

Inaction is complicity.



**DIVERSITY & INCLUSION**  
Knowledge • Mindfulness • Behavior

# DEI Newsletter

## Volume 3 — August 2021

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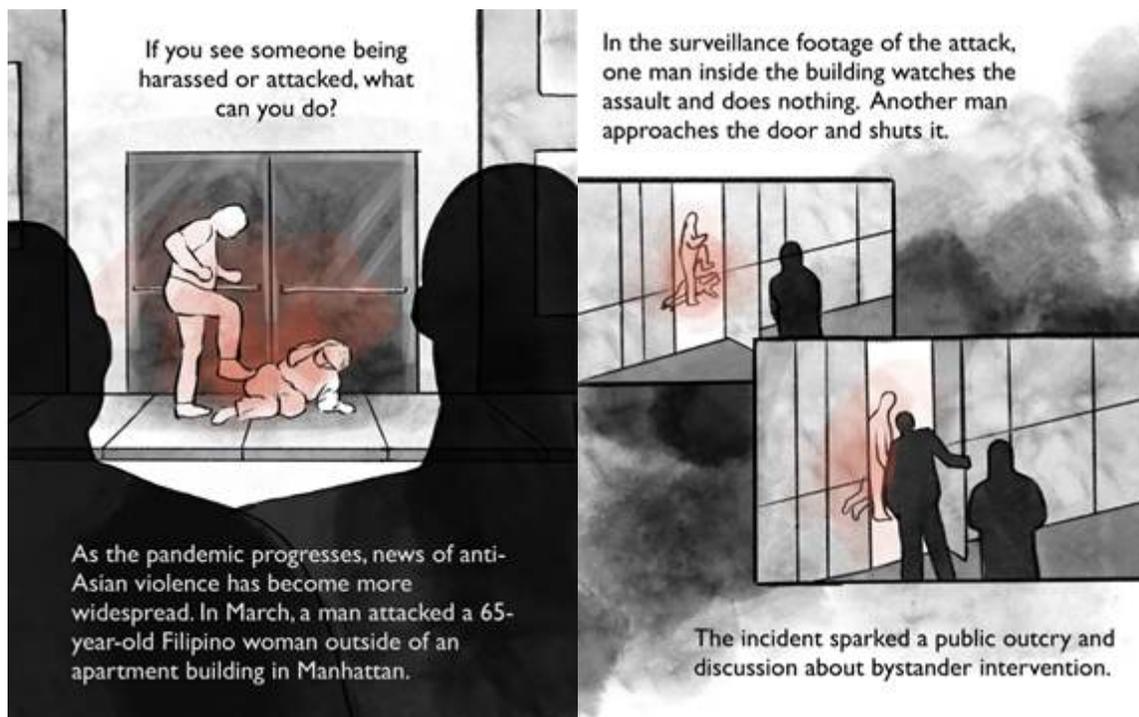
**Editor:** Dr. Devon Smith

### August Spotlight: Bystander Interventions



What would you do if you saw someone being harassed on the bus or attacked on the sidewalk in broad daylight? NPR, in conjunction with bystander intervention trainers with Hollaback!, produced a [series of images](#) to help you know how to intervene when someone is harassed or attacked.

*Reprinted with permission from NPR.*



If you see a similar situation, what are your options?



Gabriela Mejia is a training and communications associate with Hollaback!, an organization seeking to end harassment in its many forms.

She shared with Life Kit five options bystanders can take: distract, delegate, document, delay and direct.

Pick one or more that make sense for the situation you're in and what you're comfortable with.

## Distract

Cause a distraction to make the person being harassed less of a target, like asking for directions or pretending to know them.



## Delegate

Ask for help from someone around you or an authority figure.



But remember the presence of law enforcement doesn't always make people feel safer. Check with the person being harassed before calling the police in order to center their safety.

## Document

Record\* a video on your phone, take photos, or even write down detailed notes.



Hand over what you have to the person being harassed and let them decide what to do with it.

*\*Note: local laws regarding recording someone can vary.*

## Debrief

Debrief with the person being harassed after the situation is over.



Knowing these steps doesn't guarantee you'll be ready to intervene if a moment comes. It takes practice and mindfulness to be an active bystander.



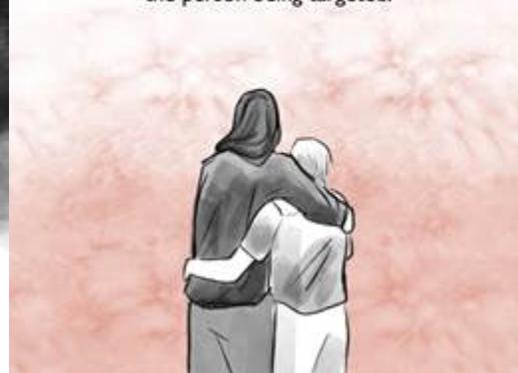
## Direct

If you feel safe doing so, talk directly to the harasser. Name what is happening and ask them to stop.



Always remember that your goal is to deescalate harm, not be the hero of the story.

It should never be about you, but instead about how you can support the person being targeted.



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## Events & Updates

- Please hold Wednesday, September 22 from 12p-1p on your calendars for our celebration of Hispanic Heritage month with our guest speaker, Professor Debora Ortega, MSW, PhD, the founding director of the LatinX Center at the University of Denver.

- Our [DEI website](#) at National Jewish Health has been updated! Check out the website for additional news and resources, as well as links to past issues of this newsletter.

- Over the summer, several DEI events were hosted at National Jewish Health. Make sure to watch the recordings if you didn't attend the live sessions!

1. [Black Men in White Coats Panel Discussion](#), a powerful discussion on race and medicine hosted by Dr. Jen Taylor-Cousar, featuring Dr. James Carter, Dr. Daniel Colon Hidalgo, Dr. Nabeeh Hasan, Dr. Garbriel Lockhart and Dr. Paul Rochon.
2. [Transgender and Non-binary Affirming Care](#), a great training on how to practice affirming medicine for gender diverse patients, presented by Andrew Miller, MA, LPCC, an LBTGQ Education Training at Denver Health.
3. [Battling the Boy's Club: A History of Women's Challenges in Medicine](#) and [Stronger than Yesterday: The Way Forward for Colorado](#), a two-part grand round series exploring the challenges and biases experienced by women in medicine.



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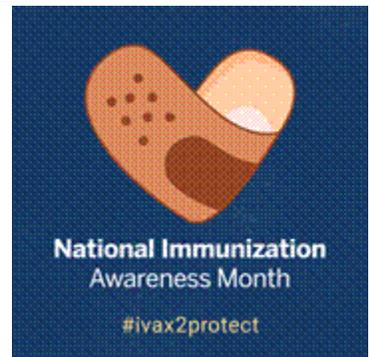
## August Holidays & Recognitions

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### August is National Immunization Awareness Month (NIAM)

COVID-19 vaccination rates among white people in the United States are almost twice as high as rates among Hispanic and Black people. However, according to an article published in [The Lancet](#), implicating vaccine hesitancy for these discrepancies inadvertently places responsibility on marginalized people to become less hesitant, rather than on public health systems to become more trustworthy and accessible.

- August 9 – [World Indigenous People's Day](#)
- August 23 – [International Day for the Remembrance of the Slave Trade and its Abolition](#)
- August 26 – **Women's Equality Day**, commemorates the 1920 certification of the 19th Amendment, granting women the right to vote, and calls attention to continuing efforts toward full equality, including in the workforce. For instance, COVID-19 highlighted [continued gender inequities in pay, career trajectories, and work-life role expectations](#) that underscore the need for long overdue change.
  - In honor of Women's Equality Day, make sure to watch the powerful documentary, "Picture a Scientist," about gender inequality in science. Consider hosting a viewing and discussion at one of your upcoming division or section meetings. The DVD is available for checkout in the DEI collection at the National Jewish Health Tucker Family Library (also currently available for personal streaming on Netflix, if you have an account).
- Find more monthly DEI holidays [here](#).



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## Educational Resources

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### DEI Research Updates (submitted by Liz Kellermeyer and Devon Smith)

#### [Promoting Equity for Women in Medicine — Seizing a Disruptive Opportunity](#)

Jagsi R., Fuentes-Afflick E., Higginbotham E., *NEJM*. June 21

"Our own biggest question is, Will we in academic medicine intentionally choose to seize this disruptive opportunity and harness this moment to accelerate positive change toward gender equity, diversity, and inclusion in medicine, or will we allow the damage caused by the pandemic to endure?"

#### [Racial Disparities in Clinical Medicine](#)

## NEJM Group eBook

“We are a long way from achieving clinical equity but what can individual clinicians and medical professionals do while politicians, policy makers, and others address the social structures that contribute to the problem? In our new NEJM Group eBook, **Racial Disparities in Clinical Medicine**, we explore how inequity persists, how it is experienced, and how we might begin to counter it.”

### [Black men have greater OSA severity, symptoms at time of diagnosis](#)

Erin T. Welsh, Healio

“Research published in the *Annals of the American Thoracic Society* showed that Black men had the most severe obstructive sleep apnea and the greatest burden of symptoms, compared with Black women or white adults. Black men were also 60% more likely than white men to report witnessed apneas and drowsy driving at diagnosis.”

### [Why most Black office workers are dreading the return to offices](#)

Curtis Bunn, NBC News

“A new poll says 97 percent of Black knowledge workers are not ready to return to offices riddled with racial microaggressions, discrimination and glass ceilings. At the same time, 21 percent of white professionals look forward to a return to full-time work in the office.... The study was revealing of the vastly different experiences at work for Blacks and whites: Only 53 percent of Black workers said they were “treated fairly at work,” while 74 percent of white workers said they felt that way. Also, 54 percent of Black workers claimed a “good or very good” sense of belonging at work, while 70 percent of white professionals did.... Generally, working from home has dramatically reduced the amount of discrimination and microaggressions — indirect, subtle or unintentional discrimination against members of a marginalized group — many Black people say they felt in the workplace, the survey said. The need for altering their personality, or “code switching,” is minimized as well.”

### [First, do not harm](#)

Jennifer Thorley, *The Lancet Diabetes & Endocrinology*, July 2021

“‘We need to stop shaming people for what they eat and implying that an illness was their fault for not making better choices,’ Wolrich argues. Research suggests that the prevalence of weight stigma is close to that of race discrimination, leading to missed diagnoses and health-care avoidance. ‘This discrimination is shockingly prevalent in healthcare’, he writes. ‘Doctors have been shown to hold high levels of explicit and implicit ‘anti-fat’ bias, viewing fat patients as awkward and non-compliant.’ Diet and lifestyle are also heavily dependent on socioeconomics and other personal circumstances—something overwhelmingly overlooked in diet books. ‘Each of us will be experiencing a number of different factors that can affect our weight...from having a child to working night shifts,’ he explains.”

**The library team has built a wonderful collection of D&I books that are available for staff and faculty to check out for personal use at the Tucker Medical Library (catalogue: <http://bit.ly/njdiversity>).**

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## 30-Day Challenge

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One of the most powerful ways to combat bias is to educate yourself. The University of Colorado School of Medicine has a great [30-day Anti-Racism Challenge](#) with included links for each day's topic.

Not able to do the full 30-Day Challenge right now?  
Here are two short recommendations for August:

- 1) [Choose Compassion over Prejudice](#), a 3-minute video with Dr. Deb Saint-Phard, a local UCHealth physician.



- 2) [Advancing from Allyship to Accomplice and Co-Conspirator](#),  
a 6-minute video with importance advice for white allies

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## Getting Involved

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- If you have a passion around DEI work, we are always interested in fresh ideas. Email [Dr. Taylor-Cousar](#) or [Dr. Carrie Horn](#).
- To get involved in the production of this newsletter or share ideas/suggestions for future newsletters, please contact [Dr. Devon Smith](#).

