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**ATTN:** Lamar Joyner, County Clerk to the Board

**DATE:** July 22, 2020

**FROM:** Dr. Frank Castelblanco, Buncombe County HHS Board Chair

**RE:** Community & Partner Letters of Support – Racism as a public health and public safety crisis in Buncombe County

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**Vaya Health**  
200 Ridgefield Court, Suite 206  
Asheville, NC 28806  
1-800-893-6246  
[www.vayahealth.com](http://www.vayahealth.com)

July 20, 2020

Via Electronic Mail Only (Lamar.Joyner@buncombecounty.org)

Buncombe County Board of Commissioners  
Attention: Lamar Joyner, Clerk to the Board  
200 College Street, Suite 300  
Asheville, NC 28801

RE: Buncombe County Community Health Improvement Process (CHIP) Letter of Support

Dear Buncombe County Board of Commissioners:

As a member of the CHIP Advisory Council, Vaya Health joins with our CHIP partners to call upon the Buncombe County Board of Commissioners (BOC) to issue a proclamation declaring racism as a public health crisis in Buncombe County. As the BOC is aware, the Buncombe County Health and Human Services (HHS) Board unanimously passed a proclamation on June 26, 2020 that asserts this and describes action steps the HHS Board will take to advance racial equity and justice in Buncombe County. Vaya supports this proclamation and further supports the larger efforts of the American Public Health Association to name racism as a public health crisis across the nation because racism harms people's physical and mental health.

As a local management entity/ managed care organization responsible for managing publicly-funded mental health, intellectual/ developmental disabilities and substance use recovery services in a 22-county region that includes Buncombe County, Vaya is acutely aware of the interconnected ways societies foster racial discrimination in health care and related social determinants (including but not limited to housing), and how this discrimination leads to inequities in health opportunities, conditions, and outcomes.

Vaya supports communities across the country and all over the world that are coming together as a movement seeking meaningful action to address the experiences of Black, Indigenous, People of Color and other groups (including the LGBTQ community and persons with disabilities) that have suffered from discrimination. We are aware that COVID-19 has amplified existing health inequities, exacerbating the avoidable disparities in health conditions, opportunities and outcomes between community members and groups because of the cumulative stressors, trauma, and unequal treatment caused by racism and other forms of discrimination. Vaya has already begun to take concrete steps to address health disparities within the populations we serve.

At Vaya, we recognize the need to collaboratively address systemic racism in order to advance the health and wellbeing of our entire community. As community leaders, our integrity will determine the stand we take today, tomorrow and the future. **We ask that you, the Buncombe County Board of Commissioners, use your leadership in our community to officially name racism as a public health**



56 Walton St  
Asheville, NC 28801

**Mailing address:**

P.O. Box 448  
Asheville, NC 28802

Web site: [www.abipa.org](http://www.abipa.org)

Phone: (828) 251-8364

Fax: (828) 251-8365

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Francisco Castelblanco, DNP, RN

JéWana Grier-McEachin  
*Executive Director*

Kathey Avery, RN BSN  
Director of Clinical and  
Community Connections

Dear Buncombe County Board of Commissioners:

The Asheville Buncombe Institute of Parity Achievement implore that you name racism as a public health crisis in Buncombe County. As you know on June 26, 2020, the Buncombe County Health and Human Services Board passed a proclamation that asserts this and describes action steps the board will take to advance racial equity and justice in our county. We have been advocating for a holistic approach to parity since our inception in 2004 and are encouraged by the current ground swell of support across the country to implement a sizable systemic shift that promises to be the largest movement of this century. There are many forms and manifestations of racism (including individual, interpersonal, institutional and systemic). As an organization and a part of the larger collective, we support focusing this advocacy effort specifically on addressing institutional and structural racism: the interconnected ways societies foster racial discrimination in housing, education, employment, earnings, benefits, credit, media, health care, and criminal justice that lead to inequities in education, employment, justice, and health opportunities, conditions, and outcomes ([Bailey et al., 2017](#)).

With the most recent national coverage highlighting our City's landmark stand around reparations, this is the optimum time for the County to support through intentionally impacting the future of our city, region and country as a leader of not just naming the problem but working to eliminate the problem by intentionally creating an equitable economic ecosystem through policy and practice.

Other communities across the country are coming together, unifying in the call to end racial injustice in all systems, emerging as a movement that demands we take meaningful action to address the experiences of Black, Indigenous, People of Color (BIPOC) without delay. COVID-19 has amplified existing health inequities, exacerbating the unjust and avoidable disparities in health conditions, opportunities and outcomes between community members and groups because of the cumulative stressors, trauma, and unequal treatment caused by racism.

Buncombe County has a deeply rooted history of institutional and systemic racism that has contributed to persistent and often increasing racial inequities in health outcomes and connected social determinants. ABIPA recognizes and fully supports solutions to urgently and collaboratively address systemic racism in order to advance the health and wellbeing of our entire community.

There is significant work happening in our community to undo racism and discrimination. As community leaders, our integrity will determine the stand we take today, tomorrow and the future. We have an obligation to speak out against institutional and systemic racism and social injustices. In the words of Dr. Martin Luther King, Jr.: *"Injustice anywhere is a threat to justice everywhere ... The ultimate tragedy is not the oppression and cruelty by the bad people but the silence over that by the good people."*

**We now ask that you, the Buncombe County Board of Commissioners, use your leadership in our community to officially name racism as a public health crisis in our County.** We ask you to work with the County Manager and staff on recognizing and rectifying historical injustices, identifying and changing policies that uphold the impact of structural racism, and allocating funding that builds on community assets and begins to repair the damage that racism causes in our community. Please join us in recognizing this incredible crisis in order to ensure sustained focus on dismantling racism and building a more equitable and just society for all.

In Health,

  
JéWana Grier-McEachin  
Executive Director

July 20, 2020

Dear Buncombe County Board of Commissioners:

We, the leadership team for the Buncombe Aging Services Alliance, urgently call upon you to name racism as a public health crisis in Buncombe County. On June 26, 2020, the Buncombe County Health and Human Services Board passed a proclamation that asserts this and describes action steps the board will take to advance racial equity and justice in our county. There are many forms and manifestations of racism (including individual, interpersonal, institutional and systemic). We are focusing this advocacy effort specifically on addressing institutional and structural racism: the interconnected ways societies foster racial discrimination in housing, education, employment, earnings, benefits, credit, media, health care, and criminal justice that lead to inequities in education, employment, justice, and health opportunities, conditions, and outcomes ([Bailey et al., 2017](#)).

Communities across the country are coming together, unifying in the call to end racial injustice in all systems, emerging as a movement that demands we take meaningful action to address the experiences of Black, Indigenous, People of Color (BIPOC) without delay. COVID-19 has amplified existing health inequities, exacerbating the unjust and avoidable disparities in health conditions, opportunities and outcomes between community members and groups because of the cumulative stressors, trauma, and unequal treatment caused by racism.

Buncombe County has a deeply rooted history of institutional and systemic racism that has contributed to persistent and often increasing racial inequities in health outcomes and connected social determinants. We, Aging Services providers, recognize the need to urgently and collaboratively address systemic racism in order to advance the health and wellbeing of our entire community.

There is significant work happening in our community to undo racism and discrimination. As community leaders, our integrity will determine the stand we take today, tomorrow and the future. We have an obligation to speak out against institutional and systemic racism and social injustices. In the words of Dr. Martin Luther King, Jr.: *"Injustice anywhere is a threat to justice everywhere ... The ultimate tragedy is not the oppression and cruelty by the bad people but the silence over that by the good people."*

**We now ask that you, the Buncombe County Board of Commissioners, use your leadership in our community to officially name racism as a public health crisis in our County.** We ask you to work with the County Manager and staff on recognizing and rectifying historical injustices, identifying and changing policies that uphold the impact of structural racism, and allocating funding that builds on community assets and begins to repair the damage that racism causes in our community. Please join us in recognizing this incredible crisis in order to ensure sustained focus on dismantling racism and building a more equitable and just society for all.

In solidarity,

Buncombe Aging Services Alliance (BASA) Leadership Team

Joey Abel, Social Worker, Premier Home Health Care Services, Inc.

Heather Bauer, Executive Director, Council on Aging of Buncombe County

Alison Climo, Age-friendly Buncombe County Coordinator

Vicki Jennings, Mountain Mobility Manager

Rachel Miller, Executive Director, DayStay Adult Day Services

Cori Search, Long Term Care Regional Ombudsman, Area Agency on Aging at Land of Sky Regional Council

Debbie Sprouse, Executive Director, Meals on Wheels

Stephanie Stewart, Aging Services Specialist, Area Agency on Aging at Land of Sky Regional Council

Jen Teague, Aging and Adult Services Program Manager, Buncombe Health and Human Services

LeeAnne Tucker, Executive Director, Area Agency on Aging at Land of Sky Regional Council

Jessica Whitehill, Executive Director, Jewish Family Services of WNC

Elizabeth Williams, Executive Director, MountainCare



Mountain Area Health Education Center, Inc.

July 15, 2020

Dear Buncombe County Board of Commissioners:

The Mountain Area Health Education Center, Inc. (MAHEC), supports the recent proclamation of the Buncombe County Health and Human Services Board declaring racism as a public health crisis. We believe it would be a step in the right direction to acknowledge this proclamation and then exert every effort towards measurable solutions.

Our healthcare providers, public health scientists, mental health providers, nurses, and administrators are all too aware of race-based disparities in health and social outcomes. We also sadly acknowledge that even in our own professions, historically and currently, we have not given every effort and applied every skill towards contributing to the solutions. Our failure to act has contributed to the continuance of a system that does not ensure that every Buncombe County resident has access to physical safety, health and well-being, stable housing, educational and economic opportunity, and justice and protection under the law.

MAHEC, as the region's academic health center and a safety-net provider, has been working with local partners to address these disparities in a variety of areas including COVID-19, maternal and infant outcomes, chronic disease management, interpersonal violence, and other social determinants of health. But these and other issues persist.

Consider that in Buncombe County:

- Black babies are **four times more likely to die** before their first birthday than White babies
- Hispanic residents make up **25% of COVID-19 cases**, but less than 7% of our population
- Black residents **die nearly 6 years earlier** than White residents
- **36% of Hispanic residents** and **27% of Black residents** live in poverty, compared to 13% of White residents
- **37% of Black students** grades 3-8 are proficient in reading, compared to 70% of White students

MAHEC commits to partnership in this effort to combat racism. We will offer our time and effort in programs that upend structural systems and traditions that perpetuate health disparities. We know we will not get it right every time, but our goal is to be open to correction and redirection.



As an immediate start, we pledge to:

**Listen** to make sure we understand the issues

**Learn** and change our strategy when facts show us that our current approach isn't working

**Utilize** our organizational capacity and influence to make real changes

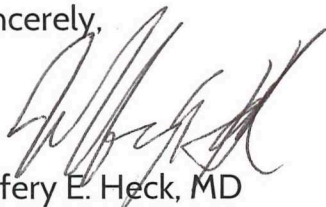
We will:

- Support the hiring and training of ten community health workers within agencies that have been most successful at working in marginalized communities, resulting in better access to care for those with chronic conditions
- Use our Department of Psychiatry to train and support twelve school-based mental health providers in schools with the greatest need
- Direct recruiting efforts to seek out Black and Brown faculty, residents, students, and staff into MAHEC so that our organization reflects the racial makeup of Western North Carolina
- Continue to recruit and train Black and Brown community doulas as one strategy to help eliminate the disparity in infant mortality
- Develop support groups which listen, understand, and mentor Black and Brown faculty, residents, and students once they come to work or train at MAHEC
- Set metrics to quarterly measure our progress in eliminating racial disparities in health outcomes, particularly those conditions that disproportionately affect people of color

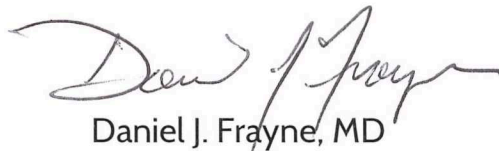
There are many more ways to eliminate racism than these items, but all of them will take the dedication of time, engagement, and creativity. We pledge to be a part of the solution.

We look forward to continuing to partner with you on this important work.

Sincerely,



Jeffery E. Heck, MD  
Chief Executive Officer



Daniel J. Frayne, MD  
President

JEH/yp



#### 2020-2021 Officers

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MAHEC

**April Wright**  
Buncombe County Schools

**Carmen Ybarra**  
Just Economics

#### Executive Director

**Amy Barry**

July 15, 2020

Dear Buncombe County Board of Commissioners:

We, Buncombe Partnership for Children and a member of Buncombe CHIP, urgently call upon you to name racism as a public health crisis in Buncombe County. On June 26, 2020, the Buncombe County Health and Human Services Board passed a proclamation that asserts this and describes action steps the board will take to advance racial equity and justice in our county. There are many forms and manifestations of racism (including individual, interpersonal, institutional and systemic). We are focusing this advocacy effort specifically on addressing institutional and structural racism: the interconnected ways societies foster racial discrimination in housing, education, employment, earnings, benefits, credit, media, health care, and criminal justice that lead to inequities in education, employment, justice, and health opportunities, conditions, and outcomes ([Bailey et al., 2017](#)).

Communities across the country are coming together, unifying in the call to end racial injustice in all systems, emerging as a movement that demands we take meaningful action to address the experiences of Black, Indigenous, People of Color (BIPOC) without delay. COVID-19 has amplified existing health inequities, exacerbating the unjust and avoidable disparities in health conditions, opportunities and outcomes between community members and groups because of the cumulative stressors, trauma, and unequal treatment caused by racism.

Buncombe County has a deeply rooted history of institutional and systemic racism that has contributed to persistent and often increasing racial inequities in health outcomes and connected social determinants. As just one example, births to Black mothers in Buncombe County are more likely to be Pre-Term (18.3% versus 9.4%) and have a Very Low Birthweight (4.5% versus 1.2%) compared to births to White mothers (E. Olson, CHIP). We, Buncombe Partnership for Children, recognize the need to urgently and collaboratively address systemic racism in order to advance the health and wellbeing of our entire community.

There is significant work happening in our community to undo racism and discrimination. As community leaders, our integrity will determine the stand we take today, tomorrow and the future. We have an obligation to speak out against institutional and systemic racism and social injustices. In the words of Dr. Martin Luther King, Jr.: *"Injustice anywhere is a threat to justice everywhere ... The ultimate tragedy is not the oppression and cruelty by the bad people but the silence over that by the good people."*

**We now ask that you, the Buncombe County Board of Commissioners, use your leadership in our community to officially name racism as a public health crisis in our County.** We ask you to work with the County Manager and staff on recognizing and rectifying historical injustices, identifying and changing policies that uphold the impact of structural racism, and allocating funding that builds on community assets and begins to repair the damage that racism causes in our community. Please join us in



**Supporting Children's First 2,000 Days**

2229 Riverside Drive, Asheville, NC 28804 | 828.285.9333 | [www.BuncombePFC.org](http://www.BuncombePFC.org)



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**Karen Miller Cowan**  
Brandi Nichole Family Enrichment  
Center

**Jewel Tavener**  
Community Volunteer

**Dr. Evodie Versulien**  
MAHEC

**April Wright**  
Buncombe County Schools

**Carmen Ybarra**  
Just Economics

#### Executive Director

**Amy Barry**

recognizing this incredible crisis in order to ensure sustained focus on dismantling racism and building a more equitable and just society for all.

In solidarity,  
Amy Barry, Executive Director  
Buncombe Partnership for Children



**Supporting Children's First 2,000 Days**

2229 Riverside Drive, Asheville, NC 28804 | 828.285.9333 | [www.BuncombePFC.org](http://www.BuncombePFC.org)



Human Relations Associates, Inc.  
Judith Mishkin Miller, LCSW, BCD  
15 Audubon Drive  
Asheville, NC 28804  
828-658-3409

Dear Buncombe County Board of Commissioners:

I, Judith Mishkin Miller, LCSW, BCD, urgently call upon you to name racism as a public health crisis in Buncombe County. On June 26, 2020, the Buncombe County Health and Human Services Board passed a proclamation that asserts this and describes action steps the board will take to advance racial equity and justice in our county. There are many forms and manifestations of racism (including individual, interpersonal, institutional and systemic). We are focusing this advocacy effort specifically on addressing institutional and structural racism: the interconnected ways societies foster racial discrimination in housing, education, employment, earnings, benefits, credit, media, health care, and criminal justice that lead to inequities in education, employment, justice, and health opportunities, conditions, and outcomes ([Bailey et al., 2017](#)).

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Buncombe County has a deeply rooted history of institutional and systemic racism that has contributed to persistent and often increasing racial inequities in health outcomes and connected social determinants. I recognize the need to urgently and collaboratively address systemic racism in order to advance the health and wellbeing of our entire community.

There is significant work happening in our community to undo racism and discrimination. As community leaders, our integrity will determine the stand we take today, tomorrow and the future. We have an obligation to speak out against institutional and systemic racism and social injustices. In the words of Dr. Martin Luther King, Jr.: *"Injustice anywhere is a threat to justice everywhere ... The ultimate tragedy is not the oppression and cruelty by the bad people but the silence over that by the good people."*

**We now ask that you, the Buncombe County Board of Commissioners, use your leadership in our community to officially name racism as a public health crisis in our County.** We ask you to work with the County Manager and staff on recognizing and rectifying historical injustices, identifying and changing policies that uphold the impact of structural racism, and allocating funding that builds on community assets and begins to repair the damage that racism causes in our community. Please join us in recognizing this incredible crisis in order to ensure sustained focus on dismantling racism and building a more equitable and just society for all.

*Bailey, Z. D., Krieger, N., Agénor, M., Graves, J., Linos, N., & Bassett, M. T. (2017). Structural racism and health inequities in the USA: evidence and interventions. The Lancet, 389(10077), 1453-1463.*

In solidarity,  
Judith Mishkin Miller, LCSW, BCD

July 8, 2020

Dear Buncombe County Board of Commissioners:

I urgently call upon you to name racism as a public health crisis in Buncombe County. On June 26, 2020, the Buncombe County Health and Human Services Board passed a proclamation that asserts this and describes action steps the board will take to advance racial equity and justice in our county. There are many forms and manifestations of racism (including individual, interpersonal, institutional and systemic). We are focusing this advocacy effort specifically on addressing institutional and structural racism: the interconnected ways societies foster racial discrimination in housing, education, employment, earnings, benefits, credit, media, health care, and criminal justice that lead to inequities in education, employment, justice, and health opportunities, conditions, and outcomes ([Bailey et al., 2017](#)).

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In solidarity,

Judy Maris, member *Story Medicine for Racial Healing Learning Community*  
113 College Circle  
Swannanoa, NC 28778

*Bailey, Z. D., Krieger, N., Agénor, M., Graves, J., Linos, N., & Bassett, M. T. (2017). Structural racism and health inequities in the USA: evidence and interventions. The Lancet, 389(10077), 1453-1463.*

Dear Buncombe County Board of Commissioners:

As a member of Racial Justice Coalition representing Avery Health Education & Consulting LLC (Avery HEC), I urgently call upon you to name racism as a public health crisis in Buncombe County. On June 26, 2020, the Buncombe County Health and Human Services Board passed a proclamation that asserts this and describes action steps the board will take to advance racial equity and justice in our county. There are many forms and manifestations of racism (including individual, interpersonal, institutional and systemic).

As the Director of Clinical & Community Connections for ABIPA we are focusing this advocacy effort specifically on addressing institutional and structural racism: the interconnected ways societies foster racial discrimination in housing, education, employment, earnings, benefits, credit, media, health care, and criminal justice that lead to inequities in education, employment, justice, and health opportunities, conditions, and outcomes ([Bailey et al., 2017](#)).

Communities across the country are coming together, unifying in the call to end racial injustice in all systems, emerging as a movement that demands we take meaningful action to address the experiences of Black, Indigenous, People of Color (BIPOC) without delay. COVID-19 has amplified existing health inequities, exacerbating the unjust and avoidable disparities in health conditions, opportunities and outcomes between community members and groups because of the cumulative stressors, trauma, and unequal treatment caused by racism.

Buncombe County has a deeply rooted history of institutional and systemic racism that has contributed to persistent and often increasing racial inequities in health outcomes and connected social determinants. In **Buncombe County**, life expectancy for 2011-2013 was 79.2 years overall (79.5 for whites and 74.4 for African Americans). While the overall life expectancy did not change from the last three years aggregated data, the **life expectancy for African Americans dropped from 75.5 years from 2010-2012 to 74.4 for 2011-2013. The report shows it will be essential to keep health equity as a central theme in our community health improvement strategies.**

Avery HEC recognizes the need to urgently and collaboratively address systemic racism in order to advance the health and wellbeing of our entire community.

There is significant work happening in our community to undo racism and discrimination. As community leaders, our integrity will determine the stand we take today, tomorrow and the future. We have an obligation to speak out against institutional and systemic racism and social injustices. In the words of Dr. Martin Luther King, Jr.: *"Injustice anywhere is a threat to justice everywhere ... The ultimate tragedy is not the oppression and cruelty by the bad people but the silence over that by the good people."*

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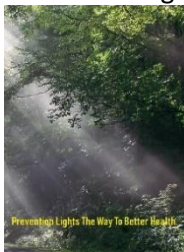
In solidarity,

**Kathey Avery RN, BSN**

Owner

Avery Health Education and Consulting [www.averyhec.com](http://www.averyhec.com).

Prevention Lights the Way to Better Health







Dear Buncombe County Board of Commissioners:

We, members of Mothering Asheville, urgently call upon you to name racism (including individual, interpersonal, institutional and systemic) as a public health crisis in Buncombe County. On June 26, 2020, the Buncombe County Health and Human Services Board passed a proclamation that asserts this and describes action steps the board will take to advance racial equity and justice in our county. Locally and across the country, people are rising up and taking to the streets to protest the brutal killings of George Floyd, Breonna Taylor, Ahmaud Arbery, Tony McDade, Nina Pop, and so many other Black people. In the midst of a viral pandemic that is disproportionately causing sickness and death in Black, Indigenous, and People of Color (BIPOC) communities, these tragic murders highlight what we know to be true in our community as well: racism is killing us and tearing our communities apart.

Health inequities are pronounced, persistent and pervasive, and permeate every area of society. COVID-19 has amplified existing health inequities, exacerbating the unjust and avoidable disparities in health conditions, opportunities and outcomes between community members and groups because of the cumulative stressors, trauma, and unequal treatment caused by racism. Even before COVID-19 hit our community, black babies in Buncombe County were 4 times more likely to die in the first year of life than white babies.

Mothering Asheville was established as a response to this critical need, bringing together clinical providers, community resident groups, nonprofits, advocacy agencies and others committed to fostering health equity. Mothering Asheville has been working to eliminate inequities in infant mortality in Buncombe County by 2027. Mothering Asheville works with partners to build community capacity, create clinical shifts, communicate strategically, and advocate for institutional policies that address structural racism, implicit bias, access to care, economic and other social factors that influence health. The local inequities in birth outcomes and associated social determinants of health reveal the need for clinical-community collaborations to support pregnant Black women, their babies, and BIPOC communities through their lifespans.

Around the world, infant mortality rates are seen as a key measure of how healthy a community is, because we know that so much more goes into this than just prenatal care. Infant mortality rates are considered the “canary in the coal mine” for the health of a community as a whole. As Dr. Arthur James, one of our nation’s leaders in combating infant mortality describes it: *“Infant Mortality is multi-factorial – these rates reflect a society’s commitment to the provision of: high quality health care; adequate food and good nutrition; safe and stable housing; a healthy psychological and physical environment; sufficient income to prevent impoverishment; ... As such, our ability to prevent infant deaths and to address longstanding disparities in infant mortality rates between population groups is a barometer of our society’s commitment to the health and well-being of all women, children and families.”*

As we know there is also a trend across the country where we are seeing a rising maternal death rate and an increasing inequity between Black and white birthing people. The U.S. maternal mortality rate has

more than doubled from **10.3** per 100,000 live births in 1991 to **23.8** in 2014. In that, African-American, Native American and Alaska Native women die of pregnancy-related causes at a rate about three times higher than those of white women. Currently, we do not have up to date maternal mortality data but assume that our data falls in line with the national trend.

We have long recognized that the persistent and increasing racial inequities in birth outcomes and infant mortality in Buncombe County are something we must address collaboratively for the health and wellbeing of our entire community. We are committed to partnering with others across our community to address structural racism, implicit bias, and access to care to improve equity in birth outcomes in our community

To be clear, the complex historical and present day impacts of racism injure all of us. In the words of former American Public Health Association President and national expert on racism's impact on public health, Camara P. Jones: *"Racism is sapping the strength of our whole society through the waste of human resources, and we must acknowledge this loss... and then we must be very deliberate and focused on valuing all individuals and populations equally, recognizing and rectifying historical injustices and providing resources according to need."*

There is much work already happening in our community to undo racism and address anti-blackness. As community leaders, our integrity will determine the stand we take today, tomorrow and the future. We have an obligation to speak out against institutional and systemic racism and social injustices. We cannot sit by and be silent when unjust acts, violence and health inequities continue to permeate our society. We cannot limit our focus on strategies directed toward reducing existing health inequities; we must also focus on changing the institutions, policies, and practices that drive them. We therefore stand in solidarity with partners across our community calling for peace, justice, and systemic changes where BIPOC people will be governed and treated fairly.

**We now ask that you, the Buncombe County Board of Commissioners, use your leadership in our community to officially name racism as a public health crisis in our County.** We ask you to work with the County Manager and staff on recognizing and rectifying historical injustices, identifying and changing policies that uphold the impact of structural racism, and allocating funding that builds on community assets and begins to repair the damage that racism causes in our community. Please join us in recognizing this incredible crisis in order to ensure sustained focus on dismantling racism and building a more equitable and just society for all.

Sincerely,  
The Mothering Asheville Partners



Dear Buncombe County Board of Commissioners:

Pisgah Legal Services urgently calls upon you to designate racism as a public health crisis in Buncombe County.

There are many forms and manifestations of racism, including individual, interpersonal, institutional, and systemic. Today we focus specifically on institutional and structural racism, and the interconnected ways societies foster racial discrimination in housing, education, employment, earnings, benefits, credit, media, health care, and criminal justice, leading to inequities in education, employment, justice, and in health opportunities, conditions, and outcomes ([Bailey et al., 2017](#)).

Buncombe County has a deeply rooted history of institutional and systemic racism that contributes to persistent and increasing racial inequities in health outcomes and connected social determinants. Recent poor police response to protests demanding racial justice in Asheville drew national attention, and further impedes local relationships between communities of color and our local government. At this pivotal moment in history, silence is complicity: Citizens of color must know that Buncombe County takes systemic racism seriously.

On Tuesday, March 10, Governor Roy Cooper issued the first executive order declaring a State of Emergency as part of North Carolina's COVID-19 response plan. COVID-19 has amplified existing health inequities, worsening unjust and avoidable disparities in health outcomes. Underlying conditions, higher rates of poverty, poor housing, and lack of access to quality medical care are all compounded by the daily life stressors of racism in communities of color.

On June 26, 2020, the Buncombe County Health and Human Services Board passed a proclamation declaring racism a public health issue—one that exacerbates every other public health issue. The proclamation outlined action steps to advance racial equity and justice in Buncombe county. We call upon you, Buncombe County Board of Commissioners, to act.

Pisgah Legal Services' mission positions us as witnesses to systems routinely failing people of color, often experiencing generational impacts of poverty. The data is devastating:

- Over 25% of people screened for our services and affected by COVID-19 are people of color
- Of those screened who had tested positive for COVID-19, over 70% are people of color
- In Buncombe County during the month of June 2020 alone there was a nearly doubled demand for assistance in accessing health insurance through the Affordable Care Act because of residents losing access to all other health insurance options during the pandemic

Dear Buncombe County Board of Commissioners:

We, members of Resources for Resilience™, urgently call upon you to name racism as a public health crisis in Buncombe County. On June 26, 2020, the Buncombe County Health and Human Services Board passed a proclamation that asserts this and describes action steps the board will take to advance racial equity and justice in our county. There are many forms and manifestations of racism (including individual, interpersonal, institutional, and systemic). We are focusing this advocacy effort specifically on addressing institutional and structural racism: the interconnected ways societies foster racial discrimination in housing, education, employment, earnings, benefits, credit, media, health care, and criminal justice that lead to inequities in education, employment, justice, and health opportunities, conditions, and outcomes ([Bailey et al., 2017](#)).

Communities across the country are coming together, unifying in the call to end racial injustice in all systems, emerging as a movement that demands we take meaningful action to address the experiences of Black, Indigenous, People of Color (BIPOC) without delay. COVID-19 has amplified existing health inequities, exacerbating the unjust and avoidable disparities in health conditions, opportunities and outcomes between community members and groups because of the cumulative stressors, trauma, and unequal treatment caused by racism.

Buncombe County has a deeply rooted history of institutional and systemic racism that has contributed to persistent and often increasing racial inequities in health outcomes and connected social determinants. *Resources for Resilience™* recognizes the need to urgently and collaboratively address systemic racism in order to advance the health and wellbeing of our entire community.

There is significant work happening in our community to undo racism and discrimination. As community leaders, our integrity will determine the stand we take today, tomorrow and the future. We have an obligation to speak out against institutional and systemic racism and social injustices. In the words of Dr. Martin Luther King, Jr.: *"Injustice anywhere is a threat to justice everywhere ... The ultimate tragedy is not the oppression and cruelty by the bad people but the silence over that by the good people."*

**We now ask that you, the Buncombe County Board of Commissioners, use your leadership in our community to officially name racism as a public health crisis in our County.** We ask you to work with the County Manager and staff on recognizing and rectifying historical injustices, identifying and changing policies that uphold the impact of structural racism, and allocating funding that builds on community assets and begins to repair the damage that racism causes in our community. Please join us in recognizing this incredible crisis in order to ensure sustained focus on dismantling racism and building a more equitable and just society for all.

In solidarity,  
Resources for Resilience™

- 25.5% of recorded Buncombe County COVID-19 cases are in Hispanic people, while the Hispanic population accounts for just 4.7% of the residents of Buncombe county (Buncombe County Dashboard, 7/15/2020). This makes Latinx residents of Buncombe county five times more likely to be infected by COVID-19 ([Citizen Times, 5/11/2020](#)).
- In Buncombe County, federal and local housing, lending, development and real estate policies and practices systemically broke down African American communities and created neighborhoods rife with inequalities related to security, safety and access to resources and subsequently economic, educational and health conditions (Nickoloff, 2015). Health outcomes associated with residential segregation documented among Black Americans include adverse birth outcomes, increased exposure to air pollutants, shorter life span, increased risk of chronic disease, and increased rates of homicide and other crime (Bailey et al., 2017), adverse cardiovascular outcomes, increased body mass index (BMI) and incidence of obesity, hypertension and nighttime ambulatory blood pressure, engagement in high-risk behaviors, alcohol use and misuse, and poor sleep (Williams et al., 2019).
- Reardon, Kalogrides and Shores (2019) researched achievement gaps between White and Black Students in metropolitan schools across the nation and found Asheville City Schools as having the fifth largest studied, with a gap of over 1.5. In 2017, only 35.1% of Black students in grades 3-8 scored proficient for reading at their grade level and 31.8% proficient in mathematics compared to 70.7% of White students for reading and 67.5% for math (Syneva, 2017). Among Black residents of Buncombe County, High school graduate (includes equivalency) represents the largest share (34.6%) of educational attainment; among White residents, Bachelor's degree or higher represents the largest share (37.3%) (Syneva, 2017). Failure to complete high school is associated with between 23% and 81% greater likelihood of death per year as compared with those who graduate (Galea, Tracy, Hoggatt, DiMaggio, and Karpati, 2011).
- In 2016, 13.7% of Whites experienced poverty in Buncombe compared to 27.2% of Blacks and 36.4% of Hispanics (CHA Data, 2019). The average per capita income for Whites was \$28,480 compared with \$15,335 for Blacks and \$13,121 for Hispanics (CHA Data, 2019).
- Life expectancy is 5.9 years lower for Black residents of Buncombe County (73.4 years) compared to White residents (79.3 years) (Syneva, 2017). Black babies are at 4 times higher risk for dying before their first birthday than White babies (North Carolina State Center for Health Statistics, 2019). Death rates are higher for Black residents of Buncombe County compared to White residents across many major causes. Overall, the rate for all causes is 38% higher for Blacks (Syneva, 2017).

Pisgah Legal Services recognizes the need to address systemic racism urgently and collaboratively to advance the health and wellbeing of our entire community. In furtherance of this goal, **we ask that you, the Buncombe County Board of Commissioners, use your leadership in our community to officially declare racism a public health crisis in Buncombe County.** Systems of oppression must be dismantled; citizens deserve an equitable and just society in which to thrive.

Yours in action and solidarity,

Pisgah Legal Services

*Standing for Justice and Dignity since 1978.*

*Asheville | Brevard | Hendersonville | Marshall | Rutherfordton | Burnsville*

P.O. Box 2276 | Asheville, NC 28802 | [www.pisgahlegal.org](http://www.pisgahlegal.org) | phone 828.253.0406 | fax 828.252.8927





**crisis in Buncombe County.** In turn, we commit to working with County Manager Avril Pinder, Assistant County Manager Dakisha Wesley (a member of the Vaya Health Board of Directors) and our CHIP partners to ensure that Vaya Health fully supports, through its actions, decisions, policies and funding priorities, community efforts toward dismantling racism and building a more equitable and just society for all.

Respectfully,

A handwritten signature in dark ink, appearing to read 'B. Ingraham', with a long horizontal stroke extending to the right.

Brian Ingraham, MSW, Chief Executive Officer

Rhonda Cox, HSP-PA, Chief Population Health Officer and CHIP Advisory Council Member

Tracy Hayes, JD, CHC, General Counsel and Chief Compliance Officer

Larry Hill, Chief Financial Officer

Craig Martin, M.D., F.A.P.A., Chief Medical Officer

Robert Webb, Chief Information Officer

cc: CHIP Advisory Council members via [Zo.Mpofu@buncombecounty.org](mailto:Zo.Mpofu@buncombecounty.org)  
Rick French, Vaya Health Board Chair  
Vaya Health Diversity & Inclusion Committee



Dear Buncombe County Board of Commissioners:

I am writing to ask you to name racism as a public health crisis in Buncombe County. On June 26, 2020, the Buncombe County Health and Human Services Board passed a proclamation that asserts this and describes action steps the board will take to advance racial equity and justice in our county.

As the CEO of the Western Carolina Medical Society, I have witnessed the health consequences of racism across Western North Carolina families and communities. Since 1996, we have worked directly with low income, uninsured Black and LatinX patients through WCMS' Project Access, and since 2005 through the WCMS Interpreter Network. We have experienced first-hand that racism negatively influences the health and well-being of individuals of all ages. The consequences of racism ultimately disadvantage our entire society. The [Western Carolina Medical Society's Statement on Racism as a Public Health Crisis](#) explains that structural and individual racism directly causes health disparities, comorbidities, chronic stress, and early death among Black, Indigenous, People of Color (BIPOC), their families, and their communities.

There are many forms and manifestations of racism (including individual, interpersonal, institutional and systemic). We are focusing this advocacy effort specifically on addressing institutional and structural racism: the interconnected ways societies foster racial discrimination in housing, education, employment, earnings, benefits, credit, media, health care, and criminal justice that lead to inequities in education, employment, justice, and health opportunities, conditions, and outcomes. Communities across the country are coming together, unifying in the call to end racial injustice in all systems, emerging as a movement that demands we take meaningful action to address the experiences of BIPOC without delay. COVID-19 has amplified existing health inequities, exacerbating the unjust and avoidable disparities in health conditions, opportunities and outcomes between community members and groups because of the cumulative stressors, trauma, and unequal treatment caused by racism.

Buncombe County has a deeply rooted history of institutional and systemic racism that has contributed to persistent and often increasing racial inequities in health outcomes and connected social determinants. We at the Western Carolina Medical Society recognize the need to urgently and collaboratively address systemic racism in order to advance the health and wellbeing of our entire community. Substantial investments in dismantling structural racism are required to facilitate the societal shifts necessary for optimal health in the United States and right here in Buncombe County. There is significant work happening in our community to undo racism and discrimination. As community leaders, our integrity will determine the stand we take today, tomorrow and the future. We have an obligation to speak out against institutional and systemic racism and social injustices. In the words of Dr. Martin Luther King, Jr.: "Injustice anywhere is a threat to justice everywhere ... The ultimate tragedy is not the oppression and cruelty by the bad people but the silence over that by the good people."

We now ask that you, the Buncombe County Board of Commissioners, use your leadership in our community to officially name racism as a public health crisis in our County. We ask you to work with the County Manager and staff on recognizing and rectifying historical injustices, identifying and changing policies that uphold the impact of structural racism, and allocating funding that builds on community assets and begins to repair the damage that racism causes in our community. Please join us in recognizing this urgent crisis in order to ensure sustained focus on dismantling racism and building a more equitable and just society for all.

With appreciation,  
Miriam Schwarz, CEO  
Western Carolina Medical Society

July 13<sup>th</sup>, 2020

Dear Buncombe County Board of Commissioners:

As public health educators and members of the Buncombe County community, we urgently call upon you to name racism as a public health crisis in Buncombe County. On June 26, 2020, the Buncombe County Health and Human Services Board passed a proclamation that asserts this and describes action steps the board will take to advance racial equity and justice in our county. We are focusing this advocacy effort specifically on addressing institutional and structural racism: the interconnected ways societies foster racial discrimination in housing, education, employment, earnings, benefits, credit, media, health care, and criminal justice that lead to inequities in education, employment, justice, and health opportunities, conditions, and outcomes ([Bailey et al., 2017](#)).

Communities across the country are coming together, unifying in the call to end racial injustice in all systems, emerging as a movement that demands we take meaningful prompt action to address the experiences of Black, Indigenous, People of Color (BIPOC). COVID-19 has amplified existing health inequities, exacerbating the unjust and avoidable disparities in health conditions, opportunities and outcomes between community members and groups because of the cumulative stressors, trauma, and unequal treatment caused by racism.

Buncombe County has a deeply rooted history of institutional and systemic racism that has contributed to persistent and often increasing racial inequities in health outcomes and connected social determinants. Some of these documented inequities in Buncombe county include:

- Births to Black mothers in Buncombe County are more likely to be pre-term (18.3% versus 9.4%) and have a very low birthweight (4.5% versus 1.2%) compared to births to White mothers.
- Despite declines in infant mortality rates for both blacks and whites, this disparity has not improved over 30 years, and this disparity remains even when controlled for income, SES, education of the mother. (Syneva, 2017, Updated data)
- Life expectancy for those born 2013 to 2015 is 5.9 years lower for Black residents of Buncombe County (73.4 years) compared to White residents (79.3 years).
- Death rates are higher for Black residents of Buncombe County compared to White residents across all major causes. Overall, the rate for all causes is 38% higher for Blacks.
- Thirty-five percent (35.1%) of Black students in grades 3-8 scored proficient for reading at their grade level in Buncombe County compared to seventy-one percent (70.7%) of White students. The disparity in reading proficiency is consistent across all six grades.
- Thirty-two percent (31.8%) of Black students in grades 3-8 scored proficient in mathematics at their grade level in Buncombe County compared to sixty-eight percent (67.5%) of White students. The disparity in mathematics proficiency is consistent across all six grades.
- As of 2016, 13.7% of Whites experienced poverty in Buncombe compared to 27.2% of Blacks and 36.4% of Hispanics (CHA Data, 2019). The average per capita income for Whites was \$28,480 compared with \$15,335 for Blacks and \$13,121 for Hispanics.

- At 41.9%, Black residents of Buncombe County are less to live as home owners; 23.4 percentage points lower than White residents (65.3%).
- Blacks ages 16 and over comprise 5.6% of Buncombe County's population, although they are 28.1% of the Average Daily Population of the Buncombe County Detention Facility.

As public health educators, we recognize the need to urgently and collaboratively address systemic racism in order to advance the health and wellbeing of our entire community.

Significant work is happening in our community to undo racism and discrimination. As community leaders, our integrity will determine the stand we take today, tomorrow and the future. We have an obligation to speak out against institutional and systemic racism and social injustices. In the words of Dr. Martin Luther King, Jr.: *"Injustice anywhere is a threat to justice everywhere ... The ultimate tragedy is not the oppression and cruelty by the bad people but the silence over that by the good people."*

**We now ask that you, the Buncombe County Board of Commissioners, use your leadership in our community to officially name racism as a public health crisis in our County.** We ask you to work with the County Manager and staff on recognizing and rectifying historical injustices, identifying and changing policies that uphold the impact of structural racism, and allocating funding that builds on community assets and begins to repair the damage that racism causes in our community. Please join us in recognizing this important crisis in order to ensure sustained focus on dismantling racism and building a more equitable and just society for all.

In solidarity,

Susan Mims, MD, MPH

Tamarie Macon, PhD

Ameena Batada, DrPH

Sarah Thach, MPH

Amy Joy Lanou, PhD

Scott Schindler

Angela DeSantis



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

July 15, 2020

Dear Buncombe County Board of Commissioners:

On behalf of the YMCA of Western North Carolina's Board of Directors and staff, I urge you to name racism as a public health crisis in Buncombe County. The YMCA strongly supports the Buncombe County Health and Human Services Board's June 26 proclamation to this effect, and pledges to work with HHS and other community partners to improve health outcomes by advancing racial equity and justice.

The Y is honored to join this unified advocacy effort to end racial injustice in all systems. It is imperative that our community leaders take meaningful action now to address the experiences of Black, Indigenous, People of Color (BIPOC). COVID-19 has amplified existing health inequities, exacerbating the unjust and avoidable disparities in health conditions, opportunities and outcomes between community members and groups because of the cumulative stressors, trauma, and unequal treatment caused by racism.

Buncombe County has a deeply rooted history of institutional and systemic racism that has contributed to persistent and often increasing racial inequities in health outcomes and connected social determinants. The YMCA of Western North Carolina has been dedicated to the health of this region for more than 130 years, most recently through nutritious feeding programs, childcare, and the North Carolina Minority Diabetes Prevention Program. We see racial health inequities in our work each day, and recognize that we have often fallen short in our mission to serve all. However, we are committed to learning and taking meaningful action to improve health outcomes and strengthen relationships with BIPOC.

I invite anyone who feels disenfranchised by the Y, or who wants to share their honest input on how the Y can be part of the solution to ensure equity, access, and inclusion for all, to contact me directly at [pvest@ymcawnc.org](mailto:pvest@ymcawnc.org).

There is significant work happening in our community to undo racism and discrimination. The YMCA of Western North Carolina recognizes the need to urgently and collaboratively address systemic racism to advance the health and well-being of our entire community. As a nonprofit community benefit organization dedicated to youth development, healthy living, and social responsibility, the YMCA cannot and will not remain silent in the face of this injustice.

**We now ask that you, the Buncombe County Board of Commissioners, declare that racism is a public health crisis in our County.** We encourage you to work with the County Manager and staff on recognizing and rectifying historical injustices, identifying and changing policies that uphold the impact of structural racism, and allocating funding that builds on community assets and begins to repair the damage that racism causes in our community. Please join us in recognizing this incredible crisis in order to ensure sustained focus on dismantling racism and building a more equitable and just society for all.

In solidarity,

Paul Vest  
President and CEO

**YMCA OF WESTERN NORTH CAROLINA**

40 N. Merrimon Ave., Suite 309, Asheville, NC 28804 P 828 251 5909 F 828 251 2437 [ymcawnc.org](http://ymcawnc.org)



eliminating racism  
empowering women  
**ywca**  
Asheville

Dear Buncombe County Board of Commissioners:

**Officers**

Jesica Hooper  
*Chair*

Tamarie Macon  
*Secretary*

Leah Noel  
*Treasurer*

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Elizabeth Becker  
Zakiya Bell-Rogers  
La'Neice Blessing  
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Yolanda Fair

Kalla Hughley  
Jerri Jameson  
Alaina Nelson  
Jessica Rothenhoefer  
Tiece Ruffin  
Chloe White

**CEO**

Libby Kyles

The YWCA of Asheville and Western NC urgently calls upon you to name structural and institutional racism as a public health crisis in Buncombe County. On June 26, 2020, the Buncombe County Health and Human Services Board passed a proclamation that asserts this and describes action steps the board will take to advance racial equity and justice in our county. There are many forms and manifestations of racism (including individual, interpersonal, institutional and systemic). We specifically advocate that you address institutional and structural racism: the interconnected ways societies foster racial discrimination in housing, education, employment, earnings, benefits, credit, media, health care, and criminal justice that lead to inequities in education, employment, justice, and health opportunities, conditions, and outcomes ([Bailey et al., 2017](#)).

Communities across the country are coming together, unifying in the call to end racial injustice in all systems, emerging as a movement that demands we take meaningful action to address the experiences of Black, Indigenous, People of Color (BIPOC) without delay. COVID-19 has amplified existing health inequities, exacerbating the unjust and avoidable disparities in health conditions, opportunities and outcomes between community members and groups because of the cumulative stressors, trauma, and unequal treatment caused by racism.

Buncombe County has a deeply rooted history of institutional and systemic racism that has contributed to persistent and often increasing racial inequities in health outcomes and connected social determinants. For example, in Buncombe County, black babies are four times more likely to die in the first year of birth than white babies. According to the Buncombe County Community Health Assessment of 2018, in 8% of births, the mother had gestational diabetes. In a large percentage of births, mothers were overweight (20%) or obese (17%). Black mothers were twice as likely to be obese, although not overweight. (NC SCHS, 2018) We at the YWCA of Asheville recognize the need to urgently and collaboratively address systemic racism to advance the health and wellbeing of our entire community.

There is significant work happening in our community to undo racism and discrimination. As community leaders, our integrity will determine the stand we take today, tomorrow and beyond. We must speak out against institutional and systemic racism and social injustices.

**We now ask that you, the Buncombe County Board of Commissioners, use your leadership in our community to officially name racism as a public health crisis in our County.** We ask you to work with the County Manager and staff on recognizing and rectifying historical injustices, identifying and changing policies that uphold the impact of structural racism, and allocating funding that builds on community assets and begins to repair the damage that racism causes in our community. Please join us in recognizing this incredible crisis and building a more equitable and just society for all.

In solidarity,



Libby Kyles  
Chief Executive Officer  
YWCA of Asheville and WNC

*Bailey, Z. D., Krieger, N., Agénor, M., Graves, J., Linos, N., & Bassett, M. T. (2017). Structural racism and health inequities in the USA: evidence and interventions. The Lancet, 389(10077), 1453-1463.*