Standing Up for Equality and Inclusion: A Statement from Maryland ACEP

Baltimore, MD - On behalf of the Executive Officers and the Board of Directors of the Maryland Chapter of the American College of Emergency Physicians (MD ACEP), our organization declares that we wholeheartedly support National ACEP's stance against structural racism and its effects on public health. Our nation has been challenged with one of its greatest medical threats in decades. As our nation fights one of the largest health crises in modern history, there is one scourge that has proven to relentlessly undermine the care and threaten the health of minority communities across the nation: structural racism.

We bore witness to another senseless killing of an unarmed Black man at the knee of a policeman, a public servant who took an oath to protect and serve his community, a community to which George Floyd belonged. This continued disregard of human life is partly seeded in a system of structural racism and cannot be tolerated in any form for a moment longer. Our black and brown patients and other members of their communities are dying (or are at risk of dying) from yet another preventable and deplorable cause of death, by conduit of racial profiling and harassment. As witnessed in the cases of George Floyd, Breonna Taylor, Ahmaud Arbery and many others, the dangerous, and at times fatal actions against our country's citizens are sadly not new to many of our patients, nor to many of our own EM physicians.

While it has always been important to promote healthcare equity for our communities to the best of our ability, with the nation's attention squarely on these issues of racial disparity it is more imperative than ever that we, as a diverse and influential organization, be vocal and active regarding our intolerance of this mistreatment of our patients, colleagues and fellow person across the board. Numerous studies have proven that disparities exist in the access to, delivery of, and individual outcomes of healthcare in our country.

The question is not whether these disparities exist because they have been documented to exist at every turn in healthcare for decades. The pressing inquiry is "what can we do now as a specialty to combat this?" We each can play a small or large role to make incremental, yet impactful change in how people of color are treated and respected in our presence and under our care. Whether the chairman of a large EM group, an assistant program director of a residency program, or a community doctor in a small town, we can all do more in recognizing and checking our unconscious and implicit biases and how they impact our decision making.

As Emergency Physicians in one of the most diverse states in the country, we have an opportunity to lead by example. By using our time and talent through advocacy, leadership and education we can ensure that we are maintaining the standards of equality and stewarding changes that make these disparities a thing of the past. It is each of our responsibility to call out abuses of power, mistreatment of others, exclusion of our peers, and inequality of care no matter what the underlying justification is, but especially if due to differences in race or skin color.

We believe the character of our EM family is such that we can be true role models in how diversity and inclusion can be celebrated and uplifted in medicine. We welcome the ideas of our members on how we can help to cultivate these ideals into reality in all facets of our EM network. MD ACEP will continue to lobby and push for the equal treatment of our patients and our providers through our state legislators and we will stand firmly and unequivocally against any person, group or organization whose words or actions promote hate, racial or social divisiveness which threaten the health, safety, and well-being of our patients and the communities in which they live. We MUST continue doing the work to create the change we seek.