

**BEFORE THE COUNCIL OF THE DISTRICT OF COLUMBIA  
COMMITTEE ON THE JUDICIARY & PUBLIC SAFETY  
Budget Oversight Hearing  
Metropolitan Police Department  
Monday, June 15, 2020  
Testimony of Whitman-Walker Institute**

Good Afternoon, Chairperson Allen and Committee Members:

Whitman-Walker has been serving the District's LGBTQ community for over 40 years, fighting on the frontlines of the HIV epidemic response since the beginning. Our commitment to providing a safe, respectful, and affirming health center environment along with our wide array of services have made us the healthcare home of choice for thousands of the District's residents, of every race, ethnicity, gender, gender identity and sexual orientation. In calendar year 2019, we provided health care and legal services to more than 21,000 individuals – the large majority of whom were District residents. Many of our patients and clients live with poverty, housing instability, unemployment or under-employment, and experience the world through multiple, intersecting marginalized identities.

To further advance our mission of service to community, our Board of Directors created Whitman-Walker Institute in 2018 to bring together research, public policy advocacy, and education under a single collective voice. We operate a robust research program with a primary focus on HIV treatment and prevention and on LGBTQ health. In partnership with our Health Center, we offer an extensive education program encompassing clinical and continuing education of medical and behavioral health students and providers, paired with community-based education on LGBTQ health, HIV care, cultural competency, and other topics for other professionals and partners. We continue to be at the forefront of law reform and public policy advocacy on HIV and LGBTQ issues at the local and federal level.

As an enterprise determined to help dismantle systems of oppression<sup>1</sup>, Whitman-Walker is encouraged by the Council's unanimous support of Comprehensive Policing and Justice Reform Emergency Amendment Act of 2020. This bill provides a necessary first step forward in responding to the urgent needs of District residents for a public safety system that is accountable to the community it serves. We applaud the bill's substantial increases in community oversight and increased transparency for the survivors of police-involved violence.

We urge the Council to continue the work they have started and make additional concrete investments in the health and safety of DC's Black communities. As medical practitioners, researchers, advocates, and educators, we understand the difficulty of confronting the racist

---

<sup>1</sup> Statement from Whitman-Walker: Black Lives Matter, (June 5 2020) <https://www.whitman-walker.org/press-and-media/statement-from-whitman-walker-black-lives-matter>

legacies of our Nation's institutions.<sup>2</sup> As a health care enterprise, we recognize that white supremacy and racism are urgent public health issues.<sup>3</sup> It will take a sustained effort and bold leadership to ameliorate these harms.

As part of the fabric of the health care community in DC, the practical interactions we have with law enforcement are comingled with the health and safety needs of patients we serve. We have firsthand awareness of the community response when law enforcement arrives at our sites, and have spent time learning from law enforcement, including various community liaisons, after those events. We believe strongly that better solutions are available to us when we listen to and work with the community to develop those solutions.

Whitman-Walker is committed to learning from those most effected by the inequities we seek to address and we are dedicated to working with our community to address them. Our perspective is informed by our community's response to the AIDS crisis and the needs of the patients we serve.<sup>4</sup> Our history teaches us that we must act in solidarity with and follow the leadership of those who are most directly impacted. Then as now, we support a diversity of tactics to fight against systemic violence and deadly indifference toward Black lives.

We are firmly in agreement with the growing consensus that the District's public safety funding should go to programs that actually create public safety. Community experience and a growing body of evidence demonstrates that the role of armed officers in creating public safety needs to be more limited<sup>5</sup>— in particular because of the historical role of law enforcement in upholding white supremacy and exerting social control over Black communities through violence and arbitrary enforcement of the laws. We call on you to take even bolder steps to end police violence and invest in programs that will better serve our community.

Respectfully submitted,



Laura E. Durso, Ph.D.  
Executive Director and Chief Learning Officer  
Whitman-Walker Institute

---

<sup>2</sup> See, e.g. David Barton Smith's *Health Care Divided: Race and Health a Nation*. University of Michigan (1999); and Harriet A. Washington's *Medical Apartheid: The Dark History of Medical Experimentation*. Harlem Moon (2006).

<sup>3</sup> Carey, E. Most medical professionals aren't racist – but our medical system is. Washington Post (May 18, 2020). <https://www.washingtonpost.com/outlook/2020/05/18/most-medical-professionals-arent-racist-but-our-medical-system-is/>

<sup>4</sup> AIDS United Public Policy Council. 54 Health Organizations: White Supremacy Fuels Black, Latinx HIV Rates. Plus. (Jun. 8, 2020) <https://www.hivpluomag.com/opinion/2020/6/08/54-health-organizations-white-supremacy-fuels-black-latinx-hiv-rates>.

<sup>5</sup> Lopez, C. Defund the police? Here's what that really means. Washington Post (Jun. 7, 2020) <https://www.washingtonpost.com/opinions/2020/06/07/defund-police-heres-what-that-really-means/>