

**Racism As a Public Health Issue Working Group
Recommendations to the New Haven Board of Alders
December 23, 2020**

MEMBERS

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INTRODUCTION AND BACKGROUND

On July 6, 2020, the New Haven Board of Alders passed a resolution declaring racism a public health issue. The New Haven Board of Alders simultaneously initiated a Working Group on the same topic. The Racism as a Public Health Issue Working Group has been charged with developing a set of recommendations to submit to the New Haven Board of Alders. The Working Group was charged with considering the following:

- How can New Haven adopt inclusive and anti-racist policies, offer internal training, and implement policies that improve health in minority communities including but not limited to working with the local health system to confront institutional and structural racism that indirectly affects minority communities — such as housing, education or economic policy?
- New Haven’s local government leadership and it’s publicly funded entities, and community partners across sectors — including health care, education, employment, housing, food, and criminal justice — should acknowledge racism as a public health crisis and dismantle racism and other forms of discrimination through a review of internal and external policies and procedures.

The Racism as a Public Health Issue Working Group has considered and expanded upon these concepts over the past three months. The process has included convening one public hearing on October 15, 2020 to gather ideas for recommendations from the public. The Working Group also convened a total of four meetings to discuss, draft, and finalize recommendations on September 9, December 8, December 15, and December 22. The Working Group has developed recommendations organized under eleven categories, detailed within this report.

Rationale for Declaring Racism a Public Health Issue

Black, Native American, Asian and Latino residents are more likely to experience poor health outcomes as a consequence of inequities in economic stability, education, physical environment, food, and access to health care. These inequities are, themselves, a result of racism. Indeed, multiple studies have linked racism to worse health outcomes.

Racism is a social system with multiple dimensions: individual racism that is interpersonal and/or internalized or systemic racism that is institutional or structural and is a system of structuring opportunity and assigning value based on the social interpretation of how one looks.

Race is a social construct with no biological basis. Racism and racial discrimination threaten human development because of the obstacles which they pose to the fulfillment to basic human rights to survival, security, development, and social participation.

Racism unfairly disadvantages specific individuals and communities, while unfairly giving advantages to other individuals and communities. Racism causes persistent discrimination and disparate outcomes in many areas of life, including housing, education, employment, and criminal justice.

Racism and segregation have exacerbated a health divide resulting in people of color in Connecticut bearing a disproportionate burden of illness and mortality including COVID-19 infection and death, heart disease, diabetes, and infant mortality.

The collective prosperity and wellbeing of New Haven depends upon equitable access to opportunity for every resident regardless of the color of their skin or the ethnic group with which they identify.

With these considerations for the impact of racism on health, it is imperative that the City of New Haven, including its municipal departments and the Board of Alders -- along with the community at large -- make greater strides toward eliminating racism and achieving health equity. The recommendations outlined in this report will support the City in achieving these goals.

RECOMMENDATIONS

1. Institutional Commitment

Revamp Affirmative Action Office

Given the enormity of the issues addressed through the Racism As a Public Health Issue Working Group, its tenure and tasks have been relatively brief. As such, the Working Group has just grazed the surface of fully addressing racism and health. We believe there should be a long-term, action-oriented commitment within City Hall to continue to address these issues.

Recommendations

- The Board of Alders rename and empower the Affirmative Action Commission to the Commission on Diversity, Equity, and Inclusion an fund no less than \$75,000 in start up funding to support the work of the commission.
- The Board of Alders and the City rename the Affirmative Action Director (officer) to the Director of Diversity, Equity, and Inclusion.
- The Board of Alders and city fully fund and hire an Affirmative Action Director (officer- recommended name Director of Diversity, Equity, and Inclusion), at a level to ensure that we are able to attract highly qualified candidates to oversee the present duties in addition to an updated mission to reflect the role addressing race, equity, diversity, and inclusion.
- The Commission should report annually on the state of racism as it relates to health and health equity in New Haven to the Health and Human Services Committee of the New Haven Board of Alders.
- In addition, all city commissions and working groups within the City of New Haven that pertain to the public health of citizens should include a lens of race, equity, and inclusion.
- The Board of Alders and City of New Haven should institute efforts to implement justice, equity, diversity and inclusion training for city staff.
- Activate and implement the mission of the Affirmative Action Office by employing multiple actions:

1. Change Director-level position title to "Director of Diversity, Equity, and Inclusion
2. Fund the Director position
3. Appropriately fund the Office with staff support.
4. Implement Affirmative Action plans that are required for City departments, as referenced in the City of New Haven Charter and state and federal laws.
5. Require metrics to report progress and impact toward implementing Affirmative Action plans;
6. Review plans annually and based on these metrics, and other community-level data, adapt plans for the coming year to improve equity
7. Update changes to charter language to reflect the progress toward Diversity, Equity, and Inclusion

1. COVID-19 Response

Data from New Haven indicates that communities of color are disproportionately affected by COVID-19. In a city where 33% of residents are Black/African American, 30% are Hispanic/Latinx, and 31% are white, cases of COVID-19 are disproportionately higher among people of color: 26% are Black/African American, 33% Hispanic/Latinx, and 14% white. As such, the City of New Haven should have increased focus on Black and Brown communities as we implement responses to the COVID-19 pandemic locally.

Recommendations

- The City of New Haven should collaborate across departments to implement COVID-19 testing of all New Haven Public Schools students and staff to support education of all children in New Haven.
- The City of New Haven should ensure that COVID-19 vaccination outreach, education, and distribution be prioritized in communities of color.

1. Health and Healthcare

Racism hurts the health of our communities by preventing some people the opportunity to attain their highest level of health - referred to as health equity. Racism is a driving force that negatively impacts social determinants of health and is a barrier to health equity. Social determinants of health are conditions in the environments in which people live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks. Healthy People 2020 organizes the social determinants of health around five key domains: (1) Economic Stability, (2) Education, (3) Health and Health Care, (4) Neighborhood and Built Environment, and (5) Social and Community Context. Every aspect of these determinants is impacted by racism.

It is important to note that the New Haven Health Department is pursuing Public Health Accreditation. Race, inclusion, and equity will be built into the Department's policies and procedures. A 'Health in All Policies' approach will also be incorporated to ensure the Department works toward creating a healthy community with equitable access to health and healthcare by fostering collaboration, connectedness, and addressing social determinants of health -- ultimately ensuring that health equity is infused across all sectors. Health in All Policies is a collaborative approach to improving the health of all people by incorporating health considerations into decision-making across sectors and policy areas. Health in All Policies, at its core, is an approach to addressing the social determinants of health that are the key drivers of health outcomes and health inequities. The Board of Health will assist in establishing new policies.

Recommendations

- Following the leadership of the New Haven Health Department, implement and institutionalize "Health in All Policies."
- The Board of Alders should assess Yale New Haven Hospital's Community Benefit requirements to ensure accountability, transparency, and alignment between its Community Health Needs Assessments, Community Health Improvement Plans, and allocation of community benefits dollars to ensure funds are strategically flowing into Black and Brown communities.
- The City of New Haven should follow the timeline for cases where a child has an elevated lead level as defined by City ordinance to ensure all children in New Haven can live in lead-safe housing.
- The Board of Alders and Mayor's Office should support legislation that surrounds the mission of racism as a public health issue at the state legislative session as part of the city's overall legislative agenda.

1. Mental Health

Mental Health issues are a strong byproduct of systemic racism and impact communities of color at much higher rates than other populations. Mental Health issues are often exacerbated by high exposure to Adverse Childhood Experiences, which have a cumulative (negative) effect on poor health outcomes and early death. A High "ACE" score is found in communities that are exposed to poverty, child abuse, substance abuse, or community violence. Traumatic experiences are the underlying factors to many of the high costs of healthcare and can cause severe and pervasive mental health disorders like depression, anxiety and Post Traumatic Stress; many of these mental health issues can have direct impact on school performance and success, child welfare involvement, employment and housing issues as well as arrests, incarceration and early death.

Recommendations

- The Board of Alders should support a plan to pilot the New Haven Community Crisis Team that responds or corresponds to mental health crises, substance use issues, and/or homelessness related issues (proposed by the Mayor's Office).
- The City of New Haven should collaborate with partners to advocate for and implement Intensive Care Coordination for children, families, and adults that addresses the physical, mental and social determinants of health.
- The City of New Haven should facilitate the creation of a universal screener for trauma for community providers to use with their clients.
- The City of New Haven should train all human service, police, and community response teams in trauma informed practices, and pledge to maintain policies and procedures that are sensitive to people who have had high levels of trauma exposure.
- The City of New Haven should collaborate with partners to address stigma in Black and Brown communities that are related to mental health services; create models of care that are responsive and reflective of the communities they serve.
- The City of New Haven should create a community health workforce that trains folks as mental health ambassadors and offers help in stress management and case management.

1. Economic Security

According to DataHaven's 2019 Demographic Characteristics of Households Below Economic Self-Sufficiency in Connecticut Report, New Haven has an income

inadequacy rate of 44 - 48 percent. Statewide, Latinx and Black households have the highest rate of income inadequacy at 47% and 39%, respectively. Income determines whether or not households can afford insurance, medications, and time off to attend doctor's appointments. In addition, stress concerning the ability to meet basic needs also correlates to negative health outcomes.

Recommendations

- The City of New Haven should continue supporting efforts to hold Yale University accountable for hiring and retaining New Haven residents, particularly residents from Black and Brown communities.
- The City of New Haven and its economic development partners should support development for Black and Brown businesses.
- At the state and federal levels, the City of New Haven should advocate for federal and state efforts to expand cash assistance under Temporary Assistance for Needy Families (TANF).
- Adopt permanent paid leave policies.
- At the state and federal levels, the City of New Haven should advocate to increase the minimum wage to \$25.31 per hour to support the housing wage calculated in the Affordable Housing Report.

1. Housing

The conditions and affordability of our homes and neighborhoods affect our ability to make healthy choices. Access to homes and neighborhoods with health-promoting conditions vary by a families' access to economic and social resources. The *Fair Housing Act of 1968*, put an end to redlining, an inherently racist practice that denied homeownership to African American families and others facing discrimination. However, the effects of racial segregation are still felt by Black and Hispanic/Latinx communities who live in isolated neighborhoods with substandard housing, higher incidences of poverty, and fewer resources for health promotion. Inadequate housing places Black and Brown communities at an increased risk of developing health issues including chronic diseases, injuries, and developmental delays in children. According to the US Census Bureau ACS 5-year estimate, 53.1% of New Haven households are cost-burdened, meaning 30% or more of their household income is spent on housing costs associated with owning or renting a home; therefore, restricting their economic power. In contrast, 36.3% of households statewide are considered cost-burdened. Equitable housing policies are essential for ensuring everyone has access to safe, secure, affordable housing in thriving, well-resourced neighborhoods.

Recommendations

- The City of New Haven should increase affordable housing by implementing the recommendations of the Affordable Housing Task Force (submitted January 2019).
- The City of New Haven should support statewide advocacy efforts to address segregation by exploring regionalization so that more affluent surrounding towns have their "fair share" of affordable housing.

1. Law Enforcement

The New Haven Police Department is in charge of enforcing the laws of the city. The residents, however, have long expressed concern over issues of police misconduct. Law enforcement commits to a role of service and care for community residents yet there is a

need for extended accountability. Although the fundamental principles of policing are service, the role continues to evolve. Physical and psychological violence that is structurally mediated by the system of law enforcement results in deaths, injuries, trauma, and stress that disproportionately affect marginalized populations. Among other factors, misuse of policies intended to protect law enforcement agencies has enabled limited accountability for these harms. In both a critical and pivotal time in the city and country, it is important that training of officers is administered in a way to best help preserve the health of the residents.

Recommendations

- The Board of Alders should require an external systematic review and accountability plan of department practices and policies for racial bias (hiring demographics, response times to complaints broken down by race, review of complaints of racial bias by civilians against officers). This should also include a review of racial breakdown of law enforcement activities (e.g. stops, arrests, charging – if this review is including prosecutors as part of law enforcement).
- The New Haven Police Department should advance data collection on racist incidents in order to provide a firm foundation for policies which protect victims and deter perpetrators.
- The New Haven Police Department should provide mandatory in-service training for police personnel, judges, lawyers, and prosecutors on the nature and significance of racism, their role in combating racism, and procedures to be followed.
- The New Haven Police Department should adopt workable and sufficiently broad legal definitions of racism and specific crimes of racism.
- The City of New Haven should advocate for the release of youth from confinement and support re-entry into schools and communities.
- Increase usage of police substations as a safe haven in conjunction with its respective community and police departments.

1. Food Insecurity

Across New Haven, 22% of the city's residents are food insecure – with not enough food or money to buy food – much higher than the Connecticut rate of 12% and national rates of 13%. The pandemic has inflated these numbers considerably. Food insecurity varies widely in New Haven, affecting low-income people of color at higher rates. According to DataHaven's 2018 Community Wellbeing Survey, food insecurity impacts 27% of adults in the city's lowest income neighborhoods - compared to 9% of residents in wealthier - and whiter - neighborhoods. These racial disparities in access to food manifest in consequent health issues. Hunger takes an enormous toll on health. Food-insecure residents in New Haven's low-income neighborhoods are more likely to report high blood pressure, diabetes, and being overweight or obese.

Recommendations

- The City of New Haven should collaborate across departments and with New Haven schools to guarantee healthy food for every student, three times a day, 365 days a year, with special attention to providing “gap” meals during times when children are out of school (school breaks and summer).
- With New Haven Public Schools, prioritize the expansion of school meals with special attention to serving suppers through the federal school meals programs.

- Support the New Haven Coordinated Food Assistance Network (CFAN) and ensure City Departments collaborate with partners to develop systems that allow for greater coordination among food assistance providers and enable sharing of data, resources, and costs.
- At the state and federal levels, the City of New Haven should advocate for a stronger social safety net, including stronger programs like SNAP, WIC, and the Commodity Supplemental Food Program that will alleviate the burden on the local emergency food system.

1. **Food Systems**

Food systems consist of five main components: production, processing, distribution, retail, and waste management (e.g., composting). Our current food systems (international, national, state, and local) are complex, and irrefutably intersect with other systems to perpetuate injustices that disproportionately harm communities of color, such as:

- Food apartheid and insecurity - both of which are correlated with excessive access to low-cost and low-nutrient foods (e.g., sugar-sweetened beverages) which are disproportionately marketed to Black and Hispanic/Latinx communities.
- Higher rates of diet-related negative health outcomes (e.g. obesity, hypertension).
- Inequitable access to land and land tenure for food production.
- Unfair wages and unsafe working conditions for food system workers.
- Disproportionate investment into food businesses owned by people of color.

An equitable food system should be rooted in community, social, economic, and environmental justice, and utilize an intersectional, human rights framework to increase access to healthy, affordable, and culturally-appropriate food. Furthermore, it should ensure that all community members, especially the most vulnerable, have the tools and resources to fully participate in all components of our food system, and benefit from the positive health, socioeconomic, and environmental outcomes. The recommendations below are first steps to minimize the inequities that BIPOC communities experience and develop the foundation for an equitable food system in New Haven.

Recommendations

- The City of New Haven should support local and state population-level sugar reduction policies that are rooted in equity and represent communities that disproportionately experience food injustice (e.g., food apartheid) and health inequity (e.g., higher rates of diet-related chronic disease).
- The Board of Alders should support an equitable and enabling policy environment for urban agriculture in New Haven; a crucial step in increasing food access and urban agricultural activities is to remove any express barriers that exist in the current zoning code and land-use policies.
- The Board of Alders should support the adoption of a municipal-level, values-based institutional food procurement policy that helps improve the availability of healthy and culturally-relevant foods from local, fair, sustainable, and ethical sources.

1. **Transportation**

New Haven's traffic and transportation systems are strongly influenced by practices that are a result of racist policies. Today, we are left with the vestiges of mid-century traffic design, based in these racist policies. Traffic design has largely facilitated getting people

quickly in and out of the city, without regard to those who live in the city's communities – to accommodate mostly white populations commuting in and out of New Haven for work from suburban areas. These traffic policies often exacerbate poor air quality. This is juxtaposed against the fact that transportation options are limited for low-income people and communities of color due to the racially driven wealth-gap in the country. A car-centered policy is an inherently racist policy as the costs associated with car ownership create a disparate impact on Black, Indigenous, and People of Color. Lack of transportation can have a significant impact on health and on the ability to make healthy lifestyle choices, such as regular physical activity, access to healthcare, access to steady, well-paying jobs, and ability to purchase healthy foods. Furthermore, transportation related deaths are disproportionately burdened by the poor and persons of color and is the leading cause of death for children. By focusing on increasing accessibility of “Active Transportation” - walking, biking, and taking the bus - we can create healthier, more affordable, and more equitable transportation options for all people in New Haven.

Recommendations

- The City of New Haven should support free Public Transportation for All, including free access to CT Transit buses.
- The City of New Haven should support the inclusion of residents and CTtransit riders in governance of their transit system.
- The City of New Haven should provide free bus passes to testify at City Hall and attend other meetings at City Hall.
- The City of New Haven should conduct annual reporting on motor vehicle, pedestrian, and bicycle crashes by geography, mode, age, and race. Implement interventions based upon analysis.
- The Board of Alders should support and pass the Safe Routes for All plan and is slated for adoption in mid-to-late 2021. Safe Routes for All is a health and anti-racist focused citywide Active Transportation Plan.

Acknowledgements:

Thank you to the partners who contributed to the writing of these recommendations.

- Kimberly Acosta, City of New Haven Food Policy Analyst
- Alice Forrester, CEO, Clifford Beers
- Marquita Taylor, Assistant Director of Health Equity Leadership Programs, CARE
- Genesis Vicente, REACH Project Manager, CARE
- REACH Steering Committee members
- City of New Haven Legislative Services