

Configuration Whitepapers

✨ Finishing Touches Workday



Jon Zelner

2024-10-16

PUBHLTH 405

Social History of Infectious Disease

University of Michigan

School of Public Health

Update



Broken...

Update



Broken...



But ok!

Agenda

- Work in groups to get your paper into final form.

Agenda

- Work in groups to get your paper into final form.
- ~ 10m office hours with each group

Agenda

- Work in groups to get your paper into final form.
- ~ 10m office hours with each group
- Anonymous [mid-term feedback survey](#)
- **That's it!**

What we lose when we ignore **history**.



Figure 1: New York Times Piece from 10/16/24 slamming DEI efforts at UM

What we lose when we ignore **history**.

- Article highlights some of the challenges of DEI efforts at UM while **ignoring** the social and political context that these efforts came out of.



What we lose when we ignore **history**.

- Article highlights some of the challenges of DEI efforts at UM while **ignoring** the social and political context that these efforts came out of.
- We can't understand where we are without understanding **how we got here**.



What we lose when we ignore **history**.

- Article highlights some of the challenges of DEI efforts at UM while **ignoring** the social and political context that these efforts came out of.
- We can't understand where we are without understanding **how we got here**.
- This context is totally missing from this piece.



UM has long been at the center of conflict over affirmative action, inclusion, and protest

- 2003: Grutter v. Bollinger SCOTUS decision, limiting affirmative action programs at UM Law School.

UM has long been at the center of conflict over affirmative action, inclusion, and protest

- 2003: Grutter v. Bollinger SCOTUS decision, limiting affirmative action programs at UM Law School. (I was a 21 year old college senior in Pennsylvania when this happened.)

UM has long been at the center of conflict over affirmative action, inclusion, and protest

- 2003: Grutter v. Bollinger SCOTUS decision, limiting affirmative action programs at UM Law School. (I was a 21 year old college senior in Pennsylvania when this happened.)
- 2006: Michigan Proposal 06-2 effectively outlawing affirmative action in admissions.


UM has long been at the center of conflict over affirmative action, inclusion, and protest

- 2003: Grutter v. Bollinger SCOTUS decision, limiting affirmative action programs at UM Law School. (I was a 21 year old college senior in Pennsylvania when this happened.)
- 2006: Michigan Proposal 06-2 effectively outlawing affirmative action in admissions. (I was a 2nd year PhD student in Sociology At UM when this happened.)

UM has long been at the center of conflict over affirmative action, inclusion, and protest

- 2003: Grutter v. Bollinger SCOTUS decision, limiting affirmative action programs at UM Law School. (I was a 21 year old college senior in Pennsylvania when this happened.)
- 2006: Michigan Proposal 06-2 effectively outlawing affirmative action in admissions. (I was a 2nd year PhD student in Sociology At UM when this happened.)
- 2024: UM 'Institutional Neutrality' proposal and changes to student conflict resolution guidelines in the wake of Gaza Solidarity Encampment.

UM has long been at the center of conflict over affirmative action, inclusion, and protest

- 2003: Grutter v. Bollinger SCOTUS decision, limiting affirmative action programs at UM Law School. (I was a 21 year old college senior in Pennsylvania when this happened.)
- 2006: Michigan Proposal 06-2 effectively outlawing affirmative action in admissions. (I was a 2nd year PhD student in Sociology At UM when this happened.)
- 2024: UM 'Institutional Neutrality' proposal and changes to student conflict resolution guidelines in the wake of Gaza Solidarity Encampment. (I am a 43 year old UM professor now...)

Why does this **matter** for public health and social epidemiology in particular?

- Each of these steps threatens our ability to be **values-driven** advocates for health equity and **health justice**.

J **Jon**
Ann Arbor, MI | Pending Approval

As a faculty member at the University of Michigan who has taught hundreds of undergraduate and graduate students about health inequity, infectious disease and other topics falling under the DEI umbrella for the last seven years, this article is misleading at best. My students have almost universally been open-minded, eager to deal with tough topics and questions, respectful of each other and me as an instructor, and generally just inspiring people who give me optimism about the future in the face of a bleak set of world events.

While some of the faculty complaints highlighted here may be valid, I would imagine that the disgruntled folks coming out of the woodwork to dish on our ostensibly 'woke' campus have an axe to grind against the students who have taken issue with them that most of us don't.

There is a lot to be frustrated with in the university's DEI apparatus, but its imperfections are primarily a function of the structural and legal constraints we operate under as an institution. This place has a lot of problems, like any other big institution, but all I see in this story is a contest over power playing out - an age-old story - and the author reflexively taking the side of the powerful.

I would also not rely on the regents - partisan politicians, some of whom have financial interests intertwined with the university's actions - well-known at this point for their disdain of our students and their politics, for a reliable characterization of what life is like here.

Figure 2: Wading into the comments section with my take

Why does this **matter** for public health and social epidemiology in particular?

- Each of these steps threatens our ability to be **values-driven** advocates for health equity and **health justice**.
- Who and what is the **institution**? Policy proposal under consideration is broad and vague and threatens student, staff, and faculty speech.

J **Jon**
Ann Arbor, MI | Pending Approval

As a faculty member at the University of Michigan who has taught hundreds of undergraduate and graduate students about health inequity, infectious disease and other topics falling under the DEI umbrella for the last seven years, this article is misleading at best. My students have almost universally been open-minded, eager to deal with tough topics and questions, respectful of each other and me as an instructor, and generally just inspiring people who give me optimism about the future in the face of a bleak set of world events.

While some of the faculty complaints highlighted here may be valid, I would imagine that the disgruntled folks coming out of the woodwork to dish on our ostensibly 'woke' campus have an axe to grind against the students who have taken issue with them that most of us don't.

There is a lot to be frustrated with in the university's DEI apparatus, but its imperfections are primarily a function of the structural and legal constraints we operate under as an institution. This place has a lot of problems, like any other big institution, but all I see in this story is a contest over power playing out - an age-old story - and the author reflexively taking the side of the powerful.

I would also not rely on the regents - partisan politicians, some of whom have financial interests intertwined with the university's actions - well-known at this point for their disdain of our students and their politics, for a reliable characterization of what life is like here.

Figure 1: Wading into the comments section with my take

Why does this **matter** for public health and social epidemiology in particular?

- Each of these steps threatens our ability to be **values-driven** advocates for health equity and **health justice**.
- Who and what is the **institution**? Policy proposal under consideration is broad and vague and threatens student, staff, and faculty speech.
- Make your take on institutional neutrality at UM known to President Ono, the Regents and anyone else who you think should hear.

J **Jon**
Ann Arbor, MI | Pending Approval

As a faculty member at the University of Michigan who has taught hundreds of undergraduate and graduate students about health inequity, infectious disease and other topics falling under the DEI umbrella for the last seven years, this article is misleading at best. My students have almost universally been open-minded, eager to deal with tough topics and questions, respectful of each other and me as an instructor, and generally just inspiring people who give me optimism about the future in the face of a bleak set of world events.

While some of the faculty complaints highlighted here may be valid, I would imagine that the disgruntled folks coming out of the woodwork to dish on our ostensibly 'woke' campus have an axe to grind against the students who have taken issue with them that most of us don't.

There is a lot to be frustrated with in the university's DEI apparatus, but its imperfections are primarily a function of the structural and legal constraints we operate under as an institution. This place has a lot of problems, like any other big institution, but all I see in this story is a contest over power playing out - an age-old story - and the author reflexively taking the side of the powerful.

I would also not rely on the regents - partisan politicians, some of whom have financial interests intertwined with the university's actions - well-known at this point for their disdain of our students and their politics, for a reliable characterization of what life is like here.

Figure 1: Wading into the comments section with my take

Next Time

- Final Product Proposals 🎥 workday