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Lessons Learned on Addressing Racism: Recommendations from The Society for Research on Nicotine and Tobacco's Racial Equity Task Force

SRNT's Racial Equity Task Force,

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This editorial reviews the recommendations of the Society for Research on Nicotine and Tobacco's Racial Equity Task Force on how to address individual and institutional racism within academia in general and within the field of commercial tobacco and nicotine science.

In light of increased international awareness of the fatal conse-quences of racism, in August 2020, the Society for Research on Nicotine and Tobacco (SRNT) Board of Directors created the Racial Equity Task Force (RETF). The RETF was charged with identifying problem areas within SRNT and recommending changes that would advance an anti-racist agenda in SRNT and promote racial equity both within SRNT and in the field of nicotine and commercial tobacco research. SRNT, an international scientific society with the majority of members residing within the United States, acknowledges and strives to better understand and intervene on racism, from structural to individual levels, to advance nicotine and

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None.

commercial tobacco research and reduce unequal tobacco-related harms. Racism exists across the globe and takes different forms depending on the context. Despite this complexity, an important part of this effort is to reflect on SRNT's own policies and practices, to ultimately eliminate all forms of racism from SRNT.

To achieve this goal, the RETF engaged in various data collection activities to identify where racial equity-promoting policies, procedures and practices were present or absent within the Society. This included a comprehensive review of the foundational documents that guide SRNT's activities and decision-making and listening sessions with seven key informant groups: SRNT-Europe and SRNT-Oceania Chapter leaders, current leaders from the eight topical Networks, Annual Meeting Program Committee representatives, the Editor-in-Chief of the Society's journal (*Nicotine & Tobacco Research*), SRNT University leaders and the founders of the SRNT Health Equity Network. Based on this information, the RETF developed recommendations for SRNT to become an anti-racist nicotine and commercial tobacco scientific society; the recommendations were then circulated to all Society members for feedback and then submitted to the Board of Directors.

It is important to recognize that structural racism and racial/ethnic bias has been deeply embedded and persists in research [1], including biomedical research, to the point of some researchers being told that 'health disparities' research is 'not science' [2]. Although these recommendations are specific to SRNT, many of these recommendations have broad relevance to addiction science and academia. The recommendations presented here are not a comprehensive list of specific recommendations from the RETF [3]; rather, they are summaries of task force recommendations. Table 1 summarizes key RETF recommendations related to the structure of SRNT, highlighting the importance of embedding systems that will assess and address issues of racial equity, holding SRNT accountable. Such systemic changes are critical to ensure that SRNT embodies the value of being anti-racist. Table 2 summarizes key RETF recommendations related to nicotine and commercial tobacco science and its dissemination, including ways to increase the visibility of science that addresses health inequity and, importantly, does not exacerbate inequities, and ways to promote diversification, particularly the inclusion of racialized groups in the scientific workforce. Collectively, these recommendations will begin to address the gaps in anti-racist policies and procedures that are common in many institutions as well as research-specific calls for action.

RETF recommendations also attempt to acknowledge, address, or mitigate the racist history of commercial tobacco in the United States and globally. Built on racial capitalism, the racist history of commercial tobacco began with colonization adulterating and modifying the sacred Indigenous tobacco plant as a plantation crop for 'recreational use' and continued with the abduction and enslavement of African peoples who, under violent conditions, were forced to plant and harvest tobacco for the purpose of financial profit in the United States and beyond. In addition to the colonization of tobacco, the ongoing racism of the commercial tobacco industry includes, but is not limited to: targeting highly racialized communities with tobacco advertising and marketing [4–8]; co-opting Indigenous imagery to sell commercial tobacco products; actively promoting e-cigarettes among Indigenous health services [9–11]; sponsoring cultural events tied to racialized and ethnic culture in the United States and Mexico (e.g. activities related to Black History Month, Cinco de

Mayo and Chinese New Year) [12,13]; sponsoring music events in sub-Saharan Africa [14]; and positioning themselves as partners for economic growth in low- and middle-income countries [15,16]. Given the on-going racism inherent in tobacco industry policies and practices, the RETF recognised that the presence of the tobacco industry in the research environment is harmful to the integrity of nicotine and commercial tobacco science [12,15]. This is particularly important given the inherent conflicts of interests between health and wellbeing and reducing health inequities, and the long and ongoing history of the tobacco industry funding research or using its own research to slow, disrupt or prevent implementation of programs and policies that save lives [17–23]. Therefore, the RETF recommended explicit distinctions between commercial and ceremonial tobacco, public acknowledgement and denouncement of racist practices by the tobacco industry, and the prohibition of tobacco industry employee involvement in Society activities to strive towards the elimination of racism from the SRNT.

This editorial highlights the urgent need for academia in general, and every specific scientific organization and society, to evaluate how to improve its structures and how to conceptualize, conduct, report and disseminate research findings to reduce the impact of racism in science and its subsequent findings and in public health. SRNT has taken the first steps by actively recognizing the need for change and that the separation of health equity research in addiction and nicotine and commercial tobacco research actively perpetuates inequities and inequalities. However, these are only the first steps. Racialized peoples are dying at the hands of the tobacco industry from commercial tobacco-caused disease, as well as addictions to other substances [23]. As is commonly the case where race is embedded in the fabric of society in immoral and unethical ways, deaths and diseases resulting from race are morally and ethically unforgivable. It is long overdue for scientific organizations and societies, including SRNT and the Society for the Study of Addiction, to reflect on how practices and policies should be improved to urgently eliminate racialized inequities, and ultimately, eliminate addiction-related deaths and diseases.

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TABLE 1

Key structural recommendations that address SRNT's structure, mission, and values

Create a standing racial equity committee charged with monitoring and implementing policies to address structural racism and enhance diversity in nicotine/commercial tobacco science, with one member appointed to the Board of Directors as an ex-officio, non-voting member.
Update policies and procedures to promote a culture of inclusivity across all programs and activities, ensure that research on and with minoritized, racialized and Indigenous populations is valued and promoted, ensure transparent and inclusive decision-making processes.
Seat a racially, geographically and discipline-diverse membership committee responsible for tracking and increasing representation of under-represented groups in the membership.
Comprehensively review the Society's bylaws (eligibility surrounding membership, voting and running for elected office), identify and mitigate/remove those that penalize members from minoritized, racialized and Indigenous communities.
Adopt policies and practices that promote an inclusive and anti-racist culture within the Society (e.g. conduct a land acknowledgement in accordance with local practices at Society-sponsored events; support minority-owned businesses; consider state and local social policies when selecting potential host cities for conferences).
Develop a clear statement of commitment from the Society's Board of Directors to cultivate a safe space for diverse perspectives, respectful discourse and thoughtful decision making that applies to the Board of Directors as well as all appointed groups (e.g. special interest groups, committees).
Update the Society's guiding principles and values to reflect a commitment to being an anti-racist scientific society.

TABLE 2

Key scientific and dissemination recommendations for the annual meeting, flagship journal, and SRNT University

Develop procedures for selecting a diverse group of conference Program Committee members and abstract reviewers.
Elevate research on minoritized populations and health equity to the same extent as other areas of study (e.g. basic science, policy or treatment research) at annual meetings (e.g. create a 'Health Equity track' for abstract submissions; require abstract submissions to articulate how the work addresses racial/ethnic disparities and make this an evaluation criterion; allow non-members with relevant racial/health equity expertise and/or lived experience to serve as Program Committee members and/or reviewers as appropriate).
Find creative ways to encourage diversity among meeting attendees (e.g. develop procedures to ensure diversity with respect to race/ethnicity, Indigeneity, gender and geography during abstract selection process; ensure at least one of the speakers in panel presentation sessions represents such diversity).
Revise membership dues and meeting registration fees to minimize financial barriers for scientists from under-represented groups and from smaller institutions with fewer financial resources compared to large research institutions.
Develop ways to track and promote racial/ethnic/Indigenous diversity among all editorial staff (editor, deputies and associates), reviewers and authors of the Society's flagship journal, Nicotine & Tobacco Research (NTR).
Incorporate use of a specialty deputy editor (or an editorial team) for racial equity, to review NTR papers that specifically examine or address race/ethnicity.
Clearly state how race, ethnicity and Indigeneity should be addressed in NTR submissions (e.g. language to address specific population groups, providing context for analyses and/or findings related to race) in the Instructions for Authors and Instructions for Reviewers, with a specific acknowledgement that race has been used to harm specific populations in the past.
Develop specific content focused on health equity-centred topics, including but not limited to: community-based participatory research, methods for conducting ethical research with Indigenous populations, de-colonizing tobacco research (e.g. appropriate language, methods), exploring privilege and how membership in a privileged group can influence worldviews and research and tobacco's role in health inequity.