

CENTERING RACIAL JUSTICE IN HOSPITAL COMMUNITY BENEFIT INVESTMENT

AUTHENTIC COMMUNITY ENGAGEMENT STRATEGIES IN COMMUNITY HEALTH NEEDS ASSESSMENTS

The work to address unmet health needs for people of color and people with low incomes who have faced longstanding unfair and discriminatory barriers to health and health care is a long process. Meaningful change requires time, commitment, authentic inclusion, and constructive dialogues between community leaders and residents, health care organizations and state and local public health officials.

One opportunity for achieving this goal is through the next round of Community Health Needs Assessments that will be conducted by non-profit hospitals this fall and early in 2022. Every three years non-profit hospitals must, under a federal requirement ([Section 501\(r\)\(3\)](#)), partner with community members, representatives of underserved populations, and public health leaders to identify unmet health needs and develop a Community Health Needs Assessment (CHNA) and Implementation Strategy to address identified issues. Many hospitals will undoubtedly approach their assessment and planning with an eye for minimally complying with the federal regulations. However, at Community Catalyst, we see CHNAs as opportunities for community-based organizations to forge strong partnerships with hospitals, and meaningfully engage in the process to ensure that hospitals' limited community benefit resources are appropriately targeted to achieve equity and rectify longstanding injustices.

Existing challenges, such as longstanding distrust, power differentials, lack of support for nurturing robust community engagement, and conflicting priorities and expectations, often prevent community organizations and residents from engaging with hospitals in community benefit planning. Additionally, lack of clear federal guidance regarding effective outreach strategies results in hospitals utilizing widely differing approaches that may not be inclusive of diverse representation of community members.

Experienced community and hospital leaders from Cleveland and Minneapolis offer us valuable lessons on what it means to build authentic community-hospital partnerships and support strong community engagement. These partners share their experiences below, as well as presenting a more in-depth discussion on a [panel discussion webinar](#) Community Catalyst hosted, focusing on community engagement.

A Vision of Change and University Hospitals in Cleveland joined forces to tackle structural racism, one of the top priorities identified in the Health Improvement Partnership-Cuyahoga (HIP-Cuyahoga).

"We wanted to see our neighborhoods flourish... and with that we focus on the importance of resident inclusion... We wanted to remain included in the conversation when it comes to the things that happen within our community." - Delores Collins, aka Miss Dee, Founder and Executive Director of A Vision of Change, Inc.

The key to success in transforming, reforming, and strengthening in neighborhoods is resident inclusion. Indeed, for 28 years, Delores Collins, Founder and Executive Director of [A Vision of Change](#), has led her organization through a holistic approach to improve the health and well-being of community residents through empowering individuals to navigate challenges. As a small grassroots organization, she acknowledges that community voices often go unheard in large institutions. However, the opportunity to work on a steering committee with institutions such as University Hospitals through the [Health Improvement Partnership-Cuyahoga \(HIP-Cuyahoga\)](#) helped elevate community voices and utilize a collaborative community-driven approach.

The HIP-Cuyahoga Consortium consists of more than 100 community partners from diverse social and demographic backgrounds and neighborhoods in Cuyahoga County who come together with one single mission: To build opportunities for everyone in Cuyahoga County to be healthy. To achieve this goal, the Consortium prioritizes centering health and equity in all policies. Residents are encouraged to learn about the community conditions in which people live, identify the social needs that help improve lives, and discuss solutions. To ensure all members remain engaged, the HIP-Cuyahoga Consortium creates an environment where everyone feels safe at meetings, such as providing proper personal protective equipment, or taking time to understand the process by breaking down jargon.

University Hospitals, a multibillion-dollar health system situated within African American communities in Cleveland, recently joined Cuyahoga County and Cleveland in [declaring racism as a public health crisis](#). Danielle Price, Director of Community Health Engagement at University Hospitals, stressed the importance of capacity building when having conversations about community health and dismantling structural racism, describing as essential the work with leaders to develop trusted relationships with community residents and groups such as A Vision of Change.

"When you're talking about racism, if you don't take the time to build the capacity of people to understand racism to know where they are to be self-aware to feel comfortable talking about it, if you think you're going to just jump out there on a strategy, it probably is just going to be a one off and not something that lasts." - Danielle Price, Director of Community Health Engagement at University Hospitals.

Standing by their word, through the Greater University Circle Initiative, University Hospitals offered racial equity trainings to over 7500 residents from different social and economic backgrounds and neighborhoods, engaged them in a cross-sector initiative mapping out the intricate connections in which systems create and sustain structural racism. Recently, the hospital system launched a Social Justice and Equity Taskforce conducting 34 different focus groups across the system to gather feedback and strategize priorities and real-world solutions.

Through the Backyard Initiative, the Cultural Wellness Center and Allina Health draw on traditions from different cultural resources to improve community and individual health in Minneapolis.

Prior to the [Backyard Initiative](#), despite having world class health care provided by Allina Health and others, Minneapolis was seeing poor health outcomes in some areas (such as high rates of infant mortality in Black communities). Residents were blamed for a system that failed them. There was no shared control of power, as well as no shared vision of priorities in hospital community benefit programs.

“The Cultural Wellness Center has grown and become a place that draws on traditions from many cultural sources to teach health habits that people can embrace and sustain on their own. [It’s] really a place where we consider health to be happening through a cultural reconnection and cultural rediscovery.” – Atum Azzahir, Founder and Executive Director of the Cultural Wellness Center.

The [Cultural Wellness Center](#), founded 25 years ago, has been a home for the community to learn and grow from personal experiences. Since its inception, instead of searching for reasons why Black babies died, Atum Azzahir, Founder and Executive of the Cultural Wellness Center, engaged Black mothers, grandmothers, and elders to discuss why a number of them lived. Within two years, between 1994 and 1996, Elder Atum and her team interviewed more than 1000 elders and women from various cultural

communities. They learned that babies thrived when they were born in the ways that honored their cultural traditions. And individualism, loss of culture, and loss of community were the factors that made people sick. These findings, what are known as “People’s Theory of Sickness,” have become the foundation to the Cultural Wellness Center’s community engagement efforts as well as to its partnerships with Allina Health through the Backyard Initiative.

Initially, the Cultural Wellness Center hosted biweekly community gatherings – dinner dialogues – where Allina Health’s executives listened to community members and activists from various walks of life sharing their experiences about how the existing health care practices were harming the community. The conversations were never easy. It took time and very difficult conversations to get to a level of understanding allowing community residents and the hospital to effectively work and learn from one another.

Allina Health staff and the community members working with the Cultural Wellness Center were seeing the same health challenges, but from very different perspectives. While health care providers at Allina Health were accustomed to viewing health care through the lens of data and clinical care, the Cultural Wellness Center was dedicated to seeing health care focused on sharing and growing from life experiences and building resiliency centered around culture.

As dialogues continued, the relationship between the community and Allina Health became one of mutual respect. Health priorities changed for both Allina Health and the community – focusing on social cohesion, social support, health and cultural education, and health empowerment. Allina Health worked collaboratively with residents, talking directly with community members and paying them to be a part of the work. People in the community, especially youths, became more engaged and took ownership of their health care. As they conduct their Community Health Needs Assessment, Allina Health is intentionally contracting with four community partners to host focus group discussions with different cultural communities. According to Alison Pence, Director of Community Engagement at Allina Health, the intent for these focus group discussions is to hear from residents in a setting where they feel comfortable, speaking with people whom they are used to speaking with. After more than a decade, the Backyard Initiative has become a community health hub that is located steps away from the Allina Health headquarters and is now foundational to shaping health care in the community.

“When I came to Allina Health, the way Allina Health thinks about working with community is completely different from anywhere else that I’ve worked before. Just the entire perspective that community is something that is to be honored and is to be respected.” – Alison Pence, Director of Community Engagement at Allina Health.

As we learned from our panelists, with strong wills and dedication, [meaningful community-and-hospital partnerships](#) can be created and sustained. The Health Improvement Partnership-Cuyahoga in Cleveland and the Backyard Initiative in Minneapolis help set a precedent for how non-profit hospitals across the country can engage with their communities in the next round of Community Health Needs Assessments.