Combating Health Disparities through Equitable Development

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Agenda

• Welcome & Housekeeping
  • Lauren Rosenbaum, MS, Families USA

• Why Health Advocates Should Care about Equitable Development
  • Amber A. Hewitt, PhD, Families USA

• Collaborating with the Community Development Sector to Address Shared Goals
  • Ruth Thomas-Squance, PhD, MPH, Build Healthy Places Network
  • Renae A. Badruzzaman, MPH, Build Healthy Places Network
  • Ashley Hernandez, MSc, Build Healthy Places Network

• Q&A
Why Health Advocates Should Care about Equitable Development

Amber A. Hewitt, PhD
Director of Health Equity, Families USA

@FamiliesUSA
@DrAmberHewitt
Families USA, a leading national voice for health care consumers, is dedicated to the achievement of high-quality, affordable health care and improved health for all. We advance our mission through public policy analysis, advocacy, and collaboration with partners to promote a patient and community centered health system.

Working at the national, state and community level for over 35 years.
Vision: To ensure all families face no barriers to living healthy lives because of who they are, where they live, what language they speak, or how they identify.

Theory of Change: To leverage opportunities presented by a new political focus and will regarding racial justice, the movement for health system transformation, and the possibilities of transformative organizing to build community power and to develop federal and state public policies that address health and health care inequities.
Health Equity Through a Systemic Lens

Source: Prevention Institute
National Community Reinvestment Coalition (NCRC): 2020 Study on Redlining and Neighborhood Health

- Examined redlining in cities across the country on numerous present-day neighborhood health outcomes.
- Study found significant relationships between greater redlining and pre-existing conditions, in addition to greater redlining and general indicators of population health.

Source: https://ncrc.org/holc-health/
COVID-19 Case Disparity Correlates with Health Factors

COVID-19 Case Disparity Correlates with Area Deprivation Index

Equity is Intersectional

Intersecting Oppressions

- Nationality
- Ability
- Sexual Orientation
- Gender
- Class
- Race

Source: Kimberlé Crenshaw (1997)
The ongoing practice of **structural racism** has resulted in enormous racial and ethnic health disparities.

Persistent racial residential segregation + Concentration of poverty & health risk + Maldistribution of health and health care assets & resources = Vast differences in health outcomes by zip code (and race)
Combating Health Disparities Through Equitable Development

Ruth Thomas-Squance, PhD, MPH
Renae A. Badruzzaman, MPH
Ashley Hernandez, MSc.

Families USA
October 22nd, 2020
Introductions: Getting to know us

- **Ruth Thomas-Squance**, Director of Field Building
- **Renae A. Badruzzaman**, Program Manager, Place-Based Team
- **Ashley Hernandez**, Communications and Outreach Specialist
“We are the national center at the intersection of community development and health, leading a movement to accelerate investments and speed and spread solutions for building healthy and productive communities.”
Achieving Better Health through Better Partnerships

Equitable and healthy communities

DRIVE NEW CROSS-SECTOR INVESTMENTS

Build Healthy Places Network

Speed and spread innovative solutions

Accelerate health dollars towards SDOH
Health Happens in Neighborhoods
PEOPLE GET SICK BECAUSE OF THEIR SOCIAL AND PHYSICAL ENVIRONMENTS

- Schools
- Grocery Stores
- Jobs
- Housing
- Transportation
- Parks and Playgrounds
IN DETERMINING YOUR HEALTH...
COMMUNITY DEVELOPMENT IS IN THE ZIP CODE IMPROVEMENT BUSINESS
What is Community Development?
COMMUNITY DEVELOPMENT IS NOT URBAN RENEWAL

Pruitt-Igoe, St. Louis, MO
1956 to 1972
Architect: Minoru Yamasaki
ZIP CODE IMPROVEMENT... COMPREHENSIVE YOUTH DEVELOPMENT

KIPP Academy, Washington D.C.

Neighborhood Centers Inc., Houston
Thunder Valley, CDC Workforce Development, Porcupine, SD Sustainable construction
THE WORK OF COMMUNITY DEVELOPMENT

CD works over the life course
COMMUNITY DEVELOPMENT & HEALTH WORK SIDE-BY-SIDE

Economic hardship by city

Childhood obesity by city

Los Angeles County
Community Development: Scale, Scope, & Major Players
ANTI-REDLINING LEGISLATION

Community Reinvestment Act of 1977 (CRA)

Philadelphia, 1949
HOW MUCH MONEY? AND WHERE DOES IT COME FROM??

$200 BILLION DOLLARS ANNually
DIRECTED INTO LOW-INCOME NEIGHBORHOODS

- Federal/state tax credits & grants
  - Low Income Housing Tax Credit (LIHTC)
  - New Markets Tax Credit (NMTC)
  - Community Development Block Grants (CDBG)
  - Healthy Food Financing Initiative (HFFI)
- Community Reinvestment Act dollars
  CRA-motivated loans and investments from private, for-profit banks
FEDERAL RESERVE SYSTEM
12 REGIONAL BANKS – each with a community development division
Visit BuildHealthyPlaces.org's Partner Finder for leading CDFIs and CDCs in your community.
Examples from the Field
A community hub that includes health and dental services, behavioral care, and 24 units of affordable senior housing.
March 2018, Toledo, Ohio
ProMedica & LISC launch $45M partnership
Market on the Green, Toledo, Ohio
Magnolia Crossing in Yazoo City, Mississippi, $8.5 million to renovate 86 public housing units.
Place-based Initiatives & Emerging Policy Work
Place-based initiatives

• Connect key players at the community level and provide hands-on support to put together new projects and financing

• Deepen relationships with comprehensive cross-sector initiatives and support the linkage between health and community development at the local level

• Demonstrate this work is possible on the ground in order to speed and scale solutions

• Connect investors with investment opportunities that improve the social determinants of health in historically marginalized and disinvested communities

• Encourage health care sector investments that address neighborhood determinants of health

• Ensure that investments are equitable and community driven
Landscape Analysis for: Coachella Valley, San Bernardino, Santa Rosa & Stockton

**Coachella Valley, California**

**Landscape Analysis**

March 14, 2019

**Coachella Opportunities for Health At-a-Glance – LISC and CVHC**

**Opportunity**

**Possible Step**

- Convening with healthcare partners
  - Make the case for partnership on housing and investment and hear about partner participants and priorities to shape a collaborative project.

- Desert Care Network
  - Discuss effort to reduce homelessness to partner with CVHC on supportive services, e.g., healthcare investment in housing.
  - Discuss partnerships with HMCs to assess strategies to connect health and social services to CVHC housing residents.

- Inland Empire Health Plan
  - Partner with CVHC to help facilitate health and supportive services, data sharing or investment in housing projects.

- Loma Linda University Health
  - Lead Loma Linda to complete a health needs assessment for CVHC housing residents and have local residents to lead project.
  - Partner with Loma Linda to support resident health social needs.

- Omen de Salud del Pueblo
  - Partner on health promotion and prevention through transportation services, Medical home model or school health.
  - Assess interest in co-location with a affordable housing project.

- Desert Healthcare District and Foundation
  - Discuss effort to reduce homelessness to partner with CVHC on supportive services in investment in housing projects.
  - Assess interest in community investment.

- Riverside University Health System
  - Assess community clinic expansion to co-locate with a CVHC housing project or partner to provide services to residents on site.

**SOME ISSUES HIGHLIGHTED IN OUR CONVERSATIONS**

**HOSPITALS**

- Have a major goal to reduce the use of high frequency users and reduce the exorbitant cost of emergency readmissions.
- Coachella Valley has a critical shortage of primary care and behavioral health providers. Among the challenges are the cost of educating physicians, specialists, and allied health care technicians, and retaining them to serve the area.
- Struggling to comply with SB 1293, but growing demand and limited capacity present immense challenges for providers. The bill requires hospitals to have a written plan for coordinating services and referrals for homeless patients and post-discharge destinations of each homeless patient.

**MEDI-CAL PROVIDER**

Homeless patients are often too sick or frail to return to the street, but external support services and shelter are inadequate.

**VARIOUS STAKEHOLDERS**

- Lack of affordable housing for low-income population and housing stock.
- Undocumented immigrants fearful of accessing healthcare.
- Public distrust of government and healthcare providers.

**ECONOMY & HOUSING**

<table>
<thead>
<tr>
<th>Palm Desert (29050)</th>
<th>Coachella (29801)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unemployment Rate</td>
<td>11.4%</td>
</tr>
<tr>
<td>Total Income</td>
<td>$56,210</td>
</tr>
<tr>
<td>Poverty Rate</td>
<td>13.6%</td>
</tr>
<tr>
<td>Median Home Value</td>
<td>$38,600</td>
</tr>
<tr>
<td>Homeownership Rate</td>
<td>49.9%</td>
</tr>
</tbody>
</table>
Principles for Utah Housing Preservation Fund

- **Provide access to safe and healthy affordable housing for all Utahans** by supporting the preservation of a range of housing options for individuals and families with incomes below 80% average median income.

- **Build trust with communities where the Fund is investing** and prioritize affordable housing preservation opportunities identified by those communities.

- **Improve opportunities for health and wellbeing for people in low-income and communities of color** across the state, including rural, suburban, resort, and urban areas that face systemic disinvestment and disproportionate negative health outcomes.

- **Provide rapid, patient capital accessible to key stakeholders across the state** to preserve Utah’s affordable housing.

- **Leverage public and private resources and existing community assets** in coordination with other statewide initiatives and national expertise across sectors.

- **Secure long-term commitments** from funders and investors with short, medium, and long-term health objectives that are tracked and measured.

*These principles draw from the Fund’s stated purpose and goals, Intermountain’s impact investing principles, the investors’ stated purpose and goals, and the field-based Principles for Building Healthy and Prosperous Communities.*
Our goal is to identify policy actions that make it easier for health care and community development to jointly invest in racial equity and social determinants of health.

Specifically, we are looking at policy innovations, barriers and solutions, and leadership opportunities to create more conducive environments for cross-sector collaboration in social determinants of health.
Our Scope: Local, California, and Federal Policy

The hypothesis:
- There are existing policy innovations we can build on and adapt from other places
- We need a menu of strategies from removing barriers, incentivizing innovations, to requiring best practices

The opportunity:
- Organize with community coalitions & encourage states, health systems, and community development to deepen innovations for social determinants investments

End product:
- A scan of the policy landscape
- A policy action framework focused on California
Resources for Next Steps
Jargon Buster

Working across sectors begins with speaking the same language. If you’re lost in a sea of acronyms, this tool can help. Below we aim to demystify common Industry jargon.

- Accountable Care Organization (ACO)
- Affordable Care Act (ACA)
- CDC (Centers for Disease Control and Prevention)
- CDC (Community Development Corporation)
- Community Benefits (Agreements)
- Community Benefits (Hospital)
- Community Development
- Community Development Financial Institutions (CDFIs)
- Community Health Assessment (CHA)
- Community Reinvestment Act
- Equitable Development

Related Terms: CDC (Community Development Corporation), Community Development Financial Institutions (CDFIs), Social Determinants of Health, Health Equity

Community development is a multi-billion-dollar sector of the American economy that invests in low- and moderate-income communities through the development and financing of affordable housing, businesses, community centers, health clinics, job training programs, and services to support children, youth, and families. The sector has its roots in the urban revitalization efforts of the late 19th century but expanded as a result of the War on Poverty programs of the 1960s. Today, the community development sector invests more than $200 billion annually in low-income communities.
THE PLAYBOOK

• Who are the players, and what are their motivations and offerings?
• What evidence makes the strongest case for community development and health partnerships?
• What do partnerships currently look like?
• How do partnerships develop?
• What are the barriers to partnership?

www.build.health/Playbook
Welcome to Partner Finder

Welcome to Partner Finder, a collection of directories to help you find the community development and health organizations nearest to you. Partner Finder helps you take the first steps to identify potential cross-sector partners in improving the health and well being of your community.
TAKEAWAYS: COMMUNITY DEVELOPMENT & PUBLIC HEALTH TOGETHER

LEARN — Utilize BHPN resources to navigate Comm Dev sector

IDENTIFY — Locate CDCs and CDFIs working in high poverty areas

ENGAGE — Reach out to local/regional CDCs, CDFIs, meet, learn, invite to work on CHAs, CHNAs, join their board.

ALIGN - Consider ways to align resources and expenditures
Build Healthy Places Network

www.BuildHealthyPlaces.org

@BHPNetwork

www.linkedin.com/company/build-healthy-places-network

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Questions?
Thank You & Resources

• **Research on the Connection Between Health Outcomes and Place**
  • **The Fierce Urgency of Now: Federal and State Policy Recommendations to Address Health Inequities in the Era of COVID-19** (Families USA)
  • **Redlining and Neighborhood Health** (National Community Reinvestment Coalition)

• **Resources for Partnering with the Community Development Sector** (Build Healthy Places Network)
  • Partner Finder
  • **Factsheet Series: The Intersection of Community Development and Health**
  • Jargon Buster
  • **Playbook: Partnerships for Health Equity and Opportunity**

• Stay in Touch: [familiesusa.org/sign-up/](http://familiesusa.org/sign-up/)

• Let us know how we can best support you in the post-webinar survey!
Dedicated to creating a nation where the best health and health care are equally accessible and affordable to all