



Department of Epidemiology

We, the leadership, faculty, staff, postdoctoral trainees, and students of the Department of Epidemiology, **publicly denounce individual and systemic racism in all its forms**. Sadly, racism and anti-Blackness continue to be hallmarks of living in the US and elsewhere throughout the world. This is not a time where we can or will be silent: [Racism Is A Public Health Problem](#).

Racism occurs at many levels: structural, institutional, interpersonal, and internalized. We are all witnesses to its devastating effects, including horrific losses of life due to police violence, as well as the systems of institutional racism that drive persistent health and healthcare disparities. The history of racism and oppression of Black Americans and other descendants of the African Diaspora in our country spans hundreds of years, beginning with the barbaric origins of the trans-Atlantic American slave trade. We continue to experience the consequences of historical and current mistreatment both at a societal level and as embodied in the health and well-being of Black individuals. In the most recent weeks and years, but rooted in centuries of oppression, these systems of racism have led to increased acts of police violence toward Black people, tragically resulting in the unnecessary loss of life to George Floyd, Breonna Taylor, Ahmaud Arbery, Freddie Gray, and countless others. As public health professionals, we are all too aware that underlying these shocking, high profile cases are patterns of persistent racial inequities and health disparities. The disproportionate burden of the COVID-19 pandemic is another recent reminder of racism's persistence.

It's time for real change: Every person must speak up and speak out, but we must do more than just speak truth to power — we must act and advocate to eradicate racism. These actions cannot fall to the shoulders of those targeted by racism. Those who have historically had power and privilege must also act. We each must choose to be allies, as standing by idly or silently is to be complicit in perpetuating racist systems and structures. Deliberate anti-racist action is required. This work first starts with examining the ways in which we have failed to condemn anti-Blackness and racism in our own public health work. To that end, we are thinking critically about how to address racism as a public health issue, and we continue to work internally with the Epidemiology Inclusion, Diversity, Equity & Science (Epi IDEAS) group on several initiatives.

Listen and act: We have already made coordinated efforts in the last few years to expand on topics of racism in our curriculum, but have also been deliberate to go beyond treating the examination of racism as a solely academic activity. We will continue to look introspectively at the ways in which we have been complicit in failing to dismantle institutional racism. In the short-term, this includes organizing several action-oriented listening sessions for faculty, staff, postdoctoral trainees, and students, and examining our own policies and practices of equitable consideration for awards, hiring, retention, and promotions for these groups. We commit to identifying ways to better support, elevate, and learn from our colleagues who have devoted their careers to health equity research and social justice, in order to promote a health equity competency and the inclusion of anti-racism frameworks within our core curriculum.

Lead as epidemiologists: We also want to leverage our position as a recognized authority in public health to look outward at how we, as educators, must reexamine anti-Blackness and policing policies as public health issues. To that end, we are working to develop videos, short courses, and recommendations to educate the public on racism as a public health issue.

Commitments: As leaders, faculty, staff, postdoctoral trainees, and students, we each commit to:

- Affirm that reducing health disparities and underlying racism is of major importance to epidemiology and our mission to improve health.
- Critically examine and change the ways in which we perpetuate racism through our research, educational practices, and departmental policies. For instance:

- Research: Implementing inclusive data collection and analytic methods (e.g., improving question framing around race and ethnicity, sampling methods, and community engagement) and prioritizing the conduct of health equity research
- Educational practices: Prioritizing racial justice and equity in our curriculum and other educational offerings as well as defining, measuring, and demonstrating how race and racism is intertwined with health
- Departmental policies: Improving recruitment, retention, and promotion of historically disadvantaged students, postdoctoral trainees, staff, and faculty.
- Allocate collective effort and resources to dismantling racism at each of its levels, starting with looking inward at ourselves, recognizing our privileges, and using that privilege to help others be anti-racist
- Create a climate that encourages us to examine the roles of racism, power, and privilege in perpetuating health disparities
- Address power dynamics that prevent us from centering on, hearing the lived experiences of, and supporting people who are most impacted by anti-Blackness and other forms of racism
- Protect, support, and promote those who call out racism and violence towards Black people and other people of color in our society
- Regularly assess and reassess these commitments in a sustained fashion

We must act. We the leadership, faculty, staff, postdoctoral trainees, and students of the Department of Epidemiology commit to addressing racism as a public health problem.