



Bay Area Regional Health Inequities Initiative

Alameda County | City of Berkeley | Contra Costa County | Marin County | Napa County | City and County of San Francisco | San Mateo County | Santa Clara County | Santa Cruz County | Solano County | Sonoma County

March 6, 2013

Dear Chairman Nichols and Board members:

The mission of the Bay Area Regional Health Inequities Initiative (BARHII), a collaborative of eleven local public health departments in the San Francisco Bay Area and the County of Santa Cruz, is to eliminate health inequities – unjust differences in health status and life expectancy – between different socio-economic, racial, and ethnic groups in our region. Throughout our service area of over 7.4 million people, on average there is a 10-year difference in life expectancy between people living in poor neighborhoods and those living in affluent neighborhoods; in some localities these differences are as high as 14 years. Differential access to quality healthcare accounts for only a small portion of these inequities; economic and living conditions play a much larger part.

As you consider the most beneficial ways to spend funds generated by Cap and Trade, we urge CARB to look for the opportunities that will also provide the most health-promoting conditions for our state's residents, and in particular for our most vulnerable communities. As health outcomes rest on the socio-economic conditions in which people live, opportunities for the added benefit of bringing long-term job and economic growth for low-income and disadvantaged communities and households should be an overall consideration.

We strongly encourage CARB to prioritize funding that yields co-benefits through greenhouse gas emission reductions strategies that promote healthier communities.

Physical Activity Opportunities:

Efforts to reduce transportation GHG emissions must incorporate strategies to reduce vehicle miles traveled. Increasing funding for active transportation (biking, walking, using public transit) will increase and incentivize opportunities for physical activity. Increased physical activity is associated with decreases in premature mortality, diabetes, obesity, cardiovascular disease, some cancers, osteoporosis, depression and increased overall well-being. We urge you to place a very high priority on funding of public transit. Consider funding programs that maximize opportunities for using public transportation, the State Transit Assistance Program (STA), infrastructure for safe biking and walking, and programs to promote walking and biking (e.g. Safe Routes to School).

To complement these efforts, funding should also address efforts to reduce pedestrian- and bicycle-related injuries, such as vehicle speed reduction and other traffic calming

measures; community policing strategies to improve safety of streets and parks; and Crime Prevention Through Environmental Design strategies.

Housing Affordability:

As we plan for more compact neighborhoods across the state, we need to also ensure that vulnerable communities are not priced out. Housing affordability is key to the success of GHG reduction strategies.

The Transit Oriented Development (TOD) Housing Program should receive priority funding. Also, programs to ensure that low-income people can also benefit from housing improvements to support climate change goals such as the Energy Savings Assistance Program (ESAP) and the Multifamily and Single-Family Affordable Solar Housing Program (MASH, SASH) should also be considered. These would have the added benefit of lowering energy costs and creating jobs in a growing industry.

Improved Air Quality:

Look for opportunities to improve air quality in our most impacted communities.

Programs that address the following should be included:

- Converting to **Zero and Near Zero Transportation and Fuels**. Special focus is needed on cleaning up the goods movement sector, given the proximity of many disadvantaged communities to ports, rail yards and freight traffic. A rapid transition to the cleanest possible transportation sector will provide dramatic improvements in public health and ensure California makes progress toward federal clean air targets;
- Expansion of clean passenger vehicles and vanpool, car-share, and carpool programs targeting lower income communities;
- Bus retrofits;
- Enforcement of no idling rules;
- “Green” schools

Local Agriculture:

Locally produced food would support several climate change and health goals: GHG reduction, urban greening, and access to healthy food.

Programs that address the following should be included:

- Provision and conversion of existing sites for community gardens and farmers markets (e.g. vacant lots, unused parking lots)
- School and community gardens
- Peri-urban sustainable agriculture and related farm-to-fork efforts

Reduction of Heat Islands:

Ensure that Transit Oriented Development does not exacerbate urban heat islands, which create heat stress, localized air pollution and greater energy demand for cooling. Include more urban greening (community and school gardens, tree canopy), including neighborhood parks, which can be easily accessed without the need to drive. Support programs that provide cool pavement and roofs. Targeting these investments in disadvantaged communities will have the added benefits of controlling utility costs and

providing exercise and stress-reducing opportunities.

Public Health Infrastructure:

Lastly, we request funding that would expand public health programs' capacity to engage and support future climate change mitigation strategies. Ongoing collection and analysis of health data and monitoring of the health impacts of climate change and tools such as the California Department of Public Health's Integrated Transport and Health Impacts Model (ITHIM) provide critical information to inform prioritization and decision-making around how our state should respond to climate change.

We applaud policy makers on recognizing that our state's efforts to address climate change through AB 32 and 1532 and SB 535 can provide important health co-benefits for our state's residents, including our most vulnerable communities. As a public health community we've welcomed the opportunity to join this process and want to thank you for your continued leadership on implementing strategies to address climate change, which when coupled with opportunities for health co-benefits could lead to inevitable health care savings and invaluable gains in health and longevity for the people of our state.

Thank you for your consideration of these comments.

Sincerely,



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