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City Health
DASHBOARD

Cities in Action

Empowering Communities through Democratized Health Data

February 2024

2023 National League of Cities Capstone Challenge Report

Cities in Action: Empowering Communities through Democratized Health Data

Background

Public attention has been increasingly focused on the far-reaching impacts of structural racism on health, wellbeing, and opportunity in communities across the United States. Redlining, racial covenants, and community disinvestment have emerged as key historic drivers of present-day health and socioeconomic disparities and neighborhood residential segregation. Redlining refers to a practice, widely used by the Federal Housing Administration (FHA) and Home Owners' Loan Corporation (HOLC) in the 1930s, of grading the financial risk of loans for buying homes according to the characteristics of the neighborhood in which the property was situated. Neighborhood racial/ethnic composition played a marked role in this process, with worse grades assigned as the proportion of Black residents increased. Neighborhoods were ranked from "A" to "D," from those deemed least- to most-risky for loan-making. Maps depicting these grades were created for more than 250 US cities,

with "D"-rated areas marked in red (i.e., "redlined"). A result of redlining, which was not outlawed until 1968, was the systematic and disproportionate exclusion of Black and other non-White residents from borrowing and homeownership. Redlined maps existed for two of the cities participating in the Capstone Challenge, Rochester, NY and Houston, TX, and Charlottesville, VA had a longstanding history of racial segregation despite not being formally redlined. In the decades since, many redlined neighborhoods continued to suffer from systemic disinvestment, neighborhood racial residential segregation, income and wealth gaps, and poor housing quality. eighborhoods right next to each other can provide drastically different opportunities for health and well-being. Local data on uninsurance rates, childhood poverty, housing costs, and walkability can help us understand where actionable gaps in opportunity exist and target programs and policy changes to address them.

Problem

Redlining and other discriminatory housing practices have left an indelible mark on communities across the country, consequentially creating long-term barriers to wealth-building for Black households. Cities and communities are seeking approaches to reverse the long-lasting negative impact of redlining by using policymaking, program design and implementation, or community engagement to create equitable opportunities for health and well-being for all residents. However, city leaders often lack the local-level data necessary to illuminate local needs, set priorities, target resources, advocate for funding, and take collective action across sectors to drive measurable improvement in disinvested neighborhoods.

The City Health Dashboard (CHDB) team partnered with representatives from three city governments – Charlottesville, VA; Houston, TX; and Rochester, NY for the 2023 Capstone Challenge.
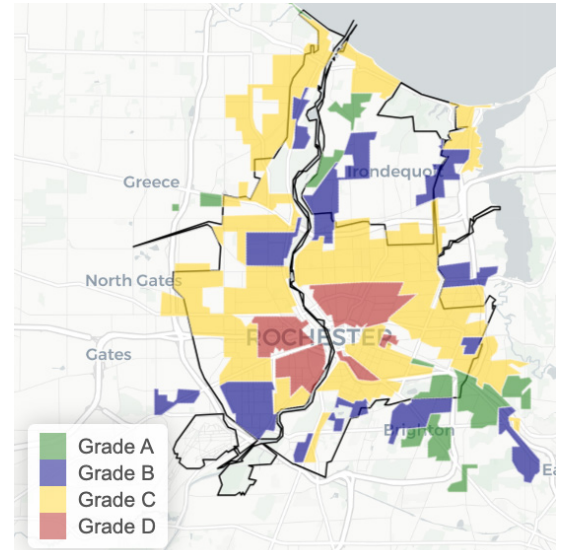
Solution

The goal of the project was threefold:

- Understand the city-level perspective on historical discriminatory housing policy

- Leverage CHDB data and geospatial mapping expertise to visualize redlining and present-day health and socioeconomic disparities in an accessible and approachable report

- Improve data capacity for cities, specific to their needs and priorities to promote health equity and data-driven decision making.

The National Leage of Cities' (NLC) Capstone Challenge is a program designed to connect NLC partners with motivated local leaders to create solutions for member cities' needs through a joint project. The most innovative and impactful project is recognized with an award.
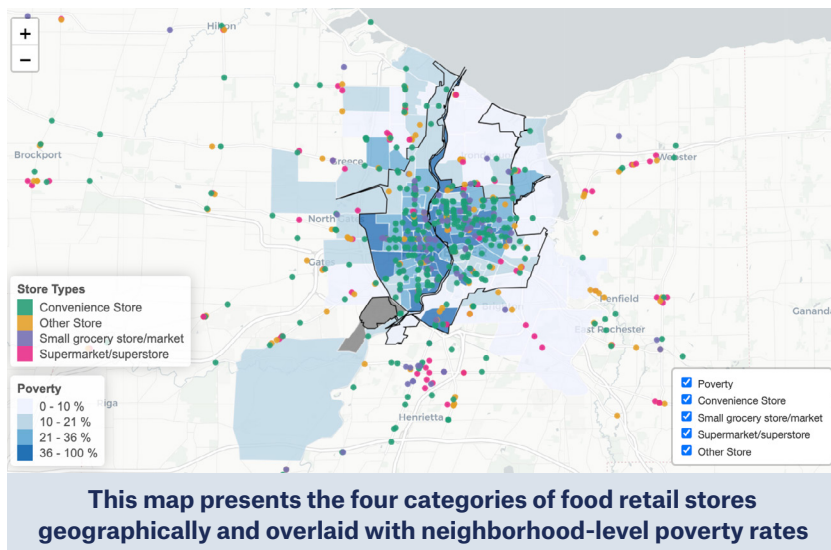
Solution (continued)

The team partnered with three cities on a tailored approach to represent the impact of historic redlining and community disinvestment, aligning closely with each city's strategic priorities:

- In response to rising rental costs, the City of Charlottesville, VA City Council recently approved a large investment to improve housing affordability. The interdisciplinary Capstone team, led by the Deputy City Manager for Racial, Equity, Diversity, and Inclusion, wanted CHDB support to make the connection between housing and health more tangible to the City Council, in order to guide them as they seek to allocate this funding across the community in a holistic, but data-driven, manner.

- The City of Houston, TX Mayor's Office of Education wanted to investigate whether or not their "Hire Houston Youth" initiative, a youth workforce development program, was recruiting young adults from higher-need, formerly redlined areas, a stated program objective. They also wanted to better understand the other challenges potentially facing previously redlined communities in order to inform future recruitment strategy.

- The Office of the Chief of Staff for the Mayor of Rochester, NY is focused on improving healthy food access across the city. They wanted to know if the current food environment supported nutritious eating and better health outcomes, particularly in formerly redlined neighborhoods and for residents struggling with poverty.

This map visualizes the HOLC grades, from A to D, in the city of Rochester.

This map presents the four categories of food retail stores geographically and overlaid with neighborhood-level poverty rates

Through a series of collaborative discussions, the teams developed achievable Capstone Challenge goals, pinpointed CHDB metrics that established baseline data on city priorities, identified local data sources to add community-level nuance, and workshopped the resulting data visualizations and presentations. Each city had a different context and presented unique challenges. For example, Charlottesville was not a city that was formerly redlined, so the Dashboard team needed to identify other metrics to illustrate community disinvestment in the absence of HOLC maps. Houston is a very large, dense city which made data presentation more complex, especially when comparing multiple data elements at once. Rochester welcomed the data expertise of the Dashboard team, having historically relied on interns and part-time employees to piece together local data related to such projects.

Outcome

Integrating the HOLC maps (where available), CHDB's geographically specific data on health, health determinant metrics, and locally-collected data from all three cities, the team developed comprehensive, user-friendly reports that visualize community needs, identify potential disparities, and pinpoint areas for future exploration and growth. The team provided each city with a customized set of recommendations on how to communicate the data to diverse audiences, including council members and other elected officials, school boards, and community residents. In conjunction with a communication plan for community stakeholders, the CHDB team developed a set of best practices on applying the data in program implementation, service delivery, community outreach, policymaking, and resource allocation. Specific use cases will be available for the Final Capstone Presentation, although actual implementation will begin after that date. The City Health Dashboard plans to apply the learnings from the Capstone Challenge when it expands its functionality to allow its users to overlay HOLC maps onto present-day city boundaries, framing historic redlining for stakeholders from the 250+ cities for which HOLC maps are available.