

15-04

STATEMENT OF POLICY

Police Violence and Racism

Policy

The National Association of County and City Health Officials (NACCHO) has longstanding policy recognizing intentional injury, or violence, as a public health issue and calls on local health departments to work to protect and improve community safety in coordination and collaboration with local, state, and national efforts.¹

NACCHO encourages local health departments to frame the prevalence of police violence and the threat of police violence in all communities as a public health issue associated with a legacy of social, economic, and racial injustice in urgent need of both a nationwide and local public health and community response. Police violence is harmful to everyone, but is a particularly racialized form of violence, given its roots in slave patrols and the enforcement of the Black Codes and Jim Crow segregation, all of which has served to create a system where Black communities and people of color are overpoliced, and, therefore, disproportionately impacted by police violence and the carceral system²⁰. NACCHO further urges local health departments to engage in public dialogue and use their authority to highlight the health implications of this historical and contemporary issue and the long-term health effects of police violence where it occurs, particularly as it affects the health of children and their development, families, and communities. This work would include building strong relationships with local community members, social service, and other agencies of government, and community-based organizations to end the unjust, racist, and inequitable burden of violence and threat of violence disproportionately against Black people, Indigenous peoples, people of color, immigrants, the LGBTQIA+ populations, persons with disabilities, the unhoused, and people who use drugs - all of whom hold identities which intersect across a number of racialized and otherwise marginalized identities. Local health departments should further support residents experiencing such violence in expressing their voice and building power to act on the processes and decisions that lead to permanent stress, deprivation, poor living conditions and unstable communities that may influence increased levels of harm perpetuated by policing. Local health departments should bring their experience with the conditions required for population health and well-being to address issues of structural racism, inequity and disproportionate levels of police violence in targeted neighborhoods and communities.

NACCHO further encourages local health departments to:

- Encourage the protection of the civil rights of all people and the use of community-based alternatives to address harm and trauma.



- Encourage and support a greater shifting of funds from the over policing of communities and carceral systems of punishment into community infrastructure, the social determinants of health and more equitable legislation for community safety.
- Encourage accountability measures for law enforcement officials and institutions that have perpetuated violence against people and communities they were meant to serve.
- Support the abolition of discriminatory law enforcement strategies such as racial profiling.
- Support the modification or elimination of laws that may lead police to use force or arrest people for minor actions that rarely lead to prosecution.
- Educate the public about the ways in which all forms of structural racism (processes creating disadvantage, which “come from a ... network of mutually reinforcing economic and educational mechanisms ... that make their combined negative effects [devastating]”²) threaten the public’s health and increase the risk of physical and mental health disorders.
- Explore and communicate how the anticipation and long-term effects of police violence and daily intimidation increase toxic stress that severely harms health of families and whole communities.
- Actively partner with federal, state and local community leaders and organizations to develop more complete and accurate information about death rates, firearm deaths, rates of arrest, and violence inflicted by police.
- Track, analyze, and disseminate accurate data about rates of killings by police, firearm deaths, rates of arrest, and violence.
- Document racial inequities in stops, arrests, killings, and complaints of the use of excessive force, and make this information publicly available.
- Research the nature and public health implications of police violence.
- Initiate and lead efforts to build ties between local government and communities focusing on health equity.

Justification

Violence as a public health issue has been well-documented for decades and remains a leading cause of death.³ Its prevention partially depends on a public health approach integrating many disciplines and attention to living conditions, including the effects of stress (cardiovascular disease, depression) due to the embodiment of on-going, systematic processes of racism. In addition, the World Health Organization indicates that many types of violence or the threat of violence can have long-term and latent health consequences; it describes the role of public health in investigating, monitoring, and, most importantly, preventing it.^{4,5} Violence perpetuated by the police and law enforcement institutions, from police killings of individuals to more structural violence against communities in the form of racist policies and practices, is an important part of this conversation. Public health plays and can play a more critical role through collective action and coordination of many sectors and disciplines to address this crisis.

Until recently, public health has not researched the health implications of racist violence by local law enforcement, although a number of public health organizations have urged responsiveness to the issue.^{6,7,8} Recently the American Public Health Association released a statement taking a stance on police violence as a public health issue. The report details the myriad impacts that police violence has on individuals and communities, the effectiveness – or lack thereof – of

police reforms, and the need for more upstream public health interventions to address the historical, institutional and structural drivers of police violence that continues to disproportionately impact Black, Latino, immigrant and other historically marginalized communities and populations.¹⁹ In the words of Nancy Krieger, Professor of Public Health at Harvard University, “We in public health have the capacity—the analytic tools, the data and the knowledge—to make the connections palpable – and actionable—between the many forms of racism...and the myriad ways they become embodied and manifest as health inequities.”⁹

The public attention given to police violence in the past few years, recently in Ferguson, MO, New York City, Baltimore, MD, Minneapolis, MN, and Cleveland and Cincinnati, OH, and elsewhere only underscores an ongoing, underreported phenomenon occurring in American society—unjust, disproportionate police violence against communities of color.^{10,11} As the Washington Post reports on police shootings nationally in 2015: “about half the victims were White, half minority. But the demographics shifted sharply among the unarmed victims, two-thirds of whom were Black or Hispanic. Overall, Blacks were killed at three times the rate of Whites or other minorities when adjusting by the population of the census tracts where the shootings occurred.”¹² Police violence is a threat to the physical, emotional, and psychological health and well-being of residents in those communities where it occurs. It creates a severe burden for families and communities. Health statistics comparing death rates for Black and White men, for example, document the increased mortality rates for Black men with respect to legal or police intervention.¹³ According to some authors, police violence is closely tied to broader public health issues associated with health inequity, based on a long legacy of embedded racism.¹⁴⁻¹⁷ The New York City Commissioner of Health has argued in the *New England Journal of Medicine* that health professionals ought to be held accountable for “fighting the racism—both institutional and interpersonal—that contributes to poor health in the first place.” She further suggests that public health needs to confront the role of racism driving the inequities in health outcomes through “critical research, internal reform, and public advocacy.”¹⁸

Police violence is a public health crisis and contributor to ongoing health inequities across populations and communities. NACCHO, through its health equity programs and workgroups, has a long-standing commitment and track record over sixteen years, seeking to strengthen local health departments’ capacity as they confront the root causes of health inequity through principles of social justice in everyday practice, beyond mitigating the consequences. In 2007 NACCHO contributed to the production and dissemination of the acclaimed PBS documentary series *Unnatural Causes: Is Inequality Making Us Sick?*—over 150 local health departments conducted screenings at town-hall events. Recently, NACCHO has collaborated with California Newsreel in a similar effort with the documentary, *The Raising of America*. NACCHO is a key partner in the Building Networks Initiative, funded by the W.K. Kellogg and Kresge Foundations, to align public health with the discipline and strategies of community organizing in six Midwestern states and create strong, flexible, and permanent statewide teams that develop and promote strategies to eliminate health inequity. Over these years, NACCHO produced many valuable tools, including a web-based multi-media course called *The Roots of Health Inequity*; the anthology, *Tackling Health Inequities Through Public Health Practice: Theory to Action* (Oxford University Press, 2010); and, *Expanding the Boundaries of Public Health Practice* (2014), a publication exploring how local health departments can transform their practice in a way that emphasizes important root causes. Health equity was the theme of the NACCHO

Annual Conference in 2001, 2007 and 2016. Each of these initiatives contribute to local public health's ability to better understand, strategize, and act upon the root causes of health inequity in their communities.

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Note:

In 2015, the [Journal of Urban Health](#) produced a special section on Police Brutality as a Public Health Issue; in summer 2015, the [Harvard Public Health Review](#) dedicated a special issue titled: "Race, Politics, and Power."

Record of Action

Proposed by NACCHO Health Equity and Social Justice Committee

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