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GRANT WATCH: OUTCOMES

New GrantWatch content appears twice a month at <http://www.healthaffairs.org>. To request an e-mail alert when new content is posted, send e-mail to Lee-Lee Prina at lprina@projecthope.org. GrantWatch is funded in part by the Robert Wood Johnson Foundation and the California Wellness Foundation.

California Health Policy

CalHealthReform.org, a Web site serving as “a single resource for comprehensive analysis, discussion, and news about health care reform in California,” was launched 18 April 2007, said an e-alert from the California HealthCare Foundation (CHCF). According to the CHCF, the site is nonpartisan and was developed in partnership with the Center for Governmental Studies. CalHealthReform.org has pulled together information on “Major Proposals” introduced—including a summary, full text, and their status. (Republican Gov. Arnold Schwarzenegger and a few legislators have put forth proposals thus far. Jonathan Gruber’s analysis of the governor’s plan is included here, as is one by the Legislative Analyst’s Office.) The site has a grid that succinctly compares the plans on a variety of criteria. Its other features are “Myths and Facts” in the health reform debate (for example, the site examines the “myth” that “providing health coverage to more Californians would ease emergency department overcrowding and reduce health care spending”); “Capitol News,” a “weekly news digest about health care policy and politics in Sacramento,” which is adapted from *California Healthline*, the online digest (also funded by the CHCF); and “Forum,” where “interested parties” can “share updates, research and views about expanding affordable care and coverage.” A helpful glossary and a flowchart showing how a state bill becomes a law enhance the site.

Visit <http://www.calhealthreform.org>.

Global Health

“**California-Mexico Health Initiative: Developing and Delivering Innovative Binational Health Solutions**,” a March 2007 publication, reports on the first five years,

2001–2006, of the initiative—which has a new name, effective April 2007, reflecting its broader reach: the Health Initiative of the Americas (HIA). The HIA, affiliated with the University of California Office of the President, “has become an international leader in developing innovative approaches to public health and health care for migrant populations,” states this sixteen-page document. Among the initiative’s successes thus far are launching Binational Health Week; creating “an annual Request for Proposals to fund research on migrant health issues, thus catalyzing a new field of research in universities and institutions in the U.S. and Mexico”; producing policy reports, fact sheets, the *English-Spanish Dictionary of Health Related Terms* (the California Emergency Medical Services Authority has distributed copies of the dictionary’s second and third editions to hospital emergency departments, ambulance services, and others, and the HIA is distributing 42,000 copies of the third edition elsewhere), and a *Binational Directory of Researchers in Migration and Health*; producing public service announcements for more than 100 Spanish-language radio stations in California; launching a program of “on-site health services in Mexican consulates” throughout California; and establishing exchange programs to provide culturally competent training for *promotoras* (lay health promoters, usually women) and medical students. The HIA worked in collaboration with other organizations on all of these efforts. The publication notes that “in the larger picture, [the HIA] seeks to propose the policy changes required to develop a comprehensive, effective, and self-sustaining system of health care and insurance coverage” for migrants. The California Endowment (TCE) and the Mexican secretariats of health and foreign affairs provide

core support for the initiative; its other funders have included the California Wellness Foundation, the CHCF, the California Department of Health Services, and Fundación Mexicana para la Salud (FUNSALUD).

The report is available at <http://www.ucop.edu/cmhi/documents/activityrpt5yrs.pdf>.

GlobalHealthFacts.org is a Henry J. Kaiser Family Foundation (KFF) Web site containing “global data on HIV/AIDS, TB [tuberculosis], malaria, and more.” A full report and “Fast Facts” are available on numerous countries. Many topics—ranging from malaria case rate to smoking prevalence to percentage of population without water to “government health expenditure as percent of total government” to number of nurses—are covered, by country. Data, which are updated as information becomes available, come from “a variety of public and private sources,” including KFF reports. The site also links to GlobalHealthReporting.org, a news site operated by the KFF with major support from the Bill and Melinda Gates Foundation.

For details, go to <http://www.globalhealthfacts.org>. Weekly e-alerts are available.

Health Metrics Network (HMN), a global partnership that aims to improve public health decision making via better health information systems in developing countries, has been in existence for two years. The World Health Organization (WHO) hosts the HMN secretariat in Geneva. In early 2007 the network awarded its second round of grants to twenty-five countries (ranging from Belize to Burundi to Iran). According to a WHO press release, Richard Manning of the Organization for Economic Cooperation and Development (OECD) was appointed chair of the HMN 30 April 2007; also, Larry Brilliant of Google.org; Julio Frenk, now of the Gates Foundation; Richard Horton of the *Lancet*; and Ngozi Okonjo-Iweala of the Brookings Institution were recently appointed board members. The release explained that the “HMN assists low- and low-to-middle-income countries.” Ethiopia, one of the first-round HMN grantees, will

“likely” begin in-depth reform of its health information system soon, predicts the *HMN Monthly Update: April 2007*; reforms there are cofunded by the Global Alliance for Vaccines and Immunization (GAVI) and the Gates Foundation. “The opportunity to work with the Ethiopian government is particularly intriguing as they are about to begin a census...and have planned” several health-sector reforms that are dependent on information, including ones “for improving coverage [and] introducing health insurance,” the newsletter reports. An HMN spokesperson told *Health Affairs* that partners continue to try to get countries to use a common framework for information systems, and it is “constantly” being refined; the HMN Assessment Tool, one part of the framework, “is already in wide use in HMN partner countries,” he said.

The HMN partnership, launched in 2005, includes several countries, the Gates Foundation and other grantmakers, development agencies (such as the World Bank), the U.S. Centers for Disease Control and Prevention (CDC), and the WHO. The Gates Foundation, according to its Web site, has awarded some \$50 million to the HMN. Other funders include the Danish International Development Agency, the U.K. Department for International Development, U.S. Agency for International Development (USAID), and the governments of the Netherlands and Ireland. The WHO explained in 2005 that the “HMN responds to a need for evidence-based policy-making that can enable countries to make more efficient use of health budgets.”

For more information on the HMN, go to <http://www.who.int/healthmetrics>.

“Principles of Accountability for International Philanthropy” have been issued by the Joint Working Group of the Council on Foundations and the European Foundation Centre. They are “intended as a voluntary and aspirational tool specifically for international donors,” said a May 2007 press release. Steve Gunderson, the council’s president and chief executive officer (CEO), commented there, “The growth of global philanthropy is obvi-

ous—in interest, engagement, and need.” The release said that an awareness “that cross-border philanthropy can be more challenging and complex than domestic grantmaking because of differences in culture and language as well as legal and accounting systems” led to the development of the principles. “Beware of your preconceptions and of imposing your own agenda” is among the suggestions made to funders. The Aga Khan, Citigroup, Ford, and GE Foundations and the University of Cape Town supported this document.

The principles are available online at http://www.cof.org/files/Documents/International_Programs/2007Publications/PrinciplesAccountability.pdf.

Health Policy

Georges Benjamin, Molly Joel Coye, and Mark McClellan were among panelists at the session “Looking into the Crystal Ball,” which was part of Grantmakers In Health’s (GIH’s) annual meeting held in Miami in February 2007. Susan Dentzer of the Public Broadcasting Service’s *NewsHour with Jim Lehrer*, panel moderator, asked “what was the most important change...that informed health care and the health sector” over the past twenty-five years. McClellan, now at the AEI-Brookings Joint Center for Regulatory Studies, mentioned medical technology, especially “the advent of molecular medicine,” which has led to new ways of treating diseases and, thus, changes in financing and delivery of care. Benjamin of the American Public Health Association (APHA) mentioned AIDS, which “exposes the politics of medicine and public health” and is now even a national security issue, he commented. Coye of HealthTech answered “the Internet” because it has “transformed what it means to be a consumer,” has diffused knowledge, has created patient communities, and has brought about “global awareness”—the Internet can “span national boundaries.” Angela Glover Blackwell of PolicyLink mentioned health disparities—“those issues have come front and center.” She also said that “lifestyle and environment” are important—for example, “where you live” affects your “health and well-being.” Xavier Leus of the WHO also responded

“HIV/AIDS”—which in some way is indicative of the “return of infectious diseases” but also has affected how the world organizes itself around global health issues. Marc Freedman of Civic Ventures responded that the fact that people are “living much longer and healthier lives” has been important.

When Dentzer asked panelists if philanthropy has “fully engaged in” these challenges and opportunities, several said yes. For example, McClellan commented that having foundations that are pointing out “better ways to organize health care” and finance it and “to promote quality” of care and prevention “has been very important over the years.” Dentzer also asked, “What is the single biggest thing that could happen over the next twenty-five years [to] transform” health care and the well-being of people around the world? Leus mentioned adopting the values underlying primary health care as well as a public health approach; Benjamin said “healthy communities”; and McClellan mentioned medical technology leading to “more personalized medicine.” When panelists were asked what foundations’ role should be, Blackwell said that in these times they need a “global perspective” to understand local needs; she also suggested that for some challenges, long-term investments are needed—even “twenty years of support.”

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Long-Term Care

“Long-Term Care Partnership Expansion: A New Opportunity for States,” a May 2007 issue brief from the Center for Health Care Strategies, the National Association of State Medicaid Directors, and George Mason University, was funded by the Robert Wood Johnson Foundation (RWJF). This document “reviews the origins and structure” of the Partnership for Long-Term Care, “a unique insurance model developed in the 1980s” with RWJF funding. “The Deficit Reduction Act (DRA) of 2005 lifted the technical barriers Congress had imposed on such programs,” and this document is an effort to inform states about new options now available. In a nut-

shell, via the partnership program, “states promote the purchase of private LTC [long-term care] insurance by offering consumers access to Medicaid under special eligibility rules should additional LTC coverage (beyond what the policies provide) be needed.” Medicaid, “in turn, benefits” financially.

For details, go to http://www.rwjf.org/files/publications/other/Longtermcare_052007.pdf.

Key Personnel Changes

Allison Bauer was named senior program officer for health and human services at the Boston Foundation, said a February 2007 press release. (**Cindy Rizzo**, who previously had that job and was director of grant making, is now director of grant-making programs at the Arcus Foundation, in New York City.) Previously staff director and chief counsel for a member of the Massachusetts legislature who is House chair of the Joint Committee on Mental Health and Substance Abuse, Bauer holds law and social work degrees.

Ann Beeson has been named director of U.S. programs at the Open Society Institute (OSI), according to a March 2007 press release. She was scheduled to begin her work at the OSI in June 2007. An attorney, Beeson most recently was associate legal director of the American Civil Liberties Union (ACLU).

Gail Christopher has been named the W.K. Kellogg Foundation's new vice president for health. She was expected to start there 1 July 2007, according to a Kellogg press release. Previously, Christopher was vice president, Office of Health, Women, and Families, and director of the Health Policy Institute at the Joint Center for Political and Economic Studies. She holds a doctor of naprapathy (DN) degree.

Carmen Hooker Odom will become president of the Milbank Memorial Fund 1 October 2007; at that time **Dan Fox** will become this operating foundation's first president emeritus. Hooker Odom is secretary of the North Carolina Department of Health and Human Services. Her experience includes being a Milbank project officer from 1995 to 1996 and serving for several years as a member of the Massachusetts legislature. Fox “plans an ac-

tive career in research and writing and as an adviser to organizations and decision makers,” said a May 2007 letter from Milbank.

Dennis Hunt, vice president of communications and public affairs at TCE, was killed in April 2007 in a single-vehicle accident, according to an endowment press release. He was age sixty. Among Hunt's accomplishments was creation of the USC (University of Southern California) Annenberg/California Endowment Health Journalism Fellowship Program “to help journalists develop a greater understanding of the complex health and health-related issues impacting California.”

Chris Langston has accepted the job of program director at the John A. Hartford Foundation. Most recently he was a program executive for the Atlantic Philanthropies' U.S. aging program. Langston was expected to return to Hartford, where he previously was a senior program officer, in June 2007, a foundation spokesperson told *Health Affairs*.

Kathlyn Mead has been appointed senior vice president and chief operating officer of TCE. She started there in May 2007. Most recently Mead was CEO of the Council of Community Clinics, in San Diego. Other positions she has held include CEO of Sharp Health Plan.

Jack Rowe has been appointed to the Rockefeller Foundation's board. Formerly chairman and CEO of Aetna Inc., he is now a professor in the Department of Health Policy and Management, Mailman School of Public Health, Columbia University.

Anne Schwartz, vice president of GIH, will be leaving that organization in July 2007. She will be moving to Paris, where her husband will work for the next few years.

Jim Tallon has been elected chairman of the Commonwealth Fund, effective 14 November 2007. He is president of the United Hospital Fund of New York and a former Democratic majority leader of the New York State Assembly. Tallon recently headed the transition team for health care for New York's Democratic governor, Eliot Spitzer.