

Good Housing = Good Health (GH2)

Year 1: October 2023 - September 2024

Evaluation Report



Social Determinants
of Health

Prepared by Kathryn Colasanti, Consultant
June 2025
DRAFT 05.31.2025



GH2 Background

Background and Goals

- \$2 million in awards to 11 local health partners.
 - Included 20 local health departments.
 - Collectively served 49 Michigan counties.
- GH2 had three goals aimed to demonstrate the value of investing in housing access and stabilization services to holistically serve individuals.



1



Increase housing access.

2



Provide education and resources to prevent the loss of housing.

3



Strengthen health and well being for households facing the highest barriers in securing and maintaining safe, affordable housing.



GH2 Success Stories

Success Stories: Obtaining Housing

1 “A client and his daughter were living in unsafe and unsanitary conditions with an alcoholic friend who was very controlling. With the help of the GH2 program, the client was able to apply for an apartment, obtain all missing documentation for future affairs, clear all unsettled debt through utility companies, and start a clean slate in a new apartment that is clean and safe.”

2 “During the past year we have had a family, that if it were not for our community, a woman, her partner, and a newborn may have gone homeless. It took resources from many different agencies to remove many different social determinants of health barriers throughout the last trimesters of her pregnancy to move them from extremely rural camping to being housed with a new baby. It truly was work of a community who cares! The case is still ongoing to help the family work through trauma and learning new skills.”

3 “I was able to reunite an adult man experiencing homeless who was never married and never had children with his aging mother who was still living in their family home with no help around her because of her geographical location. When I first began working with him, he had not had a relationship with his mother for many years and at first refused to reach out to her. Through a couple of meetings with him, I was able to get him to the point where he reached out to his aging mother and they put their differences aside and found that they needed each other. I arranged transportation to travel across counties so he could move in with her to help her and in return helped him with stable housing and a new purpose in his life.”

Success Stories: Preventing Eviction

1

“A single mother had fallen behind on rent due to one of her children being hospitalized for several months. During this time, she was not able to work as her child was dealing with several health issues. Thankfully, the child recovered but the mother faced an eviction. With the Good Housing = Good Health grant program, we were able to prevent the eviction and ensure that the family was able to stay in their home. This had a positive impact on the mental health of the mother and her children as they feared they would need to move into unsafe housing as this would impact their record. This program greatly impacts lives and ensures that safe housing is not a privilege.”

2

“We connected with a family who was at risk of eviction from their apartment because they were past due on rent. The family had been in a car accident recently, where the mother and children were injured. The toddler required a partial body cast for a period of time. The mother lost her job due to the inability to work and the father quit his to provide care for the family. When we made contact, the father had been working with the family's insurance provider for an extended period of time to be registered and receive payment for being the family's caregiver, as care for the family required near full-time for several months. The family had fallen behind several months on their rent and had a court date set for eviction proceedings to begin. Our staff completed intake paperwork with the client and referred them to legal aid for assistance with representation and requested an extension in the proceedings. Our agency provided funds to avoid eviction and keep the family in the home.”

Success Stories: Housing Navigation

1 “I met with a client and assessed their needs. I was able to help a client fill out an apartment application and get on a wait list after determining they were in need of housing. They were recently selected and were able to secure income-based housing.”

2 “Because of GH2, one of my clients was able to enroll in the first-time home buyer programs and is now working with a credit counselor to help them find stable housing they will own. She wasn't sure how to sign up or who to call and was scared to call once I provided her the information, so we called together. I feel if she wasn't in the GH2 program, she would have never called due to her fear.”

3 “A client and his young daughter were homeless and staying with an abusive/unstable friend who did not want them to move out and who had bed bugs in the apartment. With no transportation and no internet to complete rental applications online, they felt stuck. This program provided a safe place for them to research their options. It provided a staff member willing to help complete and turn in these applications and find external funding to help get them moved in and the needed goods for their new apartment to feel like home. A MIBridges account was created and applicable benefits applied for and received through that portal.”

Success Stories: Educational Resources

1 “We were able to create a housing resource guide with 21,000 copies that we are still distributing to the community. This is the first of its kind in our area and has helped so, so many people already.”

2 “We learned about a program to help folks get back taxes paid as part of the education provided by the program. We were able to use this resource to help at least one person keep her home.”

3 “The D Compassion app [a housing resource developed with grant funds] has been used to connect more people to housing resources when we tested it as a pilot with our Sister Friends Program. I think increasing the education on the resources available is the biggest community condition that has improved.”

Success Stories: Forming Partnerships

1

“It has increased our awareness and inspired reach out and to collaborate with housing commissions, make connections with our local Housing Assessment and Resource Agency (HARA), Rapid Rehousing, and Salvation Army. We have been able to maintain connections with other Community Health Workers (CHWs) in the area and hear what is going on across the state.”

2

“I think the biggest thing to come out of this are the partnerships and connections we have made through the grant. This includes partnerships with Neighborhood Service Organization, Homeless Action Network of Detroit, increasing community information exchange (CIE) capabilities through our partnership with United Way of Southeast Michigan, and internal partnerships as well. Right now the housing coordinator and I are working a master database for housing resources and other social determinants of health resources, as well. This is something we plan to use for a long time to come.”



GH2 Collective Accomplishments

Housing Stabilization

The progress reports grant partners shared revealed two key themes in their housing stabilization efforts: 1) many clients with housing needs also had other inter-related SDOH needs; 2) the assistance of CHWs or housing navigators is essential in connecting clients to existing resources and services. The graphic below illustrates the ways GH2 grant partners increased housing stability and met related needs at multiple levels.

Activities Directly Supporting Individuals

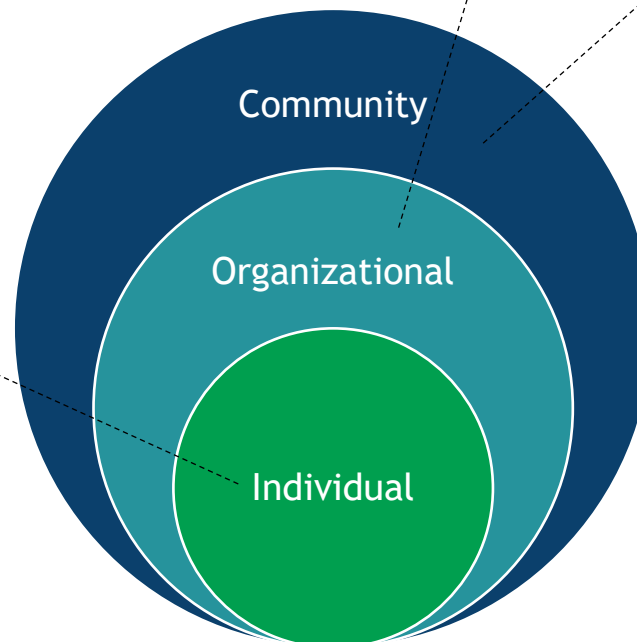
- Screened for housing and SDOH needs.
- Provided direct housing assistance
- Met basic needs.
- Connected people to resources and services.
- Navigated barriers to accessing services.
- Addressed SDOH barriers.

Activities Building Organizational Capacity

- Hired staff.
- Developed referral processes.
- Leveraged CHWs as housing navigators.
- Trained staff on meeting housing needs.

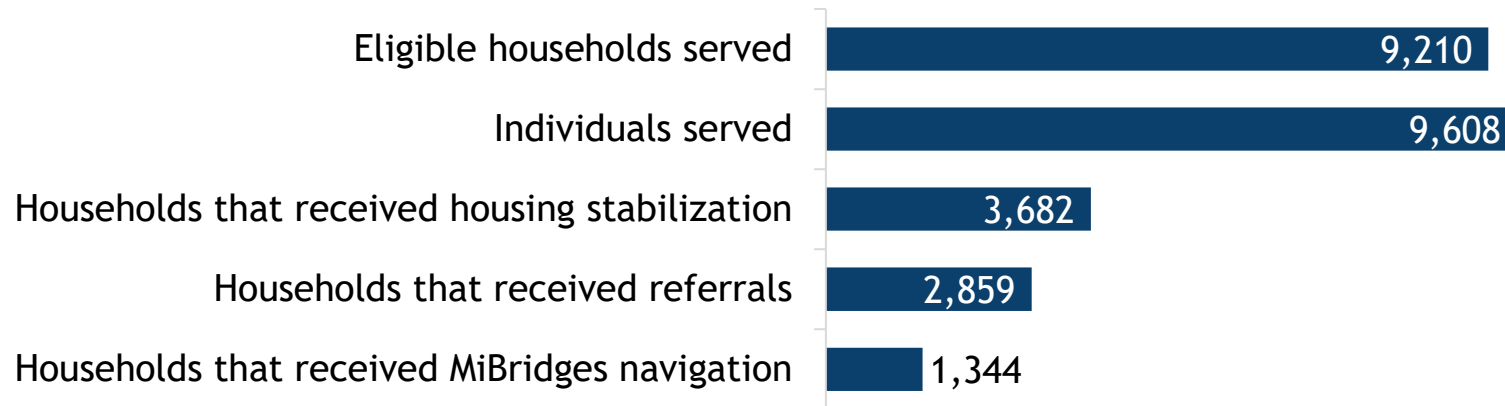
Activities Fostering Community Networks

- Strengthened partnerships between organizations.
- Formed multi-organizational committees.
- Brought attention to housing needs.
- Developed and distributed housing resources.
- Built housing support infrastructure and partnerships.
- Established wrap-around service pathways.



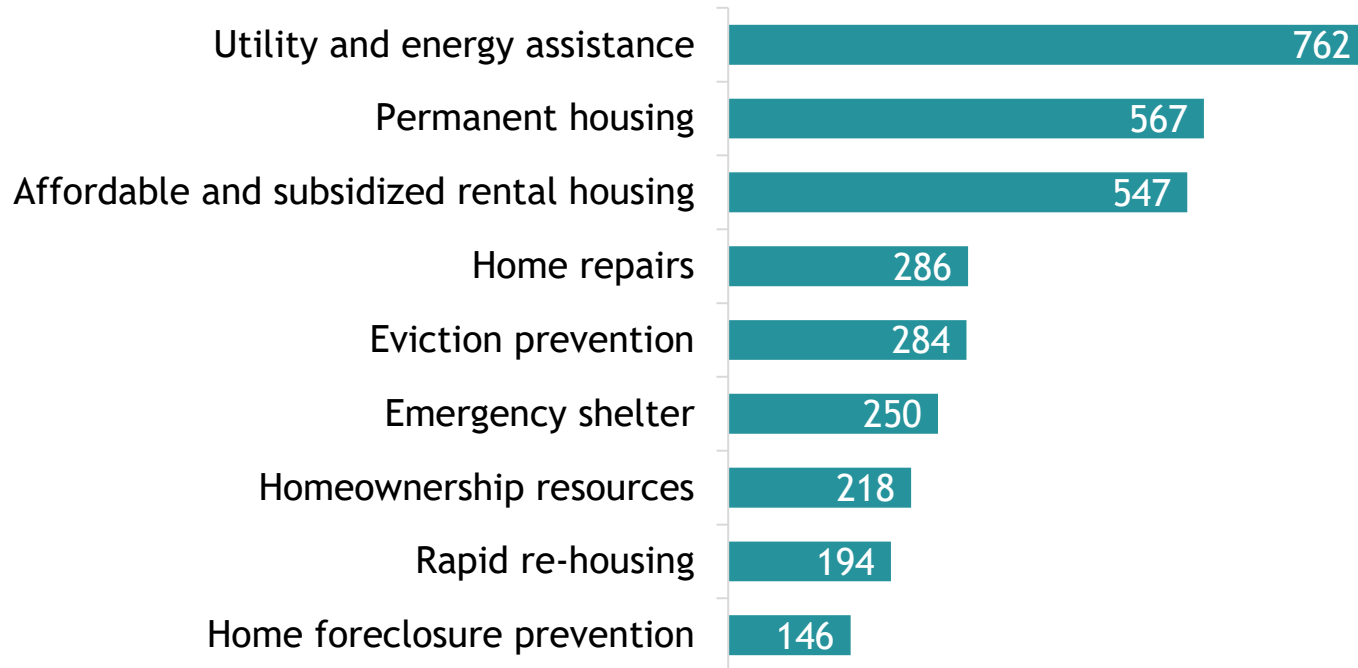
Housing Stabilization

Households and People Reached with Housing Stabilization Services



Resource Distribution

Housing Resources Distributed



4,696

resources for basic
necessities distributed.

Community Outreach

Collectively, grant partners described ways that the CHWs supported by the GH2 program helped clients not only address housing needs but broadly remove SDOH barriers to health and wellbeing. CHWs identified relevant resources and supported clients as a friend and mentor while navigating enrollment or application steps. Often, this included meeting clients without transportation in safe public spaces. CHWs used their knowledge of local resources, such as relationships with landlords who could identify vacant apartments, to meet clients' needs, whether by finding employment, identifying child care, enrolling in college or securing housing.



5,525 Outreach hours worked

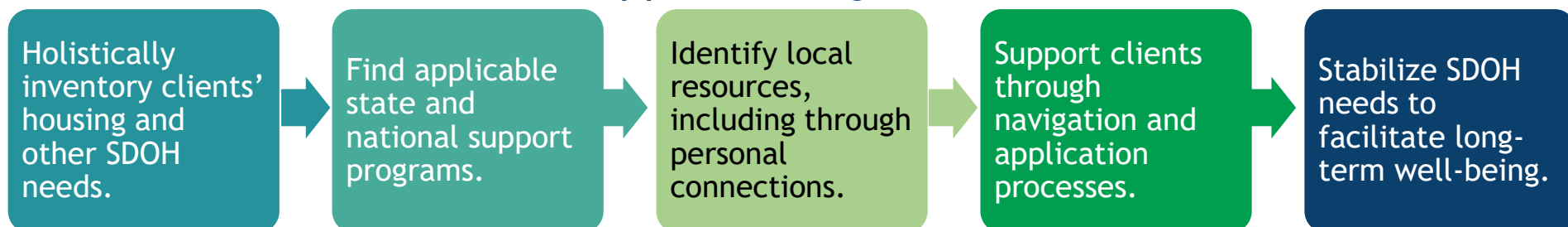


49 CHWs hired



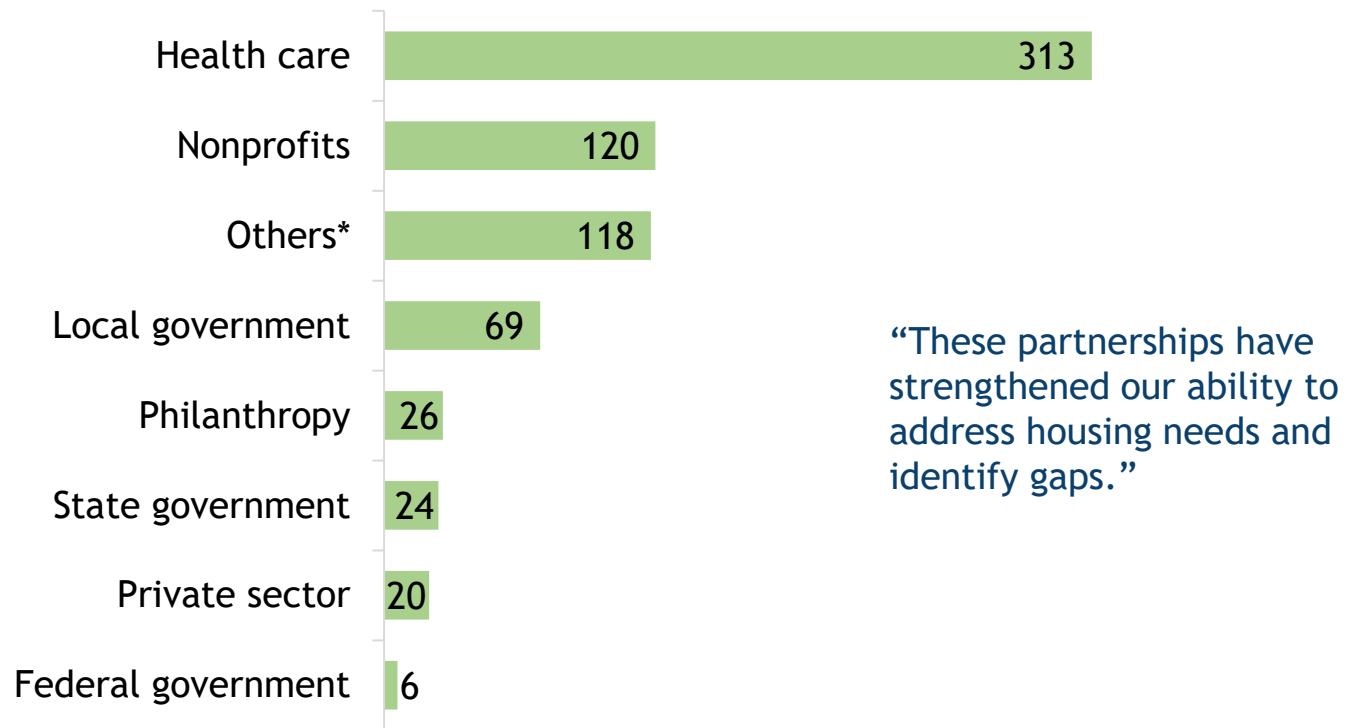
24 Support staff hired

Illustration of CHWs' Client Support through GH2



Partnerships

Partnerships Established or Expanded



*Partnerships in the “other” category included faith-based organizations, correctional facilities, schools, farmers markets, and housing support agencies.

Partnerships

GH2 Progress Reports demonstrated the multiple ways that building partnerships with other organizations helped support the grant goals.

“[We] have a greater understanding of the specific action steps of community resources that provide housing supports and increased knowledge of what shelter diversion entails specifically. This information is then shared with home visiting professionals, including community health workers, to offer guidance to families who are navigating housing instability.”

Connected more people with SDOH needs to CHWs

Brought attention to housing needs

Built synergy across programs

Enabled shared staff positions

Increased knowledge of housing resources available

Revealed changes needed in organizational policies

Created opportunities to collaborate to seek funding

Allowed development of CIEs

“The number of organizations coming together to develop this Community Information Exchange (CIE) resource shows the commitment of the community to ensuring access to information about services.”

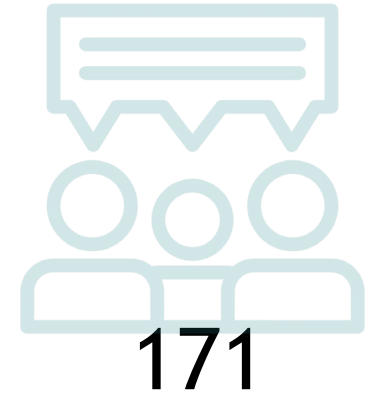
Educational Webinars

The SDOH team partnered with multiple state agencies to host webinars that provided grant partners with information on a wide range of resources to support housing and related needs.



5

Webinars held



171

Webinar attendees

Michigan
State Housing
Development
Authority
Housing
Resources

December 2023
32 attendees

Michigan
Department
of Health and
Human
Services
Lead Abatement
Resources

February 2024
41 attendees

Michigan
Public
Service
Commission
Utility Assistance
Resources

February 2024
29 attendees

Michigan
Public
Service
Commission
Energy Assistance
Resources

February 2024
20 attendees

Michigan
Department
of Health and
Human
Services
Housing and MI
Bridges Resources

March 2024
49 attendees

Community Information Exchange

Based on progress shared in both the quarterly reports and the post-grant survey, ten grant partners made on building Community Information Exchange (CIE) pathways in their communities. Most communities were in the early stages of preparing for a CIE.

Preparation

6 organizations built partnerships and explored CIE possibilities.

Implemented a 60-day CIE pilot; participated in a learning community.

Worked towards a universal SDOH screening tool across agencies.

Implementation

3 organizations built components of CIE infrastructure.

Launched a website with resources; integrated data from 16 agencies into 211.

Created a mobile application that connects to a CIE.

Brought together providers and community-based organizations.

Sustainability

2 organization strengthened existing CIE infrastructure.

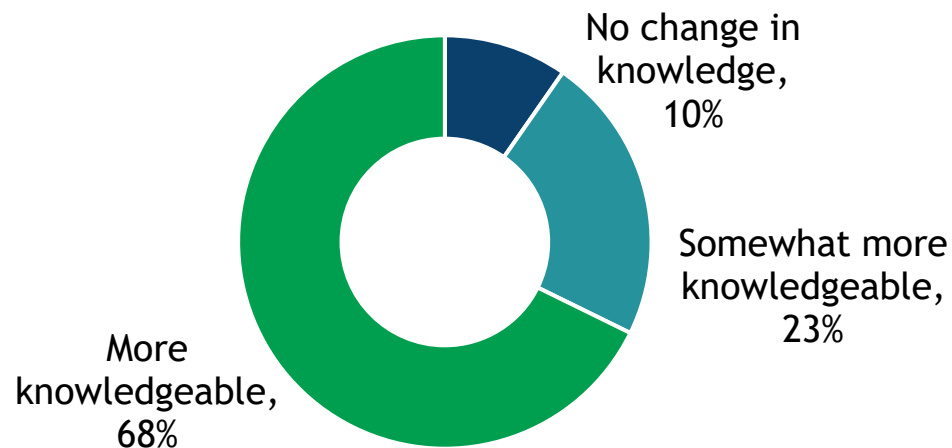
Operated a closed-loop referral system.

Operated an electronic, closed-loop referral system; health system standardized SDOH screenings.

Grant Activities

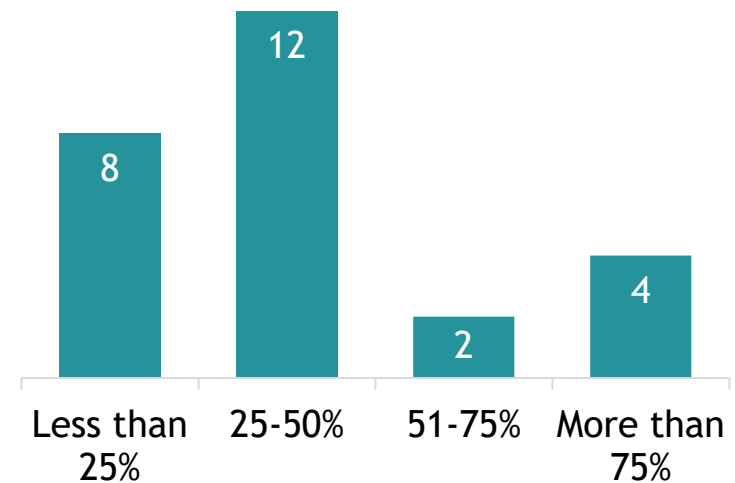
In more than 90% of the quarterly reports, grant coordinators reported knowing more about available housing resources than prior to the grant period.

Knowledge Change



Most of the grant staff (20 of 26 who completed the survey), said they spent 50% or less of their time on activities related to the GH2 grant.

Portion of Time Spent on GH2





GH2 Grant Partner Accomplishments

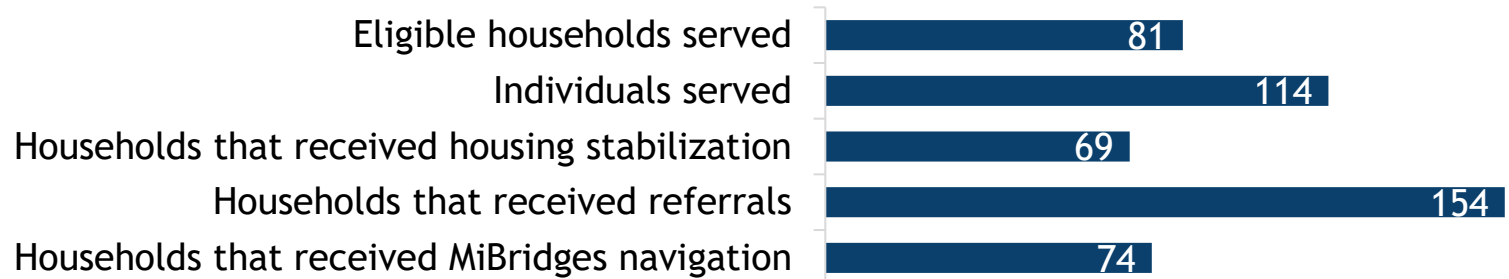
Allegan County Health Department



Geography: Residents of Allegan County

Demographics: All demographics; primarily served white women

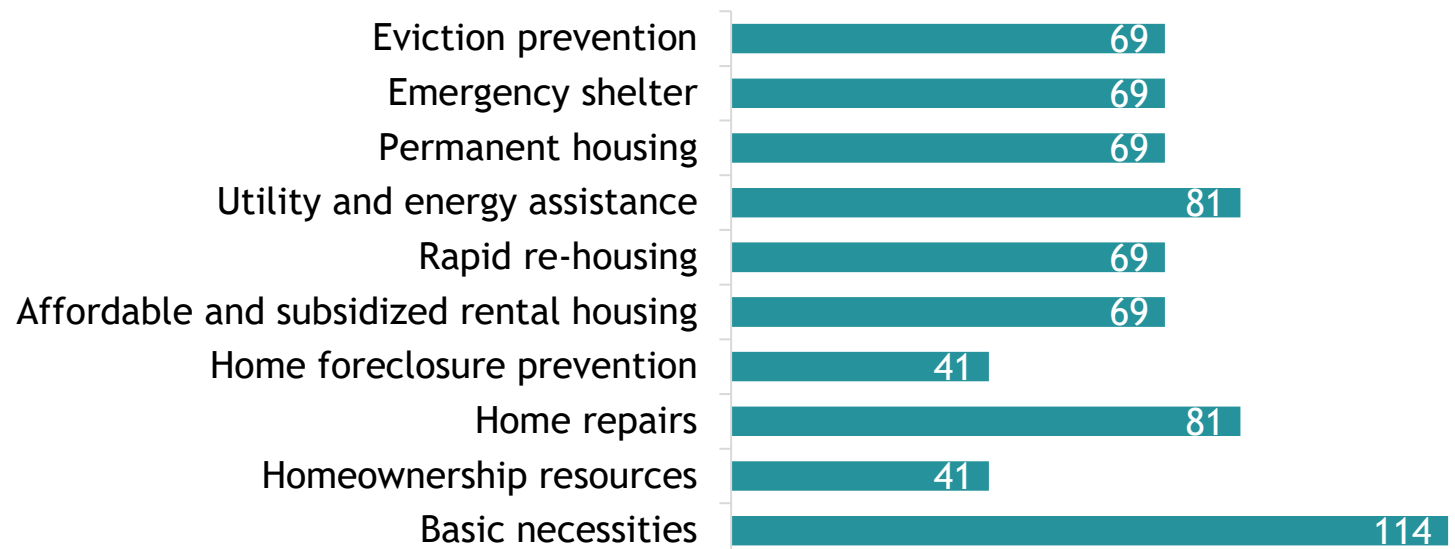
Reach



87 New Partners



Resources Distributed



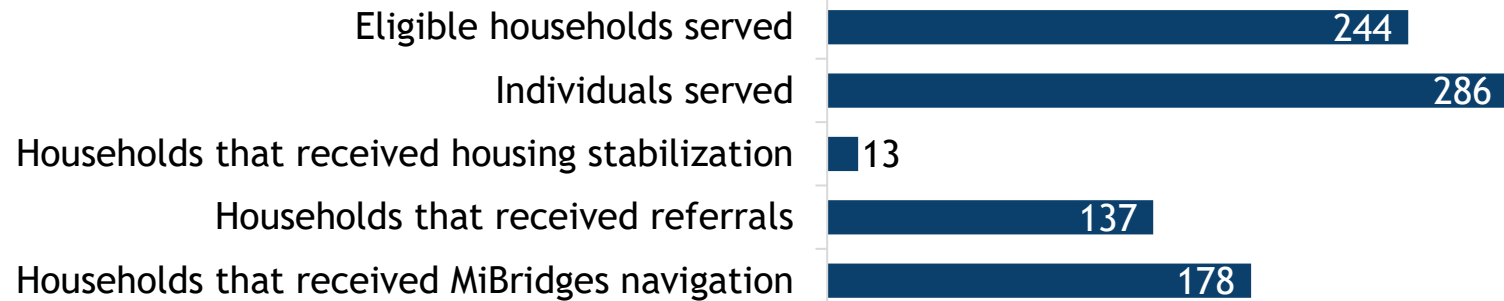
Barry-Eaton Health Department



Geography: Residents of Barry and Eaton Counties

Demographics: Majority women

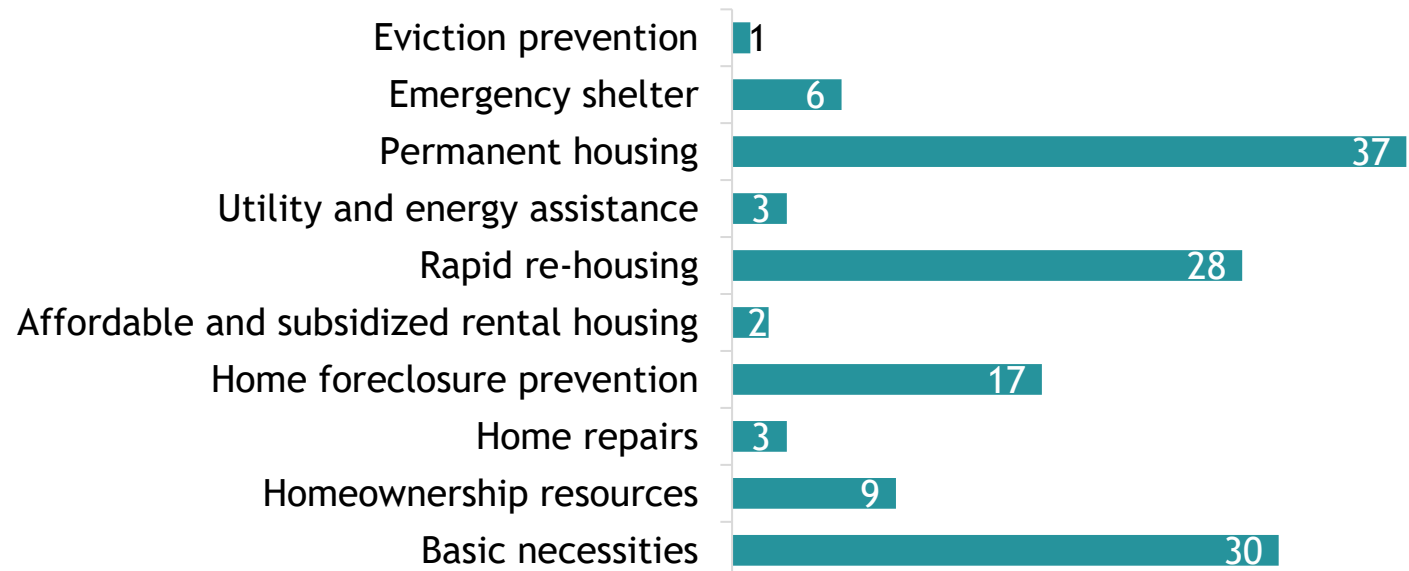
Reach



16 New Partners



Resources Distributed



City of Detroit Health Department



Geography: Residents of the City of Detroit

Demographics: Primarily low-income Black individuals

Reach

The Detroit Health Department focused on strengthening relationships with partner organizations to better serve the unhoused, including by developing an inventory of low- to moderate-income housing units, training CHWs as housing navigators, and providing medical care to homeless individuals discharged from the hospital. The number of people served was not reported.

27 New Partners



1

nonprofits



4

health
care



11

local health
dept.



4

state gov't



3

federal
gov't



3

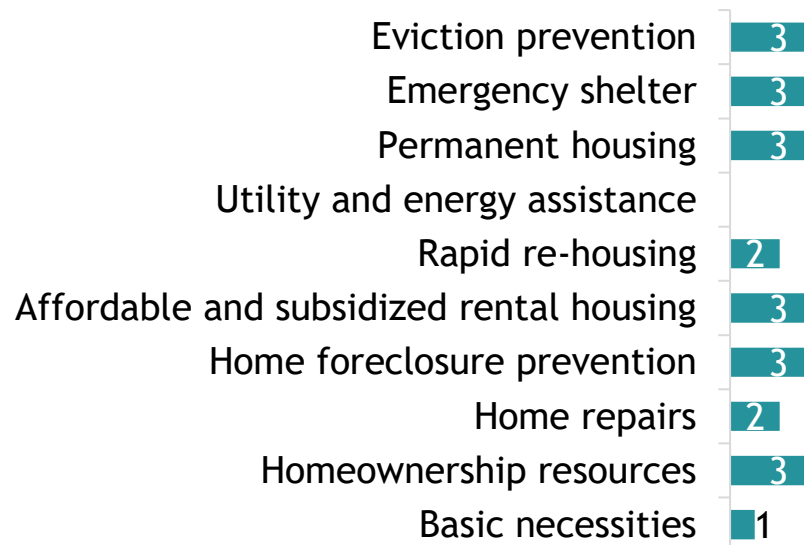
private
sector



1

others

Resources Distributed



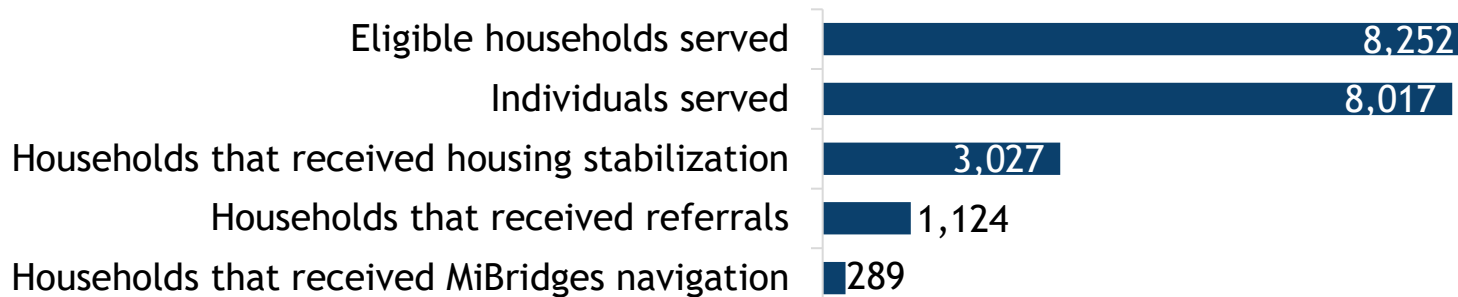
Greater Flint Health Coalition



Geography: Urban residents of Genesee County

Demographics: Primarily Black, female-headed households

Reach



133 New Partners

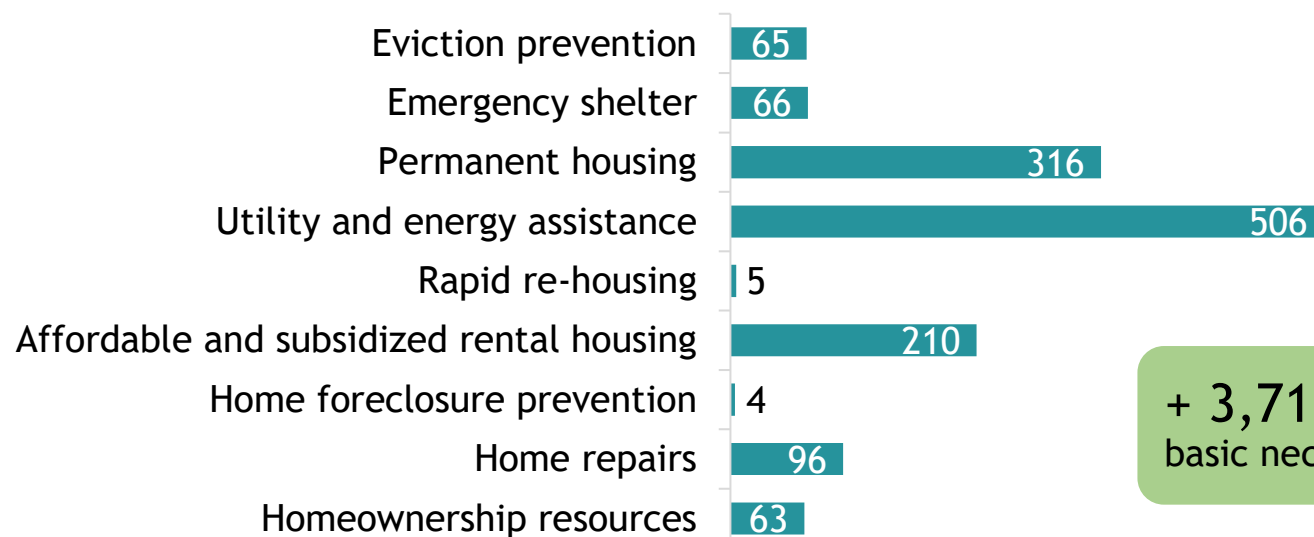
 130
health care

 1
local health dept.

 1
state gov't

 1
private sector

Resources Distributed



+ 3,716
basic necessities

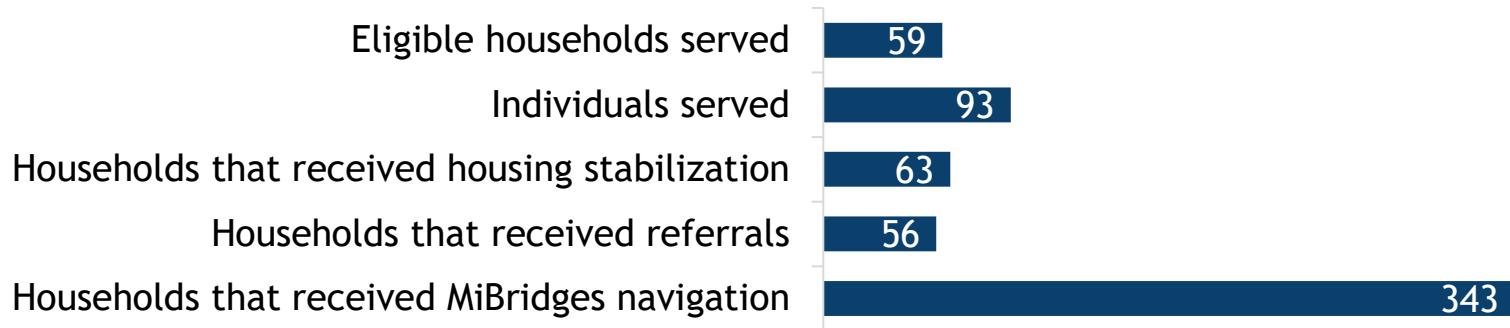
Ingham County Health Department



Geography: Residents of the City of Lansing and Ingham County

Demographics: Mainly racial and ethnic minorities, single persons, persons with animals

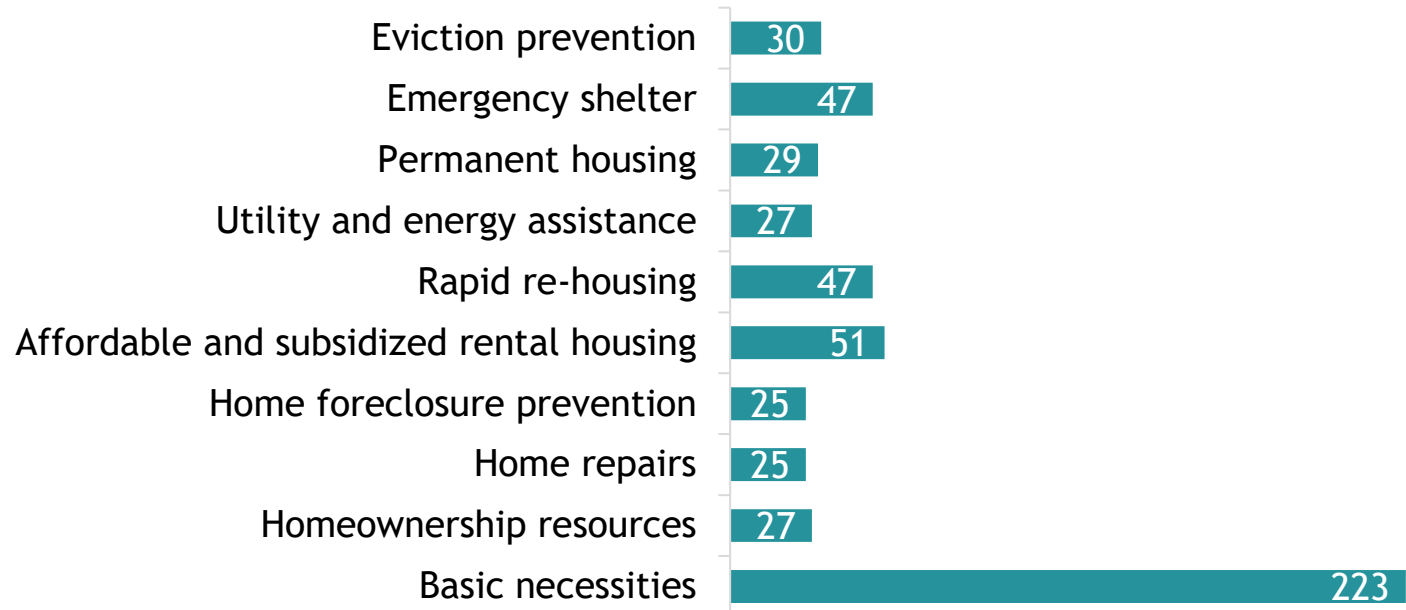
Reach



11 New Partners



Resources Distributed



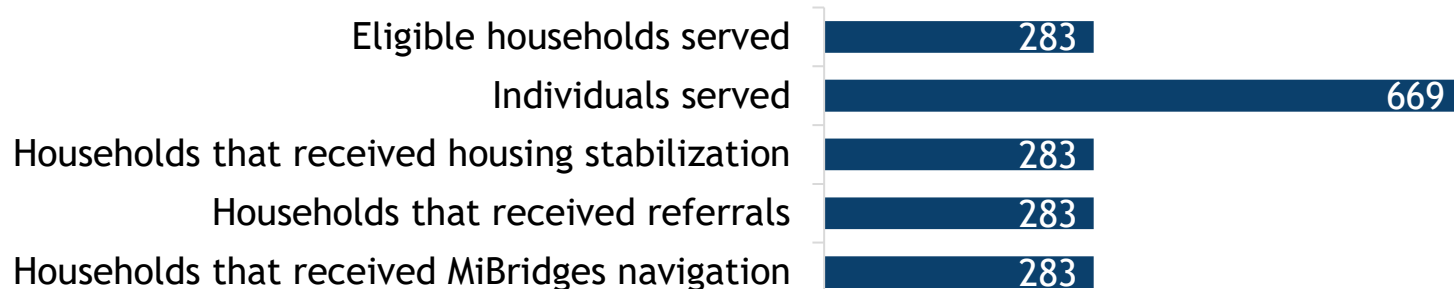
Kent County Health Department



Geography: Residents of Grand Rapids and Kent County

Demographics: Primarily Black women with children

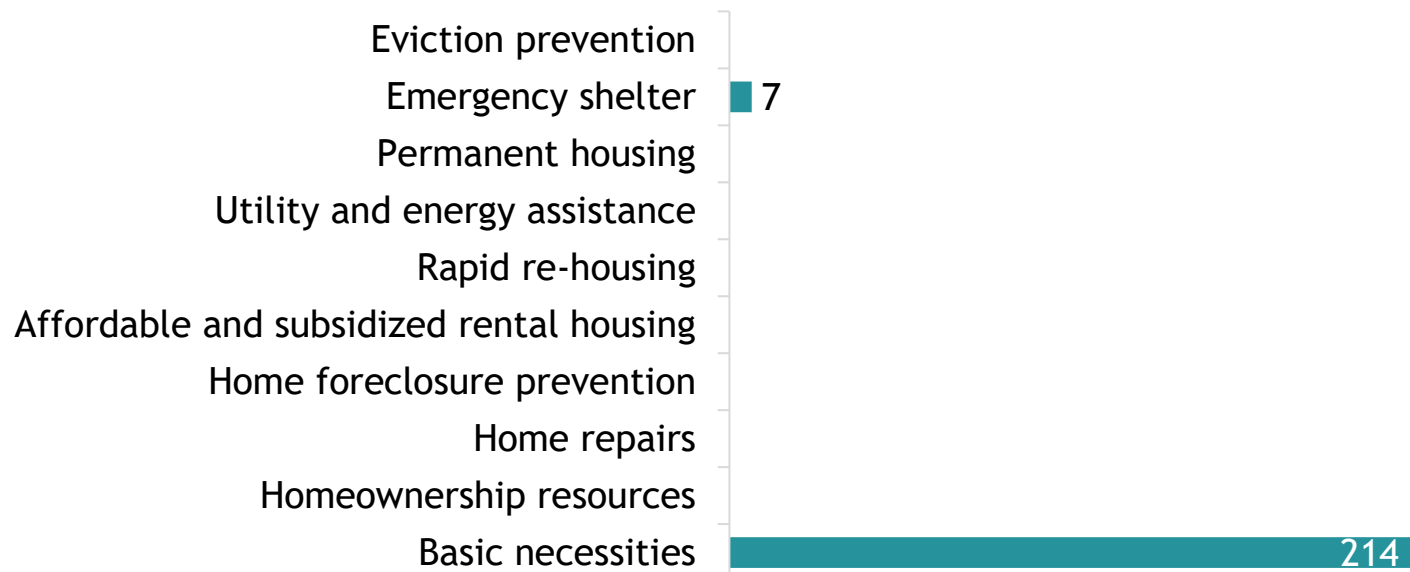
Reach



2 New Partners



Resources Distributed



Muskegon County Health Department



Geography: Residents of Muskegon County

Demographics: All demographics

Reach

The Muskegon County Health Department focused on establishing a robust network of wrap-around services through partnerships with local agencies. This included working with partners to meet basic needs, to coordinate with emergency services and to provide housing navigation. The number of people served was not reported.

4 New Partners

Muskegon County Health Department approached the project with an emphasis on cross-sector collaboration. The number of partners by sector was not reported.

Resources Distributed

Muskegon County Health Department shared their goal was to be the convenor and connector to services and resources. The number of resources distributed was not reported.

Northern Michigan Public Health Alliance:

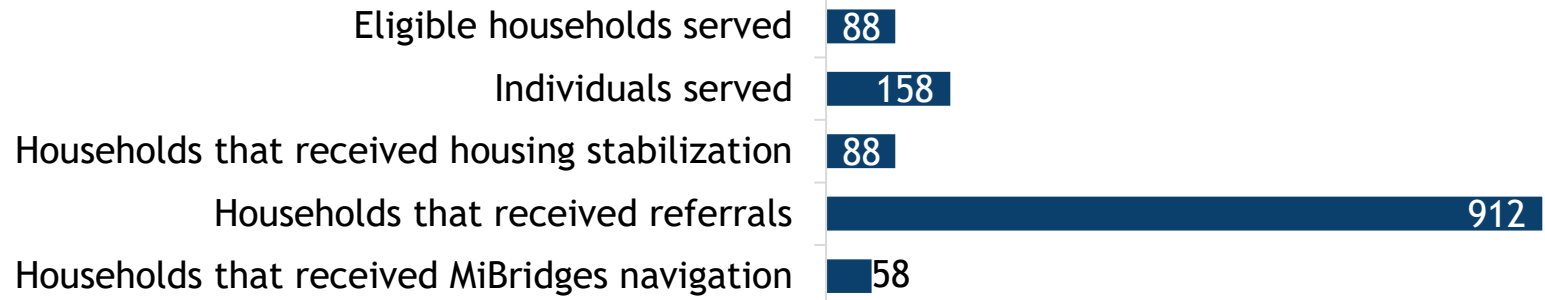
Benzie Leelanau, Central District Michigan, District Health Department #2, District Health Department #4, District Health Department #10, Grand Traverse County Health Department, Health Department of Northwest Mich.



Geography: Residents across northern Michigan

Demographics: Adults of all demographics

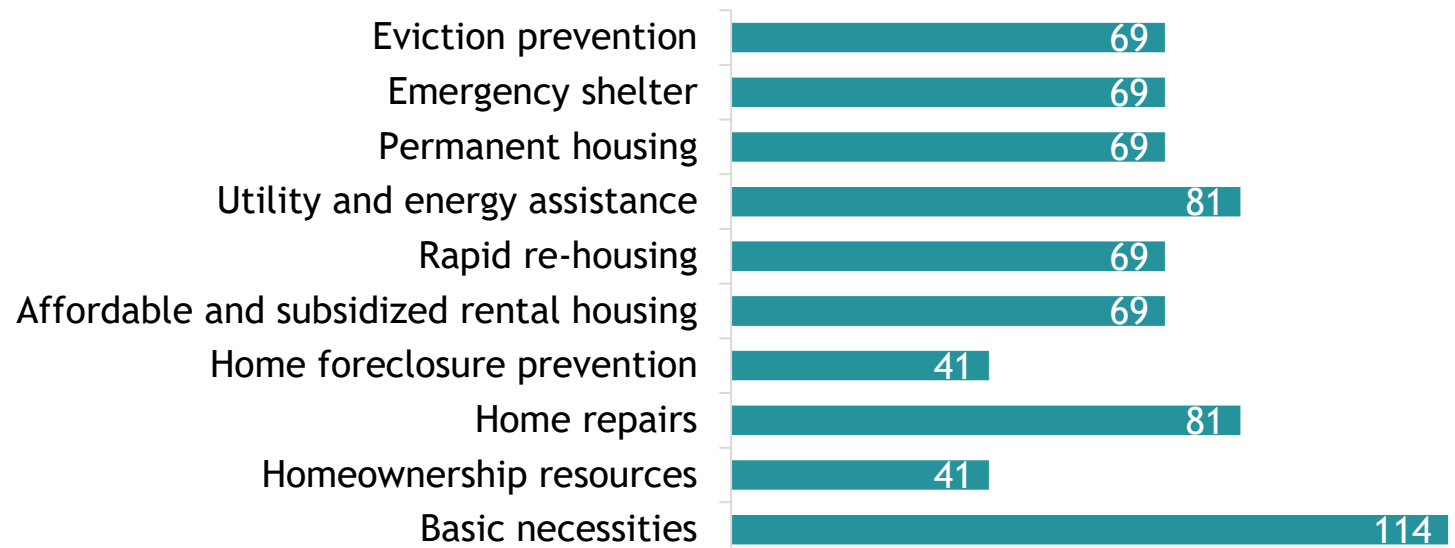
Reach



326 New Partners



Resources Distributed



Thumb Alliance:

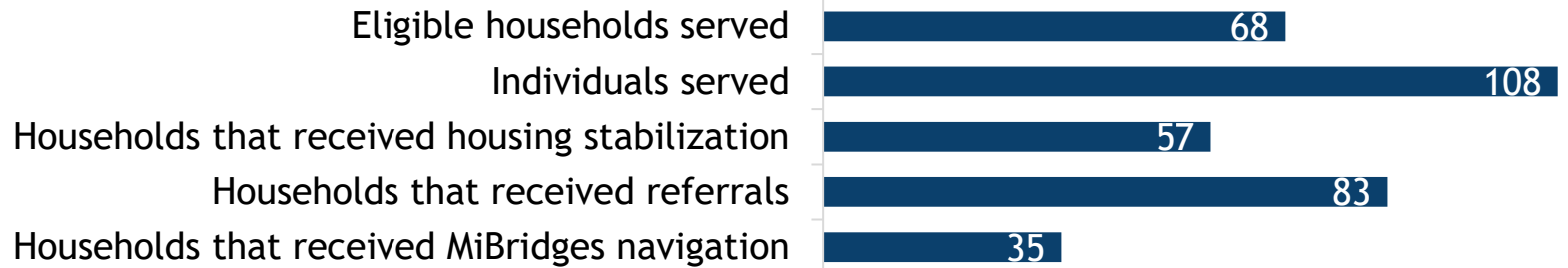
Sanilac Health Department, Huron Health Department, Lapeer Health Department, Tuscola Health Department



Geography: Residents of Huron, Lapeer, Sanilac and Tuscola Counties

Demographics: Primarily low-income seniors, families with children, rural residents

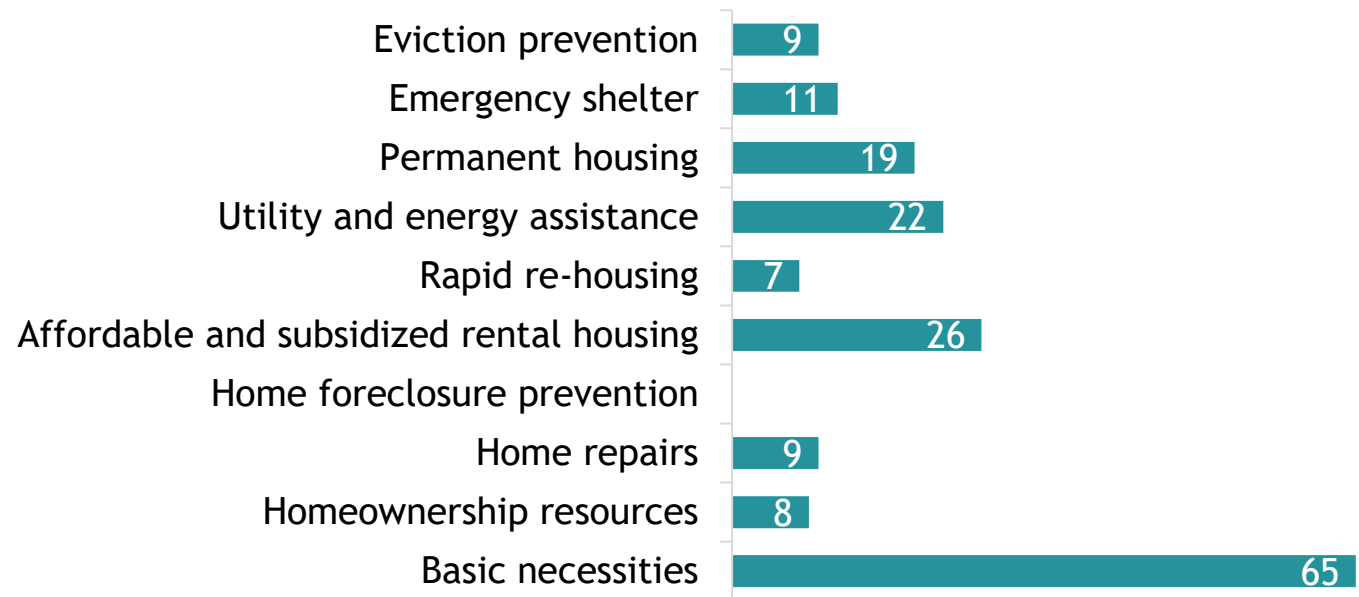
Reach



50 New Partners



Resources Distributed



Wayne County Health Department



Geography: Residents of Wayne County, except the City of Detroit

Demographics: All demographics

Reach

The Wayne County Health Department used the GH2 funding as a planning grant to build their capacity to support housing needs through their SDOH Hub. Their focus through the project was building the infrastructure and the staffing to carry out housing support. The number of people served was not reported.

9 New Partners



Resources Distributed

Wayne County Health Department created a resource guide and worked with partners to share resources and referrals. The number of resources distributed was not reported.

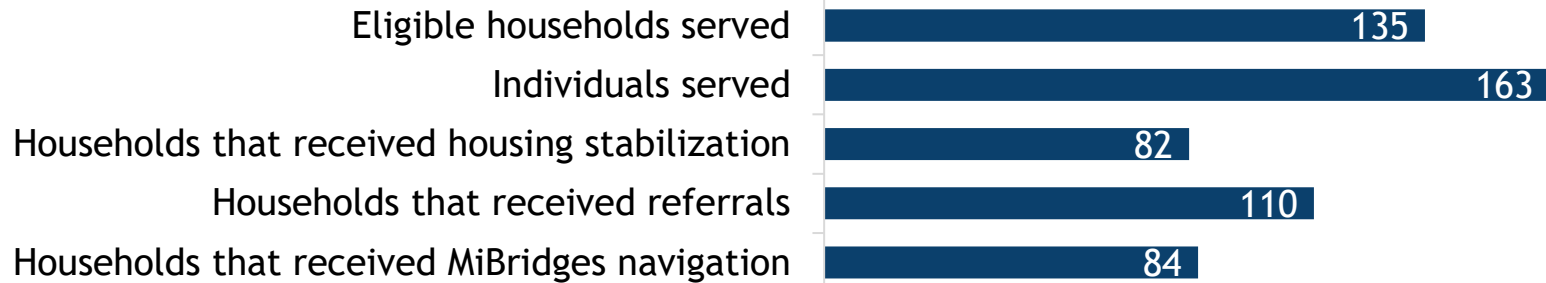
Western Upper Peninsula Health Department



Geography: Residents of Houghton, Keweenaw, and Baraga Counties

Demographics: Primarily white women, foreign students from Michigan Tech, 20-30-year-old males, and people with substance use disorder

Reach



44 New Partners

 11
health care

 10
local health dept.

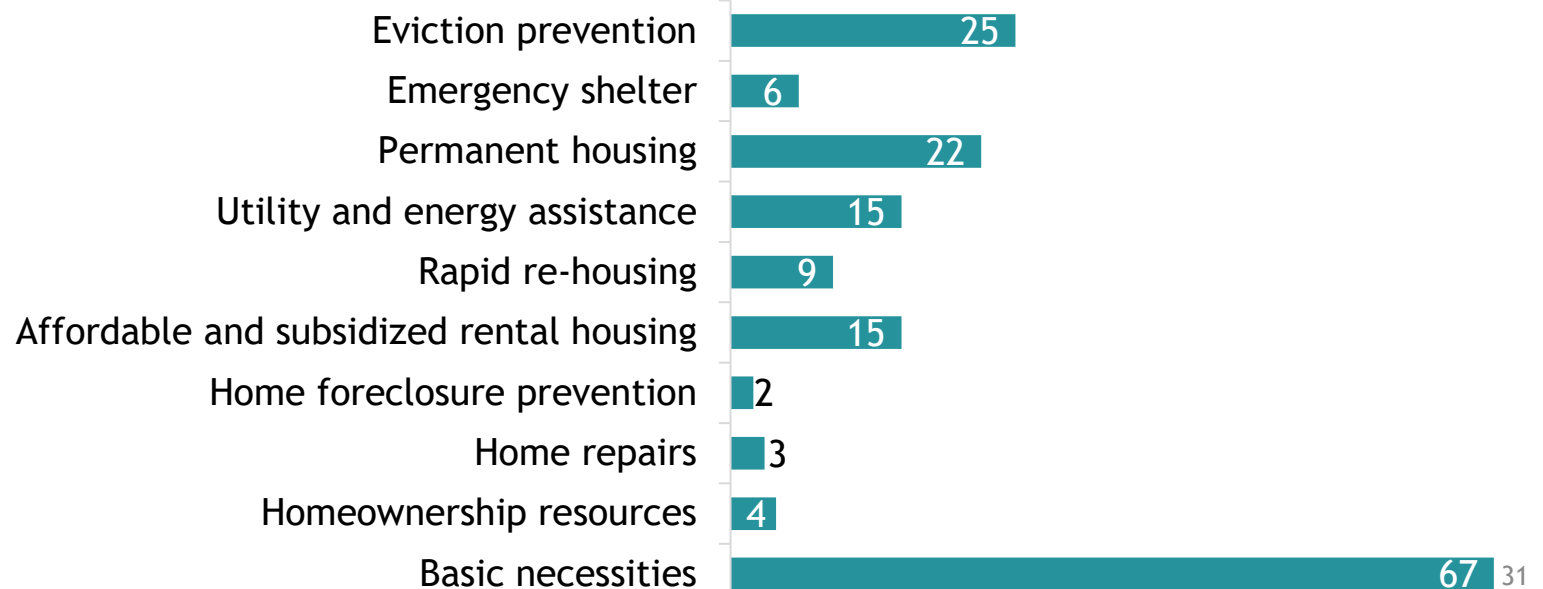
 6
state gov't

 2
private sector

 14
philanthropy

 1
others

Resources Distributed

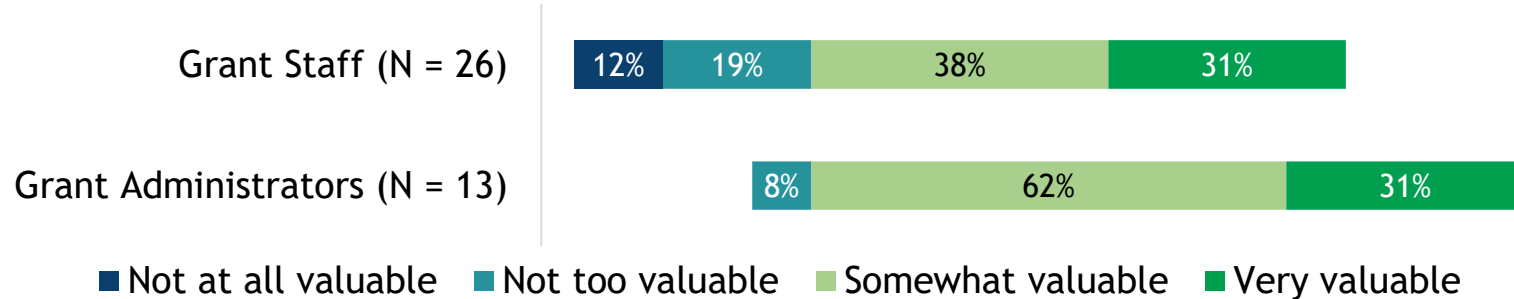




Reflections on GH2 Grants

Perception of Grant Value

The majority of grant staff and administrators found the program was either somewhat or very valuable. More grant staff (8 of 26) than grant administrators said the program was either not at all or not too valuable. Only one grant administrator shared this view.



9 people found the program not at all or not too valuable. Key themes:

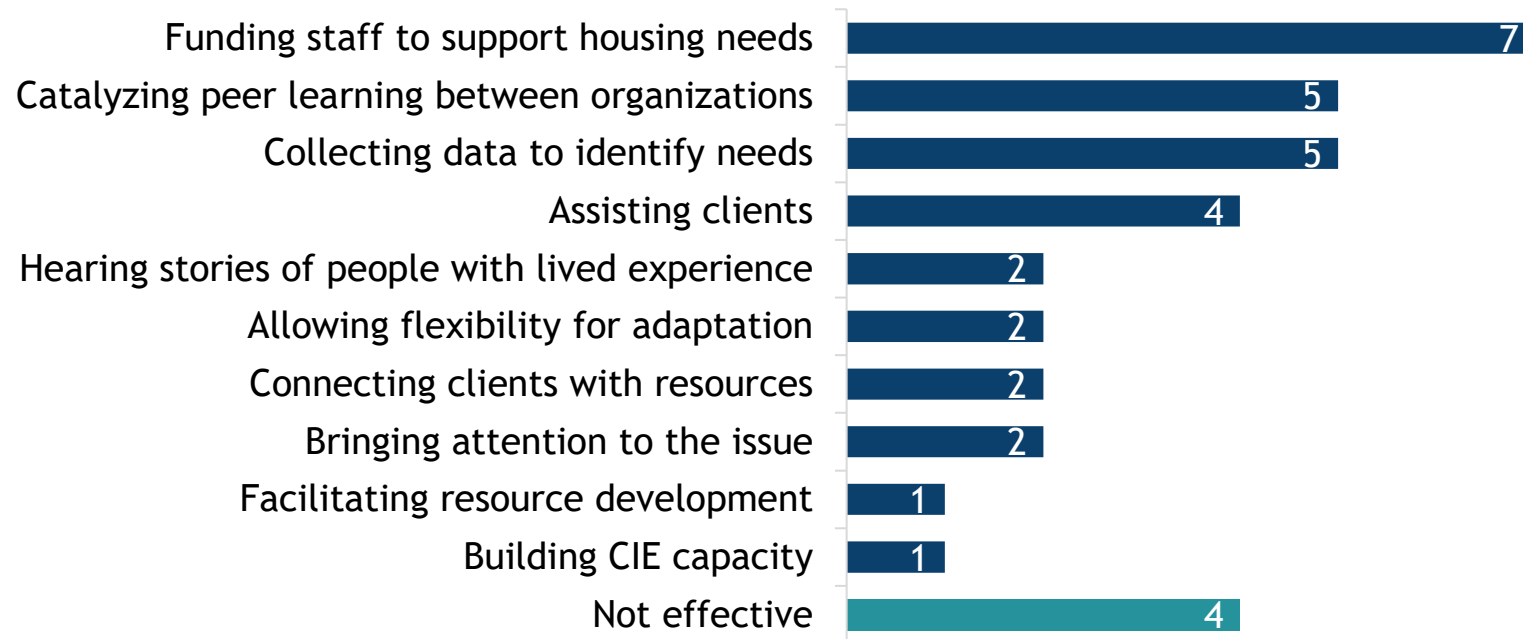
- Lack of direct assistance for unhoused.
- Focus on data collection took away from addressing housing barriers.
- Lack of investment in addressing housing shortage.

30 people found the program somewhat or very valuable. Key themes:

- Funding for case management staff.
- Opportunity to assist with housing needs, including reaching people not eligible for other programs.
- Increasing awareness of and bringing attention to the issue of housing.
- Increasing awareness of resources available.

Perception of Grant Efficacy

Themes Describing the Most Effective Part of GH2



“I feel the most effective part of GH2, according to the past clients I worked with, was that they didn't feel so lost. Someone was there to answer their questions, and assist with goals, not just finding a house, or maintaining a house, but all goals that would relate to housing stability, such as employment, day care, GED training and weatherization.”

“The most effective part was giving us the money to fund CHWs that do housing-related work and allowing the opportunity for us to connect to housing partners (COC, HARA, shelters).”

Most Effective Activities

Grant staff shared what they felt were the most effective activities of the GH2 grant program.

“Assisting with food stamp applications, food pantries, housing applications, Medicaid, etc.”



Providing peer navigation.



Forming partners.



Identifying potential housing.



Preventing eviction.

“Being able to assist those who were behind on rent as there are no resources that are able to assist without an eviction, even then resources are limited.”

“Giving them accurate information on housing resources.”



Connecting clients to resources.



Drawing on lived experience.



Bringing attention to the issue.



Meeting basic needs.

Suggested Improvements

When asked what changes they would like to the grant, respondents had many ideas across five main categories.



Increase options for funding.

Many people wanted more flexibility in allocating program funding and the ability to offer direct support. They identified needs related to housing, such as utilities, transportation and home repair.



Improve program procedures.

Many people brought up program procedures. Six people wanted a longer program timeline. Others discussed easing the burden on participants by reducing data collection requirements or providing participation incentives.



Address policy barriers.

Several respondents wanted to address policy barriers. Suggestions included allowing policy advocacy as a grant-supported activity and advancing policies to restrict rent increases.



Focus on housing supply.

Three respondents wanted to see funding that invested in increasing the supply of affordable housing.



Provide compiled information.

Three people requested compiled information on housing services available at national, state and local levels.

Housing Needs

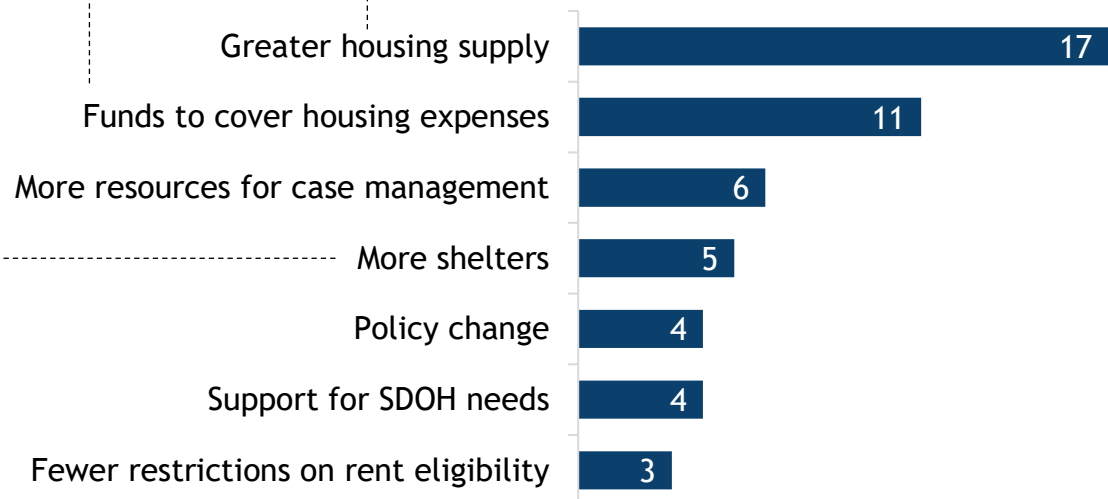
Thirty-one people identified at least one need in their community to support housing access. Greater housing supply topped the list.

“More direct funds to pay for housing when low-income families have crisis and when unhoused persons secure housing but don't have the resources to cover all of the move in costs.”

“The shortage of housing options fuels the cost of housing making the housing that does exist unaffordable.”

Perceived Remaining Housing Needs

“Emergency housing! It has been deadly cold in Michigan and we have people who are not housed. Marquette, two hours away, has emergency housing and it is always at capacity.”



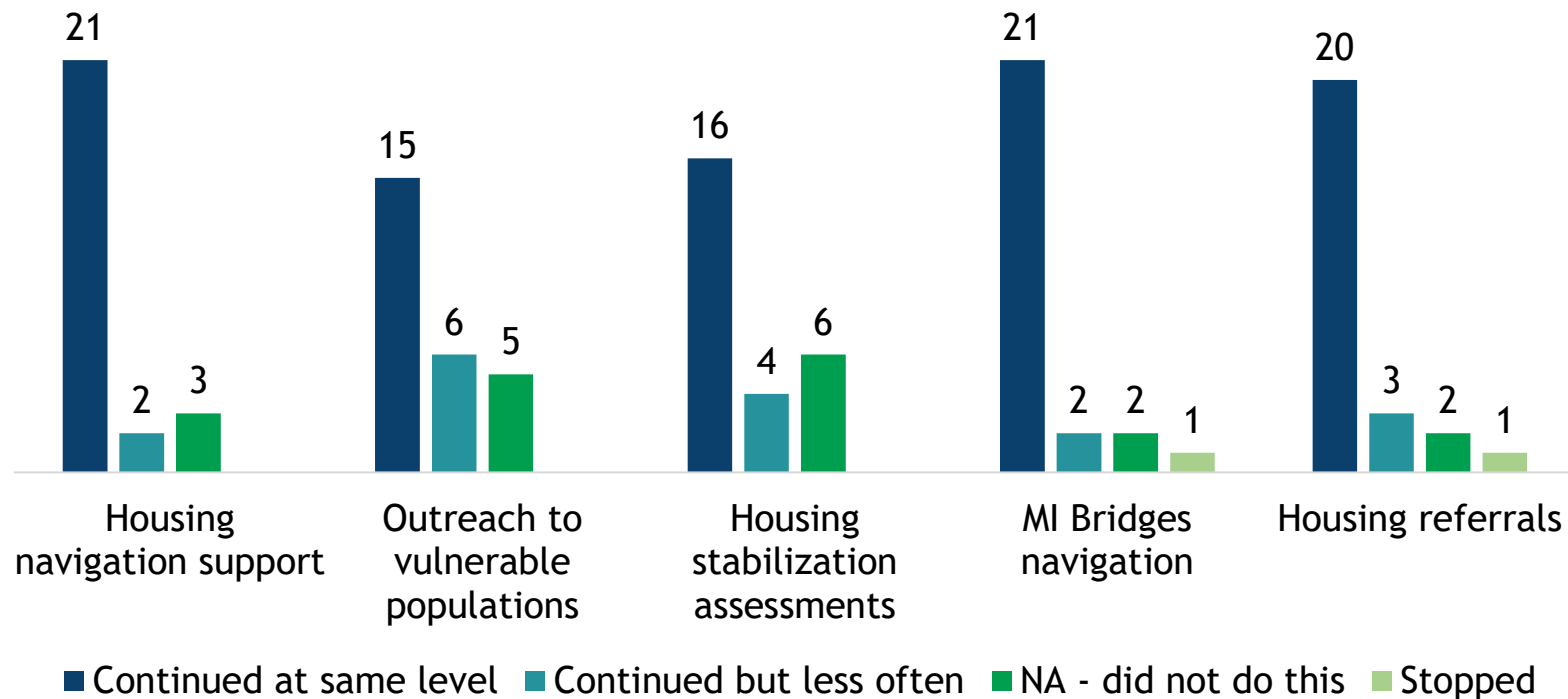


Housing Stability Continuation

Continuation of Grant Activities

Most of the 26 grant staff that completed the survey indicated they are continuing the housing support activities at the same level as during the grant period.

Number of Grant Staff Reporting Continued GH2 Activities



Continuation of Grant Activities

When grant coordinators were asked in what ways, if at all, the GH2 activities would continue at their organization, they shared a range of plans.

“We will continue to use what we learned as about resources around housing in our work.”

Continue to use resources identified.

Continue to support housing needs.

Continue to support the CIE.

Seek funding to support CHWs hired.

Continue collaborating with housing navigators.

Continue to support families they started working with.

“We help people apply for benefits, advocate, connect to resources, remove barriers and all sorts of SDOH that arise. Community service is important to all staff at the health department. We are dedicated to our communities.”

“Follow up and follow through often needs to be in place for a long period of time. Families will need our support to keep them on stable grounds.”



Methodology

Report Methodology

QUARTERLY REPORTS

A total of 43 quarterly reports submitted by the 11 grant partners were aggregated from PDF-based submissions and two Qualtrics datasets. The reports were analyzed at both the individual grantee and cohort levels. Metrics compiled included households and people reached, resources distributed, and partnerships formed. Quarterly reports were also used to inform descriptions of the geographies and demographics served by each grantee and to summarize project activities, particularly for grantees that did not report specific numbers.

GRANT COORDINATOR SURVEY

The SDOH team sent an 11-question survey to the coordinators of the GH2 grant at the 11 partner agencies. The survey was open from Jan. 28 - Mar. 7, 2025 and received 15 responses. While responses were anonymous, descriptions of geographies served indicated that at least one respondent from all 11 agencies likely completed the questionnaire. Questions, all but one of which were open-ended, were designed to solicit perspectives on the most effective aspects of the grant program, stories of success, desired changes to the grant program, plans to continue housing supports, and remaining housing needs.

GRANT STAFF SURVEY

The SDOH team requested that grant coordinators pass on a second survey to the Community Health Workers and other staff who conducted activities under the GH2 grants. This survey consisted of 11 questions. The anonymous survey was open from Jan. 28 - Mar. 7, 2025 and received 26 responses. Questions included a mix of open- and closed-ended items with the aim of capturing perspectives on the most effective aspects of the program, desired changes to the program, time spent on GH2 activities, and the perceived value of the program. Additional questions captured plans for continuing housing support activities and perceived barriers to meeting housing needs.

SDOH REPORTS

Metrics on webinars held, webinar attendance, outreach hours, CHWs onboarded, and supportive staff onboarded were based on internal reports from the SDOH team.

DATA ANALYSIS

For all four data sources, descriptive statistics were used to analyze numeric data and closed-ended survey responses. Themes were generated by summarizing, comparing, and synthesizing grantees' quarterly report descriptions and open-ended survey responses.