**Call for inputs for the 2024 report of the United Nations Secretary-General on the implementation of the programme of activities of the International Decade for People of African Descent**

**Purpose:** Report of the United Nations Secretary-General to be presented to the General Assembly at its seventy-ninth session.

**Introduction**

I am Dr. Tauheedah Bronner, a governing board member of [All for Reparations and Emancipation (AFRE)](https://allforreparations.org/). All for Reparations and Emancipation (AFRE/CURE) is an education and advocacy organization in support of reparations and self-determination for Afrodescendants across the slavery diaspora. AFRE was granted UN Consultative NGO Status in 1997 under the name CURE – Caucasians United for Reparations and Emancipation. The NGO made a name change in the year 2000.

By background, I am a Naturopathic Physician licensed in the State of Maryland. At present, I run a private practice specializing in Holistic Primary Care Medicine.

Kindly consider our suggestions for tangible and actionable measures to address racial discrimination and health disparities experienced by Afrodescendants on a national scale. These measures involve the adoption and efficient execution of policies and programs that account for the unique circumstances of Afrodescendant men, women, and children. The proposed actions focus on the following areas outlined in the activity program:

1. Recognition: Promote equality education and raise awareness.
2. Access to Justice: Ensure reparations and justice for past wrongs.
3. Development: Prioritize health education initiatives.

**Abstract:**

Our contribution addresses the **unique health challenges** faced by Afrodescendants that are **deeply rooted in the legacy of plantation slavery and generational trauma.** The long-term impact of centuries of abuse, oppression and racial terrorism have profound consequences on the physical, mental, and emotional well-being of the Afrodescendant population. The legacy of plantation slavery has left a lasting imprint on our health from higher rates of chronic and avoidable diseases to disparities in access to healthcare, and the effects of generational trauma on our health are still felt today.

**Arguments:**

1. **Chronic diseases**: Afrodescendants are disproportionately affected by chronic and avoidable conditions such as diabetes, hypertension, and heart disease. These disparities can be traced back to the conditions of slavery, where inadequate access to healthcare, harsh living conditions, being forced to eat the worst unhealthy food, and being worked to death from sunup to sundown, all contributed to the development of these health conditions in the first place. Today, Afrodescendants continue to face significant disparities in access to quality healthcare due to factors such as lack of health insurance, transportation issues, and provider bias and lack of access to healthy food options. Additionally, the historical distrust of the healthcare system among Afrodescendants stemming from a legacy of exploitation and mistreatment, further impedes access to care.
2. **Mental health disparities**: The trauma of slavery coupled with ongoing discrimination and systemic racism, has contributed to higher rates of mental health disorders such as depression and anxiety The intergenerational transmission of trauma further exacerbates these challenges, as the effects of past injustices continue to be felt in the present resulting in rising suicidal rates that are often overlooked and silenced if the black community.
3. **Increased Maternal & Fetal Mortality Rates**: According to the most recent data, the maternal death rate for Black women is more than double that of white women: 44.0 deaths per 100,000 live births compared to 17.9. It was also more than three times the rate for Hispanic women at 12.6. This week is Black Maternal Health Week (April 11-April 17) which was established to bring awareness to the challenges and barriers that Black mothers and babies experience in receiving maternal health care in the US.

**Recommendations and Actionable Steps** for the forthcoming 2nd Decade on People of African Descent:

1. **Formal Recognition of "Afrodescendants as a People"**
   * Advocate for reparations, restitution, restoration, and comprehensive healing that tackle the root causes of health disparities stemming from slavery to achieve optimal health outcomes.
2. **Policy Advocacy and Legislation:**

* Advocate for policies at national and international levels that prioritize the health needs of Afrodescendants. This may include targeted healthcare funding, anti-discrimination laws in healthcare settings, and measures to address social determinants of health.
* Push for legislation that mandates data collection and reporting on health outcomes disaggregated by race and ethnicity to better understand and address disparities.

1. **Healthcare Access and Affordability:**

* Increase access to affordable healthcare services for communities of Afrodescendants, including expanding Medicaid and other public health insurance programs.
* Implement community health centers in underserved areas with large populations of Afrodescendants, providing culturally competent care.

1. **Health Education and Awareness:**

* Develop culturally sensitive health education programs tailored to the needs of Afrodescendant communities, focusing on preventive care, chronic disease management, and mental health.
* Partner with community organizations, faith-based groups, and local leaders to disseminate health information and promote healthy behaviors.

1. **Addressing Social Determinants of Health:**

* Address underlying social determinants of health such as poverty, unemployment, housing instability, and systemic racism that contribute to health disparities.
* Implement programs aimed at improving economic opportunities, affordable housing initiatives, and educational equity for Afrodescendants.

1. **Cultural Competency Training:**

* Provide cultural competency training for healthcare providers to better understand the unique health needs and experiences of people of African descent.
* Promote diversity in the healthcare workforce by recruiting and retaining more healthcare professionals from Afrodescendant communities.

1. **Research and Data Analysis:**

* Invest in research initiatives focused on identifying the root causes of health disparities among Afrodescendants, evaluating the effectiveness of interventions.
* Support data-driven approaches to health policy and programming, ensuring that interventions are evidence-based and tailored to specific community needs.

1. **Community Engagement and Empowerment:**

* Empower Afrodescendant communities to advocate for their own health needs through community organizing, leadership development, and civic engagement.
* Foster partnerships between community organizations, healthcare providers, and government agencies to co-design and implement health interventions.

1. **International Collaboration:**

* Foster collaboration between countries to share best practices, resources, and lessons learned in addressing health disparities among Afrodescendants and all people of African descent.
* Advocate for global initiatives that prioritize health equity and social justice, recognizing the interconnectedness of health outcomes across borders.

**Conclusion:**

The health challenges faced by Afrodescendants today are deeply rooted in the legacy of plantation slavery and generational trauma. Addressing these challenges requires a comprehensive, multi-faceted approach that first acknowledges the impact of slavery and offers effective solutions.

By implementing these recommendations and actionable steps, the UN 2nd Decade on People of African Descent can make significant strides towards combating health disparities and promoting health equity for Afrodescendant communities and people of African descent worldwide. Our “Health is our greatest Wealth” and I am eager to contribute to these proposals in any capacity possible.

Respectfully submitted by:

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