



July 15, 2021

U.S. Department of Agriculture
1400 Independence Avenue, S.W.
Washington, DC 20250

Re: Identifying Barriers in Programs and Services; Advancing Racial Justice and Equity and Support for Underserved Communities (Request for Information)

Dear U.S. Department of Agriculture Representative,

The Council on Black Health (The Council) was established in 2002 and is a research organization that aims to develop and promote solutions that achieve healthy Black communities. We continuously strive to achieve this mission by informing, conducting, and disseminating research on what works to improve health in Black communities. In addition to engaging in strategic partnerships with community stakeholders, researchers, and organizations to co-create solutions and initiatives aimed at achieving health equity. More recently, the Council has developed the [Black Health Bill of Rights](#), which consists of seven articles that outline critical values and principles needed to achieve optimal health and well-being for the Black community¹. Many articles within the Black Health Bill of Rights have yet to be realized due to structural racism and inequities that persist within the social, political, and economic systems in which we live. This is a prime reason why the government initiative to advance racial equity and support for underserved communities is so imperative.

In our continued dedication towards our mission, the Council takes every opportunity to weigh in on policy and program recommendations that advance health equity. Health equity is defined as the ability for all people to attain the highest possible standard of health^{2,5}. Growing bodies of research highlight the importance of moving away from focusing on individual behavior and addressing the social structures and conditions that contribute to avoidable health disparities, known as the social determinants of health^{2,5}. Some examples of social determinants of health include poverty, inadequate housing, built environment, education level, and racism².

The purpose of this document is to respond to a Request for Information on how the USDA can advance racial equity and support for underserved communities as required by Executive Order 13985. This document will discuss opportunities for the USDA to address the underlying socio-economic causes of systemic inequities in society, opposed to addressing specific barriers that underserved communities face. The Council believes the USDA should focus on these upstream factors because they have an impact on every facet of our lives and are often the root causes of persistent barriers to accessing and participating in USDA, and other government, programs and services. We will never achieve racial equity if we only address symptoms of the problem, opposed to actual causes of the problem.



Recommendation One: The USDA should collaborate with other government agencies and community stakeholders to address and actively dismantle the social structures and conditions that contribute to health disparities, as a means to advance racial equity and support for underserved communities.

Built environment is a prime example of a social structure or condition that can be addressed to advance racial equity and support for underserved communities. Built environment pertains to all the physical parts of one's environment including homes, buildings, streets, open spaces, and infrastructure³. Inequities in the built environment impact the availability of quality food from authorized Supplemental Nutrition Assistance Program (SNAP) food retailers in low-income minority communities⁴. In fact, many low-income neighborhoods with a high concentration of SNAP beneficiaries are located within food deserts with little to no access to quality food⁴. Research has shown that these individuals typically export their food dollars and travel outside of their neighborhoods to access higher quality food but would prefer to shop locally if acceptable options existed⁴. The USDA should perform, or fund more comprehensive research focused on built environment and assessing the availability and quality of food from authorized SNAP retailers in low-income minority neighborhoods. This is extremely important as the most effective government initiatives are evidence-based and informed by quality data and research.

In particular, the USDA should consider funding community-based participatory research, which would allow for key community stakeholders to play a role in improving their own built environments⁶. In community-based participatory research, the USDA, academic researchers, and members of underserved communities, would be able to work together to determine the problem(s) that need to be addressed, carry out the research, and disseminate the findings⁶. This approach enables the USDA and researchers to gain a more comprehensive understanding of a community's challenges, while also empowering community members to help create solutions that improve their own lives⁶. Although community-based participatory research can be more time consuming than traditional methods, research has shown that engaging with the community throughout the research process generates results that are more relevant and beneficial to the community⁶.

Recommendation Two: The USDA should invite members of the Council on Black Health to serve on the Racial Equity Commission that will be established in the coming months.

Continued engagement with underserved communities past the research phase is critical. When systemic inequities are identified in research, findings are disseminated and widely discussed, but seldom translated into actual action and policy changes⁷. A prime example of this phenomenon can be seen in the continued racism and discrimination faced by Black farmers. Historically, Black farmers have faced considerable barriers to acquiring farmland, loans, and benefits through the Farm Service Agency (FSA)⁷. Years of unresolved discrimination claims led to the Pigford I class action lawsuit and the subsequent passage of the Senate 3838 bill which resulted in financial compensation for the affected farmers⁷. Although this was a substantial step in the right direction, barriers to accessing and participating in USDA programs for Black people and other minorities persist. A primary reason for this is because they are not a part of the decision-making process or in positions of leadership that can drive change⁷. Representation matters. It will take substantial and ongoing effort for the USDA to truly reach a point of racial equity in all of their programs and services. The most advantageous method of doing so would be to collaborate with key stakeholders within underserved communities, such as the Council on Black Health.

The Council on Black Health has the unique distinction of engaging a mix of academic researchers; federal, state, and local government; private foundations; national and local community organizations; national and local thought leaders; and community members in conversation and action to develop, implement, and oversee a national Black health agenda. As previously mentioned, in our own efforts towards advancing racial equity, the Council has developed the Black Health Bill of Rights which consists of seven articles that outline critical

values and principles needed to achieve optimal health and well-being for the Black community¹. The Council is also dedicated towards developing an action plan that corresponds with each article within the bill of rights. The action plan will detail specific structural and policy recommendations needed to achieve both racial equity and health equity for the Black community.

The Council recognizes the importance of engaging in strategic partnerships to achieve our mission. Having Council members to serve on the Racial Equity Commission would be mutually beneficial and would collectively increase our ability to address the root causes of systemic inequities, along with developing viable solutions that truly benefit the Black community.

Sincerely,

The Council on Black Health
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References:

1. The Council on Black Health. (2021). *Black Health Bill of Rights / Council on Black Health*. <https://councilbh.org/bill-of-rights/>
2. Centers for Disease Control and Prevention. (2019). *Frequently Asked Questions / Social Determinants of Health / NCHHSTP / CDC*. <https://www.cdc.gov/nchhstp/socialdeterminants/faq.html>
3. Centers for Disease Control and Prevention. (2011). *Impact of the Built Environment on Health*. CDC. <https://www.cdc.gov/nceh/publications/factsheets/impactofthebuiltenvironmentonhealth.pdf>
4. Chrisinger, B. W. (2015). Reconsidering the Supplemental Nutrition Assistance Program as Community Development. *Journal of Nutrition Education and Behavior*, 47(3), 273–277. <https://doi.org/10.1016/j.jneb.2014.10.005>
5. Kleinman, D. V., Pronk, N., Gómez, C. A., Wrenn Gordon, G. L., Ochiai, E., Blakey, C., Johnson, A., & Brewer, K. H. (2021). Addressing Health Equity and Social Determinants of Health Through Healthy People 2030. *Journal of Public Health Management and Practice, Publish Ahead of Print*. <https://doi.org/10.1097/PHH.0000000000001297>
6. Springer, M. V., & Skolarus, L. E. (2019). Community-Based Participatory Research: Partnering With Communities. *Stroke (1970)*, 50(3), e48–e50. <https://doi.org/10.1161/STROKEAHA.118.024241>
7. Grant, G. R., Wood, S. D., & Wright, W. J. (2012). Black Farmers United: The Struggle Against Power and Principalities. *The Journal of Pan African Studies*, 5(1), 3–22.