

**Community Action Board
Southwest Center for Community Health Promotion
Bi-Annual Meeting Minutes**

El Esplendor Resort
Rio Rico, Arizona
April 16, 2007

Chairs: Ila Tittelbaugh, Evelyn Whitmer

Present: Tina Aguilar, Sarah Allen, Rosa Alvidrez, Martha Barrera, Sylvia Cancio, M. Madga Ciocazan, Mary Contreras, Maria Cirquera, Jill G. de Zapien, Lea Dodge, Jojean Elenes, Lourdes Fernandez, Gwen Gallegos, Robert Guerrero, Susan Hanson, Carol Huddleston, Maia Ingram, Susan Kunz, Joel Meister, Kerstin Reinschmidt, Blanca Robles, Cecilia Rosales, Ken Schachter, Lisa Staten, Rosie Stewart, Ila Tittelbaugh, Emma Torres, Sarah Whilte, Evelyn Whitmer

Welcome and Introductions

Evelyn welcomed everyone to the meeting and asked those present to introduce themselves and name a favorite fruit or vegetable.

Review of Minutes

Evelyn Whitmer asked the group to review and approve the minutes. Minutes were motioned to approve the minutes with changes. Minutes were approved.

Discussion about the Canyon Ranch Center for Prevention and Health Promotion (Jill G. de Zapien)

The group was informed of the Center's new name "Canyon Ranch Center for Prevention and Health Promotion". The idea was raised to input to explain the issues that we raised. Include something with Mel's interest in health and underserved population this doesn't identify directly with the community. There is background on the website introducing it. We will make sure to include our partners. [Do you think this needs to be rephrase?]

The concern was raised that the communities are not ready yet to move in a different direction. They are just now beginning to address the complex issues of diabetes. What should be our next steps?

We have been looking at secondary prevention, but primary prevention is an area that we can expand into. It can include policy, physical activity and nutrition.

How do we sustain the infrastructure we put in place? We need new questions. What policies should we support? "Diabetes is the mother of all the diseases – metabolic disease, insulin resistance looking at kids. Distribute funding we can get out further to Yuma etc. We can think of policy 10-20 years down the road. We should follow through with all our communities. "How do we move streams of funding to prevention?" We

need to think and follow up with Cigna. Pursue reimbursement from insurance companies.

Strategic Plan: We should go after the companies that don't cover health benefits like the large providers, private insurance companies and pharmaceutical companies. Not just projects from companies but policy wide residential developers. How do you support and sustain prevention in our regions and slate?

Brief update of Center activities (Lisa Staten)

Hand out was given to the group with information on the Center's new people and new numbers for the recruitments. Workshops presented, publications, grants submitted etc.

Overview of the Strategic Planning Process (Evelyn and Ila)

Same vision who we were—last meeting we looked at priorities. Today we want to look at the 10 year plan. What's our Road Map 20 years down the road? We want to start off with a Mission. Now with the name change what do we want to achieve? Broaden out a little and look at wellness? What is our mission? Where are we moving to?

It was mentioned that back in our meeting in 2000, the committee raised the issue of diabetes. We want to look at community infrastructure and focus on diabetes. At our last meeting with CDC, they requested for us to change. Primary prevention was one of the recommendations. It was also suggested that we should go into the schools. It's nice to treat them but we also need to focus on awareness. Community members feel that UA members want them to go and act on the next issue. Policy change will help sustain programs. How do we make primary prevention more equal? We need to maintain the grass roots.

Question was raised "how do we do that?" Make it go in that direction? Policy and sustainability. How do you change it at state, county and city level? It was mentioned that money is not going into prevention.

It was raised that the meeting with Cigna was important and that they need to come forward, we need to start attacking insurance companies. People feel helpless we need to make this a strong issue. We have the power to attack the providers and make sure that education is given at the doctor's office. We need to put pressure on everyone. It was mentioned that the nice thing with the Cigna meeting was that they came to us for information. Comments were made to attack Walmart. Another issue was raised that we need to be caution on how we attack the insurance companies we don't want them to use us and have most of the credit go to them. Other community members agreed with the comment.

Also it was mentioned that voters have passed taxes for medicare – we need to let people know how bad sugar consumption is. The university can say here is why sugar is so bad for you. Our region happens to be the border – good relationships with the schools would be very good. The drop out rate from high school is very high. We need to find how to go to the next level.

The group was asked to get into five groups and come up with a mission, vision and values. A mission would be a general broad statement, vision - what is it that you would like to see happen, values – to treat all people equality

Results:

Group 2 (Ken Schachter)

We talked about strategy in pretty tough strokes, we talked about policy development helping to translate evidence research into practice, supporting and facilitating programs development and talked about different audiences that we would like to reach, basically from communities to practitioners to policy makers so when we came to the mission statement we were trying to be pretty broad. We talked about really targeting the communities of the Southwest and the people of the Southwest and the fact that individual interventions or policy or programs would need to be tailored appropriately. Finally we decided that we warned the business probably of getting too involved with tertiary prevention any direct health care services, but we were more in the business of facilitating primary public health care services. And our mission statement was to improve the health and well being of the diverse communities and the people of the Southwest.

Group 1 (Magda Ciocazan)

We took our strategies and discussed that it actually we changed the mission statement to say that we want it to provide leadership and advocacy for the community at large for health policy changes and then we fell apart when we came to health. First we had patient care and the community at large is whatever community we decide to work in.

Group 3 (Gwen Gallegos)

Of course we want to save the world! To advocate for the maintenance and to improve the optimal quality of health for all. So we talked about primary prevention but we can't only prevent, we also have to help treat people who already have health problems. It's got to be dual as maintaining quality as well as to help people who already have health problems. We discussed a lot of things. So it really is that overall we need to cover everywhere.

Group 4 (Jo Jean Elenes)

We kind of jumped around a little bit and then we had to get clarification because we needed to make sure that was the mission of whom and so we verified that yes in deed this is the mission of those of us on the CAB so that really helped us to kind of provide it better. One we talked about health promotion and things like that and we really wanted to represent the CAB and going beyond that. We talked about empowerment and leadership and we thought that those words didn't quite fit so we came up with champion and healthy wellbeing of our families and communities through advocacy and policy changes. And we wanted to mention families to bring it really home to us as individuals in representing not only our cities but our families and I think we should since we talked about advocacy and policy changes in what we are looking to achieve.

Group 5 (Susan Kunz)

We did the same. We sought some clarification on whether this was a statement about the CAB. We talked a lot about a guidance role in the community for the CAB and advocacy to the center. As far as the targeted groups go, we thought it was the Arizona Border Community including public health identities, public health providers, and policy makers. The unified theme would be prevention wellness. So we came up with the mission of the CAB to get community connections to provide input and advocacy structure regarding wellness and prevention and to provide to the border communities.

In the following full group discussion it was mentioned that sustainability is very important, to be a champion for these programs. The model should be for the whole nation. We shouldn't limit ourselves. We would really want to effect policy. Everyone was reminded that we are looking for a mission 20 years down the road. Right now we are looking at the bigger picture. This mission is for the Canyon Ranch Center for Prevention and Health Promotion. "Border" should be added as this is where we've been working for over 20 years.

Evelyn led the crafting of CAB Mission statement. After discussions, the following mission was formulated:

Champion Optimal Health and Well-being in our diverse communities of the US/Mexico Border Region

Meeting adjourned at 12:00