



ANCHORS IN RESILIENT COMMUNITIES (ARC)

Promoting Health, Wealth and Climate Resilience

LESSONS LEARNED

Version 1.0

*Collaborative Projects of Emerald Cities Collaborative with
Health Care Without Harm and MIT CoLab*

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ANCHORS IN RESILIENT COMMUNITIES (ARC) ADVANCING HEALTH, WEALTH AND COMMUNITY-CLIMATE RESILIENCE

Lessons Learned

Anchors in Resilient Communities (ARC) is a national initiative to develop and advance models for engaging anchor institutions – large community-based institutions (universities, schools, hospitals, churches, public housing, etc.) – as partners in strengthening community health, wealth and climate resilience within their service areas.

In 2015, Emerald Cities Collaborative (ECC) received initial funding from the Kresge Foundation to prototype and test the feasibility of anchor-community resilience initiatives, including identifying the business case, mission-related value proposition, market opportunities (food, energy, waste, community infrastructure, etc.) financing and investment strategies and operating structures, among other aspects of these partnerships.

This document highlights the lessons learned in forging new institutional-community partnerships for meeting a range of social, physical and economic needs of communities that also enable them to be climate resilient. The specific objectives of the demonstration projects include:

1. Increase knowledge and capacity to forge anchor-community partnerships to work on climate resilience;
2. Identify institutional assets that can support community resilience, with specific focus on leveraging provisions of the Affordable Care Act (ACA) to resource community resilience; and
3. Identify and articulate the nexus between the mission of anchor institutions and climate resilience.

Anchors and Community Climate Resilience

ARC is not an organizing or policy advocacy project. Rather, it is a collaborative planning project focused on attracting substantial new social, political and financial capital needed to promote community resilience, particularly for America's most climate-vulnerable communities.

The emerging field of community climate resilience currently lacks permanent financing platforms or a community infrastructure that can take resilience to scale. Foundation and government resources are short-term and limited. Front-line communities that are the first responders in the event of a climate [or other] disaster are under-resourced and underdeveloped for climate resilience.

Finding the “sweet spot” for anchor institutions to engage in such efforts is a vital step towards an “all-in” strategy for community resilience. Anchors serve as disaster safe havens and recovery centers. They are also crucial to mitigating disasters through the build-out of alternative community energy, food, transportation and housing infrastructure.

To date, however, most anchor Institutions focus, at best, on their own needs to be greener and climate resilient with measures such as back-up generators for their facilities, emergency shelter and food supplies for employees and clients/patients and ensuring climate-resilient supply chains. By contrast, they have not focused on their role in improving climate resilience of their service communities.

Most anchor-community initiatives, on the other hand, are limited to community benefit contributions to fund an array of community services, or institution-based jobs and business opportunities for community residents. This is substantively different from the ARC vision of community climate resilience. The latter includes a deeper level of engagement that results in a shared vision, strategic initiatives and an authentic, enduring partnership between anchors and community to improve how a community functions and the systems transformations that are needed.

ARC Projects

This report highlights the ARC lessons learned in the first two years from three climate-impacted communities that have committed to a collaborative learning, planning and development process: East Bay San Francisco, Bronx, New York, and Miami, Florida. The partnership in each ARC site is supported by a health institution, but it also includes others anchors, foundations, community coalitions and a development team of subject matter experts who guide the project.

Each site developed climate-resilience strategies and projects unique to its local context:

- ARC East Bay focused on aggregating the purchasing power of regional educational and medical institutions to identify a project that will strengthen economic and climate resilience.
- ARC Bronx focused on economic and energy resilience.
- ARC Miami's labor-community partnership focused on a community health needs assessment and community education on the health impacts of climate change.

Report Outline

This report is designed to help community-based organizations develop anchor partnerships that strengthen the social, physical and economic resilience of their communities to, among other things, prevent and recover from the impacts of climate change. The major lessons learned – both unique to each site and common across all sites – are described in the following main sections:

1. Building anchor-community partnerships
2. Funding community climate resilience
3. Community health needs assessments
4. Community energy resilience
5. Community economic resilience
6. Challenges

LESSONS LEARNED: BUILDING ANCHOR-COMMUNITY PARTNERSHIPS

Anchor-Community Partnerships involve: 1) building institutional partnerships, 2) building community capacity and, ultimately, 3) building social capital by bringing the two together – institutions and communities – into a shared vision and alignment of purpose of community climate resilience.

Building Institutional Partnerships

Anchor-community initiatives are not new. Anchors have always had community relations programs to demonstrate a connection to and support for local community programs and events. In recent years, community groups have sought to deepen these relationships towards more meaningful community benefits – funding for community services, jobs and business development – from anchor institutions. An increasing number of multi-anchor initiatives are also emerging with growing recognition of the power of aggregating the assets that these large employers offer to the local economy (see ARC background paper for more information on anchor strategies).

These one-way, discontinuous and often adversarial relationships do not, however, meet the prerequisites for community climate resilience. They are most often driven by foundations, local governments or the anchors themselves and do not involve impacted communities in an equitable way. A community climate resilience frame requires that all stakeholders share a sense of common destiny and community vision, evoke mutual trust and support and share assets – institutional and community – to transform how a community is organized and functions.

How do community groups begin to build anchor partnerships around community climate resilience?

Do your homework.

An anchor institution strategy is a “sector development” strategy and follows the best practices of this 20-year-old field of practice. Community partners must demonstrate: 1) knowledge of the anchor’s industry (e.g. the health sector), the composition and size of the institutions, who their customers are, how they make their money, how they are governed and organized, who their competitors are and the details of the local leadership, programs and services; 2) the value proposition for an anchor-community partnership; and 3) community assets and capacities that can be deployed to support a community-anchor partnership.

ARC East Bay was formed through a partnership between Emerald Cities Collaborative and Health Care without Harm (HCWH). ECC contributed community knowledge and access and expertise in community resilience, community economic development and community energy, as well as seed capital. HCWH brought 20 years of working experience and relationships with health institutions around greening the health sector. HCWH + ECC provided the trust of anchors to work with new community partners and ideas, as well as community access to anchors.



Sarah Wally of Food Service Partners/MyCultiver, who leads the design/build of the new Richmond food preparation facility, presents the project plans.

Find the internal champion!

Finding an internal champion to support the anchor initiative can be like searching for a needle in the haystack. The right person depends upon the goal of the anchor strategy and will change over time. Champions can be found within the:

- **Public Benefits Team** – Every major institution has an external-facing staff with responsibility for public relations, community affairs and engagement, community grants, etc. Typically those staff represent the most identifiable first point of entry for community engagement. They are the door openers, mostly aligned with community interests, and can facilitate other institutional relationships. But they also have limited power to change an organization’s business practices, and, in worst-case scenarios, can serve as a defense – block and tackle – against the intrusion of community interests into the daily business concerns of the institution.
- **Operations “Line” Staff** – These are staff with responsibility for the anchor institution’s internal operations and include directors/heads of human resources, procurement, facilities, energy, finances, etc. They are least likely to care about or understand community benefit issues. Yet they are key decision-makers in reforming the institutional business model to better align with community needs. To enlist them, it’s less important to make the “community case” than to make the “business case” for hiring local, purchasing from local vendors, investing in community resilience strategies, etc.
- **Service Staff** – Every institution has staff that act as de facto intermediaries between community and line staff. Within health institutions, this includes doctors, nurses and local unions; within educational institutions, it includes faculty and staff unions. They are important to the institution’s business operations and knowledgeable about and connected to the community. They are, in essence, “bilingual” – able to speak the language of both the community and the anchor. They also have power, so their influence and “buy-in” are critical for access and change. They provide an important business-community “interface” and are important community validators.

ARC East Bay – The “big idea” for the partnership with Kaiser Permanente started within the national director of the institution’s “green” initiatives. The responsibility for managing Kaiser’s participation in the partnership, however, rested firmly with the community benefits officer in the northern California Region where the project is located. Both the national and regional community benefits teams were involved in the numerous program planning meetings. As the partnership progressed, line staff, joined the national and regional community benefits teams to begin identifying project opportunities. The procurement team was less interested in community economic resilience strategies. It focused more on bottom-line operational issues. Specifically, the project targeted building a local sustainable food economy leveraging the purchasing power of anchors. But the procurement team was more concerned about delivering affordable, high-quality food to its patients through a reliable supply chain of food producers.

Get it in writing!

A signed memorandum of understanding (MOU) with the anchor(s) can be invaluable for ensuring clarity and calibrating different interests and expectations. This is important given the multiplicity of stakeholders – different departments/units – within a specific anchor institution.

Miami lost two of its internal champions in the course of two years but was able to sustain its initial commitment from the UMMC CEO because of its written agreement.

Because the interests of the different units vary, an MOU lays out the agreed-upon goals and framework of the partnership. This is especially important if you have a multi-anchor strategy. If the expectations and interests vary within institutions, they will certainly vary across institutions and community. The formulation of an MOU, however, takes time and is predicated on a foundation of trust, shared interests and mutual respect.

Miami – 1199SEIU was the anchor champion that drove the University of Miami Hospital (UMH) toward effective community engagement in the development of its Community Health Needs Assessment (CHNA). Union members leveraged their labor-management agreement to insert 1199 members into the CHNA process, and they actively engaged in training members about climate change and climate resilience. They mapped the addresses of their members to determine their capacity to do outreach to the resident community. They conducted focus groups and surveys of resident neighbors to determine key priorities for the CHNA. As a result, they provided culturally or linguistically appropriate outreach for the poor, Haitian and Latino communities that the hospital wanted to research via the mandated CHNA.

Multi-anchor collaborations are exponentially better – and more difficult.

Aggregating the capacities and resources of more than one community anchor delivers better community results. Getting the participation and support of anchor Institutions, community and labor as committed stakeholders is needed to co-create a vision for the community, to pool assets and to develop a collaborative strategy for community change.

Yet, holding together a diverse “table” is challenging. Interests diverge, and institutions’ contributions are uneven and inconsistent. There are often issues of “proprietary” information among like institutions, as well as power differentials and differing goals and interests. So it becomes a “scavenger hunt” – more organic than scientific – to determine who cares and why. There is a constant, ongoing need to listen, reassess and respond – to determine who is showing up and why. This essential work requires significant staff capacity to manage and facilitate relationships.

Hire dedicated and experienced staff.

This work is not part-time. It is demanding and requires a full-time, dedicated staff person. The work includes growing and managing the collaboration; knowledge-generation and growing the “big idea”; facilitating anchor and community research, including evaluating evaluation of the process and projects; project development; and strengthening the community’s social capital.

One committed partner can be a magnet for attracting others.

One committed anchor can keep the “table” in place, even while others equivocate. Often, stakeholders are “passive participants.” They show up sporadically. They fail to contribute to idea-generation or to invest time or money. One committed anchor, however, can establish a strong foundation to begin the partnership and to seed a project. Continuous communication with other anchors – via newsletter, listserv, learning communities, etc. – will keep them tethered to the project and available when opportunities arise that meet their specific interests and capacities. One anchor can, in essence, validate the anchor-community concept, which can be expanded over time to include others in a more defined, working framework.

Strengthen Community Capacity and Leadership

Put “community” in anchor-community partnerships.

Most anchor strategies are “top down” initiatives, failing to engage community voices in the planning, development and implementation of community strategies. Community climate resilience is an “all-in” enterprise. Solutions to community problems are best informed by residents who live them. Communities also bring a host of assets and capacities to the collaborative enterprise.

Leverage existing community collaboratives.

Defining “community” for participation in a collaborative planning process is tricky. Picking the biggest and loudest organizations does not simplify things and, in fact, may complicate the credibility of the community engagement goals. One solution is to find existing coalitions comprised of a good cross section of the community’s needs.

Each ARC site either leveraged existing community collaboratives or built new ones to participate in and inform the ARC initiatives.

The community base of ARC Bronx is a partnership with a community coalition comprised of two coalitions – the Bronx Community Development Initiative (BCDI) and the Northwest Bronx Community and Clergy Coalition (NWBCCC), an affiliate of People’s Action. Together with MIT CoLab they established the foundation of the anchor-community partnership.

The community base of ARC East Bay consists of two broad-based community coalitions – East Oakland BHC and Healthy Richmond – funded as part of a 10-year, \$1 billion investment by The California Endowment to build resident organizing capacity to, in turn, build healthy communities in 14 of California’s most disadvantaged communities.

The community base of ARC Miami is 1199SEIU – the largest union of working class people of color. Labor unions are not typically seen as or defined as “community.” Yet when 1199SEIU completed a GIS map of its members, it found that the majority of them live in the UMH target communities. They were subsequently organized to conduct community surveys and focus groups for UMH’s CHNA.

Engage labor unions as critical community climate resilience partners.

Worker unions are organized and bring important resources and capacities to anchor-community partnerships. They are both workers and residents of the community. They can influence the narrative about employer-community partnerships and persuade their institutions to play well. In other words, the conversation is not just about bargaining.

It is also noteworthy that at every weather disaster, labor unions – building trades, doctors, nurses – from across the country show up in force to help in the recovery efforts. They are a well-organized and disciplined workforce; and they are ready, willing and able to deploy their members as rescue and support teams in disaster recovery efforts.

Build community leadership capacity.

Collaborations are effective only if all stakeholders are capable and empowered to be full, informed participants in the anchor-community partnership. Each of ARC collaborations developed and implemented capacity-building programs to bring its members into a learning community.

Continuously expand the circle of community residents.

As the project develops, continuous outreach and capacity-building are needed to increase the number of residents knowledgeable about and actively engaged in the community resilience programs. Putting the community in the leadership of the various efforts is also essential.

MIT CoLab, a ARC Bronx partner, implemented an economic democracy training program and planning process as a precursor to developing its anchor initiative for community residents. CoLab also developed and conducted a health-climate training program.

ARC East Bay held three full-day learning sessions for collaborative members and the broader community on anchor strategies, health and climate change and community-owned cooperatives.

ARC Miami developed and conducted a series of health and climate change workshops for its community members.

In Miami, Pope Francis's Encyclical on Climate Change & Inequality persuaded the local bishop to open church doors to training sessions about climate change for adults and youngsters. This, in turn, became an opportunity to build leadership among a group of some 90 seniors.



Representatives of disadvantaged neighborhoods, anchors and funders that support ARC's goals of improved community health, wealth and climate resilience meet for one of the public learning sessions convened by ARC East Bay.

ARC East Bay held regular ARC advisory committee meetings – via conference calls and several public learning sessions – to enable broad inclusion and feedback from a variety of community partners, typically engaging 40-50 community stakeholders while providing transparency. In addition, over 14 months, The Democracy Collaborative and Emerald Cities conducted over 200 in-person or telephone interviews on the demand side of anchor institutions' purchasing to identify "business gaps" that could be filled by local procurement and contracting.

Social Resilience: Putting It All Together For Effective Anchor-Community Partnerships

Anchor-community partnerships require cultivating relationships and leadership within both anchors and community organizations. The ultimate goal, however, is building social capital – and social resilience – across these two sectors. The key to community climate resilience is building the social resilience to sustain the partnership over time. ARC identified a few key lessons for building social capital:

Construct a vision statement.

A shared vision is central to mitigating the inevitable challenges in anchor-community partnerships. Each partner may own only a piece of the larger vision – health vs. jobs vs. climate resilience. Differing personalities and strategies are also among a myriad of factors that complicate collaborations. A vision statement used as a living document glues the collaborative together, continuously reminding participants of the mutual benefits of collective action. This statement must be visually graphic, compelling and plausible through collaboration.

Establish partnership values and principles.

Defining the value and operating principles for the anchor-community partnership is an essential prerequisite to its effectiveness and helps mediate the power differential between anchors and community stakeholders. Anchors wield power as a direct result of the resources/assets that they bring to the table. They may not be in the habit of consulting with community partners. They can be opaque about how decisions are made. They hold proprietary information that impedes trust between anchors and community. By whom and how decisions are made must be consciously and continuously reviewed. Values and principles provide a framework for communication, trust-building and mutual respect and addresses equity issues upfront. They should, at a minimum, establish a consensus related to people, planet, place, process, power, profits and privilege.

Finding the health, wealth and climate-resilience nexus.

The art of ARC is the constant need to pursue a mutual gain strategy – one that meets the different needs of all its partners. It is not about just health, or jobs, or climate resilience. While some stakeholders will get the intersectional work, most will not and will need to find the common ground. And unlike typical anchor initiatives, these are not simple project-based efforts; they are systems-change initiatives. In the case of the former, anchors might invest in a number of local businesses. Deeper systemic changes, however, require anchors to invest strategically in businesses that will transform the supply chain of a particular sector – food, energy or transportation – to become more local or decentralized. This is in order to circulate money locally, become more environmentally sustainable and improve health.

Define the metrics.

Answer the proverbial question: What does success look like? A large vision with lots of moving parts requires a “theory of change:” What’s the big idea and how do you think you will get there? Disaggregate the steps. Define: 1) the problem; 2) the inputs or resources that will be used to solve the problem; 3) the strategy or change process; 4) the short-term outputs; and 5) the long-

term impacts. Retaining an evaluator is a good idea, but this is the work of the collaborative. It is part of the visioning and shared learning and trust-building process. Also, make this a living document. Visit it at every meeting. Remind yourself what you are trying to do, and assess where you are in the process.

Build a learning community.

Engaging partners in collaborative learning experiences is an important strategy for building trust and community development. ARC Bronx and East Bay developed numerous community outings – “learning journeys” – to help build a collective vision, to identify community assets and to “kick the tires” of model projects.

Learning Journeys

ARC Bronx organized a learning journey for anchor and community partners to Mondragon Corporation, the world’s largest cooperative, in Basque Country, an autonomous community in northern Spain. The goal was to cement cohesion through a shared experience among over 20 partners and to explore innovative approaches to building community economic resilience via community-owned and controlled coops.



Members of the Bronx Cooperative Development Initiative traveled to Mondragón, Spain, in 2015 to learn about cooperative development models.

Source: BCDI

ARC East Bay sought broad inclusion and feedback from a variety of community partners, typically engaging 40-50 community stakeholders by staging day-long learning sessions on such topics as worker cooperatives and sustainable food systems. The sessions also provided transparency for a broader set of residents. (Videos of the learning sessions are available). After identifying its first project, a local sustainable food project, ARC East Bay organized numerous field trips for anchor purchasing and food staff to community food producers and processors so they could visualize the possibilities.



Local urban farmers, from left, Shyaam Shabaka, Eco Village Farm (Richmond); Kelly Carlisle (standing) of Acta Non Verba Farm (Oakland); Hank Herrera, New Hope Farms (Pinole); Andromeda Brooks, Happy Lot Farm (Richmond).

LESSONS LEARNED: FUNDING COMMUNITY CLIMATE RESILIENCE

Different revenue streams are needed and used for both operating support and project financing to drive anchor-community resilience initiatives.

Operating Funds

Foundation support is critical during the start-up phase.

Operating grants are needed to launch ARC partnerships. Such seed capital is used for hiring staff, “setting the table,” conducting initial capacity-building, research and evaluation work and ensuring that community stakeholders are empowered participants – in essence, creating the program and building the social resilience of the community-wide effort. The more foundations involved in the project, the more challenging it will be to align the disparate project goals. In general three to five years of operating funds are needed to launch and stabilize the partnership.

Utilize community benefit funds.

Engaging health institutions as anchors provides access to community benefit funds that are designed to support community health needs and provide grants to community organizations that can operate within a health frame. These funds can be used to provide general support for anchor-community planning and development activities, as long as there is a clear connection with the health mission of the institution.

Project Financing

Improving community climate resilience requires a substantial, long-term investment in transforming the community’s economic and physical infrastructure to mitigate the impact of climate change. This includes new energy infrastructure, food systems, alternative transportation, housing options and business capacity. The capital needed for these hard infrastructure projects has earned revenue and investment potential and opens new sources of capital, including:

Tap the purchasing power of anchors.

Anchors buy everything. The challenge is to get them to buy local, creating a market for local investments, financing, jobs and business opportunities.

ARC East Bay conducted a procurement study of the region’s educational and medical anchor institutions (“Eds & Meds”), revealing their collective \$6.8 billion in purchasing power. Subsequent interviews and focus group meetings with anchor partners and a scan of community organizations determined that building a local sustainable food economy aligned with both a goal of the anchors and the emerging capacity of a local slow-food movement, while also addressing health, wealth-creation and the impacts of climate change on the region’s agriculture sector.

While the purchasing power does not finance the build-out of an eco-system of local food suppliers, it does create the market for other investors.

Capture community benefit funds.

Typically, a health institution's community benefit dollars are used for "indigent care," based upon secondary research of community health problems. Currently, the Affordable Care Act requires community outreach and input into "upstream" – social and economic – determinants of health. The CHNA then becomes the playbook for allocating community benefit funds. This opens up new opportunities to engage health institutions in innovative, creative ways to make investments in projects that address economic, environmental and social factors to promote wellness.

Project development and financing requires more technical staff capacity and skill sets than the facilitation skills needed to hold together the anchor-community table.

ARC Bronx leveraged state Medicaid funds – the Delivery System Reform Incentive Payment (DSRIP) program – to develop its Green and Healthy Homes program in partnership with Montefiore Hospital.

Procurement Challenges:

- Line staff do not share the community's commitment; they are constrained by bottom-line issues.
- Centralized procurement systems are more complicated than decentralized systems.
- Procurement studies require credible organizations with business and technical experience.
- The widespread use of nondisclosure agreements creates impediments to transparency and full community engagement.

Leverage investment funds.

With an established market – anchors as "buyers" with strong financials – it is feasible to attract investment dollars to capitalize community resilience projects. This includes employee pension funds (e.g., SEIU), mission capital such as program related-investments (PRI) from foundations and private investments.

Access public-sector subsidies.

Public subsidies will be needed to build the community's workforce and business enterprises to funnel workers and suppliers, respectively, to the anchors, or to help subsidize local housing and other infrastructure development.

LESSONS LEARNED: COMMUNITY HEALTH NEEDS ASSESSMENTS

Health institutions are becoming the bedrock of anchor-community partnerships. Besides providing universal access to health care services, the Affordable Care Act is also transforming health care delivery from an “illness” model to a “wellness” model focusing on “upstream” – or social, environmental and economic – determinants of health. As a result, health institutions are now looking for ways to prevent hospitalizations and emergency room visits. A Community Health Needs Assessment is a pre-requisite for identifying where investments are most needed to prevent illnesses. Community groups can leverage their community knowledge and networks to help these institutions develop credible and coordinated paths to community wellness.

Galvanize community assets to develop an authentic CHNA.

A Community Health Needs Assessment (CHNA) and the subsequent plan for the anchor’s reinvestment in the community are key pillars and requirements of the ACA’s wellness strategy. Unfortunately, despite the mandate for direct community input, most health institutions have limited the scope of CHNAs to database research on, for example, morbidity and mortality rates. Instead, CHNAs ought to be foundational to community climate resilience. They are the “need or problem” statement around which the assets of anchor and community institutions should be targeted. Given the focus on the social determinants of health, a CHNA also serves as the glue for engaging the goals of other institutional partners who work on housing, jobs and the education and transportation needs of the communities.

ARC Miami conducted an extensive community survey about community health needs to be included in UMH CHNA research. The result, however, focused on health service and Medicaid needs of the community, as opposed to the root causes of illnesses.

Conduct a broad-based educational campaign around community wellness.

Transforming the health system and the community towards a “wellness” model means redefining health and health care. Residents see health care as “health services” and have not been informed that their health (physical and mental) relates more to their jobs, housing and community environment than their DNA. Residents need to be brought into the new wellness construct and take an active role in changing their health circumstances. A CHNA will not realize its full potential if resident input focuses only on the need for more health services as opposed to getting meaningful input about residents’ daily lives – information that can prevent illness.

ARC Miami pushed UMH to involve 1199 members in gathering community input on local health needs, using a comprehensive approach that included:

- Asking union delegates (peer-elected union members who act as leaders in their workplace) to take extra surveys home to complete with their families, friends and neighbors;
- Speaking to residents of the key ZIP codes at local gathering places such as the grocery store, churches and community centers;

- Organizing focus groups and community forums; and
- Working with the YMCA, churches and libraries in the targeted CHNA neighborhoods to secure free or low-cost, easily accessible space to host workshops in English, English/Spanish and English/Kreyol, with materials in all three languages.

Despite this full-scale effort, community residents focused on the need for “health services,” rather the larger social, economic and climate impacts on health. The input into the CHNA was not as powerful as it might have been if jobs, food access and housing conditions, for example, were understood to be included in preventive health.

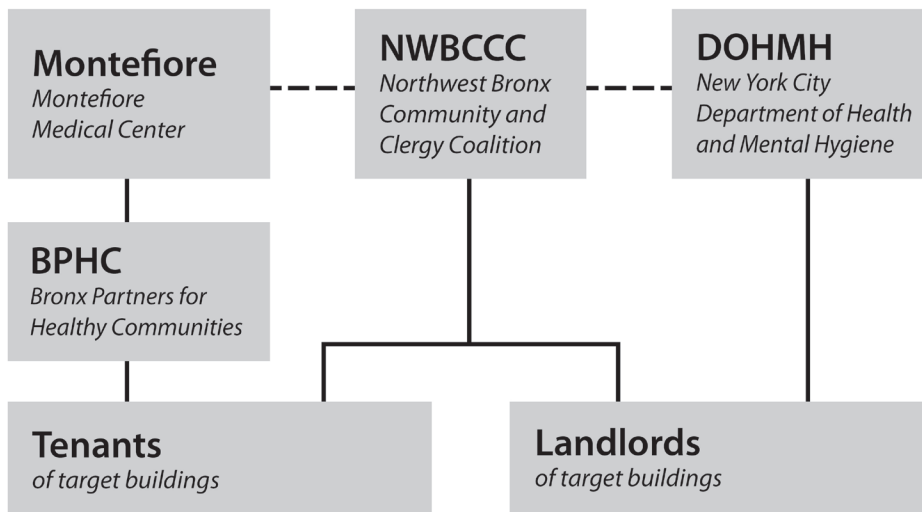
ARC Bronx, community organizers and community health workers are using the Green and Healthy Homes program to develop resident education on environmental triggers of asthma, green cleaning and energy and water conservation. Tenant leadership development will include formation of tenant associations and training on the social determinants of health. Residents will learn about the ACA’s community benefit requirements and those of the state’s Medicaid reform process, so they can help leverage those investment in their communities. Another set of trainings on tenants’ rights will increase their sense of agency in addressing building-wide issues.

LESSONS LEARNED: COMMUNITY ENERGY RESILIENCE

Finding ways to connect anchors to efforts to strengthen the energy resilience of low-income communities was a major area of investigation for both ARC East Bay and ARC Bronx. A number of options were explored: 1) leveraging the energy load of anchors as a catalyst for building community grids; and 2) using anchor resources to improve the energy and climate resilience of low-income households and critical facilities.

Anchor-based community energy grids are promising, but complicated.

Anchor institutions are important partners for implementing community energy projects. They consume a lot of energy and often require consistent power even (or especially) in the event of emergency. They also hold many real estate and capital assets, which can be used to develop distributed energy resources. The energy and real estate capacities of anchors can be leveraged to implement community energy grids that increase clean energy options for local residents. But these require a great deal of technical and financial resources to design.



*NWBCCC's anchor, public and community partnership structure for the Bronx Healthy Buildings Program.
Source: BCDI*

ARC Bronx's focus on a community energy grid was spawned by promising early conversations with the New York City Housing Authority (NYCHA). NYCHA's Bronx developments sit adjacent to other community anchors – Lennox Community Hospital and Hostos Community College. A technical study of the energy loads identified buildings that could be incorporated into a community energy district that could also supply clean energy to surrounding low-income residents. But the project was stymied by internal NYCHA politics; difficulties in negotiating development of a multi-anchor energy district; the lack of ARC technical staff capacity to direct the project; financing outside of ARC's scope; and the need for a longer lead time to build community knowledge and capacity to be drivers of the project.

Green and Healthy Homes.

ARC Bronx pivoted to a partnership with Montefiore Hospital in the Bronx to develop and launch a Green and Healthy Homes program. The project highlights the health-climate resilience nexus by linking energy efficiency and integrated pest management upgrades in apartment buildings to building-wide asthma interventions for residents. The hospital committed to leveraging Medicaid reform dollars to address the root causes of asthma severity – potentially creating a steady stream of future investment from health savings.

ARC Bronx partnered with Montefiore Hospital to test ways that energy retrofits and integrated pest management interventions would reduce repeat asthma emergency room visits, creating enough savings to pay for building retrofits. MIT CoLab studied Montefiore's emergency room data and identified a cluster of apartment buildings generating the most asthma cases. The Northwest Bronx Clergy and Community Coalition is now working with building landlords and tenants to make the health, economic and climate resilience case for retrofitting the buildings. Specifically, an economic analysis of the savings is being done for hospitals. Also, a case is being made for the economic value of the upgrades to building owners and operators— utility savings, utility energy incentives, reduced tenant turnover, asset management.

Anchors are critical facilities in climate resilience.

Anchor Institutions are critical facilities that must be made climate resilient. Schools and hospitals must be prepared as safe havens for the community, with electricity, food and water in the case of disasters. They are also the places where those most vulnerable and least resilient to climate disasters are found – the young, the elderly and the sick. Outpatient facilities are especially important “hot spots” that must be assured of electricity for life-support medical equipment, air conditioning, heat and other basic services.

Harness clean energy needs and commitments of anchors.

Anchor institutions are energy hogs. They use energy 24 hours every day. Many of them use equipment – technical machinery, refrigeration, etc., that is in high use. They have, therefore, an incentive to lower their utility costs through energy efficiency measures and to switch a greater percentage of their load to clean energy sources. Understanding the energy needs of anchor institutions is a beginning point for determining ways to improve energy options and opportunities for community residents within their service areas, including students, workers and patients/clients.

ARC Miami is identifying climate change challenges and strategies for outpatient facilities that both employ 1199 workers and house climate-vulnerable patients. Strategies must be developed to prioritize making these facilities climate-resilient.

Clean energy investments from anchor partners can also be harnessed to create local jobs, to generate health benefits and to promote climate mitigation and adaptation.

ARC East Bay investigated the energy profile and goals of its anchor partners to determine what opportunities may exist. The investigation resulted in Kaiser's decision to purchase 110 megawatts of off-site solar and 43 megawatts of wind generation, which will help Kaiser meet half of its California energy needs with renewable energy. Since hospitals are the second largest generator of carbon, this will have an immediate impact on air pollution. Also, the partnership will explore options for leveraging this commitment to develop both community energy and economic resilience strategies. This includes tying procurement commitments to advancing larger clean energy strategies, such as purchasing clean energy through the emerging Community Choice Aggregation program, helping to establish community solar gardens and similar ventures in which residents and small businesses can participate actively and benefit economically.

LESSONS LEARNED: COMMUNITY ECONOMIC RESILIENCE

Economic resilience is a key dimension of climate resilience. Families and businesses can be wiped out without income and assets to both withstand climate impacts and to recover from their consequences. Living in poor housing conditions and toxic, flood-prone neighborhoods, or not having air conditioning to ward off heat waves or transportation to escape disasters make families climate vulnerable. The ability to recover after disasters is also impacted by the loss of a job, a business, lack of transportation or money to find alternative housing options. Anchor strategies must take economic resilience into account to achieve community health, wealth and climate resilience.

Link community businesses to anchor institutions.

A community is as healthy as its business sector. And when disaster strikes, a community's recovery is dependent upon the resilience of the business community to put people back to work and to provide essential services. Growing and strengthening businesses is a climate-resilience strategy, and anchor institutions are important feeders for local business growth.

Given that most anchors have long-term, price-sensitive and centralized purchasing arrangements, it is a complex but important strategy to establish local procurement policies to give local businesses a fair chance. Beyond policy, however, new platforms are needed to broker joint ventures for high-volume supplies, as well as to expose the products/services of local businesses to procurement officers of anchor institutions and to advertise procurement opportunities for local businesses to bid.

Building climate-resilient infrastructure to improve a community's economic resilience.

Anchor-community partnerships are critical for improving health, local jobs and economic opportunities. This can be accelerated and enhanced with an intentional plan to transform the local economy to be climate-resilient. Specifically, centralized distribution systems use a lot of energy that not only spew carbon that produces climate change, they also are likely to collapse in a disaster, causing widespread calamity.

Climate-resilient economies have decentralized, networked infrastructure that can function when the central distribution grid fails. Distributive and decentralized energy, local food systems, on-site water management systems and community transportation systems are increasingly recognized for their ability not only to conserve natural resources but also to provide system redundancy in times of climate crises. ARC targets investments, jobs and business opportunities around improving the way communities function, particularly under extreme climate conditions.

Community-owned enterprises narrow the wealth gap.

Closing the wealth gap is as critical as closing the income gap to address economic resilience. Anchor procurement strategies that seek to invest in local businesses should consider forms of ownership such as co-ops and social enterprises, which deliver multiple benefits.

ARC Bronx is developing an online local business service platform to connect businesses that qualify as “high road” to its anchor partners for supplier opportunities.

ARC East Bay, through its procurement study, launched a local sustainable food project. It is aggregating the food purchases of regional anchors and building out an eco-system of local sustainable food enterprises as suppliers to the anchors along the entire supply chain, including producers, processors and distributors. It is working with Food Service Partners (FSP), a major food supplier with over 20 years' experience as the prime food contractor to Kaiser and other hospitals. FSP is serving as the “buyer” of local workforce and food supplies for the expanded demand generated by ARC partners. The project addresses health, wealth and climate resilience in its effort to combat California droughts through water-saving farming technology and energy reduction via local production.

LESSONS LEARNED: THE CHALLENGES

Changing a business model.

Changing how anchors do business is not something that happens overnight. It takes patience and agility to move into a new mindset and new business practices. Resistance is normal, akin to banks that confronted community reinvestment requirements in the 1970s. In fairly short order, however, community lending and community economic development became part of the normal business model.

Losing a champion.

Losing an internal champion is unsettling. People move on, and in some instances institutions change their mission and priorities. It is important to keep anchors committed through agreements and by broadening institutional support beyond one champion. Showing off the community's assets and working as a partner doesn't mitigate the revolving-door problem, but it does help to keep the value proposition for community engagement easy for everyone to see.

The University of Miami Hospital's business model shifted towards specialized health care – treating cardiac and cancer patients – and its efforts to sell the hospital to a public health institution created continuous chaos in the ARC Miami partnership.

Non-disclosure agreements.

NDAs seem to be a “thing.” Large institutions have trade secrets and protected business data that they do not want shared with the public. This complicates the transparency and trust needed in a partnership. It typically elevates one community partner or a consultant who signs the NDA to a more privileged status, with access to information not available to others. While detailed information cannot be shared, the aggregated results and recommendations are broadly available.

Experienced community partners.

An experienced community partner is needed at the table. Whether it is to sign the NDA, to deliver social and political capital to keep a project moving or to provide technical or financial skills, there must be a well-known, credible community partner to garner trust among anchors.

Organizing anchor accountability.

The best anchor-community Initiatives have enlightened and committed leadership with partner institutions. That is not always the case. Or sometimes, even the most enlightened become cautious and slow to address community needs. It is critical, therefore, to keep the residents and their needs as critical drivers in the quest for community climate resilience.

The University of Miami Hospital's final CHNA did not address the needs identified by the assessment, so the ARC team decided to focus on community organizing and cultivate relationships with community organizations that share interests in health and climate resilience. This approach is intended to build a base of supporters who will request that the institution address the university's lack of responsiveness to the community's needs – and, importantly, to incorporate community-based climate resilience into its mission.