Minnesota Chapter of the American College of Physicians (MN-ACP)  
On Becoming an Anti-Racist Organization  
July, 2020

The Minnesota Chapter of the American College of Physicians (ACP) is committed to becoming an anti-racist organization.

The state of Minnesota, like the entire country and indeed the world, is in the midst of two pandemics. One is Covid-19 which has challenged our norms of practice and societal life for just the last six months. The other is systemic racism which has been present for hundreds of years in this country.

The killing of George Floyd by officers from the Minneapolis Police Department highlights the need for the medical community to re-examine our history, our current practices, and our plans to dismantle systemic racism. George Floyd’s killing was wholly unacceptable, was entirely preventable, and is unfortunately another recent example in a lengthy history of Black, Indigenous and People of Color (BIPOC) killed by law enforcement.

As a member-driven organization representing over 2,500 internal medicine physicians and affiliated health professionals, the Minnesota Chapter of ACP through this statement reaffirms its stance against structural racism and outlines its plans to act in furtherance of this stance.

Acknowledgement. Structural racism is prevalent, unacceptable, and is a public health crisis. Minnesota enjoys some of the highest quality of life in the United States by many measures. However, Minnesota also has some of the worst racial disparities in the country, evidence that the benefits of high quality of life are not experienced equitably by all in the state (1,2).

Although systemic racism exists in multiple facets including housing, education, criminal justice, and law enforcement, it is also important to acknowledge the role of racism in healthcare. There have been numerous studies published over the years linking racism to healthcare disparities. As such, racism is a social determinant of health and thus a public health issue. Unsurprisingly, in a recent statement, the American Public Health Association (APHA) noted that “Racism is an ongoing public health crisis that needs our attention now.” We agree with that assessment.

Health care leaders, delivery systems, and educators have failed to use the well-established data on healthcare disparities to make meaningful changes to improve the health of communities of color. There are glaring racial disparities on multiple measures and on life expectancy. BIPOC are under-represented at all levels of medical education as well as leadership roles within health care systems and organizations.

Apology. The Minnesota Chapter of ACP apologizes for our failure to address systemic racism. Racism is sometimes minimized as being solely an effect of individual racist thoughts and prejudices. With that perspective, some argue that it is not appropriate for organizations to apologize for past practices and policies since an organization cannot hold racist and prejudicial thoughts.

We reject that notion.
As noted by the American College of Physicians in a recent policy statement, “Discrimination, and racism more specifically, exists on a spectrum ranging from individual to the institutional to the structural.” (5) As such, we must be honest in reflecting on our historical role and how we have systemically disadvantaged or excluded BIPOC. Recognizing that truth, the Minnesota Chapter of ACP humbly apologizes for systemic racism that has existed in our own organization.

**Action. The Minnesota Chapter of ACP intends to take action to become an anti-racist organization.**

Even as we grapple with the uncomfortable truths that systemic racism is real, pervasive, and that each must actively work to counter our own complicity as individuals and organizations, the Minnesota chapter of the American College of Physicians will strive to become more anti-racist with following actions.

1. The Chapter endorses the recent position paper by the American College of Physicians, “Racism and Health in the United States: A Policy Statement from the American College of Physicians” which boldly calls for action against racism in healthcare and in particular in law enforcement in the aftermath of George Floyd’s killing.

2. We commit to identify and eliminate any policies or other barriers that discourage BIPOC from fully engaging in our Chapter activities. Recognizing that racist policies decrease equity and anti-racist policies increase equity, we will review all policies, procedures through an anti-racist and equity lens.

3. We commit to representational diversity in all areas of the Chapter, including on the Chapter Council, committees, educational events, and social events.

4. We will ensure that speakers at our Scientific Meeting and other events will have significant representation from BIPOC and that educational topics address racism and disparities in healthcare.

5. We will develop BIPOC leaders while calling on non-BIPOC members to examine their own actions and to drive change in the Chapter and broader society.

6. We will encourage our members to be active in advocacy at the local, state, and national level in favor of anti-racist policies in healthcare systems, medical education, and in government.

7. We will humbly support our members through these difficult conversations. We will lift up the voices of BIPOC while we challenge and support all members in our quest to change the conversation. We will strive to be a supportive and inclusive Chapter that represents all of Minnesota.

8. The Chapter will hold itself accountable by implementing a Diversity, Equity, and Inclusion strategy with the chapter Council to implement a diversity/equity/inclusion lens to all activities. We intend to hold all members and council accountable to ensuring change.

Approved by the Chapter Council of the Minnesota Chapter, American College of Physicians, July 15, 2020.
David R. Hilden, MD MPH FACP, Governor.

References

1. Multiple reports from Minnesota Department of Health accessed 7.20
2. “Race in the Heartland” University of Iowa and Iowa Policy Project October 2019 accessed 7.20
3. Unequal Treatment, Confronting Racial and Ethnic Disparities in Healthcare, Institute of Medicine, 2003
4. Racism and Health, American Public Health Association 2020: