Racism is a Public Health Crisis in Douglas County, Kansas

The Lawrence-Douglas County Public Health Board has listened, reviewed the data and heard the case for urgency. We make the following statement and directive to action.

Why address racism?
Racism — unequal treatment based on who we are, not what we do — is a harsh reality for many in our community. In particular, longstanding and systemic maltreatment of Black people within our nation, state and communities have negatively impacted their housing, educational attainment, income, incarceration rates, and health status. All are stark reminders that the system was designed to provide advantage to some, while robbing others of fair opportunities based on their identity. We believe that this is inherently wrong.

Why act now?
Racism is not a new crisis, and we did not just become aware of it. Racism has been identified as a root cause of health disparities locally and nationally. It is structurally reinforced in education and employment practices; which negatively affects the generational accumulation of wealth and related opportunities for health and wellbeing. A bright light has been shown on longstanding unequal treatment by the recent injustices resulting in the murders of Black people, and their disproportionate deaths in this time of COVID-19.

We can see clearly that the costs of inaction are far too great to allow systemic racism to continue unchecked. Nationally and locally, the public’s response suggests a will to do something; to work together to assure health justice and wellbeing for all of us.

Our local situation — What does the unequal burden look like in Douglas County?
As identified in the Douglas County Health Equity Report, compared to the Douglas County population it is:

• 4.5 times more likely for young Black children to live in poverty
• 2 times more likely for Black mothers — regardless of educational attainment, socioeconomic status or access to care to have babies born at a low birth weight
• 3 times more likely for Black residents to have a hospitalization due to asthma
• 4.7 times more likely that an African American person is incarcerated than a white person.
**How can public health address racism?**

Racism is a public health issue because health disparities are preventable. Unfair treatment of racial and ethnic minorities leads to restricted opportunities and associated stress that negatively affect health outcomes. The public health charge is to support collaborative action that changes policies, programs, and practices to reverse systemic racism and its effects on health and wellbeing.

Lawrence-Douglas County Public Health applies a public health lens and role to serve our community. The core functions of public health include:

- Assessment to ensure data are available to shine the light on unequal health outcomes and the harmful exposures and unequal opportunities that produce them;
- Policy development to reverse the effects of systemic racism and to improve health for all;
- Assurance that all people have equal opportunities, protection from harmful exposures, and access to needed health and human services.

*A way forward together, toward racial health equity:*

In 2018, LDCPH’s Health Equity Report exposed patterns of health inequity, particularly among racial/ethnic minorities, in our community. Updated data, along with local calls to reckoning, make clear that it is time to act together to promote health equity.

**Therefore, the Board of Health directs** Lawrence-Douglas County Public Health to work with the Community Health Plan Steering Committee to include a fifth issue area focused on Health Equity. We will ask the Steering Committee to convene community-based organizations and engage racial and ethnic minorities and allies in advancing Health Equity and Justice. This additional focus area will also strengthen the other four issue areas in the Community Health Plan: Affordable and Safe Housing, Behavioral Health, Anti-Poverty, and Access to Healthy Foods & the Built Environment.

This Health Equity issue area will be led by community-based organizations and engaged racial and ethnic minority community members. Through community-driven dialogue and strategic planning, we will advance listening, learning and action toward four specific aims:

- Assure equal access to services and opportunities — through advocacy for universal access to quality health services and equal opportunities to be healthy;
- Reduce harmful exposures — to stress, violence, and unhealthy environments;
- Strengthen capabilities and support — for caring for ourselves and our families, and for being an ally for others;
- End discrimination – by standing together in solidarity against unfair treatment and unequal access to opportunities in education, employment, housing, and access to supports for health and wellbeing.
We are all called to end racism and its harm to public health and wellbeing, and we publicly claim that as this community’s public health responsibility.

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