2nd Regional Convening of Public Health Officers and Planning Directors

Presented by Design 4 Active Sacramento & Planners for Health

Climate + Equity + Health

Elizabeth Baca, MD, MPA

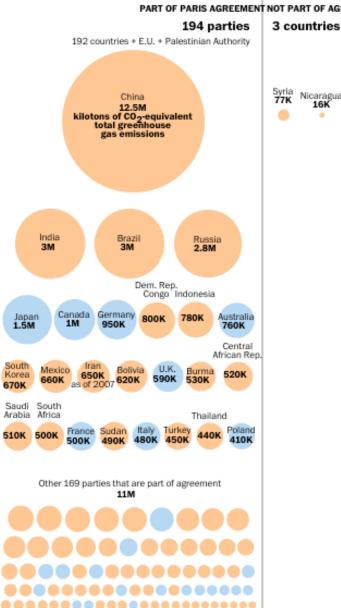
Senior Health Advisor

Governor's Office of Planning and Research

June 7, 2017



Who's in and who's out of the Paris agreement, by total greenhouse gas emissions



.........

.....

Developed country

Nicaragua

16K

٠

United States

6.3M

President Trump plans to back out of the Paris Agreement, which puts the U.S. into this group

PART OF PARIS AGREEMENT NOT PART OF AGREEMENT

Unique time in history

Note: The Vatican is not officially part of the Paris agreement, but Pope Francis has publicly supported it. Some of these parties are part of the agreement but have not formally ratified it. They are already complying and moving toward ratification. Emissions data is from the World Bank as of 2012, the latest available year, unless otherwise noted. Data is not available for some countries ofter 2000

Goal This Morning

• Health Equity Framework

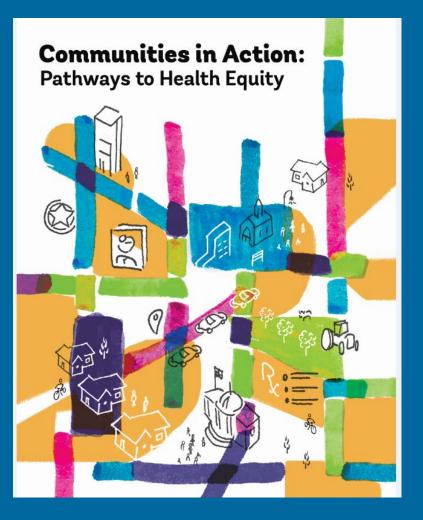
• California planning, SB 1000 in CA

• Process- The local context

Health Equity Framework

The Built Environment & Climate Change

The National Academies of SCIENCES • ENGINEERING • MEDICINE



Communities in Action: Pathways to Health Equity

#PromoteHealthEquity

The charge, in brief

The Robert Wood Johnson Foundation asked the committee to:

Review the state of health disparities in the United States and explore the underlying conditions and root causes contributing to health inequity and the interdependent nature of the factors that create them.

Identify and examine a minimum of six examples of community-based solutions that address health inequities, drawing both from deliberate and indirect interventions or activities that promote equal opportunity for health, spanning health and non-health sectors accounting for the range of factors that contribute to health inequity in the US (e.g., systems of employment, public safety, housing, transportation, education). Identify the major elements of effective or promising solutions and their key levers, policies, stakeholders, and other elements that are needed to be successful.

Recommend elements of short- or longterm strategies and solutions that communities may consider to expand opportunities to advance health equity.

Recommend key research needs to help identify and strengthen evidence-based solutions and other recommendations as viewed appropriate by the committee to reduce health disparities and promote health equity.

The Process

-Hosted 3 information gathering meetings

- Received input from a broad range of invited speakers
- Open to the public

-Held 5 deliberative committee meetings -Prepared nine chapter report

> • Underwent external peer review by 14 expert reviewers, mirroring the committee's own expertise

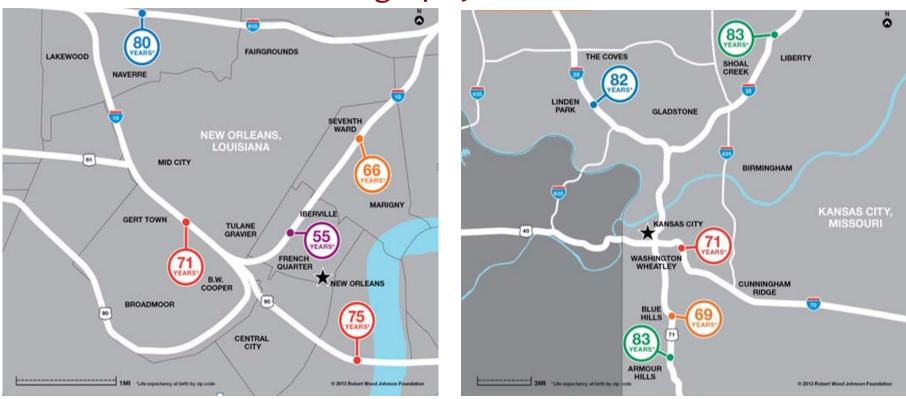


The Report in Brief: 9 Chapters, 15 recommendations

- A. Health equity is crucial for the wellbeing and vibrancy of communities. *Chapter* 1 & 2
- B. Health is a product of multiple determinants. *Chapter* 3
- C. Health inequities are in large part a result of poverty, structural racism, and discrimination. *Chapter* 3
- D. Communities have agency to promote health equity. *Chapters 4* & 5
- E. Supportive public and private policies (at all levels) and programs facilitate community action. *Chapter* 6
- F. The collaboration and engagement of new and diverse (multisector) partners is essential to promoting health equity. *Chapter* 7
- G. Tools and other resources exist to translate knowledge into action to promote health equity. *Chapter 8*

Health inequities in the U.S.





Life expectancy disparities in New Orleans, LA and Kansas City, MO SOURCE: RWJF, 2013.

Note: Age adjusted death rates and life expectancy are indicators of overall health

Report conceptual model



Communities promoting health equity

Name Location	Primary Social Determinant(s) of Health Targeted, Data on outcomes *
Blueprint for Action Minneapolis, MN	Public safety 2007 -2015 Preventing youth violence: Results = Reductions reported 62% in youth gunshot victims; 36% youth victim crimes; 76% youth arrest with guns
Delta Health Center Mound Bayou, MS	Health systems and services From 2013 -2015 Low birth weight babies decreased from 20.7% to 3.8%
Dudley Street Neighborhood Initiative Boston, MA	Physical environment 2014 -2015 % HS students at or above grade level : Math from 36% to 63% Graduation Rate 51% to 82% Percent enrolled in college 48% to 69%
Eastside Promise Neighbor San Antonio, TX	Education Child care available 80% to 100% Work with others to improve neighborhood 58% to 83% Safe places for Kids 48% to 67%

*Data as reported by the communities

Communities promoting health equity

Name Location	Primary Social Determinant(s) of Health Targeted, Data on outcomes*
Indianapolis Congregation Action Network Indianapolis, IN	Employment; Public safety 76% more civic duty than avg. resident Reduction in incarceration and increased jobs
Magnolia Community Initiative Los Angeles, CA	Social environment 2016 57% children 0-5 had access to place vs ER 78% graduated from H.S.; 45% College 75.7% report feeling safe, to and from school
Mandela Marketplace Oakland, CA	Physical environment 641,000 lbs. of produce; 76% Consumption \$5.5 M new revenue; 26 + job ownership opportunitiessustainability
People United for Sustainable Housing Buffalo, NY	Housing Regional mapping process: # of employed workers, # housing units for redeveloped, carbon emission reduction; utility bills
WE ACT for Environmental Justice Harlem, NY	Physical environment New policies around air quality, use of harmful chemicals, pesticides, flame retardants

Guiding principles for communities

- Leverage existing efforts whenever possible
- Adopt strategies for authentic community engagement, ownership, involvement, and input
- Nurture the next generation of leadership
- Foster **flexibility**, **creativity**, and **resilience** where possible
- Seriously consider **non-traditional** community partners
- Commit to results, systematic learning, cross-boundary collaboration, capacity building, and sustainability
- **Partner** with public health agencies

Policies to Support Community Solutions

Recommendation 6-1: All government agencies that support or conduct planning related to land use, housing, transportation, and other areas that affect populations at high risk of health inequity should:

- Add specific requirements to outreach processes to ensure robust and authentic community participation in policy development as related
- Collaborate with public health agencies and other to ensure a broad consideration of unintended consequences for health and well being, including whether benefits and burdens will be equitably distributed
- Highlight the co-benefits of shared "wins" that could be achieved byconsidering health equity in the development of comprehensive plans (for example improving public transit in transit poor areas supports physical activity, promotes health equity, and creates more sustainable communities.)
- Prioritize affordable housing and implement strategies to mitigate and avoid displacement (and its serious health effects), and outcome measures.

California Planning and SB1000

Planning and New Laws

Community Engagement and Outreach



Designing Healthy, Equitable, Resilient, and Economically Vibrant Places

"Cities (and counties) have the capability of providing something for everybody, only because, and only when, they are created by everybody." —Jane Jacobs

Introduction

Robust and inclusive community engagement is a vital component of drafting and updating a general plan. State law requires the planning agency to provide opportunities for the involvement of the community. Such involvement should include public agencies, public utility companies, community groups, and others through hearings or other appropriate methods (§ 65351). The law also requires that a jurisdiction make a diffigent effort to include all economic groups when drafting, adopting and implementing its housing element (§ 65586). For the purposes of this chapter, the term "update" will refer to adoption of new general plans as well as amendments to existing plans.

By law, eities and counties must hold at least two public hearings before adopting a general plan: one by the planning commission and another by the legislative body (either the city council or the board of supervisor) (§65355(a), §65355). Government Code section 65351 requires that during the preparation or amendment of a general plan, the planning agency must provide opportunities for community input through public hearings and any other means the planning agency deems appropriate. Specifically, Government Code section 65351 requires that the planning agency shall "provide opportunities for the involvement of eithers, California Native American thes, public agencies, public utility comparies, and either, education, and other community groups." Government Code section 65357 requires that copies of the documents adopting or amending a general plan, including the diagrams and text, shall be made available to the public. The courts have found a general plan amendment invalid when it was not made available to the public. (City of Nan Diego (1991) 229 Cal.App. 36 847, 861.) Most planning departments, however, conduct more than the minimal number of hearings. Many juridictions undertake extensive outrach that exceeds the minimum statutory requirements. The spectrum of community regagement ranges from informing and consulting the public to involving, collaborating, and ultimately empowering local communities 1

- Design process from beginning
- Advisory boards and novel ways to integrate partners
- Culture and equity considerations
- Data
- Tools

SB 1000

0

Environmental Justice Element

Introduction

Over 9 million Californians are exposed to and at risk from high pollution, according to the Office of Environmental Health Hazard Assessment's Cal Enviroscreen tool. In addition to examining environmental hazards, Cal Enviroscreen and other tools look at assets that help portect communities from poor health. Legislation adopted in 2016, Senate Hill 1000, now expires both cities and counties that have disadvantaged communities to incorporate environmental (usite (Ej) policies into their general plans, either in a separate Ej element or by integrating related goals, policies, and objectives throughout the other elements. This update, or revision if the local government already has EJ goals, policies, and objectives, must happen "upon the adoption or next revision of two or more elements concurrently on or alter January 1, 2018."

Government Code Section 65302(h)

- (1) An environmental justice element, or related goals, policies, and objectives integrated in other elements, that identifies disadvantaged communities within the area covered by the general plan of the sity, county, or city and county, if the city, county, or city and county has a disadvantaged community. The environmental justice element, or related environmental justice goals, policies, and objectives integrated in other elements, shall do all of the following:
 - (A) Identify objectives and policies to reduce the unique or compounded health risks in disadvantaged communities by means that include, but are not limited to, the reduction of politition exposure, including the improvement of air quality, and the promotion of public facilities, food access, safe and sanitary homes, and physical activity.
 - (B) Identify objectives and policies to promote civil engagement in the public decisionmaking process.
 - (C) Identify objectives and policies that prioritize improvements and programs that address the needs of disadvantaged communities.
- (2) A city, county, or city and county subject to this subdivision shall adopt or review the environmental justice element, or the environmental justice goals, policies, and objectives in other elements, upon the adoption or next revision of two or more elements concurrently on or after January 1, 2018.
- (3) By adding this subdivision, the Legislature does not intend to require a city, county, or city and county to take any action prohibited by the United States Constitution or the California Constitution.

- Identify objectives and policies to reduce the unique or compounded health risks in disadvantaged communities by means that include but are not limited to:
 - Reducing pollution exposure, including improving air quality → near roadway siting
 - Promoting public facilities
 - Promoting food access
 - Promoting safe and sanitary homes
 - Promoting physical activity
- Identify objectives and policies to promote civil engagement in the public decision making process
- Identify objectives and policies that prioritize improvements and programs that address the needs of disadvantaged communities

CHAPTER 4: REQUIRED ELEMENTS | 126

SB 1000 DAC Definition

(4) For purposes of this subdivision, the following terms shall apply:

- (A) "Disadvantaged communities" means an area identified by the California Environmental Protection Agency pursuant to Section 39711 of the Health and Safety Code or an area that is a low-income area that is disproportionately affected by environmental pollution and other hazards that can lead to negative health effects, exposure, or environmental degradation.
- (B) "Public facilities" includes public improvements, public services, and community amenities, as defined in subdivision (d) of Section 66000.
- (C) "Low-income area" means an area with household incomes at or below 80 percent of the statewide median income or with household incomes at or below the threshold designated as low income by the Department of Housing and Community Development's list of state income limits adopted pursuant to Section 50093.
- (C) "Low-income area" means an area with household incomes at or below 80 percent of the statewide median income or with household incomes at or below the threshold designated as low income by the Department of Housing and Community Development's list of state income limits adopted pursuant to Section 50093.

Equitable & Resilient Communities



"The future is not someplace we are going to, but a place we are creating. The paths to it are not found, they are made." —Jane Garvey

Introduction

Addressing social equity in policy decisions is sital for the economy, the health of the population, community sell-being, and climate policies that support all residents. In addition to investments in infrastructure, services, and amentites, policies to support community engagement and to foster human capital in local communities are vital to creating more thriving, healthy, resilient, and equitable places. Additionally, there are significant demographic shifts taking place across California including more aging seniors, increasing ethnic divestity, and changing household structures.¹⁰⁰⁷, ²⁰⁰⁷

- Definitions of social equity
- Incorporating social equity
- Data, mapping, example local areas
- Resilience screen

Social equity definitions

The National Academy of Public Administration defines social equity as:

"The fair, just, and equitable management of all institutions serving the public directly or by contract; the fair, just and equitable distribution of public services and implementation of public policy; and the commitment to promote fairness, justice, and equity in the formation of public policy.

The American Planning Association defines social equity as:

"The expansion of opportunities for betterment that are available to those communities most in need, creating more choices for those who have few."

The California Planning Roundtable states that social equity:

"Ensures that all groups enjoy the benefits of a healthy and prosperous community, with access to housing, transportation, jobs and commerce. It enables a variety of businesses to flourish."

Sources:

http://www.napawash.org/fellows/standing-panels/social-equity-in-governance.html https://planning.org/policy/guides/adopted/redevelopment.htm http://reinventingthegeneralplan.org/principles/

Topics for Consideration



Ideas for Data and Analysis

- Prevalence child/adult obesity
- Prevalence diabetes
- Prevalence heart disease
 ~
- Land use mix
- Park access
- Commute patterns

Potential Policy Options

- Increase proximity to parks and recreation
- Build connected trail ways to jobs/amenities
- Pursue urban greening programs

Active Living & Recreation

Topics for Consideration



Food Systems

Ideas for Data and Analysis

- Prevalence child/adult obesity
- Prevalence diabetes
- Prevalence heart disease
 ~
- Map of grocery stores
- Map of community gardens
- Map of farmers markets

Potential Policy Options

- Establish a food policy council
- Facilitate use of unused land for community gardens
- Increase access to healthy food retail environments
- Preserve agricultural land
- Reduce food waste, increase food recovery



Local Context

Implementation and Process

Cities & Counties



Thank You

Elizabeth Baca, MD, MPA

Senior Health Advisor

Governor's Office of Planning & Research

Elizabeth.Baca@opr.ca.gov

Questions?

Image/Source/Photo Credits

Communities in Action, Pathways Towards Health Equity: National Academy of Science

Wheel Image:

http://www.healthcareitnews.com/news/noacos-without-coordination

Washingpost Graph, climate partners: <u>https://www.washingtonpost.com/graphics/w</u> <u>orld/paris-climate-agreement-</u> <u>withdrawal/?utm_term=.928781a1e32e</u>