What has been happening to our health?

Number and Percentage of U.S. Population with Diagnosed Diabetes, 1958-2015

- Percentage with Diabetes
- Number with Diabetes

Year

Number with Diabetes (Millions)

Percentage with Diabetes

What has been happening to our health?


- Health Spending per Capita
- Massachusetts

SOURCE: Kaiser Family Foundation’s State Health Facts.
What has been happening to our health?

Premature death rates per 1,000 by T stop, 1999-2001

- If you get off at Arlington: 2.6
- If you get off at Fenway: 4.3
- If you get off at Mattapan: 4.4
- If you get off at Maverick: 4.4
- If you get off at Dudley Square: 5.7

HEALTH starts—long before illness—in our homes, schools, and jobs.
Where you live affects your health

Factors that influence community health and wellness

- 20% Healthcare
- 20% Genetics
- 60% Social, Environmental, Behavioral Factors

Planning decisions influence the 60%

Source: US County Health Rankings
What does this mean for planning?

Like roads and bridges, affordable housing is a long-term asset that helps communities and families thrive.

By increasing the supply and price diversity of homes, we lay the foundation for a stable, resilient community infrastructure.
Health Conditions Impacted

Asthma
Allergies
Elder Falls
Mental Health
Childhood Brain Development
Smoking
Cardiovascular Disease

Mental Health
Malnutrition
Childhood Development
& Lifetime Health
Substance Use

Cardiovascular Disease
Depression
Mental Health
Respiratory Disease
Chronic Disease
How can we measure this?

- Hospitalizations/Health Care Usage/Costs
- Prevalence/Quantity of Conditions
- Health Behaviors
- Access & Environment
What can we look at, overall:

- **Hospitalizations**
  - Asthma
  - Chronic Obstructive Pulmonary Disease
  - Substance Abuse
  - Cardiovascular Disease
  - Mental Health
  - Obesity
  - Diabetes
  - Blood Lead Levels
  - Depression
  - Excessive Drinking
  - Smoking
  - Consuming 5+ Vegetables/Day
  - Youth School Performance
  - Social Isolation

- **Conditions**

- **Behaviors/Risk Factors**
Example of integrating health in our plans and policies
Top Issues Overall

• Hospitalizations
  - Asthma
  - Chronic Obstructive Pulmonary Disease
  - Cardiovascular Disease
  - Substance Abuse
  - Diabetes
• Conditions
  - Mental Health
  - Obesity
  - Blood Lead Levels
• Behaviors/Risk Factors
  - Depression
  - Excessive Drinking
  - Smoking
  - Consuming 5+ Vegetables/Day
  - Youth School Performance
  - Social Isolation
Housing Location Priorities

- Social Isolation
- Climate Change & Infectious Disease
- Lack of Access to Goods and Services

Community Walkscore

67 out of 100

Hospital Stays per 10,000 People 65 Years and Older

406 vs 354
Housing Quality Priority: Lead

Proportion of Housing with Lead

69% vs 71%

Screening Rate for Children < 3

76% vs 77%

Blood Lead Levels > 3.7 per 1,000 children under 3

Lower than State
Priorities to Focus on in Arlington

1. Unintentional falls among older adults
2. Asthma hospitalizations for youth ages 0-19
3. Near roadway pollutant exposure from heavily traffic roadways
4. Substance abuse hospitalizations
5. Risk of social isolation among older adults
Housing Prescriptions

Community investments to reduce clinical costs

Adapted from Dr. Megan Sandel/BMA
Health and Community Development convergence continues to grow

- Shift from fee-based care to value-based care
  - Paid for outcomes, not service delivery

To read more: http://journal.lww.com/jphmp/toc/publishahead
Clinical to Community Investments

1. Shift from fee-based to value-based care (i.e., pay for outcomes not service)
2. Investments outside of hospital settings
3. Homes and housing stability a key target
   1. Key factor in reducing costs

LONG-TERM COSTS OF UNSTABLE HOMES TO THE HEALTH SYSTEM ARE $111 BILLION*

- Maternal health conditions for women ages 18 - 44
  - $76.8 Billion over ten years
    - Includes increased costs for hospitalizations, ambulatory visits, dental procedures, mental health care, and medications

- Child health conditions for children under 18
  - $34.3 Billion over ten years
    - Includes increased costs for hospitalizations, ambulatory visits, dental procedures, medications, and special education services

Total cost: $111 Billion over ten years
Community to Clinical Partnerships

Health Starts at Home Program Intervention
Theory of Change

Advancing families from unstable housing to stable housing can improve the health of children

- Stabilize Housing
  - No longer spending >50% of household income on housing
  - No longer moving 2+ times in past year because of economic reasons
  - No longer living in overcrowded or doubled up conditions
  - No longer being behind on rent, defined as being significantly behind on rent 2 or more times in the past year and currently behind on rent

- Stable Access to Essential Resources
  - Healthcare
  - Nutritious food
  - Heat/utilities
  - Schools and other community anchors
  - Social networks

- Improved Health (Intermediate)
  - Increase in routine care and prenatal care
  - Maintenance or increase in preventative medical visits e.g. immunizations
  - Reduction in ER visits/hospitalizations
  - Improved emotional and behavioral outcomes for both children and parents/guardians

- Improved Health (Long-term)
  - Decrease in chronic health conditions e.g. asthma and type 2 diabetes
  - Reduction in ER visits/hospitalizations
  - Improved emotional and behavioral outcomes for both children and parents/guardians

Target population: low-income, housing insecure children 0 – 11 years of age (at start of program) and their families within TBF's catchment area
• The **Duke-Durham Neighborhood Partnership Initiative**, which has invested more than $2 million in an affordable housing loan fund to promote home ownership and community stabilization.

• **Kaiser Permanente** commits to help address the need for affordable housing, a major social determinant of health, through a $200 million investment focused on developing affordable housing and mitigating homelessness.

• The **Community Investment Program (CIP)**, a vehicle for funding housing and community development that is operated by **Dignity Health**, issued a $3.1 million loan to construct a transit-oriented complex in central Los Angeles. The Campus at LA Family Housing will provide 50 permanent and 450 transitional housing units for individuals and families experiencing homelessness.
From Homes to Health Community Design

- Complete Streets and Vision Zero
- Parks, Recreation, and Open Space
- Climate Resiliency
- Local Public Health Infrastructure
- And more!
Thank you

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