

# WORKING PARTNERSHIPS USA

September 23, 2014

Bill Shoe  
Project Manager  
Santa Clara County Planning Office  
7th - East Wing  
County Government Center  
70 W Hedding St  
San Jose, CA 95110

## **RE: Comments and Recommendations on the Santa Clara County Draft Health Element**

Dear Mr. Shoe:

On behalf of Working Partnerships USA, an organization concerned about advancing positive health outcomes in the County of Santa Clara, we respectfully submit the following comments on the County's Health Element Draft released for public review on August 8, 2014.

Working Partnerships USA is a community-labor organization with a vision for an inclusive regional economy where workers and communities of color thrive. We lead innovative campaigns for equitable growth, healthy communities, and quality jobs by organizing grassroots alliances to build community power and implement cutting edge public policy.

For the past 15 years, Working Partnerships USA (WPUSA) has developed public policies to expand health insurance access and improve the healthcare safety net. Since the passage of the Affordable Care Act (ACA), we have focused on effectively implementing health reform, and concurrently work to address remaining gaps in our healthcare system.

Thank you for the opportunity to submit comments on the Draft Health Element. Please contact Charisse Ma Lebron, Director of Health Policy & Community Development, via email at [charisse@wpusa.org](mailto:charisse@wpusa.org) or via phone at 408-809-2124 if you have follow-up questions or concerns related to these comments and recommendations.

Respectfully,



Derecka Mehrens, Executive Director  
Working Partnerships USA

## Health Element Draft Comments and Questions – Working Partnerships USA

### 2. Please share your questions and comments related to the INTRODUCTION (INCLUDING GUIDING PRINCIPLES)

The Introduction was meaningful. There is a strong acknowledgement that although Santa Clara County ranks as the second healthiest county in California, it still has much to accomplish in effectively addressing health inequities. The County's commitment to a comprehensive approach in advancing positive health outcomes —such as leveraging urban and regional planning ---is critical as it continues its progress towards a more healthy and vibrant community.

The Guiding Principles were comprehensive and well-informed.

### 3. Please share your questions and comments related to SECTION A: HEALTH CONDITIONS, EQUITY AND ACCESS

Page A-5, Section A, the *State of the County's Health* discusses access to affordable insurance with the insurance exchanges through the Affordable Care Act. The Element assumes that the current premiums and estimated out-of-pocket costs are affordable. However, the feedback Working Partnerships USA (WPUSA) has received through the Health Care Reform Implementation Stakeholder Working Group's Outreach and Enrollment Subcommittee, made up of providers and other community-based health care stakeholders, is that the costs are especially prohibitive for working families and communities of color. Therefore, this section should also acknowledge that ACA has only passed its first year of implementation, and it has yet to be seen as to how affordable it is for qualifying consumers or if the quality of care provided will produce positive health outcomes.

Page A-5 outlines the four *Major Strategies and Policies* to employ the comprehensive approach for improving health conditions, equity, and access. The section should particularly emphasize that the county is committed to ensuring that its methods, strategies, policies, and materials will be culturally competent and informed.

Page A-8, Sub-strategy #2a Policy HE-A.13 *Workforce Development and Training*, add training, education, job placement support for formerly incarcerated individuals. In addition to advancing health equity, formerly incarcerated individuals are three times less likely to reoffend if they have gainful employment.

Page A-9, Sub-strategy #2b Policy HE-A.17 Financial services includes a provision to *Discourage or prohibit predatory lending businesses*. The section should add that the county will encourage innovative ways to engage banks, credit unions, and community-development financial institutions to provide low-cost, small-dollar loan alternatives to payday loans. Bank regulators and foundations have encouraged this approach. Also, the county should cultivate partnerships with relevant community-based organizations (e.g. United Way Silicon Valley) to ensure that free or low-cost income tax filing services are available, especially to vulnerable families.

Page A-10 Sub-strategy #2b: Add a policy objective: Encourage and support strategies that not only spur economic development within the cities and county, but also grow middle-income, quality jobs. It is not enough to grow jobs, as evidence shows that high-wage jobs are generally only accessible to people with advanced degrees or specialized experience, and tend to exclude underserved communities. Meanwhile, middle-wage jobs are shrinking. The present-day “hourglass economy” means that even when the economy is growing, we’re seeing more poverty and hardship. In the long term, gross inequality is a drag on sustainable economic growth. As income inequalities grow, it has an adverse impact on community health. The county should consider ways to be most impactful in addressing income inequity since income is one of the strongest predictors of health outcomes.

There is an acknowledgement that in spite the implementation of the ACA, approximately 140,000 undocumented residents are projected to remain uninsured (page A-5). Therefore, page A-11, under Strategy #3 Policy - HE-A.25: Health Insurance Coverage - *Increase the number of residents with health insurance coverage, including oral health, particularly for vulnerable communities, including the residual uninsured, and those most likely to experience health inequities.* Currently, when undocumented residents receive medical care it is from community clinics for episodic care. Such residents live in mixed documentation status households, often marked by economic disparity and comprise 8 – 10 percent of the county’s population. The County is currently working with providers and community-based organizations to ascertain the best ways to respond to the health needs of this population, and other uninsured populations.

Page A-11 Policy HE-A.26 discusses encouraging the provision of sufficient health care professionals. There also needs to be a concerted effort by the county to grow health care-specific jobs and skills that accommodate the health care needs of the sizable aging population.

Page A-12 Policy HE-A.28 Elder and Assisted Care should include increasing the availability of support and resources for caregivers of seniors and disabled adults. Generally, caregivers allow individuals to age with integrity or pass with dignity surrounded by loved ones.

Page A-13 Policy HE-A.34 Effective community service will *Champion and provide expanded opportunities for youth, older adults, and corporate citizens to engage in community service that integrates community health and improvement.*

#### **4. Please share your questions and comments related to SECTION B: SOCIAL AND EMOTIONAL HEALTH**

Pages B 2-3 devotes considerable sections to discussing the extent to which alcohol and alcohol harms, such as alcohol-fueled vehicular accidents and addiction, have a significant impact on a sizable population in the county. The Centers for Disease Control estimates that excessive alcohol use costs California \$32 billion in alcohol-related harm, \$3 billion of which is attributable to health care expenses alone. Given the significant harm, the county should consider more effective, evidenced-based measures to curb excessive drinking, as opposed to proposing alcohol outlets density restrictions, which are significantly less effective environmental prevention measures. An additional policy could Encourage

and Support cities to study and enact the most effective, evidenced-based policies and practices that reduce alcohol-related harm.

Page B-7 Strategy 2 Policy HE-B.10 Wellness in schools commits to *build capacity within schools to develop emotional intelligence, conflict resolution skills, and identify barriers to learning...* Conflict resolution skills are especially critical given the surge in school shootings and rampant instances of bullying in schools and on social media. Bullying has been especially disturbing and has resulted in emotional distress, self-harm, and even suicides among young people.

## **5. Please share your questions and comments related to SECTION C: LAND USE AND URBAN DESIGN**

The role of Urban Villages is an innovative approach to planning for development that considers the intrinsic relationship between jobs, housing, and transit. However, when feasible, the development of urban villages must work to accommodate residents from the varying economic spectrum and provide quality jobs, affordable housing and transit, and access to healthy foods.

Pages C-1 through C-3 should acknowledge that while land use intensification strategies and higher density building are a part of an approach to developing urbanized areas with housing, jobs, and transportation---higher density building does not necessarily lead to an additional supply of affordable housing stock. In fact, a concerted effort must be advanced to ensure that as jobs grow, affordable housing growth must also keep pace.

Page C-4 Policy HE-C.2 Urban Area footprint indicates *that most new urban development should occur through urban infill, redevelopment, and compact and transit-oriented development*. It should clarify equitable transit-oriented development.

Page C-5 Policy HE-C.5 Health planning coordination - *Maintain and enhance coordination with the cities to incorporate and emphasize health considerations in general plans, area plans, and new urban development*. Specific language should be added to encourage a commitment to measureable goals tied to generating positive health outcomes, as it relates to urban growth and development policies (e.g. areas that house populations with higher rates of obesity or diabetes may not have walkable, bikeable streets or allow healthy food access). Future development plans should incorporate the goal of not only building at higher densities and providing neighborhood amenities, but also promoting positive health outcomes.

Page C-6 Strategy #2 Policy HE-C.10 Development densities - *Encourage new development, especially multigenerational, multi-family, and workforce/affordable housing near transit corridors and neighborhoods centers and at densities that are supportive of transit, mixed use and complete communities*. Again, it should be clear that planning for higher densities will not necessarily lead to a supply of affordable housing, and needs to be emphasized as a critical component of new development projects.

Add a new policy objective: Encourage and support cities who work to reduce their auto-dependency and transition to a greater investment in equitable, transit-oriented development linked to affordable neighborhoods and thriving economic opportunities.

## **6. Please share your questions and comments related to SECTION D. ACTIVE AND SUSTAINABLE TRANSPORTATION**

Pages D-2 and D-6, under *Major Strategies and Policies*, Strategy #3 - Provide balanced, innovative, and inclusive transit systems and services that increase ridership thereby reducing vehicle miles traveled and greenhouse gas emissions.

Page D-6, Strategy #3 - The creation of a frequent, interconnected transit network that supports opportunities to improve and connect important services and destinations such as employment centers, medical facilities, schools, workforce/affordable housing, and other community assets can increase the appeal of public transit as a transportation option, increase transit use, improve health outcomes, reduce greenhouse gas emissions and travel time, and meet diverse community needs.

Page D-6 Policy HE-D.16 Transit services – Add increase frequency of services on high ridership routes that will increase ridership and generate better service.

Page D-6 Policy HE-D.17 Transit Advocacy for underserved communities and equitable transit-oriented development – Advocate for subsidized bus passes and increased levels of service to destinations of high value to seniors, low-income families, people with disabilities, and other transit-dependent populations.

Page D-7 Policy HE-D.18 Coordination with transit agencies – also focus on improving transit service in areas marked by significant traffic congestion and vehicle usage, in order to reduce vehicle dependency. Currently, Santa Clara County makes up one-fourth of the Bay Area's population and Vehicle Miles Traveled, but only 10 percent of the transit ridership.

Add new policy objective: Advance a holistic approach to transportation planning, which prioritizes investments in the areas of planned anticipated future growth (Priority Development Areas) and the importance of having quality jobs, and affordable housing located along transit corridors.

Add a new policy objective: Encourage VTA and other transit providers to engage in robust outreach and public education efforts with the community, in order to solicit meaningful input about transit needs to best inform transit capital and operations priorities.

## **7. Please share your questions and comments related to SECTION E. RECREATION AND PHYSICAL ACTIVITY**

NONE

**8. Please share your questions and comments related to SECTION F. HEALTHY EATING, FOOD ACCESS, AND SUSTAINABLE FOOD SYSTEMS**

NONE

**9. Please share your questions and comments related to SECTION G. AIR QUALITY AND CLIMATE CHANGE**

This section is especially robust and effectively articulates the critical role and opportunities that regional and local land use and transportation planning have in addressing climate change challenges.

**10. Please share your questions and comments related to SECTION H. HEALTHY HOUSING**

Overall, there must be an acknowledgement that high-density housing development does not necessarily lead to affordable housing development. There must be clear policies and commitments to growing affordable housing stock to accommodate the county's existing and growing populations.

Page H-2 Major Strategies and Policies – Add strategy #4: Encourage and support cities to advance innovative forms of funding mechanisms and revenue streams in order to finance new affordable housing development.

Add a new policy objective: Support cities in strengthening anti-displacement policies, particularly in habitation that supports vulnerable communities (seniors, fixed or low-income populations, and veterans).

**11. Please share your questions and comments related to SECTION I. VIOLENCE PREVENTION AND SAFETY**

Page I-4 Policy HE-I.10 – Gang Prevention and Reduction model. Add Truancy Mitigation/ prevention. Encourage and support cities and schools to employ evidence-based strategies to reduce truancy. Students who are chronically truant are the least likely to complete their education and most likely to engage in gang-related activities and other unhealthy, unsafe behavior.

Add a new policy objective: Safe schools. Encourage and support the Board of Education and schools to invest planning and implementation of active shooter protocols within schools. This includes schools employing behavioral health techniques that support challenged youth and preventing student-on-student conflicts from escalating.

Page I-5 Strategy 2 Policy HE-I.11 – add a provision that includes strengthening mandated reporting requirements.

**12. Please provide any general comments or questions about the entire Element's content, format, process, implementation, etc.**

NONE