

## Healthy Communities

Exploring the Intersection of Community Development and Health

The Healthy Communities Initiative was designed to enrich the debate on how cross-sector and place-based approaches to revitalize low-income communities might both revitalize neighborhoods and improve health. The idea is simple: those who work on making low-income communities function better (by building high-quality affordable housing, financing small businesses, and creating community assets such as charter schools, clinics, or daycare centers) should work closely with the health sector to coordinate those community-improving efforts in a way that promotes better health outcomes over the life course. The Federal Reserve System and the Robert Wood Johnson Foundation created the Healthy Communities Initiative to encourage stronger linkages between the two sectors and move them forward towards a healthier future.

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## [Community Development, Health's New Partner](#)

By Andriana Abariotes

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<http://www.leadershipandcommunity.com/2012/11/05/community-development-healths-new-partner/>

Last week, the Federal Reserve Bank of Minneapolis joined with the Amherst H. Wilder Foundation, the Robert Wood Johnson Foundation (RWJF), and the Blue Cross/Blue Shield of Minnesota Foundation (BC/BS) to sponsor the [Minnesota Healthy Communities Conference](#) that brought together public health and other health officials and practitioners alongside community development practitioners and **Community Development Financial Institutions** (CDFIs) to pursue new thinking and partnerships that can better address health outcomes and widening health disparities in communities across the state. It was a good local start to a conversation that has been emerging nationally over the past few years.

At the center of this conversation are “social determinants of health”—the social and economic conditions of families and individuals and the neighborhoods that surround us, which are nearly half as likely to influence our health as our genetics. In fact, BC/BS Foundation and Wilder Research have found that life expectancy can vary by as much as 13 years depending on where you live along I-94 between Minneapolis and St. Paul.

Dr. Risa Lavizzo-Mourey, President and CEO of RWJF, inspired conference participants through her keynote address, sounding the call for not only coordination but convergence between the missions of community development and public health. She recalled remarks from a previous Fed conference that “those who design our living environments are the most important public health workers of our time.” She challenged the audience to get specific, rethink traditional models for return on investment, and improve how we measure this work.

These are good challenges for the community health and community development sectors to take on, and many are finding new ways to work together. Two great community/health examples where my organization has invested are [Northpoint Health and Wellness](#) where the continued expansion of its clinic and campus can not only provide quality health services but also serve as an anchor in the redevelopment of Penn and Plymouth Avenues in North Minneapolis, improving community safety and providing access to jobs. And [Frogtown Farm](#), where local residents are seeking to reuse the former Wilder Foundation site to increase production and access to fresh food, and protect green space within the Frogtown neighborhood in St. Paul.

Emerging are also local examples of the convergence sought by Dr. Lavizzo-Mourey. One of the most notable being the [Backyard Initiative](#)—a community partnership led by Allina Health and the Cultural Wellness Center to engage residents in a completely different conversation and approach to their health. It is innovation playing out in real time, where deep listening and learning are core to changing the nature of the relationship between a major health provider and its patients and neighbors. Also changing are residents’ sense of ownership and efficacy and their own relationship to each other and to institutions in the neighborhood.

These are just a few examples but there are many, many more happening across the state. Together, these efforts demonstrate the strength of our broader community development infrastructure, in which leaders and organizations continue to collaborate and innovate to achieve greater impact. I truly believe that community development as a sector is the key to influencing social determinants of health. We just need to figure out how to unlock the full potential of the emerging community health and community development partnership. I’m looking forward to continuing the conversations started last week and the many more happening in our community

**[http://www.minneapolisfed.org/community\\_education/mnhealthycommunities/index.cfm?](http://www.minneapolisfed.org/community_education/mnhealthycommunities/index.cfm?)**

**<http://www.northpointhealth.org/>**

**[http://frogtownfarm.org/Frogtown\\_Farm/Welcome.html](http://frogtownfarm.org/Frogtown_Farm/Welcome.html)**

**[http://www.allinahealth.org/ahs/aboutallina.nsf/page/Brief\\_Backyard\\_Initiative](http://www.allinahealth.org/ahs/aboutallina.nsf/page/Brief_Backyard_Initiative)**

## **Active engagement**

The Backyard Initiative supports residents as they define the health needs of their community to become active partners in their health and the health of their community.

## **Addressing root causes of illness**

Research shows that social determinants of health including isolation and lack of social support and have a profound impact on our health.

## **Building connections**

The Backyard Initiative incubates new ideas to promote health in addition to treating illness.

It is one of the signature community health improvement initiatives of [The Center for Healthcare Research & Innovation at Allina Health](#). Partners include the [Cultural Wellness Center](#), [HOPE Community](#), [Portico Healthnet](#) and [LISC-Twin Cities](#).

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## **Allina leaders selected for national leadership program to eliminate racial and ethnic disparities in health care**

**MINNEAPOLIS 05/10/2011**--[Penny Wheeler](#), MD, chief clinical officer of [Allina Hospitals & Clinics](#) and Pamela Jo Johnson, MPH, PhD of Allina's [Center for Healthcare Innovation](#) have been selected to participate in a year-long executive leadership program designed to tackle racial and ethnic disparities in health care.

"We are committed to not having geography, ethnicity, gender, or poverty determine the health care one receives. Through this program, we will help ensure that our mission of exceptional care applies equitably to all," Dr. Wheeler said.

### Disparities Leadership Program

The Disparities Leadership Program is the first program of its kind in the nation for health care leaders and is led by the Disparities Solutions Center at Massachusetts General Hospital in Boston.

"Research will be an important component to identify gaps in care for specific patient groups, understand why gaps exist, and then, evaluate new ideas that address them. This is a valuable opportunity to create research-based innovations in care delivery that will improve the health of all the patients Allina serves," Dr. Johnson said.

Drs. Wheeler and Johnson are two of only 34 individuals from 16 health care organizations from around the United States to be selected for the Disparities Leadership Program 2011-2012. They will join a cohort of 74 other organizations who have participated in the Disparities Leadership Program from 2007 to 2012.

The goal of the Disparities Leadership Program is to create a cadre of health care leaders who have:

- in-depth knowledge of the research and causes of health care disparities;
- cutting-edge, quality improvement strategies and skills to address disparities; and
- leadership skills to implement solutions to help transform their organizations.

"This program is about developing new leaders and taking action. It is about helping individuals and their health care organizations understand the critical connection between improving quality and eliminating disparities in care through a concerted, coordinated effort to change our health care system," said Joseph R. Betancourt, MD, MPH, Director of the Disparities Solutions Center at Massachusetts General Hospital, and a member of the Institute of Medicine Committee, which produced the 2002 landmark report *Unequal Treatment: Confronting Racial/Ethnic Disparities in Health Care*.

This report revealed striking disparities in the quality of health care services delivered to minority and white patients -- even for patients of the same socioeconomic background and access to care. "These health care organizations are clearly distinguishing themselves as national leaders by taking action to identify and address disparities," Dr. Betancourt said.

## Disparities Solutions Center



The Disparities Solutions Center is dedicated to the development and implementation of strategies that advance policy and practice to eliminate racial and ethnic disparities in health care. To learn more, go to [mghdisparitiessolutions.org](http://mghdisparitiessolutions.org).