

Supporting Children's Healthy Development: Place DOES Matter

There is increasing recognition that children and their families are generally as safe, healthy, and productive as the communities in which they live, work, and play. As a result, there is more focus on improving community conditions and mitigating negative influences on people's health and well-being. Through strategies targeted to communities, funders can support healthy child development by addressing the social, economic, and environmental factors that shape outcomes for children and families.

WHY PLACE MATTERS

Children's lives play out at the local level, with their health and development shaped by both family influences and broader societal factors. Of note are community-level factors, such as education, employment, housing, neighborhood conditions, and access to quality health care – *the social determinants of health* – which have powerful influences on health (Joint Center for Political and Economic Studies and PolicyLink 2004). Among low-income communities and communities of color, many of these factors are in short supply or are of poorer quality when available. Such deficiencies have historically resulted in more negative consequences to health outcomes among vulnerable populations (Bell and Rubin 2007).

When children live in poverty and conditions of personal stress, are exposed to poor quality air and water and other environmental pollutants, and have limited access to healthy food, their health suffers. This is reflected in higher rates of sickness and elevated risk for chronic diseases. Children living in poverty are six times more likely to have poor health than children living in middle- or high-income households (GIH 2007).

Place-based strategies seek to change conditions in communities by going beyond traditional categorical grantmaking and single-issue approaches to instead invest resources in a focused geographic location across several areas for an extended period (GIH 2010). Simultaneous investments are made in areas such as direct services, infrastructure and capacity building, leadership development, research, strategic communications, and advocacy.

Targeted efforts of this kind can provide a strong foundation for engaging and partnering with families, communities, and service organizations to encourage broader policy and system-level changes that support children and their families (Fine and Hicks 2008).

ACHIEVING SUCCESS THROUGH PLACE-BASED APPROACHES

There is growing evidence that to be most effective in meeting the multipronged needs of children and their families, current

community environments, including service and support systems, must be transformed. This includes building comprehensive systems within communities that coordinate and integrate health, human services, education, and other critical sectors to improve outcomes for families (Chang and Phillips 2010; VanLandeghem 2010).

Place-based strategies that achieve both systems change and program integration are often most successful when they address the numerous factors that lead to poor health. They often include such components as: 1) assessing, utilizing, and shoring up the current resiliency and capacity in target communities; 2) coordinating and leveraging the work done by multiple sectors; 3) involving community members as stakeholders from the beginning in planning and priority setting, implementing strategies, and influencing policy changes; and 4) engaging and working with an array of partners and key stakeholders that touch the lives of children and families (Smedley 2008).

Models that successfully address the multiple dimensions of, and various players in, children's lives can serve as "innovation incubators" to experiment with new strategies and practices (Fine and Hicks 2008). One notable example is the Harlem Children's Zone (HCZ), which supports children's educational, health, and social development from birth through college graduation within a 97-block area in Harlem, New York (Smedley 2008). This model provides a continuum of services to develop and improve children's family and neighborhood environments through a seamless series of free and coordinated best-practice programs. HCZ's work is now being replicated in 20 communities across the country through the federal government's Promise Neighborhoods initiative. Promise Neighborhoods seeks to integrate neighborhood-based education and afterschool programs with health, community engagement, workforce development, and other programs for families and the community.

Ultimately, broad policy and systems changes are necessary to ensure the long-term success of place-based initiatives. Scaling up effective practices and innovations requires keeping the whole system in mind, while directing capacity building efforts at local and state levels. Doing so can create an opportunity for promoting changes within specific geographic borders and can create an evidence base to guide the efforts of other communities nationwide (Nemours 2008).

INVESTING IN PLACE-BASED STRATEGIES

A long-term investment of resources from both the public and private sectors is required to affect sustainable, systemic change in communities. In the public sector, the federal government

has shown strong interest in applying place-based principles to both existing policies and new and promising innovations in order to strengthen economic growth and achieve greater cost effectiveness. It has also commissioned an evaluation of existing federal place-based policies to identify areas of duplication and overlap, and opportunities for interagency coordination (Orszag et al. 2009).

Within philanthropy, health and non-health funders from the national to local level have experimented with place-based community change strategies for several decades (GIH 2010). For example, state-level funders, including Nemours, The California Endowment, and an anonymous funder, began collaborating in 2009 to establish the Communities of Practice project. The project seeks to create national learning communities among eight innovative, cross-sectoral initiatives focused on healthy child development across the country (Chang and Phillips 2010). The sites are working to ensure that: healthy child development is a top priority; a shared vision, goals, and joint accountability exist for improving child outcomes; the infrastructure necessary for systems change is built and improved; and efforts are sustainable and maximize public and private resources. Knowledge derived, including specific recommendations for strengthening systems that serve children, will be disseminated through issue and policy briefs.

Applying place-based strategies at the local level, Saint Luke's Foundation of Cleveland, Ohio maintains a strong commitment to the urban neighborhoods historically served by the Saint Luke's Medical Center, from which it was converted in 1997. Early on, the foundation recognized that a significant investment in "place" would have the greatest impact on improving overall health status in these communities. Today, fully half of its annual grantmaking is focused directly on programs and initiatives to improve the health and well-being of children and families in the catchment area neighborhoods. For example, a three-year, \$300,000 grant to the Center for Reducing Health Disparities at MetroHealth Hospital embeds a community health fellow in one of the local communities. The fellow facilitates collaborative, neighborhood-specific planning around healthy community lifestyles, drawing on expertise in health eating/active lifestyles and the principles of "place matters."

Acting as a funder, advocate, educator, convener, and collaborator, the Incarnate Word Foundation seeks to support systemic change in St. Louis, Missouri, by increasing the capacity of local agencies and communities. Over \$300,000 will be devoted in 2011 to fund grassroots organizations working in the most impoverished areas of the city. One of its projects, the North St. Louis Place-Based Children's Initiative, brings together local educators and community and civic leaders to increase opportunities for low-income African-American children and families. It arose from a smaller initiative, the Marketplace of Ideas, a community-driven process in which leaders and community members provided grants to promote collaboration in addressing community issues affecting youth

and families. The winning grant recipients presented their programs at a showcase attended by community members, governmental leaders, educators, and other funders.

As these examples show, investing in intensive, place-based approaches is a promising way to tackle the many factors that influence individual and community health outcomes. Lessons generated by this work point to constructive roles for funders that include:

- ***Investing in planning processes*** – Doing so allows for assessments of the specific assets, strengths, and needs of communities, as well as how a place-based strategy may actually improve outcomes for vulnerable children and families. Families and other community members should be involved from the onset.
- ***Serving as a neutral convener/facilitator*** – Funders can open doors and take the lead in efforts to help engage stakeholders from various organizations and sectors. Fostering relationships among diverse stakeholders can provide a mechanism for supporting advocacy, collaborative problem solving, and shared leadership.
- ***Providing technical assistance and training support*** – Supporting technical assistance and training can provide the necessary skills to strengthen community organization and local leader capacity to build, strengthen, and implement place-based models. This includes establishing adequate community-level capacity to engage in effective organizational change and systems transformation to maximize outcomes for children and their families.
- ***Improving data collection and dissemination strategies*** – In addition to shoring up data research and collection processes, this includes supporting efforts to turn data into knowledge that can be, and is, used. The translation can bolster cross-agency work and collective decisionmaking, as well as ensure appropriate communication about needs and changes in a way that will resonate with and engage diverse stakeholders.
- ***Funding evaluation*** – Ongoing monitoring of the progress and impact of effective policies and programs increases the likelihood that they will continue, that new funding sources can be tapped, and that replication can occur in other areas.

CONCLUSION

Health care services alone are insufficient to promote children's health and long-term development. Efforts to ensure the best outcomes for children must also take into account the powerful influence that neighborhoods and communities have on families' lives. Interventions focused on better serving these populations will also need to engage the many sectors that touch the lives of children, including contributions from public, private, and philanthropic entities. Support received from these sectors can provide vital resources for comprehensive initiatives, especially those rooted in local communities.

SOURCES

Bell, Judith, and Victor Rubin, *Why Place Matters: Building a Movement for Healthy Communities* (Oakland, CA: PolicyLink, 2007).

The Annie E. Casey Foundation, “Why Place-Based Strategies Matter: WRAG Briefing on Promise and Choice Neighborhoods,” <<http://giving.files.wordpress.com/2010/06/why-place-based-strategies-matter.pdf>>, June 3, 2010.

Chang, Debbie, and Robert Phillips, “Place-Based Initiatives to Promote Healthy Child Development: Communities of Practice Project,” presented at AcademyHealth’s National Health Policy Conference, February 9, 2010.

Fine, Amy, and Molly Hicks, “Health Matters: The Role of Health and the Health Sector in Place-Based Initiatives for Young Children,” <<http://www.wkkf.org/-/media/58468F500069448E830154016ED0DFB0.ashx>>, November 2008.

Grantmakers In Health (GIH), *Pathways Out of Poverty: What Can Health Funders Do?*, Fall Forum Essay (Washington, DC: 2007).

Grantmakers In Health (GIH), “Tackling the Tough Work of Community Change,” *GIH Bulletin*, Issue Focus, March 22, 2010.

Joint Center for Political and Economic Studies and PolicyLink, “Building Stronger Communities for Better Health,” <<http://www.racialequitytools.org/resourcefiles/jointcenter3.pdf>>, 2004.

Nemours, “Helping Parents Raise Healthy, Happy, Productive Children,” *Big Ideas for Children: Investing in Our Nation’s Future* (Washington, DC: First Focus, September 2008).

Orszag, Peter, Melody Barnes, Adolfo Carrion, and Lawrence Summers, “Developing Effective Place-Based Policies for the FY 2011 Budget,” *Memorandum for the Heads of Executive Departments and Agencies*, <http://www.whitehouse.gov/sites/default/files/omb/assets/memoranda_fy2009/m09-28.pdf>, August 11, 2009.

Smedley, Brian, “Place, Race and Health: Promoting Opportunities for Good Health for All Children,” *Big Ideas for Children: Investing in Our Nation’s Future* (Washington, DC: First Focus, September 2008).

VanLandeghem, Karen, “Helping Communities and States Promote Healthy Child Development,” <<http://earlychildhoodcolorado.org/inc/uploads/Communities%20of%20Practice%20Policy%20BriBr.pdf>>, April 2010.