September 15, 2017

Dear Air Resources Board staff:

Thank you for the opportunity to comment on the Draft Guidelines for Administering Agencies of CCI Programs. We are very pleased to see so much attention to public health, equity, public engagement, and the needs of disadvantaged communities. Please accept the below comments and suggested additions to the document from the Climate Change and Health Equity Program in the Office of Health Equity of the California Department of Public Health.

Thanks so much for your consideration and your work on this enormous project.

**1.**CDPH recommends expanding the description of “public health co-benefits to the State” to include not only promoting and protecting public health in general, but also incorporating public health measures that represent the current state of best practice in the field of public health. These would include

* improving living conditions to ensure that all people have full and equal access to opportunities that enable them to lead healthy lives (this is what is known as achieving “health equity”, as defined in CA Health and Safety Code Section 131019.5)
* addressing the underlying social, racial, economic, and environmental conditions that result in health disparities (called social determinants of health).

In order to prioritize resources to address community health disparities, communities facing the most health disadvantage must be identified. Which leads to our second recommendation.

**2.**CDPH recommends the use of the California Healthy Places Index (HPI)\*, in addition to CalEnviroScreen, to identify communities facing health disadvantage. For details of the tool and methodology, please see below as well as here: <http://phasocal.org/ca-hpi/>

* The California Healthy Places Index (HPI) is an interactive data and mapping tool that provides a detailed snapshot of the social determinants of health across California, mapped down to the Census tract level. HPI provides comparison rankings of Census tracts statewide and an accompanying policy action guide. Therefore, the HPI can be a useful tool in prioritizing areas with high levels of social and economic disadvantage for funding, policy, and planning interventions. HPI was developed by the Public Health Alliance of Southern California in collaboration with health departments and data experts across the state. Because the HPI focuses on the social and environmental conditions that contribute to health, policy makers and local agencies can use it to identify actionable policies that would improve health in their community, such as improving transportation access, housing affordability and quality, or access to parks and open space. The tool will soon be updated with a new map and additional indicators, including the Climate Change and Health Vulnerability Indicators for California (CCHVIs; for more info about CCHVIs, see: <https://www.cdph.ca.gov/Programs/OHE/Pages/CC-Health-Vulnerability-Indicators.aspx>).

\*The California Healthy Places Index is currently known as the California Health Disadvantage Index (HDI), but the tool will be updated and renamed the Healthy Places Index soon.

* We suggest that the Healthy Places Index be utilized as a means to 1) prioritize low-income communities for investments (within all of the many low-income communities in the state that qualify for investments under AB 1550, prioritize those that fall in the worst 25% of HPI, for example); and 2) prioritize communities to receive the 65% of CCI funding that is **not** required to be allocated based on DAC status as defined by CES or low-income status per AB 1550 (eg., prioritize communities that fall in the worst 25% of HPI scores for that 65% of funding).
* In the past, public health co-benefits have often been identified generally and subjectively. To optimize public health co-benefits, this process could benefit from a data-driven component. In order to maximize public health co-benefits, CPDH recommends that programs require applicants to (1) clearly identify local high risk public health indicators as described above (health equity and the social determinants of health), and (2) what specific activities and/or policies the projects will include to address these indicators to optimize public health co-benefits. As recommended above, CDPH recommends using the California Healthy Places Index for these purposes.
* In order to assist applicants with these proposed new requirements, CDPH recommends that each CCI program set aside a portion of funds for technical assistance on how to identify and incorporate public health co-benefits for potential applicants, or that it be provided in a centralized manner for all CCI programs.

**3.** Process suggestions to improve participation of communities facing inequities:

* Consider suggesting that agencies participate in an initiative (we believe DWR is engaged in one) that provides up-front funding for low-income communities, rather than requiring them to be reimbursed in arrears.
* Consider adding requirements for robust community engagement in the process of developing CCI grant guidelines by agencies, as well as by successful applicants for funding. Some best practices include the following:

Require the submittal of a Community Engagement Plan that demonstrates an established and ongoing relationship with at least two community-based organizations that will advise the lead applicant on the project.

Seek out existing community-based organizations or agencies that organize vulnerable populations, to be able to reach out and form collaborative relationships.

Local health departments can provide assistance in reaching community-based organizations and vulnerable community members.

* Collaborate with vulnerable communities to design and implement programs, plans and policies. Robust engagement of vulnerable communities in significant agency decisions brings about better decisions through increased input from different perspectives, increases buy-in and acceptance of decisions and support for their implementation, and is essential to give people a voice and decision-making power over actions that affect their lives.
* Make opportunities for input accessible in terms of formats (online, in public meetings, one on one, by mail, etc.), venues (at school and community events, community centers, libraries, transit hubs, etc.), hours (evening or weekend), and language (accessible to lay people and translated into the principle languages of the relevant communities, including accessible media such as caption videos). Often it is more effective to “go where the people are” rather than expecting them to deviate from their routine to attend a special meeting.
* Develop a written collaboration agreement or memorandum of understanding that defines respective roles, expectations, desired outcomes, and agreements for how to work together.
* Establish an advisory group of representatives of vulnerable communities.
* Co-host public participation events in collaboration with community-based organizations that have deep relationships in local communities.
* Whenever possible, community members should be paid for their, and food, travel assistance or transit reimbursement and childcare should be provided.
* Collaborate creatively with other agencies to avoid overtaxing community members’ time and capacity.
* Consider inviting community leaders onto the committee to design the public engagement process. Provide community members with worthwhile roles in the process such as designing engagement techniques, conducting outreach, collecting data, analyzing results, translating and communicating results to stakeholders, so that community capacity is built during the collaboration process.
* An example of including language for robust community engagement can be found in the 2017 Final Program Guidelines for the Transformative Climate Communities (TCC) Program (see bottom of pg. 13 – 14 here: [**http://sgc.ca.gov/resource%20files/08242017-TCCFINALGUIDELINES-Revised82317.pdf)**](http://sgc.ca.gov/resource%20files/08242017-TCCFINALGUIDELINES-Revised82317.pdf%29)**.]**

**CDPH COMMENTS [bold text in brackets]:**

STATUTORY REQUIREMENTS:

-          Pg. 1-19: “The goals that AB 1532 established for the investment of appropriations from the Fund, combined with the AB 1550 requirements, are to:

o   Reduce GHG emissions

o   Maximize economic, environmental, and public health benefits to the State;…” **[CDPH provides recommendations in #1 above for how to define “public health co-benefits”]**

GUIDING PRINCIPLES FOR PROGRAM DESIGN (pg. 1-26 – 1-36):

-          Figure 1-8, Summary of Guiding Principles for California Climate Investments (pg. 1-27)

o   **Guiding Principles for Investment. Bullet 3.** shows, “Maximize economic, public health, and environmental co-benefits to the State.” **[CDPH provides recommendations in #1 above for how to define “public health co-benefits”]**

-          V.A. “What are the guiding *investment* principles for California Climate Investments programs” (pg. 1-28 – 1-34):

o   V.A.2. Target investments in and benefiting AB 1550 populations, with a focus on maximizing disadvantaged community benefits.(Pg. 1-28). **[CDPH recommends the use of the Healthy Places Index (HPI) in addition to CalEnviroScreen as a tool for identifying communities facing health disadvantage. See CDPH recommendation above.]**

* V.A.3. Maximizing economic, public health, and environmental co-benefits to the State.(pg. 1-29). **[CDPH provides recommendations above for how to define “public health co-benefits”]**

o   V.A.4. Create jobs and provide job training as a component of funded projects, wherever possible. (pg. 1-29). **[This section is great—so important to ensure job creation and job training, particularly for those facing disadvantage. CDPH appreciates the inclusion of different strategies and considerations, including targeted hiring to direct opportunities to low-income residents, residents of disadvantaged communities, veterans, or residents displaced or otherwise impacted by project development, among others. However, it is crucial that efforts should be made to the maximum extent possible to prevent residential displacement in the first place. Language prioritizing the prevention of residential displacement should be included in these Guidelines. Language that provides specific anti-displacement strategies should be included in individual CCI program guidelines as well, when applicable. As an example, the 2017 Affordable Housing and Sustainable Communities (AHSC) Program Guidelines include specific guidelines for anti-displacement strategies (see pg. 27 of AHSC Guidelines here:** [**http://sgc.ca.gov/Grant-Programs/AHSCResources/AHSC16-17GuidelinesPost-Errata.pdf**](http://sgc.ca.gov/Grant-Programs/AHSCResources/AHSC16-17GuidelinesPost-Errata.pdf)**).**

o   V.A.5. Encourage projects that are consistent with the State’s climate goals. (pg. 1-31 – 1-32). **[Good that these Guidelines include encouraging projects to be consistent with other State climate goals, particularly those that address climate adaptation and resiliency—i.e., the Safeguarding California: Reducing Climate Risk plan and Executive Order B-30-15. It is important that CCI investments not only reduce GHG emissions, but also maximize climate resiliency co-benefits.]**

o   V.A.6. Coordinate investments and leverage funds where possible to provide multiple benefits and to maximize benefits. Bullet 1, Sentence 5 (pg. 1-34). “For example, in the same neighborhood there may be funding opportunities that combine transit improvement projects with other projects (e.g., zero-emission buses, transit-oriented affordable housing, urban forestry, active transportation).” **[CDPH applauds and encourages coordination among different administering agencies to leverage their respective resources and program information to help applicants and projects maximize opportunities and co-benefits.]**

-          V.B. “What are the guiding *implementation* principles for California Climate Investments programs” (pg. 1-35 – 1-36):

* **V.B.3. Conduct outreach to help potential applicants access funding, particularly for AB 1550 populations.** (pg. 1-36). “Administering agencies should conduct or participate in outreach to help potential applicants access funding opportunities, particularly those in disadvantaged communities, low-income communities, and low-income households. These efforts are needed to maximize benefits and meet statutory investment requirements. See Volume 2 for additional information on conducting outreach and maximizing benefits to disadvantaged communities.” **[CDPH appreciates seeing prioritization of conducting outreach to help potential applicants access funding, particularly for AB 1550 populations. This includes ensuring that CCI programs have clear and specific guidelines for community engagement. See suggested best practices for community engagement above]**