

Center for Health Equity

The Department of Public Health (DPH) is facilitating Health Agency efforts to establish a Center for Health Equity. The Center's mission is to ensure all individuals have access to the opportunities and resources needed for optimal health and well-being by advancing racial, social and environmental justice in partnership with committed organizations and residents. Guiding principles for the Center include a belief in dismantling a system that assigns human value based on race, ethnicity, sexual orientation, gender identity, and/or religious affiliation; using data to drive action; amplifying community voices through engagement in planning, implementation, analysis, and reporting; and building multi-sector partnerships that advance health equity.

The Center will initially invest in five key initiatives with support from the Health Agency and external partners to expand cross- departmental efforts and community collaboration to achieve system, policy, and practice changes that lead to health equity. Core staff for the Center include 4 full time DPH positions and staff on loan from both the Department of Mental Health (DMH) and Department of Health Services (DHS).

Five Key Initial Initiatives

Infant Mortality

The infant mortality rate is commonly used to measure the health and well-being of a population, and significant differences exist among communities throughout the nation based on income level, educational attainment, geographic location, and most significantly by race/ethnicity. In LA County, the infant mortality rate of Black babies is three times higher than the rate of white babies.¹ Closing this gap will require developing innovative strategies to improve pre-conceptual, prenatal, and inter-conceptual care.

Health Agency Leads:

Dr. Deborah Allen, Department of Public Health (DPH); **Dr. Erin Saleeby**, Department of Health Services (DHS); **Dr. Bryan Mershon**, Department of Mental Health (DMH)

Sexually Transmitted Infections

While STI rates remain lower in LA County than in many other large urban areas, rates have increased dramatically in recent years with a disproportionate number of cases among men of color, LGBTQ persons, and African American women. For example, the highest rates of gonorrhea are among young Black men and women, while the rate among Black women is over 11 times higher than the rate among white women and nearly six times higher than Latinas.² Novel, coordinated action is needed to address the complex factors affecting STI rates countywide and placing some communities at higher risk.

Health Agency Leads:

Dr. Jeffrey Gunzenhauser, DPH; **Dr. Mallory Witt**, DHS; **TBD**, DMH

1. Los Angeles County Department of Public Health, Maternal, Child and Adolescent Health Programs. 2013 birth and death record data obtained from the California Department of Public Health, Center for Health Statistics, OHIR Vital Statistics Section

2. Los Angeles County Department of Public Health, Division of HIV and STD Programs. (2016). 2014 Annual HIV/STD Surveillance Report. Online: <http://publichealth.lacounty.gov/dhsp/Reports/HIV-STDsurveillanceReport2014.pdf>. Last retrieved July 20, 2017.



Environmental Justice

Low income communities and communities of color face a range of environmental hazards that contribute to poor health and health inequities. These include high-risk industry operating in close proximity to densely populated urban areas as well as poor quality infrastructure including lack of parks and trees, streets unsafe for walking, insufficient affordable housing, and degraded indoor environments. Addressing these conditions will require extensive collaboration across County departments and programs as well as ongoing community engagement to mitigate community-identified threats and support implementation of community identified solutions.

Health Agency Leads:

Angelo Bellomo, DPH; **Connie Salgado-Sanchez**, DHS; **Ana Suarez**, DMH

Health Neighborhoods

Health Neighborhoods is a countywide initiative to improve health equity through better coordinated care and community collaboration. This network of coalitions has brought together diverse stakeholders including personal, mental and public health providers, community based agencies, social service providers, and community members to refine and improve clinical and community supports in designated neighborhoods throughout LA County. The goals are to enhance access to services; increase care coordination among clinical and community providers to improve quality of care; and improve the health and well-being of neighborhood residents. Together, the Health Agency intends to enhance, expand, and leverage opportunities to collaborate on initiatives that address health inequities, and to implement policy and system changes that strengthen community environments to achieve equitable health outcomes.

Health Agency Leads:

Kalene Gilbert, DMH; **Deborah Davenport**, DPH; **Quentin O'Brien**, DHS

Cultural and Linguistic Competency

Cultural competence for health care providers often refers to skills, values and principles that embrace understanding, appreciating and respecting the differing social, cultural, and linguistic needs of clients. When absent, communication and trust suffers, often leading to client dissatisfaction, decreased treatment adherence, lower utilization of health promoting services, and ultimately poorer health outcomes. Providers may also be at risk of allowing implicit bias to adversely affect their behavior and clinical decision-making. A culturally competent health care system can help improve health outcomes and quality of care, and can contribute to the elimination of health inequities. This specific initiative builds upon a 2015 Health Agency Strategic Priority and aims to establish the Health Agency Cultural Competency Institute (HACCI). HACCI will focus on ensuring culturally competent strategies are used across the Health Agency; community stakeholder involvement occurs at critical junctures; quality improvement is ongoing; and workforce development and training is available for staff involved in client care and community outreach.

Health Agency Leads:

Sandra Chang Ptasinski, DMH; **Cynthia Harding**, DPH; **Nina Vassilian**, DHS