Diversity & Inclusion

OCTOBER 2020



On behalf of the D&I Committee, our hope is that you are enjoying and finding the information we continue to share helpful. This update

Twiggy Eure

is focused on the celebration of Hispanic Heritage Month and Deaf Awareness Month, both celebrated in September. If you missed last month's update, I encourage you to take a look by visiting the D&I section on CNN or the Crouse website. Please remember that Crouse's HelpPeople employee assistance program is available as a benefit to you and your family. They can be reached at 315-470-7447. I look forward to doing more good work together.

~ Twiggy Eure, Director of Diversity & Inclusion

Deaf Awareness

The term "Hearing Impaired" is not the politically correct way to refer to a person. New York State removed this term from state law published documents in 2018. It has been replaced by the term "deaf or hard-of-hearing."

Approximately 90% of deaf children are born into hearing families who have never met a deaf person before and consequently have no knowledge of sign language or Deaf Culture.

American Sign Language is a "real" language with its own grammatical structure.

According to the National Institutes of Health – 15% of American adults have trouble hearing.

Source: WHOLE ME, Inc. - wholemeinc.com

<u>Click here</u> to view the Crouse Heroes Work Here – A short educational video from members of our Deaf/Hard of Hearing Community.



Hispanic Heritage Month has been an important celebration in the U.S. for more than 40 years. Americans across the country celebrate this month with pride and joy, while commemorating the importance of diversity.

What is Hispanic Heritage Month?

It's a national celebration to honor the history, culture and influence of past generations who came from Spain, Mexico, the Caribbean and Central and South America.

The observance started in 1968 under President Lyndon Johnson's administration as a one-week celebration called Hispanic Heritage Week. Years later, President Ronald Reagan proposed extending this celebration into a month-long event. It was <u>enacted into law</u> on Aug. 17, 1988, officially designating the 30-day period starting on Sept. 15 to Oct. 15 as National Hispanic Heritage Month.

When is Hispanic Heritage Month Celebrated?

Hispanic Heritage Month is celebrated from Sept. 15 to Oct. 15. The celebration starts mid-month because Sept. 15 marks the independence anniversary of five countries: Costa Rica, Nicaragua, El Salvador, Honduras and Guatemala. It is followed by Mexico's Independence Day on Sept. 16 and Chile's on Sept. 18.

What does Hispanic mean?

While many people use Latino(a) and Hispanic interchangeably, these two words mean different things. A Hispanic person is someone who comes from, or is a descendant of, a Spanish-speaking country. Latino(a) is used when referring to someone who comes from Latin America, or is a descendant from any Latin American country.

A person can be both Hispanic and Latino(a), but not all Latinos are Hispanic. Brazilians, for example, are Latinos, but their native language is not Spanish. Conversely, not all Hispanics are Latino(a). Spaniards are considered Hispanic, but not Latinos, since they are part of the European Union.

How many Hispanics are there in the U.S.?

The Pew Research Center says the U.S. Hispanic population is the nation's second-fastest-growing ethnic group after Asians. The Hispanic population in the U.S. reached a record 60.6 million in 2019, according to the U.S. <u>Census Bureau</u>. Hispanics account for 18% of the total U.S. population.

Source: <u>nbcnewyork.com/news/national-</u> <u>international/things-to-know-about-</u> <u>hispanic-heritage-month/1991285/</u>

Hispanic Heritage Month (cont.)

Additional Resources

The Library of Congress

Proclamation on National Hispanic Heritage Month, 2020

U.S. Department of Health and Human Services Office of Minority Health

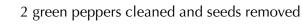
Additionally, check out the informative presentation by D&I Committee members Dennis Sanabria (Manager, Patient Access) and Frankie Sanabria (Patient Transport) about National Hispanic Heritage Month (<u>click here</u>). You may also view their cooking video, Frying Green Plantains (Tostones), <u>here</u>.

Below is their recipe for Puerto Rican Sofrito. Enjoy!

Recipe for Homemade Puerto Rican Sofrito



This many-purpose seasoning is what gives rice, beans, soups and many other special Spanish dishes flavor.





3 garlic cloves or to your liking.

12 ajies dulces (Capiscum Chinese/small green peppers that turn red, orange, and yellow) cleaned and seeds removed

1 bunch of fresh Cilantro (about 20 leaves)

25 recao leaves (culantro leaves)



1 tablespoon of salt or to your liking



1¼ cup of olive oil

Place all ingredients into a blender or food processor. Mix to your preferred consistency. After all ingredients are combined, pour into a container (preferably a glass jar) and seal. Please note: The recipe may be altered to your liking.



In Memory of Ruth Bader Ginsburg

We pause to remember the life and legacy of the late U.S. Supreme Court Justice Ruth Bader Ginsburg. CBS News reported that "Ginsburg was known for never shying away from making progressive statements, no matter how controversial the subject may be. From the endless fight for women's rights to the importance of maintaining an open mind and heart in all conversations..."

Ginsburg was the second woman appointed to the Supreme Court and she made many contributions on behalf of her fellow Americans. You can learn more about her by watching the Oscar-nominated documentary "RGB" and the film "On the Basis of Sex." Both give us a deep dive into her life before she became a Supreme Court Justice.

You can also research her famous quotes, decisions and iconic moments from her long career.

Breathing Lessons A doctor reflects on life, death, racism and change (Commentary)



Demonstrations against police brutality and the May 25 killing of George Floyd continued for a third day in Syracuse on Monday, June 1. Minneapolis police officers restraining Floyd ignored his insistent plea, "Please, I can't breathe." Catie O'Toole | cotoole@syracuse.com

By James Longo, MD Special to Syracuse.com

Dr. James Longo, of Fayetteville, grew up in Syracuse and is an alumnus of Le Moyne College, Class of 1977. He is a cardiologist with Crouse Medical Practice.

"Justice will not be served until those who are unaffected are as outraged as those who are."

— Benjamin Franklin

Cultural competency is a learned Gbehavior. It evolves over time and its arc of progression is influenced by the intimate interactions between people, in my case, doctor and patient. A recent <u>perspective</u> in the *New England Journal of Medicine* posited "five practices to dismantle structural racism" in the American health care system. This caused me to pause and reflect on my personal journey to achieve Gandhi's challenge to "be the change that you wish to see in the world."

It seems intuitive that if racial justice legislative changes are enacted, then results will follow. Consider the opposite. Only when there are grassroot efforts, when individuals decide upon a different course of action, do real changes gain momentum and become a reality.

The murder of a Covid-19 patient, George Floyd, and the subsequent national protests highlighting the Black Lives Matter movement, reinforces this concept. Only by incorporating his death (as a microcosm of the Black experience) into our collective daily thoughts can we move forward. Only by encapsulating his last words, "Please, I can't breathe" into my daily actions can I exact positive change in the one person this transformation has to begin with — me.

"Please, I can't breathe ... "

Looking back over the course of my life as a white man and as a physician, I've heard, thought, and seen these words acted out before me innumerable times. It was not until recently that I discovered a new-found insight into this barely audible, but intensely piercing phrase. When I told my mother that I was accepted to medical school, amid her happy tears, she opined that her chest was so heavy that it felt like she couldn't breathe. Upon the birth of our two daughters, I recall the welling up of emotion in my chest, and then in my throat, so I could not speak, forcing myself to breathe. Moments of immense joy/emotion leading to a sensation of not being able to breathe — a young white man's perspective.

An elderly retired gentleman who suddenly developed the classic symptoms of the Covid infection, required intubation twice, a subsequent tracheostomy and a feeding tube remains in rehab months later fighting a battle against chronic breathlessness. His frustration and anxiety are countered by his fierce determination to recover. His recovery has relied on frequent sojourns into the prone position for prolonged intervals, often with a respiratory therapist gently massaging and tapping on his back to counter the disease-provoked collapse of his lungs. Imagine the irony as I watch a man face down with a therapist working on his back to alleviate his breathlessness. Contrast this to images of a similar Covid-19 patient, George Floyd, a stranger also leaning on his back, but with the purpose of taking breath away and extinguishing life.

As a practicing cardiologist for 40 years, the number of times I have witnessed "last breaths" are too numerable and painful to count. And each time the same visceral emotions of helplessness, inadequacy and anger are elicited. The same observation always emerges; that is, the suddenness of dying. One moment the natural act of breathing ceases and the gift of life abruptly stops.

Breathing Lessons

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On Memorial Day 2020, the murder of a Black man was memorialized on video and subsequently shared with the world. His repeated plea, "I can't breathe" strikes in me a new inverted perspective: Not one of emotion or fear or pain in a "white" world; but one of chronic suffocation in a segregated one.

The extinguishing of life simply because of one's skin color stems from generations of ignorant and hateful conditioning allowing for this vile attitude. The fact that not nature, nor disease, nor aging contributed to this death, but rather the shade of one's bias was found to be in direct conflict with the shade of another's skin. This seems unimaginable in a white man's world, but is all too realistic in our present one.

With this expanding perspective, I try to listen better, think with more inclusiveness, and be more empathetic and hope to act on that empathy with deeds of compassion.

"Please, I can't breathe ... "

My new perspective recognizes that when I hear or see this phrase acted out, it *may* be metaphorically related to a joyous occasion; it *can* be related to physical ailments that I must better empathize with; and it *certainly* is associated with generations of people (or one individual) whose breath is slowly squeezed to the point of extinction. The emotion this must now elicit is awareness, an awareness that progresses to a broader understanding, and an informed understanding that leads to pragmatic actions.

"Please, I can't breathe ... "

It does feel, as a society, that we are suffocating. We don't have to. We are better than this. I'm convinced the answer lies with our everyday interpersonal communications from casual conversations to intense discussions. With each incremental interaction, we understand each other's culture more effectively. We can learn to listen. We can act on what we hear. Fears subside, trust emerges, change happens. We can learn to breathe — together.



D&I Committee

OUR PURPOSE

Comprised of Crouse-loyal staff from a number of areas, the Diversity & Inclusion Committee, founded in 2014, helps Crouse become a more diverse employer, with the goal to better serve our organization and our community. Committee members meet monthly to discuss, communicate and create collaborations to support diversity, inclusion and equity across the Crouse Health system.

Members

John Bergemann, Director of Human Resources

Mark Caccavale, Nurse Manager, 7 Memorial

Chelsea Castor, Regional Neonatal Transport, Coordinator, Neonatology

Erin Christopher, RN, Lactation Services

Veronica Clanton, Authorization & Verification Coordinator, Patient Access

Allison Duggan, MD, Clinical Quality Medical Director, Quality Improvement

Twiggy Eure, Director of Diversity & Inclusion; Chair, Diversity & Inclusion Committee

Corey Giannone, CD Therapist I, CDTS Outpatient Drug Abuse

Rebecca Howden, Manager, Environmental Services

Kevin Johnson, MD, Crouse Chemical Dependency (Psychiatrist)

Queen Lane, CD Therapist I, CDTS Outpatient Drug Abuse

Laurie Leonard, Registered Nurse, CDTS Outpatient Drug Abuse

Rev. Katherine Lufkin Day, Managing Chaplain, Rosamond Gifford Spiritual Care Center

- Amanda Marsh, Registered Nurse, Neonatal Intensive Care Unit
- Manuel McCoy, IT, Clinical Support Specialist, Information Technology

Kathleen Miller-Murphy, Director, Women's Health Integration, Community Engagement

Tawyna Montgomery, Patient Access Representative, Patient Access

Dennis Sanabria, Manager, Patient Access

Frankie Sanabria, Patient Care Transporter, Patient Transport

Karen Sigona, Quality Improvement Analyst, Quality Improvement

Tonya Swift-Freeman, Clinical Information Coordinator

Thomas Tarbox, Educational Coordinator, Educational Services

Diane Thomas, Patient and Guest Relations Rep., Patient & Guest Relations

Alann Weissman-Ward, MD, Medical Director of Commonwealth Place

Terry Zahler, Educational Coordinator, Educational Services

Crouse Health values diversity among its employees, patients, families and the communities we serve. Our mission calls for us to provide the best in patient care. Every person is entitled to human rights without discrimination. We embrace and support this basic right within the Crouse healthcare system and in our community. Treating each individual with respect and dignity is part of the Crouse mission, vision and values; our guiding principle of *Carepassion*; and our diversity, equity and inclusion initiatives.