



Jen Everett



# Family Reading Program Can Reduce Racism

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**W**hat becomes possible when hundreds of families find new ways to talk about, learn about and work to eradicate racism? This question fuels the work of We Stories, an organization in St. Louis that asks white families in particular to change the conversation about and build momentum toward achieving racial equity. We Stories encourages participants to intervene in the cycles that keep us segregated, suffering and stuck by asking how the status quo gets perpetuated in white communities and by inviting families who have been on the sidelines to learn more about systemic racism and take an active role to confront it.

Like the rest of the country, St. Louis' history with race and racism is complicated. Racism operates as a system of inequities that shape broad patterns of where we live, who we know and how we fare. And the devastating impact of racial inequity is well-documented. Across a wide range of social indicators, from health, wealth and housing to education, safety and criminal justice, outcomes on average are dramatically worse for Black St. Louisans than they are for white St. Louisans.

Health disparities are particularly striking. Life expectancy in St. Louis can vary by as much as 18 years between majority white and majority Black zip codes. African Americans are more likely to have chronic diseases like obesity, asthma and diabetes compared to whites. For many chronic diseases, African Americans have higher hospitalization and death rates compared with whites. Beyond health outcomes, it has been estimated that reducing disparities in mental health and chronic diseases could save the St. Louis region as much as \$90 million a year in inpatient hospital charges.<sup>1</sup>

These inequities are largely dictated by social determinants of health, most of which are shaped

by institutional and systemic racism.<sup>2,3</sup> Because racism is woven into our history and our policies, it shapes our neighborhoods, the distribution of resources, our public narratives and priorities — all of which influence health.<sup>4,5</sup>

Negative health effects of racism extend to poor health outcomes for whites too. Author and physician Jonathan Metzl makes this case in his book, *Dying of Whiteness*, in which he explains, “racism matters most to health when its underlying resentments and anxieties shape larger politics and policies and then [ultimately] affect public health.” For example, Medicaid expansion would benefit a significant number of low-income white families across Missouri, but has been branded by its opponents as an entitlement program that would help poor Black people — which causes many poor white voters who would also benefit from the expansion to vote against it.<sup>6,7</sup>

## SOLUTIONS ALREADY EXIST

Recommended solutions, which are well-documented in community-based research and reports, require broad support and prioritization

from the entire community.<sup>8</sup> To address racial disparities in health care, improving health services alone is insufficient because the root causes of systemic racism must first be acknowledged and confronted.<sup>9</sup> Experts have proposed changes in a region's approach to education, housing, health care and more. For example, *Dismantling the Divide*, a recent report on the development and perpetuation of segregated housing in St. Louis, argues that advocates must fight for policies in majority white municipalities to make those communities less exclusive, more affordable and diverse.<sup>10</sup> To succeed, these reforms will require not only the leadership of impacted communities but the commitment of everyone — including white allies. That's where programs like We Stories come in.

#### **WHY WHITE PEOPLE HAVE A CRITICAL ROLE**

White people have historically shied away from talking about race, which means, well-meaning as they might be, they have also shied away from actively working toward racial equity. Yet when the burden of racial equity work is left solely to people of color, the conversation often is kept in the margins of public life due to powerful white social norms and taboos. White individuals and institutions often hold the decision-making power to change policies and practices that produce racial inequities. A national study of community organizing explained that involving “significant numbers of predominantly white institutions ... matters for political efficacy because substantial economic resources, political power, and cultural influence reside in this sector. To be viable, any political movement needs alliances with such institutions.”<sup>11</sup>

Confronting racism requires a thoughtful and intentional balance: both an awareness of the power and influence present in majority white institutions and communities as well as a deliberate focus to emphasize underrepresented voices and prioritize leadership from people of color. For white health care leaders and community advocates, partnering effectively with leaders of color requires considerable self-reflection, education and critical thinking about one's own racial identity, as well as about institutional racism and power dynamics.

It is possible to engage a great number of white allies in working to end racism. Many Americans of all races want to correct racial disparities but don't know how or where to start. The first step is

to invite more white people into the conversation about race.

#### **WE STORIES HELPS CHANGE THE CONVERSATION**

We Stories is a small nonprofit organization that engages white families to change the conversation about and build momentum toward racial equity. Its founders were struck by how few opportunities white families had to expose their children to racial diversity. We Stories designed the Family Learning Program, which uses diverse children's literature to stimulate discussion, adult learning and community engagement around race and equity. Book selections feature characters of color as well as themes that prompt discussion about difference, bias and equity, which are underrepresented in publishing and often are not marketed to white families. The program encourages white families to address race and racism independently, developing their own intrinsic motivation. Its theory of change is: If more families are provided with resources to improve conversation, connections to like-minded families, and opportunities to add their voices, then the resulting community will become a force of positive change, because many people want to be part of solutions but feel unprepared or disconnected.

We Stories, which includes advisors and a board that is multiracial, creates an entry point into the conversation about race, a place to start and prepare. It then supports and connects families to greater racial equity efforts in St. Louis as they choose to get more involved.

The program is a 12-week series of activities and resources for parents, with their children aged 0-8, who would like to initiate robust family conversations about race and racism. Families receive a starter library of four age-appropriate, diverse books per child, ongoing book recommendations and materials. They participate in at least three in-person events to explore and build community around anti-racism.

This program has proven effective at encouraging white people to become active in support of racial equity efforts. Reaching 900 families across 100 regional zip codes in just four years, it is changing parenting norms and increasing white political will for racial equity across the region. Many families become and stay involved in anti-racism work through this experience. It gives direction and support by providing:

1. An approachable way to incorporate conversations into existing routines and everyday life;



2. Opportunities and safe spaces to practice talking about race;

3. A supportive community modeling a path toward equity.

By looking at these three components, we can see the work that is required as well as the deep and broad impact that can occur as a result.

**WHY WE NEED DIRECT CONVERSATIONS ABOUT RACE**

Many of us are familiar with a “colorblind” approach to race, which intends to reduce bias by not naming it and avoiding a discussion of differences. But research definitively shows that a colorblind approach not only doesn’t work to reduce bias, it can actually make addressing racism a lot harder because it makes talking about the realities



We Stories selects books with a variety of narratives and themes aimed at fostering discussions about race.

of bias and discrimination taboo.<sup>12</sup> Studies show that the best ways to decrease bias are through explicit conversation, learning the history of discrimination and bias, and increasing cross-race exposure, even through books.<sup>13</sup>

Research also has documented a disparity in how race is addressed within families: while many families of color consider conversations about race and racism a necessary part of parenting, research reveals that the majority of white families never or almost never talk about race and racism with their young children.<sup>14</sup> This conversation gap is a barrier to understanding and partnership across racial groups. Research shows an absence of a shared perspective across racial groups. According to a 2019 Pew Research Center Poll, 43% of whites believe our country “has been about right” when it comes to ensuring that Black people have equal rights, compared to just 14% of Blacks. With recent events, support for Black Lives Matter has grown significantly, but there

is still wide disparity in the views of Blacks and whites.<sup>15</sup>

**READING BOOKS: A SIMPLE YET POWERFUL BEGINNING**

The heart of the We Stories Family Learning Program is family conversation about race and racism, fostered through diverse books, literacy and intentional conversation. Parents can integrate diverse children’s books into already established reading routines, creating a starting point consistent with family life and creating a practice that can reoccur. Using children’s books is an intentional approach based on best practices to provide an inviting way to increase awareness and empathy.<sup>16</sup> The supporting educational curriculum gives language and a framework for encouraging ongoing parent-child conversations.

Talking about race can be uncomfortable. Many people have little practice and are not well-prepared to do it. Robin DiAngelo, author, educator and trainer on whiteness and racial justice explains: “nothing in mainstream U.S. culture gives us the information we need to have the nuanced understanding of arguably the most complex and enduring social dynamic of the last several hundred years.”<sup>17</sup> She also acknowledges the powerful social forces and taboos that block opportunities for productive conversation. In this program, parents practice reading and talking with their children at home and with other adults in workshop and group settings. The program provides a way to explicitly discuss race.

**GROUNDED IN RESEARCH**

A lot of important work can occur when a same-race group of peers has the chance to develop their comfort and competence together. In the field of racial identity development, this approach is well established and known as affinity grouping or racial caucusing. The work should not end there, but an affinity group is an approachable starting place for many people.

Research demonstrates that racial bias starts early, and age 0-8 is a critical window to interrupt bias.<sup>18</sup> Parents receive research about bias formation in children and how to address tough topics on an age-appropriate basis. For meaningful, informed discussions, this program includes education about the history of race, how racism adapts with the times, and how it is held within

systems. Education and context are essential. When white people can locate themselves in both the problem and the solutions, they are better equipped to address racism in other contexts.

### **BUILDING COMMUNITIES COMMITTED TO ANTI-RACISM**

We Stories connects people to allow families to approach difficult topics with support rather than in isolation. It provides space for peer learning while embracing a broad continuum of experience. The community supports families wherever they are in pursuit of progress toward racial equity, while holding each other accountable in their commitment. As one We Stories parent said, “The community makes a bigger difference than anything else. It’s not easy to do this kind of work on your own.”

As with any new habit, such as a new diet or exercise routine, it helps to be surrounded by supportive influences. Group participation provides a motivating source of positive peer pressure to explore new concepts and maintain behavior change. The widespread community also normalizes the experience of talking about race and brings forth multiple models for what white anti-racism looks like. Parents need these models, so they, in turn, can be models for their children. Research shows that children pay attention to nonverbal cues, and parent behavior can impact children over time.<sup>19</sup> Parents need access to a community of experience as they begin to promote equity at home and within their spheres of influence.

### **THE IMPACT: WHY IS THIS WORK IMPORTANT?**

We Stories provides concrete actions families can take to end silence and encourage deep discussions about race. Actions have included speaking at school board meetings, starting equity groups and campaigning for policies or candidates. With practice and support, participants can champion equitable practices in schools, workplaces and civic life. We Stories also points families to racially diverse events, historic destinations and equity conferences. The completion of the program is rarely an endpoint but rather a beginning.

Evidence indicates that We Stories’ approach is working. Internal evaluations show that families experience significant changes, such as a

growing awareness of racial inequities in systems, increased participation in racial justice and a sense of community with other We Stories members. A child development study by Washington University in St. Louis also yielded promising results, showing that We Stories children are as likely to choose books and toys depicting Black characters as white, which is in contrast to white children in the general population who demonstrated a pro-white bias.<sup>20</sup>

We Stories galvanizes previously unengaged white families and pioneers a model for others. From around the country, researchers, educators, libraries and organizations have asked to study, partner with, or replicate the Family Learning Program. As this community grows, it normalizes the idea that racism affects everyone, and there is a path to interrupt it.<sup>21</sup> Still, much more work is needed.

### **CONCLUSION**

Interrupting the status quo requires looking at inequity in new ways. We Stories is fostering conversations that often remain unaddressed. What

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has to change in predominantly white communities in order to upend racism? If racism is looked at as a public health epidemic, how would the approach to solving it be different? How can hospitals and clinics better provide care and better address social determinants of health with a race-conscious lens?

Advancing health equity requires wrestling with racism at all levels. Changes are needed in institutional investment, norms and behavior. How can anti-racism interventions attract investment from key stakeholders at the large institutional or organizational level? How can we change norms so that all leaders across industries and sectors are expected to be experienced and confident at identifying and speaking to issues of race? While addressing these questions, we must maintain accountability to leaders of color. We encourage the creation of more avenues and starting points to explore questions like these.



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#### NOTES

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