Insight into Identities Series

Series 2

Presented by the Office of Diversity, Equity & Inclusion

For questions about the series, please contact Jarrod Chin, Senior Manager for Education and Consulting, at JJChin@partners.org

Click here to learn more about the series
Dear Mass General Brigham Colleagues,

I was born in Lima, Ohio in an all-white neighborhood and all-white community. My father was a Lutheran Minister, and my mother was a Special Needs Teacher. I was taught growing up that all people are equal. I was 11 years old the first time I saw a black person. I was with my Mom shopping for Christmas at the local mall, and there was Santa Claus. But he didn’t look like all the pictures I had seen. How could he be Santa Claus if he was black, I questioned.

At the age of 35, my father started losing his eyesight. My parents decided we needed to move to Massachusetts to be near Mass Eye and Ear, where my Dad was seeing a specialist. I learned quickly how loss of vision impacts your independence. When my mother was pregnant with my older sister, she had Rubella in her third month. As a result, my sister was born deaf, and when she moved into her late teenage years and early twenties, she started to show significant psychiatric problems.

Needless to say, I learned a lot about what it’s like to live in a family with disabilities, growing up with my Dad and sister. My sister spent time living in a school for the deaf in Detroit Michigan at a time when they were not allowed to use sign language. The belief was that deaf people had to learn how to speak and read lips in order to live in the hearing world. My sister tells stories of how they used to sneak into the girl’s room at night with flashlights so that they could sign to each other. As a result of this approach, which I believe has changed today, my sister felt that her ability to communicate was stifled, however she is excellent at lipreading and speaking with hearing people.

I remember when my sister was away at Gallaudet University in Washington, DC, a college for the deaf. She would call my Dad and speak over the phone to him, then he would put the phone on the TTY (a teletype phone for the deaf), and he would type to her what he wanted to say, then he would pick the phone back up and she would speak to him, and they would go on in this way. I remember being amazed that they (the blind and the deaf) could communicate in this way.

When I was old enough to drive, I spent a lot of time taking my father places. I remember that time together fondly. My Dad taught me not to let disabilities, or any challenges that I would face in life get in the way. At the age of 40, he was totally blind, yet he never skipped a beat in his life. He spent a few months in Morristown, NJ training with his seeing eye dog, Duchess.

Image Above: Paula’s Father stands with his seeing eye dog next to him at his side
He continued his full-time job as a minister and the church was great at making needed accommodations. For example, he had strips of carpet put into areas of the church where he could walk from one place to another during church services by feeling the carpet under his feet. He had a braille bible, audio books and a braille watch that had a face that opened so he could feel the time. He taught me about the “ability” in disability and the importance of positivity and possibility.

My sister’s psychiatric problems led to her inability to raise her two children. At the age of 9, her daughter moved in with me, and I discharged her son from the hospital at 6 days old. My sister’s daughter’s father was Asian, and her son’s father was African American. In addition, I have 3 biological children.

Having an Asian and an African American child taught me so much about racism, especially having a Black child, in addition to what I had learned growing up in a house with disabilities about discrimination.

My adopted son was a wonderful, loving little boy, and as he grew, especially into his teenage years, the experiences he had really opened my eyes. He was pulled over by the police on more than one occasion. As a typical white mother, I would say “What did you do?” He would tell me, “nothing Mom,” and I would give him the third degree. He told me that he was pulled over for DWB (driving while black). I started to realize over time that this was truly happening. Another time he bought a video game and brought it home. I watched him open it up, take the cellophane off and open the case. Once opened, there was great disappointment, since the DVD was missing. I told him to go back to the store, tell them and get your game. About a half hour later he called me and said “Mom, they don’t believe me, they think I stole it”. He often would tell me how he is followed and watched when he shops. These types of things never happened to my other children. When I was flying one day with him and his then girlfriend (now his wife), we were in line together waiting to board and right after me, the line was stopped, and he and his girlfriend were told to wait. I didn’t think much about it at the time. Later he said to me, “Mom, do you know why they cut us off from you”? “Because they didn’t think we were together because you’re white, and we’re black.” Wow … I thought …

I could go on, but I know that my experiences growing up with my family, and my experiences raising multi-racial children, for many years as a single parent, are the reasons I’m so passionate and so connected to the work of diversity, equity, inclusion and being united against racism. I am committed as a person in my community and in my role at Mass General Brigham to do whatever I can to move the equality needle forward – for my family, for the disabled community, for my Black and Brown colleagues and community members, for the LGBTQ+ community, for each other and for a better country and world.

Sincerely,

Paula Squires, MBA, SHRM-SCP, SPHR  
Senior Vice President of Human Resources  
Brigham Health
The Office of Diversity, Equity & Inclusion’s “Insight into Identities” series is a system-wide learning initiative dedicated to exploring aspects of human difference. A self-guided learning opportunity, Insight into Identities is designed for Mass General Brigham staff to further understand how diversity and inclusion expands our ability to effectively work with others and improves patient care. Series 2 of Insight into Identities explores secondary dimensions of identities: identities that are present in a wide variety of identities covered in season 1 e.g. race and gender. These identities are often referred to second dimension identities on the diversity wheel diagrams. Insight into Identities Series 2 continues to provide Mass General Brigham staff with simple yet meaningful skills for inclusion that they can implement in their professional work immediately. Our hope as you read Insight into Identities Series 2 is to not only provide a learning experience around DE&I, but also foster personal reflection, conversation with colleagues about how issues of identity impact the care we provide our patients daily and how we can create system-wide change that promotes health equity.

This edition explores

Family Status

Overview

Family. Say that word out loud to yourself. When you hear it- Family- what images or memories pop into your mind? What feelings and emotions arise in you?

For all of us, family is an extremely personal concept. Advertisers did their best to convince us in the 1950’s and 60’s that a family is two white married adults (a man and a woman) and their two kids living in suburbia with a white picket fence and a dog. But families are not so easily defined. The U.S. Census Bureau describes a family as “a group of two people or more (one of whom is the householder) related by birth, marriage or adoption and residing together.” And that definition also seems extremely limiting.

Family is an ever-evolving concept. While family may encompass those who live with you in your home or are related to you by shared ancestry, we know that marriage/divorce, birth, death, adoption and other life events shape our families in profound ways. Family is not just about sharing ancestry and DNA. Our partners and friends can become family. Families can be extremely large and extended with multiple generations living under one roof. Or two or more people connected by love who have decided to live together.
In truth, a family can take on infinite shape and forms. And while there is very little agreement about what constitutes one, family plays an essential role in human development. Families are powerful conveyors of culture. They help shape our view of the world and those who live in it. Families pass down norms, traditions, values and morals. Families help define an individual’s sense of self and their role within it as a parent, guardian, grandparent, child, brother, sister, sibling, partner, spouse, aunt, uncle, cousin, etc. A family or a member in it can cause trauma and grief and/or promote resiliency, joy and love. In other words, families are complicated, but they play a vital role in our society and an individual’s identity.

Because of COVID-19 and physical distancing, many of us spent the holidays reflecting on family and its important role in our lives. This month’s edition of Insight into Identities focuses on the concept of family and how it shapes not only our own lives, but that of our colleagues, patients and our health care system. Consider the following statistics:

**According to the Pew Research Center:**
- As of 2015, 62% of U.S. children live with two married parents – an all-time low
- 16% of children are living in what the Census Bureau terms blended families: a household with a stepparent, stepsibling or half-sibling. Hispanic, Black and white children are equally likely to live in a blended family. About 17% of Hispanic and Black children are living in a blended family, as are 15% of white children

**According to the UCLA School of Law Williams Institute:**
- 48% of LGBTQ+ women under age 50 are raising a child. 20% of LGBTQ+ men under age 50 are raising a child
- 170,000 children in the United States are currently being raised by 111,000 same-sex couples
- 39% of individuals in same-sex couples who have children are people of color

**According to the Bureau of Labor Statistics:**
- In 2019, 81.1% of U.S. families had at least one employed family member, a small increase from 80.8% in 2018
- Mothers with young children are less likely to be working or seeking work than those with older children. In 2019, 66.4% of mothers were working with children under age 6. 76.8% of mothers were working whose youngest child was age 6-17
- In 2019, 33.4 million families, or two-fifths of all families, included children under age 18 in the U.S.

**Lessons for Learning**

The media materials presented below provide useful information about family status through stories and data. Moreover, the various media sources illustrate ways you personally can support a more equitable system at Mass General Brigham.
Media Materials

Articles

- **The (COVID-19) Pandemic Is a ‘Mental Health Crisis’ for Parents**
  This article from *The New York Times* discusses how COVID-19 has affected caregivers with children and impacted their mental health.

- **The Realities of Raising a Kid of a Different Race**
  This commentary from *Time* magazine explores the reality of parents who raise children of a different race than their own while debunking common myths.

- **Family structure and health, how companionship acts as a buffer against ill health**
  This article from the *Health and Quality of Life Outcomes Journal* discusses how family structure and its composition are social determinants that may affect health behaviors and outcomes.

Podcasts

- **The Many Faces of Adoption**
  The series of four podcasts from National Public Radio offers stories from different perspectives of adopted families.

- **Transracial Adoptees on Their Racial Identity and Sense of Self [transcript available]**
  This podcast from National Public Radio’s Code Switch series interviews children who were adopted by families of a different race than their own.

Videos

- **The future of families: four discoveries that change everything**
  In this TED Talk, founder of The Family Room LLC George Carey discusses how a new generation of Millennial parents have replaced traditional family hierarchies with something new.

- **How the Nuclear Family Broke Down**
  This video from *The Atlantic* argues that the nuclear family is no longer the norm – and it should no longer be the ideal. It notes that across the world, 38% of people still live with extended family. Over the past half-century, people living alone in the U.S. has doubled.

- **My Two Mums (The Myths of Gay Adoption)**
  In this TED Talk, Lynne Elvins shares the story how she and her partner became the first gay couple to be approved for adoption in Bristol, UK in 2004.

Questions for Reflection

1. Think about who you consider family. What does your family look, feel and sound like? Does it match the “family picture” that media in the 1950’s and 60’s portrayed (Married white man and a woman, two kids, living in suburbia with a white picket fence and a dog)? Do you feel your idea of family is fairly represented in the media today?

2. There are many influences in our lives that shape how we view our families. Where did your ideas of family come from? Has your cultural upbringing influenced your ideas of family? Our ideas of families go beyond our own. How has your own idea of family influenced the way you interact with patients and their families? Has your idea of family shaped how you view your own team at Mass General Brigham?

3. Families are dynamic and different to individuals. Has there been a time when someone made the wrong assumptions about you and your family? How did that feel, and how did you react? Have
you ever assumed about someone else’s family that was incorrect? How did they react? What did you learn from that situation? How often do you ask for clarification around someone’s family dynamic?

Skills for Application

Whether it’s in our daily interactions with others or in creating change across the Mass General Brigham system, there are simple steps we can all take to be inclusive of people of all family statuses.

Skills for Every Day with Colleagues

Use Inclusive Language to be Inclusive of All Families

Many people have a different understanding of what it means to be a family. The idea and structure of a nuclear family is pervasive throughout our society. However, patients and colleagues may have completely different family structures than our own, which are extremely meaningful to them. Ensure that you are not assuming the type of family someone may have based on a stereotype. Use inclusive language with regards to family status. If you are unsure about an individual’s family history and whether they may not have been raised by their parents, consider using “parents/legal guardians” instead of just “parents” or “mom and dad” to describe the caretakers of children. Also if you are unsure about the gender identity of a patient’s family members, you may want to use “they, them, theirs” pronouns to ensure you are not unintentionally misgendering people.

Skills for Organizational Work

Ask, Don’t Assume Family Status

Though it may appear to be clear on the surface, it is not always right to assume what a familial connection between two people may be. Oftentimes, our idea of a family structure based on preconceived notions may not line up with others’ families. As a result, it is vital to ensure that you inquire about one’s family status rather than automatically assuming it. Instead of stating the relation between two people that you infer (“So, you and your sister—”), ask what the relation is (“What is the connection between you two?”). It is also crucial to note that any people may be related to anyone—which includes people with different racial identities. Always ensure that you are allowing others to inform you.

Terminology

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<tr>
<th>Nuclear Family</th>
<th>The traditional definition for Nuclear Family is a family group that consists only of two married parents of opposite genders and their children they raise in the household.</th>
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<tbody>
<tr>
<td>Blended Families</td>
<td>Families formed when remarriages occur or when children living in a household only share one or no biological parents. The presence of a stepparent, stepsibling or half sibling designates a family as blended.</td>
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<tr>
<td>Extended Families/ Households</td>
<td>A family/household that contains children who have a relative(s) present in the home that are the child’s parent or sibling. This can also include households where a non-relative person is present in the home but is regarded as family none the less.</td>
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Resources

- **Mass General Brigham EAP (Employee Assistance Program)** (Services, Information)
  The Employee Assistance Program (EAP) is a voluntary workplace-based consultation, short-term counseling, information and referral program for employees and their household members. Professional, licensed EAP counselors provide private, confidential and safe assistance for all types of work/life, family or personal concerns. EAP services include free, confidential consultations; short-term problem focused counseling and community referrals for treatment or other assistance and is a liaison between the workplace and community resources.

- **Boston Housing Resources List for Families** (Information)
  A guide to the Greater Boston Area’s available resources to assist with affordable housing, shelters & advocacy groups, as well as food & nutrition resources. This resource guide is provided by Boston Children’s Hospital Laboratories of Cognitive Neuroscience.

- **Family Nurturing Center (Dorchester)** (Services, Advocacy, Information)
  The mission of Family Nurturing Center (FNC) is to work with others to build nurturing communities where children are cherished, families are supported, and healthy human development is promoted by all. Working with the Department of Children and Families and other social service agencies, the FNC trains individuals for programs across the region and supports the development of new programs.

- **Massachusetts Family Resource Centers** (Services, Advocacy, Information)
  Supported by the Massachusetts Executive Office of Health and Human Services and the Department of Children and Families, Massachusetts Family Resource Centers (FRCs) are located in each of the 14 Massachusetts counties. FRCs are places where skilled and thoughtful professionals help parents, children, and families find emotional support and practical assistance to succeed in life. FRCs offer sensible solutions to families seeking health, safety, educational, and employment services.

- **PFLAG (Parents, Families and Friends of Lesbian & Gays)** (Services, Advocacy Information)
  Founded in 1973, PFLAG is the first and largest family based organization for LGBTQ+ people. PFLAG supports LGBTQ+ people, their parents and families, and allies. With over 400 chapters and 200,000 members and supporters crossing multiple generations of families in major urban centers, small cities, and rural areas across America, PFLAG is committed to creating a world where diversity is celebrated and all people are respected, valued, and affirmed.