



# A call to action to disrupt anti-Blackness in public health practice

## THE NCCDH HAS ISSUED THE FOLLOWING CALL TO ACTION TO DISRUPT ANTI-BLACKNESS IN PUBLIC HEALTH PRACTICE

In this statement, written by Sume Ndumbe-Eyoh on behalf of the NCCDH team, the NCCDH calls for action regarding the ongoing structural racism demonstrated in anti-Black police violence. This action demands that the public health sector transforms its institutions in the short and long term to be fully committed to ending racial injustice.



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**ANTI-BLACK RACISM KILLS.** Through police violence and other manifestations of structural violence in our institutions and societies, the bodies and souls of Black people are constantly under attack with dire consequences for health and well-being, death being the most extreme of these consequences.

We remember Regis Korchinski-Paquet, D'Andre Campbell, Abdirahman Abdi, Andrew Loku, Chevranna Abdi, George Floyd, Breonna Taylor and Ahmaud Arbery and many more Black men, women and gender-diverse folks across Turtle Island whose lives have ended too soon at the hands of the police.

To the diverse Black communities who are part of our NCCDH community, we see you and we feel you. Our hearts are heavy

with grief and, still, across the globe, Black communities continue to rise in the face of profound injustice.

## Joining the call

We add our voice to the call from Black communities, Black health leaders and many others that anti-Black racism is a public health emergency and has been so for a long time.

In 2018, the Canadian Public Health Association released a position statement acknowledging that racism is a public health issue. It is time for all organizations to share the burden of racial inequities all too often carried by racialized communities alone. We have to move beyond declarations of acknowledgement to

deeply understand the significance of anti-Black racism on the health and well-being of Black people across the country and globally. For public health organizations, this is the time for us to all step up, follow the leadership of Black communities and act to transform the systems that threaten Black lives.

Within our own institutions, Black staff who are experiencing profound levels of grief and trauma need appropriate support.

## Concurrent transformation needed

Public health needs to transform our own institutions and invest both now and in the long term in the well-being of Black communities. To do so will require divesting in White dominance and control of Black lives through institutional and structural racism.

Some manifestations of anti-Black racism in public health institutions include:

- lack of meaningful engagement with Black health concerns and a failure to act in the face of overwhelming evidence of the impact of anti-Blackness on health;
- continued refusal to collect and analyse race-based data and the impact of systemic racism on health through critical race approaches, and the lack of community engagement, governance and control when these data are collected; and
- governance and leadership tables that exclude critical Black voices and perspectives.

## NCCDH resources regarding racism and health equity

### INTRODUCTORY DOCUMENTS

- [Let's Talk: Racism and health equity](#)
- [Key public health resources for anti-racism action: A curated list](#)

### CASE STUDY

- [Learning from practice: advocacy for health equity - environmental racism](#)

A case study on the experience of Nova Scotia-based Environmental Noxiousness, Racial Inequities and Community Health (ENRICH) project led by Dr. Ingrid Waldron in advocating against environmental racism that impacts Mi'kmaq and African-Canadian communities.

## A public and population health approach

A public and population health approach necessitates committed action to eliminate racial injustice. We echo the evidence-based recommendations from the American Public Health Association in its 2018 policy statement titled [Addressing law enforcement violence as a public health issue](#):

1. Eliminate policies and practices that lead to disproportionate law enforcement violence for Black communities.
2. Implement accountability in law enforcement.
3. Invest in the social determinants of health for Black communities and improve racial and economic equity.
4. Implement community-based responses that reduce harm and prevent trauma.
5. Support public health engagement with law enforcement to document the law enforcement contact, violence and injuries.

These recommendations are within reach in Canada. However, we need the will and commitment to bring them to life.

We remain steadfast in our [commitment](#) to actively embed anti-racism practices into all aspects of our organization.

### WEBINAR RECORDINGS

- [Racial health equity: Embracing a decolonial, anti-racist practice](#)
- ["Racing" the social determinants of health and health equity \(Part 1 of 2\)](#)
- ["Racing" the social determinants of health and health equity \(Part 2 of 2\)](#)
- [Can understanding Whiteness improve anti-racism activities in health?](#)
- [Disrupting the colour-coded labour market: Implications for public health organizations](#)

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The NCCDH is hosted by St. Francis Xavier University. We are located in Mi'kma'ki, the ancestral and unceded territory of the Mi'kmaq people.

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La version française est également disponible au [www.ccnds.ca](http://www.ccnds.ca) sous le titre *Un appel à l'action pour freiner la discrimination liée à la spécificité noire dans le domaine de la santé publique*.