Changing Public Policy to Address the Socioeconomic Factors that Drive Birth Outcomes:

Moving from Disparities to Inequities

6-6-2012
Milwaukee, WI

Tony Iton, M.D., J.D., MPH
Senior Vice President
The California Endowment

DISCLAIMER

- The opinions expressed in this presentation are the views of Anthony Iton, MD, JD, MPH, and do not necessarily represent the official opinions of:
  - The US Centers for Disease Control & Prevention
  - The Alameda County Public Health Department
  - The California Endowment
  - (*or any other health institution with which I am, or have been, associated*).

Outline

- Conclusions
- A Practitioner's Framework
- DEATH: Infant Mortality & Life Expectancy
- The Services Model
- How The Neighborhood Environment (Place) "Gets Under The Skin"
- Segregation
- A New Kind of Public Health Practice

Conclusions

Health is Political

Health ≠ Health care

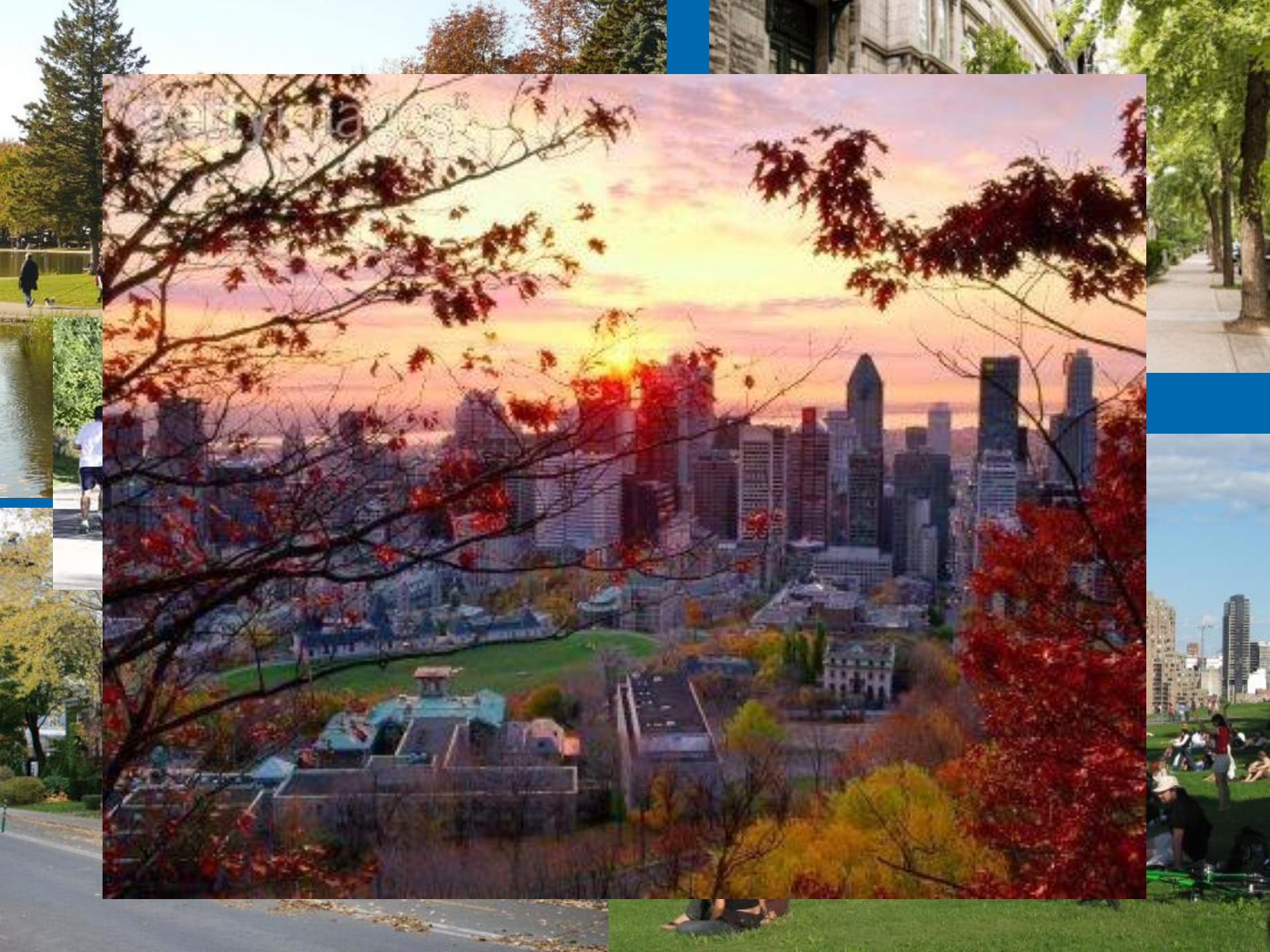
Where You Live Matters

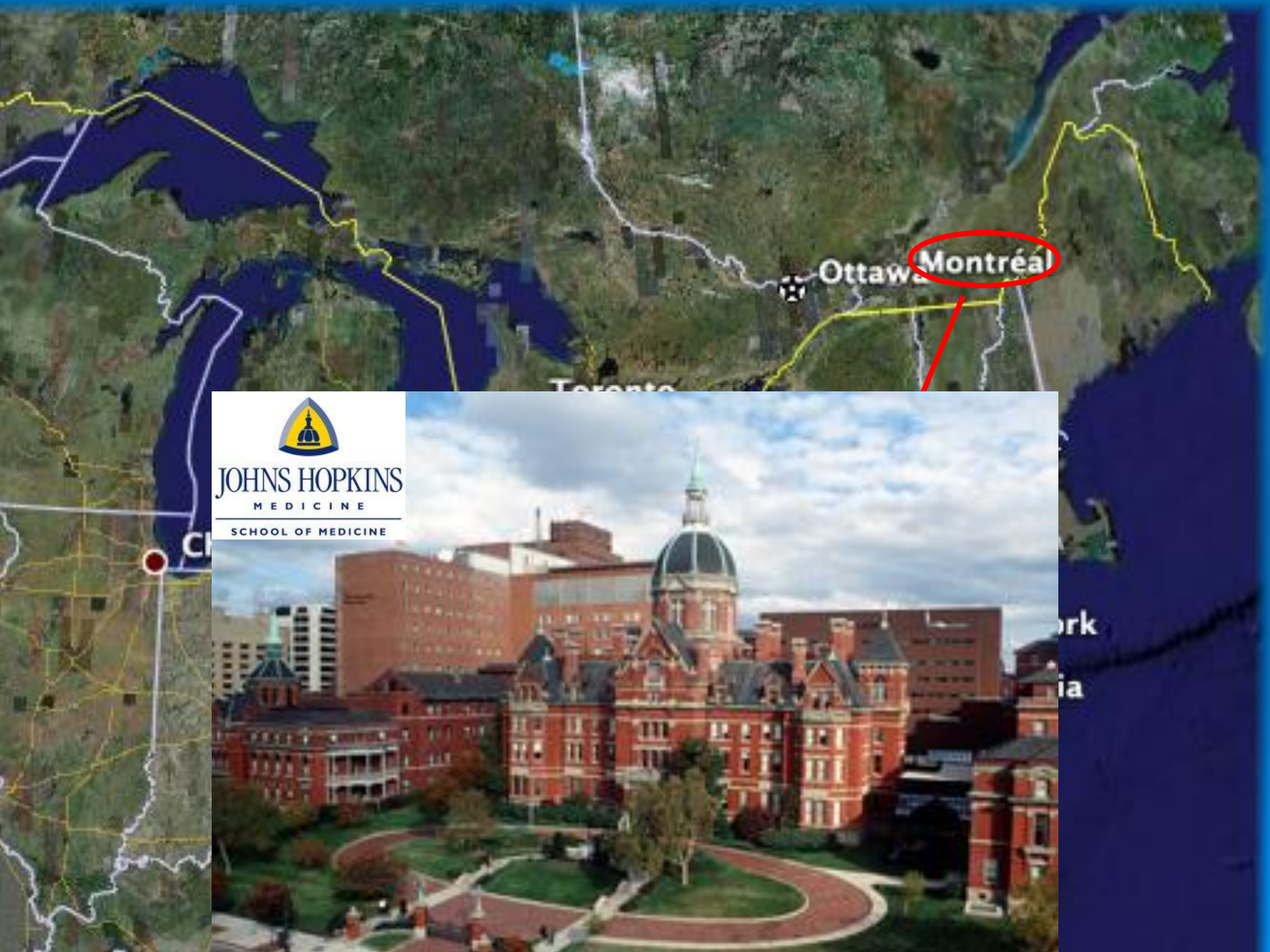
It Matters A LOT!

Does Your *Zip Code* Matter More Than Your *Genetic Code*?

There are no *silver bullets!*

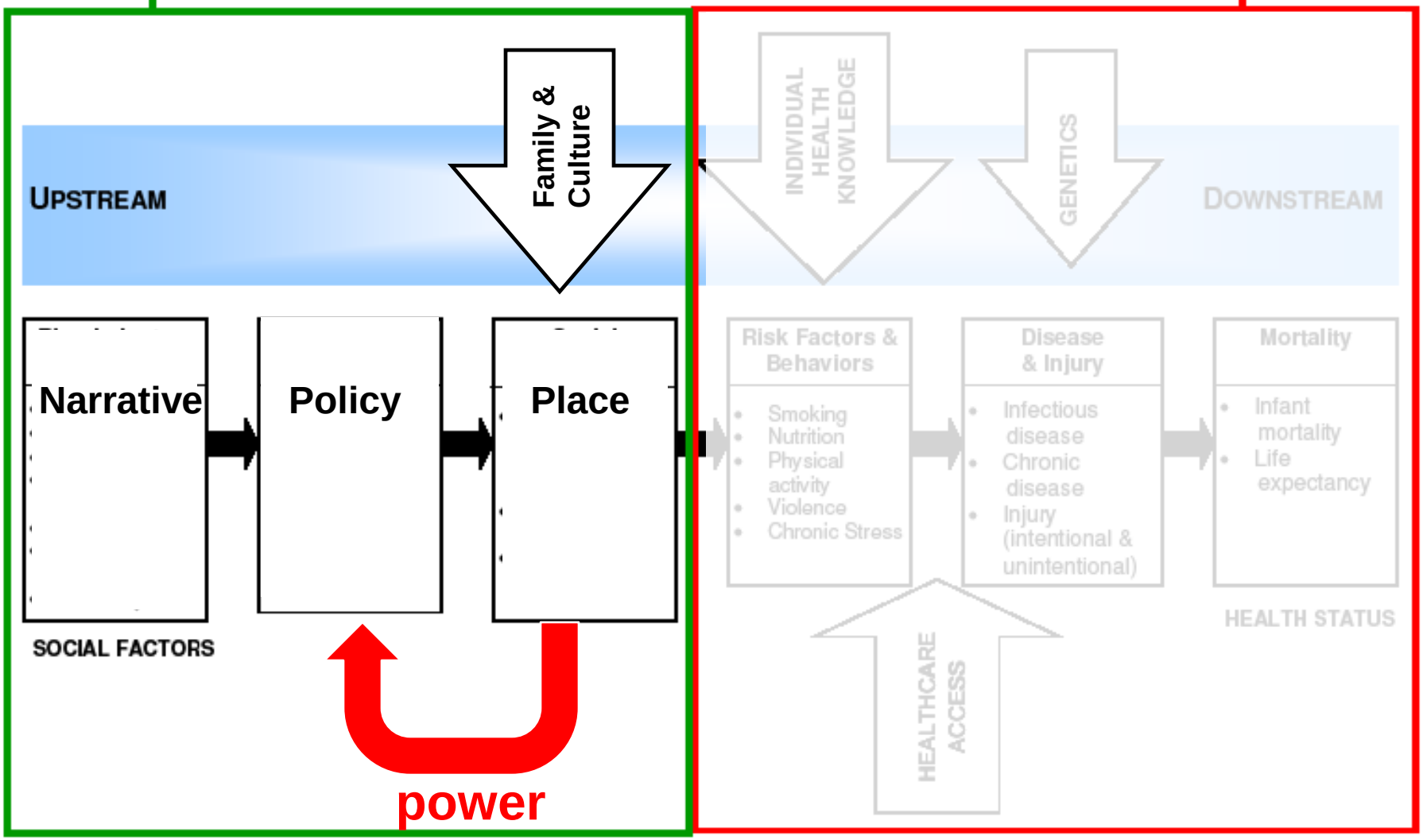
STOP Waiting for Washington!



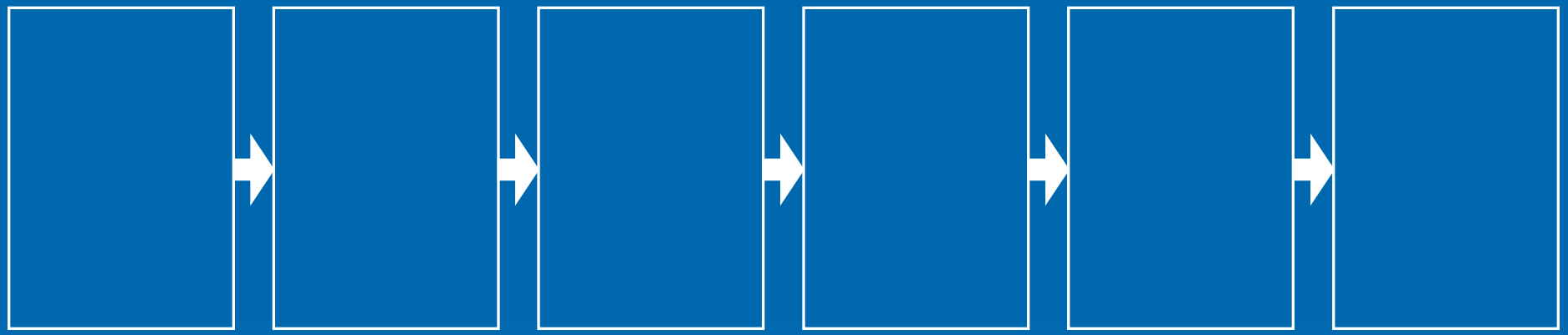

Ottawa
Montréal
JOHNS HOPKINS
MEDICINE
SCHOOL OF MEDICINE

LIFE

A Framework for Health Equity



- Adapted by ACPHD from the Bay Area Regional Health Inequities Initiative, Summer 2008



Infant mortality

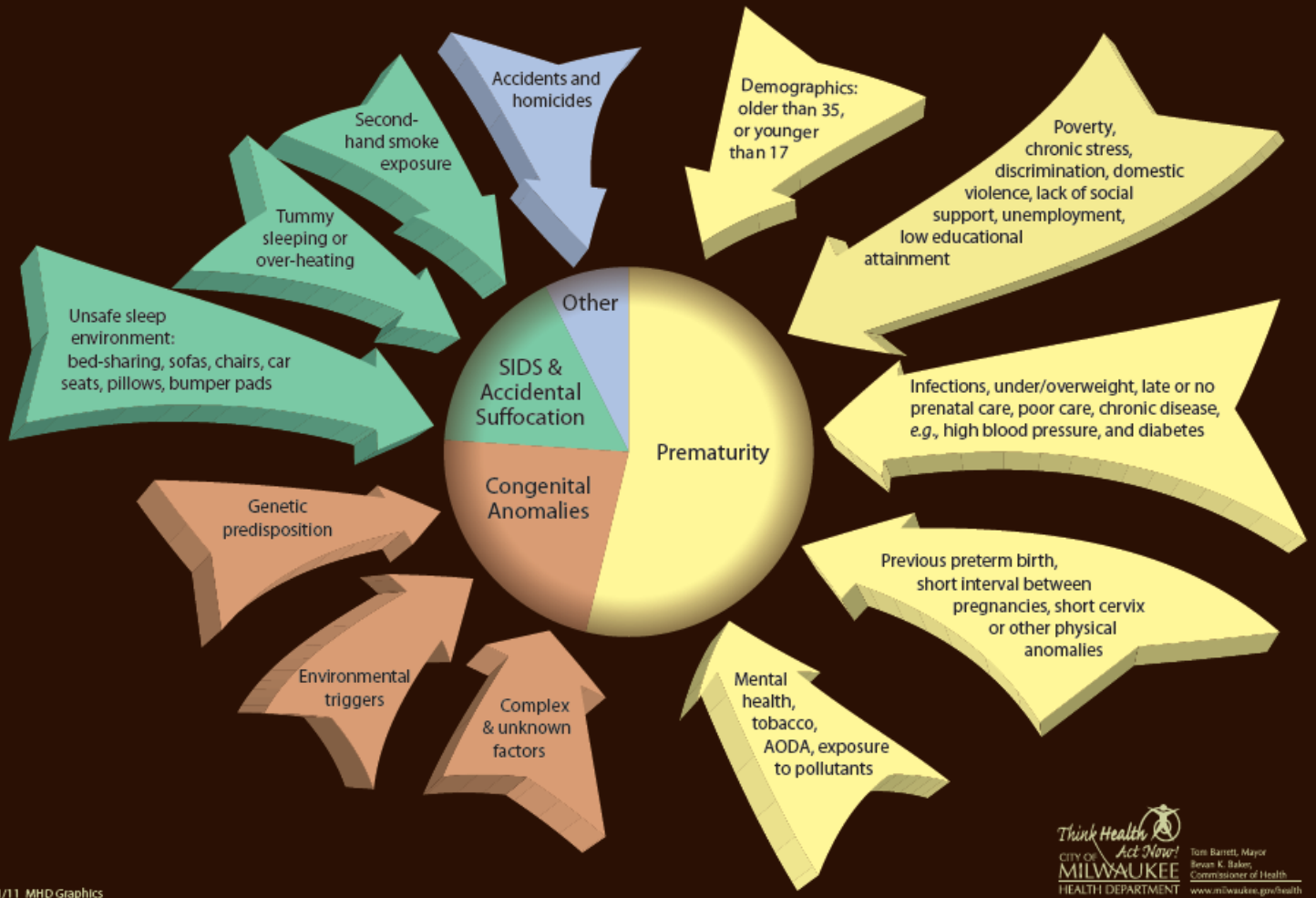
Mortality

Life expectancy

Infant Mortality

Infant mortality rate = The number of infants who die before their first birthday out of every 1,000 live births.

Factors which Influence Infant Mortality



11/11 MHD Graphics

Think Health Act Now!
CITY OF MILWAUKEE HEALTH DEPARTMENT
Tom Barrett, Mayor
Bevan K. Baker, Commissioner of Health
www.milwaukee.gov/health

2010 Infant Mortality Rates

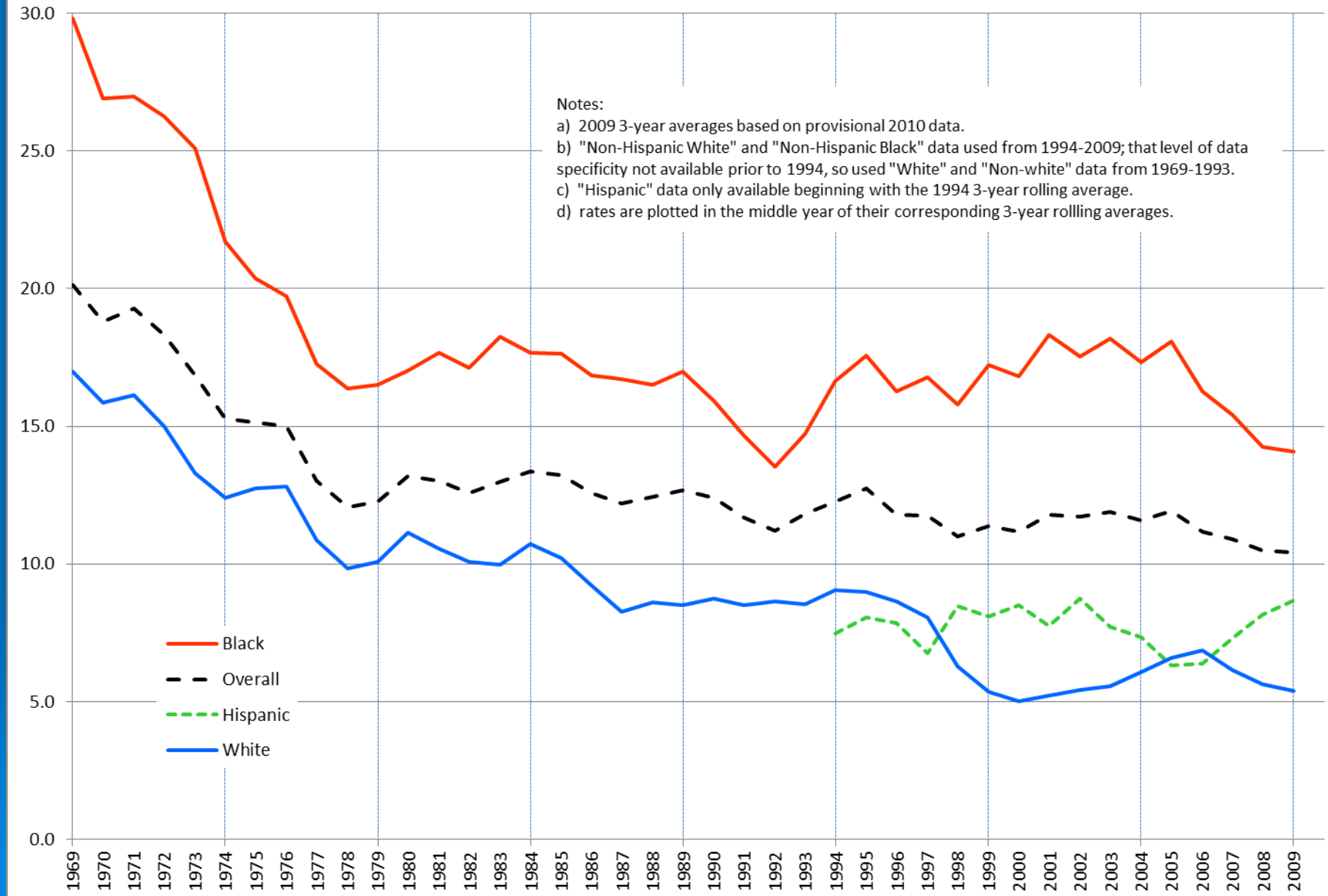
US: 6.1

Wisconsin: 5.7

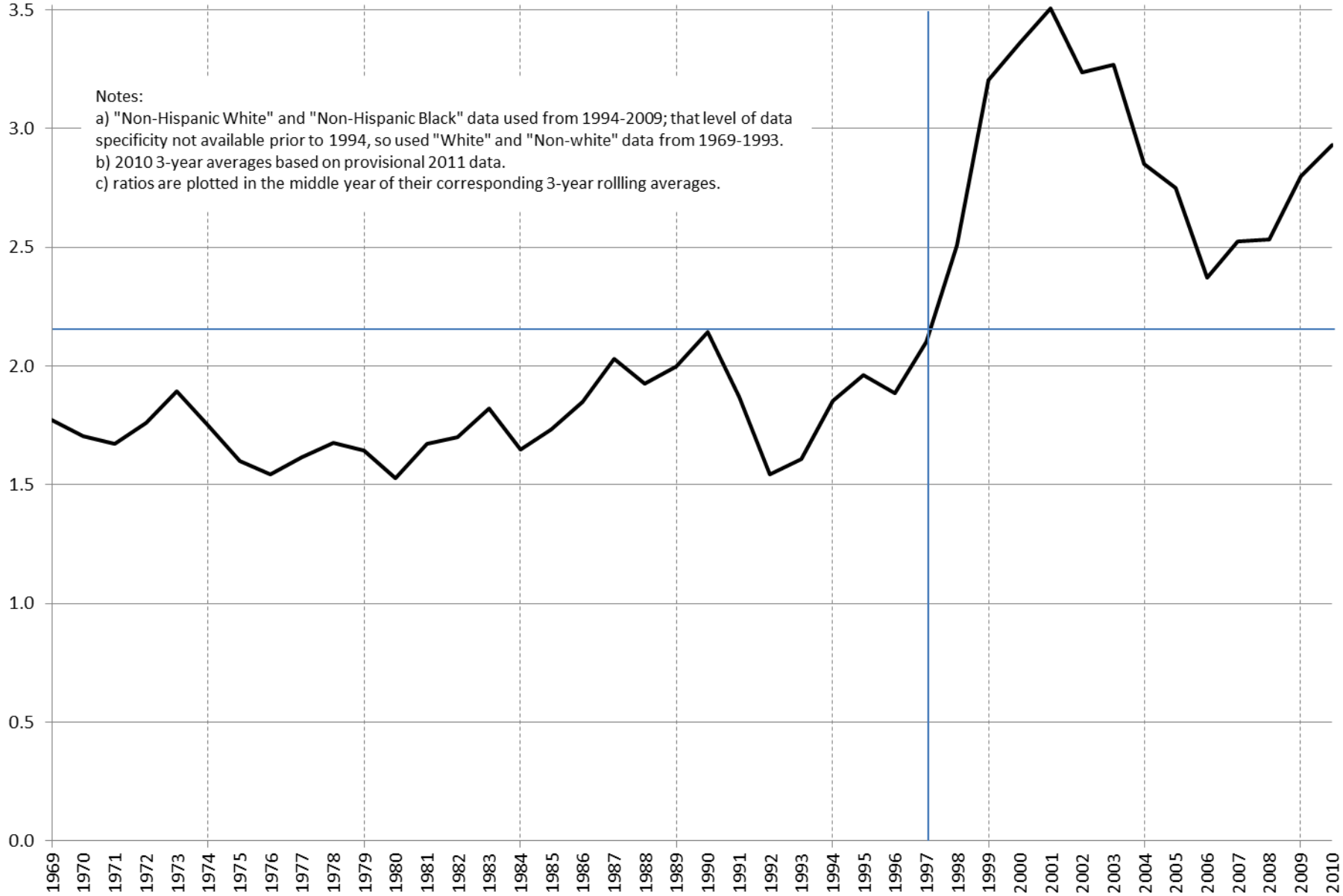
Milwaukee: 9.5

National Goal for 2020: 6.0

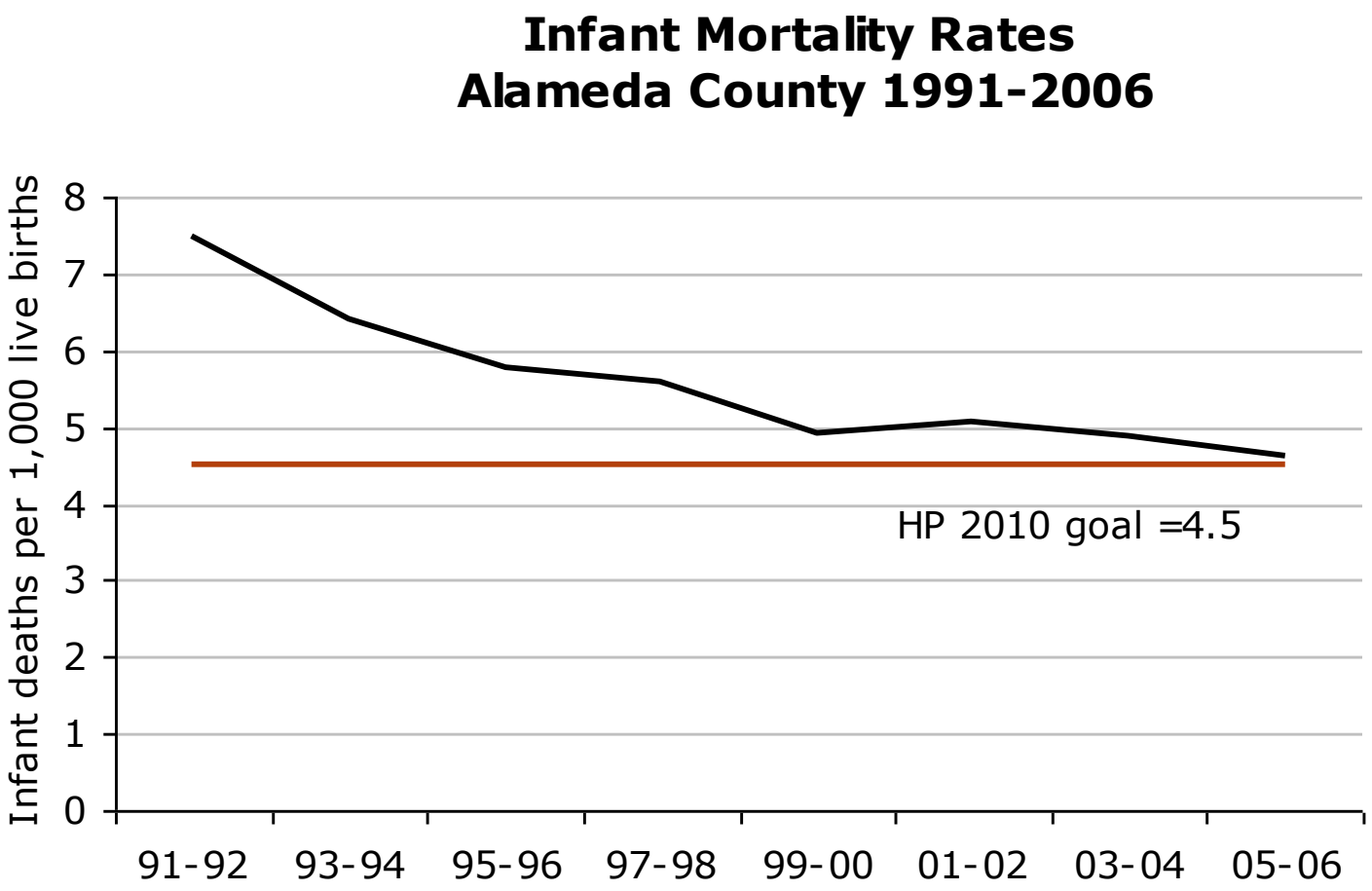
Milwaukee's Infant Mortality Rate: 41 years of 3-year rolling averages



Milwaukee's Black/White IMR ratio: 3-year rolling averages

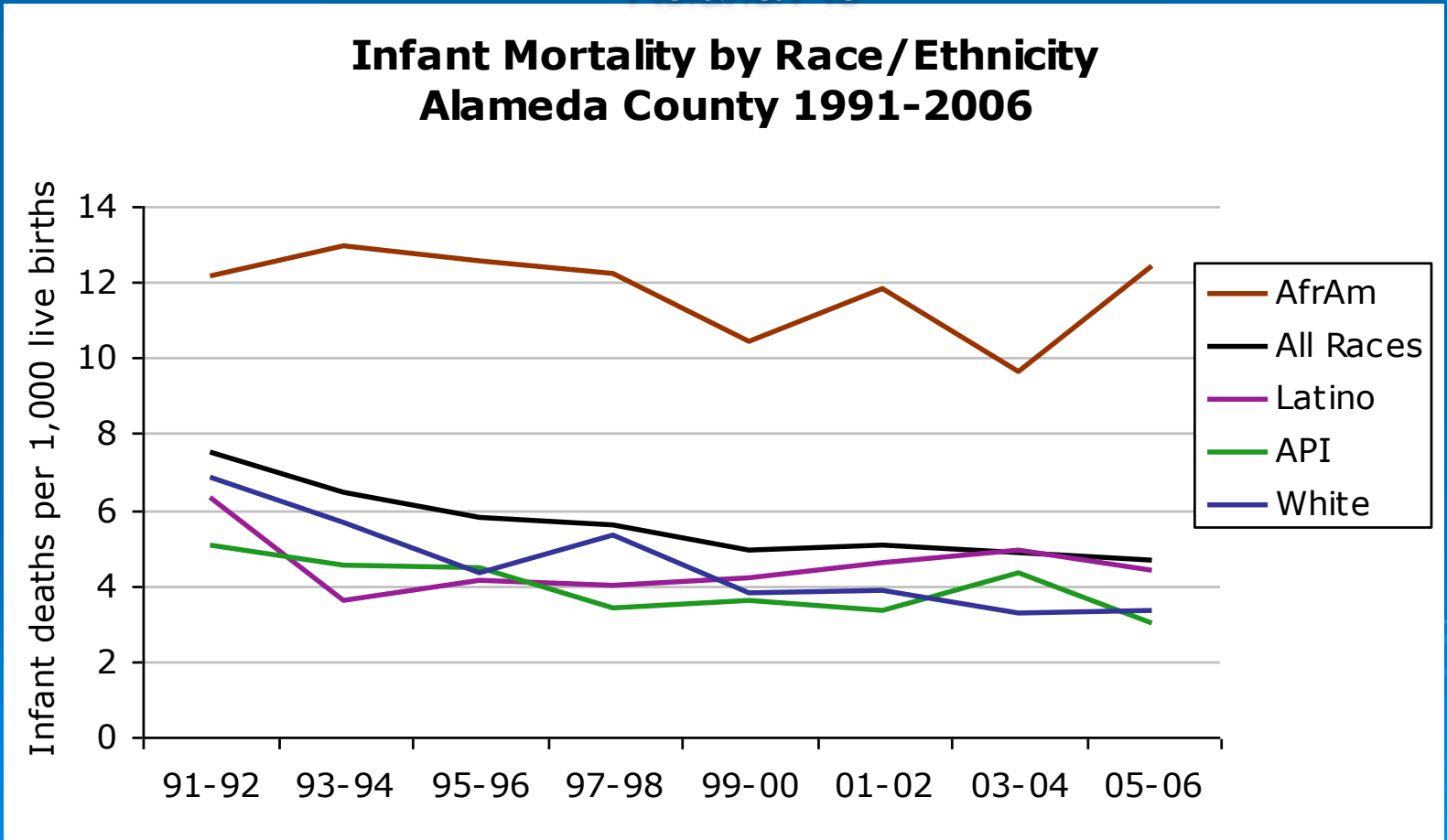


Infant mortality is decreasing…



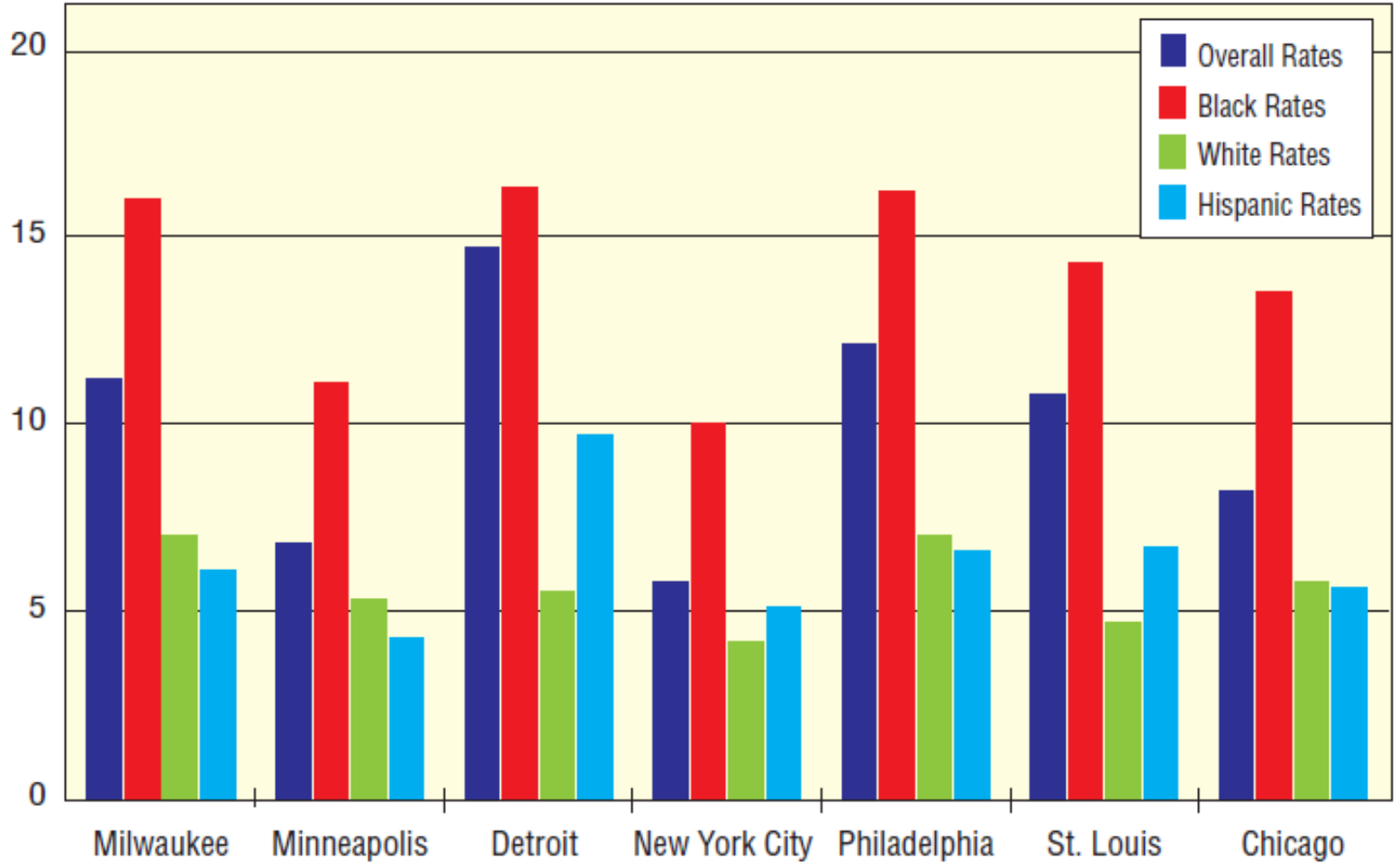
…but it's far from a success story.

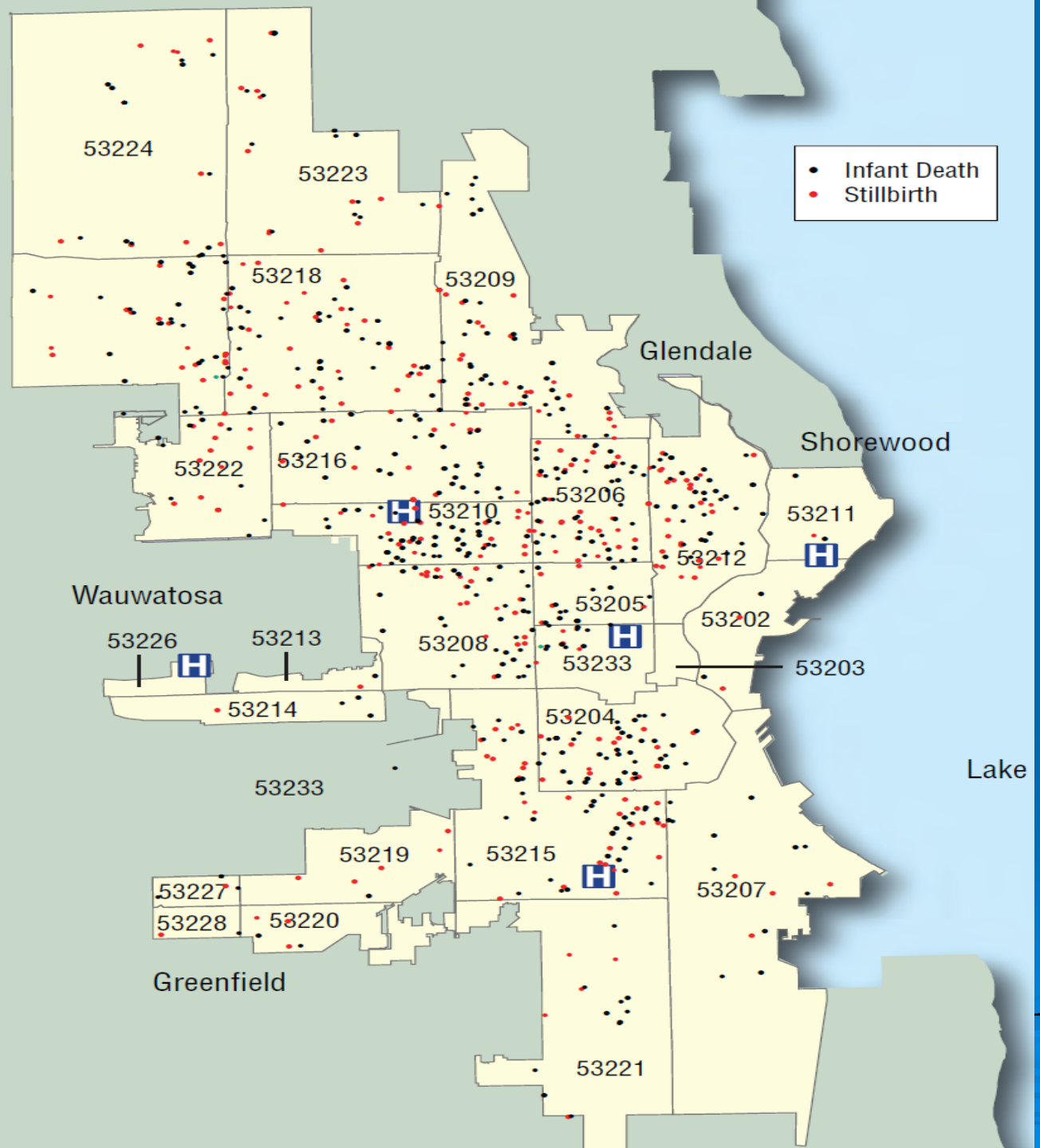
Three times higher rates among African Americans than Whites or Asians/PIs



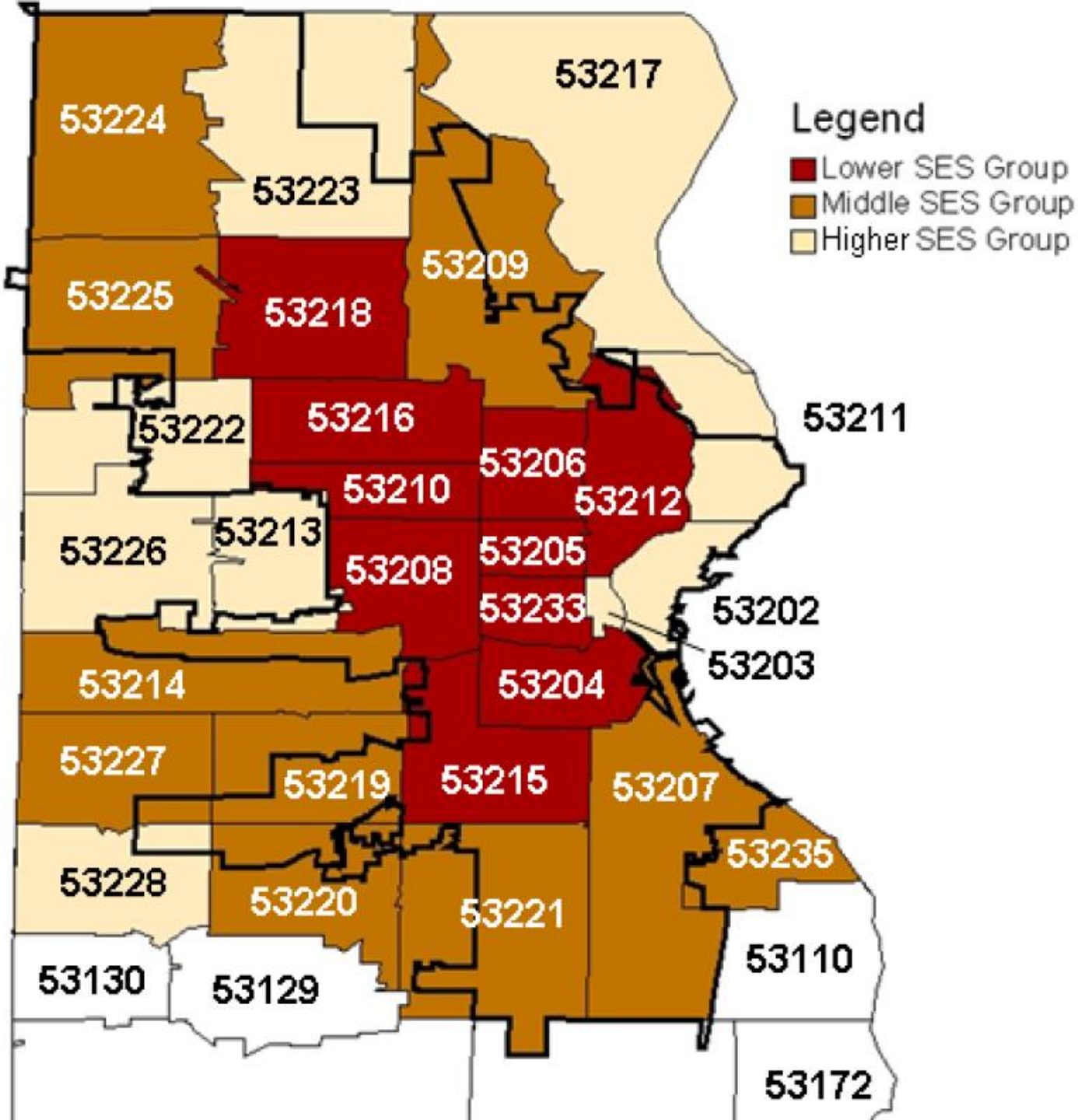
Infant Mortality Rate by City Comparison

2005–2007 infant mortality rates*

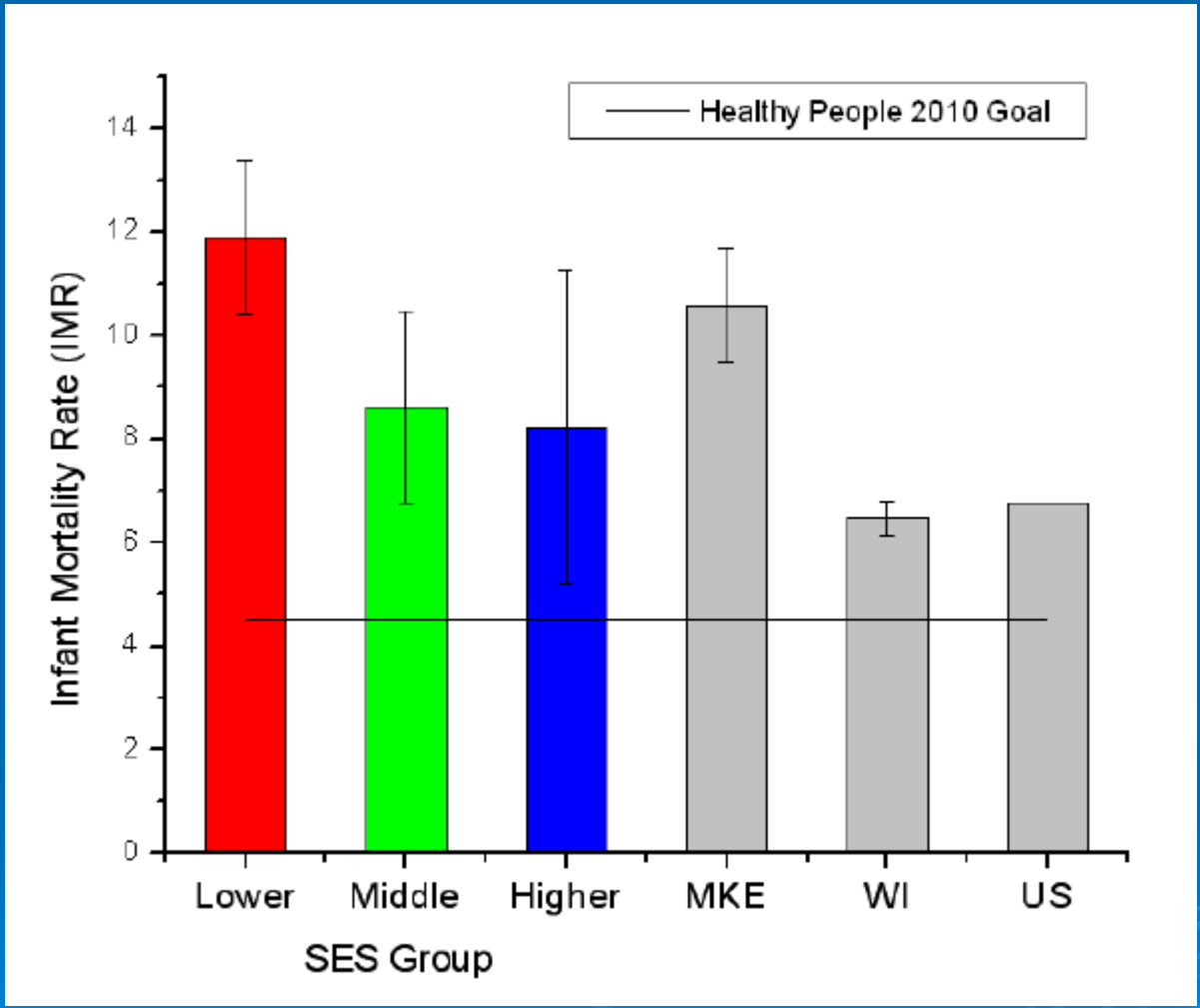




Each dot on this map represents a Milwaukee city infant death or stillbirth from 2005 through 2008


Legend
Lower SES Group
Middle SES Group
Higher SES Group
53217
53224
53223
53209
53225
53218
53211
53222
53216
53206
53210
53212
53226
53213
53208
53205
53233
53202
53203
53214
53204
53227
53219
53215
53207
53235
53228
53220
53221
53110
53130
53129
53172

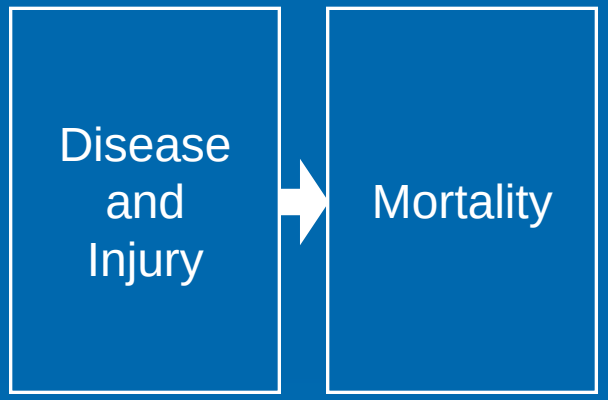
2007-2009 IMRs, by Milwaukee ZIP code SES group



Chronic disease

Infectious disease

Injury (intentional and unintentional)

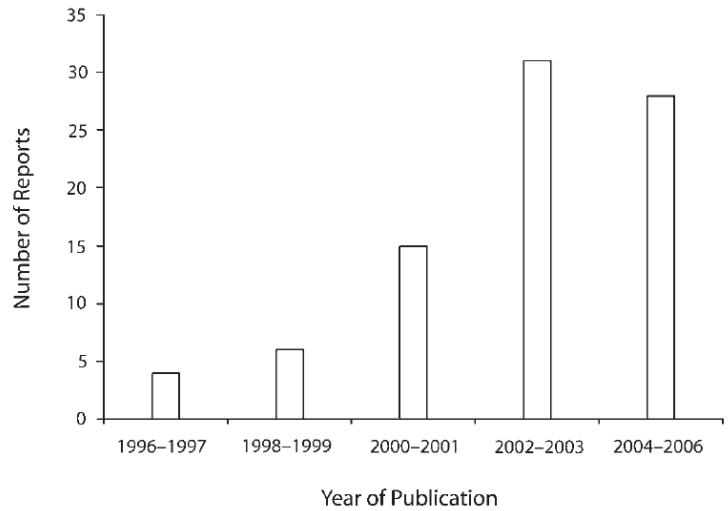


Genetics

Disparities in Infant Mortality: What's Genetics Got to Do With It?

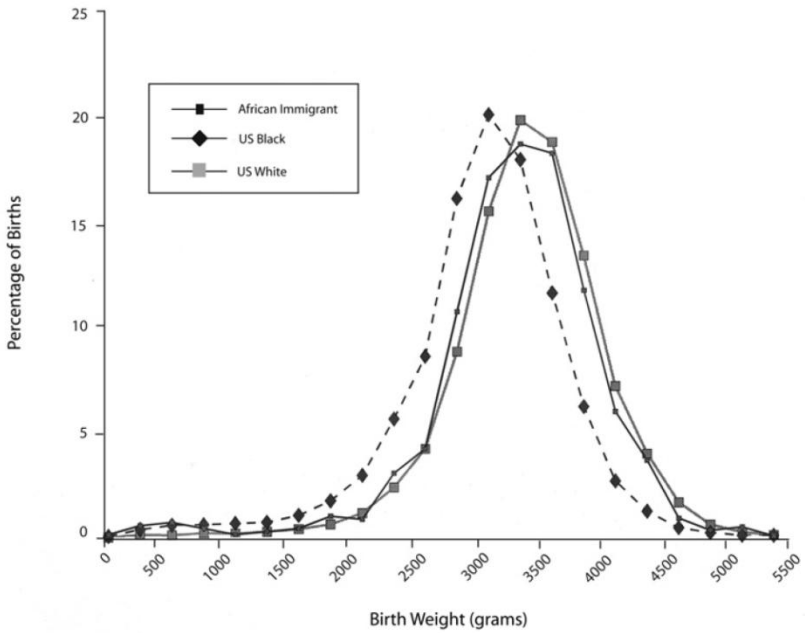
Since 1950, dramatic advances in human genetics

Richard David, MD, and James Collins Jr, MD, MPH



Source. All articles before 2003 and 45 of the 59 from 2003 onward were cited in Table 1 in Fiscella.[22] The remaining 14 articles[23–36] were obtained from a PubMed search in February 2006.

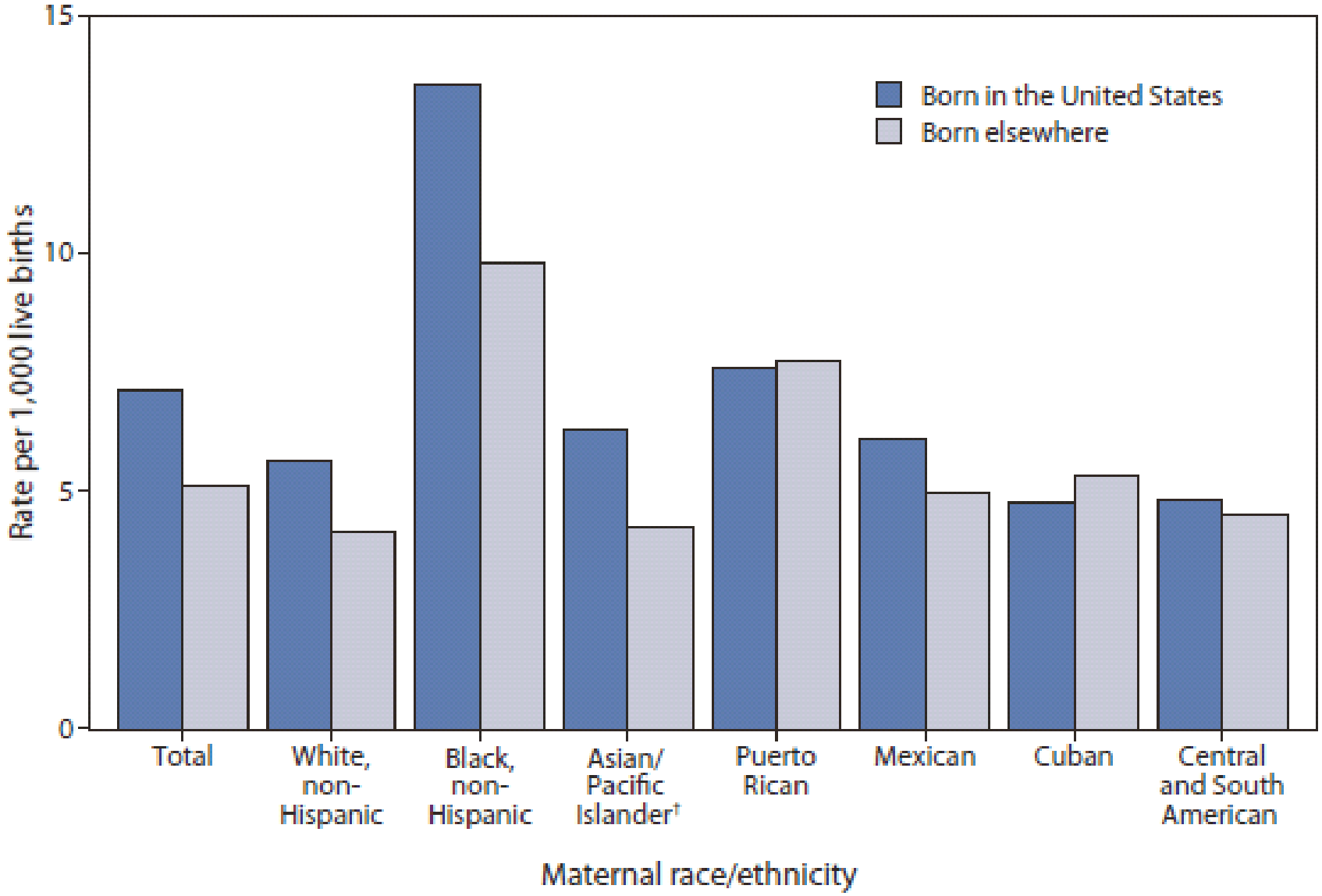
FIGURE 1—Quantity of reports describing polymorphisms putatively implicated in the risk of preterm birth or other adverse birth outcomes.



Source. Reprinted with permission from David and Collins.[55]

FIGURE 2—Birthweight distributions of 3 Illinois subpopulations.

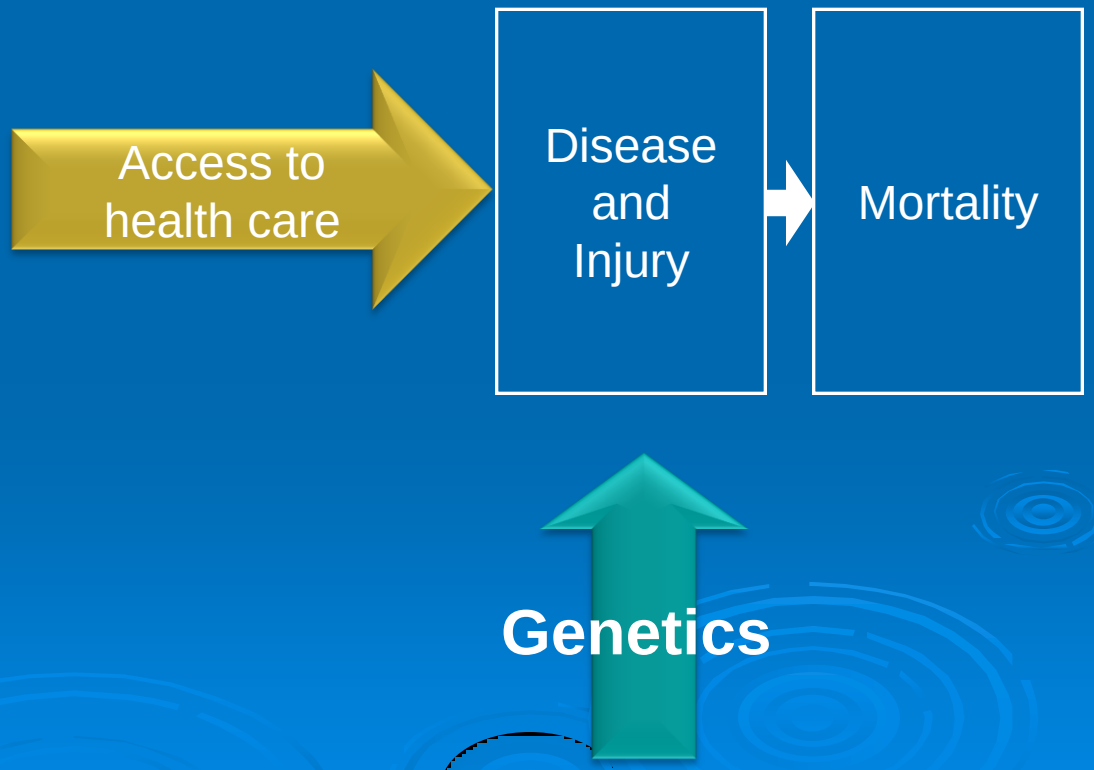
MMWR July 8, 2011 / 60(26);891



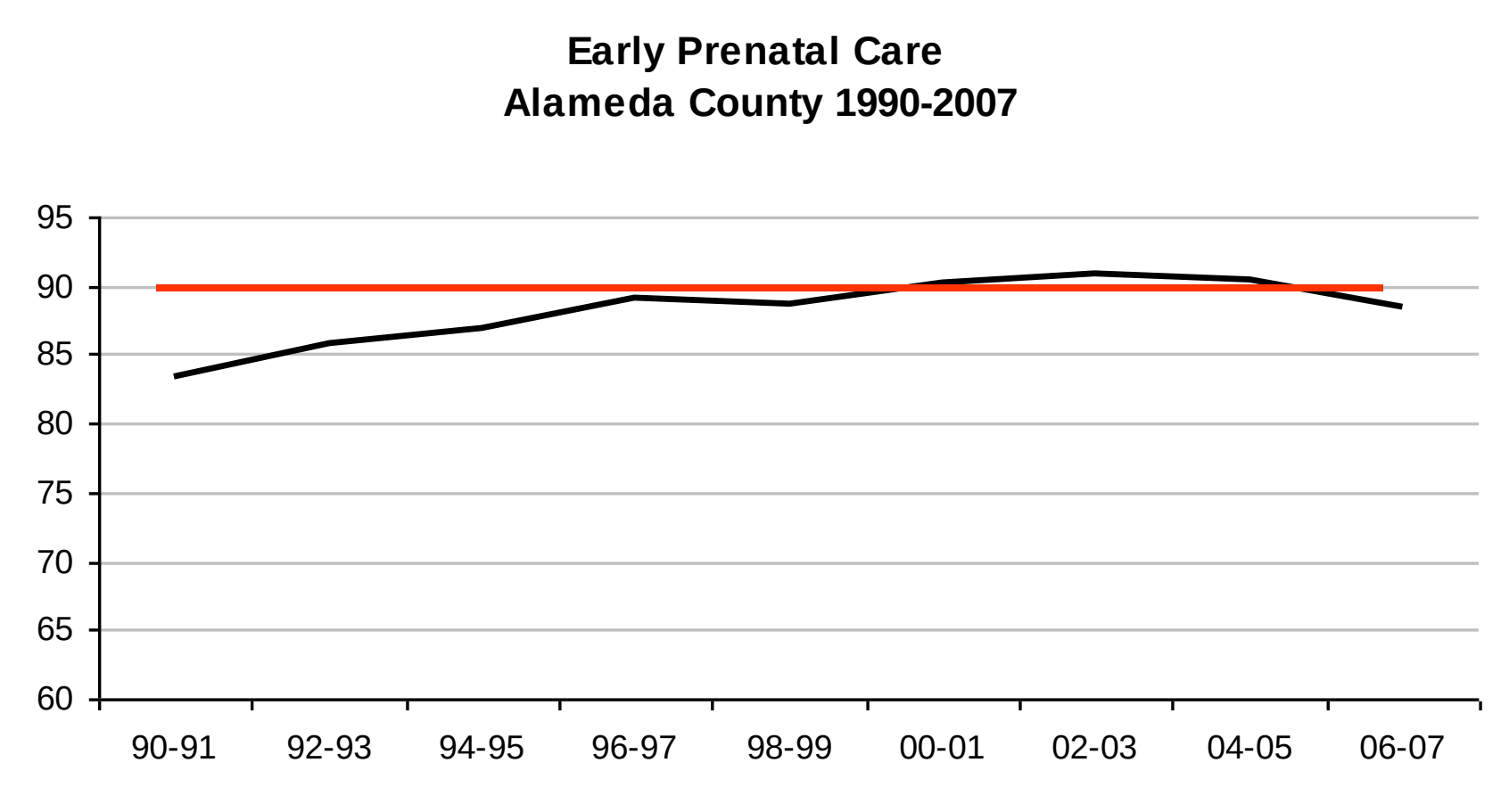
Chronic disease

Infectious disease

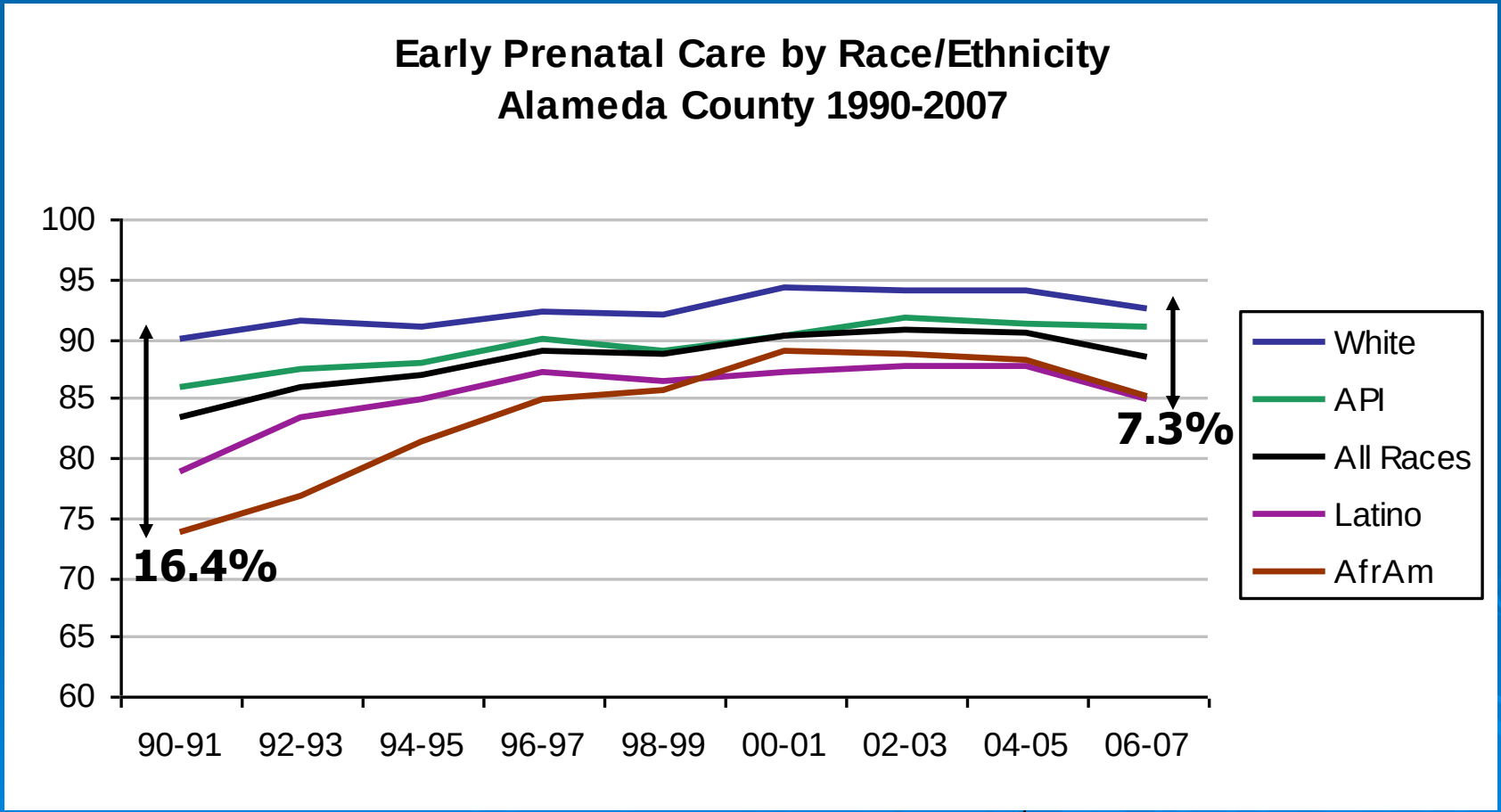
Injury (intentional and unintentional)



While rates of care have increased…



And inequities between groups have decreased…



Life expectancy

… is the **average** lifespan a newborn can expect

Gapminder.org

CERTIFICATE OF DEATH

STATE OF CALIFORNIA
USE BLACK INK ONLY / NO ERASURES, WHITEOUTS OR ALTERATIONS
VS-11(REV 1/04)

STATE FILE NUMBER

3200701000029
LOCAL REGISTRATION NUMBER

DECEDENT'S PERSONAL DATA

1. NAME OF DECEDENT — FIRST (Given): DONALD
2. MIDDLE: H.
3. LAST (Family): DUCK

AKA. ALSO KNOWN AS — Include full AKA (FIRST, MIDDLE, LAST):

4. DATE OF BIRTH mm/dd/ccyy: 02/14/1937
5. AGE Yrs.: 69
IF UNDER ONE YEAR: Months / Days
IF UNDER 24 HOURS: Hours / Minutes
6. SEX: M

9. BIRTH STATE/FOREIGN COUNTRY: FINLAND
10. SOCIAL SECURITY NUMBER: 243-65-9974
11. EVER IN U.S. ARMED FORCES? [ ] YES [X] NO [ ] UNK
12. MARITAL STATUS (at time of Death): NEVER MARRIED
7. DATE OF DEATH mm/dd/ccyy: 01/16/2007
8. HOUR (24 Hours): 0034

13. EDUCATION — Highest Level/Degree (see worksheet on back): 06
14/15. WAS DECEDENT HISPANIC/LATINO(A)/SPANISH? (If yes, see worksheet on back) [ ] YES [X] NO
16. DECEDENT'S RACE — Up to 2 races may be listed (see worksheet on back): CAUCASIAN

17. USUAL OCCUPATION — Type of work for most of life. DO NOT USE RETIRED: TEACHER
18. KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, road construction, employment agency, etc.): EDUCATION
19. YEARS IN OCCUPATION: 4

LOCAL RESIDENCE

20. DECEDENT'S RESIDENCE (Street and number or location): 348 8TH AVE
21. CITY: ALAMEDA
22. COUNTY/PROVINCE: ALAMEDA
23. ZIP CODE: 94501
24. YEARS IN COUNTY: 3
25. STATE/FOREIGN COUNTRY: CA

INFORMANT

26. INFORMANT'S NAME AND RELATIONSHIP: SUE -, MOUSE
27. INFORMANT'S MAILING ADDRESS (Street and number or rural route number, city or town, state, ZIP): 345 HIGH ST, OAKLAND, CA 94601

SPOUSE AND PARENT INFORMATION

28. NAME OF SURVIVING SPOUSE — FIRST: -
29. MIDDLE: -
30. LAST (Maiden Name): -

31. NAME OF FATHER — FIRST: THOMAS
32. MIDDLE: -
33. LAST: DUCK
34. BIRTH STATE: CA

35. NAME OF MOTHER — FIRST: MINNIE
36. MIDDLE: -
37. LAST (Maiden): UNKNOWN
38. BIRTH STATE: UNKNOWN

FUNERAL DIRECTOR/ LOCAL REGISTRAR

39. DISPOSITION DATE mm/dd/ccyy: 01/22/2007
40. PLACE OF FINAL DISPOSITION: RES 345 HIGH ST, OAKLAND, CA 94601

41. TYPE OF DISPOSITION(S): CR/RES
42. SIGNATURE OF EMBALMER: MANUEL FLORES
43. LICENSE NUMBER: EMB6370

44. NAME OF FUNERAL ESTABLISHMENT: CLARENCE N COOPER MORTUARY INC
45. LICENSE NUMBER: FD381
46. SIGNATURE OF LOCAL REGISTRAR: ANTHONY ITON, M.D.
47. DATE mm/dd/ccyy: 01/18/2007

PLACE OF DEATH

101. PLACE OF DEATH: EDEN MEDICAL CENTER
102. IF HOSPITAL, SPECIFY ONE: [X] IP [ ] ER/OP [ ] DOA [ ] Hospice [ ] Nursing Home/LTC
103. IF OTHER THAN HOSPITAL, SPECIFY ONE: [ ] Decedent's Home [ ] Other

104. COUNTY: ALAMEDA
105. FACILITY ADDRESS OR LOCATION WHERE FOUND (Street and number or location): 20103 LAKE CHABOT RD
106. CITY: CASTRO VALLEY

CAUSE OF DEATH

107. CAUSE OF DEATH — Enter the chain of events --- diseases, injuries, or complications --- that directly caused death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE.

IMMEDIATE CAUSE (Final disease or condition resulting in death) →
(A) PNEUMONIA
(B) BRONCITIS
(C)
(D)

Sequentially, list conditions, if any, leading to cause on Line A. Enter UNDERLYING CAUSE (disease or injury that initiated the events resulting in death) LAST

Time Interval Between Onset and Death
(AT) HRS
(BT) DAYS
(CT)
(DT)

108. DEATH REPORTED TO CORONER? [X] YES [ ] NO
REFERRAL NUMBER: 0
109. BIOPSY PERFORMED? [ ] YES [X] NO
110. AUTOPSY PERFORMED? [ ] YES [X] NO
111. USED IN DETERMINING CAUSE? [ ] YES [X] NO

112. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN 107: DEMENTIA

113. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? (If yes, list type of operation and date.): NO
113A. IF FEMALE, PREGNANT IN LAST YEAR? [ ] YES [ ] NO [ ] UNK

PHYSICIAN'S CERTIFICATION

114. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED.
Decedent Attended Since (A) mm/dd/ccyy: 02/03/2006
Decedent Last Seen Alive (B) mm/dd/ccyy: 01/10/2007
115. SIGNATURE AND TITLE OF CERTIFIER: GARY WINSETT BROWN M.D.
116. LICENSE NUMBER: A38965
117. DATE mm/dd/ccyy:
118. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE: MICHAEL ANDREW HOGARTH M.D. 2315 STOCKTON BLVD, SACRAMENTO, CA 95817

CORONER'S USE ONLY

119. I CERTIFY THAT IN MY OPINION DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED.
MANNER OF DEATH [ ] Natural [ ] Accident [ ] Homicide [ ] Suicide [ ] Pending Investigation [ ] Could not be determined
120. INJURED AT WORK? [ ] YES [ ] NO [ ] UNK
121. INJURY DATE mm/dd/ccyy:
122. HOUR (24 Hours):

123. PLACE OF INJURY (e.g., home, construction site, wooded area, etc.):

124. DESCRIBE HOW INJURY OCCURRED (Events which resulted in injury):

125. LOCATION OF INJURY (Street and number, or location, and city, and ZIP):

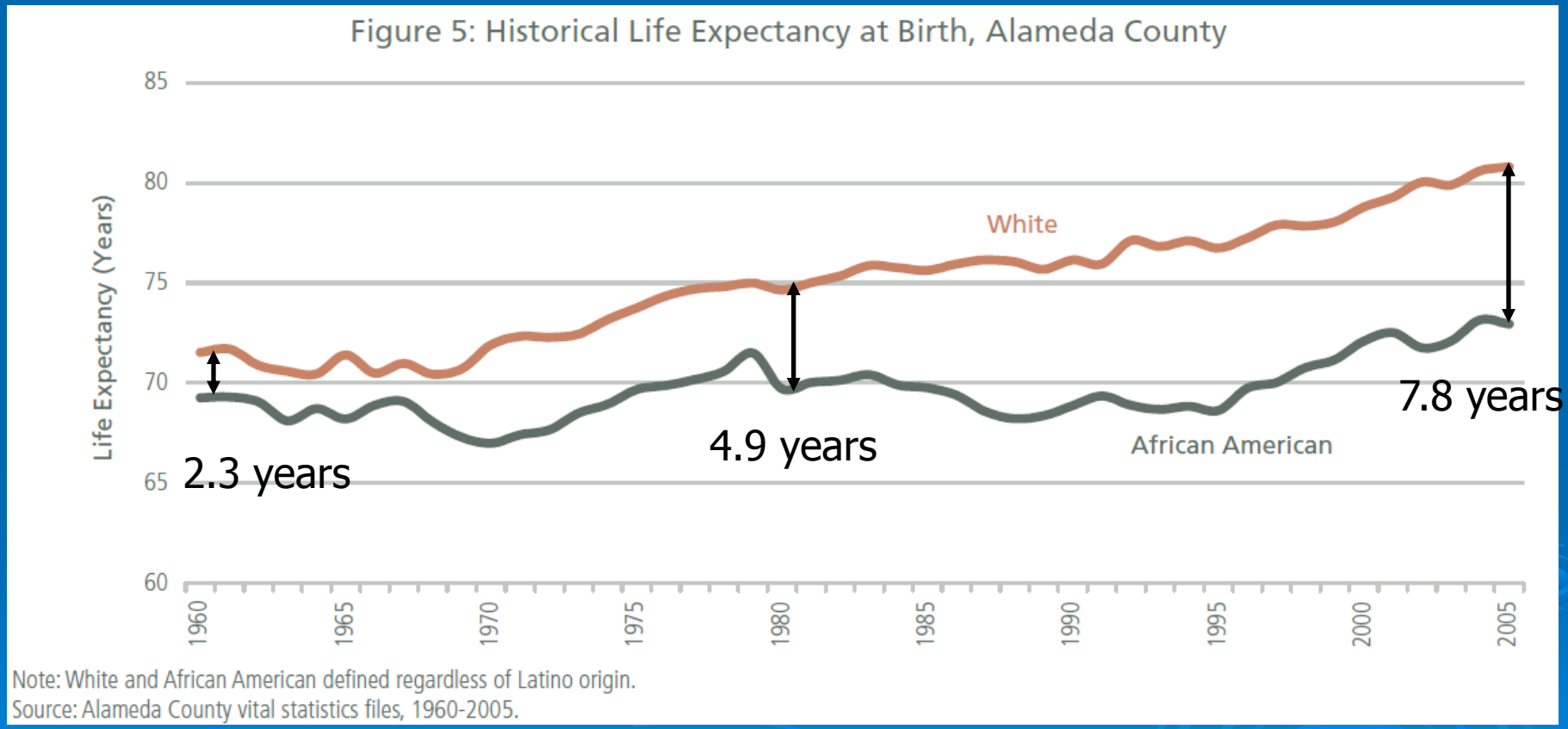
126. SIGNATURE OF CORONER / DEPUTY CORONER:
127. DATE mm/dd/ccyy:
128. TYPE NAME, TITLE OF CORONER / DEPUTY CORONER:

STATE REGISTRAR

A	B	C	D	E		FAX AUTH. #	CENSUS TRACT
					0120070000073 15		

EDC TRAINING

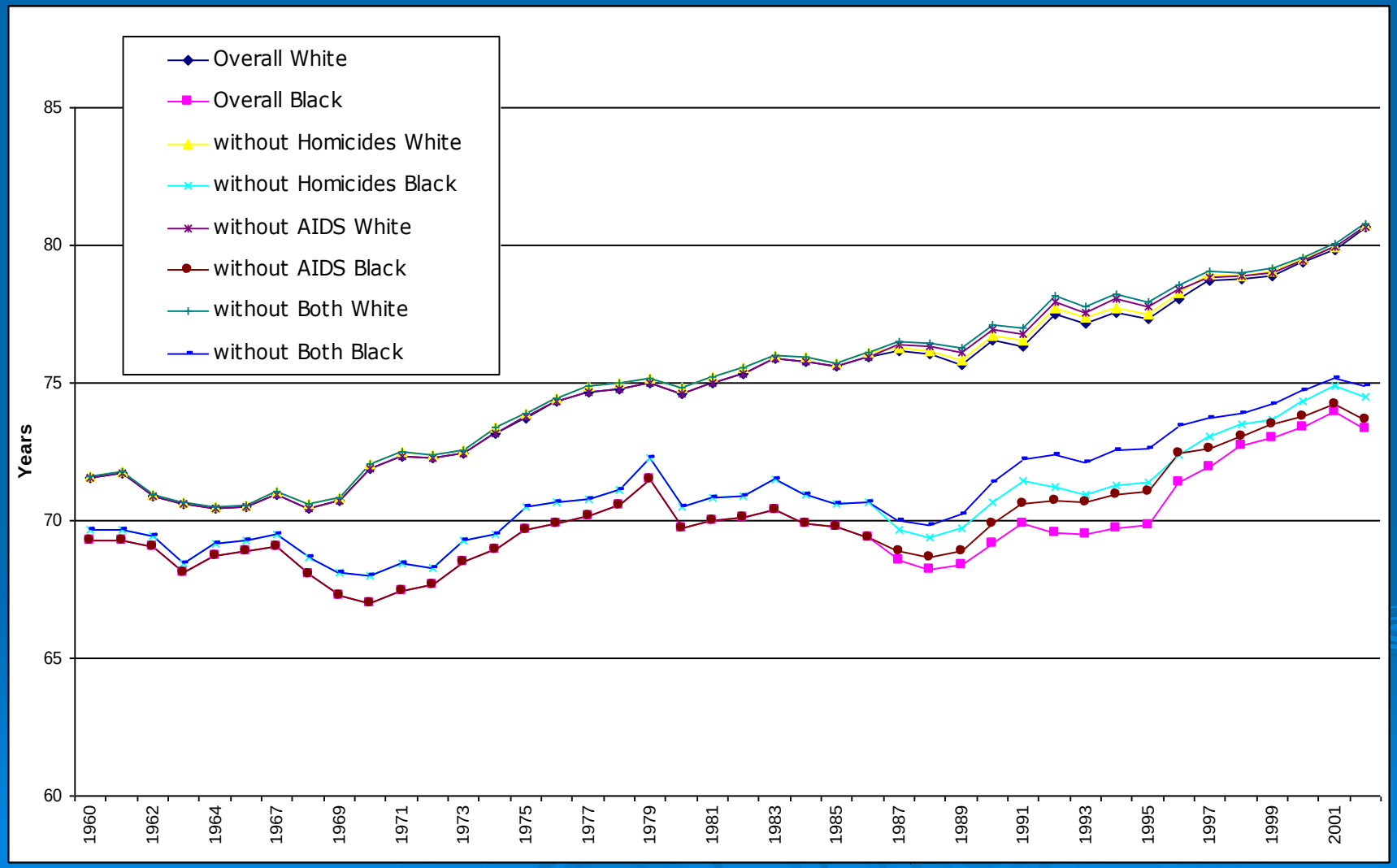
Race and Racism Matters:
Health Inequities by Race/Ethnicity



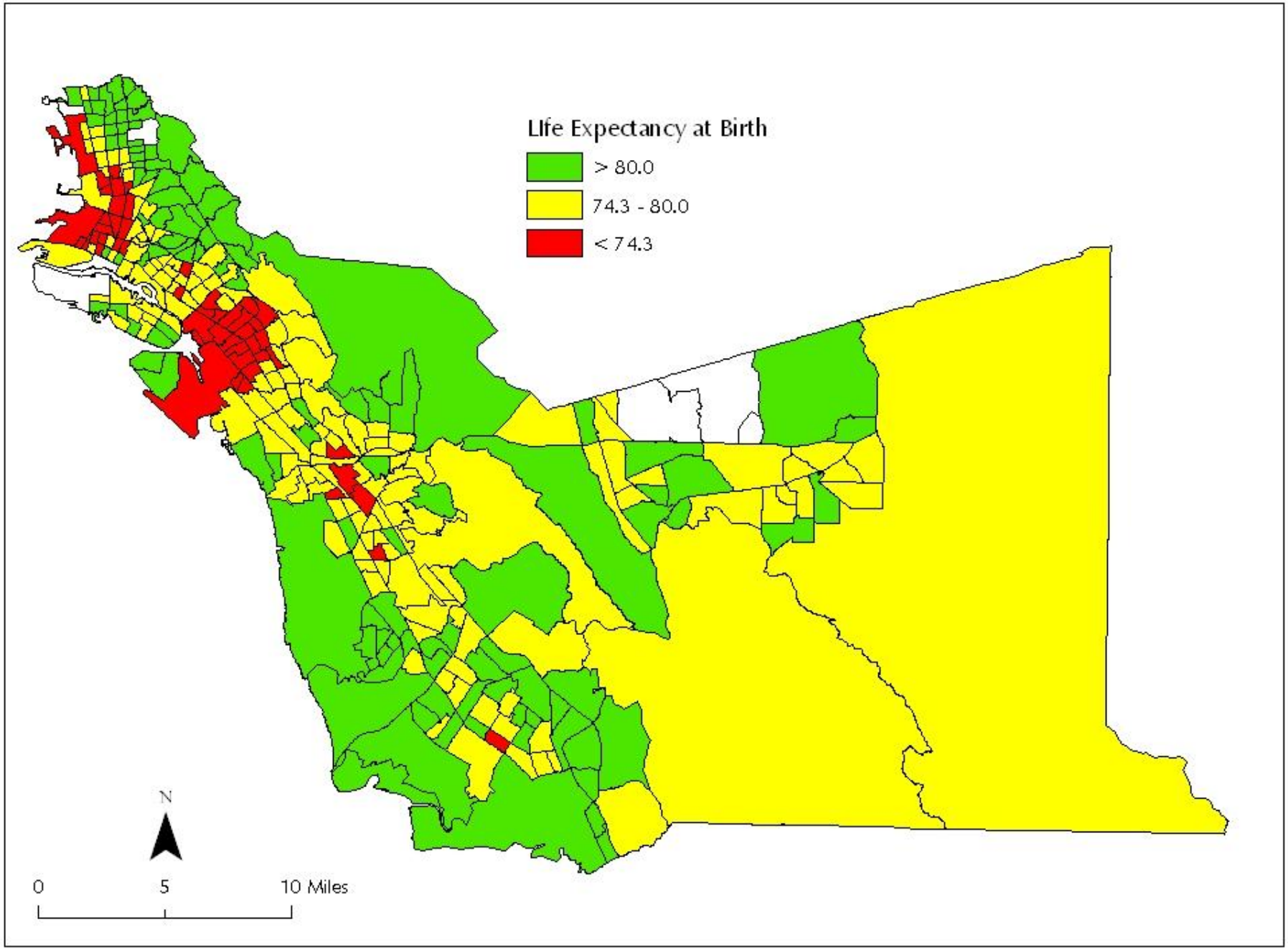
Note: White and African American defined regardless of Latino origin.
Source: Alameda County vital statistics files, 1960-2005.

Race and Racism Matters:

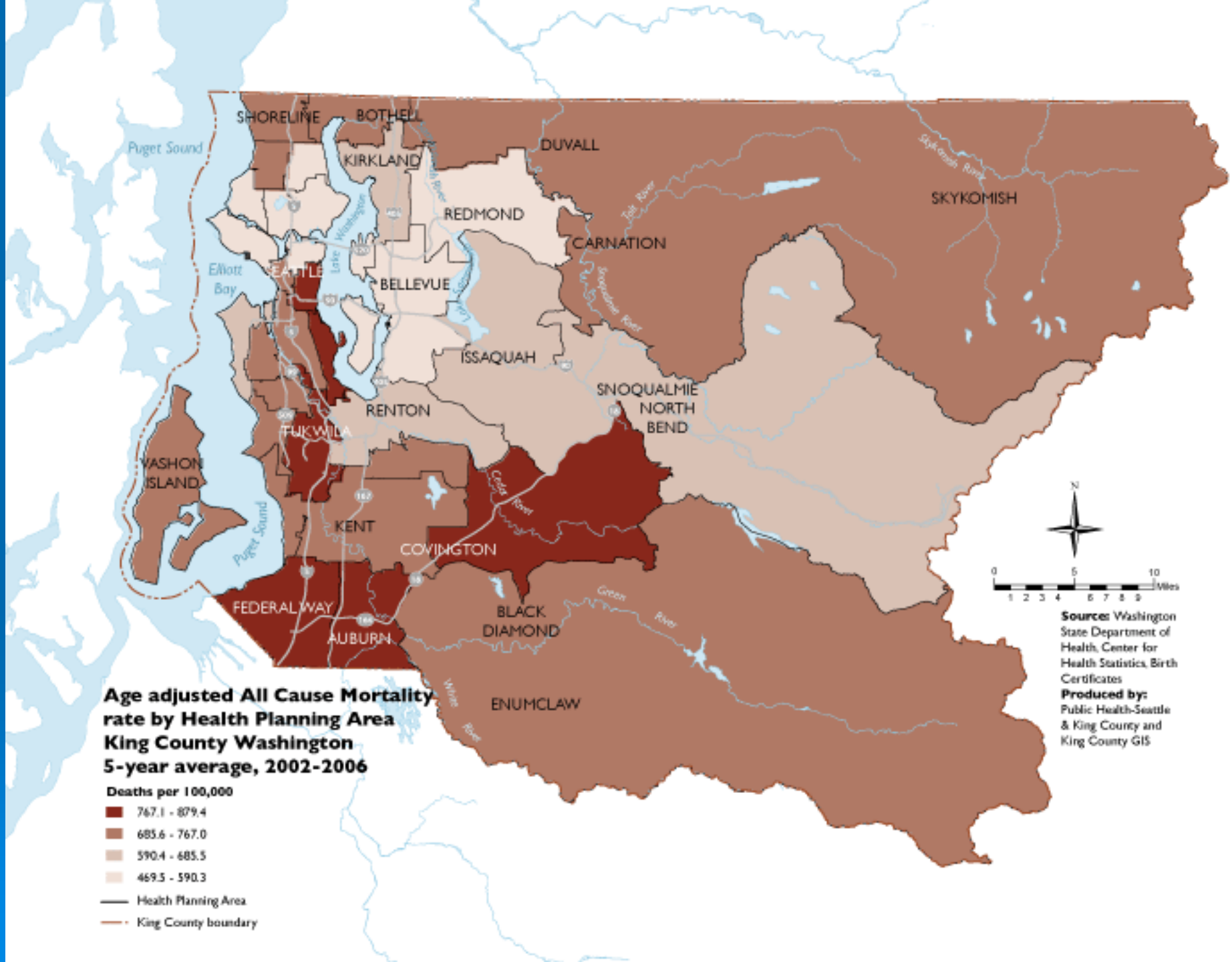
Health Inequities by Race/Ethnicity



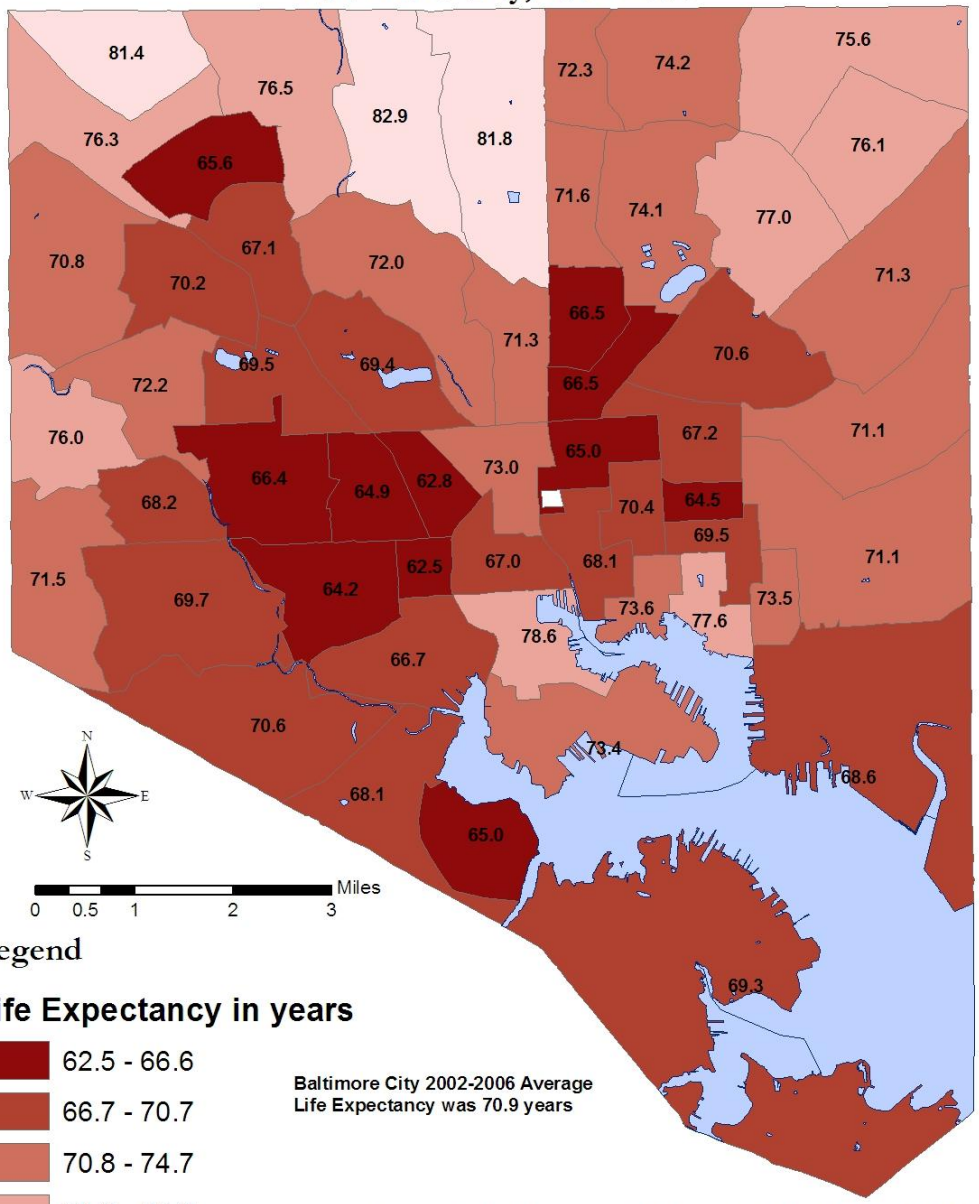
Life Expectancy by Tract



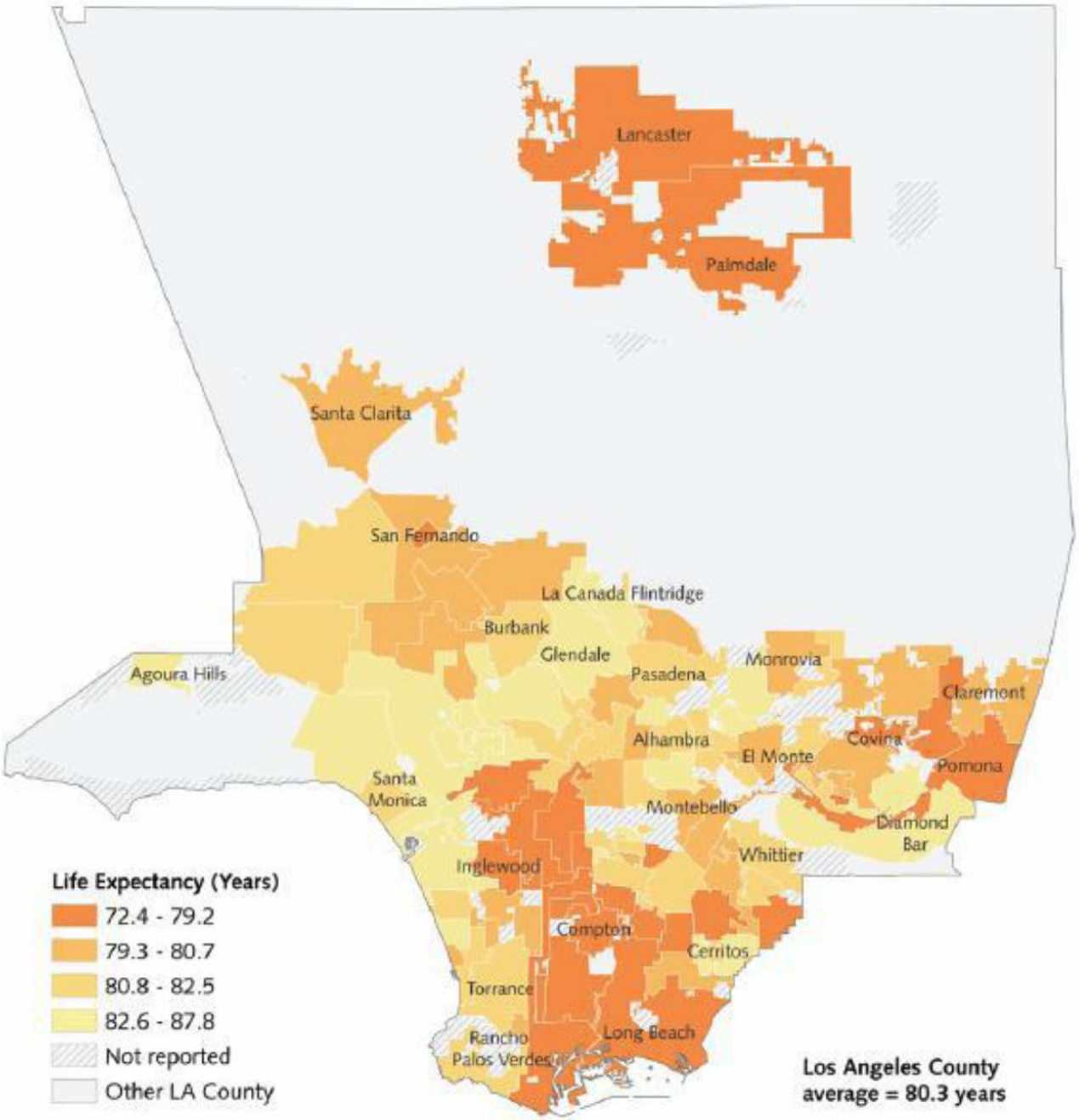
Source: CAPE, with data from vital statistics 1999-2001.

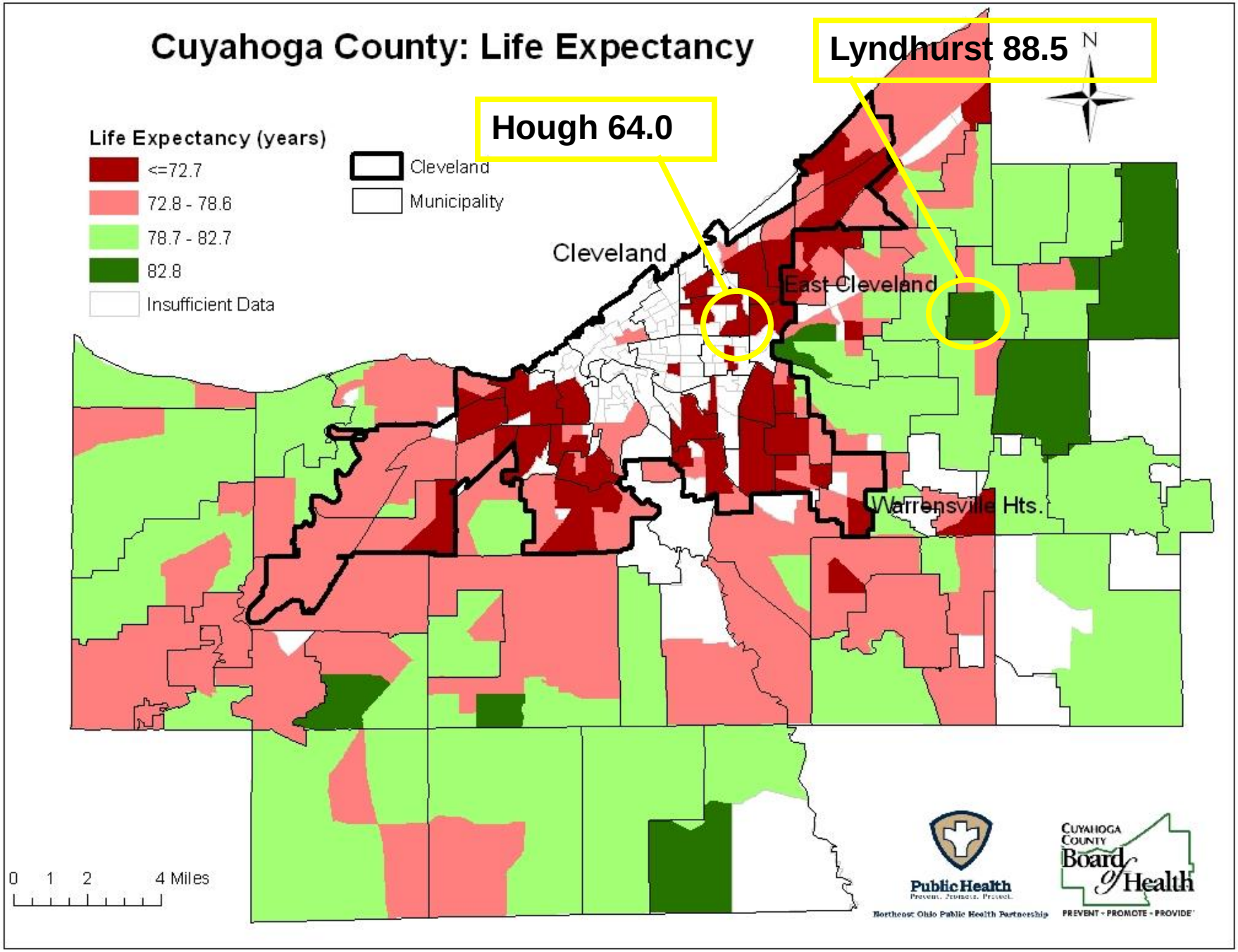

SHORELINE
BOTHELL
KIRKLAND
DUVALL
REDMOND
CARNATION
SKYKOMISH
SEATTLE
BELLEVUE
ISSAQUAH
SNOQUALMIE
NORTH BEND
RENTON
TUKWILA
VASHON ISLAND
KENT
COVINGTON
FEDERAL WAY
AUBURN
BLACK DIAMOND
ENUMCLAW
Puget Sound
Elliott Bay
Lake Washington
Tolt River
Snoqualmie River
Skykomish River
Cedar River
Green River
White River
N
0 5 10 Miles
1 2 3 4 6 7 8 9
Source: Washington State Department of Health, Center for Health Statistics, Birth Certificates
Produced by: Public Health-Seattle & King County and King County GIS
Age adjusted All Cause Mortality rate by Health Planning Area
King County Washington
5-year average, 2002-2006
Deaths per 100,000
767.1 - 879.4
685.6 - 767.0
590.4 - 685.5
469.5 - 590.3
Health Planning Area
King County boundary

Life Expectancy in Years by Community Statistical Area, Baltimore City, 2002-2006

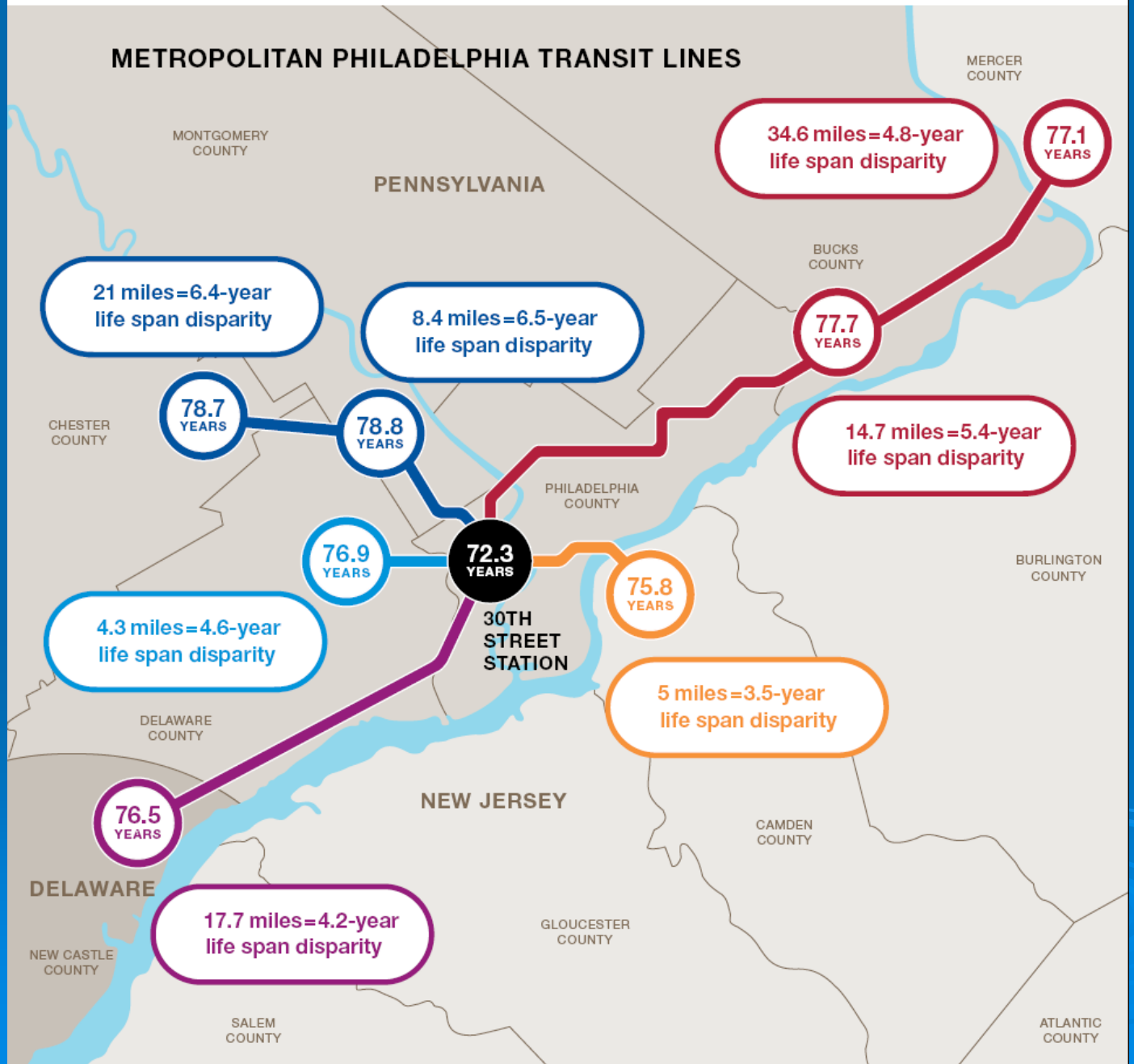


Baltimore City Health Department analysis using data from the Maryland Department of Health and Mental Hygiene's Vital Statistics Administration. Community Statistical Areas (CSAs) - Clusters of Baltimore neighborhoods that were created along census tract boundaries to form 55 CSA's.

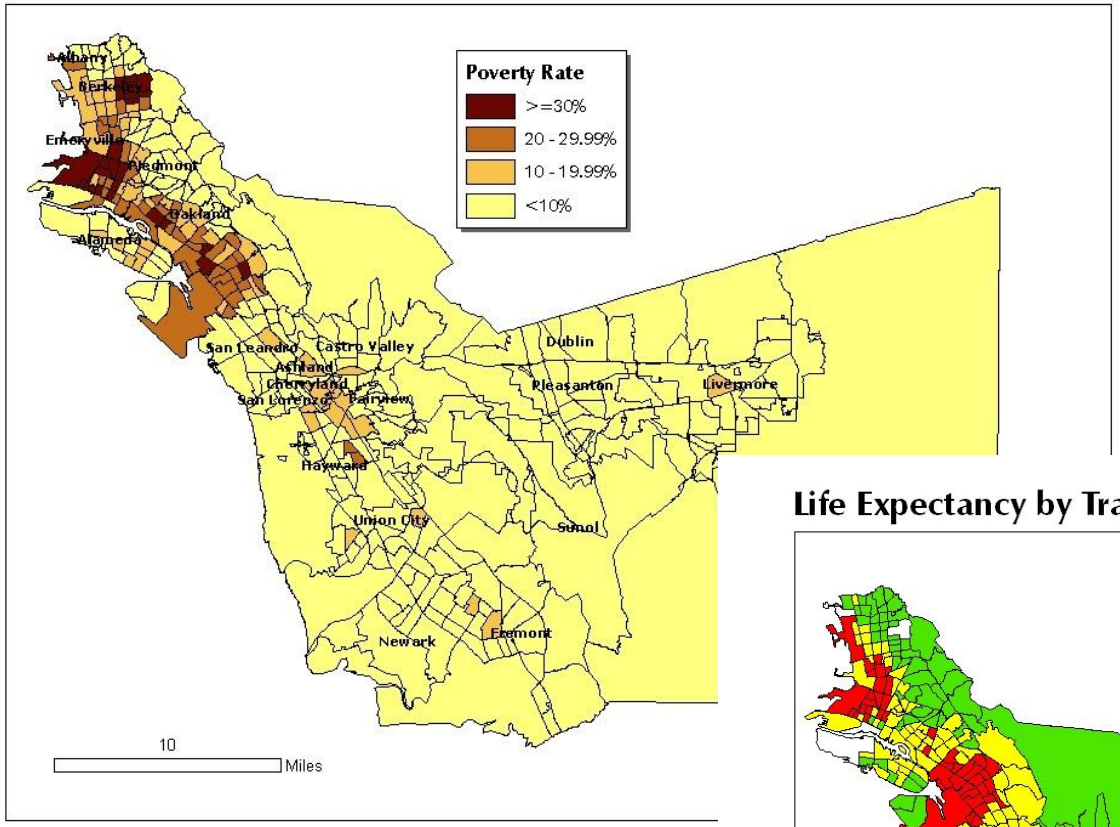

Lancaster
Palmdale
Santa Clarita
San Fernando
La Canada Flintridge
Burbank
Glendale
Pasadena
Monrovia
Agoura Hills
Claremont
Alhambra
Covina
El Monte
Pomona
Santa Monica
Montebello
Diamond Bar
Whittier
Inglewood
Compton
Cerritos
Torrance
Rancho Palos Verdes
Long Beach
Life Expectancy (Years)
72.4 - 79.2
79.3 - 80.7
80.8 - 82.5
82.6 - 87.8
Not reported
Other LA County
Los Angeles County average = 80.3 years


Cuyahoga County: Life Expectancy
Lyndhurst 88.5
Hough 64.0
N
Life Expectancy (years)
<=72.7
72.8 - 78.6
78.7 - 82.7
82.8
Insufficient Data
Cleveland
Municipality
Cleveland
East Cleveland
Warrensville Hts.
0 1 2 4 Miles
Public Health
Northeast Ohio Public Health Partnership
Cuyahoga County Board of Health
PREVENT • PROMOTE • PROVIDE

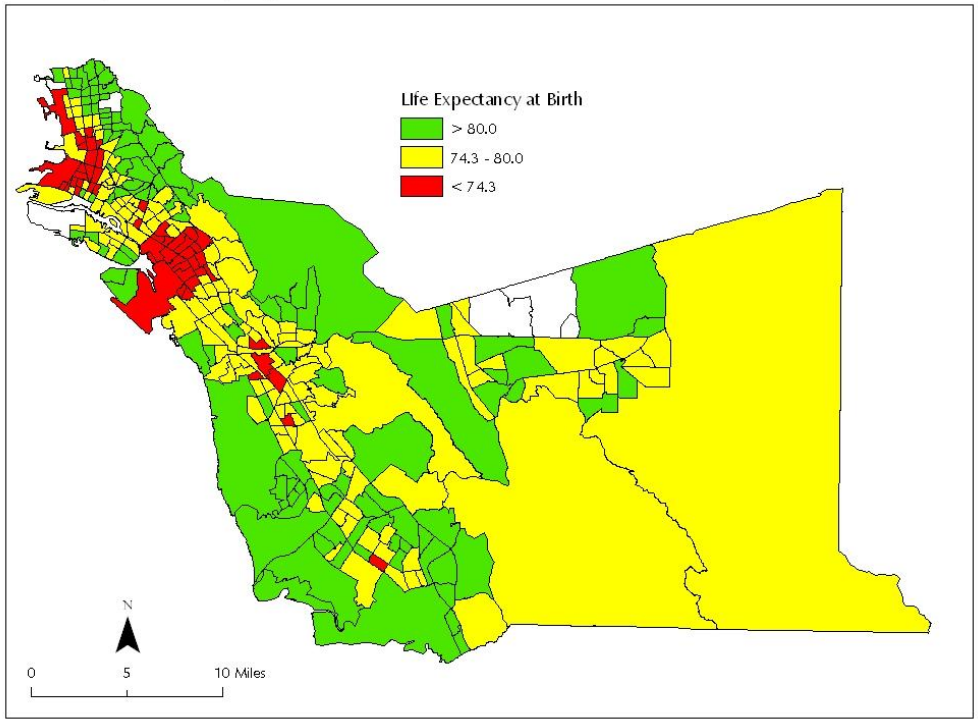
ROBERT WOOD JOHNSON FOUNDATION
Commission to Build a Healthier America



Alameda County Poverty

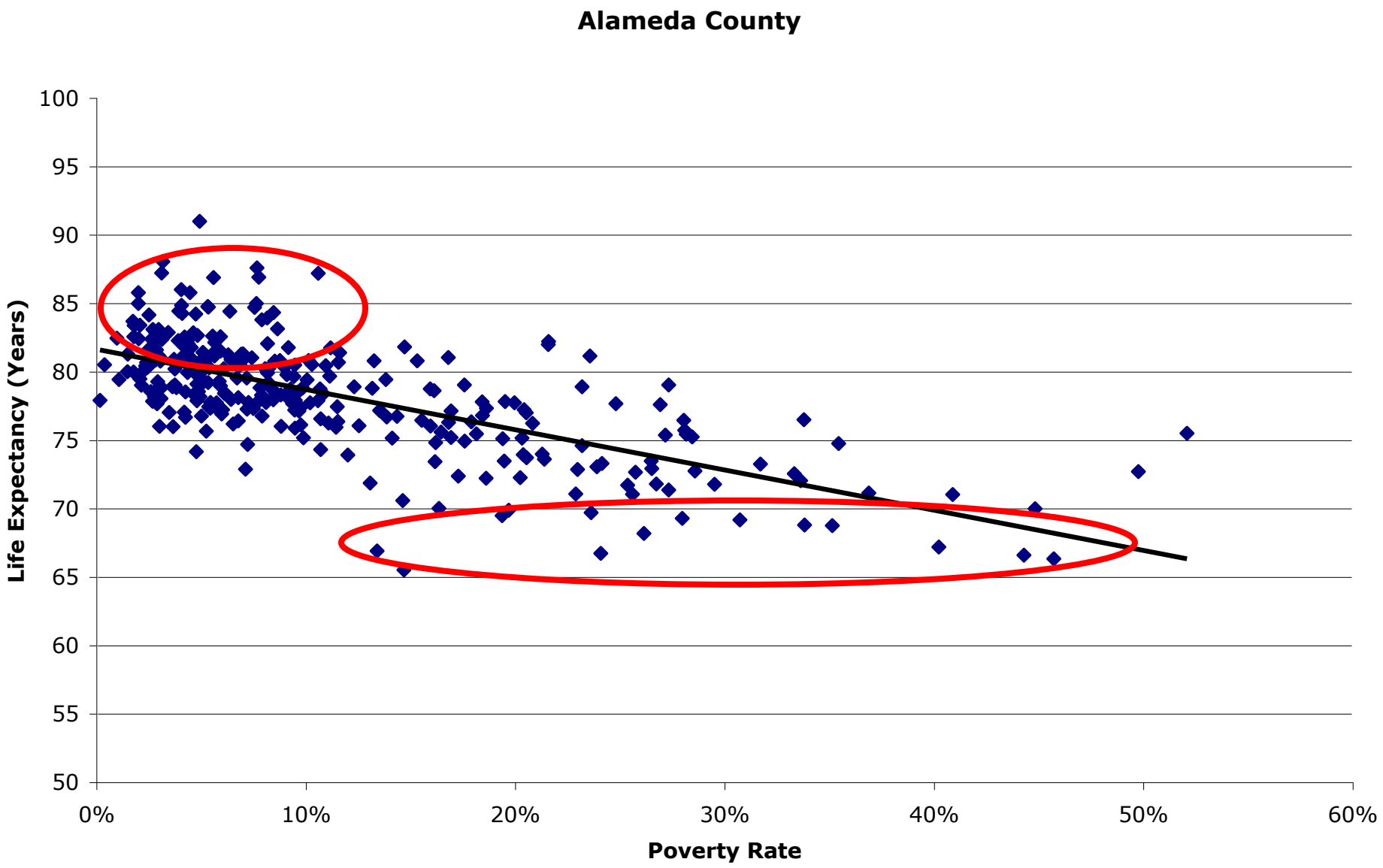


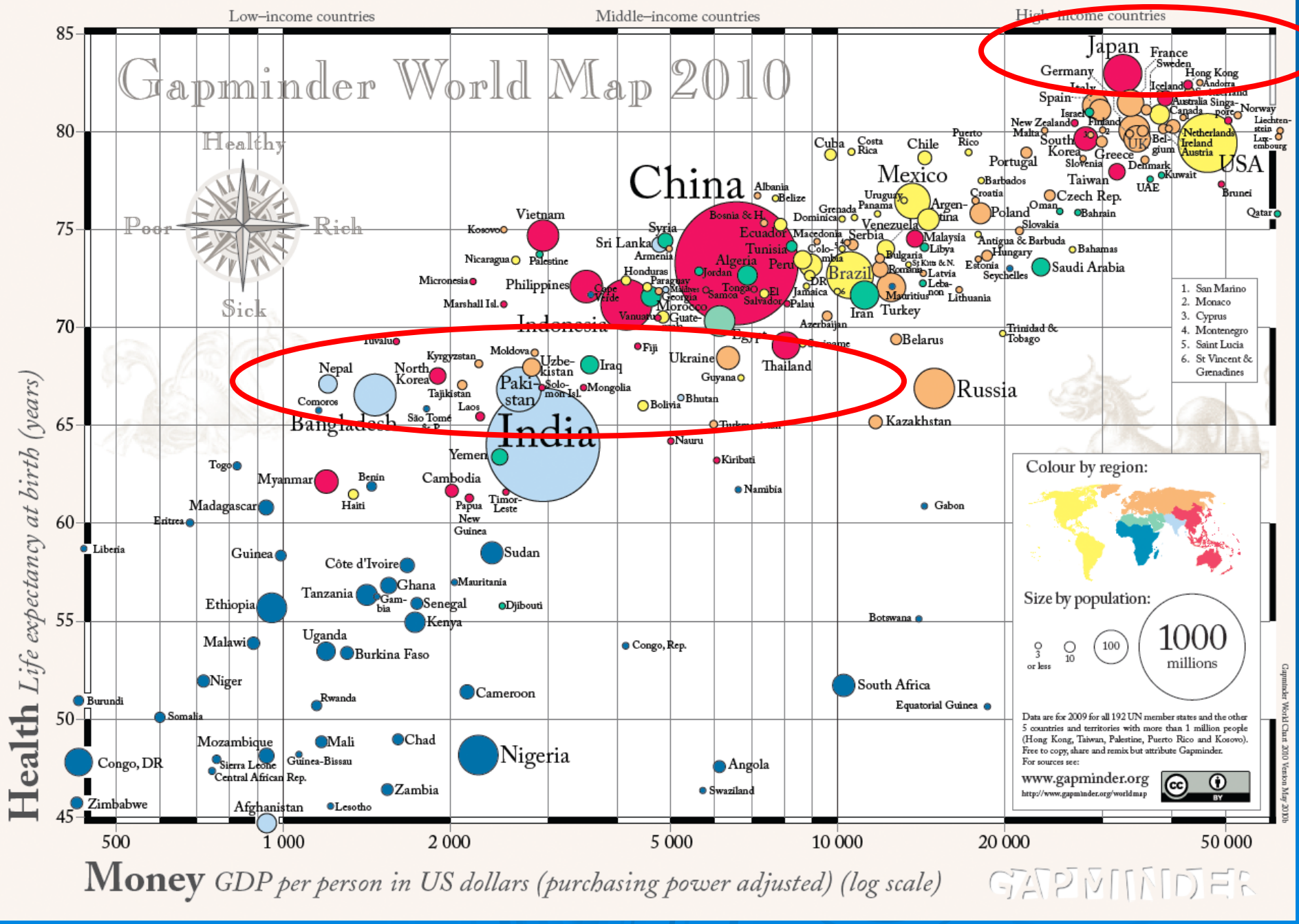
Life Expectancy by Tract



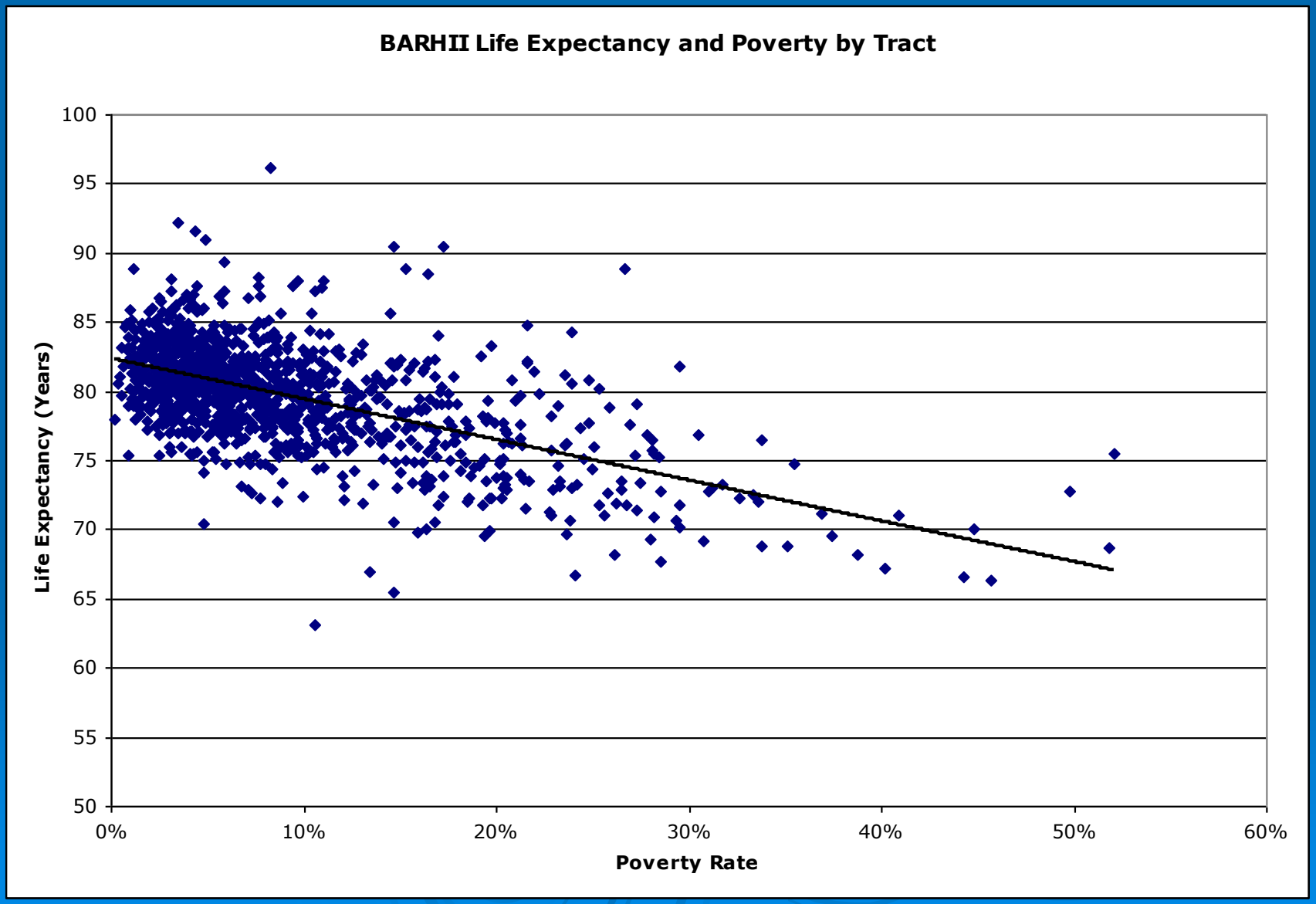
Source: CAPE, with data from vital statistics 1999-2001.

Life Expectancy by Poverty Group 2000-2003

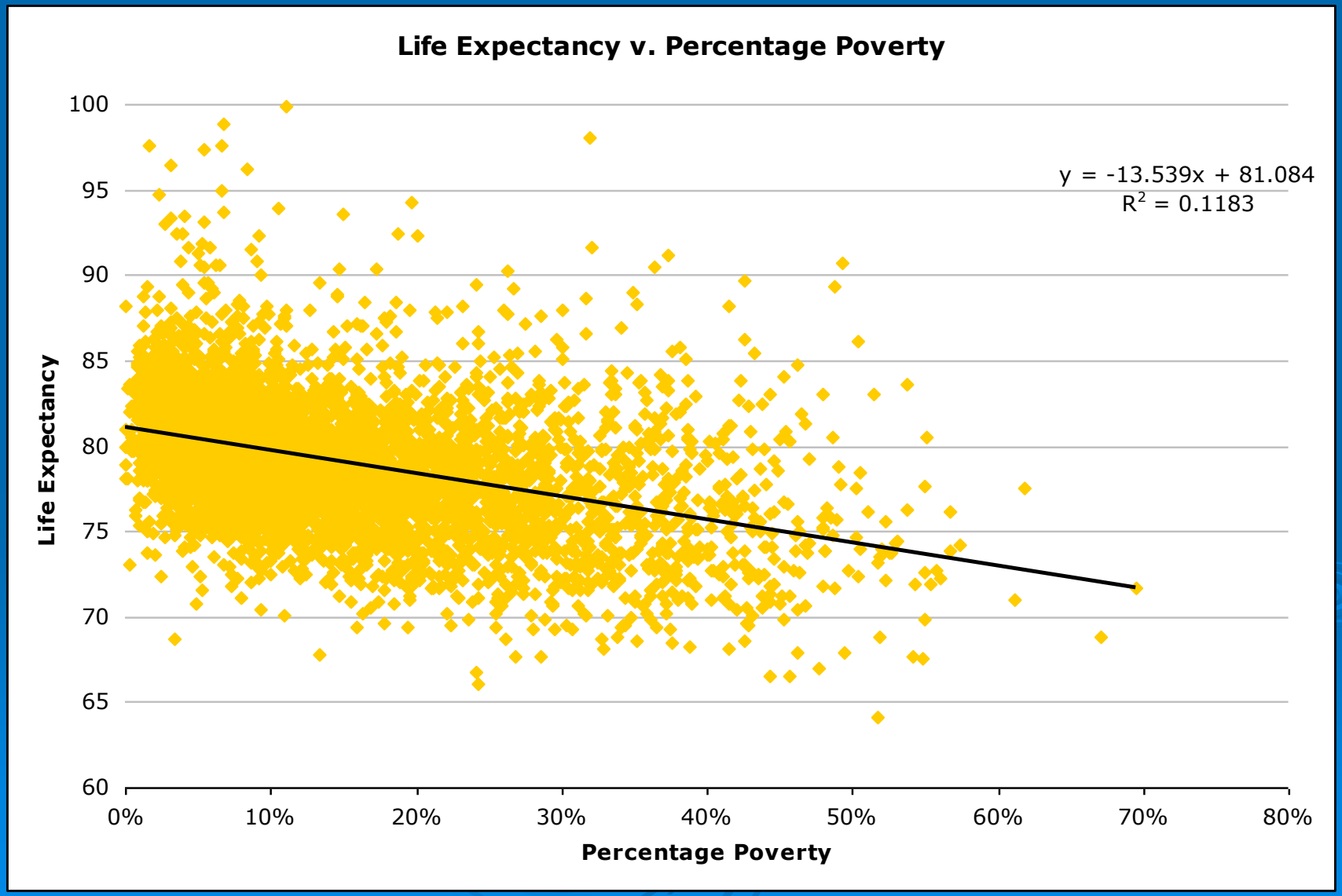



Gapminder World Map 2010
Low–income countries
Middle–income countries
High–income countries
Healthy
Poor
Rich
Sick
Health Life expectancy at birth (years)
Money GDP per person in US dollars (purchasing power adjusted) (log scale)
85
80
75
70
65
60
55
50
45
500
1 000
2 000
5 000
10 000
20 000
50 000
China
India
Japan
USA
Russia
Brazil
Mexico
Indonesia
Nigeria
Bangladesh
Pakistan
Iran
Turkey
Thailand
Philippines
Vietnam
Ethiopia
Congo, DR
Colour by region:
Size by population:
3 or less
10
100
1000 millions
Data are for 2009 for all 192 UN member states and the other 5 countries and territories with more than 1 million people (Hong Kong, Taiwan, Palestine, Puerto Rico and Kosovo).
Free to copy, share and remix but attribute Gapminder.
For sources see:
www.gapminder.org
http://www.gapminder.org/worldmap
1. San Marino
2. Monaco
3. Cyprus
4. Montenegro
5. Saint Lucia
6. St Vincent & Grenadines
Gapminder World Chart 2010 Version May 2010b
GAPMINDER

Bay Area Poverty vs. Life Expectancy



California Poverty vs. Life Expectancy



Cost of Poverty in San Francisco Bay Area

- ***Every additional $12,500 in household income buys one year of life expectancy***

- ***(Benefit appears to plateau at household incomes above $150,000)***
- ***Similar gradients in Baltimore, NYC, Philadelphia, Hennepin County (Minneapolis-St. Paul), Colorado, California, <u>AND</u> Cuyahoga County ($6304/year of life)***

Published by Oxford University Press on behalf of the International Epidemiological Association
International Journal of Epidemiology 2007;36:542–548
© The Author 2007; all rights reserved. Advance Access publication 21 March 2007
doi:10.1093/ije/dym008

The shape of health to come: prospective study of the determinants of 30-year health trajectories in the Alameda County Study

George A Kaplan,[1]* Peter T Baltrus[2] and Trivellore E Raghunathan[3]

A 30 year longitudinal study of nearly 7000 Alameda County residents from 1965 forward. Those residents with household income 1 SD above mean were 25% less likely to die prematurely, 1 SD below mean were 35% more likely to die early.

The NEW ENGLAND JOURNAL of MEDICINE

SPECIAL REPORT

Volume 352:1138-1145 March 17, 2005 Number 11

A Potential Decline in Life Expectancy in the United States in the 21st Century

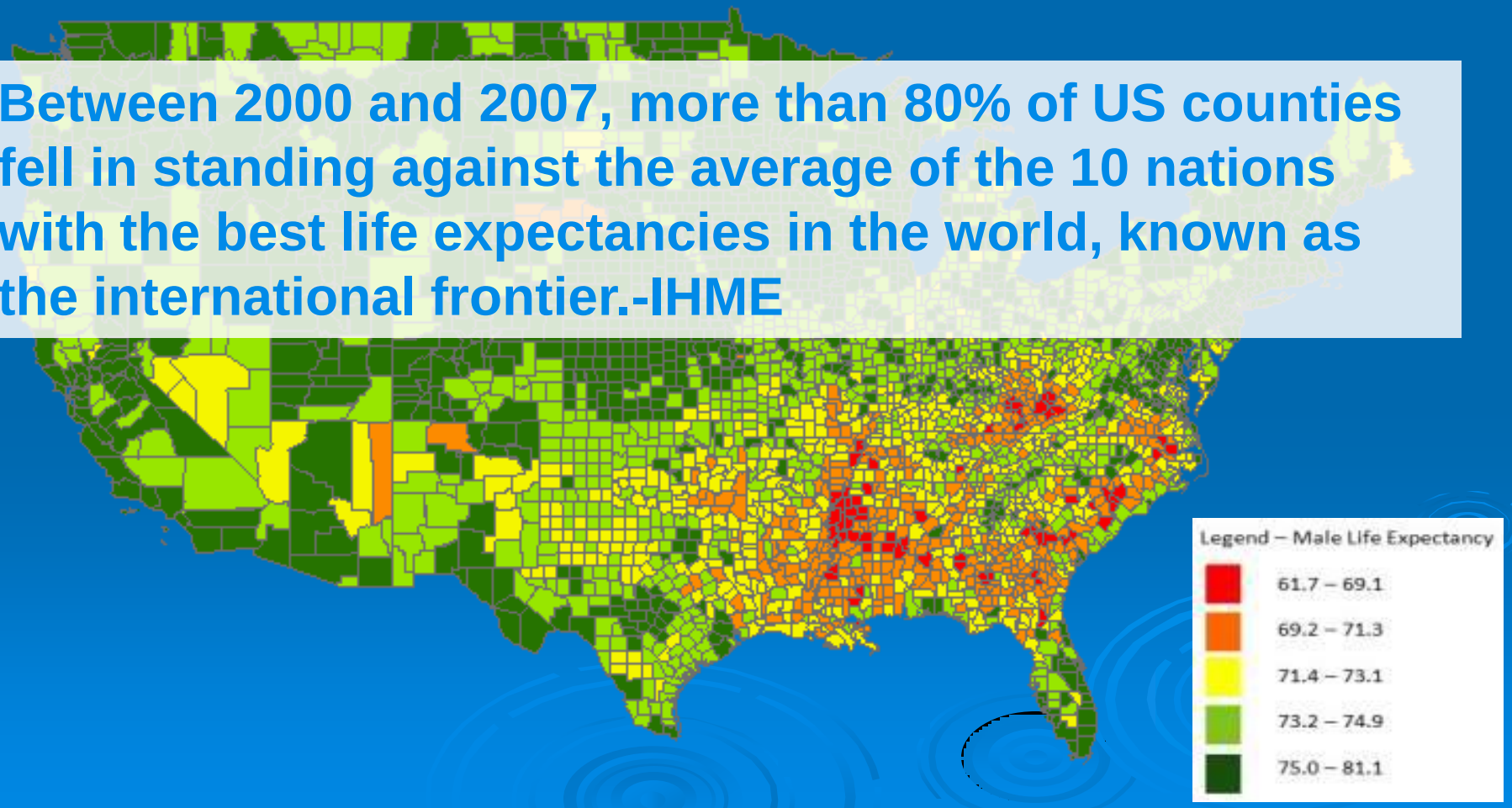
S. Jay Olshansky, Ph.D., Douglas J. Passaro, M.D., Ronald C. Hershow, M.D., Jennifer Layden, M.P.H., Bruce A. Carnes, Ph.D., Jacob Brody, M.D., Leonard Hayflick, Ph.D., Robert N. Butler, M.D., David B. Allison, Ph.D., and David S. Ludwig, M.D., Ph.D.

ABSTRACT

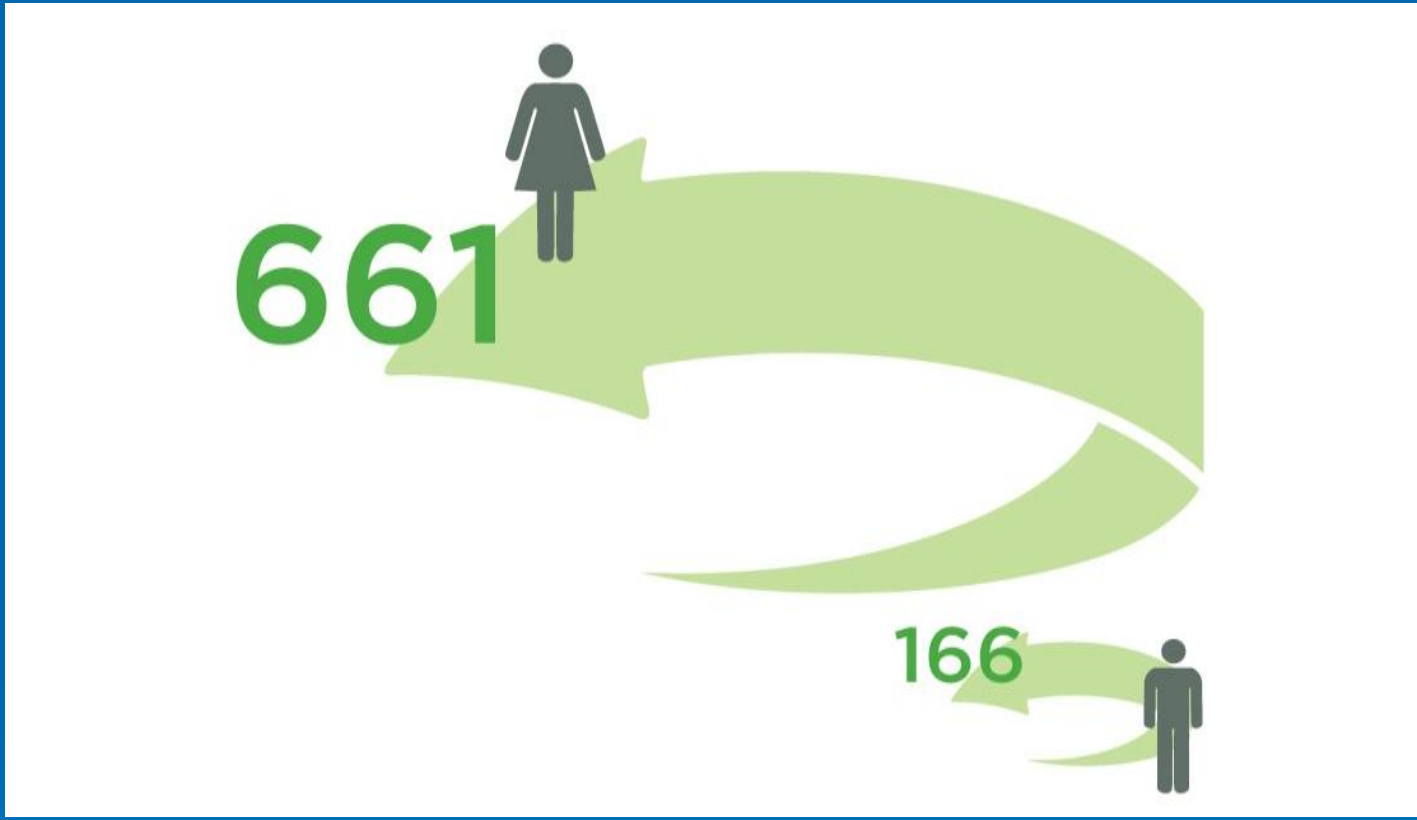
Forecasts of life expectancy are an important component of public policy that influence age-based entitlement programs such as Social Security and Medicare. *Although the Social Security Administration recently raised its estimates of how long Americans are going to live in the 21st century, current trends in obesity in the United States suggest that these estimates may not be accurate. From our analysis of the effect of obesity on longevity, we conclude that the steady rise in life expectancy during the past two centuries may soon come to an end.*

US Male Life Expectancy 1987-2007

Between 2000 and 2007, more than 80% of US counties fell in standing against the average of the 10 nations with the best life expectancies in the world, known as the international frontier.-IHME



Women losing ground



Life expectancy for women in 661 counties either stopped dead or went backward from 1999 to 2009. For men, that happened in 166 counties.

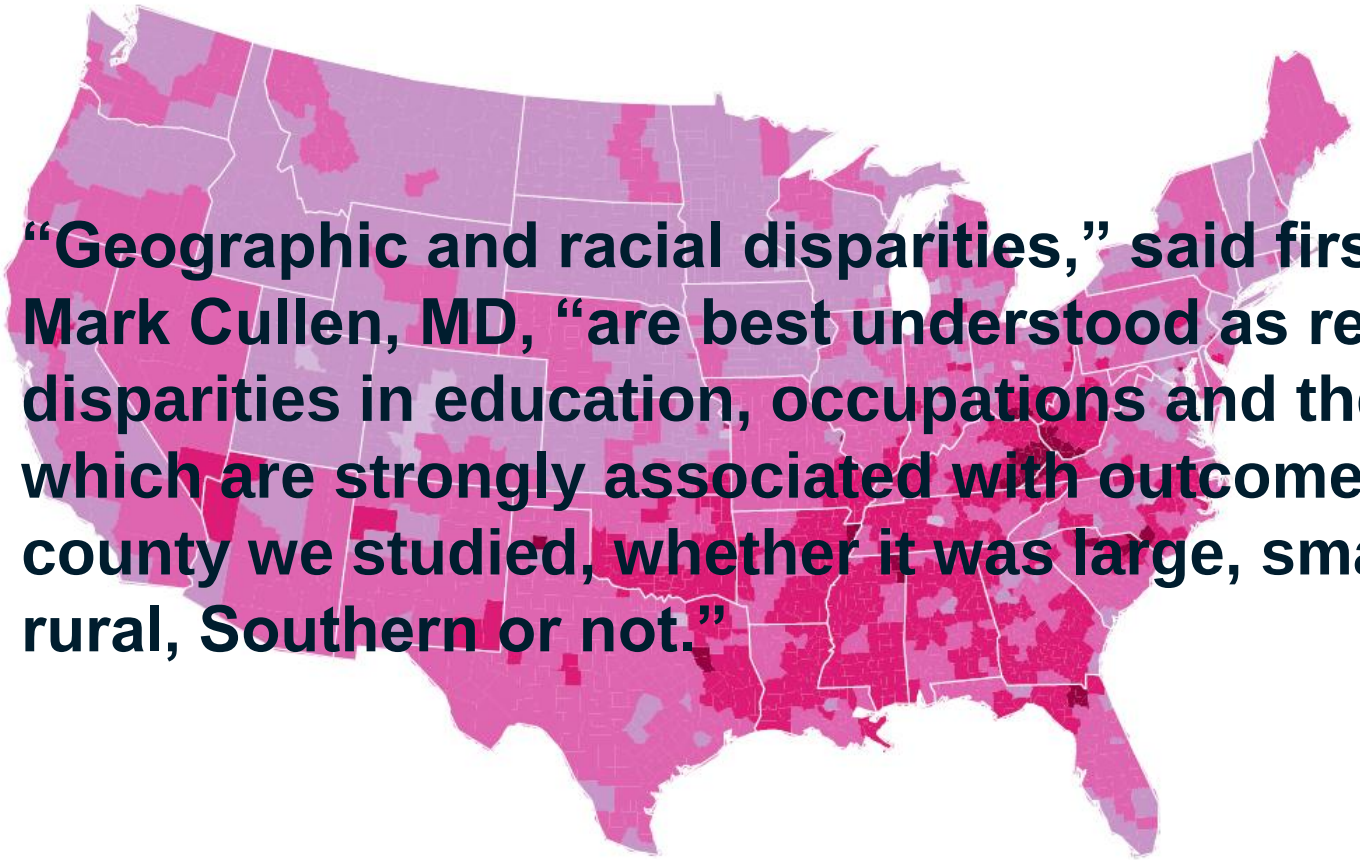
OPEN ACCESS Freely available online

PLoS one

Geographic and Racial Variation in Premature Mortality in the U.S.: Analyzing the Disparities

Mark R. Cullen[1]*, Clint Cummins[2], Victor R. Fuchs[1,2]

1 General Medical Disciplines, Stanford University School of Medicine, Stanford, California, United States of America, **2** Departments of Economics and Health Research and Policy, Stanford University, Stanford, California, United States of America



"Geographic and racial disparities," said first author Mark Cullen, MD, "are best understood as related to disparities in education, occupations and the like, which are strongly associated with outcomes in every county we studied, whether it was large, small, urban, rural, Southern or not."

Smoking

Medical Model

Nutrition

Physical activity

Individual health knowledge

70% ??

Risk Behaviors → Disease and Injury → Mortality

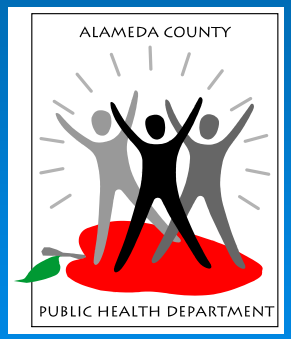
Violence

Is This All About Personal Responsibility?

- The Medical Model Assumes that “Risk Behaviors” are the Missing 70%

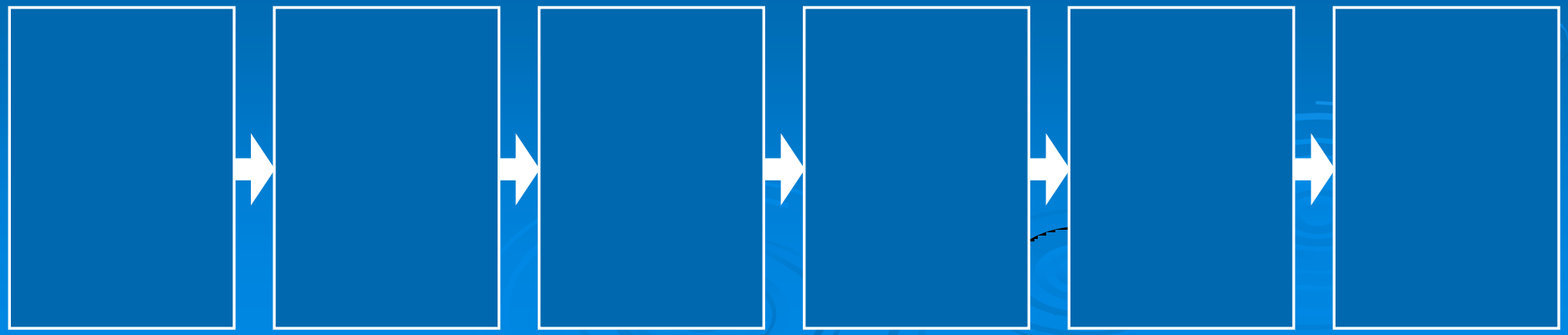
"Services Overkill?"

How Government Human Service Agencies Behave



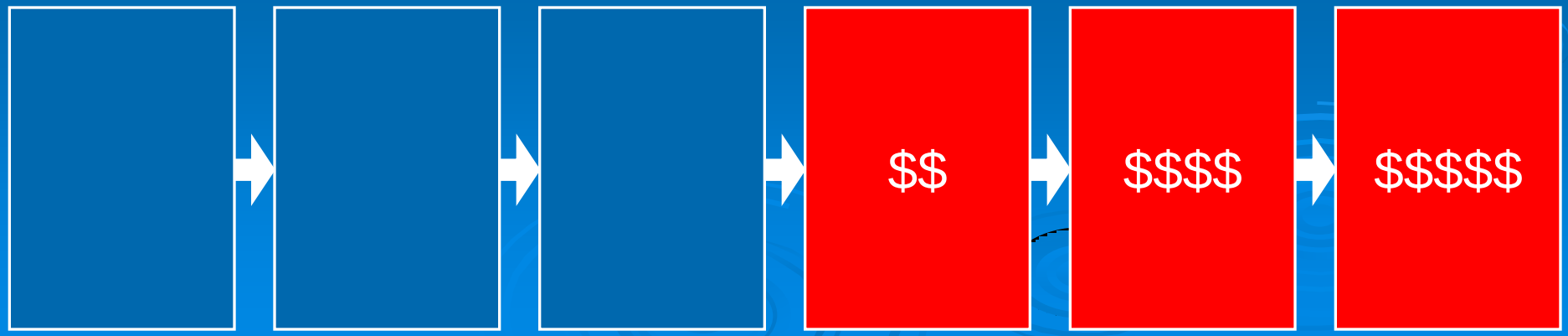
“Services Overkill?”

How Government Human Service Agencies Behave



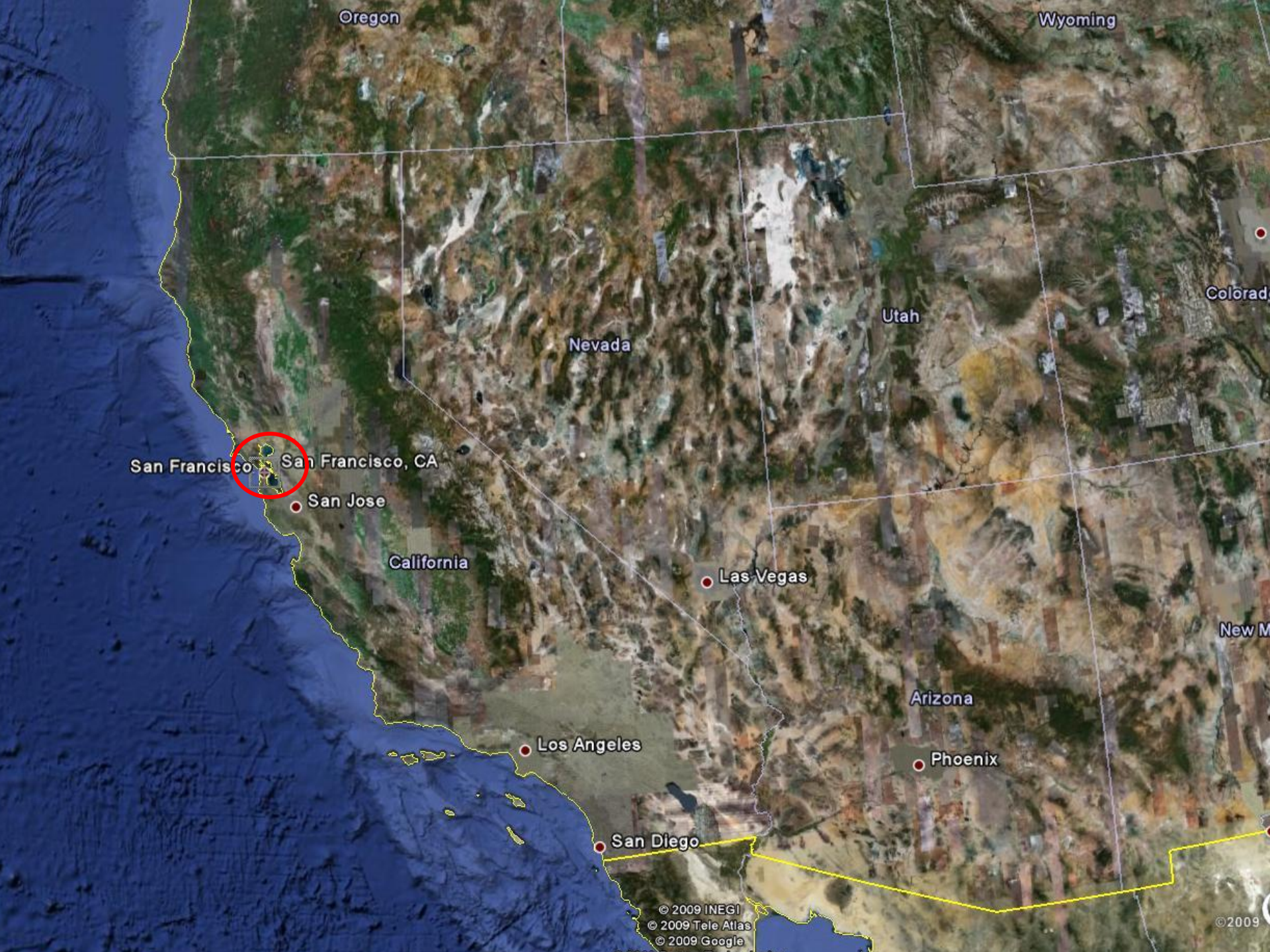
"Services Overkill?"

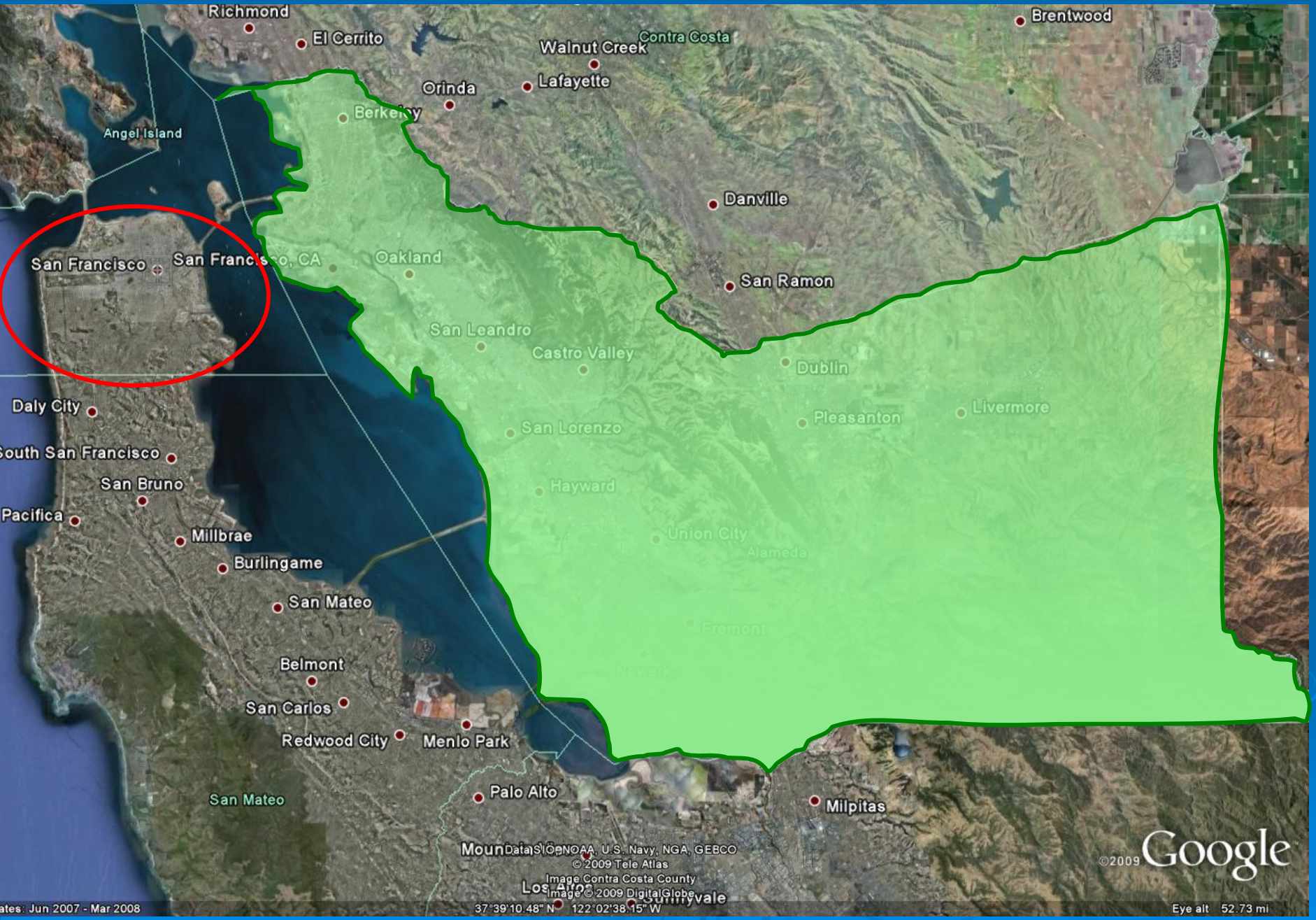
How Government Human Service Agencies Behave



Current Operating Logic: "Services"

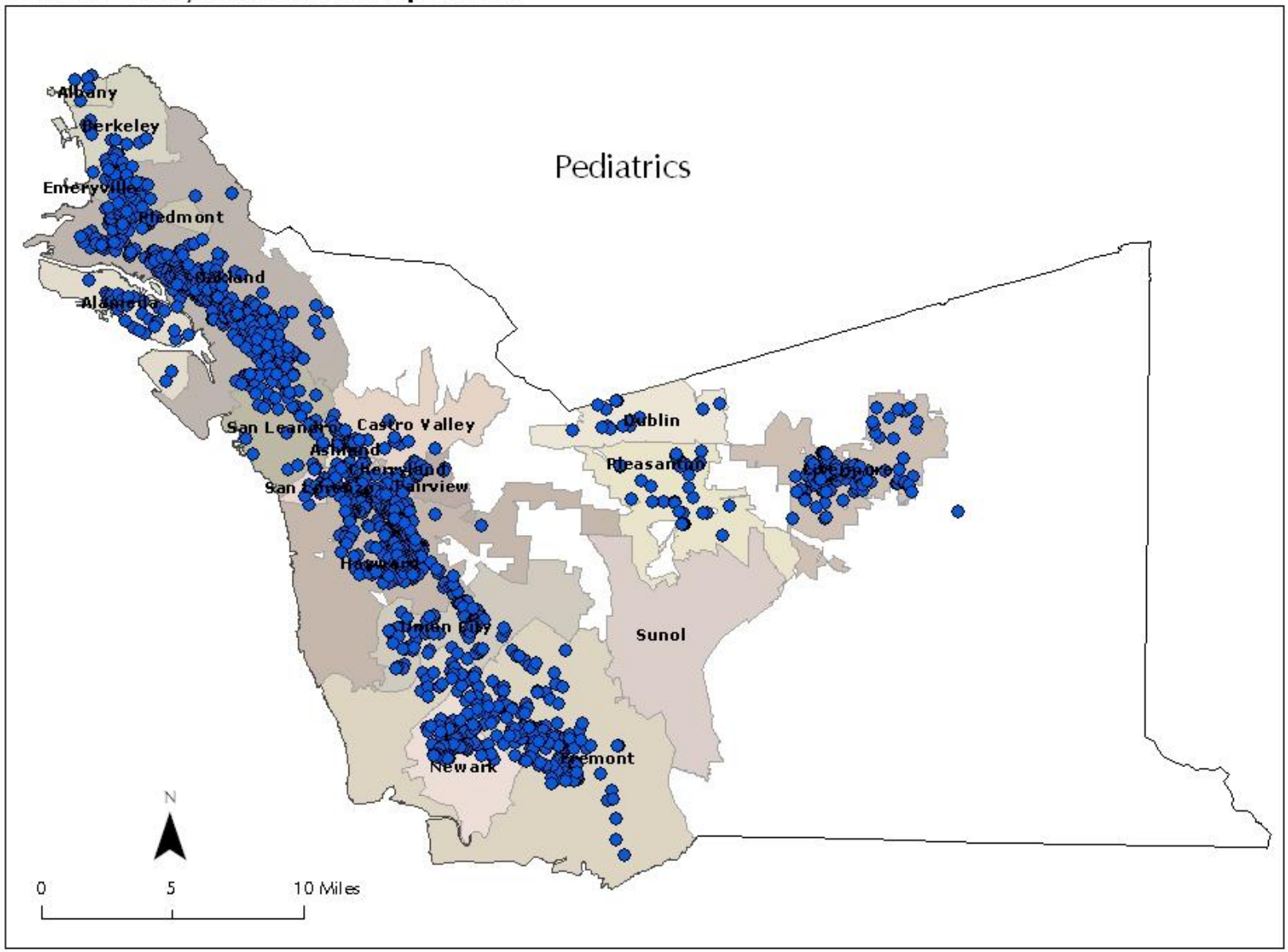
- Tend to focus on individuals
- Tend to be remedial in nature
- Do not address underlying conditions
- Expensive and difficult to sustain
- No sustained impact on health disparities
- Majority of Health, Social Services & Criminal Justice budget spent on these kind of interventions


Oregon
Wyoming
Utah
Nevada
San Francisco
San Francisco, CA
San Jose
California
Las Vegas
Arizona
Los Angeles
Phoenix
San Diego
© 2009 INEGI
© 2009 Tele Atlas
© 2009 Google


Richmond
El Cerrito
Walnut Creek
Contra Costa
Brentwood
Orinda
Lafayette
Berkeley
Angel Island
Danville
San Francisco
San Francisco, CA
Oakland
San Ramon
San Leandro
Castro Valley
Dublin
Daly City
Pleasanton
Livermore
San Lorenzo
South San Francisco
San Bruno
Hayward
Pacifica
Union City
Millbrae
Alameda
Burlingame
San Mateo
Fremont
Belmont
Newark
San Carlos
Redwood City
Menlo Park
Palo Alto
San Mateo
Milpitas
Data SIO, NOAA, U.S. Navy, NGA, GEBCO
© 2009 Tele Atlas
Image Contra Costa County
Image © 2009 DigitalGlobe
©2009 Google
ates: Jun 2007 - Mar 2008
37°39'10.48" N 122°02'38.15" W
Eye alt 52.73 mi

Service Intensity FY05-06

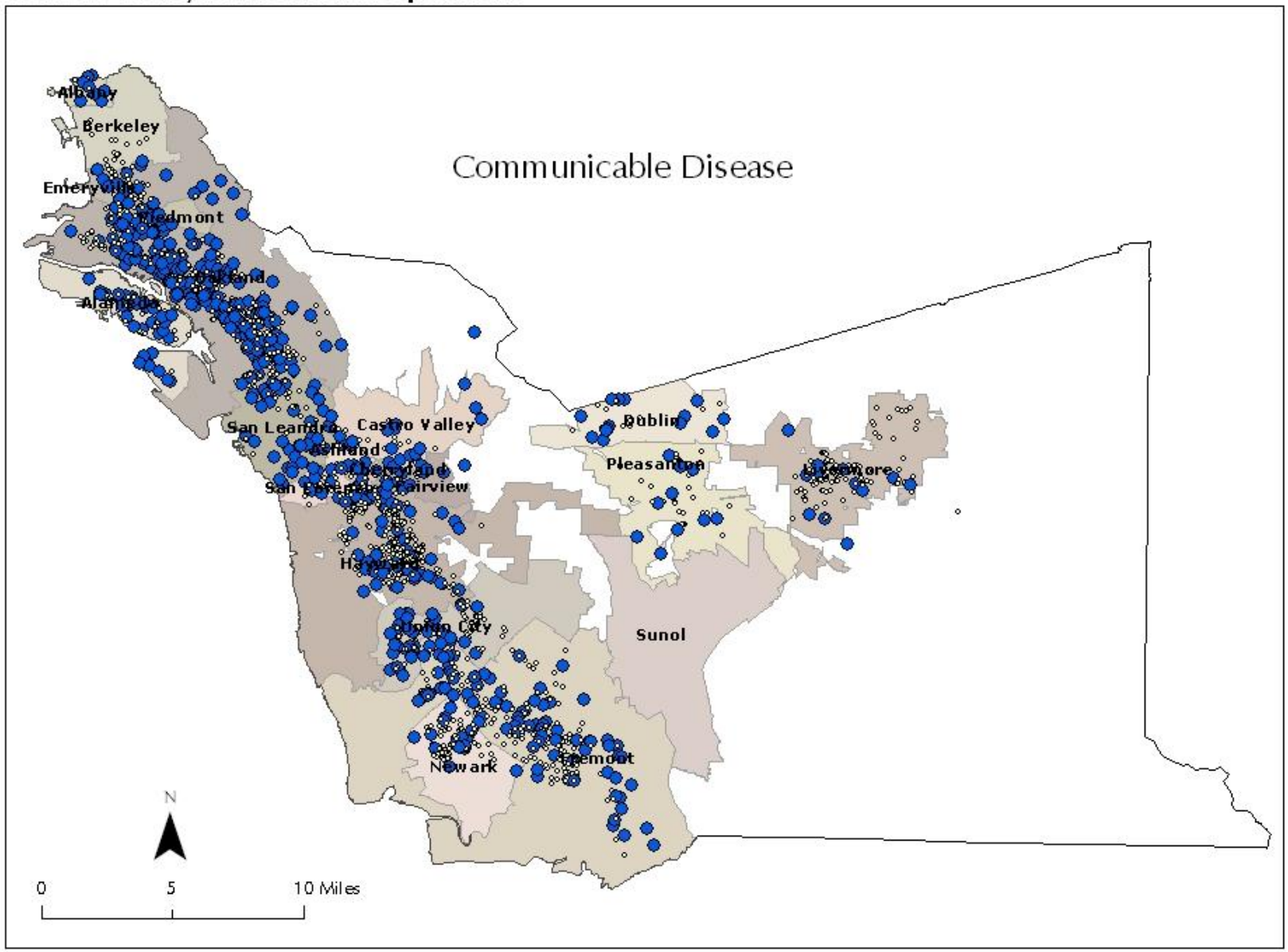
Alameda County Public Health Department



Source: CAPE.

Service Intensity FY05-06

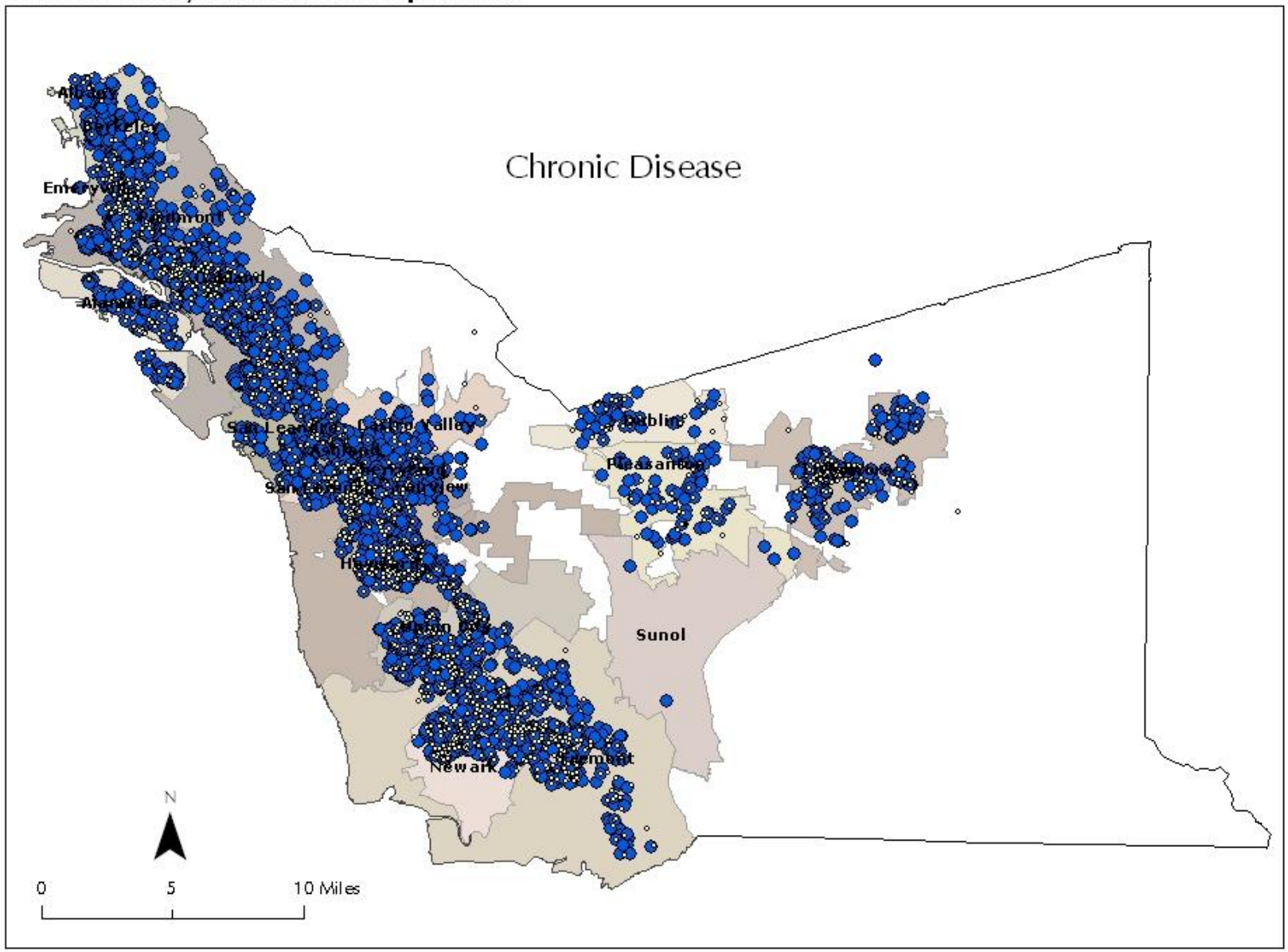
Alameda County Public Health Department



Source: CAPE.

Service Intensity FY05-06

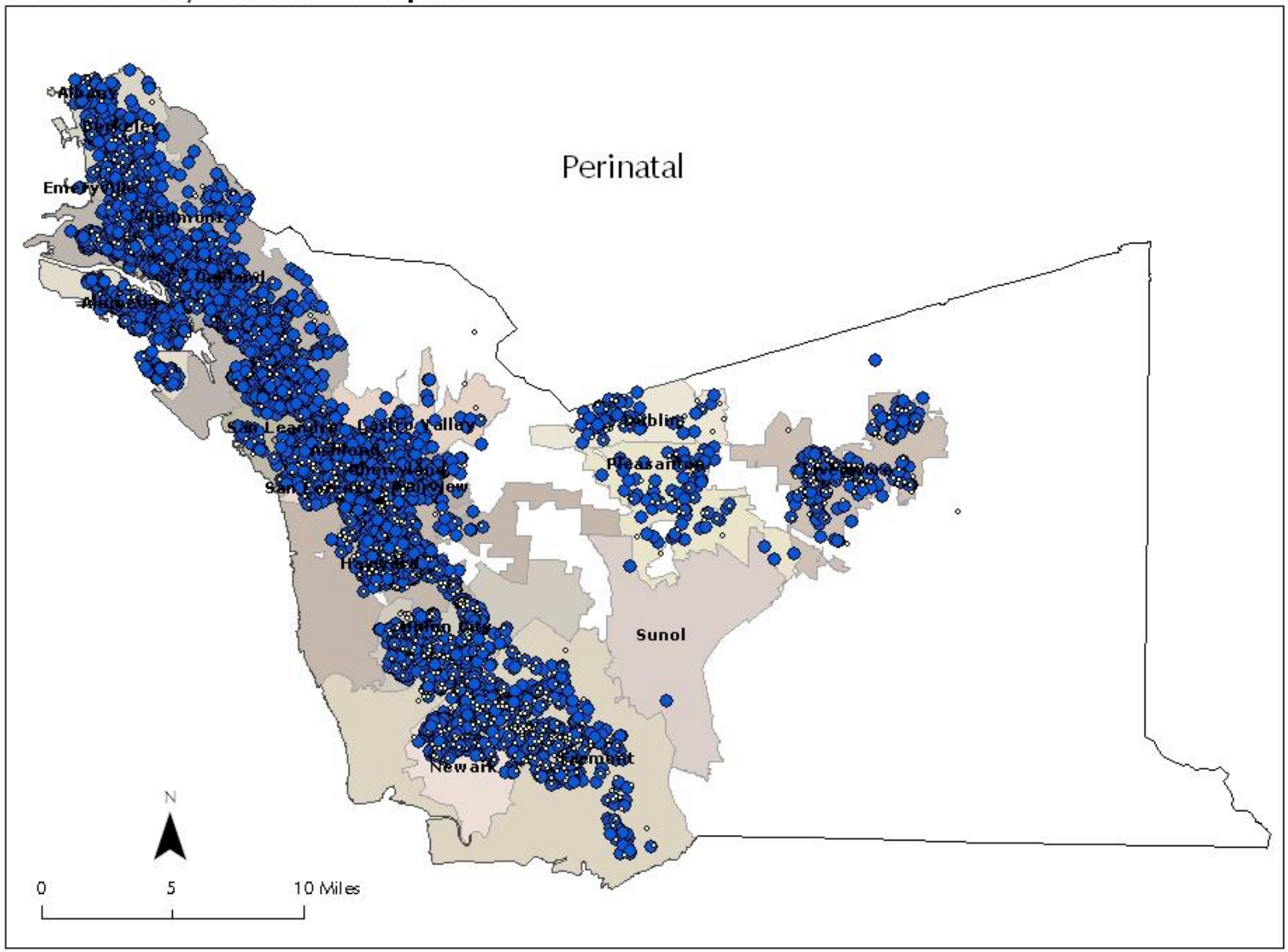
Alameda County Public Health Department



Source: CAPE.

Service Intensity FY05-06

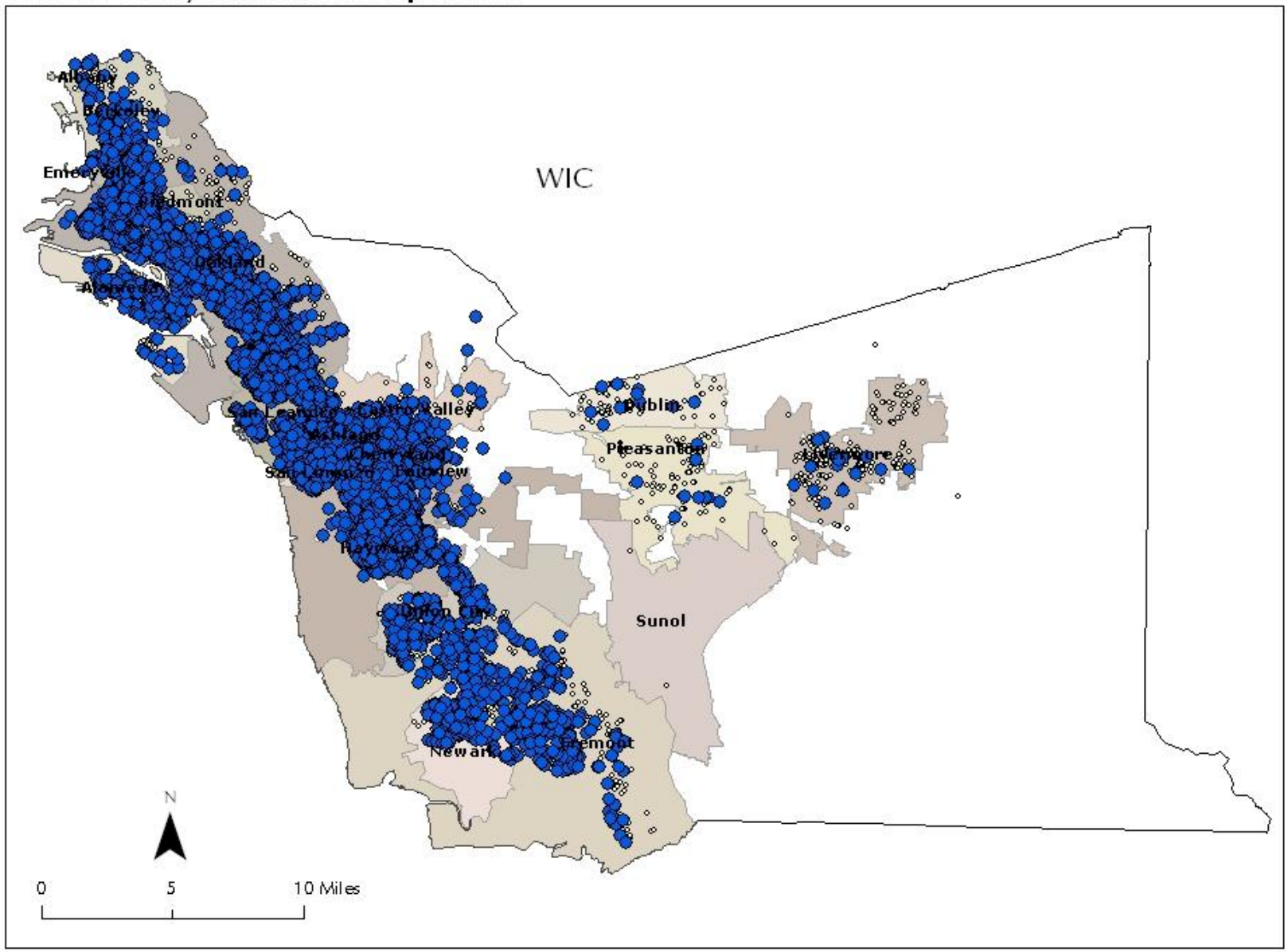
Alameda County Public Health Department



Source: CAPE.

Service Intensity FY05-06

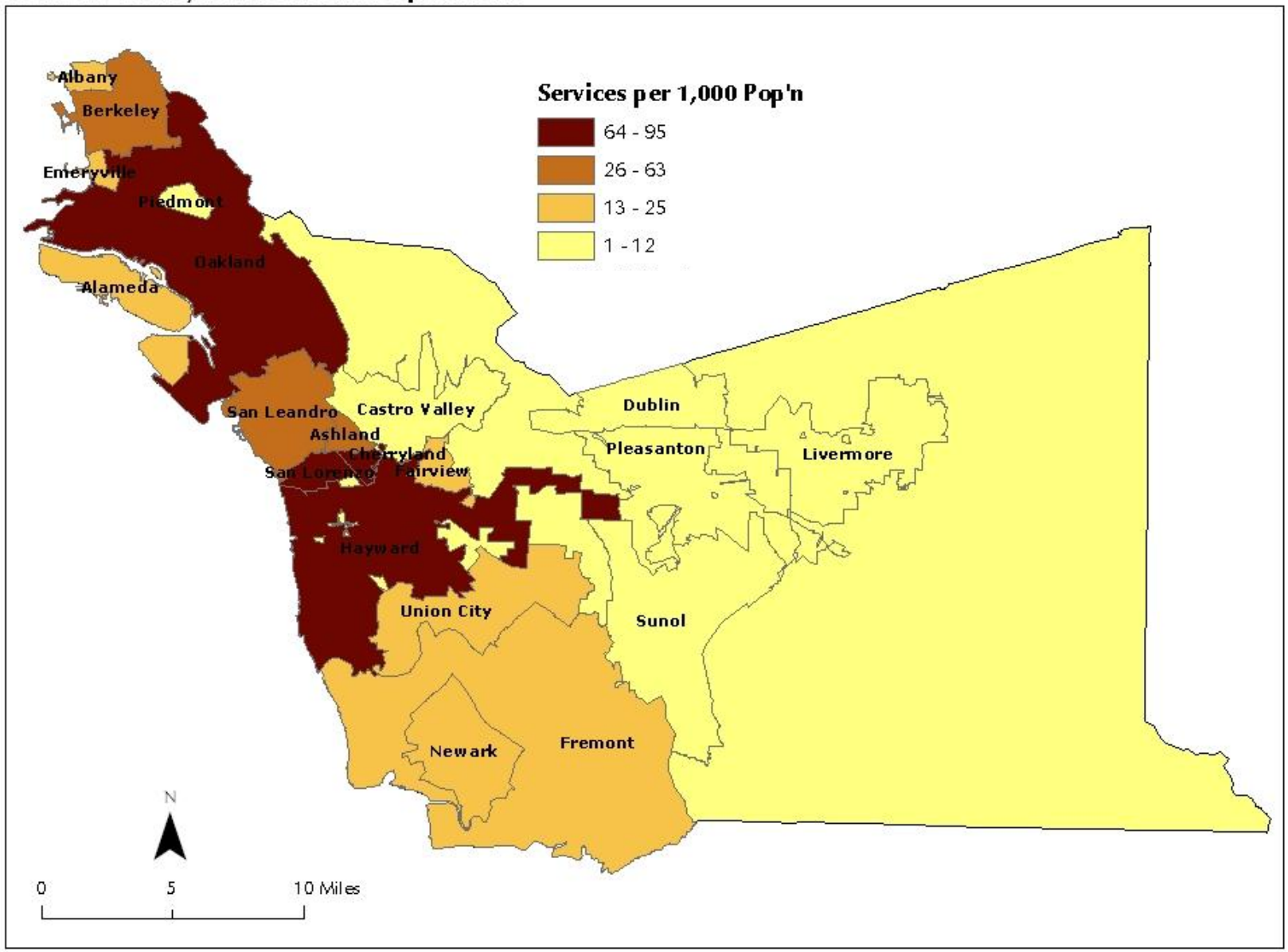
Alameda County Public Health Department



Source: CAPE.

Service Intensity FY05-06

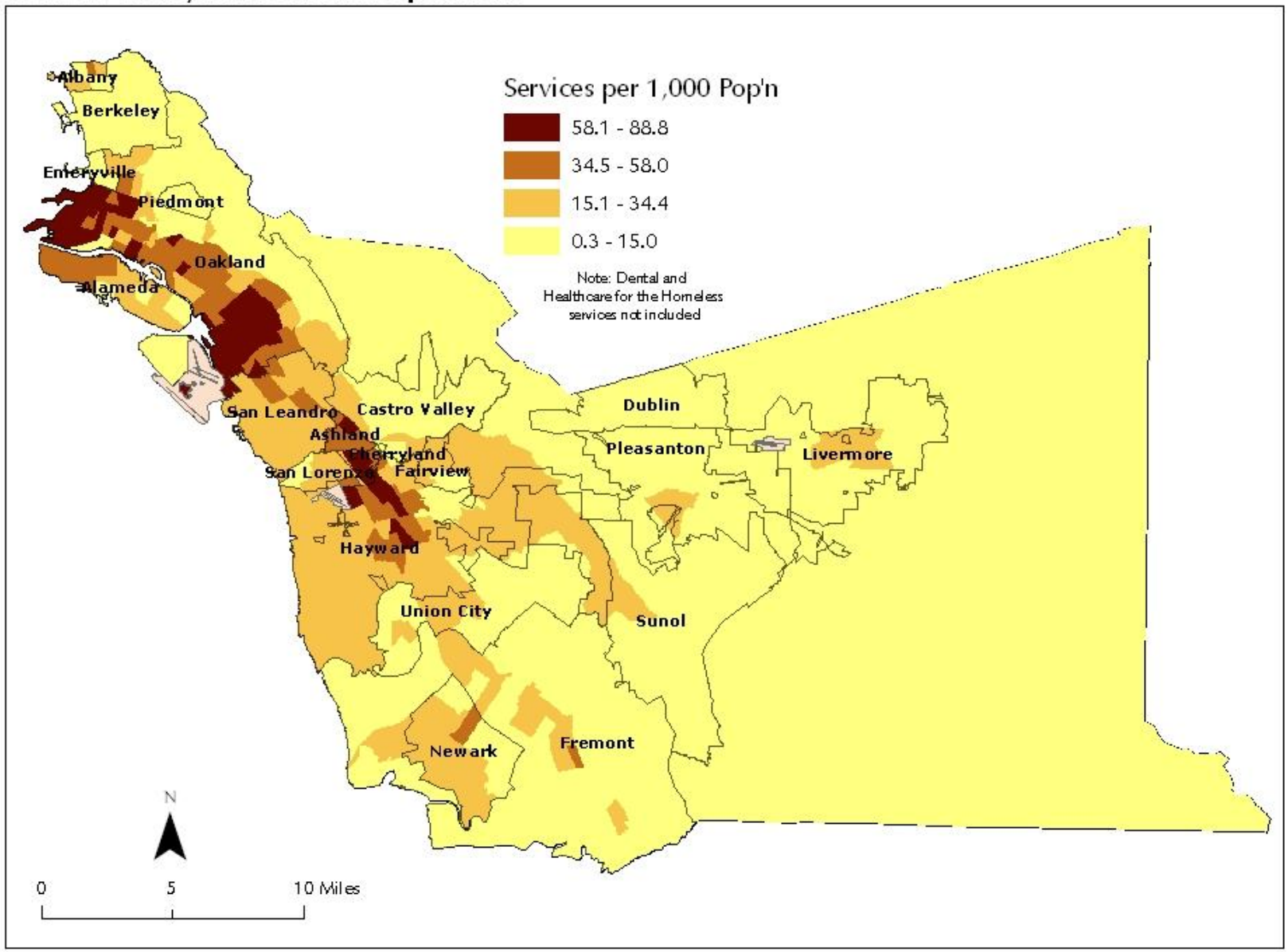
Alameda County Public Health Department



Source: CAPE.

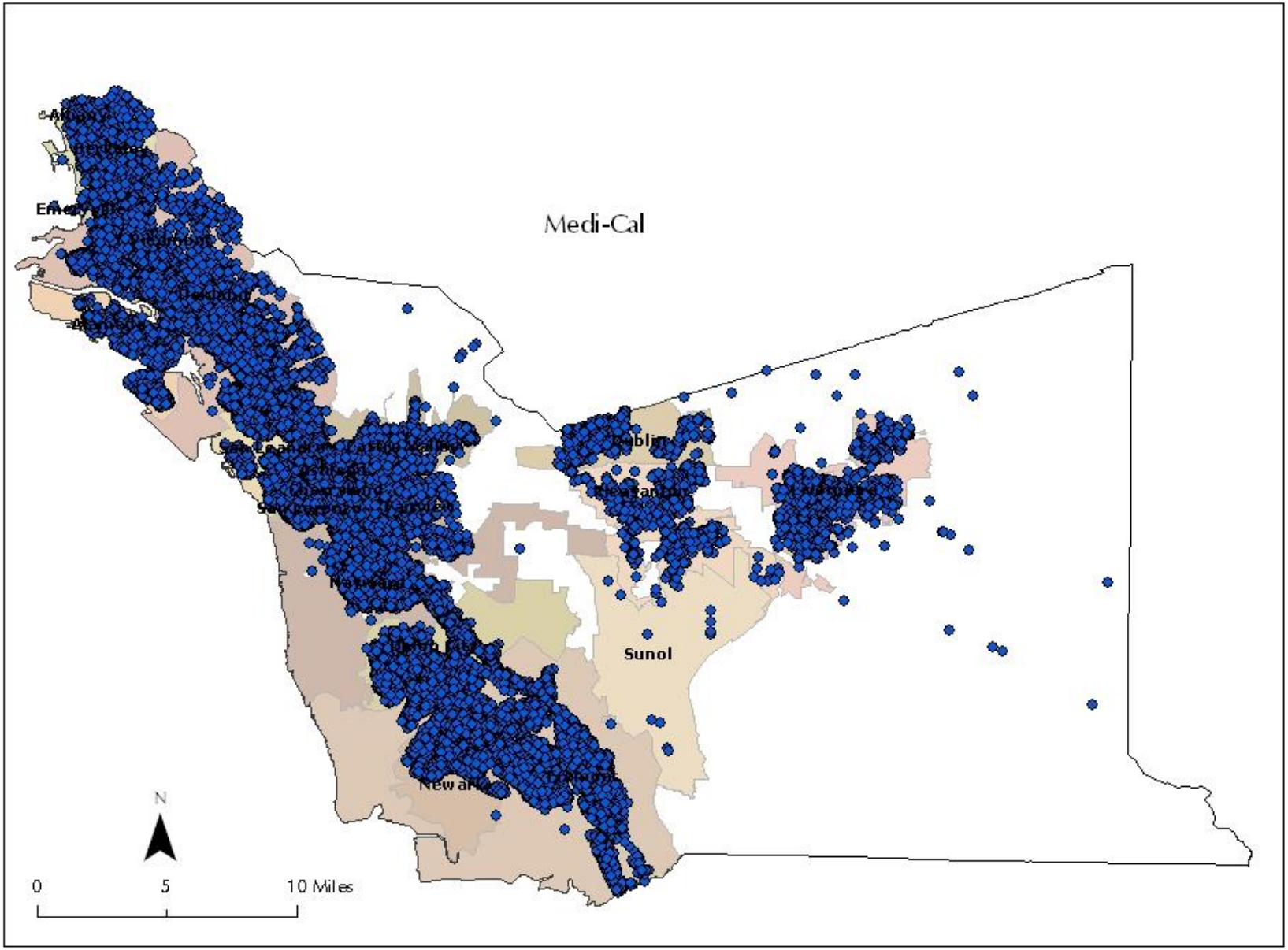
Service Intensity FY05-06

Alameda County Public Health Department



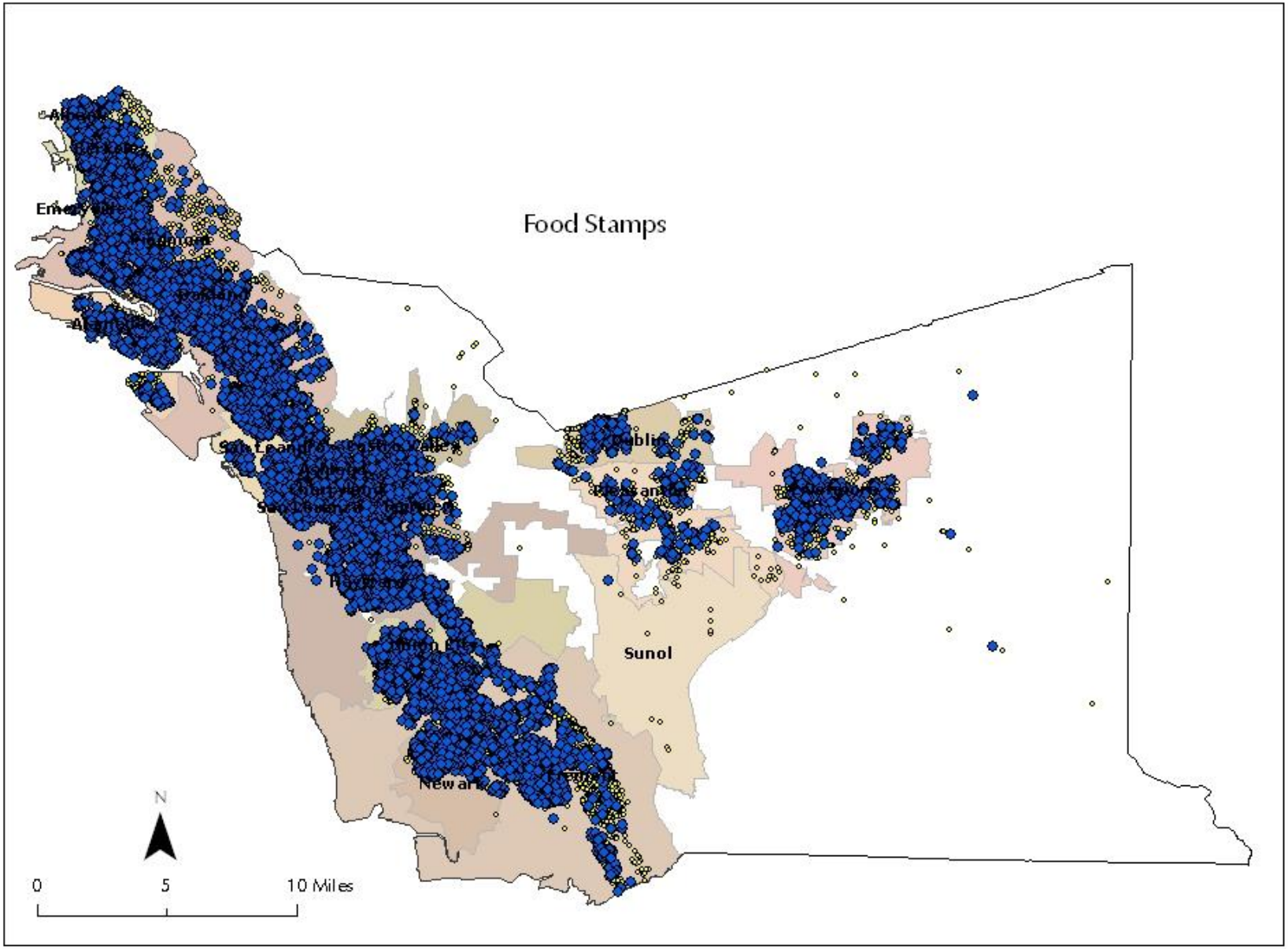
Source: CAPE.

Social Services



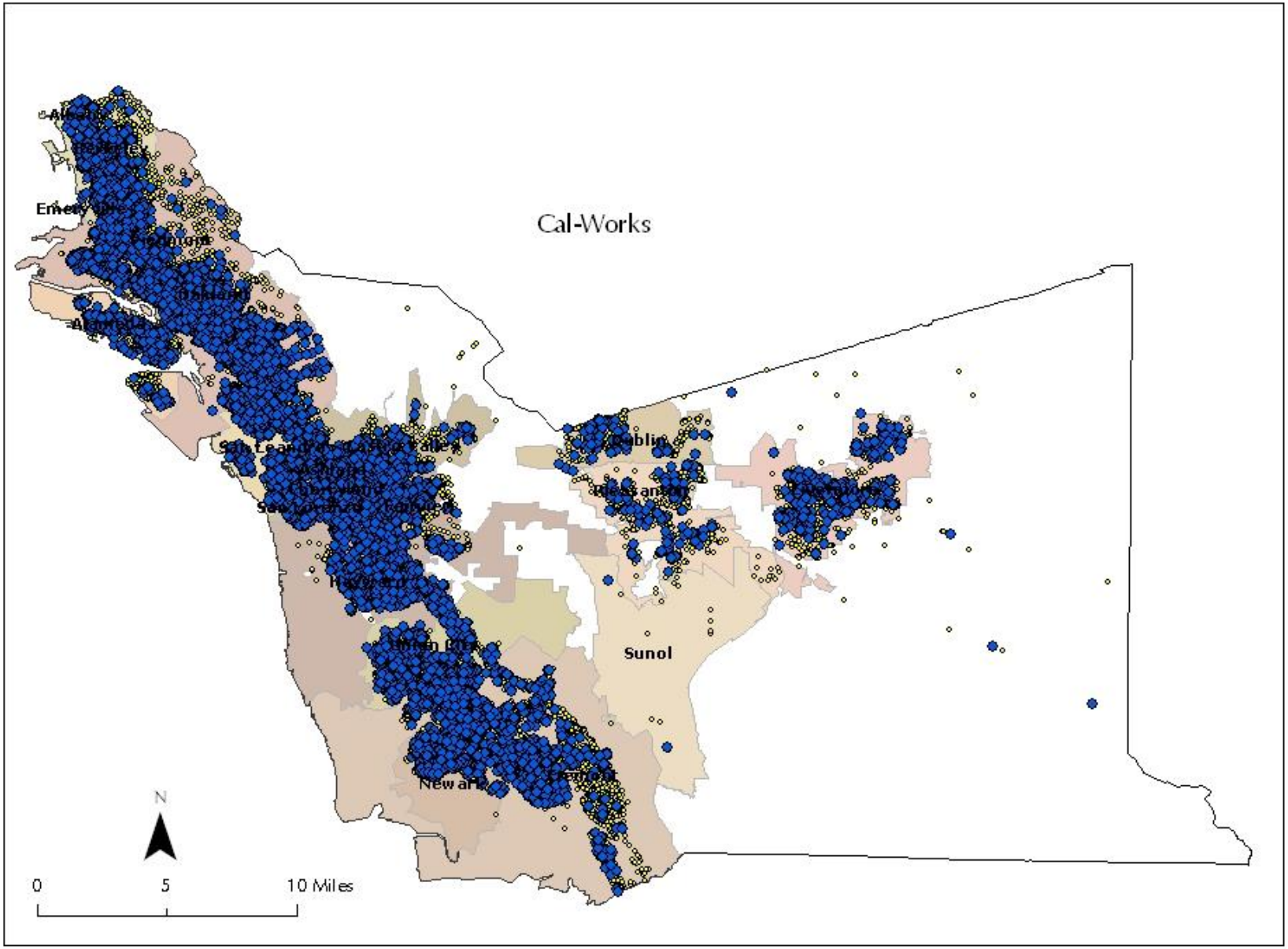
Source: CAPE, with data from SSA.

Social Services



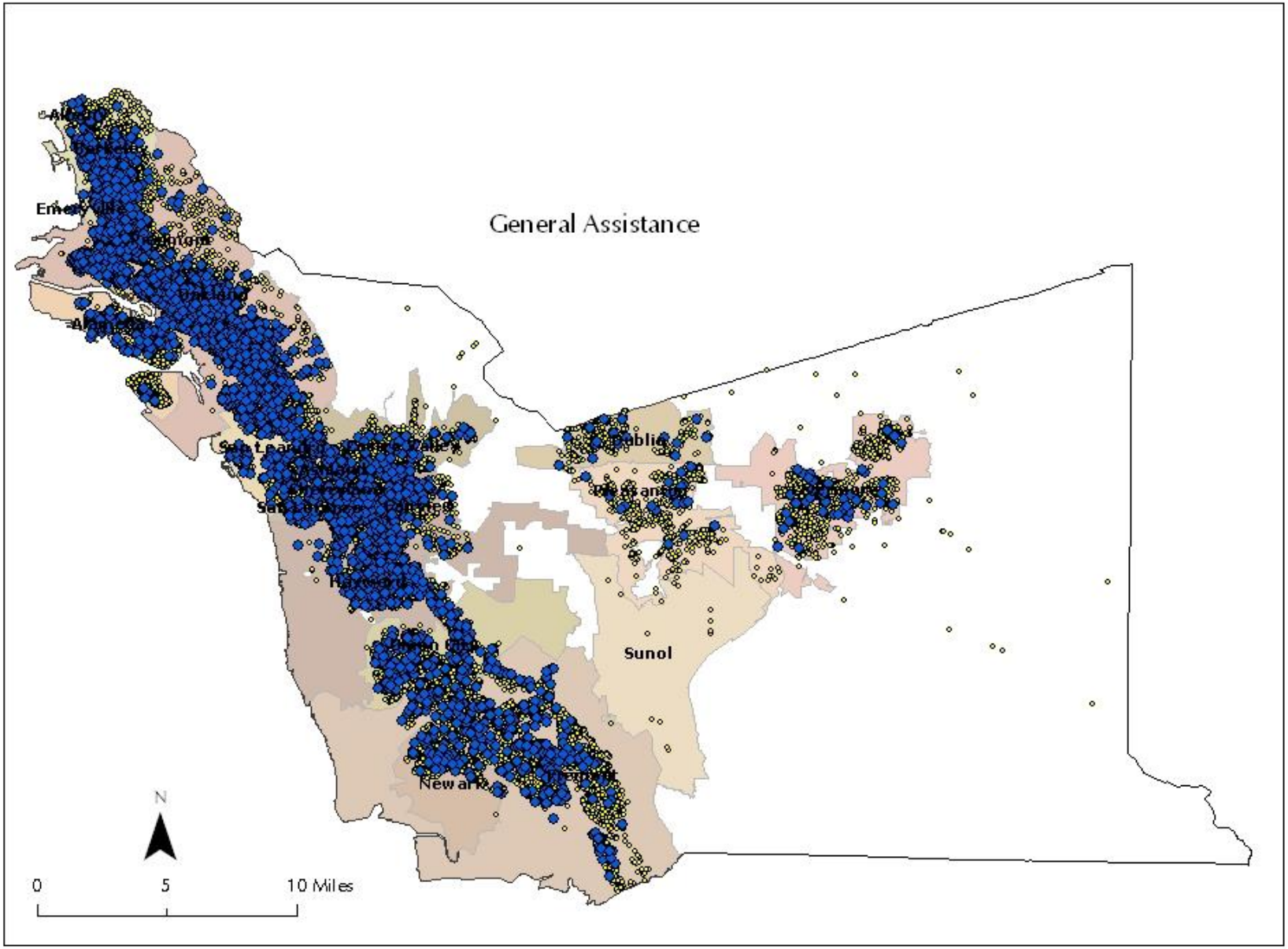
Source: CAPE, with data from SSA.

Social Services



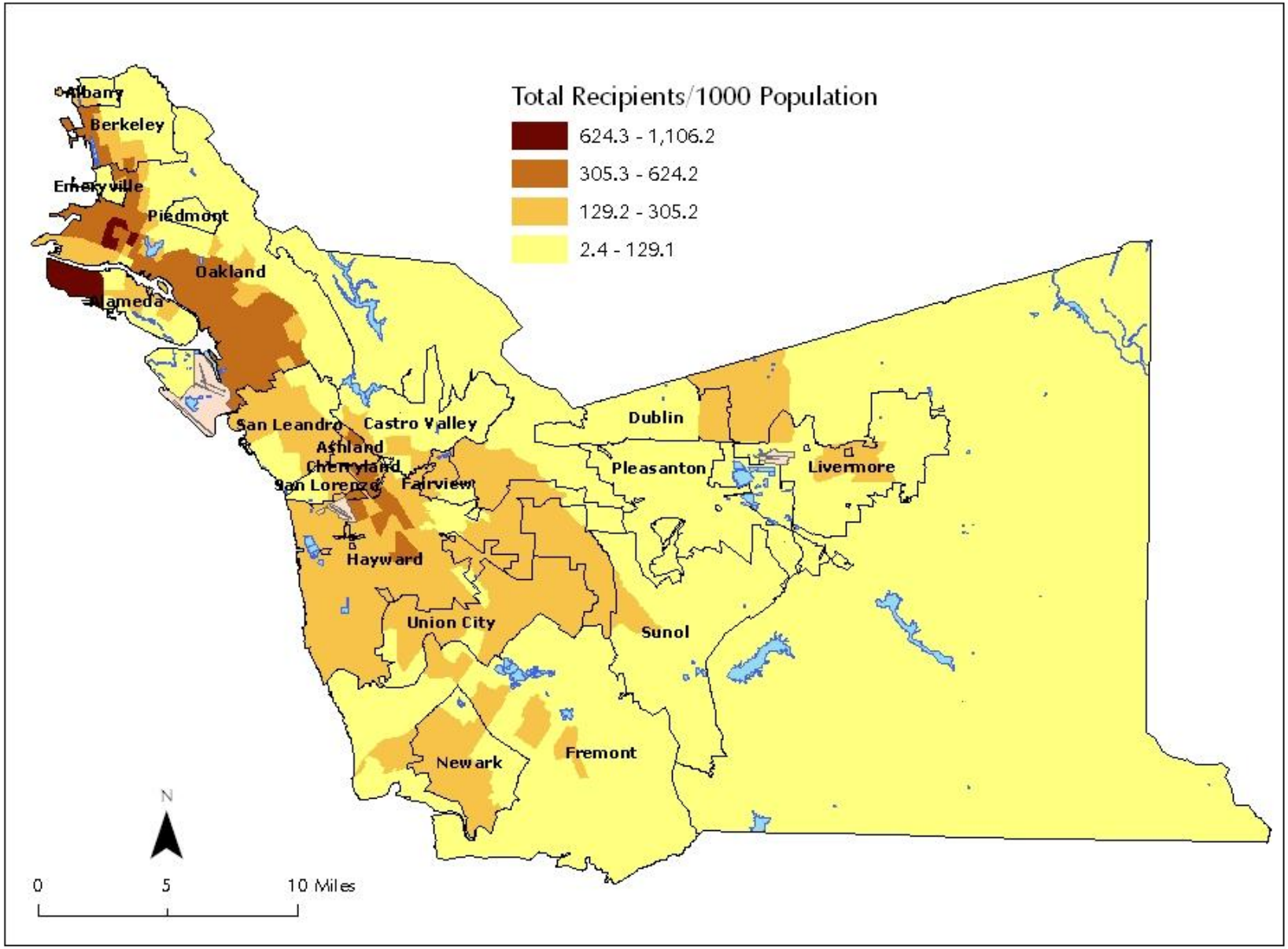
Source: CAPE, with data from SSA.

Social Services



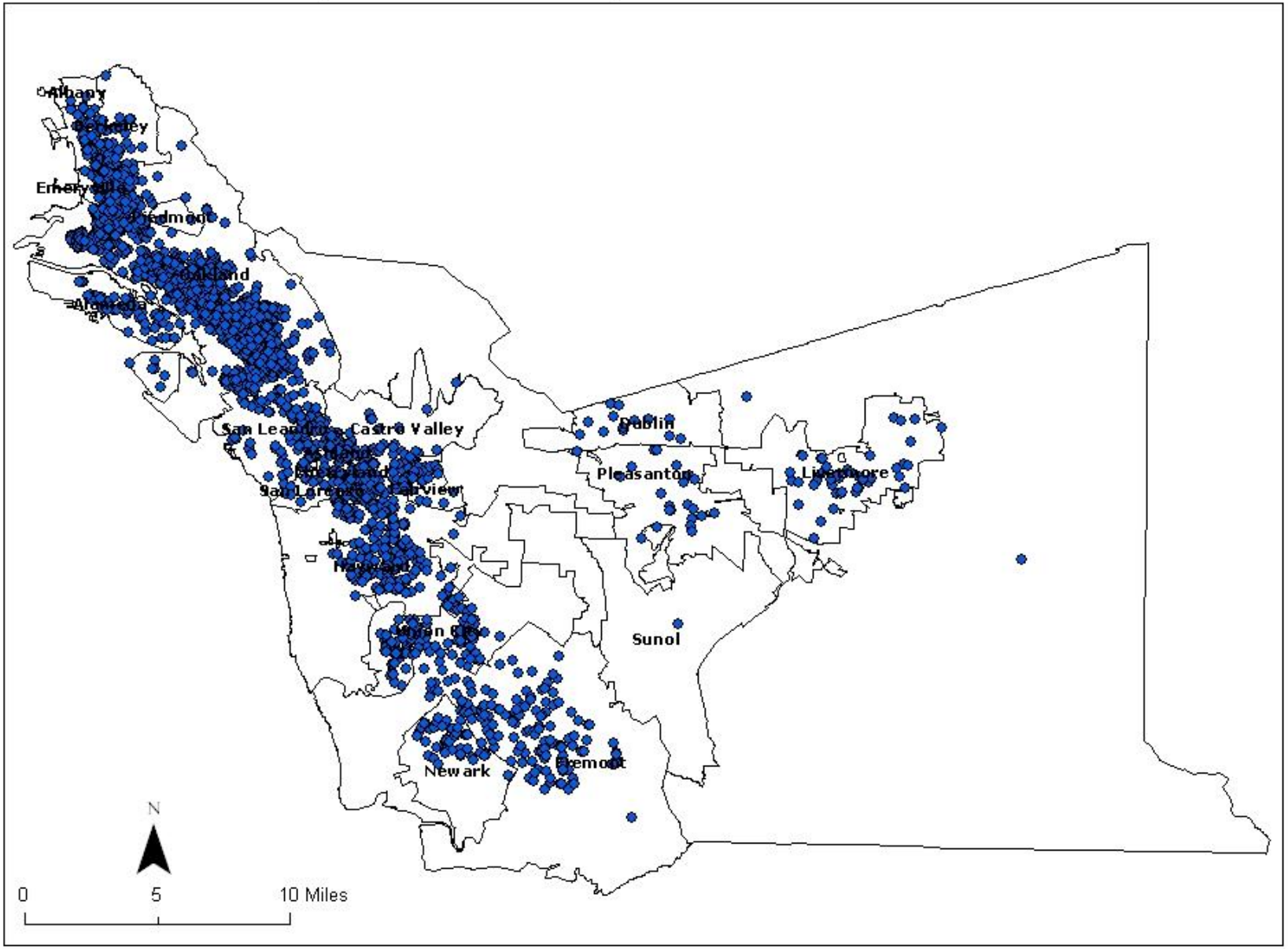
Source: CAPE, with data from SSA.

Social Services



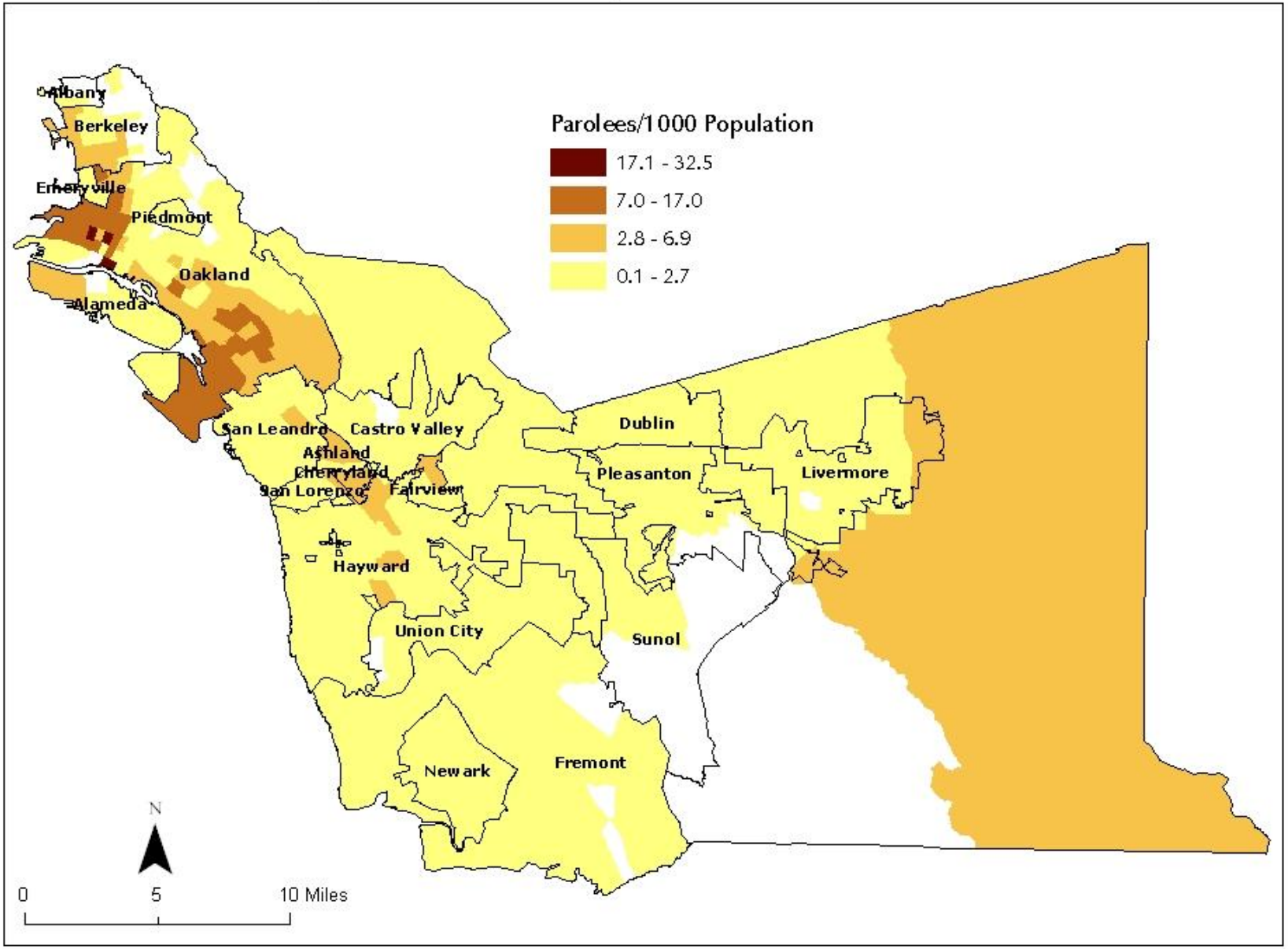
Source: CAPE, with data from SSA.

Alameda County Parolees, May 2005



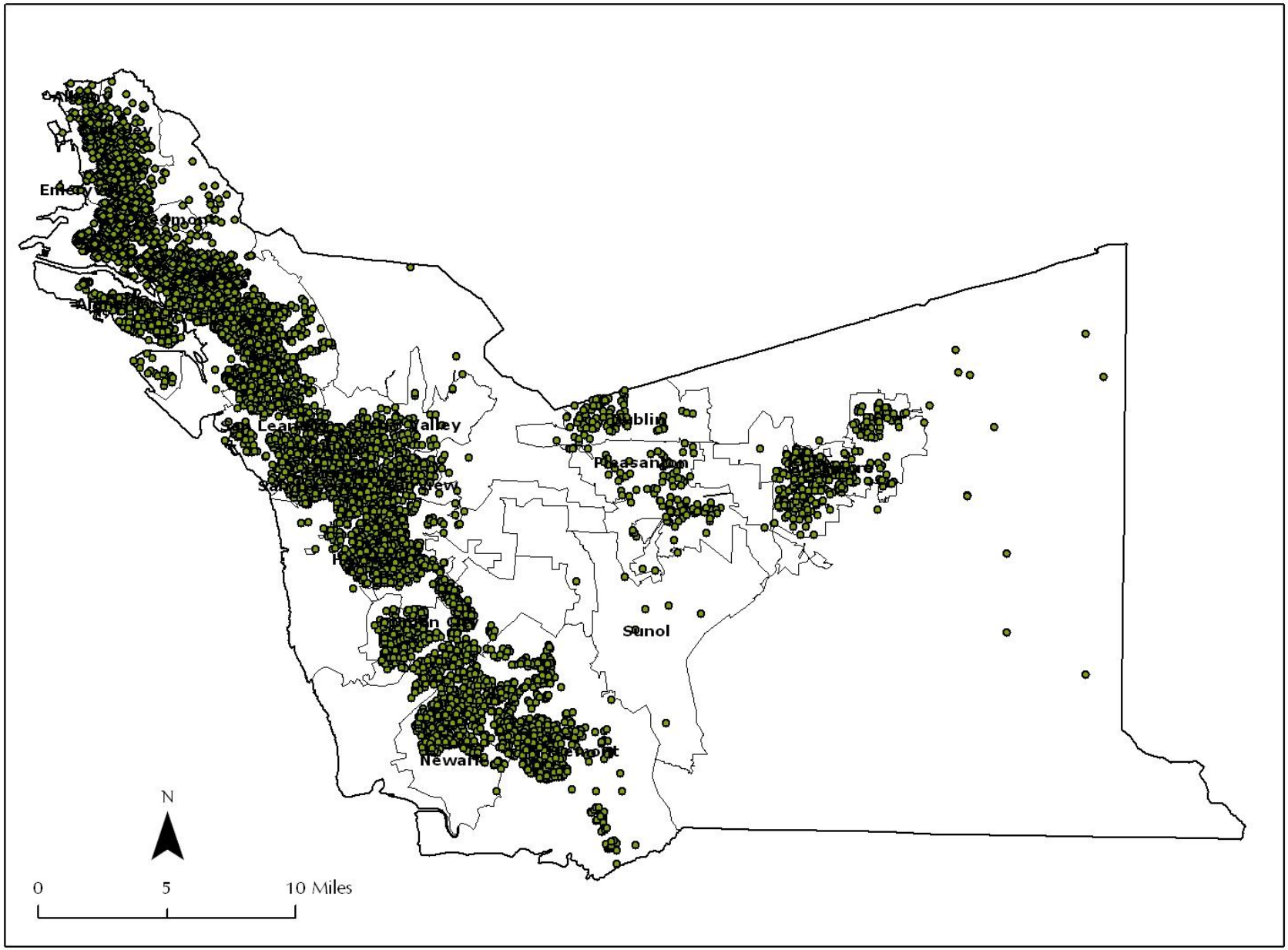
Source: CAPE, with data from California Department of Corrections.

Alameda County Parolees, May 2005



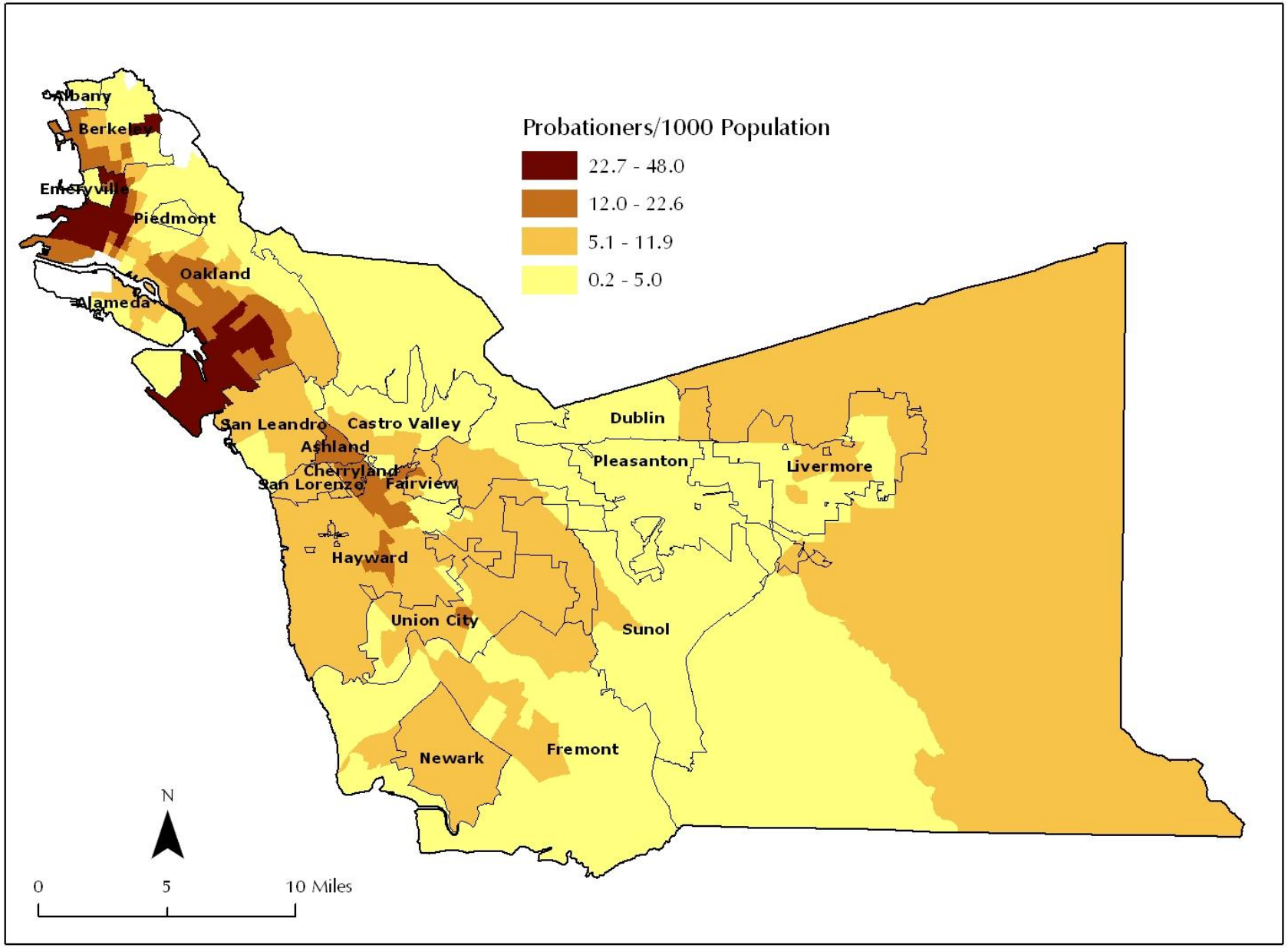
Source: CAPE, with data from California Department of Corrections.

Alameda County Probationers FY05-06



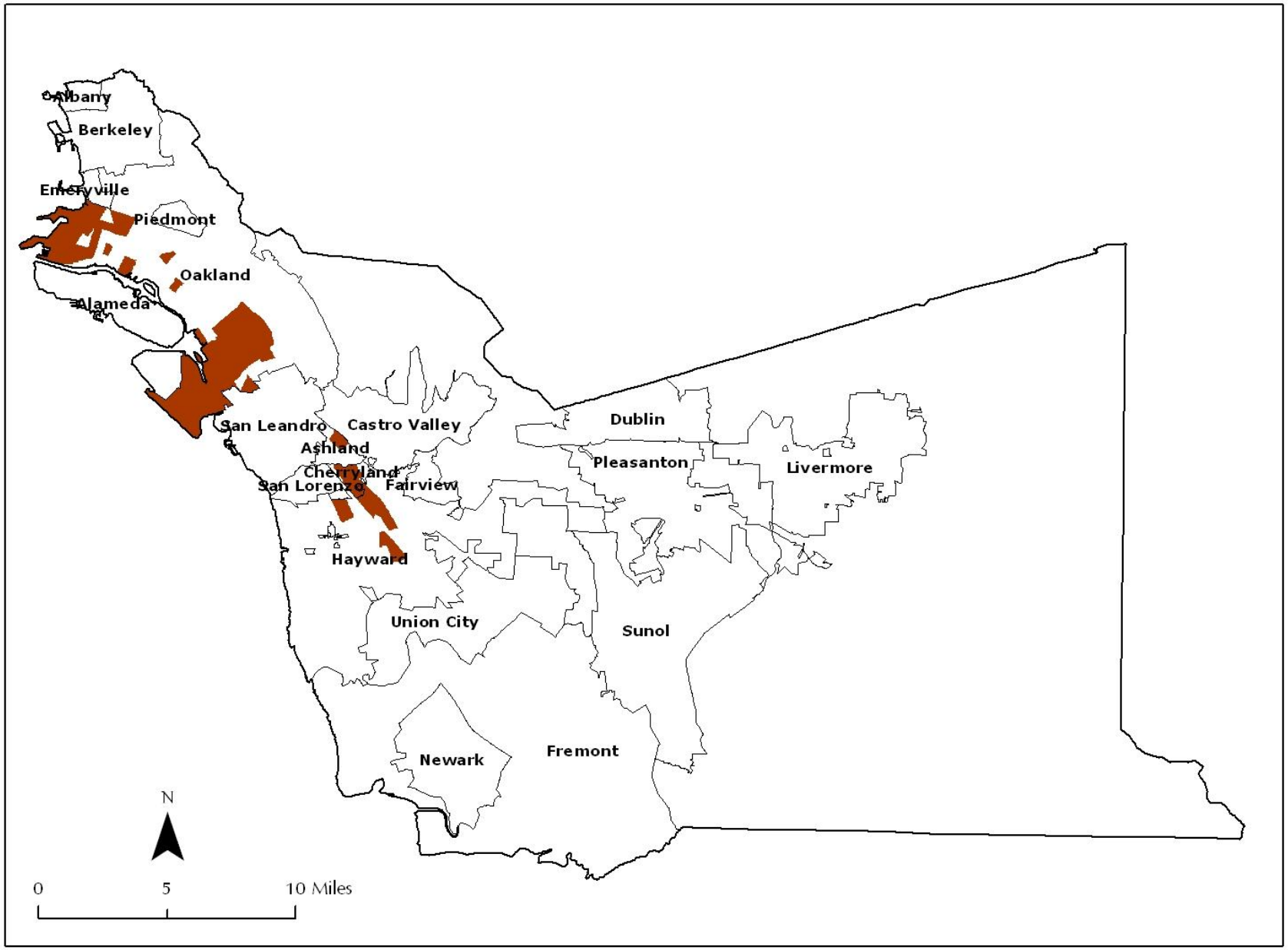
Source: CAPE, with data from Probation Department.

Alameda County Probationers FY05-06



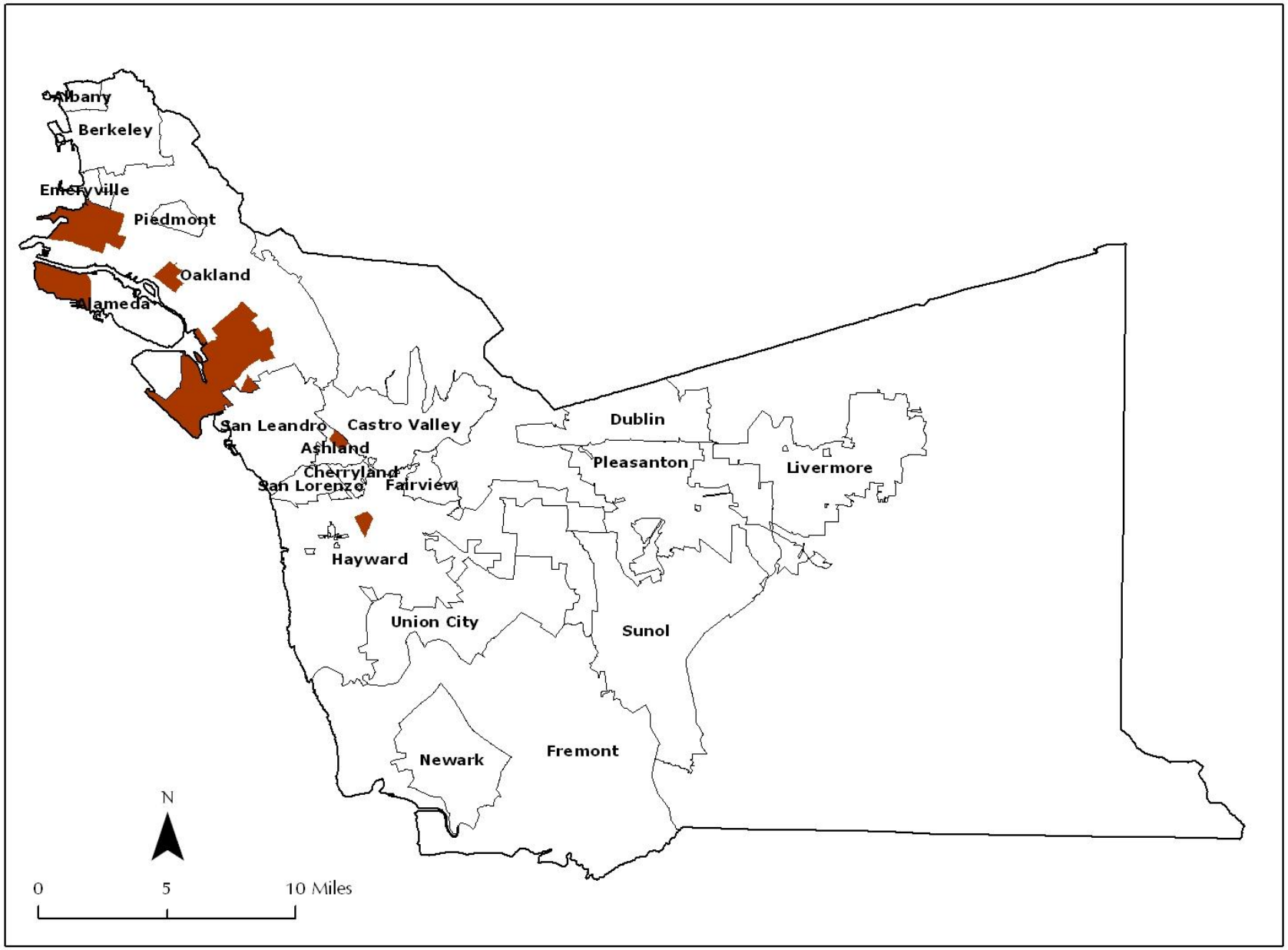
Source: CAPE, with data from Probation Department.

Top 30 Tracts Receiving Services - PHD



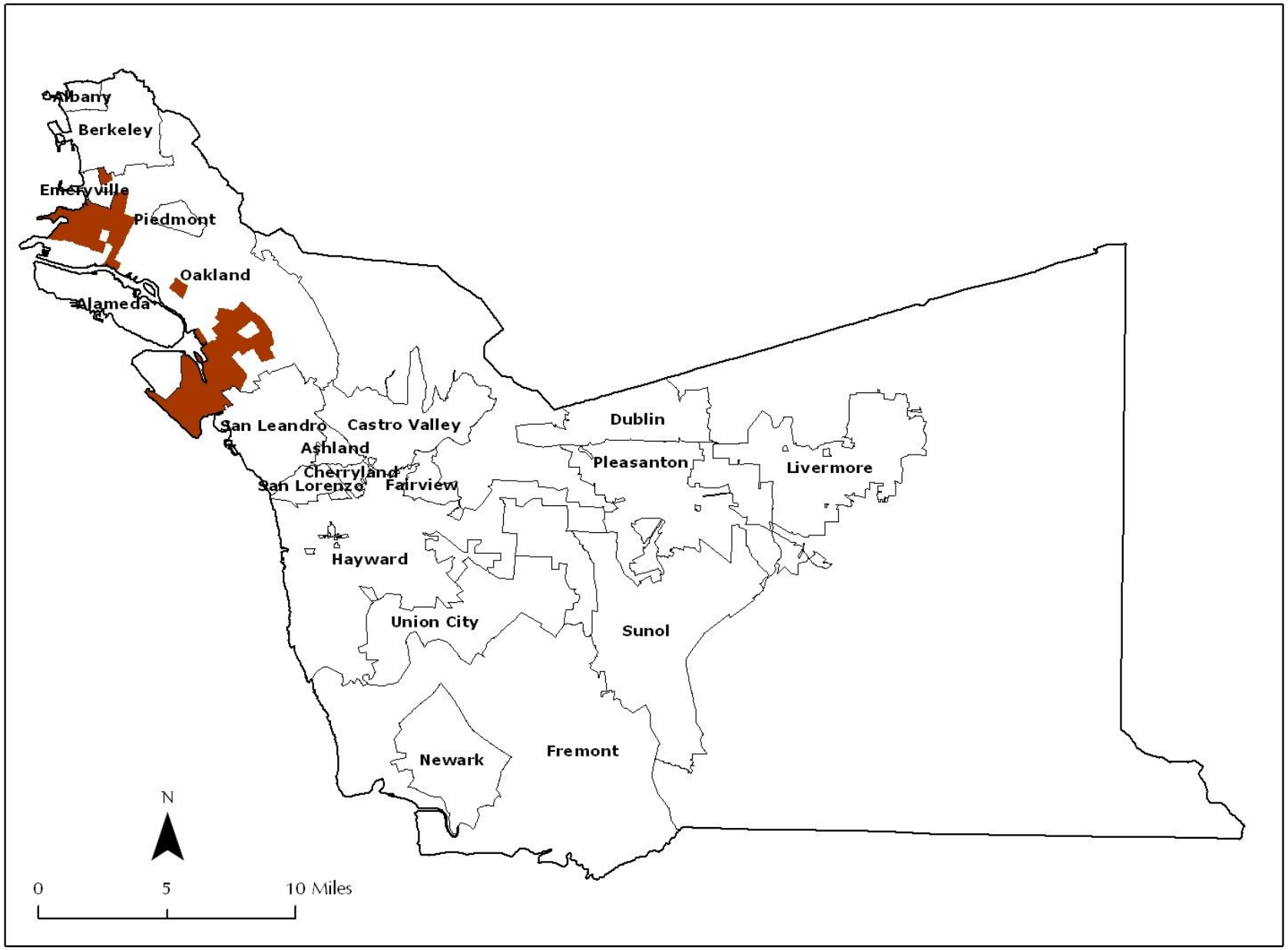
Source: CAPE, with data from Public Health Department.

Top 30 Tracts Receiving Services - SSA



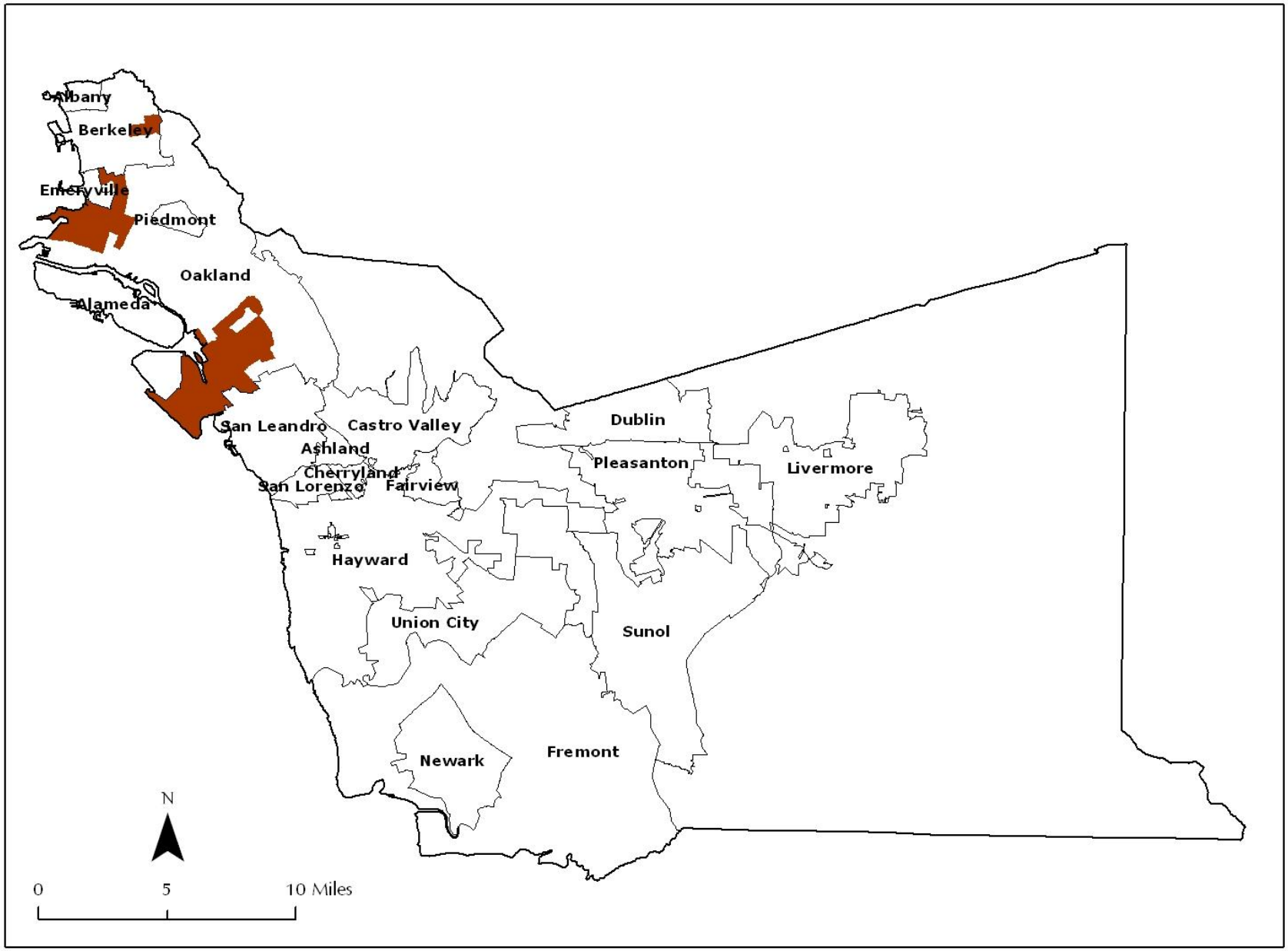
Source: CAPE, with data from Social Services Agency.

Top 30 Tracts Receiving Services - Parole



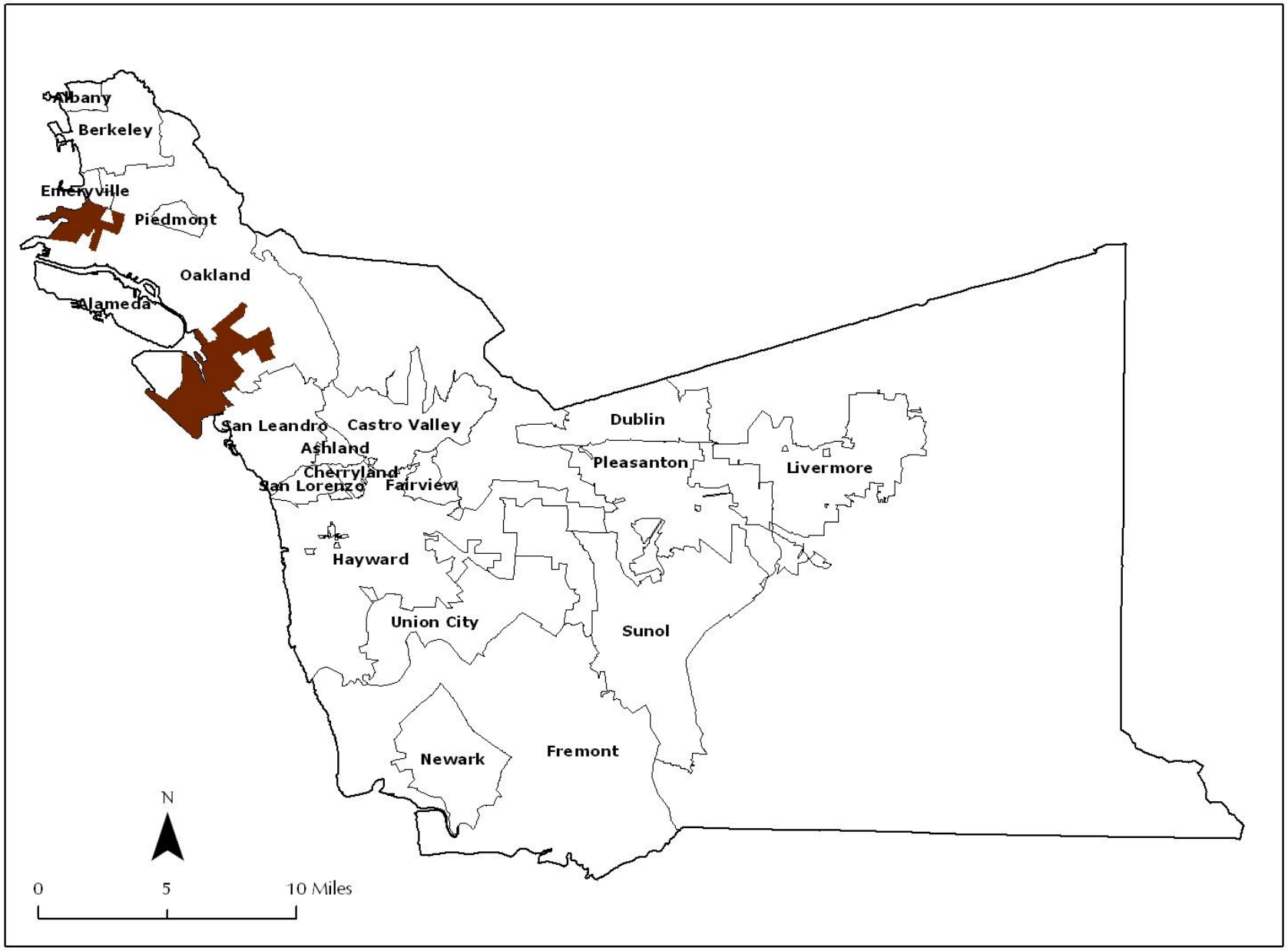
Source: CAPE, with data from California Department of Corrections.

Top 30 Tracts Receiving Services - Probation



Source: CAPE, with data from Probation Department.

13 Tracts Overlap



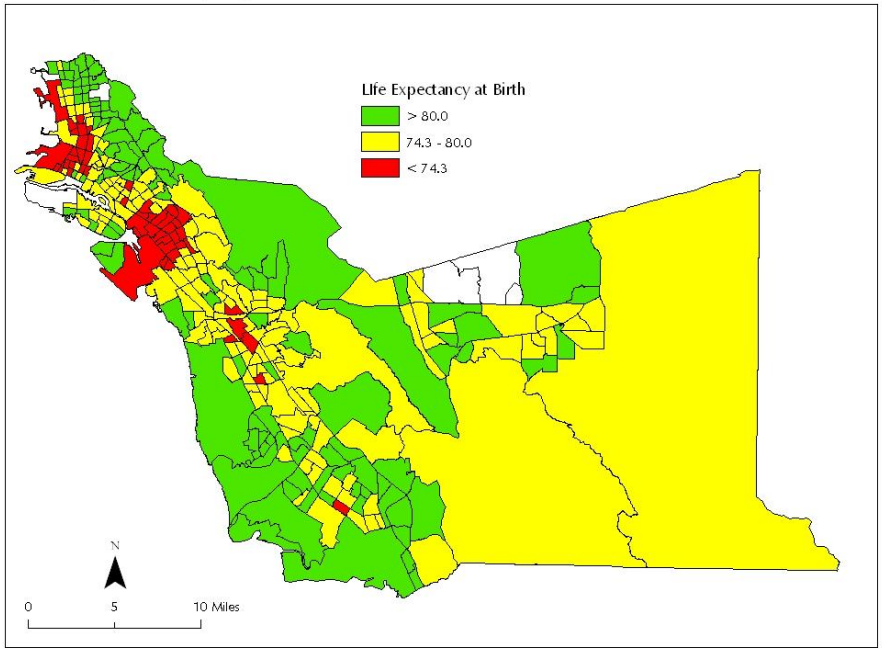
Source: CAPE.

Concentration of Services –Shortened Lives

13 Tracts Overlap

Source: C

Life Expectancy by Tract

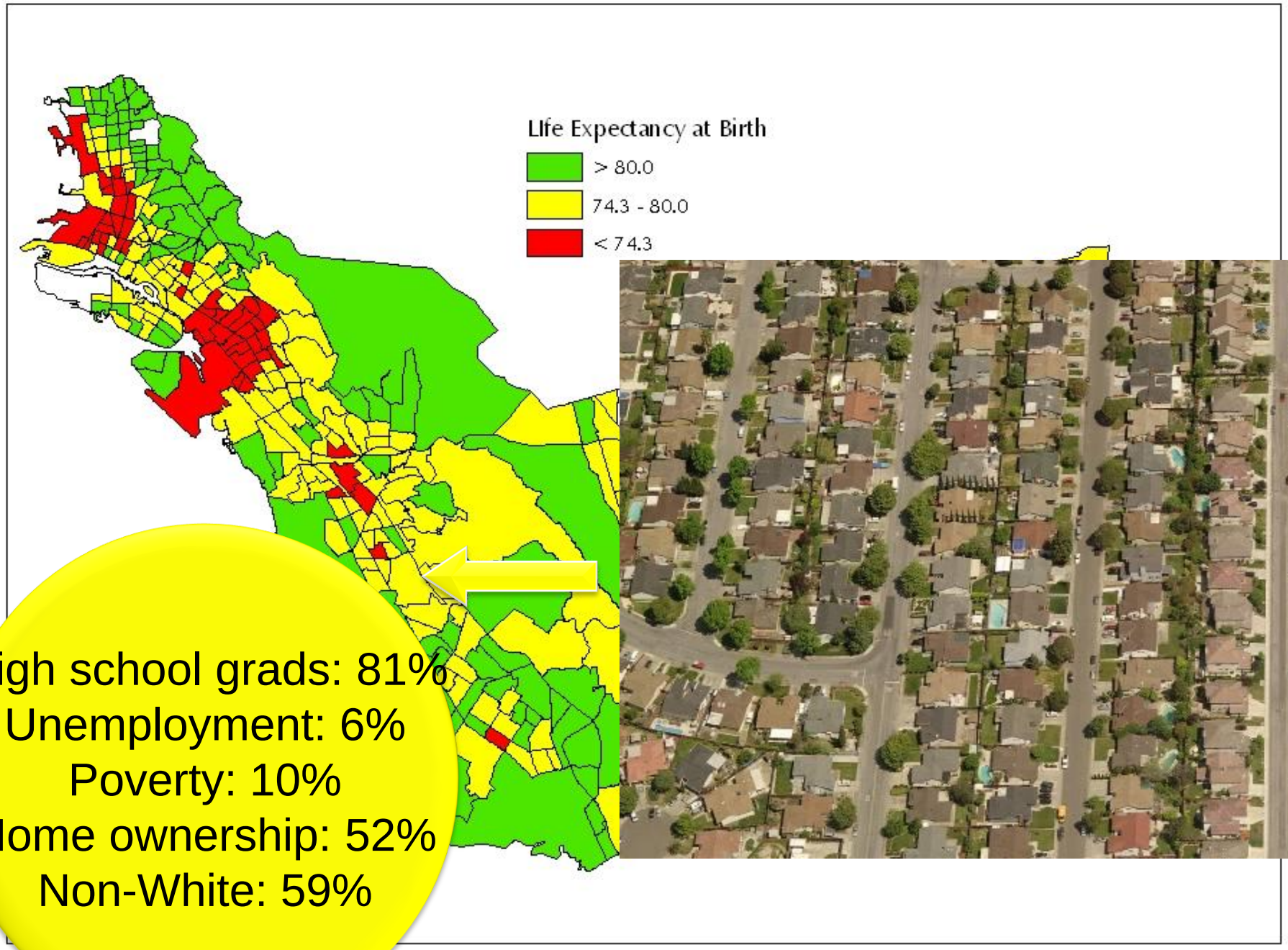


Source: CAPE, with data from vital statistics 1999-2001.

Life Expectancy by Tract

Source: CAPE, with data from vital statistics 1999-2001.

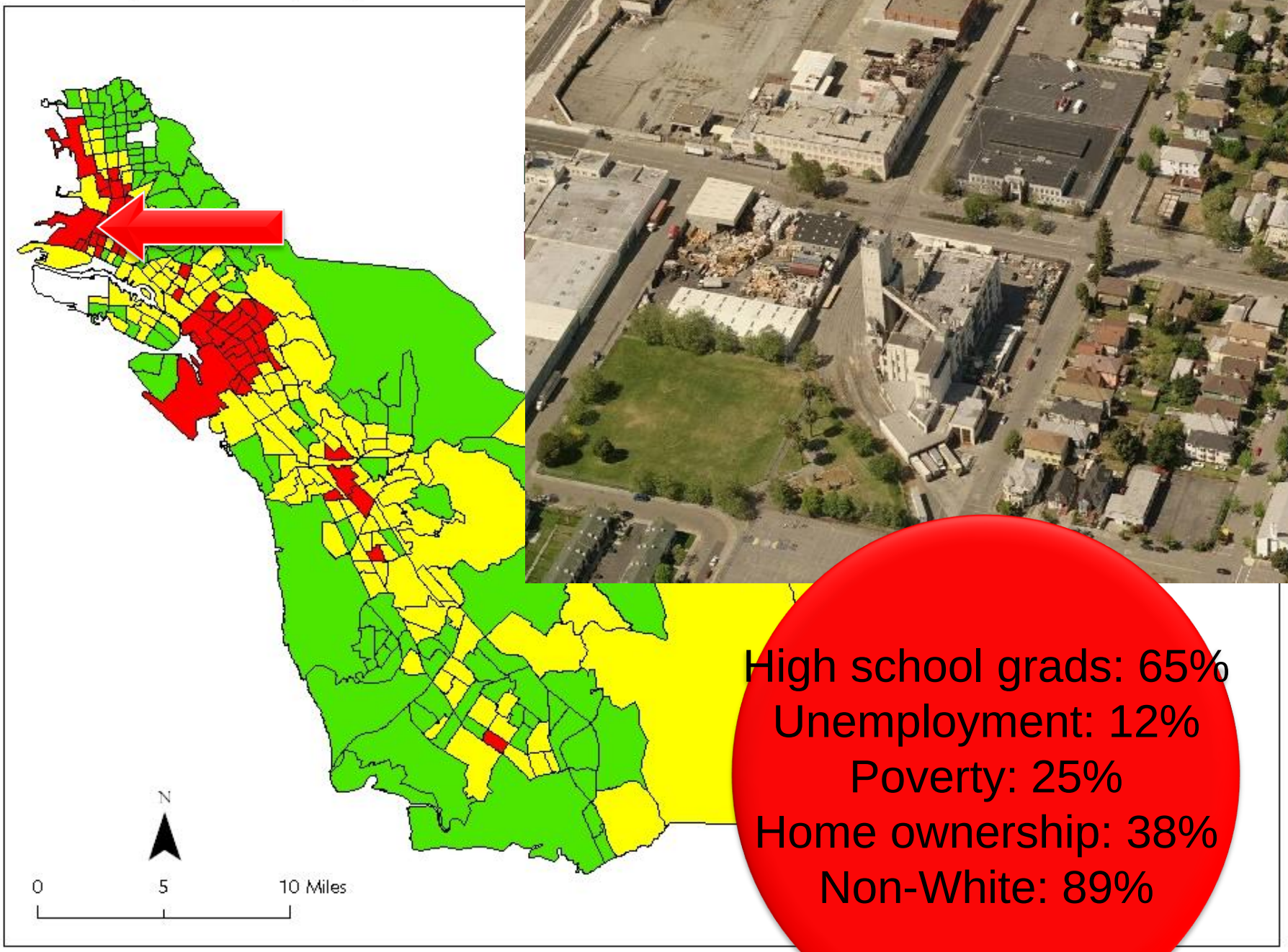
Life Expectancy by Tract



High school grads: 81%
Unemployment: 6%
Poverty: 10%
Home ownership: 52%
Non-White: 59%

Source: CAPE, with data from vital statistics 1999-2001.

Life Expectancy by Tract



Life Expectancy

High school grads: 90%
Unemployment: 4%
Poverty: 7%
Home ownership: 64%
Non-White: 49%

>80

High school grads: 81%
Unemployment: 6%
Poverty: 10%
Home ownership: 52%
Non-White: 59%

74.3 - 80

<74.3

Schools

Jobs

Crime

Segregation

Housing

Toxins

Physical environment

Social environment

Residential segregation

Community Trajectories

- How much does place matter?

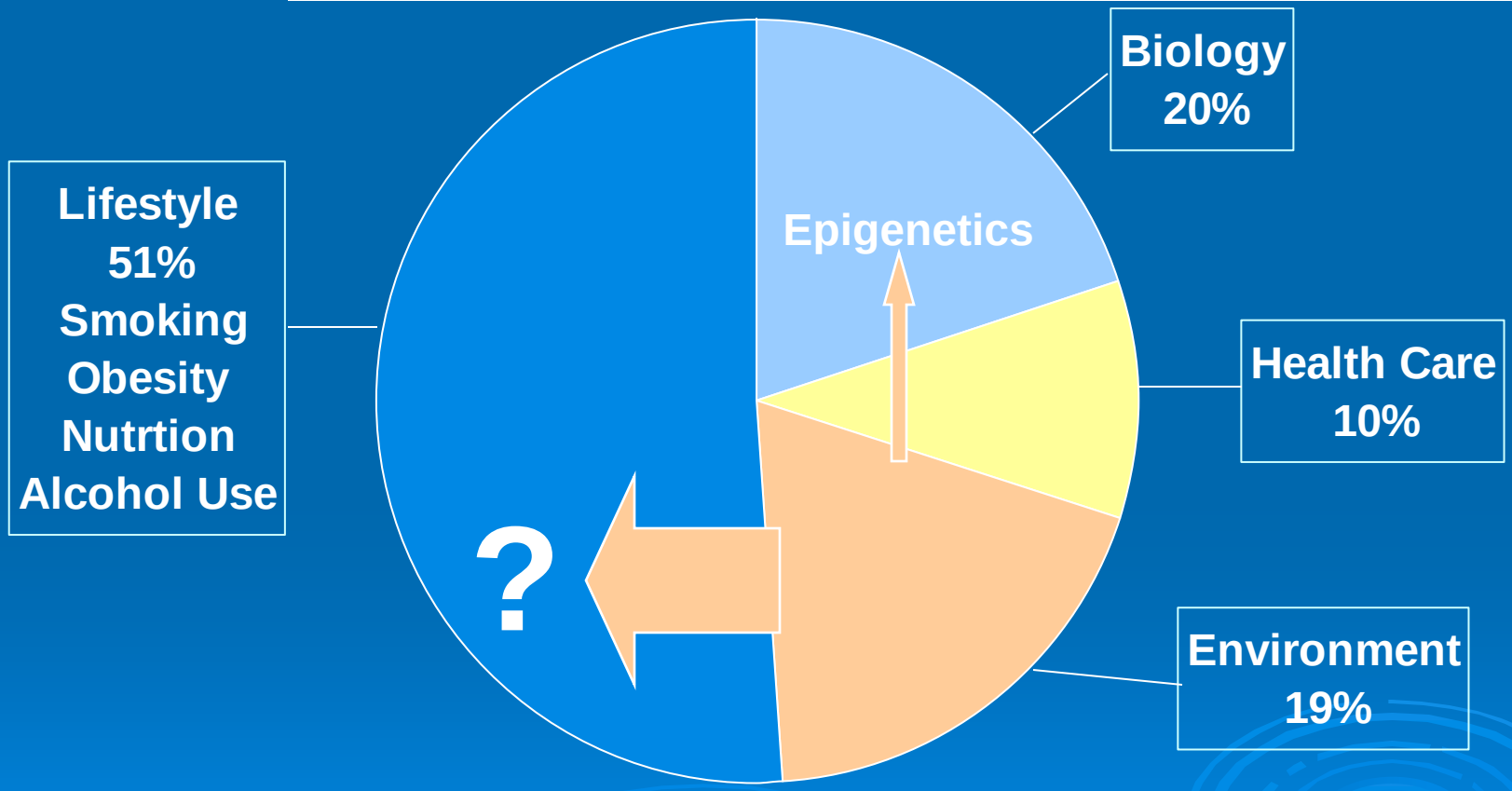
The Neighborhood Context

The Neighborhood Context

How Does Your Neighborhood Get Under Your Skin?

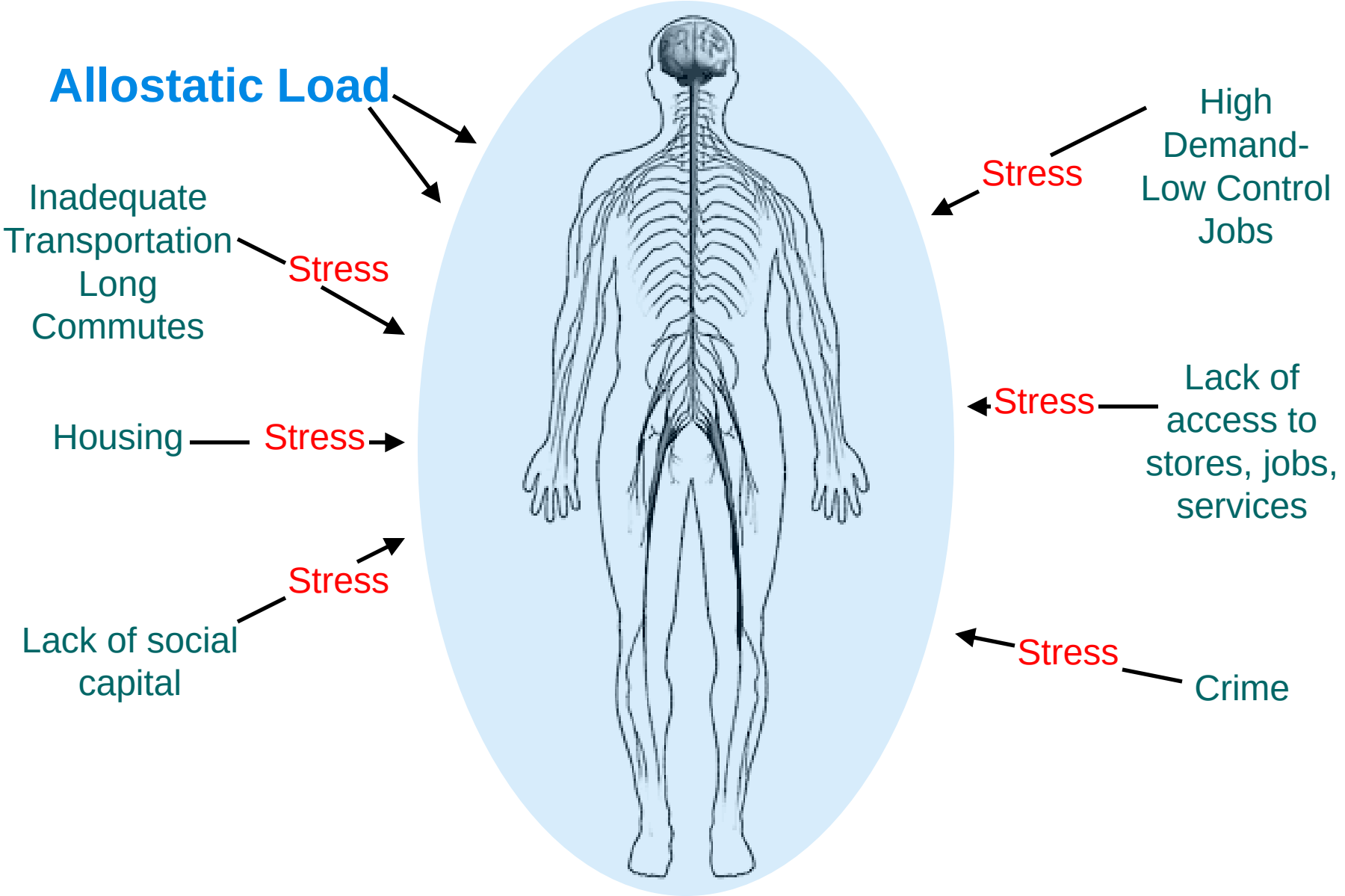
Actual Causes of Death

A bridge between genotype and phenotype— a phenomenon that changes the final outcome of a locus or chromosome without changing the underlying DNA sequence

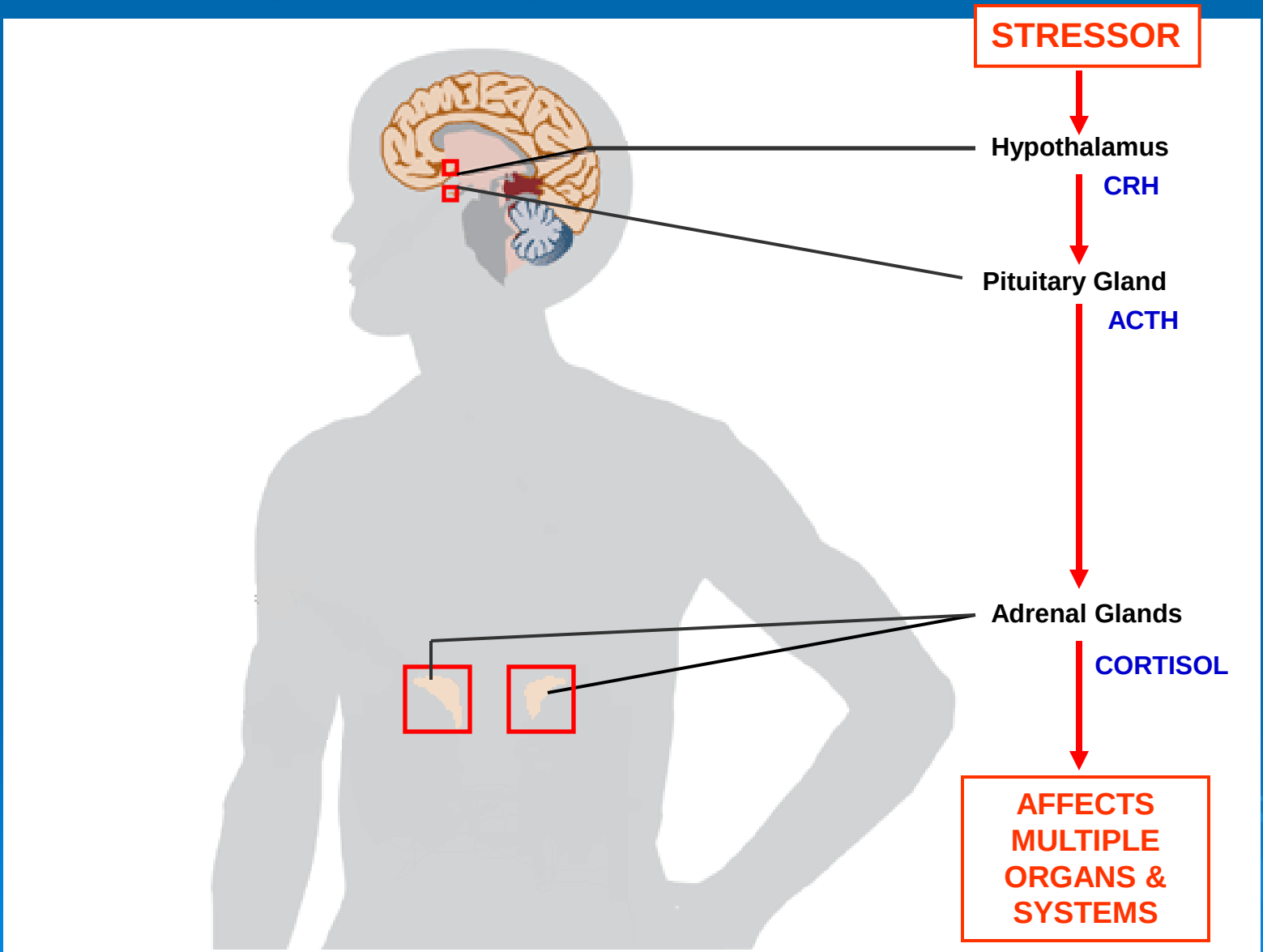


Source: McGinnis, J.M and Foege, W.H. (1993). "Actual Causes of Death in the United States," Journal of the American Medical Association.

When the external becomes internal: How we internalize our environment



Stress pathway from brain to body



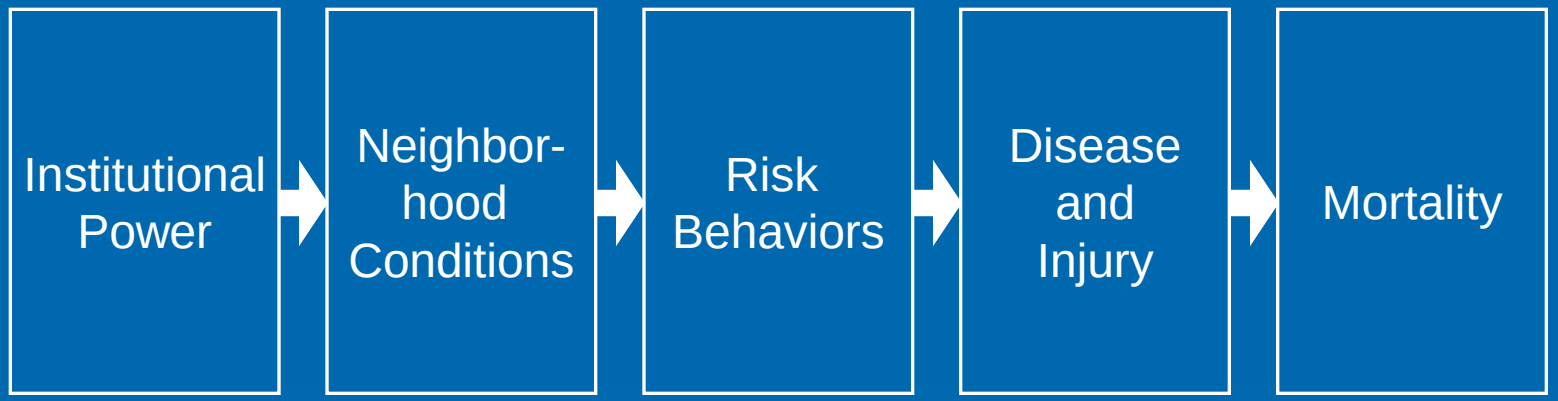
PEDIATRICS®
OFFICIAL JOURNAL OF THE AMERICAN ACADEMY OF PEDIATRICS

The Lifelong Effects of Early Childhood Adversity and Toxic Stress

Advances in fields of inquiry as diverse as neuroscience, molecular biology, genomics, developmental psychology, epidemiology, sociology, and economics are catalyzing an important paradigm shift in our understanding of health and disease across the lifespan. This converging, multidisciplinary science of human development has profound implications for our ability to enhance the life prospects of children and to strengthen the social and economic fabric of society.

Schools

Corporations and businesses



Government agencies

LIQUORS

Plucky's
DELI
LIQUOR

TOLINS
LIQUOR
DELI

ONE-STOP
LIQUOR
GROCERIES • DELICATESSEN

Oakland Liquor & Market

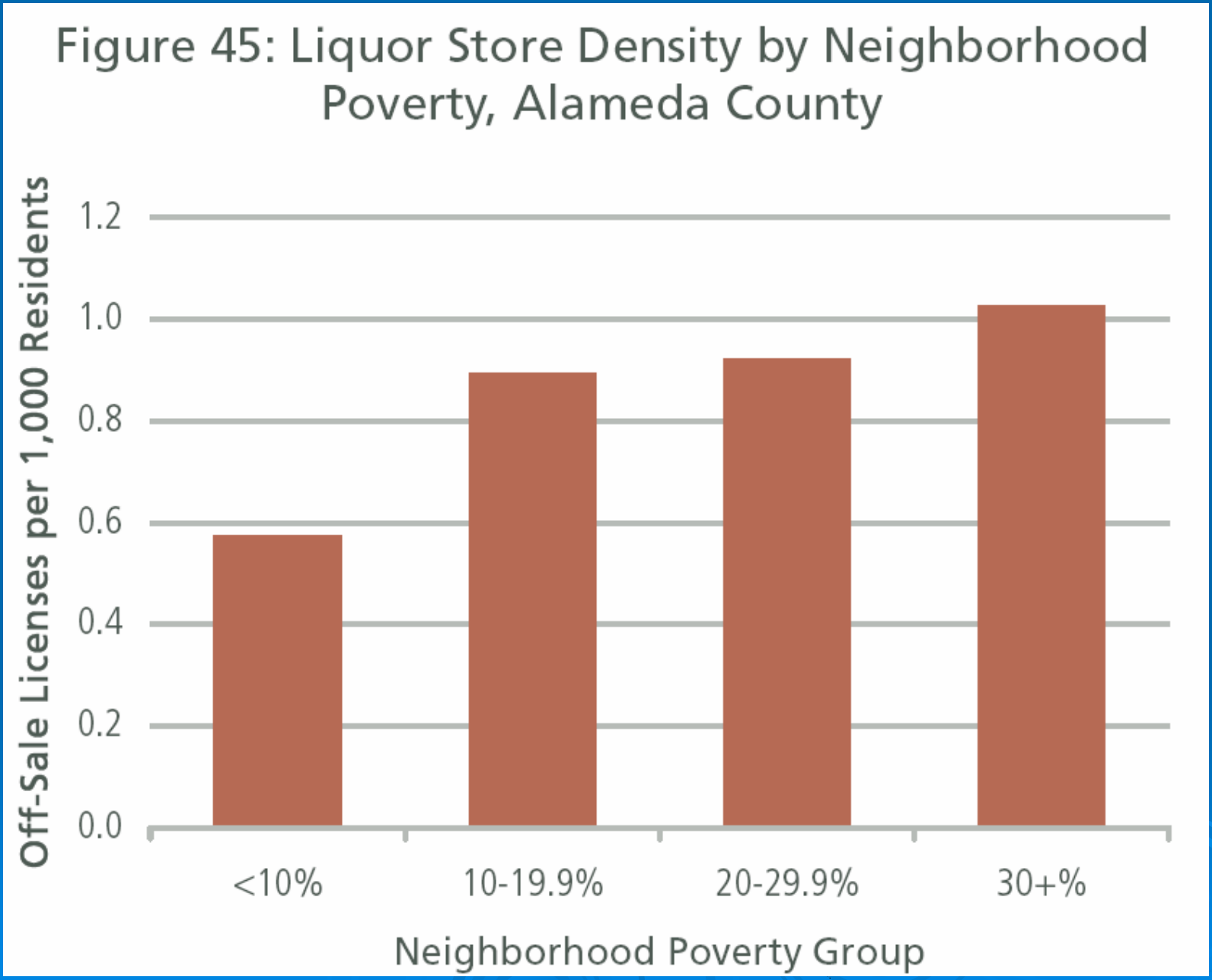


Figure 45: Liquor Store Density by Neighborhood Poverty, Alameda County
Off-Sale Licenses per 1,000 Residents
1.2
1.0
0.8
0.6
0.4
0.2
0.0
<10%
10-19.9%
20-29.9%
30+%
Neighborhood Poverty Group

Race/ethnicity

Class

Gender

Immigration
status

Is This All Just Chance?

Why Don’t They Just Move?

II

That plaintiffs are the owners of lots or parcels of land within and being a portion of Tract 597, Washington Township, Alameda County, California, as said tract is delineated and so designated on map thereof recorded in the office

"It is necessary that properties shall continue to be occupied by the same social and racial groups"- Federal Housing Administration Underwriting Manual 1938 in recommending racially restrictive covenants.

S. Clarke, Ada E. Howe, E. W. Stenhammer, and Esther Stenhammer,

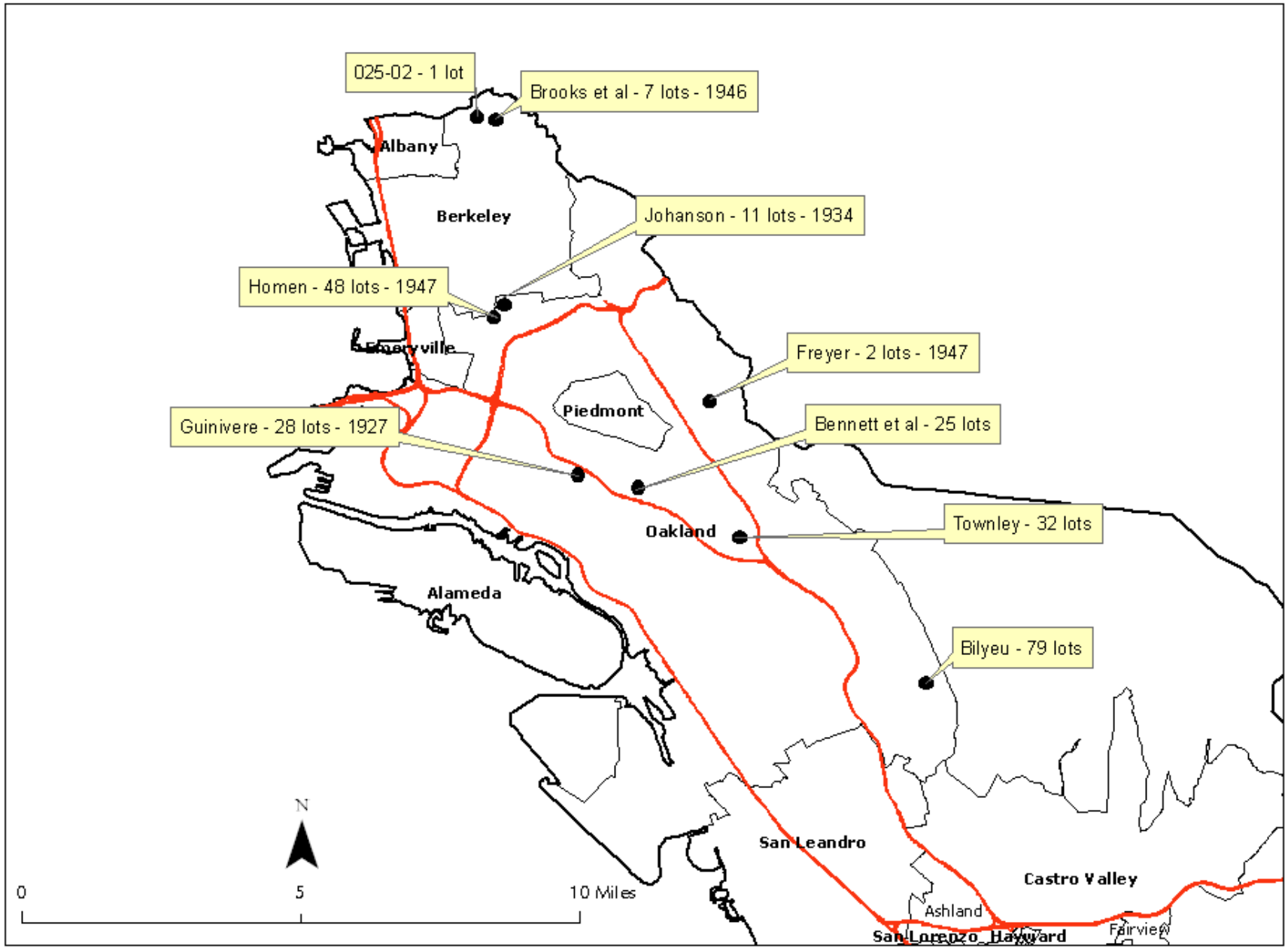
did execute and thereafter cause to be recorded on the 30th day of April, 1941, in Book 4058 of Official Records, at page 211, in the office of the County Recorder of Alameda County, California,

"(5) no person or persons of the Mexican race, or other than the CAUCASIAN race shall use or occupy any building or any lot, except that this covenant shall not prevent occupancy by domesti servants of a different race domiciled with an owner, tenant or occupant thereof.

at which time said covenants and restrictions shall terminate.

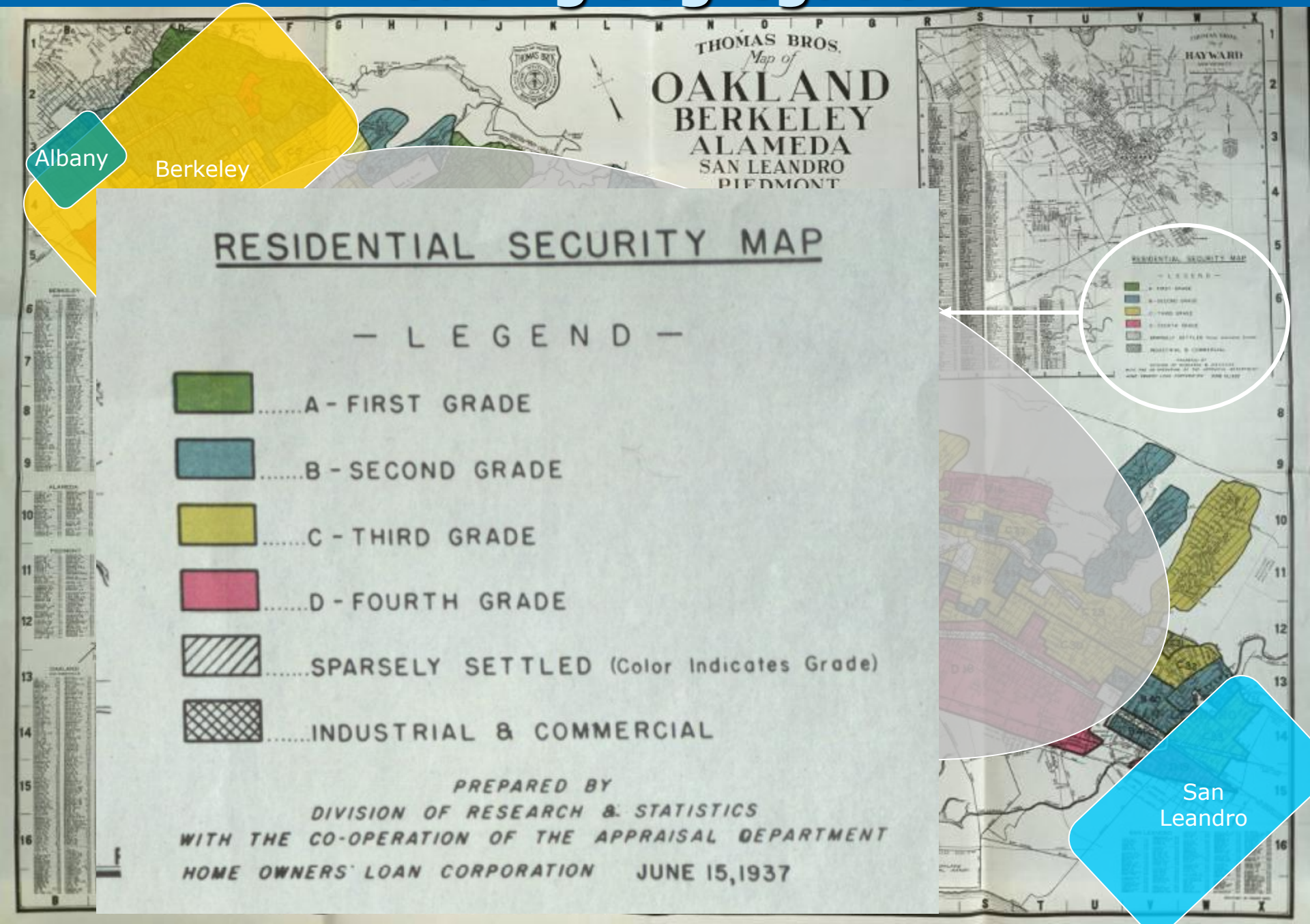
"(10) If the parties hereto, or any of them, or their heirs, successors or devisees, executors or administrators or assigns, shall violate, or attempt to violate, any of the covenants or restrictions herein contained before January 1, 1961, any owner or owners of the remainder of the premises herein described, or of

Racially Restrictive Covenants

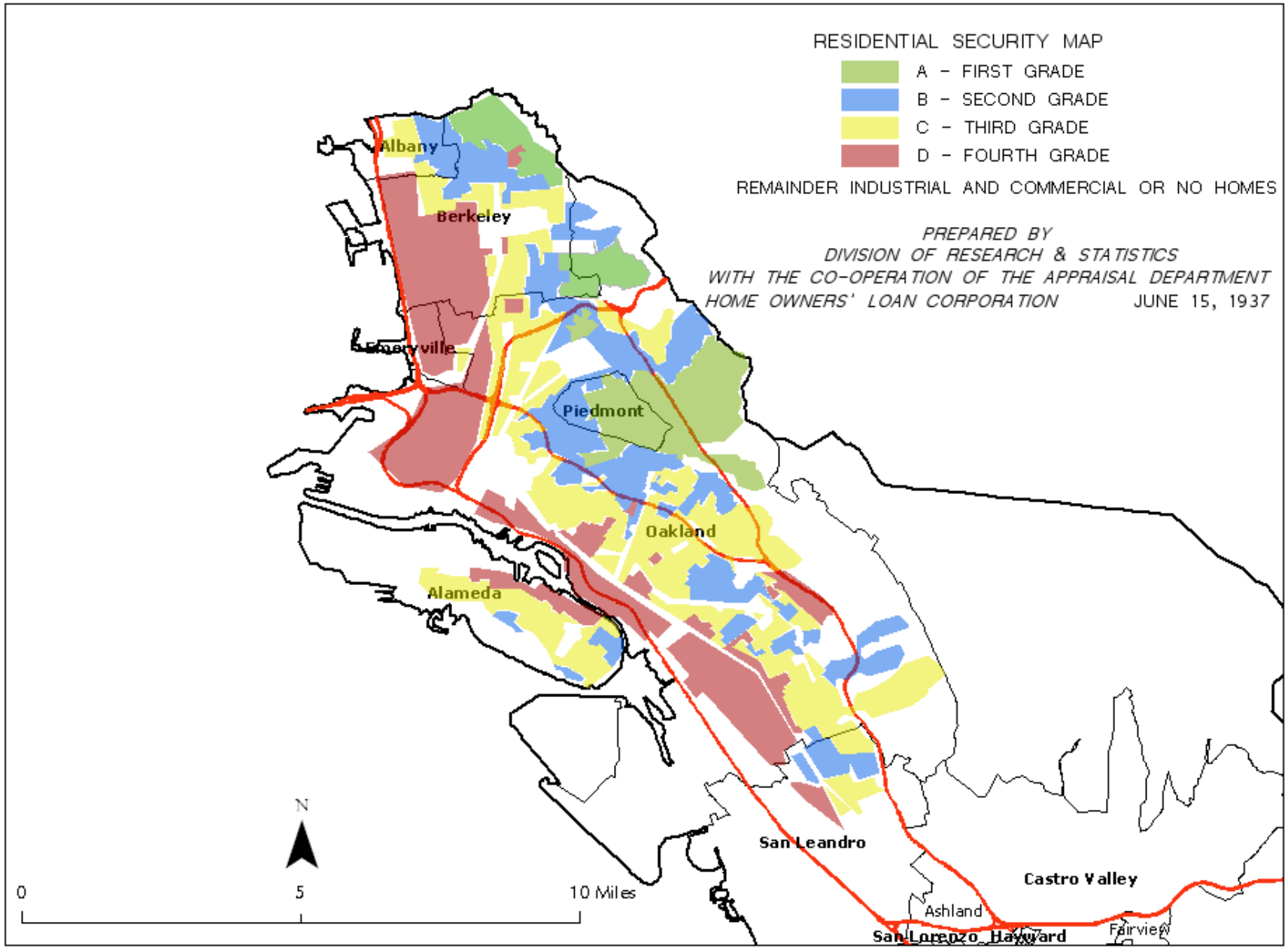


Source: CAPE, with data from Alameda County Recorder.

Housing Segregation

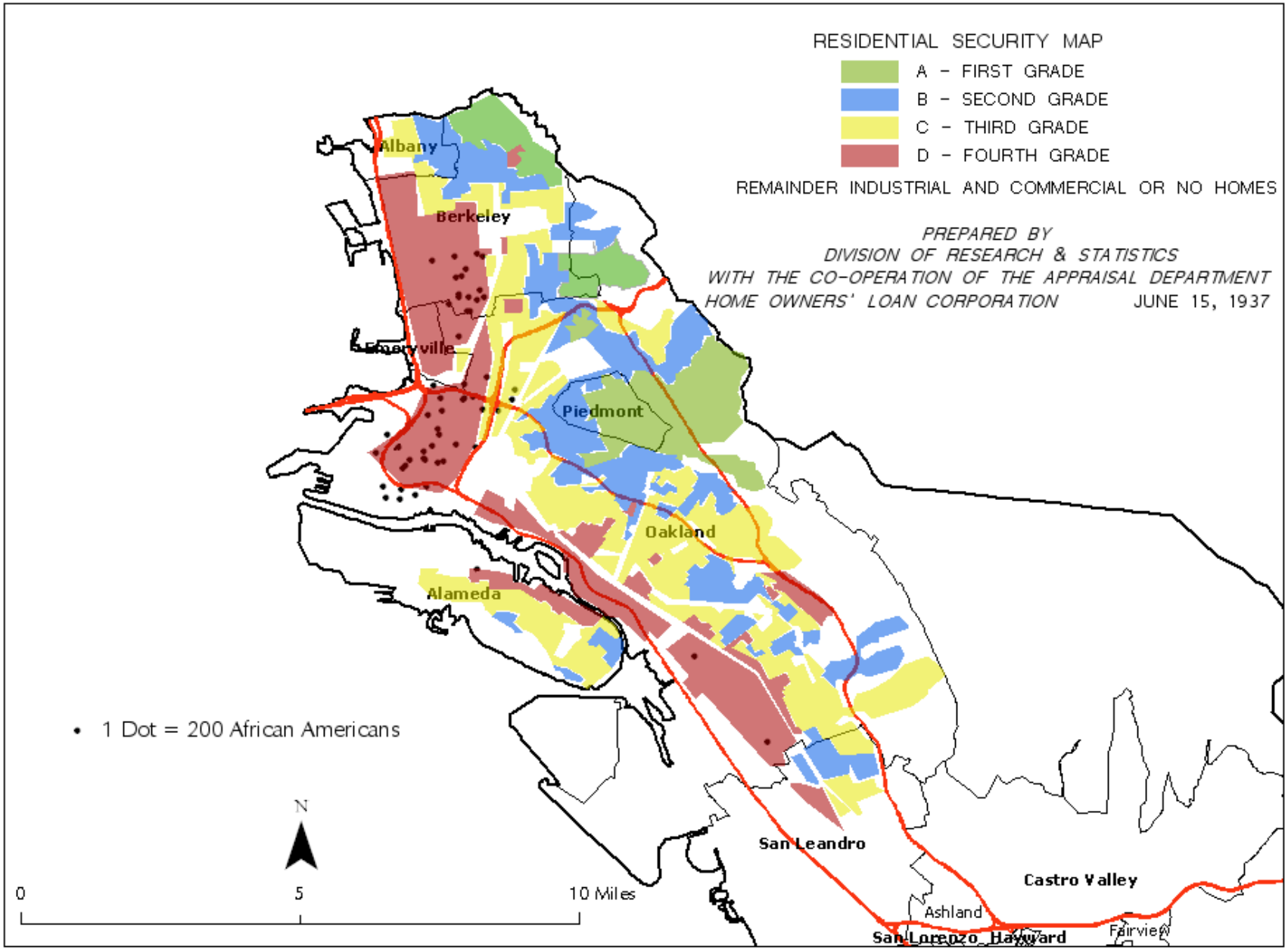


Oakland and Surrounding Alameda County



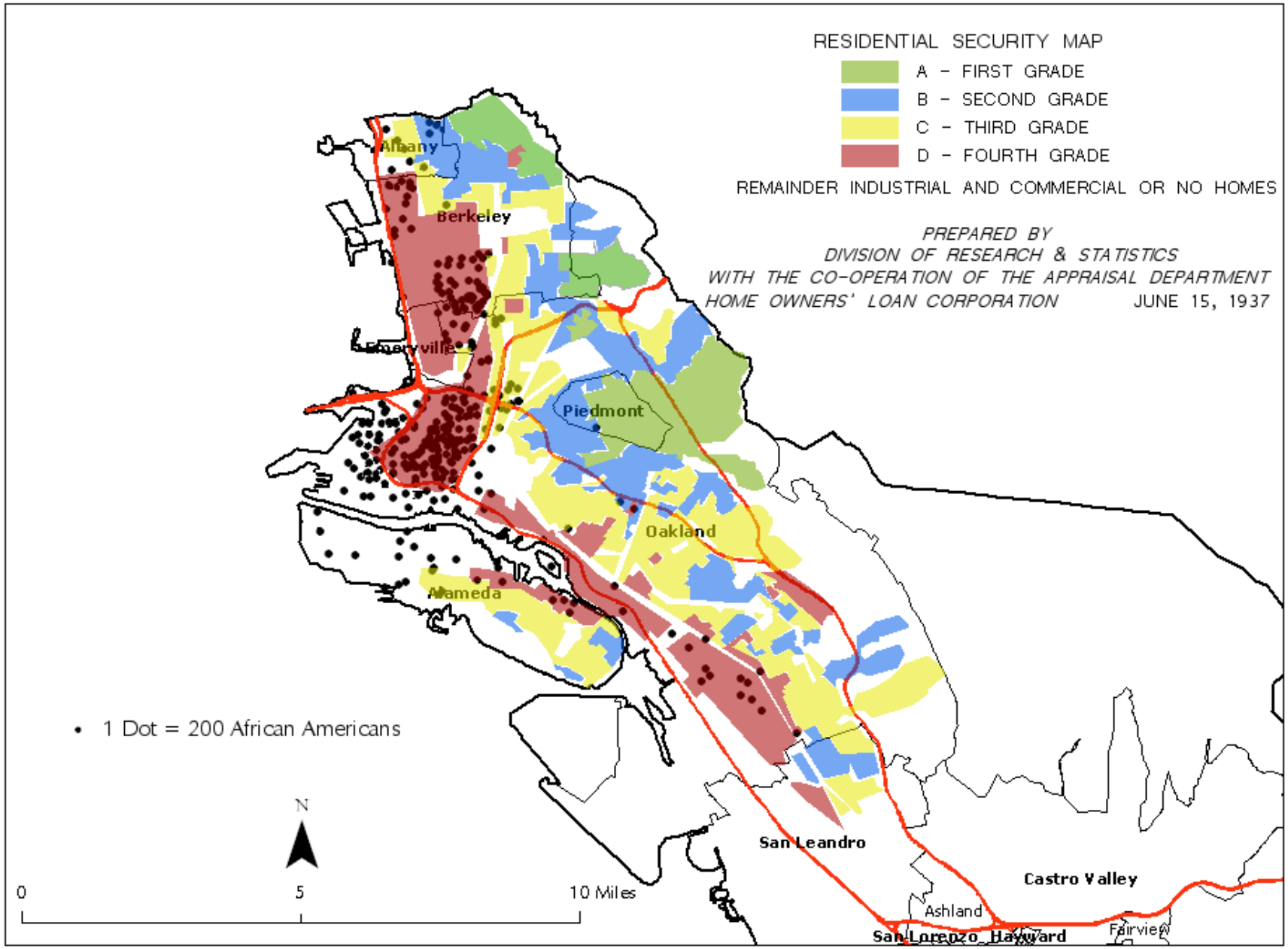
Source: CAPE.

African Americans in 1940



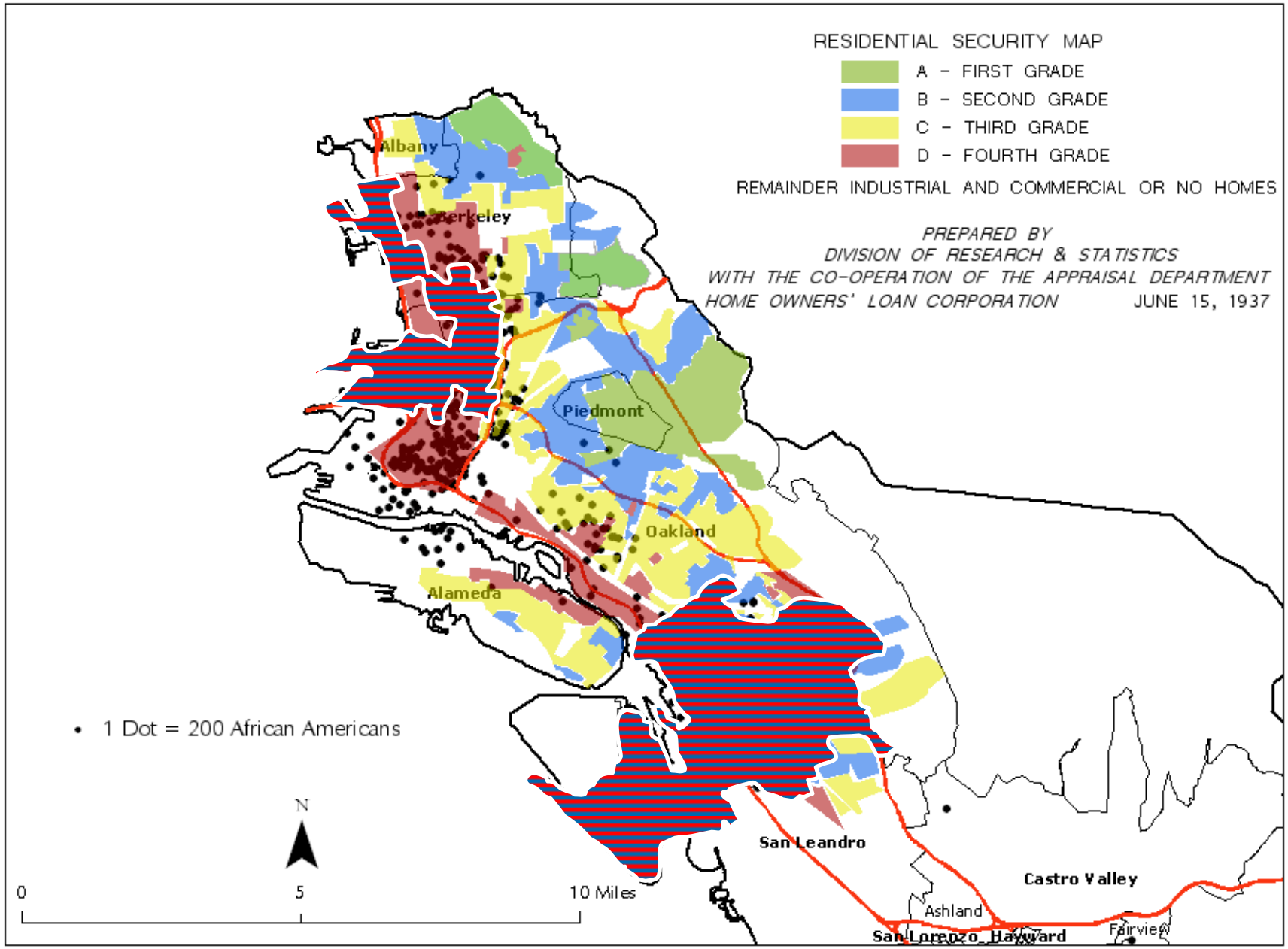
Source: CAPE, with data from Census 1940.

African Americans in 1950



Source: CAPE, with data from Census 1950.

African Americans in 1960

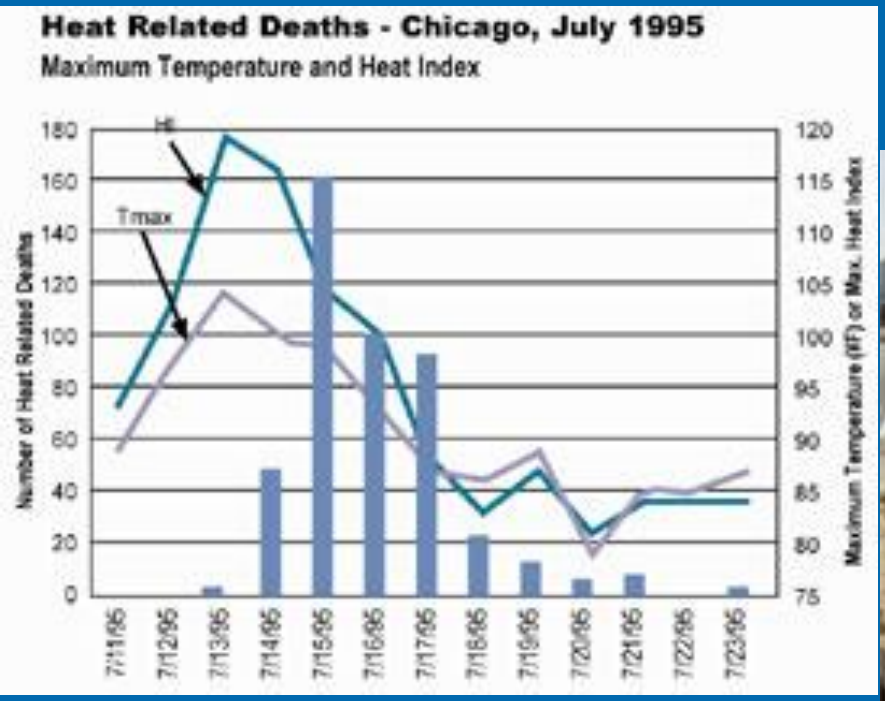


Source: CAPE, with data from Census 1960.

How Segregation Can Affect Health

1. Segregation determines quality of education and employment opportunities.
2. Segregation can create pathogenic neighborhood and housing conditions.
3. Conditions linked to segregation can constrain the practice of health behaviors and encourage unhealthy ones.
4. Segregation can adversely affect access to high-quality medical care.

Source: Williams & Collins , 2001



Results of the statistical comparison of weather and deaths over 12 years show that blacks and those with a high school education or less are most likely to die on extremely hot days.

– Harvard School of Public Health study of almost 8 million deaths in 50 cities from 1989 to 2000.

“The heat wave was a particle accelerator for the city: It sped up and made visible the hazardous social conditions that are always present but difficult to perceive.”

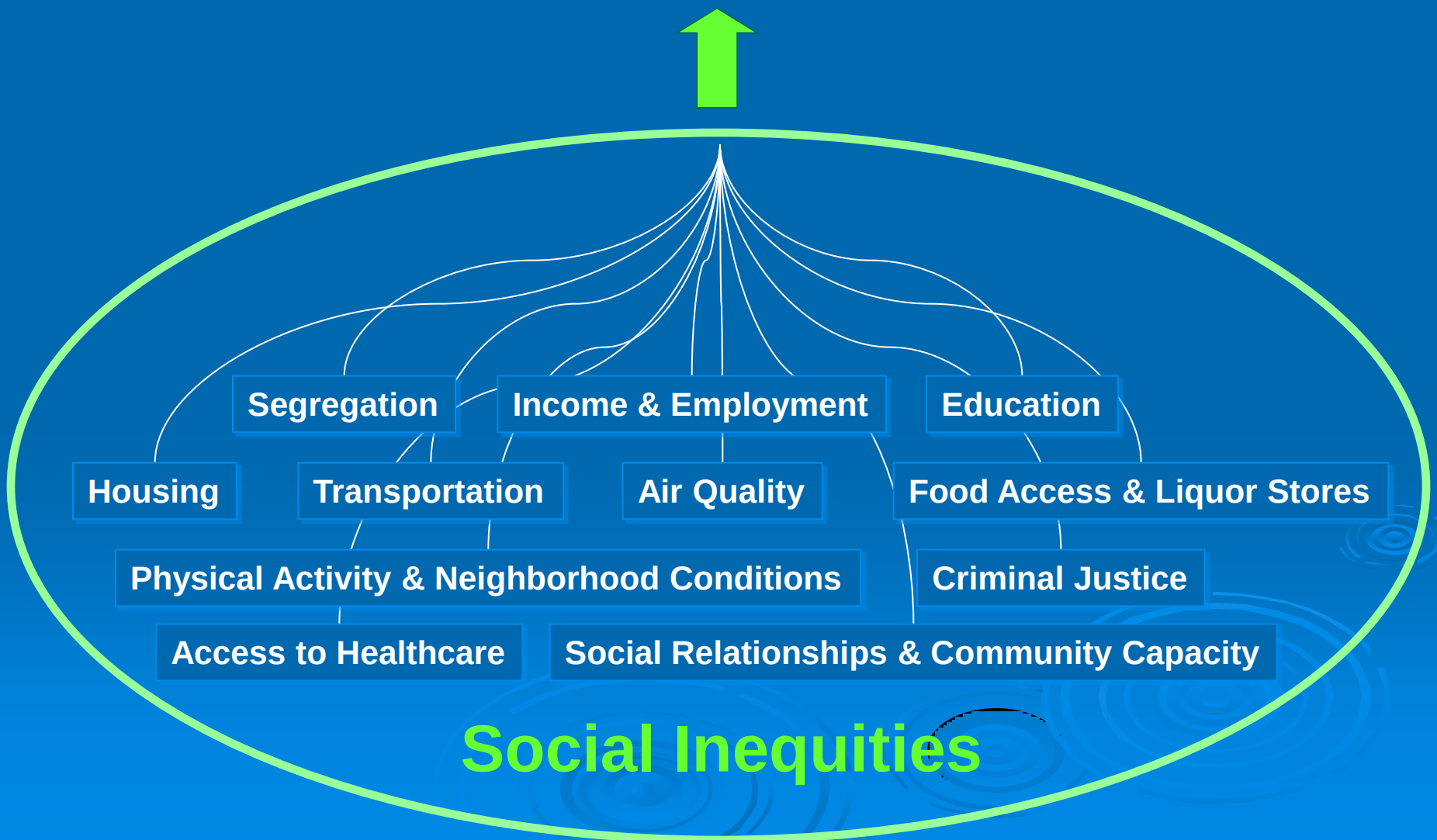
“ Yes, the weather was extreme. But the deep sources of the tragedy were the everyday disasters that the city tolerates, takes for granted, or has officially forgotten.”-

Eric Klineberg, author of Heat Wave

Disparities are the tip of the iceberg…

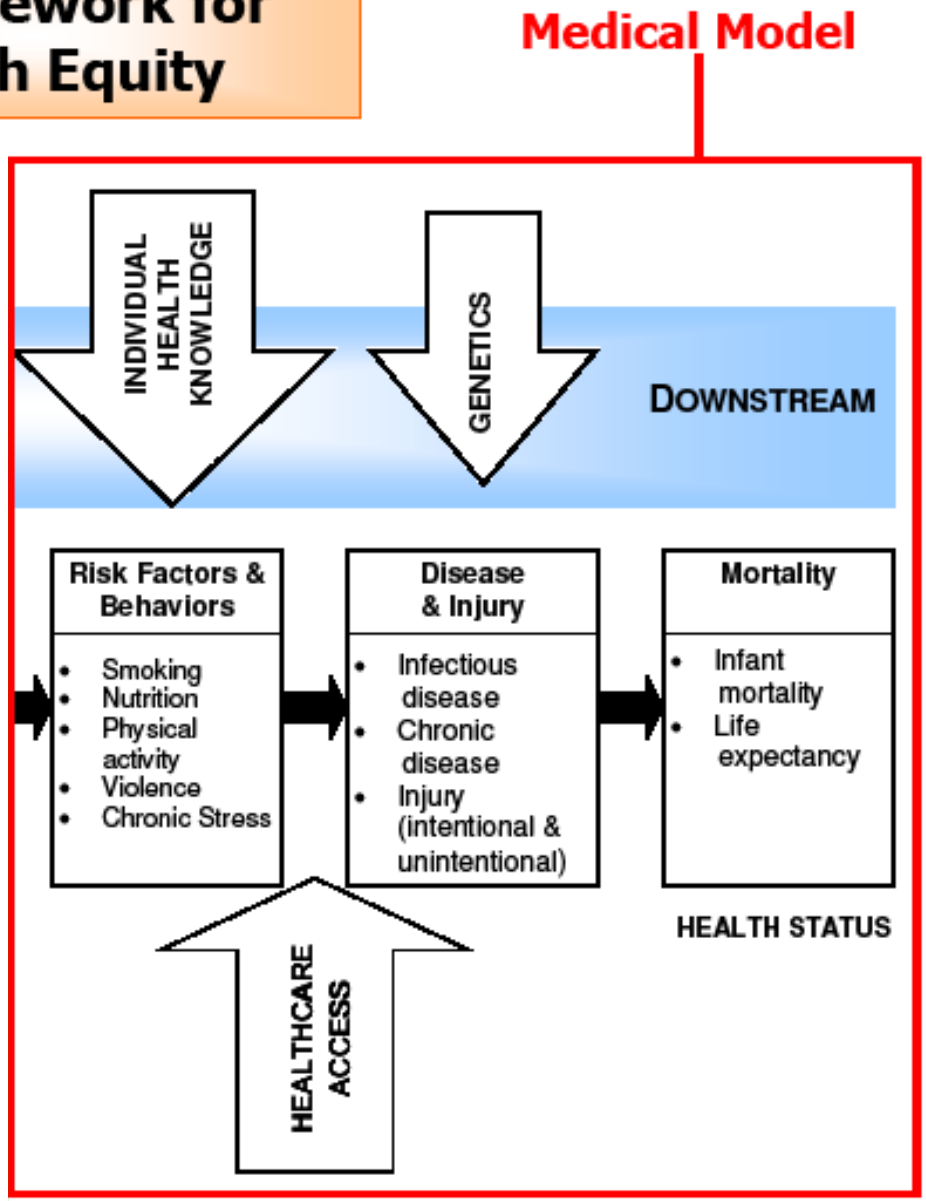
Social Inequities

Health Inequities



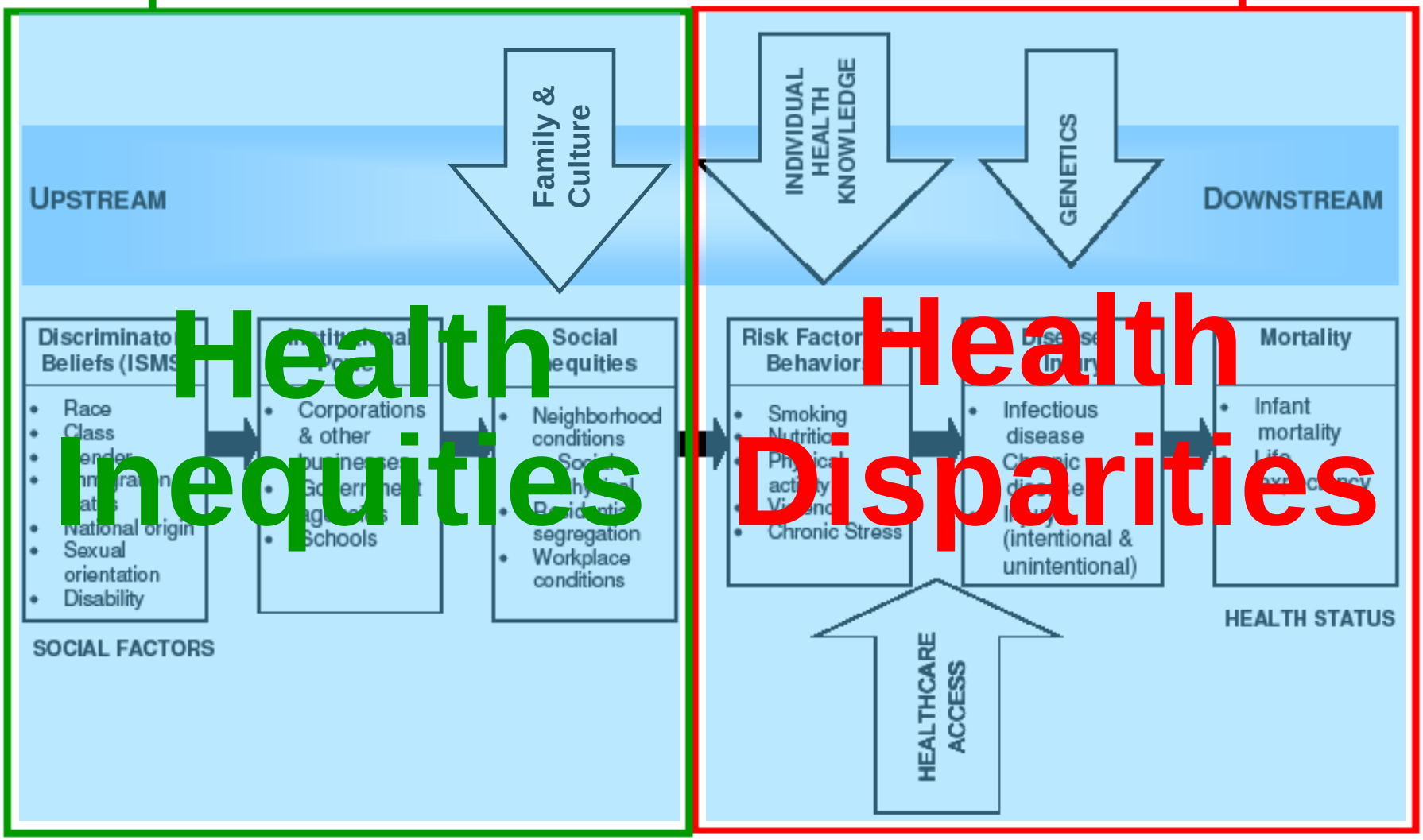
A Practitioner's Framework

A Framework for Health Equity



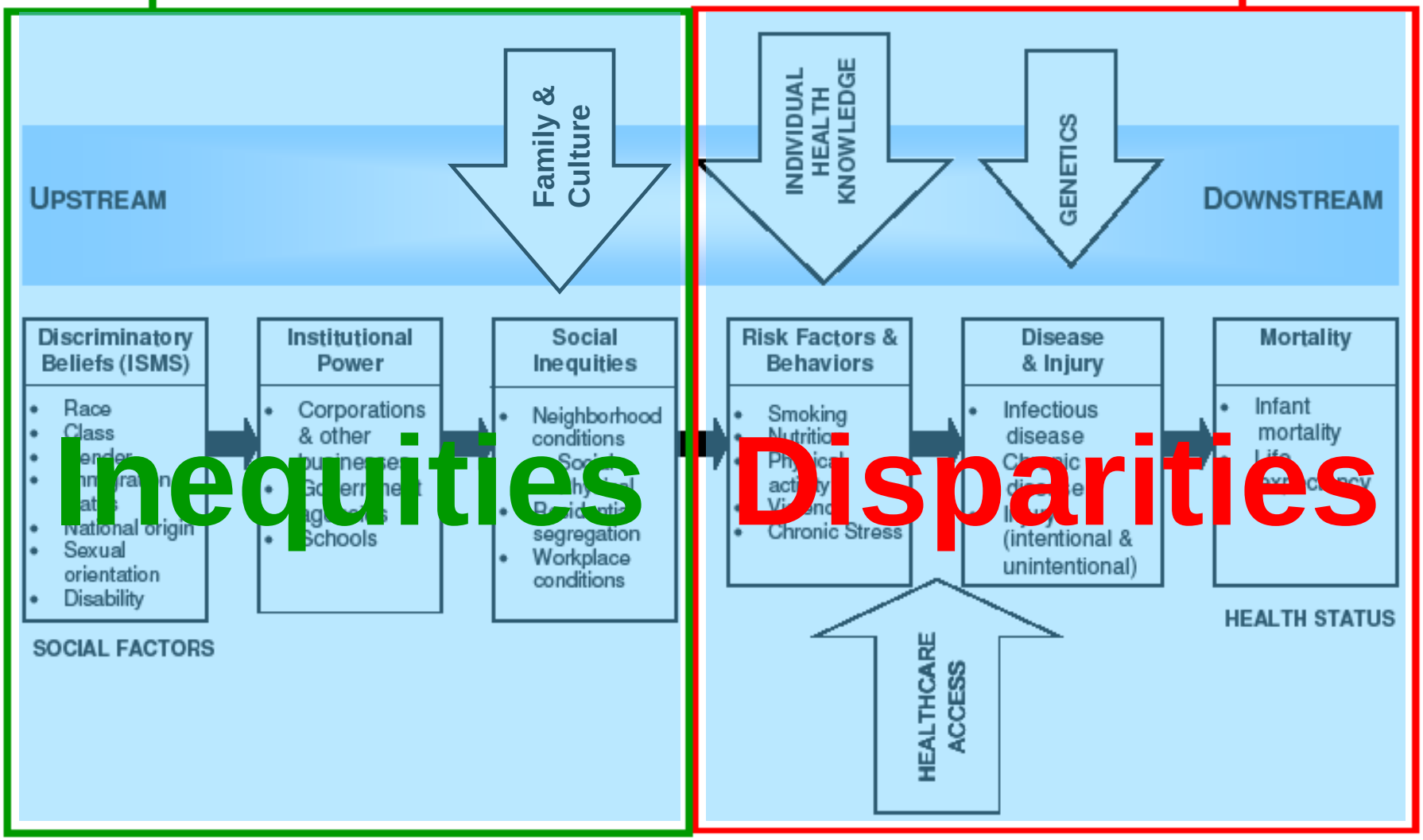
- Adapted by ACPHD from the Bay Area Regional Health Inequities Initiative, Summer 2008

A Framework for Health Equity



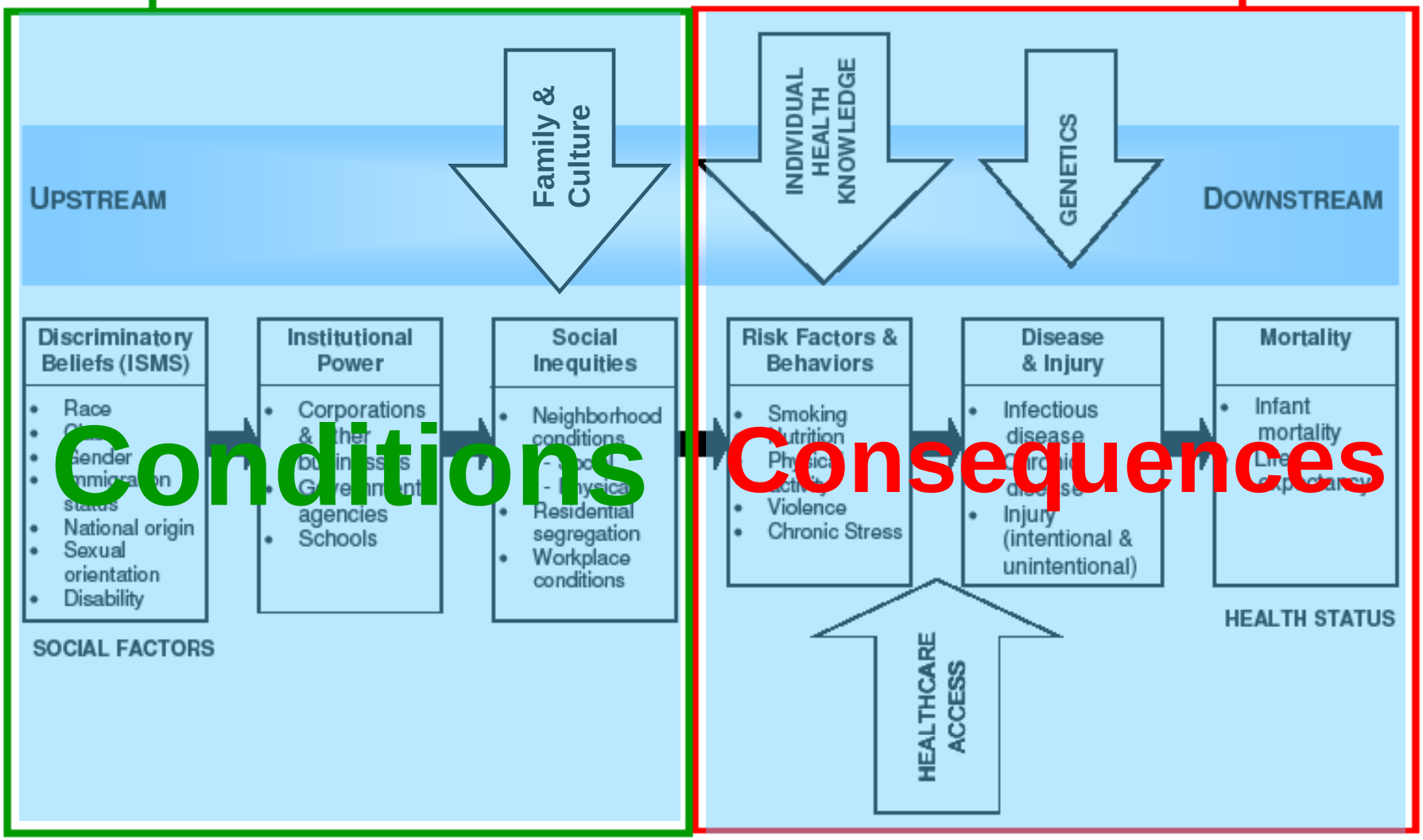
- Adapted by ACPHD from the Bay Area Regional Health Inequities Initiative, Summer 2008

A Framework for Health Equity



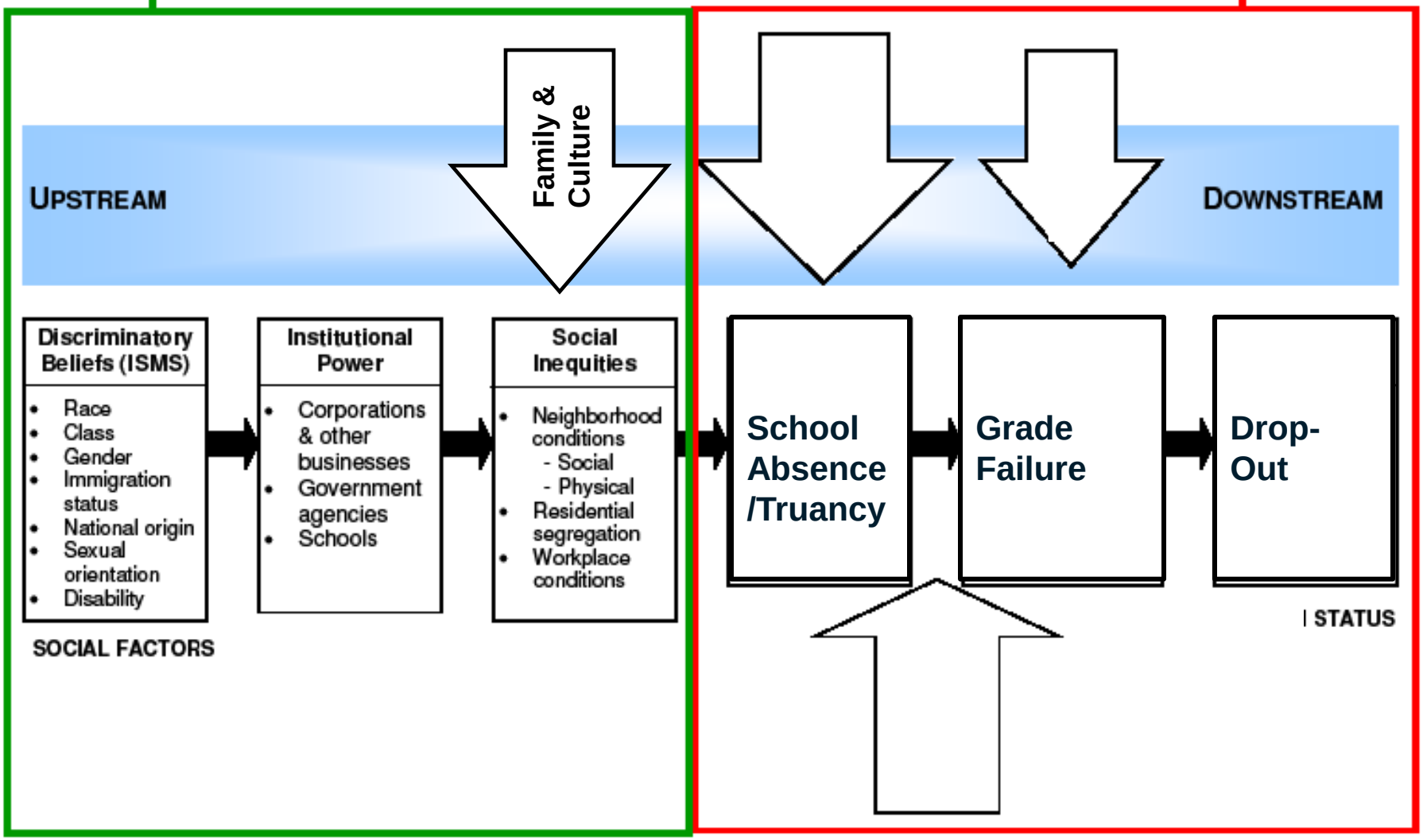
- Adapted by ACPHD from the Bay Area Regional Health Inequities Initiative, Summer 2008

A Framework for Health Equity



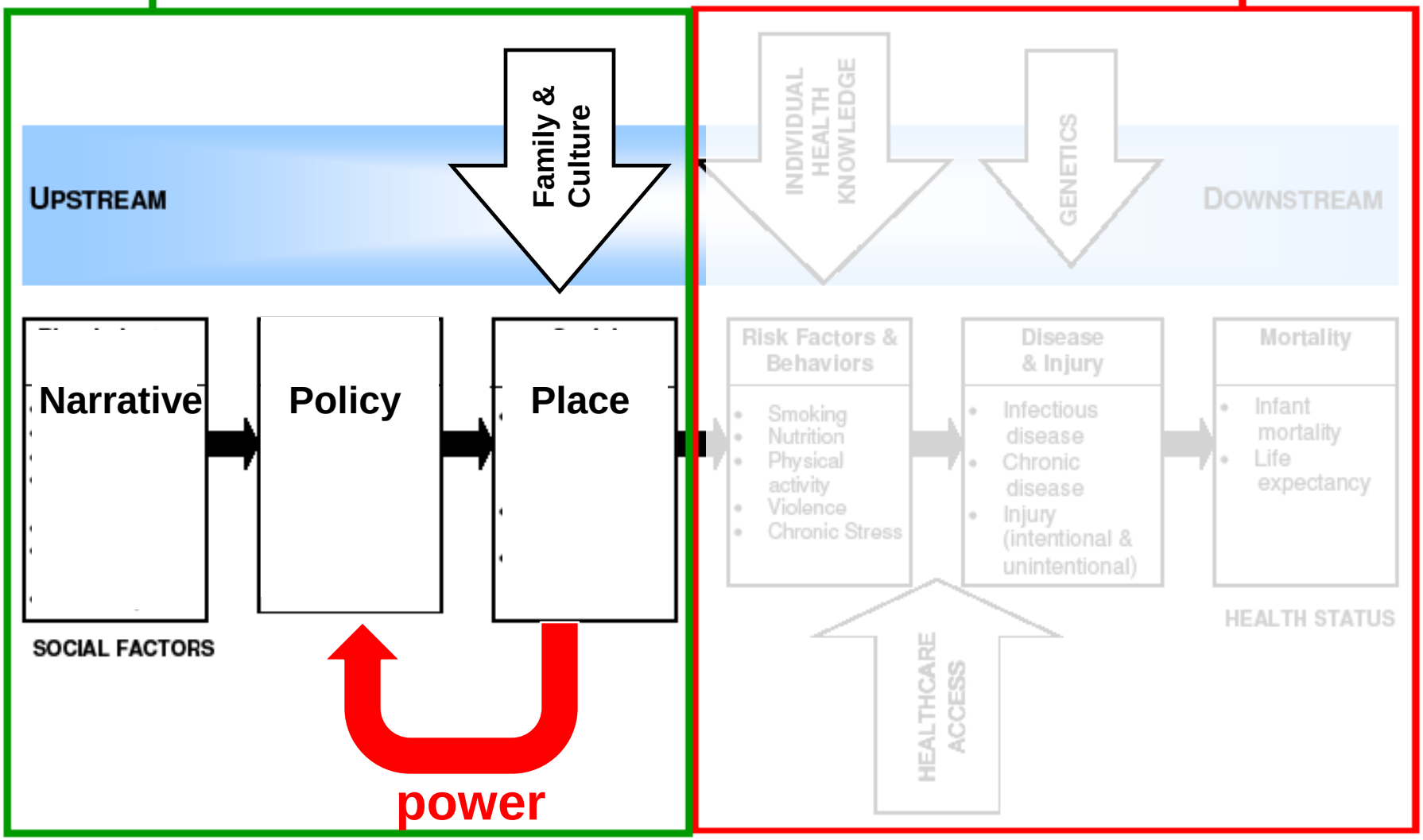
- Adapted by ACPHD from the Bay Area Regional Health Inequities Initiative, Summer 2008

A Framework for Health Equity



- Adapted by ACPHD from the Bay Area Regional Health Inequities Initiative, Summer 2008

A Framework for Health Equity



- Adapted by ACPHD from the Bay Area Regional Health Inequities Initiative, Summer 2008

Building Healthy Communities

The California Endowment

How Do We Undo "Hazardous Social Conditions"?

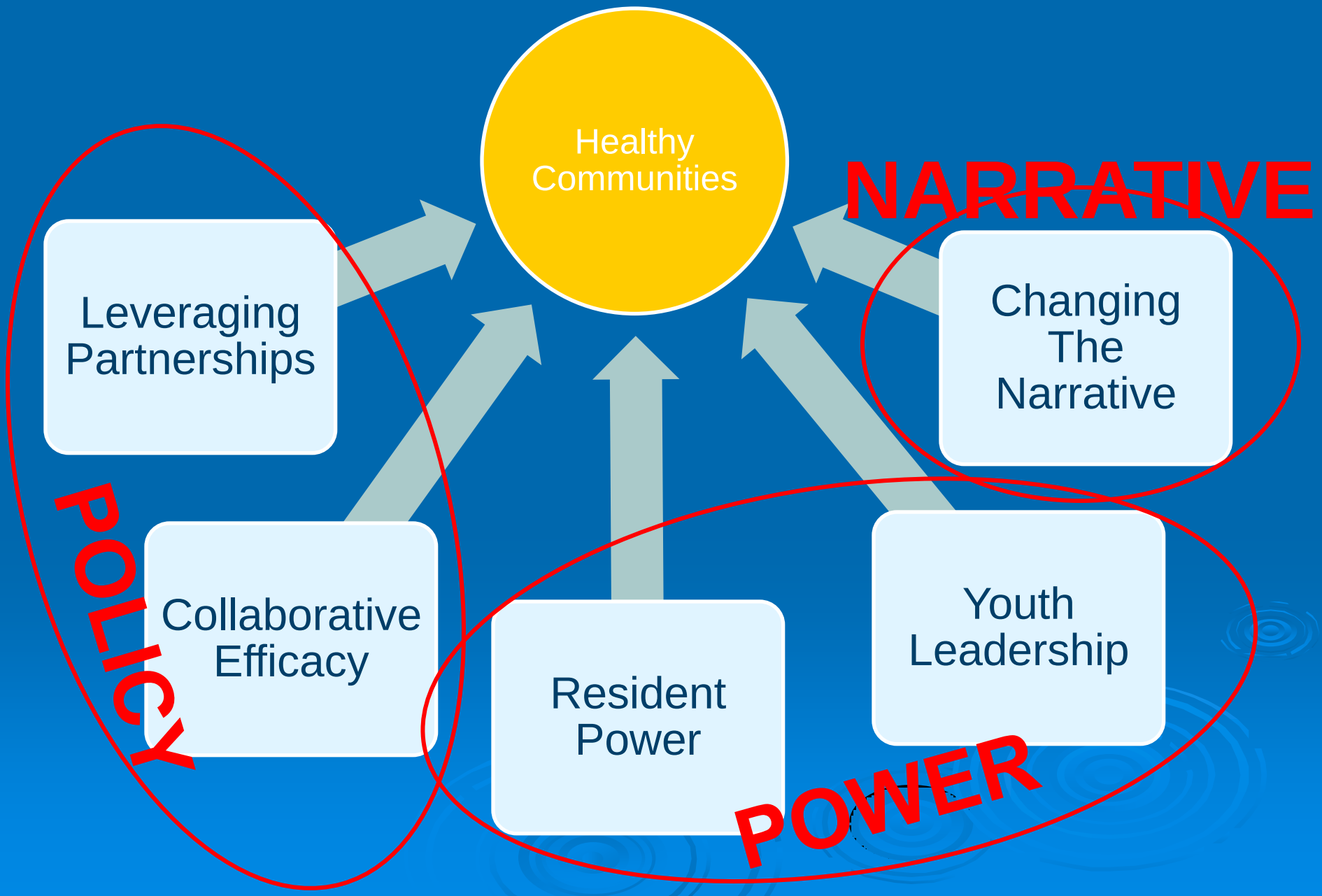
Zip code

Life expectancy

Human Capital: Our Greatest Resource

The “How”

Our Approach in Broad Strokes


Healthy Communities
NARRATIVE
Leveraging Partnerships
Changing The Narrative
POLICY
Collaborative Efficacy
Resident Power
Youth Leadership
POWER

Building Power & Leadership

health happens here

In Neighborhoods

health happens here

In Schools

health happens here

With Prevention

- Health promoting land use policies incorporated into planning instruments
- Joint use strategies
- Walkability/bikeability
- Parks & open space
- Mixed income housing
- Supermarkets, community gardens, farmers markets
- Reducing fast food and liquor store density

The California FreshWorks Fund

The California FreshWorks Fund is a public-private partnership loan fund intended to finance grocery stores and other forms of fresh food retail and distribution in underserved communities throughout CA. It is modeled after the PA Fresh Food Financing Initiative and it has been developed to align with the National Healthy Food Financing Initiative.

Fund Size:	$264 million
Uses of Capital:	Loans & Grants to Grocery Stores & Other Fresh Food Retailers & Distributors
Capitalization:	Debt & Grants
Program Eligibility:	Program Guidelines to be released shortly
Launch:	July 2011

FRESH WORKS™
THE CALIFORNIA FRESHWORKS FUND
Healthy Food. Closer To Home.

Changing The Narrative

ContraCostaTimes.com

THE SUN

Sunday, December 6, 2009

A&E: '39 STEPS' A SALUTE – AND SLAP ON THE BACK – TO SIR ALFRED

Local actions, global impact

■ Berkeley solar plan among steps taken worldwide to address climate change

By Mike Taugher

mtaugher@bayarenanews.com

Last month, the city of Berkeley wrapped up a one-year experiment in which 18 residents were able to install solar panels with little out-of-pocket expense. The effort was part of a city plan to combat global warming.

The pilot hit a few snags but was promising enough that a coalition of as many as 14 counties is now seeking a grant of federal stimulus funds to dramatically expand it. In October, the Obama administration announced plans to foster similar programs across the country as part of its "Recovery Through Retrofit" initiative.

As environment ministers from around the world gather in Copenhagen this week to try to reach agreement on cutting greenhouse gas emissions, the nitty-gritty work of doing that falls on state and local shoulders. And perhaps nowhere is that truer than in the Bay Area.

The steps are early ones, to be sure, but as the international debate focuses on how deeply to cut global emissions and how much financial assistance to offer developing countries, cities and counties in the Bay Area and beyond already are measuring emissions and drawing up plans to reduce them.

"It has been a bottom-up, state and local government-led effort," said Richard Frank, director of

See CLIMATE, Page 8

MORNING REPORT

Climate change at

SHORTENED

WALNUT CREEK, 94597: Richard Angelis does yardwork at his home. Residents in the affluent neighborhood have the highest life expectancy in the East Bay.

Life-and in East

Disparities in how long people live

Life expectancy at birth, in years

75.3

78.5

205 BAY AREA NEWS GROUP A7

tension. He had colon cancer surgery when he was 45. The couple focus on eating well, and he won a church cooking competition with a "Chicken Jacon" recipe handed down through his family.

They don't have a scar, and Edel said she has been robbed twice at bus stops in the area, once at gunpoint. "The stress level is high because we all the time are thinking something is going to happen to us, with the high crime in East Oakland," she said.

This fall, she received a $1,500 grant from an Oakland nonprofit, CEO Women, to start her own home-based business. She plans to open the office services business in January, which she hopes will ultimately allow the family to move out of the area.

Middle-class worries

Rettig doesn't worry about crime in her Castro Valley neighborhood, but finances are a constant concern. She raised two children in her two-story home, was diagnosed with breast cancer in 1998, and the end of a 23-year marriage in 2004 left her watching every dollar. She remarried in 2006.

Rettig worries about the proposed closing of the hospital where she works. A new job means lower seniority and maybe less desirable shifts. She and her husband, Dan Dwyer, 61, still watch expenses carefully, clip coupons and never eat out. Sales at the window treatment business her husband owns cycle with the economy.

She once dreamed of putting her children, now 30 and 32, through college. But she revised that dream to letting them live at home for free and paying for their health insurance, so long as they stay in school and cover their other expenses.

The middle class, who typically have ample food, convenient transportation and safe neighborhoods, are still older and live longer than wealthier Americans.

Top of the scale

Inside his Walnut Creek home, Angelis appeared surprised that his unpretentious neighborhood boasts the longest life expectancy of any ZIP code in Alameda and Contra Costa counties.

"It's one of the funkier neighborhoods in Walnut Creek," he said, which was part of its appeal.

It's been much easier to enjoy his passion for biking since he and his wife moved there 14 years ago from the Oakland foothills. Here, Angelis can ride from his home to join friends on the area's many bike routes, or take a walk after work.

Still, they strain to help pay college costs for their son, now a sophomore. They're also paying off a loan for college expenses for their daughter, who graduated in

SHORTENED LIVES

A series of stories exploring health inequities in the East Bay.

■ TODAY: East Bay life expectancies linked to neighborhoods.

■ MONDAY: The geography of asthma and heart disease.

■ SUNDAY, DEC. 13: Closing the inequity gap.

■ MONDAY, DEC. 14: Personal responsibility and social action.

How East Bay health inequities were examined

By Sandy Kleffman and Suzanne Bohan

Staff Writers

Death certificates and hospital reports provided the base on which to study the East Bay's striking health inequities.

Staff writers Sandy Kleffman and Suzanne Bohan produced the Shortened Lives series as a project for the California Endowment Health Journalism Fellowship, administered by the University of Southern California Annenberg School of Journalism.

Epidemiologist Matt Beyers, of the Alameda County Public Health Department, did the statistical analysis and mapping for the newspaper group.

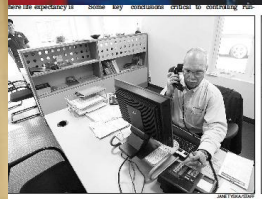
To explore how life expectancy varies among ZIP codes, Beyers used death certificate data from 1998 to 2003 for Alameda and Contra Costa counties.

He then took population breakdowns from the 2000 U.S. census and adjusted the life expectancy numbers to compensate for age differences among ZIP codes. This was necessary so that areas with a large percentage of seniors or young children would not show the results.

The listed cause of death provided the basis for determining heart disease and cancer mortality rates. Beyers computed an annual rate per 100,000 population for each ZIP code, and adjusted the numbers to compensate for age differences in each area.

He decided to use death certificates from 1998 to 2003 because he could obtain age breakdowns by ZIP code for that period from the 2000 census. In recent years, life expectancies have probably climbed slightly and rates of heart disease and cancer deaths have probably dropped slightly. But the disparities among ZIP codes have not changed significantly, he said.

To determine asthma hospitalization rates, Beyers obtained hospital re-



d Angelis, of Walnut Creek, works in November at Weatherford BMW in Berkeley. s reduces stress by cycling about 70 miles a week in Walnut Creek and Alamo.

Julie Rettig, her husband, Dan Dwyer, Rettig's daughter Willie Wiest and Nineish Campbell, whom Wiest baby-sits, live in a middle-class Castro Valley neighborhood.

STOCKTON
95202
Life Expectancy
73
IRVINE
92606
Life Expectancy
88
Your ZIP Code shouldn't predict how long you'll live, but it does.
www.calendow.org
health happens here

health happens here
health happens here

1

PLACE

2

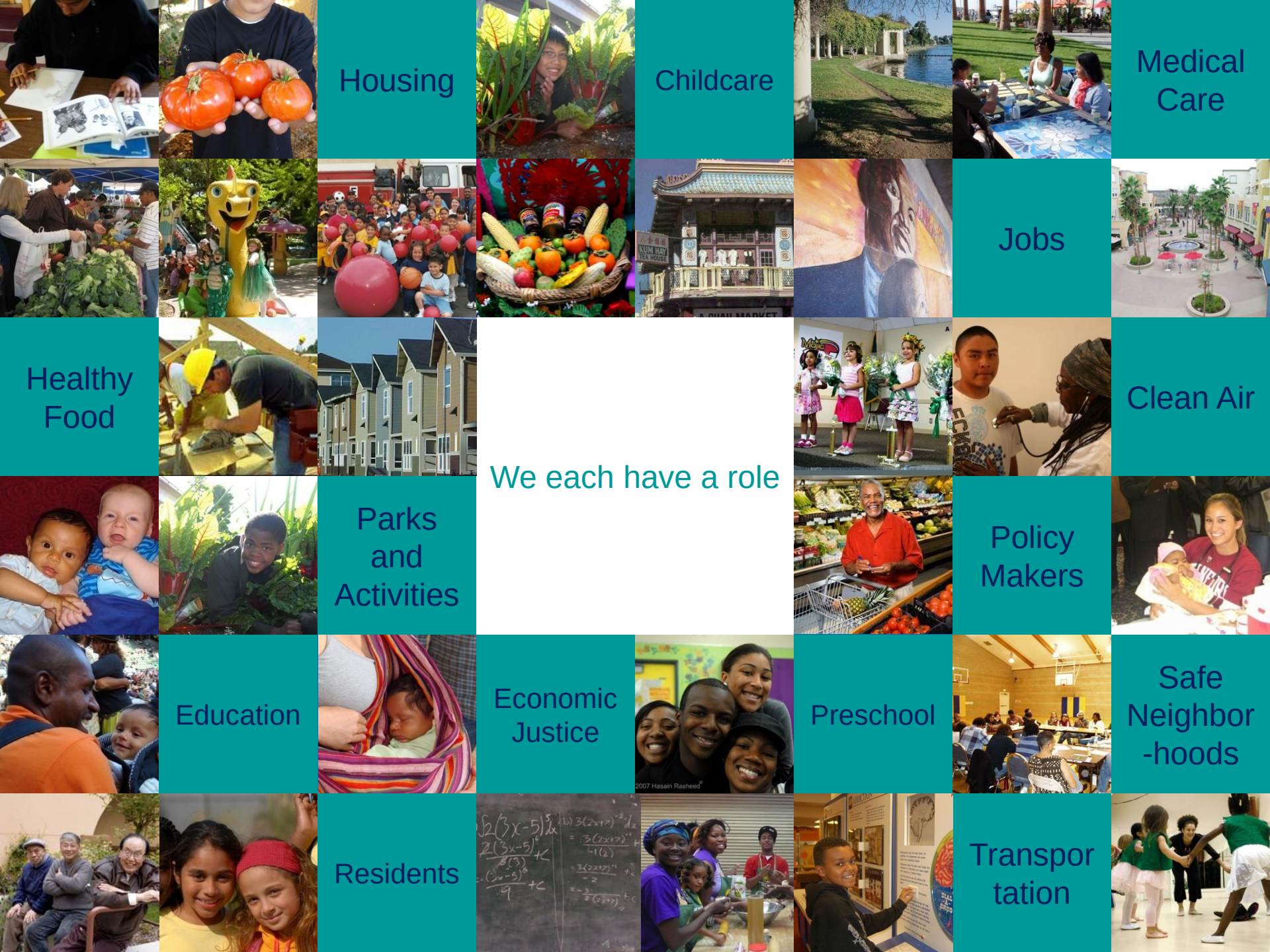
POLICY

3

NARRATIVE

Conclusions

- In Milwaukee, infant mortality rates – and premature birth rates (the #1 driver of infant mortality) – constitute a true public health crisis.
- Racial and ethnic disparities in infant mortality and prematurity are staggering.
- There are both individual and societal benefits from reducing infant mortality along with racial and ethnic disparities.
- Socioeconomic factors are main drivers of infant mortality and prematurity. These socioeconomic factors include (among others): income/poverty; early education & childcare; employment & related issues; and healthy neighborhoods.
- These factors – the topics of today's breakout sessions – are addressable through public policy, and everyone concerned with healthy birth outcomes should be involved in improving public policy in order to improve birth outcomes and reduce disparities.


Housing
Childcare
Medical Care
Jobs
Healthy Food
Clean Air
We each have a role
Parks and Activities
Policy Makers
Education
Economic Justice
Preschool
Safe Neighbor -hoods
Residents
Transpor tation

Contact Information

Tony Iton, MD, JD, MPH
Senior Vice President
The California Endowment

Aiton@calendow.org
(510) 271-4310