Whereas, Health disparities persist among African American and other ethnic and racial minorities across and despite socioeconomic status (SES), and racial housing segregation is a structural source and amplifier of these racial health disparities;1,2 and

Whereas, Numerous epidemiologic studies have demonstrated that segregated African American, Hispanic, and other ethnic and racial minority communities face increased rates of infant mortality, obesity, hypertension, asthma, lung cancer, mental health stressors, and psychiatric disorders, among other environmentally-associated adverse health outcomes;3,4,5,6,7 and

Whereas, The Institute of Medicine, now known as the National Academy of Medicine, has acknowledged that communities of color are disproportionately exposed to environmental burdens and hazards affecting health, including but not limited to lead, air pollutants, and toxic waste due to where they live, and has advocated for the linking of data on environmental health outcomes to data on affected communities;8 and

Whereas, Even when controlling for socio-economic status, racially-segregated minority neighborhoods have a disproportionate share of liquor stores and fast food outlets and a dearth of grocery stores and recreational facilities, leading to increased rates of diabetes, hypertension, and heart disease;2,9,10 and

Whereas, The AMA has recognized that public education disparities, which fall along racial and economic lines, are a detriment to health (H-60.917), representing a public health and civil rights issue, and research establishes that such disparities are largely due to housing segregation;1,2 and

Whereas, Despite the passage of the 1968 Fair Housing Act to end discriminatory housing practices that perpetuate race-based segregation, de facto racial housing segregation continues in the form of restrictive zoning favoring low-density development and excluding multi-family housing, predatory loan practices, and the discouragement of people of color or low SES by real estate agents and landlords away from neighborhoods that are majority-white;11,12,13 and
Whereas, As of 2010, a third of all metropolitan African Americans continued to live under conditions of housing hypersegregation and as of 2017, racial and ethnic gaps continue to exist in homeownership and housing wealth when comparing African Americans and Hispanics with whites;14 and

Whereas, Geographic Information Systems (GIS) data, which can be used to co-locate demographic and mapping data, including housing segregation, with health outcomes has been a critical tool for public health researchers to elucidate and act on health disparities, most notably mapping the Flint water crisis and the disproportionate impact of lead exposure on African American neighborhoods;15,16 and

Whereas, The Affirmatively Furthering Fair Housing (AFFH) GIS platform was created in 2015 by the Department of Housing and Urban Development (HUD) Office of Fair Housing and Equal Opportunity to monitor the progress of the 1968 Fair Housing Act, collect and make publicly accessible data on ongoing racial and economic segregation in communities, and examine the disparities in access to education and employment opportunities, and has been lauded by the American Public Health Association as a critical tool in advancing desegregation and improving health outcomes in minority communities;17,18 and

Whereas, There is a proposed $8.8 billion (18.3%) cut to the HUD budget for the 2019 fiscal year;19 and

Whereas, There is pending legislation to bar any federal funds to be used “to design, build maintain, utilize or provide access to a federal database of geospatial information on community racial disparities OR disparities in access to affordable housing”;20,21 therefore be it

RESOLVED, That our American Medical Association oppose policies that enable racial housing segregation (New HOD Policy); and be it further

RESOLVED, That our AMA advocate for continued federal funding of publicly-accessible geospatial data on community racial and economic disparities and disparities in access to affordable housing, employment, education, and healthcare, including but not limited to the Department of Housing and Urban Development (HUD) Affirmatively Furthering Fair Housing (AFFH) tool. (New HOD Policy)

Fiscal Note: not yet determined

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RELEVANT AMA POLICY: Disparities in Public Education as a Crisis in Public Health and Civil Rights H-60.917; Racial and Ethnic Disparities in Health Care H-350.974; Poverty Screening as a Clinical Tool for Improving Health Outcomes H-160.999; Improving the Health of Minority Populations H-350.961; Reducing Discrimination in the Practice of Medicine and Health Care Education D-350.984; Improving Healthcare of Hispanic Populations in the United States H-350.975; Improving the Health of Black and Minority Populations H-350.972; Strategies for Eliminating Minority Health Care Disparities D-350.996; Race and Ethnicity as Variables in Medical Research H-460.924