

1 TO THE HONORABLE SENATE:

2 The Committee on Senate Health and Welfare to which was referred Joint
3 House Resolution No. 6 entitled “Joint resolution relating to racism as a public
4 health emergency” respectfully reports that it has considered the same and
5 recommends that the Senate propose to the House that the resolution be
6 amended by striking out all of the Whereas and Resolved clauses and inserting
7 in lieu thereof the following:

8 Whereas, stark and persistent health inequities exist in the United States
9 ~~based on race and that are caused by systemic racism~~, and

10 ~~Whereas, systemic racism is a principal social determinant of individual and~~
11 ~~public health, impacting economic, employment, education, housing, justice,~~
12 ~~and health opportunities and outcomes, all of which further adversely impact~~
13 ~~the health of People of Color, and~~

14 Whereas, the COVID-19 pandemic is now exacerbating these ~~inequities~~
15 ~~disparities~~, and Black and Latino people in the United States have been nearly
16 three times as likely to die, and

17 Whereas, these same ~~inequities~~ ~~disparities~~ exist in Vermont, and during the
18 pandemic, though Black residents comprise just over one percent of Vermont’s
19 population, they account for approximately 4.8 percent of the total confirmed
20 COVID-19 cases as of December 16, 2020, and

1 Whereas, research and experience demonstrate that Vermont residents
2 experience barriers to the equal enjoyment of good health based on race and
3 ethnicity, and

4 Whereas, the incidence rate of COVID-19 for non-White Vermonters is
5 74.2 versus 26.2 for White Vermonters, and specifically the incidence rate for
6 Black Vermonters is 225.7; the incidence rate for Asian Vermonters is 61; the
7 incidence rate for Hispanic Vermonters is 41.7; and the incidence rate for other
8 races is 20.5, and

9 Whereas, while there are not statistically significant differences in the rates
10 of preexisting conditions, such as diabetes, lung disease, and cardiovascular
11 disease, among White and non-White Vermonters, there are disparities in the
12 rates of preexisting conditions among Vermonters testing positive for COVID-
13 19, which suggests that non-White Vermonters are at higher risk of exposure to
14 COVID-19 due to their type of employment and living arrangements, and

15 Whereas, 36 percent of non-White Vermonters had household contact with
16 a confirmed case of COVID-19, as compared to only 20 percent of White
17 Vermonters, and

18 Whereas, according to the Department of Health’s 2018 Behavioral Risk
19 Factor Surveillance System report, non-White Vermonters are: (1) statistically
20 less likely to have a personal doctor; (2) statistically more likely to report poor
21 mental health; (3) more than twice as likely to report rarely or never getting the

1 necessary emotional and social support; (4) significantly more likely to have
2 depression; (5) significantly more likely to have been worried about having
3 enough food in the past year; and (6) significantly more likely to report no
4 physical activity during leisure time, and

5 Whereas, non-white Vermonters are disproportionately represented in the
6 total number of patients in the highest level of involuntary hospital beds in the
7 State, comprising 15 percent of the patients admitted to the Vermont
8 Psychiatric Care Hospital between May 1, 2019 and April 30, 2020, and

9 Whereas, social determinants of health are underlying, contributing factors
10 of the foregoing health ~~inequities~~ disparities, and

11 Whereas, 21 percent of Black Vermonters own their own homes, while 72
12 percent of White Vermonters own their own homes, and nationally, 41 percent
13 of Black Americans own their own homes, and

14 Whereas, the median household income of Black Vermonters is \$41,533.00
15 while the median household income of White Vermonters is \$58,244.00, and

16 Whereas, in 2018, 23.8 percent of Black Vermonters were living in poverty
17 while 10.7 percent of White Vermonters lived in poverty, and 57 percent of
18 Black Vermonters earned less than 80 percent of Vermont's median income
19 while 43 percent of White Vermonters earned less than 80 percent of
20 Vermont's median income, and

1 Whereas, about one in two non-White Vermonters experience “housing
2 problems,” which is defined as having homes that lack complete kitchen
3 facilities or plumbing, having overcrowded homes, or paying more than 30
4 percent of household income towards rent, mortgage payments, and utilities,
5 and

6 Whereas, Black Vermonters are overrepresented among Vermonters
7 experiencing homelessness, in that they make up six percent of Vermonters
8 experiencing homelessness, while making up approximately one percent of
9 Vermont’s population, now therefore be it

10 Resolved by the Senate and House of Representatives:

11 That racism the existence of racial disparities constitutes a public health
12 emergency in Vermont, and be it further

13 Resolved: That this legislative body commits to the sustained and deep
14 work of eradicating systemic racism throughout the State, identifying systemic
15 racism where it exists, actively fighting racist practices, and participating in the
16 creation of a more just and equitable systems society, and be it further

17 Resolved: That this legislative body commits to coordinating work and
18 participating in ongoing action, grounded in science and data, to identify the
19 causes of and to eliminate race-based health disparities and eradicate systemic
20 racism, and be it further

1 Resolved: That the Secretary of State be directed to send a copy of this
2 resolution to the Governor, the Chief Justice of the Vermont Supreme Court,
3 the **Vermont** League of Cities and Towns, all regional planning commissions,
4 and the Vermont Racial Justice Alliance.

5 and that after passage the title of the resolution be amended to read: Joint
6 resolution relating to **racial disparities** as a public health emergency

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12 (Committee vote: _____)

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Senator _____

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FOR THE COMMITTEE