

## STATEMENT ON CDC DIRECTOR'S DECLARATION OF RACISM AS A PUBLIC HEALTH ISSUE

The director of the Centers for Disease Control and Prevention (CDC), Dr. Rochelle P. Walensky, <a href="https://nas.issued.a.public.statement">has issued a public statement</a> to declare "racism a serious public health threat." Using COVID as an example of yet another health emergency that is hurting people of color exponentially more than white Americans, she said, "...the pandemic illuminated inequities that have existed for generations and revealed for all of America a known, but often unaddressed, epidemic impacting public health: racism."

Leadership matters: Appointed by President Biden, Dr. Walensky's "pioneering research has helped advance the national and global response to HIV/AIDS." She is the first federal agency leader to acknowledge that institutional racism, which impedes people of color from equally accessing employment, housing, health insurance, transportation, and culturally respectful health services, leads directly to widespread health inequities. This statement comes after years of advocacy to declare racism a public health threat. We have incomparable evidence to prove it, and we are grateful to mark this milestone that will allow for programming and resources to be directed toward eliminating health outcomes driven by anti-Black racism.

From statement to action: While we applaud Dr. Walensky's symbolic statement, Black-led organizations and Black Americans have always decried racism as a public health issue. Whether it is HIV or another Black man like Daunte Wright being killed by a white police officer, systemic anti-Blackness continues to kill us. Therefore, we will hold the CDC and other federal agencies accountable for moving beyond this statement to elevating Black leadership and allocating substantial resources that prioritize our people.

HIV is a racial justice issue: Dr. Walensky's statement echoes what the Black AIDS Institute has framed 22 years of programming and advocacy around: HIV is devastating Black Americans simply because we are Black. (1) We represent 42% of all new HIV diagnoses yet make up only 13% of the US population. (2) Black gay men, transgender women, and cisgender women face staggeringly high HIV rates compared to their white counterparts. (3) Despite biomedical advancements leading to HIV prevention and treatment options, a racist healthcare system prevents Black Americans from accessing lifesaving health information and services.



Implementing a Black HIV response: While Black Americans are the most impacted by the epidemic, we have been consistently under-prioritized in the federal HIV response. After years of being excluded, the Black AIDS Institute acted upon its motto of "Our People. Our Problem. Our Solution." by launching "We The People: A Black Strategy To End HIV." Rooted in racial justice, developed with input from Black communities, and framed around 4 pillars of structural change, the strategy is being incorporated in cities across the country to end HIV.

**Give Black Americans What is Owed**: After mobilizing the vote that won this presidential term and secured a new Congressional majority, there is a newfound optimism that this administration will finally start centering Black lives in HIV research, development, and funding. Because we too deserve equal opportunities for health and happiness that move us toward *complete freedom*.

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