

7 ways to improve Black health—in mind and body

JUL 20, 2020

Sara Berg, MS

Senior News Writer

Black communities are more likely to experience socioeconomic inequities such as exclusion from health, educational, social and economic resources. These inequities can lead to worse physical and mental health outcomes for Black patients. During the COVID-19 pandemic, those systems that produce health inequity can be killers. But there are ways that physicians and other health professionals can help.

The climate that the country is in right now “is going to require a lot of cultural sensitivity and dismantling of institutional and systemic racism,” said Carl Lambert, MD, medical director at Rush University Family Physicians and assistant professor of family medicine at Rush University Medical Center, in Chicago. “We have to acknowledge that there is a rich history of mistrust as far as Black patients and the medical community.

“We have to acknowledge that as we engage patients,” said Dr. Lambert. “We have to do everything in our power to make the patients feel wanted, comfortable and cared for.”

To help, Dr. Lambert offered seven ways physicians and health systems can improve the health and well-being of Black patients.

Meet patients where they are

Dr. Lambert challenged leadership at Rush to go to where patients are instead of waiting for them to come in, including going to churches or attending community events. That is because “it’s important, if we’re going to engage Black populations, that we meet them where they are,” he said.

While this can’t happen in the same way due to COVID-19, it is still important to find ways to “go to community events, you go to churches, you partner with community leaders and you partner with other people who are involved in the overall health and wellness of a people,” said Dr. Lambert. “As a primary care doctor, I think about not just that one person, but the population they come from. There

are a lot of other patients that I may not be seeing that are affected by a larger range issue.”

“I’m also reckoning with the fact that the Black community has faced a huge amount of experimentation that’s led to a distrust of the medical establishment,” said Dr. Lambert. “When we talk about those things in a relaxed environment, like a church, you really are able to be open and transparent.”

Lead by example

Dr. Lambert, who once weighed 300 pounds, found that his patients couldn’t relate to him when he asked about their weight. To address this, he worked on his own health to be able to “let the patient know that you’ve been there.”

“I’m not speaking from some lofty place, but I understand. And there’s bumps—there’s hills and valleys to it,” he said.

Physicians should also remove shame from the conversation because “shame and fear are not always the best motivators as far as patient care is concerned,” said Dr. Lambert.

Make small changes

Throughout the day, patients can make small changes to improve their overall health and well-being, including meal prep, taking the stairs and addressing sodium intake.

“One thing that’s worked for my family is picking a day during the week to do meal prep,” said Dr. Lambert. “We plan out meals together so that you’re not tempted to reach for whatever is out there because in the middle of a busy day or stressful day, I’m calling Uber Eats.”

Training a workforce that resembles patient population

“We need to have a revamp and a more robust workforce that has more Black and Latinx people in it,” said Dr. Lambert. “There’s a lot of research that shows that minority physicians more often than not will actually go back to communities” to help vulnerable patients.

“It makes a lot of sense to train up a population that’s really reflective of the patients that we see,” he said. “A lot of my best relationships are with patients that look like me. There’s a lot of things that are just already understood—some of those barriers are already torn down.”

“I’m able to relate to them in a way that’s not patriarchal, but it’s really a shared experience,” said Dr. Lambert. “Having that perspective, it’s a win-win for the medical system and then also for our patient populations too.”

Address social determinants of health

Physicians must also be able to address social determinants of health to better reach diverse patient populations.

“As health care professionals in hospital systems, we can link in with these things such as economic instability, lack or poor education, food insecurity, transportation issues and poverty,” said Dr. Lambert. “As a health care system, we interlock with those things all the time and they greatly influence the health of our patients,”

“We have to be involved in those dimensions as well from a societal, community and policy level, and of course an individual or family level too,” he said.

Use technology

In his role as medical director, Dr. Lambert is “able to think about not just the patient who’s in front of me but thinking about the patients who I don’t get to see.”

“The patients on my panel, they’re just the tip of the iceberg as far as how well are they. How well is the community that I’m not seeing?” he said. He added that he uses “technology in the office to deal with social determinants of health.”

“A lot of times we use technology to just track blood pressure and all these other things, but to use it in such a social aspect is really powerful,” said Dr. Lambert.

Learn more from the AMA about how to establish telehealth and deliver patient care while practicing physical distancing during the COVID-19 pandemic.

Provide fair and equitable health care

While COVID-19 has disrupted patient care and led to physicians playing catch up, the pandemic has also exposed inequities around how patients are treated.

“Patients in Black or Brown communities have seen a delay in terms of them getting access to testing for COVID-19 or these are populations that they literally can’t socially distance,” said Dr. Lambert. “They have to go to work or they live in homes where there’s five to 10 people and it’s literally impossible to do that.”

“COVID-19 really did expose the need to have fair and equitable health care for all populations, but especially those who are mired in poverty, which is often occurs in Black and Latinx communities,” he said.

The AMA continues to compile critical COVID-19 health equity resources to shine a light on the structural issues that contribute to and could exacerbate already existing inequities. Physicians can also access the AMA’s COVID-19 FAQs about health equity in a pandemic.