



Acting on Climate Change for a Healthier Future: The Role of Health Centers

Webinar 2



Housekeeping

- All participants muted upon entry
- Engage in chat
- Raise hand if you would like to unmute
- Meeting is being recorded
- Slides and recording link will be sent via email



Learning Objectives – Webinar 2

- Discuss the impact of climate change on high-risk populations
- Examine health education strategies on climate change
- Identify public health resources for natural disasters



National Center for Health in Public Housing (NCHPH)

- The National Center for Health in Public Housing (NCHPH) is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number U30CS09734, a National Training and Technical Assistance Partner (NTTAP) for \$668,000 and is 100% financed by this grant. This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government.
- The mission of the National Center for Health in Public Housing (NCHPH) is to strengthen the capacity of federally funded Public Housing Primary Care (PHPC) health centers and other health center grantees by providing training and a range of technical assistance.



National Nurse-Led Care Consortium

The **National Nurse-Led Care Consortium (NNCC)** is a membership organization that supports nurse-led care and nurses at the front lines of care.

NNCC provides expertise to support comprehensive, community-based primary care.

- Policy research and advocacy
- Technical assistance and education support
- Direct, nurse-led healthcare services



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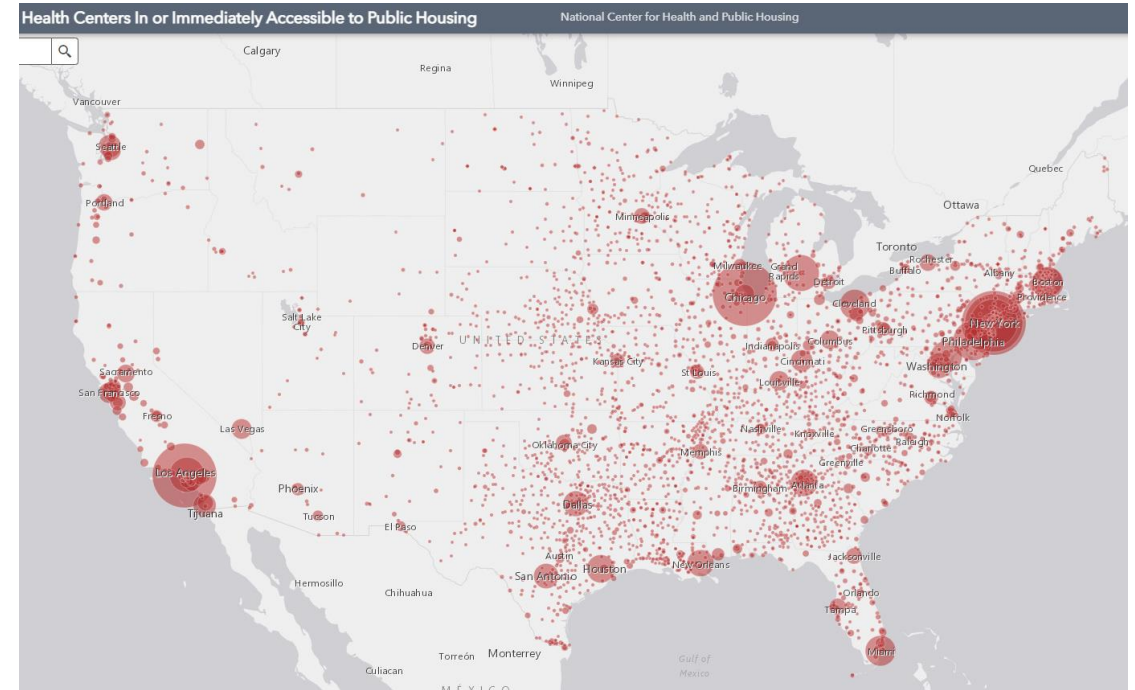
Vice President, Behavioral
Health Services

Open Health Care Clinic

Health Centers Close to Public Housing

- **1,370 Federally Qualified Health Centers (FQHC) = 30.5 million patients**
- **483 FQHCs In or Immediately Accessible to Public Housing = 6.1 million patients**
- **107 Public Housing Primary Care (PHPC) = 935,823 patients**

Source: 2022 Health Center Data



Source: Health Centers in or Immediately Accessible to Public Housing Map

Public Housing Demographics



1.5 Million Residents



2 Persons Per Household



38% Disabled



52% White



91% Low Income



43% African-American



26% Latinx



19% Elderly



36% Children



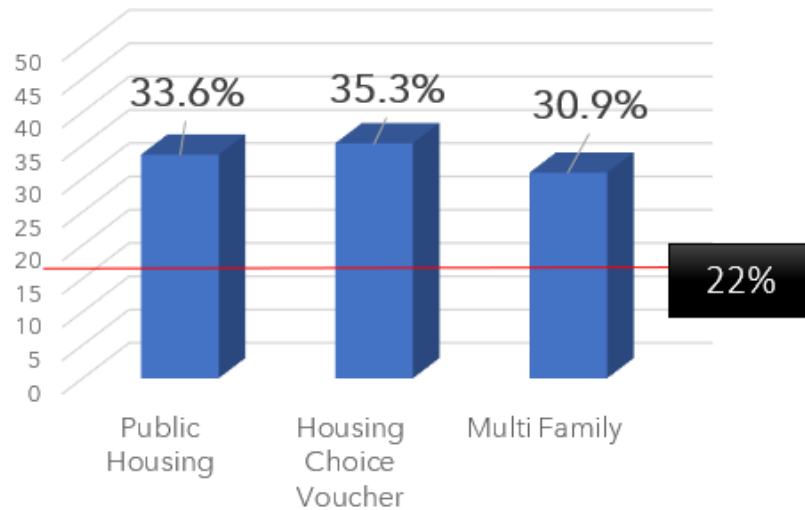
32% Female Headed Households with Children

Source: 2022 HUD Resident Characteristics Report

A Health Picture of HUD-Assisted Adults (2006-2012)

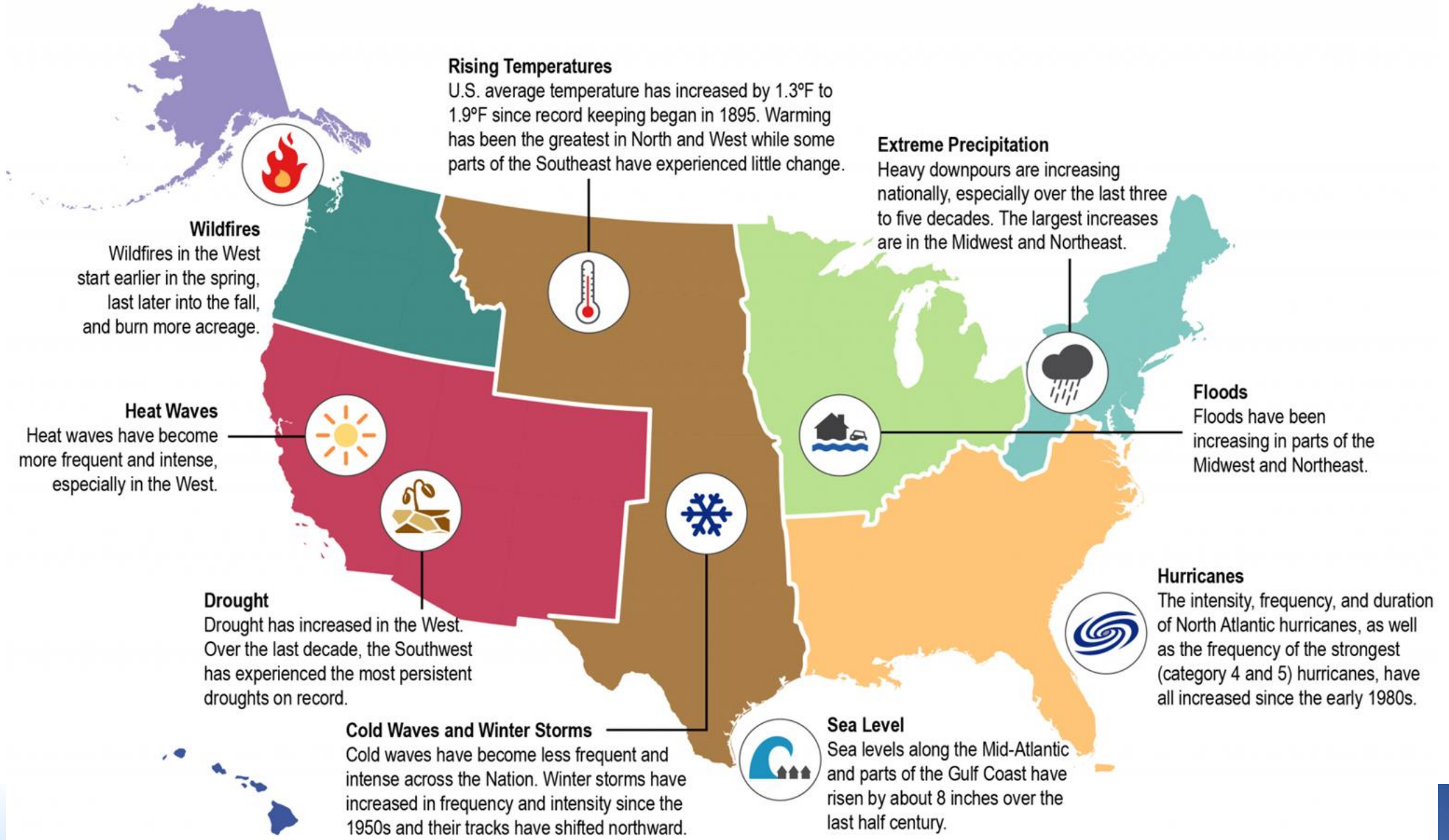
Adults in HUD-assisted housing have higher rates of chronic health conditions and are greater utilizers of health care than the general population.

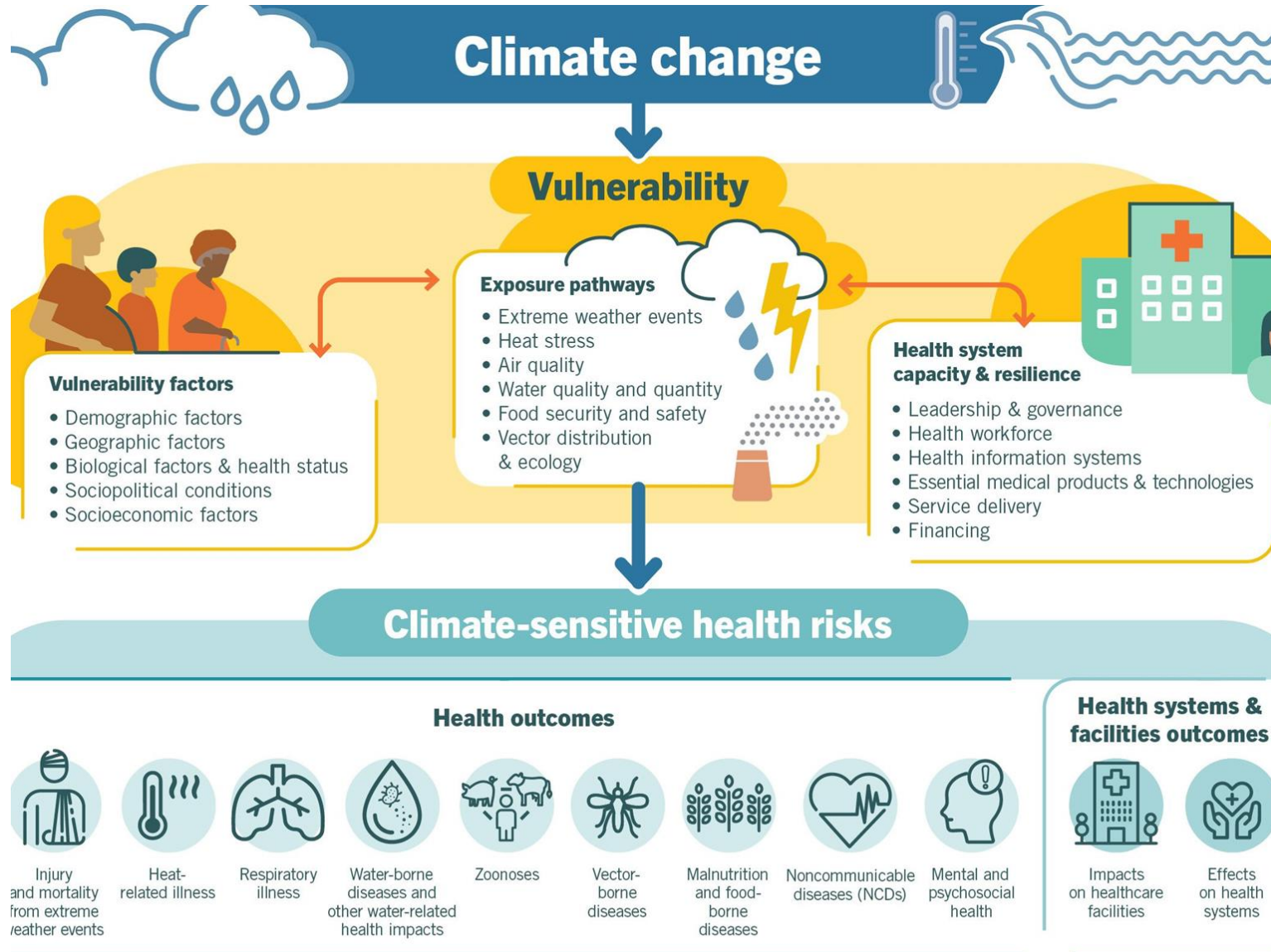
Adult Smokers with Housing Assistance



Source: Helms VE, 2017

	HUD-Assisted	Low-income renters	All Adults
Fair/Poor Health	35.8%	24%	13.8%
Overweight / Obese	71%	60%	64%
Disability	61%	42.8%	35.4%
Diabetes	17.6%	8.8%	9.5%
COPD	13.6%	8.4%	6.3%
Asthma	16.3%	13.5%	8.7%





Health and Heat

Acute Kidney Injury

Stroke

Adverse Pregnancy Outcomes

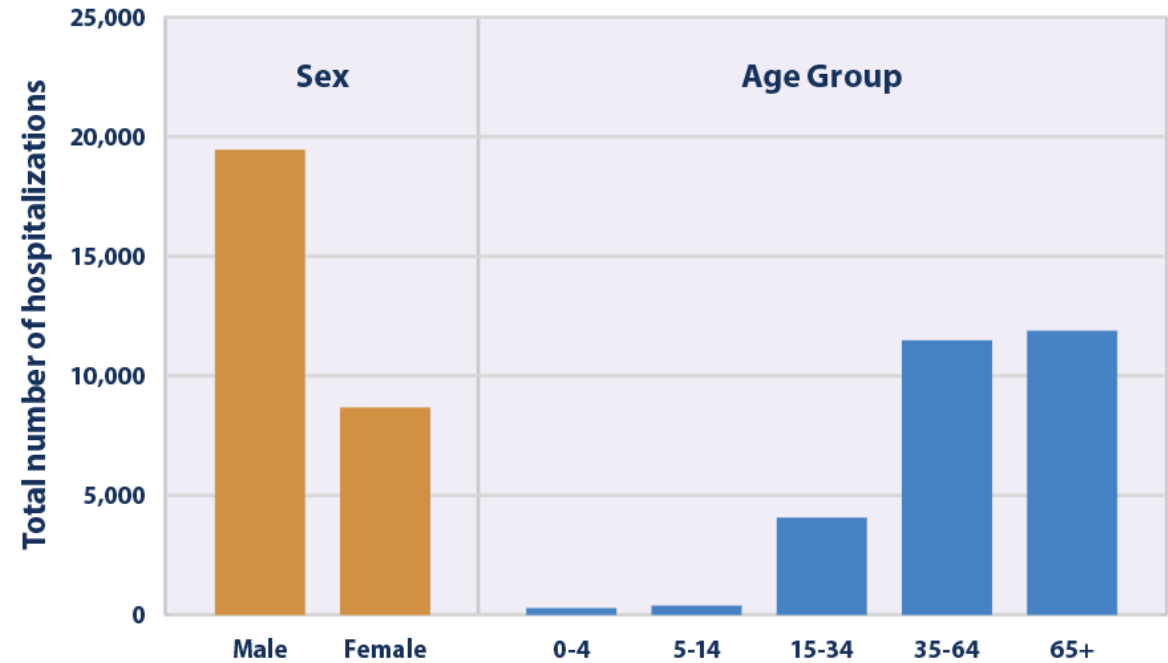
Worsened Sleep Patterns

Impacts on Mental Health

Worsening of Underlying Cardiovascular and Respiratory Conditions

Three Elements of Climate Change Vulnerability

- Exposure
- Sensitivity
- Adaptive capacity



Heat-Related Hospitalization by sex and age
Source: EPA, Climate Change Indicators

CLIMATE CHANGE AND HUMAN HEALTH: WHO IS MOST AT RISK?

Children

Socially vulnerable people

Indigenous populations

Older adults

People with chronic medical conditions

People with disabilities

Workers

Pregnant, breastfeeding and postpartum women



Vulnerability to the Health Impacts of Climate Change at Different Life Stages



Mothers and babies

Adverse pregnancy outcomes such as low birth weight and preterm birth have been linked to extreme heat events, airborne particulate matter, and floods.



Infants and toddlers

Young children's biological sensitivity places them at greater risk from asthma, diarrheal illness, and heat-related illness.



School age and older children

The behaviors and activities of older children increase their risk of exposure to heat-related illness, vector-borne and waterborne disease, and respiratory effects from air pollution and allergens.



Climate Conversations Protect Health By:

- Addressing existing risks
- Preparing patients for health impacts of a changing environment
- Encouraging stewardship of the natural world

Health Education Strategies

TABLE 1

Concerns and Considerations about Climate Counseling with Patients

Practical concerns	Counseling considerations
How does climate change impact the health of my patients?	The health effects of climate change are well documented on the Centers for Disease Control and Prevention and World Health Organization websites ^{1,12} ; in a report created by the Medical Society Consortium on Climate and Health ¹³ ; and by summary reports published in <i>The Lancet</i> , <i>Annals of Internal Medicine</i> , and <i>Pediatrics</i> . ^{3,14,15}
Do I have enough time to incorporate one more topic into my visits?	Physicians should prioritize which patient counseling topics to address and how to address them effectively and efficiently for each patient. Physicians should seek resources and determine the best ways to incorporate priority topic(s) into well-visit and problem-visit workflows. Consistent, simple, clear, and tailored messaging is recommended. ¹⁶ Counseling generally should be brief (less than one minute) to improve patient receptivity.
Reimbursement and federal standards	Although no International Classification of Diseases-10 (ICD-10) codes currently reimburse for environmental justice–related activities, experts are currently working with federal leaders to incorporate the topic into the Centers for Medicare and Medicaid Services standards. This may ultimately influence reimbursement by other payors, quality assurance standards, and health systems rankings. Consistent shorter messaging is likely to be more effective than attempting to meet reimbursement criteria for time spent counseling.
This topic is too controversial, and/or I do not have support from my peers and patients	<p>Multiple organizations, including the American Academy of Family Physicians, American College of Physicians, American Academy of Pediatrics, American College of Obstetricians and Gynecologists, and American Psychological Association, support health care professionals and leaders as they work to address climate change locally and nationally.¹⁷</p> <p>Physicians are already tasked with making difficult and potentially controversial health recommendations with which colleagues and patients sometimes disagree. Pediatric clinic data suggest that the risk of a negative patient response is exceptionally low (eTable A). Physicians have an obligation to communicate concern for the patient’s health and to focus on the best possible outcomes.</p>

Information from references 1, 3, and 12-17.

Concerns and considerations about climate counseling with patients

- Well-child physical examination
- Seasonal allergy visit
- Asthma visit
- Questions from patients
- Addressing bias concerns from patients

Source: AAFP





Principles to achieve climate equity

- Engage
- Share
- Build
- Prepare

THE PATH FORWARD.

The World Health Organization noted “there is no longer any question of whether CHWs can be key agents in improving health... the question now is how their potential may be realized.” Will we rise to the challenge of making proCHWs the norm and allow them to reach their potential?

Climate change will result in increases in several direct and indirect health risks and adverse outcomes. And whilst CHWs can't prevent such events from occurring, they can play an important role in the response and preparedness of health systems to deal with these crises.

Countries that invest in a strong workforce of proCHWs who are salaried, skilled, supplied, supervised, and integrated into robust health systems, place themselves in the best position possible to tackle the challenges ahead.

Case Study

- **K.B. is a thirteen-year old patient with a three-year history of asthma. The patient's parents are concerned because K.B. wakes every night coughing. The family just moved to an apartment that does not have air conditioning and has received several code violations for a leaking roof and windows. The apartment is located next to two major interstate highways and is 10 miles from a cement factory. Air quality has reached the orange zone several times this month, and pollen levels have been consistently high for several months. I have provided the parent with an Asthma Action Plan and updated K.B.'s medications according to current guidelines. I believe that the environmental factors exacerbate or even cause my patient's condition, so how do I talk with the family about these issues over which they have little or no control? How do I talk with a patient about issues such as air pollution or climate change and their impacts on health?**



Dialogue



On Ramp



Off Ramp

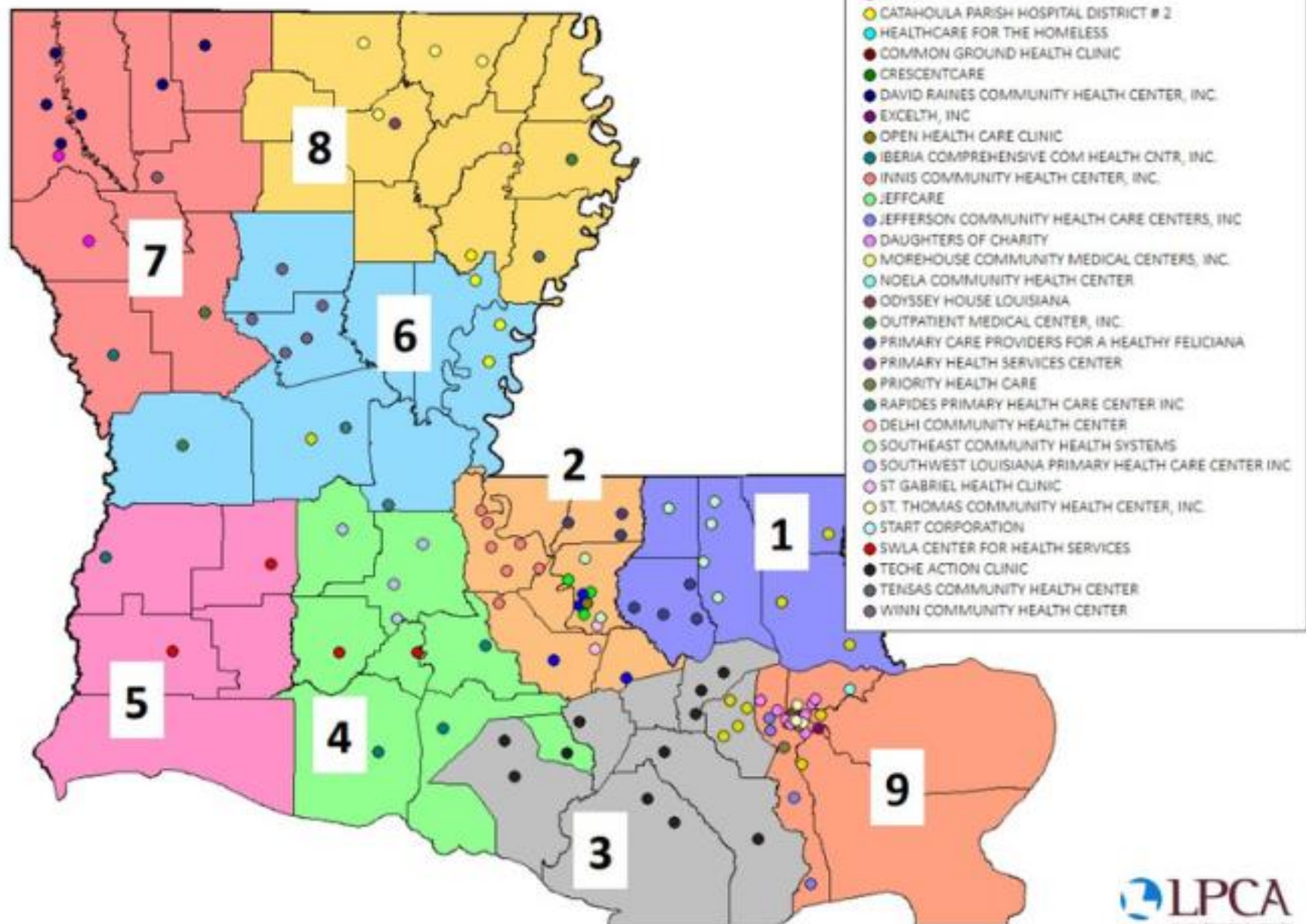
Steps to introduce the health impact of climate change with patients



L P C A

LOUISIANA PRIMARY CARE ASSOCIATION
Louisiana's Community Health Centers

FQHCs by Louisiana Department of Health Regions





Canal Street, New Orleans Pre-Katrina



Canal Street, New Orleans Post-Katrina



The levee broke in New Orleans after Katrina, leaving thousands stranded from their flooded homes. Here, they wait on the city Interstate highways for rescue.



LPCA After Emergency Damage Survey

Is this an initial report or update? *

Select

Event

If Other Event, Explain

Your Name *

Best Way to Reach You *

Select

Send me a copy of my responses

Submit

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**ROUSES
MARKETS**

VALUE PA

Quarter L
Pork Cho

A school shooting in Louisiana left 1 dead, 2 hurt. Classes are canceled until Friday.

Classes are canceled at a Louisiana high school where a student was shot to death and two others were injured

By The Associated Press

September 13, 2023, 1:21 PM



GREENSBURG, La. -- Classes are canceled at a [Louisiana](#) high school where a student was shot to death and two others were injured, authorities said.

The names and ages of the victims of the shooting at St. Helena College & Career Academy in Greensburg have not been released. Law enforcement officials said they arrested the suspected shooter, a 14-year-old student Tuesday after the shooting.

“This is such a senseless tragedy and my prayers go out to the families of all involved and to the St. Helena community that were affected by this tragedy.” Sheriff Nat



PPE Distribution



Thank You!

Louisiana Primary Care Association | LPCA.net
503 Colonial Drive Baton Rouge, LA 70806



OPEN
HEALTH
CARE CLINIC

**Acting on Climate Change for a
Healthier Future: The Role of Health
Centers**

Introduction

Speaker Bio

Dr. Jamie Barney is the Vice President of Behavioral Health at Open Health Care Clinic. In her current role, she oversees the provision of services in the case management, housing, and behavioral health departments.

Dr. Barney is the Vice Chair of the Louisiana State Board of Social Work Examiners. She also remains an active member in the Greater Baton Rouge Area Chapter of the Association of Black Social Workers.

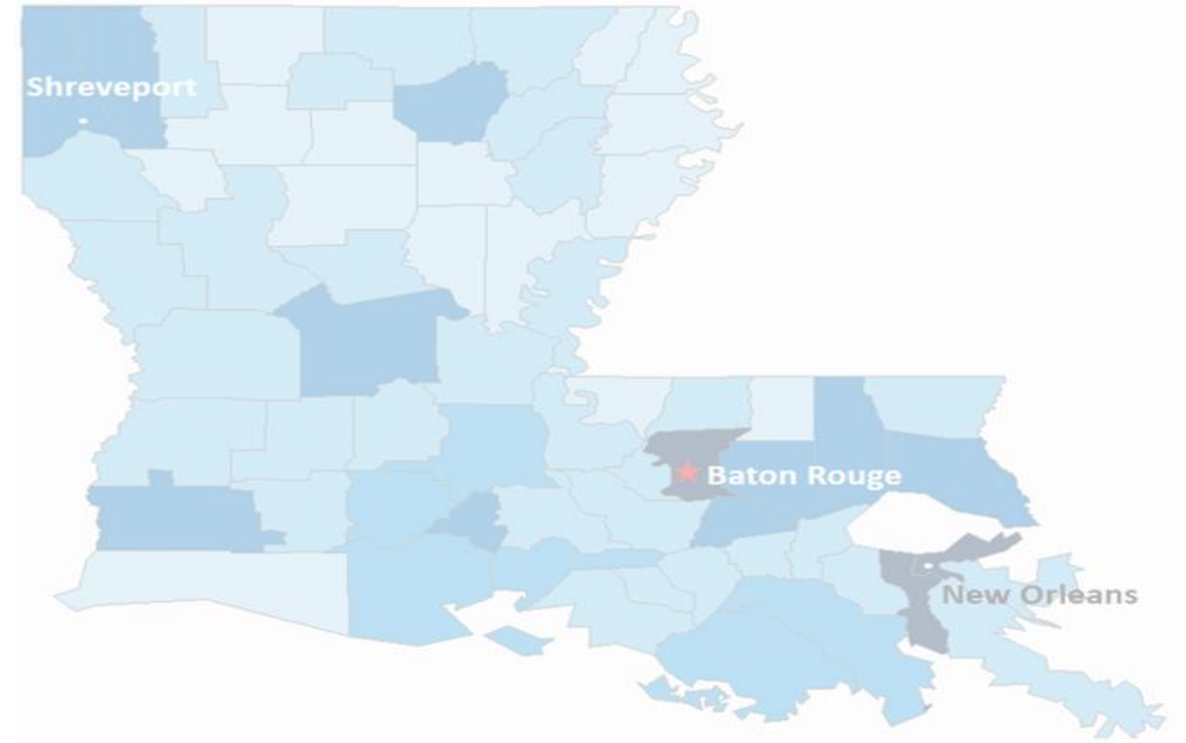
Dr. Barney's interests include efforts to improve services to persons living with HIV and combatting the HIV pandemic, ending homelessness, reducing stigma surrounding mental health and substance use disorder, and securing resources to address community needs.

Jamie Barney, DSW, LCSW-BACS
Jamie.Barney@ohcc.org



HIV/AIDS Alliance for Region Two (HAART), Inc dba Open Health Care Clinic (OHCC)

- Established in 1995
- Housing programs 2001
- Full service medical clinic 2007
- FQHC Status in 2015



Whole Care for the Whole Community

Our Services

PRIMARY CARE

PEDIATRICS

WOMEN'S HEALTH

ENDOCRINOLOGY

PODIATRY



SEXUAL HEALTH

PHARMACY

DENTAL

BEHAVIORAL HEALTH

SOCIAL SERVICES



Chronic conditions i.e. PLWH

Persons experiencing homelessness

Persons with mental health disorders

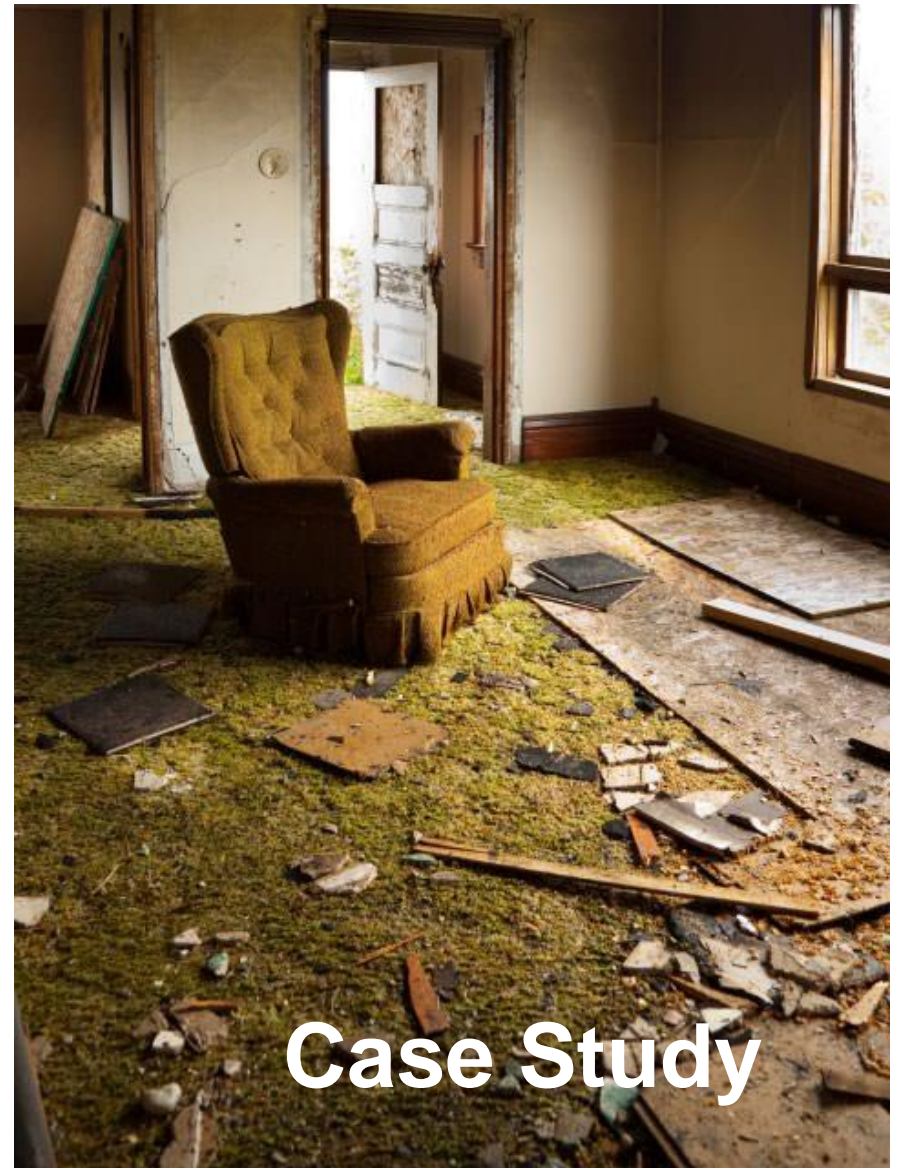
Persons with no/low income

Spanish speaking

Vulnerable Subpopulations

August 2016: A 52-year-old woman was the head of household in a family of five. She resided with her daughter, two minor grandchildren, and her minor son. The household income consisted of her social security disability and her daughter's employment. She was diagnosed with HIV, bipolar disorder, and schizophrenia. She was receiving medical care and RW case management at OHCC; and mental health care with a community partner. She resided in OHCC's HOPWA funded project-based housing – a 3-bedroom home.

She had a stroke and was hospitalized for 3 weeks. While hospitalized, there was four days of rain resulting in a flood. Her home was initially inaccessible, but when she did regain access most items were ruined with 2.5 feet of water in the home.



Case Study



**“Great Flood of 2016 “
“no-name storm”
“1 in 1,000-year flood”**

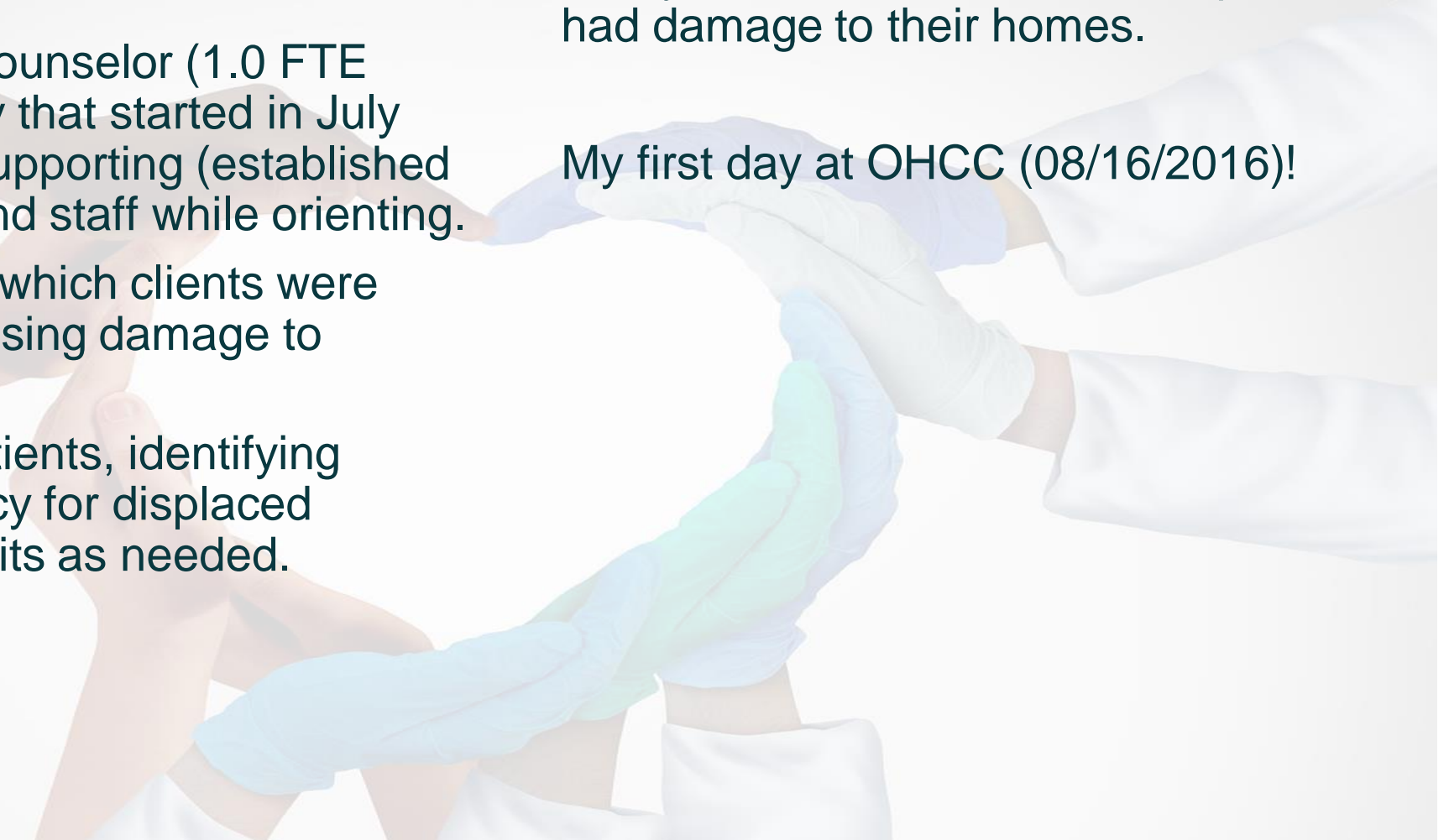
Immediately upon return to work following the floods.

- RW Case managers: locating clients and identifying needs.
- Behavioral Health Counselor (1.0 FTE Counselor at agency that started in July 2016): focused on supporting (established and new) patients and staff while orienting.
- Housing: identifying which clients were displaced and assessing damage to OHCC's properties.
- Medical: locating patients, identifying appropriate pharmacy for displaced patients, medical visits as needed.

Meanwhile...

Significant number of staff displaced, hosting family and friends who were displaced, and had damage to their homes.

My first day at OHCC (08/16/2016)!



Louisiana flooding: One family, 13 homes destroyed



By [Christina Zdanowicz](#), CNN

🕒 2 minute read · Updated 12:40 AM EDT, Thu August 18, 2016

Upon release from the hospital, she and her family moved in with her mother. They stayed with her mother for approximately two months.

Simultaneously feeling blessed and guilty, she's doing what she can for those who have lost so much.

"People were told they don't need flood insurance and now they're without a home," she said. "We're trying to figure out where our family is going to stay. We only have seven homes in the family that don't have damage."

Case Study

Baton Rouge area renters frustrated by 'ridiculous' prices, tight rental market after flood

Renters continue to struggle finding affordable rental units in Baton Rouge area after flood

BY TERRY L. JONES | tjones@theadvocate.com Feb 12, 2017  4 min to read

Ryan White

“Our current client load is 417 with a decrease in referrals during the month of August. Within one week of the August 2016 floods, we were able to contact most of our clients. 50 of our clients were displaced immediately following the floods and 15 remain displaced. Clients without medications were able to receive them within 48 hours. While we were able to provide for most of their immediate needs, additional needs included formula for babies, sanitary supplies for women, and rehousing.

Housing

Approximately 8 housing clients were displaced by the flood, 4 remain displaced or unaccounted for. We are in communication with OCD and HUD on means to fund the full extent of repairs and to reallocate dollars to tenant-based housing to assist additional households.

September 15, 2016 Department Operations Updates



Patient continued to access mental health services with a community partner. RW, Housing Case Manager, and medical provider provided regular follow-up while the patient was displaced. Also ensured the household had access to medical and mental health services.

**JUST ANOTHER DAY IN
OUR SUPERHEROES
BATTLE TO PROVIDE
WHOLE CARE FOR THE
WHOLE COMMUNITY!**

Case Study

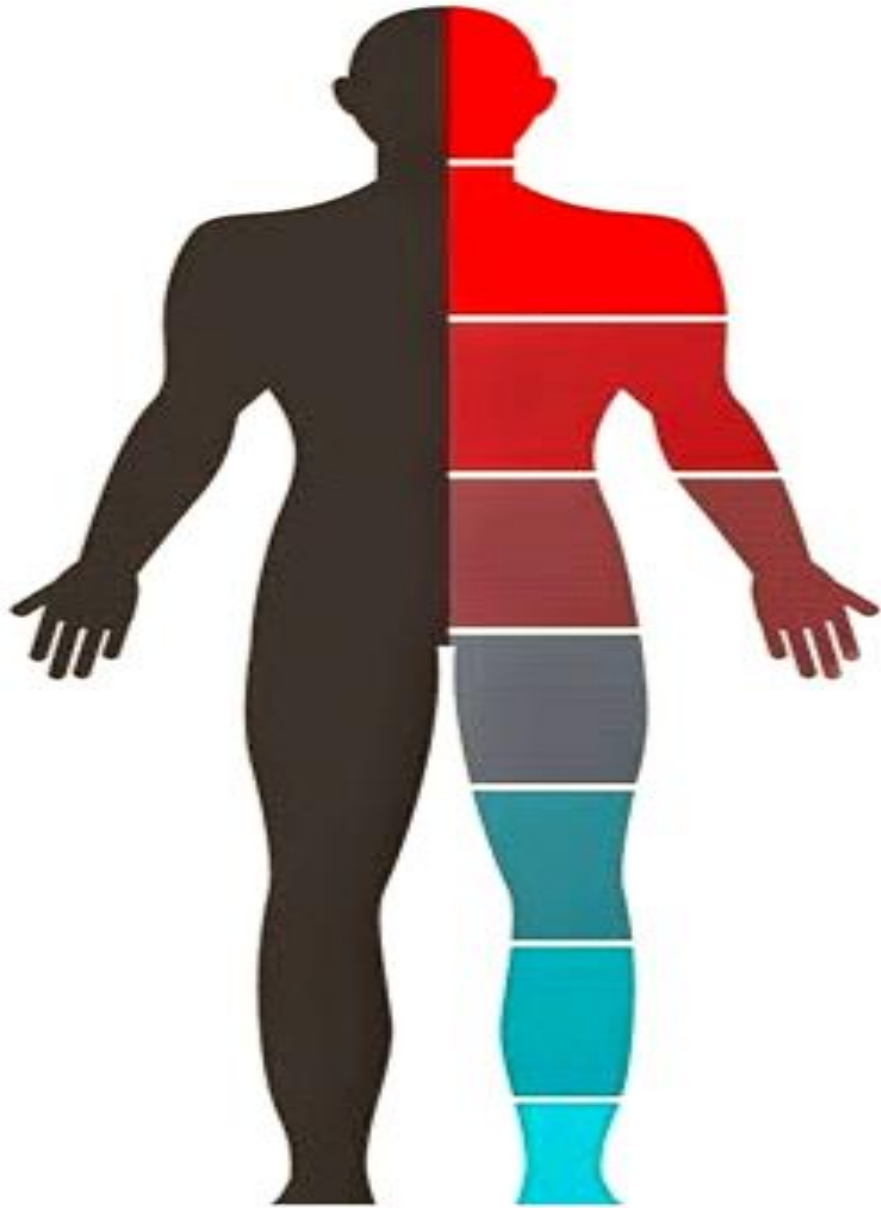
“The water came so fast, you didn’t really have time to think. All you wanted to do was get out, get out, get the kids and get out, and that’s what we did,” Washington said. “After the flood, I couldn’t concentrate. I just couldn’t do anything. My mind was trying to comprehend what was all going on.”

Depressive disorders and post-traumatic stress disorder, which are afflicting Louisianians in the wake of the Great Flood, can be common after a disaster. Women are more likely to develop depression and anxiety and men are more likely to turn to drugs and alcohol, said Carol North, a psychiatry professor at the University of Texas Southwestern Medical Center.

Survey data by Louisiana Spirit, a state agency that uses federal emergency money to help victims recover following presidentially declared disasters, shows thousands are suffering from sleeping and eating problems, shakiness, and despair. A quarter of survivors surveyed told agency staff they’re having trouble making decisions. One in five said they feel irritable and angry. Police figures show domestic violence has increased. So, too, has drinking.

Behavioral Health

The effects of stress on the body



Mood issues including anger, depression, irritability. Lack of energy, concentration problems, sleeping issues, headaches. Mental issues including anxiety disorders and panic attacks.



Increased blood pressure, increased heart rate, higher cholesterol and risk of heart attack



In the immune system, there is reduced ability to fight and recover from illness



Stomach cramps, reflux, and nausea



Loss of libido, lower sperm production for men, and increased period pain for women



Aches and pains in the joint and muscles

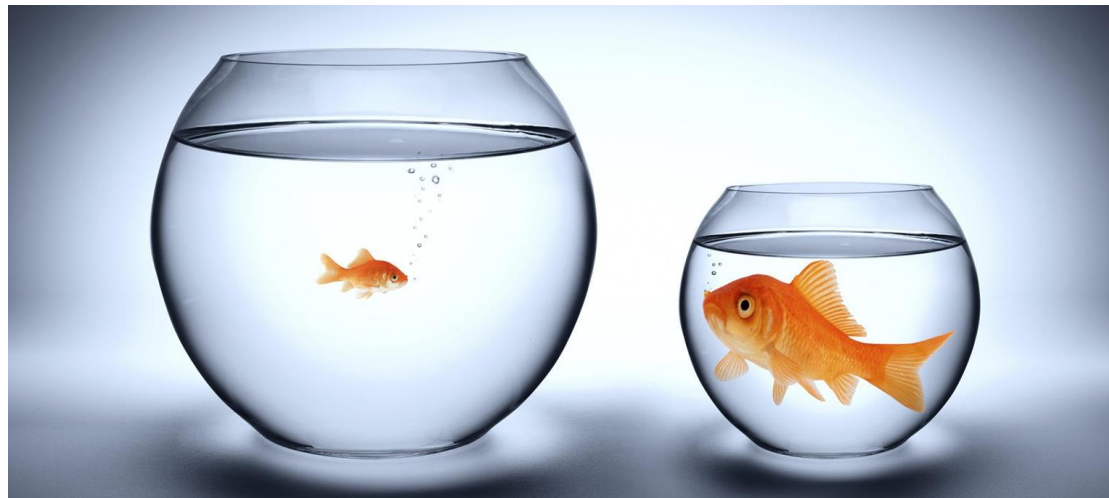


Lower bone density

RESOURCES

One size DOES NOT fit all

- Self-Help
- Individual Counseling
- Support Groups
- Consumer Advisory Boards
- Primary Care Provider
- Psychiatry
- Emergency/Crisis Intervention
 - SUICIDE PREVENTION LIFELINE
1-800-273-TALK (8255)
 - 911
 - Nearest Emergency Department



Trauma Informed Care Models seek to:



Realize

Realize the widespread impact of trauma and understand paths for recovery.

Recognize

Recognize the signs and symptoms of trauma in patients, families, and staff.

Integrate

Integrate knowledge about trauma into policies, procedures, and practices.

Avoid

Actively avoid re-traumatization.

Patient and housing case manager were able to identify safe housing for the family.

Agency was able to reallocate PBRA funds to TBRA.

Patient was transitioned to TBRA and a 3-bedroom apartment was secured for the family with HOPWA funds.

HOPWA funds were used to renovate the home. Renovations were completed a year later – September 2017.

Another family moved into the home within a week of completed renovations.



Case Study

**Emergency Management
Team**

Technology

Response Time

**Remain Updated &
Follow Guidance**

**Education to Clients &
Community**

Staff Communication

**Support Staff's Mental
Well-being**

**Continuous Service
Provision: Virtual Service
& Skeleton Crew**

**Awareness of Additional
Resources**

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Acting on Climate Change for a Healthier Future: The role of Health Centers
Hosted by the National Nurse-led Care Consortium and the National Center for Health in Public Housing.

Training Name
Acting on Climate Change for a Healthier Future: The role of Health Centers

Training Type
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Session Number
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Evaluation Survey

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Visit Us at [NCHPH.org](https://www.nchph.org)



About

The National Center for Health in Public Housing (NCHPH), a project of North American Management, is supported in part by a cooperative agreement grant awarded by the U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA). To learn more about NCHPH, click here. To view our public housing demographics fact sheet, click here. What is the Health Resources and Services Administration (HRSA)? The Health Resources and Services Administration (HRSA), an agency of the U.S. Department of Health and Human Services, is the primary Federal agency for improving access to health care services for people who are uninsured, isolated or medically vulnerable. Comprising six bureaus and ten offices, HRSA provides leadership and financial support to health care providers in every state and U.S. territory. HRSA grantees provide health care to uninsured

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Thank you!

