



DECLARATION

WHEREAS, the promotion of healthy communities is directly related to the health of individuals and encourages expanding public health support networks to decrease racial disparities in health outcomes; and

WHEREAS, communities of color are disproportionately impacted by social determinants of health, such as increased exposure to lead, poor air quality, lack of safe places to walk, bike or run, and inadequate health education; and

WHEREAS, race is a social construction with no biologic basis; and

WHEREAS, racism is a social system with multiple dimensions, including individual racism, which is internalized or interpersonal and systemic racism, which is institutional or structural and is a system of structuring opportunity and assigning value based on the social interpretation of how one looks; and

WHEREAS, systemic racism unfairly disadvantages some individuals and communities, unfairly advantages other individuals and communities, and depletes the strength of the whole society through the waste of human resources; and

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

WHEREAS, numerous studies have linked racism to negative health outcomes; and

WHEREAS, the Wisconsin Department of Health Services determined that African Americans and Native Americans have the highest excess death rates at every stage in the life course, and the infant mortality rate of Non-Hispanic Black infants is the highest in the nation; and

WHEREAS, 11.1% speak a language other than English at home in West Allis, and

WHEREAS, according to the 2019 American Community Survey, 82.1% identify as White alone (86.7%, 2010), 6.9% identify as Black or African American alone (3.6%, 2010), 0.9% American Indian and Alaskan Native alone (1.1%, 2010), 2.7% Asian alone (2.0%, 2010), 3.6% some other race alone (3.6%, 2010), and 3.8% two or more races (2.9%, 2010), and

WHEREAS, the 2018 infant mortality rate in West Allis among Mixed race mothers was 45.5 deaths per 1,000 live births, compared to their White counterparts, a rate of 7.3 deaths per 1,000 births; and

WHEREAS, Black mothers in West Allis are almost twice as likely to receive inadequate prenatal care than their White counterparts defined as not receiving care in the first trimester; and

WHEREAS, in 2018, Infants identified as mixed race with low birth weight was 21% in West Allis, while White babies low birth weight was at 6%. Respectively, 78% of White mothers in West Allis are breastfeeding upon hospital discharge whereas only 68% of West Allis Black mothers are breastfeeding upon discharge; and



WHEREAS, the 2020 County Health Rankings place Milwaukee County residents 71st out of 72 Wisconsin Counties for overall Health Outcomes and 72nd in Quality of Life, indicating low birthweight at 10% compared to 7% for Wisconsin and an overall infant mortality rate of 9/1,000 live births compared to 6/1,000 for Wisconsin, noting the comparative disparity of infant mortality of 18 for Blacks, 8 for Asian, 5 for Hispanic, and 4 for White; and

WHEREAS, Healthiest Wisconsin 2020 states that, "Wisconsin must address persistent disparities in health outcomes and the social, economic, educational, and environmental inequities that contribute to them;" and

WHEREAS, the Wisconsin Public Health Association is committed to achieving health equity and convened a Racial Equity Workgroup in 2017; and

WHEREAS, while there is no epidemiologic definition of "crisis," the health impact of racism clearly rises to the oft-cited definition proposed by Galea (2017)*: "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"; and

WHEREAS, with support from community partners, it is our responsibility to address racism, including seeking solutions to reshape the discourse and actively engaging citizens in racial justice work; now, therefore,

BE IT RESOLVED, based on the aforementioned, that the West Allis Board of Health hereby declares racism as a public health crisis and supports the West Allis Health Department efforts to address public health disparities due to racial inequities throughout our jurisdiction; and

BE IT FURTHER RESOLVED, the West Allis Board of Health expects that efforts will include but not be limited to:

- Assessing internal policy and procedures to ensure racial equity is a core element of West Allis
- Working to create an inclusive organization identifying specific activities to increase diversity across its workforce and in leadership positions
- Incorporating inclusion and equity into organizational practice, offer educational trainings/activities to expand employees' understanding of how racism affects individuals, the health of marginalized populations, and provide tools to assist employees to engage actively and authentically with communities of color
- Advocating for relevant policies that improve health in communities of color, and support local, state, and federal initiatives that advance social justice, while also encouraging individual employee advocacy
- Encouraging other local, state, and national entities to recognize racism as a public health crisis.

* Data sources: U.S. Census and American Community Survey; Wisconsin Interactive Statistics on Health (WISH)

* Galea, Sandro. Crying "Crisis". Dean's Note. Boston University School of Public Health.

<https://www.bu.edu/sph/2017/04/23/crying-crisis/>. Accessed 07.03.2020.