



About Kaiser Permanente

together
WE BUILD A BRIGHTER FUTURE



- Founded in 1945
- America's oldest and largest private, nonprofit healthcare organization
- 8.4 million members — 6.1 million members in California
- Over 12,000 physicians representing all specialties and 130,000+ additional employees
- Operations in 9 states and Washington, D.C. with 29 Medical Centers and 423 Clinics

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Kaiser Permanente's Clinical Priority Areas

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Clinical Area	Prevalence/Incidence
Overweight and Obesity	4,400,000
Asthma	95,000
Cancer	25,000 new cases/yr
Chronic Pain	250,000
Coronary Artery Disease	165,000
Depression	415,000
Diabetes	450,000
Heart Failure	80,000

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Obesity-Related Health Care Costs

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Nationally

- Health care costs 36% ↑ total cost
- Medications 77% ↑ total cost

Kaiser Permanente Northern California

- BMI 30-34.9 24% ↑ total cost
- BMI ≥ 35 44% ↑ total cost

Health Affairs; Vol. 21: Number 2
Arch Intern Med; 1998; 158: 466-472

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Physical activity is cost effective



The relative benefits of cardiovascular interventions

Mediterranean diet	65%
Smoking cessation	60%
Physical activity	50%
Blood pressure control	42%
Lipid control	25%
Aspirin for CAD	25%
ACE inhibitor for CHF/MI	22%
Beta-blockers for MI	18%
Tight blood sugar in DM2	?
Triglyceride/HDL control	?
Vitamins	0
Hormone replacement	0

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The Challenge for the Health Sector



- Excellent medical care alone is insufficient
- Major drivers of the obesity epidemic are environmental
- Consensus: Comprehensive environmental and social change is required to turn down the epidemic

Our Members Can't be Healthy if They Live, Work, Play and Learn in Unhealthy Communities

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Our Approach



Focus on enabling fun, safe physical activity as a part of every day life, particularly in underserved communities.

- Strategic grantmaking
 - Policy change and physician advocacy
 - Industry and philanthropic collaboration
 - Engaging organizational assets
- And more....

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A. Strategic Grantmaking



Overall objective: help residents in underserved communities be more physically active as a part of everyday life by making improvements to the conditions of their neighborhoods, workplaces, and schools so that they promote the "healthy choice as the easy choice".

Related to outdoor space, that means strategies to:

- Increase use of parks, trails, playgrounds, bike paths, gardens, etc.
- Ensuring resources are safe and accessible (close by, affordable, culturally appropriate, etc.)
- Help residents become familiar with what is available, esp. structured programs and activities

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Example: Regional Parks Foundation together WE BUILD A BRIGHTER FUTURE

Goal: increase use of parks and outdoor space to promote health

Grant (6th year) supports:

1. Trails Challenge for up to 5,000 participants/year in East Bay Regional Parks

- Parks entrance fees waiver
- All program materials: guidebook, trail usage log, etc.
- T-shirts, other collateral, and reward for completing challenge

2. Camp-related efforts:

- Camp scholarships for underserved youth
- Healthy meals at camp
- Organic garden at Camp Arroyo in Livermore



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Example: Trust for Public Land together WE BUILD A BRIGHTER FUTURE

Goal: Increase/enhance more outdoors space for safe physical activity

Grants support:

- advocacy for park deficient communities to benefit from state infrastructure bonds
- expansion of Fitness Zones in southern CA
- analysis of benefits of parks in City/County of Denver



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Fitness Zone

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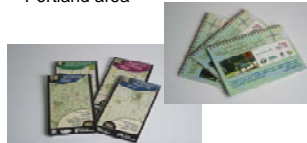
Example: Walk There!

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Objective: increase the number of people walking for short trips rather than using car for both health and environmental benefits.

Grant supports:

- development of walking guidebook with 50 walks in 4 county region
- series of 20 guided walks last summer in Portland area



Example: Rails to Trails Conservancy **together**
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Objective: Assess recreational & health needs of communities adjacent to 1-mile stretch of the Metropolitan Branch Trail that can be used for recreation and active transport (to work, school, errands, etc.)



Grant supports:

- Needs assessment/research and community engagement to identify:
 - Recreational and physical activities resources, needs, and opportunities.
 - Strategies to increase physical activity for members of target communities.
- Trail tours and bike rides for community members



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B. Physician Advocacy & Policy Change **together**
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Objective: use our assets as a health organization to influence public debate, knowledge, and policies related to land use, open space and other issues that impact opportunities for community residents to be physically active as a part of every day life.

We do this in two key ways:

1. **Physicians as advisors, spokespersons and health experts**
2. **Organizational endorsement of significant bills and policies**

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Example: Physician Advocates **together**
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1. Dr. Sandy Stenmark (Colorado)
 - CO Dept. of Education Committee to revise Health Education and Physical Activity standards
 - Advisor to CO Kids Outdoors Coalition
 - Safe Routes to School National Partnership Advisory Board

2. Dr. Phil Wu (Northwest)
 - Metro Executive Council for Active Transportation
 - Board member of Westside Transportation Alliance
 - Member of Initiative for Bicycle and Pedestrian Innovation



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Example: Organizational Endorsement **together**
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Metro Bond Measure 26-80 for Natural Areas, Parks and Streams (2006, passed), enabled:

- Acquiring natural areas for protecting wildlife habitat, preserving water quality, and enhancing public access to nature
- Allocations to local governments for acquisition of natural areas and parks and projects related to public access to nature



Oregon House Bill 3141 (2007, signed by Gov.), requires

- Minimum physical education minutes during school
- Data collection on number of physical education minutes provided

California State Assembly Bill 2989 (2008, dead), would have

- Created Outdoor Environmental Education and Recreation Program
- Increased ability of underserved/at-risk populations to participate in outdoor recreation and educational experiences

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C. Industry and Philanthropic Collaboration together WE BUILD A BRIGHTER FUTURE

Objective: share our health expertise and use our funding resources to influence how colleagues in “adjoining” fields to consider health as a factor in their work

Sharing health expertise

- Obesity training with City of Los Angeles Recreation & Parks staff
- Healthy Eating and Active Living workshops at Smart Growth Conferences for health professionals to understand land use and planning concepts

Funders Collaboratives

- National Convergence Partnership for Healthy Eating and Active Living
- Regional Convergence efforts

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D. Engaging Organizational Assets together WE BUILD A BRIGHTER FUTURE

Objective: to leverage the assets of the total organization to make a difference in communities.

Examples



- National Get Outdoors Day in Denver
 - “It’s Your Health” game show by Education Theater Program to engage audience on health messages
 - Kaiser’s Pediatric Weight Management Nutritionists delivered health messages
- Colorado employees built playground in underserved neighborhood in partnership with KaBoom
- Southern CA facilities services employees adopted Pasadena city parks with baseball facilities

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Partnership Ideas together WE BUILD A BRIGHTER FUTURE

- KP looks for:
 - Efforts that target underserved communities
 - Creative, multi-faceted partnerships that incorporate “nexus” strategies
 - Opportunities to leverage multiple resources/assets at KP
 - Efforts that are sustainable and have long-term impact
 - Target healthy eating and active living (primarily)
- Be pro-active and offer ideas
- Get to know what health partners have to offer and why they need you
- Health partners care about....health outcomes, and more!



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For More Information together WE BUILD A BRIGHTER FUTURE

www.kp.org/communityhealth

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