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Out of a belief that the best solutions to improving health in underserved communities can come from the insights and wisdom of the residents of those communities, the W. K. Kellogg Foundation launched a \$55 million national initiative in 1998 called Community Voices: Health Care for the Underserved. Bringing the diverse voices of an entire community to the table to promote action around improving health was the core strategy of the initiative, which funded thirteen sites across the nation. The foundation wanted to create models responsive to local interests and raise them up as national models to help address the crisis in health care and the growing number of uninsured, underinsured, and underserved citizens. These dynamic "learning laboratories" were local collaborations among institutions, government, and community, supported under the premise that members of underserved communities, when equipped with information, tools, and resources, can and should contribute to reorienting the health care delivery system.

As one of the largest initiatives to be undertaken in the W. K. Kellogg Foundation's history, Community Voices was a six-year investment that affirmed our dedication to some precious principles—our belief in community-driven change, and in partnerships strengthened by the glue of collaboration. The work of these grantees extended what we understood then and reinforces what we know today about the process of change—that it requires both top-down and bottom-up movements of thought and action. Engagement at the community level must inform regional, state, and national dialogue; and policy endeavors in the halls of government must take into account the voices of those who benefit from services, or suffer from their lack—voices that historically have been excluded.

To explore ways to expand coverage and access for underserved populations and broaden the definition of health, grantees formed coalitions and working groups of all shapes and sizes to engage in creative problem solving. In New York, it was the Northern Manhattan Community Voices Collaborative (NMCVC) that signed on to create locally generated solutions to improve health care access and quality. As in the other communities, the NMCVC benefited from leadership with the passion, willingness, and vision to tackle making their local health care system more responsive to community residents.

In Mobilizing the Community for Better Health: What the Rest of America Can Learn from Northern Manhattan, the authors share tales from their ten-year journey to join thirty-five community organizations and health care providers to improve the overall health of their community. Serving a largely Dominican/Latino and African American population in Washington Heights/Inwood and central Harlem, the initiative was led by the Columbia University College of Dental Medicine, Harlem Hospital Center, and Alianza Dominicana.

Dr. Allan Formicola and Dr. Lourdes J. Hernández-Cordero and the other contributors to this volume describe how the NMCVC transformed the skills and outlook of individuals who worked in the collaboration; improved the health of individuals who benefited from the programs; and increased the capacity of partner organizations. They share how community health workers contributed to making health care appropriate and accessible in ways other members of the health workforce could not; how they began to raise access to oral and mental health services to a par with primary care access; and why health policy efforts must be integrated into all program initiatives if they are to sustain themselves. While not all of these efforts met with the same degree of success, they provide engaging stories with powerful lessons for anyone interested in reducing health disparities. This readable and practical supplemental text for faculty and students in public health and health administration courses is a valuable guide for community-based organizations, service providers, government

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officials, professional organizations, advocates, and policy makers working to address today's realities of health care reform.

At a time when our nation nears the possibility of joining other developed nations in the world by providing some form of universal access to health care, the authors share successful strategies for solving problems that continue to daunt decision makers in board rooms, public institutions, and the halls of government. In essence, this book reveals much about the potential of communities to reorient our nation's health systems to meet the needs of everyone, with lessons that many decision makers need to hear and heed.

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