



Bay Area Regional Health Inequities Initiative

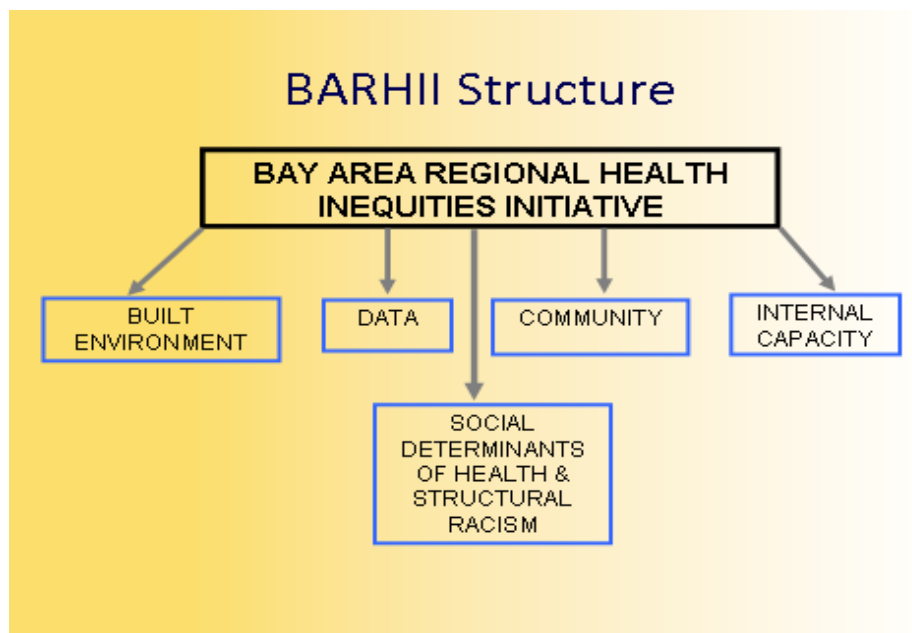
Alameda County | City of Berkeley | Contra Costa County | Marin County | Napa County | City and County of San Francisco | San Mateo County | Santa Clara County | Santa Cruz County | Solano County | Sonoma County

The Bay Area Regional Health Inequities Initiative (BARHII) is a unique undertaking by local health departments in the San Francisco Bay Area. The regional collaboration includes public health directors, health officers, senior managers and staff from the region's local health departments that came together in 2002 to collectively address the factors that contribute to egregious differences in life expectancy and health outcomes between different socio-economic groups in the region.

Mission:

Transform public health practice for the purpose of eliminating health inequities using a broad spectrum of approaches that create healthy communities.

Structure:



BARHII's goal of transforming public health practice is carried out by a committee structure. Staff members from the member health departments and BARHII staff form each of the committees. The committees meet monthly and re-examine the work that health departments do with communities and other partners to change conditions that contribute to health inequities. They also build the collective and individual capacity of health departments to carry out this work.

The **Internal Capacity Committee** focuses on building the capacity of local health departments to address health inequities through staff and organizational development initiatives. ICC's work includes:

- organizing trainings and conferences for local health department staff on issues related to health inequities;
- developing the *Local Health Department Organizational Self-Assessment for Addressing Health Inequities Toolkit (Toolkit)*;
- working with the National Association of Chronic Disease Directors to develop a State Health Department version of the *Toolkit*;
- organizing a regional initiative to work with LHD programs on incorporating activities aimed at increasing educational attainment into their programs.

Co-chairs: Kimi Watkins-Tartt, Alameda & Heidi Merchen, Napa

The **Data Committee** works to elevate the standard of measures of health inequity and provide the evidence to support a practice that goes beyond the boundaries of traditional public health data approaches. DC's work includes:

- developing BARHII's Conceptual Framework (see page 4);
- developing BARHII's *Health Inequities in the Bay Area Report*;
- prioritizing the most significant social determinants of health (SDoH) indicators for LHDs to collect and advocating for SDoH data availability in collaboration with the California Department of Public Health

Co-chairs: Rochelle Ereman, Marin & Matt Beyers, Alameda

The **Built Environment Committee** helps individual health departments learn from each other's experiences working with local planning agencies and to develop regional strategies to help make that work more effective. BEC's work includes:

- organizing regional convenings between public health department leaders and Planning Directors and Redevelopment Agency Directors to explore the intersectionality of our work;
- developing, in partnership with Public Health Law and Policy (PHLP), the *Healthy Planning Guide* to help public health departments engage with planners to develop policies that can create healthier environments and support health equity;
- developing, in partnership with PHLP, *Partners for Public Health*, a companion piece to the *Healthy Planning Guide*, which is a broad overview of the many public agencies that make policy decisions affecting aspects of the built environment, outlining the structure and decision-making process for each agency (at the local, regional, state, and federal level);
- developing, in partnership with PHLP, *New Partners in Public Health*, a report exploring the potential for collaboration between these agencies and how both can overcome their own institutional challenges to create a strong partnership to improve community health;
- ensuring that health equity perspectives are represented in the Bay Area's planning of the Sustainable Communities Strategy to comply with SB 375 by having BARHII BEC members and BARHII staff deeply involved in the planning process;

- developing a primer for public health staff: “Climate Change: What’s Public Health got to do with it? The human health effects of global warming”

Co-chairs: Mona Mena, Alameda & Cathleen Baker, San Mateo

The **Community Committee** supports member health departments as they attempt to forge new strategies for community engagement and capacity building to address the broad range of conditions that contribute to poor health, and to establish relationships that can be sustained over time. CC’s work includes:

- conducting assessments in 7 local health jurisdictions (LHJs) including focus groups with public health department staff and leadership as well as site visit focus groups with a few community agencies that have experience working with the LHD;
- analyzing the LHJ assessment data and writing a report on cross-cutting inequity and community engagement themes, including best practices and lessons learned related to public health and community interactions.

Co-chairs: Cio Hernandez, Marin; Kristi Skjerdal, San Mateo & Cara Mae McGarry, Napa

The **Social Determinants of Health (SDoH) and Structural Racism Committee** is our newest working group established to increase member understanding and ability to dialogue on SDoH and structural racism and to develop strategies and tools to address how structural racism internally impacts decision-making and externally impacts policies. There is currently one Co-Chair: Alma Burrell, Santa Clara and we are recruiting a second.

SDOH/SR work includes:

- developing a series of workshops for BARHII membership to introduce and discuss topics related to SDoH, racism, power and privilege and how these issues relate to health inequity as well as LHJ programs and policies
- developing tools and resources that public health departments can use to integrate a racial equity lens when participating in policy and advocacy work on the social determinants of health, i.e. ensure we are advancing work on the social determinants of health equity and not just making improvements in the social determinants of health.

Governance:

BARHII members elect two rotating Co-chairs that each serve a two-year term. The two Co-chairs provide on-going guidance and support to the Executive Director. Current Co-chairs are Michael Stacey, Deputy Health Officer of Solano County and Chuck McKetney, Director of Community Assessment Planning and Education of Alameda County.

The organization is managed by an Executive Committee that is comprised of the BARHII Co-chairs, the Co-chairs of each committee, and BARHII staff. This committee meets monthly to consider strategy and policy issues relevant to meeting BARHII’s mission and makes recommendations to the larger body for final approval.

Conceptual Framework:

The Data Committee developed a conceptual framework (on following page) that illustrates the connection between social inequalities and health, and focuses attention on measures

which have not characteristically been within the scope of public health department epidemiology. This framework has been used widely as a guide to health departments undertaking work to address health inequities. It has been formally adopted by the California Department of Public Health as part of their decision-making framework.

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

