

City of San Antonio



Minutes Community Health Committee

2023 – 2025 Council Members Chair:

Teri Castillo, Dist. 5

Dr. Sukh Kaur, Dist. 1 | Phyllis Viagran, Dist. 3

Dr. Adriana Rocha Garcia, Dist. 4 | Marina Alderete Gavito, Dist. 7

Friday, February 28, 2025

10:00 AM

City Hall

The Community Health Committee convened a regular meeting in the City Hall Council Briefing Room beginning at 10:13 a.m. City Clerk Debbie Racca-Sittre took the Roll Call noting a quorum with the following Committee Members present:

Members Present: Teri Castillo, *Chair*
Dr. Sukh Kaur, *Member*,
Phyllis Viagran, *Member*
Dr. Adriana Rocha Garcia, *Member*

Members Absent: Marina Alderete Gavito, *Member*

Approval of Minutes

1. Approval of minutes from the Community Health Committee meeting on January 23, 2025.

Councilmember Kaur moved to Approve the minutes of the January 23, 2025, Community Health Committee meeting. Councilmember Viagran seconded the motion. The motion carried by the following vote:

Aye: Castillo, Kaur, Viagran
Absent: Rocha Garcia, Alderete Gavito

Public Comments

Councilmember Cabello Havrda, who was not on the Committee, read a two-minute statement supporting Item 5 and the allocation of \$100,000 to provide transportation for women to seek an abortion.

Ana Trevino with Texas Rising, Brielle Insler, Katie Sanchez, Alyssa Shepard, Erika Galindo, and Adriana Rodriguez spoke in support of Item 5, the Reproductive Justice Fund.

Patrick Von Dolen spoke in opposition to Item 5, the Reproductive Justice Fund.

Briefing and Possible Action on

2. Measles Exposure and Response. [Anita K Kurian, Deputy Director, Metro Health]

Dr. Claude Jacob, Director of Metro Health, introduced Deputy Director Dr. Anita Kurian who opened the presentation by introducing the Epidemiology Team. Kurian reported that an individual who later tested positive for the measles had arrived in San Antonio on February 14, 2025. She indicated that the individual visited the University of Texas at San Antonio (UTSA), various locations on the Riverwalk, Mr. Crabby's Seafood on February 15, 2025, and left the city on February 16, 2025. Metro Health was notified by the Texas Department of State Health Services on February 23, 2025, that the individual was diagnosed with measles.

Kurian stated that measles was highly contagious and if one person had it, up to 9 out of 10 people would become infected if they were not protected. She noted that measles spreads through the air when an infected person coughs or sneezes and symptoms would appear 7 to 14 days and in some instances up to 21 days after contact with the virus. Kurian listed common measles symptoms including high fever (may spike to more than 104° F), cough, runny nose (coryza), red, watery eyes (conjunctivitis), and rash. She warned that anyone who was not protected against measles was at risk for the disease, which could cause serious health complications, especially in children younger than five years of age. She reported that common complications included ear infections and diarrhea, however, serious complications included pneumonia and encephalitis.

Kurian stated that the best protection against measles was the Measles, Mumps, and Rubella (MMR) vaccine. She indicated that the MMR vaccine provided long-lasting protection against all strains of measles; two doses of MMR vaccine were about 97% effective at preventing measles and only one dose was about 93% effective, according to the Centers for Disease Control (CDC).

Kurian provided a United States map indicating measles outbreaks and cases in 2024 and 2025. She stated that measles had increased since the COVID-19 Pandemic because the disease was increasing globally, and child vaccination rates had fallen to 92%, which was below the percent necessary for herd immunity, which was 95%. She noted that the 2025 Texas outbreak was located in the South Plains area of west Texas and as of this morning, 146 people had been diagnosed with measles with one death of an unvaccinated school age child. She added that there had been four cases in the past 20 years in Bexar County: one in 2019 and three in 2007. These cases were associated with travel, according to Kurian.

Kurian stated that the current MMR vaccination coverage was at 94% for Bexar County but certain parts of the community had very low coverage, therefore, Metro Health was intensifying response efforts. She indicated that the first response was Surveillance & Public Health Investigation such as contact tracing and monitoring of those exposed and tracking of new cases. Kurian noted that Metro Health was providing guidance and recommendations to clinicians, first responders, school nurses, and the public.

Additionally, Kurian stated that Metro Health was performing outreach through Immunize SA partners

(IZSA) notifications, pop up vaccine events, and robust marketing and communication efforts. She mentioned that the vaccine campaign titled “Risk Less. Do More.” was launched on January 1, 2025 and Metro Health’s social media post on prevention had over 287,000 impressions. Kurian reported that since February 23, 2025, there had been over 45 news stories about possible exposures as well as social media posts with over 2,200 shares and over 214,000 impressions and Metro Health was continuing to provide situation awareness updates. She added that the U.S. Department of Health and Human Services (HHS) was creating a new creative campaign titled “Let’s Get Real.”

DISCUSSION:

Chair Castillo lauded Metro Health’s efforts and their ability to provide a briefing to the Committee on such short notice. She requested that Metro Health collaborate with Pre K 4 SA. Kurian clarified that Metro Health was outreaching all schools and childcare facilities regarding infection control and reporting. Chair Castillo asked how the process of reporting worked. Kurian stated that there were over 70 listed infectious conditions that required health professionals to report to Metro Health and her team worked year-round tracking and containing infectious diseases. Chair Castillo expressed concern that the South, West, and East Sides of town needed more access to care and these communities were more at risk.

Councilmember Viagran expressed concern that in 2025, she was receiving an update on a measles outbreak and supported more outreach on who could get vaccinated and when. She noted that some people expanded their families during the COVID-19 Pandemic and may have not gotten their children vaccinated. Councilmember Viagran commented that many people would be visiting San Antonio during spring break and some of these children could come from the South Plains area so she asked Kurian what was the best way for our residents to protect themselves. Councilmember Viagran offered to host a pop-up vaccination clinic in Council District 3. She recommended regular updates. Kurian stated that, considering the incubation period, cases from the February 15, 2025, exposure would be diagnosed by March 8, 2025. However, Kurian stated that Metro Health was constantly monitoring infectious diseases but did not report anything until a case was confirmed. Kurian mentioned that the Lancet had reported that vaccinations had saved \$150,000 lives. She urged that if an individual was sick, to please stay home.

Councilmember Rocha Garcia requested a breakdown of vaccination rates for vulnerable populations and areas of San Antonio. Kurian replied that they did not have the information currently, but school age children were 94% vaccinated. Councilmember Rocha Garcia asked how long it took her to get notified about the exposure. Kurian stated that she had received the notice on Friday night and had gotten the word out by Sunday.

Councilmember Rocha Garcia asked about the cost of vaccination. Kurian noted that MMR vaccines were widely available and were covered by most insurances, however, Metro Health had a vaccination program that was primarily for the uninsured and Metro Health charged a nominal administrative fee but would not turn anyone away if they could not pay. Councilmember Rocha Garcia asked what residents should bring to a clinic. Kurian recommended bringing vaccination records, but they could look up Texas records and identification was desired but not required. Councilmember Rocha Garcia offered to share information with residents.

Councilmember Kaur asked if there was a way to access the vaccination exemptions from schools to perform outreach but the information was Protected Health Information (PHI). Kurian stated that Texas was one of the 16 states that allowed a “conscientious exemption” in addition to medical or religious exemptions and the exemption rate was close to 3%; ten years ago, it was less than 1%. Kurian noted that the school nurses knew which children were unvaccinated and if there was an outbreak at a school, those children would be taken out of school for 21 days to prevent spread. Councilmember Kaur suggested incentives to get people vaccinated. Kurian stated that trusted residents and influencers were the best strategy.

Councilmember Rocha Garcia recommended focusing on medical desert areas. Kurian agreed.

Chair Castillo thanked Metro Health for their work and noted that the Item was for briefing only so no action was taken.

3. Prequalified Public Art List. [Lori Houston, Assistant City Manager; Krystal Jones, Director, Department of Arts & Culture]

Krystal Jones, Director of the Department of Arts & Culture, provided background on the Prequalified Public Artist List, which included visual artists and art support services to design, fabricate, install, and oversee public art projects. Jones provided a timeline for the solicitation process, which was to evaluate applications in a three-step process beginning with the application process, approval of the list, and finally selection to serve on a project.

Jones reported that applications opened on September 16, 2024, and the department hosted an applicant informational session on October 7, 2024, and responses were due on October 25, 2024. She reported that applications were evaluated and scored by expert panelists on November 4-19, 2024, and the recommended list was provided to the Public Art Committee and the San Antonio Arts Commission met in December 2024 and had approved the list. Jones proposed that if the Committee approved, she would forward the list to the full City Council for consideration on March 20, 2025.

Jones recommended a six-year period for the artists and professionals to be on the list. She reported that 227 eligible applications had been received and 216 were recommended to be placed on the list as they had scored above a 70% on the rubric. She mentioned that 158 of the recommended artists were from the San Antonio area and represented a diverse group including women.

DISCUSSION:

Chair Castillo was pleased that there was not an age limit as there were many youth that might qualify through organizations such as San Antonio Cultural Arts, which created many community murals. Chair Castillo clarified that all artworks would be displayed in the City of San Antonio. She requested information about residents that lived in Bexar County outside of San Antonio in order to reach out to Bexar County for public art funding.

Councilmember Rocha Garcia recommended increasing the points for applicants who lived in San Antonio. Jones agreed to review the scoring criteria for the next round in fall 2026.

Councilmember Rocha Garcia asked which council district had the most artists. Jones replied that Council

District 1 had the largest number of artists. Councilmember Rocha Garcia recommended partnerships and tabling in every council district. Jones stated that council districts with lower numbers of applicants were targeted although outreach was performed in all council districts. Councilmember Rocha Garcia requested more information about how Adriana Garcia created the concept for the artwork at the World Heritage Center.

Councilmember Viagran recommended hosting a Committee meeting at the World Heritage Center. She supported the public art program and moving the Item forward for City Council consideration.

Councilmember Kaur wanted more public art around the City noting that a project could take two years to complete. Jones indicated that the first step was to scope the bond project itself to determine if the site was feasible, then the Department of Arts & Culture conducted extensive community outreach, artist selection, artwork design feedback from the community and the San Antonio Arts Commission, artwork fabrication, and finally installation and opening of the art piece.

Councilmember Kaur asked how the department determined key stakeholders in a community. Jones stated that there was extensive coordination with the council district offices. Councilmember Kaur mentioned an initiative to provide more live music. Jones noted that the Artist Registry was a great resource.

Councilmember Kaur moved to Approve. Councilmember Viagran seconded the motion. The motion carried by the following vote:

Aye: Castillo, Kaur, Viagran, Rocha Garcia
Absent: Alderete Gavito

4. Council Consideration Request to Create a Public Health & Healthcare Commission. [Claude A. Jacob, Director, Health]

Dr. Claude Jacob, Director of Metro Health introduced the Item, which was initiated by Councilmembers Rocha Garcia (Council District 4) and Pelaez (Council District 8) through a Council Consideration Request (CCR) 2024-0021 requesting the creation of a Public Health and Healthcare Commission with the overarching goals to: 1) Advise Metro Health and other City of San Antonio departments, 2) Promote consensus-driven, data-informed, and interdisciplinary strategy to address health challenges in our community, and 3) Ensure strong core infrastructure to protect health and provide fair opportunities for all.

Jacob reported that the CCR proposed that the Metro Health Director would serve as the City of San Antonio staff liaison and the Commission would include healthcare providers, academics, advocates, researchers, mental health experts, the Bexar County Medical Society, and City Council recommended appointees. He noted that the Public Health and Healthcare Commission's key tasks would be to develop a comprehensive public health and healthcare strategy, advise Metro Health, city departments/agencies, and community organizations on improving health-related goals, services and outcomes, advocate for policy improvements to better serve our most vulnerable populations, prioritize health literacy, and support a comprehensive strategy for developing a medical center on the South Side.

Jacob noted that the Bexar County Health Collaborative had been in place since 1999, as well as the Southwest Texas Regional Advisory Council (STRAC), and the Bexar County Medical Society and

all three served as active health partners with Metro Health. Jacob reported that Metro Health contributed \$600,000 of seed funding for FY 2025 and FY 2026 to help establish the Center for Health Equity in South Texas (CHEST) and Metro Health also supported the efforts of Methodist Healthcare Ministries, The University of Texas School of Public Health San Antonio, the Bexar County Health Department, and University Health's Institute for Public Health.

Jacob commented that the Committee was charged by the Mayor to oversee policies, plans and programs that affected residents' quality of life including the protection and enhancement of: Natural Environment, Public Health, Human Services, Climate Preparedness, Solid Waste, Libraries, Parks and activities related to the stewardship of San Antonio's unique artistic, cultural, and historic heritage. Jacob mentioned that he reported regularly to the Committee on various healthcare challenges such as generational poverty, lack of access to care, food insecurity, and entrenched health inequities.

Jacob acknowledged that the COVID-19 Pandemic revealed truths about social inequality and racial injustice that necessitated a bold public health response. He explained that in 2021, Metro Health answered this call by launching an enhanced five-year community blueprint called SA Forward. Jacob stated that SA Forward widened the scope of Metro Health's strategic focus to address lessons learned from the pandemic in the domains of mental and behavioral health, domestic violence, inadequate food systems, social, economic, and racial health disparities, as well as public health surveillance and informatics response systems.

Dr. Edward Banos, Chief Executive Officer of University Health System, reported that his organization was working to expand healthcare access across the city. He noted historic growth on the South Side of San Antonio with a 166-bed hospital and 500,000 square foot office building planned to open in 2027 near Texas A&M University-San Antonio on the corner of Jaguar Parkway and S. Zarzamora Street. He mentioned the University Health Vida Clinics and the opening of a new clinic on the East Side later this year.

Dr. Lisa Ochoa, Board Chair of the Center for Health Equity in San Antonio (CHEST), stated that the overarching goal of CHEST was to facilitate collaborative critical thinking that led to more effective use of existing resources and development of cutting-edge strategies and new resources that would leapfrog San Antonio to healthy environments that would be embraced with the full support and participation of their respective communities.

Ochoa noted that CHEST was dedicated to advancing the health outcomes of underserved, under-resourced residents of the greater South San Antonio area, including the Near East Side and Near West Side communities, through increased education, access, investment, and cross-sector collaboration. She indicated that the vision of CHEST was to build a comprehensive and innovative ecosystem for health that would secure the financial and intellectual investments to successfully close life expectancy gaps between communities and achieve health equity across South Texas. Ochoa stated that CHEST's four Guiding Principles were to address health inequities, find innovative solutions, utilize emerging technologies, and collaborate with the community.

Ochoa listed the following CHEST workgroups: 1) The Education & Workforce Group focused on middle school to high school career exposure and pathways, collaborations with community colleges for entry level healthcare-related jobs, direct access to university and post-grad opportunities, and educating a culturally competent workforce, including soft skills as an overall goal. 2) The Health & Healthcare

Challenges Group was exploring strategies to incentivize more physicians and ancillary care to serve areas of highest need while increasing immediate access to care by strategizing time share options and mobile clinics with the overall goal to build capacity to attract additional acute care medical and mental health beds, and 3) The Life Expectancy Group was addressing food insecurity and healthy eating, improving green spaces and tree coverage, optimizing transportation options/routes, promoting affordable housing, and incorporating resources for a healthy life.

Ochoa listed the CHEST Board of Directors and thanked the City for providing seed money for the organization. Ochoa mentioned that CHEST had been working to develop an Asset Map with disaggregated data to identify all community stakeholders/programs categorized by Work Group focus area and target health career pathways across independent school districts. CHEST was also expanding opportunities for University of Texas Health and the University of the Incarnate Word School of Medicine (UIWSOM) medical students to build trust in the communities and practice medical Spanish. According to Ochoa, workforce development strategies included in Medical Assistant apprenticeships and Medical Receptionist pre-apprenticeships prepared high school seniors for entry-level careers. She stated that CHEST was performing preliminary analyses for potential “CHEST Corridor” Tax Increment Reinvestment Zone (TIRZ) to enhance development opportunities.

Ochoa reported that CHEST had begun hiring staff including a project manager and were pending an offer to a Grant writer; both in part-time 1099 arrangements. She indicated that the next steps for CHEST included executing the contract for the City seed funding, organizing a board retreat, applying for non-City grants and funding, initiating community listening sessions, identifying key work group initiatives, and continuing to recruit key community collaborators.

Finally, Jacob recommended that Metro Health and these partners provide regular updates to the Committee that addressed the tasks outlined in the Council Consideration Request rather than creating a new board.

DISCUSSION:

Chair Castillo commended the Councilmembers who initiated the CCR for working to close the gap on healthcare to underserved communities on the South and West Sides.

Councilmember Rocha Garcia noted that before the COVID-19 Pandemic, many people did not want the City to invest in public health but things had changed with people realizing there were social determinants of health. Councilmember Rocha Garcia stated that the CCR was intended to create more coordination between systems and ensure regular updates. She noted that the Committee might not exist if the next Mayor did not think it was important and that is why she had recommended creating an official board of the City to ensure proper representation and oversight of community health.

Councilmember Viagran was relieved that health facilities were being built on the South Side and was pleased that CHEST had been created from professionals from across the City and requested a meet-and-greet with the board. She supported the staff recommendation not to duplicate services and create another committee only for the City of San Antonio but suggested adding alternates to the CHEST Board. Councilmember Viagran supported looking at other groups funded by the City to

provide input.

Councilmember Kaur noted that she had signed the CCR and supported the staff's recommendation since there was solid representation of public health on the CHEST Board except from private healthcare providers and she recommended outreach to the private sector. Ochoa mentioned that there were more slots on the board, and recommendations were appreciated.

Chair Castillo noted that the City of San Antonio often hired consultants to review the work already being performed by City departments such as Metro Health. She supported the staff recommendation to collaborate with CHEST and was pleased that University Health was bringing more services to fill gaps throughout the community.

No action was taken on the Item and staff's recommendation to utilize existing health committees served to closeout CCR 2024-0021: Public Health and Healthcare Commission.

5. Reproductive Justice Fund – Addition of Downstream Services. [Claude A. Jacob, Director Metro Health; Troy Elliott, Director, Finance]

Dr. Claude Jacob, Director of Metro Health, introduced the Item and provided an overview of services being offered in other areas of the nation including health education, Obstetrician/Gynecology access and wrap around care, and abortion access. Jacob provided examples of downstream reproductive health services, which focused on direct care such as home pregnancy tests, emergency contraception, subsidized Doula's, African American maternal mental health care visits, Sexually Transmitted Illness (STI) testing and treatment, transportation to prenatal care, and transportation to abortion care.

Jacob reported that the Reproductive Justice Fund contracts approved through a Request for Proposals (RFP) were executed in November 2024 in the total amount of \$499,179, which included \$29,951 or 6% for Upstream services, \$174,713 or 35% for Midstream services, and \$294,515 or 59% for Downstream services.

Jacob provided a brief update on the results of the current contracts but stated that none of the four recommended awardees through the RFP process offered abortion navigation services. He explained that in the first RFP, transportation to abortion care services was optional, along with many other services and none of the four awardees proposed abortion transportation or navigation. However, Jacob noted that the Beat AIDS Coalition Trust and Parenting Plus had included these services as an element of a broader package, but these agencies were not recommended for award.

Jacob stated that Council District 6 Councilmember Cabello Havrda submitted a memorandum on November 22, 2024, requesting an additional \$100,000 targeting Downstream activities. He noted that the memorandum recommended a new solicitation restricted to the original ten applicants asking them to propose Downstream services that were not met through the already awarded \$500,000 allocation. Jacob indicated that the same scoring matrix would be used, and the solicitation would be open for 30-days followed by a 30-day review and scoring period. He added that respondents would be recommended for award at City Council A Session.

Jacob noted that potential litigation threat and Open Records Requests could serve as a deterrent for some

providers to respond. He stated that organizations struggled with a quick-turnaround RFP, contracting requirements, and the prohibition on advance payments. He also noted that local preference points had disadvantaged some applicants with experience in Reproductive Justice.

DISCUSSION:

Chair Castillo stated that in 2022, she filed a resolution to protect the rights of residents to make reproductive health decisions and part of that resolution included funding for reproductive health. She thanked the nonprofit organizations, the public speakers, and the Committee. Chair Castillo fully supported allocating \$100,000 for travel for abortion care and wanted to ensure that if no nonprofits proposed these services that the funding would still assist with reproductive healthcare services.

Councilmember Viagran listed several diseases including cancers, mental and emotional health that affected the reproductive health of women. She supported the RFP process to allow women to access abortion care, which was health care. Councilmember Viagran noted that many women lived in poverty and those women often neglected their own healthcare, which made the proposed \$100,000 an important investment in Downstream services even if no proposals for travel were received.

Councilmember Kaur expressed concern that women were being told what they could do with their own bodies. She felt those that did not recommend that the fund be created had a level of privilege that allowed them to get out of state treatment. Councilmember Kaur noted that the City of San Antonio defended itself against lawsuits and we should not be afraid to defend the rights of women. She supported the fund and continuing the funding every year. Councilmember Kaur commented that Reproductive Justice meant that women had the bodily autonomy to healthcare without interference from the government.

Councilmember Rocha Garcia asked how the upcoming SB 730 might impact the Item. First Assistant City Attorney, Liz Provencio explained that there was a proposed bill in the Texas Legislature that would limit the City's ability to provide funding for this kind of care, but it had not passed and was being watched; if passed, the City would comply with State Law. Councilmember Rocha Garcia asked where the \$100,000 would come from or whether it would impact measles vaccinations. Jacob stated that Metro Health would need to identify the funding.

Councilmember Rocha Garcia expressed concern that there might be Federal funding cuts.

Councilmember Viagran suggested that a committee could look at where the money would come from. She recommended finding the funding to help women of color or low-income women with CPS Energy off-system sales or with City Council Project Funds (CCPF). Councilmember Rocha Garcia supported the consideration to use CPS Energy or CCPF as proposed by Councilmember Viagran.

Councilmember Castillo clarified that vaccinations would not need to be cut nor would important programs be reduced to pay for \$100,000 when the City had other money. Jacob stated that he would take direction from the City Council and the City Manager, but this was not currently included in Metro Health's Budget.

Councilmember Viagran moved to recommend and forward the Item to the full City Council at an A Session. Councilmember Kaur seconded the motion.

Aye: Castillo, Kaur, Viagran, Rocha Garcia
Absent: Alderete Gavito

Adjournment

There being no further discussion, the meeting was adjourned at 12:32 p.m.

Approved

Teri Castillo, Chair

*Debbie Racca-Sittre
City Clerk*