Appendix C. Impact Model Narrative

September 2022

Background. In the 1990s, Metro designated the location that centers on the intersections of SW Capitol Highway and SW Taylors Ferry Road with Barbur Boulevard, sometimes called the "crossroads", as the West Portland Town Center (WPTC). WPTC is the most culturally diverse part of SW Portland. A long-established Muslim community is the cornerstone of the area's identity, with many low-income, housing cost-burdened Arab and East African immigrants living there.¹

In 2021, the City of Portland Bureau of Planning and Sustainability (BPS), along with multiple partners, drafted the <u>West Portland Town Center Plan</u>. Reflecting feedback received from more than 600 residents, workers, and businesses, the WPTC Plan outlines a development strategy comprised of infrastructure investments and policies. To avoid replicating a pattern of gentrification and displacement of lower income and immigrant communities that commonly follows from urban development endeavors,^{2, 3} the Plan leads with a health and racial equity lens. BPS also secured a Centers for Disease Control and Prevention <u>Social Determinants of Health (SDoH) grant</u> in 2021 to convene a multisectoral Leadership Team to design an Accelerator Plan to implement actions from the WPTC Plan that will reduce health disparities in the area.

Health is a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity.⁴

Health equity means achieving the highest level of health for a people and calls for focused efforts to address avoidable inequalities by creating fair opportunities for optimal health, especially for those who have experienced socioeconomic disadvantage or historical injustices.¹

Social Determinants are the conditions in the physical, social, and economic environment, including education, economic, housing, and mobility opportunities, that contribute to behaviors and in the long term, health outcomes. The determinants all exist in the context of racism and other forms of bias, mediated by access to political power.⁵

Impact Model. In June 2022, BPS contracted with <u>Insight for Action</u> to design an impact model (i.e., theory of change) illustrating how the WPTC Accelerator Plan may impact SDoH and health equity outcomes. The impact model was based on interviews with the CDC SDoH Leadership Team and BPS staff, review of WPTC planning documents, and a scan of the literature. The impact model is a visual displaying the interrelationships among the plan's vision, goals, outcomes, and the partnerships and investments driving them. The components are highly interwoven and include many feedback loops – the design is intended to convey this holism.

Advancing Health Equity in West Portland Town Center An Impact Model

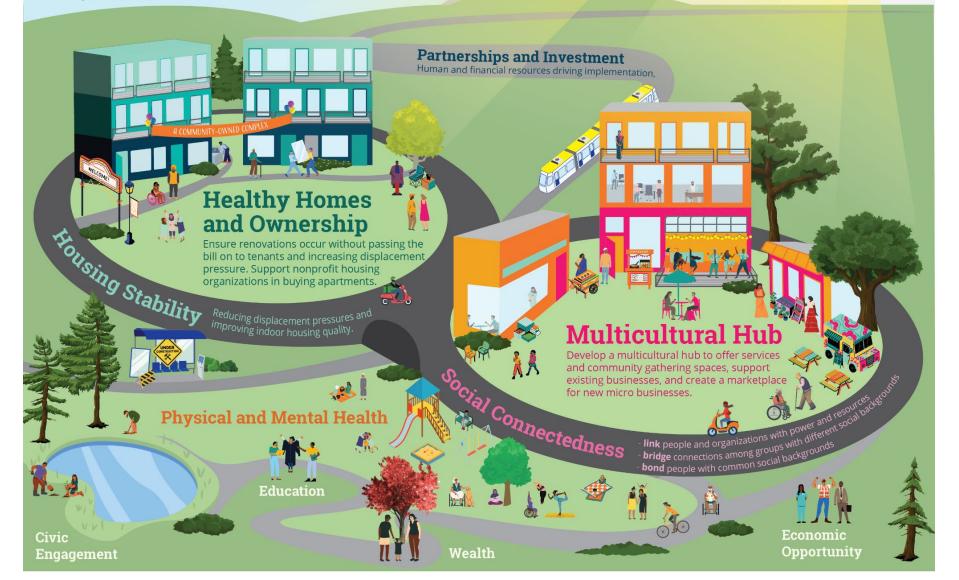
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Great Places with Equitable Access

where place keeping creates physical environments that advance resident stability.

Strong Communities

where diverse people thrive socially, culturally, and economically.



The high-level **vision**, from which the plan's goals were derived, is represented by the beams of light emitted from above the mountains in the upper right-hand corner of the model. The vision comprises two components of the WPTC Vision Areas.

Great Places with Equitable Access where place keeping creates physical environments that advance resident stability.

Strong Communities where diverse **people** thrive socially, culturally, and economically.

The plan has two **goals** shown at the center of the model. The goals are embedded in the figure-eight pathway to represent how they will operate in concert with one another, achieving many common, synergistic benefits – SDoH and health equity outcomes – by connecting community members to a place where they live, work, learn, socialize, heal, and play.

Healthy Homes & Ownership. Ensure renovations occur without passing the bill on to tenants and increasing displacement pressure. Support nonprofit housing organizations in buying apartments.

Multicultural Hub. Develop a multicultural hub to offer services and community gathering spaces, support existing businesses, and create a marketplace for new micro businesses.

Housing stability and social connectedness - primary social determinants of health

outcomes - are anticipated to directly result from the synergy of the healthy homes & ownership and the multicultural hub goals.

Housing stability. The Healthy Homes & Ownership goal is expected to result in more diverse, affordable, environmental hazard free, energy efficient housing options that will reduce the number of residents who are housing cost burdened, displaced, and suffer from substandard housing and energy insecurity, and increase opportunities for home ownership.^{5, 6} The multicultural hub goal may contribute to these housing outcomes if affordable housing is co-located on-site as well as offering housing support services through the social service navigation center.

Social Connectedness. The multicultural hub goal is anticipated to *link* people and organizations with power and resources, *bridge* connections among groups with different social backgrounds, and *bond* people with common social backgrounds⁷ through provision of community space, programming, and services. The Healthy Homes & Ownership goal expects to support residents to remain in the West Portland community over time, avoiding unwanted moves and severed relationships.⁸

The narrow pathway at the bottom of the model represents four secondary social

determinants of health outcomes (economic opportunity, wealth, education, civic engagement) which are expected to result from the combined influence of the two goals and primary social determinants of health outcomes (housing stability and social connectedness). The primary and secondary social determinants of health are interrelated and reciprocal, shown by the connections between their pathways. As each primary and secondary SDoH improves, others are concurrently influenced to move in the desired direction.

Economic Opportunity. The multicultural hub is expected to support micro-businesses that are owned by and employ WPTC community members. Housing stability decreases the frequency of forced moves/eviction/displacement, protecting community members from the employment disruption associated with these crises.^{6, 8} Stable employment may lead to higher income.

Wealth. The multicultural hub is expected to support micro-businesses and provide access to education and training programs, whereas housing stability intends to decrease or hold constant housing and utility costs and support home ownership. Together, these strategies are expected to stabilize and increase household incomes and support intergenerational wealth creation.⁹

Education. The multicultural hub is expected to offer social services that enable community members to strengthen their English language skills and pursue additional educational opportunities, as well as maintaining culturally specific activities, goods, and services. Housing stability may reduce education disruption,⁸ thereby improving school readiness and increasing academic performance among children, immigrants, and refugees.^{6, 8, 10} Education attainment is associated with improvements in employment, income, and wealth generation.^{6, 8, 10}

Civic Engagement. Housing stability is anticipated to increase homeowners' and renters' stake in the neighborhood because they will live in the area longer and their household finances will stabilize, allowing them more time to engage in community-based activities.^{1, 9} Through learning opportunities and advocacy-focused activities offered through the multicultural hub, this goal is anticipated to support members to become more knowledgeable of – and involved in – addressing the issues that impact their daily lives (e.g., taxes, citizenship, human rights). ¹¹ These shifts are posited to increase voter participation.^{9, 12}

The synergistic pathways of the primary SDoH outcomes (housing stability and social connectedness), and secondary SDoH outcomes (economic opportunity, wealth, education, civic engagement), represent their combined influence on two **health equity outcomes** (physical and mental health) for residents in the WPTC area. These two health equity outcomes interact synergistically with each other (as mental health improves so may physical health, and vice versa) as well as with SDoH outcomes (as mental health improves so do employment opportunities, and vice versa).

Physical health. The multicultural hub is expected to facilitate access to resources and supports such as insurance enrollment, clinical services, and healthy food. The hub will also be home to culturally specific recreational activities. Adults of all abilities, genders, and races who are able to build strong social networks by engaging in inclusive and welcoming environments may see a 50 percent increase in their overall life span.¹³ Housing stability reduces gaps in health insurance coverage¹⁴, increases the likelihood of having a consistent primary care provider ⁵, and is associated

with lower rates of chronic disease.⁶ Housing safety and quality reduce exposure to poor environmental conditions^{6,5} and reduce stress.^{8,15} Together, the hub and housing may help mitigate the "Healthy Immigrant Effect" (HIE), which suggests that immigrants have a health advantage over the domestic-born which vanishes with increased length of residency.¹⁵ The secondary SDoH outcomes will also contribute to improved physical health. For example, increased wealth achieved through economic opportunities is associated with decreased risk of asthma, hypertension, obesity, smoking, and chronic illness.¹³

Mental health. The multicultural hub is expected to build/strengthen social supports, enable physical and social leisure, and provide access to mental and behavioral health resources. Housing stability will decrease the likelihood of social network fragmentation due to forced moves/eviction/displacement,⁸ reduce stress,^{5,6, 8,16} and increase sense of safety in the community.⁶ These pathways hold potential to mitigate a variety of mental and behavioral health challenges including anxiety, depression, suicide, sleep loss, substance use disorder, and developmental/behavioral problems among children.^{8, 9, 10, 11, 12} Secondary SDoH outcomes are also associated with mental health benefits. For example, education attainment and stable employment are associated with greater income and wealth, which reduces mental health challenges such as chronic stress, sleep loss, and relationship strain suffered due to worry about affording basic needs.^{5, 6}

Lastly, the light rail running through the model represents the **partnerships and**

investments that will drive implementation.

Partnerships. The Accelerator Leadership Team (LT) - a diverse set of multisectoral partners - is collaborating to plan and implement strategies. The LT organizations were important stakeholders in the WPTC Plan, and many have a strong presence in the <u>Southwest Corridor Equity Coalition</u> (SWEC), which convenes partners related to housing, planning and community development, community engagement, and transportation. Unite Oregon, a key convener of SWEC, has been responsible for the Accelerator Plan engagement strategy, informing the Plan by gathering the needs and desires of the target populations within the WPTC area.

Leadership Team members include:

Community Alliance of Tenants (CAT)

Community Partners for Affordable Housing (CPAH)

Health Share of Oregon

HAKI Community Organization (HAKI)

Resources. Numerous African community resources exist in the SW Corridor area: Capitol Hill Library, Islamic School of Portland (K-8), Jackson Middle School, Markham Elementary School, and Masjid As-Saber Mosque. A large percentage of Muslim, Arab and East African immigrant and refugees rely on these resources for social connectedness and physical health. The Accelerator Plan implementation process will include and leverage these established community resources.

Investments. In addition to critically important in-kind contributions of nonprofit partners, braided funding from multiple sources is needed to pay for capital investments, programming, and project administration. Funding strategies are in the early phases of development at this time and could ultimately include the following.

- City, county, or state donated or discounted sale price or lease of property/site
- Public/government funding: tax increment financing, Portland Clean Energy Fund, Multnomah County weatherization funds, Metro bonds (housing stock and housing services) and grants, federal grants
- Private developers
- Philanthropy

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