AN ACT DECLARING RACISM AS A PUBLIC HEALTH CRISIS AND ESTABLISHING THE COMMISSION ON RACIAL EQUITY IN PUBLIC HEALTH.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

Section 1. (NEW) (Effective from passage) It is hereby declared that racism constitutes a public health crisis in this state and will continue to constitute a public health crisis until the goals set forth in section 2 of this act are attained, and the Commission on Racial Equity in Public Health is terminated pursuant to said section.

Sec. 2. (NEW) (Effective from passage) (a) There is established a Commission on Racial Equity in Public Health, to document and make recommendations to decrease the effect of racism on public health. The commission shall be part of the Executive Department.

(b) The commission shall consist of the following members:

(1) The Commissioner of Public Health, or the commissioner's
designee;

(2) The Commissioner of Children and Families, or the commissioner's designee;

(3) The Commissioner of Early Childhood, or the commissioner's designee;

(4) The Commissioner of Housing, or the commissioner's designee;

(5) The Commissioner of Social Services, or the commissioner's designee;

(6) The Commissioner of Agriculture, or the commissioner's designee;

(7) The Commissioner of Economic and Community Development, or the commissioner's designee;

(8) The Commissioner of Education, or the commissioner's designee;

(9) The chief executive officer of the Connecticut Health Insurance Exchange, or a designee;

(10) The executive director of the Commission on Women, Children, Seniors, Equity and Opportunity, or a designee;

(11) The executive director of the Office of Health Strategy, or a designee;

(12) The Secretary of the Office of Policy and Management, or the secretary's designee;

(13) The Commissioner of Administrative Services, or the commissioner's designee;

(14) The Commissioner of Energy and Environmental Protection, or the commissioner's designee;

(15) The Commissioner of Correction, or the commissioner's designee;
(16) At least one person appointed by the Governor who has experience with community organizations actively working to address racism and related health disparities and inequities;

(17) At least one person appointed by the Governor who has experience with community organizations actively working to address the needs of people of color who also identify as LGBTQ+ or as having a disability; and

(18) At least one person appointed by the Governor who has experience with community-based nongovernmental organizations.

(c) All initial appointments to the commission made under subdivisions (14) to (18), inclusive, of subsection (b) of this section shall be made not later than sixty days after the effective day of this section. Appointed members shall serve a term that is coterminous with the appointing official and appointed members may serve more than one term.

(d) The executive director of the Office of Health Strategy, or the executive director's designee, shall serve as chairperson of the commission. Such chairperson shall schedule the first meeting of the commission, which shall be held not later than sixty days after the effective date of this section.

(e) The commission, by majority vote, shall hire an executive director to serve as administrative staff of the commission, who shall serve at the pleasure of the commission.

(f) Members shall continue to serve until their successors are appointed. Any vacancy shall be filled by the appointing authority. Any vacancy occurring other than by expiration of term shall be filled for the balance of the unexpired term.

(g) A majority of the membership shall constitute a quorum for the transaction of any business and any decision shall be by a majority vote.
of those present at a meeting. The commission may adopt rules of procedure.

(h) The members of the commission shall serve without compensation, but shall, within the limits of available funds, be reimbursed for expenses necessarily incurred in the performance of their duties.

(i) The commission shall have the following powers and duties: (1) Support collaboration by bringing together partners from many different sectors to recognize the links between health and other issue and policy areas and build new partnerships to promote health and equity and increase government efficiency; (2) create the comprehensive strategic plan to eliminate health disparities and inequities across sectors, in accordance with section 3 of this act; (3) obtain from any executive department, board, commission or other agency of the state or any organization or other entity such assistance as necessary and available to carry out the purposes of this section; (4) accept any gift, donation or bequest for the purpose of performing the duties described in this section; (5) establish bylaws to govern its procedures; and (6) perform such other acts as may be necessary and appropriate to carry out the duties described in this section.

(j) The commission shall engage with a diverse range of community members, including people of color who identify as members of diverse groups of the state population, including on the basis of race, ethnicity, sexual orientation, gender identity and disability, who experience inequities in health, to make recommendations to the relevant state agencies or other entities on an ongoing basis concerning the following: (1) Institutional racism in the state's laws and regulations impacting public health; (2) racial disparity in the state's criminal justice system and its impact on the health and well-being of individuals and families, including overall health outcomes and rates of depression, suicide, substance use disorder and chronic disease; (3) racial disparities in access to the resources necessary for healthy living, including, but not limited to, access to adequate fresh food and physical activity, public
safety and the decrease of pollution in communities; (4) racial disparities in health outcomes; (5) the impact of zoning restrictions on the creation of housing disparities and such disparities’ impact on public health; and (6) racial disparities in state hiring and contracting processes.

(k) The commission shall not terminate until the state has attained the goal of at least seventy per cent reduction in disparities, as determined by the commission using available scientifically-based measurements, in the following areas: (1) Kindergarten readiness, third grade reading proficiency, scores on the mastery examination, administered pursuant to section 10-14n of the general statutes, rates of school-based discipline, high school graduation rates and retention rates after the first year of study for institutions of higher education in the state, as defined in section 3-22a of the general statutes; (2) health insurance coverage rates, pregnancy and infant health outcomes, emergency room visits and deaths related to conditions associated with exposure to environmental pollutants, including respiratory ailments, quality of life, life expectancy, and self-reported well-being surveys; (3) rates of involvement with the justice system; and (4) rates of poverty, income, housing insecurity, lead poisoning and access to adequate healthy nutrition.

(l) Not later than January 1, 2022, and annually thereafter, the commission shall submit a report to the Secretary of the Office of Policy and Management and the joint standing committees of the General Assembly having cognizance of matters relating to public health and appropriations and the budgets of state agencies, in accordance with the provisions of section 11-4a of the general statutes, concerning (1) the activities of the commission during the prior year; (2) any progress made in attaining the goal described in subsection (k) of this section; (3) any recommended changes to such goal based on the research conducted by the commission, any disparity study performed by any state agency or entity, or any community input received; and (4) any recommendations for policy changes or amendments to state law.

Sec. 3. (NEW) (Effective from passage) (a) The Commission on Racial
Equity in Public Health, established under section 2 of this act, shall develop and periodically update a comprehensive strategic plan to eliminate health disparities and inequities across sectors, including consideration of the following: Air and water quality, natural resources and agricultural land, affordable housing, infrastructure systems, public health, access to quality health care, social services, sustainable communities and the impact of climate change.

(b) Such plan shall address the incorporation of health and equity into specific policies, programs and government decision-making processes including, but not limited to, the following: (1) Disparities in laws and regulations impacting public health; (2) disparities in the criminal justice system; (3) disparities in access to resources, including, but not limited to, healthy food, safe housing, public safety and environments free of excess pollution; and (4) disparities in access to quality health care.

Sec. 4. Subsection (a) of section 4-9a of the general statutes is repealed and the following is substituted in lieu thereof (Effective from passage):

(a) The Governor shall appoint the chairperson and executive director, if any, of all boards and commissions within the Executive Department, except the State Properties Review Board, the State Elections Enforcement Commission, the Commission on Human Rights and Opportunities, the Commission on Fire Prevention and Control, the Citizen's Ethics Advisory Board, [and] the Transportation Policy Advisory Council and the Commission on Racial Equity in Public Health.

Sec. 5. (Effective from passage) The Commissioner of Public Health shall study the development and implementation of a recruitment and retention program for health care workers in the state who are people of color. Not later than January 1, 2022, the commissioner shall report the results of such study, in accordance with the provisions of section 11-4a of the general statutes, to the joint standing committee of the General Assembly having cognizance of matters relating to public health. Such report shall include any legislative recommendations to improve the
recruitment and retention of people of color in the health care sector, including, but not limited to, recommendations for the implementation of such recruitment and retention program.

Sec. 6. (Effective from passage) The Department of Energy and Environmental Protection shall perform an assessment of racial equity within environmental health quality programs administered by said department. Not later than January 1, 2022, the department shall submit a report, in accordance with the provisions of section 11-4a of the general statutes, to the joint standing committee of the General Assembly having cognizance of matters relating to the environment. Such report shall include the results of such assessment and any legislative recommendations to improve racial equity within such programs.

Sec. 7. (Effective from passage) (a) As used in this section, "cultural humility" means a continuing commitment to (1) self-evaluation and critique of one's own worldview with regard to differences in cultural traditions and belief systems, and (2) awareness of, and active mitigation of, power imbalances between cultures.

(b) The Office of Higher Education, in collaboration with the Board of Regents for Higher Education and the Board of Trustees of The University of Connecticut, shall evaluate the recruitment and retention of people of color in health care preparation programs offered by the constituent units of the state system of higher education and the inclusion of cultural humility education in such programs. Not later than January 1, 2022, the office shall submit a report, in accordance with the provisions of section 11-4a of the general statutes, to the joint standing committee of the General Assembly having cognizance of matters relating to higher education. Such report shall include the results of such evaluation and any legislative recommendations to improve the recruitment and retention of people of color in such programs and include additional cultural humility education in such programs.

Sec. 8. Subsection (b) of section 2-128 of the general statutes is
repealed and the following is substituted in lieu thereof (**Effective from passage**):

(b) Not later than January first, annually, the executive director of the commission shall submit a status report, organized by subcommission, concerning its efforts in promoting the desired results listed in subdivision (1) of subsection (a) of this section to the joint standing committee of the General Assembly having cognizance of matters relating to appropriations and the budgets of state agencies in accordance with the provisions of section 11-4a. On and after January 1, 2022, such report shall include the status of amendments to the joint rules of the House of Representatives and the Senate concerning the preparation of racial and ethnic impact statements pursuant to section 2-24b.

This act shall take effect as follows and shall amend the following sections:

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**Statement of Purpose:**
To declare racism as a public health crisis, establish the Commission on Racial Equity in Public Health and require studies concerning the racial equity of various state programs related to such crisis.

[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]