

ALASKA MUNICIPAL LEAGUE

Social Determinants of Health & Cities of Opportunity

(And why Should Municipalities Care?)

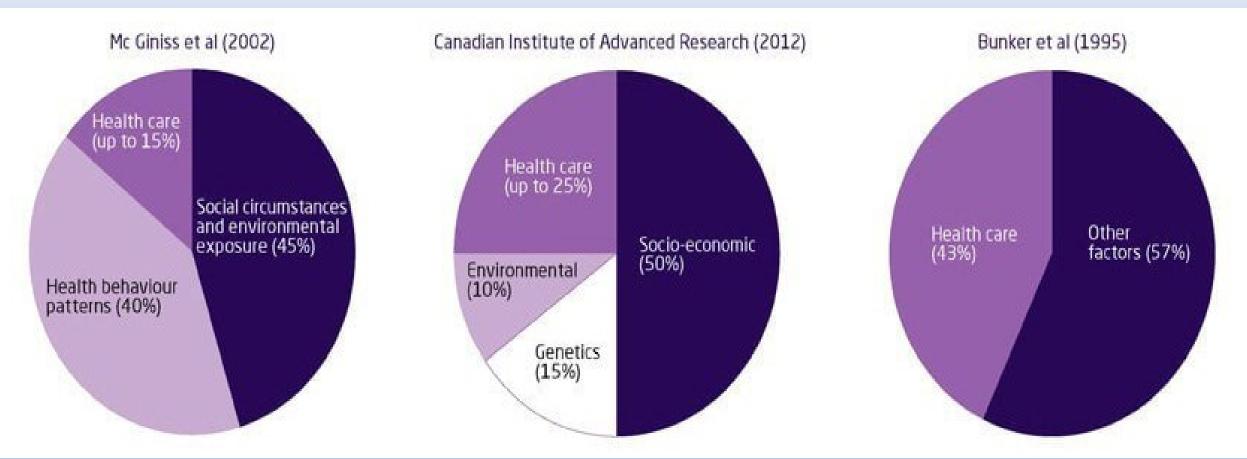
AML Annual Conference Alicia Hughes-Skandijs, Director of Programs Social determinants of health (SDOH) are the conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks.

- Stable Tax Base and Predictable/Positive Economy.
- Good Schools for workforce and to attract families.
- Attractive Built Environment.
- Positive Quality of Life.
- Healthy Demographics.

Social Determinants of Health



"It's not your genetic code, it's your zip code."

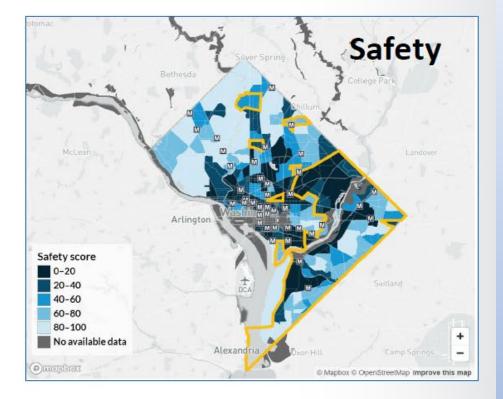


Advancing the Social Determinants

Addressing Pedestrian Fatalities

In Washington DC in 2015, a pedestrian or cyclist had been dying on the city's streets every 21 days.

	Individual	Social Determinant	Equity-lens
The problem is	Unsafe pedestrian behaviors	Unsafe community conditions	Historical injustices in investment
The solution is	Increased pedestrian education	Address community conditions	Identify priority neighborhoods



NATIONAL LEAGUE

Advancing the Social Determinants



Addressing High Asthma Hospitalization

Cityopolis has noticed increasing asthma hospitalization among young children at the city's main hospital.

	Individual	Social Determinant: Consider Physical, Social, Economic & Service Environments	Equity-lens: Consider WHO and WHY disproportionally impacted.
The problem is			
The solution is			

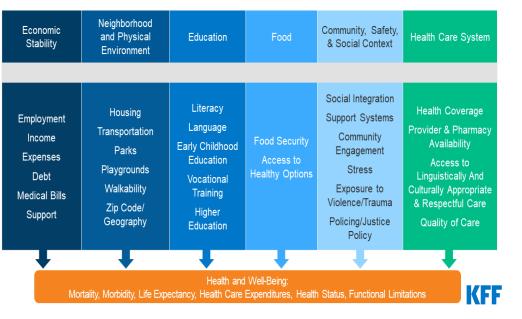
Social Determinants of Health



• 11% of Alaskans living in Poverty.

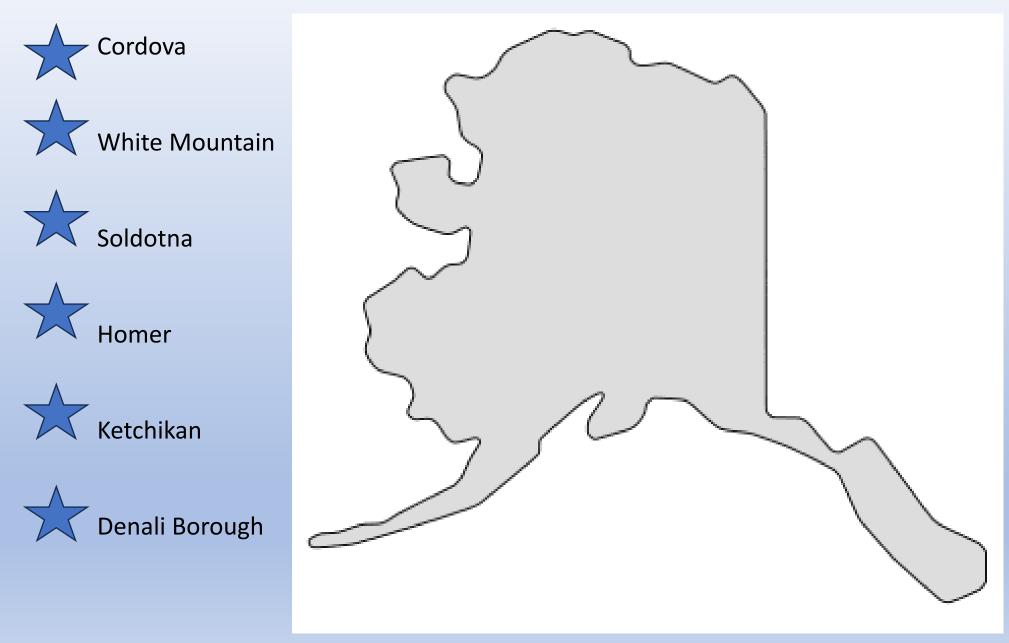
- 77% graduation rate
- # of families unable to afford childcare
- 4% drop out rate
- 12.6% uninsured

Social Determinants of Health



environment networks education access childcare physical support safety oyment economic socia prevention healthcare nutrition neighborhood conditions cultural stability secu

Cities of Opportunity Inaugural Cohort



Collect Data

Identify policy and system improvements

Develop action plans to address inequities

Participate in peer-topeer convenings Implement policies, practices, systems and structures to improve health, well-being and life expectancy

PHASE ONE: ASSESSMENT AND COMPETENCIES

We need technical training We need childcare nearby We need mentorship and trust from construction partners



BIPOC WOMEN

Assess for needed wrap-around services, needed technical skills



We need DEI training and mentorship We need another bathroom on site We need to know expectations from BIPOC women

CONSTRUCTION PARTNERS Assess for diversity, equity, and inclusion, and project site readiness



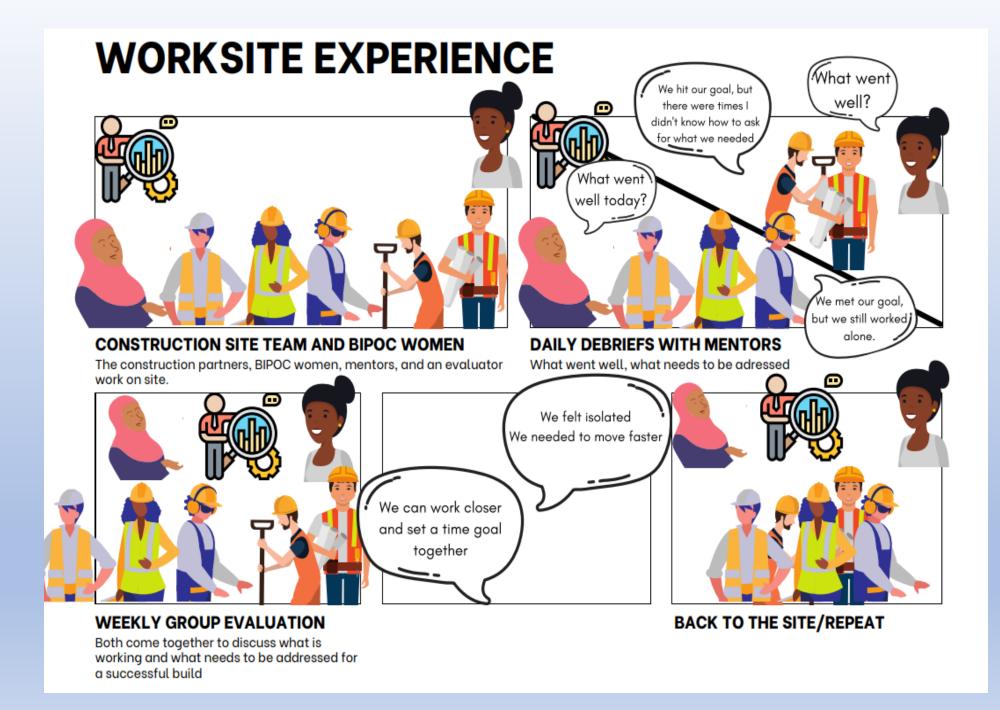


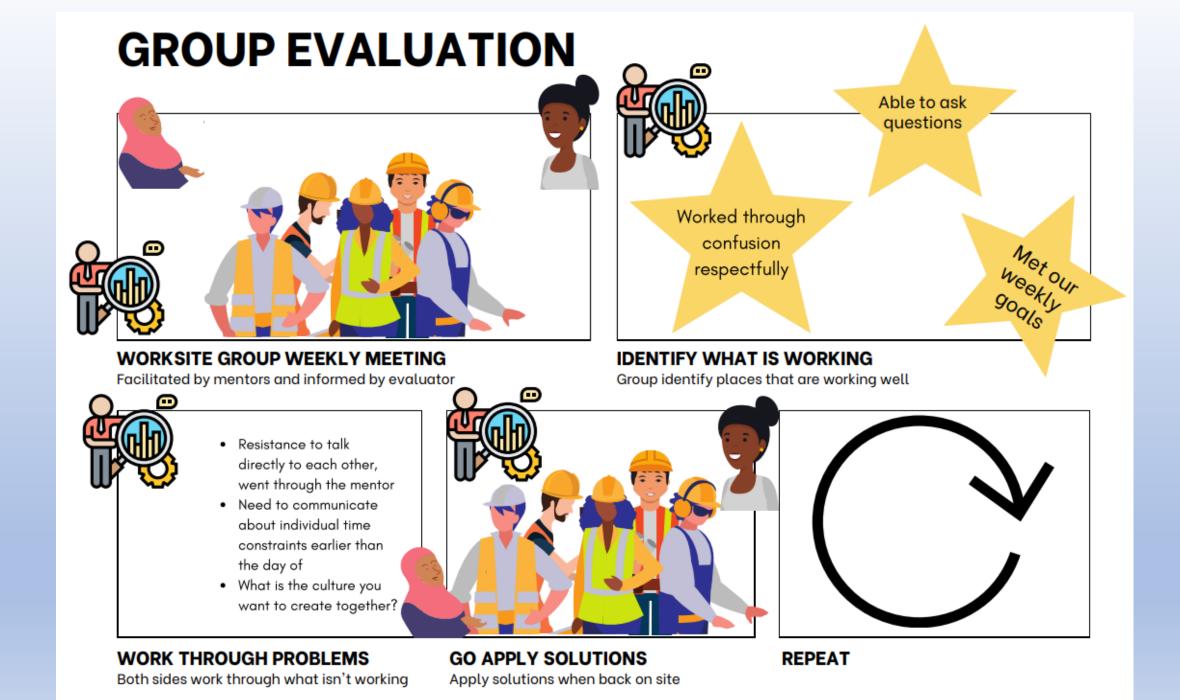
TRAINING

People get the appropriate training based on the assessment

READINESS Mentors for BIPOC women and Construction Partners

both sides are ready and excited to work together





How will the Community Benefit?

Short-Term Outcomes

- 1. 68 BIPOC Women employed, enrolled in training, or open business within 1 year
- 2. 5-6 Industry Employers are retaining BIPOC women employees and double their women employees within 3 years
- 3. Enrollment of BIPOC women in training programs have doubled within 3 years
- ~30 co-creators remain engaged in project past their cohort

- 1. BIPOC women represent 13% of labor participation
- 2. Employers recognized for inclusive hiring practices triples
- 3. BIPOC women enrollment in post-secondary training is tripled

Long-term

Outcomes

- 4. Co-creation and co-design is adopted across City departments
- 5. Co-creation processes involve 100+ Rochester residents per year