

# **City of Richmond Health Equity Trust Fund**

3.28.22



In 10 years, we may look back at this time and ask: Which places merely **spent** their [ARPA] money, and which places **invested** it?

— [Brookings Institute](#)



## Why a HETF?

ARPA emphasizes investments that “[address] racial disparities, inequities, and disproportionate harm.”

Health outcomes of Richmonders	White Individuals	Black Individuals	Latinx Individuals
Infant mortality	5 deaths/1,000 live births	12 deaths/1,000 live births	9 deaths/1,000 live births
COVID cases	11,482 cases/100,000	18,370 cases/100,000	22,404 cases/100,000
Deaths from opioid overdose	74.70 fatalities/100k	100.39 fatalities/100k	29.8 fatalities/100k

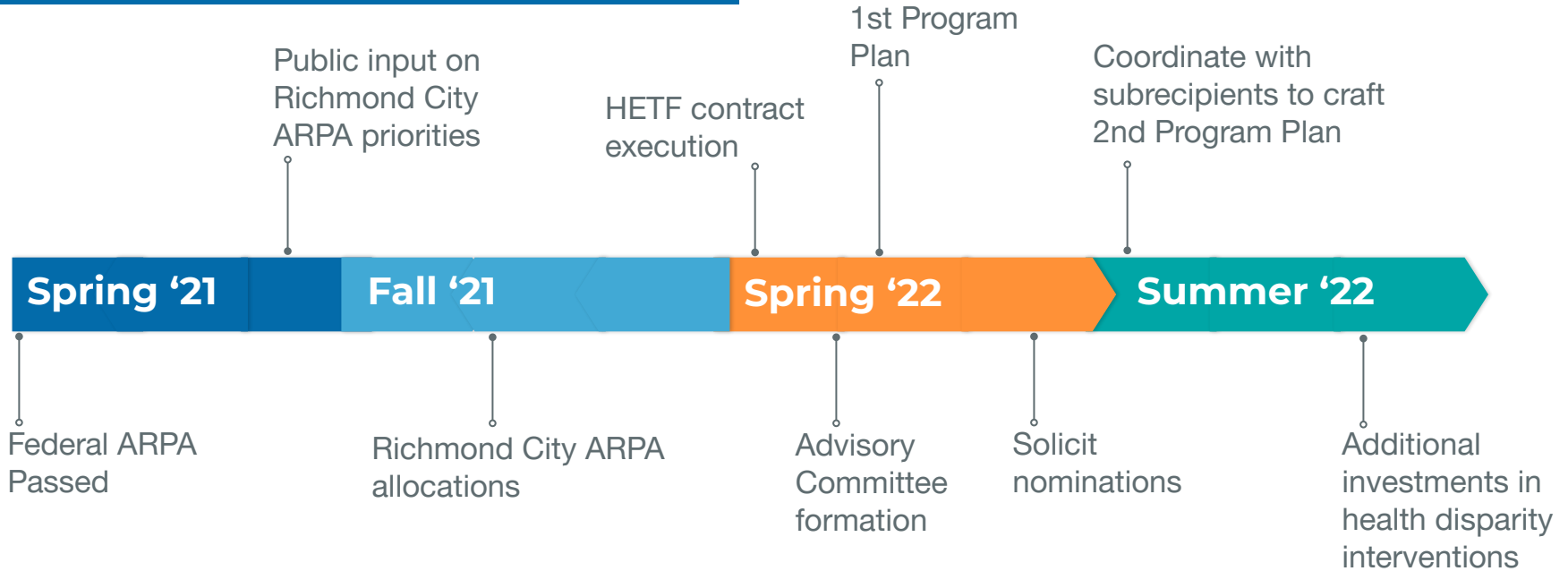


## Features of the contract

- RHHD & partners craft program plans; City Admin reviews and approves/refines before money is disbursed.
- Mirrors Gun Violence Prevention ARPA contract.
- Scope: “establish, support, and strengthen community-led efforts to address health disparities and the disproportionate burden of adverse health outcomes” defined by Council priorities & evidence-based disparities.
- Community engagement “emphasis on those populations who experience health inequities.”



## HETF timing



# Investing in interventions





## Involvement in next steps

### **Council should:**

- Promote Citizen Advisory Committee application
- Submit & promote nominations

### **Admin should:**

- Facilitate effective planning consistent with ARPA guidelines
- Promote CAC application & nominations

### **RHHD should:**

- Ensure investments are community-led & use these unique funds for unique capacity & impact