Dear CMA Board of Directors,

It is with much disappointment that I am writing to you today to share that I have made the difficult decision to resign as a director of the board. I am writing to you from the traditional, unceded, and unsurrendered territory of the Anishinaabe Algonquin people.

In October 2023, I shared social media posts pertaining to the most recent outbreak of violence in Israel and Palestine, using Instagram to draw attention to the humanitarian crisis unfolding in Gaza. I did this in solidarity with the Palestinian people and in the context of my support for their rights to self-determination and struggle for human rights and dignities. My social media statements were founded in anti-racism and respect for international human rights to health equity.

In early November 2023, a physician colleague shared my social media posts publicly on multiple platforms, misrepresenting them in ways I consider highly inflammatory. This physician also shared my posts with CMA leadership.

Unfortunately, my posts have been given an interpretation that is not supported either by their context or plain meaning. I have done my best to share my perspective. Context and intent are important to consider when the phrase <u>"From the River to the Sea: Palestine will be Free"</u> is referenced. The inability to hold multiple truths and interpretations of this phrase at the same time is deeply concerning for me. As is the lack of critical insight and reflection on the harm done upon Palestinian, Arab, Muslim, and allied colleagues in the medical profession by listening, upholding, and valuing one interpretation of the 10-word phrase over another. This pattern of bias, discrimination, and racism must stop.

I acknowledge that there were reasonable opportunities to find a path forward together, but ultimately the attempts to repair the harm that I experienced from the CMA leadership were unsuccessful. My relationship with the organization has become untenable and irreparable, leaving me with no choice but to resign.

Criticism of the actions of Israeli governments is <u>not antisemitic</u>. Criticizing Zionism as a nationalist ideology is not antisemitic. Nor is expressing support for a future in which Palestinians and Israelis can live in equality. We all benefit when we are all freer.

The persistently negative way in which my social media posts have been painted causes further division and represents an attempt to silence appropriate and much needed dialogue on the ongoing genocide in Gaza. This experience, I have come to learn, is a manifestation of anti-Palestinian racism – repression that silences, excludes, erases, stereotypes, defames or dehumanizes Palestinians or their narratives.

As a clinician and public health professional that has dedicated my career to health equity and tackling the social determinants of health, I take criticisms of my integrity and character very seriously. Reflecting on my identity as a Chinese-Canadian who benefits from the settler colonial state of Canada, I continue to reckon with how my understandings, work, and actions reflect the values and principles that guide me on my own journey of anti-racism. We will all make missteps and mistakes along the way, and acknowledging harm when it has been experienced by others is important to heal and repair relationships. There is an important difference between engaging in dialogue that is hard or uncomfortable and that of abusive or harmful speech. However, we should not shy away from difficult conversations or silence certain voices as we risk avoiding the necessary work of anti-racism at both an individual and institutional level. With that said, I do not condone or support hate speech, prejudice or intolerance against any religion or groups of peoples and communities; and I unequivocally condemn antisemitism, Islamophobia, and anti-Palestinian racism.

I have substantial concerns related to the actions of the CMA leadership that has created an unsafe environment for me on the board as the sole resident board director – only one of two medical learners on the board. I experienced bullying, harassment, and intimidation from multiple people within CMA leadership related to these posts. Instead of being first and foremost being seen as a "human being", I was being managed as a "risk" to the organization. I believe what I have experienced is a failure of the CMA leadership to meaningfully reflect on the role that anti-Palestinian racism has played in its response to my social media posts. Similar reprisals are happening to so many others in academic institutions and workplaces, including healthcare organizations, across Canada.

The CMA has taken a stance they consider "neutral" in the face of ongoing Israeli apartheid and genocide. This is unacceptable to me. I cannot in good conscience remain a board director that upholds the primary purpose of being a "key enabler and champion of CMA mission and vision". This is an impossible situation for me to be in. Being neutral in the face of structural oppression and settler colonialism, is taking the side of the oppressor. I refuse to be a bystander and cannot in good conscience support the CMA as it continues to be a bystander on this human rights issue.

Now more than ever, we need opportunities to bridge divides, find common ground, and lead with compassion and humility for learning and growth. As health professionals, we require environments that at a bare minimum are brave spaces where respectful but sometimes challenging dialogue can take place for this kind of mutual learning and growth to happen so that we can create the conditions for collective and organizational change. It is an extremely difficult and emotional time, and what I have experienced and seen is a lot of emotional reacting rather than mindfully responding to one another.

I am struggling to find medical leadership that reflects the moral courage and moral clarity that we need in times like these. The work of equity, diversity, and inclusion means very little if organizations like the CMA fail to protect and support their medical learners when situations like this occur. It also means very little if we remain silent on the humanitarian and public health crisis unfolding in Gaza, including stopping short of demanding for a ceasefire and a stop to the unacceptable attacks on healthcare workers, patients, and infrastructure.

We need to lead with humility, patience, and kindness for others and ourselves. This is what I have practiced in responding to CMA leadership. I will continue to do what I know is right, and work to learn and grow through respectful dialogue with others. I am hopeful in knowing that I am not alone — there are so many that are choosing to stand with moral courage and clarity. We need more of such people in this world despite the challenges they face. I am so proud and grateful to know some of them and to call them my trusted and respected friends and family.

Best wishes,

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