

## Executive Summary

**Most, if not all, government decisions impact the health of its citizens.**

It is the responsibility of decision-makers to consider how policies that shape food access, housing, transportation, public safety, education, sustainability, climate change, green space and parks, air and water quality, criminal justice, and economic development can be directed toward improving health outcomes and avoid unintended consequences, especially inequities that lead to health disparities.

**Health and Equity in All Policies (HEiAP)** is a collaborative approach to systems change that acknowledges the Social Determinants of Health (SDOH) and incorporates health and equity considerations into decision-making across sectors and policy areas. The goal is to ensure that all decision-makers are informed about the health, equity, and sustainability consequences of various policy options during the policy development process. HEiAP are flexible and there is no one size fits all.

### HEiAP Policies intend to do five things:

1. Make healthy public policy the normal way of “doing business” by embedding considerations into government decision-making.
2. Support collaborations, including departments not typically considered in public health.
3. Benefit multiple partners simultaneously.
4. Engage stakeholders, including community members, policy experts, advocates, and funders.
5. Create structural or procedural change.



## Problem

**Health and equity work within the City of Cleveland is disjointed and operating in silos.** There is a need to ensure that both health and equity considerations are systematically integrated into major policy and decision making processes that drive the trajectory of Cleveland. Health and equity disparities that plague Cleveland are a result of decades of both intended and unintended consequences. Identifying policy solutions that streamline health and equity work and support a continuity of operations are vital to the forward momentum in eliminating health disparities and racism as a public health crisis.

## Solutions

Health and racial equity are inextricably connected. Achieving health and healthy equity will impact racial equity, as solutions must be robust.

**Health** is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.

**Health equity** is assurance of the conditions for optimal health for all people.

**Racial equity** is a process of eliminating racial disparities and improving outcomes for everyone. It is the intentional and continual practice of changing policies, practices, systems, and structures by prioritizing measurable change in the lives of people of color.

HEiAP is a health equity strategy recommended and supported by almost all leading public health agencies and advocates, including but not limited to Altarum, the APHA, ASTHO, the CDC, Change Lab Solutions, HPIO, NACCHO, and the WHO. The ability to hold this policy accountable is dependent upon establishing clear health and equity metrics and bodies of oversight who conduct regular review and reporting that is publicly available. A strong HEiAP policy can be:

### **An ordinance, a resolution, or an executive order**

Formally commits the city to using a HEiAP approach to develop and implement the policy. It establishes an Interdepartmental Task Force to develop a HEiAP Strategic Plan to integrate into city decisions and operations, as well as provides regular reports on the status of health and health equity in the city. A Task Force may use the following mechanisms for institutionalizing health equity considerations:

- Health Impact Assessments (HIAs)
- Require or recommended examination of health impacts (ordinances)
- Interagency memoranda of understanding or charters that formalize cooperation between the city and public and private partner(s).
- Strong communication and engagement components that center community voice.

Choosing between the three options does not impact the commitments needed to progress work, just the mechanism to hold the work accountable.

### **A systems change**

Not formally adopted as a policy. Formal and informal coalitions/collaborations around HEiAP functionally filling the gap. This may take the form of collective impact, where health and equity implications are given the space for consideration in the broader context of community initiatives and planning.

# How does this fit in our current landscape?

## Timeline of Health and Equity Strategies in the City of Cleveland

Division of Health Equity & Social Justice (HESJ) established

Interdepartmental Equity Team (IET) established

IET workgroup meetings begin

Equity Advisory Group kick-off meeting

IET Implementation - Health and Equity Assessments begin



# How does this fit in our current landscape?

## Ohio Revised Code and other statewide initiatives

There are no pre-emption concerns at this time when it comes to HiAP and the Ohio State Legislature. In 2015, the Ohio Public Health Association (OPHA) adopted HEiAP as an organizational value and formed a HEiAP Committee to address poor health outcomes and social inequities in Ohio. Progress toward introducing legislation for HEiAP in Senate Bill 302 ended with the close of the 132nd General Assembly. Currently, the following Ohio entities have adopted policies and/or established organization efforts towards either HiAP or racial equity.

### HiAP

- City of Akron, 2016
- City of Kent, 2020 (Resolution 2020-80)
- Dayton & Montgomery County Board of Health, 2019
- Franklin County Public Health, 2022
- Kent City Health Department, 2020
- OPHA, 2015
- Summit County, 2016 (Resolution 2016-1650)

### Racial Equity

- City of Cleveland, 2020 (RAPHHC Coalition, Interdepartmental Equity Team)
- City of Columbus, 2020 (Racial Equity Collaborative)
- State of Ohio, 2020 (Governor's Equity Advisory Board)
- Summit County, 2020 (Special Review Committee)

## Alignment within the City and existing efforts

Equity work is happening all the time, throughout the city, often with intense collaboration. But sometimes, it is occurring in silos. It is important to recognize the work that has been happening that considers both health and equity.

Initiative/Strategy	Lead
Interdepartmental Equity Task Force	Department of Health
Complete Streets Policy	Department of Planning
Healthy Homes Initiative	Departments of Health; Building and Housing
Cleveland Thrive	Office of Prevention, Intervention, and Opp.
Lead Safe Cleveland	Community Partners
First Year Cleveland	Case Western Reserve University
Racism as a Public Health Crisis Coalition	The Urban League and The United Way
City County Food Policy Coalition	Community Partners

## City of Cleveland Code of Ordinances

The Declaration of Racism as a Public Health Crisis established the Division of Health Equity and Social Justice in the City of Cleveland. The legislation enabled the Commissioner to commit to analyzing, assessing, and implementing strategies that support the social determinants of health broadly in the community and its systems.

While very much aligned with HEiAP, it does not contain the following elements:

- It did not explicitly discuss the accountability the city has towards its own systems and policies.
- It does not recognize the shared ownership and responsibility of health equity amongst all departments, nor does it bring together any sort of Task Force.
- It does not create a system of monitoring and evaluation when it comes to policy and SDOH work.

### § 141.24 Division of Health Equity and Social Justice

There is established in the Department of Public Health a Division of Health Equity and Social Justice to be controlled and administered by a Commissioner of the Health Equity and Social Justice, subject to the provisions of the Charter and ordinances of the City, and to the supervision and direction of the Director of Public Health.

(Ord. No. 843-2020. Passed 11-18-20, eff. 11-19-20)

### § 141.25 Duties of the Commissioner of Health Equity and Social Justice

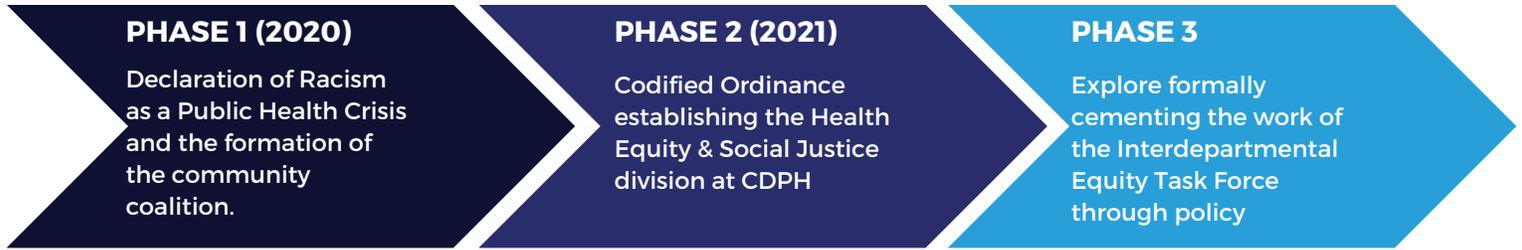
The Commissioner of Health Equity and Social Justice shall administer the Health Code and see that all ordinances and rules of the City and all applicable State laws affecting the public health are properly enforced. He or she shall supervise the work of the several bureaus as may be established in the Division of Health Equity and Social Justice. He or she shall examine and address health inequities across the City and shall review differing opportunities for healthcare by demographic sub-populations and geographic areas. He or she shall analyze social well-being and social determinants of health, including but not limited to, aspects of the social environment, such as racism, discrimination, income, education level, and marital status; the physical environment, such as place of residence, crowding conditions, and built environment (buildings, spaces, transportation systems, and products that are created or modified by people); and health services, such as access to and quality of care and insurance status. He or she will **conduct assessments of health equity** in communities and systems to identify the behavioral, cultural, social, environmental and organizational determinants that promote or compromise health in disadvantaged groups. He or she shall **identify evidence-based strategies** and measurable goals and objectives to promote health equity and social justice; and shall **implement effective, efficient and culturally sensitive strategies** to improve health equity and social justice. He or she shall perform all other appropriate duties that are critical to advancing the mission, duties and responsibilities of the Division of Health Equity and Social Justice.

(Ord. No. 843-2020. Passed 11-18-20, eff. 11-19-20)

# Final Recommendations

The City of Cleveland engages in health and equity work everyday, but there is a need to ensure this work is coordinated and continuous. The City should explore policy options that consider and support existing efforts; creating permanent structures that engrain equity into the planning, budgeting, implementation, and evaluation of offices, departments, and divisions.

Since 2020, legislative progress has committed resources to dismantling systems that perpetuate inequity and injustice. Implementing HEiAP may be considered a natural progression and demonstration of Cleveland's commitment to public health, health equity, and racial equity.



## Sources

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July 2024