

MAPHLI - 18th Year
The Role of Public Health in an Era of Health Reform
Profile: Faith Based Entity Providing Public Health Services
Case Study for the AGENTS - March, 2010
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“Build It and They Will Come - Really?”

Team Project:

Our organization is called Everybody’s Place (EP). It is a nonprofit community organization that is also faith based. It is located within the 4th largest metropolitan city in the Midwest. The immediate surrounding areas serviced by EP struggle with poverty rates as high as 20%, which is higher than the US rate of poverty of 17%. Our average clients also face an unemployment rate of 25% with an average of 35% of the households being run by single mothers with high school level education. Currently, only 30% of our clients have some form of medical coverage or insurance and therefore, forego having regular testing, screening and at times even medicine. These hindrances are due to cost, accessibility and awareness. Additionally, our clients are forced to choose between supplying their families with a place to live versus food versus healthcare. In light of these difficult choices; despite the existence of critical health needs in the community; despite efforts to assist our clients with addressing these barriers to receiving services; and despite the opportunities given to solicit key community needs; the programs and services of EP continue to be underutilized by people within our communities.

EP’s parent entity, Every Person’s Church (EPC), has been in the community since 1954. To offer the surrounding communities a solution to Public Health support issues, EP was developed and incorporated in 1990 out of the directive of the board of EPC. EP’s mission was to provide community focused services, better known as “Public Health Services”. The primary focus of EPC’s mission is on the individual; thereby allowing it to change the world one life at a time. To accomplish this mission, EPC found that it was necessary to look beyond the church for the overall growth of the ministry. In looking at the formation and development of the structure as an offshoot of the church there were several things to consider and implement. These points of consideration included protecting the overall assets of the church, general service provisions of the community development entity, and governing practices between the two. It was decided

that the benefits of pursuing this strategy far outweighed not moving forward. Implementing a public health formatted model with a faith-based foundation brought more focus and energy to a specific part of EPC's mission. This strategy linked together the best of EPC's ministries with outside partners and funders. Additionally, EPC was able to develop the venue it needed to deliver services that could carry heavy liabilities and operational requirements, like daycares and treatment facilities.

One other potential drawback that had to be addressed was that EP can at times be prohibited by doctrinal beliefs in some cases of providing services. To address these types of issues that are in direct conflict with the doctrinal beliefs of the parent entity, EPC, EP separates them into two components Business and Moral. The ability to negotiate resources and solutions is a critical skill for EP. The business issues and resource needs were easier to address and were covered in the bylaws. For the more personal, individual issues, the ability to navigate within the boundaries established by EPC is often necessary to meet the needs of the more "hard to serve" and "special needs" clients. To address these issues, EP has learned to balance the need to think outside the box within established boundaries very well.

Additionally, EP's organization's programming was developed to tie to the mission and charge of its parent church, EPC. Additionally, EP has a wealth of volunteers and workers to draw from who support its mission. Therefore, EPC formed a separate non-profit corporation to not only protect the assets of the church from the liability associated with the more risky activities, but also establish a total ministry that could extend far beyond what one church could do on its own for the benefit of the communities and clients it serves. To ensure smooth communications and control between the two entities, EPC developed provisions within the new corporation's bylaws and articles of incorporation. These provisions gave EPC the authority to appoint and remove EP's staff, consent and veto EP's corporate financial and operational decisions, and amend governing documents whenever needed. It was determined that to be most effective at meeting both missions of EPC and EP, the right to exercise this type of authority is not confused with the exercise of influence over EP's day-to-day operations. EP is responsible for its own affairs though its own employees, directors, and officers. It has its own funds, which are not commingled with the funds of EPC. EP should have its own insurance; and it should pay its

employees from its own accounts. The structure must be this way so that EP is indeed recognized externally as a separate entity from the church. So even though EPC retained ultimate authority, EP operates relatively autonomously most of the time.

To go further, EP's stated mission is to positively impact the lives of others. For every client served, the ultimate goal is to provide the individual with access to holistic support services. This includes increasing people's awareness about their health so that they will be empowered to do something about it. To ensure that EP stays relevant as a service provider for its clients, EP maintains a strategy for strengthening its service base by conducting customer feedback surveys at the time of service and annual town hall meetings. The purpose of conducting a regular assessment process for EP's services relates to improving the health of the community and the well being of the families served.

EP's community programs continue to be developed based on the requests of the parishioners and assessments completed to determine the needs within the community. Assessment tools used to begin the formation of this entity included conducting surveys of the community, hosting focus groups with key informants, soliciting conversations with community partners, and the ongoing analysis of public health data for our communities. Based on this process, programs are then put into place based on the skills and expertise of members of the congregation. To date, these programs include a Food Pantry, Response System for emergencies, Family Counseling, Health Awareness, Substance Prevention and Ex-offender Support.

Organizationally, EP also faces challenges within the continuity of its leadership and staff. Program work often gets done by volunteers or is spearheaded by someone who has a particular talent or passion for a project. If they leave or are no longer available to lead, the project or program can easily fall apart. EP's leaders are often pulled in many different directions, so projects often don't get fully developed and carried through. So the promise of program delivery can at times be delayed or totally suspended. When this occurs repetitively it becomes hard to feel like things are getting accomplished.

At its inception, EP progressively increased its population served by 25% a year for five consecutive years. However, over the most recent 3 years there has been a significant decline of 25% in participation in certain service sectors of EP's offerings by the people within the church; and a 10% decline within the immediate community. Also experienced was a decline in funding streams by 58% within one year due to an economic downturn. So, though many of the services are still needed by the community, funding now is dictating a cut back in services. There are numerous tools used and historical data gathered to assist with the decision process. But EP must determine which services should remain. And for the ones that remained, how can EP increase participation and delivery to those that need it most? We have built it - now we must figure out what needs to be fixed in order for them to come back AGAIN - (and bring a friend)!

Internally, EP will need to develop and maintain the right fit of resources both people and programming as it strives to help address the needs of the community. EP has the environment to do this because its key characteristics include it being free to think outside the box in the people serving aspects; having spirited workers; illustrating a sense of community; providing a sense of family; facilitating a safe environment, and giving a strong sense of compassion. These capacities closely correspond with the "8 Strengths of Congregations" identified by Gary Gunderson in his book, *Deeply Woven Roots*. They are important because they help to expand the level of understanding for public health professionals on what faith communities have to offer to the faith and health partnerships. (Please see attached Addendum for Reference information).

It has also been determined through the assessment tools used that primary hindrances for individuals within EP's communities to accessing key Public Services is due to *accessibility*, *affordability*, and *awareness*. EP is aware that health disparities in low-income communities of color are an on-going justice issue; and much of what creates poor health in a community is socially determined by poverty and unemployment rate, racism; poor educational systems; food insecurity; and the lack of access to health care and social services. EP's approach is driven by the mission of EPC, its own resources and capacity in order to bring focus on health promotion. EP's goal is to provide support and care to individuals in the community and to educate community members about how to keep themselves as healthy as possible. Health Care reforms

that have recently been enacted will not have an immediate impact on EP and the communities it serves. *Eventually*, more people will have insurance coverage and be able to receive preventive health care services and medical care when they are sick. But people in EP's communities will continue to struggle with health issues. This is in part because the basic social conditions that impact people's health will not have changed, and in part because the reforms are inadequate for the need that exists. EP has also experienced the challenge of getting people to take advantage of services that are readily available and waiting on them to come.

EP continuously attempts to address the issue of accessibility by taking information and services to the individuals directly in addition to providing support onsite. Hours of convenience have been established, yet they still do not come. Over the years, EP has developed collaborative relationships with various partners, from governmental, public and private entities. Therefore, EP is able to provide 100% of its services to families and individuals at minimal to no cost. This does remove the barrier of affordability; and yet they still do not come. The only remaining issue is increasing public and community awareness of EP's service and programs. EP could do a better job of developing broader, more creative partnerships across congregations and external organizations. Multiple venues have been utilized to inform and update, like web blasts, mailing, and PSAs, and YET THEY STILL DO NOT COME!

EP's overall mission is to positively change an individual's health status. The programs and services offered to the community are just vehicles for impacting the individual's overall wellness. The difference that a faith based organization brings to the table is that the church creates a "safe" environment for the individual to be vulnerable and receive holistic care. In know these realities; it makes it even more crucial that faith-based entities like EP identify and address the issues that hinder their clients coming to receive this support. As AGENTS, we believe that finding the potential solutions to EP's situation of "Building it and not really know if they will come" can be attack by finding the right routes to take for EP. From previous experience, EP knows that the criteria to do this require a closer look at the following areas:

- Finding the right voice(s) to bring the message of EP's services to the community;
- Increase the right collaborations that facilitate building and increasing awareness;

- Utilizing the best forms of Media for reaching the various streams of clients and supporters; and
- Effectively connecting with previously established events and venues that have previously have been successful at reaching others that need EP's support and services.

The bottom line is this: for its long term survival, EP must get to and implement the best method and balance of processes needed to draw the clients in. This will get EP the results that it needs to survive and effectively service its community as a faith based public health entity.

Citations

The Case for Nonprofits by Joy Skjegstad

Deeply Woven Roots by Gary Gunderson

Dan Beirute, J.D. at WINTERS, KING & ASSOCIATES, INC in Tulsa, OK.

Addendum - Reference

Deeply Woven Roots by Gary Gunderson - “8 Strengths of Congregations”

Faith communities have the strength to:

- Accompany: Members journey with each other in times of difficulty and joy;
- Connect: People become resources for each other out of their mutual experiences;
- Pray: Prayer provides healing, courage;
- Bless: The ability to bring those at the margins into the community and the way in which rituals and faith practices create sacred space for healing and renewal;
- Convene: Leadership that brings people together from across barriers to address common issues of concern. Usually a role that a congregation plays in the broader community.
- Sanctuary: Physical space for meetings, support groups, programs; and safe and loving environment in which to find solace and protection; and
- Tell Stories: Bring testimonies of overcoming to encourage others to succeed.
 - Making meaning out of life
- Endure
 - Maintaining a consistent voice and mission in the midst of cultural turmoil and change
 - Intergenerational relationships, awareness of and connection to the ancestors — those who have gone before.