

Joseph P. Addabbo Family Health Center

NEW YORK, NEW YORK

Joseph P. Addabbo Family Health Center (Addabbo) is a Federally Qualified Health Center with approximately 230 personnel and soon-to-be seven sites, serving members of the New York City community. With a mission “to be the leading preventive and comprehensive primary health care center in New York,” Addabbo leverages the social determinants of health (SDH) with particular focus on youth development and family socioeconomic stability to break the poverty cycle. Addabbo efforts also include planting trees in the city to improve air quality and livability, offering WIC services, establishing a community garden to improve nutrition, organizing a Farmers’ Market where community garden participants can sell their crops and residents on nutritional assistance programs can access healthy foods with the help of an electronic benefits transfer machine, partnering with a local jail to facilitate re-integration of inmates into the community, providing a variety of after-school teen and family programs, fostering an emergency preparedness coalition for the area and leading a comprehensive multimillion dollar effort to prevent and reduce youth violence.

The Joseph P. Addabbo Family Health Center (Addabbo) started out as a free pediatric clinic in 1981. Congressman Joseph P. Addabbo supported its expansion and evolution to a Federally Qualified Health Center (FQHC), though he did not live to see the grand opening in 1987 of the community health center (CHC). Since then, Addabbo has grown to a CHC with 230 personnel, six sites, and a budget of nearly \$25 million under the leadership of its executive director, Dr. Peter Nelson. With a mission “to be the leading preventive and comprehensive primary health care center in New York,” Addabbo served about 27,200 urban residents from the Queens and Brooklyn communities through 152,100 patient visits in 2010. This CHC predominantly serves African-Americans and Hispanics, but also provides services to many Caucasians, Native Americans, and Asian or Pacific Islanders. Sixty-five percent of patients are covered under Medicaid, 17 percent self-pay, and 14 percent have third-party insurance. Almost nine out of 10 fall at or below 200 percent of the Federal Poverty Level (FPL).

Addabbo has been addressing the social determinants of health (SDH) through a variety of efforts that focus on education, housing, social inclusion, safety and security, hope for a better life, improving the local environment and jobs. The Women, Infant & Children (WIC) Supplemental Food Program has been at this CHC for 17 years and is a federal program designed to provide food to low-income pregnant, postpartum and breastfeeding women, infants and children until the age of five. Addabbo in partnership with a social service agency named Claddagh Inn established a community garden about 20 years ago to

mitigate the level of chronic disease and improve nutrition in a food desert area and continues today. Furthermore, the CHC organized a Farmers' Market 12 years ago where community garden participants can sell their crops to earn extra income and residents on nutritional assistance programs can access healthy foods with the help of an electronic benefits transfer machine. The farmers' market would afford Addabbo with the opportunity to have "mini-health fairs" where they would check blood pressures, answer health questions and refer potential patients to their medical clinics if indicated. These efforts increase their patient population and help support efforts that leverage the SDH.

There are very few trees on the peninsula and Rockaway is on the flight path to Kennedy International airport. These factors contribute to the poor air quality in this urban area and exacerbate asthma in affected individuals. In 2007 Addabbo partnered with New York City Mayor Michael R. Bloomberg and New York Restoration Project (NYRP) Founder Bette Midler in the Million Trees NYC initiative to plant and care for one million trees throughout the City's five boroughs in the next decade. The goal of this effort is to expand New York City's urban forest by 20 percent to improve air quality. Addabbo helped find locations to plant trees in the Rockaways where the trees were most needed and would be cared for.

A new effort starting summer of 2010 is to provide a medical home and access to social resources for recently released inmates of Rikers Island (NYC's main jail complex) in order to facilitate their transition back to the community. This new effort will assure continuous medical care for those in need and assist in housing and other benefits to allow the inmate a smoother transition back into their communities. The hope is that it will reduce recidivism.

This peninsula has only three roads in or out and two are prone to flooding, so in 2009 an emergency preparedness program called Ready Rockaway began and is ongoing. It is comprised of residents and professionals in the field of emergency preparedness from Addabbo Center and Peninsula Hospital Center who hope to educate residents about what to do in various kinds of emergencies and will assist in organizing a coordinated regional emergency preparedness plan.

The Rockaway Peninsula is a relatively isolated strip of land in the borough of Queens in New York City, composed of a mixture of neighborhoods separated by economic and racial lines. The area includes high density public housing, nursing homes, and half-way facilities. There is a high incidence of violent crime, substance abuse, social isolation of families, as well as a large number of children who have emotional and behavioral problems with few resources for help. In 1999 Addabbo lead a comprehensive effort to reduce violence in the community called PRYSE that will be discussed in more detail shortly.

Dr. Nelson, Addabbo's CEO, has been at Addabbo for 15 years and believes strongly in the benefit a focus on improving socio-economic and environmental conditions will bring. He sees the potential of these efforts to break the poverty cycle in low income communities. The challenge is in finding sustainable funding. For example, Hunter College students designed a wellness center for the

Rockaways, but so far the community health centers hasn't been able to secure the \$10 million needed to build the facility.

At Addabbo, most ideas for potential programs and designs of efforts for leveraging SDH primarily originate in the office of the CEO in consultation with the Chief Medical Officer. There is neither a program planning department nor a grant writing department. These jobs are performed by the staff members who will be most involved with the effort, as designed by Dr. Nelson with support from the executive board. Dr. Nelson believes that most programs need to be self-sustaining or increase the patient base thus increasing funds to support efforts that leverage the SDH. Dr. Nelson considered creating a self-sustaining department that would focus on the development, management, and financing of efforts to leverage the SDH and work with other Addabbo departments. However, the CHC has yet to secure the funding necessary to start such a department. In all, Addabbo directed approximately 6.7 percent of its 2010 budget towards programs that leverage the SDH.

Addabbo had attained experience with many smaller projects that leverage the SDH (youth intervention, education, safety) before engaging in a larger one. One such large effort was when Addabbo led a coalition of community-based organizations in 1999 in response to a request for proposals put out by the federal grant-making program, Safe Schools/Healthy Students (SS/HS) initiative. The guidelines for SS/HS required collaboration among the local school system, law enforcement agencies, health and mental health agencies and other community-based organizations. Although the groups knew each other, this was the first time they would work together in a coalition. Accordingly, Addabbo gathered the support and commitment of 10 subcontracting and funded partners, more than 25 volunteer partners, and 12 legislators and their representatives to propose the Project for Rockaway Youth in Safety and Education (PRYSE) – a comprehensive effort that would deal with youth violence in the Rockaways and promote a safe, healthy and nurturing environment for students and families. The master plan called for each partner to perform a specific set of program activities that would contribute to achieving the final goal to provide at-risk students with alternatives to violence and substance abuse, to enhance community cohesion and increase health and safety throughout the Rockaways.

Initially the Addabbo PRYSE project was not selected as a winner when awards were first announced in 1999. However, in response to the tragic school shootings in Columbine, the Colorado Congress increased funding for SS/HS. In this second round, PRYSE was selected in 2000 to receive \$8.4 million over three years to serve as a resource for community empowerment, development, and health. PRYSE ran from June 2000 to May 2003.

Project Management and Partnerships – PRYSE was designed as a package of both specific, grant-funded social and health services and a coalition of community-based organizations and residents engaged in voluntary community-building activities. Addabbo served as the PRYSE project manager and had primary responsibility for organizing and administering the project on a day-to-day basis. There was

a PRYSE Steering Committee, composed of representatives of both funded and unfunded agencies; community residents and other stakeholders, which met monthly and served as an advisory board to project management. A broader PRYSE Coalition included both members of the Steering Committee and also community representatives affiliated with or interested in PRYSE. The Coalition met regularly throughout the year, while other PRYSE committees met either monthly or as needed. Having a somewhat decentralized project structure appeared to have helped limit the management and fiscal burden on the CHC and enabled wider reach across the community, regardless of whether an individual was a CHC patient or not.

Among the ten funded PRYSE partners were the community school district; Bank Street College, Baruch College CUNY, Community Mediation Services, F·E·G·S Health and Human Services System, NYPD – 100th and 101st Precincts, Queens District Attorney’s Office, Rockaway Development and Revitalization Corporation and Rockaway-Inwood Ministerial Coalition. Non-funded partners included the Action Center for Education and Community Development; Queens Borough Public Library, NYC Commission on Human Rights, the Major’s Office of the Criminal Justice Coordinator, Administration for Children’s Services, the NYC Department of Juvenile Justice, The Rockaway Chamber of Commerce, the Ocean View/Ocean Bay Tenants Association, and the Caribbean Women’s Association.

Programs – The goal was to provide at-risk students with alternatives to violence and substance abuse, to enhance multicultural appreciation, community cohesion and increase health and safety throughout the Rockaways. To focus on youth, safety, health, and education, PRYSE created or expanded some 40 social and health programs in the Rockaways, serving an average of over 10,000 children and families each year. Many of the activities operated in Rockaway’s two high schools, three middle schools, and 10 elementary schools. Funded activities include tutorial programs to enhance academic success, employment-related training and events to increase youth opportunities for meaningful work, and physical fitness activities for improved health in young people. PRYSE funded programs emphasized strengthening families and unifying the broader community as one important path to improving health and safety of minors. The NYPD ran the Safe Corridors Program that had officers patrolling the routes youth most commonly took home after school from their middle and high school. Unfunded PRYSE partners contributed in a variety of ways, for example organizing multi-cultural events and providing media expertise. The Queens Borough Public Library held reading readiness programs as well as improving literacy programs. For brief descriptions of the many individual programs, please see the Project Evaluation Report at http://www.sshs.samhsa.gov/media/sshs_media/pdf/PRYSE_Final_Evaluation_Report.pdf.

Under PRYSE Addabbo sponsored the following programs: Career Day, where clinic staff organized many open houses to share employment and career opportunities; Drama Therapy at two Rockaway schools, where a coordinator and social workers worked together to provide counseling, support and referrals to youth and their families; the Clergy and Health Advocate Training program, which invited and

trained clergy members in crisis counseling, signs and symptom recognition, and general health education; Health Advocate training for local adult and youth residents to serve as sources of reliable information; the Rockaway Health Alliance to engage in health care related advocacy, outreach and education to Rockaway residents; and a Community Resource Center to provide assistance with a wide range of needs, including after school teen and family programs, counseling, and parenting classes.

Staffing – The range and contributions of funded and unfunded partners allowed Addabbo to manage and participate in PRYSE with relative ease. Besides having its director of mental health act as the PRYSE Project Manager (0.33 FTE), Addabbo staff commitment included a director of outreach (1.00 FTE), Community Resource Center personnel (2.5 FTE plus one volunteer Parent Advocate), a health educator (1.00 FTE), and two part-time educational outreach workers. Activities conducted by PRYSE partners other than Addabbo were managed by the respective organizations, who would in turn work with and report to the PRYSE Project Manager.

Partnerships – PRYSE had to learn to understand and deal with divisions along race, language, religion, income, institutions, and geography to form an effective coalition. They did this through coalition communication, having a master plan, frequent evaluation of efforts and adjustment as needed. At times the participants experienced frustration or disappointment, but the PRYSE coalition sustained itself and gained in number, strength, and purpose.

Impact – Baruch College conducted a formal evaluation of PRYSE through telephone surveys. Formal evaluation was focused on those activities funded by the federal SS/HS grant. The evaluation examined general perceptions as well as data on community trends in crime, education, and health. The Executive Summary of Baruch’s report found the following positive results: a drop in the crime rate; more children and teens participating in afterschool activities; an increase in parent involvement in schools; the percent of fourth graders reading at or above grade level increased from about 25 percent before the start of PRYSE to over 40 percent by the spring of 2003; and there was noted success in solving community problems collaboratively among the many stakeholders. Rockaway residents reported an increase in trust of their neighbors, and the percentage of adults who see the problem of smoking, drinking, and drugs getting worse declined from over 45 percent to under 35 percent. Unfortunately the survey found mixed results regarding safety in the schools. The overall perception about PRYSE was that it was a success. The PRYSE activities that were not funded by the federal grant, while not part of the formal evaluation, were deemed to have contributed much to the coalition building, community organizing, and outcomes of the project.

Funding & Sustainability – PRYSE was funded by an \$8.4 million grant from the federal Safe Schools/Healthy Students initiative. With the help of the PRYSE Steering Committee, PRYSE received \$3.4 million in additional grant funds leveraged by the work of the PRYSE Steering Committee from a variety of sources, including the federal Community Access Program; New York State Department of

Juvenile Justice, New York City Housing Authority, JP Morgan Chase, the Independence Community Foundation and the Children's Aid Society. In 2003 the SS/HS grant expired and was not renewed for PRYSE. Most PRYSE efforts were terminated while some parts of the program that needed little or no funding were sustained. Examples of continuing efforts include the Annual Rockaway Walks program (a structured walking program) and the Action Center's Health Education Literacy Project (H.E.L.P.) now ongoing in partnership with PFIZER. It was hoped that a lasting benefit of PRYSE was the creation of an ongoing coalition of community residents and leaders, service providers, educators, and law enforcement personnel that is experienced in working collaboratively on solving community problems. Sadly, without the continued funding, the program services were not sustainable. The community trends identified in the evaluation report by Baruch College are encouraging, but the consensus among participants and community members was that PRYSE had only begun to find its footing and realize its potential when the three-year grant ended.

As Dr. Nelson put it, "when about 70 percent of your health is determined by your environment and your decisions about your environment and life conditions, and only 30 percent is determined by what we call the medical health systems; it becomes obvious where we need to direct more attention and money. I think this is the most important step that American health care needs to take in order to improve the health of the population."