



Text File

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Resolution Recognizing Racism as a Public Health Crisis.
(Post Agenda and Public Hearing held 12/5/19)

WHEREAS, race is a social construct with no biological basis ~~socially constructed hierarchical categorization scheme with no biological basis that was created and is maintained to privilege those classified by their heritage, phenotype, linguistic traits, and other social markers as White;~~ and,

WHEREAS, racism is a social system with multiple dimensions: ~~individual racism is internalized or interpersonal; and 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, which unfairly disadvantages some individuals and communities, while unfairly advantaging other individuals and communities, and saps the strength of the whole society through the waste of human resources~~ , **individual, interpersonal, institutional and structural, and is the stratification of resources (including but not limited to public infrastructure, educational opportunities, first responder services, commercial contracts, individual job offers, healthcare, interpersonal social capital) across the hierarchical racial classification scheme such that Whites, as a collective, maintain more material, political and cultural resources than groups classified as people of color, particularly Black and Indigenous populations; and,**

WHEREAS, racism manifests in distinct ways across other social classifications (e.g. gender, class, (dis)ability, immigration status) it collectively reinforces the racial hierarchy which weakens the strength of the whole society through unrealized human resources and social strife; and,

WHEREAS, racism causes persistent racial discrimination in housing, education, employment and criminal justice; and an emerging body of research demonstrates that racism is a social determinant of health; and,

WHEREAS, more than 100 studies have linked racism to worse health outcomes; and,

WHEREAS, in Pittsburgh the highest excess death rates exist for African American at every stage in the life course and our infant mortality rate for infants of black women is dangerously high and,

WHEREAS, African-American identities are intersectional and LGBTQIA+ communities face some of the greatest disparities in terms of health, employment, housing, and safety; and,

WHEREAS, Pittsburgh must address persistent disparities in health outcomes, and the social, economic, educational and environmental inequities that contribute to them and,

WHEREAS, public health’s responsibilities to address racism include reshaping our discourse and agenda so that we all actively engage in racial justice work; and,

WHEREAS, while there is no epidemiologic definition of “crisis”, the health impact of racism clearly rises to the definition proposed by Galea: “The problem must affect large numbers of people, it must threaten health over the long-term, and it must require the adoption of largescale solutions”

NOW, THEREFORE, BE IT RESOLVED that Mayor and City Council acknowledge that racism and its intergenerational effects are a public health crisis in Pittsburgh and the United States and supports the following statements to advocate for equitable policies and inform our public discourse on racism in the City of Pittsburgh as Pittsburgh strives to be an “All-In” City.

1. Assert that racism is a public health crisis affecting our entire society.
2. Continue creating internal policy and procedures to ensure racial equity is a core element of the City of Pittsburgh and in collaboration with other relevant parties, communicate results of assessments, and determine appropriate intervals for reassessment.
3. Continue identifying specific activities to increase diversity and to incorporate antiracism principles across leadership, staffing and contracting.
4. Incorporate into organizational work plans educational efforts to address and dismantle racism, expand **the** understanding of racism, and how racism affects individual and population health, and provide tools to assist members of local government to engage actively and authentically with communities of color.
5. Advocate for relevant policies that improve health in communities of color, **including the “Black Mamas Matter” policy agenda**, and supports local, state, and federal initiatives that advance social justice, while also encouraging individual advocacy to dismantle systemic racism.
6. Work to build alliances and partnerships with other governmental agencies and organizations that are confronting racism **and those supporting and contributing to African American arts and culture**, and encourages other local, state and national entities to recognize racism as a public health threat.