



## Cultivating Health and the Economy, Side by Side

Have you ever gone into work sick because you couldn't afford to miss a day? Or perhaps you are a small business owner trying to figure out how to pay for your employees' health insurance as you balance the cost increases and need to expand your staff? Then you know that health and the economy are related, but you may not realize just how much. One region in central Michigan not only saw the connection, but set out to discover exactly how health and the economy influenced each other in their communities and how they could simultaneously have a positive impact on both.

Their initiative, called THRIVE (Transforming Health Regionally In a Vibrant Economy), is a cross-sector collaboration that includes a wide range of stakeholders in Michigan's Great Lakes Bay Region. It grew from the visionary realization of how interdependent health and the economy really are, and how they continuously affect each other.

The collaboration and commitment among everyone involved in THRIVE has enabled some major accomplishments. They have amassed an incredible pool of data about the people living in their region and the organizations that influence health and well-being there. They used that data to understand how health and the economy are connected. Based on that information, they've identified priority areas where they can have the greatest positive impact. They formed teams to focus on those priorities, and by the end of 2018 THRIVE will have assembled a list of evidence-based interventions and actions they plan to take to influence—even transform!—those priority areas. And they're just getting started!

THRIVE has demonstrated it's possible to tackle health in close collaboration with business and economic leaders—including all kinds of non-profit and for-profit organizations from both the public and private sectors—to everyone's benefit. They recognize health and the economy are mutually reinforcing: as one improves or struggles, so will, inevitably, the other. This understanding grows from an important insight: a "systems" view of health and the economy, which sees all entities and conditions in a region as interlocking gears in an overarching health and economic system—not two separate systems, but *one system that encompasses both*. Once THRIVE began to visualize the system this way, it became clear that not only is economic prosperity dependent on health, but "health" is more than just healthcare or the absence of illness: it's the broad list of factors that dive deeper into "population health and well-being" (meaning, in the aggregate, are people's lives going well—and do they feel like they are?) such as income, education, and social connections.

So how did THRIVE get where it is today?

### Planting the Seeds

THRIVE has long roots so it's impossible to pinpoint a single, specific point of origin. Instead, key conversations, activities, experiences, and community assets all weaved together to form the seeds that enabled it to come to life. For instance, in early 2016, Cathy Baase, the Chief Health Officer at The Dow Chemical Company (the region's largest employer), held conversations with company leadership about the importance of regional community and health systems to the success of the company's strategy. Those meetings influenced Dow leadership's support of efforts to improve population health and well-being.

Dow leaders stimulated and connected with an evolving regional dialogue among leaders in key positions at major institutions, community groups, and businesses in the region. Many of them had already noticed the opportunity space for improving the region's health and economy and began to grow and spark more attention in this area.

*“For a region with a large corporate employer, multiple higher education institutions including a medical school and several hospitals, it is surprising to see the challenges to access to care and low scores for important public health indicators. With 20% of the GDP spent on healthcare, the local community deserves better outcomes. It is our hope that our regional initiative and the alignment among multiple stakeholders will positively impact both the economy and the health of our communities.”*

- George Kikano, Dean, Central Michigan University College of Medicine

Regional leaders were primed for these conversations because two multi-stakeholder collaborations had been actively laying the groundwork for cooperative change for several years. One was the **Michigan Health Improvement Alliance (MiHIA)**, a multi-stakeholder collaboration working to achieve a “community of health excellence,” comprised of representatives from health systems, public and behavioral health, insurers, health care providers, employers, and non-profits. MiHIA had a comprehensive focus on four facets of health and health delivery—population health, patient experience, provider well-being, and cost of care—and had been convening stakeholders across the region for ten years to pursue system-level improvements in population health and healthcare quality and value. The other major group was the **Great Lakes Bay Regional Alliance (GLBRA)**, comprised of representatives from the business, non-profit, and education sectors. GLBRA promoted regional economic prosperity by bringing counties together for projects like a large-scale regional STEM initiative.

In addition to those two groups, several other community organizations collaborated for many years on an annual conference dedicated to advancing population health. The series drew national thought leaders and created a shared exposure to leading ideas and examples.

### **LESSON LEARNED: Coalitions Lay the Groundwork**

THRIVE benefited from the history and work of coalitions like MiHIA and GLBRA. Forming coalitions—even of limited scope—to start working toward system change is a good first step for other regions that want to emulate THRIVE's success.

*“Our region has advanced experience in collective action—making planned, cooperative efforts to create change—but not in the healthcare arena. The region is supported by four large health systems, robust federal qualified health clinics, a medical school, multiple physician residency training programs, and many health professions and community-based programs. Yet, even with these many regional strengths, partnerships and assets, data continues to indicate gaps in access and health outcomes, ultimately reinforcing opportunities for improvement. It was clearly a systemic problem. When we started meeting and holding our region up to the mirror—we knew we could do better.”*

- Beth Rotszatycki, CEO, MiHIA

*“The model is broken for employers. Instead of paying to keep people well, they're paying for sickness and emergencies. It's like taking care of your car. Change the oil and get a tune-up, or you're going spend more on repairs when it breaks down. Employers need lower costs, increased access to physicians and specialists, and healthier employees. And if we can keep more care in the Great Lakes Bay Region, our region will prosper.”*

- Matthew Felan, President and CEO, GLBRA

### **LESSON LEARNED: Find Committed Leaders Early**

THRIVE owes much of its success to leaders determined to put the work in to improve health and the economy. To emulate THRIVE, other regions can start by finding and supporting the right leaders so they can lay the groundwork and get the conversations going.

Sensing an opportunity to tackle these issues thanks to the momentum from successful collaborations like MiHIA and GLBRA and the support of heavy-hitters like Dow, key influencers set up meetings with the wider breadth of local leaders starting in mid-2016. There, they made the case for the links between health and the economy, and for the need for collaborative, systems-level change. They impressed upon the business community that the health and well-being of their employees, partners, and customers matters to their mission. Using a pitch centered on macroeconomics—such as the overall regional health and economic decline, outmigration, and the comparative attractiveness of other regions—they were able to convince both health and business stakeholders that in many ways, they were trying to accomplish the same things, but those goals would require teamwork to accomplish. All these meetings culminated by convening local business, university, and health delivery leadership to ask: “Are we ready and willing to take action on this opportunity to reach our mutual goals?” The answer was a unanimous “yes.”

### **LESSON LEARNED: Make the Value Proposition**

Getting business and economic leaders on board requires making the case that improving population health will also improve their bottom line and help them achieve their goals.

They started by forming a small Launch Team. One initial step for this group (in early 2017) was a search for a partner who specialized in health system transformation and could help with a top priority goal of the Launch Team: create a regional portfolio of interventions (in other words, a list of actions THRIVE could take to have a positive impact on the regional health and economic system). They needed the portfolio anchored in data with the ability to project clear expected outcomes for the investment. Attracted by its expertise, history of cutting-edge thought leadership, and data-driven approach, they chose The Rippel Foundation and its ReThink Health team.

## **The Region’s Fertile Soil . . .**

Many factors came together to set the region up for launching THRIVE. One of the region’s advantages was having several institutions with active strategies of change and a vested interest in the region’s prosperity—such as Dow Chemical and Central Michigan University—because they were motivated to see the region prosper. Another advantage was that those institutions—and many others—were not just superficially present. They sent representatives with authority to make commitments on behalf of their organizations, enabling negotiation.

### **LESSON LEARNED: You Need Decision-Makers at the Table**

THRIVE could not have accomplished much if the stakeholders had not sent top decision-makers with authority to negotiate and make commitments on behalf of their organizations.

The region was also fertile for such an initiative because MiHIA and GLBR’s previous work set a standard of action for other stakeholders who joined THRIVE and provided a credible, solid foundation on which to build. The region had a head start because the commitment to deal with health and the economy was anchored by these two existing focal organizations and their breadth of partners and members.

It was also a huge boon to have respected, connected leaders dedicated to the initiative:

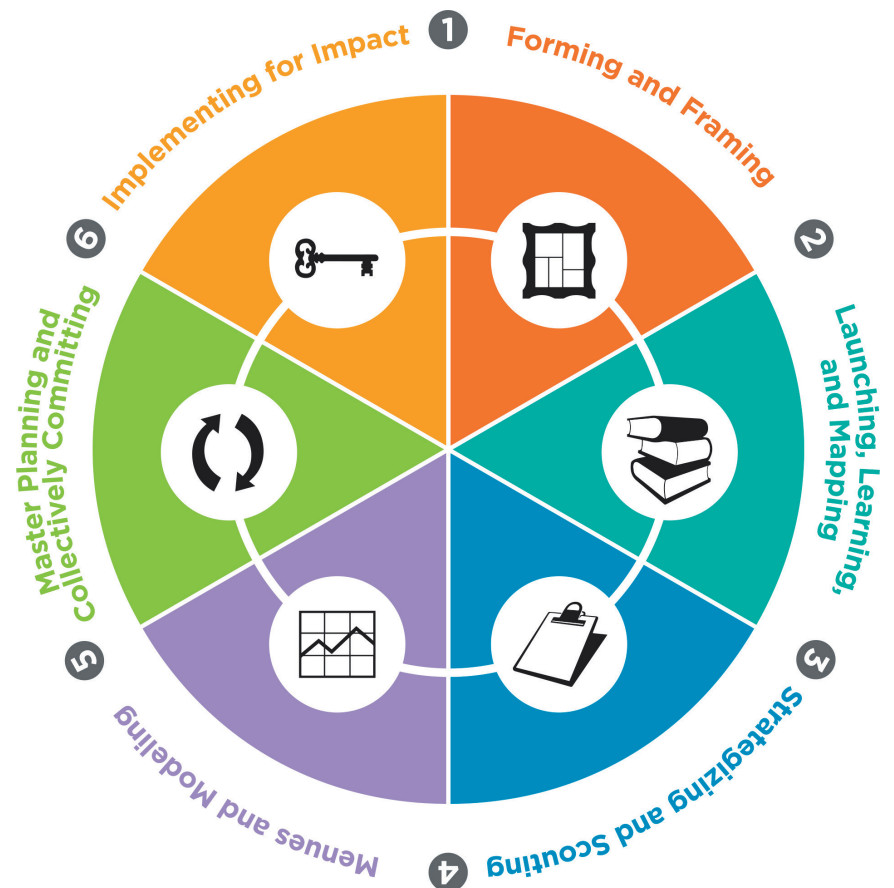
*“It can really help a region to have a social connector who knows the power dynamics at play, can grease the wheels, and knows when to pump the gas versus the brakes. Among other leaders, THRIVE has in Cathy a long-standing community leader with a background in business and strategic planning. She is respected by everyone from both worlds and can ‘speak all their languages.’ She is also authentic in a way that made people realize she didn’t have any ulterior motives—they could trust her to be neutral.”*

- Stacy Becker, VP of Programs, ReThink Health

## ... And a Few Weeds

Some of the region’s greatest strengths were also hurdles. For instance, while THRIVE benefitted from the involvement of top executives and similar leaders, they were also a group of people used to making decisions that were quickly enacted. However, when trying to change a complex, interconnected system, there are high stakes to taking shortcuts. THRIVE had to weigh the desire to act against the risks of not taking time to understand the impact—and unintended consequence—as well as bring in the perspectives of the broader community. In this work, stepwise preparation pays off in the long term, but that might not be immediately apparent to exactly the type of people such a coalition needs.

Everyone feels the pull to act immediately on what seem like obvious solutions, but it opens them up to the pitfall of “fixes that fail”—solutions that may seem effective in the short-term, but taper over time, or even create side effects for the system’s long-term behavior that then require even more fixes (“I didn’t think that would happen!”). Cause and effect are not always linear or clear, so preparation and a deep understanding of the system is the best chance to avoid wasting resources—or even making things worse! Many stakeholders found the process “clicked” once they visualized the steps in the “Whole System Approach for Change” THRIVE developed with ReThink Health, shown at right. (Notice how implementation is only one of six equally-weighted steps)



## LESSON LEARNED: There Are No Shortcuts

Planning and engagement of many stakeholders pays off in the long-term, but it can be challenging to avoid the temptation to split off and “just do something,” even though that runs the risk it will be a “fix that fails” that potentially makes the problems worse or even creates new problems.

## The Seeds Sprout

The Launch Team navigated an uncharted path, all along balancing the desire to move quickly to action with the need to be thoughtful and deliberate as well as fully engaged with the community. This path turned out to be quite complex because it had to emerge from an intricate web of stakeholder interests and personalities. To be successful, THRIVE and the community as a whole needed to engage with—rather than try to circumvent—group politics and entrenched local interests.

*“Don’t make the mistake of expecting people to leave their agendas at the door, but they must leave their egos at the door and think about the good of the whole. Keep the focus on the unifying theme and great value of the alternative future. Make every effort to understand everyone’s interests and perspectives, and make it possible for all to see that when they work together it can be a win/win. No one has to be ‘the loser.’”*

- Cathy Baase

THRIVE leaders say one of the best decisions they made early on was generating (with the members) **a list of foundational principles**; this list helped ground the initiative and keep members aligned:

- **Significant:** Achieve transformational positive impact
- **Regional:** No preferences to single counties; change should accrue beyond the dotted lines
- **Multi-sector:** Recognition that health and economic prosperity is created by a diverse set of regional stakeholders
- **Upstream:** When possible, investments should be targeted at the root causes and drivers of health and economic success
- **Collective:** Transcend individual institutional benefits and seek a win for the entire community; Win-Win vs win-lose thinking; collective commitment to achieve collective benefit
- **Balanced:** Focus on balanced impact—short-term gains as well as long-term
- **Learning-oriented:** Grounded in evidence and experience with explicit measures to chart progress and guide change over time
- **Sustainable system change:** Actions based upon an understanding of the regional health ecosystem and effectively drive sustainable change

## LESSON LEARNED: Establish Principles

In a complicated mix of perspective and interests, you need a solid foundation to fall back on. Establishing principles together helped THRIVE stay on track towards its shared goals.

THRIVE stakeholders took multiple simultaneous actions in parallel to get the initiative off the ground. MiHIA and GLBRA signed a Memorandum of Understanding (MOU) that established them as co-leaders of the new initiative.

As an early step, THRIVE conducted more than 80 one-on-one and group interviews to find out what issues were of greatest importance to stakeholders. It produced a summary report with ReThink Health that set the tone and guided THRIVE about the community's needs. This information, along with other research, formed a massive data set THRIVE used for its next steps.

THRIVE also established a Stakeholder Advisory Group that met regularly to keep a large set of stakeholders involved and informed while the Launch Team got things set up and moving forward. At the same time, THRIVE inventoried ongoing work in the region so it could coordinate with what was already “in flight” and researched similar work in other regions. It also set up a communications function that began building relationships with an array of parties—including potential future funders.

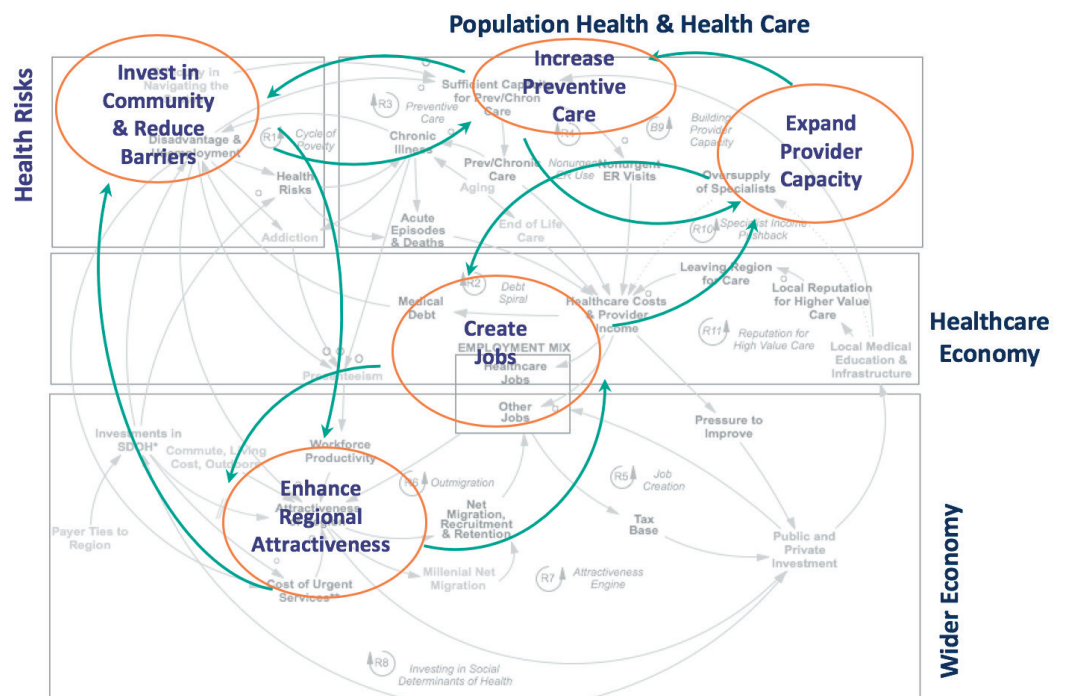
## LESSON LEARNED: Know Your Stakeholders

The interviews enabled THRIVE to align with the community in a way that will drive acceptance—and, ultimately, success—of its initiatives.

One of the key interview findings was that, while stakeholders generally recognized that the economy was interlinked with health, they largely had a very narrow view of health and how it related to the economy. They predominantly viewed health as healthcare, and its relation to the economy solely through the lens of healthcare jobs, when in reality healthcare and its workforce make up only a sliver of the intersection between population health and the economy.

THRIVE leaders realized they needed to counteract this misconception by helping the stakeholders (and themselves) more fully understand the entire interrelated system. They asked ReThink Health to create a draft map of the region's health and economic system based on the interviews. Then ReThink tested the draft map out through two mapping sessions with THRIVE stakeholders, informed by what they had seen in other regions across the country. Once completed, about a dozen patterns emerged, and conversations with stakeholders in those parts of the system revealed several entrenched, self-reinforcing patterns that were having a negative impact on health and economic prosperity in the region. THRIVE picked five of these loops they cared most about as priorities for the next step in their process.

At right is a simplified representation of the system map they produced. While the orange circles in the foreground were the five prioritized areas for transformation focus, the map is primarily the story of the gray parts in the background: the latticework of varied factors that connected health with the economy and allowed THRIVE and its stakeholders to visualize just how large the system was, and identify and address places where the system could be improved.



## LESSON LEARNED: Know Your System

Without the system map, THRIVE would be hard pressed to identify where their efforts would have the most impact.

Building on the research and the systems map, THRIVE turned to intervening in the five high-leverage areas: opportunities that had both high interest from the community and the potential for high impact. THRIVE recognized that their plan would be strongest if they had a scope that covered most areas of the map and balanced both health and the economy. With those points in mind, THRIVE created 10- to 12-member teams around these five high-leverage areas:

- Building provider capacity
- Improving preventative care and mental health
- Investing in social determinants of health
- Increasing regional attractiveness
- Creating jobs

THRIVE leaders designed these Priority Teams very thoughtfully. These teams had a shared charter with the expectation that each would identify and propose the specific actions that would have the greatest impact on both health and the economy within the five priority areas listed above. THRIVE worked hard to build diversity into the teams—including geographical and sectoral diversity—to maximize the viewpoints available to each team. THRIVE also provided each Priority Team with tools that enabled them to do their work: staff and support teams (in this case passionate volunteers), chartbooks full of relevant data, references to the inventory of ongoing work in the region, reference materials for evidence-based interventions, launch events, and available data/analytic support.

## LESSON LEARNED: Support Your Teams

THRIVE's portfolio of interventions will live or die on the work of the Priority Teams. Investing heavily into supporting the teams enables them to do their best work and gives THRIVE its best chance of making an impact.

THRIVE tasked these teams with recommending specific interventions or activities within their respective areas that could lead to transformational system change, keeping in mind key considerations such as:

- Does the region have the capacity to implement these interventions?
- Is there ongoing work that may inform and support specific actions?
- Is there political will and/or local support?
- Is the timeline reasonable?

In mid-2018 THRIVE began synthesizing those teams' recommendations into a coordinated portfolio of interventions. As part of this process, ReThink Health ran many permutations of these interventions through a simulation model to play out the likely consequences of each combination.

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## Part of a Growing Movement

THRIVE is part of a growing nationwide movement towards health system transformation (see [ReThink Health's website for other examples](#))<sup>1</sup> THRIVE's story illustrates how getting businesses to the table is transformative on its own, but requires making the business case—anchored in data—for improving population health. THRIVE is one of few (if not the only) collaborations with a specific, deliberate focus on health and the economy; they understand the intersection between the two and how they intertwine. [Given the fledgling state of most multisector partnerships](#),<sup>2</sup> THRIVE is well ahead of the curve just by having a portfolio of interventions developed, even though they have not yet begun implementation. Health transformation (hand-in-hand with the economy) is accelerating across the nation, and learning from their successes and setbacks may help other regions begin to tackle their own challenges.

Special thanks to the Michigan Health Endowment Fund for funding this case study.

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1 <https://www.rethinkhealth.org/tools/financing-primer/the-movements/>

2 <https://www.rethinkhealth.org/the-rethinkers-blog/multi-sector-partnerships-have-the-potential-to-transform-health-but-most-arent-there-yet/>



## Tips from the Field

### Be A Team

- To be a highly effective team requires:
  - Focusing on a win/win solution.
  - Relationships built on strong, open communication (there's no such thing as too much!).
  - Clear, shared expectations (for who will do what and how).
  - Accountability.
- Establish a team structure that keeps anything from becoming an undercurrent.
  - Talk openly and often about who benefits and who bears the burdens.

**These partnerships are not meant to be easy, but they can be tremendously rewarding.**

### Make Your Case

- Know your work's value! What do you offer to the region and organizations in each sector?
- Get consensus and buy-in across the membership about what that value proposition is.
- Build a case for your work that will resonate with businesses; speak their language.

### Embrace Tension

- Conflict is part of the process—but keep your eye on the big picture. These partnerships are not meant to be easy, but they can be tremendously rewarding.
- Be very clear about your principles so members can align around them.
- Even in conflict, you can help the parties appreciate and respect each other's positions:
  - Have an established, impartial process.
  - Be anchored in data.
  - Stay committed to transformation.

### Rushing is Risky

- Remember, the process takes time and will not go as fast as you may want.
- Going too fast risks leaving people out and failing to build the ownership and buy-in necessary for long-term success and implementation.
- Some members will lose patience and want to split off and “do,” but you end up getting random acts of health and wellness, or random acts of economic development with little effect.
- You'll be most successful if you learn to channel the tension between planning and action into keeping the key stakeholders engaged.

### Stay Positive!

- Though these sorts of health partnerships are only recently emerging, you are not alone. People and organizations across the country are engaged in the same kinds of struggles you are, and many of them are succeeding. And there are common pitfalls among them. Reach out to others engaged in this work (partnerships, but also thought leaders in relevant organizations) to find resources to help you through the inevitable rough spots.
- Avoid the pitfall of being constrained at thinking big due to fear that the problems are too big to move. Remember, thinking small won't help you reach your goals. You can make large-scale change through teamwork, planning, and negotiation.
- Getting people to believe in the possibility of an alternative future is a breakthrough in itself. Do that, and you will have already accomplished a lot.

*“I'm so inspired by the people who are getting involved and willing to take a leap of faith. I believe in the power of ‘possibility thinking’—the power of envisioning that big changes are possible—because I have seen it firsthand.”*

- Cathy Baase