Tackle the structural racism embedded in the health care system

Updated March 29, 2024, 2:30 a.m.

Re “When 2 in 5 people report delaying health care because of costs, something is wrong”: Your March 24 editorial supports one critical initiative for keeping people healthy. We appreciate the commitment to address racial and economic inequities in the
health care financing system. However, reducing the costs of insurance, out-of-pocket expenses, and prescription drugs alone will not make us healthier.

We need to infuse this conversation with a public health approach that addresses upstream factors and seeks solutions to the structural racism embedded in the health care system itself. We need statewide benchmarks that measure public health, as called for in the Strategic Plan to Advance Racial Equity. The plan, released recently by the Massachusetts Department of Public Health, outlines “action and accountability to address the systemic inequities faced by people who identify as Black, Indigenous, Latino and/or Asian or Pacific Islander, seeking to acknowledge, transform, and improve the public health outcomes of all people in Massachusetts.”

While lawmakers consider establishing affordability benchmarks, we urge them also to advance two additional pieces of legislation that would add some of the teeth called for in the editorial: the Statewide Accelerated Public Health for Every Community Act, which would help local public health departments engage the health care system in understanding and addressing these intersections; and An Act to Advance Health Equity, which calls for prioritizing equity in state government, standardizing and reporting on health equity data, and improving access to equitable, quality health care.

Taken together, these proposals set forth a collaborative framework between our public health network and the health care sector built on an understanding that health is affected by the social, economic, and structural conditions within which people live, work, and play.

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