Executive Directive 2020 - 09

EXECUTIVE DIRECTIVE

No. 2020-9

To: State Department Directors and Autonomous Agency Heads

From: Governor Gretchen Whitmer

Date: August 5, 2020

Re: Addressing Racism as a Public Health Crisis

Racism is a social system with multiple dimensions, including individual racism, which is internalized and interpersonal, and systemic racism, which is institutional or structural. Both institutional and systemic racism harm individuals and communities and deplete the strength of a whole society through the waste of human resources.

Racism has existed in America for over 400 years. From the genocide of Indigenous peoples upon the arrival of the Europeans, to chattel slavery beginning in the 1600s, to the Jim Crow era. Even today, through inequitable outcomes in the criminal justice system, achievement gaps in education, disproportionate results in health and infant mortality, and job and housing discrimination, racism remains a presence in American society while subjecting Black, Indigenous, and other people of color to hardships and disadvantages in every aspect of life.

Historical racism in Michigan has affected people of color who reside in the state. For example, discriminatory housing practices in the 20th century, such as redlining and exclusionary housing covenants, contributed to segregation and created an obstacle to the transfer of generational wealth.

People of color in Michigan are more likely to live in neighborhoods with restricted access to healthy food choices and essential resources, excessive high-priced gas stations and liquor stores, and older housing stock leading to a variety of other health issues, including reduced life expectancy, higher rates of infant and maternal mortality, high rates of asthma, higher rates of lead poisoning, and higher vulnerabilities to public health pandemics including COVID-19.

In addition to having an independent influence on the social determinants of health, racism in and of itself has broad-reaching and direct negative impacts on individual health outcomes. The American Public Health Association, the American Medical Association, the American Academy of Pediatrics, and the American College of Emergency Physicians have declared institutional racism an urgent public health issue and vowed to eradicate racism and discrimination in health care.

The eradication of racism and discrimination requires proactive efforts to achieve racial justice: the creation and proactive reinforcement of policies, practices, attitudes, and actions that produce equitable power, access, opportunity, treatment, and outcomes for all people regardless of race.

My administration has worked diligently from day one to build toward racial justice. With Executive Order 2019-6, I created the Office of the Environmental Justice Public Advocate and the Office of the Clean Water Public Advocate within the Department of Environment and the Great Lakes. In response to the racial disparities brought to light by this unprecedented global pandemic, I created the Michigan Coronavirus Task Force on Racial Disparities, a group dedicated to studying, reporting on, and finding solutions to the disparate effects of COVID-19 on people of color. More recently, to improve equity in the delivery of health care, I also adopted Executive Directive 2020-7, requiring the Department of Licensing and Regulatory Affairs to begin the process of promulgating rules to establish implicit bias training standards as part of the knowledge and skills necessary for licensure, registration, and renewal of licenses and registrations of health professionals in Michigan.

But we must do more. The State of Michigan as a whole must recommit to addressing the impact that racism has on the lives of all our neighbors and its impact on overall population health.

The COVID-19 pandemic has revealed, confirmed, and highlighted the deadly nature of these pre-existing inequities caused by systemic racism. For example, in cases where race or ethnicity is known, the rate of reported COVID-19 cases for Black/African American Michigan residents is 14,703 per 1,000,000, compared with 4,160 per 1,000,000 for White residents, *more than three times higher*. And the rate of reported COVID-19 deaths for Black/African American Michigan residents is 1,624 per 1,000,000 compared with 399 per 1,000,000 for White residents, *more than four times higher*. Stated simply: racism is a public health crisis.

Acting under sections 1 and 8 of article 5 of the Michigan Constitution of 1963, I direct the Department of Health and Human Services to work in partnership with all state departments and agencies to undertake the following strategies to combat racism as a public health crisis and the resulting health inequities:

1. **Data and analysis.**

a. Ensure that data documenting differences in health outcomes among racial and ethnic groups in Michigan is collected, analyzed, and made publicly available to drive equitable policy and practice development.

b. Conduct ongoing and enhanced analysis using all available data to understand:

(1) how racial disparities in societal, economic, environmental, and behavioral factors intersect to affect access to resources that promote good health, including good jobs, access to healthy and affordable food and housing, equitable transportation options and excellent public education; and

(2) how violence in the community and racism are related, and the impact of violence on the overall health of people and the community at large.

2. **Policy and planning.**

a. In partnership with the Michigan Coronavirus Task Force on Racial Disparities, develop a plan that outlines in detail how the State of Michigan will eliminate the root causes of the inequities that cause disparities in health outcomes for our residents.

b. Develop direct service programs and services to address the negative impact that racial inequities have had on specific populations as well as programs that empower communities to tackle these systemic barriers.

3. **Engagement, communication, and advocacy.**

    a. Engage historically marginalized communities to identify problems and solutions and support community-driven responses.

b. Focus on access to prevention and treatment that is culturally and linguistically competent to counter the inequities that exist in health care.

a. Advocate at the state and federal level for policies and funding opportunities that directly combat systemic racism.

In addition, the following section applies to all state department directors and autonomous agency heads:

4. **Training.**

    a. Departments and autonomous agencies must require all classified and unclassified state employees to complete implicit bias training as made available by the Michigan Civil Service Commission, the Michigan Department of Civil Rights, or an Office of State Employer-approved vendor by December 31, 2020. The Office of State Employer may extend this deadline to accommodate special circumstances. State employees who have completed implicit bias training within the last year of this executive directive may be deemed to have met this requirement, subject to approval of the Office of the State Employer.

    b. Departments and autonomous agencies must require all new employees to have implicit bias training as part of the new hire process, which the new employee must

complete no later than 60 days from the date of hire.

c. Department and autonomous agencies must collaborate with the Office of the State Employer to develop and implement an implicit bias training plan, as appropriate, for SPS contract workers and temporary, intermittent, or irregular personal service workers who perform work on behalf of the state and in conjunction with classified, unclassified state employees. The plan is to be completed and implemented no later than December 31, 2021.

d. Departments and autonomous agencies must require all state employees to have implicit bias training on a biennial basis by December 31st of each year that training is due.

e. Departments and autonomous agencies, in collaboration with the Office of the State Employer, must establish a process for monitoring compliance with the implicit bias training requirements. The Office of the State Employer must provide an annual report to the Chief Compliance Officer.

State departments and agencies must take all necessary steps to implement this directive, including through the allocation of funding and other resources in a manner consistent with applicable law.

The provisions of this directive are severable and if any provision, or portion thereof, is held unconstitutional or otherwise invalid by any court of competent jurisdiction, such unconstitutionality or invalidity must not affect the remaining provisions that must remain in full force and effect.

This directive is effective immediately.

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