Building Consensus Around Health Metrics for Community Development

October 16, 2014
Building Consensus Around Health Metrics for Community Development: THE BIG PICTURE

- American’s health is worse than it should be
- Bulk of resources go to medical care
- Health happens in neighborhoods
Despite leading the world on medical care spending, Americans have worse health and shorter lives than people in other affluent nations.
CONTRIBUTIONS TO PREMATURE DEATH

$2.9 TRILLION YEARLY
HEALTH HAPPENS IN NEIGHBORHOODS
HEALTH HAPPENS IN NEIGHBORHOODS

3 miles could equal up to a 13-year life span difference.
IN DETERMINING YOUR HEALTH...

94131 >
COMMUNITY DEVELOPMENT IS IN THE ZIP CODE IMPROVEMENT BUSINESS
Building Consensus Around Health Metrics for Community Development: THE BIG PICTURE

- Poor health in US; Focus on medical care; But health happens in neighborhoods
- CDFIs have been improving health for decades
- Health ROI is often unmeasured or ignored
- Rapidly growing interest in collaboration across sectors but siloed thinking and funding remains
- What’s needed is coordinated action and thoughtful measurement approaches
TODAY’S DISCUSSION:

• How are community developers and CDFIs talking about the health impacts?
• Which metrics are showing promise? Where are the gaps?
• What is the role for Health Impact Assessments?
• How are CDFIs trying to operationalize health as a metric?
• What is being done to support collaboration across sectors?
Presenters

Ela Rausch
Federal Reserve Bank of Minneapolis

Bethany Rogerson
Pew Charitable Trusts - Health Impact Project

Nancy Andrews
Low Income Investment Fund

Douglas Jutte
Build Healthy Places Network
Health Metrics for Community Development:
A View of the Current Landscape

Presenter: Ela Rausch, MPP, Project Manager, Federal Reserve Bank of Minneapolis
Metrics for Healthy Communities

*Study background and goals*

- National study conducted by Federal Reserve Bank of Minneapolis and Wilder Research in partnership with Robert Wood Johnson Foundation

- Response to RWJF Commission’s call for the establishment of measures to spur more collaborative approaches to building healthy communities

- Establish SODH metrics framework & guide to measures, case examples, add to the evidence base
Metrics for Healthy Communities

Key research questions

1. What social determinants of health does your organization address and how has attention to social determinants of health (SODH) influenced your work?

2. Are you working collaboratively across sectors?

3. How are you measuring the health impacts of your initiatives?

4. What advice do you have for doing good measurement?
Metrics for Healthy Communities

Sample and respondents

3,500 Practitioners
community development, health, and related fields

613 Respondents
46 states +D.C.

42 CDFIs/banks

30 OFN members
<table>
<thead>
<tr>
<th><strong>Early Child Care/Education/Workforce Development</strong></th>
<th><strong>Economic Well-Being/Economic Conditions</strong></th>
<th><strong>Housing</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of childcare programs financed that serve LMI families</td>
<td>Number of participants who open an IDA account</td>
<td>Number of affordable housing units financed/ built/rehabbed</td>
</tr>
<tr>
<td>Number of child care slots</td>
<td>Number of jobs created/retained</td>
<td>Number of affordable housing units for persons with special needs</td>
</tr>
<tr>
<td>Number of student seats</td>
<td>Number of quality jobs (determined by wages and benefits offered)</td>
<td>Number of program participants who purchase an affordable home</td>
</tr>
<tr>
<td>Number of employment workshops/trainings held</td>
<td>Number of financed businesses with successful financial performance</td>
<td>Number of mortgages with principal reduced</td>
</tr>
</tbody>
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<table>
<thead>
<tr>
<th><strong>Access to Health Care</strong></th>
<th><strong>Environment</strong></th>
<th><strong>Healthy Foods</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of beds</td>
<td></td>
<td>Number of grocery stores/healthy foods businesses financed</td>
</tr>
<tr>
<td>Number of exam rooms</td>
<td></td>
<td>Number of nutrition classes held</td>
</tr>
<tr>
<td>Number of health screenings</td>
<td></td>
<td>Number of community gardens</td>
</tr>
<tr>
<td>Number of patients served in community health centers financed</td>
<td></td>
<td>Number of policies adopted that support healthy eating</td>
</tr>
</tbody>
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<table>
<thead>
<tr>
<th><strong>Neighborhood Conditions</strong></th>
<th><strong>Physical Activity</strong></th>
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</thead>
<tbody>
<tr>
<td>Number of public meetings focused on community improvement</td>
<td>Number of bikes</td>
</tr>
<tr>
<td></td>
<td>Number of pedestrians</td>
</tr>
<tr>
<td></td>
<td>Number of crosswalks</td>
</tr>
<tr>
<td></td>
<td>Number of policies adopted that support physical activity</td>
</tr>
</tbody>
</table>
CDFI/Bank SODH Outcome measures

**Early Child Care/Education/Workforce Development**
- Increased high school graduation rates
- Improved proficiency test scores
- Improved school performance (perceived by program participants)
- Increased kindergarten/school readiness
- Increased high quality early care

**Environment**
- Decreased levels of pollution emissions (NOx/CO2)

**Health Care**
- Changes in individual health status

**Healthy Foods**
- Increased access to healthy foods
- Increased consumption of healthy foods
- Decreased child obesity rates

**Economic Well-Being/Economic Conditions**
- Increased savings by program participants
- Increased access to credit
- Improved credit scores for program participants
- Changes in individual employment status
- Increased financial knowledge
- Increased occupancy rates of commercial space
- Increased permitting activity

**Housing**
- Improved housing conditions
- Decreased foreclosure rates
- Changes in individual housing status
- Increased housing affordability (perceived by program participants)

**Physical Activity**
- Increased investments in parks and infrastructure
- Increased recreational opportunities for children (perceived by program participants)

**Neighborhood Conditions**
- Improved building conditions
- Increased levels of community engagement
- Increased social connectedness
- Increased levels of neighborhood employment
- Increased neighborhood median income
- Decreased vacant and blighted properties
- Increased investment in neighborhoods
- Increased community leadership capacity
- Decreased violent crime
- Reduced traffic fatalities
- Increased ”good feelings” about neighborhood (self-reported by residents)
- Enhanced community facilities
CDFI/Bank

SODH- Old hat or the new black?

- A holistic view of healthy communities has always been critical to our mission [of] building healthy communities where low income people live and work. We intentionally seek projects where several determinants intersect.
  - Boston Community Capital, Boston, MA

- Attention to the importance of the social determinants of health has given LISC new energy and momentum around our community development work, and has led us to better understand the value of community development in addressing the social, economic and physical needs of community residents that can't be addressed by the health care system alone.
  - National Local Initiatives Support Corporation, NY
Measurement Advice

*Lessons From the Field*
Impact measurement is difficult, time consuming, and expensive. However, the knowledge gained and the ability to translate outcomes to stakeholders and investors is invaluable.  

–The Reinvestment Fund, Philadelphia, PA

Access to funding is improved by key impact data that not only reflects our outputs (loans) but also the outcomes that result.  

–IFF, Chicago, IL
#2 Keep things simple
focus on your core

Biggest piece of advice would be that it's okay to start small, with just a few metrics.

– Capital Impact Partners, Arlington, VA

Determine [which social determinants of health] line up with the mission of your organization.

– Northern California Community Loan Fund, San Francisco, CA
#3 Be deliberate

It's important to build [outcome measurement] in at the outset of the program, setting expectations and identifying key metrics in advance.

–Nonprofit Finance Fund, New York, NY

There must be a system in place and a way to pay for the tracking or it won't get done.

–Local Initiatives Support Corporation, Phoenix, AZ
#4 You don’t need to reinvent the wheel

There is a lot of interesting research out there already, that can both help [organizations] understand the impact of their work on health, as well as serve as a tool to make the case for why their work might be interpreted as an investment in health.

–Low Income Investment Fund, San Francisco, CA

First, take a look at what your borrowers, constituents, [and others] are already measuring. Find the overlaps, and leverage, and add to them to avoid duplication and redundancy.

–Community Housing Capital, Decatur, GA
#5 Qualitative data matters

Do not underestimate the power and importance of qualitative data.

- **Boston Community Capital, Boston, MA**

Case studies, surveys, structured interviews can provide an additional layer of data regarding your impact.

- **Hope Enterprise Corporation, Jackson, MS**
#6 Partner with an external evaluator/researcher

Work with an experienced professional to determine appropriate measurements and data points at the start of the initiative and make sure you have the systems in place to capture the data.

–Twin Cities Community Land Bank, Minneapolis, MN

Reach out to specialists and partners so that impact measurement is a collaborative and informed process.

–The Reinvestment Fund, Philadelphia, PA

It is important to have evaluators that work as technical assistance partners continually providing deeper levels of analysis for intervention planning.

–Local Initiatives Support Corporation Boston, Boston, MA
CDFI/Bank

Ongoing measurement challenges

- Belief that government and health organizations are better-equipped to monitor long-term changes in economic conditions, public safety, and health impacts
- Lack of money and resources for evaluation and impact measurement
- Systems for measurement are often rudimentary or lacking
- Industry lacks standardized SODH measures
Building Consensus Around Health Metrics for Community Development

October 16, 2014
Optimizing Health Impacts of Community Development Investments Using Health Impact Assessment

Opportunity Finance Network Conference
October 2014, Denver, Colorado
Bethany Rogerson, brogerson@pewtrusts.org
America Is Not Getting Good Value for Its Health Dollar

The U.S. spends more money per person on health than any other country, but our lives are shorter—by nearly four years—than expected based on health expenditures.

Prepared for the Robert Wood Johnson Foundation by the Center on Social Disparities in Health at the University of California, San Francisco.

Sources: OECD Health Data 2007.
Does not include countries with populations smaller than 500,000. Data are for 2003.
Source: Lots to Lose: How America’s Health and Obesity Crisis Threatens our Economic Future (2012)
HIA Addresses Social Determinants of Health

How might the proposed project, plan, policy affect

Housing
Air quality
Noise
Safety
Social networks
Nutrition
Parks and natural space
Private goods and services
Public services
Transportation
Livelihood
Water quality
Education
Inequities

and potentially lead to predicted health outcomes?

Slide courtesy of Human Impact Partners (www.humanimpact.org)
Challenges to Cross-Sector Collaboration

- No common language between sectors
- Few formalized opportunities or requirements for collaboration
- Priorities don’t necessarily match
- Connections to health may not be recognized initially

Image courtesy of Jscreationzs and FreeDigitalPhotos.net.
Defining Health Impact Assessment

“A systematic process that uses an array of data sources and analytic methods and considers input from stakeholders to determine the potential effects of a proposed policy, plan, program or project on the health of a population and the distribution of those effects within the population. [HIA] provides recommendations on monitoring and managing those effects.”

Source: “Improving Health in the United States: The Role of Health Impact Assessments” by the National Research Council, September 2011
Health Impact Assessment...

• Provides a framework for community capacity-building and empowerment

• Involves a broad-range of impacted people

• Is an effective tool for meaningful cross-sector collaboration

• Addresses health inequities

• Increases transparency, support inclusiveness, democracy, and community engagement in the policy decision-making process

Adapted from Human Impact Partners, HIA Toolkit, 3rd Edition

Image courtesy of Jscreationzs and FreeDigitalPhotos.net.
Steps of HIA

- Screening
- Scoping
- Assessment
- Recommendations
- Reporting
- Monitoring and Evaluation
HIA can be applied to a range of sectors

- Built Environment: 34%
- Transportation: 21%
- Natural Resources & Energy: 14%
- Agriculture & Food: 9%
- Housing: 7%
- Education: 5%
- Labor & Employment: 4%
- Other: 6%
### Example 1: South Lincoln Homes, Denver

<table>
<thead>
<tr>
<th>Topic</th>
<th>Public housing master plan for a public housing redevelopment</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Organizations</strong></td>
<td>EnviroHealth Consulting, MITHUN firm, and Denver Housing Authority</td>
</tr>
<tr>
<td><strong>Key findings</strong></td>
<td>• Over half of the population obese or overweight&lt;br&gt;• Higher rates of crime than city overall&lt;br&gt;• The plan would improve physical activity, options for healthy eating&lt;br&gt;• The plan would increase noise exposure because more residences near railway</td>
</tr>
<tr>
<td><strong>Sample recommendations</strong></td>
<td>• Include building design amenities to increase walking &amp; use of stairs&lt;br&gt;• Include pedestrian-level lighting to improve safety&lt;br&gt;• Include space and safe ways to access a farmer’s market</td>
</tr>
<tr>
<td><strong>Through the HIA process...</strong></td>
<td>Recommendations implemented include: New bike lanes, improved lighting and street crossings to market</td>
</tr>
</tbody>
</table>
## Example 2: Northeast Hartford, Connecticut

<table>
<thead>
<tr>
<th>Topic</th>
<th>Integrating health in neighborhood sustainability plan development</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Organizations</strong></td>
<td>Community Solutions, Michael Singer Studios</td>
</tr>
</tbody>
</table>
| **Scope of the sustainability plan** | • Identifies key intersections to improve pedestrian safety  
   • Explores ways to increase access to local park  
   • Defines opportunities to reactivate vacant lots  
   • Defines protection of street trees and electric service |
| **Opportunities to maximize health benefits** | • Prioritize two intersections in community near schools  
   • Consider marketable compost programs with corporate partners  
   • Prioritize limiting “unproductive activity” on vacant lots through educational programming. |
| **Through the HIA process...** | Systematically included health in the plan development. Produced plan for specific further action and implementation. |
Example 3: Community Investment Tax Credit Grant Program, Massachusetts

<table>
<thead>
<tr>
<th>Topic</th>
<th>Funding for community development corporations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Organizations</td>
<td>Health Resources in Action, Metropolitan Area Planning Council, Massachusetts Department of Public Health</td>
</tr>
</tbody>
</table>
| Key findings                  | • The grant program would support continued or expanded services by CDCs.  
• Increased funding would enhance community organizing, outreach, and engagement, and people in the service area would experience related health benefits, such as improved mental health, and increased access to health care. |
| Sample recommendations         | • Encourage use of health data in future community investment plan documents for funding proposals.  
• Track how program supports healthy behaviors and other support services. |
| Through the HIA process...     | • Expanded the definition of community development to include community organizing and leadership development |
The Value of HIA: Policymaker Reactions

“The HIA has helped neutralize conflict by bringing different groups and disciplines together.”
Janet Miller, Wichita city council member

“HIA helps me win. It does all the work on the front end; nobody is angry, because all the concerns have been addressed.”
Joe Cimperman, Cleveland City Councilmember
“The HIA revealed gaps in the data we needed to make good decisions.”

Stacie McIntosh, U.S. Bureau of Land Management

“HIA is a tool to help us figure out where to ... use limited resources to benefit the greatest number of people.”

Denise Provost, Massachusetts State Representative
How much does HIA cost?

- Cost can be scaled to fit available resources.
- Costs vary depending on project length, methods and depth of stakeholder engagement and analysis.
- Informal analysis shows range from a few thousand dollars to $200,000.
- Health Impact Project typically funds from $25K to $150K.
- The primary expense is staff time.
Who typically leads an HIA?
Different Ways for CDCs and CDFIs to Support or Participate in an HIA

- Lead
- Help screen for potential topics
- Serve on advisory committee
- Review and provide feedback on draft documents
- Fund (HIA, trainings, participation, implementation of recommendations, etc.)
- Provide data
- Monitor (for implementation of recommendations)
- Evaluate
Completed and In Progress HIAs 2014 (N = 319)

Map created through a partnership between Health Impact Project and the Centers for Disease Control and Prevention's Healthy Community Design Initiative
To learn more...

• Explore an interactive map: www.healthimpactproject.org.


• Visit the Society of Practitioners of HIA (SOPHIA) website: www.hiasociety.org.
Thank you!

Website: www.healthimpactproject.org
E-mail: brogerson@pewtrusts.org
The Low Income Investment Fund’s Social Impact Calculator

Nancy O. Andrews, LIIF President and CEO
Low Income Investment Fund (LIIF)

- **National CDFI** with 30-year history of bridging capital markets and low-income communities

- **Breadth of work:** community investments, capital fund aggregation, policy advocacy, grant-making

- **Program areas:** affordable housing, equitable TOD, K-12 schools, early childhood education, community health clinics, fresh food
LIIF Impact

- $1.5 billion invested
- 1.7 million people served
- $30 billion in social impact from projects supported
Why Measure Impact?

- **Self-assessment:** Determine how well we are achieving our mission

- **Communication:** Develop better ways to express the value of our work

- **Capacity building/Innovation:** Stay current with latest work and research on outcomes/impact
Objectives and approach to developing a new impact tool

- Case-making tool to powerfully express our impact
- Express impact in monetary terms
- Easy to use and practitioner-friendly
- Leverages existing evidence, rather than generating our own
- Advance a broader conversation, beyond LIIF
Social Impact Calculator

- Impact by proxy approach
- 10 metrics across LIIF program areas
- Open source online platform

liifund.org/calculator
Advantages and Limitations

- Works for LIIF’s institutional context
- Not using as a decision-making tool (yet)
- Not yet a proper SROI tool (no time value of $, etc.)
- Evidence base that qualifies for this approach is limited (many criteria)
Looking Forward

- Enhance the tool: new metrics, refine methodology, increase usability
- Introduction to new partners, new capital, etc.
- Incorporate calculator into decision-making processes and financial products (potentially)
Introducing the Build Healthy Places Network

October 16, 2014
Build Healthy Places Network

Investing in Communities, Transforming Lives
• Siloed work streams
• Underestimated value and impact of work
• Inefficient use of resources
• Policy roadblocks
• Unrecognized investment opportunities
Healthy Communities Initiative

- Regional Federal Reserve banks
- Bringing together community development, investment and health sectors
- 18 meetings across the country since 2010
Recommendation #2. Fundamentally change how we revitalize neighborhoods, fully integrating health into community development.

- Support and speed integration of finance, health, community development
- Create incentives and performance metrics to spur collaboration
- Replicate promising, integrated models and invest in innovation
Network’s Mission and Vision

Mission

The national Build Healthy Places Network catalyzes and supports 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 achieves its mission through research, convenings, managing a clearinghouse of resources and information, and connecting leaders, practitioners, policymakers, and investors across sectors.

Vision

Communities where everyone has the opportunity to live a rewarding and healthy life.
The Network’s Role

Connecting audiences across sectors; facilitating two-way communications that is action-oriented and inclusive

Providing access to research, best practices, and models demonstration what works

Highlighting the health-related value and impact of community development work

Encouraging and enabling measurement of health-related impact
Purpose

Increase awareness

Increase capacity

Increase action across sectors

Sustain interest, action and connections across sectors
Network’s Role in Encouraging Measurement

Measurement:
- Bigger Impact
- More Innovation
- Additional Investment
- Effective Policy Design

Healthier Communities
Network’s Role in Encouraging Measurement

Provide a platform for outreach, education, and discussion

Share tools, systems, and stories of what works

Demonstrate how metrics are currently selected, used, and reported

Identify entry points for more easily using metrics in day-to-day programming

Identify gaps and overlaps in what is currently measured
Progress Toward Collaboration

RWJF Commission to Build a Healthier America

OPPORTUNITY FINANCE NETWORK

Health Affairs

PEDIATRICS

SUCCESS MEASURES®

NeighborWorks® AMERICA

HICcup The Way to Wellville

Five places. Five metrics. Five years.

SOCAP HEALTH

June 25+26, 2014

The New York Academy of Medicine - New York, NY

Creating the market that values health

How Housing Matters
Progress Toward Collaboration

• **NEW FUNDS CREATED**
  - Healthy Futures Fund
  - Healthy Neighborhoods Equity Fund

• **EXPANDING SOCIAL IMPACT BONDS**
  - **Early Childhood:** South Carolina, Orange County, New York State, San Francisco
  - **Diabetes:** New York State
  - **Asthma:** Fresno and Alameda County, California
  - **Special Education:** Salt Lake City, Utah
“I envision a time in the near future when our fields and the people who work in them do not need to make a special effort to develop partnerships because we will be working side by side...to improve the lives of all Americans. In fact, we are likely to look back at this time and wonder why community development and health were ever separate industries.”

Risa Lavizzo-Mourey, President and CEO, RWJ Foundation