WHEREAS, The terms Asian and Pacific Islander refer to individuals from a wide range of countries, ethnicities, and identities. All of the different communities within the Asian and Pacific Islander labels have their own unique histories, cultures, traumas, challenges, and successes; and

WHEREAS, 20 million individuals of Asian and Pacific Islander descent account for 6.1 percent of the U.S. population; and

WHEREAS, The United States has a long history of institutionalized discrimination and violence against individuals of Asian and Pacific Islander descent:

- In 1854, the California Supreme Court ruled that individuals of Asian descent could not testify against a White person in court, virtually guaranteeing that White people could escape punishment for violence and crime against individuals of Asian descent;
- The California School Law of 1860 segregated children of Chinese, Black/African American, and Indian descent into separate public schools than White children;
- In 1870 and 1872, the California State Legislature revised the 1860 law to exclude children of Chinese descent from attending any public schools;
- In 1871, 17 boys and men of Asian descent were lynched in Los Angeles by a mob of White and Latinx men in response to an unrelated murder of a White man;
- In 1875, Congress passed the Page Act, which was the first federal policy to restrict immigration. It banned female immigrants from East Asia due to racist stereotypes that all women immigrating from China were prostitutes. The absence of women from China in the United States heavily impacted the ability of men from China in the United States to develop families;
- In 1882, Congress passed the Chinese Exclusion Act, which banned immigration of individuals from China for 20 years and prevented those immigrants from China already in the United States from gaining citizenship;
- In 1885, 28 miners from China living in Rock Springs, Wyoming, were killed and 79 homes housing the members of the Chinese immigrant community were burned;
- In 1885, in reaction to a California Supreme Court Decision, the California State Legislature, amended The California School Law to allow children of Chinese descent to attend public schools, but required that these children be segregated. The Chinese Primary School was opened in San Francisco in 1885;
- During the late 19th century and through the first years of the 20th century, individuals of Chinese descent were excluded from accessing health care, with the exception of Tuberculosis cases, at San Francisco hospitals, including San Francisco General Hospital. When a hospital did agree to treat a Chinese individual, it often charged higher fees and taxes;
- In 1900, a bubonic plague outbreak in San Francisco was blamed on the Chinese immigrant community because the first publicly known victim was an individual from China;
At the 1904 World’s Fair in St. Louis, a 7-month exhibit of 1,000 individuals from the Philippines, derived from ten distinct ethnic communities, was designed to show the group as “savages” to promote the concept of colonizing that region, to United States citizens;

Even as individuals of Chinese descent were barred from receiving healthcare at local hospitals, the City and County of San Francisco withheld permission for the Chinese community to build a hospital to serve its community during the early part of the 20th century. The Board of Supervisors finally granted permission to the Chinese community to build a hospital in 1923. After two years of the Chinese community raising private funds, Chinese Hospital opened in 1925;

The Immigration Act of 1924 banned immigrants from Asian countries and set quotas for immigration from the Eastern hemisphere. Many individuals of Asian and Pacific Islander descent were deported due to this law;

In 1930, a group of 700 White agricultural workers in Watsonville, California started a 4-day riot due to racist resentment towards Filipino agricultural workers who had helped organize labor unions in the area and who socialized with White women at dance halls; the attack resulted in the murder of one person;

In 1933, California Governor James Rolph signed an amendment to the state’s anti-miscegenation laws, amending Civil Code Section 60 to ensure that its law also covered "members of the Malay race," barring Filipinos who they classified as Malay, not Mongolian, from interracial marriage;

In 1946 Congress inexplicably stripped veteran benefits, committed by President Roosevelt, from 250,000 Filipino soldiers who fought alongside U.S. troops as American Nationals during World War II. Decades of efforts to return those full benefits to the very few remaining Filipino veterans still alive have yet to successfully overturn Congress’s action;

In response to Japan bombing Pearl Harbor, the United States government forced approximately 130,000 individuals of Japanese ancestry, many of whom were American citizens, to live in internment camps from 1942 until 1945. Most of those who were imprisoned lost their homes and businesses during the process. A 1983 Congressional report indicated that the internment camp policy was based on racism, rather than actual security risks concerns. Between 1988 and 1993, 82,219 survivors received a presidential apology and $20,000 from the United States government;

In 1982, a male Chinese immigrant was beaten to death with a bat by two White men in Detroit, Michigan. The underlining motivation for the murder has been attributed to increasing fears, at the time, that the Japanese car industry was overtaking the United States car industry. The murderers were only required to participate in three years of probation, with no jail time served;

In 1984, the Ku Klux Klan set fire to shrimping boats owned by Vietnamese immigrants due to resentment and fears of White shrimp boat owners that the Vietnamese immigrants were taking their business;

Following the attacks on the Twin Towers on September 11, 2001, hate crimes against those perceived to be Muslim spiked. Federal and local authorities instituted discriminatory screening practices at airports. Violence against many Middle Eastern, and South/East Asian communities increased; and

WHEREAS, Over 2 million individuals of Asian and Pacific Islander descent are working on the front lines of the COVID-19 pandemic;
WHEREAS, According to the 2018 Census Bureau, 34% of San Francisco residents are of Asian or Pacific Islander descent; and

WHEREAS, The use of biased terminology and rhetoric against individuals of Asian and Pacific Islander descent related to COVID-19 by former President Donald Trump, other politicians, and some news media outlets, has perpetuated stigma against individuals of Asian and Pacific Islander descent in the United States; and

WHEREAS, The use of rhetoric against individuals of Asian and Pacific Islander descent has resulted in these groups being harassed, assaulted, and scapegoated for the COVID-19 pandemic in the United States; and

WHEREAS, In its March 16, 2021 report, STOP AAPI Hate, a non-profit organization, reported that 3,800 incidents of hate and violence against individuals of Asian and Pacific Islander descent have occurred throughout the United States during the COVID-19 pandemic. The report notes that the number of incidents reported are likely only a fraction of the number of hate incidents that actually have occurred during this period;\(^{vi}\) and

WHEREAS, Since January 2020, there has been a dramatic increase in reports of hate crimes and incidents against those of Asian and Pacific Islander descent; and

WHEREAS, The surge in attacks against individuals of Asian and Pacific Islander descent have targeted predominately elderly victims; and

WHEREAS, On January 30, 2021, an 84-year old man from Thailand died from injuries sustained during an unprovoked assault while on his routine morning walk in San Francisco; and

WHEREAS, A series of attacks occurred in Oakland’s Chinatown targeting seniors of Asian and Pacific Islander descent, who were all violently shoved to the ground in separate incidents; and

WHEREAS, On March 16, 2021, eight people were murdered at three Atlanta spas, owned by women of Asian descent, six of whom were women of Asian descent; and

WHEREAS, These murders are emblematic of the continued racism, misogyny, violence, sexual stereotyping and exploitation perpetrated against women of Asian and Pacific Islander descent; and

WHEREAS, Additional attacks on individuals of Asian and Pacific Islander descent continue to occur in San Francisco and throughout the country; and

WHEREAS, The World Health Organization (WHO) and the Centers for Disease Control and Prevention (CDC) recognize that naming the coronavirus disease 2019, or COVID-19, by reference to a geographic location or linking it to a specific ethnicity perpetuates stigma;\(^{vii}\) and

WHEREAS, Racism has been demonstrated to be a fundamental cause of disparate adverse health outcomes for Black, Indigenous, and other people of color;\(^{viii}\) and
WHEREAS, We are witnessing, through local and national media reports, social media posts, and anecdotal accounts from individuals throughout the country, the adverse impact of racism on the physical and mental health of individuals of Asian and Pacific Islander descent living in the United States; and

WHEREAS, Over the last 12 months, 31% of individuals of Asian and/or Pacific Islander descent have reported being subjected to racist slurs or jokes and 26% percent of these groups have feared that someone might threaten or harm them;\textsuperscript{x} and

WHEREAS, Statistics show that individuals of Asian and Pacific Islander descent are the least likely racial group to seek help with mental health issues;\textsuperscript{x} and

WHEREAS, To encourage development of a clinical environment which feels safe and welcoming to patients and staff who are of Asian and Pacific Islander descent, the New England Journal of Medicine offered the following suggestions;\textsuperscript{xi}

- Create a welcoming safe space by displaying culturally appropriate signage, posters, and literature;
- Create safe space for patients by separating those who make biased comments from them;
- Create safe space for staff through equity-oriented trainings addressing Asian and Pacific Islander cultural issues;
- Provide support to staff who face discriminatory remarks or hate-related violence at work through counseling, paid sick leave, and acknowledgement of the impact of these incidents on staff;
- Ask about incidents of racism, discrimination, and other traumas while taking a patient’s history;
- Consider screening for depression, anxiety, post-traumatic stress, and adverse childhood experiences (ACES), and facilitate appropriate clinical treatment; and

WHEREAS, The 2019 San Francisco Health Community Needs Assessment identified “Racial health inequities as not just a matter of unfortunate history, but an ongoing correctable injustice;” and

WHEREAS, The myth that Asian and Pacific Islander communities are a “model minority” contributes to masking unidentified health disparities in these distinct groups; and

WHEREAS, The lack of disaggregated data for the individual communities that are often categorized together as “Asian Americans and Pacific Islanders (AAPI),” contributes to the lack of knowledge regarding health disparities in these communities;\textsuperscript{xii} and

NOW THEREFORE, BE IT RESOLVED, The San Francisco Health Commission condemns and denounces all manifestations and expressions of racism, xenophobia, discrimination ethnic intolerance, and other bigoted rhetoric against individuals of Asian and Pacific Islander descent; and

FURTHER RESOLVED, The Health Commission recognizes that every individual, regardless of their race, ethnicity, gender, gender identity, sexual orientation, socio-economic status,
disability status, religion, country of origin, or political party, has the right to safety, respect, and wellbeing; and

FURTHER RESOLVED, The Health Commission expresses its heartfelt solidarity with every individual of Asian and Pacific Islander descent who has been attacked, along with their families and communities, and sends its deepest condolences to the family and friends of those individuals who were murdered on March 16, 2021; and

FURTHER RESOLVED, The Health Commission acknowledges and commends the impactful work of the San Francisco Department of Public Health (DPH) in addressing discrimination and violence towards individuals and communities of Asian and Pacific Islander descent. The Department’s outreach to these communities early in the pandemic, in an effort to provide support and education, and later testing and vaccines, has been crucial to addressing their public health needs. In addition, the DPH has provided ongoing consultation to the Mayor’s Office, Board of Supervisors, San Francisco COVID-19 Command Center, and the general San Francisco community regarding COVID-19 information, including the harm of stigmatizing any individual or group during the pandemic; and

FURTHER RESOLVED, The Health Commission directs the San Francisco Department of Public Health to utilize innovation to address health disparities in all San Francisco communities, including those of Asian and Pacific Islander descent. This includes disaggregating data for individual groups to effectively understand the needs of each individual San Francisco community instead of grouping data into a category such as “Asian American/Pacific Islander.” The process of disaggregating data may require utilizing several years of data for smaller communities to reach statistically significant results; and

FURTHER RESOLVED, The Health Commission directs the San Francisco Department of Public Health to add a footnote to any presentation or report that includes race and/or ethnicity data presented to the Health Commission, explaining lack of data for a specific community to ensure that no community experiences being invisible due to its size or small data set; and

FURTHER RESOLVED, The Health Commission recommends that the San Francisco Department of Public Health continue to strengthen its relationships with community leaders and community-based organizations to stay updated on changing service needs and trends of all San Francisco communities.

I hereby certify that the Health Commission at its meeting of May 18, 2021 adopted the foregoing resolution.

Mark Morewitz
Executive Secretary to the San Francisco Health Commission
