Leveling the Playing Field:
How California Can Advance Health Equity
March 27, 2019
Today’s Resources

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What Is Health Equity?
What is Health Equity?

• *Health equity means that everyone has a fair and just opportunity to be healthier.*

What Affects Health Equity?

Health inequities are differences in health that are avoidable, unfair, and unjust. They are a result of...

**HEALTH INEQUITIES**
- Minority Men (17%) and Women (18%) experience fair or poor health at higher rates than all men (11%) and women (12%).

**SOCIAL CONDITIONS**

**ECONOMIC CONDITIONS**
- Only 9% of students from the lowest income group finish college as compared to 54% from the highest income group.

**ENVIRONMENTAL CONDITIONS**
- Lower income neighborhoods tend to have fewer safe places to exercise, limited access to healthy foods, poor schools, and limited job opportunities.

Health disparities are differences in health outcomes among groups of people. They are affected by...

**HEALTH INEQUITIES**
- Differences in health that are avoidable, unfair, and unjust. They are a result of social, economic, and environmental conditions.

**HEALTH BEHAVIORS**
- Influenced by health inequities. Smoking, poor nutrition, and lack of exercise are all behaviors that may lead to poor health.

**GENETICS**
- Play a factor in health differences. We are learning more everyday about how our genetic make-up makes us more vulnerable to certain risks.

Source: San Francisco State University Health Equity Institute
What Affects Health Equity?

A PUBLIC HEALTH FRAMEWORK FOR REDUCING HEALTH INEQUITIES
BAY AREA REGIONAL HEALTH INEQUITIES INITIATIVE

UPSTREAM
SOCIAL INEQUITIES
- Class
- Race/Ethnicity
- Immigration Status
- Gender
- Sexual Orientation

INSTITUTIONAL INEQUITIES
- Corporations & Businesses
- Government Agencies
- Schools
- Laws & Regulations
- Not-for-Profit Organizations

LIVING CONDITIONS
- Physical Environment
  - Land Use
  - Transportation
  - Housing
  - Residential Segregation
  - Exposure to Toxins
- Economic & Work Environment
  - Employment
  - Income
  - Retail Businesses
  - Occupational Hazards
- Social Environment
  - Experience of Class,
  - Racism, Gender,
  - Immigration
  - Culture - Ads - Media
  - Violence

RISK BEHAVIORS
- Smoking
- Poor Nutrition
- Low Physical Activity
- Violence
- Alcohol & Other Drugs
- Sexual Behavior

DISEASE & INJURY
- Communicable Disease
- Chronic Disease
- Injury (Intentional & Unintentional)

MORTALITY
- Infant Mortality
- Life Expectancy

DOWNSTREAM

Individual Health Education
Case Management
Health Care

Emerging Public Health Practice
Current Public Health Practice

Source: BARHII and California Office of Health Equity
How Do We Achieve Health Equity?

- Policy and systems change
- Investment in communities
- Research and data
- Narrative change
- Power!
#HealthyBlackPeople. That’s our mission and we’re sticking to it. Part of that mission is the creation of a Black Health Agenda. In solidarity and coalition with our statewide partners we’re gathering direct information about the health and well-being of African Americans, from African Americans. Once we’re done, we’ll publish an open source document to be used by any and everyone focused on, say it with me, #HealthyBlackPeople. Join us.
CBHN's Health Equity Advocacy: Townhalls

**Town Halls**
- Hear from the people about experience, concerns, and desires.

**Data analysis**
- Code, Categorize, and Catalog
- Town Hall Participants
- Community leaders and Members
- Organizations
- Legislators and Staff
- Take a look at our data, find meaning from it, and then prioritize

**Anchor Organization**
- Publish White Paper (Everyone who attended is an author)
- On the radar of legislators

**Agenda**
- Present our findings
- Reveal our legislative agenda moving forward
- Give Thanks and Recognition

#CarryTheVoice: The People’s voice 1st.

#Blackhealthagenda
#CarryTheVoice: The People’s voice 1st.

• Africans Americans are 6.5% of California’s population. The toughest challenge is ensuring that the ‘minority’ voice is heard and heeded in health policy. Our strategy is two-fold:

• (1) Collect and carry the voice of African Americans through direct engagement in communities through out town halls and

• (2) with those direct lived experiences and insights we join coalitions with ethnic, racial, gender and economic groups to build a united voice to create policy that positively affects our community and communities in solidarity with ours.
What does health equity mean?

• **It means that Black people need more**, require more, deserve more when it comes to access to the highest quality health care.

• **It means the removal of structural racism**, macro and micro-abrasions as it relates to the care delivery, access to insurance, preventative and chronic/emergency care.

• **It means representing the entire Black community** including undocumented Black immigrants and the Black LGBTQ community.

• It means a focus on the social determinants of health including generational wealth, the lived environment (physical & social).

• **It means that Black Lives Matter so BLACK LIFE MATTERS.**
Last Year’s Fight

• Three areas (1) The fight for universal health care and (2) the fight against the Trump Administrations sabotage of the ACA/Obamacare. (3) Prescription drug costs

• (1) We supported SB 974 (Lara) focused on expanding Medi-Cal coverage for 19-25yr olds regardless of documentation status. We advocated in solidarity w/ undocumented Californian’s while adding the 30,000 undocumented Californian’s of African descent into the conversation.

• (2) We supported SB 910 (Hernandez) which banned short term or ‘junk insurance’ in California, a product not aligned with the comprehensive insurance cover requirements of the ACA.

• (3) We supported SB 1021 (Wiener) – which capped a 30 day supply of prescription drugs to $250.

#Blackhealthagenda
This year’s fight....

- **End Structural Racism/Implicit Bias** in Healthcare Systems (AB 2275 redux)
- **Focus on Black Women’s Health** – Including maternal and infant health.
  - $45 million in the budget for trauma screening connected to ACEs lead by the new Surgeon General Dr. Nadine Burke Harris
  - New Budget Funding for the Black Infant Health Program, Implicit Bias Training
- **Violence as a Public Health Issue** – From Domestic Violence to Police Brutality
- **A conversation about IVF/Fertility and Sickle Cell Anemia**
- **Overall Affordability** in Healthcare (Insurance, Premiums, etc.)
- **Oral Health** – Chronic cases of Oral Cancer in the AA community
- **Social Determinants of Health**- Health, Wealth, Justice, Education
- “**Lowest Performing Sub-Group Precedent**” – Weber’s LCFF Bill

#Blackhealthagenda
Questions for Dr. Williams: Legislation

• **AB 2635** (Weber – AD 79) Finance: LCFF: Supplemental Grants: Lowest Performing Sub Group *(Passed as Budget Language, signed by the Governor)* Summary: AB 2635 provided more funding for the lowest performing sub-group in K-12 education. Right now, that group is African Americans. **How would this bill impact African Americans:** This bill helps close the achievement gap for Black students by providing equity funding. Notwithstanding issues related to Proposition 209, this bill may have set a precedent for equity-based funding in health. Although the mechanisms for education funding and health funding are different, the precedent of equity-based funding could be translated into health and healthcare funding.
Southeast Asia Resource Action Center (SEARAC)

SEARAC is a national civil rights organization that empowers Cambodian, Laotian, and Vietnamese American communities to create a socially just and equitable society. SEARAC stands together with other refugee communities, communities of color, and social justice movements in pursuit of social equity.
Building power

Building Powerful Leaders & Advocates
• Leadership and advocacy training
• Leadership, Empowerment, & Advocacy Fellowship

National & State Policy Advocacy
• Immigration
• Education
• Health

Movement building
• Campaigns
• Equity Summit
• Leading coalitions and collaboratives
Who are Southeast Asian Americans?

- Political identity

- Immigrants and Refugees from Laos, Cambodia, and Vietnam

- Lao, Khmu, Khmer/Cambodian, Cham, Vietnamese, Hmong, Iu-Mien
Model Minority
“Japanese citizens are still the healthiest people in the world”

Reported by Dr. Lauren Browne:

No one knows whether it's their great diet, good health care or just great genes, but after two decades Japanese citizens are still the healthiest people in the world, according to a decades-long study on population health published today.
Table 1. Source: U.S. Census Bureau, 2017 American Community Survey, 1-Year Estimates
Percentage of SEAAs who Speak English "less than very well" in 2017

Table 1. Source: U.S. Census Bureau, 2017 American Community Survey, 1-Year Estimates
What does health equity mean to your communities?

• Ensuring that our community can live, thrive, and age with care and dignity.
Challenges and Opportunities

1. Access to health care

- Supported the passage, implementation, and protection of the ACA
- Supporting Health4all

• Estimates: at least 416,000 Asians without legal status in California, constituting 15% of the state’s undocumented residents
Challenges and Opportunities

- Sponsored AB 1726 (2016) to disaggregate AANHPI data for DPH
- Protect disaggregate data wins

2 Bad Data

Hepatitis B was acknowledged to be common among certain refugee groups, for example the Vietnamese, but was so prevalent in these communities that it was not seen as a ‘problem’”
Challenges and Opportunities

3 Lack of culturally and linguistically competent mental health services

- Cosponsoring AB 512 (2019) to address cultural competence mental health

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<th>Older Cambodian Adults</th>
<th>General Population</th>
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<td>PTSD</td>
<td>62%</td>
<td>3%</td>
</tr>
<tr>
<td>Major Depression</td>
<td>51%</td>
<td>7%</td>
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Creating Healthy Latinx Communities in California

Jeffrey Reynoso, DrPH, MPH
Executive Director, Latino Coalition for a Healthy California
Presentation to CA Policy Insights 2019 Conference
March 27, 2019
Latino Coalition for a Healthy California

**Mission:** To advance and protect the health of Latinos through policy and advocacy to create healthy communities in California.

**Vision:** Eliminate the inequalities that exist among Latino communities in California.

**Health Issue Areas:** 1) Universal access to healthcare for all, 2) Building healthy communities, and 3) Health is a fundamental right of every human being.
Latinx Demographic Snapshot

- **40%**
  - Of CA’s 40 million residents
  - Live in LA County

- **41%** & **52%**
  - Of CA’s millennials & kids

- **28%** & **27%**
  - Speak Spanish & are immigrants

- **8.5%** & **90%**
  - Total & undocumented uninsured rates

- **50%**
  - Likelihood of Latino kids developing type 2 Diabetes
Health Inequalities Framework
5 Centuries to Reach Parity: An Analysis of How Long it Will Take to Address California's Latino Physician Shortage

The Current State of the Latino Physician Workforce: California Faces a Severe Shortfall in Latino Resident Physicians

Towards Universal Health Coverage: Expanding Medi-Cal to Low-Income Undocumented Adults

Laurel Lucia
University of California, Berkeley
Center for Labor Research and Education
February 2019
Cafecito at the Capitol

Join us to learn about Latinx Health priorities for 2019

Tuesday, November 27, 2018
Capitol Room 125
10:00 am - 11:30 am

Come enjoy cafecito and pan dulce!

RSVP through eventbrite: https://bit.ly/2ZGMYuz

2019-20 Governor’s Budget
“A California for All”
January 10, 2019
LCHC Policy Priority Setting Process

Latinx Health Policy Priorities

Research Data

Political Data

Community Data
Past Policy Successes

● **Universal Access to Healthcare for All**
  ○ Mental Health
    ■ Alzheimer’s Study
  ○ Oral Health
    ■ Restoration of Medi-Cal dental benefits

● **Building Healthy Communities**
  ○ Affordable healthy food access in low-income communities
    ■ Healthy by Default Kids Drinks
    ■ California Nutrition Incentives Program
  ○ Pathways to living wage jobs in the healthcare sector for diverse communities
    ■ CA Future Health Workforce Commission
  ○ Protecting the natural environment and combating climate change
    ■ Prop 68

● **Health is a fundamental right of every human being**
  ○ Immigrant and refugee integration
    ■ SB 54 implementation
2019 Latinx Health Policy Priorities
Latinx Health Policy Summit 2019

Save the Date
October 3, 2019
California Endowment
Sacramento, CA
¡Gracias!
Thank you!

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