



Report links mortality to income

Alameda County charts widening health inequity between neighborhoods

By Angela Hill, STAFF WRITER

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OAKLAND — Where you live might be killing you.

If you're an African American born and raised in West Oakland, for instance, you're likely to die of health problems such as diabetes, heart disease and cancer 15 years sooner than a white person who was born and raised in the Oakland hills.

That's according to a new report by the Alameda County Public Health Department, which examined 45 years' worth of death certificates and other vital statistics, mapping them by precise geographical areas and coming up with some disturbing results: illness concentrates among low-income people and people of color in certain neighborhoods because of social, economic, transportation, housing and education inequities.

"This is not your typical health report," said Dr. Tony Iton, the county's public health director. "For one thing, it has almost nothing to do with medical care. Instead, this is about housing, about education, employment and how these things are inextricably linked to health.

"We're not talking about murder or crime in these statistics," he said. "We're also not talking about individual behavior, such as smoking or drug use. In addition, it's not whether you have health insurance or not. It goes deeper than that, to your education level, income level and what your

neighborhood is like."

For instance, he asked, did you grow up breathing diesel fumes from the 10,000 trucks that pass through West Oakland on their way to the port each day? Do you work 100 hours a week at two jobs to cover your rent? Are there more liquor stores and fast food restaurants in your neighborhood than in others? Do you have access to healthy food and recreational activities? All these disparate things come into play, he said.

A summary of the report's findings was announced Thursday at a news conference at the Public Health Institute in downtown Oakland. The full report, called "Life and Death from Unnatural Causes in Alameda County," will be available in May at <http://www.acphd.org>.


The report piggybacks on a four-part PBS series called "Unnatural Causes: Is Inequality Making Us Sick?" the final segment of which aired Thursday night. Iton appears in the documentary.

To address the sobering evidence, the public health department is collaborating with a cross-section of other local agencies which, at first glance, seem to have nothing to do with community health matters.

At Thursday's news conference were representatives from AC Transit, Oakland schools, job-training programs and other agencies, discussing policies to encourage such things as mixed-income housing, universal preschool and equitable transit funding.

"Social inequity is health inequity," Iton said. "Education policy is health policy. Transportation policy is health policy. All these things are connected, and we need to harmonize these strategies across the board because — right now — years of life are lost due to social conditions."


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Iton displayed a chart of life expectancies in the county from 1960 to 2005, which shows a clear and increasing gap between whites and African Americans. In 1960, white residents had a life expectancy of about 72 years. In 2005, that had increased to more than 80.

But in 1960, African Americans' life expectancy was about 68 or 69 years. In 2005, it had only increased to about age 73.

"The gap is getting worse," Iton said. "Clearly something that we've been doing is not working. And frankly, racial and class distinctions continue to rob people in areas like West and East Oakland of a long and healthy life. The evidence is overwhelming."

Previous studies have long supported the concept that socioeconomic factors greatly influence health. In fact, U.S. government research released last month revealed a large and growing disparity in the health of richer and poorer Americans over the last 20 years.

Rebecca Kaplan, vice president of AC Transit's board of directors, said access to transportation is clearly entwined with our health, and now is the time to make wise decisions for the future.

"There are long-term goals, but we can start with things like providing reduced-price transit passes for youth," she said. "When young people are able to get to after-school programs, get to jobs, to health care, it puts them on a path to a positive future."

Bernard Ashcraft, chief executive officer of the Regional Technical Training Center, said health disparities and unemployment clearly go hand-in-hand. "This is the first time someone has been bold enough to address it," he said.


Greg Hodge, an Oakland school board member, said the findings are "sobering, but also encouraging in terms of our effort to formalize these connections and work together on this.

"For example, asthma is an education issue in terms of the number of missed days at school," he said. "Our district has clinics at every high school but one, and we're working on the middle schools. That's a good example of what needs to happen, for kids to have a place to walk to for screenings and mental health services.

"But we have a long way to go," Hodge said. "We want to make sure the 'unnatural' causes are no causes at all."

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