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New Studies will Help Communities Tackle Health Equity Problems Cooperatively & Share the Benefits Equitably

AURORA, CO—Three new research studies will examine ways of helping the healthcare and social services sectors cooperate to solve health problems that disproportionately burden racial and ethnic minority populations across the U.S. These sectors too often fail to cooperate because of what social scientists call “wrong-pocket problems,” which arise when one sector bears most of the costs of cooperation while a different sector reaps most of the benefits. Each of the three new studies will test new ways of sharing the costs and benefits of cooperation equitably across the healthcare and social services sectors, while tackling social factors like housing instability, food insecurity, and economic deprivation that are root causes of health problems faced by many racial and ethnic minority communities.

The new studies are part of the Robert Wood Johnson Foundation’s ***Systems for Action (S4A) Research Program***, which uses rigorous research methods to test innovative ways of helping stakeholders in medical care, public health, and social services professions work together to solve health equity problems. The program supports studies in diverse communities across the U.S., and the new projects will be conducted in Harlem, New York City; upstate New York; and across the state of Minnesota. RWJF has committed a total of \$1.5 million to support the three studies over a 36-month period.

Glen Mays, who directs the S4A program based at the University of Colorado, says that barriers to multi-sector cooperation are widespread and deeply imbedded within the structure of the American healthcare system. “Our \$4 trillion medical enterprise is incredibly well resourced but it can’t solve health equity problems without engaging partners from the social and public health sectors and investing significant resources in collaborative solutions,” said Mays. He says that the new studies will reveal ways of re-engineering cooperation so that everyone shares in the costs and benefits.

Systems for Action, a national program office of the Robert Wood Johnson Foundation, released a Call for Proposals in February 2021 to explore potential solutions for wrong-pocket problems in systems alignment initiatives. Since 2015, Systems for Action has funded over 30 studies across the nation to rigorously test delivery and financing systems that operate in medical, social and public sectors to improve health and health equity by better aligning and coordinating systems. Systems for Action is pleased to

announce three recipients of new grants totaling \$1.5 million in research awards. The funding will allow researchers to explore potential solutions for wrong-pocket problems.

Key communities of focus include, people of color experiencing mental health disorders and Medicaid recipients as well as uninsured populations. Studies also assess a novel independent association and a financial tool to reimagine how healthcare can better address societal health issues.

Descriptions of the new studies are below:

Integrating Health and Social Services through a Novel Independent Practice Association

[Lead Institution: Stanford University School of Medicine]

This study investigates the impact of a novel independent practice association (IPA) formed among community-based social service organizations (CBOs) to address social determinants of health among residents of upstate New York. The Healthy Alliance IPA allows diverse CBOs offering services for housing, transportation, food, and other social needs to join together in a shared-governance association that facilitates referrals, care coordination, and performance-based contracting with health plans and medical providers. A quasi-experimental research design is used to compare patients residing in counties served by the Healthy Alliance IPA with a matched comparison group of patients from other counties, using measures of healthcare utilization, social service utilization, and total cost of care. The study focuses specifically on the outcomes experienced by racial and ethnic minority populations and also examines the roles played by CBOs led by Black, Indigenous, Latino and other persons of color. The research team is led by Stanford University School of Medicine in partnership with the Healthy Alliance IPA, Albany County Department of Health, Rensselaer County Department of Health, and other community partners.

Multisector Task-Sharing to Improve Mental Health in Harlem, NY

[Lead Institution: City University of New York]

This study evaluates the effectiveness of a multisector task-sharing collaborative in addressing the inter-related problems of mental health disorders, poverty, and housing instability among racial and ethnic minority communities residing in Harlem, New York. The collaborative trains the staff at low-income housing agencies and primary care practices to engage in mental health task-sharing, whereby staff deliver basic mental health support services such as screening, psychoeducation, peer support, and referral to mental health specialists. Community health workers are placed at these same sites to help connect clients with needed social services beyond housing and primary care. A randomized controlled trial is used to evaluate the impact of the task-sharing model on mental health, social functioning, employment, and quality of life. The study is conducted by the Harlem Strong Mental Health Coalition, led by the City University of

New York (CUNY) in partnership with the Harlem Congregation for Community Improvement, Healthfirst Managed Care, and Coordinated Behavioral Care.

Social Bonds as a Pooled Financing Mechanism to Address Social Drivers of Health Equity

[Lead Institution: University of Minnesota]

This study investigates whether a novel type of social bond can pool resources across multiple competing health plans and create stable, long-term financing for interventions that address social determinants of health. The bond's design would allow multiple health plans participating in Minnesota's Medicaid program to invest collectively in a fund that finances community-based interventions targeting social issues such as food insecurity, housing instability, transportation, and structural racism. Specific bond features allow the financial risks and returns from these interventions to be distributed equitably across health plans and other potential investors, while targeting funding to interventions that promote racial equity and health equity. The study uses community participatory approaches to engage local health and social service stakeholders in the design of the bond instrument. Monte Carlo simulation methods are used to estimate the impact of bond financing on health and social outcomes for racial and ethnic minority populations over time, while also estimating economic returns to health plans, Medicaid and other investors. The research team is led by the University of Minnesota in partnership with the Minnesota Hospital Association, Minnesota Association of Health Plans, Minnesota Department of Human Services, Minnesota Department of Health, and other community partners.

About Systems for Action: Systems for Action, a research program of the Robert Wood Johnson Foundation, is focused on discovering new ways of improving health and health equity by helping medical, social, and public health delivery systems work better together. The program now includes more than 25 individual studies underway across the U.S. that are testing a broad array of strategies for system alignment, including novel financing arrangements, alternative staffing models, new information and communication technologies, and collaborative governance and decision-making structures. Systems for Action is based in the Department of Health Systems, Management and Policy at the Colorado School of Public Health in Aurora, Colorado.

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