# Health in All Policies: a Path to Health Equity

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American Public Health Association National Meeting Boston, MA; November 2013

## Disclosures

- Dr. Mitchell is employed by the California Department of Public Health and the Health in All Policies Task Force is housed in the Unit that she supervises.
- Dr. Mitchell is attending the conference today as part of her educational leave time and therefore, she is not speaking today in an official capacity representing the California Department of Public Health.
- She has no financial relationship with commercial interests relevant to this presentation.
- Her presentation will not include any discussion of "off-label" uses of any health products.

## Acknowledgements

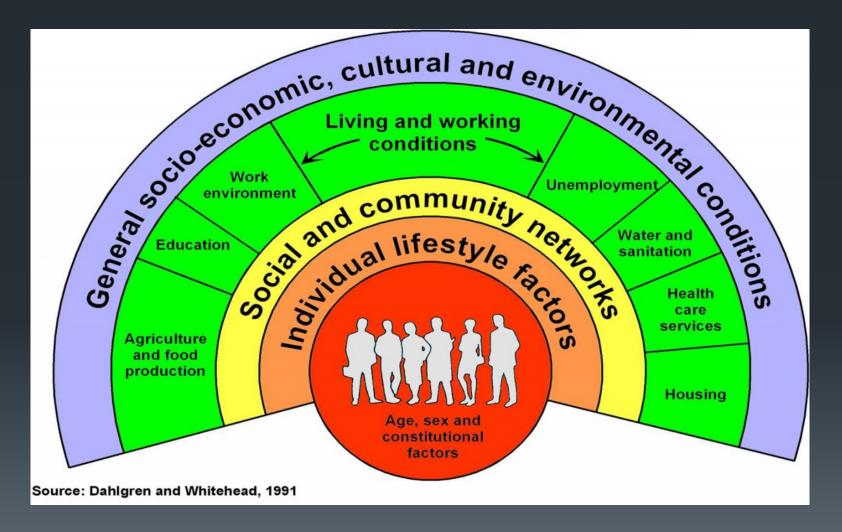
- California Strategic Growth Council
- California Health in All Policies Task Force
- California Department of Public Health
- Public Health Institute
- With funding from the California Endowment, Kaiser Permanente Community Benefits, California Community Transformation Grants, American Public Health Association

# Barriers to Health and Health Equity

- Complex health issues
- No single agency is responsible
- Pervasive and undermines progress in other areas
- "Sticky" and "web-like"



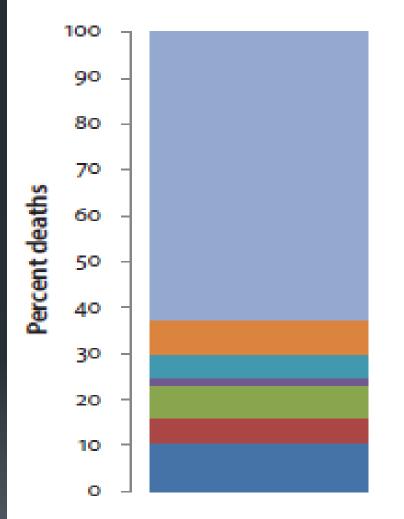
### **Determinants of Health**

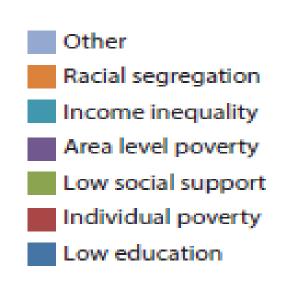


## General Socio-Economic, Cultural and Environmental Determinants of Health

- Public Education Policies (Funding, school siting guidance quality measures)
- Minimum wage laws, employee protections
- Quality of air and water
- Placement of major roadways or dams
- State General Plan Guidance for local planners
- Land and ocean preservation
- Zoning laws
- Structural and cultural discrimination by race/ethnicity, gender, religion, sexual orientation, marital status, socioeconomic status
- Access to health care is it a right or a commodity?
- Immigration law

#### Figure 15. Estimated deaths attributable to social and environmental factors in the U.S., 2000





Source: Based on Galea, Tracy, Hoggart, DiMaggio, and Karpati, 2011

### California Health in All Policies Task Force – Member Organizations



## Promoting Equity through the HiAP Task Force

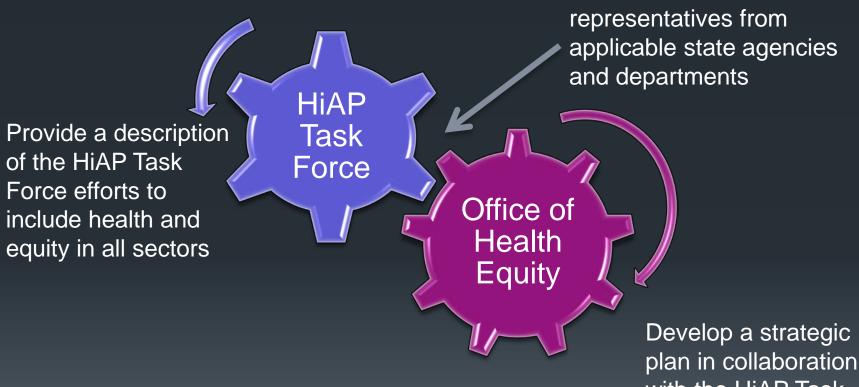
Creation of Aspirational Goals: All Californians

- Can safely walk bicycle, or take public transit to essential destinations
- Live in safe, healthy, affordable housing
- Have access to places to be active, including parks, green space, and healthy tree canopy
- Are able to live without fear of violence/crime
- Have access to healthy, affordable foods
- Are confident that decision makers are informed about health consequences of policy during policy development
- Development of Healthy Communities
  Framework and Healthy Community Indicator
  Project
- Root Cause Mapping

## CA Office of Health Equity Health & Safety Code Section 131019.5

- Health equity efforts to ensure that all people have full and equal access to opportunities
- Health inequities disparities in health outcomes of the factors that shape health that are systemic and avoidable and therefore unjust and unfair
- Determinants of equity social, economic, geographic, political and physical environmental conditions that lead the the creation of a fair and just society.
- Creation of a State Advisory Committee, State Data Report and State Strategic Plan
- Mandates a working relationship with the HiAP Task Force

### Relationship between HiAP Task Force and OHE



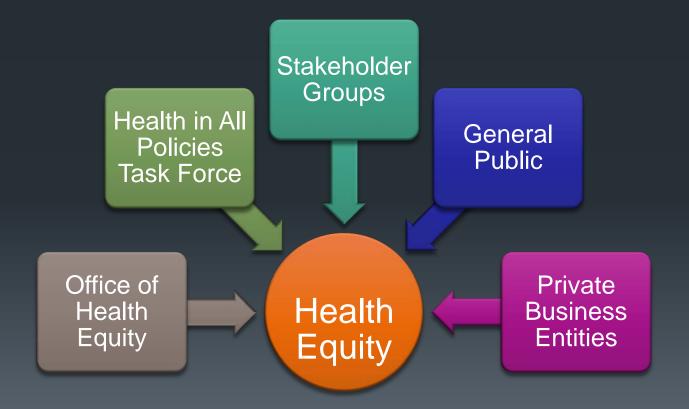
with the HiAP Task Force

OHE AC shall include

## Accomplishments of HiAP TF that Impact Equity

- Creation of Farm to Fork Office
- Food Procurement Work Group
- Housing Siting and Air Quality Work Group
- Inserting public health considerations into State General Plan Guidance
- Crime Prevention through Environmental Design
- School Siting Guidance

## Health equity won't happen by any one effort alone...



## **Contact Information**

Health in All Policies Task Force <u>http://www.sgc.ca.gov/hiap</u>

 California Office of Health Equity <u>http://www.cdph.ca.gov/programs/Pages/OHEMain.aspx</u>

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