gray did not come as a surprise. To them, inequitable treatment of young, black men was nothing new; and it certainly was nothing that they had not heard, witnessed, or personally experienced. With the whole world watching, this tragedy brought determination; a determination that his death was not in vain, that the spotlight would not go away, and that together, through galvanized momentum, something would be done.

On April 25, 2016, over 700 people came together to attend the 5th annual Social Determinants of Health Symposium on **Race, Racism, and Baltimore's Future: A Focus on Structural and Institutional Racism**. The symposium was hosted by the Johns Hopkins Urban Health Institute and the Office of Provost. Attendees were a diverse group from the Baltimore area and beyond. Twenty-one invited speakers ranging from research and legal experts to leaders from non-profit community organizations spent the day in an intense discussion of race and racism in Baltimore. They participated in four panels, sharing poignant anecdotes about their personal experiences and presenting their research, all offering suggestions for ways forward.

This year, for the first time, the symposium also facilitated small breakout sessions in an effort to turn discussion into action, as tangible goals are necessary for making progress in Baltimore.

Speakers participated in four panels sharing expertise on:

1. overcoming structural racism,
2. how racism affects health,
3. how racism, racial segregation, and the education system are connected, and
4. racism and policing.

The goals of this symposium were to:

1. reiterate how salient structural racism is in the lives of people in Baltimore City,
2. acknowledge structural racism as a critical public health concern, and
3. critically assess the changes that we can make to reduce structural racism in our personal lives and in the institutions where we work.

Freddie Gray's death and the events that followed brought determination to the event—a determination that his death was not in vain, that the spotlight would not go away, and that together, through galvanized momentum, positive change would be made.

*This report summarizes key lessons learned and challenges as discussed by the symposium speakers. Additionally, successful Baltimore City organizations are highlighted throughout.*

# Developing a Strategy to Move Forward: Lessons from the Small Group Discussions

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“Freddie Gray’s life and death are a symbol of all of the systems working against him. All of the things that you have been talking about today affected him: schools, health, and criminal justice. Did you see him? All of those things hit Freddie in the gut. **Did you see him?**”

*Congressman Elijah Cummings*

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We see you, Freddie Gray, and together we want to do something about the systems in Baltimore City that perpetuate racial inequality. We want to make it known that you are important not just in your death, but also in your life. The events that took place throughout your life are not just a story, but they are a reality – and they show that we still have a long way to go.

The following information was obtained from 35 groups who met several times throughout the day to discuss content from the symposium, and to formulate ways to move forward in Baltimore City.

## Areas of Deep Concern

In analyzing group activities in the symposium, we looked for commonalities across groups. As discussions about Baltimore City circulated, it became apparent that across 35 independent group sessions, there were major sources of concern for Baltimore City residents. Issues acknowledged by half or more participants as priority concerns:

- **Lack of access, or unequal access to quality healthcare:** Participants discussed a lack of access to mental health services in particular communities, a lack of access to culturally competent healthcare, segregation in healthcare access, and lack of access to affordable health insurance.

- **Poor educational opportunities,** largely affecting the City vs. the County. Participants discussed lack of access to universal pre-K, little control over school curriculum, black children being labeled for special education, high school staff turnover in city schools, schools that don't have basic needs (e.g., available water), lack of vocational education tracks, lack of college preparatory readiness, and lack of trauma-informed policies or curriculums.
- **Major housing difficulties** were discussed by 47% of groups and included substandard housing, issues with large populations of homelessness, segregated neighborhoods, gentrification, racist housing policies, and unstable housing.

Additional concerns of note by 40% of participants:

- Unequal distribution of accessible, affordable, and high quality food options
- Unequal or segregated funding sources and educational resources for non-profit organizations
- Poor information-sharing (i.e. databases, public information) for the Baltimore community

## Identifying Obstacles to Baltimore City Anti-Racism Work

Additionally, respondents identified barriers that continue to interfere with progress in moving away from structures in Baltimore that allow disparities by race to continue. The top five barriers that were discussed included:

- daily, lived trauma of Baltimore residents
- a lack of knowledge of where to find needed resources
- low health literacy rates
- internalized racism
- a pervasive mistrust of government and institutions.

Additionally, power dynamics (18%), hopelessness (12%), and untapped human capital (6%) were discussed as barriers to success.

## Identifying Baltimore City Assets and Strengths

Respondents also identified key attributes of Baltimore City that make it strong, and advance its capacity to move forward to overcome racism. The most commonly discussed strengths were:

- **Baltimore's medical community:** Baltimore houses some of the best medical institutions. Johns Hopkins, University of Maryland, Morgan State University, and University of Baltimore were all mentioned.
- **Baltimore's resilience:** Baltimore City is resilient, proud, and has a strong sense of community.
- **Human capital:** Discussants mentioned that a large black population and a large and vibrant history from diverse backgrounds makes us as a city strong. People discussed prominent historical figures such as Thurgood Marshall as examples of important leaders and idols for people in the city.
- **The philanthropic and business community:** Baltimore City has many non-profits and businesses that are passionate about helping their community.

- **Community momentum for change:** There is a momentum in anti-racist efforts and a willingness to have a conversation about racism and Baltimore City. People discussed how the civil unrest following the death of Freddie Gray created a spotlight to harness and mobilize change.

## Short Term Goals and Action Steps

These actions and goals included ideas about individual transformation and change of others, as well as implementing steps towards accountability. Together attendees stated that they would: build awareness, collaborate across organizations, invest in youth development, educate people about white privilege, talk to politicians, help people navigate the system, offer mentorship, build trust and engage the community, and follow up with each other.

It is important moving forward that we can trust each other to define the work that needs to be done in our own communities, and follow through to make this city a more equitable place. In order to accomplish the goals that were discussed by the symposium attendees and speakers, the Urban Health Institute has compiled resources that can be useful in accomplishing these goals. It is important to us that as a collective and passionate unit, inspired by our ONE Baltimore and all that it has to offer, that we do something with what we have learned.

There is something profound and powerful about a group of people impassioned to make positive change. Please use the tools found in the [online resource guide](#) to continue our efforts to eradicate structural racism in Baltimore City. Additionally, if you are interested in watching the full program from the symposium or any of the panel discussion, please visit the UHI's YouTube page and navigate to the SDH2016 Playlist: [www.youtube.com/UrbanHealthInstitute](http://www.youtube.com/UrbanHealthInstitute)

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## Short Term Goals and Action Steps

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Together attendees stated that they would:

- **Build awareness**
- **Collaborate across organizations**
- **Invest in youth development**
- **Educate people about white privilege**
- **Talk to politicians**
- **Help people navigate the system**
- **Offer mentorship**
- **Build trust and engage the community**
- **Follow up with each other**

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## Intermediate Goals

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These actions reflected a need for organizational, structural, and environmental change across the city:

- **Begin education reform**
- **Instill accountability and transparency measures**
- **Create a new paradigm for social justice**
- **Improve Baltimore's image**
- **End food shortage**
- **Offer transportation solutions**
- **Diversify the workforce**
- **Create funding initiatives and provide more resources**

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## Resources

For the full summary report and the tools and resources guide, visit our website:

[www.urbanhealth.jhu.edu/SDH2016](http://www.urbanhealth.jhu.edu/SDH2016)

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# Strategic Framework for Action

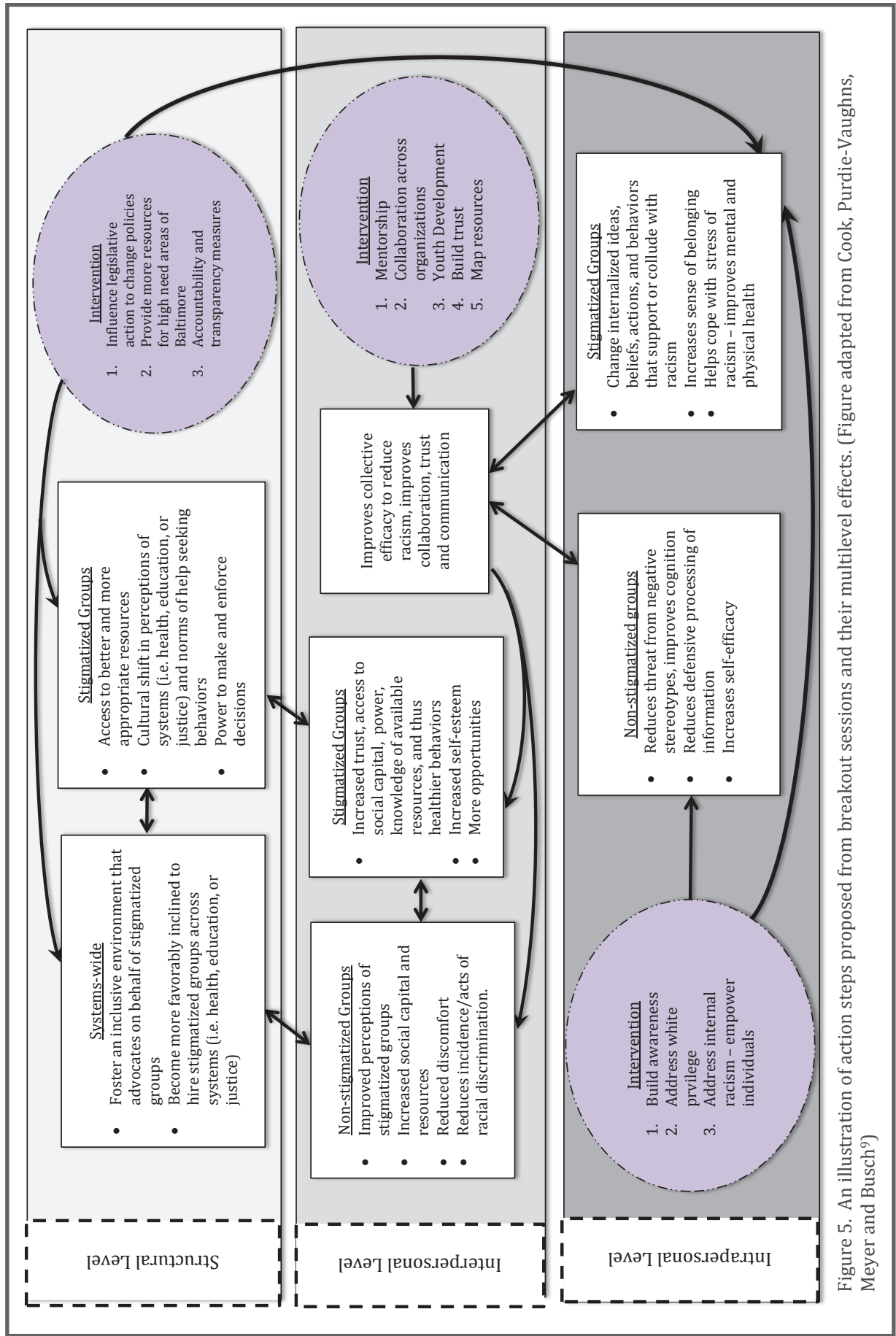


Figure 5. An illustration of action steps proposed from breakout sessions and their multilevel effects. (Figure adapted from Cook, Purdie-Vaughns, Meyer and Busch<sup>9)</sup>)

## Who we are

Established in 2000, the UHI serves as an interface between Johns Hopkins University and the Baltimore community in which it resides. Together with its university and community partners, the UHI explores ways that the research, teaching, and clinical expertise of the University can be better harnessed for the benefit of the residents of Baltimore.

## Our Mission

To serve as a catalyst that brings together the resources of Johns Hopkins Institutions with the City of Baltimore, to improve the community's health and well-being, and in so doing serve as a model of community-university collaboration regionally and nationally.

We would like to acknowledge the contributions from the Community-University Coordinating Council and community planning meeting participants in helping to shape the symposium.

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