RWJF Culture of Health
Community Portrait

Harris County, Texas
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 5 years. This community-specific report follows from the initial Snapshot report for Harris County, Texas, 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 Harris County, but rather it 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, a review of existing population surveillance and monitoring data, and the 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 14 unique respondents were interviewed during spring 2017 for this report. All interviews (lasting 30 to 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 they obtained input on specific items of interest (for example, facilitators and barriers to improved population health, well-being, and equity). They also used open-ended questions to ensure 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 data sets, 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 have revealed common themes among otherwise distinct communities. The next phase of this project will be cross-community reports. These 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 cultureofhealth.org.
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As this report was being completed (summer 2017), Harris County experienced Hurricane Harvey, a disaster that devastated neighborhoods, left many residents injured and/or homeless, and severely impacted the health, social and economic infrastructure of the community. We know that recovery will be challenging and will require significant time to rebuild the social and economic systems of this community. Our thoughts are with the people of Harris County as they recover from this difficult event.

As we have done in this community portrait, we endeavor to capture the insights and experiences of Harris County leaders and institutions through their journey to cultivate a healthy community. In the next portrait, we will continue to examine Harris County’s path in building a Culture of Health, as they move through the rebuilding and restoring processes that are a part of community recovery.
Introduction

In our snapshot profile of Harris County, Texas, we described a well-networked community of stakeholders with a strong understanding of the social determinants of health and well-being and a commitment to addressing disparities among Hispanic and black residents. The community relies on a volatile oil-based economy and faces structural and political challenges, including tremendous population growth and a lack of zoning laws. Despite these challenges, government agencies, philanthropic foundations, and community-based organizations have collaborated across sectors, including education, business, and urban planning, to implement initiatives that address drivers of well-being, such as Healthy Living Matters and the BUILD Health Challenge. In this report, we explore additional cross-sector and grassroots initiatives that serve Harris County’s most vulnerable residents, in hopes of making the county a place where all individuals and families can grow and thrive. We also examine Harris County’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 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 Integration of Health Services and Systems, within which activities and investments can advance population health, well-being, and equity in diverse community contexts. Using the Framework, we draw insights about the cross-cutting facilitators that support Harris County’s efforts and the community-specific barriers that limit their success.
CHALLENGES OF A BOOMING POPULATION

Harris County is located on the upper Gulf Coast in southeast Texas and is nearly bisected from west to east by the last 16 miles of the Buffalo Bayou, also known as the Houston Ship Channel. With a population of nearly 4.3 million people across 34 municipalities and 1,777 square miles, Harris County holds the distinction of being the third-largest, fastest-growing, and most diverse metropolitan area in the United States. Houston, its county seat, is the largest city in Texas and the fourth largest city in the United States. Today, Hispanic residents comprise the majority, followed by white, black, and Asian residents, with more than 145 languages spoken in Houston alone. 

Despite boom and bust cycles, Harris County’s oil-based economy has driven tremendous, sustained growth and in-migration from various states and countries. This has created a melting pot of races and ethnicities, making it the most populous county in Texas since 1930. The county’s sustained population growth also reflects the arrival of people looking for job opportunities and people who have been displaced by natural disasters, such as Hurricane Katrina. Many of these newer residents are living in poverty and struggling to secure jobs and access to health care.

Part of Harris County’s in-migration and population growth also may be attributed to the state’s lack of a personal income tax. Texas is one of nine states that do not levy an individual income tax. Although this system means individuals have higher take-home pay, it effectively reduces financing for government services like education and infrastructure. Instead, the state relies on property and sales taxes to generate revenue.

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PHILANTHROPIC SECTOR RESPONDENT

Harris County is a politically liberal region in a conservative state that views health care as an individual versus a collective responsibility, which is a contrast that poses challenges to efforts aiming to make health a shared value. Residents supported Democratic candidates in nearly every presidential election from 1848 to 1948 and in three of the past four presidential elections. Organizations and agencies in Harris County also face several distinct political hurdles, including the inability to pass public health ordinances at the county level and the state’s decision not to expand Medicaid under the Affordable Care Act (ACA). Unlike cities, counties and other unincorporated areas in Texas do not have the legislative authority to pass local ordinances and, thus, must rely on state laws to authorize public health mandates.

The county’s lack of zoning laws, geographic sprawl, and poor public transit system inhibit the adoption of efforts to create a healthier built environment. Because of the lack of zoning, the county’s two major cities feature a mix of residences, schools, businesses, and small industries that pose challenges to the integration of sidewalks or green spaces. Public transportation and pedestrian access is scarce, with 90 percent of individuals commuting by car rather than by bus, walking, or biking. This reliance on cars to get around creates barriers to physical activity and frustration among residents. In fact, respondents to an annual survey conducted in 2017 by Rice University/Kinder Institute for Urban Research identified traffic congestion as the top problem facing Houston-area residents.

Likely influenced by these political limitations to designing a healthy environment, 77 percent of children do not get the recommended levels of physical activity, and 18 percent lack consistent access to healthy food. Hispanic and black residents face additional disproportionate challenges—including limited access to health care; higher rates of adult and childhood obesity; median household income; poverty; and educational attainment—than white residents.

Harris County is well-positioned to address many of the challenges and issues it faces. The community is home to several nonprofit organizations, philanthropic foundations, government departments, and businesses that work together to make health and well-being shared values. They are implementing coordinated efforts to establish a community where all individuals and families have opportunities to become self-sufficient and thrive through jobs and basic health and social services, despite structural and political barriers.

PHILANTHROPY, OTHER SECTORS COLLABORATE FOR BETTER HEALTH

In Harris County, two health departments work collaboratively to serve the community. The Houston Health Department, the larger of the two, focuses on the issues facing residents who live in Houston, while the Harris County Public Health Department serves the residents outside of Houston proper. According to department representatives, these two agencies work together to ensure they are not duplicating services and that they are addressing the issues facing residents. The health departments are highly connected with, and respected by, the other entities in the community that are working to address health concerns.

In addition to the two health departments, several foundations work on health-related initiatives in a collaborative and coordinated way, with an understanding of and focus on the root causes of problems, such as addressing job skills to reduce poverty. In fact, 1,100 private foundations existed in Harris County as of 2013. Additionally, many Harris County foundations have operated for decades and have long-standing partnerships with each other and with community-based organizations. Five large foundations working closely on Houston-based concerns exemplify these strong partnerships: Episcopal Health Foundation, Houston Foundation, Rockwell Fund, Simmons Foundation, and the Cullen Trust for Health Care. These organizations not only fund other programs, such as local health communication campaigns, job training, and mentoring programs, but also produce original research related to health care initiatives and issues in the region, as well as training and engagement opportunities for members of the community.

In addition, the $17 billion Houston Endowment has been funding multipartner wellness initiatives for 80 years. In the Handbook of Texas Online, a member from the Houston Endowment Board of Directors noted, “Houston is exceptional in that philanthropy makes up for a lot of
it. It’s kind of a calling here. It’s a culture of leadership—of getting things done." This mentality was shared by many community respondents.

And multiple community respondents said that foundations listen to input from their board members and community organizations to determine which issues will be addressed. Often, they convene public and private entities to coordinate efforts on employment, health care, and comprehensive social services aiming to bring residents out of poverty and promote equity, health, and well-being.

The Harris County business community is committed to making the county an attractive place to work and live by improving residents’ quality of life. For instance, the Greater Houston Partnership convenes business and civic leaders in six sectors that drive the local economy: transportation; education; energy; environment; quality of place; and health. They partner with community groups to address challenges in these areas by leveraging and coordinating specific strengths and services. Most of their initiatives, such as UpSkill Houston workforce development program, launched in 2014, are still early in implementation and still creating the necessary infrastructure to support skills training and job opportunities. Although the county has experienced a gradual drop in unemployment from 2010 to 2016, it is not clear whether these initiatives have affected that decrease. Most importantly, the businesses share the goal of making Harris County a region where all families and individuals can be healthy and thrive—a goal they aim to achieve through cross-sector initiatives and community engagement.

Community-based organizations and grassroots efforts reflect the unique needs of their neighborhoods and provide a range of services to meet those needs while strengthening community belonging and unity. Multiple community respondents expressed the view that providing for the needs of all residents is ingrained in the fabric of Harris County and is a commitment shared by leaders across sectors. An example of this historical commitment is the establishment of settlement houses in 1906 to connect recent immigrants to local resources, employers, and the education system. These settlement houses evolved into Neighborhood Centers, and although some of the services have changed and expanded, the mission remains the same: keeping Harris County a place of opportunity and acceptance.

The organizations working in Houston represent diverse sectors that recognize they can best meet community needs by working together. The United Way of Greater Houston convenes multiple nonprofit; faith-based organizations; government agencies; individual donors; and social service providers to discuss the needs of disadvantaged residents and then link residents to providers who can address those needs. Last year, its Community Resource Center hosted more than 1,400 meetings and 64,000 guests. According to a respondent from the philanthropic sector, the United Way of Greater Houston receives 62 percent of its revenue from the energy sector and has set a goal of generating $100 million in funding by 2020.

Strengthening Health and Social Services

Harris County has assembled a suite of integrated service providers and initiatives, many of which use community-building strategies, with the aim of serving a large and diverse community. Multiple sectors are working together to enhance employability, health care access, and comprehensive social services to move residents out of poverty and to promote equity, health, and well-being for all residents. Because of the community’s limited political autonomy and inability to pass ordinances at the county level, few policy efforts are underway to address the community’s systemic problems, such as health care coverage and access. Acknowledging this constraint, community groups are taking creative and collaborative approaches to promote health and well-being in Harris County.

Despite being home to the world’s largest medical complex, Texas Medical Center, many Harris County residents, especially Hispanic and black residents, lack health insurance and access to affordable health care. Among Hispanic residents, 37 percent are uninsured, compared with 10 percent of white and 19 percent of black residents. In addition to underinsurance and health care costs, one respondent from the philanthropic sector notes that there are not enough clinics to serve residents; they’re not located in the most needed neighborhoods; families are overusing hospital emergency rooms; and residents report challenges in getting preventive interventions and services.

Community-based organizations are often able to help children enroll in Medicaid or the Texas Children’s Health Insurance Program, but many adults do not qualify for those programs or subsidized insurance through the ACA. Multiple community-based organizations employ navigators for high-risk patients. The navigators help these residents apply for benefits or the Harris Health Financial Assistance Program—a subsidized, pay-as-you-go program for residents who do not qualify for health benefits. However, because of the high demand for financial assistance, the assistance program has had to reduce the income cutoff for eligibility to less than 150 percent of the Federal Poverty Level.

Because Texas did not expand Medicaid under the ACA, several organizations have joined efforts to help low-income residents get health care. One Voice Texas, Gateway to Care, and the Greater Houston Partnership’s Public Policy 2020 are working with Memorial Hermann Health System (the largest nonprofit provider in the area) and Harris Health System (the safety-net provider for the county) to support residents who do not qualify for either financial assistance or health insurance from their employer or the government. As part of this effort, Memorial Hermann supports two “cash clinics” in the community, where uninsured residents can receive office visits for a flat rate of $58. To encourage the use of these clinics and to reduce visits to emergency departments, Memorial Hermann provides a free voucher for a first-time cash clinic visit to individuals who show up at the emergency department for non-emergency services.
In addition to improving access to primary care, Gateway to Care leads an effort called Texas Gulf Coast Project Access to connect high-need residents to specialty care. Gateway to Care is a collaborative effort of nearly 190 organizations that coordinate health care resources and streamline services in Harris County. Their Provider Health Network comprises more than 250 volunteer health care providers who donate specialty care to uninsured residents at no charge. Since its launch in 2005, more than $21.6 million worth of health care services have been donated to patients enrolled in the program. Gateway to Care also partners with Memorial Hermann and local specialists, physicians, practices, and clinics to host “Surgical Saturdays” where eligible residents can receive free outpatient surgeries.

To support this ongoing integration of health systems and services, Episcopal Health Foundation, formed in 2014, has funded and supported original research on county-level trends and needs. For example, it partnered with the Houston Endowment, the Rockwell Fund, the Simmons Foundation, and the Cullen Trust for Health Care to conduct a large study on the primary care safety-net system in Harris County. As one respondent from the philanthropic sector explained, “The five of us work well together. We conducted that study because we were all interested in information. And even if we don’t co-fund everything, we wanted a common data set to operate from.” Drawing from this data, the group will convene key nonprofits and government agencies to discuss the transfer of excess capacity in primary care into specialty care for poorer residents. Although the county has significant medical care capacity, many of the residents cannot access that care due to cost and lack of insurance.

Complicating the issue of access to health care is the large population of refugees, immigrants, and undocumented residents, many of whom are unsure of how to get care within the system and fear the consequences of providing their information to government agencies and health care systems. According to a respondent from the social services sector, social workers need to build trust within this population so they feel comfortable sharing the documents required to receive financial assistance. “The good thing about grassroots community-based organizations is they can be trusted enough, because they are in the community, to work with a population that may be fearful,” this respondent noted. One example of these trusted grassroots organizations is Harris County’s 13 community assistance ministries—faith-based, multiservice centers that provide food and financial assistance to underserved groups. The neighborhood-based ministries and other grassroots organizations are focused on the most pressing needs of their residents and view the hospital systems as a powerful partner in addressing upstream drivers of health, like homelessness and access to health care. At the county level, The United Way leverages similar relationships with more than 60 service providers, particularly through their 2-1-1 helpline that links residents to the appropriate providers. The helpline responded to a record 972,600 calls in 2016, with residents most commonly citing basic needs like food, utilities, and health care, followed by rent assistance and help finding shelter. Using information from the helpline—along with service provider, household, and donor surveys—the United Way produces biennial community assessments to identify and develop plans to address the community’s most pressing needs.

**PLACE-BASED INITIATIVES SUPPORT HIGH-RISK RESIDENTS**

Harris County’s diverse neighborhoods and demographic groups face varying challenges and needs. For instance, the Gulfton Neighborhood (Southwest Houston), often referred to as the “New Ellis Island,” is home to more than 50,000 people representing more than 40 nationalities. The county and city health departments shape strategies for distinct geographical neighborhoods, which often have unique racial and ethnic demographics. As a respondent from the philanthropic sector explained, “You would hear from both health departments that when they do work they are doing it community by community, because they have to.”

To identify and address these community-specific needs, the county’s foundations and community-based organizations gain input from residents in a variety of ways, including neighborhood gatherings, surveys, and interviews. For example, Neighborhood Centers’ 60-plus sites, use a deliberate process called “appreciative community building” to ask residents what parts of their neighborhood matter most; what they aspire to do; and what they want for themselves, their family, and their community. They also ask what the Neighborhood Centers can offer to help achieve these goals. For instance, they have conducted 142 interviews and 266 community surveys over two years to inform the development of a new center for East Aldine, an unincorporated area of Harris County that faces a lack of resources, poor infrastructure, and unstable businesses.

These Neighborhood Centers, which make up the largest community development organization in Texas and have existed for more than 100 years, apply a holistic approach to lift high-risk residents out of poverty. For example, the Baker-Ripley Community Center in the Gulfton Neighborhood houses a federally qualified health center and a charter school (K–6). The center was created in response to a public school system that could not accommodate the neighborhood’s rapid growth. In addition to addressing basic needs, the center aims to promote a sense of empowerment, unity, and belonging through community building. The charter school offers a New Neighbor program, in which immigrant students are immersed in English language and American culture classes to help them transition into the school environment.

From 2011 to 2014, more than 76,000 people received services, with 8,000 community center visits per month. Test scores in Promise Community Charter School were in the top 20 percent of schools with similar demographics, and the community’s high school graduation

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rates are improving. In addition, the community center has helped neighborhood residents receive $36.5 million in tax refunds. These ongoing efforts to help new residents gain a foothold in their new community may play a role in the growing acceptance of immigrants to the Houston area. According to results from the Rice University/Kinder Institute for Urban Research survey, 79 percent of Houston-area respondents in 2017 agreed, or strongly agreed, with granting illegal immigrants in the United States a path to legal citizenship if they spoke English and had no criminal record. In 2015, 73 percent of respondents said they supported that action.

Despite the apparent success of Baker-Ripley, Neighborhood Centers more broadly, and other community-based organizations, their direct impact on the community’s health and well-being remains unclear. Because the centers provide multiple offerings to address diverse needs across multiple neighborhoods, evidence that links the discrete services or programs to county-level indicators does not exist. As one respondent from the philanthropic sector explained, aggregating impact data is challenging because of the diverse groups of entities that collect varying data points differently.

To address this measurement challenge, Neighborhood Centers launched a data system last year to collect information in a more holistic, standardized way, but it remains unclear how well it is working. This year, it is launching a three-year longitudinal study of a random sample of families accessing services through the neighborhood centers to see how the services affect their social, economic, and health indicators.

A SHARED ECONOMIC AGENDA: REDUCING POVERTY AND BUILDING BUSINESS

Poverty remains an enduring issue in Harris County, and there are large income inequalities across racial and ethnic groups. Hispanics earn just over half (53%) the median income of white residents, and blacks earn even less (48%). Unemployment among black residents is 13 percent, far exceeding levels for Hispanic (7%) and white residents (5%).* The importance of these issues was further confirmed through the United Way’s phone line requests and the Public Policy 2020 needs assessment, which identified unemployment challenges and a need for skills training. Adding to the problem, said a small number of respondents, is that many newer residents have skill sets that do not match employer needs. As a result, these residents are struggling to integrate into the new community.

In addition to addressing concerns of poverty and unemployment, local businesses share a common mission of making Harris County an attractive home to new businesses and residents. Multiple sectors have recognized the parallel nature of these aims—poverty reduction and economic development—and are collaborating on several education and workforce development efforts. As one respondent from the economic development sector explained, “If people want to come to Houston, or if businesses want to stay in Houston, how can we make sure we have a landscape that is welcoming? . . . If we don’t have the education starting at a young age [and] going up to when you graduate and with an educated workforce, how can we survive and thrive?”

For example, the Greater Houston Partnership’s Public Policy 2020, which started around mid-2016, is a strategic effort that engages business and civic leaders in economic development and public policy to make Houston a desirable place to live and work. The partnership convened members from six sectors that drive the region’s economy: education; energy; environment; health care; quality of place; and transportation. During this strategic planning session, the policy committees used input from more than 400 members and industry experts to identify the region’s most pressing issues to address over the next several years, including poverty and limited health care coverage.

The partnership is coordinating with United Way, the Chamber of Commerce, and the health and education systems to implement three specific strategies:

1. Developing a regional workforce through skills training
2. Educating employers and employees on workplace wellness
3. Understanding and addressing the root causes of poor health care coverage among large groups of residents

As part of this effort, the partnership initiated UpSkill Houston. This project examines economic projections for seven sectors that drive the regional economy and determines what skills are needed to fill jobs in those sectors. The program, which was initiated in 2014, started with the petrochemical and construction sectors and is beginning to look at health care.

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ECONOMIC DEVELOPMENT SECTOR RESPONDENT

United Way THRIVE, led by United Way of Greater Houston, is a program that aims to bring 100,000 low-income families to financial stability by 2020. Over eight years, the program has helped put 65,000 families on the pathway to financial stability. According to a respondent from the philanthropic sector, the success of THRIVE is, in large part, the result of a coalition of more than 20 nonprofit partners working jointly to provide a client-centric (or resident-centric) service. Employers, community colleges, financial institutions, and city and state agencies—who meet monthly—strive to coordinate efforts rather than compete.

IMPROVING BUILT ENVIRONMENT DESPITE POLICY LANDSCAPE

Harris County faces extremely high rates of childhood obesity, with one in three children being overweight or obese. Exacerbated by its lack of zoning regulations and limited home rule rights, most of Harris County is not strategically designed to support recreation and access to healthy food. To address this challenge, Healthy Living Matters, a
Clinton Foundation Initiative launched in 2011 by the Harris County Public Health Department, aims to improve the built environment and to advocate for healthier school lunch programs at the state level.

As part of this effort, the initiative is identifying “food deserts” and then working to get fresh fruits and vegetables into those regions’ convenience stores. Healthy Living Matters is piloting these efforts in Pasadena—a smaller jurisdiction with a high concentration of Hispanic residents, poverty, and food insecurity—before expanding its programs to Houston and larger areas in the county. Although the initiative cannot legally control land use or require that grocery stores locate in food deserts, it is partnering with the city planning department and local developers to identify underused or unused land and buildings they can repurpose for educational programs and farmers’ markets. According to a community respondent from the nonprofit sector, the Pasadena pilot program will offer valuable lessons, but the initiative will need to be tailored for each community. “You can’t do the exact same program,” he said. “You’ve got to tailor the message or how information gets out or tailor the food to that individual area. It’s not a one-size-fits-all.”

Similarly, the Bayou Greenways 2020 project is leveraging a public-private partnership between the Houston Parks Board, the Houston Parks and Recreation Department, and the Harris County Flood District to transform the underutilized land along the city’s bayous to create free, accessible greenspace for all residents to recreate and gather. In November 2012, Houston voters approved a bond referendum providing $166 million in parks funding, $100 million of which is set aside for this initiative. In addition to this public funding, the Houston Parks Board is raising another $120 million in private funds. Bayou Greenways 2020, named for its target completion date, is the first phase of a larger greenways initiative that will ultimately span beyond Houston city limits.

**SERVING A LARGE, DIVERSE COMMUNITY**

Harris County’s vast size, increasingly diverse population, and lack of county-level home rule authority pose challenges to coordinated, countywide efforts to address systemic problems. To create healthier and more equitable communities within these structural constraints, many of these entities work collaboratively across sectors. As a respondent from the health sector explained, “The big thing is there’s a tremendous amount of strength in the Harris community. The challenge is how we leverage that to make sustainable long-lasting change at the community level.” The groups stay networked and collaborate on county-level concerns, like poverty and health care access, through regular meetings, convened by groups such as the Greater Houston Partnership, United Way, and the Episcopal Health Foundation. Long-standing relationships and frequent networking between the entities allows them to identify the most pressing community needs and then gather the appropriate partners to address those needs as efficiently as possible. For instance, the Greater Houston Partnership includes executive partners from major oil and banking companies and comprises more than 1,200 member companies and 11 regional chambers of commerce that work jointly on community-based initiatives, such as UpSkill Houston.24

Neighborhood Centers also work with many partners, including schools like Houston Community College (to provide English as a Second Language classes); the American Heart Association (healthy living classes); business partners like Aero-mark (aerospace); and health care systems. The Episcopal Health Foundation focuses on boosting community engagement by convening “grasstoppers” community leaders and offering trainings for organizations on how to directly engage residents.

Harris County is also making progress toward strengthening relationships among health care providers. Harris Health System, Memorial Hermann, Gateway to Care, the Episcopal Health Foundation, and others are working together to connect uninsured patients to appropriate and affordable care through options that include referring patients from the emergency room to cash clinics for primary care or referring patients from primary care to free specialty services offered from the Provider Health Network.

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In addition to the education, health care, and business sectors, Healthy Living Matters aims to engage policymakers through quarterly meetings with high-profile keynote speakers, like state legislators. They also have been engaging underserved children in these meetings, as well as through local YMCAs and schools. According to a community respondent from the nonprofit sector, “If you’re not engaging the target audience, you’re probably going to fail. That has been a big key to our success.”

**Summary of County’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 Harris County, it appears that the community is making progress in creating a culture where health can flourish in specific areas. Harris County has made significant strides in advancing a Culture of Health through the concerted actions of a large and well-funded philanthropic community, a well-established and embedded network of community-based organizations with a shared focus on improving the various factors that affect residents’ well-being. The county has succeeded particularly in advancing the action areas of Fostering Cross-Sector Collaboration to Improve Well-Being and Strengthening Integration of Health Services and Systems, as this broader
Multiple respondents agreed that the community’s view of access to health care as largely an individual responsibility stands in contrast to Harris County’s shared understanding of collaboration across multiple sectors to improve population health. For instance, as a result of the state’s decision to not expand Medicaid under the ACA, many low-income and uninsured residents cannot obtain health care coverage to obtain preventive or medically needed services. In addition, cities and school districts argue that the state falls short on financing of social services because of the state’s tax system, especially considering its rapid and continuous population growth. Local debt has increased in the past decade, in part to cover costs for new schools and public maintenance projects. The question remains as to how public policies will support or sustain services, should foundations lack sufficient funding or shift priorities in the future.

Challenges to capacity and cohesion in a fast-growing, diverse community. The county’s vast size and diversity pose challenges to social cohesion and a shared sense of community identity at the county level. These challenges are particularly apparent for new residents displaced from disasters, like Hurricane Katrina, or those arriving to seek job opportunities. Although individual initiatives are attempting to support community belonging through skills trainings and language courses, the community lacks a coordinated effort to offer welcome services followed by timely integration services.

Limited aggregation of data to evaluate impact. The community’s numerous initiatives—both grassroots and countywide—collect varying types of data, most of which capture process measures, like people served, versus impact measures, such as improved health outcomes. Although neighborhood-specific data shows an improvement in indicators like job completion or jobs filled. The groups that have worked to aggregate data across programs and systems have faced challenges in inconsistent metrics and indicators, raising questions about the validity or generalizability of the aggregated data.
how Harris County will manage its exponential population growth, the challenge of economic booms and busts, and the subsequent impact on health and well-being. In addition, the difficulty of integrating data on diverse initiatives using countywide indicators poses a potential challenge to monitoring that impact.

Besides pragmatic approaches—to best address the complex social needs of the county’s vulnerable populations—Harris County stakeholders emphasize community engagement, data collection, and continuous quality improvement as the region continues to grow. For instance, the county has become particularly interested in monitoring health challenges specific to Asian and Pacific Islanders, the fastest growing racial/ethnic group in Harris County (with nearly 6% annual growth from 2014 to 2015). Although current data on this expanding group is limited, their emerging needs and the community’s response will be important to consider moving forward.

Additionally, we identified issues and contextual factors that may become more prominent moving forward, particularly in the role of the private sector. For instance, the direct influence of and involvement by the oil and gas companies in community efforts to improve residents’ well-being warrants examination. In addition, future monitoring might track how one of the first minority-majority urban areas in the United States balances local interests and navigates national and state-driven political hurdles, including changing health care and immigration policies. It remains to be seen how Harris County’s multiple initiatives are influencing diverse social and health outcomes, including employment, obesity, and health insurance rates.
References


