

ALAMEDA COUNTY HEALTH CARE SERVICES AGENCY  
PUBLIC HEALTH DEPARTMENT

David J. Kears, Director  
Tony Iton, Director & Health Officer

1000 Broadway, 5<sup>th</sup> Floor  
Oakland, CA 94607

(510) 267-8000  
(510) 267-3223

February 4, 2008

Mr. Richard Sinkoff  
Director of Environmental Division  
Port of Oakland  
530 Water Street, 7<sup>th</sup> floor  
Oakland, California 94607

Dear Mr. Sinkoff:

As Deputy Director of Planning, Policy & Health Equity for the Alameda County Public Health Department, and as a member of the Maritime Air Quality Improvement Plan (MAQIP) Task Force, I am writing to reiterate ACPHD support for an open and comprehensive MAQIP process and to restate my view that it is critical that the MAQIP process results in a clear, meaningful, and measurable plan for reducing air pollution and improving health conditions in the neighborhoods surrounding the Port of Oakland.

As you know, the air pollution associated with the growing goods movement sector strongly contributes to a public health crisis that disproportionately impacts low-income communities of color. Life expectancy for residents of West Oakland, the predominantly low-income, African American community located in the shadow of the Port of Oakland, is on average 10 years lower than that of residents of the predominately white and upper income Oakland Hills. While inequity in health outcomes is not new, the long term health of residents in fence line communities is nevertheless inextricably linked to, and disproportionately dependent upon, goods movement policies and practices. For instance, West Oakland residents have the highest rates of asthma hospitalization in our county – 2.3 times the Alameda County average. West Oakland children under five years of age have rates of hospital emergency department visits nearly three times the county average. Perhaps most telling is the fact that, in 2005, West Oakland experienced an estimated 359 preventable respiratory illness hospitalizations, including an estimated 180 preventable asthma hospitalizations, in excess of county background levels. Based on the findings of studies among similar communities, the higher burden of asthma in West Oakland can be largely explained by disproportionately higher exposure to the air pollution associated with goods movement. These residents deserve the same opportunity to live in a healthy environment as residents of communities located away from trade corridors.

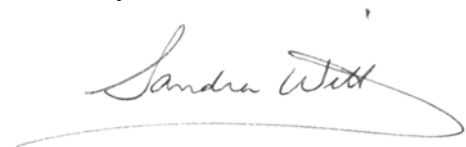
In order to ensure the MAQIP outcome addresses these critical health conditions and is clear and meaningful to all stakeholders and communities, clear commitments to the following are essential:

- To identifying and adopting aggressive interim goals and a corresponding timetable that will facilitate attainment of the MAQIP clean air goals at an accelerated pace, given the public health crisis the maritime conditions are currently fomenting.
- To including in the MAQIP a transparent plan for implementation to which the Port of Oakland, other agencies, and partners can be held accountable.
- To assuring that all Task Force members will have the opportunity to participate in creating and reviewing MAQIP drafts with ample time for having these comments reflected in the final draft.

While the first of these commitments has obvious health links, the health reasons for the last two warrant explanation. Historical exclusion from decision-making venues has resulted in communities of color and low income communities that are disproportionately burdened by environmental hazards and the associated adverse health outcomes. Furthermore, the impacts of marginalization affect a community's sense of wellbeing and hopefulness for the future. We believe that decision makers can counter and begin to correct the ill health effects of systematic injustice by creating a truly empowering public process. The creation of the MAQIP Task Force was a big step toward the establishment of such processes, as it recognized the importance of including community stakeholders in the shaping of the MAQIP. However, if the final product does not include a transparent plan for implementation, and if the process ends before *all* Task Force members are offered *meaningful* opportunity to provide input on the final product, we are running the risk of exacerbating the legacy of discrimination.

We recognize the challenge of this work and acknowledge the progress to date. The ACPHD is strongly resolved to completing this work in a way that will result in full inclusion of healthier neighborhoods and a port that is the model of efficiency, health and responsible citizenship for ports worldwide.

Sincerely,



Deputy Director of Planning, Policy and Health Equity  
Alameda County Public Health Department

cc: MAQIP Co-chair Omar Benjamin, Port of Oakland  
MAQIP Co-chair Jean Roggenkamp, Bay Area Air Quality Management District  
MAQIP Co-chair Brian Beveridge, West Oakland EIP  
MAQIP Co-chair Andy Garcia, GSC Logistics  
Dr. Tony Iton, Director Alameda County Public Health Department  
Mr. Dave Kears, Director Health Care Services Agency  
County Supervisor Keith Carson, District 5  
County Supervisor Nate Miley, District 4  
Mr. Miguel Bustos, City of Oakland, Mayor's Office