



ARCHI QUARTERLY BREAKFAST

December 5, 2018

WELCOME & INTRODUCTIONS

Madelyn Adams, Kaiser Permanente



2018 Community Health Leadership Awards

Atlanta Regional Collaborative for Health Improvement
NBC Community Development Corporation, Kansas City, KS
San Luis Valley Local Foods Coalition
YMCA of Greater Louisville





EXPAND INSURANCE

Sign Up for Legislative Updates in 2019



ATLANTA TRANSFORMATION SCENARIO



FAMILY PATHWAYS



EXPAND INSURANCE



INNOVATION FUNDS



GLOBAL BUDGETING



CARE COORDINATION



HEALTHY LIFESTYLES



CAPTURE AND REINVEST

Health Equity

Desired Outcomes for 2018, Year of Learning

By the end of the first year of this leadership learning experience, our vision is that:

ARCHI partners are further grounded in core concepts:

- Equity, structural racism, historical context
- Health as connected to everything else

ARCHI partners are further equipped with:

- A shared language
- Tools and skills to deepen our equity-based approach



ARCHI Health Equity Learning Series 2018

March 7th- Health Impacts of Housing Discrimination part 1

April 25th: Race and Place in Atlanta

June 7th- Health Impacts of Housing Discrimination part 2

June 22nd- Rides to Wellness

September 5th- Health Equity: The Immigrant and Refugee Experience

September 26th- the Physiology of Health Inequity

December 5th- Key Learnings and Next Steps



Health Race Equity Multi-Year Change Process

Years 1-3: Explore the Problem/Opportunity

- What does health and race equity mean?
- What are the inequities that persist in our region?
- What are the forces (historical and current) that perpetuate them?
- In what ways are we (unintentionally) perpetuating inequities?

Years 2-5: Explore Solutions

Years 3-28: Implement, Learn, Adjust



AGENDA

- **Health Equity: Core Concepts**
- **Insights from ARCHI Community of Practice**
- **Considering Our Next Steps**
- **Announcements & Closing**





**SIMRAN NOOR
JEN WILLSEA**

LEAD FACILITATORS



Dr. Camara Jones

The Cliff of Good Health

[Video Link](#)

EXPLORING CORE CONCEPTS

Share:

- Your name
- What stands out to you from the video
- The type of work you do (ambulance, net, fence, pushing people away from the cliff)



HEALTH EQUITY

Health equity is assurance of the conditions for optimal health for all people. Achieving health equity requires:

- valuing all individuals and populations equally,
- recognizing and rectifying historical injustices,
- and addressing contemporary injustices by providing resources according to need.

Health and health care inequities will be eliminated when health equity is achieved.



Adapted from Dr. Camara Jones



Dr. Camara Jones

Racism and the Gardner's Tale

[Video Link](#)

EXPLORING CORE CONCEPTS

Table Discussion:

- What was new for you in this way of defining racism?
- What are the connections between race, class and health equity in Atlanta? How does this come up in your work?
- What would be the impact of centering race and class in our health equity work moving forward?



WHITE PRIVILEGE

Refers to the unquestioned and unearned set of advantages, entitlements, benefits and choices bestowed on people solely because they are white. Generally white people who experience such privilege do so without being conscious of it.



WHITE SUPREMACY

A historically based, institutionally perpetuated system of exploitation and oppression of continents, nations and peoples of color by white peoples and nations of the European continent; for the purpose of maintaining and defending a system of wealth, power and privilege.



ARCHI COMMUNITY OF PRACTICE

May 2018-November 2018

Kim Anderson, Anderson Consulting

Robyn Bussey, ARCHI

Dawn Cooper, USG, Board of Regents

Gil Frank, Historic Westside Gardens

Tiffany Friesen, United Way of Greater Atlanta

Bonnie Hardage, Jessie Parker Williams Foundation

Yeou Jih, City of Atlanta

Alison Johnson, Housing Justice League

May Helen Johnson, Peoplestown

Kathryn Lawler, ARCHI

Columbus Ward, Peoplestown

Aisha Williams, Healing Community Center

Dan Williams, Community Foundation of Greater Atlanta

Facilitator: Jen Willsea

“Health [inequity] is not an accident, but a production of society.”

- Natalie Burke

“We are too focused on health as an individual issue. We are ahistorical. We are invested in the myth of meritocracy. This makes us feel powerless and not understand our power. Ask what can WE do rather than what can I do.”

- Camara Jones

“Equity can’t happen when policy is being done to people, not with people.” - Tom Weyandt

“Calling Atlanta ‘the city too busy to hate’ was giving ourselves a pass, allowing ourselves to forget all that has happened here. Ask ‘why are things the way we are’? We all traffic in mythologies.” - Doug Blackmon

“Begin by shifting the narrator to shift the narrative. We change by centering our voices, and early.” - Alison Johnson

“Equity is not fast or efficient.” - Odetta MacLeish-White

“Atlanta as the ‘Black mecca’ is a myth. Atlanta’s Black poor folks have consistently been abandoned by both Whites and by the Black elite.” - Maurice Hobson

“Racism saps the strength of the whole society.” - Camara Jones

What do we believe needs to come next?

1. **Health Equity is inseparable from Race and Class Equity, and therefore we must continue to name and center Race and Class Equity**
2. **Continued learning for ARCHI as a collaborative**
3. **Continued skill building for ARCHI as a collaborative**
4. **Application and integration into ARCHI's existing systems change story and strategy:**
 - a. What is ARCHI's role as a gardener?
 - b. What do racism and health equity have to do with each of ARCHI's strategy areas? Who do ARCHI's strategy areas advantage and disadvantage?
 - c. What do racism and health equity have to do with ARCHI's systems change strategy overall? Who does ARCHI's systems change strategy advantage and disadvantage?
 - d. How are resources currently allocated and how might they be allocated differently to advance health equity?
5. **Prioritize these conversations in and with under-resourced communities and communities of color, in particular Atlanta's poor Black communities**
6. **Establish a body of ARCHI leaders that advise and champion the health equity strategy**
7. **Staff this work**

CONSIDERING OUR NEXT STEPS

At Your Table:

What is most important to you given your engagement this year on health equity?

What do you believe should come next

Are there partners missing?

Issues you want to explore further?

How will you know ARCHI is committed to health equity not just in word, but through action?



ANNOUNCEMENTS & CLOSING

Kathryn Lawler

ARCHI PARTNERS



Alliant GMCF
American Cancer Society
American Diabetes Association
Arthur M. Blank Family Foundation
Atlanta Community Food Bank
Atlanta Community Health Interfaith Partners
Atlanta Housing Authority
Atlanta Humane Society
Atlanta Neighborhood Development Partnership (ANDP)
Atlanta Regional Commission
Atlanta Relay Bike Share
Atlanta Volunteer Lawyers Foundation
BlueFlowers.org
CareSource
Carter Center
Charitable Connections
ChildKind
Children's Healthcare of Atlanta
CHRIS Kids, Inc.
Clayton State University, School of Nursing
Club E. Atlanta
Common Market Georgia
Community Foundation for Greater Atlanta, Inc.
Community Health interfaith Partners
Community of College Park
Concerned Black Clergy
DeKalb County Board of Health
DeKalb County Government
Diabetes Community Action Coalition, Inc.
Emory Fuqua Center for Late Life Depression
Emory Healthcare
Emory University – Partners for Equity in Child and Adolescent Health

Emory University – Urban Health Initiative
Enterprise Community Partners
Families First, Inc.
Friends of Refugees
Fulton County Government
Gateway Center
Georgia Alliance for Health Literacy
Georgia Center for Nonprofits
Georgia Department of Public Health
Georgia Global Health Alliance
Georgia Health Policy Center
Georgia Higher Arts and Technology Training Institute
Georgia Institute of Technology
Georgia Primary Care Association
Georgia State University
Georgia Supportive Housing Association
Georgia Watch
Get Georgia Reading
Global Dialogues
Grady Health System
Health Equity Advocacy & Resource Center
Health Management Associates
Health Promotion Action Coalition, Inc
Hillside
Historic Westside Gardens Atl, Inc
I Can Be The Change
Insure Georgia
Jesse Parker Williams Foundation
Jesus Set the Captive Free
Kaiser Permanente of Georgia
Ladybug for Girls Foundation, Inc.
Legacy Community Housing Corporation
Live Living International Foundation

Marcus Autism Center
Mental Health America of Georgia
Metro Atlanta Urban Farm
Metropolitan Counseling
Midtown Assistance Center
Muni Cares, Inc.
Oakhurst Medical Centers
Odyssey Family Counseling Center
One Talent Inc.
Open Hand Atlanta
Partnership for Southern Equity
Perkins & Will
Piedmont Healthcare
Resurgia Health Solutions
Rimidi, Inc
RiteAid Pharmacy
Saint Joseph's Health System/Mercy Care
Saving Our Sons & Sisters International
Shepherd Center, Inc.
SK Collaborative
South Fulton Human Services Coalition
Southside Medical Center
Susan G. Komen Greater Atlanta
TechBridge
TQIntelligence, Inc.
Truly Living Well
United Way of Greater Atlanta
Veterans Empowerment Organization
Visiting Nurse Health System
Voices of Georgia's Children
Wellcare
Wellstar Health System
West End Medical Center Inc.

ATLANTA TRANSFORMATION SCENARIO



FAMILY PATHWAYS



EXPAND INSURANCE



INNOVATION FUNDS



GLOBAL BUDGETING



CARE COORDINATION



HEALTHY LIFESTYLES



CAPTURE AND REINVEST



BUILDING BETTER OUTCOMES

Health is not balanced in Atlanta. Many neighborhoods do not have the resources they need to live active, healthy lives. Not all Atlantans have access to healthcare. **Historic inequities** hold back too many individuals and families.

How will ARCHI drive health systems transformation? By committing to a 28 year plan that comprehensively addresses health and health equity, far beyond healthcare.

What does health for all look like? Expanding insurance and economic opportunity, promoting healthy lifestyles and efficient healthcare provision will improve health status and increase the region's economic vitality.

INNOVATION FUNDING

Diverse investments support the development of new models of care and new alignments between clinical and non-clinical services.

CAPTURE & REINVEST

Payers calculate healthcare cost savings from interventions and invest a percentage into community health.

GLOBAL PAYMENTS

Healthcare dollars incentivize care that keeps people healthy, not just treating them when they are sick.

FAMILY PATHWAYS

Improve economic prospects for families and students including education, job training affordable housing and transportation.

CARE COORDINATION

Providers share information across systems to reduce duplication. Supportive services help individuals and families navigate clinical and community services.

HEALTHY LIFESTYLES

- Reduce smoking and tobacco use
- Improve diet and nutrition
- Increase exercise and physical fitness
- Reduce drug and alcohol use
- Reduce unprotected sex and STI transmission
- Increase preventative care efforts for physical and mental health

EXPAND INSURANCE

Bolster rates of health insurance coverage.

IN 2040 WE WILL SEE

+7% in worker productivity

+16% in access to preventative & chronic care

-45% in non-urgent ER visits

-13% in healthcare costs

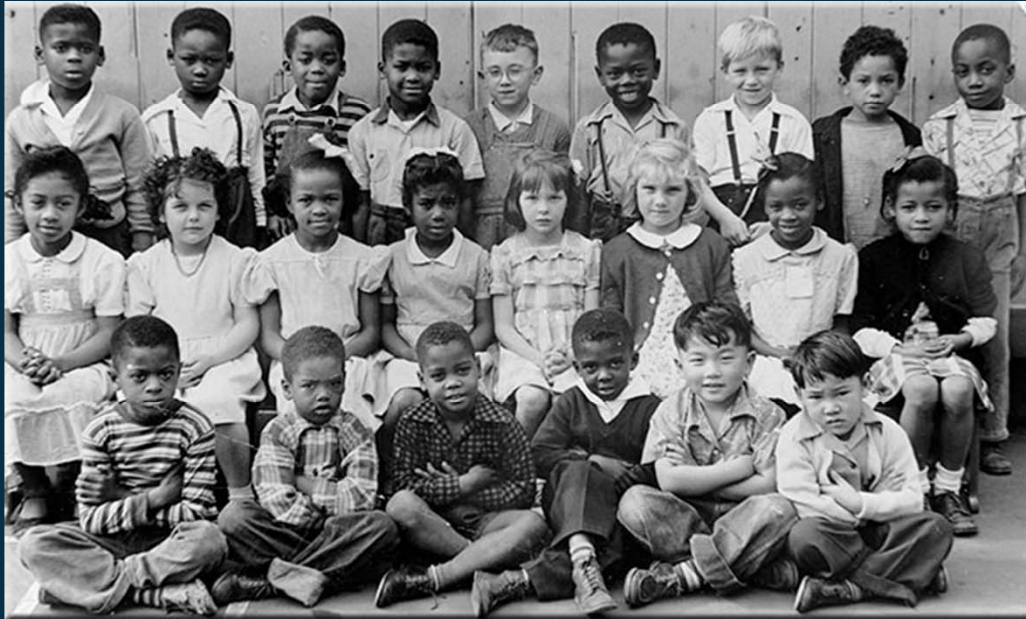
-13% in hospital readmissions

archi 

UPCOMING EVENTS

ARCHI Quarterly Breakfast: February 13

Registration available at www.archicollaborative.org



HEALTH IS A HUMAN RIGHT

[RACE AND PLACE IN AMERICA]

WHERE:
College of Law
Research Centers and Institutes
4th Floor
85 Park Place
Atlanta, GA 30303

OPEN TO THE PUBLIC:
Monday-Friday
9 a.m. - 5 p.m.