

Health **Policy** Fact Sheet

Connections between racism and health



State and local policymakers

Ensuring Ohioans of color have a fair opportunity for good health

Why is action needed?

Ensuring that every Ohioan has a fair opportunity to achieve good health and well-being is a shared value in both the public and private sectors. However, Ohioans of color continue to face barriers to health where they live, work, learn, play and age. These barriers are tied to centuries of unjust historical and modern-day policies, practices and beliefs, whether intentional or unintentional, that are rooted in racism. Allowing these barriers to continue to exist will only result in a more economically unstable and unhealthy Ohio.

This fact sheet, the first of a series of three, outlines actions policymakers can take to support the health and well-being of Ohioans of color and move Ohio toward a more economically vibrant and healthier future. The remaining two fact sheets will provide information on how private sector partners, community groups and individuals can take action to advance equitable opportunities for Ohioans of color.

Why do Ohioans of color face barriers to health?

Unjust historical and modern-day policies and practices have led to a cascade of consequences that channel stress into communities of color and limit opportunities for good health. For example, decades of racist housing policies, such as historical redlining and present-day predatory lending practices, have resulted in neighborhood segregation, concentrated poverty and disinvestment from Black communities in Ohio that continue to this day.¹

As a result, Ohioans of color are more likely to experience harmful community conditions — such as food deserts and unsafe, unstable housing — that impact health.² These conditions, rooted in current and past racist policies and practices, make it more difficult for communities to access healthy foods or provide safe spaces for children to learn, grow and play. These policies and practices have also perpetuated racist stereotypes and beliefs that diminish the potential of Ohioans of color to succeed. The figure below highlights the impact on Ohioans if the playing field was leveled by advancing fair policies and practices.

According to analysis from the 2021 Health Value Dashboard, if the playing field was leveled...

Food insecurity	13,373 Hispanic children and 58,507 Black children would not experience food insecurity
Internet access	13,746 Hispanic Ohioans and 116,923 Black Ohioans would have broadband internet access
Housing affordability	7,143 Hispanic Ohioans and 68,009 Black Ohioans would not spend more than 50% of their income on housing
Unfair treatment	15,881 Hispanic children and 47,255 Black children would not be treated unfairly due to their race

Source: Health Policy Institute of Ohio. 2021 Health Value Dashboard™ Equity Profiles. April 2021. See **methodology section** for more details.

What can state and local government officials do?

State and local policymakers can collaborate with their constituents and other public and private partners to make a difference. Government can play a strong role in educating, encouraging and creating opportunity for private sector partners and the public to take action. Many states, counties and municipalities are promoting health by understanding and addressing unfair and unjust policies and practices. Examples of action steps that can be taken by state and local policymakers are outlined below.

Action steps for state and local policymakers

Examples of policymakers taking action

1. Acknowledge the effects of racism on health.

This means starting the conversation about how racism has impacted the health of your constituents to open the door for

creative, collaborative

solutions.



Arizona passed **a resolution** declaring racism to be a public health crisis and affirmed a commitment to end racism and improve health outcomes in communities of color.



Franklin County (Ohio) Public Health passed **a resolution** to declare racism a public health crisis and identify activities, policies and procedures to ensure racial equity is a core element of the organization.

2. Create policy agendas and plans that increase opportunities for good health. This means creating plans that outline policies and actions across settings, including within the community, schools and workplaces, that advance equitable opportunities for every person.



A Plan of Action to Advance Equity, the State of Ohio policy agenda to advance equity in Ohio's systems; promote diversity, equity and inclusion in state workplaces; embed equity in programs and policy; and provide tools for statewide partners to advance equity in public service.



The Meigs County (Ohio) Health Department's **Health Equity Policy** describes the organization's plan to align programs and resources, work in partnership across communities, improve data collection and analysis and work at the policy level to advance health equity.

3. Recruit, support and promote diverse legislative, executive and judicial leadership and staff. This means fostering a diverse and inclusive environment to reflect the communities you serve.



The Massachusetts state Senate adopted **Rule 10C** to create an Officer of Diversity and Inclusion dedicated to hiring, training and retaining a diverse workforce.



The **Diversity**, **Racial Equity and Inclusion** (**DEI**) **Work Plan** from the Metro Property and Environmental Services Department in greater Portland, Oregon, outlines strategies and actions for advancing internal diversity, equity and inclusion. This includes action areas such as recruiting a workforce, including managers and supervisors, that reflects the diversity of the region.

4. Educate, train and support legislative, executive and judicial leadership and staff. This means educating your staff on racism and other barriers to health as well as opportunities to level the playing field for every Ohioan.



Colorado Governor Jared Polis issued an **executive order** to develop training on topics such as implicit bias, historical injustices and trauma and community engagement practices for state employees.



Montgomery County, Maryland, passed **an act** providing all 8,000 county employees training that increases knowledge of varying types of racism, deepens discussions on dismantling racial inequities and builds capacity to create a fair and just county government.

5. Conduct assessments of proposed policy to ensure they don't negatively impact the health of Ohioans. This means understanding how proposed policies and legislation affect groups of Ohioans across the state to ensure they don't create barriers to health.



Washington state's legislature authorized the State Board of Health to conduct **Health Impact Reviews** — objective, non-partisan tools that analyze how proposed legislation may impact health and health equity — to inform legislative decision making.



Boulder, Colorado, developed **Rapid Response Racial Equity Assessments** as part of its COVID-19 plan to ensure a racial equity focus was embedded in its pandemic response. It is also working to establish ongoing Racial Equity Assessments to assess city practices, programs and policies.

6. Implement and fund just and fair policy solutions. This means establishing policies and practices to eliminate racism and increase opportunities for health.



Utah created a **Racial Equity and Inclusion Fund** to provide more than \$4 million in aid to organizations providing emergency assistance to communities of color disproportionately affected by the COVID-19 pandemic.



Charlottesville (Virginia) City Council passed a \$4 million equity package and launched a business equity fund loan program for businesses owned by individuals who have been systemically disadvantaged.

7. Authentically engage, tailor policies towards and allocate resources to support Ohioans of color. Because health is not one-size-fits-all, this means ensuring that all communities get access to the resources and services they need for aood health.



Rhode Island created **Health Equity Zones**, a placebased and community-driven approach to create infrastructure and address the unique social, economic and environmental factors that prevent people from being as healthy as possible.



The Toledo, Ohio, **Racial Equity and Inclusion Council** is a public-private partnership formed to engage community members to address the root causes of poverty, dismantle systemic barriers caused by structural racism and build wealth within communities of color.

8. Collect and report
disaggregated data for
public surveillance and
outcome evaluation.
This means collecting
and using data broken
out by categories like
race, ethnicity, age and
disability status to track
progress towards creating
a healthier state.



The Connecticut Department of Public Health created a **policy** and **user's guide** that established standards for collecting and reporting disaggregated data, emphasizing the importance of collecting self-reported information on ethnicity and race.



Arlington, Texas, passed an **Equity Resolution** which included gathering and analyzing disaggregated data and establishing equity targets, measures and an equity scorecard.

Building opportunity for health for every Ohioan

To ensure that every Ohioan can reach their full health potential, all forms of racism and discrimination must be eliminated. This includes individual actions and beliefs, but also encompasses discriminatory policies, practices and structures. Each action step outlined above can be implemented or adapted to address other "isms" and forms of discrimination, such as ableism, ageism, sexism, xenophobia, homophobia, etc. HPIO's **Action Steps to Eliminate Racism resource page** includes additional resources to address racism and other forms of discrimination.

Additional resources

State and local policymakers have already collaborated on decisions that create a level playing field for every Ohioan, such as efforts to reduce racial disparities in infant mortality. Continued focus, effort and investment are necessary from all sectors, both public and private, to ensure that every Ohioan has the opportunity to reach their full health potential. The following plans and resources provide recommendations for further action:

State plan examples:



COVID-19 Ohio Minority Health Strike Force Blueprint



Ohio's Executive Response: A Plan of Action to Advance Equity



2020-2022 State Health Improvement Plan



2020-2022 Strategic Action Plan on Aging



2020-2025 Ohio Commission on Minority Health Strategic Plan

Local plan examples:



Franklin County Rise Together Blueprint



2016-2020 Cuyahoga County Board of Health Strategic Plan



City of Akron Racial Equity and Social Justice Taskforce Quarter 1 and Quarter 2 reports



City of Dublin Diversity, Equity and Inclusion Framework

Learn more about the relationship between racism and health in HPIO's brief

Connections between racism and health



Notes

- 1. Williams, David R., Jourdyn A. Lawrence, and Brigette A. Davis. "Racism and Health: Evidence and Needed Research." *Annual Review of Public Health* 40, no. 1 (2019): 105–25. https://doi.org/10.1146/annurevpublhealth-040218-043750
- 2. Shavers, Vickie L. and Brenda S. Shavers. "Racism and Health Inequity among Americans." *Journal of the National Medical Association* 98, no. 3 (March 2006): 386-96.