HEALTH EQUITY

CATHOLIC HEALTH CARE SYSTEMS CONFRONT RACISM THROUGH 'WE ARE CALLED'

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e are called, as the people of God led by the Holy Spirit, to scrutinize the signs of the times and interpret them in the light of the Gospel. In 2020, the Catholic health ministry was moved to respond to the deaths of George Floyd, Breonna Taylor and Ahmaud Arbery and the disproportionate impact of COVID-19 on racial and ethnic communities by renewing our commitment to equity, justice and the dignity of all persons. The CHA Board of Trustees unanimously issued a call to the ministry to pledge to confront racism by achieving health equity. Just over a year ago, we publicly launched the "We Are Called" initiative to recommit to ending health disparities across our country and to dismantling the systemic racism that remains ever-present in our society.²

The We Are Called initiative is our shared commitment to addressing racism and the systemic causes of health disparities, especially among underserved and vulnerable populations. Health inequity is a persistent and lingering legacy of the systemic racism and social prejudices that have far too often been prevailing characteristics in our nation's history. By pledging our commitment to achieve health equity, we can finally put an end to this tragic history and move toward a future where systemic racism is a thing of the past.

Racism within any context is an affront to the core values of Catholic social teaching, which acknowledges the inherent dignity of each person, calls for the furthering of the common good and seeks justice through solidarity. Racism has a profound effect on the health and well-being of individuals and communities. "The Catholic health ministry is uniquely positioned to be a leader in this effort," said Sr. Mary Haddad, RSM, CHA's

president and CEO. "Our ministry's long history of caring for everyone regardless of race or socioeconomic status and our deep commitment to the social teachings and moral principles of the Catholic faith demand that we act."

Many Catholic health care systems and facilities are already leaders in the areas of diversity, equity and inclusion, while others now stand ready to step up their efforts. Together as one ministry, they have pledged to be "actively anti-racist, lead through accountability, develop authentic community engagement built on trust and demonstrate measurable impact in the communities we are called to serve."

The ministry has responded enthusiastically, with more than 87% already committed to the four

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pillars of the pledge: working to achieve equity in COVID-19 testing, treatment and vaccination; putting our own houses in order; building just and right relationships with our communities; and advocating for change at the federal, state and

65

HEALTH PROGRESS www.chausa.org SPRING 2022

local levels to end health disparities and systemic racism. Examples of this work can be seen in the February 1, 2022, issue of CHA's *Catholic Health World*, which included a wonderful overview of CHA members' pledge activities in the past year.

CHA, in turn, is committed to supporting our members in this important work. Our board and leadership have made the We Are Called initiative the centerpiece of CHA's strategic plan. We are honored to serve as co-leaders of interdepartmental teams of CHA staff working on each of the four pledge pillars to develop resources, convene members, share best practices and advocate for change in Congress and with the White House. We would like to share with you some of what we have already accomplished and what we are planning in the coming months.

COVID-19 Health Equity

We have worked closely with system ethicists and partner organizations throughout the pandemic to ensure that testing, treatment and COVID-19 vaccines are available and accessible to all, especially to communities at higher risk, such as elders and communities of color, including Native Americans. CHA led the formation of the Catholic Cares Coalition, which includes more than 60 Catholic organizations working to address vaccine hesitancy and advocate for the eq-

uitable distribution of vaccines in the U.S. and globally. The coalition offers microgrants in communities across the country to support creative and collaborative programs and activities that promote the vaccine's acceptance and its equitable distribution. We are also members of Faiths4Vaccines and the COVID-19 Community Corps and promote COVID-19 vaccines through

our #LoveThyNeighbor social media campaign. CHA's ethicists participate in twice-monthly calls with system ethicists to identify challenges and share resources.

Putting Our Houses in Order

To be leaders in the call for health equity and dismantling systemic racism, we must first look internally and ask whether we are living the values we espouse. In other words, we need to look in the mirror. To that end, we created an online library of resources on how organizations can make equity a strategic priority throughout all operations and activities. Over the past year, CHA has offered several webinar events, examining how members

can address maternal mortality, handle the problem of racist patients and make their boards more representative of the communities they serve.

Furthermore, we recently made resources available to provide guidance on how board members can incorporate a health equity lens into their governance roles, increasing executive leadership diversity, engaging and educating clinical staff on equity and cultural competence and using diversity, equity and inclusion metrics in executive accountability structures. Additionally, we are partnering with groups that support the development and promotion of diverse executives such as the National Association of Latino Healthcare Executives, the National Association of Health Services Executives and the Institute for Diversity and Health Equity.

Building Right and Just Relationships With Our Communities

The CHA team focusing on just and right relationships with our communities is building on our long-standing leadership in community benefit. We are in the process of updating A Guide for Planning and Reporting Community Benefit to include an equity lens and emphasize the role hospitals can play in addressing the social determinants of health through collaborative relationships with others in their communities. We have

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added to our website resources by providing examples for promoting meaningful dialogue with marginalized communities, assessing the quality of partnerships, building trust and utilizing community health workers. We soon will have a list of resources recommended by CHA members for diversity, equity and inclusion training to help others in the association to explore the history of structural racism leading to disparities.

Advocating for Change

CHA's advocacy staff has been closely tracking federal legislation related to health equity, health disparities and systemic racism. In the last two years, we called on Congress to recognize and ad-

66 SPRING 2022 www.chausa.org HEALTH PROGRESS

dress the profound effects that health disparities have had during the pandemic on underserved and vulnerable populations. Our advocacy on anticipated budget reconciliation legislation includes support for initiatives that advance health equity by expanding access to affordable health care, critical resources for public health preparedness, reducing racial and ethnic health disparities in maternal health and ensuring that immigrants have access to federal assistance programs.

MAKING CHANGE POSSIBLE TOGETHER

We recently spoke with the CEO of a small long-term care member that had just signed the We Are Called pledge. She was fully committed to the pledge and its principles, but not sure how to get started. She realized that they had already taken some beginning steps on the journey and was interested in how they could continue to move forward and how CHA can help. This is the real strength of the We Are Called pledge: the Catholic health ministry working together to support each other whether we are beginners, leaders or innovators — to bring healing, unity and justice to our communities. Ultimately, this sacred work is core to our identity and consistent with the mission and values of the Catholic health care ministry — it's in our DNA.

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NOTES

1. Gaudium et Spes, no. 4 and no. 11, https://www.vatican.va/archive/hist_councils/ii_vatican_council/documents/vat-ii_cons_19651207_gaudium-et-spes_en.html. 2. "We Are Called," Catholic Health Association, https://www.chausa.org/cha-we-are-called/.

Upcoming Events

from The Catholic Health Association

Catholic Ethics for Health Care Leaders: A Deeper Dive into the Key Concepts of Catholic Health Care Ethics

Online: Tuesdays, March 29 – May 3 | 1 – 3 p.m. ET In-Person Meeting (three options): May 10 (A), May 16 (B) and May 18 (C)
St. Louis

Long-Term Care Networking Zoom GatheringApril 20 | 3 - 4 p.m. ET

Members Only

In-Person Meeting: Ecclesiology and Spiritual Renewal Program for Health Care Leaders
Invitation Only
May 1 - 6

Global Health Networking Zoom Call May 4 | Noon ET

In-Person Meeting: 2022 Catholic Health Assembly June 5 – 7

Diversity & Disparities Networking Zoom Call June 23 | 1 - 2 p.m. ET

Long-Term Care Networking Zoom GatheringJuly 12 | 3 - 4 p.m. ET

Members Only

United Against Human Trafficking Networking Zoom Call July 14 | Noon ET



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HEALTH PROGRESS www.chausa.org SPRING 2022 67

HEALTH PROGRESS

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