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WHEREAS, Public Health Awareness establishes the relationship

WHEREAS, race is a social construction with no biological basis¹; and

WHEREAS, racism is a negative social system with multiple

WHEREAS, racism unfairly disadvantages specific individuals and

WHEREAS, the City of Austin's collective prosperity depends upon

WHEREAS, the 1928 Master Plan separated Austinites with race as a

¹ Garcia JJ, Sharif MZ. Black lives Matter: A Commentary on Race and Racism. AmJ Public Health. 2015; 105: e27- e30. doi:10.2105/AJPH.2015.302706).

District,” and resulted in the intentional and negatively disproportional restriction of resources for the Black community – the residual effects of which are still experienced today; and

WHEREAS, racism causes persistent discrimination and disparate outcomes in many areas of life, including housing, education, business, employment and criminal justice; and an emerging body of research demonstrates that racism itself is a social determinant of health; and

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

WHEREAS, more than 100 studies have linked racism to negative health outcomes;² and

WHEREAS, the U.S. Census noted that the City of Austin’s Black residents experience dramatically higher unemployment rates (White: 3.0%, Black: 9.5%), face a higher poverty rate as a community (White: 9.1%, Black: 22.9%), have incomes that are 55% of the median income of white residents, have lower home ownership rates (White: 52%, Black: 31.5%)³ and lower

²Institute of Medicine. Unequal Treatment. <https://www.nap.edu/read/10260/chapter/2#7>. May 2, 2020; and American Public Health Association. Racism and Health. Available at: <https://www.apha.org/topics-and-issues/health-equity/racism-and-health>.

³U.S. Census Bureau.

health coverage rates (White: 89%, Black: 75.2%)⁴ and are more likely to live in neighborhoods with low-performing schools and experience disproportionately higher incarceration rates in the Texas prison system (Whites: 457 per 100,000, Black: 1,844 per 100,000)⁵; and

WHEREAS, racism and economic segregation in Texas and the City of Austin have also exacerbated a health divide resulting in East Austin residents having lower life expectancies than West Austin residents;⁶ and Black residents are far more likely to die of heart disease, cancer, diabetes or stroke. Black residents also have higher levels of lower birth weights, are more likely to be overweight or obese, have long-term complications from diabetes, notably higher rates of new HIV cases, and report poor mental health⁷; and

WHEREAS, Austin is committed to undoing the systemic racism and institutional inequity abetted for far too long and pervasive in all systems; and

⁴Centers for Disease Control and Prevention (CDC). Texas Behavioral Risk Factor Surveillance Survey Data. Atlanta, Georgia: US Department of Health and Human Services, Centers for Disease Control and Prevention, 2011-2015.

⁵The Sentencing Project: The Color of Justice; Racial and Ethnic Disparity in State Prisons. June 2016.

⁶UT Southwestern Medical Center
<https://www.utsouthwestern.edu/newsroom/articles/year-2019/life-expectancy-texas-zipcode.html>.

⁷Community Health Assessment Austin/Travis County September 2017.

70 **WHEREAS**, while there is no epidemiologic definition of “crisis”, the
71 health impact of racism clearly rises to the definition of “crisis” proposed by the
72 Dr. Sandro Galea, dean of the Boston University School of Public Health, who
73 stated, “[t]he problem must affect large numbers of people, it must threaten
74 health over the long-term, and it must require the adoption of large-scale solutions”;
75 and

76 **WHEREAS**, with support from community partners, Austin Public Health
77 and the Equity Office, it is the City of Austin’s responsibility to address racism,
78 including seeking solutions to reshape the discourse and actively engage all
79 citizens in racial justice work; and

80 **WHEREAS**, the City of Austin is committed to achieving health equity;

81 **NOW, THEREFORE,**

82 **BE IT RESOLVED BY THE CITY COUNCIL OF THE CITY OF AUSTIN:**

83 Racism has caused a public health crisis in the City of Austin.

84 **BE IT FURTHER RESOLVED:**

85 The City Manager is directed to continue work to progress the City of
86 Austin as a race equity and justice-oriented organization, with the Equity Office
87 and departmental leadership continuing to identify specific activities to further
88 enhance diversity and to ensure antiracism principles across leadership, city
89 staffing and contracting, enhance educational trainings/activities for employees

aimed at understanding, addressing and dismantling racism and how it affects the delivery of human and social services, economic development and public safety, and promote relevant policies that improve health in communities of color.

BE IT FURTHER RESOLVED:

The City Manager is directed to advocate locally and through the National League of Cities and Texas Municipal League for relevant policies that improve health in low-income communities and communities of color, and supports local, state, regional, and federal initiatives that advance efforts to dismantle systemic racism. The city manager is to report back to Council annually on advocacy initiatives and progress on policy advancement.

BE IT FURTHER RESOLVED:

The City Council hereby supports efforts to address public health disparities due to racial inequities throughout the City of Austin, and calls upon the Governor, the Lieutenant Governor, the Speaker of the Texas House, and the Texas Attorney General to join with us to declare racism as a public health crisis and to enact equity in all policies of the State of Texas.

ADOPTED: _____, 2020

ATTEST: _____
Jannette S. Goodall
City Clerk