Butte, Montana
ABOUT THIS REPORT

The Sentinel Communities Surveillance project, conducted by RTI International in collaboration with the RAND Corporation, is sponsored by the Robert Wood Johnson Foundation. The project, which began in 2016, will monitor activities related to how a Culture of Health is developing in each of 30 diverse communities around the country for at least five years. This community portrait follows from the initial Snapshot report for Butte, Mont., and provides insights into drivers of a Culture of Health in the community. The report is not intended to comprehensively describe every action underway in Butte, but rather focuses on key insights, opportunities, and challenges as a community advances on its journey toward health and well-being for all residents.

The information in this report was obtained using several data collection methods, including key informant telephone interviews, an environmental scan of online and published community-specific materials, review of existing population surveillance and monitoring data, and collection of local data or resources provided by community contacts or interview respondents. Interviews were conducted with individuals representing organizations working in a variety of sectors (for example, health, business, education, faith-based, and environment) in the community. Sector mapping was used to systematically identify respondents in a range of sectors that would have insights about community health and well-being to ensure organizational diversity across the community. We also asked original interviewees to recommend individuals to speak with in an effort to supplement important organizations or perspectives not included in the original sample.

A total of 15 unique respondents were interviewed during spring and summer 2018 for this report. All interviews (lasting 30–75 minutes each) were conducted using semistructured interview guides tailored to the unique context and activities taking place in each community and to the role of the respondent in the community. Interviewers used probes to ensure that they obtained input on specific items of interest (for example, facilitators and barriers to improved population health, well-being, and equity) and open-ended questions to ensure that they fully addressed and captured participants’ responses and perceptions about influences on health and well-being in their communities. Individuals who participated in a key informant interview are not identified by name or organization to protect confidentiality, but they are identified as a “respondent.” Information collected through environmental scans includes program and organizational information available on internet websites, publicly available documents, and media reports. Population surveillance and monitoring data were compiled from publicly available datasets, including the American Community Survey; Behavioral Risk Factor Surveillance System; and other similar federal, state, and local data sources.

We will conduct ongoing surveillance and monitoring activities in these communities through 2020 and report updated information on their progress, challenges, and lessons learned in improving health and well-being for all residents.

Data collection and monitoring thus far has revealed common themes among otherwise distinct communities. The next phase of this project will be cross-community reports that will examine common themes across subgroups of the 30 communities (for example, rural communities, communities experiencing large demographic shifts, and communities leveraging local data for decision-making). These reports will also be posted on rwjf.org/cultureofhealth.
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Introduction

As we described in the Snapshot report for Butte, Mont., Butte is a mining community surrounded by natural resources that could support community well-being. It is also home to the country’s largest Environmental Protection Agency (EPA) National Priority List Superfund site, which presents environmental, land use—and potentially, mental health challenges. In this report, we examine Butte’s efforts to improve population health and build a healthier and more equitable community using the Culture of Health Action Framework to interpret and organize key findings. The Framework prioritizes four broad Action Areas: 1) Making Health a Shared Value; 2) Fostering Cross-Sector Collaboration to Improve Well-Being; 3) Creating Healthier, More Equitable Communities; and 4) Strengthening the Integration of Health Services and Systems. Within these areas, activities and investments can advance population health, well-being, and equity in diverse community contexts. Using the Framework, we describe how Butte is reclaiming its abundant but contaminated natural resources and collaborating to address mental health challenges and the needs of its most vulnerable groups.

CONTEXTUAL CONDITIONS

Butte, Mont., has a rich history as a mining town. Located in Southwest Montana, Butte is the fifth largest city in the state, with a population of...
33,900. This population is overwhelmingly (95%) white, with significant proportions of the population that are elderly (17% are ages 65 and older) or that live in poverty (19%).

Due to abundant copper and ore deposits, mining in Butte dates back to the late 19th century. The city’s motto is “Richest Hill on Earth,” and in the 1920s, the mining industry was capable of supporting a population estimated to be as high as 90,000. Yet, this mining legacy produced significant environmental health challenges that have required extensive, ongoing clean-up efforts, and which may continue to shape Butte’s future.

Butte is home to the largest Superfund complex in the country. Mining waste was dumped by the Anaconda Mining Company (which merged with the Atlantic Richfield Company [AR] in 1977) into 26 miles of Silver Bow Creek and the streamside habitat, contaminating soil, groundwater, and surface water with heavy metals. Listed as a Superfund site by U.S. EPA in 1983, the Silver Bow Creek/Butte complex has been the target of a number of clean-up activities. This work began in the late 1980s and since then, large sections of Silver Bow Creek have been restored at an estimated cost of $150 million. After a 12-year stalemate, during which negotiations were held in secret, a “conceptual agreement” of a final remediation plan was released on May 30, 2018. Complete restoration of Silver Bow Creek remains controversial. In addition to the issue of the creek, there has also been a residential metals abatement program to remove metals in attics of old homes and in soil.

Part of Butte’s mining legacy lies in understanding its impact on the community’s health. Butte’s incidence of cancer is “not elevated” compared to either Montana or the country, although cancer mortality was “slightly elevated.” Statewide, cancer incidence in Montana is similar to that of the United States. This suggests minimal impact of mining on cancer incidence in the area, but the health impacts of the industry continue to be monitored.

In terms of other health concerns, a 2017 community health needs assessment found that substance abuse and mental illness were rated the number one and two health issues. Substance abuse concerns appear deeply rooted in Butte’s historical culture, which is described by a respondent as one of “hard drinking, hard living.” Nearly half (47%) of Butte-Silver Bow residents said their lives were negatively affected by substance abuse (versus 32% for the nation). Education has been introduced to address the cultural acceptance of substance abuse, especially alcohol, in the community. However, the need for substance abuse treatment and providers outstrips resources. Moreover, there are challenges to engaging people in need, as seeking help holds stigma.

Montana has the nation’s highest suicide rate, at 29 per 100,000 residents, compared with a national average of 15 per 100,000. Given its own high (second highest in the state) suicide rate, Butte began a suicide prevention effort in 2013, receiving a $2 million SOARS (SSI/SSDI Outreach, Access and Recovery) grant for suicide prevention initiatives. Under a current AR-funded health study, the health department is conducting biomonitoring while raising additional concerns about the potential impact of the Superfund site on mental health. Finally, there is concern about “extensive cuts” ($49 million) by the state for mental health case management. Those cuts, which the state legislature enacted to cover a budget shortfall, were compounded by an additional $49 million in cuts to the Montana Department of Public Health and Human Services.

The structure of Butte’s government may encourage local civic participation by encouraging legislative turnover, but may also make
it difficult to sustain funding for programs for health and services. In 1977, Butte-Silver Bow consolidated to form a city-county government. Butte has a large population relative to the size of the county, so even with the city-county government, some of the surrounding smaller communities report isolation in this government structure. As described by a respondent, the town lies within a mix of “red state/blue state/ independent” politics and interests. State government leaders represent a mixture of political parties. The state expanded Medicaid in 2015, which produced measurable benefits to the health of low-income residents and likely increased their participation in the labor force. Following expansion, data show that labor force participation rose among low-income Montanans, but not in higher-income Montanans. The state legislature does not meet very often, only every other year for 90 days. The legislators are limited to single terms, which is intended to allow for lay members and to discourage career politics, but may contribute to difficulties in creating consensus or political momentum around issues that are specific to certain areas of the state. For instance, the eastern portion of the state is very rural, while the west, where Butte is situated, is a mix of rural and small urban areas. According to one respondent, it can be difficult to convey to a legislator from the eastern part of Montana the challenges faced in an urban mental health system, for example.

“IT CAN BE DIFFICULT TO CONVEY TO A LEGISLATOR FROM THE EASTERN [RURAL] PART OF MONTANA THE CHALLENGES FACED IN AN URBAN MENTAL HEALTH SYSTEM.”

RESPONDENT

COMMUNITY CAPACITY TO PROMOTE HEALTH, EQUITY, AND WELL-BEING

Butte is home to a number of organizations dedicated to cleaning, maintaining, and promoting awareness of Butte’s natural resources—most notably, the Silver Bow Creek and surrounding areas. Other coalitions of organizations have come together to address specific needs of Butte’s vulnerable populations, and to tackle issues of substance abuse and teen suicide. Below, we describe some of these groups.

Environmental cleanup efforts bring funding and momentum. The parties involved in the Butte consent decree—the EPA, DOJ, AR, State of Montana, and Butte-Silver Bow County—formed a “conceptual agreement” of the final plan, which recently went through a public comment period. According to the conceptual agreement, funding provided by AR supports cleanup work and other remediation activities. Part of the work proposed for the Blacktail Creek area only will be completed by the State of Montana with settlement funds provided by AR.

Other than this funding, momentum around environmental cleanup efforts has created additional community capacity for health and well-being. Several local groups are also involved in the restoration of Silver Bow Creek. Restore Our Creek, a local coalition consisting of community members and led by a former mining engineer, sought to clean the first mile of the creek, which runs through Butte, by including it as part of the final consent decree. Montana Resources is Butte’s remaining copper mine, employing about 350 residents. The mine has focused on worker health and safety and has gone over eight years without an accident. It also partners with AR on environmental safety issues related to the Berkeley Pit, an inactive mine.

Built environment assets offer physical activity opportunities. Several Butte organizations sustain a built environment that provides residents with opportunities to stay active and participate in community activities. Butte-Silver Bow’s Parks and Recreation department maintains parks, trails, and outdoor areas following reclamation funded by AR. Out of financial necessity, the Parks and Recreation Department partners with a range of organizations to take full advantage of the community’s natural resources. These include government organizations that prioritize health and the environment, such as the local health department and the National Forest Service. Other community groups involved with managing built environment assets include sports-focused groups, such as Little League and the YMCA (in partnership with the American Legion). The philanthropic sector—such as the Dennis and Phyllis Washington Foundation, a philanthropy of Montana-based Washington Companies (owner of Montana Resources)—has provided financial support to maintain these assets. Reflecting its “Western heritage,” the foundation seeks active involvement in the community in ways that retain its “sense of place.”

Community-based organizations serve vulnerable populations. Organizations from the health and education sectors have worked together to address the needs of vulnerable populations. This has included tackling mental health and substance abuse concerns, such as those that have manifested in youth suicide. Several community-based organizations exist to serve the needs of poor, homeless, or senior residents of Butte. Action, Inc. is a nonprofit organization that focuses on relieving poverty and homelessness in the six-county area. It is part of the Continuum of Care Coalition, a program of the U.S. Department of Housing and Urban Development that encourages community-based approaches to ending homelessness. Its local partners include Butte Housing Authority, the health department, veterans’ groups, disability advocacy groups, mental health providers, and church organizations. One such partner is the Montana Healthcare Foundation, which is a funder of a new initiative with Action, Inc., and other local partners, called Frequent Users Systems Engagement (FUSE). This initiative seeks to understand and address high use of emergency room services by chronically mentally ill or homeless individuals. The Southwest Montana Aging and Disability Services is the local area agency on aging, which serves as “one-stop shopping” for a range of services for Butte’s low-income senior population. These services include monthly food baskets and applications for energy assistance or enrollment in Medicaid.

Public school system addresses well-being. The Butte Public Schools are highly involved in efforts to educate and prevent youth suicide. The schools applied for and received a federal grant (SOARS) to hire
case managers to conduct early interventions and screen more at-risk students. Two youth-focused community coalitions have worked to link the public school system with other community sectors and parents of at-risk students. For example, the Community Action Team is a community coalition of Butte schools, the City-County of Butte-Silver Bow, parents, and students. It aims to identify and intervene with students at risk for suicide.\footnote{Working toward substance abuse prevention in Butte, especially among young residents, Butte Cares is a nonprofit community coalition. Its board of directors consists of 12 sectors from the community, including the school district, youth organizations, law enforcement, mental health providers, and local, state, and federal government.}

Health sector engaged in community health. Several health-focused organizations are engaged in community health efforts. For instance, the City-County of Butte-Silver Bow Health Department has been highly engaged on stigma around teen suicide and mental health concerns, as well as partnering on efforts to assess community health. St. James Healthcare, the largest acute-care hospital in southwest Montana, partnered with the health department on the 2016–2017 community health needs assessment. However, according to a respondent in the mental health sector, recent leadership changes have diminished its community involvement. The Southwest Montana Community Health Center is a nonprofit clinic that offers behavioral health services, primary care, dental, and pharmacy to all residents. Employing over 100 doctors, nurses, advanced nursing professionals, and other health care professionals, the clinic saw an uptick in patients following the state’s expansion of Medicaid.

Developing a Culture of Health

Despite local economic challenges and cuts in state mental health funding, Butte is leveraging its close community ties and natural resources to improve health and well-being. In particular, there is progress on the long-running negotiation to clean up the nation’s largest Superfund site. Public and private sector partners have joined together to promote and support Butte’s civic assets. Overall, the community has responded to its health challenges in several ways: reclaiming contaminated land water for community benefit; expanding awareness by mobilizing around mental health, suicide, and substance abuse challenges; and collaborating to address the needs of vulnerable groups.

Reclaiming contaminated land and water for community well-being

When the Anaconda Copper Mining Company sold its operations in Butte and merged with AR in 1977, few predicted the long and contentious battle that would follow about how to restore millions of acres of soil and water contaminated from decades of underground and open pit mining. Activity in the Silver Bow Creek/Butte Superfund complex includes removal of mining and smelting waste, clean-up of polluted creeks and gulches, and remediation in areas of uncontrolled surface run-off. The State of Montana has already restored large sections of Silver Bow Creek, a 26-mile stream.

Recovery efforts appear to have provided momentum for additional development that moves beyond simply reclamation. Community organizations have sought to develop reclaimed land in ways that will improve well-being for the entire community. In May 2018, AR, the EPA, the State of Montana, and Butte-Silver Creek County, released a conceptual agreement for a consent decree which details how remediation will finally be completed. The conceptual agreement for remediation includes clean-up of mining waste and contaminated soil and water, reconstruction and restoration of contaminated areas, and community participation to develop an end land use plan. The agreement calls for clean-up of surface flow areas, Blacktail Creek, Buffalo Gulch, and insufficiently reclaimed areas. An ongoing series of “community design workshops” will inform decisions about how reclaimed lands will then be used.\footnote{Under the agreement, AR would provide funding to the State of Montana to use for these activities.} According to the Superfund coordinator quoted in the cited article, these clean-up decisions reflected several community priorities: to protect Butte taxpayers from costs of clean-up, “do right” by the soil and water resources, and create land use opportunities that would benefit the community.\footnote{“They’ve cleaned up the last mile, they’ve cleaned up the middle mile…but they’ve not cleaned up the first mile [of] Silver Bow Creek [that] runs right through the middle of our town. It’s right in the heart of our community.”}

Community reaction to the clean-up plan for Butte has been mostly positive, with one notable exception. Concerns remain about the plan’s failure to restore the first mile of the Silver Bow Creek into a “free-flowing, meandering creek” that runs through the heart of Butte.\footnote{Said one environmental sector respondent: “They’ve cleaned up the last mile, they’ve cleaned up the middle mile … but they’ve not cleaned up the first mile. Silver Bow Creek runs right through the middle of our town. It’s right in the heart of our community.” The Restore Our Creek coalition wants mine waste to be removed, not capped or covered, as earlier proposals had suggested, and a complete restoration of the creek.}
from the first mile in Butte onward. The group solicited community input through a series of meetings and workshops to “imagine” and document a “vision” of end land use, which it presented to the key parties.¶

Even as plans to restore Butte’s long-polluted soils and waters finally are in sight, mining remains a viable occupation. The area’s last remaining mine and largest employer, Montana Resources, has embraced changes to improve safety and community relations, and to benefit workers. Unlike decades ago, Butte’s Montana Resources, emphasizes safety and getting worker input into better safety practices. Said one business sector respondent, “Years ago, it was like, ‘We’re the mine, leave us alone. Now it’s like, ‘come talk to us, we want to hear what you have to say.’” Montana Resources has also implemented profit-sharing and cost-cutting measures to prioritize economic stability. Although copper prices can fluctuate greatly, the company is able to maintain consistent employment numbers without having to resort to layoffs. It accomplishes this by structuring contracts with suppliers and workers so that the company pays less when copper prices are low, and more when prices are high. This stabilizes its outlook, ensuring that the company can stay profitable even in a down market, and benefiting employees even in unprofitable years. As a business sector respondent put it, employees may get paid less at times, “but they [still have] a job.”

As part of the clean-up agreement, a five-year health study is underway to assess the community health impacts of having a Superfund site located nearby. Building on a previous health study that conducted biomonitoring, the new study has also raised questions on whether living in a Superfund site “affects [the community’s] psyche” in any way, and whether it has had any impact on Butte’s mental health or suicide challenges. According to one health sector respondent, the community has some types of information to measure Superfund impact, such as data on cancer from Montana Tumor Registry, but does not yet know how to measure the mental health impact.

**DIVERSE PARTNERS FACE MENTAL HEALTH, SUBSTANCE ABUSE, SUICIDE CHALLENGES**

Butte’s top health concerns involve mental health and its relationships to substance abuse and risk of suicide. In both cases, community tragedies triggered ongoing efforts to address these challenges. In late 2013, Butte suffered the loss of three teens to suicide in just five weeks, including a 14-year-old girl who aspired to be class valedictorian.¶¶ The tragedies shook the close-knit community and resulted in the formation of a community coalition that works to understand the mental health issues, implement evidence-based mental health and suicide prevention initiatives, and reduce the incidence of youth suicide. According to one health sector respondent, “We’re no different than any other community in that fear, when you have children dying, [it] prompts the community into action. Unfortunately, that was the impetus for our beginning.”

Similar to the suicide deaths in 2013 and 2014, the community mobilized in 1982 to address substance abuse following the deaths of two high school seniors that involved drinking and driving. According to a community group respondent, this latest incident, following a series of others, “spurred a group of citizens to unite, attend some trainings, and become informed on strategies in prevention and what communities can do to address prevention, as well as build capacity, and have people join forces to gain momentum.” However, several respondents noted that alcohol use is deeply ingrained into longstanding community norms, contributing to difficulties in addressing substance abuse.

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**HEALTH SECTOR RESPONDENT**

These mental health challenges may reflect a broader culture that shapes health attitudes in the community. According to one community sector respondent, this cultural challenge in Butte is related to an “attitude of acceptance, that it’s okay for our kids to engage in some of these risky behaviors.” Respondents also described that adults, in turn, may behave according to a historically stoic culture that may lead vulnerable individuals to cover up emotions, rather than express them in a healthy way. This culture can manifest in ways that lead to substance abuse difficulties—for instance, the prevalence of alcohol at family-friendly activities, such as outdoor festivals. As a community sector respondent noted, “when you have an activity that begins at 11 in the morning, and … there’s a beer garden, those are some of the challenges we face.”

**SEVERAL RESPONDENTS NOTED THAT ALCOHOL USE IS DEEPLY INGRAINED INTO LONGSTANDING COMMUNITY NORMS, CONTRIBUTING TO DIFFICULTIES IN ADDRESSING SUBSTANCE ABUSE.**

The Butte Community Action Team’s SOARS grant has now allowed more than 500 adults to receive training in youth mental health first aid, resulting in 475 referrals to mental health services. Between 50 to 75 high school junior and seniors are also receiving the training. The school district also developed a multi-tiered system of support for students with mental health needs, increasing the proportion of students receiving more intensive support from 1.5 percent to 21 percent of the student population. The focus on community education is ongoing and intentional, according to one health sector respondent, “We have really inundated and are continuing to inundate the community on education: adverse childhood experiences, youth and adult mental health first aid,
signs of suicide, and we have engaged them. Our hope is that we create a sense of empathy and awareness in the community [so] that we are able to intervene with anybody.”

A related development was the 2015 formation of the Butte-Silver Bow mental health local advisory committee, comprised of 12 members who have personal or family experience of mental illness. Eleven additional members represent local agencies, including St. James Healthcare, Southwest Montana Mental Health Center, the city-county attorney’s office, law enforcement division, and health department. The composition of the committee helps ensure that “people with lived experience have input into how systems are working, or not working, and to provide input for improvement.” This reflects an acknowledgment that while it was beneficial to have health professionals and providers engaged in conversation, there was a need to engage the rest of the community.

“We have really inundated ... the community on education: adverse childhood experiences, youth and adult mental health first aid, signs of suicide, … our hope is that we create a sense of empathy and awareness in the community [so] that we are able to intervene with anybody.”

**Health Sector Respondent**

On the heels of the 1982 fatal drinking and driving incidents, Butte Cares was formed to address and reduce the incidence of substance abuse, especially among youth. The coalition provides input and expertise into activities, and includes representatives from government, education, and health sectors. It tries to build relationships, “work with policies and ordinances,” and increase awareness, such as by inviting speakers to discuss the impact of childhood trauma on students, for educators, and on the workforce, for business leaders.

“We lack a lot of resources to deal with substance abuse, particularly alcohol. ... we have a lot of really great programs that are starting, but we still lack resources to deal with the amount of people that need help.”

**Respondent**

Screening for substance abuse issues among adults takes place at Southwest Montana Community Health Center for tobacco, alcohol, illicit drugs and inappropriate use of prescription drugs. The center collaborated on a project in 2017 with the National Council on Behavioral Health to begin screening kids ages 12 years and older for substance abuse issues. Adults and children who have substance abuse concerns may be referred by an addiction counselor for treatment. However, the need often outstrips the community’s ability to provide. One respondent said, “We don’t have a publicly funded detox center anywhere in our state. We lack a lot of resources to deal with substance abuse, particularly alcohol. I just think in many ways we do the best we can, and we have a lot of really great programs that are starting, but we still lack resources to deal with the amount of people that need help.”

The community has made progress in decreasing the incidence of substance abuse, but challenges remain. In particular, there seems to have been success in shifting community attitudes and enacting healthy ordinances. There is less clarity as to whether efforts to address mental health and suicidality has been as successful. A community sector respondent touted the impact of awareness efforts to frame the health discussion toward a broader community impact of mental health and suicide. This included involving other sectors in the conversation and showing, for example, the business sector that creating a “well community” could help attract businesses to the area. These efforts “really shifted to a resiliency conversation rather than suicide prevention,” leading to “recognition of the language we use and how that can impact people.” Challenges remain in engaging certain parts of the community, such as parents living in poverty or those dealing with substance use. Other challenges involve changing local ordinances, such as to address drinking during Butte’s many festivals. Efforts to enact a more restrictive open container law were only partially successful, but Butte Cares, working with the health department, was able to get a child friendly Butte park designated as smoke-free.

Finally, health resources are lacking. There is a shortage of health care providers willing to live and work in Butte. In addition, state budget cuts for Medicaid mental health case management present an additional challenge, though expanding Medicaid had allowed the state to shift spending on substance use disorders to the federal government, creating savings in the state budget that could be used to offset those cuts. Also, since Butte began developing the infrastructure and interventions to proactively respond to teens at risk, youth suicide attempts have decreased from 17 percent to 12 percent; however, the suicide in early 2018 of a 10-year-old student re-affirmed the need for ongoing outreach.

Other outcomes may be seen through the use of community assessments. The Community Health Needs Assessment found that, as of 2017, trends in excessive drinking, depression, and self-rated “poor” or “fair” mental health had not changed significantly since 2014, although they were in line with national averages. Respondents noted that they had observed rates of children in foster care that were a bit higher than desirable, as well as upticks in physical abuse. Butte Cares uses the Youth Risk Behavioral Survey and Montana Prevention Needs Assessment to measure baseline and progress. According to these assessments, Butte Cares has “consistently and significantly shown decreases in substance use behaviors among ... youth,” which has allowed it to repeatedly win Drug Free Community grants from the Office of National Drug Policy.

**Public and Private Sectors Invest in New Community Assets**

Butte’s public and private sectors have worked individually and in partnership to bolster community resources. This has included both financial investments and seeking opportunities to engage the
community. For instance, the Parks and Recreation department works with the health department to promote walking programs; promotes sports alongside the Little League and American Legion; has an agreement with the YMCA to provide pool lifeguards; and collectively manages—along with the National Forest Service—a park that is widely used for competitive mountain biking.

“THERE’S AN ABILITY TO GET ANYWHERE YOU WANT TO GO IN TOWN WITHOUT ACTUALLY HAVING TO GET ON A BUSY STREET.”

GOVERNMENT SECTOR RESPONDENT

Butte boasts a wealth of outdoor resources, including an extensive trail system that Parks and Recreation consistently maintains, in order to encourage active behavior. This includes plowing all paved trails in winter months; holding programming for outdoor sports leagues; and connecting trails so that—according to a government sector respondent, “There’s an ability to get anywhere you want to go in town without actually having to get on a busy street.” There is also a new winter festival, Snow Fling, that has for the past three years promoted Butte-Silver Bow winter activities, including cross country skiing, sledding, hiking, running, and snow biking. In addition, a city initiative was adopted that created bike lanes that run throughout the city.

One new opportunity that has garnered community excitement is the creation of a community pool. The project came about using a $7.2 million public bond issue, along with an additional $1.5 million in private and public funding. The pool is situated in a park that has been newly upgraded. The Dennis and Phyllis Washington Foundation provided $5 million for reclamation of a Butte community park. This was used to create a plaza area; improve parking; build a playground and a carousel; and make other improvements.

“EMPLOYING PEOPLE AND PAYING YOUR TAXES ISN’T NECESSARILY ENOUGH TO JUSTIFY OPERATING IN A COMMUNITY. YOU HAVE TO BE A GOOD NEIGHBOR.”

BUSINESS SECTOR RESPONDENT

Support from the private sector also bolsters investment and activity around community well-being. A major employer, Montana Resources, appears to serve as an anchor institution in the community in several ways. In addition to emphasizing worker safety, according to one business sector respondent, Montana Resources recognizes that “employing people and paying your taxes isn’t necessarily enough to justify operating in a community. You have to be a good neighbor.” This represents a shift both in the company and in the mining industry, according to the respondent, toward attempting to reflect community values: “You identify these opportunities through listening to the values of the community.”

Accordingly, the company has attempted to ensure it has “good, clear lines of communication” to those affected by its operations. For instance, it prioritizes communication with local government, ensures it maintains “good rapport with local media,” and gives tours of its facilities. In addition, the company processes clean-up waste from the state, when doing so would help make those clean-up activities safer and more efficient. Another example is that the company has instituted a “buy local” policy to buy goods in-state whenever possible. Finally, it is a major sponsor of a local folk music festival, which has a large economic impact on the community.

CROSS-SECTOR COLLABORATION ADDRESSES NEEDS OF VULNERABLE GROUPS

With the loss of once plentiful mining jobs, a challenging job market in Butte has left many residents struggling to afford housing and other necessities, and others without much-needed support. Action, Inc. seeks to work “in a collaborative community, grassroots way” to provide front-line defense against homelessness for people who need rapid re-housing and short-term financial support while they get back on their feet, and chronically homeless individuals who typically struggle with mental health and substance abuse issues. A respondent said, “These are the folks that really need that intensive long-term case management that is difficult … to provide because of a lack of resources.” The state cut its budget by $170 million in 2017, resulting in sharp reductions to case management services for people with mental health needs. Action, Inc. partners with 25 local entities, ranging from veterans’ groups, mental health providers, and law enforcement, to coordinate services and keep people out of emergency shelters.

In a new collaboration to link housing and health care services, Action, Inc. is working with St. James Healthcare to understand and address high utilizers of emergency room services. The initiative—known as FUSE and funded by the Montana Healthcare Foundation—intends to foster more collaboration among the parties that serve homeless individuals, with a goal of incorporating access to health care services in supportive housing.

“... SAFE HOUSING; IT GOES A LONG WAY TO SOLVING SOME HEALTH PROBLEMS ... THESE THINGS ARE RELATED, AND IF YOU ... TRY TO SOLVE THEM IN ISOLATION, THEN YOU’RE NOT GOING TO HAVE THE IMPACT THAT YOU NEED TO HAVE.”

HOUSING SECTOR RESPONDENT

One housing sector respondent shared that the human services and health sectors in Butte are becoming more integrated around the idea that housing is connected with health. “We’re getting a lot smarter about understanding how all of these things connect ... Give people safe housing; it goes a long way to solving some health problems ... these things are related, and if you isolate them and try to solve them in isolation, then you’re not going to have the impact that you need to have.” According to the respondent, this has led to successes, such as a rapid rehousing program that has seen 90 percent of previously homeless people sustain housing, rather than needing help to pay rent.
One particularly high-needs group, elderly residents in Butte, tend to navigate financial and health challenges on their own for two reasons: a dearth of younger family members, as many have left the area, and an independent spirit that resists asking for help. Southwest Montana Aging and Disability Services works to reduce food insecurity by providing monthly food baskets to low-income seniors. A respondent said about the organization, “The average income of the people [served] for this is between $750 and $780 a month, so being able to afford food is huge.” The program got off to a slow start in Butte, viewed with some trepidation by people older than 60. As one respondent said, “A lot of elderly people weren’t necessarily accessing the food banks for whatever reason. Pride was one of them.” The agency promoted it through local senior centers and other organizations. More than 400 people now receive monthly food baskets in the service area, with more than half of them living in Butte. The respondent described, “It’s made a huge impact. Sadly … last month, we [reached] our service limit, so we may have to put those people on a waiting list, until we figure out where we are.”

“A LOT OF ELDERLY PEOPLE WEREN’T NECESSARILY ACCESSING THE FOOD BANKS FOR WHATEVER REASON. PRIDE WAS ONE OF THEM.”

RESPONDENT

SUMMARY OF BUTTE’S EFFORTS TO BUILD A CULTURE OF HEALTH

Based on the Culture of Health Framework used to guide Sentinel Community data collection and monitoring in Butte, the city has been successful in many aspects of promoting health and well-being. For example, Butte’s comprehensive efforts to reclaim contaminated land and water have helped move the city toward Creating a Healthier, More Equitable Community. Local government and business sector support has sustained reclamation efforts and added new city amenities. These efforts have involved community participation and emphasize end land use that benefits the broader community.

Multiple organizations have formed coalitions and networks to Foster Cross-Sector Collaboration to Improve Well-Being, including the Community Action Teams, formed by city government, local schools, parents and students to address youth suicide, and Action, Inc. These partnerships seek to address mental health challenges, including substance abuse and suicide, and to meet the needs of vulnerable groups such as the elderly. Along with engaged citizens, these organizations are working toward Making Health a Shared Value by raising awareness about community health challenges, involving appropriate groups, and promoting healthy living. For example, to address mental health and substance abuse challenges, several organizations have invited speakers or sought other ways to raise awareness of perceived stigma and the potential for substance abuse in the face of mental health challenges. Other evidence of shared values around health is seen in the joint efforts of public and private sectors in Superfund clean-up activities, including the recent consent decree, and Montana Resources’ emphasis on worker safety and behaving as an involved community partner. Finally, stakeholders in the health care sector increasingly recognize the linkages between housing, physical health, mental health, and community well-being—visible in efforts such as FUSE that work on Strengthening Integration of Health Services and Systems.

Emerging Community Themes

Stakeholders in Butte have forged agreements with local and national organizations to improve residents’ health and well-being. The four-way agreement on how to clean up Butte’s Superfund site is a major step forward, allowing Butte to reclaim previously unusable land and repurpose it for community use. Momentum from these agreements may in part, fuel additional funding in other community investments. In the wake of a few significant tragedies, coalitions brought together Butte citizens, businesses, and nonprofits to increase awareness and engagement around mental health and substance abuse issues. Other groups provide programs that aid vulnerable groups by increasing food security and addressing housing needs.

Ongoing challenges to ensuring that Butte residents have sufficient opportunities for health and well-being include economic opportunity and mental health issues. Due to Butte’s historic reliance on mining, the local economy is not well-diversified and job opportunities are scarce. Younger residents are forced to leave; older residents that remain are left without needed family support. However, the mine provides consistent employment for some residents, and the community has been exploring other ways to bring jobs to Butte. Tragedies involving suicides or drunk driving fatalities have deeply affected the community, but created resolve and action to increase awareness about, and provide care for, mental health concerns.
Public involvement on resolution of clean-up of contaminated environment. The recent conceptual agreement to a consent decree by federal, state, and local parties to complete clean-up of Butte's ground and water from copper mining waste is a visible sign that the environmental damage will be rectified. Multiple community members and groups have participated in the public discussion about how to reclaim these areas, and how they should be repurposed for overall community benefit.

A high level of cooperation among collaborators working to improve health and well-being. Butte is a small community, with many established organizations and long-time residents. This familiarity has facilitated cooperation among various sectors and organizations, even among highly challenging initiatives, such as addressing teen suicide and needs of chronic mentally ill or homeless populations.

Parks and trails as community assets. Butte has supported its existing natural resources, promoting them as a road to health and well-being. As an example, a community park was completely refurbished and re-opened with $5 million in philanthropic funding. In addition, trails are maintained year-round to encourage outdoor activity.

Funding from large private companies to support public assets. As part of the conceptual agreement to clean Butte lands, AR provides significant funding for clean-up activities. This includes reclamation work that should help improve Butte's public areas in ways that benefit the community. Montana Resources also lends its expertise and resources to improving public assets by assisting others' clean-up activities. Finally, the Dennis and Phyllis Washington Foundation, the philanthropic arm of Montana Resources’ parent company, also provides funding dedicated to public assets.

What’s Next

Butte is heading into a period of increased activity, spurred by the recent conceptual agreement to a consent decree to clean up its Superfund site, that could have a significant impact on its overall health and well-being. Existing community groups and coalitions will likely play a role in determining the direction of these efforts. For instance, a remaining point of contention around the consent decree is how and whether to include clean-up of the portion of Silver Bow Creek that runs directly through town. Similar to how other clean-up activities have included a strong land use component, the Restore Our Creek coalition has proposed a land use vision for Silver Bow Creek that has not yet reached agreement.

Local economy largely dependent on the service sector and a single private sector employer. While the remaining mining company employs a significant number of people, the result is a lack of economic diversity. Opportunities for employment outside of service sector jobs are scarce, requiring many residents to work more than one job to pay for housing and basic needs. Butte is working to attract new small businesses to the area, but jobs tend to be in technical fields, such as data mining, or require technical training.

High use of alcohol and alcohol abuse. Linked in part to its history as a “hard-living” mining town, Butte has high rates of alcohol use and abuse. Substance abuse was identified as the community’s top health priority in a recent health needs assessment, and availability of alcohol at community events is common.

Cultural norms discourage asking for help. Respondents noted that Butte’s attitudes toward self-sufficiency—a product of its historical mining culture—encourage stoicism toward challenging situations, and act as a hindrance to seeking help. This can lead to mental health stigma, and destructive behaviors such as substance abuse.

Need for mental health providers outstrips demand. Butte has a shortage of medical providers, in particular, those related to mental health: specialty physicians, mental health providers, and addiction counselors. Shortages have been ongoing although the recent focus on addressing substance abuse has highlighted Butte’s lack of mental health providers and addiction counselors.

Cuts to mental health case management services impair coordination. State budget cuts in 2017 to Medicaid case management services have reduced these services to people with mental health needs. Agencies serving Medicaid-covered patients have reduced staff and services.
References


