SUMMARY OF CPHE SITES

Community organizations and academic institutions have great potential to transform health outcomes, yet the horizon is often limited by the lack of functioning models to spur innovative thinking. MEDICC's Community Partnerships for Health Equity (CPHE) offers the opportunity to learn how Cubans have achieved impressive health results at dramatically lower costs, with practical lessons for improving health and health equity here in the US.

Between 2005-2015, MEDICC has launched CPHE programs with 170 total participants from 11 sites: South Los Angeles and Oakland, CA; Albuquerque, NM; Bronx, New York; Summit County, Ohio; Milwaukee, Wisconsin; Red Mesa, Navajo Nation, and California Endowment Building Healthy Communities sites in Kern and Del Norte Counties, San Diego and South Los Angeles.

CPHE objectives include strengthening existing community partnerships and adapting successful principles and practices from Cuba to improve health and health equity in the US. Our approach in identifying communities for CPHE is place-based and collaborative. Bringing a racial and equity lens to the work, MEDICCC prioritizes groups most impacted by health-related challenges in their communities, working with grass roots organizations and their academic and health partners. Ultimately, MEDICC envisions CPHE as a valuable vehicle for health systems and policy change in the US. Participants speak about CPHE in a 7 minute video: https://www.youtube.com/watch?v=mCBlpnEKt6g

MEDICC's accompaniment throughout the entire span of a CPHE is key in providing capacity building towards a collaboration for health. During the planning stage with each CPHE, a local site coordinator is identified as a liaison with MEDICC. Working with the site coordinators and participants in each community, MEDICC staff develops week-long programs in Cuba to address community priorities. Participants witness key Cuban principles and practices, such as:

- Emphasis on Prevention
- Patient care and public health are not separate
- Neighborhood access to comprehensive care
- Local and Continuous data collection
- Active community engagement
- Education and intervention tailored to community needs
- Cross-sector alliances for health in all policies
- Bio-psychosocial and cultural approach to families and community
- · Socially accountable medical training

Most 'lessons learned' in Cuba resonate with many of the goals of health reform in the US. After the exchange in Cuba, MEDICC encourage critical thinking among participants to capture ideas which might be adaptable locally and provide sustainable and substantial outcomes.

Funding

MEDICC's CPHE programs to date have been funded by Atlantic Philanthropies, The California Wellness Foundation, The Christopher Reynolds Foundation, The California Endowment, Bronx Lebanon Hospital and the Sisters of St. Francis. In 2015, MEDICC received funding from the Robert Wood Johnson Foundation, enabling us to re-grant to organizations in the four most established CPHE communities (identified as CPHE 2.0, below) to support initiatives which were inspired or informed by Cuban principles and practices. Funding is needed to continue to expand CPHE sites and to provide support for new and existing community initiatives in the US.

1. South Los Angeles, CA (established 2005)

Participating organizations: Community Coalition, UMMA Clinic, T.H.E. Clinic, South Central Family Health Center, Black Women for Wellness, Alzheimer's Association, Coalition of Mental Health Professional, UCLA School of Public Health, Charles Drew University of Medicine and Science.

- Los Angeles CPHE participants were struck with the high level of integration across sectors in the Cuban health system, and worked to remedy the fragmentation of services in South LA
- CPHE 2.0: The Community Coalition gained insights from Cuba's public exercise programs and cross-sector cooperation to address chronic health conditions. They have strengthened their "Parks Prescription Program" for South LA, collaborating with the City Parks Dept., two community clinics, a local college, and other partners. Physicians will *prescribe* a free and sustainable exercise program in several parks, to address poor health outcomes

2. Oakland, CA (established 2008)

Participating organizations: La Clinica de la Raza, Ethnic Health Institute, Alameda County Public Health Department, Alameda County Medical Center, Faces for the Future, University of California-Berkeley School of Public Health

- Oakland CPHE participants were most impressed by Cuba's community engagement and easy
 access to health, which they highlighted in a health forum in Oakland with 150 community
 health leaders, funders, community members and legislators, resulting in a video, "Redefining
 Health: From Cuba to California. https://www.youtube.com/watch?v=PaOXCQrkngs
- **CPHE 2.0:** La Clinica de la Raza has initiated a *Promotores en Acción* project to recruit and train community members in health education and promotion around chronic disease prevention.

3. South Valley, Albuquerque, NM (established 2011)

Participating organizations: Albuquerque Public Schools, Bernalillo County Community Health, Casa de Salud, Centro Savila, NM Dept. Public Health, First Choice Community Healthcare, La Plazita, Molina Healthcare, NM CARES Health Disparities Center, Partnerships for Community Action, Peanut Butter & Jelly Family Services, Rio Grande Community Development Corporation, South Valley Economic Development Center, UNM Health Sciences Center and UNM HSC Office of Diversity.

- Cuba's health access and community engagement are two take-homes for the Albuquerque CPHE. Two CPHE participants are working at a policy level: Javier Martínez represents House District 11 in the NM State Legislature. Adrian Pedroza is running for Bernalillo County Commission, District 2.
- CPHE 2.0: Centro Savila, Casa de Salud and Rio Grande Community Development Corporation
 are collaborating on several new preventive health and community engagements projects with
 South Valley adults and children, for the benefit of the most marginalized and vulnerable
 populations of the community.

4. South Bronx, New York (established 2013)

Participating organizations: Bronx-Lebanon Hospital, Hodson Claremont Senior Center, Claremont Community Center, American Diabetes Association, Stop the Violence, Grow NYC, Fordham University, Robert Fulton Terrace Tenant Association

Cuba's strong community engagement impressed Bronx CPHE members, and spurred on new
and existing initiatives, including an annual Stop the Violence rally, a tenants' rights program, a
youth basketball league, and GrowNYC's food box program. Claremont Senior Center leaders
negotiated closure of an adjacent street to hold open-air exercise programs, as in Cuba.

• CPHE 2.0: The Claremont Neighborhood Center is taking the lead in a capacity-building program to build leadership capacity of 10-12 local community leaders. After a series of workshops including pubic speaking, outreach, program planning and grant-writing, participants will develop and implement a local project based on what they have learned.

5. Summit County, Ohio (established 2014)

Participating Organizations: Akron Children's Hospital, Dept. of Family and Community Medicine, Northeast Ohio Medical University, AxessPointe Community Health Centers, Consortium of Eastern Ohio Master of Public Health program, Summit County Public Health, Ohio, Dept. of Planning and Urban Development, City of Akron, Ohio Summa Health System, Kent State University College of Public Health

- Inspired by the Cuban system of preventative medicine, Summit County continues their efforts to transform the health of the community by developing an Accountable Care Community.
- Action is being taken to improve the built environment within Summit County neighborhoods, addressing safe routes to school and access to healthy food. This health in all policies effort prioritizes health concerns as a way of informing local and regional decision making.

6. South LA California Endowment CPHE (established 2014)

Participating Organizations: South LA Building Healthy Communities (BHC) UMMA Community Clinic, Southside Coalition, SCOPE (Strategic Concepts in Organizing and Policy Education) Charles Drew University, Community Health Councils, Los Angeles

• Impressed by the community and health-based lens of Cuban schoolchildren, this BHC groups is partnering with several high schools in South LA to support health career pathway programs.

7. San Diego California Endowment CPHE (established 2014)

Participating Organizations: San Diego Building Healthy Communities (BHC), Mid-City CAN Healthcare Alliance, Council of Community Clinics, San Diego Family Care Clinic, Family Health Centers of San Diego

Cuba's system of tracking and communication within the health care system served as an
impetus to push for improved coordination between community clinics and school-based health
centers in the City Heights district of San Diego. An interdisciplinary, pilot health-information
exchange project is being developed around childhood asthma education/prevention.

8. Kern County California Endowment CPHE (established 2014)

Participating Organizations: Kern County Building Health Communities (BHC), Dignity Health, Arvin Union School District, Clinica Sierra Vista, Bakersfield City School District.

• The Kern County group was inspired by Cuba's working together across sectors. Several members of the group are addressing the issue of water contamination and are working to include the health department and other stakeholders in discussing solutions.

9. Del Norte California Endowment CPHE (established 2014)

Participating Organizations: Del Norte Building Healthy Communities (BHC), Del Norte County and Adjacent Tribal Lands (DNATL), Del Norte County Department of Health and Human Services, Humboldt Area Foundation, Wild Rivers Foundation, Open Door Community Health Center

• The intentional inclusion of health literacy in Cuban schools has been important in informing how the DNATL moves forward in building health career pathways for its youth.



SUMMARY OF CPHE SITES

10. Milwaukee CPHE (established 2014)

Participating Organizations: Walnut Way Development Corp, University of Wisconsin School of Medicine and Public Health, Medical College of Wisconsin, Northside YMCA, Aurora Health Care, Urban Solutions, Inc., P3 Development Group LLC, Department of Environmental Justice, University of Wisconsin-Madison, Molina Healthcare

- The first Milwaukee CPHE exchange in Cuba was in March, 2015 and inspired early ideas to help engage and strengthen community, including farming education, stressing cultural relevance and Co-ops; re-introducing traditional games for children; mental health circles for young girls; and community baby showers.
- The second exchange in Cuba is scheduled for October, 2015.

11. Navajo Nation CPHE (2015)

Participating Organizations from the Navajo Nation around Four Corners (Arizona, Utah, Colorado, New Mexico): COPE (Community Outreach and Patient Empowerment), Red Mesa School Board members, Four Corners Regional Health Center, Indigenous Solutions, Utah Navajo Health System, T'iis Nazbas FACE Program, Navajo Community Health Representative Outreach Program

Navajo Nation CPHE will travel to Cuba in February and September, 2016. Navajo participants
and MEDICC are designing a program in Cuba to address specific challenges confronting this
largely rural population, such as transportation, food security, access to health and community
engagement.

CPHE Network: Building momentum behind the health equity movement in the US, MEDICC continues to maximize CPHE's influence and reach a strategic tipping point by connecting existing and new CPHEs in a learning community. To further that end, MEDICC created a CPHE listserv to exchange information and to inform participants of relevant resources and to alert them to funding opportunities. In September 2015, MEDICC held the 2nd Annual CPHE Network Meeting in Oakland, CA, hosting 55 individuals from the 11 CPHEs across the nation. Throughout this two day meeting, participants heard an inspiring keynote speaker, America Bracho, Executive Director of Latino Health Access, and shared successes and challenges relative to work in their own communities. Ways to strengthen the CPHE network were discussed, including aligning CPHE more closely with the national health equity movement, presentations at conferences, webinars to highlight CPHE community projects, visits between CPHE members from different sites working on similar issues, continued consultations and contact with Cuban colleagues, and continuation of the annual CPHE Network meeting.

