April 1, 2016

Dear Colleagues:

By now you have probably heard about the historic ?Injustice and Health? Teach-In that was held at UCSF near the end of February. Because it was a momentous occasion that raised many important issues, I have decided to present Addressing Health Disparities and Injustice as my only story in this month?s Expresso.

While the Teach-In was geared for students, it carried many important messages for all of us at UCSF, so my request ? really, a strong recommendation ? is that you find the time to experience the full event, since it was video captured. I know this is asking a lot, it?s a little over two hours long, but consider screening it instead of the next movie you might rent on Netflix. It?s important.

If your time is tight, I have highlighted selected video clips in the story, and you also can access an excellent Teach-In recap [1] on UCSF.edu.

So, please read the Expresso story, watch the entire Teach-In video [2] or just the clips, and keep the conversation going. The path to solving the problems of racism and health disparities is very, very long, but the only way we?ll get there is by understanding the issues ? and taking action.

As always, please share your thoughts with me at ExecutiveViceChancellor@ucsf.edu [3].

Sincerely,

Dan

Addressing Health Disparities and Injustice

Our motto and mission at UCSF is advancing health worldwide, which implies that we cannot be satisfied in our pursuit until we ensure that good health is accessible to all. To emphasize our commitment to this goal, we decided to host a 1960s-style Teach-In to spotlight the issues of health disparity and injustice and bring the UCSF community together around this challenge. (UCSF took a similar approach in 2007 that highlighted and discussed the health effects of the Iraq War.)

Many events, movements, and initiatives led to this most recent Teach-In. Spurred by the deaths of young black men like Michael Brown and Eric Garner at the hands of police, UCSF students organized ?WhiteCoats4BlackLives [4] in December 2014. In his 2015 State of the University address
Most classes were suspended so that students could attend. Cole Hall was secured as the main venue, where close to 400 people gathered. Coordination with Educational Technology Services enabled an additional 1,463 people to participate via simulcasts throughout other UCSF sites. And an army of volunteers was assembled and turned out to support the event. It was truly a community effort.

**Keynote**

Soledad O’Brien, former CNN reporter and our keynote speaker, opened the discussion by talking about her realization that she needed to become a TV producer to be in a position of power in order to leverage voices and perspectives and influence how stories were chosen and told. She then continued by showing clips from her powerful documentary, ‘Black in America,’ and shared insights about the toll of inequity from her coverage of Hurricane Katrina as well as from her personal life. Throughout the presentation, she described the challenges she faced as a multiracial woman of color and her witness to the significant impact of racism on access to decent food and health care. One story about a physician in Harlem spoke to the lack of trust in institutions to provide quality health care and the need for creative approaches to rebuild patient confidence, such as reaching out to individuals on the street level where they work, live, and play. Another story was from a radio talk show host who remembers a listener saying that ‘she can find a gun in her neighborhood faster than she can find a tomato.’

**Panel discussion**

Following Soledad’s talk, an impressive panel brought the issues home. We have so many qualified people at UCSF, and it was difficult to select only six individuals. The group reminds me of one of the many reasons I am so proud to be part of UCSF:

- Suzanne Barakat, MD, second-year resident
- Sidra Bonner, third-year medical student
- Phuoc Le, MD, MPH, assistant clinical professor
- Rena Pasick, DrPH, professor and director
- Howard Pinderhughes, PhD, associate professor
- Andrea Quiñones-Rivera, second-year medical student

I wish I had the time and space to share all of my reactions and learnings from the program, instead I’ll give you a few highlights that resonated with me:

- Suzanne told the tragic story of how her brother, his wife, and her sister were murdered in North Carolina last year. She was thrust into a critical role and has since become a courageous spokeswoman against Islamophobia while continuing her work at UCSF. I was profoundly moved by one story she told, and I know many in the room were as well. On rounds one day, a patient pointed at Suzanne’s headscarf and associated her with the mass killing in San Bernardino by radical Islamists. No one said anything. **Watch Suzanne tell the rest of this story.** Suzanne’s message: ‘Stand up to bigotry. Do...’
Rena gave an impassioned appeal to address health disparities in our own backyard, explaining that she sees it most strikingly when she travels from our dazzling new multimillion dollar buildings in Mission Bay to visit patients in Oakland, in what she called "third world? conditions. She reported that African Americans have the highest death rates for the most common cancers (breast, prostate, lung, and colorectal) yet people with the greatest need have the least access to the best care. Watch Rena tell her story [8].

In Sidra’s first two years as a medical student, she kept her grades up but her head down, because she felt, as a woman of color, that people would question her intelligence. But, she said, ??when the Mike Brown and Eric Garner cases happened, I knew I could no longer deny this aspect of myself that I have put aside in order to do well in medicine. A lot of us were coming out and saying, ?I have a brother who’s black.? ?I have a dad who’s black.? This matters! I can no longer say, in order to be a successful physician, I have to put that stuff aside.? Watch Sidra tell her story [9].

And, one of Soledad’s points will serve as a lifelong lesson for me. She explained her technique to prevent people from getting inside when they are confrontational or pushing her buttons. Rather than responding in anger, she turns their animosity around by being respectful and inquisitive: ?That?s really interesting that you think that. Why do you say that?? This display of humanity not only has the potential to diffuse the situation but also provides an opening for antagonistic people to let their better self shine through. Watch Soledad’s comment [10].

Keeping the momentum

As the person responsible for the event and keeping its momentum, Alejandra sees the Teach-In as an important step by one institution, chipping away at generations of disparities. ?There is a bigger dialog to be had about how these conversations translate into actions and changes,? she told me. Starting with the beautiful essay [11] she posted reflecting on the experience, the ODO, with support from the EVCP office, will continue to move the issue forward with other events, and with efforts to extend its work for justice throughout all of UCSF.

It’s important to have these conversations, and it’s just as important to keep the momentum going. Days after, I was still thinking about everything I heard, and a few panelists made themselves available for a post-event talk for Expresso. They were, above all, hopeful.

Andrea, another panel participant and one of the organizers of WhiteCoats4BlackLives, said she is encouraged by the progress made by the Race Matters retreat in January 2015 and the Differences Matter [12] initiative now underway at the School of Medicine. Led by Dean Talmadge King, Differences Matter aims to increase diversity at UCSF, make the university a more inclusive environment, address health disparities in our clinical operation, and encourage research into the health needs of a diverse population.

?That’s one of the ways in which UCSF can start addressing health disparities within UCSF and really start addressing bias and racism in medicine,? Andrea told me.

Phuoc, who co-founded the fabulous HEAL Initiative [13], for Health, Equity, Action and Leadership in global health, is eager to revise the UCSF curriculum to address many of
these issues. The Bridges Curriculum [14] we are launching this fall for the incoming class is one important step, bringing all the schools together for inter-professional training and enabling students to see patients in their first year, rather than waiting three years toward the tail-end of their education.

He wants to spread social medicine? throughout the four years of education? medicine that takes into account the social determinants of health, such as the environment, poverty, racism, violence, immigration status, the available food in a neighborhood? all these social problems that contribute to 70 percent of poor health?

Phuoc calls on the potential of Precision Medicine [15] to relieve the impact of injustice and disparity. Precision medicine isn?t just the right dose at the right time for the right patient, Phuoc told me. It should be precision social medicine? it may not be a pill at all. What some patients actually need is a prescription precisely for food, or precisely for housing, or for inpatient drug rehab, or a restraining order against somebody who?s harming them.

We have the direct access to patients who entrust to us their bodies, their health, their lives. If we don?t understand the root causes of poor health, how can we intervene?

Rena, who had a slightly different perspective, fears that the push to Precision Medicine will only worsen the disparities. Rather than everyone benefiting from a cure, the cure will be only benefit those with resources. A rising tide will not lift all boats, she told me. Disparities exist not only in outcomes, but in access to prevention, early detection, and diagnostic tests and treatment.

However, she draws hope from the appointment in 2014 of Alan Ashworth as president and director of the UCSF Helen Diller Family Comprehensive Cancer Center. She did not expect this eminent laboratory researcher? to jump onto a population health issue, but she is very encouraged that Alan has launched an initiative to attack cancer disparities in San Francisco.

**Closing thoughts**

Finding hope despite discouraging statistics was one of the themes during the Teach-In. Hopelessness doesn?t solve anything, Soledad said. It?s a useless emotion. You?ve got to be hopeful.

I opened my remarks at the Teach-In with one of my favorite quotes from Dr. Martin Luther King, Jr.: The arc of the moral universe is long, but it bends toward justice. It may take us a long time to achieve true justice in health care and the rest of society but all of us at UCSF can, and will, move that arc along.

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**Dan?s Tip of the Month**
One evening my daughter’s boyfriend Zach asked me: ?Hey Dan, have you ever heard of the word sonder?? Never had. Zach said I?d really like it and pulled out his iPhone to read the definition from the Dictionary of Obscure Sorrows [16]. It?s been with me ever since:

sonder (n.): the realization that each random passerby is living a life as vivid and complex as your own - populated with their own ambitions, friends, routines, worries and inherited craziness - an epic story that continues invisibly around you like an anthill sprawling deep underground, with elaborate passageways to thousands of other lives that you?ll never know existed, in which you might appear only once, as an extra sipping coffee in the background, as a blur of traffic passing on the highway, as a lighted window at dusk.

And, here?s a video [17] that builds on the word visually, although I think the written definition says it all!

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[7] https://www.youtube.com/watch?v=fMUDGbjToFU
[8] https://www.youtube.com/watch?v=h1T1e-kCxHY
[9] https://www.youtube.com/watch?v=ocwZvQpBnG0
[10] https://www.youtube.com/watch?v=Sh6gmC1zAss
[11] https://diversity.ucsf.edu/reflections-teach-in
[17] https://vimeo.com/83358821