



Healthfirst® & the Arthritis Foundation

A Model for Strategic Partnerships





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History of the Partnership

Helping our members live healthier, more satisfying lives is essential to our mission at Healthfirst®. Offering our members the information and tools they need to improve their physical and emotional well-being is not only key to improving member satisfaction and quality scores, but is also a moral imperative. In order to more efficiently address critical health issues affecting the communities we serve, Healthfirst has been partnering with prominent healthcare organizations on initiatives designed to make a more profound and lasting impact.

In 2013, Healthfirst launched a partnership with the Arthritis Foundation, the largest national nonprofit organization dedicated to the prevention, control, and cure of arthritis

and related diseases. To date, the heart of this partnership has been a six-week program that combines the Foundation's *Arthritis Basics for Change* (ABC) educational workshop and its *Walk With Ease*® community-based physical activity and self-management education program. Healthfirst recruited Bronx-Lebanon Hospital Center, Brownsville Multi-Service Family Health Center, the Chinese American Independent Practice Association (CAIPA), St. Barnabas Hospital, and SUNY Downstate Medical Center to help host the program as well as to provide free health screenings and educational resources during the workshops. Each of these five clinical partners hosted one cycle of the program in 2013, starting with Bronx-Lebanon in early April and ending with SUNY Downstate towards the end of October.

Healthfirst's partnership with the Arthritis Foundation helps us address three main objectives:

1 To improve the everyday health of members currently living with arthritis

2 To increase member satisfaction by strengthening our relationship with members and the communities they live in

3 To create improvements on the clinical side in the form of a decreased need for emergency services

The major focus of the six-week program is helping people learn how to self-manage chronic illness at an early stage, with the goals of having them suffer less chronic pain over time and enjoy overall improved health. These factors reduce the occurrence

of acute flare-ups or related complications that require emergency services. Offering beneficial programs to our members also encourages them to view Healthfirst as a trusted partner on their journey to better health and longer, more active lives.

WHY THE ARTHRITIS FOUNDATION?

Arthritis is the leading cause of disability in the United States, and a major public health issue. As of 2013, more than 72,000 Healthfirst members were diagnosed with some form of arthritis. While about half were seniors in our Medicare plan, the other half comprised adults under the age of 65 and children. The Arthritis Foundation fights the misconception that arthritis is a purely degenerative disease of old age for which nothing much can be done. The Foundation emphasizes the need to educate people about what arthritis really is: an active, inflammatory disease for which preventive measures and effective treatment exist that can help slow the onset or progression of the disease.

The Arthritis Foundation and Healthfirst's Partnership Strategy

The first round of the six-week arthritis program at Bronx-Lebanon ran from the beginning of April to mid-May 2013 as part of Healthfirst's larger Claremont Healthy Village initiative, a multidimensional and collaborative approach to improving health outcomes for Healthfirst members and community residents. The success of Claremont Healthy Village has led Healthfirst to make plans to expand the program to other boroughs and to define eight major areas of focus for 2014, one of which is Bones and Joints. This positions our partnership with the Arthritis Foundation as a major component of our overarching strategy.

At the inception of the partnership, Healthfirst reached out to members diagnosed with

arthritis who lived in zip codes that had been identified as having a critical mass of Healthfirst members. Between 63 and 150 postcards were sent out to members in these targeted areas, inviting them to participate in a program that would help them better manage their arthritis, with an emphasis on reducing chronic pain. St. Barnabas, one of our clinical partners, sent out an additional 1,500 cards, which may have positively impacted attendance at this partner's sessions. Besides ensuring that we would reach the members most in need of such a program, this targeted outreach effort increased the potential for other Healthfirst members to hear about the program, spread the word, and possibly choose to participate.

Each cycle of the six-week program opened with the *Arthritis Basics for Change* workshop, which educated participants on types of

arthritis, effective communication with providers, ways to prevent and decrease arthritis-related pain, and how to master the skills necessary to better manage their symptoms. Attendees were then encouraged to join the *Walk With Ease* group, which met once a week for the remaining five weeks of the program. *Walk With Ease* is a multicomponent program that incorporates not only the central activity of walking, but health education, stretching and strengthening exercises, and motivational strategies. The walking groups, led by an Arthritis Foundation instructor, met at community centers located in the neighborhoods served by the designated clinical partner—such as the Ling Sing Association in Chinatown (CAIPA) and the William Hodson Senior Center in the Bronx (Bronx-Lebanon)—for warm-up and stretching exercises before heading outside to walk around the neighborhood or nearby

parks. Participants also received a *Walk With Ease* Guidebook that provides the information, support, and tools needed to help them set and reach their goals.

Walk With Ease focuses on teaching people with arthritis that they can in fact be active, educating them about how to walk safely and comfortably and encouraging them to continue with their walking program at the end of the six weeks while exploring other exercise and self-management programs. The Healthfirst sessions drew an average of thirty participants, with the best overall turnout at St. Barnabas. This group was featured on News 12, a local news channel. In the story, Alison Braverman, an instructor from the Arthritis Foundation, described the program in concise terms as “a community activity teaching senior citizens how to stretch and prepare to walk in the *right way*.”

Exercise as Medicine

There is a myth that people with arthritis cannot or should not exercise. The reality is that exercise is an effective treatment for reducing arthritis pain. The *Walk With Ease* program itself has been shown to reduce



pain, increase balance and strength, and improve overall health in studies conducted by the Thurston Arthritis Research Center and the Institute on Aging of the University of North Carolina.¹ Preventing arthritis and alleviating its symptoms among our members who already have the disease is a big imperative for Healthfirst because arthritis is connected to a number of other health issues that commonly affect our members. Left untreated, chronic arthritis pain can severely limit mobility, further discouraging those who most need regular exercise from seeking out physical activity.

Arthritis is the second most common chronic condition in the United States and frequently affects individuals who are dealing with other health issues such as diabetes, heart disease, high blood pressure, and depression. Exercise is critical to the management of not only these conditions, but of obesity, which itself is often an underlying cause of these illnesses and a risk factor for arthritis.

Helping our members to exercise regularly will also bring about disease-specific benefits that extend beyond the reduction of arthritis pain. According to the U.S. Department of Health and Human Services, there is strong

evidence that both endurance and resistance types of exercise provide considerable disease-specific benefits for people with osteoarthritis (OA) and rheumatic conditions.² Regular exercise prevents the progression of the disease by strengthening the muscles around the joints, supporting bone health, and improving energy.

The *Walk With Ease* program is especially well suited to Healthfirst members because it takes into account the fact that exercise can be painful for people with arthritis, especially individuals unaccustomed to physical activity. The program provides a supportive and safe environment in which participants can lay the groundwork for a regular walking routine that will ultimately help them better manage their arthritis pain and overall health. This type of guidance, though needed, is not always easy to find, as evidenced in one member's telling observation that participation in the program was “the first time I've ever encountered having a coach leading us to better health.” Working hand in hand with the *Arthritis Basics for Change* workshop, the *Walk With Ease* group brings participants together to work towards the goals of getting in shape, improving flexibility and strength, reducing pain, and forging new friendships.



Prevalence of Arthritis in America



1 in 5 Americans has been diagnosed with arthritis



More than **1 in 3** Americans who are obese have been diagnosed with arthritis

Source: Arthritis Foundation, <http://www.arthritisfoundation.org/about-arthritis/arthritis-and-your-health/obesity/fat-and-arthritis.php>

In the first year of the partnership, survey results have shown promising outcomes. Equal shares of participants from all locations reported learning more about arthritis, pain reduction techniques, and improving their physical ability.

Pre- and Post-Program Assessments

To assess the value of the program, Healthfirst asked participants to respond to a survey before and after they completed the program. The survey asked participants about their level of arthritis pain and exercise habits, along with their opinion of Healthfirst and whether their expectations for the workshop series were met. Comparing participants' survey responses before and after completion of the program allows for a general assessment of the program's effectiveness.



In the first year of the partnership, survey results have shown promising outcomes. Equal shares of participants from all locations reported learning more about arthritis, pain reduction techniques, and improving their physical ability. The results from the SUNY Downstate, St. Barnabas, and CAIPA programs show lower levels of arthritis pain reported following participation in the program. The biggest drop—18%—in the percentage of individuals reporting a high or medium level of pain was at St. Barnabas. In terms of medication adherence, SUNY Downstate saw improvement, bringing the percentage of people who reported taking their meds “always” or “usually” up to 60% from 47%. At St. Barnabas, the percentage went up to 74% from 59%.

Among the most significant findings, the survey revealed that the program encouraged

people to exercise more. The walking group succeeded in teaching techniques and stretching exercises and helped participants establish a routine. The biggest change in exercise habits occurred at the St. Barnabas and Bronx-Lebanon sites. At Bronx-Lebanon, the number of people reporting that they were exercising regularly increased by 29%. At St. Barnabas, there was a 27% increase.

In regards to the public's perception of Healthfirst, the survey marked significant increases in the number of people who would recommend Healthfirst post-participation in the program. The biggest shift happened at SUNY Downstate, where, at the start of the program, only 53% of respondents reported that they would recommend Healthfirst to a friend or family member. By the end of the six weeks, this figure had jumped to 90%. Though the workshops and subsequent walking groups were generally well received, Bronx-Lebanon stood out, with 92% of participants reporting that the workshop had helped a great deal. Another positive effect for Healthfirst was growth in name recognition in the area around SUNY Downstate, where we discovered that people were not as familiar with us as in the neighborhoods surrounding the other four sites. At SUNY Downstate, the percentage of people who reported being familiar with Healthfirst went from 27% to 60%.

NOTABLE RESULTS

Decrease in individuals reporting a high or medium level of pain at St. Barnabas program

18%

92%

Participants at Bronx-Lebanon who reported that the workshop had helped them a great deal

The Role of Community Engagement in Creating a Self-Sustaining Model

One of the most promising aspects of Healthfirst's partnership with the Arthritis Foundation so far has been the community-driven nature of their programs. The programs create great potential for participants to become well-versed in arthritis self-management. They can then pass along the knowledge and skills they have gained to others in the community. This type of engagement and community interaction is absolutely essential to the program's continued growth and success.

The social aspect of the program cannot be emphasized enough. Members expressed being very pleased about making new friends during the program. One member who participated in the CAIPA program said, “I like this program because it helps us befriend new people with a similar background.” Even within a neighborhood or ethnic enclave, isolation can be a very real issue that contributes to the risk of depression. Arthritis itself can be a source of depression, as can many other chronic illnesses that our members are living with. The creation and strengthening of community bonds and support networks are among the best ways to alleviate depression.

The community environment also helps us to meet the challenge of ensuring that members continue to maintain their exercise routine so they can reap the long term benefits of regular exercise rather than allowing newly formed good habits to fall by the wayside.

Research has shown that people are more likely to stick with an exercise routine if their friends are doing it with them.³ The Arthritis Foundation program leverages this insight by structuring the program to help build lasting relationships among the participants so that they can continue exercising together after the program's formal conclusion. We've already seen our first concrete example of this effect—after the conclusion of the SUNY Downstate and Brownsville programs, those groups continued to meet once a week on their own and kept using the techniques they had learned.

For individuals in the community who wish to take their involvement further, there is also the possibility of becoming a certified *Walk With Ease* instructor. This is something that practically any community member can do by completing an Arthritis Foundation training workshop either online or in person. Other requirements include a willingness to commit to teaching at least one class series per year, and desirable qualities include an interest in health, exercise, and a proactive approach to health management.

I like this program because it helps us befriend new people with a similar background.

—Program participant

³ Pedersen, T. [2012]. Exercising with a Partner Boosts Motivation. *Psych Central*. Retrieved on March 28, 2014, from www.psychcentral.com/news/2012/05/30/exercising-with-a-partner-boosts-motivation/39421.html



NEXT STEPS:

Arthritis Foundation Partnership in 2014

Our alliance with the Arthritis Foundation is just one example of what can happen when we use a partnership model that emphasizes community-based activities and educational interventions based in geographic areas where most of our members live. It allows us to address several health issues at once with longer lasting effects than any stand-alone workshop or event could. The sense of continuity improves member experience as well, contributing to engagement and retention.

The next step is getting Healthfirst staff more directly involved in the field aspect. To this end, Healthfirst nurses and case managers will be trained as official *Walk With Ease* instructors. This move will strengthen trust and build on their established connections with members. They will become a resource as health educators and will be better able to assist with Healthfirst events and smaller programs that could be run out of provider offices.

In terms of programming, Healthfirst is branching out by offering the Arthritis Foundation's Tai Chi program as well as another cycle of *Walk With Ease* in an effort to encourage new participation while giving return participants the opportunity to explore other forms of exercise. Both programs will meet for six weeks at neighborhood locations, though the tai chi program will focus more on physical exercise and will not include the introductory *Arthritis Basics for Change*, workshop component. Members will be reached out to in the same way as for the first cycle. Healthfirst is excited to bring tai chi—a longtime mainstay in the Asian community—to a wider audience.

In continuing to shape this partnership to best reach our goals, we will also be implementing a new, simpler survey that focuses more on the needs of members. It includes questions about what members hope to get out of the program and their expectations. In this next round we will be able to collect and analyze more member-specific data. Our 2013 data was limited in this way, as we were not permitted to ask on the survey if an individual was a current Healthfirst member. We now have clearance to ask about membership status and will be able to factor this data into our next analysis. This will help us structure and design programs that directly address the needs of the communities we serve and that community members feel invested in because their feedback and input helped create them.





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