

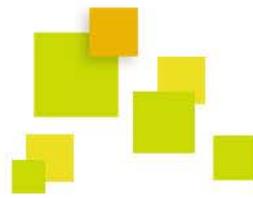
Team Community Partnerships

January 2015

Presented by:
Dr. Sabine Martin
Miles Ballogg
Christa Essig
Kari Christensen

Who We Are

All team members are part of ATSDRs
Brownfield and Land Reuse Steering Committee



Kari Christensen

Brownfield Coordinator
Oregon Health Authority
Portland, OR

Expertise in community driven
environmental public health.

Miles Ballogg

Director of Brownfields and
Economic Development
Cardno, Inc., Clearwater, FL

Expertise in promotion of
Environmental Justice and
Public Health through
Brownfields Redevelopment.

Christa Essig

National Procurement
Initiative Manager
School Food Focus
San Francisco, CA

Expertise in public health and
food systems analysis, nutrition
and environmental health.

Dr. Sabine Martin (team lead)

President/Owner
CTOR Solutions
Manhattan, KS

Expertise in strategic planning,
brownfields redevelopment,
community involvement,
and urban agriculture.



Team Leadership Goals

Build more resilient core leadership
in communities

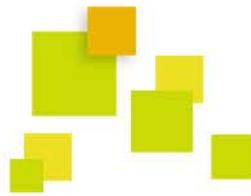
Foster community partnerships

Develop community capacity

Facilitate transfer of successful strategies/models to address
health disparities in brownfields communities to other
communities nationwide



Team Leadership Goals (cont.)



Achieve leadership goals through:

- > Community involvement
- > Creating a participatory environment
- > Effective communication
- > Leveraging team member's expertise
- > Transparency
- > Guiding not leading
- > Establishing trust



Team Leadership Goals (cont.)

Challenges

Distance

- > Home base of team members
- > Location of communities

Communication between team members and communities due to distance

Team members had not met face-to-face prior to NLAPH

Time limit of project (1 year)

Community visits/site visit (not all team members were familiar with participating communities)

Community dynamics/issues (team is “outsider”, not part of the community, limited exposure to community)



Team Leadership Goals (cont.)

Overcome challenges by

- > Communication
 - > Frequent conference calls – team and team/communities)
- > Listening to team members/communities
- > Site Visit of all team members to 1 of the 2 communities
- > Building trust with communities (slow process, time limit 1 year is detriment)



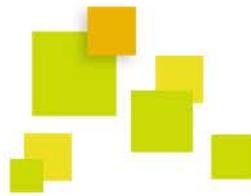
Individual Leadership Goals

Hone listening and facilitative leadership

Inspiring positive change



Applied Health Leadership Project



Team partnered with two community initiatives in 2014 to work on issues they have identified as critical to local health and/or economic development.

- > **Priority 1:** build capacity of local stakeholders to address their own concerns.
- > **Priority 2:** develop analytical tools and strategic models that can be applied in working with other locales across the U.S. based on the team's experiences in the two communities.

Envisioned long-term impact: a more resilient leadership core in each community, with stronger social capital, more effective community partnerships, and a more sophisticated sense of strategy.

With these key elements in place, each community is expected to eventually develop strong capacity to achieve revitalization goals, reduce health disparities, protect environmental resources near their locale, and improve overall quality of life.

Project Communities

K.I. Sawyer, MI

- > Former air force base
- > Closed in 1995, parts made available for civilian housing
- > No “grown” community
- > Population: 2,624 (2010 Census)
- > Median Household Income: \$26,000 (2012 ACS)
- > Lots of vacant buildings
- > Tainted community image

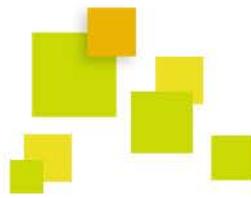


Jacksonville, FL – Health Zone 1

- > Median Household Income: \$27,792
- > Population: 122,089
- > 75% African-American
- > Limited access to affordable healthcare, healthy food and health and wellness resources



Big Picture: Then vs. Now



Then

- > Important stakeholders are disengaged
- > Communities are “stuck” with limited or no forward movement
- > Lack of energy in communities
- > Lack of overall capacity



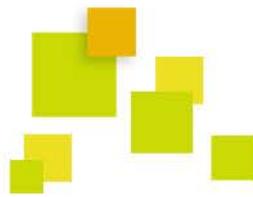
Now

- > Important stakeholders are engaged
- > Infusion of energy in communities
- > Redevelopment priorities identified – movement toward goals initiated



Specific Outcomes

(combined for both communities)



- > Clear priorities
- > Mobile clinic will be sited
- > Connection to others with similar projects to learn
- > Soil testing for community garden
- > Activities to achieve priorities divided among group, “bite size” approach
- > Resource list (incl. available grant opportunities) provided



Looking into the Future



- > As anticipated, one year was not long enough to see our initial goals through. Working with communities and establishing trust takes time.
- > The team will work together beyond NLAPH to provide guidance to the project communities. Additional expertise will be available via the ATSDR Steering Committee, as needed.
- > The team will facilitate transfer of successful strategies to address health disparities in brownfields communities to other communities nationwide via the ATSDR Steering Committee and in their own work.