MONTHLY
ACTIVITY REPORT
CALIFORNIA DEPARTMENT OF PUBLIC HEALTH

Office of Health Equity

HEALTHY & EQUITABLE California FOR ALL

Addressing health impacts of where Californians live, work, and play.
#HealthEquityCA
UNIT DESCRIPTIONS

Community Development and Engagement Unit (CDEU)

Mission

The Office of Health Equity (OHE), Community Development and Engagement Unit’s (CDEU) mission is to strengthen the California Department of Public Health’s (CDPH) focus and ability to advise and assist other state departments in their mission to increase access to, and the quality of, culturally and linguistically competent mental health care and services.

Vision

To create a public mental health system for a diverse California that advances an authentic commitment to community engagement, cultural knowledge, accessibility, quality, resilience, and wellness.

Projects

California Reducing Disparities Project (CRDP)

In response to former U.S. Surgeon General David Satcher’s call for national action to reduce mental health disparities, the former Department of Mental Health (DMH), along with several key partners, created a statewide policy initiative to identify solutions for historically unserved, underserved, and inappropriately served communities. Under OHE, this statewide Prevention and Early Intervention effort, the California Reducing Disparities Project (CRDP), focuses on five populations:

- African American
- Asian and Pacific Islander
- Latino
- Lesbian, Gay, Bisexual, Transgender, Queer, and Questioning
- Native American

Now in Phase II, the CRDP will focus on funding and evaluating the promising practices identified in Phase I, as well as advancing the strategies outlined in the CRDP Strategic Plan. In all CRDP will award $60 million to 41 contractors and grantees over six years. The CRDP is funded by the Mental Health Services Act (Proposition 63) that was passed in November 2004. This act imposes a one percent income tax on personal income in excess of $1 million.
Health Equity Policy & Planning Unit (HEPPU)

Vision

Our vision is a healthy, equitable, and environmentally sustainable California where all people thrive and health equity principles are the foundation of government policies and practices.

Mission

The Health Equity Policy & Planning Unit’s mission is to provide statewide leadership in policy, systems, and environmental change by improving health, equity, and environmental sustainability in California government decision-making, practices, and policies.

OHE’s HEPPU addresses complex issues that require input and collaboration across multiple agencies and departments, most of which are outside of the health sector.

Projects

The California Health in All Policies Task Force

The California Health in All Policies (HiAP) Task Force was created by Executive Order S-04-10 in 2010 because the health and well-being of Californians is impacted by the policies and practices of many agencies and departments, not just health services and public health. The HiAP Task Force is housed under the SGC, and brings together 22 state agencies, departments, and offices, with a common goal of working together to support a healthier and more sustainable California. The HiAP Task Force is staffed by CDPH in partnership with the Public Health Institute.

Climate Change and Health Equity Program (CCHEP)

California is a national and international leader on climate change as a critical emerging issue. The Global Warming Solutions Act (AB32) has mobilized California’s state agencies to develop a coordinated response to reduce California’s greenhouse gas emissions. CDPH and other state agencies are conducting research and developing strategies to reduce carbon emissions (mitigation) and prepare for (or adapt to) the challenges brought by climate change. CCHEP works on policy, adaptation planning, land use and transportation planning, epidemiology, environmental health, health education and risk communication, emergency preparedness and other areas relating to climate change and health.
Health Research and Statistics Unit (HRSU)

Vision

HRSU’s vision is to become the state’s reference office that provides consultation and data resources to keep abreast of data trends, in an effort to mitigate and eliminate health and mental health disparities and inequities in California.

Mission

HRSU is a leading state unit in collecting data and disseminating information about health and mental health disparities and inequities in California. HRSU researches and produces data to fulfill statutory mandated reports, and provides information and technical assistance to CDPH programs, state agencies, local health departments and stakeholders who are working to collect and report information on health and mental disparities and inequities in California.

HRSU advances health and mental health equity by:

- Providing consultation and technical assistance to state departments and other state and local agencies as well as private entities related to health disparities.

- Developing a report with demographic analyses on health and mental health disparities and inequities, updated periodically but not less than every two years, highlighting the underlying conditions that contribute to health and well-being, accompanied by a comprehensive, cross-sectoral strategic plan to eliminate health and mental health disparities.

- Transparency through making the data easily accessible to all Californians through different means such as biannual reports, issue briefs, and dissemination through a website in order to measure and track disparities among vulnerable population groups.

Projects

The OHE published its first demographic report on 2015 as part of its Portrait of Promise. This is the first State report that presents a comprehensive analysis of the status of the social determinants of health in California with evidence of the impacts that an inequitable distribution of resources has on health.

Since its creation OHE has also been producing and publishing statistical measures or indicators of the social determinants of health that provide ways to assess the current status of community health, equity, and vulnerability to climate change across the State. There are two indicator projects lead by HRSU:

- Healthy Communities Data and Indicators Project (HCI)
The HCI provides data to assess community health and equity following the framework “What is a Healthy Community?” from the California Health in All Policies Task Force. The first set of 31 indicators was released to the public between the years 2012-2015 on the CDPH website and on the Open Data Portal (search term HCI). The HCI project has engaged with internal partners and State agencies to vet indicator definitions and datasets. The data has been used by Let’s Get Healthy California and external partners, and it is being used by epidemiologists for reporting and accreditation and by public health researchers.

The CHVI provides data and tools to local health departments and partners to better understand the people and places in their jurisdictions that are more susceptible to adverse health impacts associated with climate change, specifically extreme heat, wildfire, sea level rise, drought, and poor air quality. The assessment data can be used to screen and prioritize where to focus deeper analysis and plan for public health actions to increase resilience. The factors that make communities healthy also increase their resilience to climate change. The CHVI uses the Building Resilience against Climate Effects framework from the CDC.

The data in these projects helps OHE meet its legislative mandate and will from now on constitute the OHE demographic report. The data will be presented to the public on the cdph.ca.gov website. HRSU is currently updating datasets and developing interactive data visualizations using Tableau.
UPDATES

Human Resources

Community Development and Engagement Unit (CDEU):

No updates at this time.

Health Equity Policy and Planning Unit (HEPPU):

There are two long-term vacancies in the HEPP Unit: one for a Health Program Specialist I for Health in All Policies, and one for an AGPA for the Climate Change and Health Equity Program. Due to a hiring hold directed by CDPH leadership on OHE vacant positions, it is unknown at this time when HEPP will get approval to proceed with the advertising, recruitment and hiring for these two critical position. These two positions are fully funded categorical positions with full scopes of work.

Health Research & Statistics Unit (HRSU):

RS II – HRSU has one vacancy, which will remain vacant to ensure OHE’s GF budget is not overspent.

Financial

- No updates at this time

Decision Points

- The CCHEP is waiting on the approval of the Climate Change and Health Vulnerability Assessment Reports for 10 counties. This draft report has been with Agency for more than 18 months. These reports were part of a deliverable for the 2016-17 BRACE funding from CDC, which ended on September 30, 2017. In addition, the 10 CalBRACE funded counties cannot complete their final deliverable per their contract due to this delay.

- HEPP Unit is requesting a timeline from CDPH leadership on being able to move forward with hiring for the vacancies in the units. Not filling our existing vacant positions is exacerbating the pre-existing problem of HEPP being under-staffed and staff over-worked; removing the hiring freeze will help OHE to meet the needs of the state.

Activities

OHE-wide

Advisory Committee and External Engagement
• Staff has been working with Advisory Committee member Manel Kappagoda, senior staff attorney at ChangeLab Solutions, on drafting an issue brief that examines the relationship between the treatment of immigrants and the impacts on public health. The issue brief is awaiting final review and approval by Agency.

• Staff worked closely with Shasta County Health and Human Services Agency, whose director sits on the OHE Advisory Committee, to plan an on-site day in Redding on October 26th to get better acquainted with the needs of California’s rural north. Featuring in part the partnership between OHE and Sierra Health Foundation, the day included: site visits to explore how the social determinants of health are at play in the state’s rural north; a staff exchange to provide training and support on health in all policies, community engagement, and related health equity institutionalization efforts; and a stakeholder forum with over 75 local providers and funders to dialogue on housing, early childhood development, education, income security and mental health/suicide prevention. A short video documenting the day is under development. The highlights and next steps from this day will be explored at the next Office of Health Equity Advisory Committee meeting, which is slated to be held on December 14, 2017 at the Sierra Health Foundation. One important next step will be to continue the conversation with the California Endowment on how OHE may be instrumental in its exploration of rural health equity, and the potential solutions or best practices that can be employed to achieve it.

• The Office of Health Equity has been instrumental in championing that a racial equity lens be applied throughout state government. Staff cultivated numerous executives from various state offices, agencies and departments to participate in the launch of the Government Alliance for Race and Equity Capitol Cohort, which had its kick-off meeting was held on October 30th.

• Staff attended the Congressional Black Caucus Foundation Annual Legislative Meeting, the California Conference of Local Health Officers Biannual Meeting, and the American Public Health Association Annual Meeting to develop partnerships for the continued implementation of Portrait of Promise. The 2018 APHA meeting will be held in San Diego and have a theme of “Health Equity Now!” Staff is already working on OHE’s involvement in that important meeting.

Trainings, Presentations and Workshops

10/18/17
As part of the CRDP 2nd Annual Meeting, OHE staff presented on Portrait of Promise, highlighting the CRDP-specific goals and opportunities for stakeholder participation in the implementation of those goals. One of the action items to result from the presentation was a commitment to hold one or more think tanks on OHE’s leadership in data collection, disaggregation and reporting for populations that are less visible in Portrait of Promise and other important initiatives.
OHE staff presented to educators, school administrators, and education policy-makers from throughout the country at the Parent Teacher Home Visits National Gathering. The presentation was entitled *Inclusive Language in Family and Community/School Partnership*. 

**OHE Units**

**Community Development and Engagement Unit (CDEU)**

- CDEU held the CRDP two-day annual collaboration meeting that brought together 41 contractors/grantees representing primarily community-based organizations for knowledge exchange and collaborative partnership building. There were approximately 168 attendees, with representatives from the Mental Health Services Oversight & Accountability Commission (MHSOAC), the Steinberg Institute, the federal Substance Abuse and Mental Health Services Administration, Center for Participatory Research at the University of New Mexico, and other stakeholders.

- CDEU staff was invited to brunch at California State University, Sacramento (CSUS) which celebrated the 50th anniversary of the speech Dr. King gave at the university. This invitation was a gesture of thanks for the work CDEU is doing focused on diversity and inclusion at the Office of Health Equity.

- CDEU staff attended the 28th Annual Envisioning California Conference - Crossroads: Homelessness in California, to grow knowledge of the homeless population in our state and to identify intersections for support for homeless individuals with mental health conditions. Workshops included:
  - The State of Homelessness in California;
  - Stigmas and Pathways: Mental Health and Substance Abuse Treatment for the Homeless;
  - The Invisible Homeless;
  - Con the Front Line: Observations and Ideas to Move Forward; and
  - Regional Approaches to Housing.

- CDEU Chief was invited to attend a Department of Health Services Interagency Prevention Advisory Committee - Suicide and Depression Prevention Workgroup to become familiar with the work of the committee and to recommend areas for cross collaboration with OHE.

- CRDP Lead and CDEU Chief attended the California Behavioral Health Directors Cultural Competence and Social Justice Executive Committee Call to provide an update on CRDP and how the Executive Committee and County Mental Health Ethnic Service Managers could support Implementation Pilot Projects in their county. The committee reinforced the importance of the CRDP linking with county mental health plans.
• CRDP Lead and HRSU CRDP Statewide Evaluator Lead attended the Mental Health Service Act Partners Forum to provide an overview of the CRDP Statewide Evaluation model, the CRDP Strategic Plan, the CRDP Annual Meeting and pending release of the last CRDP solicitation, Education, Outreach & Awareness solicitation for public comment.

• CRDP LGBTQ Lead attended the California LGBT Health and Human Services Network call focused on the California Department of Education’s approval of new textbooks since the FAIR Education Act and the representation of LGBTQ people in history and social studies.

• OHE hosted Center for Applied Research Solutions and the LGBTQ grantees here at the East End Complex for their annual Community of Practice Technical Assistance convening.

• CDEU staff attended the MHSOAC’s Commission meeting to provide comment on adoption of Prevention & Early Intervention regulations and a report on criminal justice and mental health.

• CRDP Asian Pacific Islander Lead participated in the 2017 API Mental Health Empowerment Conference sponsored by Viet C.A.R.E at California State University, Fullerton. The Keynote Speaker was Congresswoman Judy Chu, and other speakers included Orange County Supervisor Andrew Do, Alhambra Police Chief Timothy Vu, and Dr. Clayton Chau, Regional Executive Medical Director, Institute for Mental Health and Wellness, St. Joseph Hoag Health System. Workshop topics included Culturally Appropriate Mental Health Services, presented by CRDP Grantees Fresno Center for New Americans, and Community Engagement with Diverse Populations, presented by National Alliance on Mental Health California. CDEU staff stayed for a de-brief session after the conference and joined other attendees in making suggestions for improvements and discussing tentative plans for next year’s conference.

Health Equity Policy & Planning Unit (HEPPU)

Cross-Unit Updates:

• HEPP Unit continues to work on a variety of strategies to resource HiAP, CCHEP, and Racial and Health Equity Initiative to meet the number of staff needed to fulfill the needs of local, CDPH, and state partners for this work. (Internal)

• Unit Chief sitting on the Climate Change Investments Outreach and Technical Assistance Steering Committee, convened by Strategic Growth Council (SGC) and CA Air Resources Board, whose goal is to align outreach and technical assistance to disadvantaged communities eligible to receive program funding from the Greenhouse Gas Reduction Fund. (external)

• Unit Chief presented with SGC staff at the California Chronic Disease Prevention Leadership Project on how local health departments can access the variety of state funding programs that advance social determinants of health. (internal/external)
• HEPP staff provided input to Let’s Get Health California strategic planning update. (internal)

**Climate Change and Health Equity Program (CCHEP):**

• HEPP staff continue to work with Governor’s Office staff planning International Climate Change Summit in September 2018, ensuring health is highlighted. (external)

• **Provided research and data:** 1) Work with Governor’s Office of Planning and Research, Southern California Association of Governments, and Urban Design 4 Health to determine the scientific validity, areas of overlap, uses, and limitations of the public health module of Urban Footprint tool (CPHAM), and compare with the Integrated Transportation Health Impacts Model (ITHIM); 2) Informed the Research Climate Action Team of health equity-related climate change research (external).

• **Provided input to:** 1) California Office of Emergency Services for the State Hazard Mitigation Plan; 2) The Governor’s Office of Planning and Research on climate change adaptation and resilience; 3) ICLEI – Local Governments for Sustainability – on health equity measures to include in ClearPath, ICLEI’s tool to help local governments complete greenhouse gas inventories and prioritize actions for climate actions plans; and 4) oordinate multi-agency input to the Congested Corridors grant program of the California Transportation Commission (an SB 1 grant program). (internal and external).

• **Hosted meetings:** 1) Hosted a Climate Action Team – Public Health Workgroup public meeting on data, research, and programs on Tree Health, Human Health, and Climate Change; 2) between scientists from Scripps Institute and UC San Diego who are part of a multi-campus University of California climate change research project on health impacts of wildfire smoke, extreme rainfall, and heat waves. (internal and external).

• **Provided technical assistance to:** 1) Four Twenty Seven, Inc., to present CCHEP’s Climate Change and Health Vulnerability Indicators for California in the tool they are developing to project and help prepare for extreme heat events, as part of the Fourth Climate Assessment of California; and 2) Karen Relucio, Health Officer of Napa County, regarding public health input to the County’s Climate Action Plan; 3) Fusion Center staff to prepare her to serve as reviewer of the Transformative Climate Communities grant program of the Strategic Growth Council; 4) Develop talking points for the Air Resources Board regarding health equity implications of robust greenhouse gas reduction targets for the SB 375 Target Updates; 5) California State Lands Commission climate and health resources. (internal and external).

• **Participated in cross-agency meetings:** 1) to implement recommendations in the transportation sector of the AB 32 Scoping Plan; 2) to continue to serve on SB 350 Steering Committee providing recommendations to the CA Air Resources Board for their work to eliminate barriers to low-income peoples’ access to clean transportation and energy (external).
• **Responded to two media requests and provided talking points** on climate change and health equity for Governor Brown’s trip to Bonn, Germany for the climate talks (internal/external).

**Health in All Policies initiative (HiAP):**

• Continued management of OHE’s Budget and developing Office-wide budget systems

• **HiAP Racial Equity Initiative:** On October 30th, over 25 departments attended an informational session on the GARE Capitol Cohort pilot program, staffed by the HiAP team. Speakers at the event included Dr. Karen Smith and Question and Answer with HEPP staff. HEPP staff continues to support participant recruitment for the pilot and planning of the final curriculum. (Internal/External)

• **CDPH Racial and Health Equity Initiative:** Staff presented at the PHEMT meeting on October 10th to describe the survey, governance structure, and work to date. HEPP staff created several materials and resources to launch the All-Staff Equity Survey and recruit CDPH staff to join the Racial and Health Equity Workgroup in November and December. These materials included Frequently Asked Questions for Managers and Supervisors, the Racial and Health Equity Workgroup Application, and Definitions for Equity, Racial Equity, and Health Equity documents.

• **Provided presentation to Shasta Public Health Department** as part of a one day convening on developing their strategic plan for health equity.

• **Executive Fellows:** HEPP staff submitted an application for an Executive Fellow, attended Placement Fair and will be conducting nine interviews, to support the CDPH Racial and Health Equity Initiative. (Internal)

**Health Research and Statistics Unit (HRSU)**

• HRSU is developing new Tableau data visualizations and ESRI Story Maps of the Healthy Communities Indicators (HCI) for broader impact and accessibility. Visualizations for three updated indicators (educational attainment, access to parks, child fitness—a Let’s Get Healthy California indicator) have been completed and are in production phase. Household overcrowding and modified retail food environment index (via data use agreement with the Nutrition Education and Obesity Prevention Branch) are on track for completion in November.

• The HRSU Chief gave a presentation on health equity data sources at a Health Equity Stakeholder Forum in Shasta County, which brought together numerous community leaders in health, economic development, housing, education, and other sectors to highlight the importance of addressing the social determinants of health in the rural north of the state.
- HRSU and research scientist partners in the Let’s Get Healthy California data sub-team initiated a pilot test phase of a methodology developed by the World Health Organization to measure and monitor health disparities using a user-friendly, online interface (Health Equity Assessment Toolkit).

- HRSU presented a project proposal to the California State University Sacramento Executive Fellowship program. HRSU is proposing to bring a fellow on board to help further develop its efforts to create health equity stories with Healthy Communities Indicators data.

- HRSU is preparing the final version of a Discrimination Issue Brief, for publication on the OHE website. The policy brief summarizes findings from the 2014 California Behavioral Risk Factor Surveillance System (BRFSS) survey, based on questions submitted by HRSU related to discrimination experienced in the domains of employment, police interactions, education, housing, and financial lending. It also synthesizes existing policies and recommendations to prevent and ameliorate discrimination, including state level policies and interventions adopted by law enforcement.

**Communications**

- Published October edition of the OHE Newsletter. This issue focused on the California Wildfires and explored the connections of natural disasters like wildfires affecting individuals with the least resources more than those with greater access. More than 23 percent of those who received the issue opened, which is below OHE’s monthly open rate of 28 percent, but still slightly above the industry standard of 22 percent.

- OHE communications reached milestones within the OHE rebranding initiative delivering significant content to the redesigned CDPH website, including a new home page with streamlined navigation designed to make navigating the OHE pages simpler and more informative.

- OHE communications led the principal photography production of new videos for the website that will explore the issues of health equity and the social determinants of health for a lay audience. These videos will be completed and posted by January 1, 2018.

- OHE communications also served as principal photography for OHE events including the CRDP annual collaboration meeting and the OHE trip to explore health equity concerns in the rural north.

**Legislation**

- No updates at this time.