BUILDING INCLUSIVE EXCELLENCE THROUGH AN ANTI-RACISM LENS: TRANSFORMATIVE ACTION IN ACADEMIC PUBLIC HEALTH

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ASPPH
FRAMING THE FUTURE 2030
EDUCATION FOR PUBLIC HEALTH

PREFACE

The *Inclusive Excellence through an Anti-racism Lens* expert panel is part of the "Framing the Future 2030: Education for Public Health" (FTF 2030) project, initiated by the Association of Schools and Programs of Public Health (ASPPH) in 2020, which represents a pivotal shift in learning and teaching public health. Acknowledging the rapidly evolving global health landscape, marked by challenges like the COVID-19 pandemic, eroding public trust in health authorities, and persistent upstream social determinants of health such as racial and social inequalities, FTF 2030 aims to redefine and enhance education for public health. This initiative builds upon the earlier "Framing the Future" efforts (2011-2015), continuing the commitment to anticipate and meet emerging public health needs.

Central to FTF 2030 are the following three expert panel reports and **executive summary**

Building Inclusive Excellence through an Anti-racism Lens

Transformative Approaches to Teaching and Learning

Fostering Community Partnerships for a Healthier World

The panels' reports propose aspirational recommendations and questions intended to stimulate reflective dialogues among university leaders, faculty, staff, students, and partners. The initiative recognizes the diverse nature of ASPPH member institutions and seeks to offer broadly applicable recommendations to members and to all schools and programs of public health for their consideration in transforming education for influencing better health outcomes. The goal is to ensure that future public health professionals are equipped - not only with knowledge - but with future-ready competencies, including a sense of civic responsibility and adaptability to navigate the complexities of the public health landscape with a wide array of partners. The success of FTF 2030 is envisioned to reflect in the health and well-being of the communities served by these graduates, assisting in co-creating a healthier, more equitable and resilient world.

INTRODUCTION

As defined in the Association of Schools and Programs of Public Health's **Zero Tolerance of Harassment and Discrimination in Schools and Programs of Public Health** statement (Halkitis et al., 2020), the association opposes harassment and discrimination in all forms – including **racial discrimination**. The American Public Health Association (APHA), furthermore, has declared racism as both a public health crisis and a social determinant of health in the United States (American Public Health Association, 2020; American Public Health Association, 2022). As part of their commitment to action, APHA analyzed and highlighted declarations intended to transform the historic realities of racial injustice to actions promoting racial healing, health equity, and the elimination of barriers to inclusive excellence where people work, live, and play. These declarations have been adopted by city/town councils, county boards, governors and mayors, education boards (e.g., school boards), and health associations or public health departments (American Public Health Association, 2021).

This racial reckoning by a leading scientific public health association acknowledges 400 years of slavery as a unique experience for African Americans, recognizes the cultural trauma of genocide and colonialism on Indigenous peoples, underscores their harmful population health effects, and centers the legacy of historically sanctioned marginalization and lack of inclusion in the alienable rights afforded those who are white or who ascribe to **whiteness** (APHA, 2020; APHA, 2022; Smith, 2018). Comprehensive research shows that high levels of illness and death are closely connected to the longstanding history of racism and discrimination. This past has hindered the achievement of inclusive excellence in various entities, including organizations, institutions, laws, systems, policies, and procedures (Hill et al., 2023; Pillai et al, 2023). It is incumbent upon academic institutions, especially schools and programs of public health (hereafter, schools and programs), to respond via a call for transformative action.

ASPPH embraces the tenets of inclusive excellence by embedding the principles of social justice, health equity, and achieving well-being for everyone, everywhere as part of its **Strategic Plan 2030** (Association of Schools and Programs of Public Health, 2023a) and vision for FTF 2030 (Association of Schools and Programs of Public Health, 2023b). This vision draws from the blueprint for action ASPPH crafted in 2021 in ***Dismantling Racism and Structural Racism in Academic Public Health: A Framework*** (Dismantling Framework). The Dismantling Framework details strategies for engaging with five key groups: faculty, students and alumni, staff, populations served, and the public health workforce to stimulate change in academic public health and higher education overall. The Dismantling Framework provides a series of immediate, intermediate, and long-term strategies for success. It centers key strategies for dismantling structures that impede progress towards eliminating racism in academic public health with the ultimate goal to achieve health equity.

In this document, the *Inclusive Excellence through an Anti-racism Lens* expert panel (see the expert panel roster in **Appendix A**) advances the Dismantling Framework strategies by further framing recommendations deemed essential to transforming academic structures to promote **lifelong learning**, equity in decision-making, and policies and procedures that serve all constituents. This approach is undertaken through a continued examination of the historical root causes of current inequalities. In consequence, the panel proposes the following five key recommendations to deliver a resilient educational system for public health that advances health equity and well-being for everyone, everywhere.

KEY RECOMMENDATIONS

1 **CREATE AND SUPPORT**
inclusive and anti-racist teaching, learning, and working environments by articulating norms and values, training and supporting constituents, and building infrastructures and systems to bolster efforts.

2 **ESTABLISH**
necessary partnerships and secure resources, including leadership commitments, to sustain efforts and assure accountability.

3 **INCREASE**
commitment, perseverance, discipline, and consistency of inclusive efforts among all members of our respective institutions.

4 **DEVELOP**
system-wide initiatives to promote and assure accountability for inclusive excellence through an anti-racism lens.

5 **SHARE**
initiatives aimed at inclusive excellence through an anti-racism lens to accelerate institutionalization and integration across academic public health.

Terms used in this report to support the panel's recommendations are defined in the glossary in **Appendix B**.

BACKGROUND AND SIGNIFICANCE OF CURRENT RECOMMENDATIONS FOR FRAMING THE FUTURE

Exclusion, marginalization, and oppression of all kinds, including **structural racism and discrimination**, are grounded in legacies of colonization and **white supremacy** in the United States and globally, including within educational institutions (Association of Schools and Programs of Public Health, 2021). These legacies manifest over time and space as an interlocking cultural, political, and economic system that reifies systemic, hierarchical resource domination and inheritance by white people and, to a lesser extent, to those who ascribe to whiteness (Jason, 2020; Leonardo, 2004).

This system is comprised of structures, institutions, policies, and norms that determine the conditions of daily life (i.e., the structural or social determinants of health or SDOH) through providing or limiting opportunities and resources for the optimal health and well-being of individuals, communities, and populations (Pieterse & Powell, 2016; Krieger, 2010; APHA, 2020, 2021, 2022; Hill et al., 2023; Pillai et al, 2023). Structural racism and discrimination, furthermore, is fueled by **anti-Blackness** (Okun, 2021; Comrie et al., n.d.) and **anti-Indigeneity** (Ahtone, 2020). Anti-racism praxis, therefore, is a sustained effort to "enable equity, social justice, and peace and move toward a world where racism is non-existent or its health effects are negligible" (Came & Griffith, 2018; Ford & Airhihenbuwa, 2010).

Intersectionality, coined by Patricia Hill Collins, Kimberle Crenshaw, and fellow scholars, is an essential tenet of anti-racism praxis and relevant theoretical framework for public health practice. It refers to the critical interrogation of how power is exerted across systems and experienced differently by members of various groups depending on their social identities, including race, ethnicity, gender and gender expression, sexual orientation, ability, language, nationality, religion, socioeconomic status, and geographic location, among others. Bowleg's definition of intersectionality is referenced in this report's Glossary of Terms. It is essential to employ intersectional methods to analyze and reform systems for equity and fairness. This approach is key to fully eliminating obstacles and enhancing the capabilities of all communities, particularly within academic public health environments, as emphasized in this report.

In addressing exclusion, marginalization, intersectionality, and oppression of all kinds - with a special lens on racism in systems, policies, practices, and norms as a foundation for health equity approaches in education for public health - the panel is striving to realize public health. Public health is defined by the National Academies of Sciences, Engineering, and Medicine as "what we, as a society, do to collectively assure the conditions in which people can be healthy" (Institute of Medicine, 1988, p. 1). Establishing a method for schools and programs to adapt efforts to their unique environments is proposed as a way to use the collective strength of the academic public health community. This would then allow for unity around a practical framework for action, fulfilling the goal of achieving health for everyone.

Inclusive excellence through an anti-racism lens, as defined by the panel, refers to the "cohesive, coherent, collaborative, and measurable integration of inclusion, diversity, and equity, while centering the naming and dismantling of white supremacy culture, in the pursuit of excellence across the research, teaching, and practice mission of academic public health, including all activities by leadership, faculty, learners, staff, alumni, and the broader community" (Association of Schools and Programs of Public Health, 2022a). The panel acknowledges the formative efforts its leadership undertook in recent years to commit to eliminating harassment and discrimination in academic public health (Halkitis et al., 2020) and to dismantle structural racism in society and structural racism in academic public health through the Dismantling Framework (Association of Schools and Programs of Public Health, 2021).

Academic public health, furthermore, is committed to abolishing white supremacy culture by delivering both inclusion *and* excellence in schools and programs. How? The panel proposes liberating practices that can transform schools and programs and, as we look beyond to the larger global landscape, frame a future where all communities could achieve their most justice-oriented dreams for health and well-being. As the aim of public health is to prevent injury, disease, disability, and death, we – representing the many disciplines within public health – invite all to apply mindsets and practices towards becoming skillful and fluent at naming, subduing, and repairing structural racism and discrimination in our hearts and within our systems.

> **Academic public health is uniquely positioned and committed to social justice and to dismantling discriminatory and oppressive practices and to creating more inclusive institutions that provide current and future generations of public health practitioners with the skills needed to create a more equitable world.**

The panel is drawing from a complex and significant historical background with the goal of enhancing current strengths and achievements while addressing challenges and bridging disparities. This work is set against a backdrop of changing modern political and social landscapes, notably marked by the recent Supreme Court of the United States (SCOTUS) decision to terminate race-conscious admissions in higher education, alongside other obstacles to diversity, equity, inclusion, and social justice. The panel recognizes that the work for inclusive excellence and health and racial equity is an ongoing and evolving process, not simply an outcome to be achieved. It includes the creation of just policies and practices as well as their just implementation and evaluation. Equity rests upon the value, inclusion, and love of people and the many different experience they bring.

This process is accountable to those who have been most impacted by legacies of systemic oppression to ensure a break from the status quo and for repairing past harms. It calls upon cultural humility for all, especially for those in positions of power to do their part to address harms with intentionality and fervor. The work is complex and requires changing mindsets to establish a culture of inclusion for ensuring success and sustaining positive change. The panel acknowledges that these processes take time and perseverance and that they benefit from collaboration and synchronization across many ASPPH and partners' efforts, drawing guidance and strategies from the Dismantling Framework, particularly the "Immediate Strategies" from Domain 1: Education, Pedagogy & Training (ASPPH, 2021) and the panel's own **Environmental Scan (executive summary here)**.

The panel also acknowledges that their composition is largely academic, and that practitioners' and community partners' voices are imperative to inform this work. To bring in non-academic perspectives, panel members reached out to partners in three ASPPH FTF 2030 town halls and other venues to learn about their experiences and to discuss planning for this educational transformation (Sullivan et al., 2023).

As an additional step in developing this report, ASPPH conducted an internal vetting process between October 2023 through January 2024 among co-chairs of ASPPH's Diversity and Inclusion Section, ASPPH's Diversity and Inclusion Advisory Committee, and a new Inclusive Excellence Working Group (see **Appendix C** for a brief overview of the internal vetting process and findings). We extend acknowledgement and gratitude to the participants for their expertise and guidance in improving this report.

The key processes identified as the panel's overarching recommendations are designed with the following elements:

DELIBERATIVE GUIDING QUESTIONS

for self-reflection, decision-making, and strategic planning

SUPPORTIVE STRATEGIES AND ESSENTIAL ACTIONS

(Table 1) for achieving success

IMPLEMENTATION EXAMPLES

(Table 2) to serve as illustrations for potential adoption or adaptation

DELIBERATIVE GUIDING QUESTIONS

In pursuit of delivering inclusive excellence, the panel aims to facilitate critical reflection and open, collaborative discussions among members and partners of schools and programs by use of thoughtful, deliberative guiding questions. These questions are proposed to aid in the open exploratory process of promoting and supporting inclusive excellence.

The questions are tailored to each of the FTF 2030 drivers, and their relevance naturally extends across driver domains, encompassing university or school or program of public health governance, leadership, or administration; faculty; staff; learners; and partners. This collaboration is necessary due to the intricate overlaps among the drivers in academic public health.

Schools and programs are encouraged to adopt or adapt the questions in planning and implementing educational change that responds to their institutions' unique missions, contexts, and complex strategic objectives across all the drivers listed above. Focused discussions, reflection, prioritization, and decision-making about approaches to inclusive excellence require steps that probe and respect each institution's diverse local environment, culture, structures, and constituents in relation to readiness for educational transformation.

Various research models could be used to pose these questions. For example, one way to start is to identify working groups to explore and support conversations on various topics that could help advance inclusive excellence through an anti-racism lens in one's specific environment. Alternatively, a retreat involving key players is another effective approach to creating space necessary for honest and in-depth exploration. It is important to match engagement processes to one's context.

Additionally, accreditors such as the Council on Education for Public Health (CEPH) and other certification and licensing bodies could consider these questions in assessing, demonstrating, and verifying inclusive excellence through an anti-racism lens as part of their standards and mandates across all drivers.

AS A MEMBER OF THE UNIVERSITY OR SCHOOL OR PROGRAM OF PUBLIC HEALTH GOVERNANCE, LEADERSHIP, OR ADMINISTRATION

1. How does your **university and school or program** define and prioritize inclusive excellence with an anti-racism lens?

2. How does your **university and school or program** ensure that diversity, equity, and inclusion are integral components of the university's strategic plan and policies?

3. To what extent does the **university and school or program** reflect on the limitations and inherent biases of its current policies to ensure that inclusive excellence defines the policies?

4. What mechanisms are in place to assess and address any existing racial inequities within the **university and school or program**?

5. How does your **university and school or program** provide opportunities for open dialogue and understanding around issues of race and racism?

6. How does your **university and school or program** hold itself accountable for its commitment to inclusive excellence and anti-racism?

7. How does your **university and school or program** ensure that anti-racism efforts are integrated into the curriculum and co-curricular activities?

8. How does your **university and school or program** ensure that the physical and digital campus spaces are inclusive, accessible, and welcoming to all members of the community?

9. How does the **university and school or program** measure effectiveness and outcomes of inclusive excellence with an anti-racism lens' policies, initiatives, etc. on campus?

10. How does the **university and school or program** encourage faculty, staff, and **learners** to improve and grow to support inclusive excellence and anti-racist work?

11. How does your **university and school or program** improve professional development activities for staff to enhance their understanding of racism, discrimination, and oppression?

12. How do you promote allyship and cultural humility among **faculty, staff, and learners** to create a more inclusive, equitable, and culturally humble campus community?

13. What initiatives and programs are in place to support the recruitment, retention, and professional development of a diverse **faculty** that reflects the student body and the broader community?

14. How do your **university and school or program** faculty development activities and policies promote inclusive excellence through an anti-racism lens in promotion and tenure processes and decisions?

15. What resources and support do you provide to **staff** members to foster an inclusive, equitable, and culturally humble work environment?

16. How does your institution actively involve **learners** in shaping and advancing anti-racist initiatives on campus?

17. What support systems and resources are available to **learners** from underrepresented backgrounds to ensure their success and well-being?

18. How does your institution collaborate with **practice and community partners** to address racial inequities and promote social justice?

19. What partnerships and collaborations exist between the **university and community organizations** that aim to address systemic racism and promote social justice?

20. How do you engage with **local communities** to ensure that their voices and perspectives are incorporated into decision-making processes that affect them?
21. How is your **university and school or program** taking steps to address and rectify past harms to the **community** you serve? How do you communicate your commitment to anti-racism and inclusive excellence to internal and external **partners**?
22. How do you engage with **alumni and donors** to foster their support and investment in anti-racism initiatives?
23. How does your **university and school or program** convey that inclusive excellence with an anti-racism lens is a funding priority?
24. How does your **university and school or program** engage with legislative and governmental bodies to ensure that policies are both protective and constructive in the inclusive excellence space?

AS A FACULTY MEMBER

1. How does your **school or program** review policies and procedures for search and hiring processes, guidelines, and criteria for student mentoring, and mandates around training and professional development in order to ensure alignment with discrimination and harassment laws?
2. How do you engage in professional development activities for becoming self-aware of racism, discrimination, and other forms of oppression?
3. How do you define and prioritize inclusive excellence within an anti-racism lens in your teaching, research, and service work?
4. What steps are you taking to address systemic racism and to promote equity and inclusion in your workspaces?
5. What mechanisms are in place to assess and address any existing racial inequities within your classrooms and workspaces?
6. How do you ensure that anti-racism efforts are integrated into the curriculum and co-curricular activities?
7. How do you contribute to creating a more inclusive, equitable, and culturally humble **campus community**?
8. How do you hold yourself accountable to inclusive excellence and anti-racism values and practices?
9. How do you perceive the progress and impact of anti-racism initiatives within your **university, school, or program**?
10. How do you actively address and dismantle systemic barriers that perpetuate racial inequities in your work?
11. How do you advocate for anti-racism efforts/curricula on your **campus**?
12. How do you support open dialogue and understanding around issues of race and racism?
13. How do you actively seek and apply information to incorporate anti-racism and inclusive excellence into both curricular and co-curricular activities?

14. How do you collaborate with **student** organizations and affinity groups to create a supportive and inclusive campus environment?
15. How do you communicate your commitment to anti-racism and inclusive excellence to **learners, staff, and other colleagues and collaborators**?
16. How do you ensure that your classrooms are inclusive, accessible, and welcoming to all members of the learning **community**?
17. How do you ensure that your research teams are inclusive, welcoming, and respectful of diverse backgrounds and experiences?
18. How do you collaborate with **practice and community partners** to address racial disparities and promote social justice?
19. How do you engage with **local communities** to ensure that their voices and perspectives are incorporated into **university, school, or program** initiatives?
20. How do your teaching and/or research activities interface with **legislative and governmental bodies** to ensure that policies are protective and constructive in the inclusive excellence space?

AS A STAFF MEMBER

1. How does your **school or program** review policies and procedures for search and hiring processes, guidelines and criteria for student mentoring, and mandates around training and professional development in order to ensure alignment with discrimination and harassment laws?
2. How do you engage in professional development activities for becoming self-aware of racism, discrimination, and other forms of oppression?
3. How do you define and prioritize inclusive excellence with an anti-racism lens in your professional activities?
4. What steps are you taking to address systemic racism and promote equity and inclusion in your work and/or department or even unit?
5. How do you incorporate anti-racist practices in your professional activities?
6. What mechanisms are in place to assess and address any existing racial inequities within your workspaces?
7. How do you support open dialogue and understanding around issues of race and racism?
8. How do you perceive the progress and impact of anti-racism initiatives within your **university, school, or program**?
9. How do you collaborate with **student** organizations and affinity groups to create a supportive and inclusive campus environment?
10. How do you support anti-racism efforts that are integrated into the curriculum and co-curricular activities?
11. How do you hold yourself accountable to inclusive excellence and anti-racism?
12. How do you communicate your commitment to anti-racism and inclusive excellence to **learners and colleagues**?

13. How do you actively address and dismantle any systemic barriers that perpetuate racial inequities in your professional activities?
14. What do you do to create a more inclusive, accessible, and welcoming **campus community**?
15. How do you collaborate with **practice and community partners** to address racial disparities and promote social justice?
16. How do you interface with **legislative and governmental bodies** to ensure that policies are protective and constructive in the inclusive excellence space?

AS A LEARNER

NOTE: The panel supports and promotes **lifelong learning** and co-learning. While the primary "learner" audience is traditionally defined as "students" in formal degree and certification programs, we recognize that **learners** include all levels of those seeking to grow their knowledge, build skills, and adopt attitudes that will enhance their chances of success, including faculty and administrator learners, staff learners, and community learners. It is important to acknowledge that "students" are not primarily responsible for facilitating change, as this is the work of other drivers; however, they are equipped with potential and capacities as change agents, and their valued opinions, experiences, aspirations, and goals need to be embraced as critical to transformation.

1. How do you define and prioritize inclusive excellence within an anti-racism lens in your personal and professional practices?
2. How do you hold yourself accountable to inclusive excellence and anti-racism?
3. What resources and support do you need to foster an inclusive, accessible, and welcoming **campus environment**?
4. How does your **university, school, or program** actively involve learners in shaping and advancing anti-racist initiatives on campus?
5. How do you perceive the progress and impact of anti-racism initiatives within your **university, school, or program**?
6. How do you communicate about systemic barriers that perpetuate racial inequities within the **university, school, or program**?
7. How do you communicate progress and opportunities for integrating anti-racism and inclusive excellence into curricula and co-curricular activities?
8. What steps are you taking to address systemic racism and promote equity and inclusion within the **university community**?
9. Which **student** organizations and affinity groups contribute to creating a supportive and inclusive **campus environment**?
10. How do you engage with **local communities** to ensure that their voices and perspectives are incorporated into decision-making processes that affect them?
11. How do you engage with **legislative and governmental bodies** to ensure that policies are protective and constructive in the inclusive excellence space?

AS A PARTNER

1. What is your view of how well the **school or program of public health** incorporates tenets of community-based partnerships and community-based participatory research to ensure how and which faculty and staff are engaged in facilitating relationships with **community partners**, that community voices - particularly Black and Indigenous experiences - are centered, power differentials in agenda setting are examined and addressed, and that award and reward structures are aligned with equity?

2. How do you define and prioritize inclusive excellence within an anti-racism lens?

3. How do you work with fellow **practice and community partners** to support each other in mutual work to become anti-racist organizations?

4. What steps has your **organization** taken to address systemic racism and promote equity and inclusion within its body?

5. How does your **organization** measure outcomes and success in inclusive excellence and anti-racism efforts?

6. How does your **organization** hold itself accountable for its commitment to inclusive excellence and anti-racism?

7. What mechanisms are in place to assess and address any existing racial inequities within your **organization**?

8. What resources and support do you provide to your **staff** members to foster an inclusive, accessible, and welcoming work environment?

9. What activities exist between your **organization and academic partners** in collaborating to address racial disparities and promote social justice?

10. How do you engage with **academic partners** to ensure that the voices and perspectives of those historically underrepresented are heard and valued?

11. How do you communicate your commitment to anti-racism and inclusive excellence internally and externally?

12. How do you ensure that the physical and digital spaces in your **organization** are inclusive, accessible, and welcoming to all members and partners?

13. How do you actively address and dismantle any systemic barriers that perpetuate racial inequities within the **organization**?

14. How do you engage with **legislative and governmental bodies** and act to ensure that policies are protective and constructive in the inclusive excellence space?

RECOMMENDATIONS, SUPPORTIVE STRATEGIES, ESSENTIAL ACTIONS, AND IMPLEMENTATION EXAMPLES

The recommendations and supportive strategies presented below draw from two significant sources: the Dismantling Framework and the work of this Inclusive Excellence panel. Additionally, it is important to highlight the essential actions provided within these tables. These actions represent crucial paths for ensuring success in the journey toward inclusive excellence. It is worth noting that while substantial efforts historically have been dedicated to advancing inclusive excellence, it has often been driven by a passionate few - those who champion the cause. Real and sustained progress hinges on the active and engaged participation of a much broader range of individuals.

Table 1 offers supportive strategies and essential actions aligned with the panel's recommendations for achieving success while Table 2 features implementation examples intended to serve as practical models for potential adoption or adaptation. These examples, some of which are deidentified from an environmental scan conducted by the panel, are offered to demonstrate how innovators have *already* applied components of the strategies and actions presented in Table 1. Together, these tables offer a resource for schools and programs to embark upon or continue in processes toward inclusive excellence as relevant to one's unique context, capacities, and environment.

RECOMMENDATIONS, SUPPORTIVE STRATEGIES, ESSENTIAL ACTIONS, AND IMPLEMENTATION EXAMPLES

TABLE 1: RECOMMENDATIONS, SUPPORTIVE STRATEGIES, AND ESSENTIAL ACTIONS

FTF 2030 DRIVERS

UNIVERSITY OR SCHOOL OR PROGRAM OF PUBLIC HEALTH GOVERNANCE, LEADERSHIP, OR ADMINISTRATION	FACULTY	STAFF	LEARNERS	PARTNERS
1 RECOMMENDATION	**ESSENTIAL ACTIONS**			
Resource, champion, and support	Promote, support, and engage actively	Promote, support, and engage actively	Engage actively, provide feedback	Engage actively, provide feedback

Recommendation 1: Create and support inclusive and anti-racist teaching, learning, and working environments by articulating norms and values, training and supporting constituents, and building infrastructures and systems to bolster efforts

Supportive Strategies:
- Define inclusion, diversity, equity, and anti-racism for your own context
- Evaluate institutional culture and climate surrounding the educational mission*

2 RECOMMENDATION	**ESSENTIAL ACTIONS**			
Prioritize, resource, champion, and support	Collaborate, commit to sustainability efforts	Collaborate, aim for sustainability	Collaborate, aim for sustainability	Collaborate, aim for sustainability

Recommendation 2: Establish necessary partnerships and secure resources, including leadership commitments, to sustain efforts and to assure accountability

Supportive Strategies:
- Administrative and faculty leaders to collaborate broadly in guaranteeing institutional accountability for needed change
- Administrative, faculty, and staff leaders - along with learners - to engage with community partners for securing bidirectional commitments for sustaining efforts and assuring accountability
- Develop partnerships for continuing education opportunities with evidence-based practices that promote excellence in inclusion, diversity, equity, and anti-racism*

3 RECOMMENDATION	ESSENTIAL ACTIONS				
Increase commitment, perseverance, discipline, and consistency of inclusive efforts among all members of our respective institutions	Model and lead	Model and guide	Model and guide	Aspire to grow, practice, and model	Model

Supportive Strategies:
- Policies to explicitly connect participation in trainings as a required component of the annual review and be included in the Promotion & Tenure (P&T) process*
- Mandate holistic application review training* (more recently termed "mission-aligned application review")
- Assure participation in trainings

4 RECOMMENDATION	ESSENTIAL ACTIONS				
Develop system-wide initiatives to promote and assure accountability for inclusive excellence through an anti-racism lens	Prioritize, resource, and support	Commit, actively participate, review, and act on evidence	Actively engage	Actively engage, provide feedback	Actively engage, participate in CQI efforts

Supportive Strategies:
- Articulate planned measures of success*
- Audit scholarship awarding process to ensure fairness*
- Audit all policies (e.g., admissions, recruiting, hiring, promotion) for equity
- Provide training focused on anti-racist admissions and hiring practices for inclusive excellence*
- Develop policies and trainings regarding inclusion, diversity, equity, and anti-racism for the professional development of faculty, staff, and learners based on a "common set of definitions"*
- Develop competencies and curricula in all areas of equity as core to public health professional training*†
- Assess competencies in all areas of equity as core to public health training
- Adopt and adapt public health curricula to highlight the ways racism and other forms of discrimination impact the health and well-being of populations and individuals*
- Integrate content into curricula and programs
- Hold listening sessions to respond to events of racism and other discriminatory injustice*
- Evaluate instructional practices in inclusion, diversity, equity, and anti-racism*
- Review and revise student evaluation materials to assess competencies in public health that advance goals of inclusion, diversity, equity, and antiracism*

5 RECOMMENDATION	ESSENTIAL ACTIONS				
Share initiatives aimed at inclusive excellence through an anti-racism lens to accelerate institutionalization and integration across academic public health	Share, communicate, convene, disseminate, and amplify	Share, communicate, convene, disseminate, and amplify	Share, communicate, convene, disseminate, and amplify	Share, communicate, convene, disseminate, and amplify	Share, communicate, convene, disseminate, and amplify

Supportive Strategies:
- Create **IDEA**-focused teaching, practice, and research awards, including awards to recognize excellence in faculty teaching that address the impact of racism and eradicate structural barriers to attaining equitable health outcomes*
- Offer networking/mentoring opportunities for learners with alumni and public health practitioners*

* Supportive strategies adopted or adapted from ASPPH's Dismantling Racism and Structural Racism in Academic Public Health: A Framework, Domain 1: Education, Pedagogy & Training, "Immediate Strategies"

† Trainings suggested in the Dismantling Framework include how to counter behaviors such as implicit bias, microaggressions, and stereotype threats; and how to include antiracist intercultural and trauma-informed teaching competencies. Completion of trainings can lead to a certificate in Inclusion, Diversity, Equity, and Antiracism (IDEA).

TABLE 2: IMPLEMENTATION EXAMPLES

FTF 2030 DRIVERS

UNIVERSITY OR SCHOOL OR PROGRAM OF PUBLIC HEALTH GOVERNANCE, LEADERSHIP, OR ADMINISTRATION	FACULTY	STAFF	LEARNERS	PARTNERS

1 RECOMMENDATION — IMPLEMENTATION EXAMPLES

Create and support inclusive and anti-racist teaching, learning, and working environments by articulating norms and values, training and supporting constituents, and building infrastructures and systems to bolster efforts

Define inclusion, diversity, equity, and anti-racism for your own context
- The ASPPH Inclusive Excellence expert panel defined "**inclusive excellence through an anti-racism lens**" in 2022 as part of its work to characterize its scope and aims. ASPPH anticipates that its member schools and programs may find the definition useful for their own contexts.**

Evaluate institutional culture and climate surrounding the educational mission*
- The university's DEI purpose and priorities, which are based on an extensive climate survey, offers an anchor for its school's own strategic planning initiative that itself involved many constituencies.‡
- The Chief Diversity Officer (CDO)/Advisor to the President (in the Office of Diversity Equity and Inclusion, which is led by the Vice Provost for Diversity and Inclusion), handles DEI Strategic Planning, DEI Climate Assessments, Executive Leadership Council comprised of CDOs/deans for DEI across nine schools, Diversity Liaison Committee, where representatives from each school study past DEI efforts, Diverse Supplier Initiative, and DEI advocacy efforts for all.‡

2 RECOMMENDATION — IMPLEMENTATION EXAMPLES

Establish necessary partnerships and secure resources, including leadership commitments, to sustain efforts and to assure accountability

Administrative and faculty leaders to collaborate broadly in guaranteeing institutional accountability for needed change
- The school has taken significant steps to promote DEI. This includes hiring new faculty, introducing new courses focused on structural racism, implementing scholarships for master's students, conducting syllabi reviews, and organizing training and discussions on antiracism topics. A cross-departmental and multi-unit committee is following a strategic plan and prioritizing bold actions to advance DEI including hiring a majority of new faculty and staff from underrepresented groups and awarding scholarships to incoming master's students for the first time.‡

Administrative, faculty, and staff leaders - along with learners - to engage with community partners for securing bidirectional commitments for sustaining efforts and assuring accountability

- Collaboration with partners from the school of pharmacy enables public health work with patients and community groups to co-develop patient-centered outcomes research, train, support community advisory councils, and engage in long-lasting relationship building.‡
- In the process of creating new DEI training for practicum partners, online modules are in development for deployment within the practicum portal system. Anticipating interest from partners, the optional training will offer certification, with ongoing efforts focused on resource allocation and infrastructure development, including a submission process for certification.‡
- The Educational Fund to Stop Gun Violence provides a comprehensive Racial Equity Framework for Gun Violence Prevention. The framework emphasizes strategies to address racial disparities in gun violence prevention efforts by involving members of the community exploring themes and solutions to problems in multiple strategic convenings.***

Develop partnerships for continuing education opportunities with evidence-based practices that promote excellence in inclusion, diversity, equity, and anti-racism*

- University members and partners developed a toolkit for community-based organizations to ask questions of government about racial equity for purposes of ensuring accountability.‡

3	RECOMMENDATION	IMPLEMENTATION EXAMPLES
	Increase commitment, perseverance, discipline, and consistency of inclusive efforts among all members of our respective institutions	**Policies to explicitly connect participation in trainings as a required component of the annual review and be included in the Promotion & Tenure (P&T) process*** • A Race and Equity Initiative Subcommittee recommended actions included providing bridge funding to facilitate recruiting faculty members who align with the institution's DEI objectives. They also suggested focusing funding opportunities for faculty members who actively contribute to DEI goals, providing PhD and postdoctoral support for students and trainees from underrepresented groups, requiring faculty applicant DEI statements, and reassessing promotion and tenure criteria to ensure DEI values are incorporated into faculty expectations.‡ **Mandate holistic application review training* (more recently termed "mission-aligned application review")** **COLLECTION AND SHARING OF EXAMPLES IS ONGOING** **Assure participation in trainings** • Regular training will be mandatory for all students, with a focus on ensuring their quality and relevance.‡

4	RECOMMENDATION	IMPLEMENTATION EXAMPLES

	Develop system-wide initiatives to promote and assure accountability for inclusive excellence through an anti-racism lens	**Articulate planned measures of success***
		• A coordinated, university-wide DEI effort applies across four themes:
		   ○ Recruitment and retention
		   ○ Experience/Climate
		   ○ Professional development and career advancement
		   ○ Scholarship, education, and service
		with metrics of assessment and loci of accountability indicating how the university is tracking progress against objectives under each theme.‡
		
		Audit scholarship awarding process to ensure fairness*
		• The school conducted research in 2017 as part of its strategic planning process that included auditing scholarship awarding processes to ensure fairness.***
		
		Audit all policies (e.g., admissions, recruiting, hiring, promotion) for equity
		• The school conducted research in 2017 as part of its strategic planning process that included auditing policies for admissions and recruiting for equity. As the school pursues mission-aligned approaches to bring in a rich and diverse pool of future leaders of public health with varied backgrounds and perspectives and simultaneously works to ensure affordability/funding for these students, the audit helped identify and remove barriers within the application process. In an effort to eliminate cost and equity issues for applicants, the school implemented test optional policies for their Master of Public Health (MPH) program.***
		• The university created a cross-campus initiative to address environmental racism and promote health equity. Three tenure track faculty positions in three different schools, including the School of Public Health, are examining the connections among racism and racial violence, environmental justice, and racialized health disparities. The university's Anti-Racism Hiring Initiative has approved funding for 21 faculty positions across 12 schools and colleges since launching in fall 2020.***
		
		Provide training focused on anti-racist admissions and hiring practices for inclusive excellence*
		• Human resources is actively integrating DEI through the adoption of evidence-based practices, aiming for a more consistent application of DEI principles in recruitment, admission, and hiring.‡
		
		Develop policies and trainings regarding inclusion, diversity, equity, and anti-racism for the professional development of faculty, staff, and learners based on a "common set of definitions"*
		• All faculty now have a DEI statement and must update it annually as part of annual review with their chair/supervisor.‡

Develop competencies and curricula in all areas of equity as core to public health professional training† *

- Curricular infusion of anti-racist content into undergraduate public health curricula that meets general education (GE) requirements.‡

Assess competencies in all areas of equity as core to public health training

- Following the 2014 killing of Michael Brown, the school initiated discussions and established accords that committed to strengthening diversity, access, and equity both on campus and in the broader community. The school subsequently opened the Division of Diversity and Innovative Community Engagement, overseeing various initiatives and supporting DEI in the curriculum.‡

Adopt and adapt public health curricula to highlight the ways racism and other forms of discrimination impact the health and well-being of populations and individuals*

- An epidemiologic methods course on anti-racism began as a year-long, elective, one-credit journal club emphasizing anti-racism frameworks and research methods. The course eventually transformed into a mandatory 3-credit quarter-long class offered biannually for epidemiology students.‡

Integrate content into curricula and programs

- The Faculty Senate passed a three-credit diversity requirement for students that encourages students to take courses that explore diverse experiences across different academic disciplines.‡
- The school created the Center for Climate, Health, and the Global Environment to discuss how a legacy of racist policies in the US have left communities of color ill-prepared for climate change and why applying a racial justice framework to climate action is instrumental to overcoming challenges and closing the equity gap.***

Hold listening sessions to respond to events of racism and other discriminatory injustice*

- Listening sessions after the death of Michael Brown and George Floyd resulted in the development of DEI training, interview processes and evaluation rubrics, and best practices for hiring and retaining diverse and inclusive faculty.‡

Evaluate instructional practices in inclusion, diversity, equity, and anti-racism*

- Anti-racism and participatory frameworks were applied in assessing a CDC-funded community health worker initiative that strove to address power imbalances in programmatic and evaluative decision-making; identify and confront institutional obstacles that impede academic partnerships with community-based organizations; acknowledge the often overlooked contributions of the public health workforce; and create inclusive spaces between faculty and public health practice that not only involved marginalized communities but also prioritized their needs and perspectives.‡

Review and revise student evaluation materials to assess competencies in public health that advance goals of inclusion, diversity, equity, and antiracism*

- The school now requires the following question on course evaluations: "The materials and content of this course were representative and inclusive of diverse populations, especially those who have been traditionally excluded or marginalized."
  Department chairs receive the course evaluation data, which highlights the courses that rate less than 3 out of 4 on this metric.‡ ***

5	RECOMMENDATION	IMPLEMENTATION EXAMPLES

Share initiatives aimed at inclusive excellence through an anti-racism lens to accelerate institutionalization and integration across academic public health

Create IDEA-focused teaching, practice, and research awards, including awards to recognize excellence in faculty teaching that address the impact of racism and eradicate structural barriers to attaining equitable health outcomes*

- A school-wide pilot grant award offers DEI research, education, and practice opportunities for faculty.‡

Offer networking/mentoring opportunities for learners with alumni and public health practitioners*

- Public health conferences provide collaborative and networking opportunities on DEI themes among learners, alumni, and public health practitioners.‡
- A mentoring program designed for first-generation graduate students aims to enhance retention and success by addressing their social and academic challenges.‡
- The school initiated a pioneer cohort of Justice, Equity, Diversity, and Inclusion (JEDI) Fellows, offering students paid consultancies to support the design and implementation of best practices in educational and research activities that promote a more inclusive community.***

* Supportive strategies adopted or adapted from ASPPH's Dismantling Racism and Structural Racism in Academic Public Health: A Framework, Domain 1: Education, Pedagogy & Training, "Immediate Strategies"

† Trainings suggested in the Dismantling Framework to include antiracist intercultural and trauma-informed teaching competencies; Training may lead to a certificate in Inclusion, Diversity, Equity, and Antiracism (IDEA)

**Example provided by ASPPH

‡ Deidentified example from Inclusive Excellence through an Anti-racism Lens expert panel's **environmental scan (executive summary here)**

*** Other deidentified examples

REPRISE AND NEXT ACTIONS

Building inclusive excellence through an anti-racism lens is an intricate process that requires a systemic and systematic approach to change. Despite the complexity, schools and programs can plan their response by recognizing the urgency of acting and welcoming the impact of consistent, small steps. Various starting points, relevant to one's unique context, capacities, and environment, are possible. A suggested approach follows:

1. **Promote inclusive excellence through an anti-racism lens** by distributing this report and this panel's **Creating an Inclusive Workspace** document (Association of Schools and Programs of Public Health, 2022b) to key drivers in academic public health at your school or program, including administrative leaders, faculty, staff, students, and community partners.

2. **Make an organizational commitment** to transformative action that builds inclusive excellence through an anti-racism lens, including professional development and research on anti-racism and intersectional principles and practices to empower individuals to challenge and dismantle bias in systems.

3. **Cultivate engagement with community partners** to integrate real-world perspectives into transformative action that supports inclusive excellence through an anti-racism lens.

4. **Allocate resources and build an infrastructure** devoted to inclusive excellence through an anti-racism lens, emphasizing the priorities laid out in this report for transformative action.

5. **Facilitate discussions using the provided deliberative questions,** adapting them as necessary and incorporating additional questions from participants, to facilitate candid discussions and inspire innovative solutions for transformative change.

6. **Monitor and report progress on transformative actions** to measure and communicate advancements, challenges, and successes. Use data-driven feedback from a diversity of constituents to adjust strategies and continuously improve inclusive excellence through an anti-racism lens in academic public health environments.

7. **Acknowledge and reward achievements** in inclusive excellence that foster a culture of appreciation, recognition, and value of diverse contributions to academic public health, for advancing advocacy efforts across the institution and beyond.

CONCLUSION

> **❝ Universities are among the oldest institutions in human history that have been devoted to understanding and improving the human condition, by promoting student scholarship and engagement with society. As such, universities have a special obligation to address conditions that threaten to erode their values and missions and to negatively affect their climates and cultures ❞**
>
> (Halkitis, et al., 2020).

The work for inclusive excellence through an anti-racism lens continues to be challenged, and despite the heroic efforts of many, systems, structures, and policies still perpetuate inequities. The time is long overdue to address discriminatory and oppressive practices that prevent us from advancing a resilient, equitable, and quality educational system for public health. Inclusive excellence through an anti-racism lens is foundational and essential if we are to have any hope for transformative approaches to teaching and learning in academic public health for achieving health equity and well-being for everyone, everywhere.
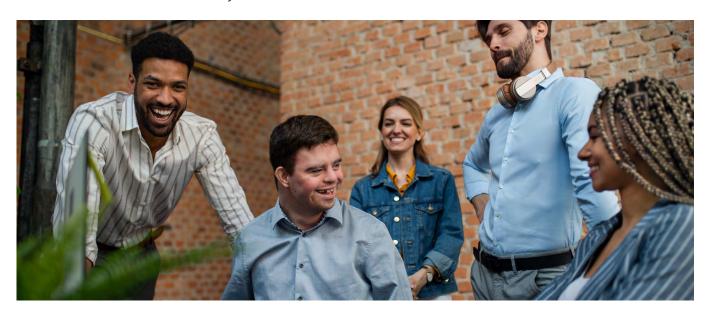
The expert panel conducted its work in support of all three pillars of the academic mission - education, research, and practice - with a specific charge to guide education while recognizing the breadth of skills needed among public health graduates of schools and programs. These skills range from the quantitative to the qualitative and from generating relationships to connecting them with processes that deliver effective, inclusive, and relational practice across diverse settings. The panel therefore advocates applying a growth mindset and a commitment to lifelong learning to all our collective activities. Lifelong learning is, in fact, for all of us, not just students, and requires cultural humility. It necessitates recognizing gaps in knowledge, skills, and attitudes and working hard to fill them.

CONCLUSION

The panel recognizes that audiences for this report may experience symptoms of racial discomfort in the naming of colonization, genocide, white supremacy culture, structural racism and discrimination, anti-Blackness, and anti-Indigeneity. It is for precisely this reason that this proposed approach is so needed. These uncomfortable feelings may manifest as surprise, defensiveness, dismissal, and/or refusal or lack of participation to effect change for the health of all. A good question to ask ourselves is "who benefits and who does not from maintaining the status quo?" **The panel therefore invites or "calls in" all audiences, starting with our own selves, and offers this report as a guide to initiating or continuing important exploration, conversations, and free and respectful discourse on the topics raised here.**

This transformative action requires commitment, engagement, persistence, infrastructure, and accountability among leaders and administrators, faculty, staff, learners, and partners alike. Most every school and program of public health articulates some aspect of inclusion in its mission, and more are incorporating "belonging." We are at a critical juncture in history, and the panel offers recommendations, strategies, and essential actions to create a world where every person is valued and has opportunities to reach their fullest potential. As a field, we must commit to authentically elevating diverse perspectives and histories, as only then can we confront past injustices and not only address but remediate their ongoing impacts. Success of this effort hinges on proactive engagement of schools and programs with their constituents and partners, and a willingness to collaborate and share initiatives – what is working and what is not – so that together we can learn and adjust to accelerate true progress and impact.

The time for transformative change is now, and there is no more appropriate nexus than academic public health, as led by the Association of Schools and Programs of Public Health. We need open conversations that promote respect and understanding, and we need to elevate those who have been historically marginalized to strengthen our foundation, built on inclusive excellence, for a more equitable future. Let us together make the world that we envision a reality.

FRAMING THE FUTURE 2030 INCLUSIVE EXCELLENCE THROUGH AN ANTI-RACISM LENS EXPERT PANEL MEMBERS

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Appreciation goes to a founding member of the FTF 2030 Steering Committee and co-chair of this panel through December 2021.

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Anti-Blackness (also "antiblackness" and "anti-blackness") is defined as the "beliefs, attitudes, actions, practices, and behaviors of individuals and institutions that devalue, minimize, and marginalize the full participation of Black people — visibly (or perceived to be) of African descent" (Comrie et al., n.d., Paragraph 1).

Anti-Indigeneity is the "opposition to self-determination, political and cultural autonomy, and the right to maintain, use and protect traditional territories and resources" (Ahtone et al., 2017, Paragraph 9).

Inclusive excellence through an anti-racism lens is the "cohesive, coherent, collaborative, and measurable integration of inclusion, diversity, and equity, using an anti-racism lens, into the organization's pursuit of excellence; in academia, inclusive excellence refers to all activities by leadership, faculty, learners, staff, alumni, and the broader community" (Association of Schools and Programs of Public Health, 2022a).

Intersectionality is "a theoretical framework that posits that multiple social categories (e.g., race, ethnicity, gender, sexual orientation, socioeconomic status) intersect at the micro level of individual experience to reflect multiple interlocking systems of privilege and oppression at the macro, social-structural level (e.g., racism, sexism, heterosexism)" (Bowleg, 2012, Abstract).

Learners encompass not only students in formal degree programs but all individuals pursuing professional development, lifelong learning, and non-degree credentials, including academic faculty and staff, members of the public health workforce, and community partners. Students comprise a central position in the academic public health learning community.

Lifelong learning is "a dynamic, generative, and self-determined process of both formal and informal study based on one's value and motivation for growth that fosters continuous development and improvement through the entire course of one's life and that results in positive transformation, successful employment, and/or personal fulfillment" (London, 2011).

Public health refers to "what we, as a society, do collectively to assure the conditions in which people can be healthy" (Institute of Medicine, 1988, p. 1).

Racial discrimination is "any distinction, exclusion, restriction or preference based on race, colour, descent, or national or ethnic origin which has the purpose or effect of nullifying or impairing the recognition, enjoyment or exercise, on an equal footing, of human rights and fundamental freedoms in the political, economic, social, cultural or any other field of public life" (McDougall, 2021, Introduction).

Social determinant(s) of health are "the conditions and environments in which people are born, live, work, play, worship, and age [that represent]...nonmedical factors affect[ing] a wide-range of health and quality-of-life outcomes and risks" (National Institutes of Health, 2023a, Paragraph 2).

Structural racism and discrimination refers to macro-level conditions (e.g., residential segregation and institutional policies) that limit opportunities, resources, power, and well-being of individuals and populations based on race/ethnicity and other statuses" (National Institutes of Health, 2023b, Paragraph 1).

White supremacy refers to "the ways in which these ruling class elite or the power elite…[globally]…used the pseudo-scientific concept of race to create whiteness and a hierarchy of racialized value in order to:
- disconnect and divide white people from Black, Indigenous, and People of Color
- (BIPOC);
- disconnect and divide Black, Indigenous, and People of Color from each other;
- disconnect and divide white people from other white people;
- disconnect and divide each and all of us from the earth, the sun, the wind, the water, the stars, the animals that roam(ed) the earth;
- disconnect and divide each of us from ourselves and from source…The power elite constructed white supremacy (and construct it still) to define who is fully human and who is not" (adapted from Okun, 2021, Paragraph 5).

Whiteness is described as follows:
"1. The term white, referring to people, was created by Virginia slave owners and colonial rules in the 17th century. It replaced terms like Christian and Englishman to distinguish European colonists from Africans and indigenous peoples. European colonial powers established whiteness as a legal concept after Bacon's Rebellion in 1676, during which indentured servants of European and African descent had united against the colonial elite, as a strategy to maintain power among the ruling elite. The legal distinction of white separated the servant class on the basis of skin color and continental origin. The creation of 'whiteness' meant giving privileges to some, while denying them to others with the justification of biological and social inferiority.

2. Whiteness itself refers to the specific dimensions of racism that serve to elevate white people over people of color. This definition counters the dominant representation of racism in mainstream education as isolated in discrete behaviors that some individuals may or may not demonstrate, and goes beyond naming specific privileges (McIntosh, 1988). Whites are theorized as actively shaped, affected, defined, and elevated through their racialization and the individual and collective consciousness formed within it ... Whiteness is thus conceptualized as a constellation of processes and practices rather than as a discrete entity (i.e., skin color alone). Whiteness is dynamic, relational, and operating at all times and on myriad levels. These processes and practices include basic rights, values, beliefs, perspectives, and experiences purported to be commonly shared by all but which are actually only consistently afforded to white people" (Racial Equity Tools, 2020, Glossary).
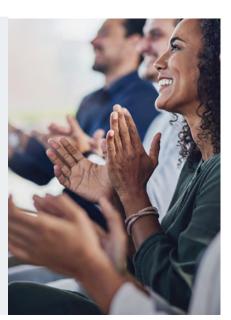
INTERNAL VETTING PROCESS AND ACKNOWLEDGEMENT OF PARTICIPANTS

The vetting process for this report centered the principles of participatory action research, emphasizing participation by members of the DEI community most affected by the report's recommendations and those who will be tasked to implement the work. Early drafts of the report were sent between October and November 2023 to the co-chairs of ASPPH's Diversity and Inclusion Section, the Diversity and Inclusion Advisory Committee, and a DEIJ Working Group* to review and comment on the panel's draft recommendations.

A series of virtual meetings were held to gather feedback from all three groups using the following prompts:

- Do you see any major red flags with the content of the document?
- What barriers do you foresee as challenges to implementation?
- How can we utilize the recommendations in the document to strategize our work as an (DEI) Advisory Committee to the (ASPPH) Board in the coming year?
- Are there formal recommendations that we would like to make for CEPH's next phase of accreditation changes based on this document?

These groups' comments were shared with the co-chairs of the Inclusive Excellence expert panel during an in-person meeting on December 15, 2023 and suggested changes were integrated into the final report.

*This DEIJ Working Group crosscuts members of the: ASPPH Diversity and Inclusion Section, ASPPH Diversity and Inclusion Advisory Committee, the FTF 2030 expert panels, and individuals representing states along the continuum of DEIJ legislation.

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