



**RACIAL EQUITY WORKSHOP**  
**PHASE 2**

Strategies for Moving from  
Analysis to Action

SEPTEMBER 2014

FOR FURTHER INFORMATION:

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# 1 ABOUT THE RACIAL EQUITY INSTITUTE

The Racial Equity Institute (REI) is committed to bringing awareness and analysis to the root causes of disparities and disproportionality in order to create racially equitable organizations and systems. Even 50 years after significant civil rights' gains, the impact of race continues to shape the outcomes of all institutions.

REI trainers and organizers help individuals and organizations develop tools and processes to challenge patterns of institutional power and to grow institutional equity. Our approach has a movement orientation, always focused on organization toward institutional change with equitable and just outcomes for people of color.

We recognize many intersecting oppressions, but our belief is that racism is the glue that connects all oppressions, and thus our focus is on race and the injustices that stem from racialized history and belief systems that are reflected in American culture and institutions.

Our theory of change is based on the following assumptions and observations:

1. Racial inequity in the United States looks the same across systems.
2. Systems contribute significantly to disparities.
3. Poor outcomes are concentrated in particular geographic communities-- usually poor communities and communities of color.
4. Systemic interventions and training can work to change thinking, reduce disparities, and improve outcomes for all populations.
5. Change requires commitment

Our training and consultation services include:

- An analysis of institutional racism, its cultural and historical roots, and how it reshapes itself to sustain power for those in control through 2-day workshops

- Assistance in assessing organizations to determine its progress on the journey to become racially equitable
- Assistance in developing an anti-racist vision and plan for change
- Assistance in creating structures that will guide and sustain institutional efforts towards racial equity
- Review and evaluation of racial equity curricula
- Teaching the basic skills of using a movement rather than organizational approach in planning, organizing and taking action for change;
- Assisting in the development of a plan for change, which will include specific goals as well as an action plan to reach those goals
- Ongoing reflection designed to both evaluate the group's progress and document lessons learned as the organization moves through the process;
- Periodic, mutual evaluation and reflection to insure that your organization is successful in reaching your goals.

Bringing an institutional analysis and many years of experience, we believe that the goal of dismantling institutional racism and organizational reform cannot be achieved in one workshop or even a few workshops.

Understanding and dismantling institutional racism requires a consistent, and committed effort and developing processes and tools to support the work.

We see ourselves as organizers who advocate a movement approach as described by Parker Palmer ("Divided No More," 1999). Because our training is designed to bring an analysis that supports institutional transformation, our approach is different from that of traditional organizational consultants. We believe visions of change can grow and become real when organizations create structures for their racial equity work that allow for accountability and responsibility outside of the limits of their present roles and relationships. It is our belief that organizing is central to organizational transformation.

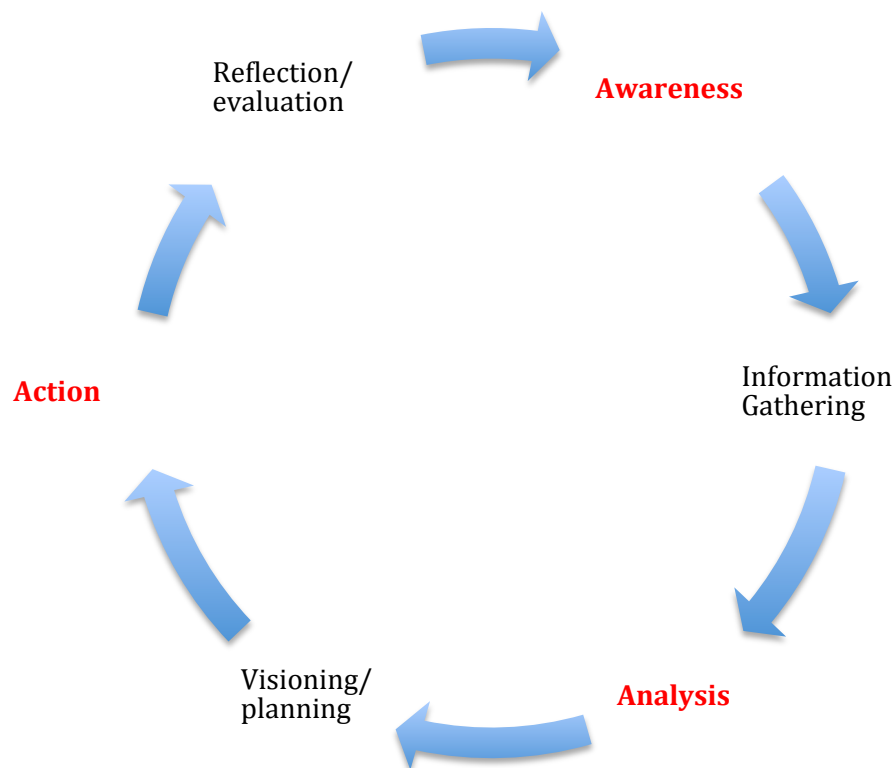
Individual problems, when put in an organizing context, can be translated into shared issues. Addressing shared issues creates openings for meaningful change. Therefore, REI believes organizations must pursue a movement approach to organizational change rather than an organizational approach. A movement approach creates countervailing structures in the form of caucuses and a core group, called the Equity Team, to hold the work of transformation. It recognizes the interconnectedness of all institutions and the organizations that compose them. It relies on collective wisdom, returning power to communities served, and evaluation.

The Racial Equity Institute's phased approach includes several workshops followed by consulting and coaching for organizational change.

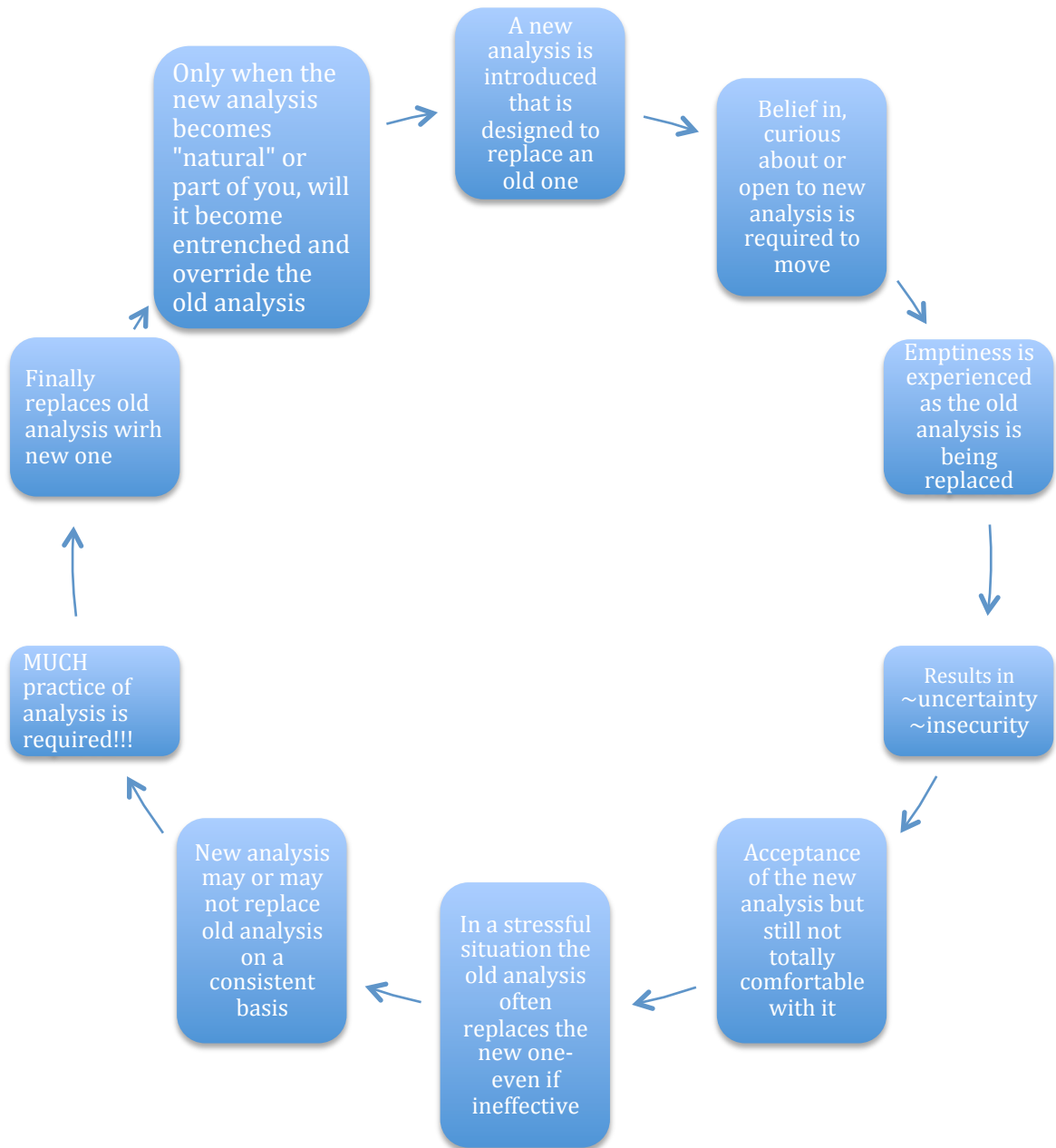
## 2 THE PROBLEM-SOLVING WHEEL

Many people ask what to do following a first Phase I workshop. The first workshop raises awareness and *introduces* an analysis. Keep in mind that each step in the cycle below requires significant time and attention. Also it cannot be stressed enough that this work must be undertaken collectively and not individually.

*“If living as anti-racists, we have to be on this wheel all the time.”*



### 3 AN ANTI-RACISM LEARNING CONTINUUM



## How An Anti-Racism Workshop Can Lead to a Paradigm Shift

(A Companion Piece to the Learning Continuum)

*Attending an anti-racism workshop can have a powerful affect in supporting the paradigm shift that is critical to systemic transformation. As the model on the previous page suggests, this is necessarily a gradual multi-staged process that occurs over time with consistent engagement.*

**STAGE 1.** In the 2-day anti-racism workshop a new analysis is introduced which is designed to challenge your old analysis, e.g., the way that you see your work and the people you provide services to. The new analysis introduces tools that can help you understand and explain racial outcomes (inequities, disparities/disproportionality in the systemic patterns that they exist in). A challenge to old ways of thinking and an introduction to new ways is the mots that can take place in two days. We sometimes say we have gone only two inches into the deep blue sea!

**STAGE 2.** After the anti-racism workshop, in order to move to the next place on the continuum there needs to be:

- a. Belief in the new analysis to some extent.
- b. Curiosity about the new analysis.
- c. Openness to the possibility of the new analysis

We observe that individuals who have been able to internalize and use the anti-racism analysis after Step 2 have demonstrated the ability to question their former understanding. They then grapple with and research the new anti-racist analysis to gather more information to increase their learning and understanding. This can involve reading from the bibliography and other sources, attending more workshops or related presentations, watching documentaries, engaging current events with a racial equity lens, participating in group work with others who have also completed one or more workshops.

**STAGE 3.** Moving forward involves the ability to sit with (resist defending and staying open) the *uncertainty* and *insecurity* that are the result of not knowing the new analysis well enough to access and to rely on it, yet having doubts about the old analysis.



It's natural to feel *uncertain* because despite the new knowledge you are acquiring there remains many things whose truth or falsity is not known or clear to you. There is still a lot more to learn and understand. You may also feel *insecure* because you are unable to rely on previous understandings, yet you don't know the new anti-racist analysis well enough to articulate or use.

The anti-racism workshop challenges deeply held beliefs and assumptions about race, race consciousness, colorblindness and the impact of race on decision making. The workshop provides an analysis of the intersections between race and poverty and a working definition of racism that is functional to understanding inequitable educational outcomes.

**STAGE 4.** Acceptance of the new analysis and information, but not totally comfortable with it.

This is when individuals decide that they believe the new information. Still reeling from the departure from what they have always known, accessing the new analysis is uncomfortable. In this stage individuals are struggling with the loss of the old way of understanding race and racism. It is an extreme divergence from their prior understanding and can interfere with their confidence in utilizing the new anti-racism analysis. As the old saying goes: *Most people are more comfortable with old problems than with new solutions.*

**STAGE 5.** Even though you have accepted the new analysis, you may find that in *stressful* situations the old analysis and way of seeing and doing your work will overcome the new analysis, even when you know the old analysis is not effective. The familiar way feels safe under stress, but it can also backfire, creating more stress than you had in the first place.

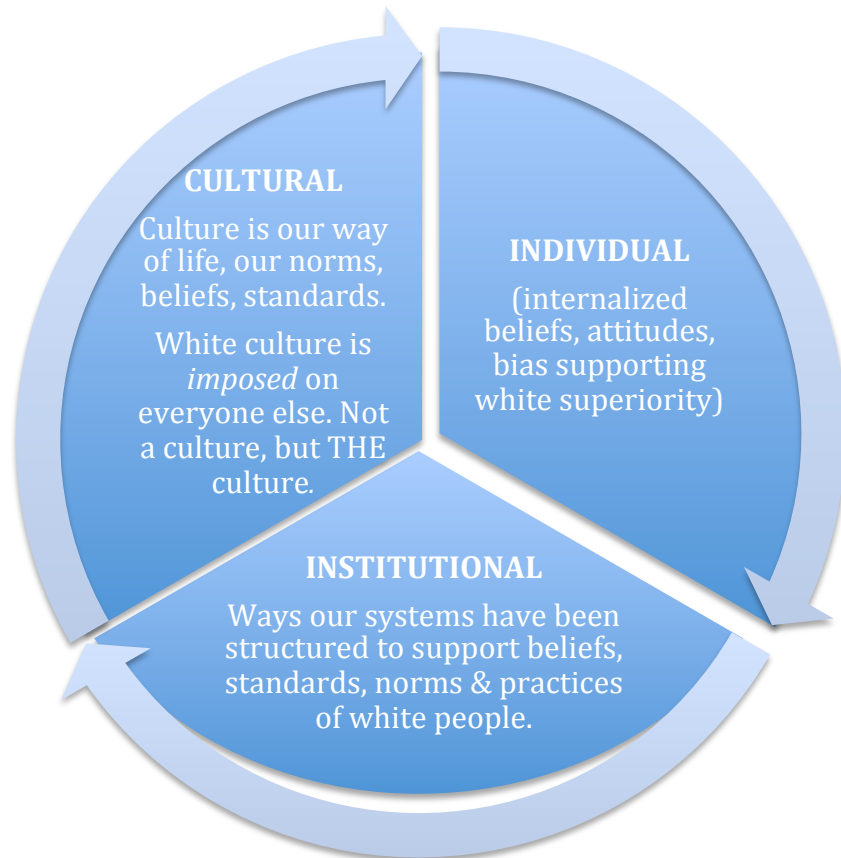
**STAGE 6.** The new anti-racist analysis may or may not replace the old analysis on a consistent basis. Developing a deeper sense of and consistent use of the new analysis requires staying engaged with the material, through repeated participation in workshops, continuing study and consistent connection with others who are doing the same work.

**STAGE 7.** Much practice of the new anti-racist analysis is required working with others who are also committed to the new analysis.

**STAGE 8.** Finally, the old analysis is replaced with the anti-racist new analysis

## 4 FORMS OR MANIFESTATIONS OF RACISM

In Phase I, we concentrate on replacing an individual analysis of racism (bigotry and prejudice) with an institutional one. In reality institutional racism intersects with individual racism and cultural racism. How does this work?



*"Culture eats structure for lunch."*

## 5 IMPLICIT RACIAL BIAS

Implicit racial bias is a type of an individual unconscious bias that is shaped by culture. It plays out in our institutional work and helps shape outcomes.

### **Implicit Associations**

Our brains are hardwired to make mental shortcuts. This is efficient and adaptive because it helps us to make meaning of things automatically through categorization, associations and connections.

*“Our minds are meaning-making machines.”*

“...when given a test of unconscious stereotyping (the Implicit Association Test), nearly ninety percent of whites who have taken the test implicitly associate the faces of black Americans with negative words and traits such as evil character or failure. That is, they have more trouble linking black faces to pleasant words and positive features than they do for white faces. Most whites show an anti-black, pro-white bias on psychological tests. In addition, when whites are shown photos of black faces, even for only thirty milliseconds, key areas of their brains that are designed to respond to perceived threats light up automatically.” (Feagin, 2006)

**Implicit biases are pervasive.** They appear as statistically "large" effects that are often shown by majorities of samples of Americans. Over 80% of web respondents showed implicit negativity toward the elderly compared to the young; 75-80% of self-identified Whites and Asians showed an implicit preference for racial White relative to Black.

**Implicit biases are triggered by “priming.”**

The Basketball Awareness Test provides a good example of priming.

[http://www.youtube.com/watch?v=KB\\_lTKZm1Ts](http://www.youtube.com/watch?v=KB_lTKZm1Ts).

- What do we, in our institutions, fail to see because we’re not looking for it?

- What do we see because we *are* looking for it? In schools, in courts, on the highways and streets, when hiring, etc.?

**Implicit biases lead to profiling and other assumptions or stereotypes that we make based on race. These unconscious associations have real consequences. Following are some examples.**

- White Americans are more likely to violate drug laws than Black Americans, yet Blacks have been sent to prison on drug charges at a rate of 20-50 times that of Whites. (ACLU, 2013)
- Babies of white women who *haven't finished high school* have a lower rate of infant mortality than African-American women with college and graduate school educations. ("When the Bough Breaks" from *Unnatural Causes: Is Inequality Making Us Sick?*).
- People with White-sounding names (like Emily and Greg) get 50% more callbacks for interviews than people with Black-sounding names like Lakisha and Jamal (Bertrand & Mullainathan, 2004).
- White juries convict more Black defendants than Whites for exactly the same crime (The Sentencing Project, 2005).
- Black Americans have more chronic disease and are more likely to die younger than their White counterparts at the same socioeconomic level (Hofrichter, 2003).
- Black students are more likely to be disciplined harshly for exactly the same misbehaviors. Recent data shows this begins in preschool where children of color are more likely to be suspended or kicked out for normal child behaviors like tantrums, hitting or disobeying than are White children. (New Federal Report, March, 2014)
- One out of every four boys of color (African-American or Latino) with a disability have received out-of-school suspensions and many of these end

up having their cases referred to police. (US Dept of Education Office for Civil Rights, 2014; Skiba, Michael, & Nardo, 2000).

- A White job applicant with a criminal record is more likely to get called back than equally qualified Black applicant without a criminal record (Pager, 2003).

A description of the book, *Black and Blue* that describes how implicit bias shapes the “racial imagination of physicians:  
“*Black & Blue* penetrates the physician’s private sphere where racial fantasies and misinformation distort diagnoses and treatments. Doctors have always absorbed the racial stereotypes and folkloric beliefs about racial differences that permeate the general population. Within the world of medicine this racial folklore has infiltrated all of the medical sub-disciplines, from cardiology to gynecology to psychiatry. Doctors have thus imposed white or black racial identities upon every organ system of the human body, along with racial interpretations of black children, the black elderly, the black athlete, black musicality, black pain thresholds, and other aspects of black minds and bodies. The American medical establishment does not readily absorb either historical or current information about medical racism. For this reason, racial enlightenment will not reach medical schools until the current race-averse curricula include new historical and sociological perspectives.”

**There are actions we can take to counter our own implicit bias. First and most important is recognizing and admitting that we have it.**

*We see and hear with our beliefs. You can’t do something about something you can’t see or won’t admit.”*

**Become aware of your biases.** We must own the possibility of biases we don’t intend, recognize that they have consequences, and take responsibility for addressing them. We recognize that they have consequences.

We ALWAYS play the race card to see whether it fits. It virtually always will.

We understand that nobody chooses to be exposed to or exhibit unconscious biases. It's how our brains operate. Moreover, our brains are marvelous. Sometimes their strengths are also obstacles of which we need to become aware...especially when it involves categories of human beings and the associations we bring to those categories.

## 6 RACE AND CULTURE

White culture in America is seen as the standard and norm from which all other cultures deviate. Yet in reality it is a very specific culture derived over millennia from the European ancestors of the whites who conquered and colonized this continent.

Culture and physiology have evolved adaptively to fit geography and climate. White culture reflects the ways of life of the people living in Europe who had colder climates and shorter growing seasons. African-American and other cultures reflect life in warmer climes where food was plentiful year-round. The following table developed by Edwin J. Nichols, an anthropological psychologist, describes the philosophical aspects of cultural difference.

ETHNIC GROUP	AXIOLOGY	EPISTEMOLOGY		LOGIC	PROCESS
		Applied	Methodology		
Worldview >					
European Euro-American	Member-Object <i>Highest value is object or acquisition of object.</i>	One knows through counting and measuring	Linear and sequential (assembly line)	Dichotomous <i>either/or</i>  (Newtonian theory)	All sets are repeatable & reproducible <i>Technology</i>
African African-American Latino/a Arab	Member—Member <i>Highest value is relationships b/n persons</i>	One knows through symbolic imagery and rhythm	Critical path analysis (cut to the chase)	Diunital <i>Union of opposites, the in-between</i>  <i>Quantam theory</i>	All sets are interrelated thru human and spiritual networks <i>Black church</i>
Asian Asian-American Polynesian	Member-Group <i>Highest value is cohesiveness of the group</i>	One knows through transcendental striving	Cyclical and repetitive (writing a Chinese word)	Nyaya Objective world is conceived of thought and mind'  <i>Chaos theory</i>	All sets are independentl y interrelated in the harmony of the universe <i>Keiretsu</i>
Native American	Member-Great Spirit <i>Highest value is oneness with the Great Spirit</i>	One knows through reflection and spiritual receptivity	Environmentall y experiential reflection (rites of passage)	Great Mystery A set of 4 and a set of 3 form the whole <i>Super String Theory</i>	All sets are interrelated through the elements, plant, animal and spiritual network

*“The problem is not White culture, but that it is imposed on everyone else—not a culture, but THE culture.”*

## RACIALLY STRUCTURED OPPORTUNITY AND OUTCOMES

OPPORTUNITY	BARRIERS
White-only access to education ↓	Segregation/ Inadequate funding, materials, supplies, facilities ↓
Higher education ↓	Social/political/economic segregation ↓
Better, higher paying jobs ↓	Poorer employment options ↓
Qualify for loans ↓	Don't qualify for loans/Racial bias in lending ↓
Finance/Start a business ↓	Denied loans, business, insurance ↓
Buy home/Equity/Collateral ↓	Red-lining, divestment/decreased home values ↓
Environmentally & physically safe spaces ↓	Deteriorating/declining environment, Violence, addictions, mental illness ↓
<b>Better health care and health outcomes</b>	<b>Lack of access to health care and worst health outcomes</b>



## 7 “DIAGNOSIS DETERMINES TREATMENT”

- We often develop programs and interventions in response to problems we see without understanding the root causes, the complete history. We need to be able to tell the story and understand the context within which illness and social problems develop.
- In “Bad Sugar”, for instance, well-meaning outsiders want to develop diabetes treatment and prevention programs that involve diet, exercise, and pharmaceuticals without recognizing or addressing the history of government programs that disinvested them of their land, water and culture.
- Epidemiologist Leonard Syme (“Social Determinants of Health”) emphasizes that we can take every person who is sick and cure him, but it will do nothing to solve the problem, because individuals will continue to enter the at-risk population at an unaffected rate.

By extension,

We can take every child who is struggling in school and give him a mentor...

We can take every hungry family and give them food stamps or a food pantry...

We can take every homeless person and give them a shelter...

But we will do nothing to solve the problem if we don’t have a good understanding of why people are suffering, if we don’t understand our history and the institutional and cultural impacts of racism.

WHITE PEOPLE NEED TO:

- Understand what we have done and what we still do.
- Examine guilt, but don’t wallow in it or stay stuck there—another way to keep the focus on yourself as an individual.
- Let People of Color take the lead in telling their own story and lifting their own people.
- Restore our humanity through anti-racist work with other White people. Collectively work against racism, stand up for racial justice and equity.

*“The way out is back through.”*

## 8 A MOVEMENT APPROACH TO ORGANIZING

Adapted from *Divided No More: A Movement Approach to Education Reform*  
by Parker Palmer

Movements for social change emerge when:

- **Individuals** refuse to act outwardly in contradiction to something they know to be true inwardly.
- **Groups** emerge when these individuals find each other, begin to build community, and spread the word.
- **Collective Action** happens when the group begins to translate individual problems into public organizing issues that address the root cause of the issue.

Our work within organizations must be approached as movement building work.

Organizers, working to create organizational change with a movement mentality, must:

- Remember, resistance is only the place where things begin.
- Know that opposition merely validates the idea that change must come.
- Find sources of countervailing power outside of the organizational structure.
- Nurture that power.
- Work together to translate individual problems into broader organizing issues.
- Create alternative rewards to sustain energy for working toward your vision.
- Work from a power, rather than a victim, analysis.

*“Tell the truth in troubled times.”*

## 9 IN CLOSING...

*“If we – and now I mean the relatively conscious whites and the relatively conscious blacks, who must, like lovers, insist on or create the consciousness of others -- do not falter in our duty now, we may be able, handful that we are, to end the racial nightmare, and achieve our country, and change the history of the world.”*

James Baldwin, *The Fire Next Time* (1963)

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