Landscape Analysis for Housing and Health Initiatives in Cook County

September 5, 2019 – Illinois Housing Council (IHC) Breakfast

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Special thanks to the following for their formative input into designing the landscape analysis: Stephen Brown, UI Health; Allison Clements and Emma Heemskerk, IHC; Megan Cunningham, CDPH

Supported by the Otho SA Sprague Memorial Institute, and Alliance for Health Equity members
Alliance for Health Equity - Priorities

Social and Structural Determinants of Health

- Addressing Structural Racism and Advancing Racial Equity
- Policies that Advance Equity and Promote Physical and Mental Well-Being
- Conditions that Support Healthy Eating and Active Living
- Community Engagement in Decision-Making
- Economic Vitality and Workforce Development
- Education and Youth Development
- Food Security and Food Access
- Housing, Transportation, and Neighborhood Environment
- Structural Racism and Structural Inequities
- Violence and Community Safety

Access to Care, Community Resources, and Systems Improvements

- Increased Timely Linkage to Appropriate Care, Including Behavioral Health and Social Services
- Resources, Referrals, Coordination, and Connection to Community-Based Services
- Trauma-Informed Care
- Diversity and Inclusion in Workforce
- Care based in Cultural Humility and Cultural Competence
- Data Systems

- Mental Health and Substance Use Disorders
- Chronic Disease Prevention and Management
  - Asthma
  - Cancer
  - Complex Chronic Conditions
  - Diabetes
  - Heart Disease
  - Hypertension
- Maternal and Child Health
  including maternal and infant mortality
- Injury
  including violence-related injury

- 37 public and nonprofit hospitals
- Health departments
- Regional and community based organizations

Increased Health Equity, Improved Health, Improved Quality of Life, Increased Life Expectancy
Housing and Health Landscape Analysis

**Purpose:** Identify existing and potential partnerships in Chicago and Suburban Cook County, challenges that prevent deeper collaborations, and opportunities for enhanced collaboration.

**Timeline:**

- **2017**
  - Alliance for Health Equity Housing and Health Workgroup founded
  - Stephen Brown, UI Health, chair

- **2018 - 2019**
  - County-wide Community Health Needs Assessment
  - Housing one of the priorities

- **Spring 2019**
  - Alliance for Health Equity, CDPH, CCDPH, and Illinois Housing Council begin partnership on landscape analysis

- **May-Aug 2019**
  - Landscape Analysis - Interviews, Meetings, and Document Review

- **Aug-Sept 2019**
  - Vetting initial findings and getting input on next steps with key experts and stakeholders
**Background: Pathways Connecting Housing and Health**


**Stability:**
- People who are chronically homeless, move frequently, fall behind on rent, couch surf, etc. experience higher levels of physical and mental morbidities and increased mortality

**Quality & Safety:**
- Environmental factors, such as water leaks, lead exposure, poor ventilation, and pest infestation have been associated with poor health outcomes

**Affordability:**
- Individuals who spend more than 30% (cost burdened) to 50% (severely cost burdened) are often faced with trade-offs that can be detrimental to health

**Neighborhood:**
- Neighborhood characteristics including both the physical built environment and social capital have an effect on individual and community health and well-being
Background: (recent) Trajectory of Healthcare Engagement with Housing

Local leaders, champions, and change agents in healthcare

Community partners emphasizing focus on health and racial equity

Affordable Care Act (2010-present)

- more people covered
- population health
- triple aim
- value-based care
- CHNA
- CMMI

Anchor Mission

Total Health: Applying all assets for health

Source: Kaiser and The Democracy Collaborative, 2015

- Collaborative Community Health Needs Assessment (CHNA)
- Addressing community health priorities and underlying root causes of health inequities
- Working across sectors and with communities on Social Determinants / Social Influencers of Health
- Housing and Health workgroup

Several local health systems are members
- Also, local place-based anchor efforts - West Side United, Southland Rise, Proviso Partners for Health, etc.
Landscape Analysis Data Sources

- Interviews of housing and health stakeholders in Cook County conducted by IPHI/Alliance for Health Equity between May 2019-July 2019
- Inventory of existing health and housing partnerships
- Document review of local and national examples (e.g., LIIF, 2017; Changelab Solutions 2018; CCI, 2018; Urban Institute 2019; Enterprise 2016)

### Summary of Interviews

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<th>Type of Stakeholder</th>
<th>Number</th>
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<td>Developers</td>
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<td>Healthcare provider association</td>
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<td>Hospital</td>
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<td>Policy</td>
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<tr>
<td>Supportive housing providers</td>
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<tr>
<td>Think tank/research</td>
<td>8</td>
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</tbody>
</table>

Some orgs counted in multiple categories
Partnership Strategies (from Landscape Analysis)
Sept 2019 - version for partner review

**Example Strategies**

- Gap financing
- Investment in CDFIs for development, preservation and/or rehab of affordable housing
- Land for development
- Rental assistance

- Coordinated services with other agencies
- Case management and wrap-around support services
- Co-located and/or onsite services
- Flexible Housing Pool
- Home visits
- Homelessness prevention efforts
- Medical respite

- Engaging people with lived experience
- Research into social ROI of housing investments
- Screening and diagnosis methods for housing (within social determinants of health screening and referral)
- Streamline data sharing

- Coalition building around housing and health policy advocacy
- Development of shared legislative agenda
- Funding local community organizing
- Medical-legal partnerships (MLP) / Legal support for patients

- Accessible design, and partnerships between housing and health for residents with disabilities
- Health Action Plans for new developments
- Housing quality partnerships related to asthma triggers and/or lead
Landscape analysis revealed more than 45 housing and health partnerships exist in Chicago and Suburban Cook County.

<table>
<thead>
<tr>
<th>Number of Health and Housing Partnerships in Cook County Across Strategies*</th>
<th>(landscape analysis as of 8/30/19)</th>
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<tbody>
<tr>
<td><strong>10</strong></td>
<td><strong>25</strong></td>
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<tr>
<td>Capital and asset investments for housing and community development</td>
<td>Coordinate and embed health resources and services with affordable housing</td>
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</table>

*Some partnership initiatives are categorized across multiple strategies

Partnership initiatives are at different stages of development, not all are yet operational.
Capital and asset investments for housing

Example Strategies:

- Gap financing
- Investment in CDFIs for development, preservation and/or rehab of affordable housing
- Land for development
- Rental assistance

Examples

- Housing for Health Fund partnership between Enterprise and Kaiser Permanente in California
- River Station Senior Residences - Mercy Housing Lakefront, AMITA in Kankakee, and others

Coordinated/embedded health resources and services with affordable housing

Example: Sojourner House
Partners: Housing Forward, MacNeal Hospital, and others

Example Strategies:

- Coordinated services with other agencies
- Case management and wrap-around support services
- Co-located and/or onsite services
- Flexible Housing Pool
- Home visits
- Homelessness prevention efforts
- Medical respite
Data, analysis, and planning to inform health and housing initiatives

**Example Strategies:**

- Engaging people with lived experience
- Research into social ROI of housing investments
- Screening and diagnosis methods for housing (within social determinants of health screening and referral)
- Streamline data sharing protocols

**Example:** Data Matches between CAPriCORN, Cook County Health, and All Chicago

Ms. Keisha Wallace (pictured) recently moved into an apartment through the Chicago-Cook County Flexible Housing Pool, and her connection to the program was directly facilitated through the data match between Cook County Health and All Chicago.
Coordinated policy, advocacy, and legal aid

Example: Medical-Legal Partnerships (pictured: Health Forward/Salud Adelante)

Partners: Legal Aid Chicago (formerly LAF) and Lawyers’ Committee for Better Housing both have partnerships with hospitals and health clinics

Example Strategies:

- Coalition building around housing and health policy advocacy
- Development of shared legislative agenda
- Healthcare funding local community organizing
- Medical-legal partnerships (MLP) / Legal support for patients

Healthy, quality, accessible housing

Example Strategies:

- Accessible design, and partnerships between housing and health for residents with disabilities
- Health Action Plans for new developments
- Housing quality partnerships related to asthma triggers and/or lead

Examples

- Housing quality partnerships related to asthma and lead
- Health Action Plan - LUCHA’s Tierra Linda development, with IPHI, Landon Bone Baker architects, and Logan Square Neighborhood Association

Challenges in Housing and Health Partnerships

Existing constraints in healthcare and housing
• Different time frames between traditional healthcare treatment model and long term housing support
• Difficulty in maintaining momentum due to frequent hospital mergers and organizational restructuring
• Funding streams uncertain due to low Medicaid reimbursement rates
• Administrative barriers can pose challenges for serving both families and individuals

Housing by itself is necessary but insufficient
• Case management and wrap-around services (including mental health) are necessary to support residents, but difficult to fund and coordinate

Lack of strategy
• Many interventions end up short-term or pilots due to a lack of overarching partnership strategy/goals
• Lack of trusting relationships between stakeholders/sectors leads to duplicated and siloed efforts
• Inhibition of innovation due to fragmentation in capacity and funding for services among (and within) housing and healthcare

Elusive impacts on health (and healthcare costs)
• Challenge in quantifying health outcomes from housing strategies due to long time between intervention/outcome
• Difficult to estimate healthcare cost savings/ROI due to complicated cost/payment structures of healthcare
Opportunities and Potential Next Steps

Develop a cohesive strategy for partnerships between healthcare and affordable housing
● Both collective strategies and one-on-one project matches
● Clarify community development pipeline and landscape to facilitate healthcare investment
● Ensure more engagement of MCOs/health plans in strategy development
● Cultivate and support leadership by connecting change agents across sectors (Health Action Plans, Future of Housing Conference, etc.)

Improve data systems and data sharing to understand both need and ROI

Shared policy and advocacy opportunities
● To increase and preserve the supply of quality, affordable, healthy housing
● Promoting child, adolescent and family health through housing policy
● Making wrap-around services easier to fund through both state housing policy and Medicaid/healthcare reimbursement

Continue partnerships for permanent supportive housing and health
● Partner to increase the supply of permanent supportive housing
● Study demand for medical respite and the connection to permanent supportive housing
● Make sure to address needs for individuals and families

Develop/Refine housing diagnosis and referral tools
● Should connect to existing efforts like Flexible Housing Pool, social determinants screening, and medical-legal partnerships (MLPs)
Questions

1. What do you think are the most important roles for healthcare in housing and community development? (healthcare = hospitals, health plans/Medicaid, healthcare providers, etc.)

2. What can housing and community developers do to advance more partnerships?

3. What can IHC and IPHI do to best facilitate more partnerships?
Resources

- Enterprise Community Partners and Center for Outcomes Research and Education (2016). *Health in Housing: Exploring the Intersection between Housing and Health Care.*
Contact Information

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<tr>
<th>Organization</th>
<th>Key Informants</th>
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<tbody>
<tr>
<td>n/a</td>
<td>Alison Moore, Renee Roy</td>
</tr>
<tr>
<td>Alliance for Research in Chicagoland Communities at Northwestern</td>
<td>Jen Brown</td>
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<td>AMITA Alexian Brothers Housing and Health Alliance</td>
<td>Korrey Kooistra</td>
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<td>Bay Area Regional Health Inequities Initiative (BARHII)</td>
<td>Melissa Jones</td>
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<td>Center for Community Investment</td>
<td>Robin Hacke, Al</td>
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<td>Center for Health and Housing</td>
<td>Pete Toepfer</td>
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<td>Chicago Department of Public Health</td>
<td>Megan Cunningham, Ann Cibulskis</td>
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<td>Chicago Rehab Network</td>
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<td>Christine Haley, Leticia Reyes-Nash</td>
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<td>Betsy Benito</td>
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<td>Andy Geer</td>
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<td>Full Circle Communities</td>
<td>Joshua Wilmoth</td>
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<td>Mike Tomas, Debo'rah Davis</td>
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