

Communities of Health: Benton Harbor/St. Joseph, MI
Notes from Initial Multi-Stakeholder Community Gathering

December 18, 2008 – *Whirlpool Brandywine Creek Facility*

Background

In December of 2008, a small gathering of community leaders, health organizations, businesses and citizens came together to consider the health of the Benton Harbor/St. Joseph community. In a relatively short period, we began to appreciate the rich diversity of needs and strengths in the Twin Cities, and we agreed to engage an expanding group of community members in an ongoing process to improve health for all.

The Benton Harbor/St. Joseph Communities of Health initiative brings together people from all sectors of our community to uncover and address the underlying causes of health in the places we live and work. While this includes healthy lifestyles and access to care, our focus is on understanding how broader social conditions in our community – such as educational quality, economic and employment opportunity, food and transportation systems – affect health, and what we can do to improve these conditions. Together we will build greater collective awareness and community-driven action, while connecting and expanding on the many great efforts already underway. This initiative is being led by Whirlpool Corporation with support from CIGNA's Communities of Health organization, which is leading similar efforts in cities throughout the country (www.communitiesofhealth.org).

Following are notes from the initial gathering of community stakeholders. We invite you to be part of this ongoing process by contacting Susan Pavlopoulos: 269.923.7222, Susan_A_Pavlopoulos@Whirlpool.com.

Meeting Purpose & Objectives

The purpose of this initial gathering was to identify integration points between the Communities of Health (CoH) approach and the many current and previous efforts within Benton Harbor/St. Joseph. Specifically, participants began a process to:

- Appreciate Twin Cities community work to date;
- Explore together the community influences of health (social and environmental conditions) with greatest relevance to the Twin Cities community; and
- Identify opportunities to move forward.

Participants (December 18, 2008)

- Debbie Brandt – Whirlpool Corporation
- Rick Brush – Communities of Health
- Wendy Dant Chesser – Cornerstone Alliance
- Jeff Doemland – Communities of Health
- Gary Earl – Communities of Health
- Teresa Green – Berrien County Health Department
- Dan Hopp – Whirlpool Corporation
- Dr. Loren Hamel – Lakeland Regional Health System
- Kevin Kickhaefer – Communities of Health
- Chris McSwain – Whirlpool Corporation
- Ed Mohr – Whirlpool Corporation
- Michael Mortimore – Berrien County Health Department
- Susan Pavlopoulos – Whirlpool Corporation
- Marcus Robinson – Consortium for Community Development

Agenda & Discussion

Opening – welcome from Chris McSwain and Dan Hopp...

- *Whirlpool...still in the people business.*
- *What brought Whirlpool and CoH together: Focus on improving health by getting people together.*
- *All of us here...in absolute agreement.*
- *Today is about what we learn together.*

Check In – participants shared their connection, contribution and hopes for this work...

*Early history of growth:
fruit groves, Whirlpool,
business boom...*

*We can get
our arms
around it.*

*Community building...
leader development...
working with schools.*

*Late 1960s turbulence, job loss...
Linkage and separation between
Benton Harbor and St. Joseph...
Now coming back together.*

*Long-term impact...
attract business, grow jobs.
Economic and social gain.*

*Called to a
higher level.*

Participants also recognized the tremendous progress and possibilities for continued community transformation, highlighted in the video “Benton Harbor Window of Opportunity.”

- *Hope and challenges over the past century... “haves” and “have-nots”... recognition that all parts of the community must work together.*
- *Focus groups expanded the idea of connection between economic and community development.*
- *2003 civil disturbance heightened the need and focus...a new vision emerged, a commitment to bettering lives, with a real chance to move upward → eliminate extreme chronic poverty...*
- *We had really good, effective institutions – working in isolation. Now, coming together to do better work in collaboration. What is the possibility – together?*
- *Consortium for Community Development formed...*
- *Harbor Shores: a rallying point...*
- *Coming together to collaborate: Cornerstone Alliance, Heartland Alliance, Michigan Works, Lake Michigan College, Western Michigan University, United Way, Whirlpool Foundation, Benton Harbor City Government, Benton Harbor Area Schools, and many others...*
- *Four key focus areas:*
 1. *Individual Growth & Workforce Development*
 2. *Students & Schools*
 3. *Community Building*
 4. *Leader Development & Citizen Participation*
- *Provide an example of recovery for any place in the world.*



http://www.harborshoresdevelopment.org/index.php?option=com_content&task=view&id=51&Itemid=31

Setting the Context – the Communities of Health team led a discussion on the intersection of individual and community influences of health; Gary Earl used the example of “Steven’s Story” to illustrate the point...

Even with all the work we’ve done to make treatments more effective and costs more manageable, we continue to face deteriorating health in America. As U.S. annual total health care spending exceeds \$2 trillion, the time is right to explore the deep causes of illness and disease that drive people into the care system in the first place.

So, why are disease states continuing to rise and what can we do about it?



The answer depends on how we view health – and the underlying conditions that compromise it.

One way to view health is at the individual level. When we look through this lens, we see health as a function of individual behavior, biology and medical care. Our focus is on early identification of risk and programs to promote healthy lifestyles and smart choices about care. All together, these factors account for just under half of what determines health.

Using a wide-angle lens, we see health in a broader context – influenced by a range of factors in the places we live and work. In fact, research tells us that social conditions such as educational quality, employment opportunities, and access to essential goods and services like food and transportation systems account for more than half of what makes us healthy or sick. Addressing these health factors requires a different approach.



Communities of Health brings people together to uncover and address underlying conditions that are the major influences of health and illness. These efforts are already taking place in a growing number of cities across the country, where citizens, neighborhood groups, and organizational stakeholders are working together to generate deeper collective awareness and community-driven action that will have a profound and sustainable impact on health for all. (See www.communitiesofhealth.org.)

Additional examples of social and environmental determinants of health were provided in a brief excerpt from the PBS documentary series, “*Unnatural Causes*” (www.unnaturalcauses.org).

Breakouts Sessions & Group Dialog – participants gathered into breakouts to share examples of positive initiatives and progress in the community...

Using a process of “appreciative inquiry” (also known as community “asset-mapping”), each breakout considered three questions. Here are highlights from the report outs:

What is working well around here?

- *The biggest thing is a sense of community...small town feel...we work, live and socialize together.*
- *There is energy...a force...true commitment...very active.*
- *Community-based organizations (many!), working tirelessly for years...we collaborate and talk.*
- *A sense that we can make a difference.*
- *Our problems are “finite” – we know what they are, have good data.*
- *Whirlpool leadership, community participation, resources and processes.*
- *Natural resources – beauty, recreation.*
- *Outside recognition: Money magazine “Best Cities to Retire” (quality of health care).*
- *Generosity of residents: giving (e.g., United Way), participation, and “principled opposition” (stewardship and taking a stand for the greater good).*
- *New leaders coming in – youth, intelligence, speed, purpose.*

What conditions allowed that to happen?

- *Passion (multi-level), leadership, values... and a sense of hope.*
- *Community roots, legacy... Long-time residents who stay, continue to care and contribute.*
- *Trust improving via involvement (focus groups), shared goals, mutuality and respect.*
- *There is real need (pain!) in the community that galvanizes action.*
- *Dave Whitwam got the community to exercise its voice; brought into relief the plight of less advantaged.*
- *We have a process and a precedent for collaboration.*
- *Council for World-Class Communities (CWCC) set a foundation.*
- *Healthy Berrien Consortium: multiple leaders, leave ego at the door, move forward together. Assign lead agency based on who is best to lead (e.g., infant mortality, lead poisoning).*
- *Partnership with health department – working with epidemiologists, behavioral risk factor survey every three years.*
- *Harbor Shores: Needed something new to have hope.*
 - *Locally driven. Municipalities have come together in support (got past “turf wars”).*
 - *Social, cultural and environmental transformation. Nature & exercise: 38 acres of park, 12.2 miles of walking trails.*

How could we encourage more of these conditions?

- *Diversity/inclusion of our town.*
- *Involving all parts of community.*
- *Handful of major employers...turn expertise to community problems.*
- *People from other communities who have an interest in helping.*
- *Looking at the relationship among the parts, rather than just the parts.*
- *Allowing it to happen.*

What's Next? – participants considered the power of what already exists and began outlining a path forward...

The group recognized that amid the many challenges we face, there is hope and tremendous opportunity for change when we come together to actively support and participate in the community we love. Two thoughts emerged: *Connection & Belonging*.

Connection

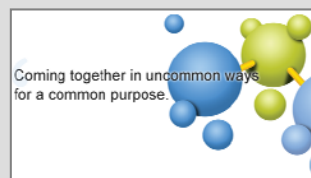


As one participant noted,

*"As goes Whirlpool,
so goes the community..."*

*And as goes the
health of the community,
so goes Whirlpool."*

Belonging



At the conclusion of this initial gathering, the group discussed...

- What's *possible*?
- How can we make the most of what we've learned?
- Who must be involved?

...and agreed that the process to consider these and other questions must continue with expanding participation across the Benton Harbor/St. Joseph community.

In follow-up discussions, three phases were outlined for this work:

Phase 1

Expanding participation and building awareness of what influences the health of our community.

Phase 2

Assessing community needs, assets, and the most significant and actionable opportunities for health.

Phase 3

Generating community-driven action through prototypes, learning, and replication/expansion.

Outreach is currently underway to expand participation and to plan for additional gatherings. For more information on the ongoing Benton Harbor/St. Joseph Communities of Health initiative, contact Susan Pavlopoulos: 269.923.7222, Susan_A_Pavlopoulos@Whirlpool.com.