

**CITY OF BALTIMORE  
COUNCIL BILL 06-0238R  
(Resolution)**

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Introduced by: Councilmembers Holton, Young, Rawlings Blake, Kraft  
Introduced and read first time: December 4, 2006  
Assigned to: Education, Housing, Health, and Human Services Committee

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REFERRED TO THE FOLLOWING AGENCIES: City Solicitor, Health Department

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A RESOLUTION ENTITLED

1 A COUNCIL RESOLUTION concerning

2 **Baltimore City Health and Fitness Coordinator**

3 FOR the purpose of requesting the Health Commissioner to appoint a member of his staff to serve  
4 as the Baltimore City Health and Fitness Coordinator to work with private, corporate, and  
5 community organizations, public and private schools, communities of faith, hospitals, health  
6 systems, health clubs and gyms, pharmaceuticals, medical outlets, local, state and federal  
7 government agencies, non-profit health agencies, and sports teams to form a coalition to  
8 promote healthy living and fitness and to combat preventable disease and illness that threaten  
9 the lives of our adults and that threaten to detrimentally impact the quality of life and shorten  
10 the expected life span of our young people; and to require the Coordinator to develop a  
11 system to provide a single point of entry for Baltimore residents seeking information about  
12 how to access governmental and private industry fitness and healthy living services.

13 **Recitals**

14 The Baltimore City Council has consistently introduced legislation seeking to inform  
15 residents of the City of the health problems that affect the overall well-being of the constituency.  
16 Legislation has addressed the issues of diabetes – pointing out that statistics compiled by the  
17 Center for Preventative Health Services show that there were 44,525 cases in Baltimore or more  
18 that 17% of all documented diabetes cases in Maryland; heart disease – that 25% of all deaths in  
19 Baltimore, in 2003, were attributed to heart disease; and stroke – a University of Maryland study  
20 found that, consistent with the national trend, young black males are 2 to 3 times more likely to  
21 suffer a stroke than their white counterparts.

22 The Baltimore City Health Department’s 2003 status report shows that of the 49,000  
23 residents of Maryland who have asthma, 11,000 are children that live in Baltimore, and that  
24 while the prevalence in the state is 7.5%, prevalence of all Baltimore City residents is 10.6%,  
25 and that Baltimore City has the highest rates of oral and lung cancer mortality in the state. Heart  
26 disease and cancer historically were and remain the number 1 causes of death of Baltimore City  
27 residents, overall, but AIDS is the number 1 cause of death among 25- 44 year-olds.

28 Baltimore City’s historically poor state of health has caused the City to be the brunt of  
29 journalistic speculation, as well as the subject of legitimate scientific study. In the February  
30 2005, edition of *Men’s Fitness* magazine, the results of an annual study found that Baltimore  
31 ranked as the 25<sup>th</sup> fattest city nationally, taking into account health care, TV watching, and  
32 access to health clubs. This past September a new study by the Harvard School of Public Health

EXPLANATION: Underlining indicates matter added by amendment.  
~~Strike out~~ indicates matter deleted by amendment.

## Council Bill 06-0238R

1 found that Baltimoreans face the lowest life expectancy of almost any jurisdiction in America  
2 and can expect to live an average of 68.6 years, compared to a life expectancy of 81.3 years in  
3 Montgomery County. The study attributed the City's short life span to chronic health problems  
4 among those aged 15-59, including cardiovascular and lung disease, diabetes, the effects of  
5 smoking and alcohol use, and injuries – all of which are well understood and preventable.

6 The Commissioner of Health released an update on the age adjusted mortality rate in  
7 Baltimore City, showing that the life expectancy in Baltimore City was actually 71.6 years in  
8 2005, acknowledging that “the latest data on mortality demonstrates clear progress in Baltimore  
9 City. But this is not ‘mission accomplished’. We still have much more progress to make,  
10 especially in reducing disparities in mortality.”

11 When faced with a similar health challenge, Philadelphia, named America's Fattest City by  
12 *Men's Fitness* in 2000, named a Health and Fitness Czar to lead in a first-ever city-wide “health  
13 revolution”. The Office of Health and Fitness worked in communities, educating and providing  
14 skills to those residents willing to work to fight chronic disease and overweight through lifestyle  
15 management by establishing Fun, Fit & Free!

### 16 **The four goals of Fun, Fit & Free! are as follows:**

- 17 • To establish an effective infrastructure to implement programming and measure program  
18 effectiveness.
- 19 • To work with individuals and entities in the public and private sectors to assist with the  
20 development, implementation and education of Fun, Fit & Free! initiatives.
- 21 • To increase public awareness of healthy and unhealthy behaviors through unique city-  
22 wide programming.
- 23 • To develop programming that educates and inspires young people to develop positive  
24 lifestyle behaviors.

### 25 **The six specific objectives are:**

- 26 • To expand development of viable models for effective health promotion.
- 27 • Expand and identify new opportunities for creating conditions in the social structure that  
28 facilitate behavioral change.
- 29 • Utilize a social marketing approach to health promotion.
- 30 • Empower community and faith-based organizations for health education and promotion.
- 31 • Lay groundwork for meaningful collaboration among organizations, institutions, and  
32 corporations.
- 33 • Expand community leadership within the Fun, Fit, & Free! structure.

34 In an ongoing quest to improve the health and fitness of Baltimore City residents, this past  
35 August the Baltimore City Health Department kicked off an initiative call “Prevention  
36 Wednesday”, a public information campaign to promote healthy living, prevent disease and

**Council Bill 06-0238R**

1 improve community health. The goal of the program is to deliver timely prevention information  
2 for a broad public audience by linking a frequently overlooked health topic...with a frequently  
3 overlooked day of the week, known by some as “hump” day. Just like “hump” day is the day that  
4 gets a person through the rest of the work week, “Prevention Wednesday” will highlight a  
5 particular action that can prevent illness and help a person get through the next day and the days  
6 thereafter in improved health.

7 On November 2, 2006, our Health Commissioner also announced a new initiative to improve  
8 the health of the city workforce. B’More Healthy is a collaboration involving the Baltimore City  
9 Health Department, the unions of City employees, Mercy Medical Center, the City’s Division of  
10 Occupational Safety, and the Department of Human Resources, and it is aimed at improving the  
11 health and well-being of approximately 14,500 City employees. After an initial screening to  
12 review risk factors for chronic disease at employee health fairs or during a visit to the  
13 Occupational Medicine Services at Mercy Medical Center, employees’ baseline information will  
14 be entered on B’More Health cards, health improvement will be measured against that  
15 information, and modest rewards will be available for employees who meet their own personal  
16 goals, such as smoking cessation, weight management, exercise, blood pressure control, and  
17 diabetes treatment.

18 In announcing the B’More Healthy program, which will begin in 2007, the Commissioner of  
19 Health noted, “When it comes to chronic illness, prevention is the best medicine.” Implementing  
20 a program based on this philosophy to serve all Baltimore residents would benefit the individual  
21 physical and mental health of City residents and the overall social and economic health of  
22 Baltimore City.

23 **NOW, THEREFORE, BE IT RESOLVED BY THE CITY COUNCIL OF BALTIMORE,** That the  
24 Baltimore City Health Commissioner is requested to appoint a member of his staff to serve as the  
25 Baltimore City Health and Fitness Coordinator to work with private, corporate, and community  
26 organizations, public and private schools, communities of faith, hospitals, health systems, health  
27 clubs and gyms, pharmaceuticals, medical outlets, local, state and federal government agencies,  
28 non-profit health agencies, and sports teams to form a coalition to promote healthy living and  
29 fitness and to combat preventable disease and illness that threaten the lives of our adults and that  
30 threaten to detrimentally impact the quality of life and shorten the expected life span of our  
31 young people; and to require the Coordinator to develop a system to provide a single point of  
32 entry for Baltimore residents seeking to access governmental and private industry fitness and  
33 healthy living services.

34 **AND BE IT FURTHER RESOLVED,** That the Baltimore City Health Commissioner is requested  
35 to widely distribute this Resolution to the appropriate “health” partners in the medical, business,  
36 and academic communities as well as neighborhood associations and community organizations.

37 **AND BE IT FURTHER RESOLVED,** That a copy of this Resolution be sent to the Mayor, the  
38 Baltimore City Health Commissioner, and the Mayor’s Legislative Liaison to the City Council.