

★★★★★ THE SPIRIT OF 1848: APHA 2021 REPORTBACK ★★★★★

TO: EVERYONE ON SPIRIT OF 1848 EMAIL BULLETIN BOARD
FROM: SPIRIT OF 1848 COORDINATING COMMITTEE
RE: REPORTBACK FROM THE 2021 APHA CONFERENCE (ver: 11/3/21)



Greetings! The Spirit of 1848 Caucus is happy to share our reportback from the 149th American Public Health Association Annual Meeting and Expo (APHA; October 24-27, 2021, with posters presented on Oct 20-21, in advance of formal opening; hybrid meeting, physically based in Denver, CO). In this reportback we:

- (a) share decisions we made at our labor/business meeting, plus our plans for APHA 2022 (Boston, MA), whose meeting will mark the 150th anniversary of APHA, which was founded in Boston, MA in 1872; and
- (b) give highlights of our APHA 2021 sessions

And: as usual, we are sending this reportback by email and posting it on our web site – and we encourage you to visit our website to see our past reportbacks as well (1995-2020; see: <http://www.spiritof1848.org/apha%20reportbacks%20&%20attendance.htm>).

As for the growing numbers in our ranks, we are happy to report that:

- (a) As of October 19, 2021, fully **3,689** people (in US & around the world) subscribe to our listserv/email bulletin board (up from 3,495 at this time last year), and another **61** signed up to join at the APHA 2021 meeting!
- (b) According to APHA, as of August 2021, we have **389** Spirit of 1848 members who are also dues-paying APHA members (down from 416 last year), which puts us well above the 2016 APHA policy which requires APHA Caucuses minimally have 25 members who pay dues to APHA. According to the survey we maintain at our Spirit of 1848 website, as of October 26, 2021, among the 525 unique individuals who have responded, **448 self-identify as being members of the Spirit of 1848 Caucus, of whom 444 also state they are members of APHA.**

NOTE: The number of Spirit of 1848 members REALLY MATTERS – both EVERYONE on this listserv AND ALSO those who are APHA dues-paying members. Since 2006, we have been required to report ANNUALLY to APHA the number of Spirit of 1848 members who are ALSO dues-paying APHA members. Accordingly, we STRONGLY REQUEST that all of you reading this who are DUES-PAYING APHA MEMBERS please take a moment to find your APHA membership number & then do BOTH of the 2 following tasks:

- (a) go to our Spirit of 1848 website and fill out the 30-second survey to affirm your affiliation with the Spirit of 1848 Caucus and APHA by providing **your name & APHA membership number & email address**; the URL is:

https://harvard.az1.qualtrics.com/jfe/form/SV_86XQ5KQvFCgCpFP

(& for more explanation about why we need this information, see: <http://spiritof1848.org/listserv.htm>)

- (b) update your APHA membership profile to flag your membership in the Spirit of 1848 Caucus; the steps are:

- 1) login in at: <http://apha.org/>
- 2) click on the bottom part of where your name shows up, which will reveal the “menu” for options
- 3) click on “update profile”
- 4) click on the tab for “communities”
- 5) scroll down to “caucuses,” go to “Spirit of 1848,” and choose the option for “current participant”!

(note: selecting a Caucus affiliation does NOT count against the choice of 2 Section affiliations)

And so:

- 1) please share our update/report with interested colleagues & friends, and note that our update/report can also be downloaded from our website, along with our mission statement and other information about Spirit of 1848, at:

<http://www.spiritof1848.org/>

- 2) please likewise encourage them to subscribe to our listserv! – directions for how to do so are provided at the end of this email and on our website.

3) If any of the activities and projects we are reporting, either in this reportback or on our listserv, grab you or inspire you -- **JOIN IN!! We work together based on principles of solidarity, volunteering whatever time we can, to move along the work of social justice and public health.**

4) if you have any questions about our work, please contact any of us on the Spirit of 1848 Coordinating Committee:

- Nancy Krieger (Chair, Spirit of 1848, & data & integrative & e-networking); email: nkrieger@hsph.harvard.edu
- Anne-Emanuelle Birn (History sub-committee & designated alternative Chair contact); email: ae.birn@utoronto.edu
- Luis Avilés (History sub-committee); email: luis.aviles3@upr.edu
- Marian Moser Jones (History sub-committee; Spirit of 1848 co-representative to the APHA Caucus Collaborative and the APHA Governing Council); email: marianmoserj@gmail.com
- Catherine Cubbin (Politics of public health data sub-committee; Activist sub-committee); email: ccubbin@austin.utexas.edu
- Zinzi Bailey (Politics of public health data sub-committee); email: zinzib@gmail.com
- Craig Dearfield (Politics of public health data sub-committee); email: craig.dearfield@gmail.com
- Lisa Moore (Pedagogy sub-committee; Spirit of 1848 co-representative to the APHA Governing Council and APHA Caucus Collaborative); email: lisadee@sfsu.edu
- Rebekka Lee (Pedagogy sub-committee; Activist sub-committee); email: rlee@hsph.harvard.edu
- Vanessa Simonds (Pedagogy sub-committee); email: vanessa.simonds@montana.edu
- Nylca Muñoz (Pedagogy sub-committee); email: nylca.munoz@upr.edu
- Jerzy Eisenberg-Guyot (Activist sub-committee; Student poster session); email: jerzy.eisenbergguyot@gmail.com
- Charlene Kuo (Student poster session); email: cckuo@umd.edu
- Pam Waterman (E-networking sub-committee); email: pwaterma@hsph.harvard.edu
- Miranda Worthen (E-networking sub-committee, for social gatherings); email: miranda.worthen@sjsu.edu

NB: for additional information about the Spirit of 1848 and our choice of name, see:

--Coordinating Committee of Spirit of 1848 (Krieger N, Zapata C, Murrain M, Barnett E, Parsons PE, Birn AE). Spirit of 1848: a network linking politics, passion, and public health. *Critical Public Health* 1998; 8:97-103.

--Krieger N, Birn AE. A vision of social justice as the foundation of public health: commemorating 150 years of the spirit of 1848. *Am J Public Health* 1998; 88:1603-1606.

Both of these publications are **posted** on our website, at: <http://www.spiritof1848.org>

And: APHA next year will be in **Boston, MA (Nov 6-9, 2022)**; the official theme is “150 Years of Creating the Healthiest Nation: *Leading the Path Toward Equity*” – and our Spirit of 1848 theme, as usual, avoids the nationalism and ups the ante -- and will be: **“History, Health Justice, & Hope: Pasts, Presents, and Futures.”**



Attended by 18 members:

(a) Spirit of 1848 Coordinating Committee members (alphabetical order; n = 13): Zinzi Bailey (data); Anne-Emanuelle Birn (history); Catherine Cubbin (activist & data); Craig Dearfield (data); Jerzy Eisenberg-Guyot (activist & student poster session); Marian Moser Jones (history & Spirit of 1848 co-representative to the APHA Governing Council & APHA Caucus Collaborative); Nancy Krieger (chair & integrative & data & e-networking); Charlene Kuo (student poster session); Rebekka Lee (pedagogy & Spirit of 1848 co-representative to the APHA Governing Council and APHA Caucus Collaborative); Lisa Moore (pedagogy); Nylca Muñoz (pedagogy & student poster session); Vanessa Simonds (pedagogy); Miranda Worthen (e-networking) [& unable to attend but engaged in planning the meeting: Luis Avilés (history); Pam Waterman (e-networking)]

(b) additional Spirit of 1848 members (alphabetical order; n = 5): Marta Bustillo; Donna Odierna; Julianna Perez; Rachelle Seger; Rebecca Tamoyo.

1) **Spirit of 1848 mission.** We referred everyone to our Spirit of 1848 website, which includes the mission statement of the Spirit of 1848 (included at the end of this reportback; see also: <http://www.spiritof1848.org/>) – and which, among other things, describes our purpose, our subcommittee structure, and our history.

-- In brief, rooted in the work in the late 1980s of the National Health Commission of the National Rainbow Coalition, we cohered as the Spirit of 1848 network in 1994 and began organizing APHA sessions as an affiliate group to APHA that year. In 1997 we were approved as an official Caucus of APHA, enabling us to sponsor our own sessions during the annual APHA meetings. Thus, 2021 is our 24th year as an official APHA Caucus, and 2022 will be our official 25th anniversary (!) – but: we held our 20th year celebration back in 2014, to recognize when we actually were founded as a group – and by that timeline, 2019 was our 25th anniversary!

-- We have 4 sub-committees: (1) politics of public health data, (2) progressive pedagogy, (3) history (with the sub-committee serving as liaison to the Sigerist Circle, an organization of progressive historians of public health & medicine), and (4) e-networking, which handles our listserv, website, and social networking. Members of these subcommittees also work on organizing the activist session and the integrative session.

-- We also have an official representative to the APHA Caucus Collaborative and to the APHA Governing Council.

-- To ensure accountability, all projects carried out in the name of the Spirit of 1848 are approved by the Spirit of 1848 Coordinating Committee. The Coordinating Committee meets annually at APHA and in between communicates regularly & frequently by email, and its chair (and other members, as necessary) deals with all paperwork related to organizing & sponsoring & co-sponsoring sessions at APHA and maintaining our Caucus status. The subcommittees also communicate regularly by email in relation to their specific projects (e.g., organizing APHA sessions).

2) **Spirit of 1848 listserv & membership.** We happily reported that:

(a) As of October 19, 2021, fully **3,689 people (in US & around the world) subscribe to our listserv/email bulletin board** (up from 3,495 at this time last year), and another **61** signed up to join at the APHA 2021 meeting!

(b) As for Spirit of 1848 & APHA membership:

-- According to APHA, as of August 2021, we have **389 Spirit of 1848 members who are also dues-paying APHA members** (down from 416 last year), which puts us well above the 2016 APHA policy which requires APHA Caucuses minimally have 25 members who pay dues to APHA.

-- According to the survey we maintain at our Spirit of 1848 website, as of October 26, 2021, among the 525 unique individuals who have responded, **448 self-identify as being members of the Spirit of 1848 Caucus, of whom 444 also state they are members of APHA.**

-- As usual, we will need to send APHA our updated numbers to comply with their Dec 31, 2021 deadline to report the N of Spirit of 1848 members who are also dues-paying APHA members, and will likewise include these data as one of the requirements for the Memorandum of Understanding (MOU) with APHA; this MOU is renewed every 3 years, and we submitted our most recent renewal in December 2019.

(c) our 3-year-old static Facebook (FB) page (newly minted as a “Meta” page) continues to work as intended – via directing people (who “like us”) to our website. As of October 19, 2021, our FB/Meta page has 899 “likes” (up from 832 last year) and 937 followers (up from 862 a year ago, with our having done no outreach to attract these folk!). Mindful of these data, for the past two years we have made the Spirit of 1848 Facebook/Meta page a bit livelier, whereby we now

link all *action posts* from our 1848 listserv to our Spirit of 1848 Facebook page, so that these actions posts can get even wider circulation – however: the page is **NOT** a site for independently posting messages or having exchanges.

3) **Spirit of 1848 Sessions.** We reported back on how our various sessions went (see detailed descriptions below), discussing both attendance and content. This was the *1st ever hybrid APHA conference* (with the year before being the 1st ever fully virtual conference) -- and, as we all know by now, attendance for a hybrid conference is different than for an in-person conference – and:

a) we learned that for APHA this year, *the N of registrations equaled 9200 – of which fully 63% were virtual registrations (N = 5787) and only 37% were in person (N = 3413 persons)* – and the total is unsurprisingly lower than the usual recent tally of 12,000 to 15,000 for the in-person meetings.

b) *ALL of our Spirit of 1848 sessions were VIRTUAL* -- so once again we don't think the attendance numbers can be directly compared to prior years.

c) there's also the new twist that people registered for APHA can view sessions for 3-months after the conference, meaning that attendance at the live session (whether virtual or in-person) is only part of the picture.

d) an additional wrinkle is that because we didn't have access to the background controls for the APHA ZOOM hosting (except for the one open social hour session that we directly hosted), we were unable to access the actual list of participants for our virtual live sessions, and could instead view solely the N of participants at any given time as noted by ZOOM (which is also all that the APHA tech assistants could see). Thus, we are unable to account for flux – for example, *for our joint social hour (for which we controlled the ZOOM data), the maximum number of people on-line at a given time equaled 38, but the cumulative ZOOM report documented that 53 unique persons connected at our joint social!* We have been informed by APHA that after the conference they should be able to send us updated data on overall N of people who have viewed our sessions (both in real time and after the conference) – and once we have this information, we will share it at our website.

Keeping in mind these caveats, the table below provide our *estimated attendance* in 2021, based on what we could observe on ZOOM, with the data listed in chronological order of our scientific sessions, along with comparisons to the 2020 attendance (100% virtual meeting) and the 2019 attendance (100% in-person meeting, pre-COVID!). As the data show, attendance is much lower for this year's conference. Possible reasons we discussed include: (a) the specific foci of some of our sessions may not have resonated with APHA attendees; (b) many other APHA entities are now hosting sessions with a social justice focus, in contrast to prior years when our Spirit of 1848 sessions were outliers; (c) people on-site at Denver may have preferred to participate in the in-person sessions, thus further reducing the N of people available to join the on-line sessions in real time; (d) on the Sunday and Monday of APHA, there were server problems that affected access to numerous sessions; and (e) the overall lower attendance at APHA (25% to 35% less than in prior years). To put our attendance data in context, we will need to wait for when APHA releases the conference attendance data overall, which will give us information on the average attendance (and range of attendance) for APHA scientific sessions, both virtual and in-person.

Session	2021 (virtual)	2020 (virtual)	2019
Scientific sessions: total	~ 259	~ 419	765
Activist	~ 33	~ 71	95
Social history of public health	~ 36	158 (unique count, noting we hosted this session, and it was open access)	175
Politics of public health data	~ 36	~ 69	180
Progressive pedagogy	~ 55	~ 54	90
Integrative session	~ 74	~ 67	225
Student poster session	~ 25 (at live session)	?? (no data available)	60 to 90
Additional sessions:			
Spirit of 1848 labor/business mtg	18	36	19
Joint 1848/PHS social hour	53	53	~ 100

Throughout, our sessions underscored the need for critical thinking about the links between social justice & public health, per the theme for our 2021 sessions: **Building solidarity & strengthening networks for health justice.** We provide detailed descriptions of our sessions in Part II of this reportback.

4) **Spirit of 1848 engagement with the APHA history project.** We will continue to engage with the APHA history project, which was launched in 2018 in recognition that 2022 marks the 150th year of APHA (which was founded in 1872). Of note, our Caucus is well-ahead, in terms of preserving our history, compared to most other APHA entities (e.g., Caucuses, Sections, SPIGS) – because on our Spirit of 1848 website you can find a copy of every single annual flyer and reportback we have produced since our founding in 1994! – see:

<http://www.spiritof1848.org/apha%20reportbacks%20&%20attendance.htm>

We are happy to report that one of our historian Spirit of 1848 coordinating committee members, Marian Moser Jones, is continuing to take the lead in facilitating our links with the APHA history project, and the website they are creating – and she will also advise other APHA Caucuses on how to document and preserve their history. Marian has also reported that starting this November, APHA will be featuring a different aspect of public health history every month between now and next year’s APHA annual meeting.

5) **Institutionalizing our Spirit of 1848 policy about Land Acknowledgement and inviting submissions that bring a critical Indigenous lens.** Starting with our Spirit of 1848 sessions in 2019, we have begun a formal tradition of always including a Land Acknowledgement slide with the introduction to each and every one of our sessions, as a very first step towards histories that must be acknowledged, as prelude to reparative action. We are also happy to report that, in response to our new 2019 policy of ensuring that all calls for abstracts invite submissions that bring a critical Indigenous lens to the specific topic that is the focus of each session, drawing on Indigenous theories, knowledge, and methods, this year one of our five oral sessions (integrative session) included a presentation focused on Indigenous issues, presented by an Indigenous participant, and three sessions had presentations explicitly addressing Indigenous issues (student poster, history, pedagogy).

6) **Joint social hour (virtual) with Public Health Awakened.** This year we held our 3rd joint social hour with Public Health Awakened and, as an antidote to the physical distancing in these times of COVID-19, we once again called our session the “*Resistance & Connection Virtual Social Hour.*” Despite our not being able to be together in person (which truly is a big loss), we are happy to report that we had a really nice turn-out: fully 53 folk participated! – and it was both structured and relaxed, and gave an opportunity for all to share stories from the past year about how we have kept up our spirits in these turbulent times – including with key wins for social justice & public health. Some key points:

-- the social hour included a wonderful 5 minute video created via contributions from members in both Spirit of 1848 & Public Health Awakened: <https://drive.google.com/file/d/16gTsAgfO5Aqd5-ESXVnGeDMKSgU4kTL9/view?usp=sharing>

-- there was also a memorable brief presentation by Jennifer Wolf (Panca/Ojibwe/Santee), the founder of Project Mosaic (<https://projectmosaicllc.com/>), an Indigenous-led organization based in Colorado that leads with Indigenous values, and who is connected to Public Health Awakened. Focusing on what Indigenous tribes and other Indigenous entities do well, Jennifer Wolf described how they have been working with diverse tribes to document best practices and improve the sharing of information about COVID-19 on their websites and in other ways, e.g., video PSAs (<https://projectmosaicllc.com/covid-19-resources>).

-- we all took 2 quick actions -- and if you weren’t at the social hour, you can still take action -- it's not too late!

- [Sign on letter calling on Amazon to protect worker health and safety](#) ... As we approach the holiday season, we are taking action as public health practitioners to support the health and safety of Amazon workers. Conditions for workers at Amazon warehouses and for delivery drivers are already unsafe and have serious health impacts.
- [Send a message to your Senators](#) asking them to protect our health by strengthening democracy and the right to vote. Right now, efforts to strengthen democracy are stalled in the Senate. Right before APHA the Freedom to Vote Act was brought to the Senate floor and immediately blocked by a filibuster. Health workers are sending a message to Senators that access to voting and strengthening our democracy are tied to healthier communities.

-- of note, approx. 1/3 of those at the social hour stated that it was their first event they had attended that was organized by Spirit of 1848 and/or Public Health Awakened, and they were drawn to participate by the kinds of information and discussion shared on our respective listservs, which they found to be a useful resource and source of inspiration.

-- Below are some quotes from our ZOOM chat & also a few stills from the video!

“lovely to be here with you all!” – “Grateful for this community”.— “So great!!” – “[T]hat was so much fun!” --“Thank you so much” – “... pulled off the FUNNEST Zoom meeting of the year” – “Glad to put

some faces with the name on the list serve. Thanks for hosting this!" – "I love the Collective Care mask!" – and regarding the video: "That felt like a virtual hug, thank you"



On the past year – Nancy Krieger (Chair, Spirit of 1848 Caucus), October 18, 2021

Home » American Journal of Public Health (AJPH) » November 2020

ENOUGH: COVID-19, Structural Racism, Police Brutality, Plutocracy, Climate Change—and Time for Health Justice, Democratic Governance, and an Equitable, Sustainable Future

Nancy Krieger PhD
(*) Author affiliations, information, and correspondence details
 Accepted July 15, 2020. Published Online October 07, 2020.

Source: <https://ajph.aphapublications.org/ajph/ajph/2020/11/2020-10080>

Source: <http://store.blacklivesmatter.com/ajph/health-justice-421-100426>

Source: <https://www.usfbl.com/2020/09/04/our-humanity-is-our-best-technology/>

ps: if you like the "Collective Care" mask (made by union workers in Berkeley, CA), you can order it from Human Impact Partners at: https://stores.inksoft.com/human_impact_partners/shop/home

We are very happy to celebrate our new tradition of joint social hours with PHA, and we are very glad that Miranda Worthen will continue to be the Spirit of 1848 Coordinating Committee point person for this event, drawing on her apt skills for virtual as well as in-person organizing! – and we also would like to thank Wesly Epplin for volunteering to help out Miranda with this organizing for APHA 2021. And next year, in Boston: we will gather in person!! – and once again jam a bar full with good energy & spirits – and also see if there might be a way to link in folk virtually, in hybrid mode ...

7) **APHA Caucuses & Governing Council.** Marian Moser Jones and Lisa Moore have co-served as our co-representatives to the APHA Caucus Collaborative throughout the year, and will continue to serve in this capacity going forward. At the APHA meeting we were represented virtually by Marion Moser Jones at the APHA Governing Council (where we and the other Caucuses now can speak from the floor, but do not have a vote). Key items to note are:

-- CAUCUS COLLABORATIVE

- a) *APHA History Project.* In May 2021, Nancy Krieger (Chair, Spirit of 1848 Caucus) filled out the survey for the "Caucus History Project" about our Spirit of 1848 history (which is also well documented on our website; see: <http://www.spiritof1848.org/>). The Caucus History Project, which is affiliated with the APHA History Project, is pulling together information about the origins, focus, and activities of each of the Caucuses, as part of getting ready for the upcoming 150th anniversary of APHA.
- b) *Caucus Collaborative & the APHA Executive Board.* In September 2021, the Spirit of 1848 Caucus voted in favor of the Caucus Collaborative having a Caucus ex-officio non-voting representative on the APHA Executive Board. The intent is to keep the Caucuses visible to the main body that sets APHA policies, including about the Caucuses. This change would entail amending the APHA by-laws. As of the time of preparing this report, we do not know how many of the other 17 APHA Caucuses voted, nor do we know next steps.
- c) *APHA Caucus Collaborative booth:* no APHA Caucus Collaborative booth at the APHA conference this year.
- d) *Annual Caucus Collaborative breakfast:* postponed (since not enough persons indicated they would attend it in-person). Marian and Lisa will attend the meeting (virtually), once it is rescheduled, and report back to the Spirit of 1848 Coordinating Committee and also the 1848 listserv, as warranted.
- e) *New president of the Caucus Collaborative:* Dr. Juanita Booker-Vaughns, affiliated with the Community-Based Public Health Caucus.

-- GOVERNING COUNCIL

At the Governing Council session, there was a reminder that the theme for the APHA 2022 meeting is **"150 Years of Creating the Healthiest Nation: Leading the Path Towards Equity"** and the theme for the APHA 2023 meeting will be **"Creating the Healthiest Nation- Building Public Health Capacity to Address Contemporary Issues and Plan for the Future."** The incoming president of APHA is **Kaye Bender** (see: <https://www.apha.org/About-APHA/Executive-Board-and-Staff/APHA-Executive-Board/Kaye-Bender>) and the president-elect (whose term starts in November 2022) is Chris

Chanyasulkit (see: <https://apha.org/about-apha/governance/apha-boards-and-councils/executive-board/apha-candidates/chris-chanyasulkit> & also <http://www.chanyasulkit.com/about.html>).

Additionally, among the 21 new APHA policies approved, several had a direct focus on social justice & public health, including, most prominently:

-- **D1: Advancing Public Health Interventions to Address the Harms of the Carceral System**, which was hotly debated. In this policy, APHA “recommends moving towards the **abolition** of carceral systems and building in their stead just and equitable structures that advance the public’s health by: (1) urgently reducing the incarcerated population; (2) divesting from carceral systems and investing in the societal determinants of health (e.g., housing, employment); (3) committing to non-carceral measures for accountability, safety, and well-being; (4) restoring voting rights to formerly and currently incarcerated people; and (5) funding research to evaluate policy determinants of exposure to the carceral system and proposed alternatives.” This policy, authored by members of the End Police Violence Collective (<https://www.endingpoliceviolence.com/> & @endpoliceviolence), was passed by a vote of 167 to 4.

Other policies passed that relate directly to social justice & public health include:

B1: Decriminalization of and Support for Self-Managed Abortions

B2: Call for Urgent Actions to Address Health Inequities in the U.S. Coronavirus Disease 2019 Pandemic and Response

B3: Adopting a Single-Payer Health System

B4: Opposing Coercion in Contraceptive Access and Care to Promote Reproductive Health Equity (passed with amendment emphasizing need to provide “comprehensive contraceptive counseling” prior to discussing the price of contraception)

B5: Sexual and Gender Minority Demographic Data: Inclusion in Medical Records, National Surveys, and Public Health Research

B6: Lessons Learned from the COVID-19 Pandemic: The Importance of Universal Healthcare in Addressing Healthcare Inequities

D3: Preventing Violations of Sexual and Reproductive Health Rights in Immigration Detention Centers

LB2: Expanding Medicaid Coverage for Birthing People to One-Year Postpartum.

For a full list of all APHA policies, see: <https://www.apha.org/policies-and-advocacy/public-health-policy-statements>.

(Note: As usual, the Spirit of 1848 Caucus did not endorse any APHA candidate or policy resolutions because our policy is to not engage with APHA elections, resolutions, or internal politics. Relying on precious volunteered time of our members, our focus instead is outward facing, to prioritize our mission of spurring connections, outside of as well as within APHA, to advance work linking social justice and public health.)

8) **APHA 2022:** Below we describe our plans for next year’s **150th annual meeting of APHA, to be held in Boston, MA (November 6-9, 2022)**, and our understanding is that it will be **primarily an in-person meeting, with some virtual events**. The details of what this means (for presenters, for registration costs, etc.) will be explained as they get worked out, and we will of course share this information when we get it – but for the time being, we are planning for an in-person meeting, especially given that it will be a prominent meeting, for the 150th anniversary of APHA, held in the same city (Boston, MA) where APHA was founded, in 1872! – and, of note, it will be our 25th year as an official APHA Caucus.

-- The APHA official theme accordingly is: **“150 Years of Creating the Healthiest Nation: Leading the Path Toward Equity.”**

-- For the Spirit of 1848, we as usual offer a variant of this theme, informed by our longstanding approach to grounding present-day struggles for health justice in the histories of our field and in the principles of solidarity and bolstering critical analysis and action for fostering inspiring, equitable, sustainable, joyful, and dignified futures for all. Accordingly, our theme is:

History, Health Justice, & Hope: Pasts, Presents, and Futures

This year, the Spirit of 1848 Coordinating Committee developed the call for abstracts in advance of the APHA meeting, based on our decision to avoid the extremely hectic fast-paced process of the past, whereby we rushed to finalize the plans after the meeting so as to have the call for abstracts ready in time for the mid-December APHA deadline for posting the

call. We thus were able to use the time at our Spirit of 1848 labor/business meeting to discuss the proposed call with those attending and elicit ideas about potential speakers – and possibly even for a radical history tour!

Spirit of 1848 Caucus Labor/Business Meeting (Tues, Oct 26, 6:30-8:00 pm MT, Session 428.0) -- Come to a working meeting of THE SPIRIT OF 1848 CAUCUS. Our committees focus on the politics of public health data, progressive public health curricula, social history of public health, and networking. Join us to plan future sessions & projects!

And so:

- 1) Be on the look-out for the **APHA CALL FOR ABSTRACTS, which will go live in late Jan/early Feb 2022.**
- 2) For the first time, **ALL abstracts – both unsolicited and solicited – will be due at the same time, sometime in late March/early April 2022.**
- 3) APHA will be doing some restructuring of its program format, which will affect session times, and also will be shifting to a new platform for abstract submissions, and details about all of this will become available around **mid-November 2021.**
- 4) As usual, we have \$0 to pay for any speakers to come (since we are a volunteer, no-dues Caucus, noting also that APHA policy expressly forbids paying for speakers). For unsolicited abstracts, we depend on finding speakers who can fund their own participation in APHA. We also have successfully obtained a limited number of complimentary passes for invited speakers (permitted for non-APHA members only), and on some occasions have sought out local groups who can fund travel costs as part of having the invited speaker also speak at their organization/university.

Proposed themes for APHA 2022 Spirit of 1848 sessions (listed in the order in which they take place at the APHA meeting)

■ **Overall theme: “History, Health Justice & Hope: Pasts, Presents, and Futures.”**

We expect that our 5 scientific sessions and our Spirit of 1848 labor/business meeting will be in the following slots, albeit with the caveat that if APHA is changing its format (which we won’t know until later this year), some of these slots might shift about. Moreover, given the theme, in addition to our social history of public health session, we will include historians in other sessions, as potentially speakers or discussants.

Spirit of 1848 sessions (APHA 2022) – by day, name, and LIKELY time, and whether an OPEN CALL for abstracts or SOLICITED ONLY			
Monday, Nov 7, 2022	Social history of public health	10:30 am to 12 noon	SOLICITED ONLY
	Politics of public health data	2:00 pm to 3:30 pm	SOLICITED ONLY
	Activist session	4:00 to 5:30 pm	OPEN CALL + solicited
Tuesday, Nov 8, 2022	Progressive pedagogy	8:30 am to 10:00 am	OPEN CALL + solicited
	Integrative session	10:30 am to 12 noon	SOLICITED ONLY
	Student poster session	1:00 pm to 3:00 pm	OPEN CALL + solicited
	Labor/business meeting	6:30 pm to 8:00 pm	N/A

AND: we also plan to have a joint social hour again with Public Health Awakened! (date & time to be determined ...)

Here is a preview of what will be our official “call for abstracts”:

■ **Social history of public health** (Mon, Nov 7, 2022, 10:30 am to 12 noon)

Title: “Subversive, Critical, and Inconvenient Histories of Public Health in North America: Upending the Dominant Narrative”

-- **Note:** all abstracts for this session will be SOLICITED.

Notwithstanding the range of critical historical works on public health in North America, these perspectives have not been adequately incorporated into mainstream narratives of public health history. The Spirit of 1848 history session aims to interrogate this dominant historiography and center the struggles and resistance of those who have been marginalized by mainstream histories of public health. *This will be an invited session.*

-- **Note:** Per our Spirit of 1848 policy, *we will include solicited presentations that bring a critical Indigenous lens, drawing on Indigenous theories, knowledge, and methods.*

-- This session is organized by the Social History of Public Health subcommittee of the Spirit of 1848 Coordinating Committee: Marian Moser Jones (email: marianmoserj@gmail.com), Anne-Emanuelle Birn, (email: ae.birn@utoronto.ca), Luis A. Aviles (luis.aviles3@upr.edu).

Spirit of 1848 reportback: 149th annual APHA meeting (hybrid: Denver, CO & virtual, October 24-27, 2021)_final.doc (ver 11/3/21)

■ **Politics of public health data** (Mon, Nov 7, 2022, 2:30 pm to 4:00 pm)

Title: “Contested histories and politics of US census racial/ethnic data: Implications for analyzing structural racism and health equity”

-- Note: all abstracts for this session will be SOLICITED.

This invited session is focused on the contested politics of U.S. Census racial/ethnic data and its implications for those who use these data to understand and combat racialized health inequities. Invited speakers will include people from the U.S. Census Bureau, U.S. Census data end-users, and public health analysts. Topics include: changing racial/ethnic categories, changing data collection strategies, use of racial/ethnic data for structural racism measures across time, and implications for the health of marginalized (especially “small”) populations, including but not limited to American Indian/Alaska Native and Native Hawaiian populations.

-- **Note:** Per our Spirit of 1848 policy, *we will include solicited presentations that bring a critical Indigenous lens, drawing on Indigenous theories, knowledge, and methods.*

-- This session is organized by the Politics of Public Health data subcommittee of the Spirit of 1848 Coordinating Committee: **Zinzi Bailey** (email: zinzi@gmail.com), **Catherine Cubbin** (email: ccubbin@austin.utexas.edu), **Craig Dearfield** (email: craig.dearfield@gmail.com), and **Nancy Krieger** (email: nkrieger@hsph.harvard.edu).

■ **Activist session** (Mon, Nov 7, 2022, 4:00 – 5:30 pm) [unless shifted to Sunday afternoon, as per 2021]

Title: “What can activists for health justice learn from history?”

-- **Note:** presentations for this session will be drawn primarily from abstracts submitted in response to the OPEN CALL for abstracts, supplemented by solicited abstracts as warranted.

The Activist Session welcomes abstracts that describe activism around the theme of “What can activists for health justice learn from history?”. Possible examples include activists connecting lessons from past struggles to current organizing around: mutual aid, environmental justice, Black Lives Matter and anti-police violence, decolonial and anti-imperialist struggles, harm reduction, labor struggles, reproductive justice, and poor people’s campaigns. Given that the conference will take place in Boston, we especially welcome abstracts from activists engaged in Massachusetts- or Eastern Corridor-based organizing, and will ensure this call is seen by relevant progressive groups in the area.

-- **Note:** Per our Spirit of 1848 policy, *we encourage submissions that bring a critical Indigenous lens, drawing on Indigenous theories, knowledge, and methods, to the specific topic that is the focus of each session*

-- This session is organized by the Activist session subcommittee of the Spirit of 1848 Coordinating Committee: **Jerzy Eisenberg-Guyot** (email: jerzy.eisenbergguyot@gmail.com), **Rebekka Lee** (email: lee@hsph.harvard.edu), and **Catherine Cubbin** (email: ccubbin@austin.utexas.edu).

■ **Progressive pedagogy** (Tues, Nov 8, 2022, 8:30 am to 10:00 am)

Title: “Grounding public health pedagogy in people’s history for health justice”

-- **Note:** presentations for this session will be drawn primarily from abstracts submitted in response to the OPEN CALL for abstracts, supplemented by solicited abstracts as warranted.

Overall, we seek submissions for *practical presentations on pedagogy that enhances capacity for teaching and organizing with a focus on people’s history for health justice*. This includes the pedagogies that are being (re)developed through decolonizing epistemologies and other ways of re-framing knowledge and voice. It also includes strategies for combatting current attempts to prevent teaching of accurate history and concepts, including in relation to public health, as carried out by the right-wing culture war against what they demonize (and distort) as “critical race theory,” “gender ideology,” and “socialism.” We call for work that shows *how* such pedagogy can be carried out, in both: (1) diverse academic settings, e.g., universities and colleges (including community colleges), health professional schools (public health, nursing, medical, dental, veterinary, etc.), high schools, and elementary schools, and (2) training programs for community and workplace activists, organizations, and members. We also welcome student-led presentations focused on how to bring such pedagogy into their educational programs.

-- **Note:** Per our Spirit of 1848 policy, *we encourage submissions that bring a critical Indigenous lens, drawing on Indigenous theories, knowledge, and methods, to the specific topic that is the focus of each session*

-- This session is organized by the Progressive Pedagogy subcommittee of the Spirit of 1848 Coordinating Committee: **Vanessa Simonds** (email: vanessa.simonds@montana.edu), **Lisa Moore** (email: lisadee@sfsu.edu), **Rebekka Lee** (email: ree@hsph.harvard.edu), and **Nylca Muñoz** (email: nylca.munoz@upr.edu)

■ **Integrative** (Tues, Nov 8, 2022, 10:30 am to 12 noon)

Title: “Embodied histories, embodied truths, & health justice: critical reckonings for building the future”

-- Note: all abstracts for this session will be SOLICITED.

This invited session will include speakers from diverse fields of work and backgrounds, who will together combine historically-informed structural analyses of injustice with strategic visions for better futures. The speakers will address: (a) how ideas of embodied histories and embodied proofs can help advance health equity; (b) histories of links between public health & social justice; (c) Indigenous health in relation to history, survivance, and building a better future; (d) historically-grounded strategic narrative change work for health equity to build vision-based movement work to change the future; and (e) climate justice and environmental justice, looking to the activism & policies needed for sustainable & equitable futures.

-- **Note:** Per our Spirit of 1848 policy, *we will include solicited presentations that bring a critical Indigenous lens, drawing on Indigenous theories, knowledge, and methods.*

-- This session is organized by the Spirit of 1848 Coordinating Committee member responsible for the integrative session: **Nancy Krieger** (email: nkrieger@hsph.harvard.edu)

■ Student poster session: social justice & public health (Tues, Nov 8, 2022, 1:00–2:00 pm) [assuming not moved again to the Thursday before the Sunday opening of APHA]

For the **APHA Annual Meeting 2022**, the **Spirit of 1848 Social Justice & Public Health Student Poster Session** is issuing an **OPEN CALL FOR ABSTRACTS** for posters that **highlight the intersections between social justice and public health** from a historical, theoretical, epidemiological, ethnographic, and/or methodological perspective.

This session will have an **OPEN CALL for submissions** by students (undergraduate or graduate) that are focused on work linking issues of social justice and public health. This can include, but is not limited to, work concerned with the Spirit of 1848’s focus for APHA 2022 on “**History, Health Justice, & Hope: Pasts, Presents, and Futures.**” Per our Spirit of 1848 policy, *we encourage submissions that bring a critical Indigenous lens, drawing on Indigenous theories, knowledge, and methods, to the specific topic that is the focus of this session, i.e., student posters on links between social justice & public health.*

The submitted work can address one or more of many interlocking types of justice (e.g., racial, Indigenous, political and/or economic, gender and/or sexuality-related, environmental, restorative, etc.) We are interested in submissions not only from students in schools of public health and other health professions (e.g., nursing, medicine) but also from students in schools & programs focused on law, political science, public policy, social work, government, history, economics, sociology, urban planning, etc. For examples of abstracts selected in prior years, see our annual reportbacks at: <http://www.spiritof1848.org/apha%20reportbacks%20&%20attendance.htm>

Abstracts will be due in March/April 2022 (date to be provided when available); all relevant instructions can be found at the APHA abstract submission website; see: <http://www.apha.org/events-and-meetings/annual>

Note: to address the on-going problem of student uncertainty about funding, which has led to students with accepted posters having to withdraw their submissions, we will continue with the successful approach we implemented in 2016, whereby we will: (1) accept the top 10 abstracts (the limit for any poster session); (2) set up a waitlist of all runner-up potentially acceptable posters (ranked in order of preference); and (3) reject abstracts that either are not focused on issues of social justice and public health or are not of acceptable quality. If any accepted poster is withdrawn, we will replace it with a poster from the waitlist (in rank order).

-- For any questions about this session, please contact Spirit of 1848 Student Poster Coordinating Committee member and member of the Spirit of 1848 Coordinating Committee: **Charlene Kuo** (cckuo@umd.edu)

Finally, please note that the **timeline for abstract submission to APHA 2022** is as follows (and will be finalized likely by mid/late November 2021):

(a) the **call for abstracts** will go live on the APHA website (<https://www.apha.org/events-and-meetings/annual>) in **late Jan/early Feb 2022.**

(b) **ALL abstracts – both unsolicited and solicited – will be due at the same time, sometime in late March/early April 2022.**

(c) APHA will be doing some restructuring of its program format, which will affect session times, and also will be shifting to a new platform for abstract submissions, and details about all of this will become available around **mid-November 2021.**

We will publicize the actual abstract due dates on our Spirit of 1848 website and listserv when this information becomes available.

★★★★★ HIGHLIGHTS OF SPIRIT OF 1848 SESSIONS (APHA 2021) ★★★★★

Our Spirit of 1848 sessions brought all of us attending APHA together in fraught times, with threats to the people’s health, democratic rule, and planetary health readily apparent. We are still in the time of COVID, a time of gross global inequities in vaccine production, distribution and access, and social, gross economic & racialized inequities, in the US & worldwide, in the health, social, and economic impacts of COVID. Public health and health care workers continue to be vilified for standing up for protecting community health, threatened by a toxic mix of right-wing libertarians, “free-market” demagogues, disinformation peddlers, anti-vaxxers of a variety of world views, & white supremacist vigilantes. Similar forces seek to derail genuine democracy, racial justice, and addressing the global crisis of climate change, driven by profit-prioritizing fossil-fuel guzzling economies, while these and other reactionary forces seek to curtail access to abortion, queer/LGBTQIA+ rights, worker rights, and gender justice. Meanwhile, progressive activists and organizers have ramped up efforts organizing for a more equitable and sustainable future. APHA gives those of us present a chance to regroup and replenish our spirits – and one of the many reasons we organize the Spirit of 1848 sessions as we do!

Our provisional counts for attendance (based on provisional ZOOM data) indicate a minimum of ~ 259 people came to our 5 scientific sessions. In chronological order, they comprise our Spirit of 1848 activist session (n ~ 33); social history of public health session (n ~ 36); politics of public health data session (n ~ 36); progressive pedagogy session (n ~ 55); “integrative” session (n ~ 74), and our student poster session (n ~ 25). Attendance for our Spirit of 1848 scientific sessions were all higher than the average APHA in-person attendance of ~ 30 persons/session.

ALL SPIRIT OF 1848 SESSIONS ARE **VIRTUAL**

SPECIAL FOCUS (APHA 2021): BUILDING SOLIDARITY & STRENGTHENING NETWORKS FOR HEALTH JUSTICE

The Spirit of 1848 APHA 2021

linking issues of social justice & public health

Thurs, Oct 21	11:30-1 pm PDT 12:30-2 pm MDT 1:30-3 pm CDT / 2:30-4 pm EDT	Spirit of 1848 social justice & public health student poster session (Session PS1068.0 – PS-SCI)
Sat, Oct 23	5-7 pm PDT 6-8 pm MDT 7-8 pm CDT / 8-9 pm EDT	Spirit of 1848 & Public Health Awakened “RESISTANCE & CONNECTION” Virtual Social Hour: https://biturl.com/48y4t4n (Session 128.0-SCI)
Sun, Oct 24	3-4:30 pm PDT 4-5:30 pm MDT 5-6:30 pm CDT / 6-7:30 pm EDT	SPIRIT OF 1848 ACTIVIST SESSION: Building solidarity & strengthening networks for health justice (Session 2069.0 – SCI-VIR)
Mon, Oct 25	9:30-11 am PDT 10:30-12 noon MDT 11:30 am-1 pm CDT / 12:30-2 pm EDT	Building Transnational Solidarity for Health Justice: Critical Historical Perspectives (Session 3056.0 – SCI-VIR)
	1-2:30 pm PDT 2-3:30 pm MDT 3-4:30 pm CDT / 4-5:30 pm EDT	Solidarity, social movements, and uses of data by, for, and against health justice work (Session 3143.0 – SCI-VIR)
	7:30-8 am PDT 8:30-10 am MDT 9:30-11 am CDT / 10:30-12 pm EDT	Teaching for solidarity with social movements for health justice (Session 4049.0 – SCI-VIR)
Tues, Oct 26	8:30-11 am PDT 10:30-12 noon MDT 11:30 am-1 pm CDT / 12:30-2 pm EDT	Social movements: using public health data in solidarity for the fight for social justice (Session 4108.0 – SCI-VIR)
	5:30-7 pm PDT 6:30- 8:00 pm MDT 7:30-9 pm CDT / 8:30- 10 pm EDT	Spirit of 1848 Caucus Labor/Business Meeting (Session #28.0 - BM) -- website for this meeting (public, not via APHA): https://docs.google.com/forms/d/1Cz9p-mv9GvCf0C2Pz8T8r7u077w6B0Xq

--FOR DETAILS, SEE OTHER SIDE --
<https://apha.confex.com/apha/2021/meetingapp.cgi>
 Spirit of 1848 website: www.spiritof1848.com Email bulletin board: spiritof1848+subscribe@googlegroups.com
 Please copy & circulate *** ALL SESSIONS OFFER CME/CE CREDIT *** labor donated [ver 8/18/21](#)

Of note, our APHA 2021 Spirit of 1848 theme -- **Building solidarity & strengthening networks for health justice** -- is a deliberately radical rendition of the official APHA 2021 conference theme: “*Creating the Healthiest Nation: Strengthening Social Cohesion and Connection.*”

Motivating our theme is recognition that:

- (1) Social movements and solidarity are key to advancing social justice and health equity – via bringing people together to attain the power to, in the words of Alicia Garza, one of the founders of Black Lives Matter, move “from a shared problem to a shared future” (see: Garza A. *The Purpose of Power: How We Come Together When We Fall Apart*. New York: One World, Penguin Random House, 2020 [quote: p. 48]).
- (2) A critical role for public health in building solidarity & strengthening networks for health justice is simultaneously: (a) respecting the leadership of social movements; (b) engaging with them to learn what they consider to be threats to health equity and what is needed to advance health justice; and (c) contributing our specific public health expertise as warranted, premised on the understanding of the profound inextricable links between social justice and public health.

-- And also: once again, we continue to note with concern the latent nationalism lurking in the phrasing of the APHA general theme of “creating the healthiest nation” which has appeared as the prefix to each annual meeting’s specific theme for the past few years – and we once again ask: why not instead have the goal be: “creating the healthiest world”!

NOTE: if you wish to contact any of the speakers, you can go to the link provided for each session, click on the presentation of interest, and then click on the speaker’s name – and you will see a “chat” box that allows you to send a message to the presenter.

• SPIRIT OF 1848 ACTIVIST SESSION

<https://apha.confex.com/apha/2021/meetingapp.cgi/Session/62493>

This was our 5th activist session, building on the first one in 2017 that was prompted by the surge in organizing triggered by the November 2016 election, the Trump Administration's relentless assaults on public health and social justice, and the attendant surge in both hate crimes and explicit white supremacist and neo-fascist rhetoric and presence both in social media and in public places.

The estimated minimal attendance for this session was ~ 30 people.

SPIRIT OF 1848 ACTIVIST SESSION: Building solidarity & strengthening networks for health justice (Sun, Oct

24, 4:00-5:30 pm MDT; Session 2069.0 – SCI-VIR)

4:00 PM : **Introduction – J. Eisenberg-Guyot, PhD**, R. Lee, ScD, C. Cubbin, PhD

4:05 PM: The power of storytelling –**D. Lieu**

4:25 PM: **Solidarity and struggle: Organizing and meaningful accountability to declare racism as a public health crisis -- L. Paine, MPH**, C. Andrews, MPH, CHES, P. de la Rocha, CD, MSW, MPHc, A. Eyssalenne, MD, PhD, L. Loo, A. M. Collins, and M. Morse, MD, MPH

4:45 PM: **Transforming racial capitalism in the MIC: Abolition, reproductive justice and the Irwin County detention center -- M. Morse, MD, MPH, C. Page, C. Andrews, MPH, CHES**, T. Avasthi, MSN, MA, RN, S. Abaza, C. Idehen, and J. Dubhashi

5:05 PM: **Q&A**

Jerzy Eisenberg-Guyot, PhD (Spirit of 1848 coordinating committee; Columbia University, NYC) introduced the session and speakers, with a land acknowledgment, and emphasized the importance of progressive organizing at this time.

Diana Lieu, a staff member of the Praxis Project (Oakland, CA) (see: <https://www.thepraxisproject.org/>) spoke about a project they have been leading with 20 community partners across the US to participate in a Virtual Learning Circle, with the objective of empowering them to learn how to develop and produce digital video stories that build solidarity and advance health justice. The intent is to foster authentic recall and encourage production of transformative stories, whether based on actual experience or stories of imagination about how the world can be, with the transformation being to change power relations and enable people to tell their truths. The training was specifically geared to craft videos for mobile devices (whether phones, tablets, etc.), and participants were provided with both conceptual & technical training (pre- & post-production) and some gear (e.g., camera tripods, lighting devices). The learning circle had originally been designed to be in-person, but had to switch to virtual on account of the COVID pandemic, and the impact of the pandemic on the participants' communities meant that many participants had to drop out, due to deaths in their families and communities, plus the pandemic's inequitable social and economic impacts. The presentation included one video created for the project: "Mi Sueño Americano" ("My American Dream"), which in its brief 1 minute & 12 seconds powerfully makes the case for internet access as essential for getting an education, especially in a time of remote learning – whereby one student is just about to read her story about her American Dream & then her camera freezes – and for a moment it's not clear if it is her camera that is freezing or if it is yours, the viewer's – and the teacher's comment is "Oh, we've lost her" – a phrase with many layers of meaning; this video and others from the Learning Circle are available at:

<https://www.thepraxisproject.org/community/learningcircle-virtual2020-digital-storytelling>. Lessons learned from conducting the Learning Circle were that, in addition to needing to extend timelines with flexibility and grace -- due to the impacts of COVID, it also is important to find the right balance of offering appropriate guidance & support and NOT overwhelming participants with technical training, with the goal being that they generate the transformative story they seek to tell.

Lillian Paine, MPH (Milwaukee, WI), and Leanne Loo (Worcester, MA), next jointly presented on behalf of their team to evaluate the growing number of declarations being issued by various US governing bodies and institutions stating that "*racism is a public health crisis.*" A critical concern is whether these declarations meaningfully advance – versus do not truly engage with – the work of the racial justice activists who paved the way for these steps to be taken. Key questions concern: (a) whether these statements will do good or harm (using the idea of "pharmakon," i.e., a substance whose intent is to treat for the good, but which instead ends up being a poison), and (b) what kinds of meaningful accountability, steps, and resources for structural change are or are not built into these declarations. Three examples discussed involved different strategies that led up to the declaration: an inside/outside strategy (in Milwaukee, WI, as used to create the first such declaration, formulated by one of the session presenters, Lillian Paine); a coalition advocacy strategy (in Ventura County, CA); and a community organizing strategy (in King County, WA). Four key criteria for evaluation should assess if the declaration is: (1) actionable (i.e., does it have "teeth" to make it happen); (2) financially

responsible (i.e., does it identify the resources needed to carry out the work); (3) addressing the structural determinants of equity (i.e., does it deal with issues of power, not just words on paper); and (4) participatory (i.e., was there meaningful engagement in and outside the issuing agency with the relevant racial justice advocates). Among their recommendations were that such statements should explicitly address: (1) structural determinants of equity; (2) reparations for labor and land (in relation to histories of enslavement, Jim Crow, and settler-colonialism); (3) address Indigenous erasure; and (4) using an abolitionist praxis.

Suhaib Abaza, MD (Atlanta, GA), then discussed the work of their team, in collaboration with diverse coalitions, to take on the intersections between the Medical Industrial Complex (MIC) and the Prison Industrial Complex (PIC), with definitions of both of these terms drawing from work on healing justice, a framework informed by the scholarship and lived experience of feminists of color leading both the intellectual and organizing work tackling these issues (see “Health, Healing Justice & Liberation Statement, prepared by Project South: <https://projectsouth.org/healing-justice-statement/>). The specific example for which this statement was prepared concerned the organizing to stop the forced sterilization of women, predominantly of color, at the Irwin County Detention Center (located in the state of Georgia) by the Immigration and Customs Enforcement (ICE), a practice first exposed by Dawn Wooten, a nurse at the Center. Actions taken to date by a coalition of groups include getting over 800 signatories on a statement saying the Center should be shut down. The response thus far has been for the federal government to: (a) order the facility to permit a federal investigation (which has not yet taken place), and (b) terminate the ICE contract at the Center as of the end of 2021 (which will end the presence of ICE, but not address other sets of horrific conditions at the facility).

During the **Q&A period**, notable exchanges concerned:

(1) *Next steps for each of the teams*, with answers including: (a) for Praxis Project, pivoting to have their next Learning Circle focus on digital communication, and wait until it is safe and people are less exhausted before trying to hold an in-person video storytelling Learning Circle; (b) for the group working on MIC & PIC: continue developing their “night school” for medical and health care practitioners regarding the tenets of healing justice; (c) for the group working on declarations that racism is a public health crisis: write blogs & op-eds about the evaluation framework and recommendations they have developed, and encourage internal assessments of organizations issuing these statements, to evaluate whether people in these organizations understand and can articulate what the mission is, what is meant by racial equity, what the strategic plan is to make change, and how they can advocate for this work.

(2) *How to build coalitions and solidarity when people come with such differences in lived experience and theoretical backgrounds*, with answers focusing on: (a) the need to do power mapping; (b) the need to assess capacity; and (c) the need to foster local leadership, which requires time, relationship building, and emotional work.

(3) *Evaluation of the recent NYC Board of Health resolution declaring racism is a public health crisis*, with answers noting that: (a) one of the team members was involved in drafting the statement; (b) it does contain concrete actionable statements (e.g., establish a data research group); (c) it does address structural determinants of equity; and (d) it is participatory, and specifies work to be done with both community organizations and sister agencies; however, (e) it does not contain language regarding any budgetary commitment, and also says little regarding reparations, Indigenous erasure, or abolition. This led to a larger discussion that evaluation of what these statements say needs to be assessed and framed in relation to whether the statement was issued: (a) before or after the onset of the COVID pandemic; (b) before or after the murder of George Floyd by the Minneapolis police; and (c) at what point in which relevant election cycle – and to push for moving beyond performative politics to ask what real accountability would look like.

(4) *Obstacles, challenges, and opportunities for making accountability actionable*: additional discussion noted that: (a) different parts of one government/administration may be working at cross-purposes, e.g., at the same time the NYC Board of Health issued its statement declaring racism to be a public health crisis, other components of the NYC government are seeking to build 4 more prisons; (b) accountability has to be framed not only in terms of doing better, but also preventing harm and not permitting there to be a lack of sense of urgency; (c) accountability needs to be articulated in relation to written rules (i.e., not just dependent on particular individuals being there); (d) ensuring accountability often requires inside/outside coalitions; and (e) public health advocates for these declarations need to work with community organizers, who have decades of experience, insights, and expertise on organizing efforts to hold institutions accountable.

● SOCIAL HISTORY OF PUBLIC HEALTH

<https://apha.confex.com/apha/2021/meetingapp.cgi/Session/62494>

The estimated minimal attendance for this session was ~ 36 people.

10:30 am – Introduction: Historical experiences – and ongoing urgency – of transnational health solidarity – **Anne-Emanuelle Birn, ScD, MA**
10:40 am – Protest, community self-management and transnational partnership to protect our forests and promote social transformations – **Arturo Massol-Deyá, PhD**
11:00 am – A decade and a half of extractivism under a progressive government in Ecuador: Lessons learned --**Erika Artega-Cruz, PhDc**
11:20 am – Farm and factory worker solidarity battles against Monsanto in West Virginia and Vietnam – **Bart Elmore, PhD**
11:40 am – Discussion: Lessons for the struggle against extractivism – **Luis A. Aviles, PhD**
11:45 am – Q&A

Anne-Emanuelle Birn, ScD, MA (Spirit of 1848 Coordinating Committee; University of Toronto) introduced the session topic and the speakers, and offered a land acknowledgment spanning the regions where the speakers are based (Canada, Puerto Rico, Ecuador, and the continental US) .

Arturo Massol-Deyá, PhD (University of Puerto Rico, Mayagüez Campus, Mayagüez, PR) spoke about the work of the Puerto Rican community-based organization Casa Pueblo (see: <https://casapueblo.org/> -- the website offers options for text in Spanish or English). Initially founded in 1980 to challenge open-pit copper mining, and, after 15 years of struggle to win this battle, it turned its attention to fostering community-managed projects to build up sustainable local development – involving solar energy, forest management, a forestry school, a radio station, coffee production, and more. Setting the context, Puerto Rico came under US control as a colonial possession in 1898, and the area where Casa Pueblo is based has high rates of impoverishment. A central goal has been to break the dependency model and create energy independence as part of creating a sustainable economy, including protection against the worsening impacts of the climate crisis (e.g., in the aftermath of Hurricane Maria, they became an energy oasis, distributed solar lamps, and installed solar power in 10 homes that had medical needs for energy, e.g., ventilators). As powerfully shown by one photo, their first demonstration, in 1981, was attended by 1 person (and many police); from the start, their position has been no mining, no matter what the political future will be (e.g., statehood, independence, etc.). Recognizing that simply “knowledge” was not enough to impel change, they linked science + culture + community, and drew on both scientific knowledge and traditional knowledge to make their case. At their 2nd demonstration against the proposed open mining pits in 1984, more people came, they held a dance and concert, and high school students stood in formation with their bodies spelling out the words “No Mines.” In 1995, when they finally were able to stop the proposed open pit mines, over 10,000 people showed up at their demonstration. Subsequently, in 2010, in a challenge to attempts to install a natural gas pipeline in their area, over 30,000 people showed up at an initial demonstration, and the effort was stopped after 2 years of ongoing protest. Casa Pueblo activists also turned their attention to the richness of the forest where they are based and the need to protect it; in the mid-1990s, Puerto Rico had 60% forest coverage (of total land) of which only 4% was protected, in comparison to Costa Rica, which had 52% forest coverage, of which >30% was protected. In 1995 they proposed to take on the role of forest management in and in 1996 became the 1st group in the Caribbean region to be given charge of managing a state forest, setting a useful precedent for others to follow. They built a school inside the forest and used the forest as a place of learning for their children; this forest curriculum in turn built up ecological consciousness in both the children and their parents. Their model has been adapted by other groups in diverse Latin American countries, including Ecuador, and provides an example of how local initiatives for sustainability can, via solidarity work, inform and contribute to global efforts for sustainability and against extractivism. One report that documents their work is: *Bosque del Pueblo, Puerto Rico: How a fight to stop a mine ended up changing forest policy from the bottom up* (available at: <https://pubs.iied.org/13503iied>); see also: <https://theintercept.com/2020/02/09/puerto-rico-energy-electricity-solar-natural-gas/> - and for a video, see: <https://www.youtube.com/watch?v=0dMVnUhU8i4> .

Erika Artega-Cruz, MD, MPH, PhDc (Universidad Andina Simón Bolívar, Quito, Ecuador), next spoke about the struggle against a decade and a half of extractivism under a progressive government in Ecuador, which resulted in ever greater power and land control by companies focused on mining and oil extraction. She began with a video that will be showed at COP26 (link to be shared when publicly available) regarding the current fights against extractivism in Ecuador and other Latin American countries, with these fights critically led by diverse Indigenous peoples. She then discussed how despite an official policy of “Buen Vivir” (“living well,” or living in harmony with nature) that was inscribed in the 2008 Constitution and part of policy making until 2016, the national reliance on oil revenues remained high, and after 2016, the new government reframed the rationale for development, including mining, as a matter of “national sovereignty.” Currently, China is extending massive loans secured with the promise of access to future oil extraction, and in 2018 alone over 70 thousand acres was allocated for mining. The effort to stop the vicious circle of unsustainable development requires international solidarity, especially in the context of a government that presents itself as being “progressive.” Current resistance efforts focus on creating support for local referendums (some successful, some ongoing) to reject mining and protect water, while also stopping the destruction of ancestral knowledge. She ended with acknowledgment of

principles of Sumak Kawsay/Buen Vivir (see: <https://www.theguardian.com/sustainable-business/blog/buen-vivir-philosophy-south-america-eduardo-gudynas> & <http://www.gudynas.com/publicaciones/GudynasBuenVivirTomorrowDevelopment11.pdf>)

Bart Elmore, PhD (Ohio State University), then spoke about farm and factory solidarity battles against Monsanto in West Virginia and Vietnam, both arrayed around the toxic effects of Agent Orange, a chemical produced by Monsanto in West Virginia and deployed by the US in the Vietnam War. Drawing on the book he has just published (*Seed Money: Monsanto's Past and Our Future*. New York: WW Norton, 2021; see: <https://www.bartelmore.com/>), he raised the question of how Monsanto managed to rise from being a St. Louis chemical firm founded in the early 1900s to the biggest seller of seeds and genetically modified organisms (GMO) for agriculture in the world despite its histories of chemical pollution and harm to workers, farmers, and the environment in the US, and to people affected by use of Agent Orange (primarily Vietnamese but also US veterans) during the Vietnam War. He described how a 1965 internal memo provides irrefutable evidence that chemical companies, including Monsanto, deemed dioxin – a known chemical contaminant of the herbicide 2,4,5-T they produced – to be the “most toxic chemical ever experienced.” He tracked down the history of the production of Agent Orange, starting in 1949, in a Monsanto factory located in Nitro, West Virginia (with the town getting this name in the early 1900s when it was the site for production of explosives). From the start of its use, workers were documented to be suffering from chloracne, with visible lesions on their face, arms, and other exposed skin, caused by the chemicals in Agent Orange (when it was being produced as a herbicide) – i.e., it was visibly obvious workers were being harmed. In the 1980s, workers who had been exposed to dioxin filed a massive lawsuit against Monsanto, which they ultimately lost because of the high bar of the West Virginia law, which said it was necessary to prove the company had “recklessly, willfully, and wantonly” exposed the workers – and because the workers could not provide evidence of such intent, they lost the case. Notably, research on the dockets for the case led to discovery of a special and unusual request from the jurors to the judge, asking him to read a statement saying that the jurors believed the workers had been harmed by exposure to Agent Orange, but they couldn’t meet the bar of willful harm. Subsequently, he tracked down the foreman of the jury, someone who had been a worker at Union Carbide, and informed him that the jury had been prevented, on a legal technicality, from seeing evidence from the EPA about dioxin pollution around the plant – and the juror said that if they had been able to see that evidence, they likely would have decided the case differently. Adding insult to injury, after the trial, Monsanto took a lien against the homes of the workers’ who filed the case, to make them liable for legal costs. Turning next to others harmed by Agent Orange, he reported on his findings regarding US veterans and people in Vietnam. During the 1980s, veterans filed suits against all 7 producers of 2,4,5-T (with Monsanto being the largest producer), and while they won a \$180 million settlement, this cost was split among the 7 companies, such that after this settlement was announced, the lawyers for the companies celebrated inside the judge’s chambers with champagne, because the damages (per company) were so low compared to the profits they made. Currently, there is an on-going clean-up campaign at and around Danang airport in Vietnam that, with little attention in the US, is being paid for with \$116 million in US taxpayer funds to clean up just one of the many Agent Orange hotspots. Additionally, Monsanto is now in deals with Vietnam to sell GMO corn (for animal feed) and to sell its herbicide RoundUp. Among the many lessons that stand out are that: (1) companies can escape legal accountability on narrow legal technicalities; and (2) companies should not be allowed to be the sole source of scientific data used to regulate what they do – and these are some of the reasons that Monsanto has been able to continue as a gigantic company with little to no liability for the harms it has caused.

Luis Alberto Avilés, PhD (Kilometro Cero, Boquerón, PR), in his role as discussant, then reflected on the continuities between what the panelists said and the arguments made 50 years ago, in 1971, by Eduardo Galeano in his classic book: *Las venas abiertas de América Latina*, translated as: *Open Veins of Latin America: Five Centuries of the Pillage of a Continent* (1st English-language edition; Monthly Review Press, 1973 – see: https://monthlyreview.org/product/open_veins_of_latin_america/ & also https://library.uniteddiversity.coop/More_Books_and_Reports/Open_Veins_of_Latin_America.pdf). This book offered profound critiques of extractive capitalism, colonialism, and imperialism for how they poison the air, water, soil, and soul of the people – thereby undermining (literally) the well-being of people and their societies and the ecosystems in which all of our lives are linked, with knowledge of these histories key to imagining and creating a better future. Key lessons that endure are: the need for sustainable projects to defeat extractivism; just distribution requires just governance; historical memory keeps resistance alive; and the need for transnational solidarity for health and an alternative future.

During the **Q&A period**, comments focused on:

(1) *Request for comments on tension apparent in the presentations, regarding engaging with failures of the state while also seeking to engage the state*: speakers agreed there are huge debates around these tensions, in relation to dealing with

the state as it is while also seeking to change it – and one way to grapple with these tensions is to stay rooted in an anti-capitalist, anti-patriarchal, and anti-colonialist critique; another is to establish alternative institutions that can hold regulatory agencies accountable so that they are forced to protect people’s health and the environment.

(2) *In what ways does focusing on health impacts (on humans as well as other species) as having a specific role (or not) in advancing the fight for a sustainable future? -- and against extractivism capitalism -- since there are many other grounds to fight for such a future as well?(with the suggestion that embodied truths revealed by inequitable health harms helps facilitate cross-sectoral solidarity & also raises issues of legal liability & govt accountability in particular ways):* answers affirmed that lawsuits can be powerful tools, and Bayer (which bought Monsanto several years ago) is right now facing an enormous array of lawsuits that are likely to crush them, and these suits show the power of coalitions that come together facing common health concerns and threats (in this case, farmers, workers, veterans, and scientists – who might not agree on politics, per se, but do agree they should not be exposed to the toxins produced by Monsanto).

(3) Suggested readings to connect/reconnect to relationships of people to the land, in ways that can advance health justice:

(a) book by Potawami biologist – Kimmerer, Robin W. *Braiding Sweetgrass: Indigenous Wisdom, Scientific Knowledge and the Teachings of Plants*. 2nd ed. Minneapolis, MN: Milkweed Press, 2020. (1st edition: 2012). <https://milkweed.org/book/braiding-sweetgrass>

(b) book by forest ecologist – Simard, Suzanne. *Finding the Mother Tree: Discovering the Wisdom of the Forest*. New York: Alfred A. Knopf, 2021. <https://suzannesimard.com/finding-the-mother-tree-book/>

• POLITICS OF PUBLIC HEALTH DATA

<https://apha.confex.com/apha/2021/meetingapp.cgi/Session/62495>

The estimated minimal attendance for this session was ~ 36 people.

Solidarity, social movements, and uses of data by, for, and against health justice work (Mon, Oct 25, 2:00-3:30 pm MDT; Session 3143.0 – SCI-VIR)
2:00 PM: Introduction – Z. Bailey, ScD,
2:05 PM: Lessons from the Young Lords: Resisting internalized racism and forging a pathway to liberatory political consciousness within community health education -- A. Mullany, M. Barbieri, S. Smith, A. Gubrium, PhD, and L. Valdez, PhD MPH
2:25 PM: Social and health equity challenges for supply chain first suppliers: Examining obstacles and opportunities for solidarity in the transnational marketplace -- M. Sorensen Allacci, PhD
2:45 PM: Toward a movement public health: Possibilities for pedagogy and practice -- F. Maviglia, MPH and A. Miller, JD
3:05 PM: Q&A

Zinzi Bailey, ScD, MSPH (Spirit of 1848 Coordinating Committee; University of Miami Miller School of Medicine) opened up the session by introducing its theme and the speakers, and provided a land acknowledgement.

Anna Mullany (University of Massachusetts, Amherst, MA) presented on behalf of her team, about a project they did involving in-depth interviews in Springfield, MA of 40 Latinx men (92.5% of whom self-identified as being Puerto Rican, of whom 72.5% were born in Puerto Rico); of note, Springfield MA has the highest concentration of Puerto Ricans within the continental US. A key finding pertained to expressions of internalized racism, tied to the history and present realities of Puerto Rico’s colonial status. Drawing on the work of WEB Du Bois in “*Souls of Black Folk*” [1903] about double-consciousness and also the work of Frantz Fanon about the impact of colonialism on people’s self-understanding and well-being (as per “*Wretched of the Earth*” [1961]), she reported that the study participants simultaneously reported views: (a) in concordance with dominant negative stereotypes of Latinx populations fostered by white supremacy, and (b) major pride in being Puerto Rican. As one way to build on this pride and challenge the internalized racism, she pointed to the organizing in the 1960s of the Young Lords, which grew out of a street gang active in Chicago in the 1950s to become a highly visible radical organization, influenced by the Black Panther Party. They emphasized a praxis of critical education and action, with their political education and health initiative work including: publicizing detox information; circulating a 1972 pamphlet on “The Opium Trail: Heroin & Imperialism” (digital version freely available at the NY Public Library: <https://digitalcollections.nypl.org/collections/the-opium-trail-heroin-and-imperialism>); and reading Frantz Fanon and other critical literature; additional examples are provided by the new documentary on the Young Lords’ 1970 take-over of Lincoln Hospital in NYC (freely available at: <https://www.nytimes.com/2021/10/12/opinion/young-lords-nyc-activism-takeover.html>). Lessons learned from the project included: the need to produce knowledge useful for eliminating structural suffering; real change needs to be rooted in a praxis of critical education and action, informed by historical understanding; and community health initiatives need to address internalized racism.

MaryAnn Sorensen Allaci, PhD (NYU Tandon School of Engineering, NYC, NY), next discussed issues of solidarity in relation to transnational marketplaces as they affect supply chain first suppliers. Challenging the dominant marketplace mentality that “all the world is a supply-chain” and how conventional “life cycle” analyses (from acquiring material input to manufacturing to distribution to end-of-life and possibly recycling) disregard violations of human rights and environmental degradation, she presented a critique of current framings of “green/clean energy” that ignore the data demonstrating the extensive “greenwashing” by multinational corporations, especially in relation to the need for nickel, cobalt, and lithium for batteries. For example, 80% of lithium brine is located in Argentina, Bolivia, and Chile, and one company, Lithium Americas, owns 49% of the mining operations. Additionally, Tesla has purchased rights to extensive quantities of nickel (from Indonesia and New Caledonia) and cobalt (from the Democratic Republic of Congo), with extraction of these minerals linked to extensive health and environmental damage, along with child labor violations in the DRC. Additionally, in the US, a lithium mine project in Thacker Pass, NV, is underway, with a permit from the US Bureau of Land Management, despite documented violation of laws to protect Indigenous lands and their ancestral human remains (resulting from the massacre at this site perpetrated in 1865 by the US cavalry). She then discussed a case study she is engaged in, based in Colombia, for which one component concerns the Cerro Matiso Mine, which is extracting low-cost ferronickel; to do so, it has seized Indigenous land, and succeeded in getting overturned a constitutional court ruling that they had to pay restitution for human health and environmental harms. Other concerns the Colombia case study is documenting concern harms caused by: monocrop food systems (“blood bananas,” non-Haas avocados); gold mining (supported by the World Bank and the Canadian company Eco Oro Corp); and coal mining (Drummond Coal, a US firm), along with harms to Afro-Colombians working at the ports (in relation to violence, displacement, and stolen wages). There is an urgent need to make these data publicly known and to connect the dots, to build global solidarity that links the peoples in the lands subjected to extractivist capitalism, consumer movements, and others involved in the supply chain. The trailer for a new film making this case, “*Colombia: an exploration of human rights*,” is available at: <https://youtu.be/cfPH52fSkJQ>.

Francesca Maviglia, MPH, a student at Yale University (New Haven, CT) then discussed, on behalf of her interdisciplinary team, the establishment of a public health and law initiative seeking to develop pedagogy to advance work in solidarity with movements, using the specific example of their work with SWAN, the Sex Worker and Allies Network in New Haven, CT. Based in the Global Health Justice Partnership, which links the Yale Law School & School of Public Health, they worked with SWAN to do a peer-based needs assessment (2017-2020) and in 2020 published a report “*Mistreatment and Missed Opportunities: How Street-Based Sex Workers are Overpoliced and Underserved in New Haven, CT*” (available at: https://law.yale.edu/sites/default/files/area/center/ghjp/documents/mistreatment_and_missed_opportunities_ghjp_and_swan_report_july_2020.pdf). Their guiding principles were: (1) solidarity, not partnership; (2) work to not only identify disparities but seek to end them; and (3) it is inherently political to do research and be engaged in practice (i.e., there is no “research neutrality”). Challenges were to: (a) not use their privileged position at Yale in ways that would reproduce dependency dynamics; (b) not reproduce stigmatization; and (c) ensure that the work produced was both created in solidarity and empirically rigorous (i.e., could not be dismissed as “propaganda”). The project was informed by recent shifts in legal approaches, from the conventional “poverty law practice” (geared towards people viewed as passive recipients of health), to “community lawyering” (primarily focused on inclusion), to, now, “movement lawyering/movement law” (which works for structural change to alter the distribution of power and resources, with the work done in solidarity); the suggestion is for public health to make these same shifts as well (e.g., from just “helping” to “inclusion” to instead working for solidarity and structural change). The larger suggestion was that public health needs to be informed by a theory of political change, and that it needs to develop partnerships in relation to political goals, not just who “belongs to a community.” For example, in the case of sex work, there exist major debates over political goals, and this project allied itself with the stand of decriminalization, as supported by SWAN and others in the sex workers’ rights movement (and opposed by other strands of feminist activism, which focus on carceral remedies). Also needed are methodologies that can address issues of structural power (above and beyond power relationships between researchers and participants), and that can go beyond simply “tools” and “metrics” – and this is why they are urging the development of “movement public health.”

During the **Q&A period**, points raised included:

- (1) *Approaches to engaging with issues of positionality, including racial/ethnic differences among researchers, community partners, and research participants?*: with answers including: (a) be aware of what one is asking from partners who have fewer resources and more constraints; (b) use methods of participatory action research, led by the participants; and (c) distinguish the stance of the researcher from that of the institution where they are based.
- (2) *How to determine what data are important, to do what work – what is the role of the expertise of the public health team members and the expertise of the social movement members?*: answers included: (a) frame the objectives in relation

to the ultimate objectives and get input from the different sources of expertise as to what data are needed to achieve these objectives; (b) engage everyone in the interpretation of the data and how it may shine new light on the structural changes needed; and (c) involve both types of expertise in construction of survey questions, and determining which findings do vs. do not merit publication (whether in public reports or in peer-reviewed scientific papers), in relation to whether the findings do or do not advance the political objectives for structural change.

(3) *How to deal with the power differentials for those involved in education and in action:* answers focused on ways to engage the students in the solidarity work, as part of teaching them new practices to work in different ways, and together work to change the narrative and not have it be coopted.

• PROGRESSIVE PEDAGOGY

<https://apha.confex.com/apha/2021/meetingapp.cgi/Session/62496>

The estimated minimal attendance for this session was ~ 55 people.

Teaching for solidarity with social movements for health justice (Tues, Oct 26, 8:30-10:00 am MDT; Session 4049.0 –SCI-VIR)

8:30 AM: **Introduction** – V. Simonds, ScD, L. Moore, DrPH, R. M. Lee, ScD, and N. Munoz, JD, DrPH, MPH

8:35 AM: **A course-based approach to collaborative, participatory research centering student voice** -- M. Worthen, MPhil, PhD, T. R. Alsharif, T. M. Echevarria, H. Masood, M. McClure Fuller, MSOT, K. Nguyen, D. Perez, and C. Park, DrPH, MSPH

8:50 AM: **Calibrating the curriculum: Customizing multi-section course equity content to meet varied needs of students** -- Y. Merino, PhD, MPH, P. Polston, PhD, A. Josh, A. Zuercher, and M. Landfried, MPH

9:05 AM: **The need for processing: Training on antiracism while Black in a white colonial space** -- M. Ward, EdD, MPH

9:20 AM: **Building a better training program: Integrating anti-racism and transformative community engaged praxis into predominantly white institutions** -- T. Craft, MSW, H. Gilbert, MSHCM, L. Moak, S. Nkomboni, V. Pasquale, J. Fleckman, PhD, MPH, S. Francois, PhD, C. A. Taylor, PhD, MSW, MPH, and S. Drury, MD, PhD

9:35 AM: **Q&A**

Vanessa Simonds, ScD (Spirit of 1848 Coordinating Committee; Montana State University, Bozeman, MT) introduced the session's theme and the speakers, and offered a land acknowledgment.

Miranda Worthen, MPhil, PhD, Spirit of 1848 Coordinating Committee; San José State University (California) presented, on behalf of her student-faculty team, about a course they designed to foster collaborative, participatory research centering student voice. After an introduction describing who the public health undergraduates are (primarily 1st generation college students) and her own positionality (as a white elite-educated settler-scholar), she described the development of a course offered in a spirit of mutual learning, within the context of a conventional public health department. The pedagogical context had three bases: sources: “course-enhanced undergraduate research experience” (CURE), an approach that combined academic knowledge and lived experience and helps students build power; community-based participatory research; and decolonizing methodologies, which provide a historical and contextual grounding for a course teaching epidemiologic concepts and methods. The semester-long epi course enrolls 125 students, in sections of 25, with students in each section in workgroups of 5 students. As an example, one student focused her project on COVID-19 and loneliness, based on her experiences working in an elder care facility and watching the mental health of residents decline during lockdown. From a student perspective, issues that came up include: dealing with the imposter syndrome; feeling vulnerable in projects that focus on their own ideas (rather than an assigned topic); and the need for peer group support – all of which were exemplified by a brief video clip of one student appreciating how the course allowed for her own input while she also got step-by-step support, and made her develop how she thinks, as opposed to her usual experiences of being led & micromanaged. From a faculty perspective, the course requires: integrating research, teaching, and service within the space of one class; finding ways to amplify & organize student voices, while nurturing their vulnerability; needing to allocate more time, given the non-traditional approach to teaching and the need for time to build relationships (with the students, with other faculty); increased collaboration with other faculty; and finding funds to ensure graduate student assistants can be hired. A future possibility may be to engage students with work on the People's Budget of San José project (<https://www.sjsu.edu/hri/policy-and-praxis/pbsj/index.php>).

Yesenia Merino, PhD, MPH (University of North Carolina at Chapel Hill), next described a new approach they took to increase student engagement with equity-oriented content in a core MPH course, which students take before doing their practicum. The purpose of the course is to gain critical skills regarding community work and applied work that center equity. It is a 13-week course, with 10 sections, grouped by concentration, with 14-23 students per section (average: 17); the course has 4 section instructors, 6 TAs, and one faculty lead. It involves approx. 4 hours/week on readings, 40

min/week on an asynchronous lecture, and 75 min/week for synchronous classroom discussion. Following a logic model detailing what students put in and what they get out, the first 7 sessions focus on different ways bias affects the work, the next 5 on how better communication can promote equity, and the last session is a wrap-up. Student frustrations were especially pronounced for those in the concentration focused on health equity, social justice, and human rights, as they already have lots of experience navigating the kinds of issues addressed in the course and needed a higher level of material and discussion for the course to be worthwhile. Additional critiques stated that the readings were white-centric (i.e., geared to appeal to a white-gaze), outdated, and did not get into the depth needed – and these students had no interest in hearing for the 100th time that there are systems of power. To provide one example of how the revised course addressed the students’ concerns, in the case of Session 7, students were able to request what level of Bloom’s Taxonomy (framed as: create; evaluate; analyze; apply; understand; remember) they wished to apply to the subject of “ethical story telling” – and the students chose “evaluate” in relation to how storytelling is guided by their own positionality. The students responded very positively to the change in approach, with students submitting statements saying it was the best class of their semester, that they appreciated going deeper, and not being forced to stay at the introductory level. Key lessons for the instructors pertained to: the need for flexibility & humility to (re)build trust with the students; the need for regular check-ins with the students regarding the level at which they were being taught the material; the need for more collaboration between section instructors; and the need to center anti-oppressive pedagogy, understanding that the approach to teaching is meant to model the praxis the course is seeking to teach.

Maranda Ward, EdD, MPH (Promising Futures, Washington, DC), then discussed her experiences, as a young, Black cisgender woman, born in the South to a working-class family and the 1st in her family to go to college, who was tapped to develop and lead antiracist trainings in a predominantly white academic medical center in Washington, DC, i.e., white colonial space. Her central message was the need for employing a reflexive and introspective approach that engages with historical and contemporary harms. This past year, the institution took the unprecedented step of declaring anti-racism to be a core value informing their 2020-2021 academic plan, motivated by: (a) the rise of Black Lives Matter and uprisings against the police killings of Breonna Taylor and George Floyd and subsequent protests, which starkly increased visibility of the longstanding existence of racial injustice and police violence, and (b) the AMA taking the step, for the 1st time ever, to declare racism is a threat to public health. The senior leaders agreed that there needed to be changes to the system, including in organizational structures, and established a 16-member Steering Committee. To take on the role of leading the training component, as a member of this Steering Committee, she described how doing this work necessitated her processing: imposter syndrome; stereotype threat; the Black tax (i.e., as only person in her family to go to college, the expectations and demands on her from her family members, in addition to those of mentees, colleagues, etc.); post-traumatic slave syndrome; racial abuse; intersectionality; superwoman schema; matrix of domination; racial battle fatigue – with implications for her health presented in relation to the weathering hypothesis. A constant challenge is being constantly asked to do too much, in a way that also is tokenizing. To create the training, she developed a 3-part asynchronous course, using what she calls the “DISRUPT” model, that emphasizes reflection, personal biography, and privilege, with the aim of enabling people to move beyond being bystanders and instead disrupt racism; a description of the course is in a book chapter she has just submitted. Among the tools employed are an environmental scan of the racial climate and also a new scale she has developed to measure the participants’ antiracist capacity for action. One resource mentioned for developing the course is the 2021 paper “Bounded Justice and the Limits of Health Equity,” by Melissa Creary (see: <https://melissacreary.com/bounded-justice/>). Tasks ahead are to change both the curriculum and policies at the school.

Timothy Craft, MSW (Tulane University School of Public Health & Tropical Medicine, New Orleans, LA) next presented, with team members, their work based at the Violence Prevention Institute, to integrate anti-racism and transformative praxis into their predominantly white institution’s MPH program. The team included both faculty and students, and the presentation included 3 of the 5 student scholars involved in the initiative. The first student, *Simosenkosi Nkomboni*, described how the Violence Prevention Institute includes 50 faculty from across 7 schools and 11 departments; the executive committee that oversees the student scholar program includes 4 faculty; and the Institute collaborates with a range of community-based organizations focused on violence prevention and community and child well-being (including such groups as Daughters Beyond Incarceration, Family Justice Center, Brothers at Peace). The second student, *Valerie Pasquale*, talked about the context of the university, which has primarily white leadership, including: (a) the presence of exclusionary and often racist symbols on its campus (noting that the big bell belonging to a prominent enslaver, which campus traditions had students rub for “good luck,” was only just removed this past year); and (b) its disconnect from the rest of the city (with both the undergraduate and professional schools in affluent areas, which are jarringly adjacent to nearby impoverished areas). Identified gaps in the practicum included an inconsistent quality of work and inconsistent

opportunities to work with community-based groups, including without proper acknowledgment of the additional work required from these groups to take on student interns; the need for more training in cultural humility is also evident. The third student, *Lindsey Moak*, next described theories informing the training program (including: critical race theory; diffusion of innovation; diversity, equity, and inclusion (DEI) theories) and also its substantive content (e.g., learning about the history of different geographic areas in New Orleans, the disparate impacts of Hurricane Katrina, the history of the city’s violence prevention initiatives, etc.). In the 1st year of launching the fellowship, there were 36 applicants and 5 were accepted, with the application process and review process jointly designed and implemented by the Institute and its community-based partners. Priorities included finding applicants: open to courageous conversations; bringing lived experiences of intersectionality; able to engage in resisting white supremacy culture; and willing to work to maintain relationships.

During the Q&A period, comments and exchanges focused on:

(1) *What have been the blind spots in health equity courses?:* the discussion focused on who is the right person to teach these courses, with the importance noted by a white colleague to ask “Am I the right person because I understand how I am totally the wrong person?” while at the same time being clear that BIPOC faculty cannot be the sole persons who teach these courses.

(2) *What obstacles have you encountered creating these courses and programs?:* answers included: (a) the need to build the skill sets of instructors, especially those new to this kind of thinking and approach – and capacity-building is a huge challenge (who is motivated; demands on time; need for consciousness-raising; need for faculty to engage with students’ lived experiences – with present-day students often having more insight into the issues than the faculty); (b) the need to take care of one’s own house first, and organizing the work so that it is transparent who is doing what work, without all the work falling on solely the BIPOC faculty; (c) finding more ways to connect with social movements as part of the pedagogy; (d) moving away from a focus on solely individual trainings to how to change the institution’s culture; (e) the need for unlearning in addition to learning; (f) the importance of making sure that the pedagogic changes are institutionalized, i.e., made into policies and rules, so that their implementation doesn’t depend on particular people being present; (g) making it a requirement for all persons to do the relevant trainings, an approach aided by making clear that there is a new standard for knowledge and pedagogy, and that faculty will not be up-to-date if they lack the proper training; (h) dealing with institutional structures and funding cuts, whereby at one person’s institution, while the students are diverse, the tenure-track faculty are less so, the tenured faculty even less, and the administrative leadership is virtually all white, in a context where the faculty are shrinking and the administration is growing in size and power – and this makes it hard to make change; and (i) ensuring that changes addresses not only racial justice but also justice in relation to class, gender, poverty, disability, 2SLGBTQIA+, etc.

• INTEGRATIVE

<https://apha.confex.com/apha/2021/meetingapp.cgi/Paper/487354>

The estimated minimal attendance for this session was ~ 74 people.

Social movements: using public health data in solidarity for the fight for social justice (Tues, Oct 26, 10:30 am – 12 noon MDT; Session 4108.0 – SCI-VIR)
10:30 AM: Introduction – *N. Krieger, PhD*
10:35 AM: U.S. COVID-19 health equity task force, data, and health justice – *M. Nunez-Smith, M.D., M.H.S.*
10:55 AM: National domestic workers alliance (NDWA) labs: Using technology and data to disrupt unequal power, for domestic workers, and COVID-19 risk – *P. Shah*
11:15 AM: Center for Science and Democracy, Union of Concerned Scientists: Linking scientists, policy professionals, advocates & data for health justice – *F. Tormos-Aponte, PhD*
11:35 AM: Discussant – *V. Simonds, ScD*
11:45 AM: Q&A

-- Nancy Krieger, PhD (Chair, Spirit of 1848; Harvard T.H. Chan School of Public Health, Boston, MA) opened up the session with a description of its purpose, a land acknowledgement, and an introduction of the speakers. She then framed the session as being about the different ways that public health data can play a role in advancing health justice, by both strengthening and informing the work of social justice movements – or, conversely, potentially harming this work via

inadequate or misleading data and analyses. As she noted, also at issue is who is or is not engaged – i.e., at the proverbial table, with a role in data governance – in the generation, analysis, interpretation, and dissemination of the data.

Marcella Nunez-Smith, MD, MHS, Chair of the US COVID-19 Health Equity Task Force (Yale School of Medicine, New Haven, CT), framed her remarks in relation to the many ways COVID-19 has exposed fundamental flaws of US data systems, which are not just problems of technology, but of what is being asked – and stated that data are a metric of values, and who is important, and who is seen. She then said she would consider these issues in relation to her engagement with data issues involving COVID and her state (Connecticut), vaccine rollout equity, the COVID-19 Health Equity Task Force, and the new Office for Health Equity Research at Yale. She first shared a paper she and her colleagues published as a pre-print in April 2020 (formally published in October 2020) demonstrating the poor quality of data on COVID-19 mortality in relation to race/ethnicity – with a map showing that over half the states reported no race/ethnicity data for COVID-19 and only 4 reported high quality data (with less than 5% missing data on race/ethnicity) – and said it has taken a lot of work to get the data quality improved. Another big issue was the initial lack of age-adjusted mortality rates by race/ethnicity, which was a huge problem, given the existence of huge inequities in age-related mortality and higher premature mortality among communities of color. She noted that other teams were likewise pointing out the data problems early on in the pandemic, likewise aware of the all-too predictable health inequities that would surface. Also in April 2020, she was appointed by the Governor of CT to an Advisory Group on re-opening CT, and served as chair of the committee focused on the most vulnerable. In addition to updating the dashboard to provide age-adjusted COVID-19 data, the committee’s work showed the critical importance of getting real-time responsive data – as per the contact tracing data, given the need to use data to help identify those needing more resources (e.g., because they have low-wage jobs, live in crowded multigenerational homes) and connect them to the relevant community-based organizations that could provide support. With regard to vaccine equity, it was not at all surprising that there were initially racial/ethnic inequities in vaccine access and uptake, reflecting a lack of spatial and temporal access (e.g., paid time off from work and closeness of vaccination sites), which was combined with a lack trustworthiness of the institutions administering the vaccines. However, the latest data show that, nationally, vaccination rates for all racial/ethnic groups are now about the same (between 70-75% have had at least 1 dose, with this percent higher for older age groups across race/ethnicity) – and getting there required hyperlocal data, triangulating data across multiple sources (KFF, PEW, Gallup, CDC). The initial data on the inequities helped support policies and resource allocation that: increased use of trusted settings (36 community sites, 870 community health centers, 400 mobile units, & dialysis units); shifted prioritizing access to the vaccines (including by giving small businesses a tax credit for giving employees paid time off to get vaccinated); and also improved vaccine confidence. She next described how members of the COVID-19 Health Equity Task Force included people outside of public health offering expertise informed by their lived experience plus staff from diverse federal agencies (including health agencies); see: <https://www.minorityhealth.hhs.gov/omh/browse.aspx?lvl=2&lvlid=100>. This Task Force was established by Executive Order on the first day of the Biden Administration, alongside a task force on equity & data across government agencies. Between January and February 2021, the Task Force was formed; from March through July it focused on operations; and from August-October it worked on preparing its final report – and it will review and vote on the report at its next meeting, on Thurs, Oct 28, 2021, from 1-4 pm ET (<https://www.minorityhealth.hhs.gov/omh/browse.aspx?lvl=3&lvlid=120>; the meeting is open to the public and can be viewed at: <https://www.hhs.gov/live/live-1/index.html> -- no registration is required). Among the Task Force’s 4 subcommittees, one focused specifically on data – and the 5 top lines for recommendations of the overall Task Force concern the need for: (1) community-led solutions; (2) improving the data ecosystem; (3) increasing accountability; (4) increasing diversity in the health care workforce; and (5) establishing a permanent infrastructure for health equity in the White House. Key issues regarding data pertain to: (a) the lack of disaggregation and corresponding inability to do intersectional analysis; (b) outdated data infrastructure; and (c) lack of standardization of data elements across systems (including in relation to race/ethnicity) and also data reporting – such that data on hard hit communities has been limited, inaccurate, and has rendered them invisible. The work of the COVID-19 Health Equity Task Force thus underscores why data constitute a social justice issue. Lastly, regarding the new Community Health Equity Accelerator initiative being established at Yale, a central focus is on generating community-responsive health equity data in real time, informed by the needs of communities, so as to guide policy and produce data for accountability. This work will engage with existing data and also generate new data to meet these goals.

Palak Shah, the director of the NDWA Labs (see: <https://www.ndwalabs.org/domestic-work>), the innovation arm of the National Domestic Workers Alliance (NDWA: <https://www.domesticworkers.org/>), next spoke about how NDWA Labs seeks to use technology and data to disrupt unequal power, so as to empower domestic workers, including in relation to dealing with COVID risks. A key objective is to make domestic workers visible, since they otherwise are typically rendered invisible – in data, in programs, and in policy. The way the COVID-19 pandemic played out for

NDWA and domestic workers really pointed to the importance of getting data to guide action. At issue are conditions, in the US, for the ~2.5 million domestic workers, including caregivers, babysitters, and cleaners, who are overwhelmingly women and disproportionately women of color. When the pandemic began, it was clear that it would have an enormous impact on domestic workers, since by definition they work in other people's homes and cannot work remotely – and by late March 2020, data indicate ~50% of US domestic workers had lost their jobs. NDWA realized they needed data on how the crisis was playing out, so they could push the right levers for policy responses. Also important was showing how COVID revealed how domestic work make other work possible, even as domestic work is typically not viewed as “real work,” but instead deemed to be only “help.” Historical context is important for understanding why: in the US, the roots of domestic work are in the labor of enslaved Africans and Indigenous women, and currently domestic work often exists in the “gray” economy and is often the 1st or only job for persons who are undocumented immigrants. The historic failure of the US to see, value, and protect domestic workers was codified in the New Deal policies of the 1930s, whereby the only 2 groups left out of minimum wage and union protections were domestic workers and farmworkers, because their inclusion was rejected by Southern Democrats, who agreed to support the New Deal only by excluding these protections, given that in the US South both domestic workers and farmworkers were overwhelmingly comprised of Black Americans. Currently, domestic workers are 3 times more likely than other workers to live below the poverty line, and they have no access to benefits, or a safety net – and these conditions set the ground on which COVID played out. One response of NDWA was to set up a COVID-19 care fund, which raised \$30 million that they allocated to 50,000 domestic workers. Another was to push for policy solutions to the crisis, which they knew needed data. Hence: they built up their chatbox on Facebook, which reaches 200,000 domestic workers in Spanish (and is the largest digital network of domestic workers in Spanish). NDWA Labs sent their first survey on March 13 and by March 14 had already received over 11,000 replies – saying that their conditions had been worsened by COVID-19. They kept sending surveys, every week, asking about the domestic workers about their worries about COVID-19, economic insecurity, food insecurity, rent insecurity, etc. – so as to confirm, at scale, what NDWA and these workers knew was going on (e.g., in the last month, fully 50% reported housing insecurity and 77% reported food insecurity). NDWA also started releasing the surveys on the same day as the US government labor reports, to make clear domestic workers should be included in these reports. The purpose of the surveys and their data are to make domestic workers visible, in an effort led by workers for workers, and NDWA continues to improve the methods, making sure there is an equal emphasis on HOW they ask the questions as well as WHAT questions they ask. This is because they know that workers open up only if there is trust, so they need to build trust. NDWA also ensures questions are asked the workers' preferred language, and combine practical information with each survey (e.g., if the survey includes questions about food insecurity, it also includes a link to a website the identifies where the closest foodbank is located). Hence: the data reflect what & who NDWA values – and *the surveys are an expression of caring*. There is both a moral and pragmatic rationale for the surveys. Morally, domestic workers are highly vulnerable, and the surveys begin to address the impacts of generations of historical wrongdoing. Pragmatically, domestic workers are the future of work, and the kinds of jobs in which there is major job growth and that cannot be outsourced (& are unlikely to be automated), i.e., child care and elder care – and it thus is imperative to invest in this part of the economy. The data NDWA is generating provide information week-to-week, month-to month, of domestic workers' conditions, and is collected based on a trusted relationship, and not the result of extractive or transactional relationships. The goal is for workers to feel seen and cared for, and to give them a say, meeting them where they are. Work is underway to reach domestic workers in languages other than Spanish (e.g., English, other languages). Always present is recognition of whom NDWA is collecting data from and why, and also: who is missing. The point is to make the invisible visible – and have this inform action.

Fernando Tormos-Aponte, PhD, a Kendall Fellow at the Center for Science and Democracy, a component of the Union of Concerned Scientists (UCS: <https://www.ucsusa.org/>) (and University of Maryland-Baltimore County, Baltimore, MD), then discussed how UCS brings together scientists, policy professionals, and advocates to use and call for data to support science, policies and action needed for social justice, including health justice. He defined science advocacy as entailing sustained, organized and collective efforts to bring about social change, in relation to the conduct and application of science, and he emphasized that data show that social movements have a big impact on social change and moving people to action. In the case of the Union of Concerned Scientists, it was formed on March 4, 1969 in Cambridge, MA, informed by the radical spirit of scientists critiquing weapons and war, and who were engaged in the anti-nuclear, anti-war, and environmental movements. Over time, its portfolio has expanded to include an emphasis on environmental justice and racial justice, along with building up its Center for Science and Democracy (<https://www.ucsusa.org/science-democracy>). A key recognition is that scientific societies are places for scientists to meet, build power, and take collective action under the auspices of these organizations. Surveys document that scientists active in these societies typically have higher levels of political engagement, compared to those not active in these societies. This has been especially crucial at a time when science is under attack, especially in relation to governmental orders that

restrict what kinds of science can inform policy, along with studies being halted, scientists being prevented from attending conferences, etc. One example provided of scientific advocacy was scientific opposition, including by numerous scientific societies, to the proposed EPA rule, put forth under the Trump Administration, that would have severely limited the kinds of scientific evidence deemed admissible for setting policy (see, for example: <https://www.ucsusa.org/about/news/epa-rule-restricting-science-puts-agencys-mission-risk-0>); notably, a prebuttal letter was signed by over 900 scientists. Union of Concerned Scientists additionally prepared a guide for scientists to submit comments, and also held a virtual hearing when the EPA refused to do so, in May 2020. The final decision of a judge to throw out this EPA rule was heavily influenced by this science advocacy. Other work that the Union of Concerned Scientists has led, involving data and advocacy, has been in the realm of environmental justice. One report, “*Double Jeopardy in Houston: Acute and Chronic Chemical Exposures Post Disproportionate Risks for Marginalized Communities*,” was prepared in collaboration with TEJAS, a community-based group (see: <https://www.ucsusa.org/resources/double-jeopardy-houston>); another, on “*Abandoned Science, Broken Promises*,” analyzed how the Trump Administration’s neglect of science was leaving marginalized communities even further behind (see: <https://www.ucsusa.org/resources/abandoned-science-broken-promises>). Other forms of advocacy have included the March for Science, building the Union of Concerned Scientists’ science network (see: <https://www.ucsusa.org/science-network>), and emphasizing that science does not speak for itself – people have to speak for it. Of note, surveys conducted by the Union of Concerned Scientists have documented that those who reply mainly feel they are supported by their colleagues for taking a stand – but the data also show that this may be related to the demographics: 50% are retired, 66% are men, and 84% are white – and it is likely riskier for younger scientists, especially women and/or of color, to speak out. The Science Network is seeking to build intersectional solidarity and to build up norms of inclusion, recognizing that both contribute to sustaining activism. From this standpoint, diversity is a resource.

Vanessa Simonds, ScD, a member of the Crow Nation and Spirit of 1848 Coordinating Committee, and based at Montana State University (Bozeman, MT), served as discussant, and brought a critical Indigenous perspective to panel’s discussion, including her expertise in participatory research and Indigenous methodologies. She first discussed how the points raised by Dr. Marcella Nunez-Smith resonated with the issues of Indigenous invisibility in the COVID-19 pandemic, whereby the data were compromised by misclassification, non-inclusion of categories for Indigenous persons, lack of data on urban Indians not covered by the Indian Health Services (IHS), and failure to account for how people travel back and forth between the urban areas and those covered by the IHS. To describe this situation, she recounted how Abigail Echo-Hawk contends that the lack of these data continues genocide, via erasure (see: <https://www.uihi.org/people/abigail-echo-hawk-ma/>). An additional parallel concerns the case of missing murdered Indigenous women – which is not a new issue, but new attention is being brought to this problem by activists pointing to the data gaps, and also to the problems of data governance, as tied to dealing with both public health and law enforcement data, plus different jurisdictions and lines of authority for both. The fundamental point is that to be unseen is to be unprotected. A related point is the need to be critical about the stories told with the data, and not to tell only stories of deficits, which stigmatize entire communities, but instead produce data and stories about how communities are working to improve conditions – and telling these stories correctly requires relationships of reciprocity. In her own work on environmental justice in the Crow Nation, she described how the community was seeking out environmental literacy, and asked for data on water, and was using these data to promote science advocacy, teaching youth about why water is important and why it must be protected, from whom and what is harming it.

During the Q&A period, comments and exchanges focused on:

(1) *How does science advocacy and use of science address issues of trust, given that not all science is trustworthy, as exemplified by long histories of scientific racism, eugenics, etc.?*: answers included: (a) most scientists are not trained to deal with issues of trust, and need to be, with recognition that such training will lead to better science, and informs prioritizing community-led solutions to public health problems; (b) a critical approach is to build better collaborations, with reciprocity; (c) another is to work with IRBs to train people to think about relationships and trust when designing scientific studies; (d) still another is for advocacy groups to invite scientists to participate with them, bringing also the resources of their academic institutions; and (e) also crucial to lean into the idea of “surveys as care,” and to see the knowledge produced in this way can be a crucial asset, which can be supplemented by additional methods.

(2) *Is the COVID-19 Health Equity Task Force linking COVID-19 data to the Social Vulnerability Index (SVI)?* (see: <https://www.atsdr.cdc.gov/placeandhealth/svi/index.html>): the answer was that use of the SVI is going in the right direction, but there is a need to deepen analysis of metrics used for allocating resources, especially since there is not a one-size-fits all metric that works for the diversity of all social groups and geographic regions.

(3) *Could there be WPA-like funding (referring to 1930s funding by the federal Works Progress Administration) to build the scientific workforce, e.g., focused on 1st gen college students, many of whom lost their jobs in the pandemic?:* answers pointed to how the COVID-19 response and “Build Back Better” do include WPA-style funding for community health workers, and put funds into building a caring economy, but more needs to be done for the kinds of college students mentioned.

(4) *What are other social media that NDWA could use?:* the answer discussed how domestic workers like to use TikTok to share and celebrate their techniques, and other plans under discussion include creating a domestic worker talk show.

• STUDENT POSTER SESSION

<https://apha.confex.com/apha/2021/meetingapp.cgi/Session/62498>

The estimated minimal attendance for this session was ~ 25 people (for the live session; the posters were up for display throughout the conference).

Our 20th “STUDENT POSTER SESSION: SOCIAL JUSTICE AND PUBLIC HEALTH” had 6 posters (listed below; presenters’ names in **bold font**); the abstracts & video presentations can be seen (if you registered for the APHA meeting) at the APHA website at: <https://apha.confex.com/apha/2021/meetingapp.cgi/Session/62498>.

Of note, the students presenting were glad to share their work with those who came to live session on the Thursday before the opening of the APHA meeting, and greatly enjoyed connecting with each other. For many of the students, it was their first time presenting at a scientific meeting. The student poster session accordingly continues to meet our objective of helping to bring forward & connect the next generation of scholars linking social justice and public health in their work – and we surely need their enthusiasm, energy, outrage, insights, and organizing for all the challenges we face!

Spirit of 1848 social justice & public health student poster session (Thurs, Oct 21, 12:30-2 pm MDT, Session PS1068.0 – PS-SCI)

• **Poster 1** – Finding the solidarity in “solidarity not charity”: A qualitative study on mutual aid in the era of COVID-19 -- **E. Hops, MPH(c)**, A. Hagopian, PhD, and N. Kenworthy, PhD • **Poster 2** – Decolonizing public health education for liberation: Restructuring Filipinx/a/o American solidarity in health -- **E. R. Cruz, MPH (c)** and D. Rebanal, DrPH, MPH • **Poster 3** – Patient nativity and deportations from California mental health institutions practicing eugenic sterilization, 1908-1936 -- **L. Smith, BA**, B. Easler, J. Gudino, MPH, N. Novak, PhD, MSc, and A. Stern, PhD • **Poster 4** –Power, oppression, and liberation: Equipping students with tools to kill white supremacy – **Trinidad Jackson, PhD(c), MS, MPH** • **Poster 5** – Assessing course content to promote progressive pedagogy in public health graduate education: a resource for anti-racist public health pedagogy – **Deanie Anyangwe**, Hailey Mason, Emmanuel Saint-Phard • **Poster 6** – Excluded from protections: Joint experiences and embodiment of workplace hazards among informally employed domestic workers, United States, 2011-2012 – **E. Wright, BA**, J. Chen, ScD, J. Beckfield, PhD, N. Theodore, PhD, and N. Krieger, PhD

Note: short videos of the presentations are available for the posters prepared by Hops et al (Poster 1), Cruz et al (Poster 2), Smith et al (Poster 3), and Wright et al (Poster 6) – see: <https://apha.confex.com/apha/2021/meetingapp.cgi/Session/62498>

Onwards!

Spirit of 1848 Coordinating Committee

SPIRIT OF 1848 MISSION STATEMENT

November 2002

The Spirit of 1848: A Network linking Politics, Passion, and Public Health

Purpose and Structure

The Spirit of 1848 is a network of people concerned about social inequalities in health. Our purpose is to spur new connections among the many of us involved in different areas of public health, who are working on diverse public health issues (whether as researchers, practitioners, teachers, activists, or all of the above), and live scattered across diverse regions of the United States and other countries. In doing so, we hope to help counter the fragmentation that many of us face: within and between disciplines, within and between work on particular diseases or health problems, and within and between different organizations geared to specific issues or social groups. By making connections, we can overcome some of the isolation that we feel and find others with whom we can develop our thoughts, strategize, and enhance efforts to eliminate social inequalities in health.

Our common focus is that we are all working, in one way or another, to understand and change how social divisions based on social class, race/ethnicity, gender, sexual identity, and age affect the public's health. As an activist and scholarly network, we have established four sub-committees to conduct our work:

- 1) Public Health Data:** this sub-committee will focus on how and why we measure and study social inequalities in health, and develop projects to influence the collection of data in US vital statistics, health surveys, and disease registries.
- 2) Curriculum:** this sub-committee will focus on how public health and other health professionals and students are trained, and will gather and share information about (and possibly develop) courses and materials to spur critical thinking about social inequalities in health, in their present and historical context.
- 3) E-Networking:** this sub-committee will focus on networking and communication within the Spirit of 1848, using e-mail, web page, newsletters, and occasional mailings; it also coordinates the newly established student poster session.
- 4) History:** this sub-committee is in liaison with the Sigerist Circle, an already established organization of public health and medical historians who use critical theory (Marxian, feminist, post-colonial, and otherwise) to illuminate the history of public health and how we have arrived where we are today; its presence in the Spirit of 1848 will help to ensure that our network's projects are grounded in this sense of history, complexity, and context.

Work among these sub-committees will be coordinated by our Coordinating Committee, which consists of a chair/co-chairs and the chairs/co-chairs of each of the four sub-committees. To ensure accountability, all public activities sponsored by the Spirit of 1848 (e.g., public statements, mailings, sessions at conferences, other public actions) will be organized by these sub-committees and approved by the Coordinating Committee (which will communicate on at least a monthly basis). Annual meetings of the network (so that we can actually see each other and talk together) will take place at the yearly American Public Health Association meetings. Finally, please note that we are NOT a dues-paying membership organization. Instead, we are an activist, volunteer network: you become part of the Spirit of 1848 by working on one of our projects, through one of our sub-committees--and we invite you to join in!

Community email addresses:

Post message: spiritof1848@googlegroups.com
Subscribe: spiritof1848+subscribe@googlegroups.com
Unsubscribe: spiritof1848+unsubscribe@googlegroups.com
List owner: 1848.spirit@gmail.com
Web page: www.spiritof1848.org

First prepared: Fall 1994; revised: November 2000, November 2001, November 2002

NOTABLE EVENTS IN AND AROUND 1848

1840-

1847: Louis Rene Villermé publishes the first major study of workers' health in France, A Description of the Physical and Moral State of Workers Employed in Cotton, Linen, and Silk Mills (1840) and Flora Tristan, based in France, publishes her London Journal: A Survey of London Life in the 1830s (1840), a pathbreaking account of the extreme poverty and poor health of its working classes; in England, Edwin Chadwick publishes General Report on Sanitary Conditions of the Laboring Population in Great Britain (1842); first child labor laws in the Britain and the United States (1842); end of the Second Seminole War (1842); prison reform movement in the United States initiated by Dorothea Dix (1843); Frederick Engels publishes The Condition of the Working Class in England (1844); John Griscom publishes The Sanitary Condition of the Laboring Population of New York with Suggestions for Its Improvement (1845); Irish famine (1845-1848); start of US-Mexican war (1846); Frederick Douglass founds The North Star, an anti-slavery newspaper (1847); Southwood Smith publishes An Address to the Working Classes of the United Kingdom on their Duty in the Present State of the Sanitary Question (1847)

1848: World-wide cholera epidemic

Uprisings in Berlin, Paris, Vienna, Sicily, Milan, Naples, Parma, Rome, Warsaw, Prague, Budapest, and Dakar; start of Second Sikh war against British in India

In the midst of the 1848 revolution in Germany, Rudolf Virchow founds the medical journal Medical Reform (Die Medizinische Reform), and publishes his classic "Report on the Typhus Epidemic in Upper Silesia," in which he concludes that preserving health and preventing disease requires "full and unlimited democracy"

Revolution in France, abdication of Louis Philippe, worker uprising in Paris, and founding of The Second Republic, which creates a public health advisory committee attached to the Ministry of Agriculture and Commerce and establishes network of local public health councils

First Public Health Act in Britain, which creates a General Board of Health, empowered to establish local boards of health to deal with the water supply, sewerage, cemeteries, and control of "offensive trades," and also to conduct surveys of sanitary conditions

The newly formed American Medical Association sets up a Public Hygiene Committee to address public health issues

First Women's Rights Convention in the United States, at Seneca Falls

Seneca Nation of Indians adopts its Constitution

Henry Thoreau publishes Civil Disobedience, to protest paying taxes to support the United State's war against Mexico

Karl Marx and Frederick Engels publish The Communist Manifesto

1849-

1854: Elizabeth Blackwell sets up the New York Dispensary for Poor Women and Children (1849); John Snow publishes On the Mode of Communication of Cholera (1849); Lemuel Shattuck publishes Report of the Sanitary Commission of Massachusetts (1850); founding of the London Epidemiological Society (1850); Indian Wars in the southwest and far west (1849-1892); Compromise of 1850 retains slavery in the United States and Fugitive Slave Act passed; Harriet Beecher Stowe publishes Uncle Tom's Cabin (1852); Sojourner Truth delivers her "Ain't I a Woman" speech at the Fourth Seneca Fall convention (1853); John Snow removes the handle of the Broad Street Pump to stop the cholera epidemic in London (1854)