“Men and women of all races are born with the same range of abilities. But ability is not just the product of birth. Ability is stretched or stunted by the family that you live with, and the neighborhood you live in — by the school you go to and the poverty or the richness of your surroundings. It is the product of a hundred unseen forces playing upon the little infant, the child, and finally the man.”

Lyndon Johnson, Commencement Speech at Howard University
June 4, 1965
Influences on Health: Broadening the Focus

Health is shaped by many influences, including age, sex, genetic make-up, medical care, individual behaviors and other factors not shown in this diagram. Behaviors, as well as receipt of medical care, are shaped by living and working conditions, which in turn are shaped by economic and social opportunities and resources.

Prepared for the Robert Wood Johnson Foundation by the Center on Social Disparities in Health at the University of California, San Francisco.
We Are Challenged By:

Current Social Equality Practice Framework

ENDS

Health Care System Focused On Health Financing

Education As Gateway To Work

Human Services As A Social Service Safety Net

Regional Economic Development

MEANS
Healthy Sacramento Working Model

Social/Health Equity Framework

GOAL

Californians are Healthier

All County Residents are Healthier

All County Residents Can Engage in Discussion re: Their Communities

All County Residents Are Supported to Succeed in Life

Health Systems Focused on Health and Wellness

Ed Systems Are Gateways to Learning/Healthy Development

Human/Mental Health Services Promote Health

Economic/Community Dev Seeks to Improve Health and Well-being

Community

END

MEANS
1. Focused us
   a. 5-year Targets
      ↓ 5% death and disability due to tobacco use
      ↓ 5% rate of obesity through nutrition and physical activity interventions
      ↓ 5% death and disability due to heart disease and stroke
   b. Clearly address targeted health disparities

2. Gave us rigor
   a. Evidenced based strategies
   b. Data-driven decision making
With CTG’s Help We Have

- Identified where the greatest health disparities in Sacramento county exist.

- Identified what efforts can be leveraged to address these disparities.

- Established a process and structure for working together collaboratively.

- Crafted a collective strategy for making Sacramento the healthiest county in the state.

- Awarding grants for implementation of pilot projects.
However to get to a Healthy Sacramento Concept we must.

1) Ensure that health efforts in Sacramento don’t lose sight of the region’s racial, ethnic and cultural communities;

2) Directly connect these community’s efforts to address the disparities they face to the health coalition’s efforts around broader policy and systems change;

3) Ensure the collective impact of communities aspirations are known and responded to in Sacramento County;
We Need These Communities Creating the context for their Health outcomes

Four Partners

[Logos of four partners]

Supporting Organization

[Logo of supporting organization]

Funders

[Logos of funders]
Connecting Health, Equity and Health Care

To Balance Out the Health in Sacramento

- Transforming place and systems
- Multi-sector partnerships
- Community engagement
- Link health and community development

Connecting Health
Place-Driven, Policy-focused model

Healthy Sacramento
(Technical Expertise)

• Building targeted communities capacity
• Ensures Equity Focus
• Deep, long-term investment in places.

Communities Creating Health
(Context and Focus)

Sacramento Region Health Care Partnership
(Infrastructure)

• Leverage ACA and Regional Change
• Provide Proactive Community-based, Community-Centered Care
• Inclusion of Social and Emotional Wellness
Questions?