Opening Pathways to Health in New Hampshire

New Hampshire Health & Equity Partnership
NH H&EP Key Steps

- Plan released March 2011
- Equity Report Card produced 2013
- Collective Impact approach training 2014
- Equity Messaging Toolkit created 2015

NH H&E&P launched 2010
Our Partners
Our Partners
Our Partners
3 Priorities of the Health & Equity Partnership for the near future: Which ones align with HEAL?

1- Increase the capacity in NH for the collection of high quality Race, Ethnicity and Language (REaL) data across all systems at the state and local level to identify disparities and promote utilization of data to inform improvements, policies and procedures.

2- Increase organizational cultural effectiveness and improve the capacity of organizations in NH to provide high quality services to all populations (especially Racial, Ethnic and Linguistic minorities) by incorporating the elements of a culturally effective organization.

3- Increase a diversified work-force to support economic opportunities for Racial, Ethnic and Linguistic minorities and all populations in NH.
<table>
<thead>
<tr>
<th><strong>Five conditions of Collective Impact:</strong></th>
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<tr>
<td><strong>Common Agenda</strong></td>
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<td>All participants have a <strong>shared vision for change</strong> including a common understanding of the problem and a joint approach to solving it through agreed upon actions</td>
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<td><strong>Shared Measurement</strong></td>
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<td>Collecting data and measuring results <strong>consistently</strong> across all participants ensures efforts remain aligned and participants hold each other accountable</td>
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<td><strong>Mutually Reinforcing Activities</strong></td>
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<td>Participant activities must be <strong>differentiated while still being coordinated</strong> through a mutually reinforcing plan of action</td>
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<td><strong>Continuous Communication</strong></td>
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<td><strong>Consistent and open communication</strong> is needed across the many players to build trust, assure mutual objectives, and appreciate common motivation</td>
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<td><strong>Backbone Support</strong></td>
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<tr>
<td>Creating and managing collective impact requires a dedicated staff and a specific set of skills to <strong>serve as the backbone for the entire initiative and coordinate participating organizations and agencies</strong></td>
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Source: FSG, Tamarack Institute
What Is Health Equity? How Do We Talk About It?

What is health equity and how do we frame it?

i. Frame an understanding of what impacts our health
ii. Define health differences vs. health inequities
iii. Examples of inequities in NH
iv. How health is produced in communities
v. How do we work towards policies, systems and environments that support equity

Why is community engagement essential to effective implementation of HEAL strategies?
FRAME AN UNDERSTANDING OF WHAT IMPACTS OUR HEALTH
What Impacts Our Health

- Social & Economic Factors: 40%
- Health Behaviors: 30%
- Clinical Care: 20%
- Physical Environment: 10%
Specifically…

Physical Environment
- Environmental Quality
- Built Environment

Clinical Care
- Access to Care
- Quality of Care

Social and Economic Factors
- Education
- Employment
- Income
- Family & Social Support
- Community Safety

Health Behaviors
- Tobacco use
- Diet & Exercise
- Alcohol Use
- Sexual Activity

Adaptation of County Health Rankings Model © University of Wisconsin Population Health Institute
DEFINE HEALTH DIFFERENCES AND HEALTH INEQUITIES
Health Differences vs Health Inequities

- **Differences in Health**, are differences in the presence of disease, health outcomes, or access to health care between population groups.

- **Health inequities**, are a particular type of health difference that is closely linked with social, economic, and/or environmental disadvantage. Inequities adversely affect groups of people who have systematically experienced greater obstacles to health based on their:
  - racial and/or ethnic group;
  - religion;
  - socioeconomic status;
  - gender;
  - age;
  - mental health;
  - cognitive, sensory, or physical disability;
  - sexual orientation;
  - gender identity;
  - geographic location; or
  - other characteristics historically linked to discrimination or exclusion.
Examples of Inequities in NH

Minority women are three times more likely to have heart disease than non-Hispanic white women.

Men of color are two times more likely to live in poverty.

From: Health and Equity in NH, 2013 Report Card
FRAME WHY WE NEED TO SOLVE THIS ISSUE
Why We Need to Solve This?

• These disparities represent preventable illness, loss of ability to contribute, and loss of life that compromise our state’s quality of life and economic productivity.

• It is estimated that the US economy loses an estimated $309 billion per year due to direct and indirect costs of such disparities.

• Ending health disparities can lead to a healthier and wealthier NH.
DISCUSS SOLUTIONS THAT WILL OPEN PATHWAYS TO HEALTH ACROSS COMMUNITIES
The goal of equity is to create conditions that allow all to reach their full potential.
How is Health Produced in Communities?

1. Societal Influences
2. Social & Neighborhood Conditions
3. Risk Behaviors
4. Disease And/or Injury
5. Mortality or Recovery

Adapted from Dr. Anthony Iton’s presentation “Achieving Health Equity: Advancing Community Health & Moving the Needle on the SDOH”
Policy, Systems, & Environmental Changes

**Policies**
Changes to laws, ordinances, resolutions, mandates, regulation, rules, etc.

**Systems**
Strategies that impact all elements of an organization, institution, or system.

**Environments**
Physical or material changes to the economic, social, or physical environments.
How Do We Work Towards PSE That Advances Equity?

1. Raise community awareness and educate the public about health equity

2. Use an ‘Equity Frame’ when considering policies, systems, and environments

3. Use inclusive community engagement strategies
Equity Frame
What does it look like?

Consider the “conventional question” vs. the “equity question”

**Conventional question:**
How can we promote healthy behavior?

**Equity questions:**
For each policy, practice or decision:
• Who are the groups affected and are they at the table?
• How it will effect historically under-represented groups that make up your community?
• How will it be perceived by historically under-represented groups?
• What might be the unintended consequences of the action?
COMMUNITY ENGAGEMENT
Community Engagement

Goals

Determine Issue/Population to Engage

•

Determine Desired Level of Engagement

•

Effective Engagement Strategies
# Levels of Engagement

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<tr>
<th>Least Intensive</th>
<th>Consulting</th>
<th>Engaging in dialogue</th>
<th>Organization and community work together</th>
<th>Most Intensive</th>
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<td>Informing</td>
<td>Organization gathers information from the community to inform organization-led interventions</td>
<td>organization engages community members to shape priorities and plans</td>
<td>Community and organization share in decision-making to co-create solutions together</td>
<td>Community initiates and directs strategy and action with participation and technical assistance from organization</td>
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<td>Organization initiates an effort, coordinates internally and uses a variety of channels to inform community to take action</td>
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