



ANCHORS IN RESILIENT COMMUNITIES (ARC)

Promoting Health, Wealth and Climate Resilience

ARC MIAMI A CASE STUDY

*Collaborative Projects of Emerald Cities Collaborative with
Health Care Without Harm and MIT CoLab*

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EMERALD CITIES COLLABORATIVE ANCHORS IN RESILIENT COMMUNITIES (ARC)

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INTRODUCTION

This profile of Miami is part of an ongoing series of case studies and reports on Anchors In Resilient Communities (ARC). ARC initiatives are multi-stakeholder collaboratives of community organizations and coalitions, anchor institutions, foundations and government working at the intersection of community health, wealth and climate resilience. ARC's overarching mission is to increase the available social, financial and intellectual capital of low-income communities of color, as well as innovative projects for building their resilience. The community resilience frame addresses the legacy health and economic vulnerabilities of low-wealth communities, but also the new 21st Century's heightened family and community risks precipitated by climate change. The series of ARC reports, funded by The Kresge Foundation, highlight:

1. ARC Rationale and Background
2. Case Study #1: ARC East Bay San Francisco
3. Case Study #2: ARC Miami
4. Case Study #3: ARC Bronx
5. ARC: Lessons Learned (a primer, mostly for community organizations)
6. ARC: Best Practices in Community Engagement (a primer for health institutions)
7. Excerpt on ARC Miami and ARC Bronx from The Kresge Foundation's 2016 Annual Report

These initiatives are ongoing, long-term projects. Over time, the cumulative experiences and knowledge-creation builds a narrative of the promises, strategies and pitfalls of building anchor-community partnerships to advance intersectional climate resilience efforts. The goal is for anchor-community resilience collaboratives to become standard practice that can be replicated across the country.

MIAMI, FLORIDA

ARC Miami is a labor-community collaborative focused on addressing the critical health, economic and climate risks of low-income Haitian and Latino neighborhoods within the University of Miami Hospital (UMH) service area. The ultimate aim of a Miami community health and resilience agenda is to have healthcare workers and local residents play leadership roles in the shift toward wellness and climate resilience through outreach, education and community engagement. Specifically, 1199SEIU conducted a community health needs assessment (CHNA) and to educate residents on the particular nexus between health and climate change.

This participatory, community-driven CHNA process highlighting root causes of poor health outcomes positions UMH, the key anchor, to invest in initiatives that address the social, economic and environmental factors of poor health, while broadly influencing overall community wellness.

Demographics

According to a [2013 report](#) on income and poverty in Miami-Dade County by the Department of Regulatory & Economic Resources, Planning Research and Economic Analysis Section, the county's 2013 overall median household income was estimated at \$41,913, but nearly one-third of households (32%) earned less than \$25,000 that year. And while median income for white, non-Hispanic households was \$64,976, the median for black non-Hispanic households was just over half of that, \$32,044. The Hispanic household median of \$39,674 was 61% of the overall median.

In 2013, 21% of all individuals in the county lived in poverty, including more than 30% of all school-age children; almost 55% of children were low-income, while more than half of residents 65 years of age and over were low-income or in poverty.

The greatest disparity in poverty rates was by race and ethnicity, with two-thirds of all individuals in poverty being of Hispanic origin. Poverty rates were more than 29% for African Americans, 21% for Hispanics and 12% for white non-Hispanics.

The county's September 2016 unemployment rate was 5.6%, compared with the national rate of 5.0%.

What

The specific ARC-Miami objectives goals are:

- Utilize the University of Miami Hospital's (UMH) community benefit program requirements to develop a community-driven health needs assessment and a community-focused resilience program, as per ACA requirements. (As a **nonprofit hospital**, UMH must provide benefits to the communities it serves in order to maintain its tax-exempt status.)

Climate Challenges and Risks

According to the county's Miami-Dade Green [website](#), there is consensus among leading scientists worldwide "that climate change is among the most significant problems facing the world today and that Southeast Florida is one of the most vulnerable areas."

Referencing Miami-Dade, a [January 2016 report](#) by the Center for American Progress states: "Climate change is bringing more flooding, extreme heat and other impacts that affect the way people live, work and even vacation in this low-lying county." The report goes on to say that the "undeniable" evidence of climate change in Miami-Dade includes "flooded streets [which] are becoming routine even on sunny days, triggered not by extreme storms but by high tide."

It adds: "Rising seas will exacerbate the impact of hurricanes, which remain ever-present threats. The number of days with temperatures higher than 95 degrees Fahrenheit in Florida and other southeastern states has steadily increased since 1970, putting the health of residents at risk. These dangerous climate change effects pack the hardest punch in the county's sizeable low-income communities, which lack the economic stability and quality housing to safely weather the stifling heat and flooding that are part of the new normal."

ARC Miami involves a community-wide strategy to increase the adaptive capacities of community health workers and the resilience of critical outpatient facilities, including community health centers, nursing homes and home health care facilities.

Clearly, community health workers and facilities are on the front lines of climate risk. Rather than being penalized for failing to show up for work during climate events – as they were during Hurricane Rita – those workers must be proactively involved in formulating resilience plans and solutions. Such solutions include:

- Developing alternative transportation and communication strategies for reaching home-bound patients
- Retrofitting homes and other facilities to mitigate risks
- Developing community safety nets and alternative food, water and energy sources
- Providing basic climate-risk education

- Use deep community organizing and engagement to develop strategies for community health, wealth and climate resilience.
- Identify challenges and opportunities related to climate change, given Miami’s coastal location and vulnerability to events such as hurricanes, flooding and heat waves

Who and How

ECC partnered with MIT CoLab to engage 1199 to form ARC Miami to address the shifting landscape from health services to community wellness. To do this, 1199SEIU partnered with its employer, UMH, a 560-bed, nonprofit facility that is part of the three-hospital University of Miami Health System (UHealth) and employs 2,000 SEIU members.

In addition to its ties to that primary anchor partner, 1199 has developed partnerships with two community anchors – Borinquen Health Care Center and Jessie Trice Community Health Center – both of which have strong community ties and strong interest in supporting 1199’s community health engagement and outreach efforts. Borinquen, in operation since the early 1970s, began as a grassroots effort to open a health clinic in the Puerto Rican community and has grown to become a comprehensive primary care, dental and behavioral health center. Jessie Trice has served Miami-Dade County since the late 1960s. Its commitment to the community is reflected in collaborations with coalitions, faith-based institutions, social service agencies and more.

Since 2011, the 1199SEIU/Labor Management Project has created a solid working relationship between the hospital and healthcare workers by bringing together labor and UMH management to “develop cost-effective and high-quality services, conduct research on job trends and industry changes and promote communication and collaboration,” according to the [project’s website](#). In addition, the architects of ARC surmised that UMH would view 1199 members as strong allies in nurturing a more robust relationship with the community and could use 1199 members’ organizing and outreach skills to help the hospital meet its ACA community benefits requirements, including the triennial CHNA.

The labor-management partnership is particularly noteworthy, given that many 1199 healthcare workers live in the communities that UMH serves. This highlights the reality that when the hospital plays a positive role and provides quality care in its community, it also supports the employees on whom it relies for patient care – and, significantly, acknowledges that its institutional health is tied to the community’s health.

Given 1199 healthcare workers’ history of active engagement in their community, they were well-positioned to leverage the labor-management partnership to help conduct a more participatory CHNA that would allow residents to freely discuss their health concerns.

Partners

- 1199 Service Employees International Union Florida Region (1199SEIU or 1199)
- University of Miami Hospital (UMH)
- MIT Community Innovators Lab (CoLab)
- Borinquen Health Care Center
- Jessie Trice Community Health Center
- 1199SEIU/League Labor Management Project
- The Catholic Church in the Allapattah neighborhood, Village Allapattah Apartments
- Miami Dade College, Wolfson campus

An important development supporting a strong anchor-community relationship was then-UMH CEO David Zambrana's agreement, at 1199's request, to appoint a current UMH employee as a community liaison. Additionally, Zambrana connected 1199 with the Health Council of South Florida, which leads the outreach portion of the CHNA process for all three UHealth hospitals. When Zambrana left UMH in April 2016 to become CEO of another Miami hospital, it was hoped that his prior actions would ensure 1199 a continuing place "at the table" during execution of the CHNA. However (please see Challenges section of this case study), the university that manages UMH recently decided not to continue partnering in the same way with 1199, so there is uncertainty about the development of the CHNA implementation plan.

How

By leveraging the anchor institution's resources and capacities – its investment and community benefit programs – ARC Miami developed a community-driven health needs assessment that incorporates climate resilience, health and wealth-creation. This approach complements UMH's obligation under the ACA to use its community benefit dollars to develop an implementation strategy addressing the prioritized health needs identified by the CHNA.

The University of Miami contracted with the Health Council of South Florida to complete the CHNA for its three large nonprofit healthcare institutions, including UMH. After discussions with the health council about the limited time and resources to complete the assessments, the targeted population for UMH was reduced to five primary ZIP codes (where 212 members of 1199SEIU are listed as residing) and collection of 50 surveys. The project used GIS mapping to identify the confluence between the hospital's service area and union members' homes.

The Community Health Needs Survey was posted online in English, and paper copies were made available in English, Spanish and Kreyol (the language of Haiti). The community health organizer (CHO) for Unite for Dignity (1199's nonprofit organization) reached out to union members in three major ways:

- Phone-banking: The CHO made calls and set up appointments to complete the survey with union members at their homes or public places of their choice. If they preferred to complete the survey online, she emailed them a link.
- Facility Visits: The CHO met 1199SEIU organizers (union representatives) assigned to different facilities and accompanied them on visits to union members at their workplaces.
- Community Meetings: The CHO attended meetings in which union members in certain neighborhoods were already scheduled to participate due their activism in projects led by a sister organization, the SEIU Florida Community Union.

In the past, union members have been open to completing surveys related to bargaining campaigns on wages, benefit and working conditions, political campaigns and overall union-wide programs. Given this level of activism, the assumption was that union members would be willing to complete a survey related to health needs in their community and was not directly related to work or a controversial social subject. However, the return rate was approximately 30 percent, far less than usual.

Given those results, the CHO expanded the pool of participants by:

- Asking union delegates (union members elected by co-workers as leaders in their workplace) to take extra surveys home to complete with their families, friends and neighbors
- Speaking to residents at local gathering places such as the grocery store, church or community center in the key ZIP codes
- Holding a series of community meetings and trainings on climate change and researching and developing additional materials to support the trainings

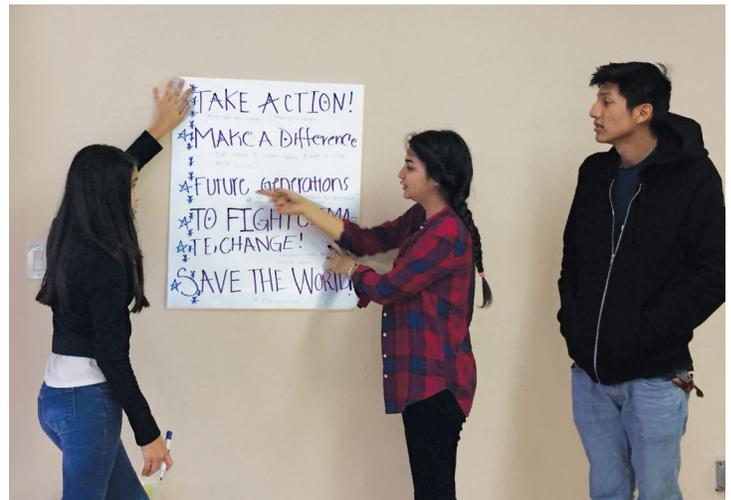
After the survey period for the CHNA closed, the CHO focused on community outreach by hosting focus groups and community forums – work that is still ongoing. The first session focused on health disparities and inequalities in low-income communities (primarily communities of color) and how to access and use mapping assets. The second session looked at the social determinants of health and climate risks in low-income communities (primarily communities of color), the role of healthcare workers in disasters and the impact of climate change on health.

The CHO has worked with the YMCA, churches and libraries in the targeted neighborhoods to secure free or low-cost, easily accessible space to host these events, which are held in English, English/Spanish and English/Kreyol, with materials in all three languages. To date, 16 workshops with 112 participants (40 union members, 50 community members and 22 teenage students) have been held, and seven more workshops and one retreat are planned.

These trainings and the CHO's conversations are building the foundation for residents and 1199 members to play a leadership role in climate resilience. Additionally, the Health Council of South Florida offered to work with 1199SEIU and Unite for Dignity to publish an online analysis of the surveys and community outreach at MiamiDadeMatters.org. ECC's Climate Change and Health training is another useful tool to begin building local leadership in this emerging field.

As of summer 2016, the work was focusing on:

- **Cultivating relationships** – Based on the information obtained through the surveys and community events, the CHO conducted outreach to organizations in a more strategic manner. This relationship-building is important for both general community engagement and establishing a clear group of stakeholders who can influence and participate in CHNA implementation.
 - The goal is to establish relationships with clinics, churches, community centers, colleges/universities, nonprofit organizations and a core set of community leaders who were already involved, or interested in being involved, in matters of health and climate justice.
 - The CHO mobilized 15 people to



- participate in two community health fairs and a one-day symposium on climate change.
- **Continuing community engagement** – There are immediate opportunities to engage three groups of people on health and climate change:
 - **Youth** – Haitian students participated in community awareness activities on climate change over the summer, for which they received credit for volunteer/community service hours – a state requirement for high school graduation – from 1199SEIU’s nonprofit Unite for Dignity.
 - **Senior citizens** – As a follow-up to seniors’ participation in forums on social determinants of health and climate change, 1199SEIU Retirees took part in a workshop on hurricane preparedness and access to resources, particularly for those who live alone.
 - **Healthcare workers** – They are being engaged in meetings at nursing homes and healthcare facilities to discuss disaster response plans for their facilities and, in preparation for negotiating their next contract in 2017, how to leverage union contracts to improve their facilities’ disaster preparedness. Additionally, some of them were recruited to participate in community activities after participating in a climate change workshop.

In addition, 1199 reached out to the Archdiocese of Miami, Miami Dade College and other institutions seeking collaborators to train low-income communities and communities of color on the impact of climate change on seniors’ health. Unite for Dignity provided trainings to residents of The Village of Allapattah, a rental community to low-income seniors.

It is important to note that in preparation for the spring outreach and workshops, it became apparent to the ARC team that cities and counties outside Florida have designed succinct materials (YouTube videos, infographics, PowerPoint presentations, pamphlets) that the general public could easily read and understand. In contrast, the reports and community handouts from government agencies and non-governmental organizations in Miami-Dade County are lengthy, text-heavy and difficult to understand.

At a later date, the ARC team will consider if there are capacity and resources to create simple but dynamic one-page community education handouts. In the meantime, the team has updated PowerPoint presentations and created handouts on the impact of climate change on health and urban communities. The team also has plans to recruit some of the 73 workshop participants to help with video and art outreach projects.

The Vice President of 1199SEIU United Healthcare Workers East is continuing conversations with the changing leadership at UMH to clarify the roles of the two parties in the labor-management partnership. As the final CHNA written for UMH does not specifically mention an implementation plan to address the needs identified in the assessment, the ARC team will focus on community organizing efforts and cultivating relationships with community organizations that share interests in health and climate resiliency. This is intended to build a base of supporters who, at some point, will call attention to the university’s lack of attention/responsiveness to the community’s needs – and, importantly, request that the institution address them.

Outcomes

The most successful discussions and survey completions happened when an organizer was present with a group of union members (compared to when the CHO approached the same people alone)

and when the CHO had conversations with the general public/community.

Also notable is that members of the general public were more willing to complete the survey if the CHO asked them the questions and wrote down their answers while sitting or standing next to them than when they had to fill out the whole form themselves. In many cases, people were willing to express their ideas verbally, but they were hesitant to write them down (this could be related to their level of literacy and/or confidence in penmanship).

The CHO met the goal of collecting 50 surveys for the official CHNA; a few more were turned in after the closing date.

Challenges

- Limited time and resources to complete the CHNA, leading to a reduction in the initial survey's scope.
- Low response rate to CHNA.
- As of late July 2016, the university administration that directs UMH had decided to alter its partnership with 1199, at the same time that the UHealth system's business model shifted towards providing specialty care related to cardiac conditions, surgeries and cancer treatment. This left the union to plot a new way forward for meeting community health needs, including those tied to climate change.

Prospects

During the next phase of ARC in Miami, 1199SEIU will continue working to influence implementation of UMH's CHNA. The union will also develop a strategy to leverage UMH's resources and upcoming programs, given the shift in the hospital's business model.

Despite the change in the university administration's stance toward the anchor strategy, 1199 still sees opportunities to continue educating the community about its health needs, as well as to build a base of activists who can advocate for health care institutions doing more to meet those needs – especially since the hospital plans to retain its nonprofit status and will still be required to conduct CHNAs and execute implementation plans.

In addition, the business model shift towards treating cardiac and cancer patients provides an opportunity not only to engage the institution on treating patients once they are ill, but also to focus on how climate change affects/exacerbates those illnesses and which adaptations the institution can fulfill or fund.

Community education and outreach will involve the following activities:

- **Workshops** will cover specific areas of interest such as urban heat islands; gentrification and affordable housing climate adaptation; and mitigation plans to address sea-level rise, storm-surge flooding and carbon emissions.
 - Beyond the educational component, the goal for the workshops includes a “Call to Action” so participants can easily connect with already-engaged organizations in their neighborhood.
- **Street fairs** will allow organizations, community members and anchor institutions to engage in discussions around social determinants of health, the impacts of climate change on health

and how the community can become more resilient.

- These events could highlight activities for college and university students whose schools partner on projects in low-income communities and communities of color. While such projects complement ongoing research related to climate change at UMH and Miami Dade College, the schools' reports currently do not reference those specific communities.
- A planned **Community Academy for Leadership Development and Capacity Building** will develop a base of residents who will serve as true stakeholders and advocates for resiliency in their communities.

Also planned are a community climate symposium and “environmental mini-anchors.” The symposium will launch a committee of healthcare workers and the general public who will focus on resilience plans in the areas of transportation and community safety nets. The mini-anchors will focus on low-cost individual adaptations and community organizing to secure funding for neighborhood-wide adaptations. In addition to UMH/UHealth, potential partners will include:

- The Solutions Project
- Miami Climate Alliance
- Miami Dade College
- Catalyst Miami
- Sierra Club Miami
- Sea Level Center at Florida International University
- Urban Environmental League
- TREEmendous, INC.
- Florida Native Plant Society, Dade Chapter for Native Flowers
- New Florida Majority
- CLEO Institute (Climate Leadership Engagement Opportunities)