

The Nation's Health Podcast transcript: What the president's order on DEI could mean for public health

February 2025 episode

MEADOR: This is The Nation's Health Podcast. I'm your host, Sophia Meador.

Work on diversity, equity, inclusion is getting a lot of attention this month, but not all of that notice has been good.

Right after taking office on Jan. 20th, President Trump made a big move that rolled back years of progress in areas like health care, workplace and education. He did this all with an executive order that pretty much put a stop to government efforts on this issue.

So in today's episode, we're diving into some tough questions. We'll ask, what is DEI, what is at stake, and how can public health continue to pursue equitable health and well-being?

To help us begin to understand some of these questions, we're first joined by Lawrence Haynes. Lawrence was a former program manager for racial equity at APHA's Center for Public Health Policy.

MEADOR: Lawrence, thank you so much for joining the pod to get us started. How do you define diversity, equity and inclusion work?

HAYNES: I think, in a nutshell, DEI initiatives are trying to provide pathways for folks. So diversity, of course, you know — having many different people, whether that's race, gender.

Equity is recognizing that not everyone starts out at the same place. And also the solution may not be equal to everybody. So really, taking an individualistic approach and what supports a person might need.

And then the "I" — inclusion — really focuses on really engendering a sense of belonging. We know that sense of belonging is very important for human functioning.

So those are really sort of the three main sort of buckets for DEI.

MEADOR: So from what you said, diversity, equity, inclusion really sound like pretty basic principles. I think these are things most people would say they support, but there's been a lot of pushback garnered against DEI. What do you see as the main cause for that?

HAYNES: Over time, it's become sort of a polarizing term, and a lot of people who aren't actually involved with DEI may not necessarily know exactly what it is. So they sort of attach meaning from what they're hearing from television or media or even, you know, their own sort of political meaning might inform their attitudes.

MEADOR: You know, in the public health space, we hear the term DEI come up a lot, but what does diversity, equity, inclusion actually look like in that workforce?

HAYNES: We have a lot of data that lets us know that public health is not very diverse, at least not in the leadership ranks. It's overwhelmingly white and male, same with a lot of different sectors.

So DEI really provides a pathway of programs for us to diversify the public health workforce, and we know that that's really important. We know that diverse health care workers and public health workers, it saves lives. It really does.

MEADOR: Under the president's executive order, all federal diversity, equity and inclusion positions will be terminated in the next 60 days. The executive order is also likely to get any program or initiative in federal agencies that promote diversity.

So one example would be a Food and Drug Administration program called Project Equity. This aimed to make sure cancer drugs were tested on a wide range of people, all to ensure the medication worked the same for everyone. But since the executive order, the program's web page has gone completely blank.

Experts are concerned what may be ahead for other federal agencies. So joining me now to talk about the larger implications of the executive order are two experts dedicated to advancing diversity, equity and inclusion.

HARRIS: My name is Glenn Harris. I am the president of Race Forward. Race board is a national organization that works at the intersection of issues of racial justice and democracy.

WARD: Hello. My name is Eric Ward and I'm the executive vice president of Race Forward.

MEADOR: Thanks for coming on the podcast. So what were your initial reactions to the president's executive order?

WARD: We were concerned and disappointed.

HARRIS: I think it's so important to recognize the EOs released this week are newly designed to divide us.

That at its core, it continued to solve the 75 years of civil rights legacy that brought us to this moment.

WARD: The impact on the economy is significant. National Institutes of Health show that health disparities cost the U.S. nearly \$100 billion annually in excess medical expenses. Those are dollars people need to better their lives, to pay for housing, to create jobs and it's disappointing to see leadership seeking to turn DEI into a monster.

MEADOR: And what do you think this means in terms of diversifying workplaces?

HARRIS: You know, over the years of doing this work, we got to see the benefits of engaging in diversity and inclusion and fundamentally centering equitable policy, making equitable practices. And what you see is increased representation when we are intentional about making sure that we are thinking through what our hiring promotion.

And etc. looks like in the workplace, we tend to get rules of candidates who are more representative of our of our community, that we actually end up with employees who are in a more trusting relationship with each other and the places they were.

And then finally, just in really practical terms, diversity equity, inclusion is a really effective way at reducing discrimination.

MEADOR: Many of our listeners are workers in public health, and many of them will be affected by the executive order. How can they continue to advance diversity, equity and inclusion?

HARRIS: First up, I just want to acknowledge the way in which public health workers over this last decade have really led the way in fight for equity in outcome.

I think in this moment, even as these federal attacks are happening, real change in this country has always happened locally. The Civil Rights Movement, while it moved nationally in policy, in the way that we perceive ourselves as the nation, it really was a movement that was local Selma, Birmingham. And I think it's so important that we remember in this moment, real change will happen in the local context.

WARD: I also want to thank them for their service to our country and to our community, and for embracing a value to provide accessible public health to all. The truth is that progress around equity, cohesion of our society will not be taught by a series of executive orders.

The Civil Rights Movement taught us that progress is possible even in the face of adversity, and that is the legacy in civil society that we are called to, to build upon. I'm inspired by the resilience of civil society and those public servants and government workers who continue to come together to protect and expand the gains that make this an actual stronger country, a cohesive country that is grounded in opportunity and possibility — inclusion over exclusion.

MEADOR: Even as shifting political landscapes presents more challenges for public health, there still may be reason to have hope and to stay motivated. Here's what Lawrence had to say.

HAYNES: It's perfectly normal to feel unsure. It's perfectly normal and understandable and valid to not really know what the path forward is.

I would just let folks know that, you know, history gives us a lot of tools, and this isn't the first time that we've had movements like this. And anytime and typically in the U.S., you have a great leap forward in a social movement, as we did in like 2020, 2021, there's always this tidal wave of resistance that comes back that we have to weather.

So I would just tell folks that to stay in the fight. If you are committed and you understand the real power that this work has to change people's lives and to change society for the better, then that work and that understanding should drive you, even as we have to sort of recalibrate and rethink about how we are going to go about the next year, the next 10 years, 20 years. It's definitely a long game.

MEADOR: And with that, we thank Lawrence, Glenn and Eric for their time and expertise. For more on DEI, please visit www.raceforward.org.

Thank you for listening to The Nation's Health podcast.