

## Reclaiming the White Coat for Black Lives

White Coats for Black Lives (WC4BL) was born in response to apathy. While people were mourning the deaths of Michael Brown and Eric Garner and were enraged by the nonindictments of the officers who killed them, the medical institution—which has historically had racism built into its foundation—largely remained silent. In December 2014, medical students of color and allies across the country participated in die-ins to honor these individuals and demonstrate a commitment to dismantling the systems that led to their deaths. The actions of these students raised an important question to the institution of medicine: are medical professionals responsible for combating racism? For these students, who found themselves committed to a profession that has vowed to support the well-being of all patients and has consistently broken that promise, the answer was an emphatic yes.

### #BLACKLIVESMATTER

As an organization of medical students, White Coats for Black Lives serves as a voice within medicine answering the call of the Black Lives Matter movement, which brings anti-Black racism into focus and fights for the lives and well-being of all Black people. This organization serves as a platform for us, as

medical doctors-in-training, to collectively speak up against the injustices we see both within and outside of our health care system, and become advocates for those receiving disproportionate care. Established on Martin Luther King Jr Day, 2015, WC4BL's mission is to "eliminate racial bias in the practice of medicine and recognize racism as a threat to the health and well-being of people of color."<sup>1</sup> Our mission takes the form of three main goals, which are illustrated below. We hope to demonstrate that our efforts are not just political, but personal. Furthermore, in all that we hope to accomplish, we are indebted to activists of both the present and the past who have not only laid our foundation, but also proven that our voices, while young, are powerful.

### ELIMINATING RACIAL DISCRIMINATION IN HEALTH CARE

WC4BL questions and expands the scope of our responsibility to our patients' health and challenges how the structures of institutions negatively impact our patients' well-being. Racial and socioeconomic discrimination are present in countless institutions, including education, housing, policing and the criminal justice system. Many Black activists, including those of the

Black Panther Party, took seriously the WHO's 1948 definition of health as "a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity."<sup>2</sup> Without dismantling racism in all of our societal institutions, people of color—Black individuals in particular—will not have full access to health. This is why we believe it is important to name police violence as a public health issue. As we work toward equity in medical institutions, we seek partnerships with other organizations to fight for racial justice outside of the health care system. Racism is a direct threat to health, and without racial justice in all parts of society, individuals and communities of color cannot fully achieve health as a state of complete well-being.

Many barriers in the medical system prevent racial minorities in the United States from receiving health care that is equivalent to the care of those most privileged in our country. Those barriers include insurance status,<sup>3</sup> other socioeconomic

factors, and racial discrimination.<sup>4</sup> In addition, biomedical research has historically characterized the very bodies of Black people as being the center of countless diseases, without thinking critically about how socioeconomic disparities and historical institutional discrimination have led to the disproportionate amounts of disease observed in minority populations. For example, during and after the Civil War, most doctors believed that Black people had smaller lung capacities, and thus had a predisposition for tuberculosis.<sup>5</sup> More recently, a study showed that many White medical students and residents hold false beliefs about biological differences between Black and White people ("Black people's skin is thicker than White people's skin") and that these false beliefs result in improper treatment recommendations for Black patients.<sup>6</sup>

We strongly believe that proper health care should not be a privilege for those with the means, but is a right of every individual, no matter their identities. We also believe that those who provide this service must be conscious of how social identities and histories of discrimination can impact one's

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health. Therefore, the members of WC4BL strive to collectively identify, reshape, and reconstruct how race is applied to biomedical research, medical treatments, public health policy, and medical education. As we are taught about health disparities in medicine, we can concurrently challenge the validity of research that has been taught year to year without explanation of the predisposing economic, social, and political factors that cause these health inequities. We recognize that communities of color have had to fight for their right to adequate and responsible health care in the United States for decades, even centuries, and we hope to further this work by transforming the medical institution from within.

### PREPARING FUTURE PHYSICIANS TO BE ADVOCATES FOR RACIAL JUSTICE

As new members of the medical workforce, we not only fight and demand for the health workforce to be reflective of the diversity of the national population, but also push for the education of all physicians with regards to racial justice. We believe that a physician cannot effectively address the well-being of racial minorities without being able to recognize and combat racism. We push our institutions to reconceive the way they educate us about race and racism. Until our institutions can provide this training, we work to develop alternative curricula to educate ourselves and our peers. Through

teach-ins, elective courses, discussions, and articles, we challenge racist medical knowledge and research, give voice to long histories of medical abuses, and explicitly name institutional, scientific, and anti-Black racism; all work that was paved by past and present Black activists.

### SIMILARITIES AND DIFFERENCES WITH THE BLACK PANTHER PARTY

WC4BL is committed to extending the work of the Black health advocates who came before us, in particular those of the Black Panther Party. At the core of the Black Panthers' activism was a commitment to the

safety, well-being, and self-determination of Black people. They advocated for free health care for all oppressed people, identified racism as a direct threat to the health of people of color, pushed back against racist medical beliefs, and empowered the communities they served by disseminating medical knowledge and techniques. They built free medical clinics, provided food and clothing assistance, and encouraged community education. In summation, the Black Panther Party provided an alternative model of health care; a model that holds the health and the empowerment of the patient above all else, and for which we—and the medical institution—will be forever grateful.



Medical students at Howard University College of Medicine participate in the WC4BL Die-in in December 2014. Courtesy of Ahmad Kerr, a fourth-year medical student at Howard University.

While we see our work as complementary efforts toward similar goals, there are many differences between WC4BL and the Black Panther Party, for instance, the fact that we work within the medical institution while they worked from the outside. As members of elite medical institutions, we have an immense amount of social and structural power in relation to patients and disadvantaged communities—a power imbalance that the Panthers aimed to eliminate. In addition, many of the Black Panthers risked their lives through their bold political actions in the face of a police force and government that aimed to dismantle their movement and kill them. From armed self-defense to the provision of food, the Black Panthers went to great lengths to not only physically protect their communities, but empower them. These actions cost them dearly, and some did not survive. The reality is that we speak from not only a more privileged position, but a safer one.

Fifty years later, we continue to be inspired by the legacy the Black Panthers created as young activists. As younger members of the medical institution, we can bring a vibrant energy and a resonating voice that will speak to the history of abuses within medicine and advocate for a just future. Similar to the Black Panther Party at its peak, our youth is one of our greatest assets. It gives us the brash confidence to push against the social injustices we observe, and freshness to force change in the institutions we have recently joined. We do not face as extreme of circumstances as the members of the Black Panther Party experienced during their time. Yet, we hope that we can embody their energy and push our institutions to

mitigate, and ultimately eliminate, institutional racism and racial discrimination not only in medicine, but in all areas of our society. Only then can we achieve health of the body and mind. *AJPH*

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#### CONTRIBUTORS

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