

Center for Chronic Disease Prevention and Health Promotion

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November, 2011

Center for Chronic Disease Prevention and Health Promotion

□ Environmental & Occupational Disease Control (DEODC)

- Environmental Health Investigations
 - Environmental Health Tracking
 - Bio-monitoring
 - Asthma
 - Hazardous Waste Site Assessment
- Environmental Health Laboratory
 - Indoor Air Quality
- Childhood Lead Poisoning Prevention
 - Lead Related Construction
 - Healthy Homes
- Occupational Health
 - Occupational Lead Poisoning
 - Hazard Evaluation System
 - Occupational Health Surveillance
 - Safe Cosmetics

□ Chronic Disease & Injury Control (CDIC)

- Tobacco Control
- Nutrition Education and Obesity Prevention
 - Network for Healthy Calif.
 - Project LEAN
 - School Health Connections
- Safe and Active Communities
 - Injury Control
 - Domestic Violence and Rape
 - Physical Activity
 - Local PH & Built Environment
 - Safe Routes to Schools
- Chronic Disease Control
 - Heart Disease & Stroke Prevention
 - Diabetes
 - Oral Health/Children's Dental
 - Community Water Fluoridation
 - Alzheimer's
 - Arthritis
 - EWC - Breast/Cervical Cancer
 - Gerontology
 - Prostate Cancer
 - WISEWOMAN
 - CalEIS & Preventive Medicine Residency
- Cancer Surveillance and Control
 - Cancer Registry
 - Cancer Control Coalition
- Survey Research
 - BRFSS
 - Other surveys



CCDPPHP budget & staff

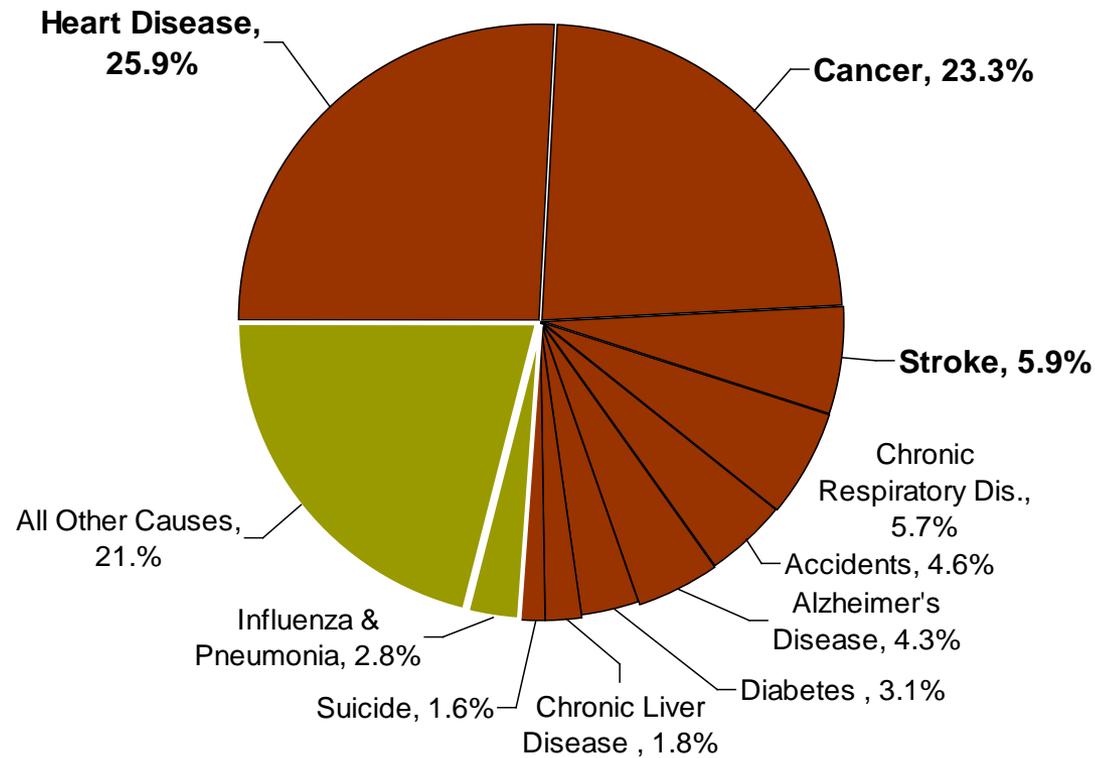
□ Budget \$310 million

- CDIC: \$265 million
 - 7% general fund
 - 93% other
- DEODC: \$45 million
 - 27% general fund
 - 73% other

□ Staff 671

- CDIC - 412
 - State 198
 - Contract 214
- DEODC - 259
 - State 107
 - Contract 152

Chronic disease and injury: Three-fourths of all deaths in California



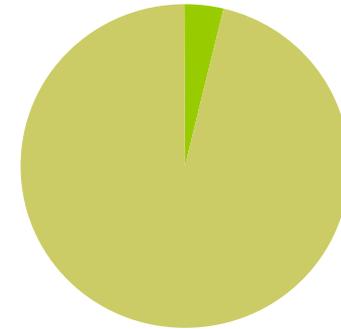
California, 2008

Source: California Department of Public Health

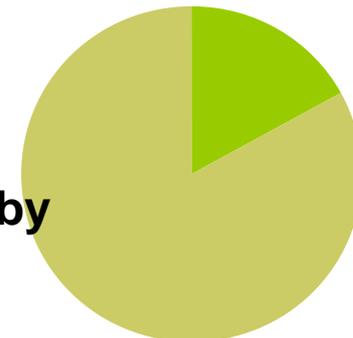
Costs of Chronic Disease in CA

	2003	2023 (Projected)
Treatment Expenditures	\$27B	\$72B
Lost Productivity	\$106B	\$359B
Total	\$133B	\$431B

More than **96 cents of every dollar spent** in Medicare...



...and **83 cents of every dollar spent** in Medicaid



Improved prevention & management could **reduce future economic costs of disease by \$117 billion** in 2023



Cardiovascular Disease in California

(Heart Disease, Stroke, Heart Failure)

- >73,000 deaths/year
 - about 1/3 all deaths
- Hospital discharges/year
 - Heart disease: 575,000
 - Stroke: 200,000
 - Heart failure: 350,000
- Hypertension
 - One in four of all adults
 - One in three African-Americans

Source: CDPH Burden of Heart Disease 2010

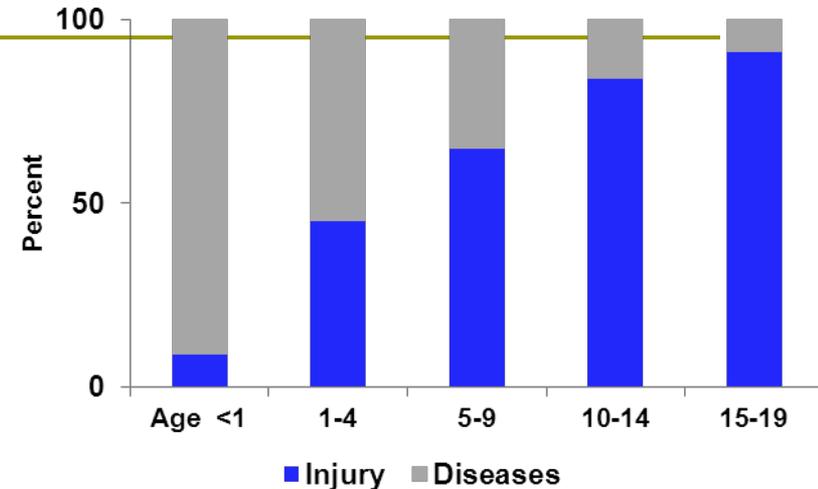
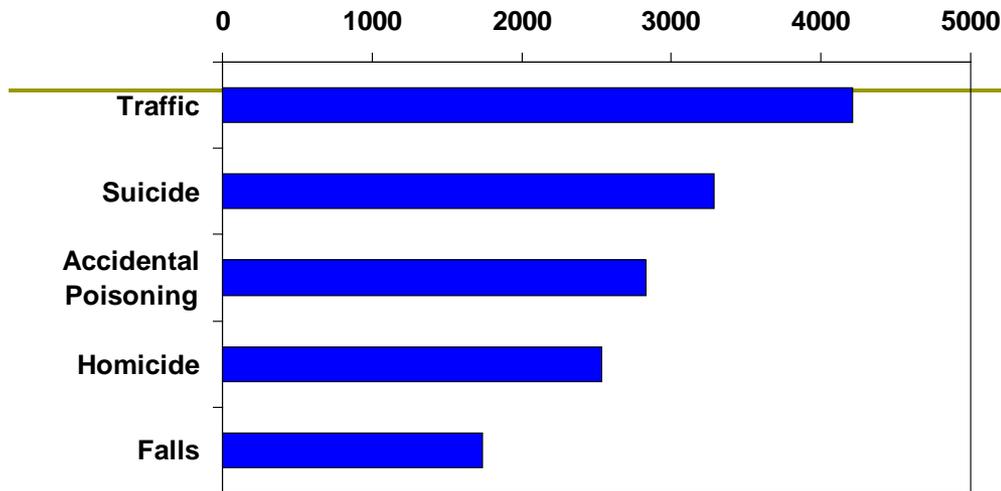
Cancer in California

- **1 in 2 Californians will develop cancer; 1 in 5 will die of cancer**
- **Each day, 400 cancer cases are diagnosed and 150 people die of cancer**
 - **Over 1.2 million Californians alive today have been diagnosed with cancer**
- **1988 to 2009:**
 - **Incidence rate of lung cancer decreased by 29%**
 - **Incidence rate of colorectal cancer by 26%**
 - **Mortality for female breast cancer decreased by 30%**
- **Nearly two-thirds of all cancer deaths could be prevented by not smoking, exercising regularly, proper nutrition, and maintaining a healthy weight**

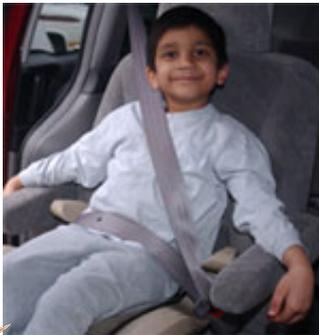
Obesity in California

- **Rates overweight or obese** (CHIS 2009)
 - Adults: 56%
 - Teens (12-27): almost 29%
 - Children (under 12): 11.5%
- **California's costs attributable to physical inactivity, obesity, and overweight** (CCPHA 2009)
 - \$41.2 billion
 - A 5% improvement in each of these risk factors could save nearly \$2.4 billion annually

Leading Causes of Injury Death



Injury Prevention Works – Car Seats and Booster Seats



Correctly installed child safety seats reduce risk:

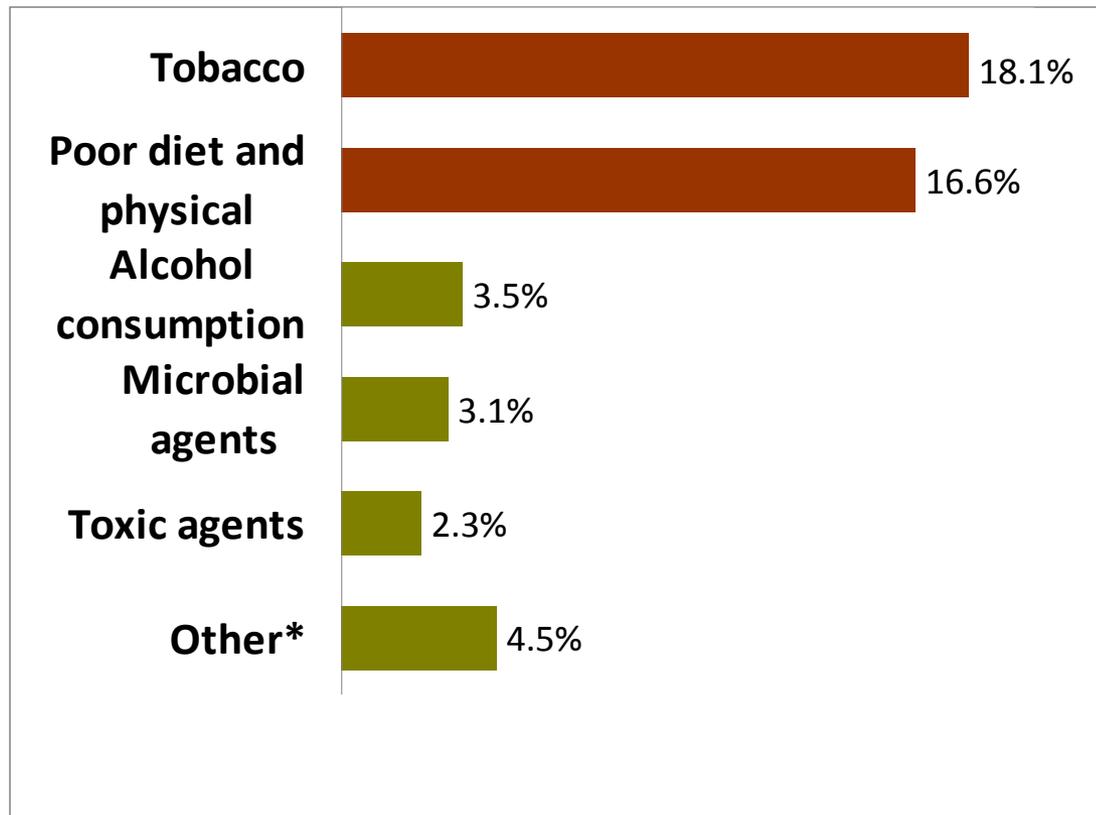
- ▶ death by 71%,
- ▶ hospitalizations by 67%
- ▶ minor injuries by 50%

Source: American Academy of Pediatrics

Causes of Children's Deaths:
Injuries are *the* number one killer of youth

Occupational injuries: \$11 billion annually in workers' compensation costs

Tobacco, poor diet, physical inactivity: More than a third of California deaths



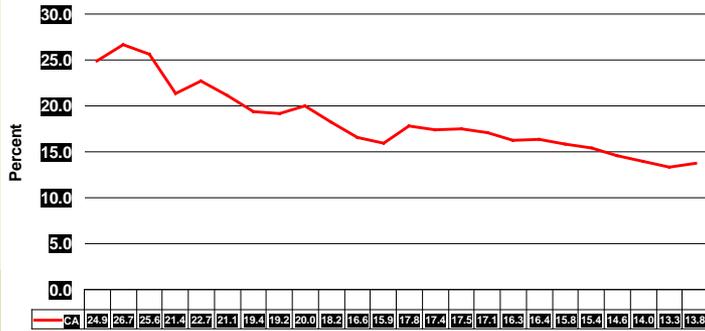
* Other: motor vehicle, firearms, sexual behavior, illicit drug use

Source: Mokad et al. Actual Causes of Death in the United States, 2000. JAMA. 2004;291:1238-1245.

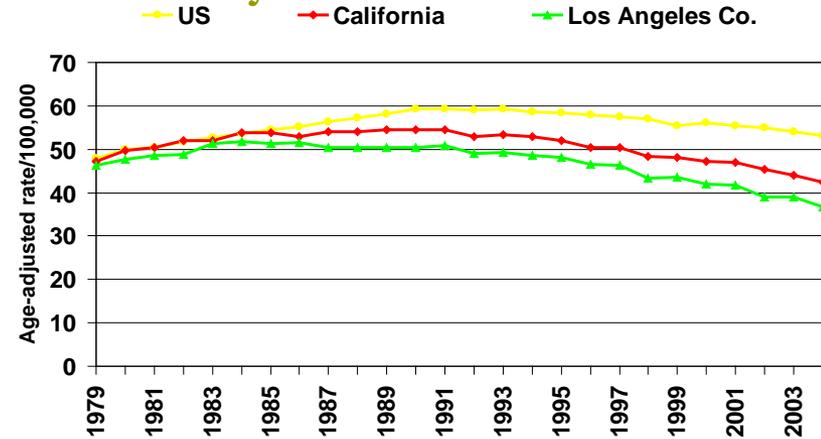
Too much tobacco



Smoking Rates 1984-2007



Lung Cancer Mortality 1979-2004



Tax per pack:	
New York = \$4.35	Washington = \$3.025
New York City = \$5.85 (combined)	Arizona = \$2.00 California = \$0.87



Too much sugar

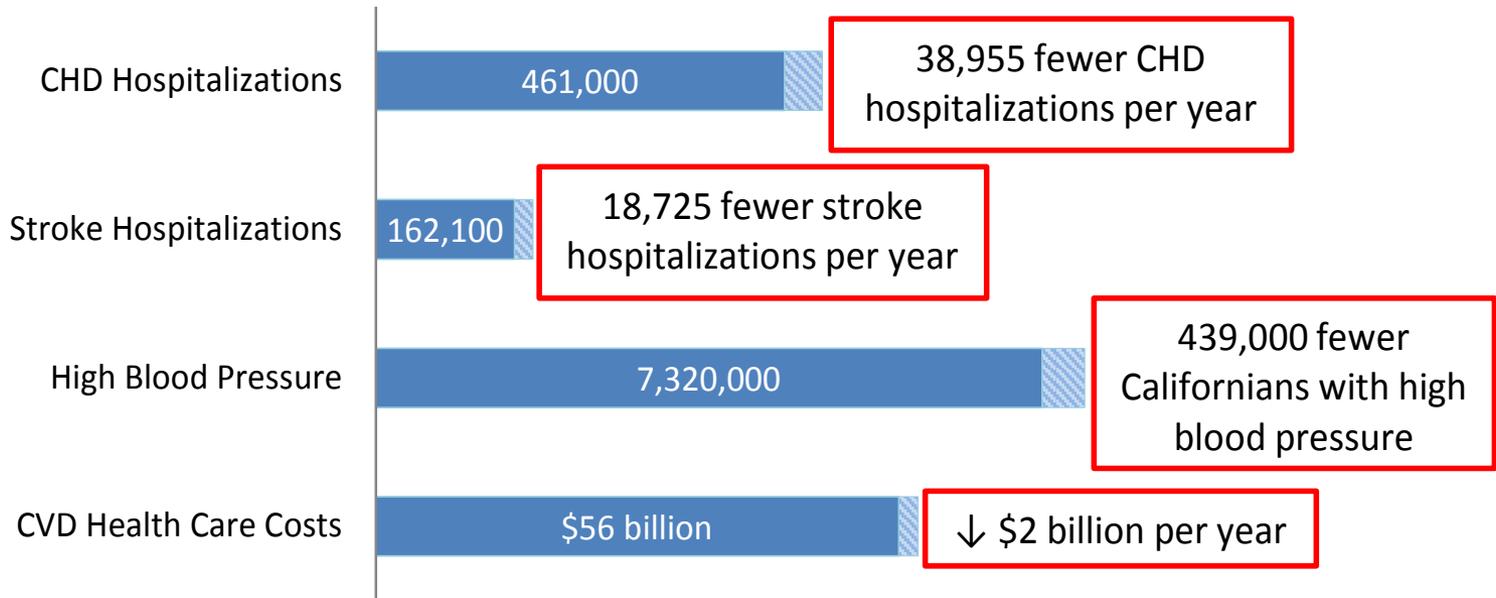


- Overweight and obesity is higher among Californians who daily drink one or more sugary drink. (UCLA 2009)
- 60% increase in child's risk for obesity with each additional daily serving of sugary beverage. (Ludwig 2001)

Too much salt

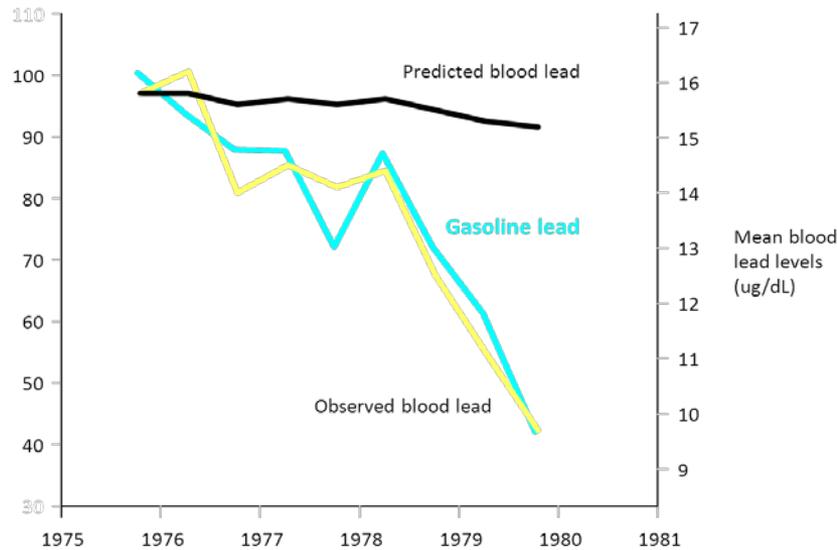


Projected Reductions in CVD and Costs in California ½ Teaspoon Per Day Decrease in Dietary Salt

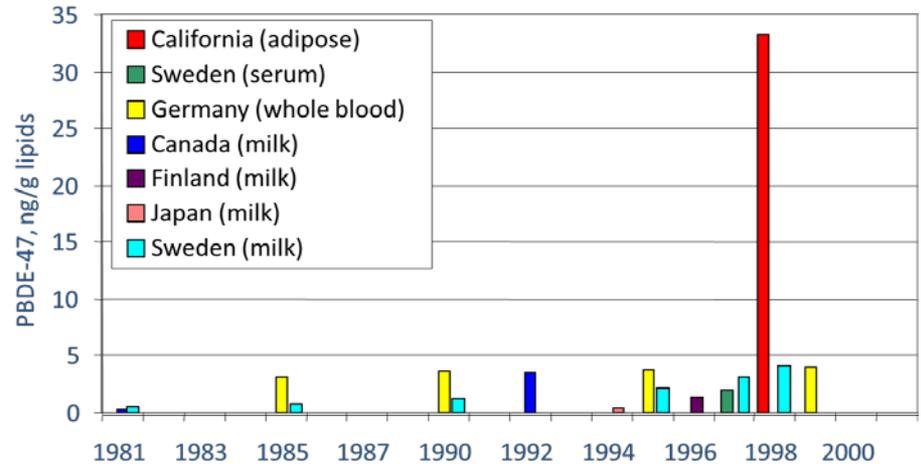


Environmental Toxins

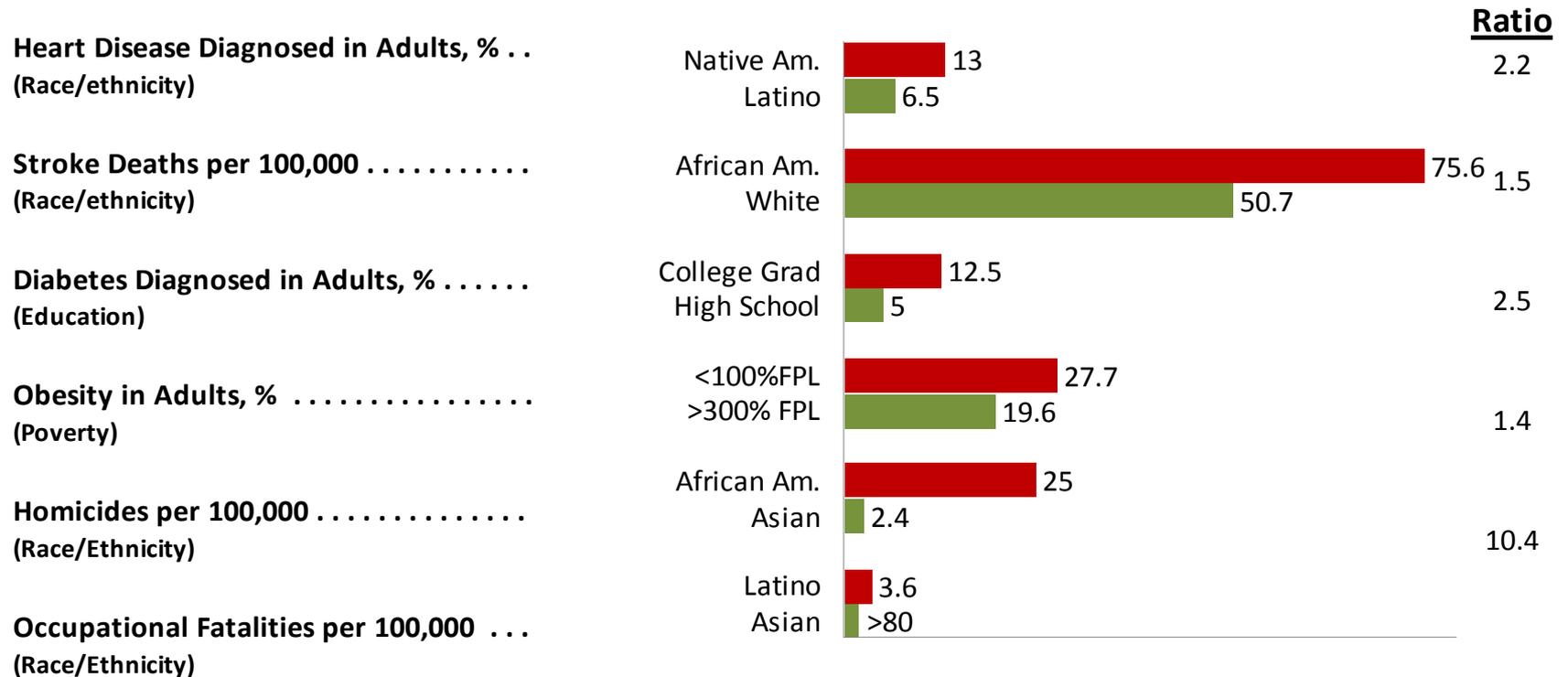
Significant decline in blood lead levels



Flame Retardant (PBDE-47) in Human Tissues



Health inequities are significant e.g. race/ethnicity, education, income, and place



Compared with a White Child in the Oakland Hills, an African American born in West Oakland is:

Birth, Childhood, Adolescence

- 1.5 x more likely premature or low birth weight
- 7 x more likely born into poverty
- 2 x more likely to live in rented home
- 4 times more likely to have parents with only a high school education
- 4 x less likely to read at grade level by 4th grade
- 4 x as likely to live in neighborhood with high density liquor stores and fast food outlets
- 5.6 x more likely to drop out of school

Adulthood

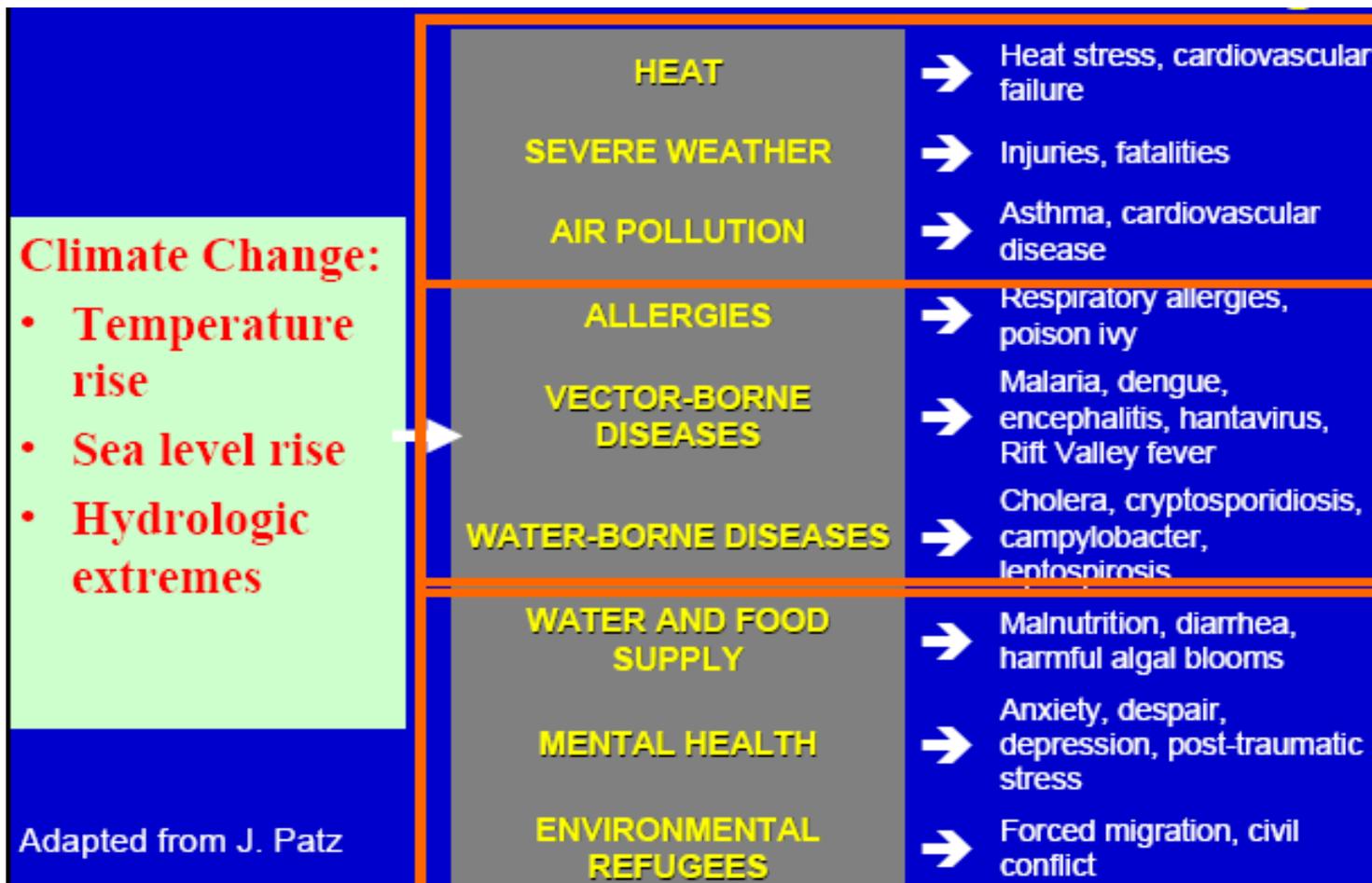
- 5 x more likely to be hospitalized for diabetes
- 2 x as likely to be hospitalized

Death

- Likely to die almost 15 years earlier
- 2 x as likely to die of heart disease
- 3 x more likely to die of stroke
- 2 x as likely to die of cancer

Source: Alameda Co. Health Department, 2008

Climate Change & Health



■ Many climate mitigation and adaptation efforts (walking, biking, local food supplies, improved land use patterns, urban greening) have important health co-benefits

■ California Climate Action Team Public Health Work Group

Why We Need HiAP



What is a Healthy Community?

- ❑ Meets basic needs of all
 - Safe, sustainable, accessible and affordable transportation options
 - Affordable, accessible and nutritious foods and safe drinkable water
 - Affordable, high quality, socially integrated and location-efficient housing
 - Affordable, accessible and high quality health care
 - Complete and livable communities including quality schools, parks and recreational facilities, child care, libraries, financial services and other daily needs
 - Access to affordable and safe opportunities for physical activity
 - Able to adapt to changing environments, resilient, and prepared for emergencies
 - Opportunities for engagement with arts, music and culture
- ❑ Quality and sustainability of environment
 - Clean air, soil and water, and environments free of excessive noise
 - Tobacco- and smoke-free
 - Green and open spaces, including healthy tree canopy and agricultural lands
 - Minimized toxics, greenhouse gas emissions and waste
 - Affordable and sustainable energy use
 - Aesthetically pleasing
- ❑ Adequate levels of economic, social development
 - Living wage, safe and healthy job opportunities for all, and a thriving economy
 - Support for healthy development of children and adolescents
 - Opportunities for high quality and accessible education
- ❑ Health and social equity
- ❑ Social relationships that are supportive and respectful
 - Robust social and civic engagement
 - Socially cohesive and supportive relationships, families, homes and neighborhoods
 - Safe communities, free of crime and violence

