

1 **[Health Care Disparities]**

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3 **Resolution outlining the Board of Supervisor’s (“the Board”) commitment to**  
4 **eliminating health disparities and adopting the Leading Health Indicators set by**  
5 **Healthy People 2010 as the basis for public health priority-setting and decision-making.**  
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7 WHEREAS, current research demonstrates that racial and ethnic health disparities and  
8 their underlying determinants are important policy issues, therefore, The San Francisco Board  
9 of Supervisors is committed to the health of all San Franciscans, and;

10 WHEREAS, through this commitment the Board will continue to address, reduce, and  
11 eliminate all health disparities that affect San Franciscans especially our most vulnerable  
12 populations as defined by race/ethnicity, socio-economic status, geography, gender, age,  
13 disability status, risk status related to sex and gender, and among other populations identified  
14 to be at-risk for health disparities; and,

15 WHEREAS, the Bayview Hunters Point community and southeastern neighborhoods  
16 are primarily African Americans communities, the Asian/Pacific Islander and Latino  
17 populations are growing. Poverty is a major issue, with nearly 22% of Bayview Hunters Point’s  
18 residents living below the poverty line; and,

19 WHEREAS, poorer neighborhoods are more vulnerable to external factors that are  
20 detrimental to health. Pollution and poor housing can exacerbate many preexisting health  
21 problems. In the United States, low-income and predominantly African American and people  
22 of color neighborhoods, such as Bayview Hunters Point, are often disproportionately laden  
23 with greater concentrations of hazardous environmental conditions such as: contaminated soil  
24 and water, industrial emissions, and exhaust from motor vehicle; and,

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1           WHEREAS, despite the great advancements in health and healthcare, African  
2 Americans and people of color are experiencing poorer health resulting in higher levels of  
3 illness and death in San Francisco; and,

4           WHEREAS, African Americans die younger and more frequently than other ethnic  
5 groups in San Francisco. According to a 2007 study done by San Francisco Department of  
6 Public Health utilizing the local death registry to measure, rank and monitor premature death  
7 for almost every leading cause of premature death in men and women, African Americans had  
8 the highest age standardized years of life lost compared to other ethnic groups; and

9           WHEREAS, from 1996-2003 the frequency of premature mortality among black  
10 embryos/infants versus embryos/infants other races is more than double other races in San  
11 Francisco the Bay Area, and the State of California; and

12           WHEREAS, the prevalence of obesity and related diseases among Latino and African  
13 Americans is more than twice the prevalence among white San Franciscans. In the  
14 Southeastern neighborhoods there the lack of access to healthy foods, inadequate  
15 transportation, lack of exercise facilities, and violence all serve to restrict the ability to exercise  
16 and eat healthy foods; and,

17           WHEREAS, San Francisco people of color tend to experience more adverse health  
18 and social consequences as a result of their drinking and smoking as evidenced by higher  
19 rates of hypertension, the involvement of alcohol and other drugs in criminal activity, and  
20 consistently lower completion of treatment programs by African-Americans and Latinos,  
21 compared to whites. A San Francisco based study found that the African American and  
22 Latino communities have proportionality more billboards advertising alcohol and tobacco than  
23 white and Asian neighborhoods; and,

24           WHEREAS, the incidence and mortality rate for several major cancers including lung,  
25 prostate and breast cancers of is highest among African American men in San Francisco.

1 African American men are more likely to get and die from prostate cancer than men of any  
2 other racial or ethnic group in the San Francisco; and,

3 WHEREAS, the same DPH study also found that among African American men violent  
4 assault (homicide) is the leading cause of death and among Latino/Hispanic men HIV/AIDS is  
5 the leading cause of premature death. The Health Resources and Services Administration's  
6 HIV/AIDS Bureau (HRSA/HAB) recognizes that substance abuse treatment is an important  
7 component of HIV care for many people living with HIV; and,

8 WHEREAS, adult immunizations can dramatically reduce health risks, especially for  
9 older adults. Still influenza and pneumococcal immunization rates are significantly lower for  
10 African American and Hispanic older adults than for whites; and,

11 WHEREAS, according to the Center for Disease control recent data suggest that  
12 mental illnesses are increasingly relevant to the mission of disease prevention and health  
13 promotion. Projections suggest that by 2020, depression will become the second leading  
14 cause of disease worldwide; and,

15 WHEREAS, Bayview Hunters Point (10% of the population) has both a high prevalence  
16 of asthma relative to the country and relatively higher hospitalization rates for asthma relative  
17 to other neighborhoods in San Francisco; and

18 WHEREAS, research has conclusively shown that neighborhoods without such  
19 resource as full service grocery stores and safe and inviting public parks have higher rates of  
20 premature death and avoidable hospitalizations for chronic disease conditions; and,

21 WHEREAS, significant disparities continue to persist in coverage levels for adults of  
22 different racial and ethnic background. About 30 percent of Hispanic and 20 percent of  
23 African Americans lack a usual source of health care compared with less than 16 percent of  
24 whites.

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1 WHEREAS, the Board encourages the Department of Public Health to work through  
2 partnerships to promote prevention and improve public health systems that maximize health  
3 and quality of life for the people of San Francisco; and,

4 WHEREAS, as a group, the Leading Health Indicators outlined by Healthy People 2010  
5 reflect the major health concerns in the United States at the beginning of the 21st century.  
6 The Leading Health Indicators were selected on the basis of their ability to motivate action,  
7 the availability of data to measure progress, and their importance as public health issues; now  
8 therefore be it,

9 Resolved, the Board pledges to support programs that aim toward the elimination of  
10 health disparities through education and training, healthcare quality and access, research,  
11 data collection, leadership and collaboration; be it

12 Further Resolved, the Board adopts the Leading Health Indicators set by Healthy  
13 People 2010 as the basis for public health priority-setting and decision-making:

- 14 1. Physical Activity
- 15 2. Overweight and Obesity
- 16 3. Tobacco Use
- 17 4. Substance Abuse
- 18 5. Responsible Sexual Behavior
- 19 6. Injury and Violence
- 20 7. Mental Health
- 21 8. Environmental Quality
- 22 9. Immunization
- 23 10. Access to Health Care

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