

special
section

S



WOKE



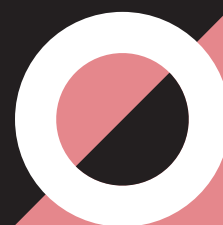
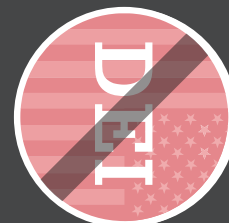
THE WAR ON WOKE— AND WHAT IT MEANS

by amin ghaziani and seth abrutyn

In our Winter 2025 issue, we invited five scholars to comment on the U.S. presidential election, shedding sociological light on a current issue from several different angles. In this issue, six more esteemed researchers draw our attention to a lightning rod in the so-called culture wars: DEI.



WOKE



WOKE





January 20, 2025. Day 1. The following Presidential Action was posted on the White House website: *Ending Radical and Wasteful Government DEI Programs and Preferencing.*

Shortly after his second presidential inauguration, Donald Trump signed an Executive Order that rescinded 78 Biden-era executive actions, effectively ending all federal diversity, equity, and inclusion (DEI) and diversity, equity, inclusion, and accessibility (DEIA) programs.

"By the authority vested in me as President by the Constitution and the laws of the United States of America, it is hereby ordered: The Biden Administration forced illegal and immoral discrimination programs, going by the name 'diversity, equity, and inclusion,' into virtually all aspects of the Federal Government," the order proclaimed.

"That ends today."

Trump's objective was to "terminate, to the maximum extent allowed by law, all DEI, DEIA, and 'environmental justice' offices and positions (including but not limited to 'Chief Diversity Officer' positions); all 'equity action plans,' 'equity' actions, initiatives, or programs, 'equity-related' grants or contracts; and all DEI or DEIA performance requirements for employees, contractors, or grantees."

Dismantling DEI efforts, some of which date back 60 years, is a key priority for the new administration. And Trump has set about it with astonishing efficiency, leading major media outlets, from *The Guardian* to *The Economist*, *Bloomberg*, and numerous others, to describe his approach as a "war on woke."

Why do DEI programs matter? How do sociologists understand and explain their importance—and their value for society writ large?

Given the breathtaking pace of this war on woke, we present a collection of timely essays that reflect on the immediate consequences of shutting down DEI efforts across the United States. Scholars who have studied these programs—long before they were even called DEI—have come together in this special section to reflect on the cultural fault lines exposed as they're ousted from three contexts: healthcare, workplaces, and higher education.

Can DEI save lives? In the first essay, Adia Harvey Wingfield examines diversity in healthcare professions. Critics can disparage DEI all they want, she explains, but research offers incontrovertible evidence that it improves patient outcomes. For instance, women surgeons are dramatically underrepresented in their speciality area, but their patients have lower complication and death rates than do the patients of men surgeons. Similarly, the patients of Black men doctors and women physicians of all races experience fewer complications and longer life expectancies. Wingfield

concludes that "abandoning efforts to achieve more diversity among health care providers potentially means patients will suffer." Indeed, she writes, "Gutting diversity programming won't advance our nation's health. Instead, it might literally kill us."

Shelley J. Correll and Adina D. Sterling extend the conversation into the workplace. Resistance to DEI programs is often based on a misconceived assumption that employers should hire based on merit. But sociologists have found that evaluating qualifications is not a colorblind process. For example, experimental studies have shown repeatedly that hiring managers are more likely to offer interviews to applicants whose names "sound White" versus those whose names "sound Black"—even when their resumes are otherwise identical. The story is similar when it comes to gender: attribute the very same resume to a man rather than a woman, and he'll get more call-backs. Consequently, Correll and Sterling insist that DEI efforts don't undermine but enhance meritocracy in the hiring process by side-stepping biases, from the unconscious to the systemic, to ensure that everyone is treated fairly.

In the third essay, Jessica R. Gold, Laura K. Nelson, and Kathrin Zippel turn to DEI programs in universities. They begin by engaging with what's called the Matthew Effect, or the fact that already high-status researchers are cited more—not because their work is better, necessarily, but because it's more visible. Of course, when science is driven by status rather than the quality of ideas, the entire enterprise of scientific discovery suffers. Using a National Science Foundation-funded initiative designed at increasing gender equity in academic STEM as their case, Gold, Nelson, and Zippel argue that universities must push back against anti-DEI measures. What's more, they must make intentional efforts to embed diversity into their infrastructure, where it can become an institutional asset with the power to better advance knowledge, educate students, and contribute to the public good.

Together, these sociological reflections help make clear that DEI is an enemy only to those who would maintain existing social orders—White supremacy, male dominance, and an array of social and structural inequalities.

Amin Ghaziani and **Seth Abrutyn**, both in the Department of Sociology at the University of British Columbia, are co-editors of *Contexts*. Most recently, Ghaziani is the author of *Long Live Queer Nightlife*, and Abrutyn, with Anna S. Mueller, is the co-author of *Life Under Pressure*.



making a business case for de&i

by shelley j. correll and adina d. sterling

"Get the girl to check the numbers," said John Glenn prior to his historic 1962 Project Mercury flight. To whom was he referring? Katherine Johnson.

Born in 1918 in the town of White Sulphur Spring, West Virginia, Katherine Johnson played a pivotal role at NASA. Even as a child, Katherine had a talent for mathematics. She was just 15 when she enrolled at West Virginia State College, a historically Black college (HBCU). There she studied under Dr. William Schieffelin Claytor, one of the first Black men in the United States to earn a PhD in mathematics. Dr. Schieffelin designed advanced courses just for Johnson, telling her, "You would make a great research mathematician."

When Johnson joined the National Advisory Committee for Aeronautics (NASA's predecessor) in the all-Black, all-female West Area Computing Unit led by Dorothy Vaughan, NACA was segregated. There were no diversity, equity, and inclusion programs. At NACA, Johnson demanded to be included in meetings with the White men engineers who would otherwise be discussing her calculations without her. Rather than wait for an invitation, she followed the engineers into the meetings. She stated, "I just ignored the barriers and did the work." Indeed, her work was so respected that engineers, and eventually the astronauts themselves, began to request to work with her.

why de&i programs?

The United States has a long history of treating racial and ethnic minorities and women as "less than" and putting them in precarious, economically disadvantaged work environments like the West Area Computing Unit. One of the goals of diversity, equity, and inclusion programs is to create systems and processes that ensure that people, regardless of their race, ethnicity, gender, nationality, and other factors, are treated equally. For NASA and other organizations, these efforts are not about

being benevolent or charitable. They are about promoting and advancing the best people for the benefit of their organizations and society. Imagine how many more contributions Katherine Johnson could have made to NASA if she had been included earlier and more fully. (Over the last few years NASA created a "Mission Equity" plan and noted that "DE&IA [diversity, equity, inclusion and accessibility] is critical to innovation, excellence, and mission success.")

Resistance to DE&I today is often based on an argument that these practices stand in opposition to hiring based on merit. Merit refers to selecting a person who deserves to be hired or promoted based on talent. But social scientific studies indicate that, in the absence of DE&I efforts, fair and impartial treatment just doesn't exist. For example, researchers Marianne Bertrand and Sendhil Mullainathan reported in a 2004 study titled, "Are Emily and Greg More Employable than Lakisha and Jamal? A Field Experiment on Labor Market Discrimination" that managers who evaluate a *nearly identical* resume under a "White-sounding" name are significantly more likely to call the person back than they are when it's submitted under a "Black-sounding" name. Even with no substantive differences in their experiences or accomplishments, Black applicants are judged less suitable for hire than identically qualified White applicants. Similar studies show that, in science and engineering fields, a resume with a man's name on it is evaluated more positively than the identical resume with a woman's name on it. This is not a relic of the past. These biases continue today, even among well established, highly regarded Fortune 100 companies (for more, see *The New York Times'* Upshot report "What Researchers Discovered When They Sent 80,000 Fake Résumés to U.S. Jobs"). DE&I hiring practices are designed to remove these biases, thereby ensuring that all applicants are treated fairly.

GoDaddy's DE&I Retooling

Problem

In evaluation sessions, women were more likely than men to be criticized for their personality or communication style.

During talent reviews, more time was spent discussing men, which led men to receive higher ratings than women.

Solution

Working with the researchers GoDaddy created and then used "Talent Review Scorecards" to align on evaluation criteria.

GoDaddy monitored the amount of time discussing each employee to ensure that everyone received equal discussion time.

Result

Criticisms of women's personality and "style" decreased significantly.

All employees (across genders) received higher levels of feedback than prior to intervention.

People were evaluated in comparable ways regardless of gender.

Note: See Sheila Melvin and Adina Sterling's 2020 Stanford Business School case "GoDaddy and the Holy Grail: Equal Access to Top Performance Reviews."



DE&I policies facilitate racial, gender, and other forms of equality. When implemented correctly, DE&I can help produce more equitable and talent-rich workplaces.

de&i hiring in action

One example of such a DE&I program was implemented by GoDaddy. GoDaddy, one of the world's largest internet domain registrars, is a private technology company with headquarters in Tempe, Arizona and around 6,000 employees. In 2015, after facing critiques that its previous years' Superbowl commercials were sexist and objectified women, the leadership at GoDaddy dropped its Superbowl campaigns and set out to develop an internal DE&I program. Specifically, leadership decided that they did not want to simply roll out a one-time training effort around unconscious bias. Instead, they wanted to remove any biases that might exist in their promotion and feedback systems. Because performance ratings affected their employees' pay, benefits, and workplace responsibilities, they decided the effort was important to the employees' lives and livelihoods.

GoDaddy worked with researchers from the Stanford VMware Women's Leadership Innovation Lab who identified ways to reduce bias in the promotion process (see table one at right for an overview). The Stanford researchers analyzed employee engagement surveys, conducted focus groups, fielded an original survey, analyzed approximately 60 performance evaluations, and observed talent review sessions. What did they find? Where men were described with active, agentic language, such as "taking charge" and "driving change," women were discussed in ways that discounted their actions, such as saying she "helped lead" instead of "she led." In other words, the researchers noticed that assessments lined up with stereotypes about women being more collaborative and men being more agentic. Researchers further observed that more time was spent discussing men's performance. As a result, some high-performing women were being passed over for promotion.

Over several months, the then-Chief People Officer at GoDaddy, Monica Bailey, worked with the researchers to improve their promotion process in three key areas: reducing the number of competencies upon which people would be evaluated by narrowing in on the most important ones; training managers on how to evaluate employees fairly; and putting communication tools like evaluation dashboards in place to track

progress to improve consistency and transparency. Over time, these changes led to greater levels of equality in the promotions of women and men. It also led to higher quality feedback for all employees across the company, regardless of gender identity. In other words, the DE&I new processes worked better and more fairly. As a direct result, GoDaddy became recognized as one of the best workplaces for women in technology.

de&i going forward

Will DE&I survive going forward in businesses? We believe the answer is yes, the essential qualities of DE&I programs will continue. This is because DE&I policies not only facilitate racial, gender, and other forms of equality, they also ensure that organizations are accurately assessing talent in order to hire and promote the best people, as we saw in the GoDaddy example above.

We also believe the essential elements of DE&I will survive because they are good for teams and decision-making in workplaces. In businesses, increasingly, critical work is being done by teams and not by individuals. By including a wider range of skills and perspectives, diversity and inclusion enhance team performance. For example, research by the late workplace expert Katherine Phillips found that greater team diversity led people to do a better job preparing to work together and led teams to demonstrate a higher level of problem-solving. In diverse teams, individuals tended to avoid "group think," or converging on a solution too quickly without considering alternatives that might be better.

In conclusion, where we stand today with DE&I is part of a broader arc that can be traced back to the days when Katherine Johnson worked at NASA and to decades prior to her time there. The impetus to reduce discrimination, treat people fairly, and in so doing, ensure that our workplaces are fully drawing on

The impetus to reduce discrimination, treat people fairly, and ensure that our workplaces are fully drawing on all of the talent in our society has a long history.

all of the talent in our society, has a long history. DE&I, when implemented correctly, can help produce more equitable and talent-rich workplaces. It is important to give DE&I programs time to do so.

Shelley J. Correll is in the Department of Sociology at Stanford University, where she directs the Stanford VMware Women's Leadership Innovation Lab. She studies sex and gender, organizations and work, and social psychology. **Adina D. Sterling** is in the Management Division at Columbia Business School where she co-directs the Equity by Design Lab. She studies economic sociology, organizational theory, and the remediation of workplace inequality.



can dei save lives? diversity and health care professions

by adia harvey wingfield

Despite being nearly ubiquitous in major companies just five years ago, today diversity, equity, and inclusion (DEI) programs are facing an existential threat. Companies like Google, Meta, Target, and more are moving to shutter diversity offices, funding programs, and other initiatives that they touted with much fanfare back in 2020. They are making these changes in conjunction with the federal government, which has made its contempt for and distrust of diversity ideology plain. Charging that DEI compromises quality and standards, subverts meritocracy, and in extreme cases even costs lives, critics assert that these policies have minimal value and serve to discriminate against white men.

While opponents deride DEI, the research on health professions shows a different picture. The health care industry, particularly the professions of medicine and nursing, has spent decades emphasizing the importance of and need for more racial and gender diversity within these career fields. As of 2022, however, Black Americans were 13% of the US population but only 5% of physicians. Black men constituted a mere 2% of Black doctors, a number that, according to physician Dan P. Ly writing for the *Journal of General Internal Medicine*, has remained virtually unchanged since the early 1900s. The American Association of Colleges of Nursing also reported in 2022 that only 6% of registered nurses identified as Black, with Black men making

and colleagues' 2023 *JAMA Open Network* article, show that increasing the numbers of Black men in the physician profession could reduce cardiovascular deaths among Black men; and that Black residents in communities with higher numbers of Black doctors have better health outcomes, respectively. These studies show that there is an unquestionable, concrete benefit to more diversity in health care. It doesn't just improve outcomes; it literally saves lives.

So, we know that diversity benefits healthcare and, accordingly, that health professions have tried to create more racial and gender diversity within their ranks. Why have they struggled? In my 2019 book *Flatlining*, a study of Black doctors, nurses, physician assistants, and technicians, I found that doctors were mostly exposed to diversity initiatives in the form of cultural competence trainings. These sought to help physicians understand how social and cultural differences could impact patient care. Nurses felt that the facilities where they worked paid lip service to diversity, but rarely addressed structural or interpersonal inequalities they faced—scheduling disparities, mistreatment from colleagues, or blocked access to credentialing. And technicians were largely left out of diversity discourse entirely, with few providers taking steps to attract underrepresented workers to the field or address the challenges faced by the ones who were there. It seemed that professional associations, industry leaders, and health care facilities openly touted the benefits and virtues of more diversity. But they rarely put initiatives or programs into place that would increase the numbers of Black workers in these professions or acknowledge the issues they confronted once inside.

In the absence of such efforts, Black practitioners did an enormous amount of work on their own to make health care more accessible and available to communities of color—both patient populations and potential care providers. Black doctors sought to address the structural dynamics that artificially depreciated their numbers in the profession. They engaged in intensive mentoring, lobbied for outreach programs, and started nonprofits to promote better health access. Black nurses cast themselves as “change agents” who lobbied for Black patients to receive more respectful, compassionate care. Black technicians attempted to advocate for Black patients, helping them to be taken seriously in health care systems that often overlooked or ignored them. In short, with health care facilities unable or unwilling to do this work, Black workers took up the responsibility for creating more diversity in the profession.

These patterns spur a serious question: what will happen

There is an unquestionable, concrete benefit to more diversity in health care.

up less than 2% of Black workers in this profession as well. For decades, numbers like these contributed to a push from industry leaders to attract more women of all races to medicine, and more men to the nursing profession.

Indeed, in health care, there is a measurable value to a more diverse work force. For instance, in a 2023 *JAMA Surgery* article, Christopher Wallis and his colleagues found that despite their underrepresentation in surgery, women doctors in this specialty area have lower complication and death rates than their men counterparts. Management professor Brad Greenwood and his colleagues also published a 2018 *Proceedings of the National Academy of Sciences* paper documenting that women suffering from heart attacks show better outcomes when treated by women physicians. Furthermore, these effects are present even when women are treated by men doctors in departments with high numbers of women colleagues. Similar studies, such as Marcella Arsan's 2018 NBER report “Does Diversity Matter for Health? Experimental Evidence from Oakland” and John Snyder

to health care—and the health of our population in general—as diversity initiatives become increasingly stigmatized and eventually shuttered? The research shows that more diversity among health professionals helps improve outcomes, even saves lives. But for a variety of reasons, Black workers remain underrepresented, especially in medicine and nursing. These disparities leave Black doctors and nurses doing the additional labor of both tending to underserved Black patients’ particular needs and trying to expand potential Black care providers’ access to their fields. As diversity programs continue to fall by the wayside, this strain is likely to leave Black practitioners with ever more work and responsibility.

It is also key to ask whether shuttering diversity programs will reverse the progress women of all races have made in the medical profession. Sociologists Ann Boulis and Jerry Jacobs found that the numbers of women attending medical school have been steadily increasing for decades, and, at present, women are in the majority among students enrolled in U.S. medical schools. But women doctors still face barriers that effective diversity programming could address. As sociologist Kate Kellogg shows, among these are the punishing schedules that are incompatible with cultural expectations for caregiving, sexual harassment in male-dominated specialty areas like surgery and anesthesiology, and underrepresentation in leadership roles. Sociologists Wasudha Bhatt and Glenda Flores find that women of color in the physician profession face barriers that reflect their race and gender, with Latinas asked to provide translation services, Indian women stereotyped as foreigners who face bias if they speak with an accent, and Black women presumed to be less competent. Eliminating diversity initiatives makes it less likely that issues like these will be resolved in ways that allow women to reach their full potential in the medical field.

Abandoning efforts to achieve more diversity among health



iStockPhoto // AaronAmat

In health care, there is a measurable value to a more diverse work force. For instance, women surgeons have lower patient complication and death rates than their male colleagues.

care providers means accepting the fact that more patients may suffer. Black men doctors and women physicians of all races help enhance health outcomes, reducing patient complications and extending life expectancy. Gutting diversity programming won’t advance our nation’s health. Instead, it might literally kill us.

Adia Harvey Wingfield is in the Department of Sociology at Washington University St. Louis, where she co-directs the Office of Public Scholarship. She is the president of the American Sociological Association and the author of *Gray Areas: How the Way We Work Perpetuates Racism and What We Can Do to Fix It*.



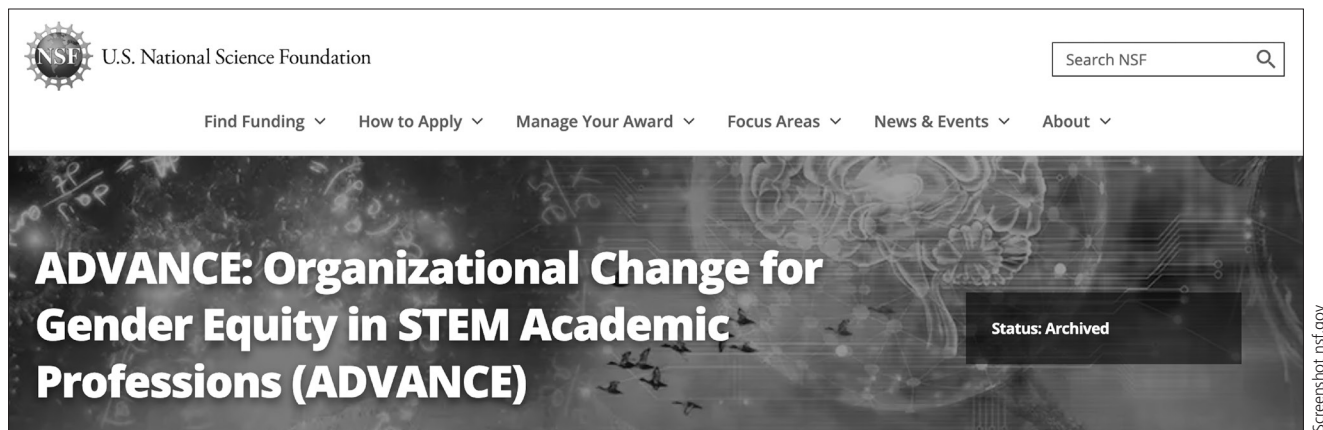
dei as infrastructure—and why we’ll miss it when its gone

by jessica r. gold, laura k. nelson and kathrin zippel

In January 2025, the National Science Foundation (NSF) quietly archived the ADVANCE program, a 24-year initiative aimed at increasing gender equity in academic STEM (Science, Technology, Engineering, and Math). Its shuttering comes at a moment when “DEI” has become a cultural flashpoint—mischaracterized as a zero-sum game of identity politics rather than structural interventions that address systemic barriers. DEI programs like ADVANCE are not just about increasing representation. They are

designed to transform the systems that shape scientific discovery and education, making them more innovative, responsive, and robust for everyone.

Universities, like all institutions, are constantly changing. While institutions exist to fulfill core missions—whether educating students, delivering healthcare, or ensuring criminal justice—the world around them evolves. If institutions fail to adapt, they risk becoming ineffective or even harmful, no longer



When we shut down DEI initiatives, as the NSF has done with ADVANCE, we are not simply rolling back progress toward more effective institutions; we are also dismantling the robust networks, knowledge, and infrastructure that allow institutions to adapt to new challenges.

serving the very purpose for which they were created. Institutional change is necessary, then, but it is also difficult, because institutions are what sociologists call path dependent: past decisions and practices create self-reinforcing patterns, making change tough without deliberate intervention.

DEI efforts in universities are a prime example. Universities today look vastly different than they did 100, 50, or even 10 years ago. Early federal DEI efforts, such as the GI Bill, Civil Rights Act, and Higher Education Act of 1965—which ushered in structural changes such as student aid, desegregation, and maternity leave—were responses to national and global events that led to the democratizing of education and debates about the relationship between higher education and society. Then, as now, education leaders were challenged to meet the needs of an increasingly diverse student body and workforce.

Programs like ADVANCE represent a new generation of

individuals—drive social disparities and thus should be the object of change.

In short, DEI programs like ADVANCE seek to transform how academic science operates. To understand how, we focus here on a narrow question: how NSF’s deliberate structuring of the program shaped the scientific work and institutional efficacy of those involved. By tracking the full career trajectories and scholarly output of more than 1,500 ADVANCE team members at over 200 institutions—before, during, and after their engagement in the program—our analyses found that, in addition to targeting gender equity, the program also promoted scientific practices widely seen as essential to scientific progress.

advancing knowledge production

While ADVANCE focused on transforming institutions, the program also generated interdisciplinary knowledge about how institutional change happens. As participants tested new equity strategies, they documented their experiences—both successes and setbacks—thus contributing to a growing body of scholarship on gender, science, and organizational change in academia.

Our analysis of over 800 publications linked to ADVANCE awards from 2001 to 2019, compared with data from Microsoft Academic Graph—a large, scientific bibliographic database—showed that ADVANCE-related publications were significantly more interdisciplinary than comparable scientific output. In this work, published with Alexander J. Gates in *Social Science Quarterly* in 2024, we showed that universities increasingly recognize that tackling the most pressing challenges—such as climate change, public health, and technological innovation—requires interdisciplinary collaboration, yet often struggle to nurture it. But ADVANCE delivered, spurring work that spanned fields like organizational science, psychology, sociology, and STEM disciplines. This was no accident. ADVANCE required teams

For institutions like universities, the loss of DEI initiatives is not just ideological—it is structural and practical.

institutional reforms that position universities to meet the changing demands of research and education.

In line with the NSF’s mandate to ensure a robust national STEM workforce, the 2001 launch of the ADVANCE program marked a shift in the NSF’s approach to advancing equity among professors, from supporting individual women in STEM (through, for example, targeted grants) to addressing the cultures and institutional structures that perpetuate gender inequality. ADVANCE teams helped universities establish clear hiring and promotion criteria and mentoring programs, make transparent ways to access internal resources, and address unequal workloads and work-family conflicts. This approach is aligned with a sociological understanding of inequality, where structures—not

to draw on social science expertise and fostered collaboration through national meetings and dissemination networks. The result was a knowledge community that moved beyond narrow disciplinary boundaries.

This was also reflected in the reference lists in these ADVANCE publications, which were notably merit- rather than status-driven. Usually, science is driven by what sociologists call “the Matthew effect”: high-status scientists are often cited more, not because their work is better, but because it’s more visible. That’s a problem: when science is driven by status and not the content of the ideas, it leads to worse scientific output. Not only did ADVANCE promote interdisciplinary collaborations, it successfully cultivated a knowledge field where intellectual diversity deepened scientific inquiry, moving beyond status-driven metrics to advance research.

And ADVANCE awardees did all of this—carried out the time-intensive work to propose and implement structural change in their institutions *and* published interdisciplinary work—without sacrificing their core scientific output. Research-active ADVANCE faculty published *more* in their own core areas of research in the four years following their awards than did colleagues at similar stages in their careers (see Gates and colleagues’ 2025 *Socius* paper).

This finding was surprising yet revealing. We know that when faculty spend time on projects outside of their core academic work, it reduces the time spent on their own research. If faculty efforts toward equity in science hinders their scholarly productivity, it risks reinforcing the very inequalities they were aiming to combat. Instead, the way NSF designed ADVANCE allowed for faculty to promote gender equity in their institutions while also enhancing their own core scientific work.

responding to crises

Some societal changes emerge gradually—like diversifying student populations or responding to climate change—while others arrive abruptly, demanding swift institutional responses. The COVID-19 pandemic was one such crisis.

Our interviews with over 50 ADVANCE team members before and after the onset of the pandemic indicated that ADVANCE’s networks and infrastructure proved vital during this period of intense uncertainty. The national program had established networks to enable knowledge sharing across institutions, while programs within universities had established trust with faculty and top-level administrators, collected timely faculty data, and cultivated cross-campus relationships. As the pandemic disrupted university life, ADVANCE teams were ready. They provided campus leadership with real-time insights into faculty

needs, helping shape institutional responses—things like designing COVID impact statements for faculty evaluations, pausing tenure clocks, and providing resources for online teaching—and then sharing response strategies across institutions.

As one interviewee told us: “We were well-established and viewed as very credible in terms of... faculty trusting us with information. The leadership was listening to us, and we were trusted to present things confidentially. ‘This is what we’re hearing from faculty; we need this now.’”

In short, ADVANCE didn’t just help universities promote equity—it helped them weather global crisis. This DEI program’s embedded infrastructure became an institutional asset during one of higher education’s most turbulent times.

steering institutional change

Large institutions like universities need dedicated people and groups working deliberately and knowledgeably to ensure they adapt in ways that help fulfill their core public missions. The challenge is not whether to change, but how to steer change so that institutions remain capable of advancing knowledge, educating all students, and contributing to the broader public good. ADVANCE is one such initiative—an example of how deliberate, long-term efforts can build the internal capacity universities need to meet their public missions. Successful initiatives like this are difficult and time consuming to build, yet dismantling them is easy—just eliminate funding, fire staff, and disband programs.

When we shut down DEI initiatives, we are not simply rolling back progress toward more effective institutions; we are also dismantling the robust networks, knowledge, and infrastructure that allow institutions to adapt to new challenges. The loss is not just ideological—it is structural and practical. Rebuilding is possible, but it will take years. In the meantime, institutions will be less resilient and less prepared to help shape the future we all depend on.

Jessica R. Gold is an Associate Research Scientist in the Department of Sociology and Anthropology at Northeastern University. She studies gender and racial inequality in education, occupations, and organizations. **Laura K. Nelson** is in the Department of Sociology and directs the Centre for Computational Social Science at the University of British Columbia. She studies institutions, social movements, and computational methods. **Kathrin Zippel** is in the Institute of Sociology at Freie Universität Berlin. She is the author of *Women in Global Science: Advancing Academic Careers through International Collaboration*.