

# Making the Case for Linking Community Development and Health

A resource for those working to improve low-income communities and the lives of the people living in them





# Introduction

It has been said that your ZIP code may be more important for your health than your genetic code.<sup>4</sup> This is because factors known as the social determinants of health (such as housing, education, job opportunities, child care, and transportation) can greatly influence your chances of becoming sick and dying early. Your address reflects the daily living conditions that can create—or limit—your opportunities to be healthy. This report is intended to be a resource for those working to improve low-income communities and the lives of the people living in them.

## Building a Movement to Improve Low-Income Communities and the Lives of the People Living in Them

While the connections between poverty and poor health have long been recognized, a new but growing movement is tackling these issues in innovative ways by connecting two sectors—community development and health—that have previously worked in relative isolation from each other.

For decades, diverse organizations within the community development sector have worked to improve the physical and economic infrastructure of low-income neighborhoods—with a focus on improving places. And, for over a century, public health and medical care institutions serving poor communities have worked to improve the health of socially disadvantaged groups—with a focus on the people who live in low-income neighborhoods.

A baby born in the poorest neighborhood of New Orleans is likely to live 25 years less than a baby born just 4 miles away in the most affluent neighborhood of the same city.<sup>1</sup>

In the Chicago area, just a few subway stops can correspond to a 16-year difference in life expectancy at birth.<sup>2</sup> Sadly, these are not isolated examples; similar patterns are seen across the United States.<sup>3</sup>





The **social determinants of health** are factors apart from medical (“health”) care that strongly influence health and can be shaped by social policies.

The **community development sector** is a multi-billion dollar industry that aims to improve the social, physical, and economic conditions in disadvantaged neighborhoods through developing and financing affordable housing, schools, grocery stores, community services such as child care and health clinics, economic and workforce development projects, and other activities that revitalize or stabilize low to moderate income areas.

The **health sector** includes both **public health**, which aims to protect and promote the health of whole populations, and **medical care**, which diagnoses, treats, and prevents physical and mental impairments among individuals.

“There is an entire industry—community development—with annual resources in the tens of billions of dollars that is in the ‘ZIP-code-improving’ business. And in the health field, there is increasing recognition of the need to act on the social determinants of health. The time to merge these two approaches—improving health by addressing its social determinants and revitalizing low-income neighborhoods—is now.”

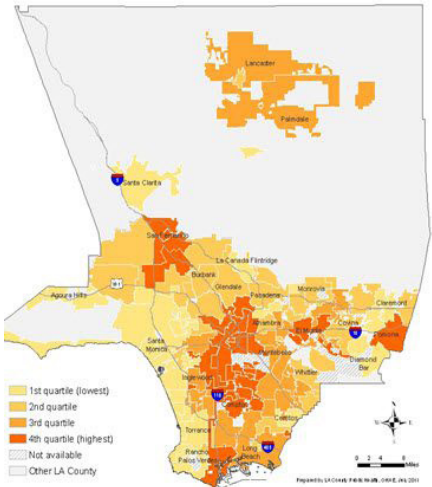
- David Erickson, director, Center for Community Development Investments, Federal Reserve Bank of San Francisco



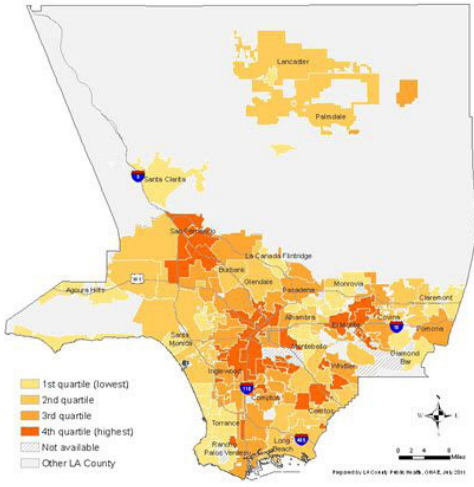
Flickr: Mobilus In Mobilis

Over the last dozen years,<sup>5</sup> the health sector—including both public health and medical care—has increasingly recognized the importance of social determinants of health, the factors apart from medical care that strongly influence health and can be shaped by social policies. And community development has increasingly turned its attention to the effects of neighborhood improvements on residents’ well-being—including their health. As community development has placed more emphasis on people and as the health sector has increasingly recognized the importance of places, the commonalities across these sectors have become clearer.

Economic Hardship Index by City/Community, Los Angeles County, 2000



Prevalence of Childhood Obesity by City/Community, Los Angeles County, 2005



In Los Angeles County, California, childhood obesity is most prevalent in areas with the greatest economic hardship.<sup>6</sup>

“Community developers and health practitioners are working side-by-side in the same neighborhoods and often with the same residents, but we do not know each other or coordinate our efforts.”

– David Erickson, director, Center for Community Development Investments, Federal Reserve Bank of San Francisco

In 2014, after testimony from leaders in both the community development and health sectors, the Robert Wood Johnson Foundation Commission to Build a Healthier America recommended that we must “Fundamentally change how we revitalize neighborhoods, fully integrating health into community development.”

As cross-sector interest has increased, there has been a growing need for common understanding across sectors that have different functions, aims, and vocabularies. This report seeks to increase knowledge of shared values and goals and raise awareness of how organizations are working together across the country at the intersection of community development and health.

## This Report Explores the Following Issues:

1

What do community development and health have in common?  
How do neighborhood conditions shape health?

2

How can the community development and health sectors connect and collaborate?  
How have joint community development-health initiatives been financed?

3

What are the barriers to working at the intersection of community development and health and how can they be overcome?

4

Why and how should the health impact of community development initiatives be measured?

5

Appendix:  
– Examples of specific efforts linking community development and health  
– Additional resources

# 1

## What Do Community Development and Health Have in Common?

**One in every four persons in the U.S. (25.7 percent) lives in a high-poverty neighborhood, often defined as an area in which at least 20 percent of the residents are poor.<sup>7</sup>**

Poverty in the U.S. has become more concentrated in the last decade, leading to more high-poverty and disadvantaged neighborhoods.<sup>8</sup> Because of historically entrenched and persistent racial residential segregation, Blacks and Latinos are more likely than Whites to live in neighborhoods with concentrated poverty, even when their individual household incomes are similar to those of Whites.<sup>9</sup>

### **How can neighborhood conditions shape health?**

It is not difficult to imagine how conditions in a neighborhood could affect health. For example, poorer neighborhoods generally have more crime, pollution, fast-food outlets, and ads promoting tobacco and alcohol use,<sup>10,11</sup> and often lack safe places to play and exercise.<sup>12</sup> Residents of high-poverty neighborhoods are more likely to live in substandard housing that can expose children to multiple health hazards including lead poisoning and asthma.<sup>13</sup> Perhaps less obvious but equally important is the fact that children living in poor neighborhoods are more likely to attend underperforming schools<sup>14, 15</sup> and have fewer job opportunities,<sup>16,17</sup> which can limit social mobility<sup>18</sup>—and therefore health<sup>19,20,21</sup>—across generations.

### **Are features of neighborhoods really that important for health—or should we focus primarily on the individuals who live in them?**

For years, researchers have tried to understand the connection between high-poverty neighborhoods and poor health among the residents, but it is challenging to distinguish the health effects of neighborhood conditions from the health effects of resources and characteristics—such as family income or education—of the individuals who live in these areas.<sup>22,23</sup> Conditions in high-poverty

neighborhoods can expose residents to harmful air quality, toxic materials in homes, dangerous streets, and pervasive advertising promoting harmful substances; these neighborhoods also may have limited options for healthy food and safe leisure physical activity, and few opportunities for education and high-quality employment—all of which can damage health. And, to make matters even more complicated, these neighborhood conditions can influence the characteristics of the individual residents; for example, living in a neighborhood with limited access to good jobs can deepen individuals' poverty.

Despite these research challenges,<sup>24</sup> many studies have documented links between residents' health and a wide range of conditions in neighborhoods, even after taking into account relevant individual characteristics.<sup>25,26</sup> For example, one study that compared heart disease among people living in different neighborhoods found that individuals who lived in the most socioeconomically disadvantaged neighborhoods were more likely to develop heart disease than individuals who were socioeconomically similar (based on individuals' incomes, education, and occupational status<sup>27,28</sup>) but who lived in the most advantaged neighborhoods.<sup>29</sup> A recent longitudinal study by Harvard University economists found that the length of exposure to a lower-poverty neighborhood during childhood is a key determinant of an individual's long-term economic outcomes and is associated with increased future earnings.<sup>30</sup> Although other research also has shown how economic mobility can affect health, this provides particularly compelling recent evidence for how neighborhood conditions can shape economic mobility through pathways related to child development.

**The physical, service, and social environments<sup>31</sup> of neighborhoods have been repeatedly and strongly linked to mortality, general health status, disability, birth outcomes, and chronic conditions, as well as health behaviors, mental health, injuries, violence, and other important health indicators.<sup>32</sup>**

## Connecting the Dots: Neighborhood Conditions and Health

A large body of literature has linked different kinds of conditions in neighborhoods with health; these include physical conditions, the services available, and social conditions. Healthy and unhealthy neighborhood conditions are not distributed randomly. Extensive research shows that low-income and minority neighborhoods are more likely to experience harmful conditions and to lack health-promoting conditions.



## Physical Conditions in Neighborhoods Can Influence Health

**“Physical conditions”** are features such as air, water, and soil quality, hazardous substances, streets, sidewalks, and buildings, which are aspects of the natural environment and the human-made “built environment.”

### **Lead poisoning in children can severely and permanently affect their mental and physical development.**<sup>33</sup>

- ▶ A study of 204,746 Rhode Island children found that 31 percent of children who lived in the highest poverty areas had elevated blood lead levels, compared to 8 percent of children who lived in the lowest poverty areas.<sup>34</sup>

### **Air particulate matter is hazardous to human health,<sup>35</sup> affecting the young, the elderly, and those with heart or lung diseases, more than others.**<sup>36</sup>

- ▶ In California, neighborhoods with the lowest median family income were three times more likely to have high traffic density (increasing risk of exposure to hazardous air pollutants) than neighborhoods with the highest median incomes.<sup>37</sup>

**Community and street design interventions that improve walking and bicycling opportunities have been associated with increases in physical activity.<sup>38</sup> For pedestrians and bicyclists, the introduction of traffic safety measures (such as traffic-slowing features, well-marked street crossings, and bike lanes) have been linked to a decreased risk of injuries and fatalities.**<sup>39,40</sup>

- ▶ While socioeconomically disadvantaged populations tend to live in neighborhoods with more walkability (according to conventional measures of walkability,<sup>41</sup> i.e. shorter block length, greater street node density, more developed land use, higher density of street segments), finer-scale features that encourage walking and promote pedestrian safety such as sidewalks on both sides of the street, traffic calming features, and marked crosswalks may be less present in low-income communities.<sup>42,43</sup>

**Neighborhood “built environment” attributes have been associated with crime, perceived safety, and health behaviors.<sup>44</sup> For instance, improved street lighting has been associated with reduced crime<sup>45</sup> and greater exposure to alcohol advertising has been associated with an increase in drinking.<sup>46</sup>**

- ▶ Streets with street and/or sidewalk lighting are more common in high-income areas than in middle-income or low-income communities.<sup>47</sup> A study in Los Angeles found that low-income and minority communities had more outdoor advertising promoting the use of harmful products than other communities, adding to other research with similar findings.<sup>48,49,50,51</sup>

## Services in Neighborhoods Can Influence Health

**“Service conditions”** are features of the physical environments that provide services to the public, such as schools, child care centers, grocery stores, public transportation systems, businesses, and parks.

**Americans who use transit spend a median of 19 minutes daily walking to and from transit; 29 percent achieve greater than or equal to 30 minutes of physical activity a day solely by walking to and from transit.<sup>52</sup> One study found that the introduction of light-rail transit may increase physical activity and is associated with reductions in body mass index among riders.<sup>53</sup>**

- ▶ A large share of public transit riders are low-income, African American, Hispanic, and seniors.<sup>54</sup>
- ▶ The working poor spend a much higher portion of their income on commuting; unreliable transportation can lead to late fees for child care, lower earnings and possibly job loss due to delays getting to work.<sup>55</sup> These can have adverse health consequences through pathways involving stress.<sup>56</sup>
- ▶ Low-income neighborhoods often experience inferior transit service, overcrowding, and routes that do not match their desired trip patterns.

<sup>57,58, 59,60</sup>

**As the number of alcohol outlets increases, so do levels of crime and violence.<sup>61,62,63,64</sup> A higher concentration of convenience stores is associated with a higher level of individual smoking,<sup>65</sup> and living in a census tract with a high concentration of liquor stores was associated with a higher risk of excessive drinking.<sup>66,67</sup> Some studies suggest that living in an area with a high concentration of fast-food restaurants is associated with obesity.<sup>68,69,70</sup>**

- ▶ Liquor stores are more common in low-income areas than in high-income areas.<sup>71,72,73</sup>
- ▶ Predominantly Black neighborhoods have a higher concentration of fast-food restaurants than predominantly White neighborhoods.<sup>74</sup>

**Full-service supermarkets can contribute to health in poor neighborhoods in a number of ways. They can drive economic development by creating jobs.<sup>75</sup> By offering more healthful and affordable foods,<sup>76</sup> they may be an important part of strategies to increase access to nutritious foods and encourage healthy eating.<sup>77,78,79</sup>**

- ▶ Significantly fewer supermarkets (distinguished from small corner grocery or convenience stores) are located in predominantly Black neighborhoods, as compared to predominantly White neighborhoods, regardless of residents' incomes.<sup>80,81</sup>

**Access to recreational facilities is associated with greater physical activity among adults, adolescents, and children.<sup>82</sup>**

- ▶ A nationally representative study found that low-income and high-minority neighborhoods are less likely to have physical activity facilities.<sup>83</sup>

**Early childhood development programs have been shown to promote cognitive development and increased readiness to learn.<sup>84,85</sup>**

- ▶ Low-income children are less likely to attend preschool and low- to middle-income children are less likely to attend high-quality prekindergarten programs. Black children are the most likely to be in low-quality settings and are more likely to have low-quality interactions with preschool teachers.<sup>86</sup>

**Educational attainment is strongly linked to health; people with more education are more likely to live longer, experience better health outcomes, and practice health-promoting behaviors.<sup>87</sup>**

- ▶ Residents of low-income areas and minorities are more likely to attend poorly funded schools<sup>88</sup> with lower teacher quality.<sup>89,90</sup>

## Social Conditions in Neighborhoods Can Influence Health

**“Social conditions”** are the social relationships among community members, such as mutual trust and support and the willingness to intervene for the public good.

### **Perceived neighborhood safety has been associated with levels of physical activity.**<sup>91,92</sup>

- ▶ Residents of low-income neighborhoods are less likely to report favorable neighborhood appearance, pedestrian/biking facilities, safety from traffic and crime, and access to recreation facilities than residents of higher-income areas.<sup>93</sup>

### **“Closely knit” neighborhoods are more likely to exchange information and work together to achieve common goals; they also may have more effective social norms that discourage crime and unhealthy or destructive behaviors such as drunkenness, youth alcohol or smoking behavior, littering, and graffiti.**<sup>94,95</sup>

- ▶ Residents of high-poverty neighborhoods may be exposed to increased social disorder, reduced social cohesion, and increased chronic stress.<sup>96</sup> Neighborhood crime, social norms that encourage unhealthy behaviors and widespread feelings of hopelessness<sup>97</sup> may create social conditions in disadvantaged neighborhoods that are hazardous to health.<sup>98</sup>

**“Too many neighborhoods have too few opportunities and too many challenges. This fact is hurting the health of many Americans, and children bear the brunt because so many live in poverty.”**

- Doug Jutte, Jeni Miller, and David Erickson, “Neighborhood Adversity, Child Health, and the Role for Community Development”

## The Toll of Growing Up in a Disadvantaged Neighborhood

**Children are particularly vulnerable to the health effects associated with growing up in a disadvantaged community; these health effects may extend into adulthood.**

Exposure to environmental hazards can take a particularly large toll on children's health, sometimes with lifelong consequences. For example, lead exposure can result in permanent neurodevelopmental impairment,<sup>99</sup> mold and dust mites can trigger asthma attacks,<sup>100</sup> and unsafe streets mean greater risk of injury.<sup>101,102</sup> Aggressive advertising of alcohol and tobacco products, unhealthy social norms, lack of safe and appealing places to play, and pervasive social disorder may negatively influence the development of health-related attitudes and behaviors in childhood with consequences that last into adulthood. Lower quality child care options can mean less readiness for school, and underperforming schools also may limit children's opportunities for higher educational attainment, a key determinant of health in adulthood.<sup>103</sup> Living in a neighborhood with pervasive crime, violence, and instability is likely to be stressful; chronic stress in childhood has been linked with poor long-term health outcomes, including heart disease, diabetes, and premature mortality in adulthood. These adverse neighborhood contexts may limit the ability of caregivers to create supportive environments for children, despite great effort.

**The combined effects of harmful neighborhood conditions and other adverse experiences can produce chronic (meaning persistent) stress in childhood that can overwhelm a child's ability to cope.<sup>104,105,106,107</sup> This is sometimes referred to as "toxic stress."<sup>108</sup>**

A growing body of research demonstrates how toxic stress can get "under the skin", leading to poorer health outcomes later in life. While many chronic conditions do not manifest until adulthood, researchers have identified substances detectable in laboratory tests that indicate elevated risk for chronic disease within children who experience toxic stress.<sup>109,110,111,112,113,114</sup> Researchers have also observed differences in brain development and behavior that reflect impaired cognitive and emotional development among children who experience toxic stress and have found that affected children are more likely to engage in risky health behaviors.<sup>115,116,117</sup>

Many children who live below the federal poverty line live in high-poverty, low-opportunity neighborhoods. A 2015 journal article explains how the community development sector can be a key partner in improving the health of the one out of five children who live in poverty (and the one out of three Latino and African American children who live in poverty) by improving neighborhood conditions.<sup>118,119</sup> To illustrate these modifiable neighborhood level factors that shape health and social mobility, Dolores Acevedo-Garcia and colleagues developed the Child Opportunity Index, a tool that calculates the positive and negative neighborhood influences on children's well-being for the 100 largest metropolitan areas in the U.S.<sup>120</sup> The Child Opportunity Index shows that Black and Latino children are much more likely than White children to grow up in low-opportunity communities.



# 2

## How Can the Community Development and Health Sectors Connect and Collaborate?

**Community development and health practitioners often work in the same places, serving the same people, to tackle the interconnected issues of poverty and poor health.**

The **health sector** is beginning to recognize the need to address the root causes of poor health, known as the social determinants of health, which fall outside of the traditional domains of public health and medical care. While the health sector is just beginning to invest in approaches to create healthy places to live, learn, work, and play, the multi-billion dollar community development sector already has decades of experience addressing the social determinants of health by improving the neighborhood environments of those who face the greatest health disadvantages. Despite the importance of their efforts for health, however, many community developers are just beginning to recognize how their work to develop affordable housing, job opportunities, high-quality schools, grocery stores, and other resources, can improve physical as well as mental health.

**Community development** is a largely nonprofit sector that aims to revitalize low-income communities by developing small businesses, service-enriched affordable housing, community health clinics, high-quality schools and childcare centers, supermarkets, and other facilities to enhance economic and social conditions.<sup>121</sup> The field grew out of anti-poverty efforts during the “War on Poverty” in the 1960s. Key entities in the field include CDCs, CDFIs, and other nonprofits. With required community resident participation, these organizations work with governments, banks, for-profit real estate developers, and other nonprofits to improve neighborhoods. CDCs emerged from community action agencies that were established to connect low-income residents to federal redevelopment programs and focus primarily on real estate development. CDFIs operate like nonprofit banks to finance community development projects with public- and private- sector funds.

Through key federal programs and tax credits (see table below), the community development field acquires nearly \$16 billion each year in federal government subsidies. These subsidies and additional funds from state and local governments and foundations serve as seed capital to attract market-rate capital from insurance companies, pension funds, and social investors. In addition, banks are required by the “anti-redlining” CRA to demonstrate investments in low-income neighborhoods where they do business. CRA-motivated investments alone amount to over \$200 billion<sup>122</sup> annually in low-income communities.

### Key Terms from the Community Development Sector

<p><b>Community Development Financial Institution (CDFI)</b></p>	<p>CDFIs are federally-certified financial institutions that fund community development projects. CDFIs are primarily supported by the CDFI Fund, an agency of the U.S. Treasury established to provide capital to CDFIs. Local Initiatives Support Corporation (LISC), Enterprise Community Loan Fund, and the Low Income Investment Fund (LIIF) are leading CDFIs emphasizing investments in health-related initiatives as part of comprehensive community revitalization efforts.<sup>123</sup></p>
<p><b>Community Development Corporation (CDC)</b></p>	<p>A CDC is a not-for-profit organization that serves as the primary action arm for community development and health equity-focused projects, from affordable housing and economic development to social and health-related services. CDCs typically work in the neighborhoods in which they are located, often working alongside developers, city agencies, county health agencies, and other non-profit service providers.</p>
<p><b>Community Reinvestment Act of 1977 (CRA)</b></p>	<p>The CRA was enacted by Congress in 1977 to encourage banks to meet the credit needs of the communities in which they operate, particularly low- and moderate-income neighborhoods. Implemented by the Board of Governors of the Federal Reserve System, the Federal Deposit Insurance Corporation and the Office of the Comptroller of the Currency,<sup>124</sup> CRA was developed in response to a long history of “redlining” in the U.S., where banks denied credit to residents and business owners of low income communities and communities of color.</p>
<p><b>Community Development Block Grant (CDBG)</b></p>	<p>The CDBG is a flexible program that provides resources to address a wide range of unique community development needs. Beginning in 1974, the CDBG program is one of the longest continuously run programs at the Office of Housing and Urban Development (HUD).<sup>125</sup></p>
<p><b>Community Development Financial Institution Fund (CDFI Fund)</b></p>	<p>The CDFI Fund is an agency of the U.S. Treasury established to provide capital to CDFIs. LISC, Enterprise Community Loan Fund, and LIIF are leading CDFIs emphasizing investments in health clinics and other health-related initiatives as part of comprehensive community revitalization efforts.<sup>126</sup></p>

## Key Terms (continued)

<b>Low Income Housing Tax Credit</b>	<p>The Low Income Housing Tax Credit program was created in 1986 to give state and local agencies the equivalent of nearly \$8 billion in annual budget authority to issue tax credits for the acquisition, rehabilitation, or new construction of rental housing targeted to lower-income households. It is the most important resource for creating affordable housing in the United States today.<sup>127</sup></p>
<b>New Markets Tax Credit</b>	<p>The New Markets Tax Credit program was established by Congress in 2000 to spur new or increased investments into operating businesses and real estate projects located in low-income communities. It attracts investment capital to low-income communities by permitting individual and corporate investors to receive a tax credit against their Federal income tax return in exchange for making equity investments in specialized financial institutions called Community Development Entities.<sup>128</sup></p>
<b>Pay-for-Success (PFS) and Social Innovation Financing (SIF)</b>	<p>PFS is a term for performance-based contracting in the social sector where government only pays social service providers if results are achieved rather than providing cost reimbursement payments. SIF bridges the timing gap between government success payments and the upfront working capital needed to run PFS programs. Financing capital can be raised from philanthropic or commercial sources. Social Impact Bonds are a form of SIF.<sup>129</sup></p>

**Both the health and community development sectors are beginning to recognize that far more can be achieved by working together than working apart.**

With the knowledge that residents of disadvantaged neighborhoods often face daunting barriers to health and experience shorter, sicker lives, more community development organizations are beginning to intentionally address health concerns. Incorporating health into community development work can complement the community development sector's efforts to strengthen the economic and social fabric of low-income communities.<sup>130</sup> By targeting neighborhood conditions that contribute to poor health, community developers can help the residents of low-income communities reach their full potential in school, work, and at home, as well as in health. Efforts to improve the health of communities may also bode well for economic development;<sup>131</sup> healthy people are more productive at work,<sup>132</sup> and at least in the immediate and near future, require less costly medical care.<sup>133</sup>



Similarly, the health sector has begun to recognize that preventing illness and premature death requires going beyond focusing on single risk factors or health conditions, or educating individuals on health-promoting behaviors. In both public health and medical care, programs and policies are being launched to address the social and economic circumstances that largely shape health status.

For instance, The Patient Protection and Affordable Care Act (ACA), (while focused primarily on improving health care access and affordability), created the National Prevention Council to unite leaders across sectors to establish a National Prevention Strategy. Furthermore, the ACA's "community benefit" requirement mandates that nonprofit hospitals—which encompass nearly one half of all hospitals in the United States<sup>134,135</sup>—conduct a Community Health Needs Assessment every three years and develop an implementation strategy to promote community health.

**The community development and health sectors have complementary skill sets and resources that enable them to work together to holistically address the needs of low-income communities.**

The health sector can offer expertise in research and evaluation, as well as monetary support, to efforts to improve the health of communities. Adding health to other rationales for a community development project may also heighten public interest,<sup>136</sup> stimulate greater community engagement,<sup>137</sup> and attract investments from hospitals and health-focused foundations. (See "How have joint community development-health initiatives been financed?" below).

- ▶ **Public health departments**, staffed with epidemiologists and others with research training, can help assess community health needs, design elements of community development efforts to improve health, and measure the health impact of these initiatives.<sup>138</sup> Through local and federal resources, public health departments may have funds to contribute to community development efforts that promote health. They may also have ties with community groups who should be involved.
- ▶ **Hospital systems** have also shown interest in improving the health of the neighborhoods surrounding their hospitals and facilities. The ACA requires nonprofit hospitals to conduct a Community Health Needs Assessment and implement a plan to improve community health, thus incentivizing collaboration with public health, community development, and social services agencies to prevent illness and to promote the overall health of the populations they serve.<sup>139</sup>

## Initiatives Led by the Health Sector: Examples

### Public Health Department Brings Evaluation Expertise to Multi-Sector Strategies

The Seattle & King County Public Health Department has been central to the evaluation of cross-sector projects that address the social determinants of health. For example, a recent two-year project to improve school nutrition and physical activity brought together stakeholders in public health, education, food and agriculture, urban planning, business and other sectors to make targeted, place-based investments. The public health department's evaluation and data collection efforts enhanced the project's design and effectiveness.<sup>140</sup>

### Hospital Systems Promote Health Outside Hospital Walls

Hennepin Health is a county health plan that serves 10,000 high-need residents in Minneapolis/St. Paul. By collecting and continually updating data on services used by enrollees, physicians were able to distinguish how various medical services, such as emergency room visits, were over utilized and ineffective in improving health. Knowledge from this measurement system allowed the health system to coordinate care between hospital and outpatient

settings and invest in strategies to address the social and behavioral determinants of poor health, such as supportive housing and a sobering center. Between 2012 and 2013, emergency department visits decreased 9.1 percent and outpatient visits increased 3.3 percent.<sup>141</sup>

Community Works is a community benefit initiative of The Bon Secours Baltimore Health System and was established to ensure that community residents have access to healthy food, housing, recreational facilities, and an array of medical care services. The initiative has invested in local social service resources, such as the Women's Resource Center, and developed the Bon Secours Family Support Center to offer families comprehensive services, including parenting classes, counseling, recreational and educational activities, in-home support services, nutritious meals, and child care. Community Works also supports workforce development and financial literacy through supporting comprehensive training programs for teens and adults and Our Money Place Financial Services. Finally, Community Works invests in neighborhood revitalization, including established neighborhood improvement workforce training programs, such as Clean & Green, and convenes Weed & Seed to bring citizens and the local police force together to identify areas for neighborhood improvement.<sup>142</sup>

**“One of the most promising new partners in community development is the health care sector. Factors such as educational attainment, income, access to healthy food, and the safety of a neighborhood tend to correlate with individual health outcomes in that neighborhood ... these factors are linked to economic health as well as physical health.”**

– Ben S. Bernanke, former chairman, Federal Reserve Board of Governors

The community development sector—including both financial organizations and service providers—offers both capital and a wealth of resources and expertise established through a long history of deep community partnerships supported by policy (such as the CRA).

- ▶ CDFIs have strong connections to private and public sector funders and are experienced in financing projects in low-income communities.
- ▶ Other community development organizations offer critical knowledge, expertise, and strong connections to other organizations in the field. Affordable housing developers and nonprofit real estate developers bring knowledge of physical infrastructure development that is important for the physical revitalization of communities. Local organizations that are active in community development may contribute sophisticated strategies for implementing programs<sup>143</sup> and may help organize and engage community members in community development initiatives.

## Initiatives Led by the Community Development Sector: Examples

### CDFIs Finance Essential Community Resources for Health

Enterprise Community Partners is a national CDFI that has raised and invested over \$16 billion dollars in affordable housing nationwide. Enterprise specializes in community development financing and innovation, with expertise in affordable housing, including senior housing, “green” housing, supportive housing, transit-oriented development, and design.<sup>144</sup>

LIIF is a national CDFI with expertise in investing capital for healthy communities, healthy people, and economic, educational, and personal opportunity. With business savvy and expertise in deploying capital and bringing projects to scale, LIIF has directly invested over \$1.7 billion dollars in community projects in collaboration and partnership with the private, public, and philanthropic sectors. Projects include affordable housing, child care centers, schools, healthy food stores, commercial facilities, and transit-oriented development.<sup>145</sup>

### CDCs Mobilize Communities

The Bedford Stuyvesant Restoration Corporation is a long-standing community development organization that partners with residents and businesses to improve the quality of life in New York City’s Central Brooklyn neighborhoods. By fostering economic self-sufficiency, enhancing family stability and growth, and promoting the arts and culture, the organization aims to transform the neighborhood into a safe, vibrant place to live, work, and visit. Its work includes developing Restoration Plaza as a welcoming commercial and public space with a full-service grocery store, offering mixed-income housing, conserving energy through weatherization services, supporting youth and workforce development programs, building assets through financial literacy and planning services, and hosting arts and cultural events.<sup>146</sup>

## Initiatives Incorporating Multiple Sectors: Examples

### Aligning Resources for Impact

The Vita Health & Wellness District is a collaborative community revitalization effort on the West Side of Stamford, Conn., between Stamford Hospital and local public housing authority Charter Oaks Communities. For more than five years, they have been working together to tackle the social determinants of health in a revitalization effort that promotes health and opportunity for residents who were formerly isolated and stigmatized by poorly designed public housing. In 2011, Stamford received a Sustainable Communities Challenge grant from HUD to underwrite the Vita strategic plan, and the following year, were selected for the U.S. Environmental Protection Agency's Building Blocks Equitable Development technical assistance program. With large investments by both partners, including a \$450 million expansion by the Stamford Hospital, and guidance from residents and business owners through West Side Neighborhood Revitalization Zone meetings, a mixed-income neighborhood was developed adjacent to the Stamford Hospital. Focused on health, sustainability, opportunity, and economic viability, the new neighborhood preserves every unit of public housing and includes an urban farm, case management services, and nearby recreational parks.<sup>147</sup>

### The Promise of Comprehensive Approaches: Purpose Built Communities and the East Lake Model

Purpose Built Communities is an organization that assists with community revitalization efforts across the nation. It was created with the aim of replicating the East Lake Foundation's model of neighborhood transformation, and illustrates how the successes of bold and comprehensive community revitalization projects can be brought to scale.

In 1995, the East Lake Foundation of East Lake, Atlanta launched a long-term comprehensive community redevelopment effort that replaced distressed low-income rental housing with high-quality mixed-income housing, created a cradle-through-college education pipeline for the neighborhood, and established wellness and health-related facilities and programs. In the years following the project, the area experienced significant strides in reducing crime, increasing employment, and boosting educational attainment. Between 1995 and 2012, there was a 90 percent reduction in violent crime, an increase in employment from 13 percent to 70 percent, and an improvement from 5 percent to 98 percent of fifth graders meeting state math standards in the school serving the community.<sup>149</sup>

**[The new public housing developments will help] “families, individuals, kids, and seniors really experience something that other people take for granted, which is community cohesion, feeling that you’re safe, secure, and in an environment that is yours and wants you there.”**

– Vincent J. Tufo, CEO, Charter Oaks Communities<sup>148</sup>

## Data Sharing Between Sectors Can Enhance Efforts

Health data collected by local public health departments and medical care institutions could inform the work of community development organizations. Information on the prevalence of asthma or obesity among children in particular neighborhoods could help community development organizations target interventions to improve housing quality to prevent asthma, or examine the need for recreational facilities for nearby youth. And community development data could

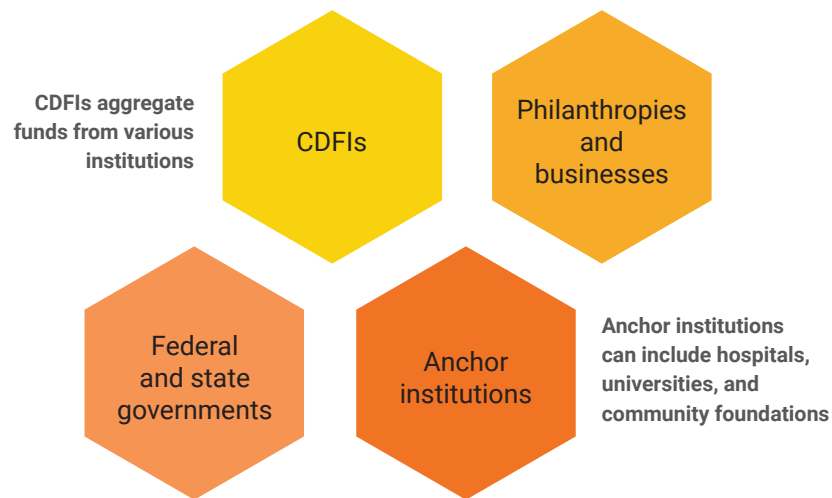
help health workers better understand the living conditions and other social determinants of health for the populations they serve that may be strongly influencing health outcomes. As some health and community development practitioners collaborate on community initiatives to reach determined goals, measurement (including data collection) techniques can be further integrated. For more information, see 4. Why and How Should the Health Impact of Community Development Initiatives be Measured?

**“Community developers, doctors, school districts, public health departments, consumers, and local businesses all need data for building and sustaining healthy communities. Finding out what problems people want to solve and what health information they need to help solve these problems will help us better understand how to design the infrastructure for collecting, sharing, and protecting data in ways that work best for communities across the country.”**

– David Ross, director of the Public Health Informatics Institute, and co-chair of the Robert Wood Johnson Foundation Data for Health Initiative

## How Have Joint Community Development–Health Initiatives Been Financed?

A number of strategies have been used to fund cross-sector community development-health initiatives, allowing the sectors to come together to leverage resources and bolster each other's efforts. The following section briefly describes several potential funding opportunities that could support health-promoting community development projects:



**CDFIs** are often vital in financing community development efforts with health implications. As funding intermediaries, CDFIs frequently aggregate funds from institutions such as banks, non-bank financial institutions, the federal and local government, religious organizations, foundations, businesses, non-financial corporations, and from individuals to strategically finance neighborhood improvement projects. CDFIs are increasingly investing in early childhood development programs, schools, grocery stores, transit-oriented development, and community health clinics.

150,151,152

- ▶ **Philanthropies and businesses** have also played a role in funding community development-health initiatives. Prominent philanthropies including the Robert Wood Johnson Foundation, The California Endowment, The Kresge Foundation, Annie E. Casey Foundation, and the W.K. Kellogg Foundation, among others, are funding integrated efforts to improve the social, economic, and health outcomes of low-income communities. Socially minded businesses have also demonstrated interest in investing in these efforts.
- ▶ **“Anchor institutions”**<sup>153</sup> are nonprofit, often permanent institutions within communities—such as universities, hospitals, and community foundations—that contribute greatly to community and economic development.

- ▶ **The federal government and state governments** have developed financing initiatives to encourage cross-sector collaboration in efforts to revitalize communities. Through interagency grant programs, the federal government is creating opportunities for cross-sector collaboration in efforts to enhance the health and well-being of communities. Through various initiatives, agencies such as HUD, the U.S. Department of Agriculture (USDA), the Office of Health and Human Service (HHS), and the Centers for Disease Control and Prevention (CDC), and the Department of Transportation (DOT) have been brought together to work on joint initiatives. In addition, initiatives by state and local governments, as well as financing agreements between government and a private investor (such as PFS) may help the health sector to pay for the health impact of community development.



Construction of a transit facility. Flickr: US DOT

## Philanthropies and Businesses Fund Health-Promoting Community Development

- ▶ The Conservation Law Foundation, the Massachusetts Housing Investment Corporation, and the State's Executive Office of Housing and Economic Development support moderately priced and market-rate housing, local job creation, commercial development, and healthy, walkable, mixed-use neighborhoods in a variety of transit-oriented development settings and align investments in TOD. The Healthy Neighborhoods Equity Fund will invest in real estate projects that will be evaluated for the impact on community, environmental, and health concerns, and will catalyze further investment by private investors by providing attractive risk-adjusted returns.<sup>154</sup>
- ▶ The FreshWorks Fund is a public-private partnership loan fund with the goal of developing supermarkets and other fresh food retailers in underserved communities throughout California. It was established in 2011 with support from charitable organizations such as The California Endowment, alongside CDFIs, banks, and private investors. An evaluation is underway to examine the progress of this initiative.<sup>155</sup>
- ▶ The ReFresh Project in New Orleans was created to improve access to fresh foods through redeveloping Broad Street commercial corridor, bringing in a grocery store and housing local organizations dedicated to improving health and encouraging healthy eating. The project was financed through a combination of local and federal public and private sector resources, including New Markets Tax Credits, and lending from Goldman Sachs, the Low Income Investment Fund, and Chase Bank, the New Orleans Redevelopment Authority, the City of New Orleans, and Hope Enterprise Corporations Fresh Food Retail Initiative, Foundation for Louisiana, Newman's Own Foundation, and La Raza. Today, a network of community partners called the ReFresh NOLA Coalition, which include on-site and community partners, work together to promote health and economic development in the neighborhood through community programs. The ReFresh Project's on-site tenant partners include Liberty's Kitchen, a culinary work readiness and leadership program for at-risk youth, The Goldring Center for Culinary Medicine at Tulane University, FirstLine Schools' central offices, Boystown Center for Children and Families, the offices of Broad Community Connections and Crescent City Community Land Trust, an on-site teaching farm in partnership with SPROUT NOLA, Harambee Gardens of New Orleans, and Faubourg Farms. The coalition members share lessons learned and best practices, and utilize a data monitoring system to track and evaluate the collaborative project's aims to promote healthy eating within the community.
- ▶ The Healthy Futures Fund is a \$100 million collaboration between LISC, The Kresge Foundation, and Morgan Stanley. The project finances affordable housing with Low Income Housing Tax Credits and supports community health centers with New Markets Tax Credits. In practice, that can take a variety of forms, from housing and health centers on the same campus, to a new health center that extends services to an existing affordable housing development across town, to a new low-income housing project that includes space and programming for health screening, exercise programs and/or nutrition counseling.<sup>156</sup>



## Anchor Institutions: Universities, Hospital Systems, and Community Foundations Invest in Healthier Places

### Universities

Universities can promote community economic development by supporting local vendors, hiring a greater percentage of their workforce locally, providing workforce training, fostering the development of new businesses and social enterprises, acting as an advisor or network builder, supporting real estate development to promote local retail, employer-assisted housing, and community land trusts, and using pension and endowment funds to invest in local job creation strategies and provide capital for community-based nonprofits, entrepreneurs, and employee-owned firms.<sup>157</sup>

### University Drives Economic Development

The University of Pennsylvania (Penn) has undertaken a series of community revitalization efforts, such as the West Philadelphia Initiatives (WPI) effort, in conjunction with the growth of Penn's campus.<sup>158</sup> WPI was a multi-pronged effort, implemented in 1997 to create a mixed-use, racially and economically diverse, and commercially vibrant area for current and campus affiliated residents. While the initiative ignited community fears of gentrification and unwanted campus expansion, WPI focused on supporting local and minority businesses and service providers in procurement and construction, and invested in public education through building and funding a new neighborhood K-8 school. In addition, beginning in 1986, Penn's Local Community Business initiative has worked with West and Southwest Philadelphia based suppliers to provide products and services to the university and has since invested over \$847 million in local procurement.<sup>159</sup>

### Hospitals

Hospitals can advance health-promoting community development through partnering with local institutions and financing and developing strategies to improve the social and economic well-being of surrounding communities. Targeted investments in neighborhoods can be included in nonprofit hospital systems' "community benefit" efforts, as mandated by the ACA. Based on Community Health Needs Assessment findings, these investments can include efforts to ensure adequate nutrition and address the social, behavioral, and environmental factors that influence community health.<sup>160</sup>

### Hospital Addresses Neighborhood Conditions

The Backyard Initiative<sup>161</sup> in Minneapolis is a partnership between Allina Health (a large, multi-site health-care organization), Cultural Wellness Center, and the residents of South Minneapolis. The initiative emerged from the understanding that, despite living in proximity to Allina Health's high-quality medical facilities, residents in surrounding areas experience poor health outcomes. Since 2009, Allina Health has invested nearly \$3.5 million into the initiative to facilitate active engagement and build connections within the community to address the root causes of illness through establishing 12 Citizen Health Action Teams that promote social connectedness and improve health literacy.

## Anchor Institutions: Universities, Hospital Systems, and Community Foundations Invest in Healthier Places (continued)

### Community Foundations

Community foundations, whose endowments total \$65 billion, can be a powerful force for community economic development. In recent years, many community foundations have employed a range of innovative and collaborative strategies to revitalize distressed neighborhoods. With their financial resources, they can deploy grants to local institutions, engage in local impact investing (such as by working with CDFIs), influence public policy, convene a range of stakeholders, engage donors in supporting select initiatives, and pilot innovative initiatives.<sup>162</sup> Today, 760 place-based community foundations serve communities across the nation.<sup>163</sup>

### Community Foundations Convene Stakeholders

The Cleveland Foundation, with total assets of over \$2 billion, has been instrumental to wealth-building in disadvantaged communities in the greater Cleveland region. For instance, in 2005, it brought together several hospitals and universities to focus on inclusive economic development in the University Circle area. Called the Greater University Circle Initiative, this partnership catalyzed hundreds of millions of dollars in new investments and brought hundreds of new jobs to residents of low-income neighborhoods. It created several community institutions, such as the Greater Circle Living employer-assisted housing program, NewBridge workforce training center, and the Neighborhood Connections community organizing project. The Cleveland Foundation also created the Evergreen Cooperatives, employee-owned, local, sustainable, for-profit companies that pay livable wages and hire locally.<sup>164</sup>



The Chicago Transit Authority's Red Line South Reconstruction Project has introduced its "Building Tomorrow's Workforce" program to create a pool of individuals from which it may select employees in the future or who may use the experience to take elsewhere. Flickr: cta web

## The Federal Government Promotes Cross-Sector Collaboration Through Interagency Grants

The Partnership for Sustainable Communities is an interagency program between HUD, DOT, and the U.S. Environmental Protection Agency (EPA). It works to coordinate federal housing, transportation, water, and other infrastructure investments to make neighborhoods more prosperous, allow people to live closer to jobs, save households time and money, and reduce pollution. The partnership agencies incorporate six principles of livability into federal funding programs, policies, and future legislative proposals.

- ▶ Federal funding from the Partnership for Sustainable Communities initiative<sup>165</sup> enabled Minneapolis-St. Paul to develop the Central Corridor Light Rail, known today as the Metro Green Line, as a part of a greater effort to invest in transit-oriented development. Transit-oriented development is a form of community development that relies on a mixture of housing, retail, and other services integrated into a walkable neighborhood and located within a half-mile of quality public transportation. The new light rail line will provide residents more transportation options, develop a walkable and bike-able corridor, promote affordable and mixed income housing, create jobs, and support economic development. Through intensive outreach efforts, more than 25,000 people—alongside many community institutions and community development funders and advisors—have been engaged in public meetings regarding the transit line since 2006. As a result of this engagement process, three additional light rail stops in low-income neighborhoods were added to the light rail line’s plan to ensure equitable development.<sup>166</sup>

The Healthy Food Financing Initiative is an interagency initiative between USDA, the U.S. Treasury, and HHS. It supports projects that increase access to healthy, affordable food in communities that lack these resources.<sup>167</sup>

- ▶ In Southern Arizona, the Healthy Food Financing Initiative (HFFI) is supporting an effort to expand access to healthy meals and spur local economic development for the Tohono O’odham tribe.<sup>168</sup> With over 25,000 residents but only a single supermarket, the community has been distinguished as a “food desert”—an area with limited access to healthy and affordable foods. Tohono O’odham Community Action is leading the effort and will be using the HFFI funding to create Desert Rain Food Services, a local food service “social enterprise” that will sell affordable, locally grown, healthy, and culturally appropriate meals for school and institutional customers in the community. This initiative will also increase the amount of fresh produce in the school meals local children receive through the free and reduced-price food program.

## Additional Financing Model Examples

### State of New York Invests in Housing as Health Care

In fiscal year 2012–2013, New York allocated \$75 million from the state’s share of Medicaid Redesign funding for supportive housing for 4,500 New Yorkers, in the form of both newly constructed supportive housing units and subsidies and service support for use in existing units. These decisions were motivated by studies that show that supportive housing can stabilize high-risk, high-cost individuals and prevent poor health and social outcomes that result in high use of emergency medical and social services. For certain populations, studies have found that costs of supportive housing can be entirely offset by medical and social savings. In fiscal year 2013-2014, New York’s Medicaid budget included \$86 million for supportive housing for high-need, high-cost Medicaid recipients. While there are still limitations to the state’s use of Medicaid funding for housing, New York’s actions show the potential of addressing health and social problems with preventive, cost-effective community development interventions.<sup>169</sup>

### “Pay for Success” Financing Initiatives

“Pay for Success” is a term for performance-based contracting where the government only pays social service providers if results are achieved rather than providing fee-for-service or cost-reimbursement payments. This strategy appears to be a promising way for the health sector to invest in community development projects that address social determinants of health. The approach relies on a private investor who funds a community development intervention likely to have health impact while bearing the risk that the intervention may fail to achieve its intended health outcomes. If the intervention succeeds, the investor is repaid in full by a predetermined payer, such as a public

health department or hospital system, and receives an additional return on the investment as a reward for taking on the risk; these payments to the investor, however, tend to be less than what the health-sector payer would have had to pay in the long run without the intervention in place). Pay for Success pilot projects are being developed to reduce asthma-related emergencies among children, poor birth outcomes, and the progression of pre-diabetes to diabetes, among other objectives.

- ▶ President Obama included a \$300 million Pay for Success Incentive Fund in the 2014 fiscal year budget, along with \$185 million to support nine new pilots in four agencies. This funding is expected to be a catalyst for Pay for Success efforts on a state level.
- ▶ The Cooperation for National and Community Service’s Social Innovation Fund is working with the Green & Healthy Homes Initiative to construct a nationwide competition among health care organizations and nonprofit service providers that are constructing asthma-related Pay for Success projects. In 2015, the Green & Healthy Homes Initiative will conduct a national competition to select healthcare organizations and nonprofit service providers that will develop asthma-related Pay for Success projects.
- ▶ Roca, Incorporated, helps gang members and other high-risk youth with histories of incarceration stay out of prison and redirect their lives. In 2013, 89 percent of the high-risk youth in Roca’s program for parolees and ex-convicts had no new arrests, 95 percent had no new technical violations, and 69 percent remained employed. The success of this program led the State of Massachusetts to offer Roca a \$27 million social impact bond to keep approximately 924 young men with a history of incarceration out of prison in Boston, Springfield, and surrounding areas.

# 3

## What Are the Barriers to Working at the Intersection of Community Development and Health and How Can They Be Overcome?

Much of the promising work at the intersection of community development and health involves an organization from one sector incorporating knowledge and some objectives of the other sector into its work. Organizations from both sectors are making this kind of connection. For example, community development organizations are addressing the health implications of their projects, and medical care and public health organizations are tackling the neighborhood conditions that shape health. However, there are also projects that take a step further and bring practitioners from both sectors together to work collaboratively and reinforce each other's efforts. Through uniting the diverse resources, strengths, and perspectives of both fields, these cross-sector projects can have a powerful impact. This section discusses both the challenges and opportunities of working across sectors to achieve mutual understanding, and where feasible, work collaboratively.

The following section builds on findings from "Collaboration to Build Healthier Communities," a report on results from a nationwide survey of collaborative efforts between community development and health organizations commissioned for the Robert Wood Johnson Foundation Commission to Build a Healthier America and prepared by Wilder Research and the Federal Reserve Bank of Minneapolis.<sup>170,171</sup>

### Barriers to Mutual Understanding and Collaboration

**On a local and national level, a lack of resources, misalignment of resources, and lack of shared vision, skilled leadership, mutual understanding, and trust all are significant barriers to collaboration.**

The two sectors often have different strategies for implementing and evaluating projects, different approaches to assessing needs, and different outcome measures for which they are held accountable by their funders.<sup>172</sup>

“...if community development expenditures from the Department of Housing and Urban Development result in costs avoided by the Department of Health and Human Services, it may be challenging for congressional authorizers and appropriators to recognize and act on such savings.”

- Mariana Arcaya and Xavier de Souza Briggs, “Despite Obstacles, Considerable Potential Exists For More Robust Federal Policy On Community Development And Health”

At times, they literally speak different languages. And despite their shared commitment to improving lives in low-income neighborhoods, many examples illustrate how bringing together fields with differing terminologies and approaches can be challenging in practice.

Shared financial incentives in cross-sector work are crucial, especially when benefits are one-sided or will only be revealed long-term. Government agencies on national and local levels often facilitate cross-sector collaborations by providing leadership and financial resources. However, if incentives for both sectors are not aligned, the project may face the “wrong pocket problem,” an issue that occurs when costs that come out of one organization’s “pocket” result in savings that accrue primarily or largely to another organization or sector. As described by Mariana Arcaya and Xavier de Souza Briggs, for “interagency initiatives on a federal level, if community development expenditures from the Office of Housing and Urban Development result in costs avoided by the Department of Health and Human Services, it may be challenging for congressional authorizers and appropriators to recognize and act on such savings.”<sup>173,174</sup> In addition, different funding sources often create different timelines and requirements for health and community development practitioners, making it more difficult to work together.<sup>175</sup> Both issues can impede cross-sector partnerships.

For the past several years, organizations in both sectors have been working to bridge the divide by expediting the exchange of knowledge, ideas, and strategies for working together. Organizations have also developed models to help community development practitioners, health practitioners, and practitioners from other fields work together to facilitate anti-poverty projects in their communities.

## Overcoming Barriers to Cross-Sector Collaboration

In 2010, the Federal Reserve Bank—a leading entity in community development finance—and the Robert Wood Johnson Foundation—the nation’s largest philanthropy focused on health—partnered to create the Healthy Communities Initiative.<sup>176</sup> The Healthy Communities Initiative encourages both sectors to work together to build mutual understanding by administering grants and sponsoring organizations to establish networks across the nation. Since the Healthy Communities Initiative was established, nearly two dozen “Building Healthy Communities” conferences have taken place across the United States to facilitate the exchange of ideas and opportunities for collaboration. In addition, the Federal Reserve Bank and the Low Income Investment Fund published *Investing What Works for America’s Communities*,<sup>177</sup> a compilation of essays focused on broadening the reach of community revitalization to sectors such as health and education. In 2014, *What Counts: Harnessing Data for America’s Communities*,<sup>178</sup> which builds on the themes introduced in *Investing in What Works for America’s Communities*, was released to support measurement of the impact—including the health impact—of community development efforts. In 2014, the Build Healthy Places Network was launched to create common ground and catalyze collaboration across the health and community development sectors. It disseminates capacity-building tools and resources that highlight the health-related value of community development work and encourages improved measurement of the health-related impact of community development efforts.<sup>179</sup> The Network also connects decision-makers and practitioners across sectors, and maintains a clearinghouse that gathers, synthesizes and summarizes research pointing to best practices and models for work at the intersection of community development and health.

The “Collaboration to Build Healthier Communities” report<sup>180</sup> (mentioned above) has identified several elements that are necessary to plan and execute successful cross-sector initiatives. Vision, leadership, and mutual understanding are essential, and examples in the report<sup>181</sup> show how strong leadership and community engagement techniques are key in neighborhood revitalization projects. Many strategies emphasize working with a range of stakeholders to identify needs and understand community interests before designing solutions.

“Collective impact” is an example of an approach that may be used to facilitate and integrate health and community development. Collective impact “is the commitment of a group of actors from different sectors [community development and health] to a common agenda for solving a complex social problem.”<sup>182</sup> The collective impact approach provides a formal structure for joint efforts, providing a model for centralized infrastructure and designated staff. The collective impact process also creates a platform for a common agenda, a shared measurement plan, continuous communication, and mutually reinforcing activities among all participants.<sup>183</sup>

## Collective Impact for Community Health and Development Examples

### Shape Up Somerville

Shape Up Somerville is a 15-year-old collective impact strategy supported by the government of Somerville, Mass., that brings together diverse organizations with the shared goal of building health equity. The initiative emerged from a research program to reduce early childhood obesity through environmental changes, and was adopted by the City of Somerville to increase health, health equity, and social justice within the community. As the integrator organization, Shape Up Somerville brings community partners together around a common agenda, shared measurement systems, mutually enforcing activities, and continuous communication. Community partners include other segments of the local government, businesses, schools, nonprofits, medical groups, grassroots organizations, and individuals. The program focuses on the needs of socially disadvantaged populations and has led multiple initiatives to increase access to healthy food and physical activity opportunities, including affordable mobile farmer's markets, school meal improvements, and city design projects to encourage walking and biking.<sup>184</sup>

### Partners in Progress

The Partners in Progress project was created by the Citi Foundation and LIIF to transform how community developers serve low-income communities. The program is based on the community quarterback model,<sup>185</sup> which uses the collective impact approach. Through Partners in Progress, multi-sector anti-poverty efforts are led by a trusted local organization called the "community quarterback." This organization aligns objectives, resources, and efforts among stakeholders to create strong, resilient neighborhoods and paths to economic opportunity. Since 2014, the Citi Foundation has invested more than \$5 million in a learning network of 14 grantees in 10 communities across the country. These grantees are developing or expanding networks that connect efforts to improve places—through housing, transportation, and improving community safety—to opportunities for people—such as jobs, childhood development, educational opportunities, medical care, and other services. Under the community quarterback organization's leadership, coalitions of city leaders, local nonprofits, business and community residents work as a team toward mutually determined goals, such as improving public safety or academic performance among children. The community quarterback organizes funding sources to support the effort, tracks progress in achieving goals over time, facilitates changes to the strategy to improve performance, and holds all parties accountable.<sup>186</sup>



# 4

## Why and How Should the Health Impact of Community Development Project Be Measured?

While there are many promising examples that suggest that neighborhood revitalization projects—especially those that address multiple social determinants of health—can have a large impact on health, the health impact of community development projects is rarely rigorously evaluated. Additional research is needed to guide the design of projects and help decision makers understand which projects yield the greatest health outcomes, and under what circumstances. Researchers can also develop methodologies to assess the cost savings that accrue in other sectors (such as medical care) from investing in community development.<sup>187</sup>

A key factor in motivating and sustaining cross-sector collaboration is evidence of success. To incentivize cross-sector collaboration, there must be tangible benefits to both community development and health sectors. Measurement is therefore crucial. Without measurement, there is no systematic assessment of a community's needs, no accountability for the resources used, and no evidence that can be used to advocate for continued funding or replication of a program. Good measurement requires expertise, and professionals in the health sector—in universities, public health departments, and research firms—have the expertise needed to measure health and the health impact of different actions, including community development efforts.

**The following are key issues to keep in mind in measuring the impact of efforts linking community development and health:**

- ▶ **A detailed evaluation plan, including an appropriate comparison group, should be in place *before* initiating the effort.**

Organizations that do not have expertise in measurement or evaluation, including assessing health effects, should recruit someone who does have that expertise. Resources for evaluation must be part of a project's projected budget.

- ▶ **Efforts to assess the health impact of community development actions should focus on short-term and intermediate-term health outcomes that could realistically be affected during the time period for evaluating a community development effort.**

The health effects of many community development efforts may not be apparent for decades. For example, improving walkability aims to reduce risk for chronic diseases such as cardiovascular disease and diabetes, but particularly for young people, these outcomes will not be detected over the course of just a few years. Evaluators need to think through step-by-step processes likely to be set in motion by the proposed actions. At each stage along the way to the desired outcomes, they must identify short- and intermediate- term outcomes that will reflect the desired chain of events, even when the ultimate outcome cannot be detected. Logic models should be developed that trace each step in the hypothesized causal chain(s).

## Research to Inform Action: Examples

### Understanding How Redeveloped Public Housing Influences Health

Researchers at the University of California, Berkeley and the University of California, San Francisco utilized a quasi-experimental approach to understand the links between child health (use of acute services) and housing in San Francisco. They compared children ages 0-18 with public insurance who lived in public housing redeveloped by the HOPE VI program, non-redeveloped housing, and non-public housing in a census tract that also contained public housing. They found that children living in non-redeveloped public housing were 39 percent more likely to have one or more repeat visits within one year for acute health services, unrelated to the initial visit, than children in the redeveloped HOPE VI housing. This research supports the assertion that redeveloping public housing can result in lower health care costs and improve children's health.<sup>188</sup>

### The Haven Project: Translating Research Into Action

The Haven Project is an initiative by the New York Restoration Project that aims to renovate a network of open spaces in the socially and economically disadvantaged Mott Haven and Port Morris neighborhoods of the South Bronx, while simultaneously demonstrating measurable health and social outcomes resulting from an improved physical environment. HealthxDesign is leading the development of the impact framework and monitoring and evaluation plan, which is supported by a rapid literature review conducted by health researchers at Columbia University to ensure that evidence-based strategies are used to maximize the project's impact on health.<sup>189,190</sup>

- ▶ **Many existing data sources can be used to assess community development and community health needs and guide efforts to improve neighborhood conditions.**

For instance, tools such as Community Commons,<sup>191</sup> American FactFinder,<sup>192</sup> and PolicyMap<sup>193</sup> can be used understand the distribution of demographic, economic, and social characteristics within a defined area as small as a group of neighborhood blocks.

- ▶ **Consider participatory approaches to measurement that could simultaneously generate valuable data on both health and community development while also increasing community engagement.**

Recent papers by Fleming, Karasz, and Wyses,<sup>194</sup> Schuchter and Jutte,<sup>195</sup> and Trowbridge et al<sup>196</sup> also offer resources and approaches on measuring the health impact of community development efforts.



The Haven Project proposes design decisions based on research. For example, air quality in the South Bronx is better along the waterfront, where wind disperses pollutants harmful to human health. Therefore, the plan proposes a series of waterfront parks. Rendering by Civitas, Inc.

## Evaluating Efforts Linking Community Development and Health: Measurement Approaches, Tools, and Examples

- ▶ The Social Impact Calculator is a tool developed by the Low Income Investment Fund that can be used to measure (in financial terms), the economic, health, and social impacts of a community development intervention. The calculator can examine the impacts of five areas of community development, including affordable housing, quality childcare, education, community health clinics, and equitable transit-oriented development.<sup>197</sup>

Resource: Social Impact Calculator [www.liifund.org/calculator/](http://www.liifund.org/calculator/)

- ▶ The Community Health Needs Assessment Toolkit has been used by hospital organizations, public health agencies, and other stakeholders to assess community health needs. Under the ACA, all nonprofit hospitals must conduct a Community Health Needs Assessment (CHNA) and adopt an implementation plan once every three years. The CHNA can help an organization assess a community's needs and design appropriate interventions by examining population-wide indicators pertaining to demographic, social and economic resources, physical environments, clinical care, health behaviors, and health outcomes.<sup>198,199</sup>

Resource: CHNA Toolkit <http://assessment.communitycommons.org/chna/>

- ▶ Health Impact Assessment (HIA) is a general approach used to identify the health consequences of projects and policies traditionally considered to be outside the health sector domain. HIA is highly relevant to efforts that cross both the community development and health sectors because it can be used to evaluate

how equitably health impacts of community development are distributed across populations and communities and suggest ways to promote better health outcomes for disadvantaged communities when negative potential impacts are identified. Communities have used HIAs to understand the health implications of transportation, land use, housing, labor, energy and other proposals for the health of vulnerable populations.<sup>200,201</sup>

Resource: Health Impact Project [www.pewtrusts.org/en/projects/health-impact-project](http://www.pewtrusts.org/en/projects/health-impact-project)

- ▶ The Success Measures Data System is an evaluation tool developed by NeighborWorks America, a national consortium of local CDCs focused on healthy and affordable housing, to help build evaluation capacity. It can be used by funders and nonprofits to collect and analyze data and communicate results. The Success Measures Data System consists of over 250 data collection tools that can be customized to measure a wide range of contextual, perceived, and observable changes in individuals and communities. Recently, in response to the growing interest in the intersection of community development and health, the organization announced that it will be piloting a set of data collection tools to evaluate the health-related outcomes of community development projects. It will incorporate dimensions of housing and community development programs that address the social context of interventions, changes in the built environment, healthy housing, access to services, and organizational relationship effectiveness.<sup>202,203</sup>

## Evaluating Efforts Linking Community Development and Health: Measurement Approaches, Tools, and Examples (continued)

- ▶ The Outcomes Initiative was recently established by Stewards for Affordable Housing for the Future, with support from The Kresge Foundation, as a strategy to systematically gather data across the housing portfolios of its eleven nonprofit affordable housing member organizations. Through this process, the Outcomes Initiative aims to develop baseline data on the impact of affordable, stable housing on residents' well-being and health. Outcomes data will be collected in five areas: health and wellness; work, income, and assets; housing stability; children, youth, and education; and community engagement. The initiative will develop baseline data on service-enriched housing (and corresponding definitions), identify the most effective program strategies for improving the lives of residents, develop measures that matter to investors and foundations across sectors, and accumulate evidence to influence public policy around service-enriched housing.<sup>204</sup>
- ▶ The San Francisco Indicator Project is an online framework and database that examines how San Francisco neighborhoods perform across many facets of community well-being. It has been used since 2007 to guide health-informed decision making across city agencies. With indicators that capture eight dimensions of health—including environment, transportation, community cohesion, public realm (e.g. access to public recreational spaces, cultural amenities, and essential goods and services), education, housing, economy, and health systems—the San Francisco Indicator Project offers a wealth of information that can be used to guide and monitor development in San Francisco.<sup>205</sup>

### Health Impact Assessments for Policy Change

ISAI AH is a nonprofit organization of 100 congregations in Minneapolis and St. Paul that focuses on developing grassroots leadership to increase racial and economic equity in Minnesota. Through an HIA process, ISAI AH was able to advocate for policies that promote school integration and educational equity in Minnesota. With support from the HIA findings, funding was reauthorized for the Minnesota Achievement and Integration Program to promote school integration as part of the 2013 state budget package.<sup>206</sup>

### Shared Indicators Advance Initiative for Children's Well-Being

The Magnolia Place Project is a partnership between The Magnolia Community Initiative and The UCLA Center for Healthier Children, Families and Communities. The project aims to galvanize a community to support, nurture and educate 35,000 children living in a low-income area of Los Angeles. The Magnolia Place Project developed shared indicators across the different organizations within the community. Through integrating and managing data between organizations, the initiative is a promising model for monitoring and measuring the effect of a collaborative community development initiative on health and other desired outcomes.<sup>207</sup>

## Conclusion

Decades of research in both the health sciences and policy arenas support the assertion that where we live shapes our opportunities, including our health, throughout life. A movement is building across sectors to ensure that all neighborhoods promote health, safety, community-building, education, and economic opportunities; all of these are intertwined. In less than a decade, organizations across the nation have paved the way for future joint efforts, creating new funding opportunities and organizational models for cross-sector collaboration. Through fostering strong community leadership and engagement, identifying shared goals, building on complementary strengths and resources, and measuring impact, joint efforts between community development, health, and other sectors show great promise for improving health and quality of life. Building on this momentum, community development and health practitioners can take action today to forge connections and adopt the comprehensive approaches necessary to address the challenging, complex, and interconnected issues of reducing poverty and improving health for all.

**“I envision a time in the near future when our fields [community development and health] and the people who work in them do not need to make a special effort to develop partnerships because they will be working side by side in communities, states, and nationally, with common aims, combining our best assets and skills to improve the lives of all Americans.”**

– Robert Wood Johnson Foundation President and CEO Risa Lavizzo-Mourey, “Investing in What Works for America’s Communities”

# Appendix

## Examples of Specific Efforts Linking Community Development and Health

**The following examples—which include the examples discussed earlier in this brief—illustrate a wide range of ways in which the community development and health fields are coming together to develop initiatives that meet the unique needs of communities. The information provided was obtained primarily from the organizations’ websites.**

**The Backyard Initiative** in Minneapolis is a partnership between Allina Health (a large, multi-site hospital system), Cultural Wellness Center, and the residents of South Minneapolis. The initiative emerged from the understanding that, despite living in proximity to Allina Health’s high-quality medical facilities, residents in surrounding areas experience poor health outcomes. Since 2009, Allina Health has invested nearly \$3.5 million into the initiative to facilitate active engagement and build connections within the community to address the root causes of illness. The initiative supports 12 Citizen Health Action Teams that work to promote social connectedness and improve health literacy.<sup>208,209</sup>

**The Bedford Stuyvesant Restoration Corporation** is a long-standing community development organization that partners with residents and businesses to improve the quality of life in New York City’s Central Brooklyn neighborhoods. By fostering economic self-sufficiency, enhancing family stability and growth, and promoting the arts and culture, the organization aims to transform the neighborhood into a safe, vibrant place to live, work, and visit. Its work includes developing Restoration Plaza as a welcoming commercial and public space with a full-service grocery store, offering mixed-income housing, conserving energy through weatherization services, supporting youth and workforce development programs, building assets through financial literacy and planning services, and hosting arts and cultural events.<sup>210</sup>

**The Best Babies Zone Initiative (BBZ)** is a collaborative effort to work across the health, economic, education, and community sectors to reduce infant mortality and racial disparities in a small neighborhood zone. The initiative is in place in three cities: Cincinnati; New Orleans; and Oakland, Calif. Funded by the W.K. Kellogg Foundation and carried out by national health organizations and university researchers, BBZ employs three primary strategies to produce measurable outcomes. First, it selects a small geographic area in high need of aligned resources to produce and measure impact. Second, it forms a collective impact partnership between four sectors. Third, it strives to create a social movement within the area to spark action and motivate change that improves birth outcomes in the zone.<sup>211,212</sup>

**The Bon Secours Health System** in Richmond, Va., is one of the area’s largest employers. Striving to address the social determinants of health, the hospital system partnered with the City of Richmond and the Richmond Redevelopment and Housing Authority to host a series of public meetings to develop a shared vision of a safer, healthier, and more walkable neighborhood. This planning process led to a new housing and wellness center and improvements to the area’s sidewalks and landscaping. In addition, to foster economic development in the area, the Bon Secours Health System also partnered with the Virginia Local Initiatives Support Corporation to create the Supporting East End Entrepreneur Development Program. Developed in 2011, the program funds and mentors businesses and offers

up to \$10,000 in grant money to people who are looking to start or expand a business.<sup>213,214</sup>

In 2008, **The Brandywine Health Foundation** in Coatesville, Pa., brought together a wide range of health and community development stakeholders to develop a new health and housing facility. Offering a wide range of health services, the facility's strategic planning process also led to the establishment of youth programs to expand career and post-secondary educational opportunities. The Coatesville Youth Initiative works with parents, coordinates out-of-school time programs for youth, and educates community leaders and residents about youth issues. It also sustains a Summer ServiceCorps program to provide work and leadership experience to young people who come from mostly low-income backgrounds.<sup>215</sup>

The California Endowment's **Building Healthy Communities** initiative is a 10-year, \$1 billion program to support cross-sector, community-based action in 14 select cities across the state that struggle with poor health. Building Healthy Communities invests in civic engagement and advocacy efforts (to increase the power of residents), youth leadership and development, collaborative efficacy (to bring sectors together around the social determinants of health), and communication strategies that increase support for prevention and health equity. Through these efforts, the program also encourages private sector investments to improve resources and services within the neighborhoods. The focus of the program in each community is based on the outcomes of the planning process, which involves input from residents and organizations in the community and identifies issues for the community coalition to focus on. The initiative promotes lasting changes in policy by building civic capacity and leadership that is critical for shifting power dynamics and sustaining a healthy and prosperous community.<sup>216,217</sup>

**The BUILD Health Challenge** brings together The Advisory Board Company, the de Beaumont Foundation, The Kresge Foundation, and the Robert Wood Johnson Foundation: three nonprofit foundations and a publicly traded firm. Together, they hope to inspire communities

to take innovative and collaborative approaches to improving population health by directly addressing the social determinants of health. These awards will recognize and support integrative health interventions built on partnerships forged between health systems, community-based organizations and leaders, and local health departments. Projects will take upstream approaches to improve community health and promote health equity. In addition to funding, the selected communities will gain access to a comprehensive package of technical assistance and support services that will guide them in their planning and implementation efforts. The program was launched in late 2014.<sup>218</sup>

**Communities for Healthy Food** is an approach to expand access to healthy and affordable food in four of New York City's economically challenged neighborhoods. Funded by the Laurie M. Tisch Illumination Fund and led by the Local Initiatives Support Corporation, the program aims to integrate health into the work of a community development intermediary and partner community development housing organizations. One example of Communities for Healthy Food program in action is its support of the Cypress Hills Community Development Corporation (CHCDC). A well-established community development organization that offers affordable rental housing, CHCDC has developed multiple storefront commercial units and offers a variety of services in the diverse Cypress Hills neighborhood, where one-third of households live below the poverty line. The Cypress Hills Community Development Corporation is now incorporating health into much of its work, with help from the Communities for Healthy Food program. It has hired youth to work at its Youthmarket farmers' market and pays residents a stipend to host healthy cooking demonstrations all around the community, in places like the senior housing center and the child care center. CHCDC also supports a growing community garden project that is funded by the United States Department of Food and Agriculture's Community Food Projects initiative. Finally, in developing the Pitkin-Berriman Housing Development, a mixed-income and transit-oriented housing unit with retail space, CHCDC is helping to bring in a supermarket as an anchor tenant for the community. The store will be participating in New York



City's Food Retail Expansion to Support Health program, which offers tax incentives for stores that meet a set of criteria for offering nutritious food.<sup>219</sup>

**The Boston Children's Hospital's Community Asthma Initiative** illustrates how a health care organization can help to address the social determinants of health in disadvantaged neighborhoods. It provides intensive support from nurses and community health workers to improve the health of children with moderate to severe asthma in targeted neighborhoods in Boston. Through establishing a relationship with participating families, the initiative offers a home assessment, supplies such as special vacuum cleaners to reduce asthma triggers in the home, and asthma management and medication education. Involvement in the program has led to an 80 percent reduction in the percent of patients with any asthma-related hospital admissions, 41 percent reduction in the percent of patients with any missed school days, and a 46 percent reduction in the percent of parents/caregivers with any missed workdays. Its success has also spurred the formation of policy organizations, such as the Boston Healthy Homes and Schools Collaborative and the Massachusetts Asthma Advocacy Partnership. These organizations work to increase funding for such programs and support asthma preventive services within the community. Recently, the Boston Children's Hospital also provided a full-time health worker over seven years to support health education and health and social service referrals for residents of nearby affordable housing units managed by Fenway Community Development Corporation.<sup>220,221</sup>

**The Dudley Street Neighborhood Initiative** was established in 1985 in the Dudley Street area, a predominantly African American neighborhood in Boston. Struggling with disinvestment, arson, vacancy, and trash dumping, community meetings helped establish resident control over the neighborhood. The organization now includes over 3,000 resident, business, nonprofit and religious institution members committed to revitalizing the area. Collaborating with a range of community, government, and financial stakeholders to promote its goals of sustainable

economic development, community empowerment, and youth opportunities, the organization works to implement resident-driven plans. Initiatives are also in place to plan cultural and arts events in the neighborhood, as well as ensure neighborhood safety and beautification through neighborhood watch groups and clean-ups. To promote healthy and safe living, its Dudley Real Food Hub initiative promotes access to healthy, locally-grown food. The organization also led to the formation of Dudley Neighbors, Incorporated—a Community Land Trust—which helps to preserve affordable housing in the area.<sup>222,223</sup>

**Elm Playlot** is a playground in the Iron Triangle neighborhood of Richmond, Calif., an area that has struggled with high rates of violence and poverty for years. The playground was trash-filled and vandalized until the Pogo Parks nonprofit organization spearheaded work to revitalize the park. It began a planning process that included more than 500 nearby residents. By the time of the project's completion, the play lot development had brought over \$500,000 worth of jobs into the community to keep the park safe and maintained. In addition, the organization has worked to address issues of healthy food access by working with the city to purchase a nearby home in foreclosure, and use it to develop a kitchen and snack bar that offers fresh produce and healthy foods.<sup>224</sup>

**The FreshWorks Fund** is a public-private partnership loan fund with the goal of developing supermarkets and other fresh food retailers in underserved communities throughout California. It was established in 2011 with support from charitable organizations such as The California Endowment, alongside CDFIs, banks, and private investors. An evaluation is underway to examine the progress of this initiative.<sup>225</sup>

**The Healthy Environments Collaborative** was formed in 2006 between the North Carolina Department of Health and Human Services and the state Departments of Transportation, Environment and Natural Resources, and Commerce. The Healthy Environments Collaborative (HEC) was created to work at the intersection of public health, the natural environment,

economic prosperity, and the built environment. HEC has helped establish mutual understanding and collaboration in data, comprehensive planning, and research among agencies. A key focus of HEC has been to increase physical activity, and has received funding from Communities Putting Prevention to Work, the American Reinvestment and Recovery Act, and the Community Transformation Grant to work towards this goal. With guidance from public health leaders at the University of North Carolina, Chapel Hill, HEC analyzed priority activities for improving physical activity levels in the state and identified areas where the state agencies could help remove barriers in creating physical activity environments for local governments. Recently, HEC has endeavored to create the first comprehensive statewide bicycle and walking plan, anywhere in the nation.<sup>226</sup>

**Healthy Foods Here** in Seattle is a program that united community development practitioners from the Seattle Office of Economic Development, the Rainier Valley Community Development Fund, Jump Start, and Community Capital with health-oriented practitioners from the Public Health department of Seattle & King County, the Urban Food Link consulting group, and Charlie's Produce. The program's goal was to promote healthy food retail to stores in neighborhoods in need through technical assistance and capacity building. This cross-sector effort has been successful in providing 61 stores in the area with technical assistance to help them improve their food handling methods and accept WIC benefits. Additionally, eight stores secured loans to help them expand their businesses, and three-quarters of the participating stores adopted new health products and increased the variety, affordability, and freshness of produce offerings.<sup>227</sup>

**The Healthy Neighborhoods Equity Fund** was created in collaboration between The Conservation Law Foundation, the Massachusetts Housing Investment Corporation, and the State's Executive Office of Housing and Economic Development to support moderately priced and market-rate housing, local job creation, commercial development, and healthy, walkable, mixed-use neighborhoods in a variety of transit-oriented development (TOD) settings and align investments

in TOD. The Healthy Neighborhoods Equity Fund will invest in real-estate projects that will be evaluated for the impact on community, environmental, and health concerns, and will catalyze further investment by private investors by providing attractive risk-adjusted returns.<sup>228</sup>

Urban Institute's **Housing Opportunity and Services Together Demonstration** project was launched in 2010 to test strategies to use public and mixed-income housing to provide integrated services to improve health, education, and employment for both low-income adults and children. Through several sites across the U.S., the program will be evaluated to determine its impact on residents and the challenges and successes of the programs as they evolve over time.<sup>229</sup>

**ISAIAH** is a nonprofit organization of 100 congregations in Minneapolis and St. Paul that focuses on racial and economic equity in Minnesota and focuses on leadership development and grassroots leadership. Of Minnesotans age 18 and under, one in three is a person of color. In 2013, 56 percent of African Americans and 59 percent of Latino students graduated from high school in 2013, compared to 85 percent of white students. Through the Health Impact Assessment process, ISAIAH was able to build a narrative to advocate for policies that promote school integration and educational equity in Minnesota. Due in part to the Health Impact Assessment, funding was reauthorized for the Minnesota Achievement and Integration Program as part of the 2013 state budget package.<sup>230</sup>

**The Ivanhoe Neighborhood Council** of St. Louis was formed in the late 1990s when a family in the distressed Ivanhoe neighborhood held a prayer vigil for the closure of six drug houses on their block. The neighborhood was characterized by vacant homes, drug houses, crime, and trash. Through this initial gathering, concerned residents worked together to clean up the neighborhood and prevent crime. Today, the community has committees dedicated to community priorities of beautification, safety, economic development and housing, families, youth and education. The community organization has also recently become a United Way agency and has formalized programs to offer essential

services to the neighborhood. For example, the Ivanhoe Neighborhood Council offers a youth program, called Positive Alternatives for Youth, and college preparedness classes to help local adolescents succeed in school. The organization also encourages healthy living through a farmers' market and community garden.<sup>231,232</sup>

**Made in Durham** is a community program in Durham, N.C., developed by MDC, a long-standing social services organization. Made in Durham strives to create a strong education-to-career pathway for youth and young adults in the Durham community. Through a growing awareness of growing social inequality and the social determinants of health (such as educational attainment), the program has gained generous funding for its services from the Duke University Health System. Additional funders include education, government, and prominent businesses, and other private sector organizations.<sup>233</sup>

**The Magnolia Place Project** is a partnership between The Magnolia Community Initiative and The UCLA Center for Healthier Children, Families and Communities. The project aims to galvanize a community to support, nurture and educate 35,000 children living in a low-income area of Los Angeles. The Magnolia Place Project developed shared indicators across the different organizations within the community. Through integrating and managing data between organizations, the initiative is a promising model for monitoring and measuring the effect of a collaborative community development initiative on health and other desired outcomes.<sup>234</sup>

**The National Complete Streets Coalition** consists of over 650 agencies across the nation that adopted Complete Streets policies to ensure that streets and transportation systems within communities are designed to ensure safety and convenience for all users. Policies are tailored to the needs of the neighborhood, and include renovations such as sidewalks, landscaping, improved mobility for cars and buses, and bike lanes. In particular, these policies to improve the design and accessibility of streets can be important for low-income communities, where poor street design and limited access to affordable public transportation may be

more common. Furthermore, complete street policies can also benefit low-income communities by making physical activity more safe and accessible.<sup>235,236</sup>

**The National Healthy Housing Standard** is an example of a standards system that encourages health-focused community development. Developed by the National Center for Healthy Housing and the American Public Health Association, the National Healthy Housing Standard provides an evidence-based standard of care for those in the position of improving housing conditions. The provisions are based on policies in use by local and state governments and federal agencies and are intended for use in places where no property maintenance policy currently exists.<sup>237</sup>

**Neighborhood Centers, Incorporated** is Texas' largest nonprofit organization. It provides community-based programs for people in all stages of life and aims to holistically improve communities in the greater Houston area. It is a longstanding organization that hosts a network of over 70 service sites with more than 528,000 clients each year. The organization has been granted multiple public sector contracts to support collaboration and implementation throughout the state of Texas for the Utility Assistance Program and Weatherization Program. It also supports local charter schools that integrate social and health services with academics to serve low-income children. Furthermore, the organization runs seven community centers that offer services, ranging from economic development and leadership opportunities, to immigration and citizenship. It also helps promote and connect families and individuals to health and education resources. Finally, Neighborhood Centers works with United Way to support Sheltering Arms Senior Services, a nonprofit organization that works to provide services, advocacy, and support to older adults and their caregivers.<sup>238</sup>

Through funding from the **Partnership for Sustainable Communities** initiative, Minneapolis-St. Paul was able to develop the Central Corridor Light Rail, known today as the Metro Green Line, as a part of a greater effort to invest in transit-oriented development. Transit-oriented development is a form of community development that

relies on a mixture of housing, retail, and other services integrated into a walkable neighborhood and located within a half-mile of quality public transportation. The new light rail line will provide residents more transportation options, develop a walkable and bike-able corridor, promote affordable and mixed income housing, create jobs, and support economic development. Through intensive outreach efforts, more than 25,000 people—alongside many community institutions and community development funders and advisors—have been engaged in public meetings regarding the transit line since 2006. As a result of this engagement process, three additional light rail stops in low-income neighborhoods were added to the light rail line’s plan to ensure equitable development.<sup>239, 240</sup>

**Partners in Progress** was created by the Citi Foundation and the Low Income Investment Fund to transform the community development sector’s approach to serving the needs of low-income communities. Through Partners in Progress, multi-sector anti-poverty efforts are led by a trusted local organization called the “community quarterback.” This organization aligns objectives, resources, and efforts among stakeholders to create strong, resilient neighborhoods and paths to economic opportunity. Since 2014, the Citi Foundation has invested more than \$5 million to a learning network of 14 grantees in 10 communities across the country. These grantees are developing or expanding networks that connect efforts to improve places—through housing, transportation, and improving community safety—to opportunities for people—such as jobs, childhood development, educational opportunities, medical care, and other services.<sup>241</sup>

**Purpose Built Communities**, an organization that assists with community revitalization efforts across the United States, was formed to help more communities replicate the neighborhood transformation in East Lake, Atlanta. A comprehensive community redevelopment project launched by the East Lake Foundation in 1995 transformed public housing, local schools, and community services. The project focused on replacing distressed low-income rental housing with high-quality

mixed-income housing, creating a cradle-through-college education pipeline for the neighborhood, and offering wellness and health-related facilities and programs. In the years following the redevelopment project, the area experienced significant strides in reducing crime, increasing employment, and boosting educational attainment. Between 1995 and 2012, there was a 90 percent reduction in violent crime, an increase in employment from 13 percent to 70 percent, and an improvement from 5 percent to 98 percent of fifth graders meeting state math standards in the school serving the community.<sup>242</sup>

**The ReFresh Project** in New Orleans was launched in May 2013 to improve access to fresh foods. A key initiative of the project was to redevelop the Broad Street commercial corridor to bring in a grocery store and house local organizations dedicated to improving health and encouraging healthy eating. The project was financed through a combination of local and federal public and private sector resources, including New Markets Tax Credits, lending from Goldman Sachs, the Low Income Investment Fund, and Chase Bank, the New Orleans Redevelopment Authority, the City of New Orleans, and Hope Enterprise Corporations Fresh Food Retail Initiative, Foundation for Louisiana, Newman’s Own Foundation, and La Raza. Today, a network of community partners called the ReFresh NOLA Coalition, which include on-site and community partners, work together to promote health and economic development in the neighborhood through community programs. The ReFresh Project’s on-site tenant partners include Liberty’s Kitchen, a culinary work readiness and leadership program for at-risk youth, The Goldring Center for Culinary Medicine at Tulane University, FirstLine Schools’ central offices, Boystown center for children and families, the offices of Broad Community Connections and Crescent City Community Land Trust, an on-site teaching farm in partnership with SPROUT NOLA, Harambee Gardens of New Orleans, and Faubourg Farms. The coalition members share lessons learned and best practices, and utilize a data monitoring system to track and evaluate the collaborative project’s aims to promote healthy eating within the community.<sup>243</sup>

**The Reinvestment Fund (TRF)** is a CDFI that finances community revitalization projects in low-income communities with a research and policy analysis capacity. Alongside its work to finance childcare centers, education, and housing, since 2000, TRF has directly financed \$184.7 million in healthy food projects, leveraging an additional \$253.5 million in investments. It has led a number of innovative food retail projects that bring jobs, healthy food, and economic activity to low-income neighborhoods. For instance, TRF helped bring the first full-service grocery store in 10 years to the town of Chester, Pa.. Furthermore, TRF's research and analysis capacities have resulted in the PolicyMap online data and mapping tool that improves access to community and market data for better community development decision-making. TRF also works with the Office of Housing and Urban Development and local entities to evaluate and quantify the impact of investments through the Neighborhood Stabilization Program, Foreclosure Prevention Programs, and education programs that reach low-income students.<sup>244</sup>

**The San Francisco Indicator Project** is an online framework and database spearheaded by the San Francisco Department of Public Health that examines how San Francisco neighborhoods perform across many facets of community well-being. It has been used since 2007 to guide health informed decision making across City agencies. With indicators that capture eight dimensions of health—including environment, transportation, community cohesion, public realm (e.g. access to public recreational spaces, cultural amenities, and essential goods and services), education, housing, economy, and health systems—the San Francisco Indicator Project offers a wealth of information that can be used to guide and monitor development in San Francisco.<sup>245</sup>

**The National Neighborhood Indicators Partnership (NNIP)** was developed in 1995 in collaboration between the Urban Institute and local partners to further the development and use of neighborhood-level information systems in community-building and policymaking. With over 50 partners in several dozen metropolitan regions in the United States, NNIP facilitates sharing of data

to find new ways of revitalizing neighborhoods and improving lives. Within their communities, partners work to democratize information and improve direct practical use of data by city and community leaders, and have created advanced information systems to integrate and continually update information on neighborhood conditions. Data collected includes indicators, such as births, deaths, crime, health status, educational performance, public assistance, and property conditions that are relevant to both community development, health, education, and other social sectors.<sup>246</sup>

**Roca, Incorporated** is a community youth development organization based in the Boston area that works with gang members and other high-risk youth to help them redirect their lives and stay out of prison. In 2013, 89 percent of the high-risk youth in Roca's program for parolees and ex-convicts had no new arrests, 95 percent had no new technical violations, and 69 percent remained employed. The success of this program led to the State of Massachusetts move to offer Roca a \$27 million social impact bond in 2013, whereby Roca will be paid to keep approximately 924 young men with a history of incarceration out of prison in the Boston, Springfield, and surrounding areas.<sup>247</sup>

**Shape Up Somerville** is a 15-year-old collective impact strategy supported by the government of Somerville, Massachusetts that brings together diverse organizations with the shared goals of building health equity. The initiative emerged from a 3-year CDC funded study to reduce early childhood obesity through environmental changes and was adopted by the City of Somerville to build community-wide health, health equity, and social justice. As the integrator organization, Shape Up Somerville brings community partners together around a common agenda, shared measurement systems, mutually enforcing activities, and continuous communication. Community partners include local government, businesses, schools, nonprofits, medical groups, grassroots organizations, and individuals. The program focuses on the needs of socially disadvantaged populations and has led multiple initiatives to increase access to healthy food and physical activity opportunities,

including affordable mobile farmer's markets, school meal improvements, and city design projects to encourage walking and biking.<sup>248</sup>

**The Social Impact Calculator** is a tool developed by the Low Income Investment Fund that can measure (in financial terms), the economic, health, and social impacts of a community development intervention. The calculator can be used to examine the impacts of five areas of community development, including affordable housing, quality childcare, education, community health clinics, and equitable transit-oriented development.<sup>249</sup>

**The Success Measures Data System** is an evaluation tool developed by NeighborWorks America, a community development housing organization, to help build evaluation capacity. It can be used by funders and nonprofits to collect and analyze data and communicate results. The Success Measures Data System consists of over 250 data collection tools that can be customized to measure a wide range of contextual, perceived, and observable changes in individuals and communities. Tools currently include Community and Resident Engagement, Community Revitalization, Economic Development, Financial Education and Capability (Adult and Youth), Green Homes and Communities, Housing, Resident Services, and Role of Intermediaries.<sup>250</sup> Recently, in response to the growing interest in the intersection of community development and health, the organization announced that it will be piloting a set of data collection tools to evaluate the health-related outcomes of community development work. It will incorporate dimensions of housing and community development programs that address the social context of interventions, changes in the built environment, healthy housing, and access to services, and the effectiveness of organizational relationships.<sup>251</sup>

**The State of New York** recently developed an innovative program to invest in housing for better health outcomes. In 2012-2013, New York allocated \$75 million from the state's share of Medicaid Redesign funding for supportive housing for 4,500 New Yorkers in the form of both newly constructed supportive housing units

and subsidies and service support for use in existing units. These decisions were motivated by studies that show that supportive housing can stabilize high-risk, high-cost individuals and prevent poor health and social outcomes that result in high use of emergency medical and social services. For certain populations, studies have found that costs of supportive housing can be entirely offset by medical and social savings. In fiscal year 2013-2014, New York's Medicaid budget included \$86 million for supportive housing for high-need, high-cost Medicaid recipients. While there are still limitations to the state's use of Medicaid funding for housing, New York's actions show the potential of addressing health and social problems with preventive, cost-effective community development interventions.<sup>252</sup>

**The Way to Wellville** is an initiative that was launched in 2014 to test new approaches and develop the best strategies for cities to improve the health of their residents. Created by the Health Initiative Coordinating Council, led by technology and business leaders, the Way to Wellville has selected five small cities—each with a population of 100,000 or less—to spend the next five years implementing community-wide prevention strategies to make progress on five shared indicators of health. By creating diverse coalitions, developing private sector partners, incorporating the latest technologies, and raising funds through strategies such as social impact bonds or a wellness trust, the initiative aims to help the participating cities create sustainable strategies for health. Upon the completion of the program, the initiative will rigorously gather and release data to share with health practitioners, planners, and policymakers, and others who can use the lessons learned to improve health in communities across the nation.<sup>253</sup>

**The Seattle & King County Public Health Department** has been central to the evaluation of cross-sector projects that tackle the social determinants of health. For example, a recent two year project to improve school nutrition and physical activity brought together stakeholders in public health, education, food and agriculture, urban planning, business and other sectors to make targeted, place-based investments. From the beginning, this effort incorporated a strong evaluation

component. Evaluators helped shape project design and actively participated in the project during the start-up phase of the project, adjusting the intervention's design based on early results. Almost 10 percent of the total project cost was allocated to data collection and evaluation.<sup>254</sup>

**Hennepin Health** is a county health plan that serves 10,000 high need residents in Minneapolis and St. Paul. Through collecting and continually updating data on services used by enrollees, physicians were able to distinguish how various medical services, such as emergency room visits, were over utilized and ineffective in improving health. Knowledge from this measurement system allowed the health system to coordinate care between hospital and outpatient settings and invest in efforts to address the social and behavioral determinants of poor health, such as supportive housing and a sobering center. Between 2012 and 2013, emergency department visits decreased 9.1 percent and outpatient visits increased 3.3 percent.<sup>255</sup>

**Community Works** is a community benefit initiative of The Bon Secours Baltimore Health System and was established as part of the hospital system's 20 year strategic plan to ensure that community residents have access to healthy food, housing, recreational facilities, and an array of medical care services. The initiative has invested in local social service resources, such as the Women's Resource Center, and developed the Bon Secours Family Support Center to offer families comprehensive services, including parenting classes, counseling, recreational and educational activities, in-home support services, nutritious meals, and child care. Community Works supports workforce development and financial literacy through supporting comprehensive training programs for teens and adults and Our Money Place Financial Services. Finally, Community Works invests in neighborhood revitalization, including established neighborhood improvement workforce training programs, such as Clean & Green, and convenes the community organizing initiative Weed & Seed to bring together citizens and the local police force to identify areas for neighborhood improvement.<sup>256</sup>

**The Low Income Investment Fund (LIIF)** is a leading community development financial institution with expertise in investing capital for healthy communities, healthy people, and economic, educational, and personal opportunity. With business savvy and expertise in deploying capital and bringing projects to scale, LIIF has directly invested over \$1.7 billion in community projects in collaboration and partnership with the private, public, and philanthropic sectors. Projects include affordable housing, child care centers, schools, healthy food stores, commercial facilities, and transit-oriented development.<sup>257</sup>

**The Local Initiatives Support Corporation (LISC)** is a national nonprofit organization that works on a local level to help both community-based and for-profit development organizations transform distressed neighborhoods into healthy, sustainable communities of opportunity. As a part of this mission, it mobilizes monetary support from businesses, governments, and philanthropy, engages in public policy on a local, state, and national level, and offers technical and management assistance. In recent years, LISC and its partner organizations have focused on enhancing the health impact of community development through expanding access to nutritious food, safe places to exercise, and primary medical care. In total, it has invested \$325 million in new grocery stores, health centers, athletic fields and early childhood centers and playgrounds in low-income neighborhoods across the country.<sup>258</sup>

**The University of Pennsylvania (Penn)** has undertaken a series of community revitalization efforts, such as the West Philadelphia Initiatives (WPI) effort, in conjunction with the growth of Penn's campus. WPI was a multi-pronged effort, implemented in 1997, to create a mixed-use, racially and economically diverse, and commercially vibrant area for current residents and campus affiliated residents. While the initiative ignited community fears of gentrification and unwanted campus expansion, WPI focused on supporting local and minority businesses and service providers in procurement and construction, and invested in public education through building and funding a new neighborhood K-8 school. In addition, since 1986, Penn's Local Community Business initiative

has worked with West and Southwest Philadelphia based suppliers to provide products and services required by Penn. Since 1986, Penn has invested over \$847 million in local procurement.<sup>259,260</sup>

**The Cleveland Foundation**, with total assets of over 2 billion, has been instrumental to wealth building in disadvantaged communities in the greater Cleveland, Ohio region. For instance, in 2005, it brought together several hospitals and universities to focus on inclusive economic development in the University Circle area. Called the Greater University Circle Initiative (GUCI), this partnership catalyzed hundreds of millions of dollars in new investments and brought hundreds of new jobs to residents of low-income neighborhoods. Furthermore, it created several community institutions, such as the Greater Circle Living employer-assisted housing program, NewBridge workforce training center, and the Neighborhood Connections community organizing project. Finally, it created the Evergreen Cooperatives, employee-owned, local, sustainable, for-profit companies that pay livable wages and hire locally.<sup>261</sup>

**The Vita Health & Wellness District** is a collaborative community revitalization effort on the West Side of Stamford, CT between Stamford Hospital and local public housing authority Charter Oaks Communities. For over five years, they have been working together to tackle the social determinants of health in a revitalization effort that promotes health and opportunity for residents who were formerly isolated and stigmatized by poorly designed public housing. In 2011, Stamford received a Sustainable Communities Challenge grant from the U.S. Department of Housing and Urban Development (HUD) to underwrite the Vita strategic plan, and the following year, were selected for the EPA's Building Blocks Equitable Development technical assistance program. With large investments by both partners, including a \$450 million expansion by the Stamford Hospital, and guidance from residents and business owners through West Side

Neighborhood Revitalization Zone meetings, a mixed-income neighborhood was developed, adjacent to the Stamford Hospital. Focused on health, sustainability, opportunity, and economic viability, the new neighborhood preserves every unit of public housing and includes an urban farm, case management services, and nearby parks.<sup>262</sup>

To understand the **links between child health (use of acute services) and housing** in San Francisco, CA, researchers at the University of California, Berkeley and the University of California, San Francisco utilized a quasi-experimental approach. They compared children ages 0-18 with public insurance who lived in public housing redeveloped by the HOPE VI program, non-redeveloped housing, and non-public housing in a census tract that also contained public housing. They found that children living in non-redeveloped public housing were 39 percent more likely to have one or more repeat visits within one year for acute health services, unrelated to the initial visit, than children in the redeveloped HOPE VI housing. This research supports the assertion that redeveloping public housing can result in lower health care costs and improve children's health.<sup>263</sup>

**The Haven Project** is an initiative by the New York Restoration Project that aims to renovate a network of open spaces in the socially and economically disadvantaged Mott Haven and Port Morris neighborhoods of the South Bronx, while simultaneously demonstrating measurable health and social outcomes resulting from an improved physical environment. HealthxDesign is leading the development of the impact framework and monitoring and evaluation plan, which is supported by a rapid literature review conducted by health researchers at Columbia University to ensure that evidence-based strategies are used to maximize the project's impact on health.<sup>264</sup>



## About the Center on Social Disparities in Health

The University of California, San Francisco Center on Social Disparities in Health's mission is to address the need for better information—and more effective use of existing information—to guide efforts to eliminate social disparities in health in the United States and other countries. Since its inception in 2002 with support from the Centers for Disease Control and Prevention, CSDH has focused on conducting policy-relevant research and monitoring of social disparities in health. By bringing together a critical mass of multi-disciplinary expertise, CSDH aims to provide policy-relevant knowledge to guide the reduction of inequalities in health among different social groups—particularly socioeconomic and racial or ethnic groups—in the United States and globally.

## About the Build Healthy Places Network

The Build Healthy Places Network's mission is to catalyze and support collaboration across the health and community development sectors, together working to improve low-income communities and the lives of people living in them. The Network connects leaders, practitioners, investors, and policymakers across sectors through in-person and virtual convenings; manages a clearinghouse that gathers, synthesizes and summarizes research, best practices and models that demonstrate what works at the intersection; and provides capacity-building tools and resources that highlight the health-related value of community development work and encourage measurement of health-related impact.

## About the Robert Wood Johnson Foundation

For more than 40 years the Robert Wood Johnson Foundation has worked to improve the health and health care of all Americans. We are striving to build a national Culture of Health that will enable all Americans to live longer, healthier lives now and for generations to come. For more information, visit [www.rwjf.org](http://www.rwjf.org). Follow the Foundation on Twitter at [www.rwjf.org/twitter](http://www.rwjf.org/twitter) or on Facebook at [www.rwjf.org/facebook](http://www.rwjf.org/facebook).

## About This Issue Brief Series

This issue brief is one in a series on the social determinants of health.

Others in the series include:

- ▶ *Early Childhood Experiences Shape Health and Well-Being Throughout Life*
- ▶ *What Shapes Health-Related Behaviors?*
- ▶ *Stress and Health*
- ▶ *Income, Wealth and Health*
- ▶ *Education and Health*
- ▶ *Race, Socioeconomic Factors and Health*
- ▶ *Housing and Health*
- ▶ *Neighborhoods and Health*
- ▶ *Work, Workplaces and Health*
- ▶ *Violence, Social Disadvantages and Health*
- ▶ *Health Impact Assessment: A Tool for Promoting Health in All Policies*
- ▶ *Breaking through on the Social Determinants of Health: An Approach to Message Translation*

## Lead Authors

- ▶ Amy Edmonds, Center on Social Disparities in Health, UCSF
- ▶ Paula Braveman, MD, MPH, Center on Social Disparities in Health, UCSF
- ▶ Elaine Arkin, Robert Wood Johnson Foundation
- ▶ Doug Jutte, MD, MPH, Build Healthy Places Network

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## Additional Resources

- ▶ Build Healthy Places Network: [www.buildhealthyplaces.org](http://www.buildhealthyplaces.org)
- ▶ Federal Reserve Bank of San Francisco Healthy Communities Initiative: [www.frbsf.org/community-development/initiatives/healthy-communities](http://www.frbsf.org/community-development/initiatives/healthy-communities)
- ▶ Local Initiatives Support Coalition for Healthy Community Development: [www.lisc.org/nyc/sustainable\\_communities/index.php](http://www.lisc.org/nyc/sustainable_communities/index.php)
- ▶ Low Income Investment Fund: [www.liifund.org](http://www.liifund.org)
- ▶ The Reinvestment Fund: [www.trfund.com](http://www.trfund.com)
- ▶ What Counts: Harnessing Data for America's Communities: [www.whatcountsforamerica.org](http://www.whatcountsforamerica.org)
- ▶ County Health Rankings & Roadmaps: [www.countyhealthrankings.com](http://www.countyhealthrankings.com)
- ▶ National Prevention Strategy: [www.surgeongeneral.gov/initiatives/prevention/strategy/healthy-safe-environments.pdf](http://www.surgeongeneral.gov/initiatives/prevention/strategy/healthy-safe-environments.pdf)
- ▶ Centers for Disease Control and Prevention Built Environment and Health Initiative: [www.cdc.gov/healthyplaces](http://www.cdc.gov/healthyplaces)

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