Minority Health

CDC's Efforts to Address Racism as a Fundamental Driver of Health Disparities

As the nation's preeminent public health agency, CDC has a pivotal role: to lead our nation in addressing racism and the resulting health inequities. We will do what we do best by using science to investigate and better understand the intersection of racism and health, and then to take action.

Together with our public health partners, we are working to reduce, and ultimately, eliminate racial and ethnic inequities in health by addressing the structural and social conditions that give rise to them. We are committed to also working further upstream to address racism as the fundamental driver of these inequities.

Nationwide Public Health Efforts

CDC's work to address health inequities rooted in racism is occurring across the agency, **including scientific research, community programs, policy efforts, and workforce development**. Through this work, we aim to better understand social determinants of health and combat the racial and ethnic health inequities illuminated throughout the COVID-19 pandemic.

Some examples from across the agency include:

Health Equity Strategies and Funding for Health Departments

Health Equity funding for health departments—In March 2021, CDC announced a new $2.25 billion funding effort to address COVID-19 related health disparities among racial and ethnic minority groups and people living in rural areas. This represents CDC's largest investment to date to support communities affected by COVID-19-related health disparities.

CDC also announced, in March, an additional $300 million in funding to strengthen the work of community health workers, nationwide, in their efforts to prevent and control COVID-19 among high risk populations and communities hardest hit by the epidemic– including communities of color. By supporting these trusted messengers within communities, CDC aims to enhance our ability to connect high-risk and vulnerable individuals to care and needed services.

In April 2021, CDC awarded $3 billion to support local efforts to increase COVID-19 vaccine uptake, with 75% of the total funding going to programs and initiatives to increase vaccine access, acceptance, and uptake among racial and ethnic minority communities.

COVID-19 health equity strategy [85.5 MB, 5 Pages]—To accelerate progress toward reducing COVID-19 disparities, CDC established the Chief Health Equity Officer (CHEO) Unit within the COVID-19 response. Under the guidance of the COVID-19 health equity strategy, this unit's sole focus is to ensure an all-of-response approach to identifying and addressing health disparities related to COVID-19.

Science and Research

CDC's new *Health Equity Glossary* is intended to help facilitate broader understanding and consensus about the terminology used in health equity scientific literature and communications products. This glossary may be used by people with a public health interest in health equity, including public health researchers, academicians, practitioners, policy makers, and others interested in advancing health equity. It is a living document offered to help foster common understanding of terminology frequently used in the domain of health equity, and is anticipated to evolve as health equity science progresses.

CDC is developing an agency-wide comprehensive **Health Equity Science and Intervention Strategy**. This strategy will ensure that health equity is an integral part of CDC's scientific portfolio and that a health equity lens is applied to program and intervention design, implementation, and evaluation. This framework and efforts to support its implementation will foster systematic use of scientific and socio-ecological approaches that address policy, systems, place-based, and environmental factors that impact health outcomes and shape equitable opportunities for health.

Minority HIV/AIDS Research Initiative—The Minority HIV/AIDS Research (MARI) program builds capacity for HIV epidemiologic and prevention research in mostly Black/African American and Hispanic/Latino communities and among Black/African American and Hispanic/Latino investigators working in highly affected communities. The MARI program supports CDC's overarching goal to promote health and reduce disease and disability by funding research that has the potential to reduce burden and result in high public health impact.

Policy

Project REFOCUS (Racial Ethnic Framing of Community Informed and Unifying Surveillance)—Funded in fall 2020, and led by Howard University and UCLA, the goal of Project REFOCUS is to explore how to develop and expand public health surveillance and social listening approaches that track, in real time, how social stigma is affecting people.

Addressing Social Determinants of Health

Social Determinants of Health Portfolio—CDC is leading numerous efforts to address social determinants of health as part of our efforts to reduce and ultimately eliminate racial and ethnic health disparities. Activities include, among others, surveillance, research, policy-related activities, programs, partnerships, and communications. Many of these efforts are aimed at supporting others in public health, community, research organizations, and health care systems in their work to address health inequities. CDC's Social Determinants of Health website serves as a hub for these efforts and connects users to the latest CDC resources.

CDC's Occupational Health Equity program focuses on eliminating work-related inequities that are closely linked with social, economic and/or environmental disadvantage. This includes COVID-19 related work with foreign-born workers in meat processing plants, migrant farmworkers, and U.S.-born workers from diverse racial and ethnic backgrounds in the grocery and retail food store industry.

Reducing Cancer Disparities Through Partnerships – CDC awarded funds to three research organizations to help us understand what works to advance health equity in cancer. These CDC-funded projects are some of the first that address systemic racism as a key driver of health inequities within communities of color. The projects support cancer prevention and

control priorities by reducing preventable cancers, ensuring all people get the right screening at the right time, and supporting cancer survivors in a way that allows them to live longer, healthier lives.

Community Programs

Racial and Ethnic Approaches to Community Health (REACH)—CDC's REACH Initiative is a national program that explicitly focuses on reducing disparities for multiple racial and ethnic groups in communities with high rates of chronic diseases.

Ending the HIV Epidemic initiative—As a key implementer of this federal initiative, CDC is working to overcome barriers to HIV prevention and treatment as well as racial and ethnic disparities in 57 areas of the country that are hardest hit by the epidemic, and account for 2/3 of new infections among Black/African Americans and Hispanics/Latinos.

Let's Stop HIV Together—In cooperation with community partners, CDC designed and delivered this education and awareness campaign to help reduce stigma and discrimination and encourage people at risk for and with HIV to seek out vital testing, treatment, and prevention services.

Health Equity in Action | CDC – CDC's Health Equity in Action webpage showcases CDC's collaborative efforts to address health disparities among populations at higher risk for COVID-19. New projects are added monthly.

Infrastructure and Pipeline Efforts

Post-Doctoral Research Fellowships for HIV Prevention in Communities of Color—The mission of this fellowship program is to recruit, mentor, and train investigators with documented evidence of research expertise or experience in communities of color (persons who are Black/African American, Hispanic/Latino, American Indian, Alaska Native, Asian, and Pacific Islander) to support domestic HIV prevention research in communities of color.

CDC Undergraduate Public Health Scholars (CUPS) Program and the Dr. James A. Ferguson Emerging Infectious Diseases RISE Fellowship (Ferguson Fellowship)—are part of a collaboration with five partner institutions to provide real-world public health experience for undergraduate and graduate students. The CUPS Program and Ferguson Fellowship develop public health workplace experiences to increase student interest in the health of marginalized people and in public health professions.

CDC's Workforce Efforts

To effectively address health inequities nationwide, **we must serve as a model for organizational and workforce diversity and inclusion**. Identifying and dismantling any discriminatory policies and practices at CDC, and instituting new ways to support diversity, equity, and inclusion will allow us to access a greater wealth of talent and perspectives to effectively address, not just issues of health inequities, but the many public health challenges we face every day. It will also ensure the environment within which we do this critical work is just, equitable, and inclusive.

Some key examples of our efforts within the agency include:

Implicit bias training—Starting in 2021, CDC initiated mandatory unconscious bias training for all supervisors.

Tracking and report workforce diversity data—In 2020, CDC launched a pilot project to collect more accurate workforce data that will help the agency become a more diverse, inclusive, and equitable workplace.

Diversity and Inclusion Executive Steering Committee—In 2020, CDC affirmed its agency-wide commitment to a work environment and organizational culture that fosters inclusion, fairness, and equity through the Diversity and Inclusion Executive Steering Committee. The group—made up of leaders across all agency Centers—provides guidance and engagement in the implementation of best practices related to diversity and equity throughout CDC.

EEO Strategic Plan—In June 2020, CDC's Office of Equal Employment Opportunity (OEEO) launched the agency's first EEO strategic plan to serve as a roadmap to guide CDC's action over the next five years to effectively address and eliminate workplace discrimination.

Employee Listening Sessions—In 2021, CDC will launch a series of focus group sessions across all Centers to hear directly from employees about workplace culture to help ensure the environment we work in is more equitable and inclusive to a diversity of backgrounds and perspectives.

Throughout our Centers, leaders and staff are launching and expanding a range of innovative efforts aimed at increasing diversity, equity and inclusion within the agency. Examples include:

- In 2020, CDC's National Center for HIV/AIDS, Viral Hepatitis, STD and TB Prevention launched a series of monthly town halls focused on race and equity. The Center is also implementing a new "Equity Initiative" that is leveraging external and staff recommendations to bring about greater diversity and equity within programs and research.
- CDC's National Institute for Occupational Safety and Health launched a diversity, equity and inclusion initiative called the "Blueprint in Action" that is implementing recruitment, hiring and retention strategies aimed at creating greater workforce diversity; implementing training and other programming to foster a more inclusive workplace culture; and ensuring diverse workers and workplaces have equitable access to the Institute's research and services.
- CDC's Center for Global Health has initiated a 21-item action plan titled "21 in 2021" to address health inequities as well as any barriers to racial equity and inclusion within its workforce.

Last Reviewed: April 13, 2022
Source: Office of Health Equity (OHE)