

Health Equity Requires Defunding and Abolishing the Police

October 2020

Health & Medicine's Board of Directors voted on and approved this policy position in September 2020. This policy position statement was developed by a committee of staff and board members.

Advancing health equity is Health & Medicine Policy Research Group's mission. As part of that mission, Health & Medicine supports the growing call to defund and abolish the police. As a matter of public health, Health & Medicine joins our voice to the demand for local, state, and federal governments to defund and abolish the police.

Health equity is a process of assurance of the conditions for optimal health for all people that requires at least three things: 1) valuing all individuals and populations equally; 2) recognizing and rectifying historical injustice; and 3) providing resources according to need. Health inequities will be eliminated when this process of assurance is achieved.¹

As an essential part of its health equity mission, Health & Medicine seeks to support efforts to defund and abolish police. We stand with the Black-, Indigenous-, and people of color-led organizations that have been leading this work, including: Movement for Black Lives, Assata's Daughters, Black Lives Matter Chicago, Brave Space Alliance, Black Youth Project 100, Community Organizing and Family Issues, Good Kids Mad City, No Cop Academy, SOUL Chicago, and VOYCE.

Historical context matters to health equity. From its start, policing in the United States has been racist: exhibiting unfair and unjust treatment against Black people and other people of color. In the South, police were developed as patrols to capture and re-enslave Black people who had escaped slavery.² Policing helped to further engrain and uphold White supremacy and White nationalism throughout the country, including enforcing segregation, violence, and other discrimination in the North as Black people fled the violence of the Jim Crow South. Both lynching and Jim Crow are examples of state-sanctioned political violence that included both participation of and enforcement by police.³ Police have been used extensively to break up worker movements and to break union strikes for rights, benefits, more equitable pay, and conditions that protect workers' health.^{4,5}

Policing is racist and oppressive. Police physically and violently enforce structural racism—anti-Black racism specifically and especially—and other structural inequities. Police violence and killing by police have been disproportionately used against Black people and other people of color. Research has shown that Black people in the U.S. are three times more likely than Whites to die during a police encounter.⁶ One study noted, “Over the life course, about 1 in every 1,000 black men can expect to be killed by police.”⁷ Moreover, policing is both violent and frequently leads to injuries and deaths.^{8, 9, 10}

Policing traumatizes people, directly harms health, and enforces structural inequities that are root causes of health inequities, the systematic differences in health status and outcomes that are unfair, unjust, and remediable. Policing and carceral control traumatize individuals, families, and communities on an ongoing basis, with adverse effects on physical, mental, and social health and wellbeing.¹¹

Significant attention is paid to the social determinants of health within the field of public health, but much less regard is given to the role of police in generating and enforcing stratification. Police serve as one of the structural mechanisms that generate stratification and social divisions in society. Racism in policing operates along with other major systemic racist policies, systems, and structures in our society that cause racial health inequities.^{12, 13, 14, 15, 16} Racism also operates alongside other systems of oppression to systematically deny otherized peoples of the fulfillment of their human needs and human rights, reducing people's ability to realize their full potential, health, longevity, and enjoyment of life. Each infringement of human rights by police is a grave injustice. Police regularly discriminate, targeting and harming Black, Indigenous, Latinx, and other people of color, immigrants, lesbian, gay, bisexual, queer, and trans people, disabled and neurodivergent people, people experiencing poverty and homelessness, Muslim, Sikh, and other people of religious groups that have been marginalized.^{17, 18, 19}

Systems of oppression function as structural inequities—sometimes referred to as *structural determinants of health inequities*—which cause a gradient in money, power, and resources that cause a broader social hierarchy. Structural inequities maldistribute the social determinants of health—the social conditions in the environments in which people live that shape a wide range of health, functioning, and quality-of-life outcomes and risks. Stratification and structural inequity are fundamental causes of health inequities, which means policing serves as a barrier to health equity.^{20, 21} Racism itself is a public health crisis that must be redressed to advance health equity.²² Defunding and abolishing police is a part of the struggle against racism and other systems of oppression—and for health equity.

Our society must defund police and equitably invest those public dollars into services, infrastructure, and roles that advance safety, health, and wellbeing. Defunding the police will not come close to providing the needed funding to address our systemic inequities; the point is to invest those funds as a down payment on social services while eliminating the public health harms from policing. To fully address the needs of our communities and move toward health equity, a progressive state and local tax system will need to be instituted in Illinois. As additional funds are raised and others diverted from policing, our government will be better able to invest in education, art, community development, healthcare, social services, and other services that support people's safety, health, and wellbeing. These should be funded instead of police to strengthen communities, reduce crime, make our communities safer, and advance health equity.

Policing is problematic across the U.S., and Chicago provides useful local examples.

Budgets illuminate what is being prioritized—and what is not. At the time of this writing, Mayor Lori Lightfoot's proposed FY2021 budget included \$1.7 billion for the Chicago Police Department (CPD), mostly from the corporate fund at \$1.56 billion with 14,095 full time equivalent CPD positions. The amount of CPD funding has grown in recent years, although it is down slightly in the FY 2021 budget due in significant part to the impact of the COVID-19 economic fallout on the City's tax revenue. For comparison to community services, the proposed FY 2021 budget has \$57.1 million from the corporate fund for the Chicago Department of Public Health, \$95.4 million for the Department of Family and Support Services, and \$1.9 million for the Mayor's Office for People with Disabilities.²³ Notably, CDPH receives most funding from external grants, totaling another \$461 million in FY 2021 in external funding; this is a major increase in grant funds over FY 2020, which included just \$167 million in grants for CDPH.

On top of the budgeted police funding, the City has paid out roughly \$709.3 million from 2010 – 2017 in settlements for police-related judgments and settlement costs. The City issues bonds for most of these settlement costs, with an estimated borrowing cost of about \$860 million in interest.²⁴ Budgets reflect priorities and Chicago elected officials have prioritized funding police—an armed oppressive force—more than they do services that could improve people’s health, wellbeing, and safety.

How do police generate and reinforce stratification? As noted before, from the start of policing in the U.S., the police have been a core institution upholding racism and other forms of oppression.²⁵ Policing inflicts discrimination and limitations on individuals, their families, and communities through criminalization, incarceration, and assigning criminal records; these both reflect existing racism and other oppression in policing and go beyond to generate new instances of discrimination in other areas of life. These include discrimination, disadvantages, and limitations in such areas as: voting, receiving a loan, renting, buying a home, seeking education, and employment opportunities.²⁶ Additionally, policing inflicts limitations on mobility and relative sense of belonging, through use of discrimination in such areas as: stopping and frisking people, setting up traffic checkpoints, ticketing of cyclists, and enforcing who is deemed by the police to be “other” or “suspicious” in particular neighborhoods.^{27, 28, 29, 30}

Such constraints on people targeted by police uphold money, power, and resource inequities, thus generating and reinforcing social stratification—again, a fundamental cause of health inequities.³¹ There are other ways that police uphold stratification, such as by: criminalization of homelessness; physically enforcing evictions and lockouts; violently quashing protests; seeking to infiltrate, undermine, and break up social movements that seek justice; infringing on press coverage of protests; and policing immigrants.^{32, 33, 34, 35, 36, 37} Workers organizing for power and just working conditions, pay, and benefits have been undermined by police upholding racial capitalism and the interests of those who benefit most from it.^{38, 39, 40} In these and other ways police damage public health by targeting or criminalizing such people and activities as: a) people experiencing social and economic problems; b) movements challenging and seeking accountability from wealthy elites, corporations, and systemic oppression; c) people seeking improvement in their livelihoods; and d) Constitutionally protected free press (which is often seeking to cover these issues and policing itself). By using policing in this way, government officials repress these issues and activities, further oppress the people experiencing inequity, and avoid dealing with people and issues in a way that would lead to more equitable living conditions and health.

What will safety look like without police? Defunding the police is one major step toward abolition. For decades, abolitionists have debated, considered, and promoted paths toward abolition; recently others have joined the discourse. Regardless of the path to abolition, new public workforce roles and institutions to support people in times of difficulty and emergency situations will need to be created. Community violence exists, as do crimes, and these must be addressed, but not with systems such as policing that generate and enforce structural inequity and cause trauma and more violence to individuals and communities.

Radical political imagination is required to consider both the defunding and abolition of police. Reviewing the extreme long-term harms of policing can provide entrée to considering the lack of possibility for reform of the institution of policing. Simple inquiry illustrates that many people, especially

in communities of color, do not trust the police to keep them safe. Given the racism and other discrimination in policing layered on top of the frequent hitting, gassing, beating, and killing of people, as well as police disappearing people and committing torture, it is obvious that police do not keep everyone safe or support everyone's civil and human rights.^{41, 42, 43, 44, 45, 46, 47} By committing violence, defending property over humans, and enforcing structural inequity, police harm public health and serve as an impediment to advancing health equity. We invite others who may be challenged by this idea of police abolition to step into a space of radical political imagination about what actual equitable public safety without policing—for all people—would look like.

Which side are you on? For people of conscience who are grappling with abolition, it's worth asking oneself the question: *When official public police departments were formed to halt and suppress the revolt and escape of Black people from slavery, would I have been in support of such patrols?* And if you think your answer is, *No, I wouldn't have supported the formation of slave patrols*, ask the next question. Given the role that police play today in locking up disproportionately Black and Brown people, and other people experiencing oppression into prison, *Do I support police today?* Among other harsh, violent, oppressive, and unjust conditions that police subject people to, people in prison today can be subjected to slave labor under the 13th Amendment of the U.S. Constitution.

As an institution, police often perpetrate violence and killing. The murder of George Floyd and Breonna Taylor are recent examples of a system of racist policing against Black people with deadly consequences. There are countless others. These should be understood within the broader context of how policing, police discrimination, surveillance, and harassment, and incarceration function more broadly in society as a system of enforcing racial caste and control.⁴⁸

What have Chicagoans been paying for? Oppression and violence from police. In 1969, Fred Hampton and Mark Clark, both Black Panther organizers for racial and class justice, were assassinated in their sleep by the Chicago Police Department. From 1972-1991, Chicago Police Department Commander Jon Burge and his officers tortured 120 people—predominantly Black people—into false confessions.⁴⁹ These are but two prominent historical examples of racist police oppression and violence. In 2014, *We Charge Genocide* sent a group of Chicago youth to the 53rd session of the United Nations Committee Against Torture. Their goal, "...was to increase visibility of police violence in Chicago and call out the continued impunity of police officers who abuse, harass, and kill youth of color in Chicago every year."⁵⁰ Policing in the U.S. is so unaccountable that young people of color go to the U.N. to seek accountability.

In July 2020, Miracle Boyd, an 18-year old Black recent graduate of Chicago Public Schools, had a front tooth broken and her lips bloodied by a Chicago Police Officer who assaulted her. This was the police's response to Boyd filming them as they violently defended a statue of Christopher Columbus, the colonizer whose crimes include acts of genocide, enslavement, rape, and other atrocities.⁵¹

Just some of the Black people whose names we must continue to say and remember, their lives cut short from the police killing them include:⁵²

Rekia Boyd | Dominique "Damo" Franklin | Laquan McDonald | Quintonio LeGrier | Bettie Jones

These precious lives cut short are only examples of this injustice; the lists for Chicago and the U.S. are much longer. In 2020, police in the U.S. have killed at least 874 people as of this writing.⁵³ The U.S. has a much higher rate of police killing people than do other countries.⁵⁴ Racism is reflected in the data, with the Mapping Police 2017 report stating, “Black people were more likely to be killed by police, more likely to be unarmed and less likely to be threatening someone when killed.” The report showed that 27% of those people killed by US police in 2017 were Black, although they make up only 13% of the US population.⁵⁵

We stand with Black organizers’ call to defund the police. We will not stand by silently while police forces enact racism and other discrimination, as they criminalize, harass, shake down, push, shove, choke, rape, maim, and kill people. Recent protests against police racism, violence, and killing were met with yet more extreme examples of police violence, a long-term pattern, with the New York Times capturing a montage of dozens of videos of police violence in New York City.⁵⁶ Racist state-based political violence committed by police denies people the ability to move about freely in their own communities and society without the fear of discrimination, surveillance, and violence from government agents. Rights that are supposedly guaranteed by the U.S. Constitution are violated and abridged through criminalization of protests that lack permits and both the threat and use of police violence.⁵⁷ Movements that would advance more equitable money, power, and resources—which is essential for advancing health equity—are undermined by police.

We must radically reimagine and develop systems that guarantee health and safety for people—without police. How can we ensure that everyone is safe and has what they need to be healthy with equitable opportunities to thrive? What kind of public investments, workforce, and services actually support people’s health and keep people safe without the use of policing? How can our government and society assure that everyone receives education, physical and mental healthcare, social services, and opportunities to live life without fear of violent repression, discrimination, and dehumanization? Alongside abolishing the police and answering these questions, there must also be a sustained commitment to eliminating and redressing racism and other forms of oppression across all systems, sectors, and policies.

Policing as conceived of and practiced in the U.S. is not a legitimate force and it causes immeasurable harm. We can and should collectively develop alternatives to police and unlearn the policing mindset that is often present in processes, algorithms, policies, and practices. We also seek to develop ways for community accountability when harms do occur without the police. According to abolitionist Ruth Wilson Gilmore, “Abolition is about presence, not absence. It’s about building life-affirming institutions.”

We call on other organizations that and individuals who claim health equity and social justice as their values to join us in demanding the defunding and abolition of the police. We stand with people directly impacted by police violence and oppression who have long been leading this work and we add our voice and efforts to the cause. **Health equity requires defunding and abolishing the police.**

Below is a selection of Health & Medicine advocacy, statements, and blog posts that address issues related to this statement:

- [Police Violence is a Public Health Crisis](#) (staff statement)
- [Our Role in Police Violence and the Culture that Permits It](#) (blog post)
- [No Cops in Schools](#) (blog post)
- [To the Finance Committee of the Cook County Board of Commissioners Preliminary Budget Hearing for FY2021](#) (testimony)
- [Twitter Thread on Police Free Schools](#) (social media thread)
- [Does Chicago Really Need More Police Officers?](#) (letter to the editor)
- [More Police? What About More Teachers?](#) (letter to the editor)
- [#NoCopAcademy Campaign](#) (campaign endorsement)
- [The Chicago Forum for Justice in Health Policy: Police Violence as Public Health Data](#) (public forum)
- [Conclusion to Issue Brief Series: Criminalization of People of Color as a Barrier to Diversifying the Health Workforce](#) (issue brief)
- [Testimony against the Cook County Gang Database](#) (testimony)

About Health & Medicine Policy Research Group

Health & Medicine is a Chicago based non-profit working to improve the health of all people in Illinois by promoting health equity. Founded in 1981 by Dr. Quentin Young, it was formed as an action-oriented policy center—nimble, independent, and focused on regional health issues. Health & Medicine’s mission is to promote social justice and challenge inequities in health and health care. It conducts research, educates and collaborates with other groups to advocate policies and impact health systems to improve the health status of all people. Health & Medicine has successfully developed health policy recommendations and implementation strategies for different public and private entities, earning the trust of the legislature, advocates, the media, researchers and policymakers at all levels of government in Illinois to become the region’s “honest broker” on healthcare policy matters. Learn more at www.hmprg.org.

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