RESOLUTION #20-270
July 1, 2020

It is hereby resolved by the Public Health - Dayton & Montgomery County Board of Health to declare racism and discrimination a public health crisis as set forth in the resolution.

WHEREAS, the mission of Public Health – Dayton & Montgomery County (Public Health) is to improve the quality of life in our community by achieving the goals of public health: prevention, promotion and protection; and

WHEREAS, the vision of Public Health is that Montgomery County is a healthy, safe and thriving community; and

WHEREAS, a guiding principal of Public Health is that we are committed to health equity;

WHEREAS, the Centers for Disease Control and Prevention (CDC) states that public health is the science of protecting and improving the health of people, entire populations and communities. Public health work is achieved by promoting healthy lifestyles, researching disease and injury prevention and detecting, preventing and responding to infectious diseases; and

WHEREAS, the CDC further states that public health professionals try to prevent problems from happening or recurring through implementing educational programs, recommending policies, administering services, and limiting health disparities through the promotion of healthcare equity, quality and accessibility; and

WHEREAS, many of the diseases and conditions that contribute to health disparities are preventable and are due to modifiable factors associated with clinical care, social, economic and physical environments, and health behaviors. These modifiable behaviors are social determinants of health such as access to care, education, employment, housing and transportation. Key drivers of health inequities include not only racism but also discrimination, poverty, adverse childhood experiences, trauma, violence and toxic stress; and

WHEREAS, the American Medical Association states that racism contributes to health inequities in the United States; and

WHEREAS, the American Public Health Association (APHA) has expressed that racism is a driving force of the social determinants of health due to the resulting inequalities in a number of matters, including housing, education, and employment; and

WHEREAS, the APHA clarifies that racism is a social system with multiple dimensions: individual racism is internalized or interpersonal; systemic racism is institutional or structural and is a system of structuring opportunity and assigning value based on the social interpretation of how one looks. This system unfairly disadvantages specific individuals and communities, while unfairly giving advantages to other individuals and communities; and
WHEREAS, the Health Policy Institute of Ohio (HPIO) explains that negative repercussions of historical racism, including but not limited to discriminatory lending practices of the twentieth century known as “redlining,” impact current outcomes regarding access to nutritious food, economic security, educational achievement, and infant mortality; and

WHEREAS, the American Anthropological Association asserts that genetic analyses show race to be a social construct not rooted in meaningful biological difference; and

WHEREAS, the American Psychological Association says that, because of poverty and discrimination, racial minority children are more likely to experience traumatic events than White children, and that childhood trauma has negative impacts on academic, behavioral, and physical health outcomes; and

WHEREAS, the National Association of County & City Health Officials (NACCHO) supports the incorporation and adoption of principles of social justice into everyday public health practice to eliminate the root causes of health inequities posing serious consequences and exacting great social costs that marginalize, exploit and exclude whole classes of people; and

WHEREAS, the World Health Organization’s Commission on the Social Determinants of Health affirms that social justice is a matter of life and death. It affects the way people live, their consequent chance of illness, and their risk of premature death; and

WHEREAS, NACCHO states that health inequities pose serious consequences and exact great social costs that marginalize, exploit and exclude whole classes of people, limiting their ability to gain access to the resources they need, making them less likely to achieve their full human potential; and

WHEREAS, Montgomery County’s White population enjoys a longer lifespan, has more economic stability, experiences less burden of preventable disease and violence, and benefits from better access to healthcare; and

WHEREAS, Montgomery County’s Black, Asian, Native American and other minority populations, individuals of Hispanic and other ethnicities and LGBTQ individuals have less opportunity to be healthy than other populations; and

WHEREAS, Montgomery County’s minority and low-income communities and marginalized populations suffer years of productive life lost and excess burden of disease and death attributable to heart disease, cancer, diabetes, HIV/AIDS, STDs, infant mortality, and violence; and

WHEREAS, statistics compiled by CDC show a national disparity between Black and White infant mortality rates, and the State of Ohio has one of the highest Black infant mortality rates;

WHEREAS, data collected by the Ohio Department of Health (ODH) reveal that infant mortality is two and a half times greater for Black women in Ohio than White women and that Black women are significantly more likely to experience severe maternal morbidity, which includes unexpected outcomes of pregnancy, labor, or delivery that result in significant short- or long-term consequences to a woman’s health; and
WHEREAS, ODH data indicate that Black Ohioans have higher mortality rates for heart disease, stroke, diabetes, and cancer compared to other racial groups; and

WHEREAS, the Health Policy Institute of Ohio (HPIO) reports that life expectancy for Black Ohioans is almost four years below the life expectancy for Ohioans as a whole; and

WHEREAS, the American Public Health Association (APHA) has identified law enforcement violence as a public health issue that disproportionately affects minority populations and marginalized groups, impacting both physical and mental health outcomes; and

WHEREAS, the Association of State and Territorial Health Officials (ASTHO) states that the effects of racism, high prevalence of health disparities, and systemic oppression that have deeply affected Black and other minority communities are issues of great importance to our nation’s health officers; and

WHEREAS, ASTHO asserts that it is imperative that stakeholders from various perspectives and political affiliations reflect and reaffirm our collective commitment to policies that work against racism, racial bias, eliminate health disparities, and promote efforts that offer empathy, compassion, and healing to our Black and other minority communities; and

WHEREAS, Public Health has adopted a Health Equity in All Policies approach to improve population health and will examine our policies, programs and services through an “equity lens” and challenge our community stakeholders to do the same. Applying an equity lens will be an integral part of our organizational culture, including the implementation of our Community Health Improvement Plan, the development of our next agency Strategic Plan, and the advancement of our Policy and Advocacy Agenda; and

WHEREAS, Public Health serves as the chief health strategy organization in Montgomery County to promote population health improvement and health equity; and

WHEREAS, Public Health is charged with engaging stakeholders in population health improvement planning to reduce the leading causes of preventable disease and premature death, reaching out to underserved populations and promoting health equity; and

WHEREAS, the public health challenges facing Montgomery County underscore the urgent need for all stakeholders to address Social Determinants of Health to reduce health inequities and disparities in health outcomes; and

WHEREAS, Public Health recognizes that racism and discrimination are a public health crisis that affects all members of our society both on a local level and nationwide and deserves action from all levels of government and civil society.

NOW, BE IT THEREFORE RESOLVED, that the Board of Health of Public Health - Dayton & Montgomery County will:

1. Assert that racism and discrimination are a public health crisis affecting our entire society/community;
2. Adopt internal policies and procedures to ensure racial equity and nondiscrimination are core elements of Public Health;

3. Enhance diversity and inclusion efforts and incorporate antiracism and nondiscrimination principles across its workforce and in leadership positions;

4. Incorporate inclusion and equity into organizational practice, offer educational trainings/activities to expand employees’ understanding of how racism and discrimination affect individuals, the health of marginalized populations, and provide tools to assist employees to engage actively and authentically with minority communities and other marginalized populations;

5. Advocate for policies that improve health in minority communities, and support local, state, and federal initiatives that advance social justice, while also encouraging individual employee advocacy to dismantle systemic racism and combat discrimination; and

6. Work with our local public health system partners to confront racism and discrimination through collective impact; and encourage other local, state, and national entities to recognize racism and discrimination as a public health crisis.

Moved by Dr. Rhodes

Seconded by Mr. Orr

Roll Call: Dr. Block, absent; Mr. Downing, yea; Ms. Meadows, yea; Dr. Orlowski; yea; Mr. Orr, yea; Dr. Rhodes, yea; Ms. Rodriguez, yea; Mr. Sims, yea. Motion carried.

I hereby certify that this is a true and exact copy of the Resolution passed by the Board of Health at its regularly scheduled meeting held

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Date

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Health Commissioner