

Dear Drs. Christopher Plowe, Nathan Thielman, Mary Story, Dennis Clements, and the Education Team:

We write to you as a united group of current and former Duke Global Health Institute students who are responding to the email that was sent to some members of the DGHI community on June 5, 2020, in which you encouraged us to share our thoughts and ideas. We recognize our privilege as students and alumni of a program that is a global leader in education and research. We do not take this privilege lightly, and we understand that our positionality means we have a responsibility to serve as leaders in our communities. Our affiliation with DGHI also means that we have seen firsthand how elite institutions contribute to the disparate treatment of historically marginalized and economically exploited groups. As a result, we are uniquely positioned to speak out against historical and contemporary injustices and demand appropriate reactions from the individuals and institutions that hold the power to create true change — including DGHI.

We cannot move forward in this letter without acknowledging George Floyd, Breonna Taylor, Ahmaud Arbery, and the countless other Black individuals who lost their lives due to the failure of U.S. systems to protect their inalienable right to life, liberty and the pursuit of happiness. These injustices are only the most recent product of centuries of subjugation and discrimination that have continued into the 21st century in the form of race-based police violence, disproportionate incarceration rates, and glaring health disparities experienced by Black and Brown communities — disparities every bit as important as the ones that we as an institution attempt to combat in low- and middle-income countries. DGHI can choose to follow the status quo and maintain yet another century of slow progress. Or, as a powerful institute with ties to universities, organizations, and governments around the world, we can make intentional, action-oriented, structural change to affect the very systems that have failed these aforementioned individuals. To this end, we outline suggestions for an **immediate plan for the 2020-2021 academic year that addresses both (1) local and (2) global action.**

(1) Local action

With the current dual public health burden of COVID-19 and racism plaguing minorities in this country, we must now, more than ever, respond with elevated intention and make tangible our institutional desires to address disparities and their determinants. DGHI has the opportunity to be on the right side of history and demonstrate leadership in catalyzing change here at home, just as it has done globally. The institute has made initial progress through its commitment to addressing health disparities in Durham and surrounding communities. As a continuation of these efforts, we make, and are willing to support the realization of, the following demands for local action:

(1a) DGHI-sponsored discussions and reflections must continue as spaces for supporting student wellbeing. But they must exist alongside **(1b) ongoing mandatory diversity training for every DGHI student, staff, and faculty member**, with a particular focus on systemic anti-blackness, both historically and currently. This training will include exercises aimed at

identifying and undoing unconscious biases and microaggressions, especially for individuals who may be unaware of their privileged positionality (e.g. whiteness, maleness, heterosexual presentation), and can be shared with other universities. As plans for this training are being developed over the summer months, we expect that **(1c) DGHI will individually contact each current student** to ask for their input, with special attention to amplifying BIPOC voices as we work toward a community-driven response. Finally, we expect that DGHI will **(1d) demonstrate its commitment to improving local health disparities** through courses that address inequities in Durham and across North Carolina, dedicated local fieldwork placements, and increasing the transparency of local partnerships.

(2) Global action

In parallel with these aims for targeted local action, we must also work toward dismantling the broader structural factors that perpetuate power imbalances in the field of global health. As a commitment to both current and future students, we expect that DGHI will **(2a) decolonize the curriculum** by updating the core courses to recognize and address the generations of oppression on which our nation, university, and field was built, as well as how these systems of oppression are entangled in global health systems. For example, this could include developing [resources](#) on racism and oppression that are required reading for incoming students, as well as dedicating a section of the core curriculum to addressing Duke's history of slavery, white supremacy, and segregation (see [Activating History at Duke](#)). Additionally, DGHI must continually improve its practices as they relate to **(2b) providing students with the knowledge and tools** to conduct more ethical and conscionable research that is culturally relevant to their specific field sites. Further, a third tangible action is **(2c) prioritizing the hiring and inclusion** of historically marginalized individuals for staff and faculty positions. Finally, we expect DGHI to **(2d) sponsor events** that engage with perspectives on race from DGHI's affiliated fields, including medicine, nursing, anthropology, education, environmental justice, healthcare technology, law, and policy making. As a starting place for these efforts, alumni are eager to contribute to events by sharing their professional perspectives on how their current institutions engage with the social construct of race, which has become a biological reality that drives disparities in morbidity and mortality for people of color. However, we expect that alumni will be only the beginning of these efforts, and that DGHI will also work to bring in experts in these fields to engage with students, faculty, and staff.

Based on conversations and the sharing of available information, it is our understanding that the aforementioned June 5th email was sent only to certain members of the DGHI community. As alumni, we use our DGHI training to work, learn, teach, and practice in hospitals, clinics, universities, governmental offices, and organizations around the world, and represent the product of DGHI's commitment to creating a "stronger, more inclusive community." As such, we expect that listservs will be updated so that **(3) all alumni will receive subsequent communications regarding DGHI's plans** to address its "own structures and practices" as they relate to unveiling and combatting racially-motivated biases and acts of violence, as well as dismantling the longstanding structures that buttress this dangerous system.

Systemic oppression requires a systemic solution. We unequivocally believe that DGHI's unique position as a leader in global health and interdisciplinary collaboration provides the institute, and its leaders, with the power to create swift, structural responses that will serve as an example for other universities and organizations. This response must address ingrained discriminatory practices, amplify marginalized voices, and prioritize the (re)education of many of our White community members, even when it is uncomfortable. It is time that our White community members grapple with race and oppression at the same relentless rate that our friends and colleagues of color are forced to experience. We cannot wait any longer for DGHI to accept its responsibility as a global leader of education, research, and change.

We look forward to hearing from and collaborating with you.

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