

# ON THE FRONT LINES

## of Public Health

Those working to improve the public's health recognize that complex health and infrastructure issues cannot be solved by any one sector working alone. They require partnerships between public agencies and the private sector, including philanthropy. The growing number of partnerships that have formed in recent years reflects a commitment to strengthening the nation's public health system and generating improvements in the public's health. Health grantmakers working at the national, state, and local levels can develop partnerships with public health and other government agencies by sharing information, contributing resources, and engaging communities.

Partnerships with government can create lasting change. There are, however, obstacles to successfully working together. Philanthropy and government have their own cultures, time frames, calculus for risk, and ways of doing business. Building successful partnerships requires that prospective partners first understand these differences, and then work on how to address them. This *Issue Focus* provides several examples of collaborations that have successfully engaged public health stakeholders and created lasting results.

### COLLABORATING WITH THE CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC)

There are many opportunities for health foundations to work with the CDC. One way of doing so is to collaborate with the CDC Foundation. Established to develop effective partnerships between the CDC and others to fight threats to health and safety, the foundation works across a range of issues from reducing racial and ethnic disparities in health to funding research on important public health problems. To help the CDC and others prepare for and respond to a variety of emergencies, for example, the CDC Foundation established the Emergency Preparedness and Response Fund. The fund was created in response to the lessons learned from the terrorist attacks of September 11, 2001 and the anthrax incidents occurring shortly thereafter. CDC workers at Ground Zero in New York City, for example, lacked the means to immediately purchase satellite phones that would have helped them perform their jobs more effectively, instead of relying on cell phones that could not transmit because of the unusually high call volume following the crisis.

The Emergency Preparedness and Response Fund allows CDC, state, and local public health workers to immediately

purchase the specialized equipment or services needed to get their jobs done when responding to an emergency event. The fund was activated in the aftermath of Hurricane Katrina to assist public health workers in identifying both the immediate and long-term needs of state and local public health agencies working in the affected areas. It allowed response teams to purchase needed communications equipment, such as satellite phones, laptop computers, and GPS devices.

### PARTNERING WITH THE EXPERTS

Accurate and timely information can help grantmakers as they assess the needs of the communities they serve, develop foundation priorities and strategies, review grant proposals, or evaluate programs and initiatives. Such information can be found, for example, at the CDC, universities and community colleges, and state health institutes. To fight childhood overweight and physical inactivity, the Healthcare Georgia Foundation, Inc. sought the wisdom of public health experts at Georgia State University. Through this partnership, the foundation was able to survey Georgia residents on their perceptions regarding ways to address childhood overweight and physical inactivity in the state. Results were published by the foundation in its spring 2005 issue of *HealthVoices: Addressing Overweight: Let Georgia Lead the Way*.

Using the state survey findings, as well as guidance from state and local leaders, the Healthcare Georgia Foundation, Inc. developed a grant program in 2005 to support school and community-based programs that increase physical activity and improve nutrition among school-aged children and youth. With a planned investment of \$1 million over three years, the foundation is seeking to fund programs that include evidence-based, age-appropriate interventions; community partnerships designed to enhance program effectiveness; and an evaluation of the program's impact on increasing physical activity levels and improving nutrition among school-aged children and youth. To assist school and community-based organizations in identifying evidence-based strategies, the foundation sought the wisdom of CDC experts. Potential grantees are referred to the CDC's *Resources Guide for Nutrition and Physical Activity Interventions to Prevent Obesity and Other Chronic Diseases*, as well as the *Guide to Community Preventive Services*, which was developed by the Task Force on Community Preventive Services, a committee appointed by the director of the CDC.

## BUILDING COMMUNITY-BASED PARTNERSHIPS

To help build strong partnerships between local public health departments and the communities they serve, The California Endowment launched a five-year, \$37 million initiative in 1999 in partnership with the Public Health Institute in Oakland, California. *Partnership for the Public's Health* awarded grants to community groups and local health departments. The grants supported community partnerships aimed at influencing government and other institutions to establish public health improvement goals, to redesign systems, and to mobilize action to protect and improve the community's health. They also helped local health departments to be more responsive to community-based priorities and to more effectively perform the core public health functions of assessment, assurance, and policy development.

Participation in *Partnership for the Public's Health* has enabled local public health departments to strengthen their capacity. Through relationships with community leaders and local groups, the health department in Northern California's Shasta County, for example, has been able to better identify public health issues facing the community and improve targeted interventions. These relationships also led to significant change in the health department's organizational structure. As a result of community input, three new branches were opened and are staffed by residents. The department also expanded its services to include injury and disease prevention programming led by trained community members.

Through the *Partnership for the Public's Health*, the Community Health Council (CHC) in Long Beach worked to build leadership skills in its community. In collaboration with the Long Beach Department of Health and Human Services, CHC established the Health Leadership Training program, which has turned community residents into health advocates who can take the lead in solving local problems. Participants learn how to identify, assess, and address health issues and gain skills in leadership, conflict resolution, and public speaking. Program graduates, for example, participate in the Long Beach Alliance for Children with Asthma. They work as promotoras, or community health workers, providing asthma health education to families and other residents in their communities. Other graduates are organizing health fairs and neighborhood cleanups, and are teaching classes on nutrition, health, and physical activity.

## CONCLUSION

Foundations are well positioned to collaborate with federal, state, and local health departments to create change within the public health system. They can also support and guide partnerships that embrace a variety of community stakeholders and draw on the strengths of each. Working in complementary ways, partners can build on each others' strengths and share risks to form the foundation for a stronger, more effective public health system.

## RESOURCES FOR FOUNDATIONS AND COMMUNITIES

► **Cdc.gov** – The CDC is an excellent resource for health grantmakers, as it seeks to improve the public's health. Tapping into the CDC's leadership and scientists, as well as its databases, publications, and Internet-based tools, can provide grantmakers with a wealth of information on specific health issues and population groups.

The majority of CDC resources are available on-line. The agency's Web site provides access to the latest information on specific diseases and conditions; national, state, and local level data sets; journal articles; and programs and activities to promote health. These resources can be used to educate foundation staff, trustees, and grantees, as well as provide benchmarking data for new programs and initiatives.

► **Council on Foundations, *Disaster Grantmaking: A Practical Guide for Foundations and Corporations* (Washington, DC: 2001)** – This report presents the lessons learned from a year-long study by a joint working group of the European Foundation Centre and the Council on Foundations on how grantmakers can be more effective and strategic in responding to disasters. The report includes broad principles, lessons from experience, examples of good and bad practices, facts and figures, and a list of useful Web sites. It can be downloaded from the Council on Foundation's Web site at [www.cof.org/files/Documents/International\\_Programs/disasterguide.pdf](http://www.cof.org/files/Documents/International_Programs/disasterguide.pdf).

► **Ready.gov** – The Ready.gov Web site, sponsored by the U.S. Department of Homeland Security, is designed to assist the public in understanding, preparing for, and responding to a terrorist attack, natural disaster, or other emergency situation. Checklists, brochures, posters, toll-free hotlines, and other resources are posted to the Web site. There are also audiencespecific resources for groups such as children, families, and businesses.

## SOURCES

Grantmakers In Health, *Strengthening the Public Health System for a Healthier Future* (Washington, DC: 2003).

Grantmakers In Health, *Building a Healthier Future: Partnering to Improve Public's Health* (Washington, DC: 2005).

Grantmakers In Health, *Issue Focus: Partnering to Improve the Public Health* (Washington, DC: 2005).