

Social Determinants of Health

Introduction

Through the FY 2021 budget, the Council continues its efforts to promote the health of residents and increase access to healthcare with \$27.9 million of new investments in the operating budget and the tax code. Some of these enhancements will allow more District residents to maintain health insurance, while others provide mental health services in the community and in an academic setting, expand school-based nutritional programs, and train the next generation of healthcare workers – see [table](#) below.

The Council's investments promote the health and well-being of all District residents but also make significant strides toward addressing the racial inequities in healthcare access and delivery that have existed in the Black community long before COVID-19. Residents of Ward 8, where 90 percent of residents are Black, have the lowest life expectancy of any part of the District at 70 years. D.C.'s highest life expectancy is 87 years in Ward 3, where 72 percent of the population is non-Latinx white.¹ Black Americans are more likely to die from diabetes, heart disease, hypertension, and obesity than any other major racial group.² These comorbidities are a confluence of factors best explained by social determinants of health. Where Black children and adults live, work, and play affects a range of outcomes including health care access and quality of care, availability of healthy foods, and exposure to violence and trauma.³ A 2018 D.C. Health Equity Report noted that 80 percent of health outcomes are determined by social, structural, and physical determinants of health.⁴

Social Determinants of Health Budget Highlights

	Mayor's FY21 Proposed Budget	Council's FY21 Enhancements	Approved FY21 Budget
<i>D.C. Healthcare Alliance*</i>	\$96,119,000	\$7,427,000	\$103,546,000
<i>Community-Based Mental Health</i>	\$33,247,000	\$5,500,000	\$38,747,000
<i>School-Based Mental Health</i>	\$17,945,000	\$3,851,000	\$21,796,000
<i>School-Based Nutrition</i>	\$64,798,000	\$2,891,000	\$67,689,000

**Note: Some administrative costs at the Department of Human Services may be undercounted in the Mayor's FY21 Proposed Budget and the Approved FY21 Budget*

Access to Health Care

The Council approved the construction and operation of a new \$383.7 million capital project to build a [state-of-the-art community hospital and ambulatory care facility on the St. Elizabeths campus](#).⁵ This hospital will serve as the catalyst for an interconnected health care system of emergency, urgent specialty, ambulatory, and primary care. It will have medical offices, independent physicians, and dentists. This health system will help eliminate health access disparities that pervade Wards 7 and 8.

The Council is also moving towards approval of the "[New Howard University Hospital and Redevelopment Tax Abatement Act of 2020](#)," which will assist Howard University in development of a new Level I trauma and academic teaching hospital.⁶ Howard's College of Medicine graduates more African American doctors than any other university in the country. This investment in training a dedicated health workforce will further the District's progress towards closing racial disparities in health care access.

The Council remains steadfast in its commitment to furthering the health and well-being of all residents regardless of their country of origin or citizenship status, and the locally funded D.C. Health Care Alliance is a powerful symbol of this commitment. In the FY 2021 budget, [the Council supports the D.C. Health Care Alliance by directing \\$7.43 million and 13 FTEs to the Department of Health Care Finance \(DHCF\) and the Department of Human Services \(DHS\) to implement the "DC Healthcare Alliance Program Recertification Simplification Amendment Act of 2017."](#)⁷ The DC Healthcare Alliance provides fully subsidized health coverage to approximately 15,500 low-income District residents who do not qualify for Medicaid.⁸ It primarily serves residents who are recent immigrants and those who are undocumented. Since 2011, the District has required Alliance enrollees to recertify their eligibility every six months through an in-person visit at one of the five Economic Security Administration (ESA) Service Centers located across the District. This re-certification requirement has imposed a significant administrative burden on Alliance enrollees. ESA centers are not open on the weekends or evenings, and enrollees often spend hours waiting in line and make multiple visits before they can complete their recertification.⁹ Since the recertification process changed in 2011, enrollment in the Alliance has fallen while the average cost of each enrollee have risen.¹⁰ These trends show that District residents have lost access to health care; and the sickest people with the highest health care needs will fight to maintain their Alliance coverage, while relatively healthy people have fallen off. By funding this legislation, Council will increase access to health care and reduce administrative burdens placed on vulnerable residents. The legislation allows Alliance enrollees to recertify their eligibility to conduct one of their recertifications by telephone. According to the OCFO, an additional 1,600 residents will have health insurance coverage within six months of implementing this legislation.¹¹

The Council approved \$383.7 million in capital funds for a new community hospital and ambulatory care facility on the St. Elizabeths campus.

The Council provides \$7.43 million to expand low-income residents' access to health care.

The FY 2021 budget invests in health care industry employment training to ensure that District residents have access to the living-wage careers that the hospital projects will create. The Council provides [\\$689,625 to establish a healthcare sector partnership through the Workforce Investment Council \(WIC\)](#). The partnership will focus on meeting the staffing needs of the two new District-financed hospitals and increasing the number of District residents employed in the healthcare industry. The partnership will create a sector intermediary to connect business and training providers and help trainees secure jobs with partner employers.

The Council provides [\\$350,000 to fund the "Certificate of Need Fee Reduction Act of 2019"](#) to reduce the financial burden on health care providers by waiving or reducing the Certificate of Need (CON) application fee.¹² The bill streamlines the CON process so organizations like Vision to Learn, which provides free eyeglasses to children and youth in the District, can begin providing necessary services sooner. The CON application fee is something that State Health Planning and Development Agency charge providers for their review of new health services and the obligation of capital expenditures for a medical asset. The Council also adds [\\$401,000 to implement the "Electronic Medical Order for Scope of Treatment Registry Act of 2019,"](#) which will allow terminally ill patients the agency to make thoughtful and comprehensive decisions on their end-of-life care options.¹³

The Council provides \$5.5 million to reverse the Mayor's cuts to community-based mental health services.

Investing in Mental Health Care

Stressors related to financial security, social conditions, and violence increase psychological burdens such as anxiety and depression among Black families.¹⁴ Experiencing racism and interacting with law enforcement and the criminal justice system can create trauma and chronic stress, but Black communities face barriers to mental health services that leads to lower utilization rates.¹⁵ To that end, the Council invests [\\$5.5 million to reverse the Mayor's cuts to community-based mental health services at the Department of Behavioral Health \(DBH\)](#).¹⁶ The Council's enhancement will allow local behavioral health providers to continue to serve both Medicaid and non-Medicaid District residents who receive mental health rehabilitation services. Further, the Council directs [\\$300,000 to DBH for Mobile Mental Health Community Outreach](#). This program provides crisis intervention and stabilization services to residents experiencing behavioral health distresses, including grief and loss services after a traumatic event.

DCPS does not have enough school-based mental health clinicians to comply with the American School Counselor Association's recommended ratio one counselor for every 250 students. DCPS has a ratio of one counselor for every 408 students; one psychologist for every 402 students; and one social worker for every 217 students.¹⁷ However, D.C. Public Schools (DCPS) has one security officer or special police officer for every 129 students. There are currently about 325 security guards across DCPS's 116 facilities.

The District's student arrest figures support the national finding that Black students are more than twice as likely as their white peers to be referred to law enforcement.¹⁸ School resource officers in D.C. arrested 156 public and charter students during the 2017-2018 school year and had arrested 123 students in the 2018-2019 school year as of January 31, 2019.¹⁹ Of the arrested students, two were reported as white, seven as Hispanic, and 270 as Black. Students who have been arrested are twice as likely to drop out of school, negatively impacting their future employment opportunities, lifetime earnings, and health, and exponentially increasing the chance they will serve time in prison.²⁰ In contrast, greater access to school counselors has been found to increase graduation rates, reduce the number of disciplinary incidents, and improve student attendance and other measures of student academic, emotional, and social performance.²¹ School counseling is particularly beneficial for Black students, with these students reporting that counselors had the largest impact on their decision to pursue a secondary education.²² The Council [redirects \\$4.1 million intended for school security guards within DCPS for investments in the social and emotional learning of students](#), and shifts oversight of the school security contract from the Metropolitan Police Department (MPD) to DCPS.²³

Further, the Council invests [\\$3.8 million to support the school-based mental health program at DBH and expand the program to an additional 30 schools](#). The current comprehensive school mental health program was developed to streamline behavioral health services provided by DCPS, DBH, Department of Health (DOH), and the Office of the State Superintendent for Education (OSSE) into one delivery framework. Under this model, behavioral health services are provided in three tiers, with all schools receiving resources to provide mental health promotion and educational services to teachers and families under Tier 1. Tiers 2 and 3 involve more focused interventions and individual treatment provided based on need. To date, 62 of DC's 240 public and charter schools have received programming under the new model. The Council provides [\\$150,000 to OSSE for grants to support positive school climate and trauma informed educational settings](#).

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Maternal and Family Health

Nationally, the maternal mortality rate for Black women is two to three times higher than white or Hispanic women.²⁴ In the District, the disparity is even starker. D.C. is ranked amongst the lowest states in the number of deaths caused during pregnancy and childbirth, yet white women in the District are ranked highest in the country in maternal mortality outcomes, meaning the disparities in outcomes for mothers of color are so grave they impact the overall ranking.²⁵ In 2018, the Council established the Maternal Mortality Review Committee to investigate the disturbing patterns in maternal health outcomes for racial and ethnic minorities.²⁶ To support the Review Committee's work, the Council [reverses the Mayor's proposed reduction of Review Committee staff and restores \\$88,265](#) to the Office of the Chief Medical Examiner. The Council also directs [\\$150,000 to DOH for home visiting services for lower income mothers on their first pregnancy](#) under the "Leverage for Our Future Act of 2019."²⁷ In addition, the Council provides

\$244,000 to the Office of Human Rights (OHR) for the "Strengthening Reproductive Health Protections Amendment Act of 2020" to prohibit the District government from interfering with reproductive health decisions and from imposing punishments or penalties for a self-managed abortion, miscarriage, or adverse pregnancy outcomes.²⁸ The Act also prohibits employment discrimination against healthcare professionals who would participate in abortion or sterilization procedures.

Midwifery represents another aspect of maternal health that can help reduce unnecessary complications during pregnancy and childbirth.²⁹ Historically, midwives have been crucial in the Black community, as Black mothers preferred home births to avoid being discriminated against by white physicians.³⁰ The Council provides \$105,000 to DOH for the "Certified Professional Midwife Act of 2020" to regulate the practice of midwifery in the District and allow certified professional midwives to supervise services at a maternity birthing center.³¹

The Council directs \$213,000 to DOH to continue its investment in a successful teen pregnancy peer education program. In the District, 78 percent of mothers who give birth under age 20 are Black.³² Poor prenatal care and maternal mortality are high for teenage pregnancies and even higher for Black teen mothers.³³ Teen pregnancy can reduce educational attainment levels and can be detrimental to the socioeconomic outcomes, but mentoring programs can help. A study on the long-term outcomes for teen mothers who participated in a mentoring program found that educational achievement and employment were high after completing the program.³⁴

Even though nationally Black fathers are more likely to live apart from their children than white fathers, they are just as, if not more so, involved in their children's lives.³⁵ Research has found that children who have a father that is active in their lives are more likely to be emotionally secure, self-confident, and have better social connections.³⁶ To continue the positive trends in fathers' involvement, the Council directs \$150,000 to the Child and Family Services Agency (CFSA) to help fathers gain knowledge and skills to improve their involvement and connection to their children.³⁷

Food Security

Academic success requires more than an investment in teachers and students. It also requires significant investment in the learning environment to ensure that students are prepared and able to learn each day, and that includes proper nutrition. Fifteen percent of District households are food insecure, and over 23 percent of those households have children.³⁸ Households headed by a Black individual are more than twice as likely as those headed by a white individual to be food insecure, at 20 percent to less than 10 percent respectively.³⁹ Food insecurity has devastating and long-lasting effects on children and can result in worse general health, higher rates of acute and chronic health issues, and lower healthcare access.⁴⁰ Food insecurity has only been made worse by the COVID-19 pandemic. Half of D.C. households with children were not at all confident, or only somewhat confident, in the ability to afford food over the next four weeks.⁴¹ During the

pandemic, schools have continued to provide hungry students with meals. As of July 2, DCPS has distributed 10,108 meals to students. In FY 2021, the Council funds \$2 million to restore and expand school-based nutrition and wellness programs, which includes \$844,000 to maintain increased reimbursements for school breakfasts and \$1.2 million in grants and programs that promote healthy schools. Additionally, the Council provides \$844,000 to maintain full funding for the Healthy Tots Program, to ensure young children at childcare facilities receive nutritious meals and high-quality wellness programming.

The Council is committed to ensuring that all residents have access to healthy food options. Proper nutrition improves health outcomes, combats chronic illness, curbs obesity, and decreases the risk of depression. Black low-income families tend to more commonly live in a “food desert,” where limited access to healthy and affordable foods can lead to negative health outcomes and poor eating patterns.⁴² To combat food deserts in the District, the Council funds \$421,000 for the “Skyland Tax Exemption Amendment Act of 2020,” to help bring a full-service grocery store to Ward 7.⁴³

The Council directs \$75,000 to DOH to fund an outreach plan for the Women, Infants, and Children (WIC) Nutrition Program.⁴⁴ The outreach plan will allow the District to develop strategies to increase WIC participation. The Council also transfers \$250,000 of the Produce Rx program from DOH to DHCF to bring in Medicaid funds and expand the resources available to the program. Under the Produce Rx program, doctors at participating clinics can write prescriptions for their patients who suffer from diabetes, pre-diabetes, or hypertension to redeem for fresh produce at the Alabama Avenue Giant Food in Ward 8 at no cost to the patient. The Council further supports food security by providing \$1 million for D.C. Central Kitchen to build a new training facility and relocate their headquarters to Buzzard Point.⁴⁵

To achieve the Sustainable D.C. 2.0 Plan's goal of putting 20 additional acres under cultivation for growing food by 2032, the Council adds \$193,600 and 1 FTE to the Department of Energy and Environment (DOEE) for the “Urban Farming Land Lease Amendment Act of 2020.”⁴⁶ This enhancement will allow DOEE's Office of Urban Agriculture to issue grants to urban farmers in the District for infrastructure and operating support and perform soil testing for the land lease program. The Council also provides \$25,000 for an Agricultural Task Force at the Metropolitan Washington Council of Governments.

Environmental Justice

Air pollution is responsible for up to 30,000 premature deaths each year, but it is an even larger threat to Black Americans, who suffer at twice the rate of the overall population.⁴⁷ Air pollution increases the risk of asthma attacks, bronchitis, heart attacks, heart and respiratory disease, and lung cancer.⁴⁸ Black and brown neighborhoods also typically have fewer recreational and green spaces than white neighborhoods.⁴⁹ Green spaces reduce exposure to air pollution, have positive impacts on mental and physical health, and can reduce morbidity and mortality for residents.⁵⁰ To increase access to green spaces, the Council adds \$30 million of private authority to the out-years of capital budget for the 11th Street Bridge Park. The elevated park, which will

The Council provides \$2 million to maintain and expand school-based nutrition and wellness programs.

The Council provides \$30 million in capital funds for the 11th Street Bridge Park.

be built on piers of the old 11th Street Bridge, will span the Anacostia River and link Anacostia with the Navy Yard. The park will increase community connectivity and create welcoming and vibrant spaces that enhance the user experience and foster civic and local uses.

The Council also provides [\\$2 million to abate and remove the sources of lead impacting parks and playgrounds across the city, as identified in recent tests](#). Other Council capital projects focusing on environmental improvement, access to greenspaces, and community recreation include: \$1.5 million in FY 2022 for maintenance and modernization of the playground, field, and courts at Watkins Elementary School; \$1.4 million in FY 2021 and 2022 to ensure adequate funding is available to confront the challenge of climate change through building efficiency improvements; \$1.2 million in funding for the continued maintenance of Canal and Yards Parks; \$1.1 million to expand recreational opportunities in the Ivy City neighborhood; \$1 million for the Anacostia Recreation Center at Ketchum; \$1 million for Oxon Run Park; \$1 million for Congress Heights Recreation Center Modernization; \$1 million for maintenance and modernization of King-Greenleaf Recreation Center; \$1 million for maintenance and modernization of Kennedy Recreation Center; \$650,000 for tennis court lighting at Arboretum Recreation Center, Dwight Moseley at Taft Recreation Center, Langdon Park Creation Center, Fort Lincoln Park, and Turkey Thicket; \$500,000 for repairs and improvements to Garfield Park; \$500,000 for C & O Canal planning; \$250,000 for improvements to the Eastern Market Metro Park; and 200,000 to develop a plan for the renovation or reconstruction of the Jelleff Community Center.

Endnotes

- 1 (D.C. Department of Health, 2018)
- 2 (Mays, Cochran, & Barnes, 2014)
- 3 (U.S. Department of Health & Human Services, 2019)
- 4 (D.C. Department of Health, 2020)
- 5 "New Hospital at St. Elizabeths Amendment Act of 2020," as enacted on August 5, 2020 (Act A23-0360).
- 6 "New Howard University Hospital and Redevelopment Tax Abatement Act of 2020," as introduced on June 8, 2020 (Bill 23-778). The bill passed at first reading on July 21, 2020, and a second reading is expected on September 22, 2020.
- 7 "DC Healthcare Alliance Program Recertification Simplification Amendment Act of 2017," effective December 13, 2017 (D.C. Law 22-35; 64 DCR 10929).
- 8 In addition, to enroll in the Alliance, applicants must be age 21 or older, have income at or below 200% of the Federal Poverty Level, and have less than \$4,000 in assets for a single person or \$6,000 for a couple or a family. Some of the health coverage that Alliance members receive are subsidized by Medicaid, including emergency room service and labor and delivery. (D.C. Department of Health Care Finance, 2019)
- 9 (Sharon, 2020)
- 10 (Committee on Human Services, 2017)
- 11 (Office of the Chief Financial Officer, 2017)
- 12 "Certificate of Need Fee Reduction Amendment Act of 2019," effective March 10, 2020 (D.C. Law 23-60; 67 DCR 568).
- 13 "Electronic Medical Order for Scope of Treatment Registry Act of 2019," effective March 10, 2020 (D.C. Law 23-62; 67 DCR 574).
- 14 (Mayfield, 1972)
- 15 (Bichell, 2017; Vance, 2019)
- 16 The Mayor submitted her budget with a \$8.5 million cut to Activity #6970 – Behavioral Health and a \$1 million cut to Activity #6980 – Behavioral Health, Local Match. Council accepted the Mayor's technical correction that the reduction should have been a \$4.5 million from Activity #6970 and a \$5 million from Activity #6980.
- 17 (The Committee on Education, 2020)
- 18 (French-Marcelin, 2017; Rovner, 2014)
- 19 (D.C. Metropolitan Police Department, 2019)
- 20 (French-Marcelin, 2017; John et al., 2018)
- 21 (Cratty, 2019; Gagnon & Mattingly, 2016; Protivnak, Mechling, & Smrek, 2016)
- 22 (Cholewa, Burkhardt, & Hull)
- 23 "District of Columbia Public Schools Authority for School Security Amendment Act of 2020," as approved by the Committee of the Whole on July 28, 2020 (Enrolled Version of Bill 23-760).
- 24 (Hoyert & Miniño, 2020)
- 25 (Russell, Rodehau, & Quinn, 2018)
- 26 "Maternal Mortality Review Committee Establishment Act of 2018," effective June 5, 2018 (D.C. Law 22-111; 65 DCR 4278).
- 27 "Leverage for Our Future Act of 2019," as introduced March 19, 2019 (Bill 23-198).
- 28 "Strengthening Reproductive Health Protections Amendment Act of 2020," effective May 6, 2020 (D.C. Law 23-90; 67 DCR 3537).
- 29 (Vedam et al., 2018)
- 30 (Morrison & Fee, 2010)
- 31 "Certified Professional Midwife Act of 2020," effective June 17, 2020 (D.C. Law 23-97; 67 DCR 3912).
- 32 (U.S. Department of Health and Human Services, 2016)
- 33 (Jr, 1978)
- 34 (Lin et al., 2019)
- 35 (Jones & Mosher, 2013; Livingston & Parker, 2011)
- 36 (Cabrera, 2017; Office on Child Abuse and Neglect, 2006)
- 37 (Livingston & Parker, 2019)

- 38 (Pickren, 2018)
- 39 (U.S. Department of Agriculture, 2018)
- 40 (Schmeer & Piperata, 2016; Thomas, Miller, & Morrissey, 2019)
- 41 (U.S. Census Bureau, 2020)
- 42 (Beaulac, Kristjansson, & Cummins, 2009)
- 43 "Skyland Tax Exemption Amendment Act of 2020," as approved by the Committee of the Whole on July 28, 2020 (Enrolled Version of Bill 23-760).
- 44 "Women, Infants, and Children Program Expansion Act of 2018," effective March 22, 2019 (D.C. Law 22-255; 66 DCM 1339).
- 45 "DC Central Kitchen Facility Grant Amendment Act of 2020," as approved by the Committee of the Whole on July 28, 2020 (Enrolled Version of Bill 23-760).
- 46 "Urban Farming Land Lease Amendment Act of 2020," effective April 16, 2020 (D.C. Law 23-80; 67 DCR 2494).
- 47 (Mikati, Benson, Luben, Sacks, & Richmond-Bryant, 2018; Union of Concerned Scientists, 2014)
- 48 (Sass, 2013)
- 49 (Moore, Roux, Evenson, McGinn, & Brines, 2008)
- 50 (Barton & Rogerson, 2017; World Health Organization Regional Office for Europe, 2016, 2017)

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