What You Should Know About RACISM-20: A Fact Sheet in the Time of COVID-19

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WHAT YOU SHOULD KNOW ABOUT RACISM-20: A FACT SHEET IN THE TIME OF COVID-19

Ryan J. Petteway, DrPH, MPH

Abstract
Satire has a history within public health and medical scholarship. However, research and academic works related to COVID-19, health inequities, and structural racism to date have not engaged/explored satire as a critical mode of reflection, analysis, and commentary. Drawing from social epidemiology literature related to structural racism, and rooted in critical race theory and critical theory related to narrative power, this paper—in the form of a "RACISM-20" fact sheet/health promotion flyer—uses satire and humor as critical commentary on mainstream public health discourse of/responses to COVID-19, transposing structural racism and COVID-19 to accentuate how individualist, apolitical, and "colorblind" downstream frames of COVID-19 risks and solutions curtail productive discourse and action to advance racial and health equity. In doing so, it trains a critical lens on how to “flatten the curve” of RACISM-20, using satire to (re)frame, critique, and extend discourse surrounding COVID-19, structural racism, and the role of public health systems in shaping narratives of causes, risk, and solutions. As such, this work presents as a potential pedagogical tool to discuss and critique dominant public health communication responses/frames during the crisis, as well as an example health promotion/education product of critical resistance and counternarrative. The hope is to invigorate productive exchange regarding interconnections between narrative power, structural causes of racial health inequities, and pervasive individualist, decontextualized, and pathologizing paradigms of health, “vulnerability,” and "risk” within discourse of COVID-19 and other matters of population health equity.

Keywords: COVID-19, structural racism, narrative power, public health, satire

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What You Should Know About RACISM-20

**KEY FACTS**

- **RACISM-20** is **not** a novel strain of RACISM.

- However, there appears to have been **some level of antiracist drift** between the original RACISM-1619 strain and the RACISM-20 strain.

- Researchers are still **unclear if this antiracist drift will impact efforts to develop a vaccine**.

- Like the original 1619 strain, the RACISM-20 strain shows a propensity for rapid mutation. For example, there have been growing calls for “Karen” to be considered a racial slur among those infected, and Oval Occupant Orange is attempting to shut down US Census efforts early for the first time in US history. These suggest that RACISM-20 continues to mutate much like its predecessors, e.g. RACISM-1787 (via The 3/5 Compromise), RACISM-1923 (via Thind vs. US), RACISM-1986 (via the Anti-Drug Abuse Act), and RACISM-2013 (via Shelby County vs. Holder).

- At present, a **mild RACISM-20 infection** appears to affect people’s ability to discern the spatial parameters of 6 feet. Scientists agree that the math skills of the general public have not been so severely compromised since 1776, when it appeared that all cis-, straight, able-bodied, property (and people) owning white men struggled to comprehend the mathematical term “equal.”

- A **moderate RACISM-20 infection** appears to affect people’s ability to discern the skin tones of other people. Researchers warn that this level of “colorblindness” has not been observed since white women became a primary beneficiary of Affirmative Action via Title VII of the Civil Rights Act of 1964 (and 1967 EO 11357). Researchers are currently working with Zenni to develop low-cost color-correcting lenses.

- A **severe RACISM-20 infection** appears to affect people’s ability to distinguish Oval Occupant Orange’s racist, white supremacist, misogynistic, pathologically false social media posts, from a piece of orange citrus fruit in one of Cézanne’s classic post-impressionist works.

- **Washing your hands** does not appear to help in stopping the spread of RACISM-20.

- **Hand sanitizer** is **100% ineffective** in lysing the outer structure of RACISM-20. However, it appears that a typical household 80-proof brown ethanol can reduce its impacts on perceived stress, as assessed via the modified “I Just Can’t With This Today” scale, the “I Wish They Would” scale, and the recently developed “F*CKS On E” scale. [NOTE: The latter was adapted from the 1964 “I’m Sick and Tired of Being Sick and Tired” scale, and the 2020 “You Picked the Right One Today” scale]
KEY SYMPTOMS

- “All Lives Matter.” Uncontrollable urge to respond to any and all calls for social justice with, “all lives matter”

- Belief that “blue” is an actual color of lives. [NOTE: this does not apply if you have a history of psychotropic drug use and/or know more than one Smurf character by name]

- Sharing, liking, or re-tweeting anything that involves Candace Owens. [NOTE: For Black and other POC, this could be the first sign of sepsis due to prolonged exposure to internalized RACISM, or iRACISM—which occurs when any strain of RACISM infects core areas of the brain associated with reasoning, logic, and self-image]

- Slurification of “Kare*n.” Propensity to equate “Kar*n” and “n****r” as comparably offensive and violent words

- Severe Allergy to Black Solidarity. Also known as SABS. Inability to watch sports if Black athletes do not sing, in unison, “I love America and all of the white people in it,” before each game to the happy birthday tune [NOTE: Singing it to Stevie’s version seems to increase inflammatory response, as measured by IL-6, IL-17, and cortisol levels]

- Categorical Racial Caucacity Syndrome. Typically indicated by an inclination to say the word “Caucasian” instead of simply saying “white”

- Heritage Hysteria. Possession and display of historical artifacts associated with a failed effort to rebel against the United States of America [NOTE: If this symptom presents along with an unyielding desire to listen to “Sweet Home Alabama”—when you’re not from, have never actually been to, and cannot identify Alabama on a map—seek help immediately]

- Googling “how do I make Black friends?”. [NOTE: Unless you are a TV producer and you are developing a new sitcom featuring a group a Black friends who get together at a coffee shop to discuss how to not get displaced from their community now that said coffee shop is there]

- Severe deterioration of language comprehension. Recent research suggests the most common symptoms here involve patients not understanding the words “defund” or “arrest” when spoken by anyone who is not white. Researchers believe it could be something genetic, and that any white person who experiences or observes this phenomenon should immediately seek genetic screening, as it may be heritable.

- Partial/Selective Amnesia. Researchers have noticed that many folks showing the above symptoms also seem to have no awareness/recollection of: a) ICE detainment of Brown children in cages without their parents, b) thousands of missing and murdered Indigenous women, and c) Jesus’ actual level of melanin.
PREVENTION

Current PREVENTION GUIDELINES call for the following:

- **Social Un-Distancing.** If you are concerned about stopping the spread of RACISM-20, please contact your local social epidemiologists. They will talk with you about ways to help “flatten the curve,” which may include: supporting equitable funding for public schools, transportation, and affordable housing; ending exclusionary zoning; defunding police; abolishing ICE; supporting living wages; general class solidarity; expanding access to healthcare; equitable tax reform; ending mass criminalization and incarceration of Black life; respecting Indigenous sovereignty and honoring treaties; expanding and enforcing fair housing laws; ending voter suppression and protecting voter rights; refusing to purchase pineapple pizza when it is referred to as “Hawaiian.”

- **Avoiding Foax News.** A growing body of research indicates that individuals who rely on Foax News as their primary source of information regarding, well, anything in life, are 8000% more likely to develop RACISM-20 symptoms. [NOTE: This increases to 74000% if watching Foax News is combined with eating unseasoned food while seated on furniture with floral patterns]

- **Reading Actual Books.** Reading actual literature on the history, structure, and pervasive presence of RACISM—and its interconnections to capitalism and heteropatriarchy—has been shown to reduce risks of contracting various RACISM strains in the past. This has been particularly protective among those who were born after DJ Kool Herc began “breaking” beats like fasts and stale tortilla chips. [NOTE: Viewing documentaries on the same topics has also been shown to confer some level of protective immunity]

- **Voting.** Studies show that the most effective way to contain the spread of most RACISM strains is to remove the structural factors that incubate them. The goal is to reduce community spread below a reproductive rate, or \( R_0 \), of 1.25, meaning that each person who contracts RACISM only spreads it to .25 other people—which is one other person in a household of 5 people. However, policies that systematically create and enable social inequities based on race (e.g. education, housing, employment) create infection “hotspots,” or communities wherein the \( R_0 \) is closer to 4—meaning that entire households, and therefore entire communities, become and remain infected. Voting for candidates who support policies that mitigate these social inequities appears to be the best long-term prophylaxis for encountering/contracting RACISM-20. [NOTE: There’s a 99.9989% chance that you’ve already contracted a strain of RACISM if this comes as news to you]
TREATMENT

Current TREATMENT GUIDELINES call for the following:

- **Quarantine.** If you display any of the symptoms listed above, please self-quarantine and contact your local social epidemiologists. They will test you to determine if you have RACISM-20.

If you test positive, the following guidelines apply:

- **Social Media Isolation.** Isolation from social media for 14 days, except as prescribed by the DOT protocol (below). Patients may return to social media use after 14 days, provided that shares, likes, and tweets related to racist content (e.g. “all lives matter,” Candace Owens, anti-mask rhetoric) remain below 80% of pre-isolation levels.

- **Directly Observed Therapy (DOT) encompassing the following 5 items:**
  1. Read 5 chapters of antiracist literature per day for 14 days. Literature must be written by Black authors or other authors of color. At least ¼ of literature must be fiction. Audio books OK.
  2. Watch 1 movie with a main cast of 75% Black people per day for 14 days. Only 4 of these movies can be about being Black or “the” “Black experience.” The other 10 must be about being actual humans with like, actual human lives and activities and interests and experiences that other non-Black humans have and relate to as well.
  3. Follow Black Lives Matter on at least 2 social media platforms for 14 days. Any and all replies, comments, likes, shares, and retweets must include the hashtag #BlackLivesMatter (spelled out, no acronym) and cite something read for item #1 above.
  4. Place one “Black Lives Matter” sign on your front lawn, and place another one in a front window—facing inward—for 14 days. [NOTE: If you are white and still do not have a front lawn after 401 years of RACISM... welp, just put the sign under your pillow and wait]
  5. Stop all use of the following words and phrases—for any reason—for 14 days: 1) Blue, 2) All, 3) Chicago, 4) Black on Black, 5) Illegal, 6) Freedoms, 7) Hoax, 8) Chinese, 9) Obama, 10) Alien. [NOTE: There is an obvious word missing from this list. You know what it is. Please, do not catch THESEHANDS-19]

- **Contract Tracing.** A social epidemiologist will contact you to identify all close social contacts (in-person and/or online) that may have been exposed to your active RACISM-20 infection. [NOTE: Do not be alarmed—they will not use their “phone voice”]

This fact sheet was developed by:
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