

About This Document

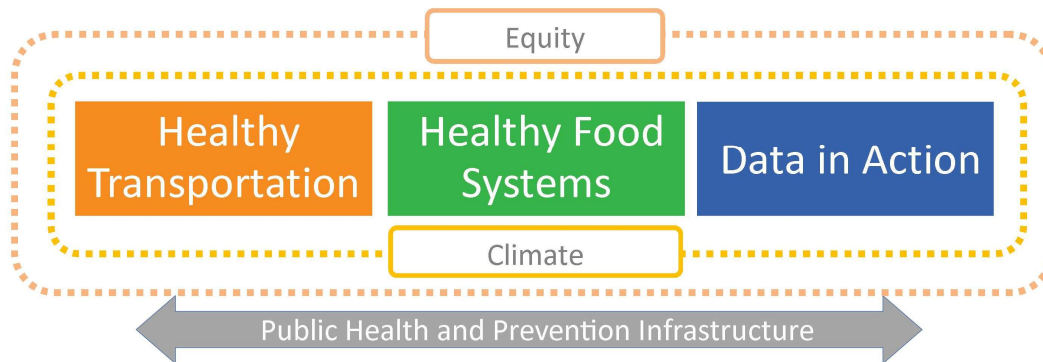
This resource of sample legislative platform language provides a range of options for local health departments seeking to integrate health promoting policies into their jurisdiction’s legislative platform. Topic areas identified support and advance the Public Health Alliance of Southern California priority initiative areas. Sample language is drawn upon evidence-informed, federal, state and local best practices accompanied by references and resources. Development of policy and policy recommendations is part of Public Health’s Essential Health Services as defined by the [American Public Health Association 2014](#).

Disclaimer: Contents of this resource are not intended to reflect positions of Alliance members.

About the Alliance

The Public Health Alliance of Southern California (Alliance) is a collaboration of local health departments in Southern California. Collectively our members are statutorily responsible for the health of nearly 60% of California’s population. Our vision is “All Southern California communities are healthy, vibrant and sustainable places to live, work and play.” The Alliance builds healthy communities through upstream multi-sector policy, systems and environmental change; and mobilizes and amplifies the Southern California local health departments’ regional voice in three Priority Initiatives: **Healthy Transportation and Land Use, Healthy Food Systems and Data in Action**. The Alliance work is grounded in two overarching frameworks including: **1) Equity/Opportunities for All and 2) Climate and Health**.

Priority Initiatives:



The Suggested Legislative Platform Language statements are grouped around these priority initiatives and overarching framework categories, with sections devoted to each. A sixth section provides recommended language for supporting overall Public Health and Prevention Infrastructure.

Document Structure

This document provides a set of sample legislative platform policy statements that support and advance the three Alliance Initiative Priorities and overarching approaches to address equity and climate change. These policy statements were identified by the Alliance within the context of our current work to achieve significant policy, systems and environmental change for the Southern California region. References provided in the document demonstrate how each policy statement is aligned with leading public health organizations, other prominent regional, state and national organizations, research centers and local laws and ordinances.

Guiding Principles

The Alliance's efforts to reduce the burden of chronic disease and build healthy communities will be guided by core principles to protect health, equity and sustainability, and ensure the greatest near- and long-term benefits:

- Take substantial and timely action toward primary prevention
- Support strategies with the highest potential impact through policy, systems and environmental change that can shift population health
- Promote health equity and environmental and social justice by identifying and addressing the social determinants of health to reduce health disparities.
- Engage the community in assessment, planning, decision-making and policy development to address health inequities
- Support greater resource allocation for communities suffering a disproportionate burden of social and behavioral determinants that lead to chronic disease
- Maximize health, environmental and economic co-benefits, including climate change adaptation, readiness, mitigation and community resilience especially for the most vulnerable with chronic illnesses
- Prioritize prevention for children and youth, the aged and other vulnerable groups
- Support better quality health care and self-management for those already affected by chronic disease
- Promote "Health in All Policies" approaches within government and non-governmental organizations to improve population health
- Build collaboration between public health, healthcare, transportation, land use planning, energy, housing, agriculture and environmental health sectors to improve population health

Contact Information:

PHASoCal.org · admin@PHASoCal.org · 619-452-1180

Support analysis of budgets and revenue streams and include public participation in budgeting processes to align allocations using the social determinants of health.

References

<p>Government Alliance on Race and Equity (GARE)</p>	<p>GARE has a “racial equity tool” that can be applied to policies, practices, programs and budgets to determine alignment of allocations using the social determinants of health. The tool proactively seeks to eliminate racial inequities and advance equity; identifies clear goals, objectives and measurable outcomes; engages community in decision- making processes; identifies who will benefit and who will be burdened by a given decision; and develops mechanisms for successful implementation and evaluation of the impact.</p> <p><i>(Government Alliance on Race Equity, Racial Equity Toolkit- An opportunity to operationalize equity; http://racialequityalliance.org/newsite/wp-content/uploads/2015/10/GARE-Racial_Equity_Toolkit.pdf)</i></p>
<p>City of Seattle Racial and Social Justice Initiative (RSJI)</p>	<p>The City of Seattle Budget Office requires departments to conduct a racial equity analysis of all budget requests. The 2015-2017 RSJI Equity Strategies and Outcomes include: Strategy #1 Ensure racial equity in City programs and services to make tangible differences in people’s lives. 2. Apply a racial equity lens to all our work. The Mayor’s Performance Plans with Department Directors will require at least four uses of the Racial Equity Took Kit and us of the Inclusive Outreach and Public Engagement Guide on programs, projects and service changes.</p> <p><i>(City of Seattle, WA, Race and Social Justice Initiative Vision and Strategy 2015-2017, page 11; http://www.seattle.gov/Documents/Departments/RSJI/rsji-2015-2017-plan.pdf)</i></p>
<p>Multnomah County, OR</p>	<p>The Equity and Empowerment Lens is a transformative quality improvement tool used to improve planning, decision making and resource allocation leading to more racially equitable policies and programs.</p> <p><i>(Multnomah County, OR, Equity and Empowerment Lens, downloaded June 2016; https://multco.us/diversity-equity/equity-and-empowerment-lens)</i></p>

Support incorporation of policies, programs and evaluation strategies to ensure equitable access to employment, resources, and housing.

References

HUD	Access to Opportunity <i>(U.S. Department of Housing and Urban Development, Office of Economic Resilience; http://portal.hud.gov/hudportal/documents/huddoc?id=access-opportunity.pdf)</i>
Prevention Institute	“Metrics that measure and track our progress in the determinants of health can help set priorities and inform necessary action steps to keep all Americans healthy, lower the cost of health care, increase productivity, improve quality of life, and ensure that everyone has an equal opportunity to prosper and achieve his or her full potential.” This publication includes recommended health equity metrics that reflect the determinants including structural drivers, community determinants (social-cultural development, physical/built environment, economic development) and health care services. <i>(Prevention Institute, Measuring What Works to Achieve Health Equity: Metrics for the Determinants of Health, June 2015; Executive Summary, page 2; http://www.preventioninstitute.org/component/jlibrary/article/id-367/127.html)</i>

Support efforts that address income inequality, including minimum/living wage provisions, to reduce poverty, and to increase pathways to the middle class.

References

<p>Urban Institute</p>	<p>Improving the economic conditions of Americans at many income levels including those who are poor to those in the middle class could improve health and help control the rising costs of health care. Policy directions that offer promise for improving health include: earnings and asset develop programs that increase economic self-sufficiency of low income families; family strengthening programs that improve health, education and link to needed support and benefit services; neighborhood strengthening programs to improve the neighborhood, connect service providers and engage residents in decision making.</p> <p><i>(Urban Institute, How are Income and Wealth Linked to Health and Longevity? April 2015, page 11, 12; http://www.urban.org/research/publication/how-are-income-and-wealth-linked-health-and-longevity)</i></p>
<p>City of Los Angeles</p>	<p>On July 1, 2016 the minimum wage in the City of Los Angeles will increase from \$10.50/hour to \$15.00/hour on July 1, 2021 according to a wage schedule. The Office of Wage Standards is responsible for implementing and administering the guidelines of the Los Angeles Minimum Wage and Minimum Wage Enforcement Ordinances for all workers and businesses in the City of Los Angeles.</p> <p><i>(City of Los Angeles, Office of Wage Standards, Raise the Wage LA, downloaded June 2016; http://wagesla.lacity.org)</i></p>

Develop resources to assist government efforts to address historic inequities including through resource allocation and policy change.

References

<p>Association of State and Territorial Health Officers (ASTHO)</p>	<p>Collaborating across multiple sectors to address health disparities and empower individuals, promote healthy communities and ensure quality clinical and community preventive services can increase the number of Americans who are healthy at every stage of life. Successful cross-sectoral collaboration includes: creating shared goals; engaging partners early/developing partner relationships; defining a common language; activating the community; and leveraging funding/investments.</p> <p><i>(Association of State and Territorial Health Officers, Health in All Policies: Strategies to Promote Innovative Leadership, January 2013, page 1;</i> http://www.astho.org/Programs/Prevention/Implementing-the-National-Prevention-Strategy/HiAP-Toolkit/)</p>
<p>American Public Health Association (APHA)</p>	<p>APHA Better Health Through Equity: Case Studies in Reframing Public Health Work describes essential lessons learned to successfully implement a health equity framework.</p> <p>WITHIN YOUR ORGANIZATION: Achieving health equity first begins with building knowledge, understanding and capacity within your organization or agency.</p> <p>WITHIN YOUR COMMUNITY: Achieving health equity requires an empathetic approach that acknowledges a community’s history, respects its traditions, listens to its stories and actively engages its members as leaders in a health equity initiative.</p> <p>WITHIN YOUR PRACTICE: Achieving health equity means allowing community values and priorities to shape and inform interventions. Science-based evidence is always important to measuring needs and progress, but gaining community buy-in is critical to sustainability.</p> <p><i>(American Public Health Association, Better Health Through Equity: Case Studies in Reframing Public Health Work, March 2015, page IV;</i> https://www.apha.org/~media/files/pdf/topics/equity/equity_stories.ashx)</p>

Support efforts to address discrimination based on class, race/ethnicity, immigration status, gender, and sexual orientation and enforce anti-discrimination measures.

References

<p>NACCHO</p>	<p>The National Association of City and Health Officials (NACCHO) supports the incorporation and adoption of principles of social justice into everyday public health practice in order to eliminate the root causes of health inequities. Based on those principles, NACCHO encourages local health department to act directly, with allies, on structures of inequality associated with class, race, gender, and sexual orientation, as they are bound with imbalances in political power.</p> <p><i>(National Association of City and County Health Officials, Statement of Policy, Health Equity and Social Justice, Policy 05-02, Updated February 2015;</i> http://www.naccho.org/uploads/downloadable-resources/Policy-and-Advocacy/05-02-Health-Equity-and-Social-Justice.pdf)</p>
<p>California Department of Fair Employment and Housing Act (FEHA)</p>	<p>The <i>Fair Employment and Housing Act</i> (FEHA) prohibits harassment and discrimination in employment because of race, color, religion, sex, gender, gender identity, gender expression, sexual orientation, marital status, national origin, ancestry, mental and physical disability, medical condition, age, pregnancy, denial of medical and family care leave, or pregnancy disability leave (Government Code sections 12940,12945, 12945.2) and/or retaliation for protesting illegal discrimination related to one of these categories, or for reporting patient abuse in tax supported institutions.</p> <p><i>(California Department of Fair Employment and Housing, FEHA, downloaded June 2016;</i> http://www.dfeh.ca.gov/Publications_FEHADescr.htm)</p>

Support programs that help new immigrant communities’ integration into the social and political structures of existing communities.

References

<p>Migration Policy Institute</p>	<p>Immigrant integration is the process of economic mobility and social inclusion for newcomers and their children. Integration involves institutions and systems that promote development and growth in society including early child hood care, education systems, workforce development, health care, and government services to communities with linguistic diversity.</p> <p><i>(Migration Policy Institute, Immigrants in the United States: How Well Are They Integrating Into Society?, May 2011; http://www.migrationpolicy.org/research/immigrants-united-states-how-well-are-they-integrating-society)</i></p>
<p>California Department of Social Services Refugee Resettlement Program</p>	<p>Fact sheet on the California Refugee Resettlement Program</p> <p><i>(California Department of Social Services Refugee Resettlement Program, Fact Sheet, June 2016; http://www.cdss.ca.gov/refugeeprogram/res/pdf/Factsheets/RRP_Fact_Sheet.pdf)</i></p>
<p>San Diego County</p>	<p>San Diego has traditionally received a large percentage of new refugees who enter the county and is designated by the State as a high impact county. Federal Issue 4. Increase in Refugee Arrivals and Associated Impacts:</p> <p>Support adequate and ongoing federal funding to increase self-sufficiency and reduce dependency on welfare and government funded housing programs funded by local governments among refugees in impacted areas including the provision of federal resettlement benefits for longer than the current eight month time frame.</p> <p>Support adequate and ongoing federal funding to meet the health needs of refugees in impacted areas.</p> <p>Support adequate and ongoing federal funding to provide stable and affordable housing for refugees in impacted areas.</p> <p>Support an increase in targeted federal funding to effectively resettle refugees and aid in assimilation.</p> <p><i>(County of San Diego Priority Issues 2016 Legislative Program, page 18_)</i></p>

Support efforts to increase and share regional prosperity and quality jobs across the Southern California region.

References

Urban Institute	<p>“The socioeconomic status of individuals and neighborhoods are intertwined with individual and population health because the local economy determines access to jobs, commerce, schools and other resources that enables families to enjoy economic success and place-based health benefits.”</p> <p><i>(Urban Institute, How Are Income and Wealth Linked to Health and Longevity?, April 2015, page 5; http://www.urban.org/research/publication/how-are-income-and-wealth-linked-health-and-longevity)</i></p>
-----------------	--