

The Role of Community Health Centers in Health Impact Assessments:
One organizer's account of a HIA's impact on her community

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Background and Context

In the spring of 2014 two Community Organizers from North Country HealthCare, a community health center in Flagstaff, AZ, became aware of a proposed project to build luxury student housing in a location which was currently the home of over 200 low-income individuals. Coming from a community health center and dedicated to working to build community capacity and improve health outcomes these Community Organizers saw an opportunity and decided to work with a local neighborhood association, residents of a very low income mobile home park, an independent Health Impact Assessment consultant, and a variety of other community stakeholders to conduct Flagstaff, Arizona's first Health Impact Assessment.

To discuss the role of Community Health Centers in Health Impact Assessments and other health policy work we first need to understand what CHCs are and the role they are crafted to play in the community. Community Health Centers were first created in the 1960s as part of President Linden Johnson's War on Poverty, heavily influenced by the Civil Rights Movement, as a mechanism to address health, income, and opportunity disparities in low-income communities. Community Health Centers (CHC) are non-profit health clinics in low-income communities that offer culturally appropriate, affordable services, wrap-around care, and create job opportunities for community residents.

North Country HealthCare is one such CHC in Flagstaff, AZ, within which are several community health outreach programs, including Hermosa Vida (A Beautiful Life). Hermosa Vida was funded by a Kresge Foundation grant in 2010 with the intention to positively affect community health outcomes in the long run by reducing barriers for residents to access healthy resources, in part, through promoting healthy policies. Hermosa Vida's policy work included a concerted Health in All Policies (HiAP) campaign where Hermosa Vida staff worked to outline the connections between housing, transportation, education, and other determinants of health and promoted Health Impact Assessments (HIA) as a tool to illustrate these connections. It was through this work that Hermosa Vida got involved in organizing around a HIA on the proposed student housing development.

In the fall of 2013 Hermosa Vida Community Organizers began working with residents of the Arrowhead Village mobile home park in La Plaza Vieja neighborhood with the intent of improving health in one of the lowest income neighborhoods in Flagstaff. It didn't take long before the Organizers became aware of a critical neighborhood issue that would result in Arrowhead Village residents being evicted from their homes. Hermosa Vida learned shortly thereafter of a proposed housing development which, if approved, would displace all residents of the mobile home park to make room for a new off-campus luxury student housing development in its place.

Hermosa Vida was compelled to help, but was hesitant. After all, what business does Hermosa Vida, a healthy lifestyles promotion project based in a Community Health Center have getting involved in housing issues? Our answer: Housing affects health.

Over the next few months Hermosa Vida Community Organizers helped organize Arrowhead Village residents and community members to engage in every possible public process related to this student housing development, known as The Standard. Hermosa Vida Community Organizers, Arrowhead Village residents, La Plaza Vieja Neighborhood Association (LPVNA), and community members all shared their stories with the media, attended public meetings, worked to bring in more members of the broader community, and met with local City staff and elected officials to discuss options and alternatives.

This story quickly became a highly politicized one of “good for the economy” vs “gentrification and possible eviction”. Add to that a context of a development-friendly City Council in a small university mountain town in Arizona, and pretty soon Arrowhead Village residents, LPVNA, and the many community members who did not support the development of The Standard were all branded as “radical” and “political”, as were the Hermosa Vida Community Organizers working alongside them. The organizers had worked hard to maintain a reputation as neutral builders of community capacity to address health issues, and being pulled into the political sentiments and power dynamics of this issue had the potential to jeopardize that reputation...

At this point Hermosa Vida sought a way to help the community collect and articulate their ideas in a way which could be presented to decision-makers and other community members with more perceived professionalism, objectivity, and scientific backing. It was at this point that Hermosa Vida Community Organizers began exploring the idea of conducting a Health Impact Assessment for this proposed project. With support from North Country HealthCare administration, Hermosa Vida took the idea to an independent HIA practitioner to ask if an HIA would even be possible so late in the process. The HIA consultant did inform us that HIAs are “not intended to fight a project or take a stand for/against, but to present an unbiased, well researched perspective on the potential effects of a proposed project and present solutions to enhance positive health outcomes.”

Perfect!

Arrowhead Village/ The Standard HIA

In meeting with the HIA practitioner, Hermosa Vida discussed the timing and ability of this HIA to inform a decision in this case. Hermosa Vida discussed the fact there would be very few resources to work with (i.e. time or money) and the project in question was already highly politicized. Ultimately, it was decided that a Rapid HIA model would be a good fit, and with the proposed project going before Planning & Zoning Commission and City Council in just a few months there was a critical window of opportunity to affect the decision.

In addition to resource challenges, the organizers were faced with the difficulty of educating potential stakeholders about what an HIA is and is not, how critical their involvement was, and engaging them in a

process which was not designed to specifically support an outcome they desired in a time when almost everyone was struggling with burn-out and overwhelm from 7+ months of ongoing process.

The stakeholders Hermosa Vida was working to educate and engage in the HIA process included Arrowhead Village residents and LPVNA representatives, elected officials, City staff, and a variety of other community members and community groups. Hermosa Vida Community Organizers worked hard during this stage to recruit and engage stakeholders for the Scoping stage, all the while keeping in mind a very tight timeline.

The Scoping stage of the HIA consisted primarily of two meetings: one held at the LPVNA and one at a local church with Arrowhead Village residents. This stage and the results that emerged are detailed in the HIA report. The purpose of meeting with these two stakeholder groups separately was for the sake of scheduling, language barriers (all meetings with Arrowhead Village residents needed to be conducted in English/Spanish with simultaneous interpretation), and to focus our efforts because it had become clear that the primary concerns of LPVNA and Arrowhead Village residents, while both relevant, were not entirely the same.

Overall, it was in the Scoping meetings when the HIA began to build traction in our community; LPVNA, Arrowhead Village residents, and other community members and groups who participated in the HIA began to understand the process, feel heard, and see how many other people shared their same concerns. In addition to feeling heard, the Scoping process was extremely valuable in helping participants articulate more abstract concerns of displacement, degradation of neighborhood character, and social cohesion as valid and related to overall health outcomes. This could be one of the most valuable outcomes of this HIA process.

Throughout this process the countdown to the first public meeting was ticking away and the Hermosa Vida Organizers were working hard behind the scenes to continue the education process. Hermosa Vida wanted to ensure that once this HIA was completed it would be utilized, read, and regarded with as much weight as any other documents submitted regarding The Standard. The Organizers also worked with their many contacts throughout the community to gather information and conduct research to further elucidate the concerns voiced in the Scoping meetings.

A few weeks before The Standard proposal was scheduled to go before the Planning & Zoning Commission, Hermosa Vida held a meeting for stakeholders to generate the HIA recommendations for mitigation. Again, the details of this are outlined in the final HIA document, but this meeting was pivotal because it was here where HIA participants realized they were the ones coming up with the solutions. For many, this was the first time they were being asked what they wanted instead of being told what to expect, and for most this was the first time they felt empowered to state their wishes-- especially to people with power. As HIA practitioners know, explicitly outlining recommendations for mitigation in a HIA creates a direct line of communication between the community and decision-makers; this was a novel experience for many participants.

Ultimately, a brief letter version of the HIA was submitted to City staff for incorporation in the Planning & Zoning packet for this project alongside all materials from the developer and public comment. The

decision-makers now had a well-researched, community vetted document which provided an alternate perspective from those generated by the developer or the City.

In June 2014, 10 months after first hearing of the proposed student housing development and impending displacement of Arrowhead Village residents, The Standard proposal went in front of Planning & Zoning Commission (P&Z). Previously, Flagstaff's P&Z had generally approved almost every project that came before them, and on this night City Hall was packed! This was the first moment of truth for the HIA: would anyone even acknowledge all the time, work, and research that had gone into this report?

Throughout the night there were several dozen speakers commenting during public participation, almost all of them against The Standard, many of whom cited numbers, research, data, and recommendations from the HIA! The HIA was not only used at several points during public participation but was also brought up during P&Z discussion. Ultimately P&Z unanimously voted against the proposed project (very rare) and a few weeks later the developer withdrew their proposal at a City Council meeting.

Looking Forward, Lessons Learned, and the Role of CHCs in HIAs

It has now been 6 months since the withdrawal of the proposal. What, if anything, have been the long-term impacts of this HIA in our community?

While Hermosa Vida cannot claim, or know, that the HIA had a definitive role in affecting this decision, we do consider this process a success, despite the challenges. This HIA process allowed us--pushed us even-- to work with a broad range of community members, elected officials, City staff, and others and educate them on HIAs, an opportunity we may not have had otherwise. This HIA education came hand in hand with education on determinants of health and Health in All Policies, all of which will serve as valuable seeds in the long run. The HIA was incorporated into the P&Z and Council packet and cited during public comment. Throughout the HIA process Arrowhead Village residents and other stakeholders felt heard, validated, and had a unified platform for making recommendations. And every time Hermosa Vida was asked "why are Community Organizers from a CHC working on housing?" we were given an opportunity to talk about the connection between housing and health in a real (not abstract) way. For all of these reasons this HIA process was a success as much or more as the final outcome.

Our challenges of time, money, stakeholder fatigue, and HIA education should all be easier in the future, now that the path has been paved. That is not to say these challenges won't exist at all, because they will (for every HIA), but the first one is sure to be the most challenging.

As Community Organizers working for a CHC, however, we are used to these kinds of challenges and working on this HIA was a refreshing change and exciting new tool. More traditional organizing strategies include house meetings, coalition building, media campaigns, rallies, marches, sit-ins, and other similar activities with Community Organizers acting as a neutral organizing body. Many of these strategies have been shown to be successful in creating change from the grassroots, but the perception of those participating is easily slanted to one of radical activism rather than substantiated even-footed

negotiation. Health Impact Assessments, even for highly political projects such as the one we worked on, have so much potential to change this dynamic.

Our HIA brought together such diverse stakeholders we were forced to learn to speak and listen to each other in language we could all understand. Where activism tends to turn campaigns into an “us vs them” battle, bringing an HIA into ours opened the lines of communication between the community and the decision-makers. Having a written, researched document with a standardized procedure gave credence to the voices of everyone involved, including us as organizers. This altered perception was one of rationality and a willingness to negotiate, which was not how we were being perceived at the start of the campaign.

As Community Organizers, we were grateful for the opportunity to use the HIA as a tool and for the flexibility in our funding/positions to explore the use of HIA in the case of Arrowhead Village. Our role in this HIA was organizing, supporting, and educating, as well as sharing and promoting the HIA after it was completed. Our immediate goals in bringing this HIA to Flagstaff were to give the community a voice and a way to articulate their needs, and to give us, as Community Organizers, a platform for organizing which kept our working reputations intact. For the most part we accomplished each of these goals.

Our long-term goals for this HIA included raising awareness of the connection between housing/environment and health, influencing upstream causes of poor health in our community, and promoting future HIAs and, eventually, HiAP in our community. CHCs do have a role here in providing extra-clinical programs and support for low-income residents; they also tend to have closer ties and stronger relationships with their communities than local health departments (LHD). CHCs originated from the recognition that working to affect health without addressing the rest of a person’s environment is futile, however, CHCs often lack capacity or funding for true primary prevention and policy. In lieu of other organizations taking the lead (LHD’s perhaps?), CHCs are a good alternative as they have flexibility (pending funding) and promoting HIAs/ health policy is consistent with their mission and values to affect upstream health through meaningful, community driven initiatives.