Healthy Chicago 2.0 Update
September 2016

Healthy Chicago 2.0 is a citywide plan designed and implemented by community organizations, government agencies, businesses and residents, partnering together to improve health equity.

The quarterly Healthy Chicago 2.0 Update provides a selection of the progress made to achieve the 200+ strategies identified in the Healthy Chicago 2.0 plan. For more information on our progress, please visit www.cityofchicago.org/Health.

Addressing the Root Causes of Health

Built Environment

The Chicago Department of Transportation and partners are finalizing Vision Zero, a key strategy in Healthy Chicago 2.0. The Vision Zero plan uses national best practices to improve enforcement, education, infrastructure and data analysis to help eliminate deaths due to traffic crashes. The new plan is scheduled to be reviewed by the community this fall. Efforts will focus on areas that experience a high number of crashes, as well as in high economic hardship areas and communities of color where crash rates are higher than average.

Housing

To ensure all residents have a place to call home, Mayor Emanuel launched an interdepartmental task force to look at homelessness across the City. In April, the Department of Family and Support Services launched a pilot program to house 75 residents living in Northside viaducts. Assessments began in April and housing started this summer.

Education

On July 21, Senate Bill 238 was signed into law, helping maintain Illinois’ standing as a leader in early childhood education. The bill ensures that a portion of Illinois’ early childhood education block grant dollars go directly to support programs for infants and toddlers. This follows the recent unprecedented increase to the early childhood education block grant, which will receive an additional $75 million. This record investment for the state’s youngest learners supports Healthy Chicago’s strategy to bring awareness to the importance of early education.

In August, Mayor Emanuel announced a new online enrollment system making it easier for parents to enroll their children in early education programs available through Chicago Public Schools and community-based sites. Today, full-day pre-kindergarten is available to more than 17,000 children across the city, a 60% increase since 2011.

Expanding Partnerships and Community Engagement

Healthy Chicago Seed Grants

More than 100 organizations applied for the first Healthy Chicago Community Seed Grants from the Public Health Institute of Metropolitan Chicago. These small-dollar grants are available to groups working to meet the objectives of Healthy Chicago 2.0. Though there was only funding for six awards, we look forward to working with the broad array of applicants on additional efforts to implement Healthy Chicago 2.0. Congratulations to this year’s winners:

- Build Inc will work to reduce the teen birth rate by expanding peer health programs and access to contraception in low opportunity communities.
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- **Gads Hill Center** will implement an evidence-based home visit program to identify and respond to postpartum depression in new, young Latina mothers in Brighton Park.
- **Haymarket Center** will work to become trauma-informed through mental health first aid training for staff working with those experiencing homelessness.
- **MetroSquash** will promote secondary education opportunities for African American youth in targeted South Side neighborhoods, including college prep workshops, tutoring and college visits.
- **St. Anthony Hospital** will promote self-management for diabetes through the launch and evaluation of new education workshops for 300 at-risk individuals.
- **Westside Health Authority** will build social cohesion and improve perceptions of neighborhood safety through a new walking program for Austin residents.

**Strengthening Child and Adolescent Health**

**Paid Sick Leave Requirements**

On June 22nd, the Chicago City Council passed the city’s new paid sick leave ordinance. The law benefits thousands of employees across Chicago, allowing them to earn paid sick leave for the first time. Workers will be able to accrue and use up to five earned sick days over the course of one year and roll over up to 2.5 unused sick days to the following year. This ordinance was based on the framework created by the Working Families Task Force. Healthy Chicago 2.0 lists the provision of pro-family business practices such as these as a key strategy.

**Expanded Medicaid for CPS Students**

**Chicago Public Schools** received $900,000 to implement the Healthy Schools, Healthy Cities Medicaid Enrollment Project under the Connecting Kids to Coverage Agreement Award. CPS will use data-driven approaches to identify uninsured students, particularly those from Latino communities and provide Medicaid and CHIP application assistance in coordination with community-based organizations.

**Promoting Behavioral Health**

**Citywide Assessment**

As listed in the Healthy Chicago 2.0 strategies, CDPH is conducting a citywide assessment of behavioral health system capacity. The survey aims to provide information on types of services, location and usage. The data will then be used to better design citywide responses and investments to ensure more Chicago residents in need have access to quality services. Please be sure your agency is included. More details at [bit.ly/2cgowHG](http://bit.ly/2cgowHG).

**Building a Trauma-Informed City**

As part of efforts to transform Chicago into a Trauma-informed city, **Presence Health** and CDPH launched mental health first aid training for the staff of all 50 Aldermanic offices, with the understanding that civil servants – especially those interfacing directly with residents – need to understand how to recognize and respond to mental health crises in residents.

**Reducing Violence**

**New Federal Funding**

The U.S. Department of Health and Human Services awarded a $5million/5-year grant to CDPH to support violence prevention and community development efforts including improving access to trauma-informed behavioral health services and trainings. Multiple organizations provided technical assistance during the grant writing including **Adler University**, **Ann and Robert H. Lurie Children’s Hospital**, **NAMI Chicago**, **Community Justice for Youth Institute** and **Thresholds**.
**Healing Trauma Together**
The U.S. Department of Education announced in September that the Chicago Public Schools will receive $1.3 million to implement its Healing Trauma Together program, expanding capacity to meet behavioral and mental health needs of students attending 10 high schools in neighborhoods facing violence and civil unrest. In coordination with the new ReCAST grant received by CDPH, HTT will provide professional development to support personnel in adopting trauma-informed practices and improving school climates.

**Increasing Access to Health Care and Human Services**

**School Based Health Centers**
The Illinois School-Based Health Alliance, sponsored by EverThrive Illinois, launched a three-year strategic plan focused on school-based health centers (SBHCs), including working toward both the sustainability and growth of the SBHC model. This work aligns with Healthy Chicago 2.0, including the following strategies: defending State grant funding for SBHCs, creating and disseminating marketing materials that support the SBHC model, providing technical assistance and information on Medicaid managed care to improve SHBC billing and contracting in managed care regions and implementing strategies to increase Medicaid funding for behavioral health services in SBHCs.

**Healthcare for Uninsured Residents**
Responding to advocacy by Healthy Communities Cook County (HC3), a coalition of community groups working to develop a coordinated health care network for the uninsured, the Cook County Board passed a resolution to create a health task force. The task force includes representatives from community organizations, faith institutions and health providers from across the county. The task force was commissioned to research the expansion of affordable and quality health care to uninsured residents in Cook County. A county ordinance has been introduced to create a direct health access program within the Cook County Health and Hospitals System.

**ACA Enrollment**
This summer, Chicago Affordable Care Act (ACA) Consortium and the Chicago Coalition for Outreach and Enrollment joined forces to create one organization, the new Illinois Coalition for Health Access (ICHA). ICHA’s goals include the creation and support of a certified application counselors (CAC) workforce, a key strategy in the Healthy Chicago 2.0 plan. Additionally, ICHA will utilize data to identify communities of high need, coordinate enrollment hubs and outreach events and unify messaging among stakeholders.

**Reducing the Burden of Infectious Disease**

**Hepatitis C Prevention**
Increasing knowledge of and access to Hepatitis C (HCV) treatment options and support services is a key strategy of Healthy Chicago 2.0. A number of community organizations came together to host town hall meetings on the disease at the CORE Center and University Center (DePaul) over the summer. AIDS Foundation of Chicago’s advocacy efforts led to the inclusion of HCV medications for 100 HIV/HCV co-infected individuals eligible through the state’s AIDS Drug Assistance Program. CDPH is collaborating with community and academic partners through the Hepatitis C Community Alliance to Test and Treat (HepCCATT) to improve data sharing to increase patient testing, treatment and cure of Hepatitis C.
Preventing and Controlling Chronic Disease

Preventing Tobacco Use
This summer, Chicago implemented a number of new reforms passed by the Chicago City Council to curb tobacco use among youth, a key objective in the Healthy Chicago 2.0 plan. The new reforms include a tax on cigars and smokeless tobacco products, an increase in the age requirement to purchase both cigarettes and other tobacco products from 18 to 21 years of age and prohibition of smokeless tobacco products in ballparks and stadiums.

Increased HPV Vaccination Coverage
The CDC awarded $500,000 in new funding to increase Human Papillomavirus (HPV) vaccine coverage in Chicago over the next two years. As a result, CDPH will be able to increase site visits and technical assistance to healthcare providers, conduct clinician-to-clinician, medical assistant and webinar education sessions and enhance immunization report cards—all strategies to increase provider understanding and ability to promote and provide the HPV vaccine.

Utilizing and Maximizing Data and Research

Improving Research Capacity and Collaboration
Developing mechanisms to facilitate the dissemination and use of public health research is a significant strategy in Healthy Chicago 2.0. As of July 30, an agreement has been established between the Chicago Consortium for Community Engagement (C3), a coalition of Chicago academic institutions, and CDPH to provide resources and structure to create a research liaison position within the health department. CDPH will work closely with C3 institutions and the greater Chicago public health and biomedical research community to:
1. Encourage local academic institutions to develop promotion criteria that incentivize local dissemination.
2. Adopt a citywide public health research agenda.
3. Establish Chicago public health research principles of community engagement to ensure equitable design, conduct and use of research.

JOIN THE HEALTHY CHICAGO 2.0 MOVEMENT!

Healthy Chicago 2.0 is planned, initiated and implemented by community partners throughout the city. The plan’s ambitious goals can only be realized with the help of community organizations and residents working to improve health equity in every community. If you or your organization is interested in learning more about Healthy Chicago 2.0 and how to get involved, email us at healthychicago2.0@cityofchicago.org.

CDPH is pleased to announce Anne Posner has been named Director of Health Equity and Strategic Partnerships. In this role, Anne leads the city’s participation in Healthy Chicago 2.0 and works directly with partner organizations to accomplish the plan’s strategies. Funding comes in part from the Otho S.A. Sprague Memorial Institute.