Local Health Department Strategies for Implementing Health in All Policies

Introduction

Local health departments (LHDs) face complex public health challenges due largely to decisions made outside of the health sector. Factors such as socioeconomic policies, land use and transportation decisions, and the quality of education shape access to resources and opportunities that affect quality of life and health outcomes. Problems such as health inequities, which are unfair and avoidable differences in health status within and between countries; healthcare costs; high rates of chronic diseases; and climate change are complicated, interrelated issues lacking simple solutions. One way LHDs can begin to address such problems is by collaborating with partners from “non-health” sectors through a Health in All Policies (HiAP) approach that infuses health considerations into policy, planning, and program decisions. The National Association of County and City Health Officials (NACCHO) has produced this fact sheet to provide an overview of strategies that can help LHDs implement HiAP in their jurisdictions.

About Health in All Policies

NACCHO defines HiAP as a change in the systems that determine how decisions are made and implemented by local, state, and federal governments to ensure that policy decisions have neutral or beneficial impacts on health determinants. HiAP emphasizes the need to collaborate across sectors and break down “silos” to achieve common health goals. It is an innovative approach to the processes through which policies, plans, and programs are created and implemented but does not require that health be at the center of every policy, plan, or program. Because LHDs possess the legal authority, responsibility, and mission to protect and promote the public’s health, they are natural leaders to implement HiAP at the local level by acting as facilitators to convene partners and stakeholders—such as city or county officials, planning or transportation departments, community-based organizations, local businesses, developers, and advocates—to address the policy and structural factors affecting health within communities. HiAP often fits within LHDs’ ongoing efforts to improve population health through policy, systems, and environmental change strategies.

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Strategies for Implementing Health in All Policies

HiAP comprises different strategies and tactics for increasing health considerations in government practices and processes at multiple scales, scopes, and levels of government. LHDs can use the following seven strategies for implementing HiAP at the local level.

1. Develop and Structure Cross-Sector Relationships

Meaningful collaboration is the foundation of successfully implementing HiAP. Tactics for developing and structuring cross-sector relationships can be formal or informal. Formal structures, such as councils, committees, task forces; management practices; and memorandums of understanding help ensure accountability but can lack flexibility. Informal structures, such as temporary workgroups and voluntary teams, can inform initial working relationships and provide the basis for a more formal relationship to take shape.

2. Incorporate Health into Decision-Making

LHDs can use a variety of tactics to integrate health into decision-making, such as cross-sector needs assessments, strategic planning, priority setting, and developing common goals and objectives. LHDs can refer to guides, protocols, and checklists when best practices exist on how to infuse health into specific decisions. For example, health impact assessments and community health assessments can help LHDs to incorporate health considerations into land use or transportation policies by informing decisions or developing strategies to avoid or mitigate negative health effects.

3. Enhance Workforce Capacity

LHDs can increase their capacity to implement HiAP by creating opportunities for staff to interact across sectors and with external stakeholders; training staff on how to develop and maintain partnerships; implementing hiring practices that incentivize collaboration with partners outside the health sector; hiring non-traditional staff, such as planners; and identifying specific staff to administer and sustain partnerships and coordinate HiAP implementation.

HIAP IN ACTION: RELATIONSHIPS

The Mayor’s Healthy Hometown Movement Leadership Team in Louisville, KY, is chaired by the director of the Louisville Metro Department of Public Health and Wellness. The team includes multiple directors of various city departments that affect residents’ ability to make healthy choices where they live, work, and play. The team’s goal is to improve residents’ health by developing and implementing policies, programs, and practices that address factors that affect health, such as programs to increase access to healthy food options, reduce tobacco use, and increase physical activity.

HIAP IN ACTION: DECISION-MAKING

In 2013, Crook County (OR) Health Department won NACCHO’s LHD of the Year Award in the small jurisdiction category for a health impact assessment related to bicycle and pedestrian safety in the town of Prineville. The LHD conducted the assessment to identify health concerns related to lack of safe places to walk and bicycle and to influence planners’ and community members’ viewpoints in developing a 20-year transportation plan.

HIAP IN ACTION: WORKFORCE

Tacoma-Pierce (WA) County Health Department hired a planner to lead its built environment program. The planner, with a background in urban and regional planning, helps the LHD achieve the aims of the program to promote healthy livable communities by supporting the considerations of human health in planning processes.
Coordinate Funding and Investments
LHDs can incorporate health considerations into funding and investments by working with partners to develop funding announcements, cooperative agreements, and contracts that include health criteria; coordinate investments; and review and score funding applications that weight the inclusion of health objectives.

Integrate Research, Evaluation, and Data Systems
LHDs can use data from research and evaluation to identify the potential impact of cross-sector policies on health and find opportunities to maximize the positive health impacts of such policies. For example, LHDs can integrate cross-sector data and indicators such as access to parks and healthy food into health data sets; include health indicators in program evaluation; and use data to validate health performance measures.

Synchronize Communications
Communication is the foundation for building a common vision among LHDs and partners. Tactics include framing activities in terms of how they relate to different sectors; developing common messages across sectors; establishing a shared platform for cross-sector communication; and developing joint policy statements.

Implement Accountability Structures
Accountability structures help LHDs and partners to sustain HiAP efforts in the long term by assigning responsibility and ensuring transparency. Such structures include budget oversight and public reporting; performance measures and objectives that include health considerations; and monitoring and enforcing laws that might affect health.

HIAP IN ACTION: FUNDING & INVESTMENTS
The Mid-Ohio Regional Planning Commission passed a Complete Streets Policy mandating that all projects funded by the commission accommodate all users, including pedestrians, bicyclists, users of mass transit, people with disabilities, and the elderly.

HIAP IN ACTION: RESEARCH, EVALUATION, DATA
The San Francisco Department of Public Health, with the support of community advocates and health evidence demonstrating the need to prevent roadway-related air quality conflicts, worked with the board of supervisors to pass Article 38 of the San Francisco Health Code. Article 38 requires assessment of the roadway effects on air quality near new residential construction and installation of air filtration if locations are in a high-pollution zone. Article 38 has institutionalized a working relationship among the LHD, Bay Area Air Quality Management District, San Francisco Planning, and Department of Building Inspection.

HIAP IN ACTION: COMMUNICATIONS
The Davidson Design for Life initiative enables the town of Davidson, NC, to coordinate messages, funding requests, and activities in support of enhancing the health of residents across sectors. By framing health in terms of physical, mental, and emotional well-being, the initiative brought together a range of partners including health professionals, planners, educators, environmental and public health advocates, community leaders, and media specialists.

HIAP IN ACTION: ACCOUNTABILITY
An ordinance passed in 2011 by the county council in Prince George’s County, MD, requires the planning board to refer site, design, and master plan proposals to the Prince George’s County Health Department for a health impact assessment of the proposed development on the community and the distribution of potential effects within the population and to recommend design components that increase positive health outcomes and minimize adverse health outcomes for the community.
Conclusion

LHDs can use a HiAP approach to address highly complex health challenges in their communities by initiating the ways that decisions are made and carried out at the local level. The seven strategies above provide a menu of options for incorporating HiAP into LHD work. LHDs can use the strategies in combination and at different scales and scopes of implementation. NACCHO advocates for LHDs to take a leadership role at the local level to help convene cross-sector partners and drive systems-level change to improve health outcomes.

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References


FOR MORE INFORMATION, PLEASE CONTACT:

For more HiAP information or resources, contact NACCHO at healthycommdesign@naccho.org or visit http://www.naccho.org/topics/environmental/hiap/.