## Modified Horatio-Alger Exercise

## *(Adapted for a global health context by Dr. Varun U. Shetty from Ellen Bettman’s adaptation of an activity developed by Martin Cano, Valeri Tullier and Ruch Kacz of ‘A World of Difference’)*

**Background:**

Horatio Alger Jr. was a 19th century American author whose stories had a common theme of a poor, hardworking person rescued from their condition usually with an extraordinary act of bravery, determination or honesty. This may have led to a common and often inaccurate presumption that anyone can escape their condition with hard work and determination. It is often forgotten that unequal employment and education opportunities and health disparities are built into our socioeconomic system. The Horatio Alger exercise was originally developed to lay bare the racial prejudices and privileges that influenced a variety of situations in life. We believe that this exercise can also be used to evoke empathy and understanding of healthcare disparities that come with inequalities in access to healthcare in a global health setting.

**Objectives:**

To illustrate *unearned* privilege, oppression, disparity within an audience where it is not always apparent. This exercise aims to use the Horatio Alger exercise to lay bare, first the inequities built into our society, and then use that to understand healthcare disparities inherent to the world we live in.

**Requirements:**

1. Time: 45-90 minutes. Preferably 90 minutes, especially if a larger group
2. Space: Room large enough to accommodate participants, with lots of room length-wise to allow for demonstration of difference between people in the front of the line versus people in the back

**Method:**

1. Set the stage. Make people comfortable with each other. This might be easier to do if your audience is made of residents or nurses who have been with each other for more than a year. You could ask them to pair up and come up with reasons why they came to this particular workshop, or what they think they would gain out of this workshop.
2. Avoid people from joining in late. It will cause confusion and will dilute the effect of the exercise.
3. Explain the exercise. Make it clear that this exercise will need their cooperation, their willingness to be open, to not be afraid to feel strong emotions in the presence of so many people- because everyone else will be feeling similarly.
4. Conduct the exercise. Ensure that there is enough room to move in the space provided. Refrain from moving chairs, desks etc right before the exercise as this might dilute the effect of the exercise. Prepare the room beforehand.
5. Process people’s thoughts and feelings. This can get out of control and one needs to be sensitive and careful. Ask if anyone would like to reflect on being in their particular position, either front, middle or back of the room. If nobody volunteers, consider picking on the person in the front first. Ask them how they feel about being in the front. Surprised? Indignant? Disbelief? Some people might get angry, refusing to accept the position of relative privilege. Some, in the back, may be sad, ashamed, embarrassed. Be sure to take into account these possibilities, and try to make them comfortable to see the differences, the disparities that are inherent in the society, but not visible. That is exactly the point of the exercise.
6. Know your audience. Tailor your questions according to the kind of audience you have. For example if you have only white people, focus on gender issues, if only males, focus on race, ethnic and economic issues, if it’s an audience in India, then tailor questions on caste, economic and gender grounds. There is disparity everywhere, one needs to find it.
7. If using a global health perspective for a western audience, you can evoke disparities and process the questions before bringing up the global health focussed questions. These could highlight the common privilege that we all have here in developed economies.
8. You can make any number of statements based on real statistics and apply it to your audience. When picked correctly, the effect can be poignant.

**Statements:**

1. Insurance coverage for black, hispanic and native american populations is significantly lower compared with White, non-hispanic and Asians. Take a step back if you are black, Native American or Hispanic.
2. All those who went to a private school before college take one step forward.
3. All those who were raised in a community where the vast majority of the police, politicians and government workers were not of their ethnic or racial group, take one step back.
4. All those who commonly see people of their race of ethnicity as heroes or heroines on TV programs or movies, take one set forward.
5. All those who commonly see people of their race or ethnicity as heroes or heroines on TV programs or movies in roles you consider degrading, take one step backward.
6. All those whose ancestors were slaves in the US, take one step back.
7. All those whose parents spoke English as a first language, take one step forward.
8. All those who have vacationed in a foreign country before their 18th birthday take one step forward.
9. All those who had to take loans for college/medical school take one step back.
10. All those who’ve been taken to art galleries or museums by their parents take one step forward.
11. All those who have an immediate family member who is a doctor or lawyer, take one step forward.
12. All those who were educated in schools where the vast majority of the faculty members and staff were of your racial or ethnic group, take one step forward.
13. Non-elderly Hispanics have the highest uninsured rate, with nearly one in three lacking coverage (32%), followed by American Indians/Alaska Natives (27%), Blacks (21%), and Asians/Pacific Islanders (18%), who are all more likely than Whites (13%). All blacks, native Americans and hispanics take one step back. ([KFF.org](http://kff.org)).
14. Even though the majority of Hispanics, Blacks, and American Indians/Alaska Natives have at least one full-time worker in the family, they are more than twice as likely to be poor than Whites. ([KFF.org](http://kff.org)). WHATS THE QUESTION?
15. If you had negative role models of your particular identity (religious affiliation, gender, sexual orientation, class, ethnicity) when you were growing up, take one step back.
16. If you can turn on the television or open the front page of the paper and see people of your ethnicity or sexual orientation widely represented, take one step forward.
17. Infant mortality rate is highest for non-hispanic blacks and native americans. Non-hispanic blacks and native americans take one step back.
18. Hispanic women have the lowest percentage of primary care doctors in the US. Hispanic women take one step back. ([KFF.org](http://kff.org)).
19. If, as a child, you had a room of your own with a door, move one step forward.
20. If you have spent one year or more without health insurance, take one step backward.
21. If you’ve never had to hand a grocery store cashier food stamps for your food, move forward.
22. If you were rewarded as a child for being assertive and speaking your mind, move forward.
23. If most medical models for disease are based on your racial group, move forward.
24. If one or both of your parents never completed high school, move one step back.
25. If you can easily find birthday/valentine’s day cards picturing people of your skin color, move one step forward.
26. If your bags have never been searched in a store, move forward.
27. If you were ever stopped or questioned by police about your presence in a particular neighborhood, take one step back.
28. Overall American women make 79% of the income of their male counterparts. Women take one step back. (2014 US Census Bureau).
29. As of 2015, black people made up only 4% of CEOs in Fortune 500 companies and women made only 4.8% (<http://www.huffingtonpost.com/2015/01/29/black-ceos-fortune-500_n_6572074.html>) All black people take one step back.
30. If you have been called bad names because of your ethnicity, take one step back.
31. If you were raised in a home where a daily newspaper was delivered take one step forward.
32. If you have ever been bullied in school for your race, gender or sexual orientation, take one step back.
33. All who have been denied a job because of their race, ethnicity or sexual orientation take a step back.
34. If you had to hide your sexual orientation at any point in your life, for any reason, take a step back.
35. All those who ever inherited money or property take one step forward.
36. All those who were told by their parents that they were beautiful, smart and capable of achieving their dreams, take one step forward.
37. If you were ever physically, sexually or emotionally abused as a child, take one step back.
38. If you ever had to escape your home country because of war, take one step back.
39. If you have ever been held in a refugee, concentration or internment camp, take one step back.
40. All those who were raised in homes with children’s and adults books, take one step forward.

**Questions focused on Global Health:**

1. Twice the population of the United States (9% of the world’s population) lives without access to safe water. Come to this side of the room if you have access to safe water.
2. Over 2.1 billion people in the developing world lived on less than US $ 3.10 a day in 2012 (29%). Take two steps forward if you make more than four dollars a day.
3. One in nine people do not have enough food to eat to lead a healthy life. (www.wfp.org) Take one step forward if you have enough to eat to not go hungry. (<http://www.worldenergyoutlook.org/resources/energydevelopment/energyaccessdatabase/>).
4. In 2013, more than 2.7 billion people – 38% of the world’s population – are estimated to have relied on the traditional use of solid biomass for cooking, typically using inefficient stoves in poorly ventilated spaces. Take one step forward if you have a convenient gas stove in your kitchen. ( <http://www.worldenergyoutlook.org/resources/energydevelopment/energyaccessdatabase/>).
5. An estimated 1.2 billion people – 17% of the global population – did not have access to electricity in 2013, 84 million fewer than in the previous year.