Community-Centered Solutions to Improving Health
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About Us

- Established in 2000
- $131 million through 975 grants
- Historically funded in three core areas
  - Access to Care
  - Healthy Living
  - Nonprofit Capacity Building
Community-Centered Health
Philosophy
Support communities to determine and act upon community-led solutions to improving health.
Core Components

- Clinical-community partnership with leadership by community
- Clinical shift
- Policy and systems change with wide reach
Elements

- Cross-walking data
- Acting through advocacy
Emerging Theme

Health is the product of where you live, work, learn, and play
Mothering Asheville
Where: Asheville
What:
- Infant Mortality Disparities
- Systemic Racism

Healthier Highland
Where: Gastonia
What:
- Obesity
- Neighborhood Safety & Civic Engagement

Collaborative Cottage Grove
Where: Greensboro
What:
- Asthma
- Healthy Housing
Successes

- Integrated community health worker
- Community members as thought leaders
- Community investment by municipalities
- Community members running for office
- Partners: CHC, LHD, City Planning, Hospital, Neighborhood Association
Successes

- Integrated community health worker
- Community members as thought leaders
- Remodeling 170 unit apartment complex
- Health system changing data sharing practices
- Health system changed their mission statement
- **Partners:** Free Clinic, Hospital, Housing Coalition, Faith-Based, Neighborhood Association(s), Universities
Successes

- Integrated community health worker
- Community members as thought leaders
- Community-led Doula program
- Community members at the table with health leaders

**Partners:** Clinic, LHD, WIC, YWCA, Communities in Schools, HHS, CHC, Family Justice Center, Neighborhood Assn, Legal Aid
Community-Centered Health 2.0

- Statewide RFP for community collaborations
- 170 letters of interest received
- 21 full proposals submitted
- 11 site visits conducted
- 7 to be selected for multi-year funding
What we’ve learned so far: Capacity

- Common language is important
- Capacity-building is essential
- Health care must take a back seat to community, but has technical skills for this work
- Equity sits at the center of most of this work
What we’ve learned so far: Sustainability

- Data must be looked at/shared in new ways
- Timelines for outcomes need re-set to 10 years and beyond
- Sustainability is hard
How this has impacted us
Strategic Reframing

- Shifts leadership to a pillar for all our work
- Elevates equity to a core element and organizational value
- Prioritizes policy and systems change
- Amplifies community voice
- Centers funding priorities on non-medical drivers of health
Areas of Practice

- Health System
- Food and Nutrition
- Child Development
- Neighborhoods and Environment
- Community Capacity