Discussion Paper

The Private-Sector Role in Building Healthy Communities: A Collective Impact Approach

Kim Fremont Fortunato, Esq.

December 2, 2015
The Private-Sector Role in Building Healthy Communities: A Collective Impact Approach

Kim Fremont Fortunato, Esq., Campbell Soup Company

INTRODUCTION

In 2010, Campbell Soup Company rolled out its 2020 destination goals for Corporate Responsibility (Campbell Soup Company, 2011). Broadly, these goals are: to nourish our consumers, neighbors, workforce, and planet. The goal of nourishing our neighbors is to “measurably improve the health of young people in our hometown communities by reducing childhood obesity and hunger by 50 percent” (Campbell Soup Company, 2011, p. 46). In early 2011, the Campbell Healthy Communities Program was launched in Camden, NJ, which has been the site of Campbell’s World Headquarters since 1869. In September 2014, Campbell Healthy Communities Henry County was launched, and Campbell Healthy Communities Snohomish County will launch in fall 2015. Campbell Healthy Communities includes a 10-year, $10 million investment, a suite of strategic programming, and leveraged expertise from employees within Campbell Soup Company aimed at creating positive social change for the health of young people in our communities. Campbell Healthy Communities is aligned with our company purpose: Real food that matters for life’s moments. Furthermore, by improving the health of communities and individuals, the program is important to our core business strategy. As articulated in The Business Role in Improving Health: Beyond Social Responsibility, “While corporate social responsibility must be valued and encouraged, we believe the role of business in communities' health improvement efforts will be limited in impact and sustainability if not tied to bottom-line performance” (Kindig et al., 2013).

BACKGROUND

Although it was a vibrant city until the middle of the past century, Camden, with 77,000 residents, is one of the country’s most dangerous cities and its poorest, according to the latest U.S. Census Bureau data. More than 40 percent of the children are obese and most of them are food insecure and hungry. Nearly all of the city’s schoolchildren receive free lunch. The city has one full-service grocery store and more than 123 corner stores or “bodegas” that largely represent the Camden city food system. Safety is a major concern and access to safe places to play is an ongoing challenge. Obesity and hunger are complex social issues; these issues cannot be solved by a single funder or sector. Adding to the complexity is the structural poverty and fragile infrastructure that exist in Camden. Campbell Soup Company is one of the anchor institutions in the city with a history of giving back to its community. “Not only did Campbell commit to remain in Camden, but it is the only company in the food industry that has shown this level of dedication to reducing childhood obesity” (Fortunato, 2014).

PROGRAM DESIGN

Collective Impact

Recognizing that a single organization cannot change a major social issue, Campbell’s Healthy Communities program uses a collective impact approach. Collective impact is the commitment of a group of important actors from different sectors to a common agenda for solving a specific
social problem (Kania and Kramer, 2011). In their seminal article, *Collective Impact*, which appeared in the *Stanford Social Innovation Review*, John Kania and Mark Kramer (2011) named five key characteristics for successful collective impact efforts, which follow:

1. **Common agenda.** “All participants share a vision for change that includes a common understanding of the problem and a joint approach to solving the problem through agreed-upon actions.”

2. **Shared measurement.** “All participating organizations agree on the ways success will be measured and reported, with a short list of common indicators identified and used for learning and improvement.”

3. **Mutually reinforcing activities.** “A diverse set of stakeholders, typically across sectors, coordinate a set of differentiated activities through a mutually reinforcing plan of action.”

4. **Continuous communication.** “All players engage in frequent and structured open communication to build trust, assure mutual objectives, and create common motivation.”

5. **Backbone support.** “An independent, funded staff dedicated to the initiative provides ongoing support by guiding the initiative’s vision and strategy, supporting aligned activities, establishing shared measurement practices, building public will, advancing policy, and mobilizing resources.”

From the start, Campbell Healthy Communities has embraced the collective impact approach as the framework, and identified and invited multiple cross-sector partners to work together to solve the complex issues of childhood obesity and food insecurity. With our investees (partners funded by Campbell), we agreed on our common agenda: a collective commitment to measurably improve the health of young people, with the outcome measure of reducing childhood obesity and food insecurity by 50 percent in 10 years.

In Camden, where we started the program, Campbell Healthy Communities partners have co-created a framework with four strategic focus areas—Food Access, Nutrition Education, Physical Activity/Access, Public Will—and corresponding tactics and objectives to accomplish our shared goal. We established a set of shared measures to aggregate data against each of the four strategic focus areas. Our investees report quarterly on incremental measures on their specific objectives for food access, nutrition education, physical activity, and public will. Body mass index (BMI) is measured annually, and we have implemented an innovative model to assess hunger/food insecurity with the emergency departments in two of our city hospitals.

Campbell Soup Company is the funder and the backbone organization, a unique role in the collective impact movement. We believe Campbell is the only corporation in the United States that serves as both the funder and the backbone. We are working to identify and build the capacity of a community-based organization that will assume the backbone function to ensure ultimate sustainability of the program. The work, to date, however, would not have been accomplished in a city like Camden without Campbell’s leadership. “A great example of a company taking a leadership role in driving collective impact is Campbell Soup Company, with its Campbell Healthy Communities program in the city of Camden, NJ” (Garfunkel, 2015).

**Our Philosophy**

The program’s philosophy is inclusive; we value a diverse group of cross-sector stakeholders who represent a range of perspectives, skills, and expertise. The representatives of our investee organizations attend monthly Campbell Healthy Communities meetings to share barriers and successes, and to work together as we build programs that are mutually reinforcing. Furthermore, investees coordinate all meetings with the Campbell Healthy Communities sites as a team.
Central to the governance of the Campbell Healthy Communities program is the philosophy of servant leadership. The Center for Servant Leadership at the Pastoral Institute in Georgia defines servant leadership as “a lifelong journey that includes discovery of one’s self, a desire to serve others, and a commitment to lead” (Greenleaf, 1977/2002). Servant-leaders continually strive to be trustworthy, self-aware, humble, caring, visionary, empowering, relational, competent, good stewards, and community builders. James Sipe and Don Frick, in The Seven Pillars of Servant Leadership, state that servant-leaders are individuals of character; put people first; are skilled communicators, compassionate collaborators, and systems thinkers; use foresight; and exercise moral authority (Sipe and Frick, 2009).

A seeming paradox of collective impact and the role of the backbone organization is what makes servant leadership so valuable. On one hand, collective impact leadership requires a relentless commitment to the common agenda, an urgency, a tenacious desire for positive social change, and the confidence to know that success is possible. Individual participants must feel almost immune to frustration yet willing to completely abandon “self.” There are no stars in collective impact. The key to success is the unity and effort of the team in making collective impact work. Servant leadership, like the collective impact approach, emphasizes collaboration, trust, empathy, and the ethical use of power.

Our Theory of Change

Campbell’s Healthy Communities theory of change operates on an individual level with students, teachers, and families in the sites identified to be part of our Healthy Communities site network. Sites are selected based on criteria that include leadership, a willingness to partner with Campbell Healthy Communities investees, and a desire to create a culture of health within their organizations. In the first 4 years of the Campbell Healthy Communities program, our site portfolio (see Appendix A) reflected a diverse group of traditional public schools, charters, and community-based organizations delivering preschool programs. A site is invited for a 3-year cycle with the goal of sustainable programming by the end of the term. As we enter our fifth year, we have invited the largest pediatric practice in Camden City, Cooper Pediatrics, to be a Campbell Healthy Communities site. Our investees will lead programming in the waiting room of the practice and supply numerous services to patients and their families to encourage healthy behaviors.

Our theory of change also focuses on systemic change, specifically our food, school, and pediatric care systems. Certain investees direct their program interventions (nutrition education, food access, and physical activity/access) within the Campbell Healthy Communities sites, while others are working in the community with our corner stores, citywide after-school programming, and districtwide policy and professional development.

Accomplishments

To date we have seen significant behavioral changes among our youngest community members, whose physical activity has increased and intake of fresh produce and attitudes about eating new foods have measurably improved. Students now claim that they go home and tell their families what healthy food is and even assist their parents/guardians on trips to the store. In our small sample sets of children, BMI is stabilizing and decreasing; awareness of the extreme food insecurity in our city has increased and access to healthier foods has seen dramatic growth, with 30 percent of Camden’s corner stores and bodegas enrolled in the Healthy Corner Store Initiative. Many of the stores host profit-boosting cooking demonstrations and distribute “Heart Bucks,” $4 coupons encouraging heart-healthy purchases.

The program has recently expanded to other Campbell plant communities, including Napoleon, OH, and shortly will launch in Everett, WA. The essence of the strategy is to scale a program based on a collective impact approach. We consider this social investment the creation
of shared value, rather than philanthropy. “This is a perfect example of a company using its core expertise, knowledge of nutrition and food marketing, to change the lives of those who are in need. I salute Denise Morrison and the entire Campbell team for the 10-year commitment” (Edelman, 2015).

As the Campbell Healthy Communities–Camden collective matures, we have witnessed environmental and policy changes in our schools, behavioral changes in our children and families, and citywide changes in our food system. We have brought together non-traditional partners who are working collectively to achieve long-term systems change. The initial success of the program demonstrates the power of a collective impact approach, where all partners are dedicated to a common vision and work together to achieve it. We believe we are turning the tide in Camden and have tremendous hope for our city, other Campbell communities, and our children.

References


Kim Fortunato, J.D., is director of Campbell Healthy Communities at the Campbell Soup Company and is a participant in the activities of the Roundtable on Population Health Improvement. http://camp-campbell.com/mentor/kim-fortunato/

Suggested Citation


Disclaimer: The views expressed in this Perspective are those of the author and not necessarily of the author’s organization or of the National Academy of Medicine (NAM). The Perspective is intended to help inform and stimulate discussion. It has not been subjected to the review procedures of, nor is it a report of, the NAM or the National Academies of Sciences, Engineering, and Medicine. Copyright by the National Academy of Sciences. All rights reserved.
APPENDIX A

Campbell Healthy Communities sites for fiscal year 2016 include the following:

- Cooper Pediatrics
- KIPP Cooper Norcross Academy
- H. B. Wilson Family School
- Cooper’s Poynt School
- Cooper B. Hatch Family School
- Center for Family Services/Head Start

APPENDIX B

Campbell’s Healthy Communities 2016 portfolio of investees/investments include the following:

- **The Food Trust**: Healthy Corner Store Initiative, In-Store Nutrition education, Site Nutrition Education, Healthy You Positive Energy—Youth Leadership Program, the Campbell Healthy Communities Youth Advisory Board.
- **YMCA**: Lead partner implementing Soccer for Success, a citywide after-school program focused on physical activity and nutrition education (a co-investment with the U.S. Soccer Foundation).
- **Food Bank of South Jersey**: Cooking Matters® and Shopping Matters®—multiweek courses teaching children and families how to cook, the value of eating together, and how to shop on a budget.
- **GoNoodle**: The Campbell Healthy Communities’ first investment in technology, via our United Way partnership, provides 3- to 5-minute activity breaks for children in Campbell Healthy Communities sites across all Campbell Healthy Communities venues (NJ, OH, and WA).
- **FoodCorps**: The FoodCorps service member builds gardens at all Campbell Healthy Communities sites, works with all nutrition education investees, and advises on farm-to-school opportunities.
- **The Camden Coalition of Healthcare Providers**: Primary care community building and strategic partnerships, collective impact performance tracking infrastructure, and citywide surveillance systems for food insecurity and BMI.
- **Delaware Valley Regional Planning Commission**: Co-investment to develop a Camden City Food Economy Strategy (report to be released in December 2015).
- **West Chester University**: Provides technical assistance to all Campbell Healthy Communities sites on the creation and implementation of health and wellness policies and professional development opportunities for all health and physical education teachers districtwide.
- **Wellness in the Schools**: Planning investment to implement alternate school meals plan with goal to launch a pilot Wellness in the Schools/School Food program in early 2016.
- **Center for Environmental Transformation**: Onsite support of building, planting, and maintenance of all Campbell Healthy Communities sites’ gardens.
- **Community Foundation of South Jersey**: Investment in a multidonor-advised fund that awards annual grants to innovations in food access in Camden.
- **The United Way of Henry County**: Investment in capacity building of the backbone organization for the newly formed Campbell Healthy Communities collective in Henry County, OH, Campbell Soup Company’s largest plant community.