

## ICAAP Statement on Police Brutality

Guilty on all three counts. As the verdict in the Derick Chauvin trial was read, there was a sigh of relief from Black and Brown communities around the country. Yet this outcome is far from justice for the hundreds of killings of young Black and Latinx persons at the hands of law enforcement in the US. This verdict is, however, a small, yet significant step toward accountability for police brutality against minorities. The reality is that this sigh of relief was overshadowed by three police killings that occurred during the trial. Daunte Wright (age 20), Adam Toledo (age 13), and Ma'Khia Bryant (age 16) all died at the hands of the police during the 3 weeks it took to convict Derick Chauvin in the murder of George Floyd. These young people, and many more victims of gun violence at the hands of law enforcement, are our pediatric patients.

ICAAP recognizes that as pediatricians we cannot remain silent when it comes to police violence and the structural racism at its core. The AAP, along with the AMA and APHA, recognize police violence as a public health crisis. In large measure, this is a *pediatric* health crisis. Examination of data on fatal police shootings of youth age 12-17 shows Black youth die at 6 times the rate of white youth, and Latinx youth at nearly 3 times the rate of whites. (Badolato, Pediatrics). Additionally, while white and Black officers use gun force at similar rates in white and mixed race neighborhoods, white law enforcement agents are five times more likely to fire their gun in predominantly Black neighborhoods (Hoekstra, NBER). Racial disparities within the juvenile justice system mirror those seen in the adult correctional system. Black youth are 2.6 times more likely to be arrested than white youth, and 4.6 times more likely to be placed in juvenile residential facilities. Additionally, studies show over 90% of justice-involved youth have experienced at least one form of childhood trauma, and the prevalence of mental health disorders in this population is 50-80%. (Owen, Pediatrics)

We are committed to work with legislators and community partners to drive significant change in police policy, training and accountability, and to combat the structural racism that is a root cause of deaths at the hands of law enforcement. We advocate for greater community support systems, school funding and mental health resources to support adolescents and young adults in crisis in order to protect youth from police confrontation.

Necessary changes include:

- 1) Law Enforcement:
  - Increased training in de-escalation techniques and methods of non-violent and non-deadly arrest
  - Greater diversity within the police force, with increased diversity and anti-racism training
  - Stop the chase of fleeing suspects who are not threatening the safety others, including those who may possess a weapon
  - Publish data on police misconduct and transparent discipline processes
- 2) Juvenile Justice:
  - Trauma-informed policies, procedures, and standards across the spectrum of juvenile justice settings
  - Focus towards family support, education and mental health care, and away from detention
- 3) Prevent youth confrontation with law enforcement:
  - Engage mental health providers instead of police to respond to calls of mental health crisis
  - Provide equitable funding to Black and Brown communities and schools
  - Strengthen gun control legislation to keep weapons out of the hands of minors

Join us in fighting against this pediatric health crisis. Our patients depend on us.

- Members of the ICAAP Anti-Racism Taskforce

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