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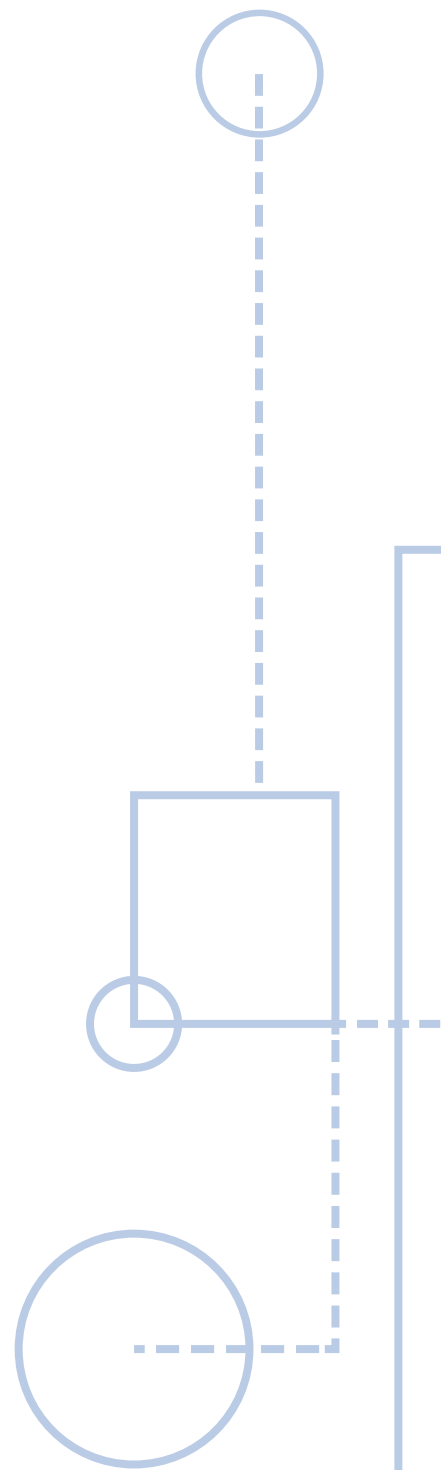
The Economic Impact of Behavioral Health and Intellectual disAbility Spending on the City of Philadelphia

Spring 2015

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The Economic Impact of Behavioral Health and Intellectual disAbility Spending on the City of Philadelphia

Kevin C. Gillen
Senior Research Fellow
Lindy Institute for Urban Innovation,
Drexel University
kevin.c.gillen@drexel.edu

Harris M. Steinberg, FAIA
Executive Director
Lindy Institute for Urban Innovation,
Drexel University
harris.m.steinberg@drexel.edu

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Background

The Thomas Scattergood Behavioral Health Foundation is a Quaker-based, philanthropic organization committed to transforming how behavioral health is viewed and advancing innovative approaches to behavioral health care delivery and policymaking. The Foundation's vision is to challenge, disrupt, and change how behavioral healthcare is envisioned, organized, and practiced in the Philadelphia region and beyond. The Foundation makes targeted grants that work to create a society in which individuals, communities, and institutions understand and support behavioral health and promote open access to effective services without stigmatization.

As part of this larger mission, the Scattergood Foundation has retained the services of the Lindy Institute for Urban Innovation at Drexel University to undertake an Economic Impact Study (EIS) examining what impact public spending on behavioral health in Philadelphia has on the broader Philadelphia economy. This impact would include, but not be limited to, total economic activity created jobs produced and supported, as well as fiscal revenues generated. The Foundation believes it is critical that all Philadelphians, including the mayoral candidates and city council members, understand the total impact of behavioral health on the City of Philadelphia. Behavioral health affects every Philadelphian, every day, in many different ways. This EIS is the beginning of an ongoing public, transparent conversation about behavioral health services across the region. Future studies will dive deeper in to the delivery system and the outcomes associated for all Philadelphians.

This EIS focuses on the spending and activities of the City of Philadelphia's Department of Behavioral Health and Intellectual disAbility Services (DBHIDS). DBHIDS currently has an annual budget of approximately \$1.12bn, with nearly \$900m earmarked for Community Behavioral Health services. These amounts represent 17% of the City's entire budget, so it is reasonable to believe that the effect of this spending is likely to be both far-reaching and substantial.

The purpose of this document is to present the results of the EIS's findings, including its scope, components, methodology, and conclusions. The author, Dr. Kevin Gillen of the Lindy Institute for Urban Innovation at Drexel University, has extensive experience in analyzing the economics of public sector initiatives in both Philadelphia and elsewhere.

Why Behavioral Health Is a Public Health Crisis

Behavioral health disorders—defined as mental health and substance use disorders—are among the leading causes of disability for Americans, and the resulting disease burden is among the highest of all diseases (1). Mental health disorders do not discriminate; they affect all types of individuals and have a significant impact not only on the person affected but also on their families, workplaces, schools, and communities. Some basic statistics highlight the scope and severity of the issue:

TWENTY-SIX PERCENT

of Americans will have a diagnosable mental health condition in any given year (2). This rate is higher than those Americans with diabetes (9.3%) (3) and heart disease (11.3%) (4) combined.

TWENTY-FIVE PERCENT

of all years of life lost due to disability and premature mortality are related to mental health disorders (5).

THREE-HUNDRED-THOUSAND+

deaths each year are suicides, which is the 11th leading cause of death in the United States (6).

SEVEN-HUNDRED-FIFTY-FIVE

suicides occurred from 2007-2011 in Philadelphia County alone (7).

HUNDREDS OF THOUSANDS

of Americans attempt suicide each year and several million family members are affected by these events (8).

Public Spending by Department of Behavioral Health and Intellectual disAbility Services Divisions

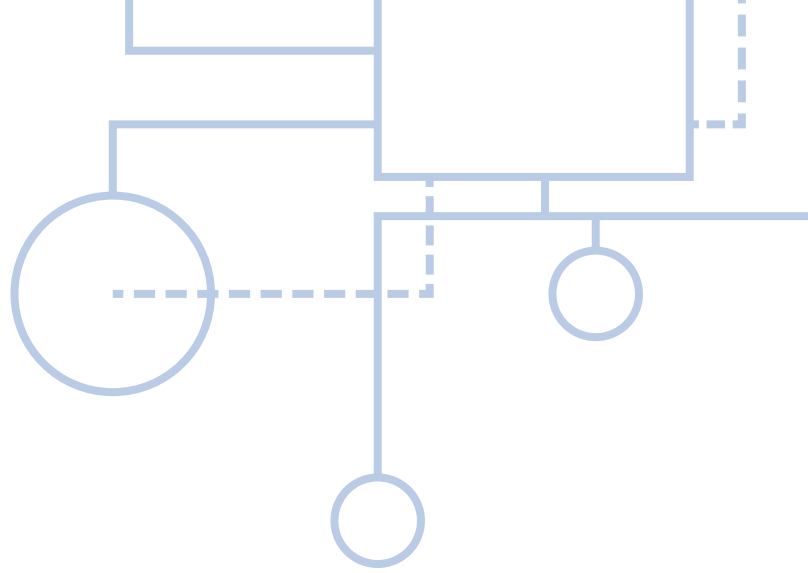
The Department of Behavioral Health and Intellectual disAbility Service Divisions is composed of the following services (9):

- **Community Behavioral Health:** Community Behavioral Health (CBH) is a not-for-profit 501(c)(3) organization contracted by the City of Philadelphia to provide mental health and substance abuse services for Philadelphia County Medicaid recipients.

Supported through state funding, CBH works in partnership with the City of Philadelphia and the Commonwealth of Pennsylvania to provide vital behavioral health services. CBH is responsible for providing behavioral health coverage for the City's 420,000 Medicaid recipients. Its primary activities include authorizing payment for behavioral health services, overseeing provider agencies to ensure delivery of effective and medically-necessary services, and achieving management and operational efficiencies to lower healthcare costs. CBH currently holds contracts with 384 provider organizations in Philadelphia County.

- **Office of Addiction Services:** The Office of Addiction Services (OAS) formerly known as the Coordinating Office for Drug and Alcohol Abuse Programs (CODAAP) plans, funds, and monitors substance abuse prevention, intervention, treatment, and recovery support services in Philadelphia.

OAS is the Philadelphia Single County Authority (SCA), the administrative entity responsible for integrating federal, state, and city funds to support an integrated county-wide system of services for citizens and families addressing drug and alcohol



issues. As the SCA, OAS provides leadership and coordinates the activities of addiction providers for Philadelphia residents including people who are Medicaid recipients, uninsured, and/or underinsured.

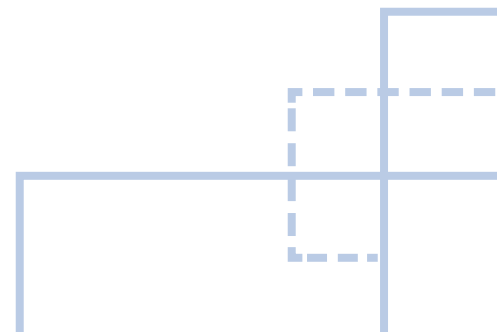
- **Office of Mental Health:** Philadelphia's Office of Mental Health (OMH) provides mental health services for more than 40,000 adults and children requiring medical, social, and educational services. The office provides these services through an extensive network of contracted provider agencies located throughout Philadelphia. This network of services includes 11 community mental health centers, more than 30 specialized health agencies, 5 crisis response centers, and 30 in-patient provider agencies.

In partnership with the contract providers, the Office of Mental Health offers a comprehensive range of behavioral health services. These services include emergency and crisis intervention services, rehabilitation programs, individual and group counseling, family support programs, residential programs, and consumer-run services.

- **Intellectual disAbility Services:** Created under the Pennsylvania Mental Health and Mental Retardation Act of 1966, Intellectual disability Services (IDS) plans, administers, monitors, and coordinates services for over 12,000 Philadelphia citizens with

intellectual disabilities. Its mission is to create, promote, and enhance the supports and services available to individuals with intellectual disabilities. These services aim to foster meaningful life choices, personal relationships, community participation, dignity, and respect as valued citizens.

IDS achieves its mission by partnering with 70 care agencies in Philadelphia to provide a broad range of supports and services to both children and adults. These services include early intervention services (birth to 3 years of age), in-home supports and respite services, employment and adult day services, and community living and life-sharing services.

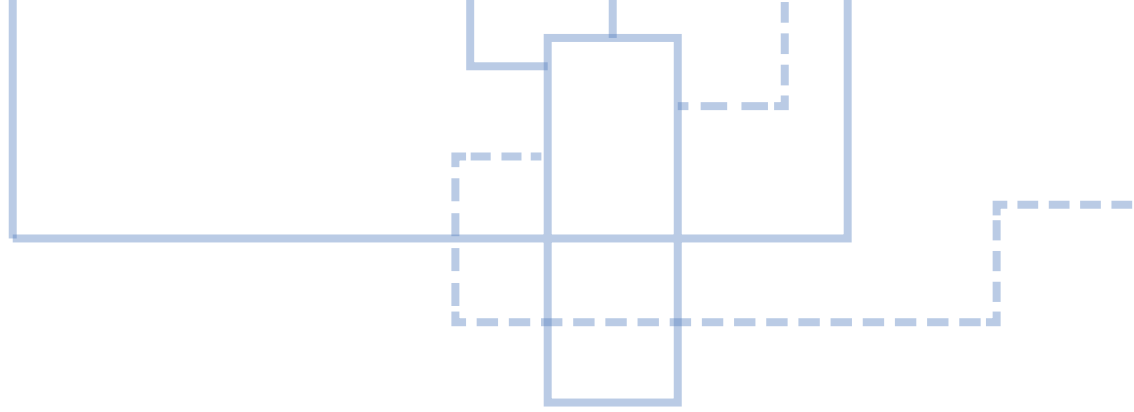


Methodological Approach to Economic Impact Studies

The general intuition behind economic impact models is that every dollar spent by the initial funder (in this case, DBHIDS) has a so-called "multiplier effect," and gets spent several times over in the local economy. For example, DBHIDS pays its employees and contractors, these employees spend their wages to support local businesses while the contractors pay their vendors and suppliers, and then these local businesses also spend money paying their employees and other bills, and so on. However, at each expenditure event, there is some leakage of spending outside the local economy; not every dollar is spent in Philadelphia or paying an employee that lives in Philadelphia. Every expenditure is also typically associated with some taxation event; employees and businesses each pay a wide variety of local, state, and federal taxes. Hence, each expenditure of that initial dollar is reduced by both outside leakage and taxation, leaving less money remaining to be spent in the next round of expenditures. Calculating the multiplier effect of the initial spending and adjusting it for how it is reduced downward to zero is at the mathematical core of economic impact studies.

In analyzing the impact of a spending program(s), there are generally three distinct sources of a program's total economic and fiscal impact:

1/ Initial expenditures are the direct expenditures made by the Philadelphia DBHIDS and its vendors and subcontractors. These would include the expenditures associated with funding and implementing various behavioral health initiatives, such as real estate costs (e.g. for a clinic location), staffing costs, supply costs, and any associated soft costs like those related to accounting, legal, and advertising, or transportation of staff, patients, clients, and materials. It also includes ongoing expenditures by DBHIDS to maintain these properties and programs, such as operating and management expenses. It also includes expenditures made by DBHIDS's vendors and subcontractors, such as payroll made to employees and purchases, rent payments for the facilities they occupy, and purchases of materials such as office furniture and supplies. Lastly, it includes expenditures made by the operation of other businesses at these sites, such as janitorial and maintenance subcontractors.



2/ Indirect expenditures are the expenditures generated by DBHIDS's vendors' production. These include expenditures by the firms and individuals paid by DBHIDS to perform their contracted work. For example, a contractor who performs construction maintenance on a neighborhood mental health clinic funded by DBHIDS will spend their contracted money earned to purchase the supplies needed to complete their rehab work (such as plumbing materials or sheet rock); in turn, the building supplier from whom the contractor purchased their supplies will purchase additional supplies to replace those purchased by the contractor.

3/ Induced expenditures are the expenditures generated as employees spend their earnings within the local economy as a consequence of being employed by projects funded by DBHIDS's \$1.12bn. For example, a researcher with a grant from DBHIDS may use his funding to buy groceries or a new car; a nurse in a clinic supported by funding from DBHIDS may move into a nicer apartment as a result of getting that job and pay higher rent; or the owner of a cleaning service used by that DBHIDS-funded clinic might spend his income on tuition payments for his daughter at Drexel University.

These total expenditures are then used to identify the subsequent fiscal revenues they generate. Taken collectively, these direct, indirect, and induced expenditures support a certain level of employment and earnings in both the city and region, and they subsequently result in the generation of new tax revenues¹.

The estimation of the EIS proceeds as follows: mechanically, we deploy standard input-output models to compute the composition and scale of these economic and fiscal impacts. Our economic impact model uses the US Department of Commerce's Regional Input-Output Modeling Systems (RIMS II), a widely respected and commonly used model that is an industry standard. RIMS II produces estimates of the distribution of economic impact at the county level, in specific dollar values, which in turn yield the familiar multipliers used in the economic impact analyses. We then use the direct and indirect impact multipliers from the RIMS II database to create a composite estimate of direct and indirect earnings, jobs, and total economic activity for the level of spending provided by DBHIDS. Then, appropriate RIMS II multipliers are selected to derive a total earnings and total economic activity estimate for the project. This includes both economic expenditures and employment estimates². The fiscal impact model then estimates the tax revenue implications to the City, also in specific dollar values, of that scale and composition of the economic impact, given the City's various tax rates.

1. At Scattergood's request, we have examined only local city taxes, not state or federal tax revenues, that have resulted from DBHIDS's spending.

2. Readers seeking to learn more about EIS models and RIMS II multipliers can find more information at: <http://bit.ly/2rPjTkC>

Differences from Other Economic Impact Studies

A key difference between this EIS and other EIS's is that this one does not make the implicit assumption that the money spent by original entity (DBHIDS) would not be spent otherwise but for the existence of these programs. Many other EIS's purport to claim that a given project or program generates a particular amount of economic activity, jobs and tax revenues, with the implication that but for this project or program, the money would remain unspent. This is typically a false assumption. If a local developer does not get approval for a casino license or an energy firm with a local presence does get approval for a proposed pipeline, the money that they would spend on these projects does not remain in their bank accounts or under their mattresses. Instead, it typically will get allocated to some other spending opportunity or investment, which will also generate economic activity, jobs and tax revenues.

However, most EIS's do not take into account this opportunity cost of money in the calculation of the subject's economic impact: money not spent in one part of the local economy will likely be spent in another part of the local economy. Both types of spending have economic, labor and fiscal effects. The true economic impact of a proposed project is its net economic impact relative to how else the money would be spent. Most EIS's ignore this and instead just compute the gross economic impact, which can significantly overstate what the actual economic impact will be.

This study does not make this erroneous assumption because the total amount of funding analyzed in this report is locally spent, but not locally sourced. Nearly 100% of the funding is from federal sources. Hence, if DBHIDS did not spend this money, it would stay in Washington and never reach Philadelphia. Thus, the total economic, labor, and fiscal impact of spending on DBHIDS programs is not over-estimated.

Results

The main findings of our EIS are as follows:

The total economic impact of spending by DBHIDS on the Philadelphia economy is nearly \$4 billion. Although there are additional positive impacts on the broader regional economy, 100% of this \$4 billion impact occurs within Philadelphia County.

Of this \$4 billion, **\$1.12 billion is from direct spending** (DBHIDS and its contractors), **\$1.28 billion is from indirect spending** (e.g. spending by the vendors and businesses patronized by DBHIDS and its contractors) and **\$1.5 billion is from induced spending** (additional spending by the employees of DBHIDS and its contractors).

The spending by DBHIDS directly supports the creation and ongoing operations of 18,700 jobs, and indirectly supports the ongoing existence of an additional 6,700 jobs in the Philadelphia economy, for a **total of 25,400 jobs created.**

These jobs pay average wages according to the following categories: Administrative: \$21,770; Social Assistance: \$19,451; Ambulatory Care: \$54,023

Based upon these numbers, this spending generates the **\$36.1 million in annual tax revenues to the City of Philadelphia.**

This is broken down as follows: \$25.7m in wage tax revenues³; \$1.4m in business tax revenues⁴; \$907k in sales tax revenues⁵; \$8.1m in real estate taxes⁶

Direct spending by DBHIDS has a direct effective tax multiplier of 3.2% in Philadelphia; that is, every \$1 directly spent by DBHIDS results in \$0.032 in new annual tax revenue.

When additional rounds of spending caused by the multiplier effects are taken into account, these results indicate that total spending by DBHIDS has the following effects:

1/ Spending by DBHIDS has an economic multiplier of nearly 2.5: every \$1 spent by DBHIDS generates an additional \$2.50 of economic activity in Philadelphia County.

2/ Spending by DBHIDS has a jobs multiplier of 1.26: every \$1 spent by DBHIDS supports the creation and ongoing existence of 1.26 jobs in Philadelphia County.

3/ Spending by DBHIDS has a total effective tax multiplier of 8.1%: every \$1 spent by DBHIDS results in \$0.081 in new annual tax revenue to Philadelphia County.

3. This assumes a blended wage tax rate of 3.8271% since it is unknown which employees are city residents and which are commuters.

4. This estimate is an undercount of the total business taxes paid by DBHIDS's vendors since it excludes the net profits portion of the Business Income and Receipts Tax (BIRT). The reason for this is that we do not know the internal cost structure of DBHIDS's vendors, and hence cannot compute their profit. So, we only computed the gross receipts portion of the BIRT.

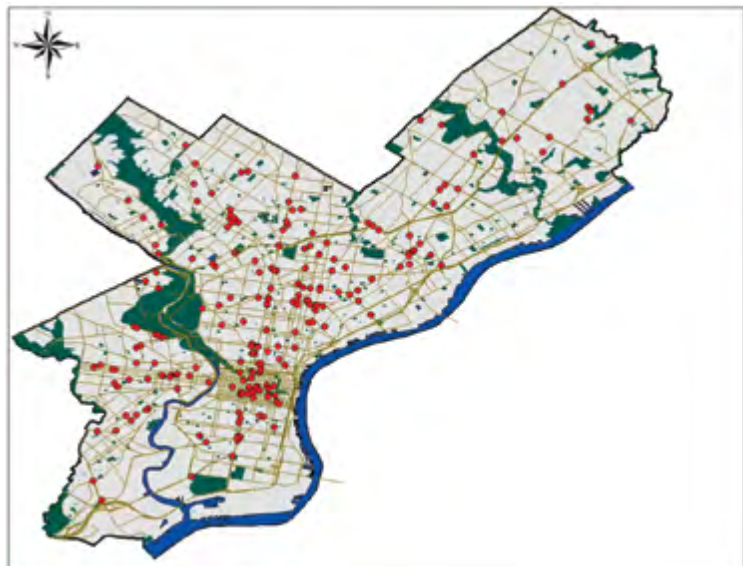
5. This assumes that 50% of employees' incomes are spent in Philadelphia on goods and services that are subject to the city's sales tax.

6. This is computed by matching up the addresses of facilities receiving DBHIDS funding to their parcel IDs in the property database of the City's Office of Property Assessment (OPA), and obtaining each property's total assessed value and total exempt value (many of these properties are tax-exempt owing to their owner's non-profit status), and applying the City's current real estate tax rate of 1.34% to the exemption-adjusted assessed value.

The Economic, Labor and Fiscal Impact of Spending by DBHIDS

Every \$1 spent by DBHIDS has a multiplier effect which ripples through the Philadelphia economy, resulting in \$2.50 in additional economic activity, 1.26 jobs and \$0.081 in new tax revenue.

• **Councilmanic-Level Impacts** : The Citywide effects enumerated above were broken down to the Councilmanic level by assuming that the economic and fiscal effects in each Council District were proportionate to the presence that DBHIDS contractors had in each District. This was done by first obtaining a list of all clinics, facilities and contractors receiving DBHIDS funding, which was provided by Scattergood. This list was geo-coded with the assistance of ArcMap software, using the address of each property. The following map shows the location of all DBHIDS facilities in Philadelphia:



Spending by DBHIDS in each Councilmanic District was assumed to be proportional to the total amount of square footage occupied by the facilities in each district,⁷ and the appropriate multipliers were then applied to this spending to break down the economic, labor, and fiscal effects of DBHIDS spending in each District. The results are given in the following table:

Economic, Labor and Fiscal Effects of DBHIDS Spending by Councilmanic District

Council District	Percent of Total	Direct Spending (\$m)	Total Economic Activity (\$m)	Total Jobs Supported	Total Taxes Generated (\$m)
1	20.2%	\$226.4	\$566.0	5,134	\$7.3
2	5.0%	\$55.6	\$139.0	1,261	\$1.8
3	13.5%	\$150.9	\$377.3	3,423	\$4.9
4	6.4%	\$71.5	\$178.7	1,621	\$2.3
5	16.0%	\$178.7	\$446.8	4,053	\$5.8
6	4.3%	\$47.7	\$119.1	1,081	\$1.5
7	15.6%	\$174.8	\$436.9	3,963	\$5.6
8	9.9%	\$111.2	\$278.0	2,522	\$3.6
9	3.9%	\$43.7	\$109.2	991	\$1.4
10	5.3%	\$59.6	\$148.9	1,351	\$1.9

7. For example, if 10% of the total square footage occupied by facilities receiving DBHIDS funding is located in a particular Councilmanic District, then we assumed that 10% of total DBHIDS spending occurs in that same district. We recognize this is a highly imperfect way to identify District-level spending, but budget and payroll information was not available for each facility. If nothing else, this analysis does confirm that at least some spending by DBHIDS occurs in every Councilmanic District, since each District has at least some facilities receiving DBHIDS funding located in it.

Recommendations for the Future

- 01** Continued partnership with the City of Philadelphia's agencies to support the completion of **similar analyses to be done for all health and human services sectors**. Future studies should include other health and human services agencies and dive deeper in to the effectiveness and quality of the services being funded.
- 02** Require DBHIDS to create an **advisory board** composed of consumers, family members, mental health provider agencies, city and private employers, the city's workforce development agencies, and the physical health partnering agencies. This board should be the responsibility of the Department of Behavioral Health and Intellectual disAbility Services, who should provide administrative support. Although this board would have a similar make-up to current advisory boards such as CBH's, it would address specific issues and report directly to the DBHIDS leadership.
- 03** DBHIDS and CBH should provide an **annual report** to the Mayor and City Council with credible data on patient outcomes that represent the effectiveness and quality of treatment across the entire spectrum of care.
- 04** DBHIDS and CBH should financially support the implementation of agreed-upon areas of innovation and **evidence-based models across the entire spectrum of care**. They should also work to ensure that contractors are being compensated in a manner that promotes fidelity to these agreed-upon models.

Appendix

Our Qualifications and Expertise

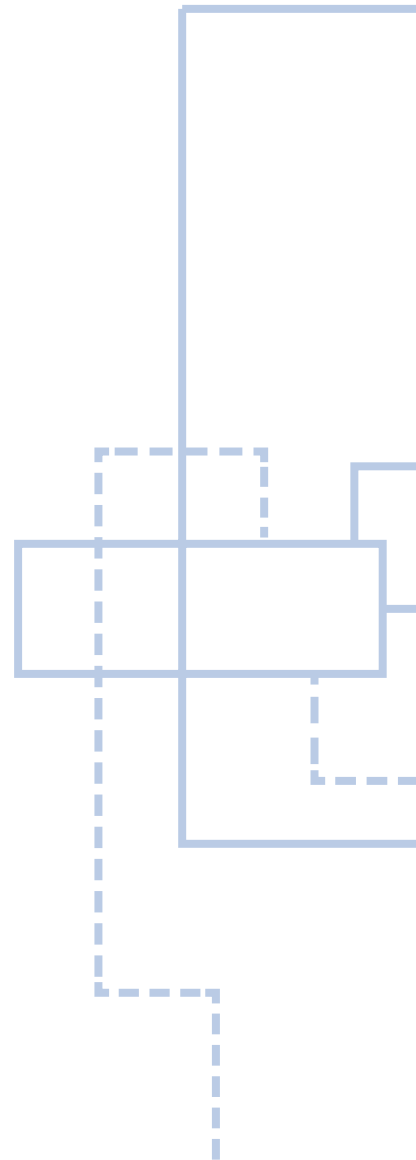
This work was led by Principal Investigator Kevin C. Gillen, Ph.D., with substantial support from a team consisting of research assistance from students and oversight from Lindy Executive Director Harris Steinberg. The following are brief descriptions of the Institute and the qualifications of its personnel:

The Lindy Institute for Urban Innovation at Drexel University

The Lindy Institute for Urban Innovation at Drexel University is an interdisciplinary think tank, named in honor and recognition of Philip Lindy and his family, who have donated generously to civic engagement initiatives at Drexel. Launched in 2012, the Lindy Institute provides a platform for Drexel to solve urban challenges and shape public discourse locally, nationally, and globally.

The Lindy Institute for Urban Innovation is built around a single ambitious goal—that of making Drexel University the most civically engaged university in the nation. The Lindy Institute will foster deeper support for the high-quality, experientially-grounded education that Drexel offers its students and will create a stronger culture of engagement among students, faculty, and professional staff.

It will provide opportunities for new interdisciplinary teaching and research among our faculty and will create the structure to organize and leverage Drexel's many assets. The Institute will enhance diversity and inclusivity through civic engagement, and subsequently by attracting faculty, students, and staff who share those values. Through the Lindy Institute, we seek to provide leadership for like-minded scholars and practitioners who share a commitment to urban development and innovation and who will collaborate to create positive change. Through the Lindy Institute, Drexel University will become part of the global conversation and will share its integrated and comprehensive approach to community revitalization, helping to create a forum for the rich exchange of best practices and replicable strategies.



Harris M. Steinberg, FAIA

Harris became the executive director of the Lindy Institute for Urban Innovation at Drexel University in November 2014. He also has an appointment as a distinguished teaching professor of architecture in Drexel's Westpahl College. Prior to his appointment at Drexel, Harris was the founding executive director of PennPraxis (2002-2014), the applied research arm of the School of Design at the University of Pennsylvania, and an adjunct associate professor of city and regional planning. His leadership at PennPraxis established a new standard for civic engagement in planning the built environment in Philadelphia and has been acknowledged nationally and internationally as a model process.

Civic visioning was at the core of Harris' work at PennPraxis. His projects included the award-winning *Civic Vision for the Central Delaware* (2006-2007), a public planning process that engaged more than 4,000 Philadelphians in over 200 meetings in 13 months. The process altered planning history in Philadelphia and the vision is now guiding development along the Delaware River. Other civic visioning projects included: *Reimagining the Kimmel Center* (2008); *Green2015: An action plan to add 500 acres of new park space in Philadelphia* (2010); and *More Park, Less Way: An action plan to increase urban vibrancy on Benjamin Franklin Parkway* (2013). *The New Fairmount Park*, a vision and action plan for Philadelphia's 2,000-acre watershed park, was released in May 2014.

Kevin C. Gillen, Ph.D

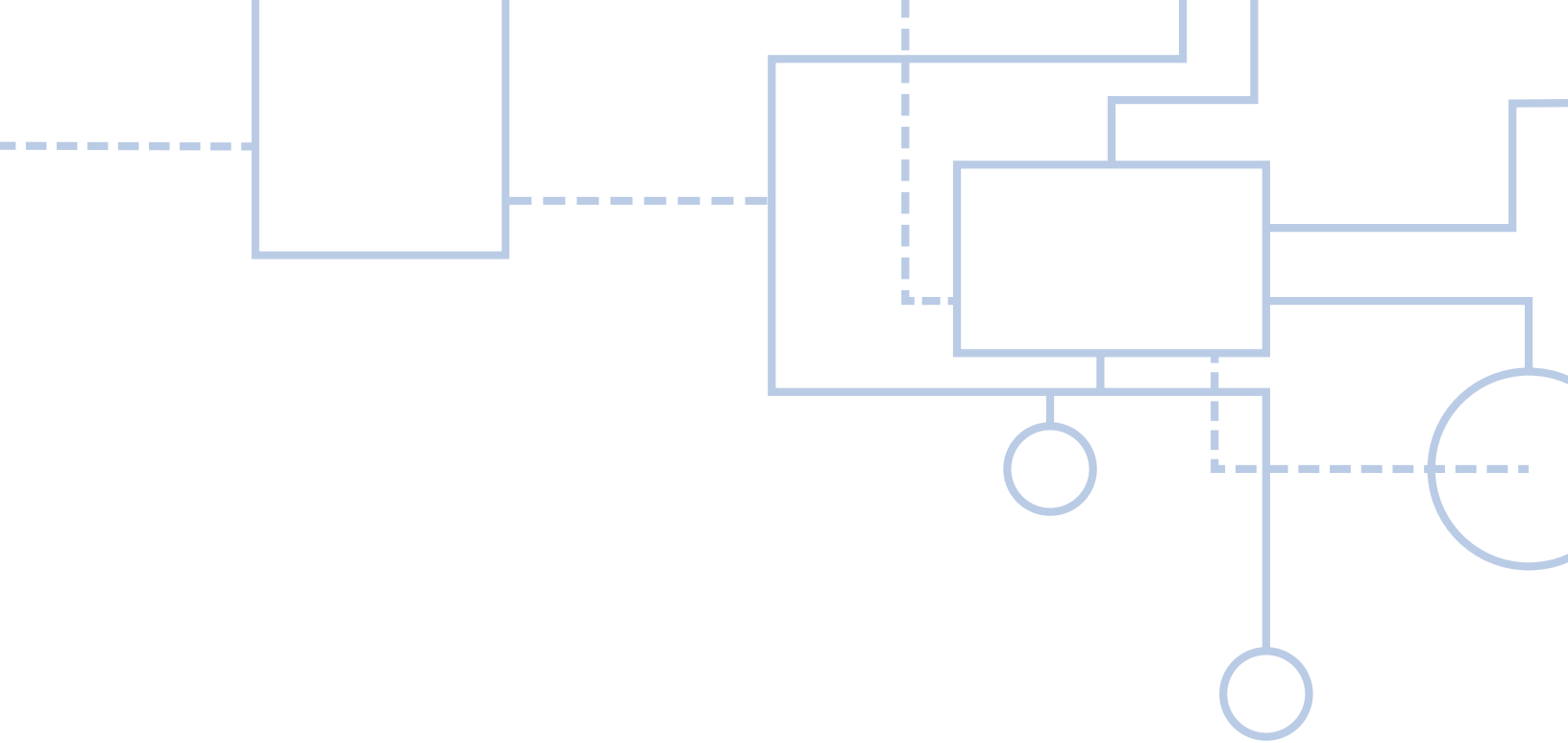
Dr. Gillen is an economist who holds a position as a Senior Research Fellow with Drexel's Lindy Institute for Urban Innovation. Prior to joining Drexel, Dr. Gillen was a Senior Research Consultant with the University of Pennsylvania's Fels Institute of Government. With a background in urban economics and real estate finance, Dr. Gillen's research and consulting practice is concentrated in applied work in the analysis of public finance and operation of urban real estate markets, including their fiscal, economic, and financial implications. This work is deployed in advising both public and private sector entities on the costs and benefits of public policy options, as well as the design and implementation of local economic development strategies.

Dr. Gillen's past clients have included the Pew Charitable Trusts, the Delaware Valley Regional Planning Commission, the Philadelphia Tax Reform Commission, Jones Lang LaSalle, the New Jersey Council for Affordable Housing, the Congress for New Urbanism, the Pennsylvania Housing Finance Authority, the Pennsylvania Horticultural Society, First American CoreLogic, the Philadelphia Redevelopment Authority, the Schuylkill River Development Corporation, the Philadelphia Housing Authority, the William Penn Foundation, and the U.S. Geological Survey. Dr. Gillen's research has been cited in *The Wall St. Journal*, *The New York Times*, *The Philadelphia Inquirer*, *The Philadelphia Daily News*, and *Philadelphia Magazine*. He has testified multiple times on matters of real estate markets and public policy to Philadelphia City Council, the Pennsylvania State Legislature, and the U.S. Congress.

Dr. Gillen received his Ph.D. in Applied Economics in 2005 from the Wharton School of the University of Pennsylvania, and received both the U.S. Department of Housing and Urban Development Dissertation Award and Lincoln Land Institute Dissertation Fellowship. His research in urban economics appears in numerous publications and is cited in various policy applications, and his quarterly reports on the current state of the Philadelphia region's real estate markets receive substantial local attention.

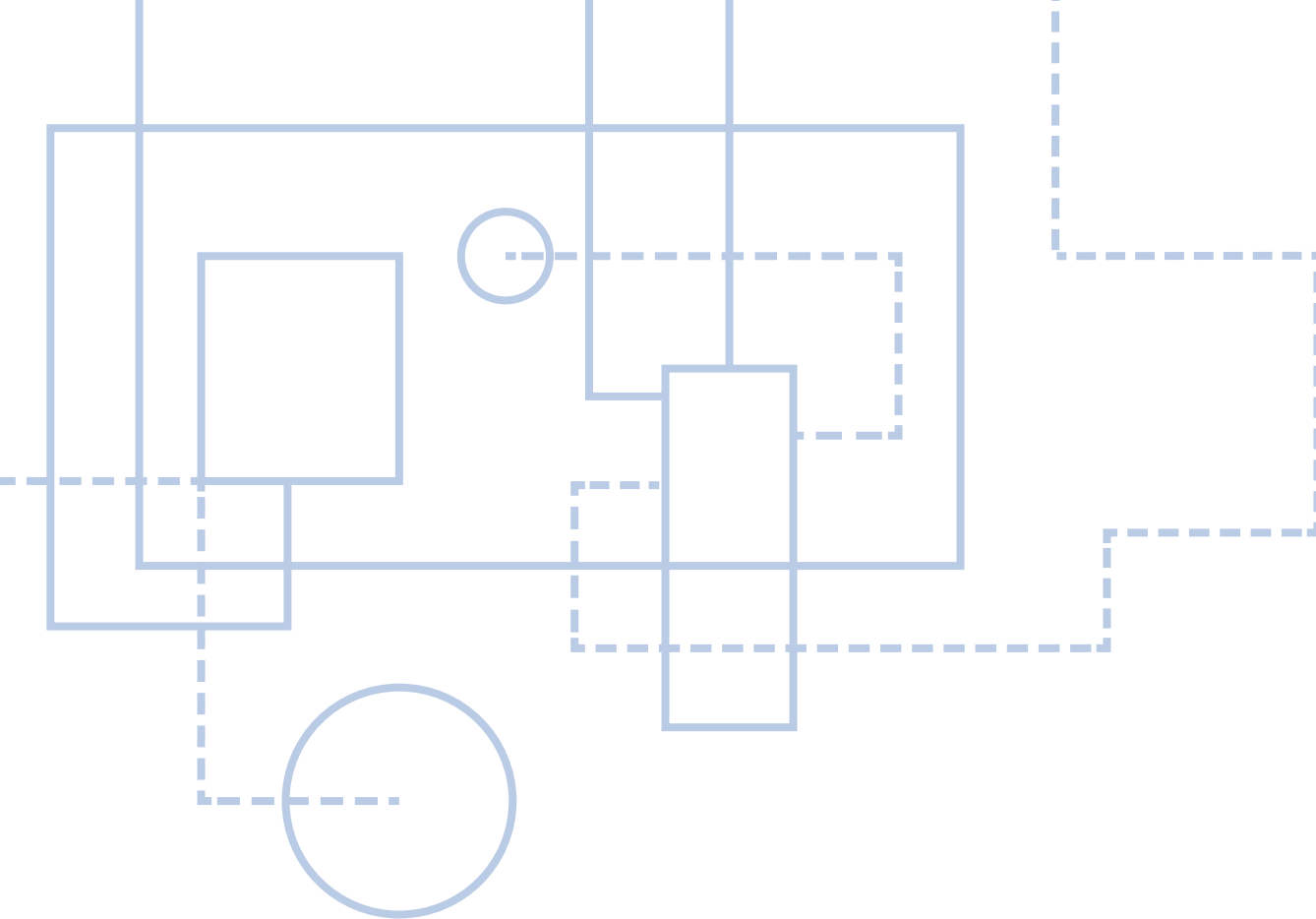
The Philadelphia Inquirer and Daily News have described him as "a well-respected and highly regarded economist"⁽¹⁰⁾ "who has brought order and credibility to housing data over the last several years as a neutral, not an industry, source"⁽¹¹⁾ and is "the foremost expert on property values in the Philadelphia region."⁽¹²⁾

Dr. Gillen also serves as a board member of the Building Industry Association of Philadelphia, the Pennsylvania Builders' Association, and the Greater Philadelphia Association of Realtors. Prior to attending Wharton, Dr. Gillen worked for the Federal Reserve Board of Governors and HUD's Federal Housing Finance Agency (FHFA).



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The Lindy Institute for Urban Innovation is built around a single ambitious goal—that of making Drexel University the most civically engaged university in the nation. The institute serves as a university-wide think tank established to engage in multidisciplinary problem solving for urban challenges locally, nationally, and globally, and provides a hub for Drexel and its partners to incubate and launch innovative urban initiatives while promoting experiential learning, public service, and scholarly work by students, faculty, and professional staff.

<http://drexel.edu/lindyinstitute>



THINK | DO | SUPPORT GOOD

The Scattergood Foundation believes major disruption is needed to build a stronger, more effective, compassionate, and inclusive health care system—one that improves well-being and quality of life as much as it treats illness and disease. At the Foundation, we THINK, DO, and SUPPORT in order to establish a new paradigm for behavioral health which values the unique spark and basic dignity in every human.

www.scattergoodfoundation.org

SCATTERGOOD
THINK | DO | SUPPORT

Peg's Foundation believes in relevant and innovative, and at times, disruptive ideas to improve access to care and treatment for the seriously mentally ill. We strive to promote the implementation of a stronger, more effective, compassionate, and inclusive health care system for all. Our Founder, Peg Morgan, guided us to "Think Bigger", and to understand recovery from mental illness is the expectation, and mental wellness is integral to a healthy life.

www.pegsfoundation.org

