

# Racism in All Its Forms is a Public Health Issue



WASHINGTON  
**Medical  
Commission**  
Licensing. Accountability. Leadership.

The leadership of the WA State Medical Commission (WMC) joins other medical organizations in condemning acts of racism, such as the death of George Floyd.

There is no shortage of examples of cultural systems and structures that act to suppress our citizens who are Black, Indigenous, and People of Color. We recognize and deplore this fact. As we know, racism is not limited to interactions with police, it also causes bias in hiring practices, educational opportunities, employment, housing opportunities and, closest to home for us, in interactions and experiences with the medical community.

The problem is systemic; it is not limited to “a few bad apples”. Racism is without question an issue of public health and patient safety. The current, constitutionally protected, protests are manifestations of long-term prioritization of white lives over black lives. We can never fully understand the pain, frustration and anger of the Black community, but we support the protest principles. We must, as a society, recognize, understand and work zealously to eliminate systemic racism in our culture and in medical care specifically. As the ultimate arbiter of medical practice in Washington state, the WMC must go beyond mere lip service or token actions in confronting racism.

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Studies show disparate representation in the health profession and disparate health outcomes for Black, Indigenous, and People of Color. While [4.15%](#) of our state’s population and 7.3% of medical graduates are Black, only 2.2% of our MD licensees and 2.0% PA licensees are Black. We are short at least 730 Black MDs and PAs if we are to mirror the demographics of the Washington state. It is incumbent upon the WMC to understand and correct this inequity.

While it is understandable to focus on racially directed police brutality, we must apply that same passion for change to many health care issues, like maternal mortality rates. African American women are [four times more likely](#) to suffer from maternal mortality than Caucasian women. Similar statistics exist for breast cancer, heart disease, practitioner assessment of [pain perception in black patients](#), and other disease processes.

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The causes of these inequities need to be identified and remedied.

Shameful past public health events such as the [Tuskegee experiments](#), the experimentation done by James Marion Sims on slave women prior to providing his “cure” to white women, or the dubious consent history of [Henrietta Lacks](#) has historically undermined trust in the health care system for the Black, Indigenous, and People of Color communities. If we are to have a health system that is equitable, with meaningful outcomes for all, we must collectively act to restore this trust.

Within the WMC, we have taken steps to minimize implicit bias when evaluating applicants for licensure and we are taking steps to minimize the effect of implicit bias in disciplinary actions. We recognize that this is not enough. We recognize that we do not possess sufficient knowledge to know the best way forward. We commit to educating ourselves, and to listening with humility, to those affected by the inequalities of our systems and practices. We commit to continue making changes to achieve equality.

As media coverage of these protests subside, we must not lose sight of the principles we have seen expressed in the protests. We can start with the following key steps:

1. Accept that there is a problem.
2. Acknowledge our role in continuing the systems that produce these outcomes.
3. Use our position and privilege to change the systems to serve all people.
4. As with medical error, we should recognize and apologize when our efforts to effect positive change do not have the desired impacts.

As those entrusted to operate and govern our statutorily authorized medical regulatory system, we can and must do more to achieve human equality in all its facets. We will provide regular updates in this newsletter detailing our plans and actions taken to achieve this goal, the first of which will be in the next edition.

For the partner organizations who quickly and publicly voiced their support, we ask that you turn those words into action, help us change the house of medicine as a whole, and to help us see our blind spots. Perhaps most importantly, to our citizens and licensees of color, we want to [hear from you](#) (Medical.Commission@WMC.wa.gov) and we commit to listening to your voice and feedback as we move to create a better future.

Signed,  
WMC Executive Committee