



2022 Year-end Letter

Laura Landy, former President and CEO of The Rippel Foundation

Dear Friends,

After 25 years as a trustee, and 16 years as President and CEO, on January 1, 2023, I will transition to the honored role of President Emerita and Senior Advisor to The Rippel Foundation. I'm pleased that I will still be involved—writing, coaching, and supporting this great organization and its new leader, Becky Payne.

In 1997, when I was invited to join the board, I was running a successful social entrepreneurship consulting business and partnering with AT&T's Bell Labs to bring the first touch-screen telephone technology to managed care claim processing. As part of the foundation's growing commitment to diversity, I became the first woman trustee in the foundation's 44-year history and the first Jewish person. I was also noticeably younger than the other trustees, and the only one with deep experience working in communities and with nonprofits. My presence radically changed the culture of the board.

For 10 years, I sat on the board—meeting grantees; voting on recommendations; and making good, mission-focused grants in cancer research, heart disease, women's health, services for the elderly, and health care delivery. The recipients were smart, passionate, committed, and deserved the resources. I loved meeting them and loved the complex science behind so much of the work.

Yet something didn't feel right. An entrepreneur by training and practice (and perhaps genetics), I felt like there must be a better use for the ~\$4 million we spent each year—something that would have more impact. It was clear our grants were not going to cure cancer or heart disease or transform women's health. At 0.009% of NIH's research budget, we were not even a drop in the bucket.

In 2006, I was given the opportunity to test my thinking. The former president had left after many years, and I was ready for a change. I was honored to be chosen to lead Rippel as its new President and CEO. I began by digging deeply into the history of the foundation. Who was J.S. Rippel? Fannie Rippel? Julius A. Rippel, the first president? I read 30 years of annual reflections that documented the first years of Rippel (1953-1983) and placed them in the context of social events, needs, and questions of the time. I researched what foundations in health were doing—

and not. I started to look at how to solve complex problems and what we might do. Two insights were key:

1. The conversations and challenges going back to the 1950's and 1960's, and decades before that, were identical to those we were having in 2006 (and still today).
2. People in the field of health primarily talk to people in health—and mostly to those who think like they do. This closed, reinforcing circle did not sufficiently challenge entrenched thinking and approaches or benefit from the insight and experience of others.

Beginning in the 1950's, Julius A. Rippel, nephew of New Jersey banker J.S. Rippel and the foundation's first president, wrote about the need to create a system that keeps people healthy, instead of treating them only when they get sick; the importance of thinking boldly and taking risks; the consideration of well-being as an essential part of health; the economic unsustainability of our health care system; the propensity of hospitals to focus on profits over people; and the question of what constitutes a hospital. Importantly, these were observations of a conservative banker, not a social radical. They were astute observations about the reality of our system and its many failings. Julius A. also challenged his board, saying, **“We must have substantially new manners of thinking to enable mankind to bridge the gap between the things that have been and the things which will be.”**

The conclusions were clear: We know what is wrong. We know what needs to change. We just don't know how to shift values, thinking, and behaviors at a scale that will make a lasting impact—that will transform our systems and foster health and well-being for all. If we truly were going to affect the lives of women and the elderly, to address cancer and heart disease, and to help our nation's hospitals as our mission dictates, working to transform systems had to become Rippel's central mission.

In 2007, knowing we could not do it alone, I reached out to others. A serendipitous connection over pizza in Manhattan led me to Elliott Fisher, who was a leading researcher at The Dartmouth Institute. Over a long dinner in Princeton, NJ, we envisioned a group of thinkers and doers who might be able to help shape a strategy forward together. He challenged me to recruit Don Berwick, founder of the Institute for Healthcare Improvement (IHI) and former CMS director under Obama, to help lead the group. A three-month journey led to a meeting with Don and Amory Lovins, the father of alternative energy and chief scientist of the Rocky Mountain Institute, while Amory was in NYC rededicating the Empire State Building as a “green” facility. Our discussion focused on what health can learn from the energy sector. There was much to discuss and more to learn together. That meeting resulted in a larger meeting in Cambridge, MA, of what was to become the [ReThink Health founders](#) group.

Elliott, Don, and Amory were key. With their help, we also brought in Jay Ogilvy, a founder of the Global Management Group and creator of scenario planning science; noted management leader Peter Senge, known for advancing the concept of the learning organization and author of

The Fifth Discipline; John Sterman, Jay W. Forrester Professor of Management, and the current director of the MIT System Dynamics Group at the MIT Sloan School of Management; Elinor Ostrom, the Nobel Prize-winning economist known for her work on sustainable commons and nested governance systems; Marshall Ganz, now a professor at Harvard who pioneered organizing with the United Farm Workers and designed Obama’s grassroots campaign; Celinda Lake, a talented political pollster and powerful influencer and communications leader; and notable others.

This group met regularly for two years, asking questions that others were afraid to ask and seeking an approach that would help find answers. We sought to understand what a health system based on the energy principle of “end use/least cost” might look like. We asked why some regions of the country have better health outcomes yet spend far less—a conversation that ultimately led to Atul Gawande’s article, [The Cost Conundrum](#), which was influential in the public discourse surrounding the Affordable Care Act. We began to build an interactive model to understand what actions and investments can actually affect health, care, costs, and equity—that became the [ReThink Health](#) model. We co-hosted two national conferences with partners from IHI, Dartmouth, Brookings, and Harvard to learn more.

ReThink Health was named by and created by this prestigious group that Rippel convened. By hiring the proteges of these impressive change agents, we began to experiment—to test their theories in the health arena. We piloted projects, built models, and began to shape a unique approach that builds on their theories and now draws on many others like complex adaptive systems and the [Three Horizons](#) framework. With the support of the Robert Wood Johnson Foundation and others, we were able to grow and test new approaches and pilot concepts like the [vital conditions and urgent services](#); build tools and learning experiences; and create models by working deeply with motivated regional teams. Our work is now reflected in the new [Federal Plan for Equitable Long-Term Recovery and Resilience \(ELTRR\)](#), which lays out a whole-of-government approach to strengthen resilience and improve well-being in communities nationwide. The Plan was championed by the HHS Office of the Assistant Secretary for Health and Office of Disease Prevention and Health Promotion on behalf of an Interagency Workgroup composed of over 35 federal departments and agencies, and was led by Rippel’s incoming President and CEO, Becky Payne, during her time at HHS.

ReThink Health has been a pioneer in system transformation, and Rippel’s investment in ReThink Health as our primary initiative and our vehicle for system change, health and well-being, thriving, and equity is now stronger than ever.

As we enter the new year—Rippel’s 70th anniversary—now as an operating foundation, Rippel is poised to implement an ambitious new strategic roadmap that will further our 70-year journey. Importantly, the roadmap builds on the mission dictated by J.S. Rippel, the insights of Julius A. Rippel, the brilliant work of our founding ReThinkers and their proteges, and the dedicated work of our staff and trustees. We know this effort needs all of us, working together

toward a shared goal of all people in all places thriving together. I'm proud to have been and to be a part of this important movement, and I'm excited for Rippel's next chapter.

Warmly,

Laura Landy

President and CEO

ABOUT THE RIPPEL FOUNDATION AND RETHINK HEALTH

Rippel is a nonprofit operating foundation dedicated to fostering equitable health and well-being for all. Together with partners and co-investors, Rippel works with health care organizations, foundations, corporations, government institutions, and change agents throughout the United States to guide thinking and action that inspire innovative system transformation and to promote shared stewardship as a rising norm. Rippel's flagship initiative, ReThink Health, continually explores how to achieve equitable system change in real-world settings.