Health Equity: Work Worth Doing

An interview with Deanna Minus-Vincent, MPA



t AMGA's 2022 Innovation, Quality & Leadership Conference, DeAnna Minus-Vincent, MPA, executive vice president and chief social justice and accountability officer for RWJBarnabas Health, delivered a general session presentation about ending racism

in healthcare. In her role, she works across the system with internal and external stakeholders to codesign strategies that improve health outcomes, promote health equity, and eliminate health disparities. Before her presentation, AMGA President and CEO Jerry Penso, MD, MBA, spoke with her about RWJBarnabas Health's (RWJBH's) efforts to address health equity.

Penso: You've led the efforts at RWJBarnabas Health to improve health outcomes, but specifically to address racism and health equity. These are critical areas for so many AMGA groups. Your organization is very diverse and very large. How do you bring people together to address racism and health equity?

Minus-Vincent: Well, that is quite a task. We have about 44,000 individuals who work in the organization—including physicians, residents, and employees—and we are the largest private employer in the state. We began by providing training to everyone that was mandated and focused on equity and diversity with a minimum number of hours for everyone. Then, we implemented conversations around a host of uncomfortable, but very necessary topics from

microaggressions to equity, to understanding cultural history.

Each month, we have what we call "Equitable Encounters, Real Talk about Race." From the beginning, the monthly sessions introduced our team to a new topic, or sometimes a new behavior, which has helped us to better understand what can be said and what should be avoided.

Most recently, we rolled out "Beyond the Book," where we encouraged staff to read a specific book (e.g., a book with a companion movie or companion Netflix series) so that we are able to come together and have conversations, not just about the characters in the book—because it's easier to talk about a character than yourself—but also to really put the lessons that we've learned into practice.

Penso: Many of our groups are beginning to address some of the social drivers of health inequities. How has RWJBarnabas begun to address some of the social drivers that affect health equity?

Minus-Vincent: This has been a huge area that we've concentrated on. Our mission is simply to improve the health of our communities. In so doing, we have to address the social drivers.

At RWJBH, since we understand that 80% of all health outcomes are due to social and behavioral factors, we have begun to put into practice, for example, asking questions of patients with diabetes to ensure that they are prepared to manage their illness. In addition to prescribing a medication that says "take with food," we also ask them questions like: Can you afford the medication? Is there a grocery store in your neighborhood? Do you know how to prepare healthy foods?

One of the things we instituted was a measurement of social determinants and health screening to make it just as routine as height and weight and blood pressure. So if we ask everyone, it becomes a routine part of care, then we're sure that we are addressing social factors without bias, and also referring people out to the services and supports that they might need.

THOUGHT LEADER

Penso: Speaking of services and support, tell us about your "ties." I think none of us can really solve this issue alone. We have to work with our communities and maybe with other partners. Tell us about your work in that area.

Minus-Vincent: As a large health system and anchor institution in the community, we shouldn't take on and do for the community what small nonprofits or even large nonprofits have done right for years. We have reached out intentionally to our partner agencies, government agencies, and nonprofit agencies to figure out how we can repair what is currently a fractured system. Through grants awarded to us to advance a host of community needs, we have also sub-granted dollars. Our goal is to support nonprofits as they continue to do what

they do really well—housing and food—and how it supports our mission. We have worked on those relationships in each of our municipalities.

Penso: How are healthcare organizations like AMGA members going to address racism?

Minus-Vincent: Unfortunately, racism is 400+ years in the making, and its effects will not be unraveled overnight. It's great to have training or programs, but we also need to change policies and consider issues like pay equity and continue to find ways to change the culture of our workplace. It will take many uncomfortable conversations, and it's not easy work. But it's work worth doing. GN

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