

Health and Economic Development



A resource for the New York Regional Economic Development Council meetings
The New York Academy of Medicine, August 2011

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This document is available online at www.dashny.org. Additional information about the Councils, including the Regional Council Guidebook and Strategic Planning Manual, is available at: <http://nyworks.ny.gov/>. For more information, please contact Ana Garcia, NYAM Senior Policy Associate, 212-419-3536 or agarcia@nyam.org.

I. Introduction

Improved population health and job creation are mutually-supportive interests. This document has been created to help health individuals interested in health improvement to participate in the New York State Regional Economic Development Councils in an informed way, and to inspire heightened awareness and action across the state toward improved population health through economic development.

How the Councils Work

In July 2011, New York State Governor Cuomo and Lieutenant Governor Duffy launched New York's 10 Regional Economic Development Councils (REDC). The Councils involve multiple stakeholders and are each charged with developing a local, 5-year plan for strategic economic development. The plans that are judged strongest will get a funding allocation for their key projects. In addition, future applications for state funding and tax exemptions will be evaluated for their consistency with the regional plans. During this fiscal year, there is an estimated \$1 billion in grants and tax credits available from nine state agencies:

- Empire State Development Corporation
- NYS Energy Research and Development Authority
- Homes and Community Renewal
- Department of Transportation
- Environmental Facilities Corporation
- Parks, Recreation and Historic Preservation
- Department of State
- NYS Canal Corporation

The Councils began meeting August 3, 2011, and will hold private and public meetings throughout the fall of 2011. Final applications will be due November 14, 2011, and the winning proposals will be announced December 2011.

How Health Advocates Can Participate

Through the Councils and the plan development process, individuals interested in promoting good health have an opportunity to help the wider community and policy makers understand the important linkages between employment, good health outcomes, and economic vitality.

New York State Department of Health representatives are among the official members of the REDCs. Health and hospital systems are also represented among the Council memberships. In addition, during public meetings, health advocates and the general public will have opportunities to provide input. You can find contact information for your council through <http://nyworks.ny.gov>.

II. Background: the links between health and economic development

How do health and economic development interact?

Health is fundamental to one of the main inputs for economic development: human capital. Along with financial, intellectual, social, and political capital, development schemes rely on skilled, healthy individuals as workers and as consumers. When you have a healthy population, economic benefits follow:

- Half of the overall economic growth in the US during the last century is associated with improvements in population health.¹
- A 10% reduction in heart disease mortality is estimated to be worth more than \$3 trillion, and a 1% reduction in cancer mortality is estimated to be worth more than \$400 billion to current and future generations.²
- A 10-year increase in life span is associated with an increase of 4.5 percentage points in savings rates because healthier individuals with increased longevity are more concerned with future financial needs.³

Conversely, as shown in Figure 1, poor health and illness generate an economic burden to individuals, companies, and regions. An unhealthy population generates costs in preventable health care expenditures, higher premiums from insurance companies and healthcare costs to business, and greater public expenditures on Medicaid and Medicare.

These expenditures come at the expense of other investments. The public sector forgoes critical investments in education, transportation, housing and other infrastructure, social services, and the arts. Businesses experience opportunity costs and may have to sacrifice expansion and capital investment. Businesses want to locate in regions with healthier populations because their costs are lower and productivity is higher.

Figure 1 An Unhealthy Cycle



¹Nordhaus WD. *The Health of Nations: The Contribution of Improved Health to Living Standards*. Cambridge, MA: National Bureau of Economic Research; 2002.

²Murphy K, Topel R. Diminishing returns? The costs and benefits of improving health. *Perspect Biol Med*. 2003;46 (suppl 3):S108–S128.

³Bloom DE, Canning D, Graham B. Longevity and life-cycle savings. *Scand J Econ*. 2003;105:319–338.

Furthermore, unemployment and low-income are among the leading determinants of poor health.⁴ Unemployment is consistently linked with higher rates of illness, injury, and premature mortality.

How can economic development produce health?

Health and economic development are often linked in people’s minds to the health care industry: hospitals and health care systems care for the sick and create health sector jobs. The health care sector is a major employer in New York. However, economic development can also improve health and, over the long term, generate health care system savings in other ways.

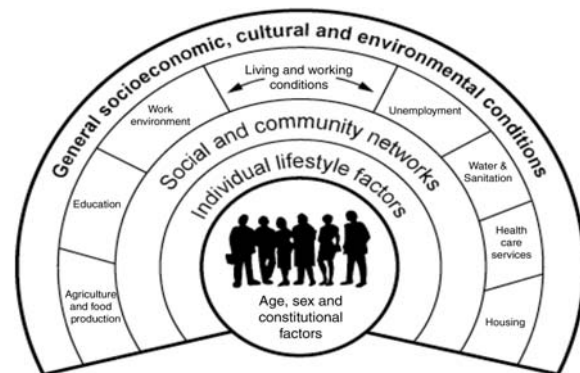
Economic development strategies create the overarching “socioeconomic, cultural, and environmental conditions” (illustrated in Figure 2) that influence population health.⁵ Creating a business climate and supporting public investments that contribute to good-paying jobs can create an economically thriving community that strengthens education, social networks, and community resources, which in turn contributes to good health outcomes.

Economic development plans also present an opportunity to make direct investments that can help prevent unnecessary illness and premature death from chronic diseases like heart disease, cancer, pulmonary disease, diabetes, and obesity—all of which have the same risk factors of diet, exercise, tobacco, and alcohol use. Investments that support disease prevention can also yield economic returns.

For example:

- **Active Design.** Active-design communities enable daily activity through public plazas, protected roadways, open spaces, housing developments, and workplaces. These efforts improve health and the local economy. Sidewalk lighting, bike paths, and other amenities in North Carolina’s Outer Banks has led to boosts in business and tourism that generate \$60 million a year in economic impact, nine times the state’s initial investment.

Figure 2 Dahlgren & Whitehead’s Determinants of Health



⁴ Learn about the social determinants of health at: <http://www.cdc.gov/socialdeterminants/FAQ.html>

⁵ Dahlgren, G., Whitehead, M., & World Health Organization WHO. (2006). *European strategies for tackling social inequities in health: Levelling up part 2*. Copenhagen: WHO Regional Office for Europe.

- **Transit-oriented development.** Development linked with transportation nodes is critical to maintain sustainable communities that foster economic access and opportunity. In addition to promoting walking to and from the transportation node, these developments attract more commercial uses since there is the population density to support it. Development centered on transit also reduces vehicle usage and therefore emissions.⁶
- **Recreation.** Households headed by 34-54 year olds spend heavily on entertainment, but some neighborhoods lack sufficient facilities, including options for active recreation like skating rinks, gyms, fitness studios, and bowling alleys. A Columbia University analysis of just East Harlem found residents of this low-income district spend their recreation dollars outside neighborhood and that the area could sustain up to 16 new businesses that charge fees or admissions.⁷
- **Local Food Access.** Nationally, demand for direct-to-consumer sales of agricultural products is a fast-growing segment of the economy: sales increased by \$660 million or 120% from 1997 to 2007.⁸ Economic development that includes support for technical assistance, warehousing and distribution, and other infrastructure to enable community-supported agriculture, farm-shares, and farmer's markets can generate income for New York farmers and businesses, and will bring produce directly to the low-income communities that need them most.

The New York Academy of Medicine and Urban Institute conducted a review of community interventions like those above and found they have the potential to reduce rates of type 2 diabetes and high blood pressure by 5% within 2 years; reduce heart disease, kidney disease, and stroke by 5% within 5 years; and reduce some forms of cancer, arthritis, and chronic obstructive pulmonary disease by 2.5% within 10 to 20 years. New York could experience \$7 in reduced health care expenditures for every dollar invested in community interventions, adding up to \$1.3 billion in savings for public and private insurers over 5 years.⁹

Additional examples of community and economic investments that promote health are in Section VI.

⁶ Bailey, L., Mokhtarian, P. L., Little, A., American Public Transportation Association. ICF International (Firm), & Science Applications International Corporation. (2008). *The broader connection between public transportation, energy conservation and greenhouse gas reduction*. McLean, VA: ICF International

⁷ Urban Technical Assistance Project (UTAP), Columbia University. (Summer 2010) East Harlem Commercial Corridors Assessment. http://www.harlemcdc.com/PDFs/EHCCS_Report.pdf

⁸ Martinez, S., & United States. (2010). *Local food systems: Concepts, impacts, and issues*. Washington, D.C. : U.S. Dept. of Agriculture, Economic Research Service.

⁹ Levi, J., Segal, L. M., Juliano, C., & Trust for America's Health. (2008). *Prevention for a healthier America: Investments in disease prevention yield significant savings, stronger communities*. Washington, D.C: Trust for America's Health

III. Opportunities

The Regional Plans will have multiple components and performance targets. Figure 3 shows the plan components suggested to the Councils in the REDC *Strategic Planning Manual*. Health-promoting strategies like those discussed in the previous section support multiple areas, like “Business Climate,” “Community Vitality,” and “Infrastructure.”

As your Council fills out its plan, below are three general approaches to encouraging the REDC to adopt actions that support population health:

- As local needs are identified in the regional plan, include improved health status and the need to **invest in the human capital** of the region (education, etc.) among those needs.
- Encourage council members to **look for the added health benefits** or potential negative impact on health of any project proposals, particularly when deciding between different options.
- Help the Council **connect with local health coalitions** (see Section IV). The work already in progress through local coalitions and health departments can count as assets in building the Regional Plan.

Below are key messages and questions to help articulate the concepts contained in this brief.

Key Messages

Population health is an economic engine.

- *a healthy population is attractive to businesses*
- *a healthy population is more productive and has fewer health care costs*

The populations that have suffered the most from poverty, job-losses, and poor health status have the most to gain.

Hospitals and health care systems are important. So are healthy communities that prevent illnesses and injury from arising in the first place.

Questions to Ask

What are the added benefits to the health of residents in the region? Does this plan/project proposal:

- create good (higher-income) jobs?
- add opportunities for physical activity and access to healthy foods?
- create transportation links between worksite, housing, schools, business, and recreation?

- support active transit? (bike paths, Complete Streets, sidewalks, public transportation)
- create or preserve safe, accessible, open spaces for recreation?
- avert or reduce environmental health hazards? (e.g., traffic, pollution)

What are the added benefits for populations most in need? Will they experience benefits in the long or short term?

- lower income adults and children
- racial and ethnic minorities
- isolated older adults
- people with disabilities

Figure 3 REDC Plan Components Suggested in the Strategic Planning Manual

<p>Business Development – Strategies to spur business development that may include elements such as:</p> <ul style="list-style-type: none"> • Targeted areas for economic development • Business or industry cluster development • Foreign investment • Minority and Women Business Enterprises development • Business retention and expansion • Business recruitment • Export assistance
<p>Business Climate – Strategies to ensure economic competitiveness that may include elements such as:</p> <ul style="list-style-type: none"> • Taxation and regulatory policies • Government efficiency and restructuring • Economic development incentives (statewide or regional) • Capital Financing • Public policies and legislation
<p>Community Vitality and Quality of Life - Strategies to strengthen urban areas and community centers that may include elements such as:</p> <ul style="list-style-type: none"> • Historic, cultural attractions and recreation • Walkable neighborhoods • Downtowns and community centers for diverse incomes, multiple uses including retail, office, housing, and entertainment • Supporting infrastructure
<p>Workforce Development – Strategies to enhance work force development such as:</p> <ul style="list-style-type: none"> • Targeted education (secondary, post-secondary) programs • Workforce training
<p>Infrastructure – Strategies to provide new or enhance existing infrastructure to support desired economic development that may include elements such as:</p> <ul style="list-style-type: none"> • Transportation • Energy • Environmental improvements • Water and sewer • Technology development • Telecommunications • Housing

Additional Suggestions

- Remember that good health outcomes and good jobs are not competing interests. They are the same interest.
- Lead with the wins for other sectors. Support health by supporting proposals that are simultaneously good for other objectives, like the tourism industry (bike paths linking rural communities); property values (parks preservation in urban settings); job creation (grocery store openings in low-income neighborhoods); and agriculture (buying local).
- Many people are now very familiar with and support environmental goals such as “greening,” sustainability, and reducing waste and carbon emissions. Build on these concepts. Physical activity goals that reduce reliance on cars, and local food production that reduces long-distance trucking link especially well.
- Discuss issues with community coalitions and partners for additional input.
- Data is good, but keep it simple. Remember, for many people health equals health care and concepts about other key determinants may be new. Avoid jargon, complicated epidemiologic data, and references others may find intimidating or alienating.

IV. Programs Promoting Health through Community Development

Below are just some of the many groups in New York working to improve health through community development strategies. If you do not see a contact for your area, please call Ana Garcia at 212-419-3536 for further assistance.

Location	Contact Person	Contact Title	Organization	Email	Phone
Albany	Amy Klein	Executive Director	Capital District Community Gardens	amy@cdcg.org	518-274-8685
Albany	Robin Dropkin	Executive Director	Parks & Trails New York	rdropkin@ptny.org	518-434-1583
Albany	Lisa A. Ferretti	Director of Operations	U Albany Foundation - Center for Excellence in Aging	lferretti@albany.edu	518-442-5832
Alleghany & Cattaraugus	Dianne Baker	Executive Director	Cornell Cooperative Extension of Alleghany and Cattaraugus		716-699-2377 ext 122
Cayuga	Joan Knight	Dir. Community Health Services	Cayuga County Health and Human Services	joan.knight@dfa.state.ny.us	315-253-1454
Chautauqua	Ann Morse Abdella	Executive Director	Chautauqua County Health Network	abdella@cchn.net	716-338-0010
Chenango	J. Rebecca Hargrave	Educator	Cornell Coop. e Extension of Chenango	jr45@cornell.edu	607-334-5841
Elmira	Cathleen Mathey, BSA, MSM, RN, CHC	Director of Community Outreach	Arnot Ogden	cmathey@aomc.org	607-737-4469
Essex	Meg Parker	CHP Project Coordinator	Essex	mparker@co.essex.ny.us	518-873-3857
Herkimer	Adam Hutchinson	Executive Director	Herkimer County Healthnet	ahutchinson@herkimercounty.org	315-867-1552

Location	Contact Person	Contact Title	Organization	Email	Phone
Herkimer	Linda Robbins	Assistant Director - Herkimer Cty CCE	Cornell Cooperative Extension of Herkimer	llr6@cornell.edu	315-866-7920
Jefferson	Faith Lustik	Public Health Planner	Jefferson County Public Health Service	faithl@co.jefferson.ny.us	315-786-3723
Kings	Karen Aletha Maybank	Assistant Commissioner, NYCDOHMH	Brooklyn District Public Health Office	kmayban1@health.nyc.gov	646-253-5714
Manhattan	Sarah Morrison	Director of Programs	Common Ground	smorrison@commonground.org	718-637-6460
Manhattan	Deborah Thornhill	Associate Executive Director, Strategic Planning	Harlem Hospital Center	deborah.thornhill@nychhc.org	212-939-3548
Manhattan	Karen Lee	Director, Built Environment Program	New York City Department of Health and Mental Hygiene	klee3@health.nyc.gov	212-788-5347
Manhattan	Thuan Dang	Program Associate	Charles B. Wang Community Health Center	tdang@cbwchc.org	212-226-8866
Monroe	Wade Norwood	Director of Community Engagement	Finger Lakes Health Systems Agency	wadenorwood@flhsa.org	585-461-3520
Monroe	Sharonette Foster	Program Coordinator	Finger Lakes	sharonettefoster@flhsa.org	585-224-3126
Monroe	Charles Thomas	AICP	Rochester	thomasch@cityofrochester.gov	585-428-6953
Niagara	Cathy Loverjoy Maloney, JD	Executive Director/CEO	Cornell Cooperative Extension Niagara	clm84@cornell.edu	716-433-8839 x234

Location	Contact Person	Contact Title	Organization	Email	Phone
North Country	Margot Gold	Executive Director	North Country Healthy Heart Network	nnyheart@northne t.org	518-891-5855
Onondaga	Kathy Mogle	Program Coordinator	Onondaga	hkmgogl@ongov.net	315-435-3280
Richmond	Roz Cassar	Senior Associate Executive Director	Project Hospitality	rocassar@projecth ospitality.org	718-448-1544
Rockland	Melissa Jacobson	Program Specialist, Div. of Public Health Promotion	Rockland County	jacobsom@co.rock land.ny.us	845-364-3610
Schoharie	Mary Radliff, ANP	Co-Director, Wellness Center	SUNY Cobleskill	radlifmd@cobleskil l.edu	518-255-5225
Schoharie	Deya Greer	Program Coordinator	SUNY Cobleskill	greerdn@cobleskill .edu	518-255-5294
Seven Valleys	Christella Yonta	Project Coordinator	Seven Valleys	cyonta@sevenvalle yshealth.org	607-756-4198, x223
St. Lawrence	Karen Bage	CHP Director	St. Lawrence	karen@gethealthys lc.org	315-261-4760, x224
Suffolk	Susan Wilk	Educator II	Cornell Cooperative Extension Suffolk	srw32@cornell.edu	631-727-7850 x385
Suffolk	Nancy Uzo	Vice President, Public Affairs	John T. Mather Memorial Hospital	nuzo@matherhosp ital.org	631-476-2723
Suffolk	Josephine Connolly Schoonen	Assistant Clinical Professor of Family Medicine	Research Foundation of SUNY - Stony Brook	josephine.connolly- schoonen@stonybr ook.edu	631-444-8430
Tompkins	Elizabeth Falcao	Director, Health Planning Council	Human Services Coalition of Tompkins County	Bfalcao@hsctc.org	607-273-8686

Location	Contact Person	Contact Title	Organization	Email	Phone
Ulster	Ms. Lydia M. Reidy	Executive Dir	Cornell Cooperative Extension Ulster	lmr5@cornell.edu	845-340-3990
Ulster	Mary E. Marsters	Director of Programs	Cornell Coop. Extension Ulster	mem98@cornell.edu	845-340-3990
Warren & Washington	Kate Lichten	Director, Community Health Services	GFH Warren/Washington	klichten@glensfalls hosp.org	518-926-5914
Warren & Washington	Kathy Varney	Coordinator, CHP	GFH Warren/Washington	klvarney@glensfall shosp.org	518-926-5906
Wayne	Sandra Bastedo	Project Coordinator	Cornell Cooperative Extension Wayne	sb932@cornell.edu	315-331-8415 x203

V. References and Resources

Regional Economic Development Councils

Link to the REDC's main site: <http://nyworks.ny.gov/>

MATCH County Health Rankings

These rankings illustrate how the health of a community depends on many different factors – ranging from individual health behaviors, education, and jobs, to quality of health care, to the environment. The URL below links to the project's New York Resources. You can also get county-level information.

<http://www.countyhealthrankings.org/new-york/downloads-and-links>

NYS Prevention Agenda

The New York State Department of Health developed the Prevention Agenda as a call to action to local health departments, health care providers, health plans, schools, employers, and businesses to collaborate to improve the health status of New Yorkers through an emphasis on prevention.

http://www.health.state.ny.us/prevention/prevention_agenda/

Making the Connection: Linking Economic Growth to Policies to Prevent Childhood Obesity

Developed by *Leadership for Healthy Communities*, this document discusses policy interventions that could help prevent obesity and also promote local economic growth and development.

http://www.leadershipforhealthycommunities.org/index.php?option=com_content&task=view&id=550

DASH-NY

NYAM's Designing a Strong and Healthy New York project DASH-NY offers policy analysis, training, technical assistance, and support for sustainable changes that increase access to healthy food and safe places to play and exercise for all New Yorkers.

www.dashny.org

Age-Friendly New York City

Age-Friendly New York City is a collaborative effort of NYAM, the New York City Council, and the Mayor's Office to respond to the rapidly aging population in New York City by promoting an "age-in-everything" lens across all aspects of city life. The initiative asks public agencies; businesses; cultural, educational, and religious institutions; community groups, and individuals to make to policy and practice to create a city more inclusive of older adults.

<http://www.nyam.org/agefriendlynyc/about-us/>

Health Impact Project

A collaborative, national initiative of the Robert Wood Johnson Foundation and the Pew Charitable Trust to promote health impact assessments (HIAs) as an effective decision-making tool for policymakers. HIAs use a flexible, data-driven approach that identifies the health consequences of new policies and develops practical strategies to enhance their health benefits and minimize adverse effects.

www.healthimpactproject.org

Healthy Development Measurement Tool

The San Francisco Department of Public Health created a comprehensive evaluation metric to consider health needs in urban development plans and projects.

<http://www.thehdmtool.org/intro.php>

Population Health and Economic Development in the United States

Mirvis, D. M., & Bloom, D. E. (July 02, 2008). Population health and economic development in the United States. *JAMA - Journal of the American Medical Association*, 300,1, 93-95.

<http://jama.ama-assn.org/content/300/1/93.full>

Promoting Health Equity

Brennan, R. L. K., Baker, E. A., Metzler, M., & Centers for Disease Control and Prevention (U.S.). (2008). *Promoting health equity: A resource to help communities address social determinants of health*. Atlanta, GA: Centers for Disease Control and Prevention.

<http://www.cdc.gov/nccdphp/dach/chhep/pdf/SDOHworkbook.pdf>

VI. Handout: Investments that Benefit Health and the Economy

Please feel free to duplicate and distribute the 1-pager that follows this page.

Development Investments that Benefit Health and the Economy

Parks promote physical activity and jobs, and are a major revenue generator for New York State. ⁱ

- ✓ Parks provide \$440 million in employment income and over 20,000 jobs, a large proportion of which are middle income.
- ✓ Parks in New York State provide \$1.9 billion in annual sales for surrounding private businesses, and return \$5 for every \$1 invested.
- ✓ In 2006 the Northern Forest Canoe Trail in the Adirondack Mountains of New York attracted 28,000 visitors, who spent \$4.4 million in the local economies. Overall these expenditures created \$6.2 million in total economic impact, supported an estimated 134 jobs and provided \$2.1 million in personal income. ⁱⁱ

Investments in public spaces create opportunities for activity, as well as jobs, and stimulate the economy. ⁱⁱⁱ

- ✓ Lodi, California (population 60,000) improved pedestrian access to its downtown area. They widened sidewalks, raised curbs, and added amenities like increased lights and benches. The project attracted 60 new businesses, there was a drop in vacancy rate from 10% to 6%, and the city noticed a 30% increase in sales tax from the renovated area.

Public transportation encourages walking, decreases unemployment, and increases business revenue.

- ✓ Each \$1 billion invested in public transportation yields 36,000 jobs - more than the average 28,000 per billion spent on transportation projects- and generates \$4 billion in economic return. ^{iv}

Locally produced foods encourage healthy eating and jobs.

- ✓ It is estimated that dollars spent on local food rotate between 9 and 21 times through the local economy.
- ✓ An initial investment to increase the amount of locally sourced food purchased by only 5% would keep approximately \$400 million within the regional economy.

Supermarkets stimulate the economy, provide access to healthier foods, and can be a venue for nutrition education and care.

- ✓ On average the opening of a new supermarket is estimated to have an impact of \$42.6 million, and create 151 new jobs. ^v
- ✓ In 1992, a community in Rochester took advantage of the uncaptured sales in order to persuade a grocery store chain to open a store into an underserved area. Public funds eventually helped complete the move; the grocery store is not only still successful, but attracted a number of other businesses to the area. ^{vi}
- ✓ In New York City alone there is an uncaptured market worth \$1 billion in grocery sales. ^{vii}

Interested in learning more? Contact DASH-NY at dashny@nyam.org.

ⁱ http://www.ptny.org/pdfs/advocacy/peri_full_report.pdf

ⁱⁱ <http://www.trailrus.com/swvirginia/finalreport/volume2/blueways.pdf>

ⁱⁱⁱ <http://www.uwex.edu/ces/cced/downtowns/ltb/lets/0703ltb.pdf>

^{iv} <http://www.pps.org/articles/putting-our-jobs-back-in-place/>

^v www.nasda.org/File.aspx?id=26781

^{vi} http://www.eatbettermovemore.org/pdf/BE_Rochester_NY.pdf

^{vii} <http://www.nyc.gov/html/dcp/html/supermarket/index.shtml>