RICHMOND HEALTH EQUITY PARTNERSHIP (RHEP) #17

450 Civic Center Plaza, First Floor, Richmond Room, Richmond CA

Wednesday September 25, 2013
AGENDA

I. Introductions

II. Health in All Polices (HiAP)
   a) HiAP Strategy Document
   b) HiAP City Staff Engagement
   c) HiAP Community Engagement & Next Steps

III. Subcommittee Report Back
   a) Health Equity Data, Training and Report Card
   b) Full Service Community Schools (FSCS)

IV. Community Health and Wellness Element Implementation & Neighborhood Action Plans

V. Healthy Richmond Update

VI. Next Steps/Announcements
HiAP Strategy document

City of Richmond
Health in All Policies Strategy 2013-2014
INTRODUCTION – MISSION, VISION, AND GOALS

Mission, Vision & Goals

Richmond’s Health in All Policies (HIAP) Strategy is an effort to advance health for all residents and promote equity in health by addressing the social determinants of health. This strategy begins with the premise that everyday decisions made in the City of Richmond can promote or impair health and that healthy decisions and policies for health are successful for everyone. HIAP recognizes that health is not just something that occurs at a doctor’s office or in a hospital, but rather health can be found in the everyday decisions made in almost every city department and can be found in setting policies, such as the General Plan and 5 Year Budget.

Good health is the interest of everyone in Richmond and the region, which bring healthy, productive, and high-quality workforces, increases the capacity for learning, strengthens families and communities, supports environmental quality, and helps reduce stress and feelings of insecurity. This Health Equity paradigm recognizes that all Richmond residents should have the opportunity to maintain the health that allow them to live a long, healthy life, regardless of their job, neighborhood of residence, level of education, immigration status, sexual orientation, or ethnic background, and the City of Richmond can and should enhance healthy choices and conditions for everyone.

“Health in All Policies” (HIAP) is another way of saying “Healthy Public Policy” and relates to the practice of integrating health promotion into the day-to-day decisions, policies, and actions of the City of Richmond. HIAP recognizes that improving the health of Richmond residents is best done through partnerships between the City, state government, and private and public sectors. HIAP is a concept that allows commitment to the belief that health and the federal government, so the strategy aims to both fulfill a patient’s right outside the city while also offering a way for how city management and policymaking can promote health and prevent illness and premature death.

Our Goal = Health Equity

This HIAP strategy is focused on increasing health equity in the City of Richmond. Currently, too many residents in Richmond, particularly the poor and people of color, suffer inequality from illnesses that are preventable. HIAP is a concept of reducing the unnecessary and unfair health burdens facing some Richmond residents while also improving health for everyone. The following table provides some examples of current health issues found in Richmond and this HIAP strategy aims to address.

Fundamentally, HIAP is premised on at least five visions for Richmond:

1. Health starts long before it is served by reaching every child at school or doctor’s office.
2. Health starts in our families, schools, workplaces, and communities.
3. Your neighbor’s health should not be hazardous to your health.
4. All Richmond residents should have the opportunity to make the choices that allow them to live a long, healthy life, regardless of their job, neighborhood of residence, level of education, immigration status, sexual orientation, or ethnic background.
5. City government can and does influence health in many of its decisions and departments.
Governance & Leadership

Health Equity Statement:
HIAP reflects the practice of the day-to-day decisions, policies, and actions of the City of Richmond that can best promote health for all, and, more specifically, for populations currently experiencing some of the worst health outcomes. HIAP is both a goal and a process that requires interdepartmental and cross-sectoral leadership and collaboration. To work collaboratively, city staff need the skills to communicate effectively, understanding about other departments' work and integration of strategies, and a minimum level of trust and relationships. Infrastructure is required to support communication and the sharing of information between staff, as well as training to ensure that all staff have an understanding of the drivers of health disparities and how each department can positively impact the community’s health. City staff should view their daily work as integral to contributing towards health equity in Richmond.

Furthermore, HIAP requires that health equity goals are part of the City of Richmond’s budget strategy and are considered in city procurement. Systems must be developed to monitor progress towards healthy equity across departments, as well as holding departments accountable to these goals. Leadership is needed across agencies and community partners, and the City of Richmond should play an active role in facilitating collaboration between key stakeholders.

Primary Cumulative Stressors Targeted
- Racial Profiling
- Poor Air Quality & Lack of Safe Recreation
- Residential Segregation
- Economic Insecurity

Street, Neighborhood, & School Violence
- Overburdened Social Services
- High Food Prices & Lack of Healthy Foods
- Lack of Affordable Healthcare

Current Conditions: Citywide Governance Measures
- 29% of Richmond residents participated in community/volunteer service.
- 30% of Richmond residents surveyed rate the job that city government is doing as good or excellent.
- 29% of Richmond residents surveyed rate the value of services provided by the city as good or excellent.
- 29% of Richmond residents surveyed rate the sense of community as good or excellent.
- 21% of Richmond residents surveyed rate the overall quality of life in the city as good or excellent.
ECONOMIC DEVELOPMENT AND EDUCATION

Economic Development & Education

Health Equity Statement:
We cannot have a healthy economy without a healthy workforce and similarly, we cannot have a healthy population without the economic means to thrive. In addition to developing a strong, diverse economic base, we need to invest in education and training of the local population at all levels and across fields. Education has broad impacts on standards of living and social interactions, with consequences for the health of individuals and communities. Through three inter-related pathways, education influences health: health knowledge and behaviors, employment and income, and social and psychological factors. Completion of formal education is a key pathway to employment and access to healthier and higher paying jobs that can provide food, housing, transportation, health insurance, and other basic necessities for a healthy life. Education is linked with social and psychological factors, including sense of control, social standing and social support. These factors can improve health through reducing stress, influencing health-related behaviors and providing practical and emotional support. Unemployment is associated with premature mortality, cardiovascular disease, hypertension, depression, and suicide. Families at the bottom 20% of earners (so even those not in poverty) spend 30% of their income in debt payments. These costs commonly result in reduced spending on food in general (and healthy food specifically), reduced access to health care, and reduced time spent in recreation, all of which lead to increased obesity and stress, leading to increased heart disease, stroke, cancer, depression and anxiety, among other health problems.

Current Conditions: Citywide Education, Economic Development and Career Opportunity Measures
- The unemployment rate in Richmond is 10.7%.
- The vacancy rate for elementary school students in Richmond is 48.8%.
- The high school dropout rate in Richmond is 22.30%.
- 42.3% of households are under the self-sufficiency standard.
- 83% of Richmond residents surveyed do not rate economic opportunities in Richmond as good or excellent.
- 90% of Richmond residents surveyed do not rate the education opportunities in the city as good or excellent.

Primary Cumulative Stressors Targeted
- Racism
- Overcrowded Social Services
- Economic Insecurity
Health Equity Statement:

A growing body of research shows that where one lives, one’s social status, and the toll of chronic stress have a much more decisive effect on one’s life span than visits to a doctor’s office. Within Richmond, the average life expectancy varies by more than 5 years depending on what zip code you live in. Chronic stress, induced, for example, by living in fear of crime, under the burden of financial problems, or worrying about where the next meal will come from, results in a physiological stress response that over the years increases the risk of chronic disease. A Full Service and Safe Community includes a community free of crime and violence; with access to affordable and quality food, transportation, and open space; and access to other basic services, such as banking, libraries, the arts, etc. The location, quality, affordability, and accessibility of these facilities and services contribute to “neighborhood completeness” that impact health and well-being health in other ways beyond stress. For example, the presence of safe, accessible, quality parks, plazas, recreation facilities, and arts and cultural facilities can reduce rates of depression and isolation and increase physical activity and social interactions with others. The more public and retail services in one’s neighborhood, the greater the likelihood of accessing these basic needs by walking or biking, increasing physical activity. Local goods and services can increase “eyes on the street” and reduces motor vehicle injuries and pollution. The City has a role in developing and designing physical neighborhoods as well as the services and programs to facilitate residents interacting in public space.

Current Conditions: Full Service and Safe Communities

▪ 71% of children feel safe at their nearby park during the day
▪ 63% of Richmond adults feel safe in the neighborhoods
▪ Only 33.1% of eligible residents participate in CalFresh
▪ 19% of adults report doing physical activity within the past week
▪ 33% of adults report eating 3+ veggies/fruit per day within the past week
▪ 24% of residents surveyed rate the ease of walking in Richmond as excellent or good
Health Equity Statement:

Housing quality, cost and location all contribute to health in numerous ways. Unsafe housing and habitability conditions that affect health include poor indoor air quality, inadequate heating or ventilation, exposure to lead-based paint, rodent and pest infestations, exposed heating sources, excessive noise, and unprotected windows. Poor indoor air quality and inadequate heating or ventilation, which can lead to the growth of mold and dust mites, exacerbates asthma and respiratory allergies. Exposure to lead-based paint, which is the primary cause of lead poisoning in children, may cause permanent developmental damage and behavioral problems. Children of color and children from low-income families are more likely to have elevated blood lead levels. High housing costs relative to income can result in spending a high proportion of income on housing at the expense of other needs, living in overcrowded or substandard housing, moving to where housing costs are lower or becoming homeless. Involuntary displacement contributes to stress, loss of supportive social networks and increased risk for substandard housing conditions and overcrowding. Racially segregated neighborhoods and those with concentrated poverty typically have fewer assets and health-promoting resources. Furthermore, racial residential segregation is a primary cause of racial differences in socioeconomic status (SES), a fundamental cause of racial differences in health, by determining access to education and employment opportunities.

Current Conditions: Residential Environment Measures

- 52% of Richmond residents report that blight is not a major problem
- 31% of Richmond residents rate access to affordable housing as excellent or good
- 31% of Richmond residents rate the variety of housing options in Richmond as excellent or good
- 58% of Richmond residents believe that their neighborhood is a good place to live
- 11% of residents feel safe from property crimes
- 19% of residents rate the quality of code enforcement as excellent or good

Primary Cumulative Stressors Targeted

- Poor Air Quality & Lack of Safe Recreational Space
- Residential Segregation
- Street, Neighborhood, & School Violence
Environmental Health & Justice

Health Equity Statement:
Environmental quality and sustainability are linked to human health and Richmond has an important history of Environmental Health research and action. Richmond’s focus on Environmental Health and Justice highlights the importance of conserving energy and natural resources, improving air quality, protecting open and green spaces, and reducing the impact of contaminated sites, environmental hazards, and noise pollution. Richmond has an abundance of natural resources, such as an extensive shoreline, but access to these resources is inequitably distributed. Access and use of open space and natural habitats provides opportunities for physical activity while contributing to mental health and overall well-being. Living in close proximity to air pollution emissions and contaminated sites results in respiratory diseases, reduced lung growth, and heart disease. Exposure to excessive noise can adversely affect sleep, school and work performance and contribute to cardiovascular disease. The City of Richmond is working with county, regional, state and federal agencies and organizations to focus on improving the environment and making it equitable for all.

Primary Cumulative Stressors Targeted

- Poor Air Quality & Lack of Safe Recreational Space

Current Conditions: Environmental Health and Justice Measures
- 14% of residents rate the overall cleanliness of Richmond as excellent or good
- 24% of residents surveyed rate the overall air quality as excellent or good
- 26% rate the quality of the natural environment as excellent or good
- 67% rate the city's recycling services as excellent or good
- 16% of residents report a lack of safety from environmental hazards
- 79% of residents report that it is essential or very important for the City to improve environmental quality in Richmond.
Quality and Accessible Health Care/Health Home & Social Services

Quality & Accessible Health Homes and Social Services

Health Equity Statement:
Among the critical determinants of living environments that promote a community’s overall health include access to top quality medical services and preventive care. While inadequate access to health care is only one factor in creating health disparities, it is especially important that populations who are burdened by exposure to harmful environments and adverse social conditions have access to quality primary care. The availability of primary care, particularly for vulnerable populations, has a role in preserving good health and preventing morbidity and hospitalizations from chronic and communicable diseases. Community-based health centers, including community clinics and school-based clinics, have traditionally reached safety net populations and the uninsured while providing affordable health care. For Richmond residents who rely on public transit as their primary means of transportation, it is critical to ensure efficient public transportation connections to community health facilities. Similarly, low-income households, seniors, and people with disabilities may be particularly vulnerable in the event of an emergency. While the city does not directly provide health care services, access to quality, affordable health care is both a major concern in the Richmond community and the city has resources and the responsibility to promote health and wellness.

Primary Cumulative Stressors Targeted

- Overburdened Social Services
- Lack of Affordable Health Care

Current Status of Health Care Access in Richmond:
- 26% of Richmond residents do not have health insurance
- 22% of residents are insured by a government program
- 52% of residents have private coverage or have health insurance from an employer in Richmond
- Over 29% of residents did not have a doctor visit in the last year
- 26% of Richmond residents visited ER in last year
- 18% delayed getting prescription drugs or medical care in last year
- 32% of Richmond residents are obese, 30% overweight, and 21% diagnosed with asthma.
### Appendix B: Current Health Equity and Inequity Indicators

#### Health Equity Polygon: Desired Goals, 2013

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Richmond</th>
<th>Contra Costa</th>
<th>CA</th>
<th>Sources</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self Reported Health: Excellent or Very Good</td>
<td>40%</td>
<td>N/A</td>
<td>N/A</td>
<td>2013 RCS</td>
</tr>
<tr>
<td>Job that City Government does at involving Citizens</td>
<td>38%</td>
<td>N/A</td>
<td>N/A</td>
<td>2013 RCS</td>
</tr>
<tr>
<td>Participation in Volunteer Work or Community Service</td>
<td>29%</td>
<td>64%</td>
<td>44%</td>
<td>CHIS &amp; 2013 RCS</td>
</tr>
<tr>
<td>% of Youth from Priority Neighborhoods Participating in the Summer Youth Employment Program</td>
<td>89%</td>
<td></td>
<td></td>
<td>Summer Youth Employment Project-Will Report: <a href="http://www.cdcchms.org">www.cdcchms.org</a></td>
</tr>
<tr>
<td>% of Prisoner Recruit and Parolee Population Served by Re-entry and Transition Programs</td>
<td>Less than 50% (20% for substance abuse)</td>
<td></td>
<td></td>
<td>Contra Costa Interfaith Supporting Community Organization’s (CCISCO) Speaking Truth on Coming Home Report: <a href="http://www.conacca.org">www.conacca.org</a></td>
</tr>
<tr>
<td>Perceived Safety at Nearby Park or Playground</td>
<td>71%</td>
<td>93%</td>
<td>90%</td>
<td>CHIS</td>
</tr>
<tr>
<td>Perceived Safety in Neighborhood</td>
<td>60%</td>
<td>87%</td>
<td>80%</td>
<td>CHIS</td>
</tr>
<tr>
<td>% of Eligible Households Participating in CalFresh</td>
<td>31.3%</td>
<td>53%</td>
<td>53%</td>
<td>California Food Policy Advocates: <a href="http://www.cfpa.net">www.cfpa.net</a></td>
</tr>
<tr>
<td>Regular Physical Activity Last Week</td>
<td>19%</td>
<td>24%</td>
<td>24%</td>
<td>CHIS</td>
</tr>
<tr>
<td>Ate Fruit &amp; Veggies 5+ Times/Day Last Week</td>
<td>53%</td>
<td>53%</td>
<td>54%</td>
<td>CHIS</td>
</tr>
<tr>
<td>Perceived Safety from Environmental Hazards</td>
<td>16%</td>
<td></td>
<td></td>
<td>2013 RCS</td>
</tr>
<tr>
<td>Access to a Personal Doctor</td>
<td></td>
<td></td>
<td></td>
<td>CHIS</td>
</tr>
</tbody>
</table>

#### Health Inequity Polygon: Desired Goals, 2013

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Richmond</th>
<th>Contra Costa</th>
<th>CA</th>
<th>Sources</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self Reported Health: Fair and Poor</td>
<td>28%</td>
<td>15%</td>
<td>16%</td>
<td>CHIS</td>
</tr>
<tr>
<td>Experience with Discrimination/Racism</td>
<td>94%</td>
<td>N/A</td>
<td>N/A</td>
<td>2013 RCS</td>
</tr>
<tr>
<td>Richmond as a Fair or Poor Place to work</td>
<td>79%</td>
<td>N/A</td>
<td>N/A</td>
<td>2015 RCS</td>
</tr>
<tr>
<td>High School Dropout Rate</td>
<td>22.3%</td>
<td>10.1%</td>
<td>13.2%</td>
<td>California Department of Education: <a href="http://www.data.cde.ca.gov/datasets/">www.data.cde.ca.gov/datasets/</a></td>
</tr>
<tr>
<td>Households under Self-Sufficiency Standard</td>
<td>42.5</td>
<td>21.2%</td>
<td>31%</td>
<td>Insights Center for Community Economic Development: <a href="http://www.insightsdc.org">www.insightsdc.org</a></td>
</tr>
<tr>
<td>Perceived lack of safety to and from Schools</td>
<td></td>
<td></td>
<td></td>
<td>CHIS (Data Forthcoming)</td>
</tr>
<tr>
<td>Victim of Crimes in Last Year (Anyone in Household)</td>
<td>30%</td>
<td></td>
<td></td>
<td>2013 RCS</td>
</tr>
<tr>
<td>% of Households Overpaying for Housing</td>
<td>48.6%</td>
<td>44.3%</td>
<td></td>
<td>2006-2010 American Community Survey: <a href="http://www.census.gov/ipc/www/">www.census.gov/ipc/www/</a></td>
</tr>
<tr>
<td>% of Children Diagnosed with Asthma</td>
<td>27%</td>
<td>23%</td>
<td>15%</td>
<td>CHIS</td>
</tr>
<tr>
<td>Perceived need of Mental Health services</td>
<td>14.8%</td>
<td>14.7%</td>
<td></td>
<td>CHIS (Richmond Data Forthcoming)</td>
</tr>
<tr>
<td>Hard to Understand Doctor—Lack of Linguistic Component Care</td>
<td>2.4%</td>
<td>3.5%</td>
<td></td>
<td>CHIS (Richmond Data Forthcoming)</td>
</tr>
<tr>
<td>Normal Source of Care is ER or no usual source of Care</td>
<td>15%</td>
<td>10.7%</td>
<td></td>
<td>CHIS (Richmond Data Forthcoming)</td>
</tr>
</tbody>
</table>
# HiAP City Staff Engagement

<table>
<thead>
<tr>
<th>Department/Program</th>
<th>Meeting Date/Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Office of Neighborhood Safety</td>
<td>October 9 at 1:30pm</td>
</tr>
<tr>
<td>Library</td>
<td>July 16 at 1:00pm</td>
</tr>
<tr>
<td>Finance Director</td>
<td>October 2 at 1:30pm</td>
</tr>
<tr>
<td>LEAP</td>
<td>July 16 at 1:00pm</td>
</tr>
<tr>
<td>Recreation</td>
<td>October 2 at 2:00pm</td>
</tr>
<tr>
<td>Housing Authority</td>
<td>September 24 at 3:00pm</td>
</tr>
<tr>
<td>Cities of Service</td>
<td>September 12 at 1:00pm</td>
</tr>
<tr>
<td>Revenue Manager</td>
<td>September 12 at 2:00pm</td>
</tr>
<tr>
<td>Human Resources</td>
<td>September 24 at 3:30</td>
</tr>
<tr>
<td>Planning</td>
<td>July 16th at 2:00PM</td>
</tr>
</tbody>
</table>
HiAP Community Engagement
HEALTH EQUITY DATA, TRAINING, AND REPORT CARD
FULL SERVICE COMMUNITY SCHOOLS
**Solarton**

- GRID Alternatives volunteer driven fundraiser
- 8 families received solar systems in 1 day
- 75% bill reduction & $148,000 saved over lifespan
- 124 total systems
**Smart Lights**

- free start-to-finish technical assistance and instant rebates
- rebates range from 50%-70% of total project costs and up to 90% in some instances
- serves small to medium sized businesses, institutions, nonprofits
- Funded by MCE and PG&E
Special emphasis on our health work: highlights importance in community AND business development
PARK IMPROVEMENTS – BELDING GARCIA
PARK IMPROVEMENTS – ELM PLAYLOT
PARK IMPROVEMENTS – LUCAS PARK
PARK IMPROVEMENTS – GREENWAY
YELLOW BRICK ROAD
Mathieu Court Alley Greening Project
ANNOUNCEMENTS

- Civic Center Noontime Concert Series
  September 27 & October 3, 2013, 12:30PM-1:30PM

- North Richmond Shoreline Festival,
  October, 5, 2013, 11:00AM-5:00PM

- Homefront Festival
  October, 12, 2013, 11:00AM-4:00PM

- 9th Annual Parents as Partners and Leaders Conference,
  October 19, 2013, 9:00AM-2:30PM

- Arbour Day, Lucas Park
  October, 19, 2013, 9:00AM-12:00PM

- Help Rebuild Belding-Garcia Playground
  Prep. Days October 24-15, 2013, 8:00AM-4:00PM
  Build Day October 26, 2013, 8:00AM-4:00PM