

Racism as a Public Health Crisis



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At a White House press briefing in April 2020, Dr. Anthony Fauci, director of the National Institute of Allergy and Infectious Diseases, talked about the fact that a disproportionate number of Black people in the United States were dying of COVID-19. This fact has remained true as the pandemic has continued, and it is a trend that applies to all people of color. Though the differences vary by degrees, people of Native American, Asian, Pacific Islander, and Latino ancestry have all suffered greater rates of mortality than white people during the current pandemic.

In his comments, Dr. Fauci noted that sometimes a public crisis highlights a serious, underlying problem in a society. In this case, he pointed out that racial inequalities in health and health care are not new, especially disparities between Black and white people. “Health disparities have always existed for the African-American community,” Fauci explained, “but the crisis is shining a bright light on how unacceptable that is.”

While that light was shining on health-related inequities, protests then spread across the country following the killing of George Floyd by Minneapolis police officers on May 25. Tens of thousands of activists in big and small cities from coast to coast called on public officials everywhere to confront systemic racism. With national attention focused on unequal health during a pandemic and racism, over 60 U.S. city and county governments — in states ranging from Texas, California, and Ohio to Tennessee, Georgia, and Washington — issued declarations that racism is a public health crisis. Wisconsin issued a statewide declaration on June 4, 2020.

By July 2020, state legislatures in California, Michigan, Minnesota, and Ohio were considering their own statewide declarations. At the federal level, similar resolutions were introduced in both the U.S. Senate and the House of Representatives.

Inequalities in Health Care

Major national health researchers have been documenting racial health inequities for years. In fact, because of the inequities, Milwaukee County, Wisconsin, made the first declaration of racism as a public-health emergency in May 2019, followed by the city of Milwaukee in July 2019. Other cities including Kansas City, Missouri, and Pittsburgh, Pennsylvania, soon followed with declarations of their own.

Why is racism itself considered a public-health emergency? Disparities in health quality between white people in general and people of color in general exist, but the disparities facing Black Americans are the most severe.

Overall, when compared to other ethnic or racial groups, African Americans have higher rates of long-term conditions, like diabetes, high blood pressure, and heart disease. These are the kinds of “underlying conditions” that have contributed to Black people getting more seriously ill and dying

from COVID-19 at a higher rate than white people. Extensive, widely publicized research has also exposed the fact that Black women — regardless of their level of wealth, education, or health insurance — are far more likely to suffer fatal complications of pregnancy than white women.

Chronic stress is widely known to harm people’s overall health, but psychologists and public-health researchers have documented that exposure to pervasive racial discrimination, as well as the intense coping it demands, is an added daily stress on Black people in our society. The experience of discrimination and racism therefore can contribute to certain brain diseases, speed up the aging process, and harm vascular and kidney functions for Black people and people of color.

Evidence also shows that the experiences of Black people and other people of color with health-care providers are often shaped by those providers’ implicit bias (negative stereotypes and false beliefs). Finally, African Americans, Hispanic Americans, and Native Americans consistently have lower rates of health insurance coverage than white Americans.

A 2013 study for the National Center for Biotechnology Information notes that low rates of insurance can account for why African-American children experience a higher risk of hospitalization and death from asthma than do non-Hispanic white children each year. Parents without insurance or who have non-private insurance cannot afford to buy prescription medications to treat their children’s asthma. They are also more likely to rely on emergency-room care for their children, rather than seeing primary care physicians or specialists.

Declarations and Resolutions

In response to the inequities in health care, local governments and the state of Wisconsin began issuing *declarations* or *resolutions* that racism is a public health issue. A declaration or resolution is an official action but is not the same thing as a law. Take a look at the table below to compare and contrast these different types of policy.

Keep in mind that all of these different kinds of policies can come from any level of government (city, county, state, or national).

	Which branch of government does it come from?	What is it?	What about enforcement and/or funding?
Declaration	Issued by a top official in the executive branch (e.g., a mayor or the president); can be called an <i>executive order</i> or <i>proclamation</i>	Official statement that expresses the opinion or intentions of a governmental body	May commit to seek funding for action steps and may generally direct government offices to coordinate with each other
Resolution	Voted on by a legislature (e.g., a city council, a county commission, a state assembly, or the U.S. Congress)		
Laws and ordinances	Passed by a legislature	Official policy that is required; binding rules that people have to follow	Usually includes a plan for how it will be enforced and funded (e.g., through taxes or allocation of existing funds)
Regulations	Issued by an executive branch official or agency		

Examples

Read each excerpt and note similarities and differences between them.

An excerpt from the resolution of the Common Council of the City of Milwaukee, Wisconsin (passed July 30, 2019)

Title: Substitute resolution committing the City of Milwaukee to take actions toward achieving racial equity and transforming the systems and institutions of racism that impact the health and well-being of the community

Whereas, Milwaukee is considered one of the most racially-segregated cities in the United States; and

...

Whereas, The racial segregation in Milwaukee results in wide health outcome disparities among its different racial populations; . . . now, therefore, be it

Resolved, By the Common Council of the City of Milwaukee, that the City asserts that racism is a public health crisis affecting the entire society and supports all efforts to address public health disparities due to racial inequities throughout the City, and be it . . .

Further Resolved, That the City . . . commits to take actions toward achieving racial equity, including, but not limited to, implementing strategic practices to address racism in the following areas:

...

4. Policy and Legislative Change

- a. Advocate for and draft relevant policies that improve health outcomes in communities of color . . .
- b. Incorporate goals and language about health equity and the social and economic conditions necessary for health into the City's strategic goals and financial plans.
- c. Create and champion state and federal legislative agenda that focuses on impacting social determinants of health and undertake direct or indirect advocacy in decision making processes.
- d. Evaluate all legislation by the Common Council for impact on health equity goals.

An excerpt from the executive order by Mayor Martin Walsh of Boston, Massachusetts (issued June 12, 2020)

An Executive Order Declaring Racism an Emergency and Public Health Crisis in the City of Boston

WHEREAS; racism is [a] threat to public health and safety, and is a paramount social determinant of health, shaping access to the resources that create opportunities for health, including public safety, housing, education and employment, and is a persistent barrier to health equity for all Bostonians; . . .

...

I, Martin J. Walsh, Mayor of Boston, hereby declare that racism constitutes an emergency and public health crisis in the City of Boston.

In recognition of this fact, I hereby order the Mayor's Office of Health & Human Services to work in partnership with the Boston Public Health Commission and all City departments to undertake the following . . . key strategies to combat racism as a public health crisis and resulting health inequities:

. . . . Conduct . . . analysis using all available data to understand the complexity of the interconnectedness of societal, environmental and behavioral factors that contribute to the impact of racism on access to those resources that promote good health including good jobs, . . . healthy and affordable food and housing, equitable transportation options, and excellent public education.

6. Focus on access to prevention and treatment that is culturally and linguistically competent. . . .

...

I hereby order every City cabinet, department, agency, and office to take all necessary steps to implement this Executive Order, including through the allocation of funding and other resources in a manner consistent with applicable law.

Declarations and resolutions usually have two parts. The first part is an introductory section often called the *preamble*. This section includes a number of statements that typically begin “Whereas. . .” These statements provide important facts and background information about the issue at hand.

The second section is the *operative* part and includes a statement or statements that each begin with something like “Therefore, be it resolved. . .” or just “Resolved” These statements are the commitments to actions that the governmental body believes should be taken.

Writing & Discussion

1. What is the purpose of these city, county, and statewide declarations and resolutions of racism as a public-health crisis or emergency?
2. Look at the Milwaukee resolution and the Boston executive order. Do you think these actions can be effective in addressing the problems described in the reading? Why or why not?

Activity: Handling the Crisis of Racism and Public Health

Read the following four policies that could be responses to the public-health crisis caused by racism. Alone or with a partner, rank them in terms of which you think would be most effective in addressing the problem, with 1 being the most effective, and 4 being the least effective.

Rank	Policy
	Adopting a national policy of universal health care, frequently referred to in the U.S. as “Medicare for All.”
	Taking money budgeted for a city’s police force and spending it instead on programs to address racism and health inequities.
	Passing a law that requires employers to provide workers with paid sick leave.
	Requiring all hospitals and health care centers that receive state funding to implement strategies to recruit and hire more doctors, nurses, and other health care providers who are people of color.

Think of another policy that you think would help to address the problem of health inequities as a result of racism. Then rank it among the policy options mentioned above in terms of how effective you think it would be.”

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