

Jacksonville Strategies



Innovative Approaches to Meeting Community Priorities

Increase access to health care services	Increase transportation options to health care facilities	Increase access to community gardens and farmers markets	Increase access to groceries with a full range of healthy food	Provide health and life skills for youth	Address drug and alcohol challenges that may be impacting open space and health care access	Provide liability coverage and supplement park improvements, maintenance and programs	Prioritize contaminated sites and surface waters for cleanup that have the opportunity to provide public access

Mobile Health Clinics

Mobile health clinics provide an **alternative** way into the health care system for the **medically disenfranchised** in both rural and urban communities.

In one example:

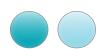
- Significant return on investment (36:1).
- One van saved over \$3 million in prevented emergency room visits.
- Added value of nearly \$18 million in priority prevention services.

Mobile health vans can be viewed as an intermediate strategy for delivering care to underserved communities. For example, a van might "park" for regular service delivery at a location that could be suitable as the future site of a brick and mortar community clinic.





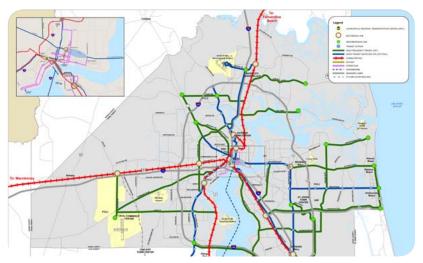
Case Studies



Transportation and Health Collaboration

Collaboration between Duval County Health Department, Jacksonville Transportation Authority, and the Jacksonville Integrated Planning Coalition could include:

- Operating a clinic-provided van service.
- Establishing new public transportation routes.
- Hiring a Transportation Coordinator.
- Educating Medicaid patients about eligibility for Non-Emergency Medical Transportation (NEMT) benefits.
- Collaborating with a local Medicaid NEMT transportation broker.
- Implementing a Transportation and Referral Management System.
- Coordinating volunteer escorted medical rides.
- Negotiating extended clinic hours.
- Delivering prescriptions.





Case Studies

Health Educators and Peer Coaches

Primary care physicians alone may not always meet the broad range of patient needs. Community health educators and peer coaches:

- Help patients manage chronic disease and prevent worsening conditions.
- May be trained by the health center.
- May be paid employees or volunteers
- Typically come from the target community.
- Provide trusted support and firsthand knowledge about barriers faced by patients.
- Are trained to provide information about a range of options for improving outcomes.

Depending on the conditions targeted for management, **youth may be engaged**.





Case Studies

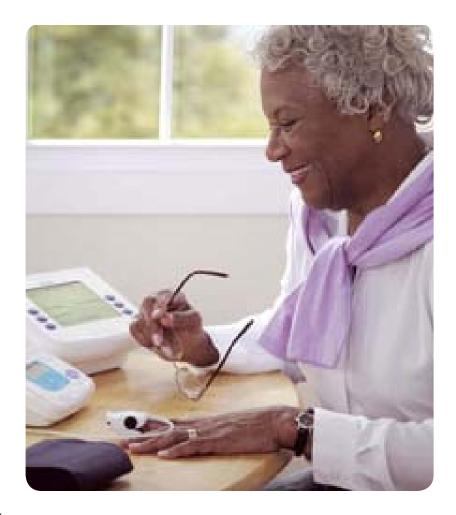


Telemonitoring Chronic Health Conditions

Telemonitoring systems:

- Allow patients to report information about their conditions via telephone to an automated system.
- Can help patients better manage chronic conditions.
- Cut down on the number of appointments needed.

When **self-reported** data suggest an intervention would be beneficial, a health care provider places a follow-up phone call to the patient to ask questions and administer advice.



Case Studies

Cultural Competency Training for Health Workers

- Including patients as part of the health care team is especially important for the management of chronic diseases, which require active and enduring patient participation in treatment.
- Cultural competency training raises awareness about health disparities that may exist, as well as the barriers faced by underserved communities.
- Training helps ensure positive and effective clinical visits, and reduces need for multiple follow ups.





Case Studies



Urban Community Agriculture

Community Supported Agriculture (CSA):

- Alternative food production/distribution model.
- Consumers buy into a "share" of a season's harvest with weekly pickups or deliveries.
- Designed to allow food growers and consumers to share in the risks and benefits of farming.

Urban Community Agriculture adapts traditional CSA system to reflect the needs and resources of urban environments. Models include:

- Urban-located farm business.
- Cooperative CSAs that aggregate produce from several farmers or urban gardeners.
- Workers' collectives where volunteers can barter labor hours for produce.







Mobile Farmers Markets

A "produce aisle on wheels," a mobile farmers market takes **fresh**, **healthy**, **and affordable** produce directly to communities that need it most:

- Hospitals
- Assisted living centers
- Public housing projects
- "Food deserts"
- Large employers like universities or city government offices

Like the Mobile Health Clinic, a Mobile Farmers Market might be used as an **intermediate strategy** towards attracting a healthy grocery store to a neighborhood.





Mini Farmers Markets

Combining the community-building benefits of traditional farmers markets with the flexibility of mobile markets, "mini" or "pop up" markets:

- Are small-scale, neighborhood-based markets.
- Feature produce from a small number of farmers (4 or 5).
- Are typically located in areas with limited access to healthy food choices.
- May be designed to accept federal food assistance as payment.
- Offer additional marketing opportunities for farmers.
- May be especially attractive to larger scale urban gardeners or beginning farmers.





Case Studies

Gardens Sited at Community Institutions

Community gardens built and maintained at key community hubs (schools, clinics, rehabilitation centers, and public housing developments) can:

- Increase food security and provide education, skills development, recreation, and therapy.
- Provide outdoor learning classrooms relevant to a variety of subjects.
- Involve clinic patients in food growing.
- Be integrated into programs that tackle obesity.
- Include horticulture therapy programs, which engage patients in non-clinical activities that support healing, wellness, and recovery.





Food Cooperative

Food cooperatives:

- Are a classic model of food autonomy.
- Are owned by their members, who are generally customers or workers.
- May take the form of retail stores or buying clubs.
- Are generally committed to providing members with high quality food at the best value.
- Engage in consumer education.
- Typically source locally grown and manufactured products.
- May develop into community hubs.





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"Carrotmobs" at Locally Owned Stores

Carrotmobs:

- Are the opposite of a boycott.
- Are a cost effective way to organize community members to influence businesses.
- Only require community organizing to turn out customers.
- Can be organized with the help of online and social media tools, making this fun, contemporary strategy particularly attractive to young people.
- Started in the U.S., but have been held around the world.





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Youth Empowerment through Healthy Food

Food has the potential to catalyze **education and empowerment** of young people in programs that engage kids from diverse backgrounds and with diverse interests, offering **skills development** and **critical thinking** in a variety of areas:

- Health and nutrition
- Cooking
- Community organizing
- Social justice
- Growing and harvesting
- Business development and finances
- Regional economics
- Sustainability

Motivated young people are more likely to **encourage people around them** to reconsider their nutritional and economic choices.



Case Studies



Parks Liability Insurance through Umbrella Organizations

Creative strategies to overcome the barrier to access presented by liability insurance include:

- Negotiating distribution of exposure to liability with the City. In some cases, cities have agreed to fully cover insurance for certain park uses.
- Purchasing of more affordable insurance policies through national umbrella organizations. Umbrella organizations do the work of negotiating the best rates and benefits with underwriters.
- Forming public/private partnerships to cover liability insurance.
- Handling liability insurance through a nonprofit organization.





Parks Advocacy Organization

Parks advocacy organizations can:

- Lobby the City to highlight community priorities.
- Network with and unite the resources offered by key departments, organizations, and agencies.
- Organize volunteers to perform park maintenance, from trash collecting to tree care.
- Raise funds to finance park programs.
- Provide an umbrella liability insurance option for recreational leagues.





Case Studies

Neighborhood-Specific Brownfield Inventory

Communities can take an increased role in the brownfield redevelopment process - from community visioning through plan implementation. Community-based organizations:

- Can be especially effective in leading efforts for site identification and prioritization.
- Typically face more barriers than expected because property owners fear the stigma of a "brownfield" label, while local government often lacks the resources or political will to invest in cataloguing contaminated sites.

EPA's Area Wide Brownfield Grant may present an opportunity for a community to fund a neighborhood-scale inventory process.



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