

Questionnaire on Community Health and Community Development for Candidates for Mayor of Boston

Responses of Bill Walczak

1. Community Health and Racial Inequities: *Mayor Menino has been an effective advocate for reducing racial and ethnic health inequities. What will you do to build on that work?*

My work at Codman Square Health Center (CSHC) speaks to my passion for creating a holistic approach to dealing with the health needs of lower income communities and reducing racial and ethnic health inequities. I founded CSHC when I was 20 years old as a resident of Codman Square, and led it for 36 years. Under my leadership, CSHC became a leader in linking together access to care with public safety, housing, the environment, education, nutrition, fitness, financial literacy, and other services. CSHC launched one of the first community strategic planning exercises in 1988, creating a process where hundreds of residents participated in a holistic exercise of planning the revival of their community with plans for dealing with violence and crime, drugs, redevelopment, HIV, housing and environmental issues. Working with the Codman Square HDC (now NDC), YMCA and other civic and church groups, this effort led to the revival of the Codman Square community. This process has been replicated twice – in 2000 and 2010, and is a model for what communities can do to plan their futures.

CSHC launched one of the first community health worker (CHW) programs in the state, using CHWs to do outreach to the community to let them know about how to get access to free/reduced cost health care, how to create crime watches, how to get legal and other services for their needs, and helped to create dozens of block associations. CSHC's groundbreaking work in financial literacy included the largest Earned Income Tax Clinic in Boston, the award-winning Eat Green Save Green program, bringing health workers to housing projects to talk about both nutrition and saving money, and teen training in financial literacy - three of the programs created under my leadership. Codman created programs that allowed providers to write prescriptions for free memberships at the HealthWorks at Codman gym, and for fresh fruits and vegetables at the farmers' market. The "Daily Table" program, bringing nutritious food at low cost is another project that I continue to advocate for at Codman as a board member of the Urban Food Initiative, which is building the facility in a CSHC building.

CivicHealth was a program I created to bring civic engagement, community forums on important issues, voter registration, and community based research to Codman Square. CivicHealth also introduced arts programming, including programming to use the arts to deal with trauma, and launched the open studios program for Dorchester. CSHC built youth programs focused on anti-violence and helped start the local Weed and Seed program for Codman Square.

CSHC also re-conceptualized its main "disease" as poverty, which led to the creation of an adult learning center to help more residents get college credits (the Clemente Program) and technology

training in the community, and also led to the creation of the Edward Kennedy Health Careers Academy, and the award winning Codman Academy Charter Public School, a high school, and the first school located within a community health center. Codman Academy is a six day/week expeditionary learning school, which is focused on health and health careers, providing internships within the health center as a means to introduce students to the possibilities of being health professionals. In addition to helping to deal with the lack of racial and ethnic health providers in our health care system, with 18% of the jobs in greater Boston, a health profession is the most likely way to allow someone to move from low income to middle class. Codman Academy's health focus, including having a teaching kitchen which teaches students to cook their own nutritious lunches and four days a week of physical education, resulted in Codman receiving the first award from the Commonwealth as the "healthiest school in Massachusetts."

CSHC also helped to start STRIVE, a job training center in Codman Square (I am President of the Board) to help people coming out of prisons get jobs. CSHC was a partner in building 56 units of housing for low income families, created programs which place health workers in three local elementary schools to coordinate services for families, launched a program with Partners in Health to help follow high risk diabetics and people with HIV, and renovated tens of thousands of square feet of formerly abandoned commercial property.

My record speaks for itself. When I left CSHC two years ago, it was a \$20m agency with about 350 employees, 80% from local neighborhoods, with no debt and a great senior leadership team that carries forward with the goal of creating a culture of health and supporting the economic, spiritual and social revival of the community.

2. Community Resilience: *What would you do to develop systems and skills that increase the resilience of residents in neighborhoods experiencing high rates of violence, substance abuse, suicide and other community traumas?*

I learned early in my career that hope is the major source of resilience. People in poverty need to have both services and opportunities. I brought Health Leads into CSHC to provide important social support services to people in need, and added legal services to help deal with housing and health crises. CSHC led anti-violence efforts with local civic groups, churches and through Weed & Seed and other government initiatives and supported the development of STRIVE to help people coming out of prison to get jobs. CSHC built a large behavioral health program and extended it to schools to help adults and children build resilience. I will work as Mayor to ensure that our communities all have programs that help create opportunity for residents of low income communities, and support services for those who need them.

But a major focus of my campaign is dealing with our education system as a means to reduce poverty. I believe that education should begin with prenatal services and I will create a linkage between health care and education so that mothers and their babies are raised healthy and ready to learn by the time they reach school age. Poverty creates stresses and Adverse Childhood

Experiences which can create toxic stress on brain development. Through linkage between health care and education, we can help reduce the effects of poverty on children. I will ensure that all children have access to high quality early childhood education, including K1. Children must start school ready to learn. I will develop an office in City Hall to coordinate volunteer services for the city, including creating a program to give access to tutors to all children, especially in the early primary grades, so that children can learn to read at grade level at grade 3 (a pivotal point when a child goes from learning to read to reading to learn). I will reform the school system to make the schools themselves autonomous centers of educational change, hiring excellent principals who will be accountable for educational success. Finally, our high schools will be transformed so that the 11th and 12th grades become “career academies,” connecting directly to businesses, academe and health care institutions to create pipelines for careers for our high school students. If young people have hope for success, they are less likely to be violent, turn to drugs, or turn on themselves. Career Academies are a way to produce teens who have hope for a better life.

3. Domestic/Intimate Partner Violence: *What is one thing that you, as Mayor, think is the most important way to decrease domestic/Intimate partner abuse, which accounts for a significant portion of assaults in Boston?*

At CSHC, we instituted changes in the medical visit so that providers ask questions about domestic/intimate partner abuse, placed posters in every bathroom, and hired domestic/intimate partner abuse counselors. Every person needs to have access to a primary care provider who is attuned to this issue and has resources available to help. Beyond this, we need a public education campaign to bring domestic/intimate partner abuse into the spotlight, to de-stigmatize reporting of it, so that it is understood that it is unacceptable as a society to tolerate, and to let victims know that there is help for them.

4. Education:

4.a. *Given the importance of good early childhood care and education as a predictor for lifelong health, what will you do to increase the number of children, particularly in communities of color, in such education programs and enhance the quality of those programs?*

First and foremost, we need to look at poverty as a disease cured by education. By beginning the education process early, even as early as pregnancy, we can improve both health and educational outcomes and better prepare parents for parenting and children to enter school. At CSHC, we introduced group visits for prenatal patients and followed with group visits for infants. This allowed the patient visit to go from 10 minutes to more than two hours, which allowed the visit to focus on health issues, nutrition, and early childhood education. Group visits are a way to enhance the ability of the health care system to help prepare children and their families for

education and increase the likelihood of educational success. I will also fund universal K1 so that every child who needs it has a seat in a high quality program.

Additionally, the statement below which I have taken from my website speaks to how our schools, health care providers and parents can work together to reverse the insidious effects imposed on our children from some of their most challenging early life experiences.

Early education works best when parents are prepared and supported in their role as their child's first teacher, and this needs to start with prenatal care. . . . The challenges that confront young people in many of our neighborhoods in Boston include violence, chronic poverty, poor housing, and unhealthy environments among others. These difficulties spill over into their social and educational experiences. The term applied to these phenomena is "toxic stress." Strong evidence points to the physical and emotional toll that toxic stress places on children, including compromised brains and bodies.

I strongly believe that connecting our schools and health care providers will help to reshape some of these experiences. Our health care institutions need to become more proactive in integrating the realities of childhood poverty into their interventions. At the Codman Square Health Center, we replicated an approach developed by the Centering Healthcare Institute that includes group visits for expectant parents. This model connects parents to each other, their pediatrician/family physician, and the resources they need to support their children as they grow. One of the results was increased infant birth-weight, an important indicator of a child's ability to develop, learn and thrive. Connecting this model to early childhood education and expanding the program to infants and toddlers will result in better care for children as they grow. This approach requires no major expense; just a reallocation of how already approved prenatal visits are used. As Mayor I will work with community health centers and other prenatal programs to expand group pre-natal and pediatric visits to include early childhood educators, supporting parents as first and primary teachers. This will build community capacity by linking families with each other and institutions at the early stages of parenthood.

4.b. What is the most important goal you will tell your new BPS Superintendent to work towards and why?

The most important goal is achieving my vision for educational reform. I will choose a BPS superintendent who believes in connecting health care and education, will create K1 seats for all children who need it, recruit and retain excellent principals, move to autonomous schools under great principals who will be accountable for school and student success, work to create tutors who are available to all students, and build partnerships with the business community, academe and health care institutions to create career academies. To achieve these goals we will also extend the school day to allow for more programs and opportunities for students to learn.

5. Environmental Issues: *What additional measures will you take to improve the air quality, particularly in neighborhoods with industrial sites, waste transfer sites, and highways?*

As a person who lives in North Dorchester along Rt. 93, air quality along highways is very concerning, as is housing located near waste transfer and industrial sites. You can see my environmental blueprint at www.billforboston.com. Key elements are moving away from fossil fuel vehicles, and making the City of Boston an easy place for electric vehicles. However, as the EPA has found that Suffolk County has diesel pollution in an amount 300 times what is considered acceptable, we will have a special focus on reducing diesel pollution. While filters on diesel construction equipment have been proposed, these filters would not reduce carbon dioxide emissions from this equipment. I will seek policies that accomplish multiple goals at that same time. For example, electrifying MBTA bus and commuter rail lines would both reduce diesel pollution and reduce greenhouse gas emissions. This should mitigate pollution near waste and industrial sites as well as along highway corridors.

The city administration must be committed to improving the air quality in all neighborhoods, but especially those who are already exposed to excessive exposure to pollutants. At a minimum we must understand specifically what kinds of particulates and other pollutants affect different neighborhoods in order to craft the most appropriate solutions. Led by the Public Health Commission and in coordination with the Massachusetts Department of Public Health, we need to conduct regular air quality and epidemiological studies, and we must be prepared to work with industry to mitigate environmental damage different operations may create.

In order to minimize some of that damage - and certainly in order not to exacerbate it - I will work to ensure that city buses serving these neighborhoods run on natural gas or electric power rather than diesel fuel. I would also work with utility companies, waste transfer sites and industrial consumers of fossil fuels whose operations spew pollutants into the city's neighborhoods, to seek and use carbon tax credits if they are not already doing so. Mitigation of polluting behavior will be a high priority of mine – as it had been during my years in Codman Square when the Codman Square Health Center sponsored and worked with BOLD teens in their efforts to find ways to improve the environment in that neighborhood.

6. Gambling: *In what ways will you ensure that mitigation money from an East Boston casino benefit the residents of East Boston and the City of Boston?*

I am firmly opposed to a casino in Boston. I intend to review and likely reopen any mitigation agreement negotiated prior to my election as Mayor, and will use all available legal avenues to significantly amend or revoke the agreement as afforded under 205 CMR 127.00.

Public health is about prevention. As a person with a long career in public health, I know the social impacts associated with casinos. The consequences of adding a casino can be dire, especially for low-income and working class communities, who are often the target audience of

casinos. The fact that the Suffolk Downs casino will be on a subway line – a short subway ride to addiction - for hundreds of thousands of working class and low income residents - makes it even more important that the public health community take a stand against the casino. The public health community should be talking about how to stop the casino at this point and urging a no vote; not about how to deal with crime and addiction likely to come from it.

The casino is being “sold” as a producer of jobs. But the average casino job, blackjack dealer, pays just over \$22,000 per year, about the same as the average cost of living in the city of Boston. Boston should be producing jobs that pay living wages, which is what I am proposing for this location – a new innovation district that will provide higher quality jobs in green economy, technology and light manufacturing.

Boston is better than a casino.

7. Health Care Access: *What will you do to ensure that the large non-English speaking population has access to and receives culturally appropriate high quality health care?*

I will continue the work of the Office of New Bostonians, The Office of Immigrants and Refugees Office, and at the state level, DPH to make sure that programs that serve non-English speaking residents is fully funded and ensure that means of accessing these services are well known and understood through annual cultural trainings provided by the Boston Public Health Commission.

Beyond that I will continue the commitment I have demonstrated throughout my career to providing access to the highest quality health care irrespective one’s culture, ethnicity, primary language and income. Codman Square Health Center is an example of accessible and excellent health care delivered to residents of a diverse community many of whom do not speak English and are new to the US health care system. That a significant proportion of the health center leadership and provider staff are drawn from the community served by the health center has always been a major goal of mine throughout my years as CEO, and a goal I am proud to say we achieved. The result of these efforts has been to create a welcoming and accessible environment for community residents.

Early on I came to realize that despite that excellent care in Boston was theoretically within reach does not mean that all who needed such care could reach it. For many reasons the health status that our highly reputable health care institutions should provide is often denied to large numbers of our residents. Accordingly we need to reinforce the fundamental goal of guaranteeing access to high quality care, healthy foods, clean environments and good education no matter a person’s income, culture, linguistic challenges and immigration status.

Moreover the definition of quality must be broad and must be seen as including first and foremost primary care that is affordable and can be conveniently accessed from one's home or

work place. Accessible care should include pediatrics, internal medicine, family medicine and Ob/Gyn. Other affordable and easily accessible care should include oral health, behavioral health, eye care, pharmacy, lab and specialty medical care that can be safely delivered in the community where one lives or works. These may include hospital settings, but just as often can be offered in community health centers. In fact, Boston can proudly point to its twenty six health centers, all of which offer comprehensive care that meets or exceeds stringent accreditation and licensing standards.

We also recognize the role of our safety net hospitals, especially Boston Medical Center, in supporting and partnering with our community health centers and in offering state of the art facilities in which to provide the highest levels of care.

8. HIV/AIDS: Overall, Boston and MA has significantly reduced the rate of new HIV infections, except in communities of color. How will you work to address this epidemic among Black and Latino communities, including the LGBT members of those communities?

Boston is a city known for the AIDS crisis and amazing organizations from that era still remain that we must utilize in order to help combat AIDS, particularly among 18-24 year olds of color. The city must partner with the Multicultural Aids Coalition, AIDS Action, the Boys and Girls Club, community health centers, and the Boston Public School system to ensure that HIV testing is open and available to all.

9. Homelessness: What will your administration do differently to address the issue of homelessness, particularly for families with children?

My administration would look to use underutilized buildings across the city for shelter, particularly shelters for families as opposed to men's and women's shelters in order for families not to be separated. Further, I would work to institute homelessness prevention services in schools and work with banks in order to prevent homelessness by keeping people in their existing homes.

10. Housing:

10.a. What creative plans do you have for addressing the need for more housing that is affordable for working families who do not qualify for subsidized housing but cannot afford market rate housing by increasing resources through linkage, inclusionary development and other tools?

My housing platform calls for regionalizing housing, rentals and other affordable living opportunities. By understanding Boston as the center of a metropolitan area rather than restricting ourselves to city limits, we can build more housing as a region, and by expanding

housing in our neighborhoods and outside of the city borders, we will reduce in-Boston housing costs.

10.b. *Would you be willing to implement a health-based housing standard for all rehab investments made by the City that ensures the creation of healthier housing by addressing home-based environmental health hazards and energy efficiency to reduce the high costs of asthma, lead poisoning, trip & fall injuries and energy in low to moderate income homes?*

Absolutely, a key part of my environmental plan is environmental justice. I am of the firm belief that all houses in Boston must comply with new green standards, but we also need to abide by new health standards as well to ensure healthier residents. We are Boston, and we have the resources to be the healthiest city in the United States. It is unacceptable to settle for any less than top health standards when it comes to housing.

11. *Jobs and Youth: How will you improve the opportunities for Boston youth to be employed in the health, science, education, and social services sector which account for one third of Boston's jobs?*

We need to institute 11th and 12th grade career academies in order to prepare our youth to learn industry specific skills directly out of high school. I founded Codman Academy, located inside the Codman Square Health Center, which provides opportunities for students to learn experientially in the health care field, preparing students for health professions jobs - an industry that not only pays livable wages with benefits, but also provides 18% of all jobs in Boston. We can do this, and we can do it for a variety of different industries, including science, education, and social services. The better prepared our students are to enter the workforce, the better our economy, our streets, and our city are for it.

12. *Neighborhood Economic Development and Planning: What specific changes in zoning, the Boston Redevelopment Authority, and development processes will you advocate for in Boston's lower socioeconomic status neighborhoods that will be responsive to local input and spur economic improvement and jobs?*

As Mayor, I will hire a BRA director committed to transparency and planning. Our neighborhoods need master planning that includes input from residents. These plans should include efforts to increase job development and housing, along with ensuring infrastructural needs such as transportation, open space and schools. I will make a priority the funding of BRJP compliance officers to ensure that we are hiring our residents and people of color for jobs in construction, I will work with the unions to ensure that they diversify their ranks and I will make Madison Park into a superb vocational high school that creates opportunities for our kids to get the jobs of the future.

13. Substance Use and Prevention: *How would you improve the provision of prevention of and treatment for substance abuse?*

First, we need to have enough beds and openings for all who wish to enter treatment when they decide they need treatment. We will monitor access and create enough places to accommodate all who need these services. I believe we need to start early with prevention of substance abuse. We need to have a health curriculum that discusses substance abuse and what can be done about it. I believe that all high school students should, as a requirement of graduation, be able to demonstrate competency in understanding addiction. We can ask community health and behavioral health centers to offer trainings for students and schools.

14. Transportation: *Given the MBTA's fiscal problems, how would you improve access to public transportation, particularly in communities of color and low-income neighborhoods?*

I supported the Governor's and the business community's transportation bill, which would have provided sufficient dollars to both deal with the debt crisis affecting the T, and also deal with the infrastructural problems we face. As Mayor, I will be the loudest and strongest supporter of re-introducing these bills to get sufficient dollars for public transit. I will work regionally with leaders of cities and towns in greater Boston to ensure that we have the votes. I will support low fares as a means to promote public transportation use, and to allow people with limited incomes to travel with reasonable fares. In addition, I support Transit Oriented Development (TOD) of affordable housing in our neighborhoods located near T stops in order to give our lower income residents better access to the entire city's resources. By locating housing near transit, we can increase use of public transit and reduce traffic and carbon emissions.

15. Violence Prevention/Public Safety: *What changes will you make to dramatically reduce the amount of violence in communities of color?*

(See question 2 and my public safety blueprint at www.billforboston.com). Among the changes are doubling the number of summer jobs for youth, adding street workers, creating an E-lert system and other technological approaches to crime fighting, changing the leadership selection process for Boston Police, using data to drive better police deployment, reinvigorating crime watches and community policing using street workers and citizen constables, providing comprehensive reentry services and programs for people coming out of prison, using a public health approach to violence against women and domestic violence, and re-creating the comprehensive efforts that resulted in the "Boston Miracle". Lastly, we need to make sure that our children are gaining career skills in high school, "career academies" which I propose in my education blueprint (www.billforboston.com).