

# ADDRESSING SYSTEMIC RACISM IN SCHOOLS OF PUBLIC HEALTH: WHERE WE ARE

## WHY ARE WE WRITING THIS?

We are a group of administrators within the Office of Inclusive Excellence, faculty, staff, and students from a Masters concentration in Health Equity, Social Justice, and Human Rights at the Gillings School of Global Public Health at the University of North Carolina at Chapel Hill. [[Learn More about the Concentration Here](#)]. Following the increased support for the Black Lives Matter movement across the United States during the summer of 2020, we decided to work together to develop a manifesto for addressing systemic racism in schools of public health. This one pager distills that months-long effort, communicating what we, as administration, students, and staff members have committed to. We would like to honor the student activism that has been done to help create and strengthen this movement.

We also share our hopes for where the EQUITY concentration and the Gillings School can be. We believe in the possibility of collaborative and co-created syllabi, talking about race, reorienting grading systems, prioritizing the historical context of our knowledge and environment, and eliminating barriers to professional education. We would invite all other schools to join us.

## ADMINISTRATION COMMITS TO...



### Instituting Transformative Policy Change

Gillings established [an Assistant Dean for Inclusive Excellence](#) to lead strategic planning, development, and implementation of antiracism programs to enhance access, diversity, equity, and inclusion. Learn more from the Gillings [Inclusive Excellence Action Plan](#).



### Building Equity into Performance Reviews

Annual performance reviews of faculty by their Chairs includes reporting of equity-related activities in teaching, service, and research for consideration in salary increases and promotion.



### An Equity-Focused Admissions Process

The MPH Program eliminated GRE scores from student admissions consideration and requires all applicants to discuss how they will be actively anti-racist and disrupt systems of oppression in their public health practice.



### Increasing Efforts to Recruit Students of Color

To create a long lasting foundation of equity and antiracism in programs of public health, students of color should be actively recruited into BSPH and graduate programs. To address the impacts of historical racism on generational wealth and in light of the current racial wage gap, schools may prioritize funding for BIPOC students.

## STUDENTS COMMIT TO...



### Building a Culture of Humility

We know that we are all always learning and unlearning. We will offer each other grace, and create an environment of trust, where we can do this together.



### Caucusing

We will continue to participate in [race- and affinity-based caucusing](#) to discuss current and historical racial justice issues and our place within them.



### Speaking Up

We will call out microaggressions, harmful comments, and problematic curriculum with conviction and compassion, and recommend new approaches.



### Demanding Equity in the Classroom

We will use syllabus audits and critical analysis of our lectures to hold faculty to high standards - we believe that all curricula should reflect equity.



### Self-Reflection

We will take time out of our day to think about our positionality, actions, and words.



### Diversifying Media

We will prioritize regularly engaging with news outlets, media, and authors that view the world through an anti-racist lens.

## FACULTY & STAFF COMMIT TO...



### Creating Inclusive Learning Environments

Faculty and TAs will audit class syllabi and incorporate inclusive classroom techniques to ensure representation of diverse perspectives including on race and ethnicity.



### Prioritizing Student Feedback

Faculty will intentionally build in time throughout the semester for feedback from students, including a section of course evaluations on equity and cultural humility.



### Addressing Microaggressions

Gillings is planning to implement a microaggression reporting system, linked above, to monitor types and frequency of microaggressions in addition to microaggression training for those in teaching positions.



### Supporting BIPOC Scholars

Faculty and staff will recommend and [support BIPOC scholars](#) in research and course instruction.

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## FOR STUDENTS, FACULTY, AND ADMINISTRATION:

- Professors co-create their syllabi with the input and guidance of students, people with relevant lived experience, and other experts. Course content should highlight a diverse array of perspectives, and many pieces of course content should amplify the voices of racial and ethnic minorities.
- Course content is the foundation of the learning that happens in MPH programs. ALL courses should be grounded in the principles of health equity, social justice, and human rights.



### TALKING ABOUT RACISM

All schools should make a commitment to talking honestly and plainly about racism. Race is not a risk factor or a determinant of health. Living within a system of white supremacy while being a person of color is. It is important to explicitly name the forces and communities that we are talking about.



### PRIORITIZING COMMUNITIES' HISTORICAL CONTEXT

All students should be taught the complete, unaltered truth about the history of their universities and academic fields. All universities in the US (except tribal colleges and universities) stand on land stolen from Indigenous people. Many schools continue to negatively impact the neighborhoods and communities of color around them, with gentrification, rapidly expanding campuses, and prohibitively expensive housing. Many academic fields were built on the exploitation of people of color all across the world. We must not only be aware of this history, but prioritize it and let it impact the decisions that we make.



### REORIENTING GRADES

Graduate schools should abolish their grading systems and institute a Pass/Fail system across all programs. An extreme focus on grades, competition, and rubrics based on often subjective metrics emphasizes the idea that people can “achieve” a comprehensive public health education based on readings and papers alone. There is no arriving or perfection in this work, and we will not create change through an environment that fosters competition or comparison. Instead, we are all together on a constant journey of learning and unlearning. Programs that hyperfocus on grades and competition take away from the importance and reality of that journey.



### ELIMINATING BARRIERS TO PROFESSIONAL EDUCATION

All education should be as accessible as possible. Graduate schools should remove any standardized tests from their application criteria, and evaluate applicants more holistically. A focus on personal statements, relevant experience, and letters of recommendation will ensure admitted students have passion and commitment, instead of just financial access to standardized test preparation services.

Undergraduate and graduate colleges and universities, trade schools, and community colleges should all transition toward a tuition-free model. This monumental shift in accessibility would allow anyone who wants to obtain an education to do so, without taking on a staggering amount of debt.

### ACKNOWLEDGMENTS

Thank you to Ali Zuercher, Elizabeth Holland, and Geni Eng for creating this one-pager, to members of the EQUITY Work group (Amanda Rietti, Susanna Whitman, Caroline Ritchie, Nyla Ruiz, Brittany Price, and Courtney Woods) who collaborated to create this content, and to the inaugural cohort of the EQUITY concentration for contributing to the learning community from which these ideas have developed.



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