

Resolution Declaring Systemic Racism as a Public Health and Economic Crisis and Committing Resources to Addressing

As the Board of Directors of the Minnesota Chapter of the American Planning Association (APA-MN), we declare racism as a public health and economic crisis:

Whereas: the role of planning is to protect the health, safety, and general welfare of the community, and as professional planners our Code of Ethics and Professional Conduct clearly outlines planner's overall responsibility to the public, including sections:

- a) We shall always be conscious of the rights of others.
- b) We shall have special concern for the long-range consequences of present actions.
- c) We shall pay special attention to the interrelatedness of decisions.
- f) We shall seek social justice by working to expand choice and opportunity for all persons, recognizing a special responsibility to plan for the needs of the disadvantaged and to promote racial and economic integration. We shall urge the alteration of policies, institutions, and decisions that oppose such needs; and

Whereas: racism is the use of race to justify the oppression of certain groups of people and the supremacy of other groups; and

Whereas: race is a social construct without basis in biology. Racism is a social system with multiple dimensions: individual racism is internalized or interpersonal and systemic racism is institutional or structural, and is a system of structuring opportunity and assigning value based on the social interpretation of how one looks, that unfairly disadvantages some individuals and communities, unfairly advantages other individuals and communities, and saps the strength of the whole society through the waste of human resources; and

Whereas: public health encompasses everything that makes communities healthy, including housing, economic opportunity, education, physical and mental health, and well-being. The health of our state requires the health of Black, Indigenous, and Communities of Color (BIPOC); and

Whereas: racism manifests in institutional, systemic ways that deeply harm the health and well-being of BIPOC communities in Minnesota. BIPOC communities, particularly Black and Indigenous populations, in Minnesota experience higher rates of nearly every negative population health measure, including high rates of infant and maternal mortality, cancer, diabetes, pulmonary and heart diseases, and have shorter average lifespans; and

Whereas: BIPOC communities in Minnesota have less access to homeownership and other economic opportunities, are less likely to reach grade proficiency in math and reading as children or graduate high school, and are exposed to more pollution than their white neighbors; and

Whereas: the harm to the health of BIPOC communities caused by systemic racism is generational, widespread, and devastating; and

Whereas: the planning profession has an unacceptable history of direct and indirect actions, policies, and programs that have harmed BIPOC communities, including urban renewal projects which destroyed, dismantled, and displaced BIPOC, immigrant, and low-income communities including but sadly not limited to Rondo, Gateway, Swede Hollow, Bohemian Flats, Mt. Airy, West Bank/Riverside, and West Side Flats; and

Whereas: the unfortunate reality is that the planning profession continues to enact and support actions, policies, and programs that harm BIPOC communities and limit their ability to reach their full health potential, build wealth, and to feel safe and welcome in community, including but not limited to restrictive zoning practices, inequitable economic development, Not In My Backyard-centered community engagement, and auto-centric transportation planning.

Therefore, be it resolved that the American Planning Association - Minnesota Chapter:

1. Declares that systemic racism is a public health and economic crisis affecting both our state and the entire United States.
2. Commits to making our state a place of equity and justice for people of all races and to improving quality of life and outcomes for our BIPOC communities in particular; and
3. Commits to working collaboratively and across sectors to develop ongoing strategies to address, fund, and support solutions that strategically reduce the long-term impact that racism has on the quality of life and health of BIPOC communities.
4. Encourages planners and bodies of government to include an assessment of racial equity impact of policies, programs, real estate development and entitlement projects, and other planning efforts. The use of tools such as Health in All Policies and Equity in All Policies are helpful and encouraged.
5. Commits to creating an equity and justice oriented organization, and as an organization will review its internal operations, communications, governing structure, and strategic plan for opportunities to address and advance racial equity. This includes working with members, the board of directors, staff, and/or other stakeholders to identify specific activities to increase diversity and to incorporate anti-racism principles within leadership, staffing, and contracting.
6. Will dedicate resources to educating and supporting members of APA-MN in their growth, journey, and evolution on issues of race, justice, and equity.
7. Will advocate for relevant policies that improve equitable health and economic outcomes in communities of color, and support local, state, and federal initiatives that advance social justice, while also encouraging individual advocacy to dismantle systemic racism.
8. Commits to building alliances and partnerships with other appropriate organizations that are confronting racism and encourages other organizations, including professional organizations, nonprofits, academia, health, individuals, and private businesses to join in efforts that declare and address racism as a public health and economic crisis.
9. Will allocate adequate financial and human resources to accomplish the activities listed above.

10. Recommends the governor of Minnesota declare racism as a public health and economic crisis, and encourages local and regional bodies of government to do the same, committing resources to addressing the social determinants of health, and fostering the transformation of our state to be welcoming, equitable, healthy, safe, and thriving for all people.

Tim Gladhill, Board President

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