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Mr. H.E. Christian Peeples, President
Board of Directors
Alameda-Contra Costa Transit District
1600 Franklin Street, 10th Floor
Oakland, CA 94612

Keep Fares Affordable and Find Alternative, Long-term Solutions to Budget Deficit

Dear President Peeples and Board Members:

The Alameda County Public Health Department (ACPHD) is committed to improving and promoting health among the people we serve. Despite improvements in health status across all groups in Alameda County, we continue to observe large and persistent disparities in health based on race, income, and neighborhood. The root causes of health disparities are complex and closely tied to similar persistent racial and class disparities in access to affordable transportation and housing, quality education and employment, a fair criminal justice system, and healthy neighborhoods, to name just a few. It is this relatedness to other social inequities and our recognition of their inherent injustice that leads us to regard them as *health inequities*, rather than health disparities. In order to eliminate health inequities, we are committed to working with other sectors to support health-promoting policies and practices.

It is our pursuit of health-promoting policies that lead us to writing to you regarding the current proposal to start the process for increasing AC Transit fares. We oppose any fare increase at this time and request that AC Transit explore all possible alternatives - besides service cuts - to make up its budget shortfall. We also write to encourage AC Transit to work closely with the public, particularly with transit-dependent riders and their organizations, as well as other agencies and elected bodies, to identify long-term, stable funding sources to prevent major fare hikes or service cuts in the future.

Increasing AC Transit fares could jeopardize health within the transit dependant population, which is predominantly composed of low-income communities and communities of color, thus perpetuating health inequities. The health impacts of fare increases are both direct and indirect. In terms of direct health impacts, fare increases could force these households to dedicate more household income to transportation, leaving less disposable income for health-protective goods and services. For instance, low-income parents identify transportation difficulties, including high costs, as a significant barrier to obtaining routine medical care for themselves and their children. Furthermore, low-income communities, less likely to own a car, are also 3 times less likely to have a grocery store within their neighborhood, and therefore rely more heavily on mass transit to

complete their shopping. If AC Transit increases fares, residents decide to save on transportation costs by shopping within their neighborhoods—for low-income neighborhoods, this means shopping at smaller stores with substantially less healthy food at higher prices. More indirectly, access to transportation determines employment opportunities; unaffordable or unavailable transit is a factor in one's ability to take and keep a job. The relationship between work and health is well documented. Employment, and the financial security that accompanies it, is associated with improved mental and physical health in employees and their families.

While the health of all transit-dependant Alameda County and West Contra Costa residents could be jeopardized by fare increases, we are particularly concerned with the impacts on seniors and disabled people, as well as youth. Limited access to public transit creates barriers to participation in community and civic life, particularly for the elderly, disabled, and low-income youth of color. Community cohesion and strong social relationships protect health by providing emotional and material support, preventing feelings of isolation and contributing to self esteem and value. For instance, participants in an Alameda County study with few social contacts had twice the risk of early death. On the other hand, a lack of community cohesion and social support is strongly associated with violence. Given that homicide is the leading cause of death among youth ages 15 to 24 in Alameda County, as opposed to the second leading cause of death for the same age group statewide, we have to use every tool available to keep youth connected to their communities.

Again, we ask that before starting the process for increasing fares, AC Transit Board first consider and make public all other options for making-up the budget shortfall, besides service cuts. Additionally, we urge you to engage potentially impacted communities, advocacy groups, public agencies, and elected officials in the search for solutions. We at the public health department are available to consult with you on the health impacts of potential solutions.

As public agencies, we are charged with serving the public. We must all accept the weight of this responsibility and use every measure available to ensure that our services are rendered equitably and justly, as the health of the public depends on it.

Sincerely,

Sandra Witt, MPH, DrPH
Deputy Director Policy, Planning, and Health Equity
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