A RESOLUTION DECLARING RACISM A PUBLIC HEALTH CRISIS (S. Res. 172/H.R. 344)

BACKGROUND

- As the Centers for Disease Control and Prevention has recognized, racism is a threat to public health. Centuries of racism in the U.S. have created deep inequities in housing, income, healthcare, education, public safety, transportation, food access, and other social determinants of health.
- These factors are interrelated and have a profound negative impact on the long-term physical and mental health of millions of people of color. For example, in the U.S.:
  - Infant and Maternal Mortality: The infant mortality rate is 10.8 per 1,000 Black births, compared to 4.6 for white births. Moreover, Black women are more than 3x as likely to die from pregnancy-related causes than white women—in some cities, they have maternal death rates up to 12x higher than white women—and American Indian and Alaska Native women are 2.3x as likely as white women to die from pregnancy-related causes.
  - Chronic Health Conditions: Between 2017 and 2018, 14.7% of Native American, 12.5% of Latinx and 11.7% of Black adults were diagnosed with diabetes, as compared to 7.5% of white adults.
  - Pay Gap: On average, Latinas are paid just 55 cents, Native American women 60 cents, Black women 63 cents, and Asian American and Pacific Islander women from 52-85 cents per every dollar earned by a while non-Hispanic male for the same work.
  - Food Insecurity: Black (21.2%) and Latinx (16.2%) households are disproportionately impacted by food insecurity.
  - Police Violence: Black men are about 2.5x more likely, Native American men are between 1.2 and 1.7x more likely, and Latinos are between 1.2 and 1.3 times more likely to be killed by police than are white men. Similarly, Black women are about 1.4x more likely and Native American women are 1.1 to 2.1x more likely to be killed.
  - Housing: 55% of Black and 53.5% of Latinx households spend more than 30% of their household income on housing, as compared to 42.6% of white households.
  - Hate Crimes: Over 3,795 incidents of violence and harassment have been reported to Stop AAPI Hate between March 19, 2020 and February 28, 2021, and Asian women reported 2.3 times more incidents than men; 1 in 5 Asian Americans who have experience racism display racial trauma.
- Addressing racism and racial inequities across these myriad systems requires a comprehensive and coordinated public health response.
WHAT THE RESOLUTION DOES

- Expresses support for the resolutions that have been drafted, introduced, and adopted by cities and localities across the United States declaring racism a public health crisis;
- Declares racism a public health crisis in the United States;
- Commits to—
  - Establishing a nationwide strategy to address health disparities and inequity across all sectors in society;
  - Dismantling systemic practices and policies that perpetuate racism;
  - Advancing reforms to address years of policies that have led to poor health outcomes for communities of color; and
  - Promoting efforts to address the social determinants of health—especially for Black, Latinx and Native American people in the United States, and other people of color.

DECLARING RACISM A PUBLIC HEALTH CRISIS ADVANCES EQUITY AND EFFECTIVE POLICY

By declaring racism a public health crisis, Congress would take an **important first step** toward greater racial equity and more effective policy that:

- Encourages concrete action to address health disparities and inequity across all sectors in society.
- Recognizes racism’s impact on the broad array of social determinants of health that have contributed to negative health outcomes for people of color, and
- Creates a framework and commitment to advance policy solutions that will enhance coordination across sectors, improve resource allocation, invest in prevention, and create opportunity for all.

Please co-sponsor S. Res. 172 and H.R. 344!