VISION FOR A RACISM-FREE BOSTON

From September to October 2020, the Boston Public Health Commission invited residents to share their experiences and ideas to address Racism as a Public Health Crisis.

WE ASKED:

- How do residents experience racism in Boston?
- What should the City do to address racism?

WHO ANSWERED:

197 Residents

67% identified as Black or People of Color

Most residents live in:
Dorchester (All Zips), Jamaica Plain, Roslindale, and Roxbury

BY THE NUMBERS:

74% said racism impacts health

Top choices for the City to focus on:

#1 HOUSING 153 votes

#2 EDUCATION 111 votes

#3 JOBS 71 votes

RESIDENTS WROTE ABOUT:

Police

Culturally Competent Healthcare

Data Collection and Transparency

Sadness and Anxiety because of Racism

Effects of Segregation and Redlining
VISION FOR A RACISM-FREE BOSTON

From September to October 2020, the Boston Public Health Commission invited community partners to share how their work could address Racism as a Public Health Crisis.

WE ASKED:

▷ How is your organization addressing racism in Boston?
▷ How do you want to work with the City of Boston?

WHO ANSWERED:

23 Organizations

10 Testimonies

TYPES OF ORGANIZATIONS:

- Healthcare
- Mental Health
- Recovery Services
- Worker Rights
- Violence Prevention
- Wrap-Around Services

IDEAS FOR PARTNERSHIP:

- Community of Practice for Racial Justice and Health Equity
- Standards for Equitable Data Collection and Transparency
- Racial Equity and Implicit Bias Training
- Funding for Key Public Health Services
Residents Responses

Policing

“As an alumna, resident, and employee of the City of Boston racism has had deep effects on how I live in this city. Twice I was a victim of police brutality in this city...As a result, I have anxiety that I have had to get professional counseling for. Yet, I decided to work in this City and recommit to a City that I believe in.”

“Boston Police Department is the main source of racial trauma in Boston and must be addressed first and foremost.”

“Not feeling at peace in public spaces in Boston. Not feeling welcomed outside of Mattapan, Dorchester, and Roxbury areas. Specifically in the downtown area as there are limited spaces for Black people to gather. We are "given" nights/evenings that are heavily policed as compared to other evenings.”

“Everyone (police included) standing against police brutality.”

“Police should not be responding to mental health or drug use emergencies. Mental health and medical professionals should be available at all times like police and respond to mental health and drug use emergencies. A police officer may need to accompany them but the professional should be making the decisions.”

“Defund the police! Prioritize non-confrontational response to safety calls, for example social work for mental health emergency calls, unarmed people to respond to non-violent calls etc. Get rid of military [equipment]!”

Drawing more funds to resources and social services for under served communities. These funds should come from the police.
“Less money towards the police - more money to mental health outreach, crisis intervention, housing!!!”

“The police approach every interaction with people of color as if we are a threat to them when the truth is the police are a threat to us. We need to change policing policies so that they are focused on protecting the community and not just protecting the police.”

“My brown children are scared of the police.”

“Have all police/all first responder badge numbers displayed clearly, so can be read discreetly from a distance.”

“Defund the police. Have mediations with neighborhood groups and police.”

“CHANGING POLICIES ON THE "CONDUCT OF POLICING" AND MORE COMMUNITY POLICING. CALLING OUT BAD OFFICERS BECAUSE THEY MAKE GOOD OFFICERS LOOK BAD.”

“Police reform diverting funding from police to other social services sending emergency social services to deal with certain emergencies, allowing police to focus on crime”

“Police should be ordered to keep their guns in their car when walking around or approaching people. There are other weapons they can use that won't kill people. They should only have their gun on them if there is a direct threat and be provided safety equipment.”

“Police should not have immunity.”

**Cultural Competency in Health Care / Healthcare**

“I would like to see Black patients at … world-renowned hospitals, instead of only wealthy white people from the suburbs.”

“A mental health facility on every block like liquor stores/community centers.”

“It has affected me in a negative way knowing that I am not getting the best healthcare causing my health to go downhill because of my homeless status… It sucks!!”

"Too many people are afraid of what happens if they go to the doctor."

“I went to see a physician … for constant knee pain. She didn't take my pain seriously and recommended Tylenol and Motrin. I expressed to her that combo didn't work. She told me that if I wanted something stronger, those class of drugs could be found on the streets, but I would surely become addicted. Does she reserve that comment for only black patients? My guess is yes. Physician was a white woman. Me. A Black woman.”
“We need standard screening and tracking of treatment of individuals with similar symptoms and diagnosis to see if there are differences in treatment. We can improve language and cultural competence but we have to be certain treatments are standard.”

“I cannot prove it but I truly believe that white healthcare professionals do not treat African Americans, Asian Americans, and Latino Americans equal to white Americans. We know that women still receive healthcare less proactively and aggressively as men. We want to believe that this is not true in 2020. It is true!”

“We need to be taken serious when it comes to our health concerns. Not everyone is able to advocate for themselves so therefore more assistance is needed for patients who are having problems accessing the care that they need! More translators or bilingual access. More social workers and definitely transportation access.”

1) Wherever possible, healthcare providers who are of the same ethnicity as the patients; 2) Cultural competence training for providers who are not of the same ethnicity as the patients, so that they do not misunderstand people's needs or say or do things that alienate them; 3) Good translation services if the provider does not speak the patient's language.

Persistent Sadness and Anxiety Due to Racism

“I don't have access to as many BIPOC healthcare and mental health providers. I try to avoid all-white spaces and unfortunately in healthcare in Boston that is hard to avoid. I don't feel safe or supported.”

“I am a mental health counselor, I literally have counseled BIPOC people from the area who have become suicidal due to evictions and displacement due to gentrification.”

“Not feeling comfortable walking in large crowds that don’t have other people of color.”

“we still carry the burden ... of being the only people of color in so many of the establishments we have visited, where it just feels so much less welcoming to someone who is already worrying about how others may judge them.”

“Felt unimportant, couldn't do my job efficiently. Lack of sleep, feeling unworthy. Feeling of giving up on trying.”

“When racism is experienced, it can become quite an impact such as raising your blood pressure, anxiety, anger, etc.”

“Racism has affected me by worrying what I look like to be accepted by white people”

Data Collection and Transparency
“Please don't ignore residents' responses. This CANNOT be another way to play with residents to pretend the City is doing something.”

“It feels like all we do is collect data and the human experience is being used as a guinea pig for more funding for higher salaries for non-persons of color.”

“I do not know the policies, which makes it difficult as a resident to understand where policies are lacking, and how they enable the perpetuation of systemic racism. Maybe we need to educate the general public on this so they are better able to advocate for themselves.”

“community centered data collection (see: participatory action research)”

“I think it is important to communicate, communicate, and communicate. All leaders should be talking about diversity and the facts related to Boston's diversity in every letter they write, every magazine they publish, every speech they give, every meeting they have, and every public document. Diversity should be at the top of the list when it comes to communication. This communication should show how the City of Boston is making changes to be more diverse and inclusive. There should be a diversity dashboard and it should be published and distributed every month. City leaders should be held accountable for meeting diversity and inclusivity goals.”

“See a follow up to this survey and the outcome. These surveys are great for the end of the year to talk about what was done (an easy fix) but what was the success and the outcome......”

**Effects of Segregation/ Redlining**

“Housing segregation and historically racist policies around home ownership, mortgages, and redlining districts continues to have huge downstream effects on how black communities are perceived, property values, the reduced upward mobility of these communities and families, the reduced amount of funds going into their public schools, and so much more. We need to proactively take steps to undo the wrong that has been done over centuries.”

“Boston's racism may not be overt, but you see it on the T. You see it in the streets or the kinds of neighbors you have around you or the schools our kids attends or the resources available to us. I believe everything is a reflection of how you invest in the poorest of us. If there are no jobs, no outlets, no safe spaces or affordable homes for people to lay their head, Boston will continue to be gentrified and POC and other minority groups were been seen less and less.”

“Commit to support reparations. Lift up the history of Black Boston, including involvement in slavery as well as abolitionism, history of busing, etc.”

“The changes I have seen in Boston are astonishing and the fact that some of that coincides with one group moving in and one group moving out is telling...I know neighbors who have fought for signage or lights for twenty years and new people move in and the neighborhood demands are met much faster.”
"We have spent the last 3 years fighting to prevent a Popeyes from opening less than a half mile from a McDonalds and a KFC in our community… This saturation of Fast Foods and junk food is prevalent in Black neighborhoods in Boston.”

“I would like to see Boston be more welcoming for people from all over, and improving all the schools, but especially the ones in historically disadvantaged areas…. Seriously, Hyde Park Ave is only commuter rail? Readville? I mean, really?”

“You can't buy in "bulk" if you don’t have the up front cash, ability to carry lots of heavy bags home, or storage space.”

“I see an extremely segregated city. I don't feel like this is a safe place for me to raise my family. I'm Afro-Cuban and married to a Mexican man. We live in West Roxbury. We feel so out of place here. Our landlord has made multiple microaggressions at us. We can't afford to live anywhere else.”

“Rather than showing the same heat map for housing insecurity, food insecurity, chronic medical conditions, flu rates, COVID rates -- acknowledge each of these heat maps can exactly overlain on each other.”

“Because our city is so segregated I would strongly urge multiracial dialogues focused on healing Boston's wounds from racism (especially around busing) and rebuilding trust between different racial and ethnic communities.”

“The poorest neighborhoods in Boston are no accident.” (Spanish)

“The lack of clean air since lack of trees in my community, certain streets in Dorchester don't have a single tree on it, that is abhorrent. Having too many large commercial trucks going through residential areas. Not enough dedicated bike lanes.”

“Pilot a universal basic income initiative (similar to Stockton CA). Economic justice is critical to any solutions to racism. Explore ideas about participatory budgeting for Boston neighborhoods that have and are experiencing historic and chronic disinvestment -- give community members resources (actual $$$) to collectively decide on ways to invest in their own neighborhood (if this is already happening, promote it more and expand).”

**Inequality amongst Boston Public Schools**

“I would like to see an elected school committee so that residents can have more of a voice in BPS policies that affect our children. I would also like to see more resources put into our schools, improvements to our school buildings so our children do not experience health issues related to their time inside sub-standard schools.”

"How can a public school like Latin have a 10-million-dollar endowment and another like Mildred Ave Middle have a hard time raising $2,000."
“Why is Boston 50% white, but it's schools are only 15% white. What can be done to create a more integrated city/region? Boston Latin is an emblem of systemic racism for all to see.”

“Schools have become a place of discomfort because of the ignorance that teachers and students exhibit.”

"Additionally, the work of equity and anti-racism and examining within must be mandated curriculum for all schools, not just in a cursory way, but as a component to every lesson, and as a regular longitudinal deep dive curriculum that can ask the hard questions and begin to change perspectives and open the minds of our young people to find new ways to work and relate in the world.”

**Housing**

“I hold a master’s degree and over 11 years of real estate banking, however, I do not have adequate housing of my own, and I am contemplating moving out of Boston permanently because of what I still perceive as racism in education, employment, and housing.”

“Boston is pricing out people of color by the incessant building of condos that start at 1800 for a studio - forcing folx into police-controlled ghettos that are also quickly gentrifying without access to supplies necessary to survive (food and banking deserts).”

“If unaffordable housing qualifies as racism than I'd say that the way that Boston handles housing makes it very difficult to live, work, or play comfortably.”

“My other experience was when we bought our house in the '70s and later to see your white neighbor moving out one by one.”

“Major factor under this topic is housing. More housing needs to be available for low - middle income residents!”

**Representation in City Institutions**

“Until we have more African Americans, Asian Americans, and Latino Americans sitting at the decision table nothing is going to change.”

“Re-examine positions level of education and pay. Is there equity? Opportunities for growth: examine the levels of leadership and the faces you see at the top. Does it reflect the community they serve? We need QUALIFIED and diverse leadership.”

“Give People of Color a seat at the table and then actually listen to them.”

“Have a REAL professional development career path in Boston agencies for people of color.”

“Think about leadership and opportunities to engage people of color in positions of leadership, in training programs for leadership, in public policy and government, in science and healthcare.”
“In establishing policy and practice, we need to ensure the profile/diversity of Boston is included in the decision making - not a group of white deciding for people of color.”

**Jobs**

“Invest again in Vocational Schools and on the job training which leads to college credit as well as jobs.”

“This is why COVID is so deadly for us - we work the jobs that put us on the front lines but can't afford time off or treatment for underlying conditions much less a new one. We're in cramped spaces where we cannot isolate from our families because we can't afford multiple bedrooms. Racism creates the boiling pot in which we can't jump from. It's all interconnected.”

“People like myself who strived to educate ourselves and had no option to finance our goals but by borrowing end up with huge debt, and the ability to pay the debt is delay and hindered because of racism in employment particularly.”

“I am retired now but when I was working I was denied a promotion while a white person was hired from outside to do the job. To make matters worse, I had to train that person too.”

“Promote careers in health care to BPS students at every grade level”

**Organization Responses**

**Accountability**

“Accountability and evaluation of programs to determine effectiveness of stated goals and in addressing inequities.”

“In an atmosphere of ‘getting something done about the problem’ we could establish ground rules and policies that historically have no longevity in correcting the problem. Sustainability should be a priority.”

“…there needs to be in an authentic way to ensure that all the millions of dollars that are being spent in the city both publicly, both public and private dollars, trickle down to people of color and women and residents of the city…there needs to be a real way to not just track performance but also to hold contractors and developers accountable for delivering on different ordinances like the Boston resident jobs policy.”

“The City should institute accountability measures for Boston Public Schools, Police Department, Housing Authority, Planning and Development Agency, and other public agencies. Agencies should each have an ombudsman to increase access to City agencies and advocate for citizens when needed.”
“…bring various stakeholders to together in partnership to achieve this goal. If a group is formed, it should explicitly be an independent body to avoid the fear of losing their positions and hesitation that city employees may experience if something difficult or unpopular is brought to the forefront.”

**Community Support**

"A new system of “no wrong door” must be created in which any point of entry gives an individual or family access to the city’s full array of resources. This would require modifying privacy laws and data systems that contribute to fractured systems of care."

"Review existing policies and practices for disparities in utilization of or participation in the allocation of public goods and services by race/ethnicity and develop plans to remedy."

"Given that DV [domestic violence] is considered a public health concern, collaborate with BPHC Violence Prevention to ensure inclusivity of diverse Asian ethnic communities"

"Creating community spaces where women of color with mild to severe mental illness who have declined treatment due to their mental illness are safe and have the opportunity to build trust and remain safe from the potential violence they are exposed to in the larger community."

"There also needs to be a statewide education campaign to show individuals how to seal or mitigate their CORI."

"Mandating grievance procedures at all state and federally funded establishments in multiple languages - similar to the interpreter services flyer posted at all hospitals, but for grievances."

"...child care system... it’s a system that you know was in crisis long before the pandemic began, and we know that the worst consequences of the childcare crisis fall on women, especially low income women of color."

"There is a need for a strategic approach considering a wide range of public health metrics to address the community’s risk of gambling but there is also a high need for culturally appropriate treatment programs and resources. There are very few options for the Asian community currently."

"Invest in programs that aim to build wealth in historically marginalized children and families (i.e. baby bond programs, direct cash assistance, basic income, homeownership down payment match). Use the opportunity to learn about the impacts of having direct access to capital on child and parent health and well-being as a way to reimagine direct programs and services that currently keep families trapped in poverty."

"Supporting BPS homeless students with their academic, behavioral and social needs."
"In a more racially just and equitable Boston, Black and Latinx folks in Boston who face inequitable outcomes for SUD [substance use disorder] would have access to supervised consumption sites, with intensive support services to reduce overdose death and harms associated with SUDs.”

**Food**

“…address these health inequities by providing increased access to healthy, affordable foods like via Mattapan square Farmers Market…supporting local community gardens and other projects"

**Funding**

"Develop a racial equity framework for the allocation of city sponsored funding opportunities."

"Invest in prevention and treatment programs at CHCs [community health centers], faith-based and neighborhood-based organizations that target parents and caregivers of young children."

“…provide funding to City agencies and community-based organizations to address violence prevention, trauma response, and intervention strategies.”

**Housing**

"…through project-based subsidy, and through an investment that allows the developer to get subsidy that makes up the difference between the rent that is affordable to the person and the rent that the property needs."

“…prioritizing the building of more housing for low and very low income communities of color, especially including for people with histories of incarceration, disabilities, LGBTQIA+ people and those with substance use disorder who face enormous barriers to accessing safe and affordable housing."

"…the term affordable housing can feel a little broad and somewhat subjective. And for the purpose of this conversation, I’m just going to define it as the industry standard which is any opportunity or any unit that’s available to a family at 60% area median income or below. So to give a little context on that, a 3 [person] household would have to earn around $69,000 a year in order to qualify for 60%, AMI unit the rent for that two bedroom unit would be around 1700 dollars. And I don't know about you but I know plenty of people that work more than 40 hours that wouldn't be able to make that rent."

"Stop the gentrification of Boston’s neighborhoods and instead invest in communities."
**Jobs**

"Diversify police departments across cultural, ethnic and linguistic lines, at a minimum."

“Boston Public Schools should prioritize hiring more diverse teachers and create dual-enrollment programs that allow students to take college courses as credit."

"This includes more investment in the training of more behavioral health professionals of color…"

"We envision robust investment in job training/retraining for POC [people of color] experiencing homelessness, which would include more scholarships for POC experiencing homelessness to access GEDs, community college, IT training, and trade school opportunities. This would allow for a path towards dignity and self-sufficiency."

**Professional Development**

"Mandated cultural and racism training for providers (including interpreters), which also include crisis and trauma informed care through a cultural lens. Training to be vetted by culturally specific providers."

"Support tuition forgiveness initiatives for city residents of color who go into health and human services professions."

"…a method of renumeration for the expertise of community consultants. All too often bi/multilingual providers, BIPOC, LGBTQIA+, etc…. who are necessary consultants to building a more equitable system are not valued and paid for their time and expertise."

"As previously noted, people of color face higher barriers to employment given higher rates of incarceration and subsequent CORI challenges. When employment can be obtained, it is often at lower rates with little opportunity for advancement. Efforts must be increased to reduce these barriers. Such efforts include continued CORI reform that expands employment options and does not incentive employer-based discrimination."

"…a lot of the educational systems, and the training systems are very convoluted to access for immigrants and economically disadvantaged folks…So, if they need funding to get the training and the education. There are many hoops that these individuals have to jump through, they're already dealing with various issues that you know in their day to day life."

**Mental Health**

"…provide consultation and support in the development of trauma-informed, culturally responsive care."
"Communities of color must be meaningfully engaged and empowered to create and deliver appropriate behavioral health interventions. These interventions must be community driven, rather than driven by white-dominated health care systems. Such interventions must allow for provision by non-traditional workforce members who do not possess traditional credentials but do possess community credibility, lived experience and relevant skill. Traditional reimbursement mechanisms must be modified to become more inclusive of a more diverse workforce."

"…the mental health of the Asian community remains a top concern as many families live in multi-generational home with increased stress and little relief."

"But since the black youth saying they're drowning and they need help with their mental health."

"Supporting increased behavioral health resources in schools and after school programs, including extending to universal pre-k programs and connections between school and health case-based providers. We consistently hear about the need for behavioral health supports that can be accessed by after school program providers. This need is becoming increasingly urgent as many of these providers are taking on new roles as remote learning providers."

"Investment in programs and opportunities that build the resilience of youth of all ages should be a key part of the City’s work to increase racial justice and equity. In particular, increased mental health resources, including both counseling and wellness activities, offered by providers of color and more easily accessible to all citizens, is an acute need."

**Representation in Data, Services, and Leadership**

**Data**

"Qualitative data obtained from BIPOC communities in their language."

"Clear naming of disparities, identification of minority communities and disaggregated quantifiable data which represents the experiences of the diverse landscape of Boston."

"Develop better systems to capture and integrate school data, neighborhood level health and SDOH [social determinants of health] data, and health system data."

"Identify gaps related to child health and well-being. The availability of data around child health and well-being continues to be a persistent gap in our understanding about how children in our city are doing. Once we understand the gaps, use this understanding to establish and advance common agenda that benefits the well-being of all children in our city."

"…can partner with the BPHC, and leverage its research, program evaluation and analysis capabilities to better understand if the programs and services our organization delivers in the community are equitable in all aspects of our work."
"This is so important as was evident in reporting COVID19 testing data. However, for some communities, this data was not enough to provide needed information to continue the push for testing. For example, in the Mattapan community, data on the number of individuals of Haitian ethnicity would have been helpful to share with the community to support our collaborative efforts in testing. We need to refocus on the specific needs of each community."

“In our own work, we have often found it difficult to access the data and information sources that would help inform our programming, such as accessing crime data by age and location or Youth Risk Behavior Survey data by neighborhood rather than only by school. We also hear from the communities that we serve that they do not hear from schools, housing developments, planning agencies, etc. in a proactive way when there are problems or potential problems. "

"So this is offered to health professionals to doctors to other community groups where you can really understand what the data is telling you where you can provide the best response to your patients. Not only that, that the patient needs to understand what's happening."  

"There is no mention of the onslaught of direct and indirect racist and xenophobic attacks on Asians...Boston is one of the top most diverse cities in the US, there are 74+ languages spoken, of which 40%+ are Asian language and dialects. Asians are often viewed as a monolith, but are from 48 very different countries with different languages, cultures, histories and socioeconomic status."

**Services**

"Emphasize the impacts early in a child’s life as priority for policy and practice development. Consider impacts on children of color as a priority population when evaluating current policies and practices."

"Substantially expand the childcare component of the Boston City Census to collect more detailed information about child care needs and arrangements, including unpaid care labor performed in the home, with data disaggregated by specific racial and ethnic communities in the city. Translate the survey into all relevant languages, and provide resources to hire professional outreach workers to reach residents in undercounted communities."

"When City Hall decides who gets licensing, which company is allowed to move into Boston, they must view the neighborhoods as one City and provide resources equitably."

**Leadership**

"A diverse team with the understanding that Black and Brown communities are not monolithic; draw upon diversity of characteristics within communities of color that include ethnicity and not just race, immigration status, gender variance, abilities, etc."
Small Businesses

"Consider providing ‘sheltered markets’ for minority owned businesses to scale by setting aside a guaranteed percentage of procurement spend (see 2020 Black Economic Council of MA report recommendation of 10%) that would be invested in readying these businesses."

"Undertake, resource, and enforce procurement efforts at a level similar to construction targets set forth for capital projects."

"Host city sponsored opportunities for small minority and women owned businesses to connect with purchasing and procurement entities across city agencies and other community institutions."

"The Asian owned businesses, particularly ethnic owned restaurants, experienced the impact of COVID-19 earlier and more deeply because of the racialized blaming. The unemployment rate for Asian workers rose to 15% from 14.5%." 

"Many minority-owned businesses did not qualify for PPP Loans and the Center for Responsible Lending reported that upwards to 75% of Asian-owned businesses received little to no assistance."
Why We Asked

On June 12, 2020, Mayor Marty Walsh declared Racism as a Public Health Crisis and pledged funds to the Boston Public Health Commission. The Boston Public Health Commission released a Request for Information (RFI) to gain input from residents and community organizations on their experiences of racism in Boston and their vision of a Boston without racism, poverty, and other systems of oppression.

The Request for Information was published as an online form in Cabo Verde Kriolu, Chinese, English, Haitian Creole, Portuguese, Somali, Spanish, and Vietnamese. Respondents were able to answer the RFI from September 18, 2020 until October 31, 2020. In addition to the online form, residents were able to call-in to answer the RFI.

On October 18, 2020, the Boston Public Health Commission Board of Health also held a virtual assembly for residents to give testimony related to the Mayor’s Declaration. Ten testimonies were given by residents and organization representatives with over 70 participants overall. There were invited speakers and an opportunity for individuals/organizations to request to present to the Boston Public Health Commission Board of Health. These testimonies are included in the Organization Responses section of this report.

We are thankful to all who answered the RFI and we will report back regularly throughout this process.

Who Answered

The intent was to hear from Black residents and other residents of color, immigrants, and residents living in priority neighborhoods (Dorchester, East Boston, Hyde Park, Mattapan and Roxbury). We also wanted to hear from organizations that serve these populations and are based in priority neighborhoods.

Overall, we received 197 resident responses, 23 from community organizations, and 10 testimonies. We distributed the RFI among over 1000 community partner organizations and residents. Figure 1. Race shows the racial diversity of respondents.
The greatest number of responses came from all Dorchester zip codes, Jamaica Plain, Roslindale, and Roxbury. See Figure 2. Neighborhoods.

Most responses were written in English. 186 were written in English, 11 in other languages. See Figure 3. Additional Languages The majority of our respondents were between 26 and 50 years of age. See Figure 4. Age
Boston Public Health Commission

January 2021

Figure 5. Service Areas from Organizations

This chart features the service areas represented within the organization responses. The organizations’ responses reflected their own concerns and experiences, representing their clients, members, and specific services.

What You Wrote

By the Numbers

The resident RFI collected numerical data. Most respondents said that racism has affected their health. See Figure 6. We asked residents to identify their top priorities for action. Residents overwhelmingly picked housing, education, and jobs. See Figure 7.

Figure 6. Has Racism Impacted Your Health?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>Maybe</th>
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<tbody>
<tr>
<td>Perhaps</td>
<td>74%</td>
<td>10%</td>
<td>16%</td>
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</table>

Figure 7. Three Areas of Focus

<table>
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<th>Area of Focus</th>
<th>Rate Selected</th>
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<tbody>
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<td>Housing</td>
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<tr>
<td>Education</td>
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<tr>
<td>Jobs</td>
<td>140</td>
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<td>Mental Health</td>
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<td>Youth</td>
<td>100</td>
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<tr>
<td>Public Safety</td>
<td>80</td>
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<td>Access to Healthy Food</td>
<td>60</td>
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<td>Other</td>
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</tr>
<tr>
<td>Small Community Pride</td>
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</tbody>
</table>
Resident Responses

These themes are ordered based on their frequency within the open responses. Some of these quotes relate to multiple themes. We corrected minor typos and included the original language of translated quotes in parentheses. While these were the most frequent themes, residents also wrote in policy recommendations in a variety of topic areas.

Police: Residents wrote about their experiences with the police and racial profiling. Many residents wrote about the police budget and suggested redirecting some police funds to social services, often naming mental health services. Residents also expressed desire for more community policing and a greater number of Black and Latinx police officers.

Healthcare: Residents wrote about unequitable healthcare provision in Boston. They wrote about experiencing physician bias, language barriers, the financial strain of healthcare, and the lack of mental health supports in priority neighborhoods.

Persistent Sadness and Anxiety Due to Racism: Residents wrote about racism as trauma and racism creating worse physical and mental health outcomes. Residents tied racism to persistent sadness, anxiety, and poor sleep. Residents also wrote that they lost confidence in their skills because of racism.

“I’m scared. I moved into a new condo and my white neighbors have been aggressive from day 1- I’m afraid they’ll call the cops because I’m too loud one day and I could be a news story. I’m scared of cop cars on my street. I’m terrified of driving past a cop.”

“Less money towards the police - more money to mental health outreach, crisis intervention, housing!!”

“Medical care. Often black women are not taken seriously at medical appointments. I almost died because of this.”

“The ability for all to get help regardless of income.”

“Being Asian during this pandemic had not been welcoming to my own mental health. I developed anxiety from leaving the house to go to the grocery store because I received "look" from strangers.”

“I felt inferior and like I was not part of the city because of the way I have been treated at times. I was very sorry to feel that way.” (Spanish)
Data Collection and Transparency:
Residents expressed frustration with the City around frequent surveying and requests for feedback. Residents wrote in that they were unsure of what became of previous surveys and community meetings. Residents hope City leadership holds themselves accountable to the collected data from the RFI. Data collection should include more categories, including ethnicity, sexual orientation and gender identity.

Effects of Segregation/ Redlining¹:
Residents noted that lingering neighborhood inequality can be traced back to redlining and segregation. Residents expressed frustration at their neighborhoods’ food deserts, at lack of investment in minority-owned small businesses, at poor air quality and a lack of green space, among other neighborhood inequalities, and gentrification.

Subtle Exclusion: Residents wrote about feeling excluded from certain Boston neighborhoods and public spaces.

“What is the result of prior community meetings... more meetings!”

“Rating the health and happiness index for people of color.”

"We have spent the last 3 years fighting to prevent a Popeyes from opening less than a half mile from a McDonalds and a KFC in our community... This saturation of Fast Foods and junk food is prevalent in Black neighborhoods in Boston.”

“Reparations, universal income, housing for all, dismantling the harmful effects of gentrification and redlining, giving money directly to Black people and businesses.”

“I want to feel like I belong in the city of Boston; not just in my diverse Dorchester neighborhood.”

¹ Redlining A discriminatory practice by which banks, insurance companies, etc. refused or limited mortgages and loans, within specific neighborhoods to Black borrowers and other borrowers of color. Redlining also refers to discriminatory investment in neighborhoods with large populations of people of color.
Inequality amongst Boston Public Schools:
Many residents wrote about Boston Public Schools. Residents wrote about the physical infrastructure of BPS, unequal school funds, and the need for expanded curriculum in ethnic studies, Black studies, racial justice, and Boston’s history.

Housing: Residents wrote about the lack of affordable housing, displacement of Boston families of color, how cramped living conditions contributed to COVID-19 transmission in communities of color, the need for increased support for unhoused residents, and more.

Representation in City Institutions:
Residents wrote about the need for greater racial diversity in City leadership and especially for lifelong Boston residents to have leadership roles. Residents wrote that there are not enough mobility paths in City institutions.

Jobs: Residents stressed the need for job and vocational training from high school to throughout one’s twenties. Residents stressed that there are not enough jobs that match the cost of living. Residents also wrote about how discrimination at work hurt their finances and about the burden of student debt.

“I am a BPS school teacher. The way in which our school buildings have been neglected for decades is now in the spotlight because ... COVID-19 pandemic has forced us to look at it. It is obvious that the lack of care and concern is a result of systemic racism.”

“RENT IS TOO EXPENSIVE – WE CAN’T SURVIVE!!!!!! IT IS AFFECTING ALL OTHER DOMAINS OF OUR LIVES! PLEASE FIX THIS!!”

“This effort to develop policies must include people impacted by those policies.”

“Begin high school and college training of diverse young data analysts.”
Organization Responses

The request for information for community-based organizations was structured differently and included no numerical response options, only narratives. It focused on how organizations see their work listed under the Declaration strategies. Organizations responded by sharing their concerns, work in addressing racism, and/or what the City of Boston and BPHC may do to collaborate.

The organization responses include oral testimony from the Boston Public Health Commission Board of Health Assembly. The following action areas are based on specific actions organizations point to as critical:

**Accountability** – Organizations express a need to hold leadership accountable for work that addresses Racism as a Public Health Crisis. This includes the City of Boston, BPHC, and community organization leaders.

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We need to hold organizations and people accountable for their actions or non-actions in addressing racism. Provide trainings, forums, and safe spaces to have those “hard uncomfortable talks” when discussing racism.

Provide funding and technical assistance resources for organizations to develop/apply/strengthen a racial justice framework to their policy advocacy efforts.
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**Community Engagement** – Organizations stress that inviting residents to the table as partners is necessary.

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Engage communities from the very beginning. Be transparent and authentic. Communities are tired of being the last to know what is going to happen where they live. Ask the communities what they want. Take their concerns and ideas into consideration, versus those who do not live there and often just come into the community to benefit themselves.
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Community Support – Organizations identify support is necessary for community programs that serve historically underrepresented residents.

“[Include] a comprehensive approach to elder services, including programs to stem loneliness.”

“Boston should specifically invest in healthier food options for those receiving their nutrition from shelters, where currently meals served are high in processed carbohydrates and saturated fats and promote obesity and enhance cardiovascular risk.”

Fostering Trust and Empowerment – Organizations discuss the need to build trust within communities by empowering youth and adults with knowledge and opportunities to strengthen their communities.

“Increase civic engagement among youth and adults by registering voters, teaching self-efficacy skills, and helping youth understand basic civics.”

“Continue to invest in community-based organizations with proven track records of empowerment and strong curricula for youth and adult resident leadership development and organizing in key areas that shape health including housing, criminal justice, racial justice, climate justice, and food justice.”

Funding – Organizations identify key areas where the City should support with more funding or consider in new funding strategies where residents need help.

“Investing in communities looks like increasing investments to community health centers and safety net hospitals.”

“... making sure that unemployment is more available to those who cannot work due to childcare challenges that there’s some level of job protection that makes it easier for parents and caregivers to return to the workplace when they’re able to, and fighting for financial supports for families and childcare providers who are really struggling during the pandemic and supporting policy positions.”
Housing – Organizations emphasize the need to provide safe and reasonable affordable housing to all. Safe shelter is included in this area.

“... have access to systems and vouchers to aid in housing placement... leverage our skilled advocates to engage women through assertive outreach in housing contemplation and search.”

“We need investment in the production and creation of home ownership opportunities that are affordable and equitable so that folks are allowed to remain in the community and also build wealth.”

Jobs – Organizations stress more must be done to help train and provide job placement for individuals in need.

“Developing health careers training program for Boston Public School students from historically marginalized communities to pursue careers health professions tuition-free, prioritizing underserved health professions such as behavioral health.”

“... increase employment opportunities for immigrant community especially women of color, there have also been major shifts in the most in-demand positions for each industry... With overall job openings now focusing on communication, problem-solving, and technology skills, roles that were primarily filled by low-income immigrants with limited English proficiency have either been eliminated or now require significant upskilling.”

Mental Health – Organizations discuss the importance of providing more mental health services, as well as community initiatives that destigmatize mental health issues.

“Connecting Black and Brown families to mental health services, as well as marketing campaigns to break down the stigma associated with getting treatment for mental illness.”
Representation in Data, Services, and Leadership – Organizations point to the need for specific representation of ethnicities, race, and other historically underrepresented groups in data, services, and leadership.

**Data**

“... ensure a complete and regular availability of specific race and ethnic data that documents health inequities... as data is collected, it will be made available to the communities...”

“There are varying challenges and health outcomes between the many different Asian cultural groups. It is not sufficient to label all of them “Asian American.””

**Services**

“The black community would benefit greatly from treatment facilities that mirror at the [Boston Alcohol and Substance Abuse Programs] and Casa Esperanza. These facilities would need to aid and address the recovery process for individuals, families, and communities.”

**Leadership**

“... address racism in systemic and structural ways by providing leadership opportunities for people of color and immigrant community. Thus, their voice will be heard, and action will be taken to foster a more equitable society.”

**What’s Next**

The authors thank all those that responded to this request for information and to the Boston Public Health Commission Board of Health for providing guidance on the development of the request for information. An attachment with further quotes from Boston residents, particularly Black and other people of color is included. These voices on the experience of racism and a vision for a racism free Boston needs to be shared and inform planning.

Using this data in planning will be an ongoing process. A version of the report will be issued with next steps when ready. BPHC is currently working on issues that were recommended by residents and organizations such as data collection and transparency and translation. BPHC will also review recommendations related to other equitable city practices (diversity in leadership and equitable procurement) and prevention and treatment that is culturally and linguistically accessible. BPHC will also use the RFI to inform potential advocacy opportunities at the City, State and Federal levels as well as share relevant findings with other City departments and cabinets.