MONTANA HEALTHY COMMUNITIES: NEW KNOWLEDGE. NEW PARTNERS. BETTER SOLUTIONS.

DAVID ERICKSON, FEDERAL RESERVE BANK OF SAN FRANCISCO

David.Erickson@sf.frb.org
Health ≠ Health Care
CONTRIBUTIONS TO PREMATURE DEATH

- Behavioral Patterns: 40%
- Genetic Predisposition: 30%
- Environmental Exposure: 5%
- Social Circumstances: 15%
- Health Care: 10%
- Health Care: 10%
HEALTH = EDUCATION

Educational Attainment

- Less than high school
- High-school graduate
- Some college
- College graduate

LIFE EXPECTANCY AT AGE 25

<table>
<thead>
<tr>
<th></th>
<th>MEN</th>
<th>WOMEN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than high school</td>
<td>47.1</td>
<td></td>
</tr>
<tr>
<td>High-school graduate</td>
<td>51.4</td>
<td>57.0</td>
</tr>
<tr>
<td>Some college</td>
<td>52.3</td>
<td>58.1</td>
</tr>
<tr>
<td>College graduate</td>
<td>56.4</td>
<td>60.3</td>
</tr>
</tbody>
</table>
HEALTH = INCOME

Family Income (Percent of Federal Poverty Level)
- <100%
- 100–199%
- 200–399%
- ≥ 400%

Percent of children, ages <17 years, with less than very good health:
- 6.9%
- 10.6%
- 19.0%
- 30.4%

Percent of children, ages 10–17 years, who are overweight or obese:
- 21.9%
- 28.7%
- 37.3%
- 44.7%
ACROSS ALL RACIAL/ETHNIC GROUPS

Family Income (Percent of Federal Poverty Level)
- <100%
- 100–199%
- 200–399%
- ≥400%

PERCENT OF PERSONS WITH POOR/FAIR HEALTH*

- BLACK, NON-HISPANIC: 23.9%
  - <100%: 18.3%
  - 100–199%: 11.2%
  - 200–399%: 6.8%
  - ≥400%: 6.6%

- HISPANIC: 19.2%
  - <100%: 15.6%
  - 100–199%: 10.3%
  - 200–399%: 6.4%
  - ≥400%: 6.4%

- WHITE, NON-HISPANIC: 20.9%
  - <100%: 14.8%
  - 100–199%: 7.7%
  - 200–399%: 4.0%
  - ≥400%: 4.0%
...BUT POVERTY IS CONCENTRATED

PERCENT OF PERSONS IN POVERTY, 2011

Racial or Ethnic Group
- Black*
- Hispanic
- Asian
- White, non-Hispanic

<table>
<thead>
<tr>
<th>Group</th>
<th>All Persons</th>
<th>Children (≤17 Years)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Black*</td>
<td>27.6%</td>
<td>38.6%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>25.3%</td>
<td>33.7%</td>
</tr>
<tr>
<td>Asian</td>
<td>12.3%</td>
<td>13.0%</td>
</tr>
<tr>
<td>White, non-Hispanic</td>
<td>9.8%</td>
<td>11.9%</td>
</tr>
</tbody>
</table>
IN CLIMBING THE INCOME LADDER, LOCATION MATTERS

RAJ CHETTY, ECONOMIST

The chance a child raised in the bottom fifth rose to the top fifth

- 35%
- 20%
- 15%
- 10%
- 4%

The top fifth is equal to family income of more than $70,000 for the child by age 30, or more than $100,000 by age 45.

In areas like Atlanta, upward mobility appears to be substantially lower than in any other rich country.
3 miles could equal up to a 13-year life span difference
IN DETERMINING YOUR HEALTH...

94131 >
PEOPLE GET SICK BECAUSE OF THEIR SOCIAL AND PHYSICAL ENVIRONMENTS

- Schools
- Grocery Stores
- Housing
- Jobs
- Transportation
- Parks and Playgrounds
WHAT DOES COMMUNITY DEVELOPMENT DO?

- Builds high-quality, service-enriched affordable housing
- Supports small businesses
- Financing for community facilities — charter schools, grocery stores, clinics, shelters, child care, community centers
- Coordinates and harmonizes multiple funding streams — grants, loans, investors
- Facilitate cross-sector interventions building on local knowledge & community input
$120-150 BILLION ANNUALLY

- $18 billion government subsidy, e.g. Low Income Housing Tax Credit (LIHTC), New Markets Tax Credit (NMTC), Community Development Block Grants (CDBG)
- $100-$120 billion CRA-motivated loans and investments
- Socially motivated investors
WE ARE MAKING PROGRESS
“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, ROBERT WOOD JOHNSON FOUNDATION

WHATWORKSFORAMERICA.ORG
STATE OF THE ART

- Trust and buy-in
- Cross-sectoral
- Place-based
- Data-driven
- Backbone organization
PROGRESS TOWARD COLLABORATION

RWJF Commission to Build a Healthier America

OPPORTUNITY FINANCE NETWORK

Health Affairs

PEDIATRICS

SUCCESS MEASURES

NeighborWorks AMERICA

SOCAP HEALTH

June 25-26, 2014 The New York Academy of Medicine - New York, NY

CREATING THE MARKET THAT VALUES HEALTH

The Way to Wellville

five places. five metrics. five years.

HOW HOUSING MATTERS
New Funds Flowing to Population Health

- Bank Capital
  - Healthy Futures Fund
  - Healthy Neighborhoods Equity Fund
  - Strong Families 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
SCOPE OF THE PROBLEM
THE PROBLEM IS ENORMOUS

3,570 Census tracts have poor populations above 40%

20.4 million Americans live in deep poverty

80% OF COUNTIES IN AMERICA HAVE FALLEN BEHIND THE LIFE EXPECTANCY AVERAGE OF THE WORLD’S TOP 10 COUNTRIES

1,700 American high schools have dropout rates above 40%
WE NEED
SYSTEMS CHANGE
The future is here. It’s just unevenly distributed....

-William Gibson
DATA:
WE ALL NEED TO USE THE SAME COMPASS
POLICY:
BREAK DOWN SILOS AND ROW IN THE SAME DIRECTION
FINANCE: CREATE A MARKET THAT VALUES HEALTH
RESOURCES

Investing in What Works for America’s Communities
whatworksforamerica.org

What Counts: Harnessing Data for America’s Communities
whatcountsforamerica.org

Build Healthy Places Network
buildhealthyplaces.org

Partners in Progress
partnersinprogress.org