At the Nexus of Health and Housing: Innovative California Approaches

March 2, 2017
10:30 AM – 12 PM Pacific
1:30 PM – 3 PM Eastern

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1. Choose your answer

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a) Individually
b) In a group of 2-5 people
c) In a group of 6-10 people
d) In a group of more than 10 people
CA4Health is a community of practice consisting of people and organizations working to advance chronic disease prevention and health equity in California. CA4Health will build regional partnerships, create opportunities for efforts to be leveraged, and facilitate coordinated actions that will enhance, expand, and elevate the participants’ work and efforts statewide.

https://ca4health.wixsite.com/peoplepowerchange
About the Audience: Work Sectors

- Govt. - City or County: 120
- Govt. - State: 114
- Health Care Provider: 45
- Advocacy: 34
- College/University: 28
- Government - Federal: 27
- Community Network: 25
- Health Plan: 20
- Other/No Affiliation: 15
- Business: 11
- Trade/Professional/Interest...: 10
- Foundation: 6
- Media/Public Affairs/Rel.: 5
- Other/Non-Profit: 4
- Research/Think Tank/Policy...: 2
- Dialogue4Health
Linda Wheaton, AICP
Assistant Director, Intergovernmental Affairs
California Department of Housing and Community Development

Website  www.hcd.ca.gov
Health and Housing

Linda Wheaton, AICP, Ass’t. Director, Intergovernmental Affairs
California Department of Housing & Community Development (HCD)

Romi Hall, Associate Director of Neighborhood Collaborations at East Bay Asian Local Development Corporation (EBALDC)

Tram Nguyen, Alameda County Public Health Department, Workgroup Coordinator

David Estrella, Director, Integrative Services, Health and Human Services Agency, County of San Diego

CA4Health Web Forum
March 2, 2017
Housing vs. Food

Of California’s roughly 6 M renter HHs,

Nearly 1/3 of them,

including >1/2 of Lower-income HHs,

and +/- 80% Extremely Low-income HHs

Pay >50% Income for Rent

- When housing costs are considered, CA’s poverty rate rises to 21.2%
Health and Housing

- Growing Evidence re: Health & Housing
- Health Lens Across Sectors – HiAP, HIA
- Fair Housing & Equity issues re: Unmet Housing Needs, Inequality
- Health Care Costs re: Homelessness
- Vulnerable Populations & Special Housing needs, e.g., seniors, disabled, farmworkers
- Healthy Housing, Green Building, & Substandard Housing Conditions
- Local Assistance for Supportive Housing
- Environmental justice issues re: land use & built environment
- Climate Change Impacts
Romi Hall, MPH
Associate Director of Neighborhood Collaborations
East Bay Asian Local Development Corporation

Website  www.ebaldc.org
The Healthy Neighborhoods Approach

At the Intersection of Community Development, Health, and Collective Impact

Romi Hall, MPH
Associate Director, Neighborhood Collaborations
2,046 homes, townhouses and apartments developed and owned by EBALDC

1,126 townhouses and apartments managed by EBALDC

304,072 square feet commercial space developed by EBALDC

182,000 square feet commercial space managed by EBALDC
HEALTH BEGINS IN THE NEIGHBORHOODS WHERE WE LIVE, LEARN, WORK AND PLAY.
HEALTHY NEIGHBORHOODS AS THE APPROACH
HEALTHY NEIGHBORHOODS AS THE APPROACH
San Pablo Area Revitalization Collaborative (SPARC)

Common Agenda: Residents and partners of the SPARC neighborhoods stabilize and equitably co-create together a safe, healthy, vibrant, and resilient neighborhood
SPARC PARTNERS

Sutter Health
We Plus You

Federal Reserve Bank of San Francisco
INC. MAY 20, 1914

LifeLong Medical Care
Health Services For All Ages

Citi Foundation

citi

CITY OF OAKLAND

PARTNERS IN PROGRESS

ST. MARY'S CENTER
Everybody needs a place

Enterprise

Alameda County Public Health Department
Celebrating Healthy People in Healthy Communities

The San Francisco Foundation

East Bay Asian Local Development Corporation
Building Healthy, Vibrant and Safe Neighborhoods

EBHO

HCEB

Housing Consortium of the East Bay

The Build Health Challenge

EAST BAY ASIAN LOCAL DEVELOPMENT CORPORATION

And more!!!
Housing
Ensure 40% of all housing is deeded, affordable housing

Community
Increase the number of friendly spaces by 25%
Identify and develop resident leaders

Health
Reduce ER/Hospitalization rates of residents
Increase resident self-efficacy around managing and improving blood pressure

Economy
Reduce commercial space vacancy by attracting anchor retail operations and supporting microenterprises
Connect residents to good paying jobs and asset building opportunities
Housing

Ensure 40% of all housing is deeded, affordable housing
SPARC Housing

• **SPARC Housing work group:**
  – CDC’s, nonprofit developers, social services, housing advocacy, and residents

• **Charged with creating a long-term plan:**
  – Housing Production and Preservation
  – Resident informed and feedback driven
  – Data-Driven
  – Utilizes the Area Specific Plan and align to other city processes and work happening
Creating a Data Driven Plan

- Developing a data-driven plan focus on production and preservation
  - Utilized the Area Specific Plan projected housing units
  - Reviewed other city, county, and community based reports to inform the plan
  - Identified area median income (AMI) mix, number of household by income and housing cost burden, housing stock characteristics, and current housing mix (market rate, naturally occurring affordable housing, and deeded affordable housing)
What SPARC Housing Learned

• Residents within the SPARC neighborhoods were at a high risk to being displaced
  – High percentage of renters (73%) vs. home ownership (23%)
  – Most of housing units were either single family homes or had under 4 units (67%)
  – More than half of residents were cost burdened (56%)
    • With nearly 31% of all households severely cost-burdened
Housing Units in SPARC Area
Current and Projected Growth by 2035

- Existing SPARC Housing: 3028 Units
- Existing Naturally Occurring Affordable Housing: approx. 1000 units
- Existing Affordable Housing: 957 units
- Market Rate Housing: approx. 1000 units
- New ELI/VLI Housing: 382 units
- New Low/Moderate Income Housing: 382 units
- New Unrestricted Housing: 376 units

1/3 production: <50% AMI
1/3 production: <100% AMI
1/3 production Market Rate

New Production: approx. 1140 Units
From Analysis to Refinement to Finalization

• From the initial draft, the group shared its work with different community groups.

• Residents identified the following gaps in the plan:
  – A higher need to address extremely low income residents and homelessness.
  – Continue to focus on opportunities for moderate income residents.
  – Opportunities home ownership.
  – Identified a need to vacant land and blighted and vacant housing.
Next Steps with the Plan

• **Revised the plan and Monitor the Pipeline**
  – Committed 20% of development to residents with 20% AMI
  – 300 units are in the pipeline and use Google Maps to track developments

• **City bond provides funds**
  – Recent passage of two bond measures provide the financing needed for the group to move on preservation strategies

• **Opportunity Site and Developer Identification**
  – Group start to develop list potential opportunity sites for development
  – Based on list start to identify and pair together other developers and housing resources/services

• **Focus on displacement**
  – Start to figure out how to work with other groups to further address displacement
SPARC ACCOMPLISHMENTS

**Housing**
- SPARC has a neighborhood endorsed housing affordability plan that was informed by HUD and neighborhood data and sets goals for housing production and preservation
- Close to 300 units in pipeline

**Community**
- We worked with 311 residents to implement 15 blight reduction projects

**Health**
- Launched two blood pressure clinics with 124 residents participating and looking to expand to three additional sites by year end

**Economy**
- Opening of neighborhood grocery store in Fall/Winter 2017
- Opened a neighborhood pop-up market for resident entrepreneurs and community to come together
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Policy Associate
Alameda County Public Health Department

Website  www.acphd.org
Housing and Health: A Focus on Alameda County

Presentation for CA4Health
March 2, 2017
Overview

- **Housing Priorities:**
  - Habitability
  - Tenant Rights and Protections
  - Truly Affordable Housing

- **ACPHD Strategies**
  - Place Matters
  - Health Officer & Staff Testimony

- **Project Examples**
  - Displacement Report
  - Advancing equitable policies
  - Healthy Development Guidelines
How Housing Impacts Health

**How Housing Affects Health**

**Housing Issues**
- Housing cost burden
- Overcrowding
- Substandard housing conditions
- Housing instability
- Evictions
- Displacement
- Homelessness

**Social Factors**
- Financial instability
- Poorer educational outcomes
- Increased commute times
- Neighborhood instability
- Disruption of social networks & cultural supports
- Difficulty attending school & work

**Health Outcomes**
- ↑ chronic stress
- ↑ heart disease
- ↓ money for necessities (food, transportation, medical care)
- ↑ in missed appointments due to housing issues
- ↑ respiratory infections (e.g., tuberculosis)
- ↑ headaches, fever, skin disease, asthma
- ↑ hospitalization
- ↑ trauma
- ↓ mental health
- ↓ child development

↑ morbidity & mortality
Concentrations of Health Inequities

All-Cause Mortality

Age-Adjusted Rate per 100,000
- >1.25X county rate (>749.8)
- 1.01X-1.25X county rate (599.9-749.7)
- 0.76X-1.00X county rate (449.9-599.8)
- ≤0.75X county rate (≤449.8)
- No data or data suppressed

Alameda County rate: 599.8/100,000

Source: CAPE, with data from Alameda County vital statistics files, 2012-2014.
Habitability and affordability

Asthma Emergency Department Visit Rate

Age-Adjusted Rate per 100,000

% Households Overcrowded

0 200 400 600 800 1,000 1,200

0.0-2.9% 3.0-4.6% 4.7-12.9% 13.0%+

*CAPE, with data from the California Office of Statewide Health Planning and Development, 2012-2014, and American Community Survey 2014 5-Year Files
OAKLAND
Owners: 43%
Renters: 57%

ALAMEDA CO
Owners: 56%
Renters: 44%

Data: American Community Survey.
Wage Gap

$2,886
median rent in Oakland

$9,620
monthly household income
needed to avoid housing cost burden

4.4 full time jobs
@ Oakland minimum wage
needed to afford median Oakland rent

$3,035
median rent in Alameda County

$10,117
monthly household income
needed to avoid housing cost burden

5.8 full time jobs
@ CA minimum wage needed to afford median rent in Alameda County

Data: Zillow Rent Index and American Community Survey. (Updated Oct. 2016)
ACPHD’s strategy

• Building a structure: Place Matters policy workgroup

• Building our case: Housing and Health

• Building staff capacity to share experience and influence policy
Place Matters: Housing Workgroup

2006
- Place Matters begins
- ACPHD comments on displacement of elderly Chinese Americans

2008
- Life & Death report
- Place Matters Workgroups
- Partnership with CJJC on water shutoffs

2009-10
- CJJC & ACPHD reports on foreclosure & health

2012
- Vacant Property Registration
- Linked Banking Ordinance

2013
- ACPHD supports push for more resources for Oakland Code Enforcement

2014
- Tenant Protection Ordinance
  - 1st improvements to Oakland’s rent ordinance in 10 years
  - Development without Displacement

2015-
- Focus on rent stabilization
- Habitability
- Alameda County Housing Bond
Housing Survey for staff

- Public Health (ACPHD) staff (n = 188) and Behavioral Health Care Services (BHCS) staff & contractors (n = 167)

<table>
<thead>
<tr>
<th>What housing issues are your clients or residents you work with facing? (check all that apply)</th>
<th>BHCS (n = 72)</th>
<th>ACPHD (n = 93)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Raised rents and/or unaffordable housing</td>
<td>93.06%</td>
<td>88.17%</td>
</tr>
<tr>
<td>Can’t find housing (e.g. discrimination, landlords not accepting vouchers, no available units)</td>
<td>91.67%</td>
<td>81.72%</td>
</tr>
<tr>
<td>Eviction (at risk of being evicted or already evicted)</td>
<td>86.11%</td>
<td>72.04%</td>
</tr>
<tr>
<td>Dilapidated conditions (e.g. mold, vectors, lack of heat, repairs not done)</td>
<td>75.00%</td>
<td>58.06%</td>
</tr>
<tr>
<td>Displacement (e.g. people moving from their neighborhoods due to housing issues and/or rising housing costs)</td>
<td>69.44%</td>
<td>68.82%</td>
</tr>
<tr>
<td>Other</td>
<td>45.83%</td>
<td>27.96%</td>
</tr>
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Impact on Clients

For the others who are not so lucky, they are evicted/displaced due to their TB (tuberculosis) diagnosis. With how tough it has been to find affordable housing in Alameda County in general, these low-income patients become homeless and suddenly find themselves having nowhere to call home.

—Tuberculosis Control Unit

“...we have clients who were on track at some point in their lives, but due to a poor economy, unexpected health or family crisis, lost their footing when they lost their job and/or housing. These clients are the ones who tend to have more situational mental health illnesses such as anxiety and/or depression, and if these resolved, would also notice and improvement in symptoms. But, because of the severe housing crisis in the Bay Area, these issues are not getting resolved, and as time goes on, their depression and anxiety symptoms tend to worsen.”

—BHCS Contractor

Homeless seniors who do not have family members willing to house them just begin to live in places not meant for human habitation.

— BHCS Contractor

Amy Sholinbeck of Asthma Start conducts a home visit.

Photo Credit: Oakland Tribune
Impact on Ability to Deliver Services

“When we spend all of our available staff/clinician time pulling our clients out of housing crises to prevent homelessness which send them on a downward spiral (and sometimes re-hospitalization or jail), rather than helping them find jobs, go to school, or engage in more positive, self-esteem building, hope engendering behaviors, then definitely housing issues interfere with our ability to deliver program services as intended.

— BHCS Contractor, Prevention and Recovery in Early Psychosis

Families cannot attend to their children's mental health needs when they are struggling to obtain basic needs - food and shelter. It definitely impacts our ability to get the outcomes we would like, and it means that our staff are having to become housing experts in order to help clients manage this crisis.

— BHCS Contractor
Lincoln Families

“When families are struggling with survival issues like having a roof over their head, it is difficult for them to focus on other issues like caring for their babies prenatally, healthcare, or supporting their babies/children to progress along their normal developmental trajectory. Many of the children in families with these housing stresses are falling behind in such areas as gross motor function, language development, social skills, etc. I support families who may be having mental health concerns, and it is difficult to help them connect with much-needed mental health services when life is focusing on survival day-to-day.”

—Family Health Services
Impact on Staff

“The rent has gone up so much that we don’t have money left to make it through the week. I’m always stressed out and late on the rent.”

— BHCS

“We have had over 10 staff leave this year due to being priced out or evicted from their homes.”

— BHCS Contractor

“Drastically increased rents have displaced clients as well as staff that work for some of the agencies that we fund...I know some of my coworkers have been displaced by increased rent and cost of living out of Oakland or are living paycheck to paycheck because of increased cost of living.”

— ACPHD

“Staff often has to move to outlying geographical areas (Tracy, Vallejo, Modesto) and have difficult commutes with costly impact personally (accidents, sleep, loss of time with family) and professionally (late, loss of contact with community).”

— ACPHD
Housing Brief & Survey Summary

http://www.acphd.org/media/425883/housing-brief-june-2016.pdf

Improving Housing and Health for All: Principles for Policy Recommendations

- Protect existing residents from losing their housing
- Repair and preserve existing housing
- Produce new housing for all income levels
- Remove barriers to housing access
ACPHD Staff in Action

“County Health Director: Oakland's Housing Crisis Is a Prescription for Sicker, Shorter Lives”

• http://www.eastbayexpress.com/SevenDays/archives/2016/08/30/county-health-director-oaklands-housing-crisis-is-a-prescription-for-sicker-shorter-lives

“Public health problems in Oakland linked to housing crisis”

CJJC: Development without Displacement report

• Building on existing partnership with CJJC
• Health framing of gentrification, and identify and advance public policy solutions
Tenant protections

- TRUST Clinic staff testified for Oakland’s rent adjustment ordinance, 2014
- Asthma Start staff testified for the Tenant Protections Ordinance 2014
- Asthma Start staff testified for Proactive Rental Inspections in 2016
Community-Driven Healthy Development
David Estrella, JD
Director, Integrative Services
Health and Human Services Agency
County of San Diego

Website  www.sandiegocounty.gov
To improve outcomes for key subpopulations and reduce the historical separation between housing, human services and health systems.

- County Housing Authority part of Health and Human Services Agency
- Created H3 team (Health, Housing and Human Services)
- Convene Housing Core Team
- Created a Justice Coordinator Position
OBJECTIVES

- Clarify roles of each HHSA service/program
- HHSA/HCDS resources should be more readily available for clients.
- Continuum of services should account for root causes of homeless and integrate systems to address chronic poverty, rent burdened population
- Define and bring to the table the different parts of HHSA and all capabilities be brought to bear for target population.
- Integrate Strategies that address social determinants of health through housing
- Leverage full array of housing resources with HHSA services to meet the needs of homeless and at-risk homeless.
KEY PROGRAMS

- Project One for All
- Whole Person Wellness
- No Place Like Home
Regional Initiative for Outreach, Treatment & Housing

Policy
Serve all individuals experiencing homelessness with Serious Mental Illness (Countywide estimated # of Homeless SMI 1,250)

Funding
Mental Health Services Act (MHSA)
Mainstream Housing Resources

Approach
Partnership with local housing authorities to allocate vouchers specifically for this population
COMPONENTS

Outreach and Engagement

Treatment

Housing

Performance Measurements
OUTREACH AND ENGAGEMENT

Outreach workers to engage people in services and housing:
TREATMENT SERVICES

Provide wraparound treatment services and connect homeless with SMI to housing by adding capacity for an additional 1,250
HOUSING

Partnering with housing authorities, cities, and the private sector to establish housing region-wide
Regional Housing Provider Partners have identified over 1,000 vouchers for Project One For All, including 344 vouchers which have recently been allocated by the County through the Section 8 Housing Choice Voucher program.
PROJECT ONE FOR ALL

HOUSING

Partnering with housing authorities, cities, and the private sector to establish housing region-wide
PROJECT ONE FOR ALL

PERFORMANCE MEASURES

CONNECT TO PROJECT ONE FOR ALL THROUGH OUTREACH AND ENGAGEMENT

RECEIVE TREATMENT

BUILD RELATIONSHIPS

DEVELOP SELF-SUFFICIENCY

CREATE STABILITY

REDUCE

PERF CALLS AMBULANCE RIDES

HOSPITAL STAYS JAIL DAYS

OBTAIN HOUSING
PATH TO SUCCESS

- Local support Collective Impact Team
- POFA dedicated Navigators to coordinate leases with Landlords
- Bridge Housing to stage Participants before lease-up of vouchers
- Landlord Incentive Funds
- Set-Aside of Permanent Affordable Units for POFA Participants
LINDA WHEATON, AICP
Assistant Director, Intergovernmental Affairs
California Department of Housing and Community Development

Website: www.hcd.ca.gov
Expanding access and improving rental assistance programs and other affordable housing programs are key strategies.
Homelessness – A Health & Housing Crisis

Whole Person Care (WPC) Pilots:
5-year program authorized under Medi-Cal 2020 Section 1115 Waiver

<table>
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<tr>
<th>Goal</th>
<th>Activities</th>
<th>Funding</th>
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<tr>
<td>• To test locally-based initiatives that will coordinate physical health, behavioral health, and social services for beneficiaries who are high users of multiple health care systems and continue to have poor health outcomes.</td>
<td>• Pilots will identify target populations, share data between systems, coordinate care in real time, and evaluate individual and population health progress.</td>
<td>• Up to $1.5 billion in federal funds available to match local public funds.</td>
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For more information, Google “DHCS Whole Person Care Program”
No Place Like Home (NPLH) Program

MHSA funding to finance a $2 billion bond for permanent supportive housing

• Permanent Supportive Housing to improve quality of life for people who are homeless and experience mental illness

• “Housing First” Approach

• Housing as a health intervention, with Continuity of Care

• Flexible, Voluntary, and Individualized Services

• Serve most vulnerable and frequent users of our public systems (jails/prisons, emergency room visits/in-person stays)

• Housing Projects in Proximity to Community Services

For information - http://www.hcd.ca.gov/grants-funding/active-funding/nplh.shtml
Green Healthy Affordable Housing

Address health related issues, e.g., indoor air quality, indoor moisture control, bicycle parking, water use, etc.
Q&A Feature

1. Type your question in the Q&A box
2. Select **Ask: All Panelists**
3. Click **Send**
Thank you to our panelists!

Linda Wheaton
Romi Hall
Tram Nguyen
David Estrella
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powerchange

http://buildhealthyplaces.org
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Dialogue4Health
At the Nexus of Health and Housing: Innovative California Approaches

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