

## **City of Richmond Health Equity Fund**

**Proposed Funding: \$500,000**

### **Overview**

For generations, the majority of Richmond's low-income residents, especially in communities of color, have been excluded from the resources we all deserve to protect and promote our physical and emotional health. An equity-driven public health approach in Richmond requires us not only to fund programs and resources but to understand and address the underlying causes of poor health and acknowledge the racism and discrimination that have contributed to health disparities such as gun violence, substance use disorder, and preterm birth. Each of the community-based initiatives proposed here is community-informed and evidence-based and has the capacity to strengthen individuals, families, and entire communities in both immediate and long-term ways.

### **Resource Center Mental Health and Substance Use Disorder Pilot**

In order to improve access to mental health resources for residents of Richmond's public housing communities, Richmond City Health District (RCHD) and Richmond Behavioral Health Authority (RBHA) will partner to provide on-site services at the District's satellite health centers, called Resource Centers, in Gilpin, Hillside, and Whitcomb Courts. The goal of this pilot is not only to serve those who experience chronic mental health challenges or who are in crisis but to create a resource that will make it easier for all public housing residents to play an active role in protecting and strengthening their own mental wellbeing.

Total proposed funding for this one year pilot is **\$200,000** and includes the following:

- 1 full-time clinician who sees residents, makes diagnoses, and prescribes medication: \$80,000 annually
- 1 full-time licensed substance use disorder counselor who will offer in-person and telehealth counseling sessions: \$65,000 annually
- 1 peer recovery specialist: \$45,000 annually
- \$10,000 to support mental health first aid courses for community residents, outreach fliers and materials, and other educational materials

RCHD's Resource Centers have established credibility within public housing communities and built relationships with residents that may increase engagement and reduce the stigma toward mental health support that persists in many low-income communities of

color. Services so close to home may also make it easier for residents to seek support if transportation and extended childcare time are less of a barrier. In 2019, Resource Centers' clinical services saw 1,480 clients over 3,130 visits. That year, the Centers navigated 2,157 residents to 210 agencies.

Staff caseloads will range from approximately 25 to 35 clients per week. In addition to individual sessions, mental health staff will provide additional services to include Mental Health First Aid training. Mental Health First Aid helps the public identify, understand, and respond to signs of mental illnesses and substance use disorders among family, friends, and neighbors. Pilot staff may also provide emergency support following community violence or other traumatic events including grief counseling groups or support during vigils. The Resource Centers' Community Health Worker staff will work with the City's Community Ambassadors, Tenant Councils, and other community leaders to promote mental health services in their communities. RBHA and RCHD will work with mental health staff to evaluate the pilot and its impact on mental health outcomes and attitudes for individual clients as well as the communities as a whole.

Each of the selected communities has a clear need for dedicated mental health support. According to 2017 data from the CDC's 500 Cities Project, nearly 1 in 4 adult residents of Whitcomb and Gilpin Courts reported that their mental health was not good at least 14 out of 30 days in a month, and nearly 1 in 5 Hillside Court residents reported the same. Public housing communities across Richmond have experienced increases in violence and emotional strain during the COVID pandemic given higher rates of unemployment, public school disruption, and illness or losses due to the virus. Whitcomb and Hillside Courts are also more physically isolated than other communities and lack the dedicated counseling partnerships other communities have developed, such as mental health services provided by Jewish Family Services at Fairfield Court or the Family Transition Coach program for Creighton Court residents.

Some of the key components of the proposed scope of work include prevention, education, and community engagement work. While these are all necessary to promote resilience and preventive mental health care, they are not reimbursable by Medicaid. For those residents who are enrolled in Medicaid or have other insurance coverage, CHW's will continue to route and refer them to the best available providers, as clients indicate their preferences for care. RCHD and RBHA propose full funding for one year and will adjust the requested amount of city funding based on the actual revenue received from Medicaid. RCHD and RBHA request funding for direct expenses only and will absorb indirect costs including management and supervision, technology, and evaluation and reporting for this pilot. If the model is proven and funding continues in future years, RCHD and RBHA will have an opportunity to leverage city funding to pursue grants to expand

the program to serve a greater number of residents or other public or low-income housing communities.

## **Richmond Doula Fund**

Richmond City Health District seeks funding to establish a Doula Fund that will increase affordable pregnancy, birth, and postpartum support for women of color in the City of Richmond. Doulas are trained non-clinical birth workers who provide pregnancy and birth support. The Doula Fund is an equity-driven strategy that has the potential to reduce racial disparities in maternal health outcomes in the City of Richmond by promoting physical and emotional health and wellness for Black mothers, strengthening mother-baby bonding and infant health outcomes, and compensating Richmond-based doulas for the essential work they perform in our communities. The Mayor's original proposed FY21 budget included a line item for a doula fund that was tabled in the revised proposal as the pandemic hit. The current surplus allows us to restore funding for this maternal child health priority.

Total proposed funding for the Doula Fund is **\$150,000** for one year and includes the following:

- Doula reimbursement rate of \$1,000 per client/pregnant woman (approximately 80 clients served with first-year funding)
- Doula training for 20 women at an estimated cost of \$1,000 per doula
- Marketing and administration costs at an estimated total of \$50,000/year.

Steep disparities exist in outcomes for Black mothers and babies in Richmond, as they do across the United States. Black mothers have the highest infant mortality rate among all racial/ethnic groups in the US, and Black babies are twice as likely as White babies to die by their first birthday. Black women are two to three times more likely to die from pregnancy-associated complications than White women, and Black babies have the highest rates of preterm birth and low birth weight, both of which are leading causes of infant death. These increased risks exist for Black women regardless of age, income, and education. Anecdotally, Black mothers frequently report their symptoms being ignored by medical providers; not being listened to; and feeling devalued and disrespected in healthcare settings.

A growing body of evidence suggests that the presence of doulas can improve outcomes for both mothers and babies, especially those of color. Existing models across the country demonstrate even greater benefits from community-based programs in which doulas are

members of the communities they serve. A doula provides a wide range of benefits to pregnant and postpartum women including:

- Ongoing physical and emotional support during pregnancy, birth, and the postpartum period
- Referrals for health and social services
- Information about birth options and assistance in creating a birth plan
- Support during labor and delivery as needed
- Support with attachment and responsive parenting.

One study of birth outcomes of at risk, socially disadvantaged mothers found that Doula-assisted mothers were four times less likely to have a low birth weight baby, two times less likely to experience a birth complication involving themselves or their baby, and significantly more likely to initiate breastfeeding. Doulas can help facilitate communication between mothers and providers, reducing maternal stress and ensuring mothers receive adequate care. Doulas can also advocate for women of color who face racism and discrimination within the healthcare environment throughout their pregnancy, labor, delivery and post-partum experience and empower women to advocate for themselves and their babies.

To evaluate the success of the program, RCHD will track patient-reported outcomes and establish quality of care indicators for maternal and newborn health metrics.

## **Gun Violence Prevention Framework**

Violence is a significant public health concern in the City of Richmond. Gun violence in particular has taken a toll on our city, with 266 shootings in 2019 alone. Richmond's homicide rate is also increasing, with a 60% increase in homicides from July 1-September 30, 2020 over the same time period last year. Violence affects individuals from all socioeconomic backgrounds, but the majority of violence in Richmond occurs in our communities experiencing interdependent economic, education, public health, transportation, housing, public safety and intergenerational poverty challenges. Violence also has a far greater impact on young people in Richmond, with the rate of firearm deaths for youth ages 10-24 being more than three times the national rate in 2017.

In order to decrease violence rates and address the underlying social, economic, and systemic factors that promote gun violence, we need an evidence-based public health response that is tailored to and informed by our communities and that treats violence as a disease that is curable and can be prevented by changing behaviors and norms. With

**\$150,000** in funding dedicated to implementing an integrated strategy to reduce gun violence, the city will be able to collaboratively develop a hybrid model for Richmond that will incorporate best practices from across the country. This process will take strong components/principles from various models in other communities and pair them with existing successful programs and approaches in Richmond to better serve all affected individuals (victims, offenders/shooters, families, communities, and groups). During an initial planning period, a cross-sectoral group that includes community members with lived experience will tailor the framework to Richmond's needs. Possible priorities may include community-led mediation and violence interruption, hospital-based interventions, and strategies to reduce retaliation for previous violence. The gun violence reduction model will be finalized in early 2021 and will be followed by pilots of new initiatives and a more seamless network of support for all people affected by gun violence.

The framework will treat violence as a public health crisis - one that requires coordinated solutions that address the root causes of violence and seek to treat and heal communities through systemic and structural change. Richmond has many excellent programs that address those who are at risk of or have experienced violence, but our city lacks a framework that orients and organizes our response systems to produce long-term reductions in gun violence. A framework approach incorporates all existing initiatives such as the recent work to reimagine public safety and impactful community-led programs, identifies gaps in services, requires strong collaborative relationships, and provides solutions to root causes. The model will also take a community-centered approach so that in addition to changing individual and community level behaviors, norms, and outcomes, community stakeholders are at the forefront in developing and leading various components.