



BUILDING HEALTHIER COMMUNITIES

One approach to the transformation of society is to take as broad a view as possible—one that encompasses education, housing, and all the interrelated components that create communities. An effort that keeps its eye on this big picture is Building Healthier Communities. This Sisters of Mercy initiative focuses on action and advocacy by Mercy-sponsored and other faith-based organizations, in partnership with local community organizations and residents. The initiative aims to increase human and financial resources to serve all the people of a community, especially the poor. This is done through public policy education and advocacy and collaborative healthcare, education, human services, economic development, and housing programs.

Building Healthier Communities had its start in 1995 with a grant from Mercy Action, a Sisters of Mercy funding program. In its first year it helped organizations in Omaha and Albany, NY, develop collaborative public policy and cross-ministry pro-

A Mercy-Sponsored Initiative Fosters Broad Collaborations

grams to address a range of community issues and needs. The initiative has also helped organizations address community needs in Erie, PA, and is discussing ways to assist potential projects in Baltimore; Buffalo, NY; and Des Moines.

SPONSORSHIP AND GOALS

Building Healthier Communities is sponsored by Mercy Housing, Inc., and McAuley Institute (see **Box**). The initiative's codirectors, Maggie Grieve, director of community initiatives at McAuley Institute, and Sr. Mary Kay Dobrovolsky, RSM, coordinator of community development at Mercy Housing, Inc., have assembled a national working group of faith-based organization leaders who develop integrated strategies for influencing local and national debate and spurring action on programs that promote individual and community health. This effort has several long-term goals:

- To promote a holistic vision of healthy communities that is rooted in the Church's social justice teachings
- To establish a national communications network to support advocacy and programs among Catholic and other faith-based organizations
- To act as a catalyst for local action that serves community revitalization
- To produce models that can be replicated in distressed communities

Building Healthier Communities also works through teams at the local level, where specific problems and programs are addressed. In Omaha and Albany, teams are working on issues determined by the areas' specific needs.

NOT-FOR-PROFIT STATUS IN NEBRASKA

In Omaha, a working group representing local healthcare systems, a Sisters of Mercy college and high school, Catholic Charities, Nebraska

THE PARTNERS

Mercy Housing, Inc., and McAuley Institute represent a full spectrum of housing and community development services.

Mercy Housing, Inc. (MHI), is a Denver-based system of not-for-profit housing organizations that provides development, financing, management, and technical assistance services. MHI ensures high-quality, affordable, service-enriched housing for the economically poor as part of its mission to strengthen families and promote healthy communities.

McAuley Institute is a national not-for-profit housing organization that works in partnership with not-for-profit, community, and faith-based organizations to create safe, affordable housing. From its Washington, DC-area base, McAuley offers technical services designed to help organizations plan, develop, and manage housing and a revolving loan fund, as well as education and advocacy on public housing policy.



Catholic Conference, and housing and community development organizations is focusing on the sustainability and viability of not-for-profit organizations in the face of legislative action that threatens their tax-exempt status.

In 1995, the Nebraska State Revenue Committee studied state tax exemptions and recommended a policy of "payments in lieu of taxes" for street repairs, fire and police services, and community services, a concept that has gained increasing support with the media and state legislators. The issue was not taken up in the last legislative session, but is expected to be an important issue in the next session.

The prospect of higher costs imposed on not-for-profit organizations—at a time when funding for healthcare, education, housing, and other services has been slashed—calls into question the viability of not-for-profits and threatens to decrease care for the poor and uninsured.

In this context, the Nebraska Building Healthier Communities group has concentrated on building a network of not-for-profit organizations and advocates to work on advocacy and develop a common statement defining the relationship between not-for-profit organizations, the taxation structure, and the community. Public education efforts on the critical role of not-for-profits in providing services and supporting communities in Nebraska are also a priority.

NETWORKING IN NEW YORK

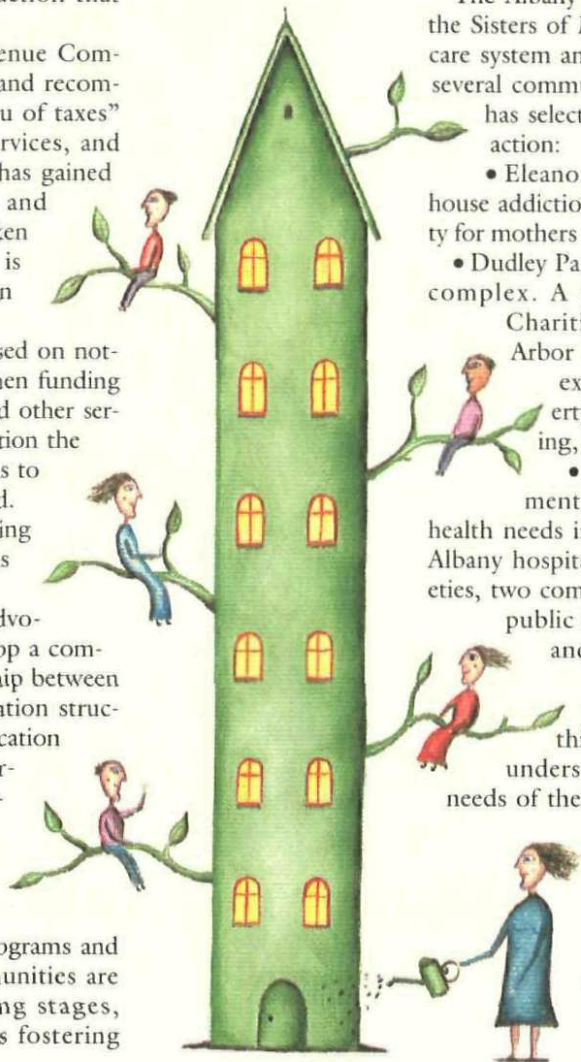
In Albany, where a wide range of programs and services that support healthy communities are already in place or in the planning stages, Building Healthier Communities is fostering

stronger collaborative relationships that provide a broad base of support for programs and assist their implementation.

The Albany group includes the local leader of the Sisters of Mercy, a Mercy-sponsored healthcare system and college, Catholic Charities, and several community-based programs. The group has selected several collaborative efforts for action:

- Eleanor House, a community-based in-house addiction treatment and job training facility for mothers and their children
- Dudley Park Apartments, a 263-unit housing complex. A partnership between Catholic Charities, the Urban League, and the Arbor Hill Concerned Citizens group is exploring ways to acquire this property and incorporate a range of housing, health, and childcare services.
- Health Capital District Assessment, a comprehensive assessment of health needs in the Capital District Region. All Albany hospitals, HMOs, county medical societies, two community health centers, the county public health commissioners of Albany and Schenectady counties, and the county public health director of Rensselaer County are involved in this effort, whose goal is to gain an understanding of the health status and needs of the area and develop effective strategies to improve individual and community health.
- Initiative for the Elderly, a collaboration between Catholic Charities and Mercycare Corporation to create a seamless network of services for the elderly and

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WHAT IS A HEALTHY COMMUNITY?

A healthy community does much more than meet basic human needs for food, clothing, and shelter. A healthy community provides:

- Safe, affordable, and accessible housing
- A vital and diverse economy, with jobs that offer a living wage for individuals and families
- Healthcare services for all stages of the life cycle
- High-quality education, responsible childcare, accessible public transportation, and recreational facilities

• Awareness and respect for natural resources, sustainable natural environments, and the community's historical and cultural roots

- Public processes that give all residents a voice in decisions that affect their community
- Collaboration among public, private, and not-for-profit sectors of the community
- Respect for and engagement between people of all races, cultures, and religions

Source: McAuley Institute

MENTORING PHYSICIANS

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build on that data? And, second, our data have increased awareness concerning the care of people facing life-threatening illness. How do we provide the needed guidance and products while continuing to do research and develop innovative approaches? These approaches require rigorous scientific testing. That takes time—but our member organizations are ready to make changes now. We hope the local focus groups and sessions like the November teleconference help us close the gap between research and reform.

Cacchione said two more Catholic healthcare organizations may be joining SCD:CCC at the coalition's January board meeting. "Although still others have said they would like to join, we may soon find ourselves reaching a point of no return," he added. "If the board is too large, it might become unmanageable. The issue seems to be controlled growth versus broad participation. But we remain committed to creating a cultural change for the care of persons with life-threatening illness."

—Gordon Burnside

NOTES

1. In November 1994 Oregon voters narrowly approved Measure 16, making physician-assisted suicide legal. In November 1997, in a second referendum, voters defeated Measure 51, an attempt to strip physician-assisted suicide of its legal status.
2. "These last days are full of opportunities for growth and healing in the spiritual, emotional, and relational realms, for both the person with the illness and those who love him or her. Unfortunately, these opportunities are often missed because professional caregivers, focused on physical signs and symptoms, cannot recognize other symptoms." Supportive Care for the Dying: A Coalition for Compassionate Care, *Living and Healing During Life-Threatening Illness*, Portland, OR, 1997, p. 7.

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Other Albany projects include housing initiatives and advocacy on numerous issues.


build new models for responding to their needs.

• Ambulatory Care Working Group, an effort to develop coordination between Catholic Charities services sites (such as emergency shelters, transitional housing, and childcare centers), a community center, parish outreach sites, and MercyCare healthcare services. Projects may include community forums, health education services, health screenings, and clinic services.

Other Albany projects include housing initiatives and advocacy on welfare reform, housing issues, Medicare/Medicaid issues, and children's health.

EFFECTING SYSTEMIC CHANGE

"Building Healthier Communities aims at enlivening and engaging the social ministry of Catholic-sponsored institutions in an effort to meet human and financial needs in impoverished communities," says McAuley Executive Director JoAnn Kane. "Ultimately, we hope that this initiative will serve the housing, healthcare, and human service needs of people who are poor while it promotes relationships that can effect systemic change," concludes Lillian Murphy, RSM, president and CEO of Mercy Housing, Inc. —Ann Stockho

 For more information, contact Maggie Grieve, 301-588-8110, or Sr. Mary Kay Dobrovolny, RSM, 402-398-5979.

CHA BOOKS

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