



Using Healthy People to Support Multisector Partnership Development

July 26, 2023



OASH

Office of
Disease Prevention
and Health Promotion

NACCHO
National Association of County & City Health Officials

 **Healthy People 2030**

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Healthy People 2030



Learning Objectives

1. Show how local health departments can use Healthy People 2030 to guide multisectoral partnerships that promote and protect health and wellbeing in their communities;
2. Highlight Healthy People 2030 objectives, Leading Health Indicators, the Social Determinant of Health framework, and other resources;
3. Address how local health departments can use Healthy People 2030 to help identify local needs and priority populations; find evidence-based tools and resources; and use data from the national initiative to set benchmarks for progress.



Outline

- I. Welcome
- II. Opening Remarks
- III. Introduction to Healthy People 2030 and Using Healthy People 2030 to Develop Multisector Partnerships
- IV. A Multisector Partnership in Walworth County, WI
- V. Facilitated Q&A
- VI. Closing Remarks



Opening Remarks

Carter Blakey, Deputy Director

Office of Disease Prevention and Health Promotion
U.S. Department of Health and Human Services



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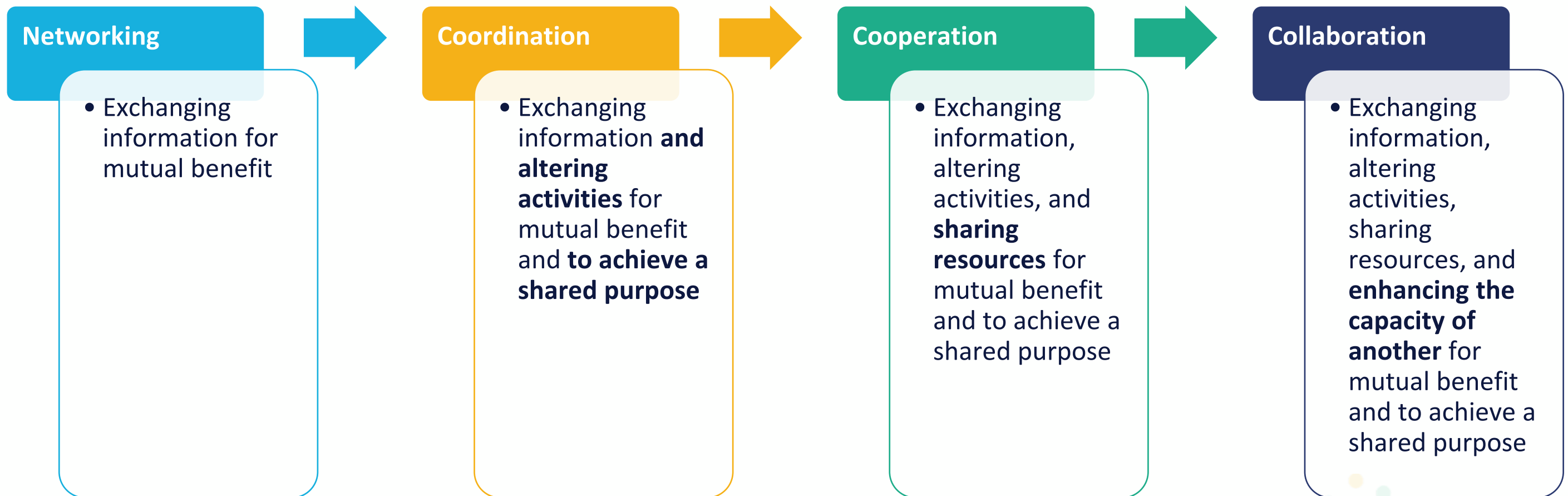


Healthy People 2030



Poll Question

Think about your strongest multisector partnership, based on the partnership spectrum below, what stage of partnership are you in with this partner?



Karen Harris Brewer, MPH

Independent Consultant
Health ConTexts, LLC



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Healthy People 2030



Introduction to Healthy People 2030:

Using Healthy People 2030 to Develop Multisectoral Partnerships



Multisector Partnerships: Promise, Rationale, and Needs

- **Multisector partnerships (MSPs)** are place-based reform efforts, collaboratively led by stakeholders across public health; health care; and other sectors like education, housing, transit, and social services.
- **Rationale:** Improve population health in a region by strengthening connections across fragmented health and social systems and exploring comprehensive strategies to help build healthier, more equitable communities.
- **Needs:** There is a need to better understand whether, when, and how MSPs work; what are effective paths to financial sustainability; how to bridge cultural and operational differences across organization types; and how to navigate imbalances of power/resources across organization types.

Please see the *Using Healthy People 2030 for Multisector Partnerships Toolkit* for source citations



Introduction to Healthy People 2030

- The Healthy People 2030 [framework](#) comprises the initiative's vision and mission; foundational principles; overarching goals; plan of action; and history and context.
- To achieve the Healthy People 2030 vision of “***A society in which all people can achieve their full potential for health and well-being across the lifespan,***” the framework lays out 5 priority areas for this work:
 - [Health disparities](#)
 - [Health equity](#)
 - [Health literacy](#)
 - [Well-being](#)
 - [Social determinants of health](#)
- The Healthy People 2030 [mission](#) is to promote, strengthen, and evaluate the nation's efforts to improve the health and well-being of all people.



Healthy People 2030 Overarching Goals

- Healthy People 2030's overarching goals are to:
 - **Attain healthy, thriving lives and well-being** free of preventable disease, disability, injury, and premature death.
 - **Eliminate health disparities, achieve health equity, and attain health literacy** to improve the health and well-being of all.
 - **Create social, physical, and economic environments** that promote attaining the full potential for health and well-being for all.
 - Promote **healthy development, healthy behaviors, and well-being across all life stages.**
 - **Engage leadership, key constituents, and the public across multiple sectors to take action and design policies** that improve the health and well-being of all.



Priority Areas of the Healthy People 2030 Framework

Concept	Definition
Health disparities	A particular type of health difference that is closely linked with social, economic, and/or environmental disadvantage. Health disparities adversely affect groups of people who have systematically experienced greater obstacles to health based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory, or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.
Health equity	The attainment of the highest level of health for all people. Achieving health equity requires valuing everyone equally with focused and ongoing societal efforts to address avoidable inequalities, historical and contemporary injustices, and the elimination of health and health care disparities.
Health literacy	<ul style="list-style-type: none"> • Personal health literacy is the degree to which individuals have the ability to find, understand, and use information and services to inform health-related decisions and actions for themselves and others. • Organizational health literacy is the degree to which organizations equitably enable individuals to find, understand, and use information and services to inform health-related decisions and actions for themselves and others.
Well-being	The concept of Health and Well-being is defined in Healthy People 2030 as, “how people think, feel, and function—at a personal and social level—and how they evaluate their lives as a whole.”
Social Determinants of Health	Conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks.

Additional detail available on the Healthy People Website: <https://health.gov/healthypeople/priority-areas>



Browse Healthy People 2030 Objectives

- Healthy People 2030 objectives are organized into intuitive topics so you can easily find the information and data you're looking for. Pick a topic you're interested in and explore the related objectives.
- The objectives are organized within the topics of:
 - [Health Conditions](#)
 - [Health Behaviors](#)
 - [Populations](#)
 - [Settings and Systems](#)
 - [Social Determinants of Health](#)

Learn more on the Healthy People 2030 website at:

<https://health.gov/healthypeople/objectives-and-data/browse-objectives>



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Leveraging Healthy People to Advance Health Equity

Health Equity is the attainment of the highest level of health for all people.

Achieving health equity requires valuing everyone equally with focused and ongoing societal efforts to address avoidable inequalities, historical and contemporary injustices, and social determinants of health — and to eliminate disparities in health and health care.



Objectives

Identify priorities by browsing **Leading Health Indicators and other objectives**

Compare **population-level progress** to national targets



Data

Use **Healthy People data** to track health disparities and inform program and policy development



Resources

Find inspiration by consulting **evidence-based resources** to use in your community

Review **Healthy People in Action stories** to learn how others are addressing health equity



Frameworks

Use the **Healthy People 2030 framework** as a model for program planning

Use the **social determinants of health framework** to build **partnerships across sectors** and communicate root causes of health disparities



Definitions

Use the definitions of **health equity** and **health disparities** to promote a shared understanding and identify areas for collaborative action to improve health for all

Leveraging Healthy People to Advance Health Equity

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 Healthy People 2030

Download this graphic: https://health.gov/sites/default/files/2022-04/HP2030_Advance-Health-Equity-Graphic.jpg



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Healthy People 2030 Informs Multisector Collaboration

Social Determinants of Health Domains

1. Economic Stability
2. Education Access and Quality
3. Health Care Access and Quality
4. Neighborhood and Built Environment
5. Social and Community Context



Healthy People 2030, U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion. Retrieved 6/19/2023, from <https://health.gov/healthypeople/objectives-and-data/social-determinants-health>



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Using Healthy People to Develop Multisector Partnerships

SDOH Domain	Economic Stability	Education Access & Quality	Health Care Access, Quality	Neighborhood & Built Environment	Social & Community Context
Examples of Objectives	Reduce the proportion of people living in poverty — SDOH-01	Increase the proportion of high school students who graduate in 4 years — AH-08	Increase the proportion of adults who get recommended evidence-based preventive health care — AHS-08	Reduce the proportion of families that spend more than 30 percent of income on housing — SDOH-04	Increase the proportion of the voting-age citizens who vote — SDOH-07
	Increase employment in working-age people — SDOH-02	Increase the proportion of children who are developmentally ready for school — EMC-D01	Reduce the proportion of emergency department visits with a longer wait time than recommended — AHS-09	Reduce blood lead levels in children aged 1 to 5 years — EH-04	Reduce the proportion of children with a parent or guardian who has served time in jail — SDOH-05

How to Use Healthy People 2030 in Your Partnerships



Download the Fact Sheet on How to Use Healthy People 2030:
<https://health.gov/healthypeople/tools-action/use-healthy-people-2030-your-work>



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Practical Challenges in Working Across Sectors

Challenge	Why This Can be an Issue
Identifying Common Goals	When working across sectors, organizations may have different perspectives on <u>which goals are most important</u> to address.
Terminology	For purposes of general communication, measurement, and data-sharing across sectors, <u>ensuring a shared understanding of terms</u> is important.
Metrics	To help <u>build the evidence base for MSPs</u> , better and more widely adopted <u>measures of structure, process, and outcomes</u> are needed to link their formation to community-wide impact.
Resources/Staff	<u>Needed resources</u> include the money, skills and expertise, information, and connections that the collaboration has available to draw upon
Competition	Given the limited availability of resources, there is a risk that organizations can view each other as competitors, rather than partners.
Staying Power	Sustainability is an important issue. Taking part in MSPs entails opportunity costs; partners need to feel participation is worth the investment of their time.



Poll Question

Of the practical challenges discussed, which one are you struggling with the most?

- Identifying Common Goals
- Terminology
- Metrics
- Resources/Staff
- Competition
- Staying Power



Healthy People 2030 Resources for Further Learning

- [Use Healthy People 2030 in Your Work](#)
- [Leading Health Indicators](#)
- [Evidence-Based Resources \(EBRs\) in Action](#)
- [NACCHO Social Determinants of Health and Healthy People Webpage](#)
- [Healthy People 2030 and Multisector Partnerships JPHMP Article](#)
- [Apply to become a Healthy People 2030 Champion!](#)



Other Resources for Further Learning

Additional Resources:

- Build Healthy Places
 - [A Primer for Multi-sector Health Partnerships in Small Cities and Rural Areas](#)
- Data Across Systems for Health
[All In: Data for Community Health](#)
- University of Kansas, The Community Toolbox
 - [Developing Multisector Collaborations](#)
- Woulfe J, Oliver TR, Zahner SJ, Siemering KQ. Multisector partnerships in population health improvement. Prev Chronic Dis 2010;7(6).
http://www.cdc.gov/pcd/issues/nov/10_0104.htm. Accessed 5/30/2023



A Multisector Partnership in Walworth County, WI



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Healthy People 2030



Walworth County & Healthy People 2030

STRENGTHENING MULTISECTOR PARTNERSHIPS
THROUGH THE COMMUNITY HEALTH ASSESSMENT
AND IMPROVEMENT PLAN PROCESS USING
HEALTHY PEOPLE 2030



**Walworth County
Public Health**
Prevent. Promote. Protect.



WHO WE ARE



MALLORY SWENSON, MPH

WALWORTH COUNTY PUBLIC HEALTH



AARON WINDEN, MSW, CAPSW

WALWORTH COUNTY PUBLIC HEALTH



DEREK D'AURIA

WALWORTH COUNTY ECONOMIC DEVELOPMENT ALLIANCE



BEN MCKAY, AICP

SOUTHEASTERN WISCONSIN REGIONAL PLANNING COMMISSION



OUTLINE

- Establishing Partners
- Developing the Community Health Assessment & Improvement Plan (CHA & CHIP)
- Sustaining the Work
- Multisector Partnership Example: Goal 3.2 & Housing
- Lessons Learned



Community Health Assessment and Improvement Plan Timeline

Establish

August -
September
2021



- Distribute community health survey
- Conduct focus groups and key informant interviews
- Convene steering committee

September 2021 -
January 2022



- Data analysis
- Identify common themes and trends with steering committee

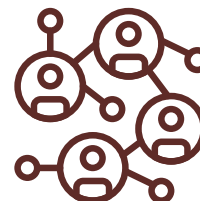
February -
June 2022



- Identify priorities, strategies, and partners
- Publish Community Health Assessment

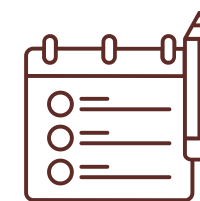
Develop

June -
October
2022



- Community partners and organizations meet to develop objectives and action plans

November 2022
- January 2023



- Finalize workplans with objectives, activities, and performance indicators
- Publish Community Health Improvement Plan (CHIP)

February - April
2023



- Community rollout of workplans
- Continued work on goals & objectives

Sustain

May-October
2023



- First update of CHIP progress available
- Solicit feedback on progress and direction
- Continued work on goals & objectives



ESTABLISH: CHA & CHIP STEERING COMMITTEE

Land Use & Community Development

- Southeastern Wisconsin Regional Planning Commission (SEWRPC)
- Walworth County Land Use & Resource Management

Education

- Whitewater Unified School District
- UW Extension

Healthcare

- Mercyhealth
- Advocate Aurora
- Fort HealthCare
- Open Arms Free Clinic

Non-profit Organizations

- Community Action
- Treehouse Child & Family Advocacy Center

Economic Development

- Walworth County Economic Development Alliance (WCEDA)

Health & Human Services

- County Board Supervisor
- Leadership
- Aging and Disability Resource Center
- Veteran's Services
- Behavioral Health
- Children & Families

Commitments:

- Represent
- Lead
- Encourage
- Commit
- Inspire



ESTABLISH: SDoH & PARTNERSHIPS

PREPARATION FOR COMMUNITY HEALTH IMPROVEMENT

Consider opportunities to apply the Social Determinants of Health framework

Social Determinants of Health



The Social Determinants of Health (SDOH) are the conditions in the environments where people are born, live, learn, work, play, worship and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks.¹

Healthy People 2030, U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion.
Retrieved July 10, 2023, from
<https://health.gov/healthypeople/objectives-and-data/social-determinants-health>

Provided an example of how different sectors can address health outcomes, like overweight/obesity

'Can you think of other examples of how your sector addresses health outcomes?'

Cross-Sector Collaboration



Using Healthy People 2030 SDoH framework stickers to represent their sector

'Which category do you feel your work primarily falls in?'



DEVELOP: CHA

Walworth County Community Health Assessment

2022

Walworth County Division of Public Health

February 2, 2022



<https://arcg.is/1reHuT>

[Executive Summary](#)

[About Walworth County](#)

[Health & Health Outcomes](#)

[Neighborhood & Environment](#)

[Economic Stability](#)

[Social & Community Context](#)

[Education](#)



2022-2025 CHIP

MISSION, VISION AND FOUNDATIONS OF HEALTH

Vision: Improved health for all through connected communities where we live, learn, work, and play

Mission: Create a united vision for Walworth County that centers on building a culture of health.

Foundations of Health: These foundational elements will be addressed through the strategic priorities. As such, the goals, objectives, and outcomes in the plan incorporate these foundations.

- Equity
- Social Connectedness
- Built Environment
- Economic Stability



2022-2025 CHIP STRATEGIC PRIORITIES, GOALS, & OBJECTIVES

Strategic Priority #1: Build community and civic connection

Goal 1.1: Provide care in models that meet people where they are and in ways they need

Goal Leads: Open Arms Free Clinic and Lake Geneva Public Library

Objectives:

- Implement locations for receiving telehealth at libraries or other community space
- Maximize the use of the Mobile Health Hub for delivery of health care and social services

Goal 1.2: Center on community voice – not about us without us

Goal Leads: Planned Parenthood and community leaders

Objectives:

- Build capacity to authentically engage with the Hispanic community
- Authentically engage with youth in Walworth County

Goal 1.3: Organize, develop, & promote community spaces for gathering & connection

Goal Leads: Walworth County Dept. of Health & Human Services and EASD Community Resilience Outreach

Objectives:

- Increase intergenerational gatherings and connections
- Expand active transportation network within Walworth County

Strategic Priority #2: Improve access to care by centering on lived experience

Goal 2.1: Create supports for navigating systems

Goal Leads: Open Arms Free Clinic and New Day Women's Clinic

Objectives:

- Implement a community navigator resource hub

Goal 2.2: Build trust by providing culturally reflective services

Goal Leads: MercyHealth & Walworth County Public Health

Objectives:

- Improve organizational health literacy status

Strategic Priority #3: Unite policy and planning with health for all

Goal 3.1: Expand understanding of identified health issues so that communities will invest in solutions

Goal Leads: Walworth County Dept. of Health & Human Services

Objectives:

- Reduce stigma associated with seeking help for mental health and substance use needs
- Improve awareness of the benefits of early/preventative care
- Develop a unified voice about the importance of housing as a health factor

Goal 3.2: Strengthen coordination & implementation of plans for healthy community development

Goal Leads: Walworth County Economic Development Alliance and Walworth County Public Health

Objectives:

- Align community plans & visions
- Increase attainable housing



S U S T A I N

- Quarterly combined steering committee and goal lead meetings
- Individual goal meetings as needed
- Consistent communication with Walworth County Public Health
- Quarterly reporting from each goal group that is incorporated into our forward facing, interactive website





WALWORTH COUNTY
Community Health Improvement

CHIP Quarterly Feedback

Please complete this form with updates on your CHIP Goal's work in the last quarter. This does not need to be an exhaustive step-by-step report of the work that has been completed, but should instead outline the following key components:

- Progress made towards the goal & priority
- Success stories that highlight key wins
- Barriers that may stand in the way of success
- Partners involved in the work
- Updates on your goal's process measures to quantify progress

As you complete this form, it may be helpful to also reference the work plans and other materials found here: [2022-2025 CHIP Google Drive Folder](#). If you have any questions, please contact us at walcoph@co.walworth.wi.us.



GOAL 3.2: STRENGTHEN COORDINATION & IMPLEMENTATION OF PLANS FOR HEALTHY COMMUNITY DEVELOPMENT

Partners:

- Economic development
- County board
- Regional planning commission
- Land Use & Resource Management
- Housing Authority
- Public Health
- Housing developers
- Municipalities
- Faith community
- Nonprofits

Research

Partners researched what has worked well in other communities and brainstormed opportunities and interventions for Walworth County

Data

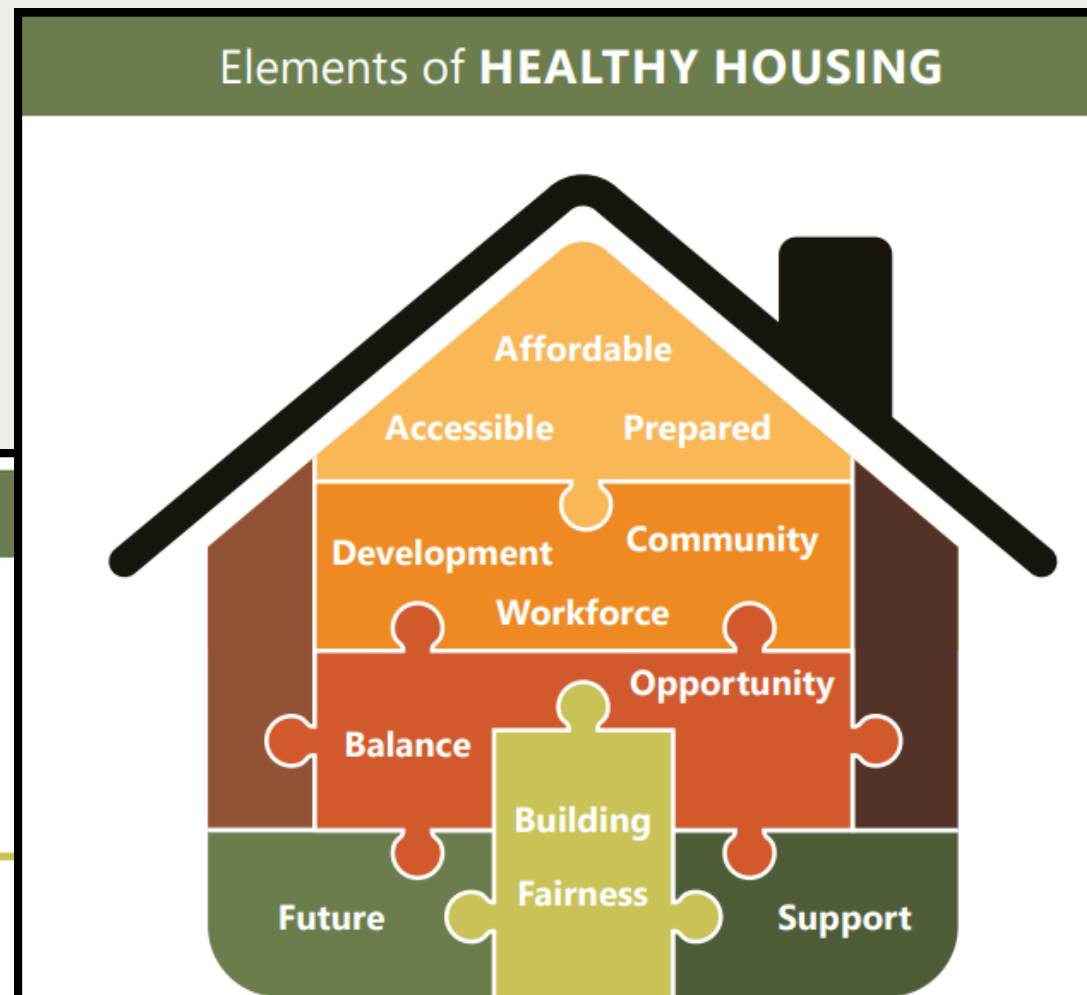
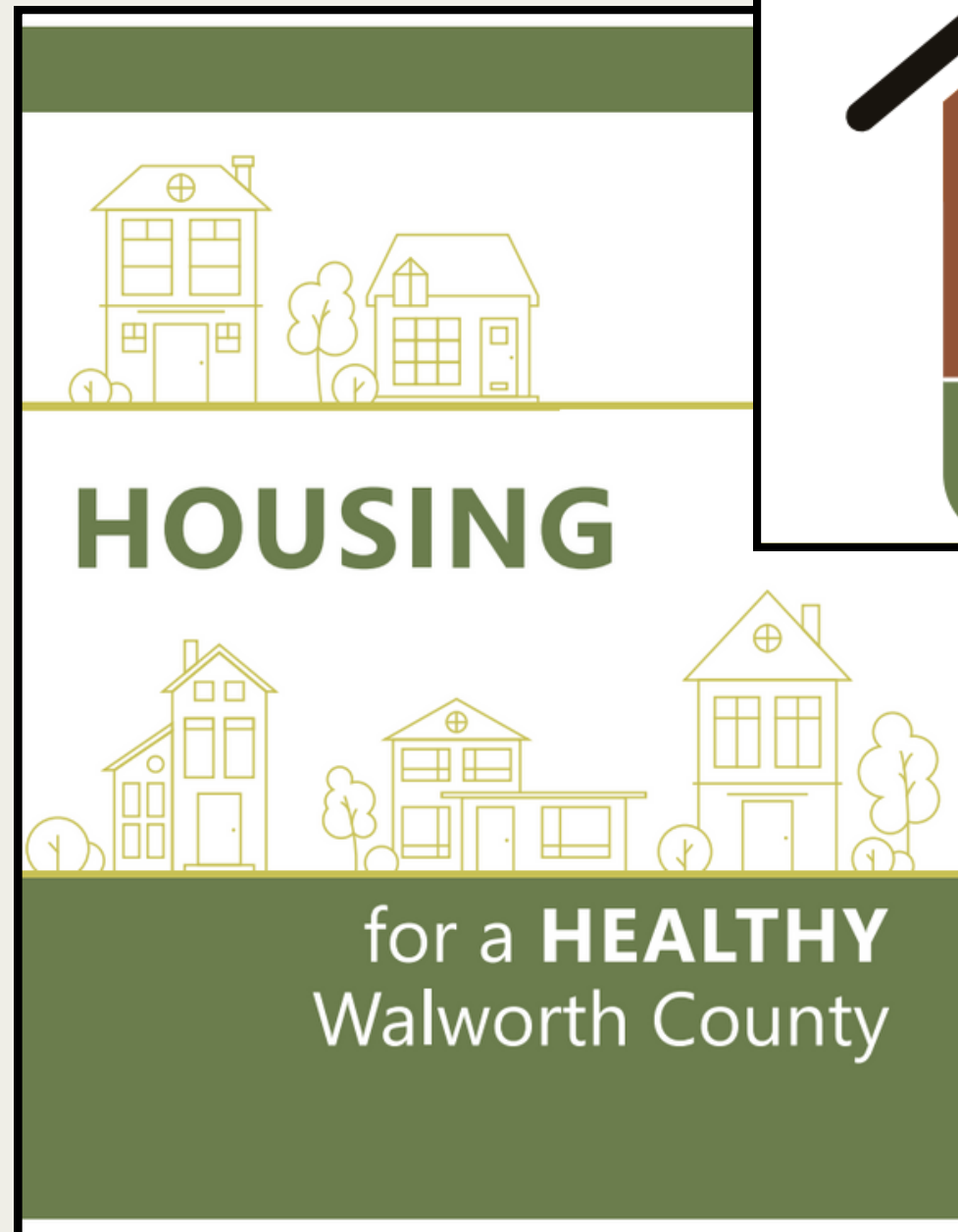
Southeastern Wisconsin Regional Planning Commission (SEWRPC) collected and analyzed data related to housing in Walworth County to create a housing summary booklet.

Partnerships & Elected Officials

Over 20 organizations and businesses have come to the table to discuss potential interventions that will positively impact attainable housing in Walworth County.



GOAL 3.2: STRENGTHEN COORDINATION & IMPLEMENTATION OF PLANS FOR HEALTHY COMMUNITY DEVELOPMENT



Sections:

- Why does housing affect health?
- How much housing do we need?
- What kind of housing do we need?
- What kind of housing do we have?
- What are the housing needs of businesses?
- What can communities do?



LESSONS LEARNED ON MULTISECTOR PARTNERSHIPS

- Communicate the value of the partnership
- Use frameworks that can guide conversation
- Align with already existing work
- Develop authentic relationships
- Utilize data
- Get creative



Thank you!

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For up-to-date information, visit:

www.co.walworth.wi.us/CHA-CHIP



Stay Connected With Healthy People & NACCHO

- Visit the Healthy People 2030 website at <https://health.gov/healthypeople>
- Follow the Healthy People 2030 initiative using the Twitter handle [@healthgov](#) and [#HP2030](#)
- Visit the National Association of County and City Health Officials' Website at <https://www.naccho.org/>



Thank you!



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