

The Death of George Floyd: Bending the Arc of History Toward Justice for Generations of Children

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We have seen the horrifying cell phone and surveillance video footage of the murder of George Floyd replay again and again in the last few weeks. The aftermath begs the question why this particular murder of a Black man by a police officer has sparked the international response so few have received.¹ Scores of other Black men, women, and children have been killed by police since the 2014 murder of Eric Garner in New York City, in which he suffered an illegal chokehold and uttered the devastating refrain “I can’t breathe,” and countless others have been murdered over generations. These cases represent just the tip of the iceberg because these murders happened to be recorded on bystander cell phone video or police webcam capture. Moreover, it is the tip of another iceberg because these cases represent modern-day lynchings. The lynching of Black people in the United States was routine before the “civil rights era,” when there were major legal advances to change the treatment of Black Americans in this country. However, it was not until February 2020 that federal legislation, the Emmett Till Antilynching Act, was passed by the House of Representatives but is still awaiting Senate approval to make lynching a federal hate crime. The case of George Floyd and other recent cases reveal that we clearly have so much more work to do.

When we watched previous videos, including the video of Eric Garner’s death, society let the mistreatment of Black Americans continue unabated and gave in to the excuses and the protections that make it nearly impossible to hold police accountable for their actions. Police unions defended the officers caught on video killing Black Americans, and society went along. Investigators, prosecutors, and juries were unwilling to second guess an officer’s often split-second decisions, even when they were clearly not split second at all, and society went along. Defenders of these actions warned of demoralized police who would be afraid to act

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quickly to protect the rest of us, and society went along. Local police review boards were incredibly weak and often made recommendations for terminations that were ignored or overturned, and society went along. The officer who killed George Floyd faced >17 misconduct complaints over the last 20 years, including brutality, but he received only 2 letters of reprimand. The majority of society went along despite strong minority voices calling attention to these crimes. Until now. Now, we all can see the video of a human being, George Floyd (a father, a man of faith, an athlete, a hip-hop artist in the 1990s, a man beloved by people who knew him), begging for his life, calling for help, and a police officer digging his knee into his neck for 8 minutes and 46 seconds while 3 other police officers were holding him or standing by, and finally, we saw his limp, dead body taken away. The nonviolent crime he was accused of was trying to pass a counterfeit \$20 bill, alleged but never substantiated, charged, or litigated. He, like so many other African Americans who lost their job as a result of coronavirus disease 2019 (COVID-19), had recently been laid off as a security guard and was struggling to survive. As we watched that video, many in white society finally felt a combination of shame, guilt, and anger and decided not to “go along” with the status quo anymore. Diverse members of society appear to have awakened from passivity and have been moved to act together, not just in Minneapolis, but in cities around the United States and across the world.

A year ago, at the Pediatric Academic Societies meeting in Baltimore, the George Armstrong Lecture focused on racism and hatred; the title of the talk was “The Hate U Give: Protecting Children and Families from Racism, Bias, Discrimination, and Hatred.”² The talk included the statements “Black lives matter” and “we cannot

tolerate murdering unarmed men and boys or brutalizing and terrorizing Black citizens.” It did not include a specific path forward for effective change, and that was an error. Many pediatricians embraced the ideas and offered to lend their support to addressing racism and bias and we started an action group called Pediatricians Against Racism and Trauma (PART). This group of >60 pediatric leaders from across the country convened 4 different action groups and planned to present at plenaries and workshops and meet at this year’s Pediatric Academic Societies meeting. This year, we were also armed with an American Academy of Pediatrics policy statement that outlined the impact of racism on child and adolescent health and carried the weight of the largest and one of the oldest pediatric organizations in the world,³ as well as a similar position article from the Society for Adolescent Health and Medicine.⁴ Alas, COVID-19 cancelled those meetings; since then, we have all been focusing elsewhere, on sick children and adults in the hospital, as well as the needs of poor families and families of color during the COVID-19 pandemic, a pandemic that has laid bare the socioeconomic and racial-ethnic inequities in our society.

We are pediatricians, and as such, there are many important problems related to racism that are in our bailiwick, our zone of expertise and comfort: bias in the provision of care to Black children and families; structural racism and bias in medical schools and health care⁵; the preschool to prison “pipeline”; the mass incarceration of youth of color as well as the parents of children of color; discrimination against Black, Native American, and Latinx families in housing, education, and employment; the microaggressions suffered by individuals of color in the performance of daily life activities; and the criminalization and detention

of immigrant families at the border and the harassment of and denial of benefits to these families in our cities and states.⁶ Although pediatricians must continue to work to address the issues outlined above, each of which is in need of its own set of policy recommendations and actions, we must also recognize that structural racism creates the foundation on which all these injustices are built. As such, these areas of structural racism are closely related to police violence. Moreover, at this time, we must move out of our comfort zone and address this long-standing injustice in policing⁷ or remain complicit in the continued killing of Black Americans. These killings reverberate throughout the Black communities, causing chronic fear and emotional trauma with terrible implications for children, youth, and families. We must advocate for a suite of evidence-based policy changes specifically related to police violence, most at the local level. Although not typically viewed as a child health issue, we agree with the statement from the American Medical Association that police brutality is a health issue⁸ and believe that it is indeed a critical issue for the health and well-being of all children and adolescents and their families, yet of course most urgently for Black families. Here are 6 such policies for effective change⁹:

1. End “broken windows” policing of minor infractions and harmless activities in communities of color. This policing has led to mass incarceration as well as to interactions, such as with George Floyd, that may end up being deadly.¹⁰
2. Establish effective civilian oversight of police and police actions with real power. The police officer who killed George Floyd may have been removed from duty because of previous complaints if this oversight had worked in Minneapolis.

3. Strengthen and monitor local police “use of force” policies, especially the use of potentially deadly force, including choke holds. Each year, police kill hundreds of unarmed civilians like George Floyd as well as people stopped for alleged minor traffic infractions.¹¹ End the militarization of police departments by cutting off the supply of federal military weaponry that often leads to increased killing of civilians. Require police officers to de-escalate situations and eliminate the use of any force when possible.¹²
4. Demand swift investigation and prosecution of cases such as George Floyd’s that are independent of local police departments and with no incentive to protect the police officers involved. Empower police officers, many of whom serve and protect their communities with honor, to be able to report unsanctioned, systematic, and violent behavior among their fellow officers without retaliation. Better yet, require police officers to report such behavior and mandate active intervention to protect the victims of police violence in real time at the scene.¹²
5. Invest in the recruitment of a diverse and community-oriented police force and vigorous and

sustained training of police officers in appropriate safe interactions with the communities they serve. Use voluntary community feedback to inform changes to police department practices.

6. Prioritize government spending on community health, mental health, education, and housing rather than on funding the police department. This may include reallocating some police funding toward investments in community well-being. Focus the work of police on the activities they are trained to do and expand funding for professionals and programs to do the work that should not be under the responsibility of police such as responding to mental illness crises.

In a recent interview, historian Dr Mary Frances Berry shared that “every generation has to make its own dent in the wall of injustice.”¹³ So let us all, as pediatricians, follow her example and use our power to stand in solidarity with peaceful protesters around the world and to pursue justice for this generation of children and the next.

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ABBREVIATIONS

COVID-19: coronavirus disease
2019
PART: Pediatricians Against
Racism and Trauma

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