

WHYY Seeks Guidance from Healthcare and Community leaders

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On February 24, 2006, WHYY held a Community Leadership Summit as part of its effort to expand the programmatic focus of its Caring Community Coalition to include healthcare. At the Summit, leaders from health, insurance, industry, government and patient advocacy organizations shared concerns about healthcare in greater Philadelphia, and identified solutions through institutional collaboration and partnership with WHYY.

Representing diverse stakeholders in the health of the community, including David B. Nash, MD, MBA, Chair of the Department of Health Policy at Jefferson Medical College, participants prioritized health and healthcare issues according to the amount of control and influence they felt their organizations had over the issues and by indicating which issues resonated with their personal passions.

Issues reached beyond basic health and healthcare to address interdependence of related factors such as poverty. The group acknowledged the dichotomy between problems of the healthcare system, which relate to leadership and infrastructure, and problems of community health, which range from economic development, obesity and violence to lack of awareness of preventive health measures.

Three primary challenges emerged through discussions:

- **Large Cultural Rift** – Exemplifying the gap that exists between interest in the latest technology and research and the less glamorous promotion of preventive public health measures. Environmental factors such as public awareness, messaging in commercial media, reimbursement policies and current domains of healthcare practice all create a diminished position for messages of preventive health.
- **Lack of a Common Vision** – There is a need to continue dialogue to find and adopt a common language regarding health and healthcare issues. In the Philadelphia region there is an added complexity in that healthcare is both a service and a significant factor in the local economy. The industry has not come together to develop a shared vision, which could direct political leadership, especially if it focused on economic issues related to healthcare.
- **Limited Community Focus** – To improve health and healthcare in Philadelphia, there must be a shift in focus from the problems imbedded in the healthcare system to those plaguing the community's health. A focus on the community would include issues across the broad health and healthcare continuum, as well as the voices of diverse populations.

To address these challenges the leaders recognized related issues for the Philadelphia area:

- Barriers to access to care;
- Language barriers;
- Lack of political will at local, state and national levels to address healthcare systemic challenges;
- Healthcare leadership skills development;
- Improving public understanding of quality healthcare; and
- Promote informed decisions in consumer-directed care.

The participants agreed that there is great potential in collaboration with public broadcasting, and identified the role for WHY Y

- Engaging other media including commercial and print to inform the community and inspire more positive messages, possibly creating a “Broadcasters’ Coalition for a Healthy Region.”
- Serving as a neutral convener of stakeholders to talk about information and its quality and the best way to disseminate it.
- Finding ways to convey content that resonates with multiple populations including those not in the traditional demographic of public broadcasting viewers or listeners.
- Provide video programming for television systems in hospitals, waiting rooms and other venues to reach non-traditional public television viewers.
- Partner with healthcare providers who have existing content.

Building on momentum from the national “Cover the Uninsured Week” held in early May 2006, the group suggested working collaboratively around the issue of uninsured persons. The leaders felt that this could be the first in a series of healthcare topics and could serve as a model. Each person indicated what their organization could bring to a collaborative effort, including government relations and public affairs staff, access to chapters of professional organizations, providing subject matter, experts/key informants, data, stories, initiatives providing care to the uninsured, funding and access to different perspectives.