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Introduced by Senator Pan

June 25, 2020

Senate Concurrent Resolution No. 92—Relative to racism as a public health crisis.

LEGISLATIVE COUNSEL'S DIGEST

SCR 92, as introduced, Pan. Racism as a public health crisis. This measure would recognize racism as a threat to public health. Fiscal committee: yes.

- WHEREAS, Racism is the systemic subordination of members of targeted racial groups who have historically have had relatively little social power in the United States by members of the racial group who have more social power. Racism in the United States is informed by over 400 years of Black slavery, European colonialism, and American neo-imperialism; and WHEREAS, Racism, as a negative social system, is supported
- WHEREAS, Racism, as a negative social system, is supported by the actions of individuals, cultural norms and values, institutional structures, practices of society, and laws and regulations imposed by government; and
 - WHEREAS, Through the "Three-Fifths Compromise," racism was embedded as a founding principle in the United States Constitution an ugly stain that continues to haunt our nation and that we must confront and actively dismantle; and
- WHEREAS, Public health is the science of protecting and improving the health of people and their communities by promoting healthy lifestyles, researching disease and injury prevention, and
- 18 detecting, preventing, and responding to infectious diseases; and

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WHEREAS, Many government policies, institutional practices, and individual actions continue to be imbued, both consciously and unconsciously, with racist assumptions and practices that have created unhealthy physical and social conditions for Black, Indigenous, and people of color (BIPOC) and thereby prevent BIPOC communities from achieving good public health; and

WHEREAS, For instance, the legacy of slavery, Jim Crow, and discriminatory housing policies against Black people have restricted the ability of Black families to build generational wealth, in comparison to white families, leading to income inequality. Income inequality and poverty have been well researched to be negative social determinants of health. Children who grow up in poverty, and especially those who are BIPOC, are more likely to be exposed to risk factors for obesity, elevated blood lead levels, and experience more adverse childhood experiences (ACEs); and

WHEREAS, Racism in government policies, institutional practices, and income inequality also results in BIPOC communities being more likely to live near polluters, breathe polluted air, and be impacted disproportionately by the effects of climate change. Breathing in dangerous substances in the air has been linked to asthma, other chronic respiratory illnesses, and some cancers. In California, Blacks and American Indians have significantly higher prevalence of asthma and are more likely to experience an avoidable hospitalization due to asthma; and

WHEREAS, BIPOC communities experience racial disparities in accessing health care and receiving quality care. For example, Black women are three to four times more likely to die from pregnancy-related causes than White women. Research indicates these disparities persist in spite of income differences and can often be attributed to Black women receiving discriminatory care, such as health care providers dismissing symptoms raised by Black women or racist assumptions about pain thresholds experienced by Black people; and

WHEREAS, Black transwomen suffer from employment, housing, and educational discrimination and police brutality that result in the most acute health disparities. Government policies, such as recent federal actions that encourage homeless shelters, social services, educational institutions, and health care providers to discriminate against transgender people and overlook the

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deleterious impacts of racism, actively prevent Black transwomen from accessing services critical to achieving optimal health; and

WHEREAS, On an individual physiological level, studies show that chronic stress from individual and systemic acts of racism and discrimination trigger high blood pressure, heart disease, immunodeficiency, and result in accelerated aging; and

WHEREAS, The COVID-19 pandemic, the ensuing economic crisis, and recent protests against institutional violence committed against Black communities again highlight the racial injustices and health disparities that have long threatened BIPOC communities; and

WHEREAS, In California, Blacks and Latinos are more likely to have existing health conditions that makes them more susceptible to contracting COVID-19, experience more severe symptoms, and suffer from higher mortality rates. Some studies indicate that Black and Latino seniors, regardless of geography or income, are more likely to reside in skilled nursing facilities that have suffered from a COVID-19 outbreak; and

WHEREAS, BIPOC tend to work in essential jobs that may lead to a higher likelihood of being exposed to COVID-19 or in jobs that have an inability to work remotely and, therefore, are more severely impacted by the economic crisis; and

WHEREAS, Racism results in the underinvestment of social, health, and educational services in BIPOC communities and an overinvestment of disproportionate and inappropriate policing by law enforcement; and.

WHEREAS, Racism threatens to endanger the health of individuals, the community, and public health; and

WHEREAS, Accordingly, a growing list of cities and counties in California, and across the country, have taken the first steps in acknowledging the long-standing impacts of systemic racism by naming racism as a public health crisis; and

Resolved by the Senate of the State of California, the Assembly thereof concurring, That the Legislature declares that racism is a public health crisis; and be it further

Resolved, That the Legislature encourages residents of California to join in raising awareness and heightening public knowledge of the crisis and the long-standing impacts of systemic racism; and be it further

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Resolved, That the Legislature intends to, and urges the Governor
to, approach laws and regulations with an antiracist, Health-in-All
policy equity-driven focus that interrogates whether policies play
a role in upholding or dismantling racist systems and to secure
adequate resources to address the crisis; and be it further
Resolved, That the Secretary of the Senate transmit copies of
this resolution to the author for appropriate distribution.