

Abolitionist Healthcare Research Ethics in Medicine and Public Health

IC INTERRUPTING
CRIMINALIZATION

Medicine, Public Health, and Academic Disciplines have historically enacted harm and continue to be aligned with systems of oppression. As researchers working toward abolition of carceral systems, we understand that to engage in research from these disciplines, we must acknowledge these harms and seek to undo the power imbalances that make them possible. The principles below are a part of engaging in critical self-reflection in order to do this work.

In our view, policing is broad - being both enacted by law enforcement, healthcare workers, and researchers. Policing can be defined as the threat or use of force to secure the prevailing order legitimized by the state. We hope these principles will be useful for researchers who are challenging policing in its multiple forms.

check bias

No research stance is "neutral". We should be skeptical about that positioning, understanding that research can implicitly and explicitly support existing structures and understandings, or it can question, reframe, and challenge those understandings.

create liberatory conditions

It is our duty to create the conditions for engaging ethically with other people. As abolitionist researchers, we must learn how to navigate the existing healthcare and carceral systems, yet we must constantly be looking for opportunities to avoid these systems, disrupt them, and engage with others in more caring ways.

practice collectivity

There is no such thing as an individual abolitionist - Everything we do, we do collectively in relation with one another. We must be grounded in struggle led by people most impacted by these decisions as well as other abolitionist researchers and movements working to enact change.

have a power analysis

Accountability is an active practice. Researchers often hold economic, institutional, and political power when engaging with communities, while communities hold social, intellectual, and experiential power. Abolitionist research seeks to partner with communities directly impacted to develop the questions and drive the research. In partnership, we must a) develop a deep enough relationship and capacity to share and receive conflict, and b) develop structures for accountability within the research process. This requires specific space for critical self-reflection and community reflection.

**no one is
disposable**

Research that seeks to make claims about the exceptionality of a particular population deserving of empathy without fundamentally questioning the entire system reproduces the logic of disposability.

**think critically
about data**

We must be rigorous and skeptical about how data is collected. Official data is often produced in collaboration with institutional administration, law enforcement, and government sources. This includes being critical about hospital reports on workplace violence, police reports on crime statistics, and governmental reports. What are the ways that data is being collected, what qualifies as a data point, and what is erased or obscured in the collection of data is important to interrogate when using these sources.

**believe in
community**

Not everything needs to be researched. We respect the demands of community members and movements when they ask for a problem to be affirmed by the health literature, when they decide we are not the right people to ask these questions, and when they decide that action is the best route.

**empower
community**

We are not gatekeepers to research tools, knowledge, or access. Our research should empower the community to leverage these resources for themselves, if they want them

**reject
carceral
conclusions**

We refuse to engage in conclusions that emphasize the need for increased policing, the legitimacy of law enforcement or increased funding for law enforcement, carceral policies and systems, or tools of surveillance and violence. We believe criminalization and carcerality are harmful, violent and always antithetical to care and healing.

create tools

Publication should not be the end goal. Abolitionist research is conducted in service of offering tools for the struggle and the building of a new world.

**Abolitionist
Healthcare Research
Ethics in Medicine
and Public Health**

We understand that an abolitionist stance may lead us to a dismantling of medical institutions in hopes of collectively building accessible and liberatory spaces of deep healing and justice.