REQUEST FOR PROPOSALS (RFP)
Improving Social Determinants of Health – Getting Further Faster
Evaluating the Impact of Community Partnerships on Social Determinants of Health: Racial and Economic Equity

A. Cover Letter: **Please see attachment in the submission email.**

B. Prior Experience and Performance:

Within the past three (3) years, the PP4H has worked with community residents and multi-sector partners to develop the five policy, systems and environmental change initiatives to transform racial and economic health, well-being and equity. Smart Routes addresses the issues of community safety with the built environment of school aged children. Partners in our Clinical-Community Linkages program VeggieRX addresses the socioeconomic crisis within the community and subsequent access to food. Our Real Food Collectives social enterprise brings together partners to build the local food system low income patients with diet related diseases to support them through our nutrition and clinical programs and reduce food insecurity. Each initiative is supported by the Community Leadership Academy that builds social connectedness around sustainable health policy, system, and environmental change strategy. Finally, in partnership with Respiratory Health Association and the Maywood Police Department, PP4H made strides to adopt and spread the Tobacco free policies of Tobacco 21 policy.

In addition, we collaborate with the Cook County Department of Public Health (CCDPH). CCDPH serves as health strategists for the region, with a focus on health equity and strategies to address root causes of health inequities such as structural racism, poverty and SDOH. CCDPH was instrumental in the launch of PP4H to help advance policy, systems and environmental change initiatives through collective impact and alignment across systems. CCDPH's Community Health Improvement Plan (CHIP) has a strong emphasis on the built environment, clinical-community linkages, social connectedness, tobacco-free policies, and food insecurity. PP4Hs efforts to advance PSE change in these areas further supports achievement of the shared vision and priorities outlined in CCDPH's CHIP.

Built Environment
***Smart Routes to School* -** The Community Safety Summit held in 2018 laid the groundwork for a Smart Routes to School campaign during 2019. Smart Routes to School is an initiative where adults are trained to supervise commonly used walking routes to school to promote safe passage for children walking to school. PP4H partner Coalition for Spiritual and Public Leadership (CSPL) Safety and Violence Prevention Committee design team, in collaboration with the PP4H Built Environment Hub, led this initiative. PP4H's ability to adapt PSE strategies to the needs and priorities of its community resident partners facilitated greater community resident support for the Smart Routes policy, which ultimately led to an intergovernmental agreement, signed August 23, 2019, to fund the $117,952 pilot at Irving Middle School. This broad

grassroots support was critical for School District 89, the Village of Maywood, and Proviso Township to pilot and fund a Smart Routes to School initiative at Irving Middle School.

Smart Routes employed 13 part-time Smart Route workers to supervise walking routes and an additional full-time Smart Routes Coordinator to oversee coordination and implementation of the pilot. A local non-profit, Strengthening Proviso Youth (SPY), is the lead organization that manages the administration and staffing of Smart Routes. The Smart Routes to School pilot at Irving Middle School was launched in August, 2019. In 2019, 100 youth participated in Smart Routes each day between August 1, 2019 and November 30, 2019 (12,100 total). Several Smart Route workers were also hired to serve as hallway monitors for Irving Middle School. Irving Middle School administration reported being satisfied with the program. Over the three years we documented the change over time of 3 key metrics related to the program which includes 1) adult jobs created by Smart Routes; 2) number of students who now walk to school; and 3) daily violence incident reports.

Community-Clinical Linkages

VeggieRx is an innovative cross-sector program involving local farmers, health care providers, and community-based organizations. Healthcare providers identify patients with current federal SNAP benefits, who have or are at risk for diet related disease, and then refer these patients into weekly nutrition education classes coupled with free bags of fruits and vegetables, recipe cards, and double value coupons to use at pop-up farm stands and Windy City Harvest markets. Chicago Botanic Garden has partnered with Proviso Partners for Health, Loyola University Health Systems, and Public Health Institute of Metropolitan Chicago to expand VeggieRx program to clinics and hospitals within the Loyola network, including Loyola Center for Health in Elmwood Park, Gottlieb Memorial Hospital in Melrose Park, and MacNeal Hospital in Berwyn. Over the three years we monitored the change over time of 3 key metrics related to the program which includes 1) education to SNAP recipients with diet-related disease about the health benefits of a plant-rich diet; 2) Increase the purchase and consumption of fresh, locally produced fruits and vegetables using SNAP benefits; and 3) physician referrals.

Food Insecurity

Real Foods Collective Food Access Initiative - To respond to Maywood's rapidly growing COVID-19 related food access crisis, the PP4H team expanded and scaled its proven VeggieRx model to five times the initial capacity. The Food Justice Hub increases the availability of fresh produce in multiple food-insecure communities. The activities and incentives offered through Real Foods Collective respond to the reality—learned through the residents' experience in the community—that the provision of free and reduced-price vegetables is often insufficient when it comes to changing ingrained dietary habits. Collaboration with community resident partners through the Food Justice hub was instrumental in understanding key facilitators to promote food access in Maywood, particularly the need to co-design solutions in collaboration with community residents. The Giving Garden is PP4H's inspirational urban farm located in Maywood on land donated by a local business ReUse Depot. The Giving Garden became the

face of PP4H's vision to create an equitable local food system that sustains Maywood residents through accessible healthy foods and meaningful economic opportunity.

The Giving Garden was the setting for an Urban Agriculture Internship that has trained over 90 youth in urban agriculture and entrepreneurial skills. The produce harvested from the Giving Garden was sold at farm stands, local restaurants, and distributed to community residents at no-cost. Lastly, the Giving Garden served as a welcoming space for residents to connect and build community through free gardening workshops offered by PP4H farmers, volunteer workdays, and community garden plots. Over the three years we assessed the change in 4 key metrics related to the program which includes 1) increase in acres for urban farming; 2) increase in youth trained in urban farming; 3) increase the pounds of produce harvested and distributed; and the 4) value of produce and income generated from fresh, locally produced fruits and vegetables.

Social Connectedness

The Community Leadership Academy (CLA) introduces the foundations of Proviso Partners for Health and coaches potential partners on our model of racial and economic equity. Individuals who participate in the CLA have the opportunity to explore their unique leadership role in advancing policy, systems, and environment change. Over the three years we document the change in 5 key metrics related to the program which includes 1) gross income generated by social enterprises incubated or supported by PP4H; 2) number of resident leaders coached in PSE change, leadership, and evaluation; 3) number of people involved in the CLA; 4) number of graduates who have increased their knowledge, and 5) number of local social enterprises launched and supported by PP4H.

Tobacco-Free Policies

Tobacco 21 **-** In partnership with Respiratory Health Association (RHA), PP4H reported an overall reach for the tobacco hub of 1.7M IL youth residents, age 15-24. This figure represents the expected reach of RHA's statewide education and advocacy activities related to the Tobacco 21 policy change goal. The incremental increases in tobacco prevention reach as Tobacco 21 passed in Maywood and then IL. When Tobacco 21 passed in Maywood, this restricted tobacco purchasing for a potential total of 1,660 youth. When Tobacco 21 passed statewide at the end of 2019, an additional 622,599 Illinois youth 18-21 could no longer legally purchase tobacco. With the passage of Tobacco 21 statewide, a total of 622,765 Illinois youth are affected. The tobacco prevention activities were focused on education to support the effective implementation of Tobacco 21 in two Maywood schools. The total reach of these educational activities was 3,512. Over several years we documented the change in 3 advocacy activities which include 1) local Tobacco 21 ordinance adopted by the Village of Maywood; 2)14,000 individuals were contacted to urge the Governor to sign a statewide Tobacco 21 bill through an e-advocacy system and 3) 72 letters were written to urge him to sign a statewide Tobacco 21 bill

LOGIC MODEL - Brief Summary <u>Evaluating the Impact of Community Partnerships on Social Determinants of Health</u>): We aim to conduct a retrospective evaluation of our strategies that advance health equity and improve chronic disease conditions by addressing the social determinants of health: Built Environment, Community-Clinical Linkages, Social Connections, and Food Insecurity.

Inputs	Strategies	Short Term Outcomes	Intermediate Outcomes	Long Term Outcomes
1. Built Environment	1a. Smart Routes	1b. partner collaboration	1c. increased adult supervision	1d. decreased violent incidents rates
2. Community-Clinical Linkages	2a. VeggieRX	2b. increased in food access and distribution	2c. increased physician referrals	2d. decreased in diet related conditions
3. Food Insecurity	3a. Giving Garden	3b. increased youth trained in urban agriculture	3c. increase in acres of urban farm land	3d. increased revenue from food purchase
4. Social Connectedness	4a. Community Leadership Academy	4b. increased in collaboration	4c. increase in community power building for personal and career development	4d. increased residents voice in PSE
5. Tobacco-Free Policies	5a. Tobacco 21	5b. increased resident awareness of Tobacco 21 policy in Maywood	5c. increased organizational advocacy for Tobacco 21 2 more towns	5d. increased policy adoption

C. Community Multi-Sector Partnership: Include the description of the community/multi-sector partnership that addresses one or more of the social determinants of health described above. Describe the participation of key sectors and include relevant commitment of key leadership and stakeholders, funders, and other relevant community assets.

1. Lena Hatchett, Executive Lead, Proviso Partners for Health, Lhatchett@luc.edu, 630-750-9607. Dr. Hatchett will lead as the Principal Lead and manage existing data, co-design the evaluation plan, recruit partners, and disseminate the report to community resident partners.
2. Lorenzo Webber, Assistant Director of Youth Services, Proviso Township, lwebber@provisotownship.illinois.gov, 708-449-4309. Mr. Webber will serve as the Co-investigator to design the evaluation plan and recruit youth serving organization partners, and disseminate the report to schools, faith-based organizations and youth serving organizations.
3. Alfreda Holloway-Beth, Director of Epidemiology, Cook County Department of Public Health, alfreda.holloway@cookcountyhhs.org, 708-546-6062. Dr. Holloway will serve as the evaluation lead to assess the program efforts and work closely with the provided evaluation team for finalizing the reports.
4. Dedra Ries, Director Community Engagement and Health Education, Cook County Department of Public Health, <dries@cookcountyhhs.org. 312-405-7274. Ms. Reis will co-design the evaluation plan and disseminate the report to Public Health partners in the North, South, and West regions of Suburban Cook County.
5. Amy O'Rourke, Director, Chronic Disease Prevention & Control, Cook County Department of Public Health, aorourke@cookcountyhhs.org, 708-446-4141. Ms. O'Rourke will lead the health outcome evaluation effort and disseminate the report to chronic disease prevention partners.
6. Mary Mora, Food Justice Lead, Proviso Partners for Health, mdanza@luc.edu,. Ms. Mora will serve as Co-investigator to co-design food justice elements of the data and circulate the report to local food system partners.

D. Inclusion of Health Equity and the Social Determinants of Health:

Our programs include health equity as a tenement of our work. With the FINI Pilot project, we try to address the complex of socioeconomic challenges that lead to damaging health outcomes for residents. In North Lawndale, 39% of individuals live below the poverty line and the unemployment rate is 19%—triple the city-wide average. Residents endure high levels of violent crime and are 20 times more likely to lose their lives to gun violence than individuals living in Chicago's safest neighborhoods. This vast inequity, along with other stressors, leads to incidence of post-traumatic stress (PTS) comparable to military veterans. These factors coalesce into a self-reinforcing cycle that can keep communities trapped in a depressed economy.

Economic disadvantage and lack of community investment have resulted in a dearth of full-service grocery stores and food insecurity rates triple the national average. Food insecure families experience reduced food intake, disrupted eating patterns, and reduced quality, variety, or desirability of food choices. The confluence of these factors has led to a health crisis in North Lawndale, with the occurrence of diet-related illness escalating to historic highs. Fully two-thirds of North Lawndale children are overweight or obese, about triple the national average. Similarly adults are at higher risk of developing diet-related diseases; for example, 41% have high blood pressure and 29% have type 2 diabetes (with a 62% higher mortality rate than diabetics in the rest of the country), which carries a dramatically increased risk of cardiovascular disease and results in a fatal heart attack or stroke in 67% of all cases.

CBG's continuum of sustainable urban agriculture training programs, Windy City Harvest (WCH), responds to these needs with a holistic approach to wellness, targeting both social and behavioral determinants of health. This is accomplished through sustainable agriculture jobs training that furthers economic development, while simultaneously creating awareness of how urban agriculture improves local food systems, and familiarizing participants with fruit and vegetable preparation, which encourages a plant rich diet. WCH education programs take place on 12 farm sites in the metropolitan area, including nine locations in low-income areas of Chicago's South and West Sides that have been bypassed by traditional food systems. The resulting produce is sold in the very neighborhoods where it is cultivated, creating access to fresh, locally produced fruits and vegetables. WCH uses an asset-based approach, forging relationships with government, nonprofit, and other community organizations that provide an understanding of neighborhood challenges and resources, lease farm land and classroom/office space, and help recruit residents from underserved neighborhoods into urban agriculture and nutrition education programs.

We will report the number of patients referred by physicians and the food insecurity rates in clinics using Community Epidemiologic methods provided by the Cook County Department of Public Health's Epidemiology Unit.

Additionally, we understand that many in our community may be food insecure. Our VeggieRx is an innovative cross-sector program involving local farmers, health care providers, and community-based organizations. Healthcare providers identify patients with current federal

SNAP benefits, who have or are at risk for diet related disease, and then refer these patients into weekly nutrition education classes coupled with free bags of fruits and vegetables, recipe cards, and double value coupons to use at pop-up farm stands and Windy City Harvest markets. Chicago Botanic Garden has partnered with Proviso Partners for Health, Loyola University Health Systems, and Public Health Institute of Metropolitan Chicago to expand VeggieRx program to clinics and hospitals within the Loyola network, including Loyola Center for Health in Elmwood Park, Gottlieb Memorial Hospital in Melrose Park, and MacNeal Hospital in Berwyn.

VeggieRx will increase the availability of fresh produce in multiple food-insecure communities. The activities and incentives offered through VeggieRx respond to the reality—learned through the VeggieRx partners' experience in the community—that the provision of free and reduced-price vegetables is often insufficient when it comes to changing ingrained dietary habits. The synergistic effect VeggieRx activities will advance the initiatives goal to help participants make lasting improvements to their dietary habits by achieving the following objectives:

1. Educate SNAP recipients with diet-related disease about the health benefits of a plant-rich diet
2. Increase the purchase and consumption of fresh, locally produced fruits and vegetables using SNAP benefits
3. Scale the VeggieRx program and adapt it to the health needs of new populations

We plan to conduct a retroactive evaluation of programs to provide to our partner, stakeholders, and community members.

E. Organizational Capacity:

Maywood residents, organizations, businesses, schools, and local government are convened through the Proviso Partners for Health coalition. PP4H serves as a connector by bringing together diverse community stakeholders to address health and economic inequities through six workgroups referred to as "Hubs." The six Hubs include: Economic Justice, Food Justice, Built Environment, Elementary School Wellness, High School Wellness, and Tobacco Free Living. Hubs are co-led by various local organizations, institutions, and community residents through shared leadership. Policy, systems, and environmental change initiatives and financial decisions are co-designed and determined collaboratively among community resident partners and allies representing the various Hubs to ensure that Maywood efforts to address health and economic inequities are driven with community voices at the lead.

Community transformation efforts in Maywood are led through equitable collaboration and built upon win-win scenarios. As an example, the PP4H Giving Garden required new space for vegetable and produce processing and storage after harvests to increase the capacity for local farm stands and community supported agriculture programming. The Maywood Park District recently renovated their facilities with kitchen space ideal for produce processing and harvesting. Additionally, the Park District wanted to develop innovative programming to

increase community use of their facilities. PP4H's Food Justice hub proposed two programs, which the Park District enthusiastically agreed to offer and host at its Maywood facility.

Priorities, success, and goals are defined among community partners through a collaborative and grassroots process of co-design and implementation of community-driven solutions. Shared priorities are identified through Action Labs which convene community partners together to share pressing issues and identify possible solutions. Goals are similarly set in a collaborative process driven by community partners with lived experiences of injustice. Partners identify the wins that advance progress on transforming an inequity by using both evidence-based practices and through dialogue and goal setting with community resident partners with lived experiences of injustice. Success is understood by residents as something within their individual power to influence and achieve, both personally and as part of a larger collective/community. Success is also seen as a continuum that builds the capacity of community partners to eliminate inequities in the community.

F. Budget & Budget Narrative: **Please see attachment in the submission email.**