archi

Bottom line. Balanced health. Better beings.

ARCHI & GGHA JOINT BREAKFAST

June 12, 2019

Georgia Global Health Alliance

WELCOME & INTRODUCTIONS

Karen Minyard, ARCHI

ATLANTA TRANSFORMATION SCENARIO

FAMILY PATHWAYS

EXPAND INSURANCE

INNOVATION FUNDS

GLOBAL BUDGETING

CARE COORDINATION

HEALTHY LIFESTYLES

CAPTURE AND REINVEST

Health Equity

ARCHI PARTNER ASSESSMENT

Spring 2019

A FEW HEADLINES

- 19 respondents were unsure if their organization had signed an ARCHI partner agreement

- 78% of respondents strongly or somewhat agree that being a part of ARCHI motivates them to do more than is required in their role

- 88% of respondents indicated that they had a clear understanding of ARCHI's priorities

- 92% of respondents strongly or somewhat agree that diverse perspectives are valued within ARCHI

- Individuals have acquired useful knowledge, developed valuable relationships, and have a greater impact due to ARCHI participation

AGENDA

- **ARCHI Overview**
- **Health Equity Overview**
- **Keynote speaker from Global to Local – Seattle**
- **Health Equity Practices in Global Health Panel – Atlanta**
- **Table Dialogue**
- **Announcements & Closing**

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Bottom line. Balanced health. Better beings.

GEORGIA GLOBAL HEALTH ALLIANCE

Mission: The GGHA exists to advance global health equity by promoting and facilitating collaboration amongst business, academia, non-profits and government organizations within Georgia and linking them with partners in the US and other countries.

CONNECT

MOBILIZE

ADVOCATE & EDUCATE

GROW

www.gghalliance.org | @GGHAlliance

DEKALB/FULTON COUNTY TO WORLDWIDE STATISTICS

Infant mortality rates

- The infant mortality rate in 2017 was 8.1 per 1,000 live births in DeKalb county across all races and sexes. In Thailand, the IMR is 8.2 per 1,000 live births across all races and sexes in 2017 (UN Inter-Agency Group for Child Mortality Estimation, 2017).

HIV Prevalence

- In DeKalb county in 2015, 1,167 of every 100,000 people were living with HIV (OASIS, 2015). In Libya, there was 1,168 of every 100,000 people living with HIV (Our World in Data, 2015).

- In Fulton County, 1,599 of every 100,000 people were living with HIV in 2015 and there was 1,475 of every 100,000 people living with HIV in Turkmenistan (AIDSVU and Our World in Data, 2015).

NON-COMMUNICABLE DISEASES

In DeKalb County and Fulton County, ischemic heart and vascular disease is ranked as the number one leading cause of death between the years of 2013-2017 (OASIS, 2017).

The visualization map in the link below demonstrates the burden of non communicable diseases by age-standardized DALY [disability adjusted life year) rates per 100,000 individuals between 1990-2017.

https://ourworldindata.org/grapher/burden-of-disease-rates-from-ncds

KEYNOTE SPEAKER: JONATHAN SUGARMAN

Jonathan Sugarman, MD, MPH, FAAFP, FACPM
Chief Executive Officer, Global to Local

Bringing Global Health Home

ARCHI Quarterly Breakfast/GGHA
June 12, 2019
Atlanta, GA

Jonathan R. Sugarman, MD, MPH

SPEAKING OF BRINGING SOMETHING HOME…

GLOBAL HEALTH
ON THE
↳ LOCAL LEVEL

Seattle is home to many global health organizations

There are significant disparities in health outcomes among people living within **King County**

Can **global health** approaches work here at home?

GLOBAL TO LOCAL

WHAT DO WE MEAN BY "GLOBAL HEALTH"?

"Global health is an area for study, research, and practice that places a priority on improving health and achieving equity in health for all people worldwide. [It] emphasizes transnational health issues, determinants, and solutions; involves many disciplines within and beyond the health sciences and promotes interdisciplinary collaboration; and is a synthesis of population-based prevention with individual-level clinical care."
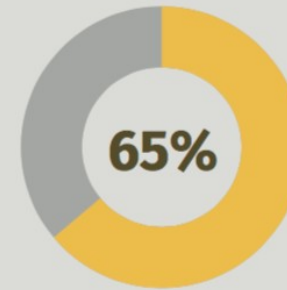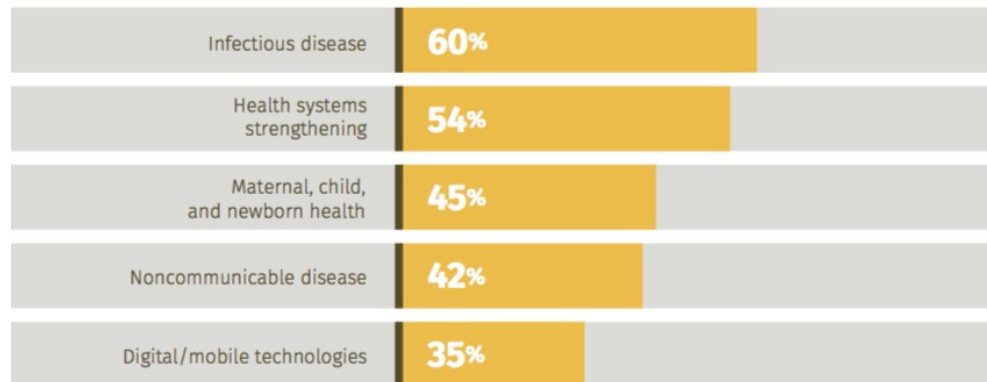
Source: Koplan et al. Lancet. 2009;373:1993-95.

GLOBALTOLOCAL

268 Washington-based organizations working in global health

Nonprofit and for-profit institutions engage in global health across diverse disciplines

Top five global health disciplines

Discipline	%
Infectious disease	60%
Health systems strengthening	54%
Maternal, child, and newborn health	45%
Noncommunicable disease	42%
Digital/mobile technologies	35%

65% of organizations are also advancing health equity in the U.S.

Source: Washington Global Health Alliance [www.wghalliance.org/landscapestudy2018]

WHY LOOK ELSEWHERE?

US HEALTH CARE RANKS LAST AMONG WEALTHY COUNTRIES

Overall Health Care System Ranking

Low   High

Country	
UK	
AUS	
NETH	
NZ	
NOR	
SWIZ	
SWE	
GER	
CAN	
FRA	
US	
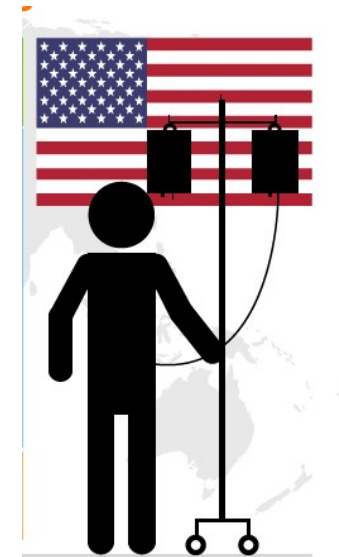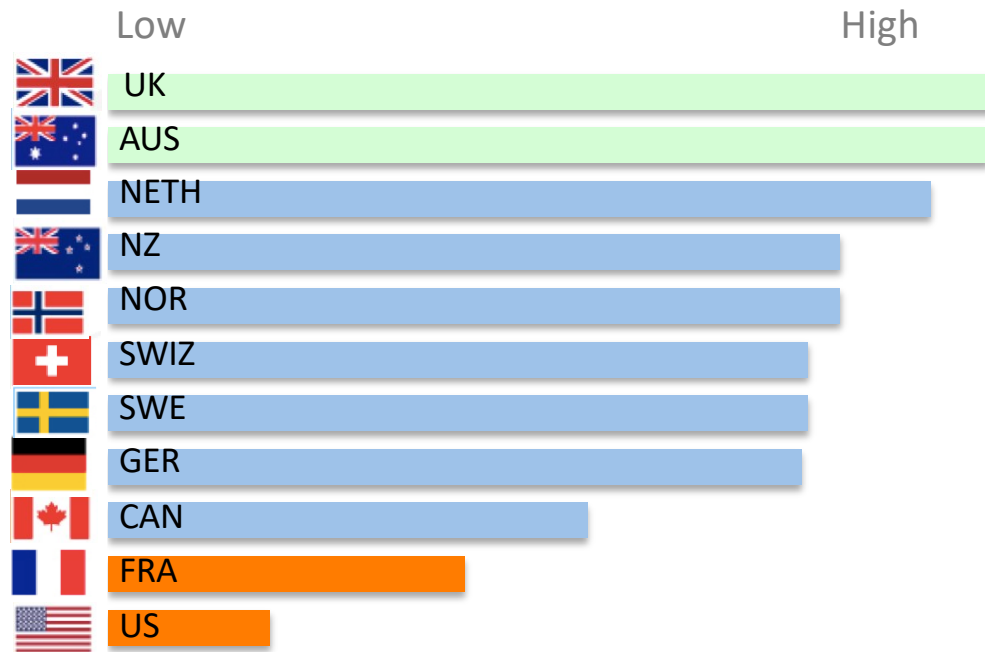
E. C. Schneider, D. O. Sarnak, D. Squires, A. Shah, and M. M. Doty, *Mirror, Mirror: How the U.S. Health Care System Compares Internationally at a Time of Radical Change,* The Commonwealth Fund, July 2017.
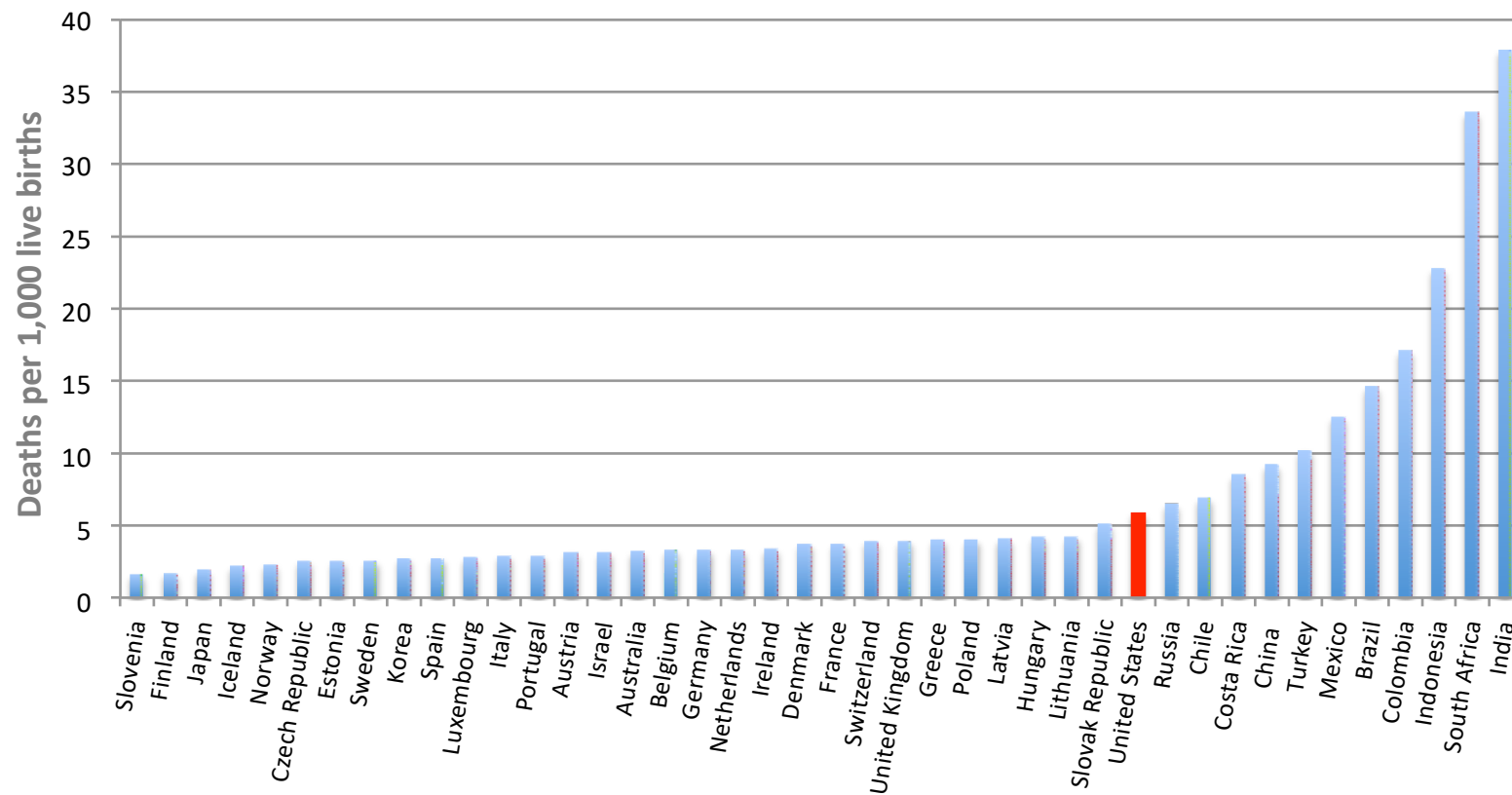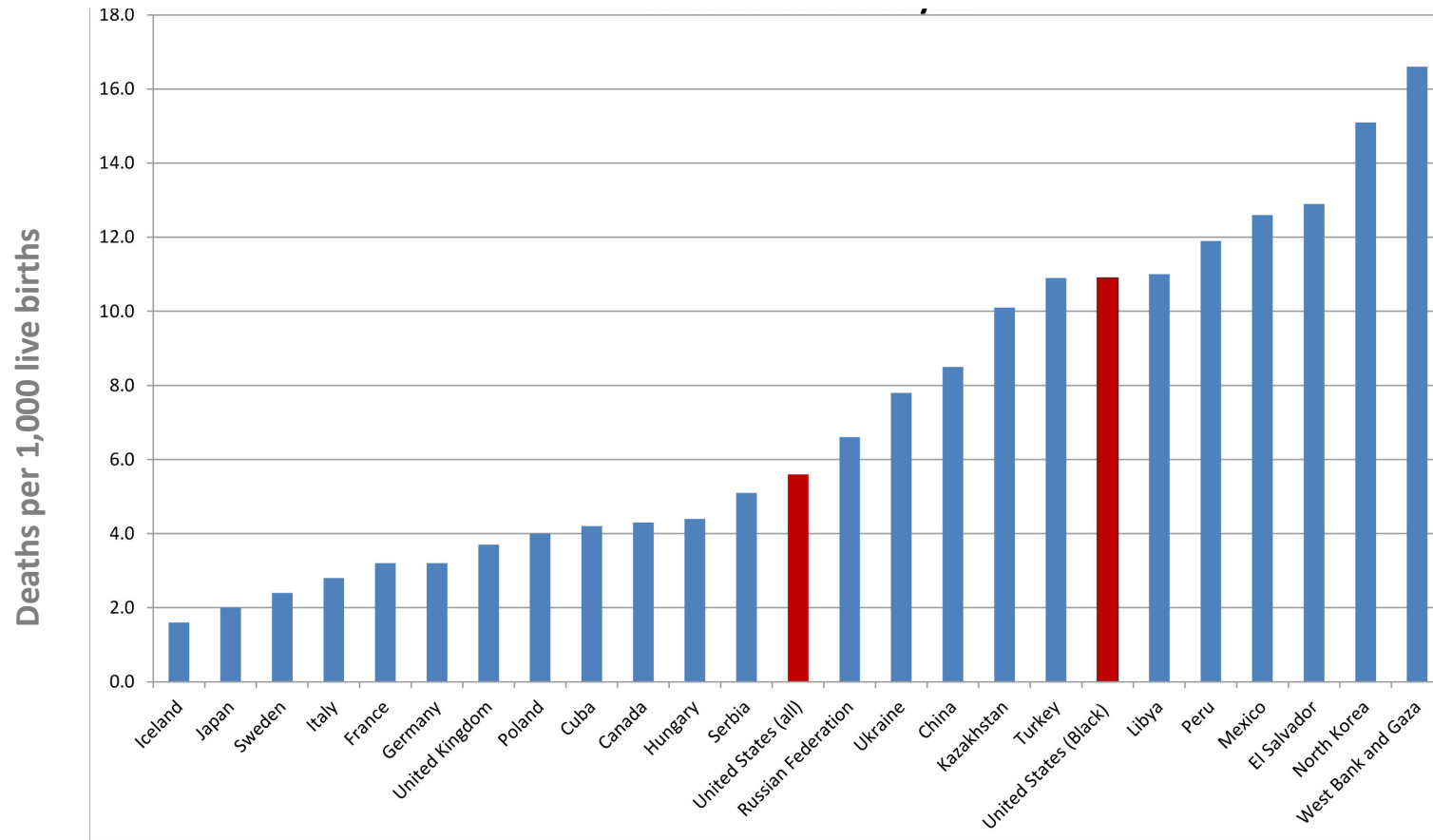
GLOBALTOLOCAL

The COMMONWEALTH FUND

HEALTH CARE SYSTEM PERFORMANCE RANKINGS

	AUS	CAN	FRA	GER	NETH	NZ	NOR	SWE	SWIZ	UK	US
OVERALL RANKING	2	9	10	8	3	4	4	6	6	1	11
Care Process	2	6	9	8	4	3	10	11	7	1	5
Access	4	10	9	2	1	7	5	6	8	3	11
Administrative Efficiency	1	6	11	6	9	2	4	5	8	3	10
Equity	7	9	10	6	2	8	5	3	4	1	11
Health Care Outcomes	1	9	5	8	6	7	3	2	4	10	11

The Commonwealth Fund

OUTCOMES LIKE MATERNAL MORTALITY…
OECD AND SELECTED NON-OECD COUNTRIES, 2015

Deaths per 1,000 live births

GLOBALTOLOCAL

Deaths per 1,000 live births

Country	Value
Iceland	1.6
Japan	2.0
Sweden	2.4
Italy	2.8
France	3.2
Germany	3.2
United Kingdom	3.7
Poland	4.0
Cuba	4.2
Canada	4.3
Hungary	4.4
Serbia	5.1
United States (all)	5.6
Russian Federation	6.6
Ukraine	7.8
China	8.5
Kazakhstan	10.1
Turkey	10.9
United States (Black)	10.9
Libya	11.0
Peru	11.9
Mexico	12.6
El Salvador	12.9
North Korea	15.1
West Bank and Gaza	16.6

GLOBALTOLOCAL

Pie chart:
- Health behaviors 40%
- Genetic predisposition 30%
- Social factors 15%
- Health care 10%
- Environmental exposure 5%

Source: Schroeder SA. N Engl J Med 2007;357:1221-1228.

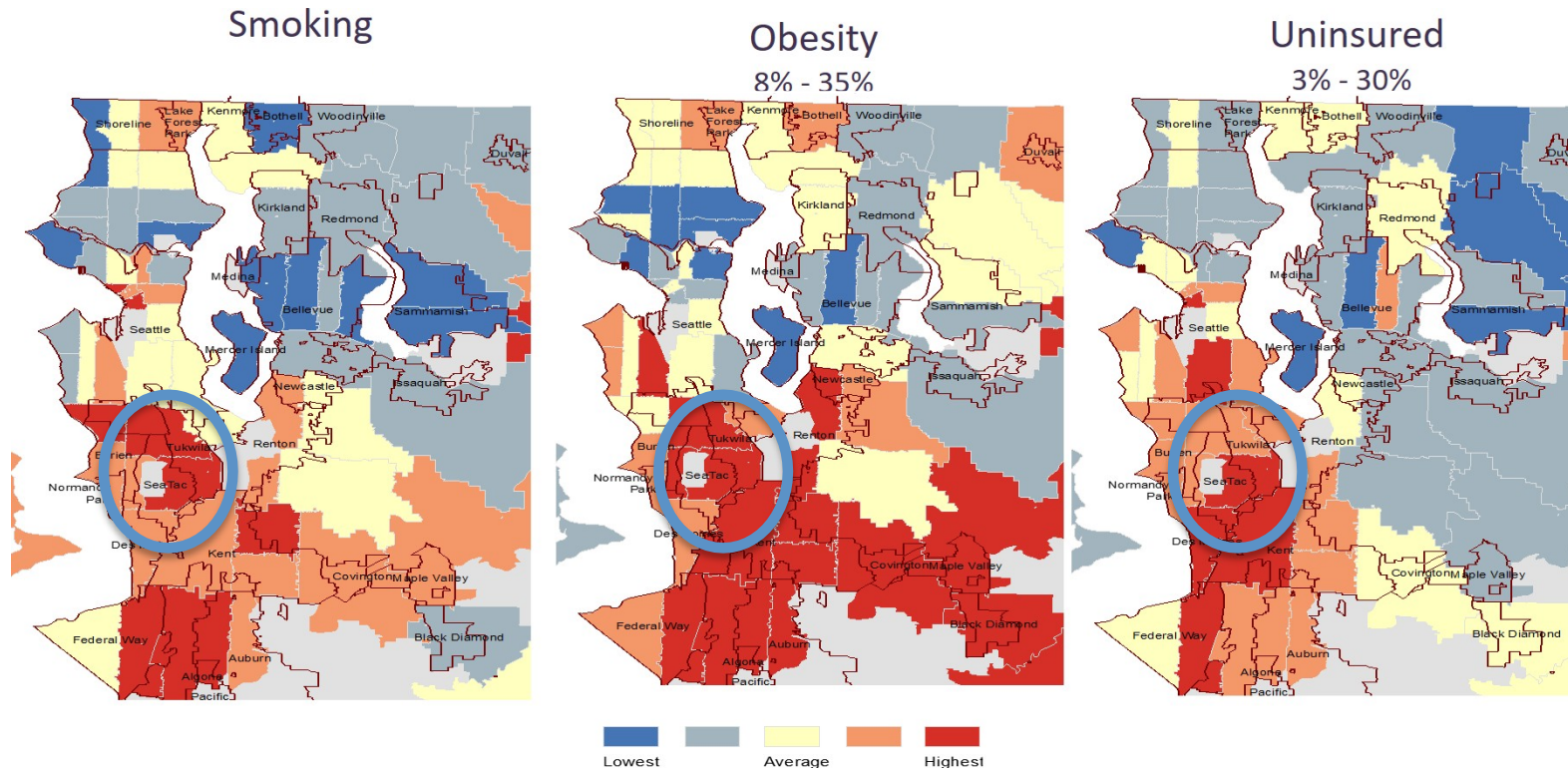# GLOBAL TO LOCAL'S MISSION:

To demonstrate the effectiveness of global health strategies to improve the health status of local underserved communities

HOW DID GLOBAL TO LOCAL END UP IN SOUTH KING COUNTY?

Smoking

Obesity
8% - 35%

Uninsured
3% - 30%

Lowest   Average   Highest

OUR APPROACH

LISTEN
We continuously listen to communities, the true experts on their environments.

SCAN
We find global solutions that might apply locally.

CO-DESIGN
We bring community and global expertise together to generate a localized solution.

LEARN
We evaluate our impact and adjust as we go along.

DISSEMINATE
We share what we learn to create a greater impact.

G2L GLOBALTOLOCAL
MODEL FOR COMMUNITY HEALTH

THE MODEL

1 LISTEN
2 SCAN
3 CO-DESIGN
4 LEARN
5 DISSEMINATE

Project Ethiopia operates fully at the grassroots level. **All projects originate with and are guided by the villagers themselves.** We listen closely to what the community has to say from start to finish. This is where we hear most honestly about the challenges facing the community and this is where we find the ideas and solutions that will make a lasting impact.

SOURCE: https://www.project-ethiopia.org/our-approach/

TOP NEEDS IDENTIFIED

1. Limited economic opportunities

2. Language and cultural barriers

3. Difficulty navigating the system

4. Limited community voice in decision making
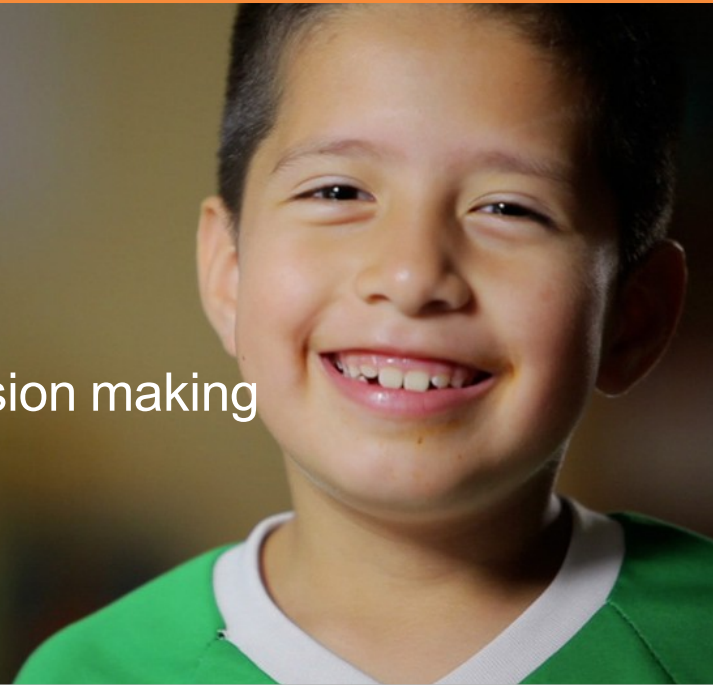
SELECTED CATEGORIES OF POTENTIALLY TRANSFERABLE GLOBAL HEALTH INTERVENTIONS

1. Use Community Health Workers
2. Link health with economic development
3. Mobilize community-based organizations
4. Generate focused campaigns around priority health issues
5. Mobile Health: Use communications technology to transform practices
6. Integrate public health and primary medical care services

Source: https://www.globaltolocal.org/wp/wp-content/uploads/2017/02/G2L_LandscapeAssessment_FINAL.pdf

COMMUNITY HEALTH WORKERS

- ✎ Culturally tailored projects/initiatives
- ✎ Community outreach
- ✎ Health education
- ✎ Local leadership
- ✎ Systems change

Community
Health Workers

FOOD ACCESS AND ECONOMIC DEVELOPMENT

Food Innovation Network

🖋 **Linking health with economic development**
🖋 **Improve access to healthy foods**
🖋 **Creation of a food business cluster**
🖋 **Collective impact model with 15 + partners supporting 80+ aspiring entrepreneurs**

FOOD
INNOVATION
NETWORK
a program of Global to Local

GLOBALTOLOCAL
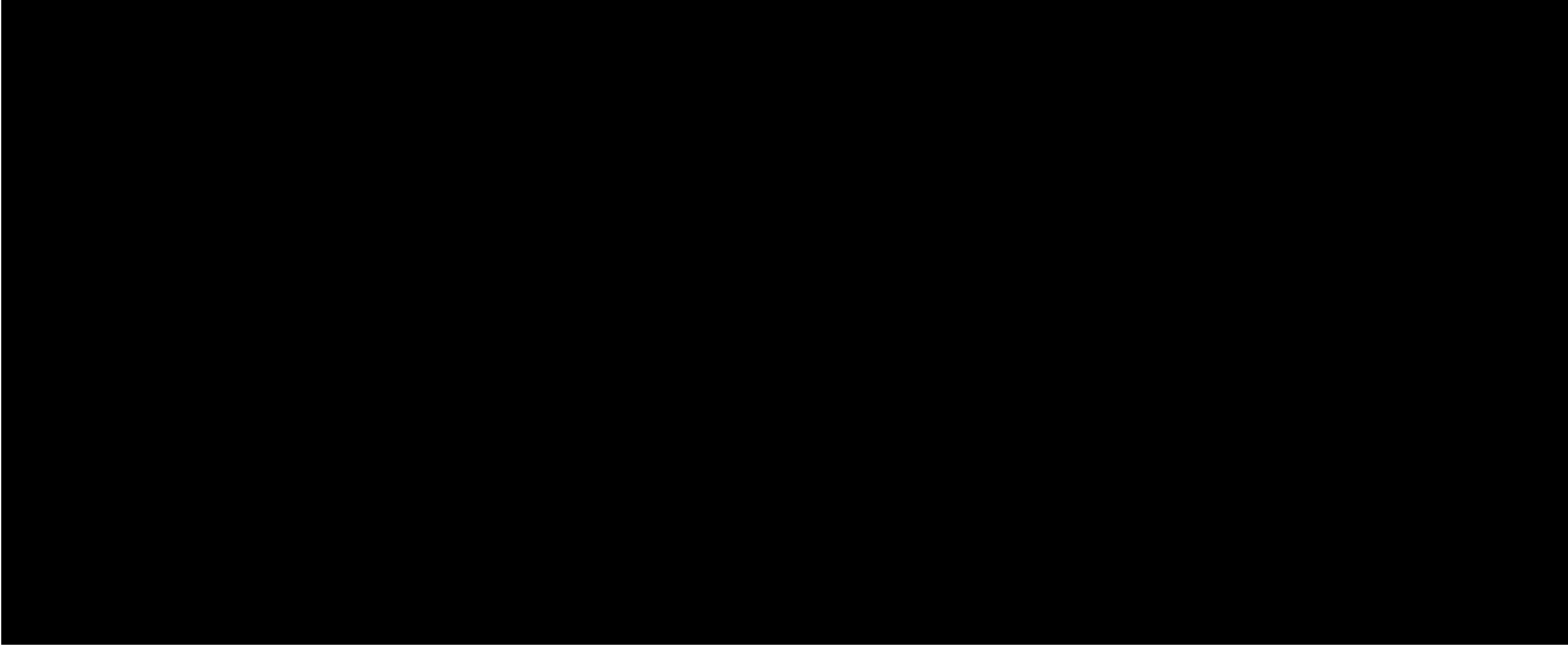
COMMUNITIES OF OPPORTUNITY: A PUBLIC-PRIVATE PARTNERSHIP

Through community-driven partnerships, we are creating greater racial, economic, and health equity that enables all people in King County to thrive and prosper

- The **SeaTac/Tukwila Collaborative** supports opportunities for residents and businesses to improve health, social and economic conditions.

- **SeaTac/Tukwila key strategies:**
  - Increase access to healthy and affordable food
  - Support the growth and stability for cultural small businesses
  - Advance economic stability for residents through living-wage jobs
  - Improve social connections and engagement for the culturally diverse communities in SeaTac/Tukwila

BRIDGES

Bringing Global Health Expertise to Rural Washington

Washington is the home to many organizations that are world leaders in global health. The Washington State Legislature seeks to learn how the state's expertise in global health can contribute to improved health in rural communities in Washington.

Washington State Counties

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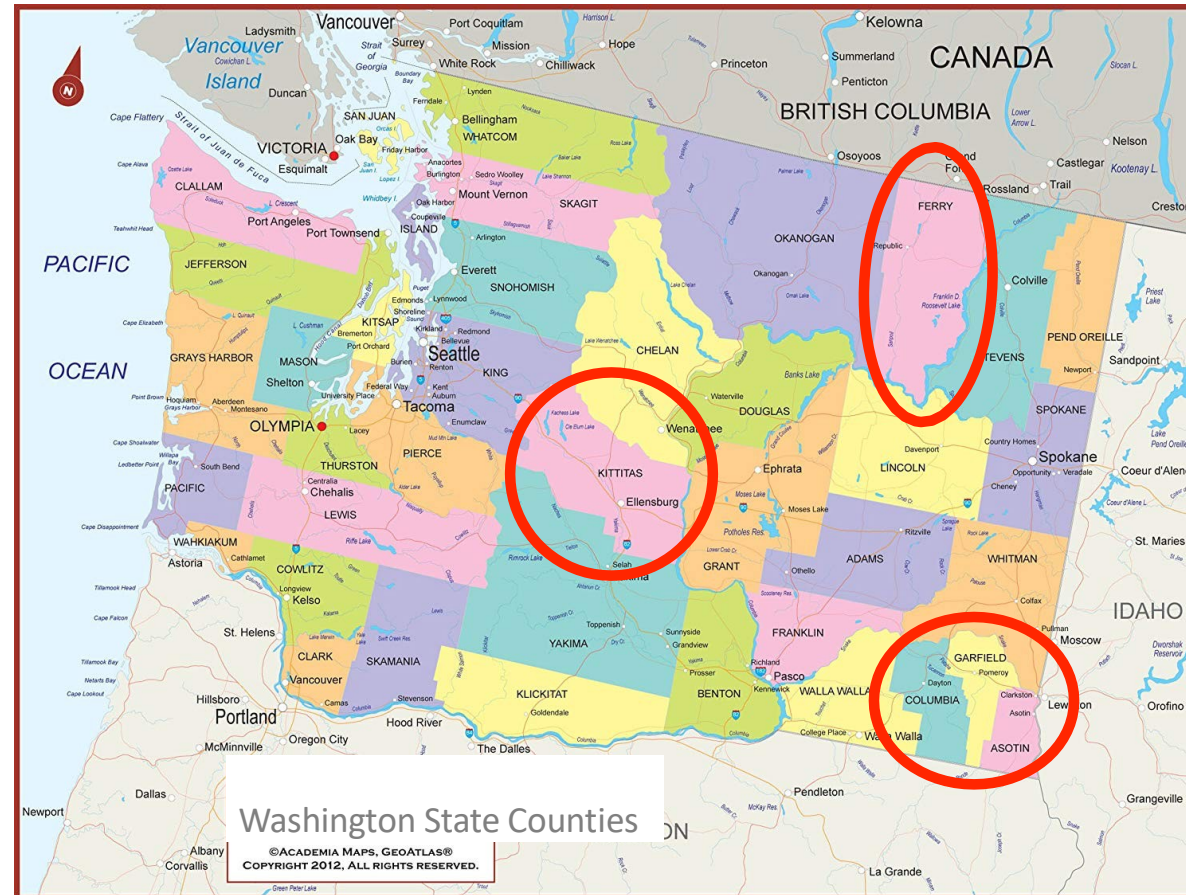
THINGS TO CONSIDER IF CONTEMPLATING REPLI
OF THE G2L MODEL

- Alignment with existing health and human services delivery system

- Balance of innovation through application of global health strategies and application of "any means necessary"

- Governance: balance of global health expertise and community advocates

MORE INFORMATION

Jonathan Sugarman, MD, MPH

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www.globaltolocal.org

HEALTH EQUITY PRACTICES IN GLOBAL HEALTH – ATLANTA BASED

Moderator:

- Gigi Bastien – Morehouse School of Medicine

Panel speakers:

- Dr. Louis Sullivan – National Health Museum
- Patrick O'Carroll – The Task Force for Global Health
- Brandon Talley – CDC Foundation

Examples:

- Chris Parker – Georgia Health Policy Center

Remote Area Medical (RAM)

"My vision for Remote Area Medical™ developed when I suffered a personal injury while living among the Wapishana Indians in Guyana, South America.
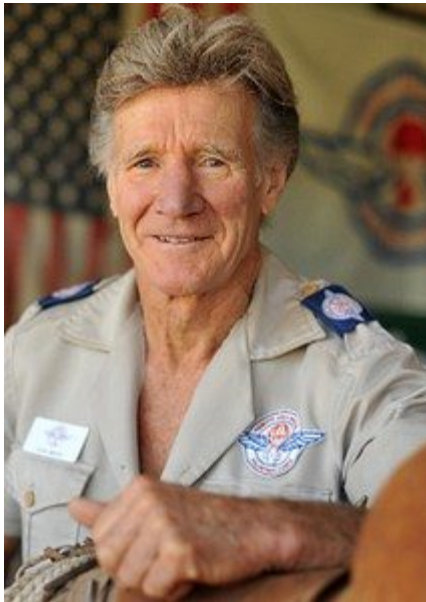
I was isolated from medical care, which was about a 26 day journey away.

I witnessed the near devastation of whole tribes by what would have been simple or minor illnesses to more advanced cultures."

Remote Area Medical (RAM)
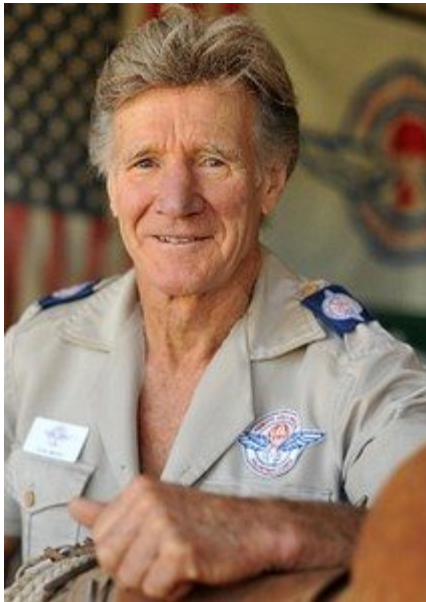
"When I left Guyana, I vowed to find a way to deliver basic medical aid to people in the world's inaccessible regions…

RAM is the way I have kept that promise, not only to the Wapishana Indians, but to thousands around the world in similar conditions."

Pooled Community Funding

The World Health Organization is promoting pooled community funds or "pooling" as a strategy for funding:

- Global health research and development; and,

- Universal Health Care. They promote pooling as a way to diversify funding streams in order to minimize risk.
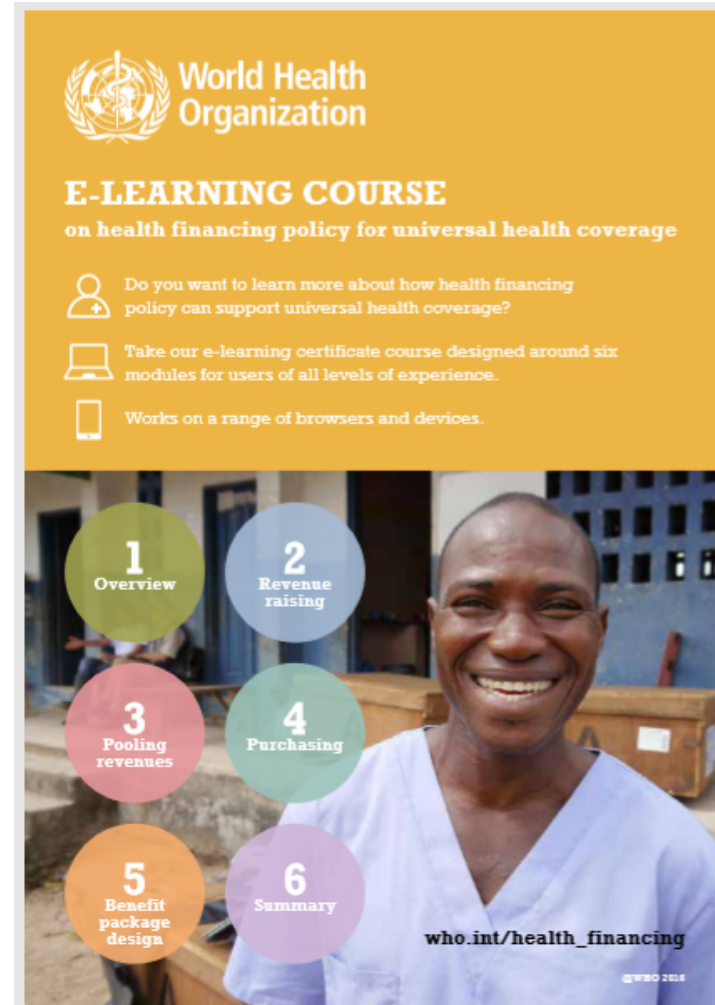
South Sudan Health Pooled Fund

- The Health Pooled Fund, supported by multiple donors, focuses on successfully strengthening health systems and delivering essential health services in South Sudan.

- Within the fund are 23 other implementing partners that support primary health care services in health facilities, including hospitals, across 55 counties.

We believe…

… everyone can learn from the unique challenges and innovative solutions of others. Thus, alongside our partners, we strive to uncover, broadly share and promote the adaptation of lessons learned.

Subject Matter Expertise

- Nutrition and food security
- Maternal and child health
- Non-communicable diseases
- Behavioral health
- Health Systems Strengthening
- Health in all Policies
- Systems thinking

Services

- Program and partnership design, monitoring and evaluation
- Meeting design and facilitation
- Strategic planning
- Environmental scans
- Formative research

- Literature and Desk Review
- Systems mapping
- Implementation science and technical assistance
- Workforce development
- Policy analysis
- Realist evaluation

TABLE DIALOGUE 10 MINUTES

1: You will each have a discussion handout in front of you.

2: You can record your responses from the table on the handout and discuss simultaneously.

3: Please leave the discussion points on the table for us to collect. **NOTE:** There is a 4th question on the back of the handout.

4: Feel free to exchange contact details!

DISCUSSION POINTS

List the organizations/agencies/institutions represented at your table.

1. What was your primary takeaway from the Global to Local presentation?

2. How relevant is the concept of Global to Local to your work/work of your organization?

3. What are some of the persistent health challenges your community faces that could be addressed by global strategies?

4. Would you be interested in learning more about Global to Local opportunities in the Atlanta area? If so, what information/training would be most helpful?

TABLE
REPORT OUT

ANNOUNCEMENTS & CLOSING

ARCHI PARTNERS

Alliant GMCF
American Cancer Society
American Diabetes Association
Arthur M. Blank Family Foundation
Atlanta Bicycle Coalition
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
Fulton and DeKalb Hospital Authority
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 Organics
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
Morehouse School of Medicine
Muni Cares, Inc.
Oakhurst Medical Centers
Odyssey Family Counseling Center
One Talent Inc.
Open Hand Atlanta
Our House
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.

UPCOMING

Atlanta Regional Commission Health Equity Forum: June 27, 2019

ARCHI Quarterly Breakfast: September 11, 2019
Registration will be available at www.archicollaborative.org