The Curry County Housing Stock Upgrade Initiative Pilot:

Q&A with HIA Practitioner Annette Klinefelter

At the National HIA Meeting in June 2015, the Health Impact Project honored two HIA teams for improving community health and well-being in their communities. In this interview, Annette Klinefelter shares her experience working on an HIA that informed decisions about funding and implementation of the Curry County Housing Stock Upgrade Initiative Pilot in Oregon.

Interviewer: [Can you tell me] where you’re from, and what your role was in Curry County at the time the HIA got started?

Annette Klinefelter: I'm a fourth generation resident of Curry county, and am absolutely so proud of the people who live there. It's such an extraordinarily beautiful place. It's isolated, and by virtue of its isolation, it has definitely that frontier resourcefulness that's required of it. Because it's isolated and it's remarkably beautiful, it's certainly a retirement destination. So there's this significant dichotomy between the multimillion dollar homes that are on the coastline or on the river fronts, and the people who live there, who are working really hard every day at working class and minimum wage jobs. And the housing stock varies, again, from the multimillion dollar homes on the rugged coastline to 30% of the housing being manufactured. And of that manufactured housing, roughly 30% of that was pre-1975. So we've have a lot of people living in pretty old housing, and in a very rugged, wind-torn, storm-ravaged part of the country.

Interviewer: [How did] manufactured housing specifically became an issue to the county, in terms of public health?

Annette: Actually, it surfaced as an issue through Karen Chase who was working with the state housing division. And she has been interested in this issue of manufactured housing not only as it relates to the landscape of our area, because some of it's very unsightly. Because for the housing that is old and substandard, it's an eyesore. And to tear them down takes up a lot of space in the landfill. And so she was really interested in like this whole issue of manufactured housing. And so she came … to one of our county commissioners … and asked if we would be interested in pursuing a higher level conversation on the state level and serve as a pilot project
where we would bring together via an Oregon Solutions project that was endorsed by the governor, and actually was completely underwritten by the state to bring together all of these partners that would look at manufactured housing from an environmental perspective, as well as an economic perspective.

So if we have 30% of our housing in a given area like Curry County, and 30% of that is substandard, what are the costs associated with replacing that housing? And what are the funding strategies that are in place? Where it aligned perfectly with the HIA was looking at it from the lens of economic costs associated with health. That became an opportunity to really partner with public health and economic development, which made so much sense in a small area like Curry with limited resources. To be able to use one person like me, who could bring multiple people together to have this conversation. And then do lots of data collection, and have that data drive the decision making of that team of people.

**Interviewer:** There's … a range of health issues that can come up from living in substandard, older manufactured housing … what are the concerns that come up for residents?

**Annette:** When we pulled the data from all of the regional hospitals and health clinics, what we noticed was that the highest rates of health conditions that we had in Curry in terms of emergency room utilization were around respiratory conditions and falls. And obviously, when we were out having conversations with residents, we were hearing a very strong correlation between what we were seeing in the ER utilization data and what they were talking about in terms of their own health conditions, which were upper respiratory and falls.

And so if you are to walk through many of these homes, what you'll notice is mold. A lot of mold associated with a wet climate, and housing that was not built to last 40 years. What we also saw were a lot of rickety stairs, lots of holes in the floor. We have an aging population in Curry County … 70% of the population is over the age of 55. And manufactured housing is a really affordable option for low-income retirees, which makes Curry actually an attractive place for them to live.

The challenge for many of the residents in the manufactured homes that I visited was that there were lots of damaged floors that were associated with moisture accumulation. And for some of them, they literally could not leave their bedrooms. For those who were wheelchair bound, they
couldn't get past the hallway because of the holes in the floor. And so it would be the caretaker. It was the wife, or the daughter who would literally have to scurry and tiptoe around a hole that was maybe like patched up with a tarp to be able to get to that back bedroom, to be able to feed someone in their wheelchair.

**Interviewer:** So the county was in the lead, but there were a lot of partners involved. Who were the key players, and how did that team work together to move this forward?

**Annette:** It was really extraordinary to me how many players were interested in coming to the table to problem solve this situation. So Oregon Solution certainly was the convener, but the Oregon Manufactured Housing Association was active at that table. Obviously, NeighborWorks Umpqua, which took on the task of figuring out how they were going to get it financed. And they had done all this extraordinary work on figuring out the decommissioning process, and how to do that in a way that has the most minimal environmental impact possible. In addition to that, the USDA was at the table as a player...The fact that all of these diverse players were willing to come together and problem solve was pretty amazing.

I was really impressed by the Manufactured Housing Association of Oregon...they hadn't thought about their design standards through the lens of health before. They hadn't thought about the concept of aging in place, and people with wheelchairs, and how that should impact the width of doors, and the width of hallways. And so the HIA, for them, was a powerful tool. Because it truly influenced their design standards. So the manufactured homes that are currently being built in Curry that are being installed as we speak are built to this design standards that are intended for people to be able to age in place, to be able to prevent falls, be able to increase ventilation. And those design standards wouldn't have reflected health if it hadn't been for this partnership, and if it hadn't been for this HIA.

**Interviewer:** What were the primary recommendations, and what has happened since the report was released?

**Annette:** The primary recommendations of the HIA is certainly that we utilize dollars that had been previously designated low income just for doing for placement that we determine how we can use those dollars to facilitate home replacement. Because what we know is that manufactured housing is a really great solution to our aged housing stock in this country. And so
the recommendation was, how do we take the limited resources that we have and allocate them towards manufactured housing replacement?

The other recommendation was related to the design standards for manufactured housing. So if we're going to build these replacement homes, how do we build them to last? So that in another 30 years, we're not in the same situation where we have individuals who have flooring that's falling apart because of moisture accumulation. Where we have individuals who are wheelchair bound who can't get out of their bedrooms. Long term, how do we fix this issue, knowing that manufactured housing is a viable solution? But for the long term, make it address the health care issues that people are going to face as they age.

The other recommendations were around housing screenings in ERs. So this is where we brought in the partnership with our local hospital system to ask the question of, if they have an upper respiratory condition that's chronic, or if they have falls, to ask about their housing, and to and give them the information for NeighborWorks Umpqua to be in touch with them to do a home health assessment.

**Interviewer:** I know a lot has happened as a result of this HIA, including changing standards. [Can you tell me about] the key impact that's rippled out from the county all the way through the state and even from a personal perspective, what you're most proud of?

**Annette:** What I'm most proud of is that people who have been living in substandard unhealthy homes are getting new homes. And the pride that they have in being able to live in a place where they're happy to bring their friends to. And that was one of the things that really struck me when I was visiting homes, and I've also worked as a school administrator. There's so much shame that comes with poverty and housing conditions. I am so proud of the work that's resulted in kids and families being able to live in a house that they feel proud of. Of course it's healthy, but it's also a source of pride. That pride is so crucial for keeping that flame of hope in them as they move forward in their lives.

I think the value of HIAs in general is that they provide a structure for doing data-driven decision making. And it's more than just the quantitative data, right? It's the community voice that HIAs provide that produce robust qualitative data, and how those community voices really shape decision making is invaluable. What I really liked about how this HIA unfolded was that in these
community stakeholder meetings, where the head of the Oregon Manufactured Housing Division, the CEO of our local hospital system, the regional USDA director, local elected officials, we also had home residents at that table who we're talking about their own personal experiences and helping us problem solve the big issue how ownership of your plot of land that your manufactured house dwells on impacts financing of home repair programs and engaging local banks as part of those conversations.

Certainly, the structure of the HIA provides the information for policy makers to reflect upon when they're making decisions, but it allows for consumer voice and citizen voice in a way that we oftentimes don't think about when we think about data-driven decision making.

Interviewer: One thing that made this HIA unique, and we talked about this a little bit earlier, is that it really looked at a rural place. And I think a lot of HIAs end up happening in more suburban or metro areas. Can you talk about the importance of that to you and to this work?

Annette: What really struck me…was this dichotomy between the vast wealth of retirees and the poverty of families that are just striving to get by every day, and that it is forgotten. Also Curry County is an isolated place in state that doesn’t really think about it and the people who live there. It is one of the poorest counties in the state of Oregon, but the people who live there are incredibly resourceful. And so by bringing their voices and their stories to this large state-wide consortium, I think it illuminated the fact that rural America is really the backbone of what makes this country great, which is our collective resourcefulness. In the end, if we come together and work together to solve problems, we will bring all of our resources to bear.

Interviewer: You've said that doing this [HIA] now shapes the way that you approach your work going forward. [Can you] expound on that just a little bit?

Annette: I absolutely love public health, and I am so proud to say that I'm a public health practitioner … All of my work forevermore will be impacted through the lens of a Health Impact Assessment. I am currently the executive director of a residential treatment program for adolescents with mental health and chemical dependency issues, and every decision that we make, whether it's the schedule for the day, or how we serve the meals, or what meals we're serving, or the modalities that we use for conflict resolution, are all shaped through the lens of health and data collection. And we use the same methodologies of data collection in my agency
as I used for this HIA. We look at what the science says through literature review. We look at all of our quantitative data in terms of our outcomes, and then consistently engage our kids in focus groups and discussions. When I first started with the agency, the first thing I looked at was outcome data. And then immediately started having conversations with the kids about everything from the food to the schedule for the day to what they thought we were doing well, and what we weren't doing well, and what would make the outcomes better. The whole notion of consumer voice shaping decision making is at the heart of my work as an administrator forever more.

Annette Klinefelter is the Executive Director of Daybreak Youth Services, and formerly worked with the Curry County Economic Development and Public Health Departments. Learn more about how this HIA is helping low-income families replace substandard manufactured homes that can contribute to serious health risks.