As a department, we are proud to have embraced and incorporated the principles of Equity and Justice into both education and practice. Through our partnership with the Arthur Ashe Institute for Urban Health and our Women's Health Community Advisory Board we have worked to advance equity for the women we serve. Through our Women’s Health Equity training program, we are preparing our future Obstetrician/Gynecologists to understand how to address our own biases while learning best practices in addressing racism in medicine and structural inequity. Through our Community Women’s Health Program, we extend our work to reach the community where they are.

First, we address our colleagues that do not identify as Black. As health care providers, it is important to examine our roles during the recent increased display of unacceptable unjust acts against members of the Black community. We must first acknowledge our own ‘privileges’ and inability to understand these events in the same manner as Black colleagues. This acknowledgement is the first step in becoming an ally in the movement for equity and justice. Privilege is what separates us from George Floyd and a seemingly unending stream of people who have been killed while doing things we do without the slightest concern, (e.g., jogging [Ahmaud Arbery], walking in a friend’s neighborhoods [Trayvon Martin]). None of us can change the world, but none of us should accept the world as it is.

For those of us on the front lines of healthcare, part of our immediate responsibility as healthcare professionals is both to address our biases and advocate on behalf of our patients. Bias is universal, and making the effort to recognize and mitigate it should be as well. Change can begin with each patient encounter, through both addressing our own biases and advocating for the best care of each patient. Beyond this, we need to recognize and confront the institutional and systemic issues that challenge the health of our patients. Advocacy on behalf of our patients both within our institutions and communities should be embraced as part of our role as Physicians. This effort must start with the next woman who comes to us for her care. Until we make that effort, and make it part of our commitment to our communities, we will not have fully lived up to
our oath, nor shown our understanding of the words of Martin Luther King, “Of all the forms of inequality, injustice in health care is the most shocking and inhumane.”

Let George Floyd be more than just one more name added to the litany of the innocent dead, let it be the name that galvanized a change in society, and in each of us.

In Solidarity,

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