**Forces of Change Assessment**

**Summary of Findings**

**Purpose:** The purpose of the Forces of Change Assessment (FOCA) is to document forces (trends, factors or events) that are, or will, influence the health and quality of life of the community and the local public health system over the next five years. The assessment also considers the possible threats and/or opportunities that may arise from these forces. These findings will be used, along with findings from the other assessments, to inform strategic issue identification and development of the community health improvement plan.

**Process:** The Partnership for Healthy Chicago (Partnership) formed a committee to lead the collection of information on forces of change. The committee developed an online survey asking public health system members to: (1) identify forces that are currently impacting or may impact their work and/or the communities they serve and (2) describe how this force threatens and/or strengthens their work and/or the communities they serve. Survey takers were encouraged to enter forces in ten areas: Demographic, Economic, Environmental, Ethical/Legal, Legislative, Political, Social/Cultural and Technological/Scientific or other/miscellaneous section. The survey was disseminated to the Partnership members and public health stakeholders. Organizations were asked to share widely with their networks to get a broad level of responses.
One hundred twenty-two (122) individual respondents completed the survey, representing 86 different organizations in Cook County, with the majority located in or serving the city of Chicago. In several cases, multiple individuals from an organization responded. Respondents identified 784 issues, which were grouped into 95 areas. The issues were further compiled into 15 categories.

The Partnership met on February 1, 2019 to review the survey results, suggest changes/additions and identify priority threats and opportunities. The following summary provides an overview of each force and possible reactions to these forces.

### SUMMARY OF FINDINGS:

#### Fifteen Forces Affecting the Public Health System

*listed in order of frequency of mentions:*

1. Political Forces
2. Economic Forces
3. Built Environment
4. Insurance & Healthcare
5. Populations Shifts
6. Environment
7. Data & Science
8. Criminal Justice
9. Racism & Segregation
10. Mental Health & Substance Use
11. Immigration
12. Contemporary Life
13. Language & Access
14. Giving/Partnerships
15. Education

This assessment identified that racism was the underlying force for all the forces mentioned, as it impedes an individual’s and their community’s ability to thrive. Racism and its impacts on social determinants of health and societal structural inequities can cause physiological changes that lead to many health inequities.

#### Overarching Threats:

- Inequities in funding for projects and services in hard hardship communities
- Racism: institutional, interpersonal and internalized
- No/limited trust in all levels of government/system/healthcare system
- Lack of diversity in representation and decision making
- Policies that penalize lower income individuals
- Lack of comprehensive, evidence-based systems approach

#### Overarching Opportunities:

- Develop equitable policies through cross-sector collaboration and access to newly available resources
- Foster ongoing collaboration across sectors/services
- Increase awareness about intersection of health and root causes of health, including workforce development, education, built environment
- Leverage community benefits requirements in other sectors that can be directed to equity and health in high hardship communities
- Increase access to data (both quantitative and qualitative) for use with evidence-based and evidence-informed decisions
- Integrate health and human services care teams
- Increase diversity in organizations; address racism in organizations
#1 Political Forces (23% of all forces)

Upcoming changes in the local and state government, along with the policies of the current Federal administration, were the most mentioned forces affecting the public health system. Stakeholders are uncertain of the actionable priorities of new public officials and how funding will be allotted. The current Federal administration’s approach to public health, social determinants of health and health equity is a major force on the public health system.

**Threats:**
- Fear and lack of trust in the government, especially for immigrant and communities of color
- Concern about weakening public health laws, e.g., ACA, environmental regulations
- Instability and inadequacy of government funds for public health priorities
- Uncertainty of priorities of new public officials

**Opportunities:**
- Build on efforts to address structural inequities and racism within the public health system, including healthcare
- Develop community leadership opportunities, especially with youth, to be involved in political process
- Require governmental accountability and transparency
- Work with movements to address root causes and engage community in meaningful ways
- Change power dynamics to center policies on health and racial equity
- Re-align funding priorities to focus on equity and racism

#2 Economic Forces (11% of all mentions)

Health status is connected to economic stability, including the ability to cover expenses, improve one’s living situation and manage stress. Areas highlighted included wage and income disparities, unemployment and poverty. Taxes and workers’ rights also affect community members.

Economic forces also influence local organizational operations and viability, including funding, staffing and the number of people in need of their services.

**Threats:**
- Low-wage jobs and/or unemployment do not let people cover their daily needs and contribute to stress and negative physical and mental health effects of stress
- Rise of minimum wage to $15/hour may have unintended consequences of loss of benefits if the income scale is not adapted and the loss of hours for part-time workers
- Income and wealth inequities are maintained through existing policies and practices which do not support enforcement of labor laws and safety laws
- Community growth that is driven by outside developers not community needs
- Poverty creates barriers to public and private services and assets, e.g., unbanked populations, widening gap in home ownership
- Economic hardship related to poorer health outcomes

**Opportunities**
- Implement a thrivable wage as standard and ensure benefits are available for populations at the lowest end of earning spectrum
- Increase and strengthen programs that invest in populations to grow their wealth and financial literacy
- Invest in strategies to employ community members
- Restructure tax policies to support low and moderate wage earners
- Partner across organizations to assist families Develop policies to help small and minority-owned business thrive
### #3 Built Environment (10%)

The built environment (i.e., the homes, buildings, streets, open spaces, transportation and other infrastructure) influences community members’ health. The public health system recognizes the importance of spaces designed to encourage interaction and that allow for physical activity.

**Threats:**
- Lack of a comprehensive and equity-based systems-level approach allows for racism and discrimination to impact community planning
- Aldermanic prerogative allows for inequitable and discriminatory development decisions
- Gentrification, displacement and disinvestment are leading to cultural destruction and social isolation
- Community development is led by the wealthy and often do not consider long-standing community members’ needs, older housing stock that has not been maintained may hazards (i.e., lead-based paint, rodents, pests and other environmental concerns) that impact respiratory health

**Opportunities:**
- Implement innovative programs and partnerships to address equitable transportation and development, [e.g., Equitable Transit-Oriented Development (eTOD), community reinvestment, community benefits, land banking, complete streets, etc.]
- Conduct Health and Racial Equity Impact Assessments on all developments
- Broaden support for equitable development by connecting to health outcomes and criminal justice
- Implement programs for healthy homes to ensure safe and healthy housing stock
- Collaborate to advocate against evictions and condo conversions and increase community-owned land

### #4 Insurance & Healthcare (7.9%)

All people should have a right to quality healthcare, including preventive, acute, diagnostic and rehabilitative services. With the advent of the Affordable Care Act (ACA), more people have coverage through the Marketplace and Medicaid expansion. Continued improvement within these programs, including costs, populations covered, essential benefits and administrative processes, will provide a seamless continuum of care to improve health outcomes and quality of life.

**Threats:**
- Federal Administration’s attempts to rollback and to undermine ACA threatens coverage and access and increases confusion Vulnerability of Medicare to coverage reductions
- Underfunding of Medicaid and low billable rates limits providers’ involvement Underfunding of human services, upstream equity interventions and Community Health Workers
- Financial challenges for safety-net organizations in low-income neighborhoods
- Reduction of funding limits innovation
- Several marginalized populations (legal immigrants in US less than five years, undocumented) cannot obtain affordable coverage and often do not seek preventive or timely care

**Opportunities:**
- Demonstrate value of ACA on increased access, health status and prevention—show business case/ROI
- Push for more funding for research and innovation on alternative treatments, including coverage for cannabis treatments
- Advocate for Universal Health Care/make healthcare a human right
- Strengthen collaborations among Managed Care Organizations, healthcare and public health to decrease spending and improve care, especially for elders, people with chronic conditions and/or limited access to care
Detailed Findings: Fifteen Forces Affecting the Public Health System (listed in order of frequency of mentions):

5. Population Shifts (7.7%)

The overall population in Chicago grew slightly as of 2017; however, it decreased by over 10% in the non-Hispanic Black population. Losses also occurred in the Puerto Rican and Cuban populations. These demographic changes impact community needs and the organizations that serve those populations.

**Threats:**
- Demographic changes due to:
  - Ongoing disinvestment in communities
    - Inequitable tax and fiscal policies, e.g., higher property taxes and inequitable TIF projects
  - Limited access to safe and affordable housing
  - High interest rates/predatory practices impacting homeowners in low-income communities
  - Disruption of social cohesion among long-time community members
- Gentrification pushing relocation of low-income populations distancing them from healthcare and social service providers; Community-based organizations in new areas may be ill equipped to service incoming populations, e.g., cultural humility, linguistic competence

**Opportunities:**
- Collaborative with broad-based sectors, community members and Chicago’s new Mayor for equitable policies and practices that sustain community cohesion and foster development without displacement, including equitable tax policies
- Conduct Health and Racial Equity Impact Assessments to highlight benefits of equitable development on community health and wellbeing
- Strengthen service delivery through tracking, need analysis and interagency collaboration
- Promote access to needed resources to prevent displacement, including affordable housing, schools, healthcare, social services, transportation, healthy food, etc.

6. Environment (7%)

Environmental factors affect community health, especially populations most at risk due to age and chronic conditions. These factors include air quality, water quality and supply, toxic substances (e.g., lead) and hazardous wastes. Climate change and severe weather patterns impact environmental quality and ultimately, human health.

**Threats:**
- Climate change and environmental threats have disproportionate negative impacts in marginalized communities
- Lack of regulatory system and infrastructure resources to mitigate and prevent impact of climate change
- Lack of governmental systems thinking about environmental justice Lack of understanding of connection between environment and health and fear the unknowns of green initiatives (costs, lifestyle changes, jobs/skill changes)

**Opportunities:**
- Increase community awareness about the strong connection between human health and the environment to build support for environmental initiatives Build resilient communities through infrastructure projects and economic investment in green economy jobs
- Connect climate change strategies to existing community initiatives
- Strengthen environmental health monitoring through healthy homes initiatives, including proactive home inspections
# 7 Data, Science and Technology (6%)

Technology is making access to data and information more available to the public. Many people access information through apps on their phones and use apps to track health-related data. Big data—large datasets of from many sources—are used in many fields to drive development. More organizations are focusing on using data to better understand the effects of their initiatives and help plan interventions. Technology is also key for communication, especially with younger people, who communicate through social media.

**Threats:**
- Privacy concerns; issues of cyber security and hacking impede the usefulness of technology
- Federal administration feeding lack of trust in science and dismissal of scientific evidence; New technologies may displace workers
- Limited cross-sector data
- Inequitable access to technology

**Opportunities:**
- Strengthen systems through cross-sector data sharing, capacity building and expanded focus on qualitative data collection
- Build community support of and skills with new technologies that increase equity and access to services (including telehealth)
- Advocate for community and public control of development and use of technology; do not leave development to the market forces

# 8 Criminal Justice/Community Safety (5%)

Most Chicago communities are concerned about violence, gun violence and community safety, however the impacts of violence inequitably affect Black and Brown communities. Historical policies have penalized whole communities’ mental health, stability and ability to thrive. Incarceration rates, which are higher in marginalized communities, disrupt family structure and security.

**Threats:**
- Ongoing investment and focus on policing may increase discrimination, harassment and distrust between law enforcement and community members; this distrust also harms the mental health response system
- Lack of community safety causes stress among individuals and families
- Limited resources for people reentering communities from prisons to thrive

**Opportunities:**
- Collaborate among sectors and current coalitions to develop a racially-equitable system of law enforcement that supports communities rather than penalizes them
  - Promote restorative justice practices
  - Institute evidence-based solutions, including alternate approaches for bail policies
- Invest in Trauma-Informed/Healing Centered policies and practices
### #9 Racism & Discrimination (5%)

Chicago has a long history of racism and discrimination at both the systemic and individual levels, which restricts access to resources and opportunities. Racism impedes communities' ability to thrive and can cause physiological responses that can contribute to significant health inequities.

**Threats:**
- Negative effects of internalized racism on community well-being
- Current political climate perpetuates racial antagonism
- Gentrification further separates communities, reduces opportunities for engagement

**Opportunities:**
- Advocate for governmental and representative bodies to better represent community diversity
- Engage communities of color in planning and decision-making activities and roles
- Highlight community assets internally and externally
- Explore racism within the public health system, both collectively and within individual organizations
- Work collaboratively to dismantle racist policies

### #10 Mental Health & Substance Use (5%)

Behavioral health is an integral component of overall health and wellbeing and needs to be fully integrated in all health services, including preventive care. Community resources often are the protective factors that help reduce incidence. Treatment and interventions require coordinated systems to identify people and communities at risk.

**Threats:**
- Over-reliance on “crisis system” and law enforcement, rather behavioral health specialists; many people with mental health or substance use problems are put in jail rather than treatment
- Growing opioid use/deaths are destroying families and communities
- Lack of system integration, especially for high-risk individuals, including people with opioid addictions
- Lack of literacy/understanding about mental health, including symptoms and treatment options
- Lack of trust in the system

**Opportunities:**
- Reduce stigma and increase health literacy by educating people (children, adults, older adults) about how to take care of their behavioral health
- Bring health systems and Medicaid Managed Care Organizations together to develop and implement effective models for behavioral health treatment, including Medication-assisted Treatment for substance use disorders
- Strengthen and fully-fund integrated care teams, including housing and tenancy support staff, to support recovery
DETAILED FINDINGS: Fifteen Forces Affecting the Public Health System (listed in order of frequency of mentions):

#11 Immigration (5%)

Chicago is home to immigrants from over 140 countries who are vital to the economy and culture of our communities. Protection of immigrants has been a priority since 1985 and was strengthened in 2012, when the Chicago City Council passed the Welcoming City Ordinance. This ordinance ensures access to City services regardless of immigration status and states that the police cannot arrest a person based on immigration status. Despite local support, many immigrants face challenges due to the Federal Administration’s attacks on current policies.

**Threats:**
- Anti-immigrant political environment
- Immigrants not seeking healthcare or enabling services, even when entitled
- Organizations losing clientele due to their fear of accessing services/decrease of trust in healthcare providers
- Chicago’s Welcoming City Ordinance may not be strong enough to protect immigrant rights

**Opportunities:**
- Work with the Illinois Alliance for Welcoming Health Care, coordinated by the Illinois Coalition for Immigrant and Refugee Rights, to develop and implement policies for healthcare and public health system organizations
- Implement innovative treatment options, such as telehealth, that provide care at home or in safe spaces
- Educate all Chicagoans on the importance of immigrants to our communities
- Coordinate legal and health services to ensure people have the most current and comprehensive information to keep themselves and their families safe
- Advocate for local and national policies to protect immigrants

#12 Contemporary Life (4%)

Availability of technology (smart phones, etc.) and social media are a constant in many people’s lives. This access has affected how many people interact with each other, obtain information and communicate.

**Threats:**
- People don’t hear comprehensive news/views on issues because social media funnels information to user based on their current preferences
- Growth of racism and discrimination based on special interest groups’ agendas
- Increased feelings of isolation among many groups (youth, elderly, etc.)
- Negative effects on children’s mental health/Cyber-bullying
- Loss of privacy
- Population subsets are left behind due to expense (low-income) or proficiency (older adults)

**Opportunities:**
- Use technology to engage communities in public health efforts and public health research
- Train people how to use technology and use media effectively and appropriately
- Create online communities that support people in need; allow for sharing
- Support efforts for broader understanding of different cultures due to global reach of technology
DETAILED FINDINGS: Fifteen Forces Affecting the Public Health System (listed in order of frequency of mentions):

#13 Access to Resources for Subpopulations i.e., non-English Speaking, LBGTQ and Disabled (3%)

Several subsets of Chicagoans do not have equitable access to resources due to language, physical or cognitive barriers and/or discrimination. These inequities point to a broken system that the public health system must address as this is a core component of the Ten Essential Public Health Services.

**Threats:**
- Inequity in health status for population subsets
- System is at risk of violation of civil rights laws, including the Americans with Disabilities Act
- Lack of opportunities to thrive for these populations
- Difficulty accessing needed services

**Opportunities:**
- Work collaboratively to ensure most marginalized populations have access to services
- Design built environment based on standards for people with disabilities
- Advocate for inclusive and non-discriminatory polices and laws that support population’s ability to thrive

#14 Giving/Partnerships (3%)

Philanthropic support of community-based organizations is an important component of maintaining services in low-income communities. It also requires that the philanthropic community understand the necessity to support social determinants of health and the work organizations and collaborations do to address structural inequities that ultimately have the most effect on a community’s health.

**Threats:**
- Federal tax law changes may reduce philanthropic and organizational donations, which may limit grant funds to smaller organizations
- Disinvestment in facilities/services in low-income, communities of color or immigrant populations
- Competition among partners and vying for their specific agenda/issue reduces trust and success of broad-based collaborations

**Opportunities:**
- Forge strategic alliance with funders and communities based on equity
- Seek funding for ongoing partnership development
- Focus on greater efficiencies of multi-sector collaborations to improve health and quality of life for marginalized communities
- Fully engage communities with lived experience within partnership efforts
- Build coalitions through shared outcomes

#15 Education and Workforce Development (2%)

A high-quality education from pre-school through vocational and/or college levels is essential to obtaining a thrivable-wage job that will provide a person access to the resources to maintain a healthy life. Workforce development needs to be coordinated with local industry’s needs and promote job development skills of community members. This coordination will strengthen Chicago’s economic vitality.

**Threats:**
- Disinvestment in education and inequitable funding for schools in low-income areas
- Disconnected workforce development programs do not provide skills needed by local businesses
- Workforce is not representative of community members
- School to prison pipeline affecting many communities of color
- Student debt is too high

**Opportunities:**
- Develop a clear path from education to workforce
- Support efforts to hire locally and assist workers to progress up career ladder
- Advance innovative approaches and leverage emerging technologies to deliver affordable and high-quality education
- Strengthen Early Childhood Education program, especially in communities with limited resources
- Ensure community benefit programs focus on local communities, especially with hiring of community members