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 (HCl)
Climate Change and Health Vulnerability Indicators (CHVI)

The HCl 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):

HPS II – currently advertising this position, since the limited term position is expiring on October 31, 2017. Final Filing date is October 19, 2017.

HPS I – Susan Fanelli has given the approval to proceed with the advertising and recruitment to fill this vacancy.

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

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 and the Governor’s Office.

• In its quest to put a spotlight on areas of the state that are confronting stark inequities and explore how the state can better align with local efforts, the Advisory Committee held its 9/28/17 meeting in Marin City. Dr. Smith, Marin County public health officer, Dr. Matt Willis, and JayVon Muhammad, Chief Executive Officer, Marin City Health and Wellness Center, were featured guests along with Marin County Supervisor Kate Sears and several key staff from the CA Dept. of Parks and Recreation, CA Dept. of Education, Strategic

- Planning continues with Advisory Committee member Donnell Ewert, Director of Shasta County Health and Human Services Agency, as well as senior staff at the Sierra Health Foundation to partner on a day-long event in Redding on 10/26/17. The day will include: 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 local providers and funders to dialogue on housing, early childhood development, education, income security and mental health/suicide prevention.

**OHE Units**

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

- CDEU staff attended the Native American Culture is Prevention Summit at the California Endowment in Oakland on September 14th. The summit was hosted by Native American Health Center and focused on building capacity to serve Native Youth.

- CDEU welcomed two interns, Abbigail Pereyra, from Cal State Los Angeles, and Brittany Amanfor, from the University of San Francisco. Both will be engaging with various stakeholders and growing their knowledge in public health, health equity and issues facing underserved communities.

- CDEU staff Noralee Cole led department wide efforts for the 50th Annual Native American Day event and received special recognition from CA Health & Human Services and CDPH. Information from various CDPH programs was distributed and staff was on site to answer questions, provide resources & referrals and to discuss how the OHE interfaces and engages with Native American communities.

- CDEU Chief, Marina Augusto was invited to attend the Department of Health Care Services, Suicide & Depression Prevention Workgroup to identify mental health prevention priorities, increase the impact of actions, and enhance the statewide prevention capacity.

- CDEU received notification that CDPH Director will be presented with the “Cultural Outreach Award” by Mental Health California for the work Dr. Smith has done to improve diversity in health and mental health over the years, in particular efforts under the CA Reducing Disparities Project.

- CDEU staff attended the Mental Health Services Act Partners’ Forum and provided a general update of OHE and CRDP activities. Members of the Partners’ Forum requested a formal presentation at the upcoming meeting on the CRDP.
• CDEU staff attended both the Mental Health Services Oversight & Accountability subcommittees on cultural and linguistic competence and client/consumer, & family member culture.

• CDEU staff continues to finalize plans for the upcoming CRDP Annual collaboration meeting that brings together 41 contractors/grantees representing primarily community-based organizations for knowledge exchange and collaborative partnership building. Our very own Dr. Tamu Nolfo, along with Dr. Nina Wallerstein, nationally recognized Community Based Participatory Research subject matter expert, and Captain Andrew Hunt from the federal Substance Abuse and Mental Health Services Administration are confirmed presenters. CA Health & Human Services Agency representative, Janne Morgan-Olson will be in attendance. This meeting is scheduled for October 18-19, 2017 in Sacramento.

Health Equity Policy & Planning Unit (HEPPU)
Cross-Unit Updates:

• Collaborated with: 1) the Air Resources Board to provide input on the Caltrans Benefits/Costs (B/C) Tool to be used to help select awardees for SB 1 and Active Transportation Program funding; 2) SGC, OPR, ARB, CalSTA, Caltrans on providing input to SB 1 transportation grant programs; specifically the California Transportation Commission’s Congested Corridors Program; 3) Public Health Alliance of Southern California by serving on their Healthy Places Index Steering Committee. (external)

• Represented CDPH and presented at technical and policy workshops sponsored by the Governor's Office of Planning and Research on the California Statewide Public Health Assessment Model (C-PHAM) of the Urban Footprint tool used to quantify how land use changes impact health outcomes. (external)

• Strategized with 1) the CDPH Active Transportation Safety Program to embed health equity into all State transportation programs; and 2) Fusion Center to plan C-Force Capacity Building Modules on Climate Change and Health Equity, Health in All Policies, and Racial Equity.

• Conducted outreach and recruitment of partner agencies to attend the OHE AC Meeting and facilitated breakout sessions on the Built Environment, Housing, and Local parks. (internal/external)

• HEPPP 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)
Climate Change and Health Equity Program (CCHEP):

- Welcomed Dr. Jason Vargo as Research Scientist IV, Ashoka Alvarez as a CivicSpark Fellow from the Governor’s Office of Planning and Research AmeriCorps Climate Program, and Leanah Bassouni as student intern from UC Berkeley. (internal)

- Represented CDPH on: 1) the SB 350 Barriers to Clean Energy/Clean Transportation Interagency Task Force, collaborating with lead agencies CEC and ARB, and commented on CEC’s Energy Equity Framework and Indicators Draft Document; 2) AB 32 Scoping Plan Transportation Sector Implementation workgroup; 3) Governor’s Office planning group for Global Climate Action 2018 Summit; 4) Southwest Tribal Climate Change Summit in San Diego. (external)

- Provided input on ARB’s Draft Cap and Trade Auction Proceeds Guidance for Administering Agencies. (external)

- Provided slides for Dr. Mark Starr’s presentation at CCDEH 2017 Conference. (internal)

- Presented tools for identifying climate-vulnerable communities to the Integrated Climate Adaptation and Resiliency Program’s (ICARP) Technical Advisory Committee. (external)

- Provided technical assistance on: 1) incorporating public health outcomes into ClearPath software through ICLEI – Local Governments for Sustainability, used by local governments to complete greenhouse gas inventories and climate action plans, 2) public health data to the Governor’s Office of Planning and Research for development of the website CA@50million (external); and 3) to the Infant Botulism Program. (internal)

Health in All Policies initiative (HiAP):

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

- Grant awarded for HiAP Racial Equity Initiative: The Public Health Institute HiAP team was awarded a grant from The California Endowment to pilot a Government Alliance for Race and Equity (GARE) capacity building program with the HiAP Task Force. Anticipated start date is January 2018. CDPH and HCD will be asked to provide mentorship and TA as the only two state departments to have gone through a GARE cohort. Additionally, the hope is that by having more State Departments participate, it will help facilitate the advancement of CDPH’s Racial and Health Equity Initiative. (Internal/External)

- September 13th Quarterly HiAP Task Force Meeting:

  - Equity in Government practices: Staff from 14 departments brainstormed specific State operations (e.g., duty statements for State jobs, managerial trainings, etc.) where an equity lens could be applied; and discussed strategies and tools to increase
the effectiveness of work to incorporate health and equity criteria into grant programs across departments. (External)

- **Health Equity Measurement Tools**: The Task Force hosted a “lunch and learn” to discuss tools used for measuring health equity, including the Public Health Alliance of Southern California’s (PHASC) Healthy Places Index (HPI, formerly the Health Disadvantage Index), which includes layers from CDPH-OHE’s Climate Change and Health Vulnerability Indicators, and the CDPH Healthy Communities Data and Indicators Project (HCI). OHE and PHASC staff presented, with participation from CDPH, OPR, DHSC, SGC, Energy Commission, GovOps, Caltrans, CDE, DSS, HCD, Parks, CDFS. (Internal/External)

- **Action Plan to Promote Parks and Healthy Tree Canopy**: (Internal/External)
  - State Parks and CDPH are finalizing site selection and a project evaluation plan for parks pilot project.
  - CDPH HiAP staff provided health equity input and review for CNRA’s 2017 Urban Greening program.
  - State Parks is exploring incorporating health data into Parks GIS mapping tools.

- **Action Plan to Promote Violence-Free and Resilient Communities**: Eight departments participated in the third session on youth programs and policies that prevent, respond to, and address violence. Participants included CDPH, Parks, California Volunteers, DSS, and the University of California, Berkeley. Representatives from more than five CDPH programs participated and three provided presentations or sat on panels. (Internal/External)

- **Alameda County Fatherhood Action Summit**: Discussions included addressing barriers to further engagement in support of healthier children and families. OHE is following up with staff from CFH, SCAB, and BIH. (Internal)

- On September 25th HiAP staff presented during the annual California Chapter American Planning Association conference in Sacramento, CA. The interactive session titled “Using a Health in All Policies Approach to Planning” highlighted practical tools and strategies for planners. (External)

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

- HRSU presented on the Healthy Communities Data and Indicators Project (HCI) and its synergistic collaboration with the Public Health Alliance of Southern California’s Health Disadvantage Index (soon to be known as the Healthy Places Index), at a Health-in-All-Policies Task Force event at the Cal Endowment on Sep. 13th. In attendance were representatives of numerous partner agencies such as DOT, DSS, Parks, and others.
- The HCI website is being migrated to the new SharePoint cdph.ca.gov site. HRSU is developing new Tableau data visualizations for broader impact and accessibility. The five
updated indicators are: educational attainment (adults), household overcrowding, access to parks, modified retail food environment index (via data use agreement with the Nutrition Education and Obesity Prevention Branch), and child fitness (a Let’s Get Healthy California indicator).

- HRSU provided technical assistance and input to Let’s Get Healthy California’s disparities indicators development by attending the Data Sub-Team monthly meeting on Sep. 26th.
- HRSU research scientist engaged with CDPH program partners to identify a panel review member for Transformative Climate Communities (TCC), a Strategic Growth Council activity. In October, HRSU will provide an orientation for Amanda Lawrence (Fusion Center) on TCC’s history and opportunities for public health-related input.
- OHE Unit chiefs and Sr. Project Manager finalized review of the draft Discrimination Policy Brief. HRSU is preparing the final version, for publication on the OHE website. The policy brief summarizes findings from the 2014 California Behavioral Risk Factor Surveillance System (BRFSS) survey, based on seven questions submitted by HRSU related to discrimination experienced by persons in venues of employment, interactions with the police, education, housing, and financial lending. It synthesizes existing policies and recommendations to prevent and ameliorate discrimination, including state level policies and interventions adopted by law enforcement.

Communications

- No updates at this time

Legislation

- CDEU is informally watching AB 850, which adds a seat to the Mental Health Services Oversight and Accountability Commission for a person with knowledge and experience with reducing mental health disparities, specifically for racial and ethnic communities.

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 staff are awaiting final approval of the All-Staff Equity Survey and input and approval on the Racial and Health Equity Action Plan structure proposal. The Survey has been reviewed by OLS, HRB, and Office of Compliance and was shared with PHEMT at the October 10th meeting.

- HEPP Unit is requesting a timeline from CDPH leadership on being able to move forward with hiring for the two vacancies. Not filling our existing vacant positions is exacerbating
the pre-existing problem of HEPP being under-staffed; removing the hiring freeze will help us to meet the requested needs of the state and the scopes of work outlined in these positions’ funding sources.