“We are in the health business”
– Bill Lindsay, Richmond, City Manager

Richmond’s Health Equity Partnership Update and Health in All Policies

City services through the prism of health
Richmond Health Equity Partnership (RHEP)

Richmond: Healthy City Management

- West Contra Costa Unified School District (WCCUSD)
- Contra Costa Health Services (CCHS)
- City of Richmond
- Community Partners and Organizations
- Health in All Policies (HiAP)
- Full Service Committee School (FSCS)
Richmond Health Equity Partnership (RHEP) Update

- Cross Systems Collaboration
- Capacity Building to Impact Community Health and City Services
- WCCUSD Full service Community Schools resolution
- Supporting Residents, CBO’s and Schools’ Health Initiatives
Leveraging over $10 million dollars
Focus on Developing Healthy Cities

Strategic Growth Council
- Mira Flores Green Belt Project
- Urban Greening Master Plan
- Mathieu Alley Greening Project
- Livable Corridors—Form based Codes

State Parks Prop 84
- Elm Playlot
- Greenway Unity Park
Health in All Policies

A core component of implementing the Health Element of the General Plan & improving the well-being and living conditions for all Richmond residents.

Health in all Policies is city management as ‘preventative medicine’ and all city staff are ‘community clinicians.’
Our challenge... improve health for all Richmond residents


Jason Corburn - UC Berkeley - jcorburn@berkeley.edu
Our challenge...eliminating health inequities for people of color in Richmond
Our challenge...ensuring your zip code doesn’t determine your life expectancy

Source: http://cchealth.org/health_data/

Jason Corburn - UC Berkeley - jcorburn@berkeley.edu
Our challenge... reversing racial inequities.

Life expectancy Bay Area

Gap is growing = Health inequity

2.3 years
4.9 years
7.8 years
Infant Mortality Rate (per 1,000 live births), by Race/Ethnicity, Contra Costa, 2005-2007

Is it just income?

**INFANT MORTALITY**

Per 1,000 Live Births

- **African Americans with Household Income $35,000+**: 16.6
- **White Americans with Household Income <$10,000**: 11.2
Is it just education?

INFANT MORTALITY

Per 1,000 Live Births

African Americans 16+ years of schooling

White Americans <9 years of schooling

NCHS 2002

Jason Corburn - UC Berkeley - jcorburn@berkeley.edu
Is it health care?

INFANT MORTALITY

Per 1,000 Live Births

NCHS 2002

African Americans
First Trimester Prenatal Care

White Americans
Prenatal Care After 1st Trimester or None

12.7
7.1
Is it unhealthy behaviors, like smoking?

INFANT MORTALITY

Per 1,000 Live Births

African American Non-Smokers: 13.2
White American Smokers: 9.2

NCHS 2002

Jason Corburn - UC Berkeley - jcorburn@berkeley.edu
Richmond Health Equity Partnership hypothesis: Cumulative stress over life-course

Physical and Mental Health Impacts

- Social exclusion & segregation
  - Stress

- Environmental pollution & toxic exposures
  - Stress

- Lack of mobility
  - Stress

- Threat of Housing displacement
  - Stress

Discrimination

- Lack of, poor quality, high cost for basic services, including primary care

- Threats & fear of violence

- Poor quality Education

Richmond Health Equity Partnership hypothesis: Cumulative stress over life-course
Health equity in all city decisions

Jason Corburn - UC Berkeley - jcorburn@berkeley.edu
CA: Health in All Policies

Health in All Policies Task Force Implementation Plan

Health and Health Equity in State Guidance

Endorsed by the SGC on May 10, 2012

I. The Health in All Policies Task Force

The Health in All Policies (HiAP) Task Force is a multi-agency effort to improve state policy and decision-making by encouraging collaborative work towards health and sustainability goals by incorporating health considerations into non-health policy areas. After an in-depth process that included input from health and policy experts, the public, and extensive Task Force discussions, the Strategic Growth Council (SGC) approved eleven priority recommendations and charged the Task Force with developing implementation plans.
Environmental Justice at the Local and Regional Level

Legal Background

Cities, counties, and other local governmental entities have an important role to play in ensuring environmental justice for all of California’s residents. Under state law:

“[E]nvironmental justice” means the fair treatment of people of all races, cultures, and incomes with respect to the development, adoption, implementation, and enforcement of environmental laws, regulations, and policies.

(Gov. Code, § 65040.12, subd. (e).) Fairness in this context means that the benefits of a healthy environment should be available to everyone, and the burdens of pollution should not be focused on sensitive populations or on communities that already are experiencing its adverse effects.

Many local governments recognize the advantages of environmental justice; these include healthier children, fewer school days lost to illness and asthma, a more productive workforce, and a cleaner and more sustainable environment. Environmental justice cannot be achieved, however, simply by adopting generalized policies and goals. Instead, environmental justice requires an ongoing commitment to identifying existing and potential problems, and to finding and applying solutions, both in approving specific projects and planning for future development.
Vision, Goals, and Strategy

We are an alliance of change agents committed to improving the life chances of California's boys and young men of color. The Alliance includes youth, community organizations, foundations, and systems leaders – like education, public health, and law enforcement officials. We are active at the local and state levels, with a particular focus on Oakland, Los Angeles, and Fresno. Our work is supported by a variety of funders.
1. Health inequities are not natural, genetic or inevitable
2. Health is more than health care
3. Health is tied to distribution of resources
4. Economic & political inequities are bad for health
5. Racism is a central driver of inequities
6. Chronic stress can be deadly
7. Choices we make are shaped by choices we have
8. Organizational decisions influence inequities
9. Service decisions influence inequities
10. Social policies influence inequities
Nat’l Health Care Reform

Professor J. Corburn, jcorburn@berkeley.edu
National Prevention Council Action Plan
IMPLEMENTING THE NATIONAL PREVENTION STRATEGY
June 2012

HHS Action Plan to Reduce Racial and Ethnic Health Disparities
A NATION FREE OF DISPARITIES IN HEALTH AND HEALTH CARE

“[T]he U.S. health disadvantage has multiple causes and involves some combination of inadequate health care, unhealthy behaviors, adverse economic and social conditions, and environmental factors, as well as public policies and social values that shape those conditions.”
In the roughest neighborhoods of Oakland, Sandra Tramiel carries a baby scale in her knapsack as she undertakes a profound mission: saving Alameda County's black children from death before their first birthday.

Tramiel is a public health nurse, a foot soldier in a decades-long battle waged here and across the country to reduce the disproportionately high death rate of African American newborns.

In Alameda County, which has the highest proportion of African Americans in the state, there is new evidence that efforts like Tramiel's home visits are paying off. The rate of black infant deaths is on the decline, having dropped to 8.05 per 1,000 live births between 2007 and 2010, one of the lowest rates in the state.

The statewide black infant mortality rate of 9.5 deaths per 1,000 live births in 2010, the most recent year for which data is available, is still agonizingly high, but for the first time the number is below double digits. The state saw a 21 percent drop from 2008 and 2010.
Richmond Health Equity Partnership (RHEP)

West Contra Costa Unified School District (WCCUSD)
Contra Costa Health Services (CCHS)
City of Richmond
Community Partners and Organizations

Health Equity Data, Training and Report Card
Health in All Policies (HiAP)
Full Service Committee School (FSCS)
Health in All Policies Strategic Plan:
Lift-up what works/find new ways to leverage across departments

1. Interdepartmental Leadership & Working Group
2. Identification of Drivers of Health inequity and equity in Richmond
3. Integrate Health Equity in City’s Budget Strategy
4. Health Equity Goals in City Procurement
5. Recruit and Maintain a Diverse Workforce in Richmond City Government
6. Health Equity Screening Tools
7. Increase Economic Opportunities in Richmond
8. Environmental Health and Justice
9. Education and Social Environments
10. Housing, Residential Segregation and Concentrated Poverty
11. Full Service and Safe Communities
12. Access to affordable & high quality Health Care

Jason Corburn - UC Berkeley - jcorburn@berkeley.edu
HiAP: Aligning existing work with health equity goals

City of Richmond, Health in All Policies
Questions?