

THE CALIFORNIA ENDOWMENT CENTERS FOR DISEASE CONTROL AND PREVENTION KAISER PERMANENTE THE KRESGE FOUNDATION NEMOURS ROBERT WOOD JOHNSON FOUNDATION W.K. KELLOGG FOUNDATION

May 28, 2010

The Honorable Kathleen Sebelius Secretary, U.S. Department of Health and Human Services Hubert H. Humphrey Building 200 Independence Avenue, SW – Room 120F Washington, DC 20201

Dear Secretary Sebelius,

As leading health funders and CEOs of many of the country's largest foundations and nonprofit health providers, we want to thank you for your tireless—and successful—efforts to increase access to health care and improve the health of the vast majority of Americans.

While access to health care is critical, a large and growing body of research shows that health status is influenced far more by the environments in which we live, work, learn, and play. These environments have a profound impact on individuals' diet, physical activity, and safety. Thus we are doubly pleased that the Patient Protection and Affordable Care Act (P.L. 111-148) includes the Prevention and Public Health Fund ("the Fund"). This one relatively small part of health care reform offers a significant opportunity to improve health, improve health equity, save money, and reduce the demands on our health care system.

In 2006, compelled by the knowledge that where people live affects their health, our organizations formed the Convergence Partnership to focus on creating environments that support healthy eating and active living. We see the Fund as a historic opportunity to create a new way of thinking about health that would improve communities—whether neighborhoods, towns, cities or regions—across the country. In fact, we strongly recommend that the Fund be used to catalyze and further enhance community prevention as a new approach to achieving health—healthy people in healthy places. By focusing the Fund on community prevention, and on developing the capacity necessary to advance such efforts, we believe the Fund can help optimize the health of everyone by creating healthier, safer and more resilient communities.

In order to realize this potential, the Fund needs to:

- Concentrate on community strategies with a focus on broad-scale change that will have measurable impact on population health.
- Target resources to communities with the greatest gaps in health status and the greatest disease burden.

- Ensure participation of diverse community groups and stakeholders representing various sectors by funding community-led efforts as well as by funding efforts in which community leaders and their organizations are in partnership with the public health system.
- Lay the groundwork for the National Prevention Strategy that will be developed as the Fund is implemented.

Allow us to elaborate.

Focus on community health strategies. Research shows that health problems are linked to conditions in communities. The neighborhoods where we live—whether we have access to healthy food, safe places to walk and play, good housing, steady jobs, connections with neighbors, friends, and community institutions-influence our health status. Therefore, if we are to improve health and prevent disease and injury, we must attend to the environments surrounding people. This requires a comprehensive understanding of prevention that is not narrowly confined to the medical system. While clinical prevention is important, particularly when connected to community-based prevention efforts, to realize the full potential of prevention, we must focus on changing the policies and systems that shape neighborhoods so that they foster health. The good news is that our collective experience supporting communities and community leaders across the country is replete with examples of how prevention can extend far beyond medical or classic public health approaches to transform communities to support health. With a focus on cross-sector participation and collaboration aimed at environmental and policy change, prevention can strengthen community environments and improve health for whole populations. Leaders representing diverse sectors-agriculture, transportation, planning, education, parks, and business among others-must be drawn in and involved. Resources from The Fund and the Community Transformation grants are prime opportunities to ensure this focus.

Target resources in communities with the greatest burden of disease. ZIP codes shouldn't determine life expectancy—and they don't have to if we improve the environments in which children and families live. Communities without access to healthy and affordable food and safe places for children to play also have the highest rates of childhood obesity, diabetes, asthma, traffic-related injuries and other injuries and diseases. Residents in such communities also die younger than those who live elsewhere. Across our different institutions, we are seeing the desire for improved health outcomes fuel a shift in prevention strategies to rectify health inequities. Resources from the Fund and the community Transformation grants should support similar efforts by focusing on the places where unhealthy environments make it hardest for families to eat well and be active. Strategies for doing so should be developed by community leaders or in partnership with these leaders.

Ensure participation and leadership from diverse community groups and stakeholders. Our grantees and partners are currently engaged in very promising community prevention work. Their efforts are building a body of strong empirical evidence that demonstrates the value of partnering across sectors to transform environments. They're also showing how the innovation and flexibility needed to try new approaches often comes from community-based groups. While community prevention has been a priority for local and state health departments, which have a critical role in efforts to create healthier communities, we strongly encourage you to ensure that

the Fund and the Community Transformation grants are awarded in such a way that they clearly provide substantial support for work by community groups. The extensive knowledge and experience of community groups and their leaders are indispensible assets that should lead and influence strategies at local, state, and federal levels. Using creative approaches will be essential in communities of all sizes, but such efforts will be especially important in areas of high need.

Emphasize community prevention and reducing health disparities in the National

Prevention Strategy. A National Prevention Strategy implemented with community prevention as a foremost objective and emphasizing community leadership and partnerships between community groups and health departments can change the way we improve health across the country. The National Prevention Strategy should include a focus on policy change. Policy goals should focus on reducing health disparities, delineated at national, state, and local levels, and in the multiple sectors that impact health and health disparities in particular. Further, the practices of businesses and community organizations must be considered to ensure that they advance rather than diminish positive health outcomes.

The common thread here is partnership—but partnership on equal footing between community groups and health departments. The successes we're seeing in communities have grown from approaches that brought together local leaders, residents, and public health practitioners to focus on improving the conditions in which people live, work, and play. Health departments, school districts, planning commissions/departments, transportation officials, police departments, air resources agencies, local businesses, childcare centers, and community groups worked together, and resources and decision-making were shared. Together, the focus on policy and environmental change is shifting the rules that govern our environments to make people and places healthier.

Given the opportunity, community residents will provide the leadership and, importantly, the lessons learned from their work that can be shared with communities all over the country. It is their wisdom and experiences that will help build authentic, effective, and lasting change. The policies and practices they are putting in place can be applied to improving environments and creating more equitable outcomes everywhere.

Our goal is ambitious. But we can succeed in ensuring healthy communities for every resident if we focus on community prevention, learn from experience, and share the evidence that is being amassed as people nationwide transform their communities to support health.

We would be delighted to meet with you and your staff to elaborate on our recommendations and discuss ways to work together to create healthy communities.

Please contact Judith Bell, President of PolicyLink, jbell@policylink,org, 510-663-2333, for more information on how the Convergence Partnership's experience can inform the development of the Fund or to arrange a meeting to explore these issues in greater depth.

Sincerely,

Ralan,

Robert K. Ross, MD President and CEO The California Endowment

Debbie I. Chang, MPH Vice President, Policy and Prevention Nemours

Kaymondf. Bayter

Raymond J. Baxter, PhD **Senior Vice President Community Benefit**, **Research and Health Policy Kaiser Permanente**

Deblie I. Chang Horse dang Morry

Risa Lavizzo-Mourey, MD, MBA President **Robert Wood Johnson Foundation**

Rip Rapson CEO The Kresge Foundation

Sterling K. Speirn CEO W.K. Kellogg Foundation

cc: Dr. Thomas R. Frieden **Rosie Henson** Dr. Dora Hughes Dr. Howard Koh