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**Model Resolution in Support of a California Wellness Trust**

**for Cities, Counties and Organizations**

Building Healthier Communities and Lives for Californians

through Investment in Community-Based Prevention

1. Whereas, chronic diseases and injuries, most of which are preventable, accounted for 80% of deaths in California in 2010,[[1]](#endnote-1)
2. Whereas we are in the midst of a large-scale epidemic of obesity and diabetes that shows little sign of slowing and may lead this generation of children to have shorter lives than their parents,[[2]](#endnote-2) [[3]](#endnote-3)
3. Whereas more than half of California’s adults are overweight or obese[[4]](#endnote-4) and therefore at greater risk for chronic conditions including diabetes, heart disease, cancer, arthritis, stroke and high blood pressure,
4. Whereas this burden of preventable illness generates enormous costs for families, employers, local and state government and health care systems,
5. Whereas the six leading chronic diseases alone generated treatment costs of $ **[see table below]** in our county in 2010, and these continue to rise,[[5]](#endnote-5)
6. Whereas California had 18,152 injury deaths, with $21 billion in lifetime costs ($538 for every resident in the state) in 2014 alone,[[6]](#endnote-6)
7. Whereas poor diet is now the leading risk factor for death in the United States, followed by tobacco, high blood pressure, obesity and physical inactivity,[[7]](#endnote-7)
8. Whereas people who have access to healthy food and eat a healthy varied diet are at lower risk of obesity and chronic disease,[[8]](#endnote-8)
9. Whereas people who live in highly walkable, safe, mixed-use communities with easy access to green space and public transit options are more physically active and less obese, contributing to greater overall health,[[9]](#endnote-9) [[10]](#endnote-10)
10. Whereas this burden of illness is distributed unfairly. The place where you were born and live, your income, race, and ethnicity all play a role in determining how likely you are to become ill, be injured or die too young,[[11]](#endnote-11)
11. Whereas just $10 per person for strategic investment in prevention would represent less than 1/1000th of our annual healthcare spending in California,[[12]](#endnote-12)
12. Whereas as our population ages, medical care becomes more complex and costly, and we seek to assure health care coverage for Californians, the need to invest in preventing those illnesses that can be averted has never been more urgent,
13. Whereas Oklahoma, Minnesota and Massachusetts have created wellness trusts or funds that provide sustained, dedicated funding to reduce leading causes of premature illness and death and have demonstrated positive outcomes in reducing risk factors for disease.[[13]](#endnote-13) [[14]](#endnote-14) [[15]](#endnote-15)

# Basic Level of Support

Now, therefore, let it be resolved that **[City/County/Organization]** supports the establishment of a California Wellness Trust, or other mechanism, to assure sustained, dedicated investment in preventing the leading causes of illness, injury, and premature death in California by addressing the root causes of these conditions in order to promote greater health equity, build healthier communities through community-based disease prevention and wellness efforts, and make our healthcare dollars go further.

# Stronger Level of Support with explicit inclusion in legislative platform:

Now, therefore, let it be resolved that **[City/County/Organization]** will include in our legislative platform support for the establishment of a California Wellness Trust, or other mechanism, to assure sustained, dedicated investment in preventing the leading causes of illness, injury, and premature death in California by addressing the root causes of these conditions in order to promote greater health equity, build healthier communities through community-based disease prevention and wellness efforts, and make our healthcare dollars go further.

# Where it is feasible for **[City/County/Organization]** to recognize the need for taxation revenue:

Add: Furthermore, we recognize the need for new revenue sources to assure and sustain these investments, including the use of taxation of unhealthy products that substantially contribute to the burden of preventable illness, such as sugar sweetened beverages or alcohol, to support these efforts.

For further information or assistance, please contact Tracey Rattray, Executive Director, California Alliance for Prevention Funding, a project of the Public Health Institute. Tracey.rattray@phi.org, (510) 285-5741

References:

**County-specific Data for Whereas Clause #5**

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| County | **Total dollars spent treating six leading chronic conditions in 2010[[16]](#endnote-16)** | **Dollars spent per person on six leading chronic conditions in 2010[[17]](#endnote-17) [[18]](#endnote-18)** |
| Alameda | $4,187,321,026  | $2,767  |
| Alpine | $3,508,314  | $3,059  |
| Amador | $147,166,887  | $3,882  |
| Butte | $697,175,740  | $3,169  |
| Calaveras | $172,494,242  | $3,811  |
| Colusa | $52,721,383  | $2,458  |
| Contra Costa | $3,188,663,779  | $3,030  |
| Del Norte | $82,814,598  | $2,898  |
| El Dorado | $562,281,813  | $3,103  |
| Fresno | $2,119,292,713  | $2,271  |
| Glenn | $78,029,648  | $2,768  |
| Humboldt | $396,541,461  | $2,947  |
| Imperial | $399,315,050  | $2,274  |
| Inyo | $68,260,121  | $3,665  |
| Kern | $1,780,347,182  | $2,115  |
| Kings | $300,647,462  | $1,965  |
| Lake  | $222,157,588  | $3,446  |
| Lassen | $82,902,152  | $2,387  |
| Los Angeles | $25,355,680,148  | $2,580  |
| Madera | $372,665,259  | $2,465  |
| Marin | $966,074,523  | $3,822  |
| Mariposa | $69,254,670  | $3,822  |
| Mendocino | $281,153,032  | $3,197  |
| Merced | $547,344,013  | $2,135  |
| Modoc | $33,998,861  | $3,514  |
| Mono | $32,721,462  | $2,318  |
| Monterey | $1,009,092,286  | $2,427  |
| Napa | $459,990,010  | $3,365  |
| Nevada | $372,461,452  | $3,782  |
| Orange | $8,236,791,511  | $2,730  |
| Placer | $1,061,336,072  | $3,027  |
|  |  |  |
|  |  |  |
| County | **Total dollars spent treating six leading chronic conditions in 2010[[19]](#endnote-19)** | **Dollars spent per person on six leading chronic conditions in 2010[[20]](#endnote-20) [[21]](#endnote-21)** |
| Plumas | $76,826,445  | $3,843  |
| Riverside | $5,425,224,042  | $2,475  |
| Sacramento | $3,633,033,073  | $2,558  |
| San Benito | $129,218,877  | $2,335  |
| San Bernardino | $4,440,554,243  | $2,178  |
| San Diego | $7,952,710,067  | $2,562  |
| San Francisco | $2,591,968,013  | $3,211  |
| San Joaquin | $1,597,699,813  | $2,326  |
| San Luis Obispo | $844,267,395  | $3,130  |
| San Mateo | $2,370,518,391  | $3,294  |
| Santa Barbara | $1,177,649,254  | $2,776  |
| Santa Clara | $4,924,933,575  | $2,755  |
| Santa Cruz | $705,271,576  | $2,680  |
| Shasta | $596,252,729  | $3,360  |
| Sierra | $12,373,706  | $3,830  |
| Siskiyou | $165,399,224  | $3,680  |
| Solano | $1,172,308,909  | $2,837  |
| Sonoma | $1,469,027,254  | $3,034  |
| Stanislaus | $1,233,664,501  | $2,394  |
| Sutter | $244,063,046  | $2,575  |
| Tehama | $197,416,478  | $3,102  |
| Trinity | $52,031,923  | $3,748  |
| Tulare | $951,831,827  | $2,146  |
| Tuolumne | $216,388,532  | $3,937  |
| Ventura | $2,288,663,662  | $2,773  |
| Yolo | $466,847,131  | $2,323  |
| Yuba | $166,790,518  | $2,306  |

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