Appendix 3.2 | The Case Examples Presented at Our Symposium (cont)

Bronx Healthy Buildings Program

Bronx Healthy Buildings Program

A case example presented at our symposium

This write-up of this case example was prepared by the authors of this report based on the content received from the contributors in the run-up to the symposium, as well as the comments recorded by the writer/transcriptionist during the presentation at the symposium. The contributors have reviewed this write-up and made corrections, as required.

Contributors

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Overview

The Bronx Healthy Buildings Program is a cross-sector initiative to promote holistic community health by addressing the upstream causes of asthma-related emergency department visits, hospitalizations, and missed school or work days. The Bronx Healthy Buildings Program is a collaborative partnership led by the Northwest Bronx Community and Clergy Coalition (NWBCCC).
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Bronx Healthy Buildings Program

**Background**

New York State wants to reduce Medicaid costs. So, with support from the federal government, it decided to invest $8 billion over five years to address the upstream causes of poor health – in the hopes that it will reduce the cost of patient care down the line.

In the Bronx, two of the local hospital systems created an organization called Bronx Partners for Healthy Communities to receive and disperse their share of the funds and chose asthma as one of their primary focuses.

Poor living conditions can have a detrimental impact on health. The same poor living conditions can make buildings energy inefficient. For instance, sealing holes and cracks that allow in cold air not only make the building a healthier place to live but also more energy efficient.

Landlords do not have a clear economic incentive to improve their buildings in the name of health. Even those that want to ‘do the right thing’ might not be able to get the money they need to do so.

The US Department of Energy’s (DOE) Weatherization Assistance Program aims to reduce energy costs for low-income households by increasing the energy efficiency of their homes. This is done by making changes to a home, a process known as an ‘energy efficiency retrofit’.

**Organizational Structure**

The Program is a collaborative partnership led by the Northwest Bronx Community and Clergy Coalition (NWBCCC). Other members of the partnership are Montefiore Medical Center, New York City Department of Health & Mental Hygiene, Emerald Cities Collaborative, New York Lawyers for the Public Interest, Ritchie Torres, New York City Council Member, Bronx Cooperative Development Initiative, and MIT Community Innovators Lab.

NWBCCC is a grass-roots, member-led organization that has, since 1974, helped Bronx residents develop visionary leadership, build community power, and revitalize their neighborhoods. NWBCCC has done tenant organizing since its inception and has completed weatherization retrofits on hundreds of buildings over the last 30 years as part of the Weatherization Assistance Program. NWBCCC also organizes a Clergy Caucus that builds the leadership of Bronx clergy and the Bronx Green Contractors Association, which builds capacity for local contractors who want to build sustainably and provide high-road jobs for low-income, people of color.

One of the reasons why NWBCCC took on the leadership role is because the program was part of the inaugural BUILD Health Challenge. They funded the initial convening and coordination work over the first two years – something that funders in general are not always willing to fund. The BUILD Health Challenge grant stipulated that the community has to be the lead. It also stipulated that the work had to have three partners: a community-based organization, a local hospital, and the local health department.

The Emerald Cities Collaborative seeks to green US cities, strengthen democracy, and create economic opportunities for all. It works in eight cities across the country, the work looking different in each city depending on local context. Through its work in Seattle, San Francisco and Cleveland, it has figured out how to finance predevelopment costs, such as audits, engineering, and tenant engagement, which is often a major hurdle for building owners. The Collaborative

**Strategy**

The Bronx Healthy Buildings Program was an opportunity to invest in energy efficiency and use the savings to finance health-related upgrades to buildings, while keeping landlords accountable to tenants.

Landlords were helped to get grants or borrow money to upgrade their buildings. Once in the building, the goal was to work with them to make other improvements, like adopting integrated pest management, green cleaning, and other healthy management practices. Part of the aim is to show that upstream investments can produce returns of better health and lower health care costs.

NWBCCC organizers supported tenants in building community power. The tenants were engaged in the Program, empowered to take on leadership roles, including through organizing tenant associations, and, as a result, were able to hold their landlords accountable, essentially expressing agency over their home and health.
brought this knowledge into the Bronx Program. It also brought knowledge of strategies for increasing participation of minority- and women-owned businesses and disadvantaged workers on construction projects.

Establishing this partnership was not easy:

“We’re learning a lot about partnering with anchor institutions and how to navigate bureaucracy and form an accountable relationship. We certainly don’t have all the answers about how to make that work, but a couple of things that we’ve learned is that you need to find the opening within their timeline and their planning process that you can take advantage of. So, we know that Montefiore was undertaking this asthma [related] Medicaid reform project [and that] that was something we could latch onto to bring them to the table. We found an internal champion who could go to bat within the bureaucracy and push this project forward.” – Maggie Tishman, Local Director, Emerald Cities Collaborative

And once established, sustaining the partnership also has its challenges:

“We need to build relationships around [the internal champion] as well, because if she moves on we’ve lost our important ally on the inside, and we need her boss and her bosses’ boss onboard as well. And you need to get things in writing from them.” – Maggie Tishman, Local Director, Emerald Cities Collaborative

**Funding**

There are multiple sources of funding.

As mentioned, the BUILD Health Challenge funds the core operation. The program essentially piggybacks on the federal Weatherization Assistance Program so that landlords do more than just weatherize their buildings. There are also New York City-funded grant and loan programs for retrofits that are being accessed. And it uses resources from New York State Medicaid reform and the NYC Department of Health to provide home-based asthma interventions and training for landlords and tenants.

“The relationship with BUILD Health Challenge went beyond funding. The leaders behind the Challenge were clear that all parties needed new ways of working, including funders. Quite what the new ways were, they were still exploring:

“Being funded by [the] BUILD Health Challenge was really, really unique. We had been engaging our local health system for many years and not getting very far in the conversation of exploring community benefit dollars. And, so the funding of our partnership, which required the health department, a health system, and community as lead was really essential in developing the project.” – Sandra Lobo, Executive Director, Northwest Bronx Community & Clergy Coalition

With funding from New York State’s Medicaid reform program, Montefiore and St. Barnabas Hospital are providing community health workers and integrated pest management for people with asthma.
One possible criticism for the work is that public money is being channeled to private landlords. On the other hand, the landlords can be seen as the conduits for public money to go towards reducing greenhouse gas emissions – something of public value – while making buildings safer and healthier. Plus, affordability requirements are built in – funds from the Weatherization Assistance Program can only go to buildings with low-income tenants, and, if landlords use City funds, they have to agree to keep their buildings affordable for 15 to 30 years.

Tactics

The Program works to reduce people’s exposure to asthma triggers in apartment buildings in the Bronx by:

- Performing energy conservation upgrades while connecting patients to home-based asthma resources. This includes carrying out energy- and health-related assessments in multi-family buildings to determine retrofit scope-of-work and outline payment plans through future energy savings. It also includes referring eligible tenants to community health workers to deliver in-home outreach to tenants about asthma self-management practices and how to control environmental health hazards.

- Helping residents build community power through tenant organizing and training about the social determinants of health. This includes training residents about the influence of housing conditions on health and how to organize a tenants’ association to advocate for building upgrades.

- Creating jobs and wealth in the community by contracting locally and holding contractors to high-road community workforce standards and ecologically sustainable practices. This includes working with tenants and landlords to select Bronx-based construction firms with prevailing-wage positions and ecologically sustainable renovation.

- Evaluating the Program by tracking reductions in rate of asthma-related hospitalizations and surveying residents about perception of health and/or changes in behavior.

Examples of Tactics in Action

The buildings were selected on the basis of clinical data from Montefiore Medical Center (where patients being seen in the emergency department lived), insights from tenant organizing on the social and environmental conditions within their homes, and additional data on housing and building violations.

In terms of training on how housing conditions affect health, all partners – including residents – were encouraged to think holistically:

“*No matter how good someone can be exercising or eating well or taking care of asthma with proper medications, coming home to mold and rodents absolutely has an impact on their asthma.*” – Sandra Lobo, Executive Director, Northwest Bronx Community & Clergy Coalition

In terms of training on organizing and advocating, the focus was on leadership development within the community, including collective decision-making and problem solving:

“*Those most impacted by issues need to be at the center of decision-making.*” – Sandra Lobo, Executive Director, Northwest Bronx Community & Clergy Coalition

In terms of selecting Bronx-based construction firms, local workforce development – including proactively seeking out minority- and women-owned businesses – was employed as a health strategy:
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“We know that unemployment and economic insecurity are linked to poor health outcomes.” – Maggie Tishman, Local Director, Emerald Cities Collaborative

NWBCCC’s mission, in fact, explicitly includes the principle of ‘economic democracy’:

(We shifted our mission to explicitly include economic democracy that really talks about shared wealth, ownership, and collective governance, as well as an explicit naming of racial justice. [This resulted in] guiding principles and questions as we develop our work. How are we developing leadership of color in our campaigns, in our projects? How is the community’s voice involved and at the center of decision-making in our organization?” – Sandra Lobo, Executive Director, Northwest Bronx Community & Clergy Coalition

This inclusion, however, is not a one-time thing; it’s an ongoing process:

“We’ve all been socialized within a racist structure and it is a lifelong journey to undo that work. We have a variety of ways that we try to hold accountability for us. Who’s hired within the organization? Do they represent the community they come from, and who speaks on behalf of the community? [These] are just some critical questions that we have identified for ourselves to ensure that our work is guided by that principle.” – Sandra Lobo, Executive Director, Northwest Bronx Community & Clergy Coalition

Factors that Supported Success

BUILD Health’s stipulations that there be three entities in the partnership and that the community one be in the lead role has a significant impact on the work:

“That really helps to balance the power dynamic between this large hospital system and community, and that will continue beyond the term of the grant. When situations have arisen where partners have different visions of the future of the project, the community [has] the ultimate veto power to say no, we don’t want X to happen in our community. We’re the ones that are going to have to live with the consequences, so it’s not going to happen. And in terms of community agency and community accountability I think that’s been really critical.” – Maggie Tishman, Local Director, Emerald Cities Collaborative

The key to organizing residents is empathy:

“It does work. Put yourself in that other person’s lens and analyze: ‘How would I feel living in a condition I don’t want to be living in?’ Having open conversation and sharing a personal story, [for instance] I also suffer from asthma, [can open] up great communication and trust.” – Evy Viruet, Small Business Organizer, NWBCCC

Understanding the political landscape is key:

“Political power is instrumental in moving and creating change, so one of the very first things that we do in our campaigns is a power analysis of who has the power to influence the decisions that we want to be made, and we organize around them. We understand what our elected officials believe in, how they have voted, [and] what they have influence over.” – Sandra Lobo, Executive Director, Northwest Bronx Community & Clergy Coalition
Looking Ahead

In terms of next steps, sustaining and scaling, as ever, are challenges:

“This is a great pilot program. We believe we have already done great work and have great transformative work ahead of us. The question is then how do we actually get funding beyond a two-year period to help us get the scales to really get to the deliverables that we’re hoping for?” – Sandra Lobo, Executive Director, Northwest Bronx Community & Clergy Coalition

It comes down to time (with community residents) and investment (securing more and more access to capital):

“When we think about scale of how do we engage more community members, it really does require experienced community organizers that are going to go out and support people to have agency, to identify the issues that they are interested in moving, and being able to have the capacity to do that. And then, in our context in terms of scale of buildings, we actually need the investment to help finance the retrofits of those buildings that will employ local folks in doing them. That will help us get to scale, access to capital and investment in our community. So, it’s time and an investment and they often go hand-in-hand.” – Sandra Lobo, Executive Director, Northwest Bronx Community & Clergy Coalition

Final Reflection

Ultimately:

“What’s most important is that communities believe.”
– Maggie Tishman, Local Director, Emerald Cities Collaborative

Results

As part of the Program partnership, the Montefiore Medical Center is working with NWBCCC to develop the evaluation methodology.

One outcome so far is something key to cross-sector initiatives, which is establishing the ability to work with others:

“It has taken two years to build trust with (partners and the community). That was essential.” – Sandra Lobo, Executive Director, Northwest Bronx Community & Clergy Coalition
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Contributors’ Biographies

Diane Wellman is an independent writer, researcher, and interview transcriptionist. She holds an MA in English from Marshall University and has worked in her field for two decades.

Yvonne (Evy) Viruet has been a leader with the Northwest Bronx Community & Clergy Coalition (NWBCCC) since 2010. Currently, she serves as the Small Business & Economic Development Organizer to mobilize small business owners in the Bronx to protect and sustain their enterprises and change policy to create an environment in New York City where all small businesses will thrive. Yvonne educates small business owners to understand their rights and as well as the pressures of gentrification, connects them with legal services, strengthens merchants’ associations, and organizes for citywide policy for small business protections. She has worked with numerous business owners to defend themselves from landlord harassment and secure basic services. Additionally, Yvonne is a surveyor with the Bronx Healthy Buildings Program to collect tenant feedback to support ongoing program evaluation.

Katherine Mella is a Program Associate at the MIT Community Innovators Lab, working as part of the Bronx Cooperative Development Initiative (BCDI). BCDI is a network of grassroots leaders, anchor institutions, elected officials, and finance partners who are working together to achieve a sustainable, equitable and democratic economy in the Bronx. Katherine leads BCDI’s community health agenda, leveraging opportunities tied to local and national healthcare system transformation, and using the social determinants of health as a key framework. In this role, she also provides community partners with technical assistance in the areas of strategic planning, partnership development, project coordination, and evaluation. Katherine earned her Bachelor’s degree from Brown University in Urban Studies and completed her Master’s in City Planning at MIT.

Maggie Tishman is the New York City Director for the Emerald Cities Collaborative. She is also a Community Energy Fellow at MIT Community Innovators Lab, a center for planning and development with traditionally-marginalized communities across the Americas. In her role, she works with grassroots organizations in the Bronx to plan, implement, and document community energy projects, and she supports small-business and workforce development in the energy and construction sectors. Previously, Maggie worked in affordable housing and community development in New Orleans. Maggie completed her Master’s degree in City Planning at MIT and a Bachelor’s in Urban Studies at the University of Pennsylvania.

Sandra Lobo serves as the Executive Director of the Northwest Bronx Community & Clergy Coalition (NWBCCC), a 42-year-old member led organization that unites diverse people and institutions to fight for racial and economic justice through intergenerational organizing. A first-generation immigrant and resident of the Bronx for over 20 years, Sandra’s areas of focus are developing leadership of color, creating long term organizational sustainability, building community-shared wealth and ownership, and collective governance over local assets through an anti-racist lens. Before this role, Sandra was trained in anti-oppression organizing and leadership development incorporating a restorative justice framework, and served as Director of the Dorothy Day Center for Service and Justice at Fordham University for 17 years, shifting the focus of the Center’s work from a charity to a justice model.