

A RESOLUTION OF THE VIRGINIA BOARD OF HEALTH
ADOPTED AT ITS MEETING OF JUNE 23, 2022

WHEREAS, it has been the policy of the Board of Health and the Department of Health for many years to recognize that health care access and health outcomes have not been comparable across all demographic groups in the Commonwealth; and

WHEREAS, the truth of these observations has been proved by analysis of data over many years by medical scientists in the Commonwealth and across the country, and in particular by previous Commissioners of the Department and staff; and

WHEREAS, the disparities in health care outcomes between minority and low-income households and individuals and the population at large are particularly great, and greatest between African-Americans and the population at large; and

WHEREAS, the differences have been and continue to be most noticeable in maternal care and outcomes, but also in many other health categories; and

WHEREAS, the Commissioner has recently made public statements contrary to the position on these issues of the Board and its individual members to their and our embarrassment; now be it

RESOLVED BY THE BOARD OF HEALTH

That the Board directs the Commissioner and Department staff to acknowledge these differences as demonstrated by scientific and statistical evidence and to direct resources of the Department to the offices within the Department that focus on improving practices and delivery of care that will reduce these disparities over time. Improvements can and must be made in education of both the health care workforce and members of minority and lower-income groups; location of points of access to services; building of staff for new facilities; recruitment of voices within the communities to use such services confidently; continued gathering of statistics that demonstrate progress or lack of progress in achieving these goals.

FURTHER RESOLVED

That the Commissioner and other spokespeople of the Department will make no public statements contrary to the Board's policy or intentions regarding disparities in care and outcomes, nor make statements that carry a message of denial of basic scientific facts regarding disparities.

FURTHER RESOLVED

That the Commissioner and Department should advocate vigorously within the current and future administrations for additional resources to meet specific goals for the reduction and eventual elimination of the disparities.