

Circles of Care: Enhancing Access to Health Care in the Detroit Area

A plan to enhance access to health care in Detroit and Wayne County through an interfaith coalition

SUMMARY

In 2005–2007, the Interfaith Health & Hope Coalition, composed of faith leaders and health care professionals, collaborated with the Detroit Wayne County Health Authority (DWCHA) to improve access to health care for the uninsured and the underinsured in Metropolitan Detroit.

Key Results

Project staff reported the following results to RWJF:

- The coalition established a Circle of Care¹ in Western Wayne County, and laid the groundwork for three more in the Detroit area.
- The coalition sponsored five seminars, called Teach-Ins, to provide faith leaders and health care service providers with information and training on key health topics: asthma, depression, health care disparities and HIV/AIDS (two sessions). More than 375 local faith leaders and health care service providers attended the Teach-Ins, which were taught by health care professionals.

Funding

The Robert Wood Johnson Foundation (RWJF) provided an *unsolicited* grant of \$50,000. Project staff raised an additional \$90,000, including \$50,000 from the Detroit Wayne County Health Authority. The coalition also received more than \$20,000 in in-kind support from Henry Ford Health System and Blue Cross Blue Shield of Michigan.

¹ **Circle of Care:** a small network of faith groups and health care providers that focuses on community needs and helps people gain access to primary care and health education close to their homes.

THE PROBLEM

In the early 2000s, many residents in metropolitan Detroit, part of Wayne County, did not have access to stable and affordable health care, according to the Detroit Wayne County Health Authority:

- Some 21 percent of Detroit residents were uninsured, compared with 11.8 percent of all Michigan residents.
- Thirty-one percent of Detroit residents were eligible for Medicaid. However, funding shortfalls at the federal and state levels cut reimbursement rates for Medicaid in Michigan, creating financial problems for health care providers.
- Since 1997, 20 primary care clinics and four hospitals in Wayne County had closed.
- Fifty-nine percent of Wayne County residents lived in federally designated medically underserved areas.

Detroit Participates in Cover the Uninsured Week

RWJF has been sponsoring Cover the Uninsured Week, a nonpartisan campaign advocating for health coverage for all Americans, since 2003. Detroit began participating in the campaign that same year, with the Detroit Wayne County Health Authority managing it locally. The Authority is a public corporate body that works to improve access to health care for area residents. Local faith leaders collaborated with the authority during Cover the Uninsured Week, and then continued activities related to access to health care after the campaign.

Faith Leaders Establish the Interfaith Health & Hope Coalition

In 2003, faith leaders founded the Interfaith Health & Hope Coalition to improve access to health care for uninsured and underinsured people in Metropolitan Detroit. The coalition planned to address:

- The lack of affordable health insurance
- The lack of access to primary care
- Chronic diseases, and the need for culturally appropriate health education and behavior change models to help people address lifestyle and self-care challenges
- The need for a common information and referral base to enable clergy to link congregation and community members with health care resources.

For more on the goals of the coalition, see the Appendix.

The Coalition Develops Circles of Care

By 2005, the Interfaith Health & Hope Coalition included more than 100 faith leaders. Coalition leaders began to develop a network of member organizations to provide health information, health ministry² and health service referrals during that year's Cover the Uninsured Week.

During Cover the Uninsured Week 2005, the Detroit Wayne County Health Authority and the Interfaith Health & Hope Coalition unveiled Circles of Care. The idea was to create small networks of faith groups and health care providers—Circles of Care—that focus on community needs and enable people to gain access to primary care and health education close to their homes.

CONTEXT

In March of 2003, a coalition of 18 diverse organizations sponsored a week-long national campaign to raise awareness of the plight of the nation's uninsured and to elevate the issue on the national agenda, particularly among opinion leaders.

Cover the Uninsured Week (March 10–16, 2003) focused national media attention on the coverage problem and featured hundreds of town meetings, health fairs and other public events in communities across the nation. It was the largest public awareness campaign yet conducted on the coverage issue. This was a direct use of RWJF resources in an attempt to raise awareness about a key issue and thereby affect the nation's health policy agenda.

RWJF staff built the campaign incrementally over four years of increasingly ambitious public education activities. Hundreds of community organizations across the nation were also involved. The Circle of Care project is a direct outgrowth of Cover the Uninsured Week 2003.

THE PROJECT

The Detroit Wayne County Health Authority and the Interfaith Health & Hope Coalition collaborated to improve access to primary care for the uninsured and underinsured in metropolitan Detroit during this project. The authority served as the administrator for the grant, and provided technical assistance to coalition members.

² **Health ministry:** a movement in which faith leaders, health care professionals, health educators and other lay people work together to develop programs that integrate care of the body, mind and spirit. Activities include parish nursing, health fairs and groups promoting self-management of chronic diseases.

Project Activities

Project staff and participants worked to expand access to primary care, share information about health ministries and provide training and education on health care. A planning team of 25 to 40 faith leaders met monthly to develop the Circle of Care model, build the coalition and organize other activities.

Activities to increase awareness of local health care needs and improve the coalition's capacity to address them included:

- Sponsoring an Interfaith Prayer Breakfast in May 2006 and an Interfaith Prayer Luncheon in April 2007, as part of Cover the Uninsured Week 2006 and 2007. More than 350 faith and lay leaders attended in 2006, and more than 400 attended in 2007.
- Conducting a Health Ministry Interest Survey to identify health care issues, needs, resources and interests. Project staff conducted the survey at the May 2006 prayer breakfast; 116 of the 350 coalition members responded (33 percent response rate). Staff shared findings with all coalition members.
- Scheduling Sermon Sundays, in which participating faith institutions addressed health care issues during worship services.

Other Funding

The Detroit Wayne County Health Authority contributed \$50,000 to the project. Various contributors provided a total of \$40,000 for work on health care disparities (Pfizer, Wayne State University and four area health plans: Blue Cross Blue Shield of Michigan, St. John Health, Henry Ford Health System and Health Alliance Plan). Henry Ford Health System, Oakwood Healthcare System and Blue Cross Blue Shield of Michigan provided more than \$20,000 in in-kind support for office space, mailings and printing service.

RESULTS

Project staff reported the following results in reports to RWJF:

• The Interfaith Health & Hope Coalition established a Faith-Based Circle of Care in Western Wayne County, and laid the groundwork for three more in Oakland and Macomb counties and the Detroit/Hamtramck area. In Western Wayne County, some 20 faith-based institutions worked with St. Mary's Hospital and the Oakwood Healthcare System, a federally qualified health center³ (which provides

³ **Federally qualified health center:** a type of provider defined by the Medicare and Medicaid statutes. FQHCs include all organizations receiving grants under Section 330 of the Public Health Service Act, certain tribal organizations, and FQHC Look-Alikes, organizations that meet all of the eligibility of an organization that receives a PHS Section 330 grant, but do not receive grant funding.

primary care services in underserved communities), to enroll people in primary care. The Circle of Care also:

- Sponsored workshops and a monthly Lunch-n-Learn program to educate community members on health care matters, such as healthy eating, chronic disease awareness and management, personal accountability and insurance coverage eligibility.
- Provided people with referrals to nearby health care services.

In Oakland and Macomb counties and the Detroit/Hamtramck area, project staff held meetings with primary care providers and other organizations to build relationships with faith institutions in those communities. This is the first step in initiating Circles of Care in these three areas.

• The coalition sponsored five seminars, which they called Teach-Ins, to provide faith leaders and health care service providers with information and training on key health topics. About 375 local faith leaders and lay service providers attended the Teach-Ins, which were taught by health care professionals. The Teach-Ins covered:

Asthma: May 2007

Depression: October 2006

Health care disparities: May 2006

HIV/AIDS: November and December 2005.

Coalition members also presented workshops to help promote awareness of eligibility and enrollment opportunities for state-based health insurance programs (MIChild, for uninsured children; Healthy Kids, for pregnant women, babies and children under 19; Medicare Part D and Medicaid). They partnered in this work with the Detroit Wayne County Health Authority, City of Detroit, local school districts, Wayne County health departments, Blue Cross Blue Shield of Michigan and others.

- Coalition members opened six faith-based health clinics in Detroit and Wayne
 County, and several members expanded their health ministries to include on-site
 nurses and physicians treating patients one or two days a week. This work
 resulted from the coalition's efforts to share best practices among its members. Thus,
 the coalition extended the health care safety net for hundreds of uninsured and
 underinsured adults and children, according to Project Director Douglas Halladay.
- The coalition held more than 120 health fairs and enrollment events, focusing on raising awareness of state-sponsored health insurance programs, and increasing enrollment in them. Coalition members partnered with the Detroit Wayne County Health Authority, City of Detroit, local school districts, Wayne County health departments, Blue Cross Blue Shield of Michigan and others on these events.

- The coalition worked closely with the Michigan Faith-Based Health Association.
 An initiative of the Michigan Public Health Association with support from the Michigan Department of Community Health, the association promotes collaboration among faith-based organizations statewide to support healthier lifestyles for Michigan residents.
- The coalition grew from 100 to more than 300 members, representing more than 20 faiths and denominations and 15 health care services. This project "increased the knowledge base of faith leaders and empowered them to make health ministry a priority in their work," according to Project Director Halladay. The project also united faith leaders around the issue of the uninsured, building a foundation for greater advocacy.

Findings

In a report to RWJF, project staff reported the following findings from the 2006 survey of coalition members:

- Respondents cited prescription assistance, insurance, diet, exercise, chronic disease
 management and disease prevention as the most common health care needs within
 their congregations.
- Respondents cited insurance and prescription coverage; information, referrals and awareness; transportation; diet, nutrition and exercise; participation from religious leaders and congregation members; unemployment; and indifference and responsibility issues as their largest health care challenges.
- Seventy-eight percent of respondents said they were willing to collaborate and share resources with other faith-based organizations to establish or extend their health ministries.
- Seventy-three percent reported that they have a health ministry.
- Coalition members support the health and well-being of their congregations through health education, screenings and fairs, and through prayer circles and home and hospital visits.
- Respondents rely on word of mouth, phone calls, personal interviews and home visits to uncover their congregations' health concerns and needs.

LESSONS LEARNED

1. Partner with faith institutions to expand access to health care among the uninsured. Such institutions are a critical part of the health care safety net in urban areas, providing the first tier of care for many families. They also have a moral imperative imbedded in their mission, so they are an important voice for change. The

- coalition built an interfaith team that could both address the health needs of the community and advocate for health care reform. (Project Director/Douglas Halladay)
- 2. Sustain the engagement of faith leaders by enlisting lay leaders in planning and performing the work of an interfaith project. Convincing busy faith leaders to participate in creating the Circles of Care often proved difficult. Coalition leaders eventually solved the problem by asking congregation members to represent faith leaders in conducting many of the project's activities. (Project Director/Douglas Halladay)

AFTERWARD

The Interfaith Health & Hope Coalition became a 501(c)(3) organization⁴ in June 2007. Trinity Health awarded the coalition a two-year \$50,000 grant to continue its work (2007 to 2008). For example, the coalition sponsored a fifth Teach-In on cancer in October 2007.

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⁴ **501(c)(3):** section of the Internal Revenue Code that designates an organization as charitable and tax exempt. Organizations qualifying under this section include religious, educational, charitable, amateur athletic, scientific or literary groups, foundations, organizations testing for public safety or organizations involved in prevention of cruelty to children or animals.

APPENDIX

Goals of the Interfaith Health & Hope Coalition

The coalition established these goals for its work:

- Unite faith leaders representing Christian, Muslim, Jewish and other area religious traditions around shared issues of health justice, including covering the uninsured and access to preventive and primary care.
- Increase knowledge and awareness of health care safety net programs among audiences who need the services.
- Increase local empowerment by building a network of faith and lay leaders who are informed and ready to act on issues that impact the health of metro Detroit residents.
- Provide a network for ongoing sharing of best practices in health ministry, such as
 parish nursing, chronic disease self-management groups and health fairs, thereby
 increasing opportunities for health improvement across the continuum of care.
- Provide technical assistance for special events, marketing, media relations and health literacy for faith-based programs that promote health and health justice.
- Decrease racial disparities in health care by supporting the return of primary care to the city and covering the uninsured; and providing neighborhood settings for culturally competent programs in prevention and chronic disease management.
- Increase cultural and religious understanding in a geographic setting that is unique in the United States in its rich diversity of faith and culture.