A playbook for action

Georgia Health Policy Center

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2008 Leaders to Leaders Conference
Shaping Policy for a Healthier Nation

A PLAYBOOK FOR ACTION
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Intro
In July, 2008 the Centers for Disease Control and Prevention (CDC) hosted its third annual Leaders to Leaders Conference. The conference was designed for leaders in the business, government, education, non-profit, and faith communities. The conference featured speakers who talked about:

- Health in All Policies
- Innovations in Technology
- Health Equity
- Engaging Americans, and
- Engaging Leaders for a Healthier Nation

After each panel presentation, the leaders who attended the conference met to talk about what they had just heard. Each conversation built upon the last, with the final conversation focusing on their ideas for policies and strategies that could make America a healthier nation.

The Georgia Health Policy Center was there at the conference to capture these comments. This Playbook for Action – a product of the Georgia Health Policy Center funded by the CDC – is a summary of the comments from these discussions, organized to help leaders put their ideas into action.

The information packed into this playbook was gathered from discussions at the Leaders to Leaders Conference and original language was used whenever possible, but not all comments are verbatim. Similar concepts were combined to reduce repetition.

The playbook is designed to serve as a handy guide for action. Sections were crafted with certain types of action in mind, focusing on information and strategies most relevant to that type of task. As a result, some concepts will be repeated from section to section.

Web links are provided to further the benefit of policy action, not as a result of necessarily endorsing content or an exhaustive search on the topic. The links are printed in the playbook using the exact titles of the web pages on which they appear. If using the print version of this playbook, go to a search engine and type a link from the playbook exactly as written to find the desired page or article.

The playbook is meant to be the starting point of an ongoing conversation about how to make America the Healthiest Nation. As this ongoing conversation expands to include more people and more ideas, the playbook will expand to reflect those changes.

For more information about the conference and to view conference Webcasts, go to: http://www.cdc.gov/partners/L2L/
Leave differences at the door

As you read through the playbook, keep in mind that each bullet point reflects the opinion of a conference participant. You may not always agree with that opinion. Sponsoring agencies may not agree with that opinion. That’s okay. In fact, that may be a good thing. The Leaders to Leaders conference offered an opportunity for participants to brainstorm. Brainstorming means some ideas work, some don’t, and not everyone will agree on every idea. The best way to get the ideas started is not to censor them, but let them flow. So feel free to disagree. But when it’s time to take action, follow the advice offered by a conference participant and featured in the Coaching: Leadership section: “Identify the common denominator, leave differences at the door – and drive execution.”
History
In 2007, participants in the second annual Leaders to Leaders conference offered two ideas for the next year’s meeting:

- When people talk about national health reform, let’s make sure they talk about public health topics like disease prevention and health promotion
- Let’s talk more with each other

With these two ideas in mind, the Centers for Disease Control and Prevention joined forces with the Georgia Health Policy Center and the National Network of Public Health Institutes to explore this topic further.

They began with background research, focus groups, and interviews with CDC leaders and staff. Then they met with leaders from local, state, and national groups. These leaders then held meetings with their own groups to continue the conversation. More than 500 people across the country attended these meetings. The leaders then came back together to share what their groups had discussed.

One of the key findings from this work was the idea that there are multiple levels of health reform, as shown in the figure below.

![Diagram of health reform levels](http://aysps.gsu.edu/ghpc/2162.html)
How to Use This Playbook
This playbook is organized in the classic interview style — Who, What, When, Where, Why, and How. Each section explores the people, strategies, motivations, resources, and timing you’ll need to answer the fundamental question: “How can we get this done?”

You’ll find many helpful Web links sprinkled throughout the playbook to provide more in depth information about a topic, strategy, or program. The links are printed in the playbook using the exact titles of the web pages on which they appear. If using the print version of this playbook, go to a search engine and type a link from the playbook exactly as written to find the desired page or article.

Here’s a preview of the playbook’s sections:

- The **Who** section provides strategies for working with a variety of people and groups. The Individual Plays section outlines personal goals you can make to help affect the health of those around you. Passing Plays suggests strategies to help you engage new partners to join the fight for a healthier America.

- The **What** section details strategies for spurring change in an array of areas that affect health, including food, fitness, tobacco, technology, mental health, environment, transportation, equity, and health in all policies.

- The **Where** section suggests actions that can help promote a healthy environment in schools, communities, and the workplace.

- The **When** section deals with the timing of all this action. Short-Term Plays suggests things to act on right now. Long Term Plays suggests some longer term goals that will take time.

- The **How** section contains more detail on how to get things done. The Running Plays section details promising practices proposed by the conference group that you or your organization can act on now to help instigate meaningful health reform. Coaching gives instructions on how to lead positive change in your life, in your community, and in your organization. Broadcasts gives advice on getting the word out through media. Interference lays out the challenges we’ll likely face in our effort to stir true progress and reform. The Sponsors, Patrons, and Ticket Sales section suggests possible sources of funding for health programs. And, finally, Scoreboard proposes steps we can take to hold leaders (business, government, or community) accountable for health, as well as methods for measuring the success of health reform efforts.

- The **Why** section explains why health reform is definitely needed. Right Plays at the Right Time makes the case for why we need to act now.

- The **Extra Point** section gives an overview of The Alliance for the Healthiest Nation and its efforts to recruit more partners to improve the health of all Americans.
Instant Replays

“This may be the happiest day of my life.”
– Dr. Julie Gerberding
Many aspects of health protection and improvement are determined by factors outside the influence of the health care system. Health happens at home, at school and at work. Health in All Policies is an effort to integrate health considerations into societal policy making across sectors, and at all levels, to improve population health.

The keynote and guest speakers inspired conference participants to create a strategic, economic imperative for a value-based health system and to view health as a sustainable value. They encouraged participants to view leadership as a platform to positively influence others, to make use of all of their resources and networks, to keep their commitments, to empower others through available information, and to be persistent and passionate in their work.
The Health in All Policies approach is not limited to policies set and enforced by governments. Health-producing policies may be made by businesses, faith-based organizations, and nonprofit organizations. The purpose of the Health in All Policies “panel of possibilities” was for speakers to share creative initiatives they have taken to build health into policies that made a difference.

The panel featured a variety of perspectives: executive-level state government; state and local governmental public health, a multi-national corporation and a large, national health advocacy nonprofit. Panelists did underscore the importance of policy and cultural / community-based approaches, as opposed to measures focused solely on individuals’ behavior. Corporate policies and practices that were mentioned included requiring each worksite to have and follow a health-promotion plan, and the adoption of an “every visit a prevention visit” stance toward primary care. Other speakers spoke of reducing health disparities and improving health through economic development, regional planning and community design, transportation policy and other “non-health” arenas.
Technological innovations can be important accelerators of health in all policies by linking businesses, faith-based organizations, non-profits, and others to create awareness and accountability for impacts on health and actively design a supportive environment. This panel informed and inspired, and each speaker told about their work in technologies that could positively impact health. After the panel discussion, conference participants shared with each other how they thought the technologies discussed could be disseminated to a wider audience to improve health and how, as leaders, they could expand the use of technology to achieve a healthier nation.

Panelists stressed that technology is not an end in itself – it is, rather, a useful tool to engage consumers and shift custodial access of health information from providers and payers to consumers so that they may take a more active role in their health improvement. The challenges of incentives, financing, interoperability, and the adoption of standards all need to be addressed, but there must be a realization that, ultimately, most health care is managed in the home. Trust in the system – a system that must be consumer-oriented so that individuals will want to stay engaged with it – must be built and maintained through a policy body and privacy framework.

Not everyone has access to the Internet – 80 percent of the world does not have an e-mail address, so alternative modes of technology diffusion must be available. Technology applications must be available through more common mobile devices, and technology innovators must partner with community organizations such as churches to make technology more widely available.
Health in All Policies attempts to positively impact the social determinants of health and improve preventive aspects of health earlier in the life course by creating awareness and accountability for impacts on health and actively designing an environment that supports health equity. This panel increased awareness, encouraged accountability, and engaged action – each told about their work to achieve health equity. After the panel discussion, conference participants shared with each other what public and private policies could be initiated at the local, state, and national levels to equalize opportunities to be healthy and what one first step could be taken.

Panelists discussed the need to reframe thinking around what creates health – current thinking is still stuck in the biomedical paradigm of behaviors, genes, and pharmaceuticals. Our current poor state of health is not inevitable – it has changed before and it can change again. The healthiest nations also have the highest levels of equity and democratic participation – even if they have few resources. These two things have great implications for how public health thinks about engaging with communities.

Equity encompasses opportunities for better education, improved housing, healthier foods, safe neighborhoods, social connectedness, improved land use, better transportation, jobs, and more. Poor health outcomes are merely a barometer of where we have failed. The conversation needs to change from what we are dying of to how we can live better. We can be a nation of good health by design or poor health by design.
Health in All Policies engages leaders to improve preventive aspects of health earlier in the life course by creating awareness and accountability for impacts on health. It links the health sector with businesses, faith-based organizations, non-profits, and others to actively design a supportive environment. This panel inspired and engaged conference attendees – each told about their work as leaders engaging Americans for a healthier nation.

The media is becoming democratized, and the new media (Facebook, Myspace) is seen as an authentic way to engage Americans around a healthier nation in a new way. This is, perhaps, a particularly effective technique with the younger generation. The older generation – those who are less technologically savvy – are viewed by the younger generation as “cave dwellers.” Cave dwellers may need to be engaged in a genuine way through more traditional means such as story telling – and this will be, perhaps, most effective at the community level – where Americans appear ready to be engaged.
Health in All Policies engages leaders to improve preventive aspects of health earlier in the life course by creating awareness and accountability for impacts on health. It links the health sector with businesses, faith-based organizations, non-profits, and others to actively design a supportive environment. This panel inspired and engaged conference attendees – each panelist told about their work as leaders engaging other leaders to improve health. After the panel discussion, conference participants were challenged to think about how they would use their own leadership capacities to engage partners and begin the process of shaping policy for a healthier nation.

Corporate culture is shifting to a mindset that improving workforce health is a competitive asset that can improve the bottom line – it needs investment, care, and nurturing if the United States is going to compete in a global economy. Leaders are challenged to take ownership for improving health within their own organizations, but they also must take leadership in building dynamic networks in order to effect transformational change. These networks are built on partnerships that can, at the same time, improve health and lower costs to the organization.

In creating dynamic leadership networks that are focused on health improvement, the right leaders must be targeted by taking advantage of every situation and being present in the right situation. For example, the health improvement message can be amplified by engaging leadership within the consumer products world and working with those leaders to incorporate positive health messages in existing consumer outreach campaigns. In the end, the goal must be to get consumers to take responsibility for their own health by building a community of support around them.
Teams

“Trust in policy as a solution.”
The ideas of a truly diverse group of people helped create this playbook. Attendees to the Leaders to Leaders Conference encompassed an impressive range of organizations from large corporations and industry groups to charitable foundations, government agencies and professional associations.

Business and industry participants included IBM, Pitney Bowes, Bright House, Dow Chemical Company, Microsoft Global Corp., Omnimedia, Edelman Public Relations, the National Business Coalition on Health, Google and many more.

Government and public health organizations attendees included the CDC, the Association of State and Territorial Health Officials (ASTHO), the National Association of County and City Health Officials (NACCHO), the National Governors Association, LA County Public Health, the Tulsa Health Department, the Indiana State Department of Health and many more.

Academic, non-profit and charitable organization participants included The Kellogg Foundation, the University of Virginia, AARP, the Partnership for Prevention, Building Men and Women.org, The Praxis Project, the eHealth Initiative and many more.
“Be smart enough to recognize that generating more ideas means that not all of them will be viable solutions but that somewhere in the process the great ideas will emerge.”
Goals of the game

- U.S. is No. 1 by all health indicators
- Health is seen as a national priority
- Improved access; health care for all
- No more medically underserved areas
- Focus shifts from health care to wellness; paradigm shift to value health
- Health legislation changes
- Innovative programs that can be easily replicated
- An integrated and seamless health system
- Health in all sectors

Work as a team

- Transcend competing interests
- Find a way to get people to agree to travel the path together
- Align interests among all stakeholders/sectors (traditional health organizations, government, business, consumer organizations, etc.)
- Emphasize collaboration rather than competition
- Use a common language – what is policy?
- Eliminate structural obstacles to collaboration between agencies
- Provide benefits to collaborate

Play fair

- Reduce racism and other inequalities
- Improve cultural competence of health care providers
- Establish primary medical homes for diverse populations
- Reduce health disparities

Listen for the signals

- Listen to community leaders about what they want and need

Recruit others to the team

- Be inclusive of all
- Get all the players we need
- Engage and work with the other sectors
- Engage younger generation in a way that gets through to them
WHO?
Individual Plays
Individual Plays

Personal / family health

- Take opportunities to maintain my own health and well-being
- Lead by example in community and work - concentrate on positive healthy choices
- Continue to learn about and practice leadership
- Set short-term personal exercise goals - yoga/tai chi
- Heal myself and model healthiness
- Work less and do more at home
- Walk more / sit less / drink more water
- Recommit to exercising
- Communicate with my extended family on aspects of health that they can implement
- Remain positive while working through issues with disparities and hard-to-resolve problems
- Serve as a leader by action and a mentor by choice
- Speak from the heart; be genuine. Apply the knowledge
- Learn that passion is not enough but continue to share it
- Preach health: evangelize health as a social value
- Make people uncomfortable by facing realities
- Take opportunities to maintain health and well-being

Work place health

- Commit to making my organization healthier
- Launch a health initiative within my organization
- Maintain work / life balance and make time for family and community; serve as the role model and sweep out the office
- Encourage my staff to take time out of the workday to go exercise
- Lead by example in my office to take time out of the day to exercise
- Start my program at work focusing on “What are we already doing to improve health and wellness?” and “What policies do we need to have toward improving wellness?”
- Elicit at least one finite action from my own organization aimed at health in all policies
- Elicit at least one finite action by corporate friends of our organization
- Continue green / health policy development at my worksite
Community health

- Reach out to church congregation to be advocates in the policy sector by attending council meetings, talking to neighbors
- Request sidewalks in my neighborhood
- Convince my brother’s best friend to stop smoking

Share findings

- Share with family, neighbors, and friends

View/share/promote Unnatural Causes

- Share “Unnatural Causes” with family and community
Passing Plays: Engaging Partners

“Transformation without action doesn’t work.”
Passing Plays

Multiple stakeholders

• For real sustainable change to occur
• Recommend another meeting like this but incorporate more stakeholders that are missing from this conference

Coalitions / task forces

• Work on health and social policies and programs
  – Healthy People 2020: The Road Ahead
• Next administration: establish a cabinet-level task force across all agencies
• Create an interagency coalition; talk to non public health people to build bridges
• Fund local, regional coalitions for management and structural support

Communities

• Listen to community leaders about what they want and need
• Empower people in communities to take action for change
• Pursue policies that can promote community connectedness to impact health disparities
• Promote a participatory model of community involvement
• Recruit retired community members who’d like to help out in the community
• Mobilize mentors to partner with communities in need; include this in grant requirements
• Empower local leaders in disenfranchised communities
• Listen to people in communities
• Empower people in communities to take action for change
• Promote “block nursing” for neighborhoods or “wellness champions” in communities; provide training, resources, and approaches to promote wellness in the community
  – Block Nurse Program
  – Healthy Native Community Partnership Supports Regional Community Wellness Champion Forums
• Train community members to do diagnostic procedures for basic health screening and services
• Public health should build partnerships (not preach) with business, states and communities to build community health initiatives
• Strategically define and pursue partnerships within the organization and in communities
Faith-based communities

- Identify opportunities to work with faith-based activities
- Organize people and give them a voice, a way to put pressure on their elected officials - one vehicle is churches
- Have faith-based communities participate in health and wellness
- Give grants to interfaith and care-giving communities
- Connect my congregation with the community
- Work with church community to promote social justice and address some of the social determinants of health
- Reach out to faith communities / families to address personal health improvement plans; attend council meetings, talk to neighbors

Health professionals

- Support collaboration between physicians, business, schools, and local governments
- Include traditional medical people and all other modalities in the solution (chiropractors, physical therapists, etc.)
- Suggest that health professionals be invited to the table to make other policy
- Utilize the different training / skills set of public health professionals
- Get non-traditional health care people involved
- Work with other medical and educational organizations
- Help doctors to help patients (with advocacy, education, medical liability reform, etc.)
- Suggest Health Fellows for policy committees

Business / economic development groups

- Embrace health promotion
- Link public health and economic development groups at state and local level
- Offer a compelling economic case that will appeal to people of various political orientations for why government should be involved in these efforts
- Have a dialogue with private employers about resources and disparity; get them to invest in the communities and raise their awareness of things that businesses can do
- Have local businesses sponsor things like walking clubs
- Encourage businesses to continue to play a role in communities
- Focus on economic and health development, involve big employers in the community
- Use demographic analysis to convince the business community that they should be concerned about public health because their future workforce will come from these communities
- Encourage employers to invest in the communities where their employees live
- Help business understand the return on tax investments in community infrastructure
- Make the compelling case for businesses to understand community health, not workforce health
• Encourage businesses to be partners by offering tax credits and other incentives
• Public health should build partnerships (not preach) with business, states and communities to build community health initiatives
• Help labor understand the health implications of wages, working conditions, job strain, etc.
• Work with other corporations to influence health and wellness reform
• Talk to local chamber of commerce regarding engagement with Partnership for Prevention and add leadership development to their strategic planning agenda

**Education**

• Encourage educators to interact with health professionals to reform standards
• Train teachers in health and/or provide health experts in the school system
• Encourage participation from the Department of Education
• Create a forum with passion and interest in health equity issues; include transportation, housing, and education experts to work with health professionals toward real change
• Work with other medical and educational organizations

**Housing**

• Talk to property managers in highest risk multi-family units, protect the landlord’s investment (Tualatin Valley)
  – [Making Sure Renters’ Rights Don’t Go Wrong](#)
• Address housing policies as part of health policies
• Create a forum with passion and interest in health equity issues; include transportation, housing, and education experts to work with health professionals toward real change

**Government**

• Collect and analyze data by the local government and encourage the local communities to use this data
• Public health should build partnerships (not preach) with business, states and communities to build community health initiatives
• Extend common messaging with local government agencies
• Partner actively with NGA (National Governors Association), ASTHO (Association of State and Territorial Health Officials), NACCHO (National Association of County and City Health Officials), CDC (Centers for Disease Control and Prevention), and others to obtain good policy examples and develop good state policy resources for state legislators
Other

- Involve Agriculture in this effort to shape policy for a healthier nation
  - A Fair Farm Bill for Public Health
- Empower someone other than local boards to make K-12 policy decisions
- Encourage people with the greatest need to join in the community, state, national level discussion and identify what to work on
- Advocate for a center to support people who work in underserved communities to help with issues of burnout
  - Association of Clinicians for the Underserved
- Involve the Senate Health Committee to enhance understanding of the important political issues and priorities involved
- Reframe Healthiest Nation language to include safety
  - More inclusive of preparedness and criminal justice
  - Test messaging with consumer product safety commission, firefighters, etc.
- Find out more about what King County has done with zip code predictability and show it to statisticians throughout the nation
- Expand public health leadership program to include public and private sector partners
- Meet with state and local agency directors to develop a healthier state program
- Bring department of education, transportation, etc. to next meeting
- Collaborate and build partnerships within CDC and other federal agencies to understand Indian Health issues and the need to engage Indian Country in this process
- Involve the adult literacy community
- Build on the work of local rotary clubs
- Join, promote and support Alliance for the Healthiest Nation
- Allow kids, parents and caregivers to learn together; integrate safety education
  - Even Start
- Work with recreational/athletic teams for parenting
- Use sports figures to promote health
- Professional organizations need to take a position and say that health is more than biomedical
- Advocacy organizations need to activate people at the neighborhood level; harness the “rage;” get into the political process
- Bring in family foundations to address issues at hand (Gates Foundation)
**Principles of engaging partners**

- Get everyone to the table
- Bring in new partners
- Forge cross-sector relationships
- Provide collaboration training
- Add incentives around collaboration instead of working at cross-purposes
- Find partnership and resource opportunities that concentrate on disparities
- Make it easier for various groups to apply for funding and grants so that those demographic areas and associations that do not have the resources for filling out complex grant proposals can still get support
- Coordinate and integrate the services already available
- Support local (grassroots) initiatives; coordinate federal and state with local
- Use messaging to educate people that we’re all in this boat together
- Develop a shared understanding of what we want to accomplish, then CDC can provide the science about how to get there
- Disseminate lessons learned and promising practices to community
- Have a practice-level conference for people who actually do the work
- Create storyboard about how partnerships work, giving examples of how the smallest health departments are doing the best job with creating partnerships
- Educate our own constituents — need the resources and common language to ensure understanding and buy-in
- Foster public / private partnerships to build community health initiatives
- Change reimbursement policies of Centers for Medicare and Medicaid Services to allow others to be a part of the team
- Acknowledge shared responsibility and shared problems - white people look at people of color as perpetrators of violence, problems
- Improve communications with non-traditional partners
- Persuade members to use data to relate to social determinants of health
- Re-engage community organizations with a health message
- Strategize about grassroots organizing
- Work with other partners and CDC to promote health promotion in health
- Build novel partnerships with health
- Elicit at least one finite action by corporate friends of our organization
- Get all sides of the table involved in contributing to our healthy workforce
- Work with non-health agencies to develop a health equity lens to evaluate their work
- Explore ways to get involved and promote “health” on a local level (with local leaders)
WHAT?
Running Plays: Promising Practices

“Real change requires real change.”
Food Plays

• Promote healthy vending and food policies in park and recreation centers
  – San Diego Department of Parks and Recreation Healthy Vending Machine Policy
• Stock school vending machines with healthy snacks
• Remove sodas from schools
  – Bay Area Nutritionists Take Aim at Sugar-Filled Sodas
  – California Soda Free Summer Campaign
• Improve food safety; regulate chemicals in consumer products
• Require understandable food labeling
• Improve menu labeling
• Provide tax subsidies/incentives to bring fresh/organic food into inner city areas
  – Mayor Bloomberg Signs Legislation Establishing 1,000 New “Green Cart” Permits
• Create policies related to produce costs for school cafeterias, hospitals, etc.
  – Food 2002 Policy Recommendations Towards Greater Food Security
  – Moving Food Policy Forward in Surrey and White Rock
• Provide grants for community gardening
• Promote food assistance programs that allocate percentage for healthy food items
• Distribute food stamps more often (people buy more processed items at the end of the month to stretch out their food budget)
• Ban trans fats - NYC has had a national impact (viral spread)
  – New York City Passes Trans Fat Ban
  – NYC Ban on Trans Fats Spreads to States
  – Trans Fat Bans
• Improve consumer food and beverage marketing - offer 2:1 purchasing for healthy products
• Involve Agriculture in this effort to shape policy for a healthier nation
  – A Fair Farm Bill for Public Health
• Take corn syrup out of everything
• Outlaw fast foods
• Provide tax credits for healthy eating or heavier taxation of unhealthy eating
  – The Impact of Economic Instruments That Promote Healthy Eating, Encourage Physical Activity and Combat Obesity: Literature Review
Fitness Plays

Personal plays

• Lead by example by taking time out of the day to exercise
• Encourage my staff to take time out of the workday to go exercise
• Recommit to exercising
• Set short-term exercise goals – yoga/tai chi
• Request sidewalks in my neighborhood
• Walk more /sit less /drink more water
• Strongly encourage people to lead active lives

Encourage fitness with the built environment

• Encourage quality growth and development, including health benefits in policies not intentionally planned to affect health
  – Introduction to Envision Utah
• Mobilize communities to remove barriers and make it easier to incorporate change
  – A Vision For a Healthier America: What the States Can Do
• Shut down highways one day per month for biking, walking (Bogota, Columbia)
  – The Wheel World
• Legislate smart growth / healthy community design
  – Require healthy community design - walkable communities
  – Urban Management, Sustainable Development and Smart Growth - Gateway to International Best Practices and Innovations
• Create zoning policies to encourage sidewalks
• Plow bike routes during winter
• Provide money through tax reform to provide opportunities for people to exercise

Community involvement in fitness

• Explore funding for coalitions to work on community health and social policies
  – CDC’s Steps Program
  – Common Health Action
  – W.K. Kellogg Foundation health grants
  – Robert Wood Johnson Foundation Program Areas
• Push for usable recreation space in EVERY community
**Work place involvement in fitness**

- Have local business participate and sponsor activities such as walking clubs
- Have work place policies around smoking, excercise

**School involvement in fitness**

- Promote and enable supervised/safe walking to schools. Look for funding
- Work with recreational/athletic teams for parenting
- Restore physical education in schools K-12 through school funding reform
- Create facilities for schools to be used in PE
- Equalize funding for public education
- Use sports programs in different ways to teach children to respect contributions of others

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**Tobacco Plays**

- Support tobacco cessation movement
- Push for tax incentives for health benefits (e.g. raising taxes on cigarettes)
  - [Cigarette Tax Increase Could Have Large Public Health Impact](#)
- Create smoking cessation/tobacco-free initiatives and BAC (.08) legislation
  - [Tobacco Cessation Leadership Network](#)
  - [Smoking Cessation Leadership Center](#)
- Advocate statewide smoking bans
  - [Public Place Smoking Bans in States, 2008](#)
  - [California Lessons in Clean Indoor Air](#)
- Promote smoke-free bars and clubs, similar to U.K.
  - Smoking Ban in All Pubs and Clubs
- Create no-smoking public areas (already in some states)
- Continue anti-tobacco campaigns
- Raise taxes on cigarettes and alcohol
- Give health tax credits for prevention
  - businesses and individuals
  - full coverage for tobacco cessation and weight loss programs
- Design work place policies around working, smoking, exercise
  - [Seeking Savings, Employers Help Smokers Quit](#)
Mental Health Plays

- Integrate physical/mental health
- Link health with stress/mental health
- Develop new tools for mental health
- Determine how much mental health affects physical health
- Improve self esteem
- Advocate for health/fitness in the work place
  - Whole Work Place Health. Psychologists Are Taking a More Comprehensive Approach to Wellness at Work

Technology Plays

Use technology to get health information to consumers in real time

- Agencies (VA, NIH, CDC, IHS) are beginning to put health information on websites through podcasts, public health grand rounds, etc.
  - Podcasting from Webcontent.gov
  - Are You Podcasting? Here’s Why You Should
- Charge subscription fee $50 per year for Google health
- Improve search engines to improve access to health information
- Use Smart House technology to reach people with disabilities
  - University of Florida ‘Smart Home’ Demonstrates Concept of Automated Elderly Help and Care
- Make a virtual home for consumers to identify safety issues
  - Take a Virtual Home Safety Tour
  - Work on similar ideas for worksites and educational tools

Use technology to track consumer health and health care

- Personal Health Records
  - Ability to share health information selectively
    - Google, Microsoft Launch Personal Health Record Systems
    - Technology Helps Patients Take Charge of Health Records
- Use mobile/cell technology to track individual health data
  - Google Launches Online Personal Health Records Project
• Track health data in real time
  – Hemoglobin A1C, blood pressure, weight, pedometer
  – New Wireless Devices Could Help Consumers Keep Track of their Vital Signs
  – Storstroms ErhvervsCenter Uses the Power of Pervasive Computing to Prevent Hypertension
  – SenseWear® WMS Components
  – Nutricate

• Use cell technology to reach consumers about their health care
  – Use cell phones for heart alerts like airport alerts
  – Send reminder to refill prescriptions
  – Remind patients of medical appointments
  – Text patients when record is updated
    • Text Messages Prove a Life-Saver
    • Cell Phone as Medical Tool?
  – Texting4Health
  – A Whole New Way to a Whole New You. The Future of Weight Loss is On Your Phone
  – Mobile Technologies - eHealth Marketing

• Build public access kiosks that allow patients to take blood pressure, etc.
• Establish health coaches to help consumers through technology
  – Virgin HealthMiles

**Use technology to improve consumer choice**

• Find the best doctor, identify neighborhood pollutants, etc.
  – Health Care Ratings Directory
  – UCompareHealth Care
  – Search Your Community

• Encourage data transparency on hospital infections, error rates, etc.
  – AboutHealthTransparency.Org
  – New York City Puts Hospital Error Data Online

• Use technology for foreign language translation –
  – CAS Source Index (CASSI) on CD

**Increase social networking about consumer health**

• Encourage peer to peer networking to meet others working on similar projects
  – My Space/Facebook
    • Social Networks - eHealth Marketing
    • “Facebook for health”
  – Find out about other patients like me, share personal stories
• Patients Like Me
• TuDiabetes.Com
• Brave Kids
• DLife
• Daily Strength
  – Cell phones to meet with walking group
  • Cell Phones, Coaching May Jump Start Exercise Routine
  – Covert marketing of healthy behaviors - begin a health movement
  • It’s an Ad, Ad, Ad World
• Improve relationship between patient and provider
  – Use e-mail to answer questions
  – The Doctor Is Online
  – AMA Passes Guidelines for Doctor/Patient E-Mail
• Open new connections between patient and caregiver/friends and family
  – Use family members, community groups and churches to increase patient access to technology
  • Caring Bridge
  – Engage the older generation in technology through local area agencies on aging
  – Revolution Health is an example of wellness resources for the individual and family
  • Revolution Health

Focus on children as early adopters
• Reach kids through school, get Department of Education to the table
• Teach through Boys and Girls Clubs
  – Partnering With a Tribal Boys and Girls Club to Serve Youth
• Video, Youtube, podcasting and social networks are better technology to reach kids
• Gaming (with health messages)
  – Health Games Research
  – Games for Health
    • Computer game about chemo treatments – viral spread
    • Cigna Offers Cancer-Fighting Video Game to Patients
  – Wii Fit Rides the Virtual Exercise Wave
  – Re-Mission™ Power Lies Within
  – CDC Chief Predicts Change
• Incorporate health messages/info into "Webkinz” that kids use on a daily basis
  – Webkinz
• Give children a flash drive to save their health records
Flash Drives for Kids
• Identify thought leaders of this generation

Use technology for health care providers
• Social networking among professionals
  – Social Networking Goes Professional
  – 50 Social Media and Networking Sites for the Medically Minded
  – Creation of virtual teams to treat and manage patients
  – Increase training/educational opportunities, disseminate science promising practices
    • Train the trainer
    • Association websites
    • Use in medical schools
• Increase information to make better informed decisions
  – Dialogue with Agency for Health Care Research and Quality about how to organize workflow
• Telemedicine for home care
  – Federal rather than state-level licensure for telemedicine
  – Center for Telehealth and eHealth Law

Use technology for health care systems
• Systems integration, central repository, allow hospitals to talk to each other
  – Veterinarians do it better, my dog has more integrated care
  – Software as a subscription service could speed along health care records as being shareable.
  – Use programs like HealthVault to combine different IT systems from one hospital
  – eHealth Initiative Blueprint: Building Consensus for Common Action
    • The Vault is Open
• Electronic Medical Records (EMR)
  – American College of Physicians is working on standards for Electronic Health Records (EHRs) with the Certification Commission for Health Care Information Technology (CCHIT), Health Care Information and Management Systems Society (HIMSS), eHealth Initiative (EHI), and Primary Care Partial Capitation Providers (PCPCP)
    • American College of Physicians Electronic Health Records
  – Focus on machine-readable data versus text
  – Veteran’s Administration (VA) is a model for portability of health information
    • VA Receives 2006 Innovations in Government Award
    • VA’s Model of Success

Use technology for governmental public health
• Standardize health data – put all measurement systems together
– **Community Health Report Cards**

• Improve surveillance data
  – Track environmental data on individuals (living near a highway, farm, etc.)
    • **The Benefits of Health Information Exchange and Electronic Health Records to Environmental Public Health**
  – Learn from the Department of Defense EHR system (used since 1990s, could connect anywhere in the world, studied why soldiers die on the battlefields)
  – Use GIS maps to identify houses with lead paint and link to advice
  – Get environmental and public health people together
    • **Community Mapping**
  – Establish a viable national surveillance system to track community health problems
    • **Community Issues Management**
  – Capture health data at the door-to-door level with hand-held devices
  – **Integrated Surveillance Seminar Series**
  – **GeoDa Center About Us**
  – **GeoDa Tutorials**
    • **HandHeldsforHealth**

• Identify best practices around technology

• Increase data exchange/sharing
  – Create an interagency task force/connector organization like the Alliance for the Healthiest Nation; include Public Health, Environmental Protection Agency, Department of Transportation, Department of the Treasury, Department of Agriculture, etc.
  – National Immunization System accessible by all health care providers

• Government leadership
  – Get technology ideas from other countries
  – Include funding for IT, just like evaluation, in grant awards
  – Create a common vision for health technology
  – Include technology goals in Healthy People 2010
    • **Healthy People 2010 23 Public Health Infrastructure**
    • **Improving the Accessibility of Government, Education and Healthcare**

**Use technology in the private sector to improve health**

• Expand Dossia (for Personal Health Records, etc.) to reach smaller companies
  – **Dossia**

• Listen and learn from other companies

• Use technology to do health risk assessments in the work place
  – **Transitioning From a Pen-and-Paper Health Risk Appraisal to an Online Health Risk Appraisal at a Petroleum Company**
• Use technology to link work place health data/clinics with private providers
• Encourage employers without health insurance to keep electronic records
• Self-insured in NC adopted a program that rewarded healthy behaviors
  – The Asheville Project Now: Employers Nationwide Adopt Cost-saving Health Care Model
• Standardize health insurance forms
  – Health Information Technology Experts Say National Standardized Electronic Health Record System Could Save U.S. Millions Of Dollars, Prevent Errors
• Link medical data with personal health data to make real time decisions
  – Share data between public and private sectors (Dow Chemical)

**Overall technology goals**

• Standardize systems
• Build value for all users - financial incentives, save time, money, offer tax credits
  – Hospital Rewards Program
• Market technology in a way that tells people “what’s in it for them”
• Establish leadership and accountability for ensuring use of technology
• Use incremental, scalable approach to buying HIT systems
• Use TVs to access internet
• Public Health should experiment more, innovate
• Utilize different opportunities to measure return on investment
• Increase uptake of new technologies
• Develop ways to generate revenue around health
• Address technology needs of poor and rural populations
• Increase funding
• Address privacy issues of moving/sharing data; mental health data
• Help the consumer locate credible sources of information
• Reconcile increased use of technology with growing health disparities
• Establish the political will to make these changes
Transportation Plays

Learn from past successes

• Success of seatbelt/airbag regulations
  – [Click It or Ticket Mobilization](#)

Promote and enable safe and walkable communities

• Try to get more sidewalks, crosswalks and trails in neighborhoods
• Promote supervised/safe walking to schools
• Create zoning policies that encourage sidewalks
• Use transportation money to improve sidewalks
  – [Transit for Livable Communities](#)
• Install timers on street lights for pedestrians – right information at the right time
  – [New Signals Give Pedestrians the Time to Make Wise Decisions](#)

Improve public transportation and biking opportunities

• Provide subsidies for public transportation
• Plow bike routes during winter
• Provide ways for cyclists to cycle and ride bus (Chicago)
  – [Executive Summary of the Bike 2015 Plan for the City of Chicago](#)
  – [Chicagoland Bicycle Federation Campaigns](#)

Make changes to the built environment

• Legislate smart growth/healthy community design
  – Require healthy community design - walkable communities
  – [Urban Management, Sustainable Development and Smart Growth - Gateway to International Best Practices and Innovations](#)
• Emphasize better environmental policy (renewable energy, walkable communities, building standards, zoning policies, public transportation, etc.)

Work together

• Integrate services and perspectives (health implications of transportation policy)
• Communicate across governmental issues (transportation, health, education) and across coalitions (non-governmental organizations, for-profits)
• Create a forum with passion and interest in health equity issues; include transportation, housing, and education experts to work with health professionals toward real change
• Bring department of education, transportation, etc. to next conference
Environment Plays

Environmental protection

- Create a green campaign for health
  - [Lead and Lead Paint](#)
  - [EPA Takes Final Step in Phaseout of Leaded Gasoline](#)
  - [Give a Hoot About How to Stop Global Warming](#)
- Push for indoor and outdoor clean air policies
  - Smoke free ordinances
- Integrate solutions into climate change legislation

Land use / urban planning

- Stress green space preservation in urban planning
- Advocate urban land use reclamation
- Determine tangible and compelling health benefits that come from land use work
- Encourage changes to the built environment
- Legislate smart growth / healthy community design
  - Require healthy community design - walkable communities
  - [Urban Management, Sustainable Development and Smart Growth - Gateway to International Best Practices and Innovations](#)
- Emphasize better environmental policy (renewable energy, walkable communities, building standards, zoning policies, public transportation, etc.)
- Recommend policies that align housing and the environment with health care
- Consider the concepts of geography / environment in public health
- Require/ mandate Health Impact Assessments prior to project development
- Create zoning policies to encourage sidewalks
- Plow bike routes during winter

Overall change

- Infuse health equity, social determinants of health and environmental health in curricula
- Provide incentives for going green at home, at school, and in the community
- Capitalize on this critical chance for people to change their lifestyle; energy crisis + “economic depression” + “food crisis” = opportunity for change
Equity Plays

Access

- Include dental services through Temporary Assistance for Needy Families
- Improve access to provide health care for all
- Eliminate medically underserved areas
- Advocate universal health care for all
- Reduce health care costs
- Work toward universal health care

Disparities

- Reduce racism and other inequalities
- Eliminate health disparities
- Include all ethnic institutions/communities in grant funding announcement opportunities
- Address the health disparities of elderly populations and rural communities
- Engage people at the early part of their medical careers to recognize health disparities, improve the environment of care, recruit from disadvantaged communities, and promote collaborations with civic organizations that address health disparities (AMA strategic plan)

Food

- Provide tax subsidies/incentives to bring fresh/organic food into inner city areas
  - Mayor Bloomberg Signs Legislation Establishing 1,000 New “Green Cart” Permits
- Promote food assistance programs that allocate percentage for healthy food items
- Distribute food stamps more often (people buy more processed items at the end of the month to stretch out their food budget)
- Provide grants for community gardening
- Improve consumer food and beverage marketing - offer 2:1 purchasing for healthy products
- Involve Agriculture in this effort to shape policy for a healthier nation
  - A Fair Farm Bill for Public Health

Transportation

- Encourage subsidies for public transportation

Fitness

- Push for usable recreation space in EVERY community

Environment

- Focus change efforts on zip codes that are poorest, most polluted, in the worst health (already doing this in U.K.)
– Geo-map – map community health assessment by zip codes
– Work toward more transparency about zip code data to drive policy and funding
– Re-evaluate 0-5 educational system by zip code
• Implement change through zoning that is more oriented toward health and neighborhood equity
• Promote funding for safe and walkable communities
• Ensure physical security when engaging in community development

Business / economic development
• Create economic development in communities - jobs are critical to health
  – Link public health and economic development groups at state and local level
  – Involve big employers in the community
  – Provide incentives for development in economically challenged communities
• Equalize time off with pay – typically the higher/whiter levels get more
• Prevent chronic diseases by reaching low-income workers in small work place settings
• Promote corporate responsibility
  – Encourage employers to invest in the communities where their employees live
  – Support boards, leaders, and governments that hold corporations accountable for maintaining the health of their populations
• Take a compelling first step to convince business community why they should care
  – Use demographic analysis to explain their future workforce will come from these communities
  – Have a dialogue with private employers about resources and disparity
  – Help them understand the return on tax investments in community infrastructure
  – Emphasize community health, not workforce health
  – Appeal to people of various political orientations when explaining why government should be involved in these efforts
  – Raise their awareness of things that businesses can do

Living wage
• Create a living wage standard at the local, state, and national levels, rather than tax policy or minimum wage
• Provide data - has living wage been successful in communities that have enacted it?
• Educate about how living wage affects health
• Emphasize pay equity for women — women head more households than men, and yet that is not considered in living wage issues
Equitable resources

- Get targeted resources to communities that need them most
- Ensure that we have equality within neighborhood facilities
- Mandate assessment and placement of resources in all communities

Education

- Start equality through education at the local level
- Provide critical safe environment and nutrition for 0-2 pre-school
- Focus on childcare subsidies
  - Supporting Child Care Subsidy Access and Retention: Strategies from Seven Midwestern States
  - Turning to Childcare: Subsidy Funding
- Provide quality employer- and community-based daycare for all young children
- Advocate U.S. support of whole-child policies, as modeled by European countries
- Advocate for accessible/available pre-school
- Identify most at-risk neighborhoods (as they do in France) - start their education a year earlier and assign most experienced teachers to help
  - Early Childhood Education: Lessons from the States and Abroad: 2005
  - How to Prime Kids for School
  - Investing in Children: An Early Learning Strategy for Washington State
- Focus on early education (0-5 years)
  - Preschool for All: A Priority for American Business Leaders
  - Cost-Effective Investments in Children
  - Laying the Foundation
  - Governors Push Access to Preschool
- Bloomberg is looking at “Conditional Cash Transfer” – early education, early parenting
  - Mayor Bloomberg and Major Philanthropic Foundations Unveil Size, Scope, and Schedule of Opportunity NYC, the Nation’s First-Ever Conditional Cash Transfer Program
  - Mayor Bloomberg, Delegation Visit Mexico’s Oportunidades Program
- Equalize funding for public education
- Delink education funding from property taxes
- Examine impact of policies supporting magnet schools – drains talent from some schools/communities
- Bring arts and PE back into schools so children have access to more activities
- Advocate PE facilities for schools
- Require each curriculum to discuss race, gender, and class
  - Education for Diversity: Investing in Systemic Change through Curriculum, Textbooks, and Teachers
• Incorporate social and emotional health in addition to scholastic achievement in schools
• Provide access to electronic education for all
• Push for federal funding for nurses in every school
• Create standards to guide how many nurses per number of students
• Encourage educators to interact with health professionals to reform standards
• Promote after-school programs
  – After School Alliance
  – Making Smart Investments in Afterschool: A Policy Primer for State and Local Leaders
• Use sports programs in different ways to teach children to respect contributions of others
• Increase high school graduation rates
• Reduce costs of higher education
• Advocate for universal college education

Pregnancy / parenting
• Reduce teen pregnancies
• Reduce infant mortality rates
• Provide home nurses for first-time mothers throughout the pregnancy – results in significant difference in school outcomes and reduction in juvenile delinquency
  – First-Time Mothers Benefit From Home Visitation Program
  – Minding the Baby: Program Overview and Summary of Initial Findings
• Incorporate parenting programs into policy
  – Parenting Policy
• Allow kids, parents and caregivers to learn together; integrate safety education
  – Even Start
• Work with recreational/athletic teams for parenting
• Promote policies that support parental leave or community service

Address specific health issues
• Reduce gun violence
• Discuss interpersonal violence and how communities can address it
• Incorporate substance abuse into the larger health agenda; environmental strategies like billboard control, places for young to congregate, different strategies for public housing
• Combine safety and health; reduce unintentional, accidental injury by building safer homes, helping people learn to be safer, and managing land/water use
• Copy the neighborhood watch system into a community child safety program
• Focus on prevention, treatment, and recovery for mental health
• Achieve mental health parity through equal access to mental health/ substance abuse prevention
• Use a literacy campaign to help people learn important information
Housing

- Renters vs. owners – talk to property managers in highest risk multi-family units, protect the landlord’s investment (Tualatin Valley)
  - [Making Sure Renters’ Rights Don’t Go Wrong](#)
- Address housing policies as part of health policies

Work together

- Use messaging to educate people that we’re all in this boat together
- Find partnership opportunities and resource opportunities that concentrate on disparities
- Create a forum with passion and interest in health equity issues; include transportation, housing, and education experts to work with health professionals toward real change
- Accept incremental progress as one strategy in addressing equity issues
- Get everyone to the table
  - Encourage anti-poverty and infrastructure experts to have a place at the table
  - Involve the Senate Health Committee to enhance understanding of the important political issues and priorities involved
  - Encourage people with the greatest need to join in the community, state, national level discussion and identify what to work on
  - Involve the adult literacy community
- Collaborate and build partnerships within CDC and other federal agencies to understand Indian Health issues and the need to engage Indian Country in this process
- Mobilize mentors to partner with communities in need; include this in grant requirements
- Work with non-health agencies to develop a health equity lens to evaluate their work
- Talk about ‘systems’ perspective of community wellness; beyond health, bridge across silos
  - [International Healthy Cities Foundation](#)

Funding

- Create a new New Deal to address the infrastructure issues related to health disparities
- Change the way federal agencies fund things - stop contributing to fragmentation
  - Start addressing contributory factors
  - Measure outcomes – long-term results can justify sustainable funding
- Simplify the funding and grant process so that those demographic areas and associations that do not have the resources for filling out complex grant proposals can still get support
- Bring in family foundations to address issues at hand (Gates Foundation)
- Promote tax incentives that support a healthier environment/work place (if you want to build a stadium, you must build a trail in a low-income community)
- Fund local, regional coalitions for management and structural support
- Give grants to interfaith and care-giving communities
• Support and fund policies that are already in existence (Head Start)
• Continue to support State Children’s Health Insurance Program (SCHIP)

Community

• Promote a participatory model of community involvement
• Empower people in communities to take action for change
• Listen to community leaders about what they want and need
• Empower local leaders in disenfranchised communities
• Focus on opportunities (asset map) when creating a community-based wellness plan
  – Asset-Based Community Development Institute
• Pursue policies that can promote community connectedness to impact health disparities
• Recruit retired community members to help out with various tasks in the community
• Use existing programs as a model for getting into neighborhoods and communities
  – AmeriCorps Vista
  – Teach for America
• Promote “block nursing” for neighborhoods or “wellness champions” in communities; provide training, resources, and approaches to promote wellness in the community
  – Block Nurse Program
  – Healthy Native Community Partnership Supports Regional Community Wellness Champion Forums
• Train community members to do diagnostic procedures for basic health screening and services
• Create a media/messaging opportunity to reach rural communities
• Work with faith-based communities to promote social justice and address some of the social determinants of health

Assessment

• Review current policies and evaluate their adverse effects on communities
• Develop evidence-based database around social impact; make these things better known
• Collect and analyze data by the local government and encourage the local communities to use this data
• Link information on communities and health to define the problem
• Evaluate the efficacy of enterprise zones
• Use a baseline of a healthy community: infant mortality, living wage, school systems
  – Those that are below, give them money, those above get applause
  – One Maryland Tax Credit
• Persuade members to use data to relate to social determinants of health
Advocacy and support

- Create support for new policies by explaining the costs of inequality and poor health
  - Overcome aversions to taxes by explaining benefits of new health initiatives
  - Expand thinking from personal responsibility to community responsibility
- Organize people and give them a voice, a way to put pressure on their elected officials
  - One vehicle is churches
  - Professional organizations need to take a position and say that health is more than biomedical
  - Advocacy organizations need to activate people at the neighborhood level; harness the “rage”; get into the political process
- Advocate for a center to support people who work in underserved communities to help with issues of burnout
  - Association of Clinicians for the Underserved

Unnatural Causes

- Watch Unnatural Causes
  - Unnatural Causes ... Is Inequality Making Us Sick?
- Coordinate a screening and discussion of Unnatural Causes
  - In the worksite
  - With faith community
  - With family
  - In the neighborhood / community
  - In the classroom / incorporate into curriculum
  - With constituents / grantees
- Use Unnatural Causes materials, including fact sheets and shortened versions

Other

- Develop a set of next steps / best practices for health equity
- Work harder on minority recruitment
- Include a comprehensive focus on social determinants (Sweden’s national health plan)
  - Action on the Social Determinants of Health: Learning from Previous Experiences
  - World Health Organization Commission on Social Determinants of Health - Final Report
  - Advocate for social determinants perspective in professional roles
  - Change from the biomedical to the socio/economical model; think beyond the symptoms and address the philosophies of our problems
- Infuse health equity, social determinants of health and environmental health into work
- Establish an overarching national policy to address poverty
Health In All Policies

Health in All Policies

- Follow the example of countries in the EU - especially Finland and Sweden – they’ve integrated health into all of their policies (agriculture)
  - Health In All Policies: Prospects and Potentials
- Push for health in all sectors
- Integrate services and perspectives (health implications of transportation policy)
- Increase integration of our health issues in others and in non-health issues
- Counsel staff to broaden their horizons when addressing health policy issues (incorporate “health,” prevention, socioeconomic issues, and Web links to raise awareness)
- Incorporate substance abuse into the larger health agenda; environmental strategies like billboard control, places for young to congregate, different strategies for public housing
- Combine safety and health; reduce unintentional, accidental injury by building safer homes, helping people learn to be safer, and managing land/water use
- Use a literacy campaign to help people learn important information
- Change from the biomedical model to the socio/economical model. We have to think beyond the symptoms and address the philosophies of our problems
- Elicit at least one finite action from my own organization aimed at health in all policies

Health Impact Assessments

- Filter every action or proposal through a Health Impact Assessment
- Tie federal funding (Housing and Urban Development, Department of the Interior, Department of Agriculture, Department of Transportation, etc.) to health impacts
  - Like environmentalists did with Environmental Impact Statements
- Department of Health and Human Services should issue an Executive Order for all departments / agencies to evaluate the public health impact of their actions / policies
  - Next administration: establish a cabinet-level task force across all agencies
- Measure the health impact of bike paths, sidewalks, walking trails, walkable communities, percent age of people making a living wage, etc.

Livable communities / built environment

- Advocate changes to the built environment
- Emphasize better environmental policy (renewable energy, walkable communities, building standards, zoning policies, public transportation, etc.)
- Encourage quality growth and development, including benefits not intentionally planned to affect health
  - Introduction to Envision Utah
- Legislate smart growth / healthy community design
- **Urban Management, Sustainable Development and Smart Growth - Gateway to International Best Practices and Innovations**
- Create a community planning model for community wellness
- **Community Wellness Index for Physical Activity and Nutrition**
- **How to Build a Walking Trail**
- **Healthy People in Healthy Communities: A Community Planning Guide Using Healthy People 2010**
- Talk about ‘systems’ perspective of community wellness; beyond health, bridge across silos
- **International Healthy Cities Foundation**
- Determine tangible and compelling health benefits that come from land use work
- Mobilize communities to remove barriers and make it easier to incorporate change
- **A Vision For a Healthier America: What the States Can Do**
- Address zoning issues to help bring more equity to neighborhoods

**Housing**
- Recommend policies that align housing and the environment with health care
- Address housing policies as part of health policies
- Look for opportunities in community/homeowners association to affect change

**Transportation**
- Use transportation money to improve sidewalks
  - **Transit for Livable Communities**
- Shut down highways one day per month for biking, walking (Bogota, Columbia)
  - **The Wheel World**
- Plow bike routes during winter
- Create subsidies for public transportation

**Natural environment**
- Integrate solutions into climate change legislation
  - **EPA Takes Final Step in Phaseout of Leaded Gasoline**
  - **Give a Hoot About How to Stop Global Warming**

**Food**
- Involve Agriculture in this effort to shape policy for a healthier nation
  - **A Fair Farm Bill for Public Health**
- Use accreditation to encourage schools and day care to serve healthy snacks
- Develop community gardens
Work place

- Create economic development in communities - jobs are critical to health
- Promote the increased productivity and economic competitiveness of a healthy workforce
- Help labor understand the health implications of wages, working conditions, job strain, etc.
- Help business understand the return on tax investments in community infrastructure
- Suggest little things that companies can look for to promote health – location, healthy buildings, access to things that enable good decisions
- Encourage businesses to be partners by offering tax credits and other incentives
- Pay people a living wage so they can take care of their health needs
- Support policies that reduce work hours to encourage preventive care and healthy activities

Education

- Encourage participation from the Department of Education
- Advocate U.S. support of whole-child policies, as modeled by European countries
- Focus on early education (0-5 years)
  - Preschool for All: A Priority for American Business Leaders
  - Cost-Effective Investments in Children
  - Laying the Foundation
  - Governors Push Access to Preschool
- Require each curriculum to discuss race, gender, and class
  - Education for Diversity: Investing in Systemic Change through Curriculum, Textbooks, and Teachers
- Copy the neighborhood watch system into a community child safety program

Work together

- Get everyone to the table
- Continue to forge cross-sector relationships
- Create innovative interagency coalitions for health
  - Suggest Health Fellows for policy committees
  - Bring in new partners
- Involve the Senate Health Committee to enhance understanding of the important political issues and priorities involved
- Communicate across governmental issues (transportation, health, education) and across coalitions (non-governmental organizations, for-profits)
- Create more effective health planning councils to put health into everything – not just health into every policy
- Integrate more of others’ language into how we do things
- Expand public health leadership program to include partners from public/private sector
• Reach out to church congregation to be advocates in the policy sector by attending council meetings, talking to neighbors
• Bring department of education, transportation, etc. to next meeting
• Improve communications with non-traditional partners
• Work together with experts from transportation, housing, education to create real change
• Link public health and economic development groups at state and local level
• Recommend another meeting like this but incorporate more stakeholders that are missing from this conference
• Public health should build partnerships (not preach) with business, states and communities to build community health initiatives
• Create storyboard about how partnerships work, giving examples of how the smallest health departments are doing the best job with creating partnerships
• Support collaboration between physicians, business, schools, and local governments
• Create a forum with passion and interest in health equity issues; include transportation, housing, and education experts to work with health professionals toward real change
• Encourage anti-poverty and infrastructure experts to have a place at the table
• Support local (grassroots) initiatives; coordinate federal and state with local Funding
• Provide incentives for going green at home, school, and community
• Provide moneys through tax reform to provide opportunities for people to exercise
• Change the way federal agencies fund things - stop contributing to fragmentation
  – Start addressing contributory factors
  – Measure outcomes – long-term results can justify sustainable funding
• Create a new New Deal to address the infrastructure issues related to health disparities
• Promote tax incentives that support a healthier environment / work place (if you want to build a stadium, you must build a trail in a low-income community)
WHERE?
School / Education Plays

Parenting

- Provide home nurses for first-time mothers throughout the pregnancy – results in significant difference in school outcomes and reduction in juvenile delinquency
  - First-Time Mothers Benefit From Home Visitation Program
  - Minding the Baby: Program Overview and Summary of Initial Findings
- Incorporate parenting programs into policy
  - Parenting Policy
- Allow kids, parents, and caregivers to learn together; integrate safety education
  - Even Start
- Bloomberg is looking at “Conditional Cash Transfer” – early education, early parenting
  - Mayor Bloomberg and Major Philanthropic Foundations Unveil Size, Scope, and Schedule of Opportunity NYC, the Nation’s First-Ever Conditional Cash Transfer Program
  - Mayor Bloomberg, Delegation Visit Mexico’s Oportunidades Program

Pre-school and daycare

- Re-evaluate 0-5 educational system by zip code
- Identify most at-risk neighborhoods (as they do in France) - start their education a year earlier and assign most experienced teachers to help
  - Early Childhood Education: Lessons from the States and Abroad: 2005
  - How to Prime Kids for School
  - Investing in Children: An Early Learning Strategy for Washington State
- Improve access to good employer- and community-based daycare for all young children
- Push for accessible/available pre-school
- Focus on early education (0-5 years)
  - Preschool for All: A Priority for American Business Leaders
  - Cost-Effective Investments in Children
  - Laying the Foundation
  - Governors Push Access to Preschool
- Focus on childcare subsidies
  - Supporting Child Care Subsidy Access and Retention: Strategies from Seven Midwestern States
  - Turning to Childcare: Subsidy Funding

Public school system

- Start healthy behaviors in early education
  - Achieving National Healthy School Status
• Mandate nutrition guidelines for schools
  – Require healthy lunches
  – Use accreditation to encourage schools and daycare centers to serve healthy snacks
  – Remove sodas from schools – stock vending machines with healthy snacks
  – Eliminating Soda and Unhealthy Foods from Vending Machines
  – Schools and School Districts That Have Improved School Foods and Beverages and Not Lost Revenue
  – Illinois Set to Ban Soda and Snacks in Schools
  – Sugary Soft Drinks to Be Absent from School Roll Calls
• Restore physical education in schools K-12
  – Physical Education in Schools – Both Quality and Quantity are Important
  – Mandatory PE in Texas Schools is Victory for Kids
• Promote and enable supervised/safe walking to schools
  – National Center for Safe Routes to School
• Push for tobacco-free campuses
  – Tobacco-Free Schools Fact Sheet
  – 100% Tobacco-Free Schools
• Require each curriculum to discuss race, gender, and class
  – Education for Diversity: Investing in Systemic Change through Curriculum, Textbooks, and Teachers
• Enable access to electronic education – this is key to the future
  – Children, The Digital Divide, And Federal Policy
• Provide a nurse at every school
  – Wanted: A Nurse for Every School
• Train teachers in health and/or provide health experts in the school system
  – Wisconsin’s Model Academic Standards for Health Education
• Delink education funding from property taxes
  – Why It Matters: Property Taxes and School Funding
• Increase high school graduation rates
• Encourage schools and industry to collaborate in providing healthy alternatives
• Encourage collaboration with the Department of Education

After-school programs
• Promote after-school programs
  – After School Alliance
  – Making Smart Investments in Afterschool: A Policy Primer for State and Local Leaders
• Use sports programs in different ways to teach children to respect contributions of others
Higher education

- Integrate prevention/public health in medical and nursing school curricula
- Reduce costs of higher education / advocate for universal college education
  - Raise the Bar
  - Universal Higher Education

Work Place Plays

Foster health improvement in the work place

- Offer benefits that value and encourage health
- Embrace health promotion in the private sector
  - Healthy Workplace Initiative
- Create a healthier workforce
- Create work place policies around working, smoking, exercise
- Change the work place environment (smoke-free, healthy food, fitness equipment, etc.)
  - Healthy Work Environments Resource Guide
  - Creating Healthy States: Building Healthy Worksites
- Hire for health (non-smoking policies)
  - Hiring Only Nonsmokers Is Legal and Beneficial
- Establish work/life balance
- Support policies that reduce work hours to encourage preventive care and healthy activities
- Equalize time off with pay – typically the higher / whiter levels get more
- Promote policies that support parental leave or community service
- Establish four-day work weeks for better mental health
  - Psychologists are Taking a More Comprehensive Approach to Wellness at Work
- Develop health/fitness policies
  - Employers Focus on Weight as Work Place Health Issue
  - 50 Million Pound Challenge Teams Up with Churches to “Spread the Gospel of Healthy Living”
- Encourage local businesses to participate and sponsor things like walking clubs
- Pay the additional cost of premiums based on employee risk assessment / dependents
  - County Workers’ Insurance Costs to Be Tied to Their Health Habits
- Share success stories of local companies that improve health
- Establish green/health policy development in work place
Corporate designations

- Establish purchasing policies to work with only healthy organizations / environments
- Develop a “Best Buys for Health” guide for CEOs
- Utilize scorecards that rate the health of companies
- Encourage “Healthy Company” designations
  - The Fittest Companies in America

Collaborate across sectors

- Align interests among stakeholders (traditional health organizations, government, business, consumer organizations, etc.)
- Broaden the conversation with non-health sectors
- Hold corporate and political leaders accountable for improving health in respective sectors
- Collect and disseminate data on increased productivity and economic competitiveness
- Offer health tax credits for prevention
  - businesses and individuals
  - full coverage for tobacco cessation and weight loss programs
- Strategically define and pursue partnerships within the organization and community
- Work with other corporations to influence health and wellness reform
- Gain insight for industry leaders on the success of their health and wellness initiatives
- Partner actively with others to obtain good policy examples and develop good policy information and resources
- Communicate message to state health and legal officials
- Bring in new partners
- Build on the work of local rotary clubs
- Meet with state and local agency directors to develop a healthier state program
- Improve communications with non-traditional partners
- Help labor understand the health implications of wages, working conditions, job strain, etc.
- Continue to work with other partners and CDC to promote health promotion in health reform – especially with state government
- Build novel partnerships with health
- Get all sides of the table involved in contributing to our healthy workforce
- Begin exploring /searching for ways to get involved and promote “health” with local leaders
- Bring department of education, transportation, etc. to next meeting
- Involve the adult literacy community
Address health equity through work place actions

- Advocate a living wage
- Establish equitable pay for women
- Foster public / private partnerships to build community health initiatives
- Hold schools, businesses, and states accountable for the health of their constituents
- Make the compelling case for businesses to understand community health, not workforce health
- Have a dialogue with private employers about resources and disparity; get them to invest in the communities and raise their awareness of things that businesses can do
- Encourage employers to invest in the communities where their employees live
- Promote corporate responsibility
- Provide incentives for development in economically challenged communities
- Promote tax incentives that support a healthier environment / work place (if you want to build a stadium, you must build a trail in a low-income community)
- Lobby for standards around Health Information Technology and interoperability
- Schedule a viewing of the video “Unnatural Causes” in the worksite
- Infuse health equity, social determinants of health and environmental health into work
- Follow up with Robert Wood Johnson Foundation staff to explore opportunities to reduce health disparities via the work place
- Advocate for social determinants perspective in professional roles
- Work with non-health agencies to develop a health equity lens to evaluate their work
- Develop a set of next steps / best practices for health equity
- Work harder on minority recruitment

Alliance for the Healthiest Nation (AHN)

- Join, promote and support AHN
- Integrate AHN concepts into technical assistance and training
- Contact associates with “Healthiest Nation” concept
- Help develop concrete strategies for A Healthiest Nation
- Educate internally about AHN
- Build partnerships that support/sustain AHN
- Devote a session of an annual meeting to the Alliance
- Blog about the Alliance
- Invite AHN representative to speak
- Get buy-in for commitment to the Alliance from board
- Identify ways in which our agenda and the Alliance’s intersect and how we can connect to advance the larger national health agenda
- Frame a short message describing our organization’s role and commitment to AHN Alliance to share with colleagues
• Develop common messaging of Healthiest Nation themes to assure message alignment
• Write article for our association journal to spread what learned about AHN at conference

Leadership

• Evangelize health as a social value
• Counsel staff to broaden their horizons when addressing health policy issues (incorporate “health,” prevention, socioeconomic issues, and Web links to raise awareness)
• Encourage staff to take time out of the workday to go exercise
• Stand for health equity and promote at work and with faith community
• Teach my team those leadership communication skills
• Report on conference to staff – discuss implications / opportunities in current scope of work; brainstorm future opportunities; use “leaderspeak”
• Elicit at least one finite action from my own organization aimed at health in all policies

General actions

• Filter every action or proposal through a Health Impact Assessment
• Examine personnel/employer health policies/practices, incentives
• Launch a health initiative within my organization
• Integrate health issues and non-health issues (health in all policies)
• Look at how our public health policies impact the public’s wellness
• Create a media/messaging opportunity to reach rural communities
• Develop a Healthier State conference
• Have a Taste of Health Festival
• Start my program at work focusing on, “What are we going to do or already doing to improve health and wellness?” and “What policies do we need to have toward improving wellness?”
• Add to the health risk assessment questions related to the health of the employee’s family and community and the employee’s wellness concerns
• Prevent chronic diseases by reaching low-income workers in small work place settings
• Follow up with conference speakers to pursue speaking engagements in my work place
• Help clarify the “IT” of health system transformation
• Introduce steps to make office “green” (no paint necessary)
• Collect business case info for use in policy advocacy
• Work with my leadership to develop policy to influence legislation promoting wellness
• Establish a healthy food policy/green
• Incentivize wellness in our health insurance program
• Push discussion at employment site about being a model for employees and community and state
• Push Health Impact Assessment for policies and creating better measures for health
• Persuade members to use data to relate to social determinants of health
• Transform health care with better information for better decisions - provide patients, doctors, government with better info to make better decisions on health
• Help doctors to help patients with advocacy, education, medical liability reform, etc.
• Determine tangible and compelling health benefits that come from land use work
• Continue research and education on wellness and prevention
• Pursue plan to research and pilot a comprehensive parenting education program on health and safety; emphasize high-risk audiences
• Give multiple corporate presentations to business leaders around work place well-being

National public health sector
• Strategize about grassroots organizing
• Re-engage community organizations with a health message
• Plan for geo-coding community health assets / liabilities
• Develop scenarios / success stories with more emotional content

Provider / payor sector
• Facilitate cost reduction of drugs for chronic illness (hypertension, diabetes, asthma, etc.)

Academic sector
• Incorporate “Unnatural Causes” into curricula

Service/advocacy nonprofit sector
• Work with community based organizations to help their voice be heard by convening forums and dialogues and screening “Unnatural Causes.”
• Inform constituents, grantees, and local community of availability of “Unnatural Causes”

Community / Neighborhood Plays

Change the built environment of the community
• Legislate smart growth / healthy community design
  – Require healthy community design - walkable communities
  – Urban Management, Sustainable Development and Smart Growth - Gateway to International Best Practices and Innovations
• Advocate urban land use reclamation
• Fund safe and walkable communities
• Increase the number of children walking to school
• Encourage green space preservation in urban planning
• Create zoning policies to get more sidewalks, crosswalks and trails in neighborhoods
• Plow bike routes during winter
  • Shut down highways one day per month for biking, walking (Bogota, Columbia)
    – *The Wheel World*
• Mandate Health Impact Assessments prior to project development
• Promote smart growth and intentional land use planning for healthier communities
• Try to get sidewalks in my neighborhood
• Determine tangible and compelling health benefits that come from land use work
• Encourage quality growth and development, including health benefits in policies not intentionally planned to affect health
  – *Introduction to Envision Utah*
• Ensure physical security when engaging in community development

**Improve community food sources**
• Develop community gardens
  – *Starting a Community Garden*
• Decrease the number of “fast food” outlets
  – *The Use of Zoning to Restrict Fast Food Outlets: A Potential Strategy to Combat Obesity*
• Require accessible low-cost foods in neighborhoods (New York green carts)
• Fix food chain and supply needs in poor communities
• Push for permanent vegetable and fruit carts in low-income neighborhoods

**Assess the community to improve health**
• Review current policies and evaluate their adverse effects on communities
• Focus on opportunities (asset map) when creating a community-based wellness plan
  – *Asset-Based Community Development Institute*
• Create an inventory of existing services in the community
• Geo-map – map community health assessment by zip codes, then pull in partners
• Plan for geo-coding community health assets / liabilities
• Target resources to communities that need them most
• Use a baseline of a healthy community: infant mortality, living wage, school systems
  – Those that are below, give them money, those above get applause
  – *One Maryland Tax Credit*
• Create a community planning model for community wellness
  – *Community Wellness Index for Physical Activity and Nutrition*
  – *How to Build a Walking Trail*
  – *Healthy People in Healthy Communities: A Community Planning Guide Using Healthy People 2010*
• Talk about ‘systems’ perspective of community wellness; beyond health, bridge across silos
  – International Healthy Cities Foundation
• Link information on communities and health to define the problem
• Provide data on Healthy Communities initiative
  – Healthy People in Healthy Communities – A Community Planning Guide Using Healthy People 2010
• Find opportunities within my community to get involved in Healthy Communities
• Use existing programs as a model for getting into neighborhoods and communities
  – AmeriCorps Vista
  – Teach for America
• Survey neighborhoods regarding community health and well being issues
• Consider the concepts of geography/environment in public health

Community involvement
• Promote a participatory model of community involvement
• Listen to community leaders about what they want and need
• Listen to people in communities
• Recruit retired community members who’d like to help out in the community
• Empower people in communities to take action for change
• Mobilize mentors to partner with communities in need; include this in grant requirements
• Advocacy organizations need to activate people at the neighborhood level; harness the “rage”; get into the political process
• Help people connect their interests to others
• Re-engage community organizations with a health message
• Build on the work of local rotary clubs
• Public health should build partnerships (not preach) with business, states and communities to build community health initiatives
• Strategically define and pursue additional partnerships within community
• Look for opportunities in community/homeowners association to affect change
• Mobilize communities to remove barriers and make it easier to incorporate change
  – A Vision For a Healthier America: What the States Can Do
• Explore funding for coalitions to work on community health and social policies
  – CDC’s Steps Program
  – Common Health Action
  – W.K. Kellogg Foundation health grants
  – Robert Wood Johnson Foundation Program Areas
• Advocate for a center to support people who work in underserved communities to help with issues of burnout
  – **Association of Clinicians for the Underserved**

• Support neighborhood safety and multi-generation health focus

• Discuss interpersonal violence and how communities can address it

• Incorporate substance abuse into the larger health agenda; environmental strategies like billboard control, places for young to congregate, different strategies for public housing

• Provide incentives for going green at home, at school, and in the community

• Promote “block nursing” for neighborhoods or “wellness champions” in communities; provide training, resources, and approaches to promote wellness in the community
  – **Block Nurse Program**
  – **Healthy Native Community Partnership Supports Regional Community Wellness Champion Forums**

• Train community members to do procedures for basic health screening and services
  – **The Community Health Worker’s Heart Disease and Stroke Prevention Sourcebook**

• Create a media/messaging opportunity to reach rural communities

**Engage the faith-based community**

• Get congregation more connected to community

• Work with church community to promote social justice and address the social determinants of health

• Reach out to church congregation to be advocates in the policy sector by attending council meetings, talking to neighbors

**Promote equity in the neighborhood/community**

• Pursue policies that can promote community connectedness to impact health disparities
  – Have local businesses sponsor things like walking clubs
  – Have faith-based communities participate in health and wellness
  – Bring in family foundations to address issues at hand (Gates Foundation)
  – Collect and analyze data by the local government and encourage the local communities to use this data
  – Address housing policies as part of health policies

• Create support for new policies by explaining the costs of inequality and poor health
  – Expand beyond personal responsibility to focus on community responsibility

• Address the health disparities of elderly populations and rural communities

• Conduct an outreach campaign to private employers; discuss resources and disparities; convince them to invest in communities

• Ensure that we have equality within neighborhood facilities

• Bring more equity to neighborhoods through zoning and property taxes
• Coordinate a screening and discussion of “Unnatural Causes”
  – In the neighborhood/community
  – With constituents/grantees
  – With faith community
  – With family
• Use “Unnatural Causes” materials, including fact sheets and shortened versions

**Community economic development and engagement of the business sector**

• Focus on economic and health development, involve big employers in the community
• Think beyond tax credits - tax credits have a limited impact on community health
• Create economic development in communities - jobs are critical to health
• Evaluate the effectiveness of enterprise zones
• Foster improved distribution of business and employment - increase access to jobs and products
• Encourage businesses to continue playing an important role in their community
• Persuade purchasers and payers of health care to invest in the health of the communities they serve
• Encourage employers to invest in the communities where their employees live
• Provide incentives for development in economically challenged communities
• Be model employment site for employees, community, and state
• Add questions to the Health Risk Assessment related to the health of the employee’s family and community and the employee’s wellness concerns
• Promote work/life balance to encourage more time with family and community
• Talk to local chamber of commerce regarding engagement with Partnership for Prevention and add leadership development to their strategic planning agenda
• Promote policies that support parental leave or community service

**Community-based education initiatives**

• Advocate for equal public education
• Use schools to broaden access to physical activity in community
• Improve access to good employer- and community-based daycare for all young children
• Copy the neighborhood watch system into a community child safety program
• Identify most at-risk neighborhoods (as they do in France) - start their education a year earlier and assign most experienced teachers to help
  – [Early Childhood Education: Lessons from the States and Abroad: 2005](#)
  – [How to Prime Kids for School](#)
  – [Investing in Children: An Early Learning Strategy for Washington State](#)
The Short- and Long-Term Plays sections allow the reader to identify which plays could be tackled right away, and which might require gradual and persistent training for the championship games. The division of these plays into short-term or long-term was based on the likelihood that plays that involve gathering information, advocating change, or zoning or tax changes on a local or small business level are more likely to be short-term, while the plays that involve actual change on the state, national, corporate or institutional level are more likely to be long-term. Ultimately, the divisions are subjective and could be interpreted differently by the reader.
Short-Term Plays
Passing Plays: Engaging Partners

Multiple stakeholders
- Recommend another meeting like this but incorporate more stakeholders that are missing from this conference

Coalitions / task forces
- Work on health and social policies and programs
- Create an interagency coalition; talk to non public health people to build bridges
- Fund local, regional coalitions for management and structural support

Communities
- Listen to community leaders about what they want and need
- Promote a participatory model of community involvement
- Recruit retired community members who’d like to help out in the community
- Mobilize mentors to partner with communities in need; include this in grant requirements
- Listen to people in communities
- Promote “block nursing” for neighborhoods or “wellness champions” in communities; provide training, resources, and approaches to promote wellness in the community
  - Block Nurse Program
  - Healthy Native Community Partnership Supports Regional Community Wellness Champion Forums
- Train community members to do diagnostic procedures for basic health screening and services
- Strategically define and pursue partnerships within the organization and in communities

Faith-based communities
- Identify opportunities to work with faith-based activities
- Organize people and give them a voice, a way to put pressure on their elected officials - one vehicle is churches
- Have faith-based communities participate in health and wellness
- Give grants to interfaith and care-giving communities
- Connect my congregation with the community
- Work with church community to promote social justice and address some of the social determinants of health
- Reach out to faith communities / families to address personal health improvement plans; attend council meetings, talk to neighbors

Health professionals
- Suggest that health professionals be invited to the table to make other policy
• Utilize the different training / skills set of public health professionals
• Get non-traditional health care people involved
• Work with other medical and educational organizations
• Suggest Health Fellows for policy committees

**Business / economic development groups**

• Offer a compelling economic case that will appeal to people of various political orientations for why government should be involved in these efforts
• Have a dialogue with private employers about resources and disparity; get them to invest in the communities and raise their awareness of things that businesses can do
• Have local businesses sponsor things like walking clubs
• Encourage businesses to continue to play a role in communities
• Use demographic analysis to convince the business community that they should be concerned about public health because their future workforce will come from these communities
• Encourage employers to invest in the communities where their employees live
• Help business understand the return on tax investments in community infrastructure
• Make the compelling case for businesses to understand community health, not workforce health
• Encourage businesses to be partners by offering tax credits and other incentives
• Help labor understand the health implications of wages, working conditions, job strain, etc.
• Work with other corporations to influence health and wellness reform
• Talk to local chamber of commerce regarding engagement with Partnership for Prevention and add leadership development to their strategic planning agenda

**Education**

• Encourage educators to interact with health professionals to reform standards
• Encourage participation from the Department of Education
• Create a forum with passion and interest in health equity issues; include transportation, housing, and education experts to work with health professionals toward real change
• Work with other medical and educational organizations

**Housing**

• Talk to property managers in highest risk multi-family units, protect the landlord’s investment (Tualatin Valley)
  – [Making Sure Renters’ Rights Don’t Go Wrong](#)
• Create a forum with passion and interest in health equity issues; include transportation, housing, and education experts to work with health professionals toward real change

**Government**

• Collect and analyze data by the local government and encourage the local communities to use this data
• Extend common messaging with local government agencies
• Partner actively with NGA (National Governors Association), ASTHO (Association of State and Territorial Health Officials), NACCHO (National Association of County and City Health Officials), CDC (Centers for Disease Control and Prevention), and others to obtain good policy examples and develop good state policy resources for state legislators

Other
• Involve Agriculture in this effort to shape policy for a healthier nation
  – A Fair Farm Bill for Public Health
• Encourage people with the greatest need to join in the community, state, national level discussion and identify what to work on
• Advocate for a center to support people who work in underserved communities to help with issues of burnout
  – Association of Clinicians for the Underserved
• Involve the Senate Health Committee to enhance understanding of the important political issues and priorities involved
• Reframe Healthiest Nation language to include safety
  – More inclusive of preparedness and criminal justice
  – Test messaging with consumer product safety commission, firefighters, etc.
• Find out more about what King County has done with zip code predictability and show it to statisticians throughout the nation
• Bring department of education, transportation, etc to next meeting
• Involve the adult literacy community
• Build on the work of local rotary clubs
• Join, promote and support Alliance for the Healthiest Nation
• Allow kids, parents and caregivers to learn together; integrate safety education
  – Even Start
• Work with recreational/athletic teams for parenting
• Use sports figures to promote health
• Bring in family foundations to address issues at hand (Gates Foundation)

Principles of engaging partners
• Get everyone to the table
• Bring in new partners
• Forge cross-sector relationships
• Provide collaboration training
• Find partnership and resource opportunities that concentrate on disparities
• Use messaging to educate people that we’re all in this boat together
• Disseminate lessons learned and promising practices to community
• Have a practice-level conference for people who actually do the work
• Create storyboard about how partnerships work, giving examples of how the smallest health departments are doing the best job with creating partnerships
• Educate our own constituents — need the resources and common language to ensure understanding and buy-in
• Foster public / private partnerships to build community health initiatives
• Persuade members to use data to relate to social determinants of health
• Strategize about grassroots organizing
• Work with other partners and CDC to promote health promotion in health
• Elicit at least one finite action by corporate friends of our organization
• Get all sides of the table involved in contributing to our healthy workforce
• Work with non-health agencies to develop a health equity lens to evaluate their work
• Explore ways to get involved and promote “health” on a local level (with local leaders)

**Food Plays**

• Promote healthy vending and food policies in park and recreation centers
  – [San Diego Department of Parks and Recreation Healthy Vending Machine Policy](#)
• Stock school vending machines with healthy snacks
• Remove sodas from schools
  – [Bay Area Nutritionists Take Aim at Sugar-Filled Sodas](#)
  – [California Soda Free Summer Campaign](#)
• Improve menu labeling
• Provide tax subsidies/incentives to bring fresh/organic food into inner city areas
  – [Mayor Bloomberg Signs Legislation Establishing 1,000 New “Green Cart” Permits](#)
  – Provide grants for community gardening
• Ban trans fats - NYC has had a national impact (viral spread)
  – [New York City Passes Trans Fat Ban](#)
  – [NYC Ban on Trans Fats Spreads to States](#)
  – [Trans Fat Bans](#)
• Improve consumer food and beverage marketing - offer 2:1 purchasing for healthy products
• Involve Agriculture in this effort to shape policy for a healthier nation
  – [A Fair Farm Bill for Public Health](#)
Fitness Plays

- Encourage quality growth and development, including health benefits in policies not intentionally planned to affect health
  - Introduction to Envision Utah
- Mobilize communities to remove barriers and make it easier to incorporate change
  - A Vision For a Healthier America: What the States Can Do
- Shut down highways one day per month for biking, walking (Bogota, Columbia)
  - The Wheel World
- Explore funding for coalitions to work on community health and social policies
  - CDC’s Steps Program
  - Common Health Action
  - W.K. Kellogg Foundation health grants
  - Robert Wood Johnson Foundation Program Areas
- Have local business participate and sponsor activities such as walking clubs
- Strongly encourage people to lead active lives
- Create zoning policies to encourage sidewalks
- Plow bike routes during winter
- Promote and enable supervised/safe walking to schools. Look for funding
- Work with recreational/athletic teams for parenting
- Have work place policies around working, smoking, exercise
- Use sports programs in different ways to teach children to respect contributions of others

Tobacco Plays

- Support tobacco cessation movement
- Promote smoke-free bars and clubs, similar to U.K.
  - Smoking Ban in All Pubs and Clubs
- Continue anti-tobacco campaigns
- Design work place policies around working, smoking, exercise
  - Seeking Savings, Employers Help Smokers Quit
Mental Health Plays

• Advocate for health/fitness in the work place
  – Whole Work Place Health. Psychologists Are Taking a More Comprehensive Approach to Wellness at Work
• Improve self esteem
• Link health with stress / mental health

Technology Plays

Use technology to get health information to consumers in real time

• Agencies (VA, NIH, CDC, IHS) are beginning to put health information on websites through podcasts, public health grand rounds, etc.
  – Podcasting from Webcontent.gov
  – Are You Podcasting? Here’s Why You Should
• Charge subscription fee $50 per year for Google health

Use technology to track consumer health and health care

• Track health data in real time
  – Storstroms ErhvervsCenter Uses the Power of Pervasive Computing to Prevent Hypertension and Falls
  – SenseWear ® WMS Components
  – Nutricate
  – Hemoglobin A1C, blood pressure, weight, pedometer
  – New Wireless Devices Could Help Consumers Keep Track of their Vital Signs
• Use cell technology to reach consumers about their health care
  – Use cell phones for heart alerts like airport alerts
  – Send reminder to refill prescriptions
  – Remind patients of medical appointments
  – Text patients when record is updated
    • Text Messages Prove a Life-Saver
    • Cell Phone as Medical Tool?
  – Use cell technology”:
    • Texting4Health
    • A Whole New Way to a Whole New You. The Future of Weight Loss is on Your Phone
    • Mobile Technologies - eHealth Marketing
• Establish health coaches to help consumers through technology
  – Virgin HealthMiles
• Build public access kiosks that allow patients to take blood pressure, etc.

**Use technology to improve consumer choice**

• Find the best doctor, identify neighborhood pollutants, etc.
  – [Health Care Ratings Directory](http://www.healthrater.com)
  – [UCompareHealth Care](http://www.uchqr.com)
  – [Search Your Community](http://www.searchyourcommunity.com)

**Increase social networking about consumer health**

• Encourage peer to peer networking to meet others working on similar projects
  – [My Space/Facebook](http://www.facebook.com)
  • [Social Networks - eHealth Marketing](http://www.ehealthmarketing.com)
  • “Facebook for health”
  – Find out about other patients like me, share personal stories
  • [Patients Like Me](http://www.patientlikeme.com)
  • [TuDiabetes.Com](http://www.tudiabetes.com)
  • [Brave Kids](http://www.bravekids.com)
  • [DLife](http://www.dlife.com)
  • [Daily Strength](http://www.dailystrength.org)
  – Cell phones to meet with walking group
  • [Cell Phones, Coaching May Jump Start Exercise Routine](http://www.cellphonescoaching.com)

• Improve relationship between patient and provider
  – Use e-mail to answer questions
  – [The Doctor Is Online](http://www.thedoctorisonline.com)
  – [AMA Passes Guidelines for Doctor/Patient E-Mail](http://www.ama-assn.org)

• Open new connections between patient and caregiver/friends and family
  – Use family members, community groups and churches to increase patient access to technology
  • [Caring Bridge](http://www.caringbridge.org)
  – Engage the older generation in technology through local area agencies on aging
  – Revolution Health is an example of wellness resources for the individual and family
  • [Revolution Health](http://www.revolutionhealth.com)

**Focus on children as early adopters**

• Teach through Boys and Girls Clubs
  – [Partnering With a Tribal Boys and Girls Club to Serve Youth](http://www.tribalboysgirls.com)

• Video, Youtube, podcasting and social networks are better technology to reach kids

• Gaming (with health messages)
• **Re-Mission™ Power lies Within**

• **CDC Chief Predicts Change**

– **Health Games Research**

– **Games for Health**

  • Computer game about chemo treatments – viral spread

  • [Cigna Offers Cancer-Fighting Video Game to Patients](#)

  • [Wii Fit Rides the Virtual Exercise Wave](#)

• Incorporate health messages/info into “Webkinz” that kids use on a daily basis

  – [Webkinz](#)

• Identify thought leaders of this generation

**Use technology for health care providers**

• Social networking among professionals

  – [Social Networking Goes Professional](#)

  – [50 Social Media and Networking Sites for the Medically Minded](#)

• Increase information to make better informed decisions

  – Dialogue with Agency for Health Care Research and Quality about how to organize workflow

**Use technology for governmental public health**

• Identify best practices around technology

• Government Leadership

  – Get technology ideas from other countries

**Use technology in the private sector to improve health**

• Listen and learn from other companies

• Use technology to do health risk assessments in the work place

  – [Transitioning From a Pen-and-Paper Health Risk Appraisal to an Online Health Risk Appraisal at a Petroleum Company](#)

• Encourage employers without health insurance to keep electronic records

• Self-insured in NC adopted a program that rewarded healthy behaviors

  – [The Asheville Project Now: Employers Nationwide Adopt Cost-saving Health Care Model](#)

**Overall technology goals**

• Market technology in a way that tells people “what’s in it for them”

• Use incremental, scalable approach to buying HIT systems

• Help the consumer locate credible sources of information
Transportation Plays

Learn from past successes
• Success of seatbelt/airbag regulations
  – Click It or Ticket Mobilization

Promote and enable safe and walkable communities
• Promote supervised/safe walking to schools
• Create zoning policies that encourage sidewalks
• Use transportation money to improve sidewalks
  – Transit for Livable Communities
• Install timers on street lights for pedestrians – right information at the right time
  – New Signals Give Pedestrians the Time to Make Wise Decisions

Improve public transportation and biking opportunities
• Provide subsidies for public transportation
• Plow bike routes during winter
• Provide ways for cyclists to cycle and ride bus (Chicago)
  – Executive Summary of the Bike 2015 Plan for the City of Chicago
  – Chicagoland Bicycle Federation Campaigns

Work together
• Bring department of education, transportation, etc. to next conference

Environment Plays

Land use / urban planning
• Stress green space preservation in urban planning
• Advocate urban land use reclamation
• Determine tangible and compelling health benefits that come from land use work
• Encourage changes to the built environment
• Recommend policies that align housing and the environment with health care
• Consider the concepts of geography/environment in public health
• Create zoning policies to encourage sidewalks
• Plow bike routes during winter
Equity Plays

Disparities
  • Include all ethnic institutions/communities in grant funding announcement opportunities
  • Engage people at the early part of their medical careers to recognize health disparities, improve the environment of care, recruit from disadvantaged communities, and promote collaborations with civic organizations that address health disparities (AMA strategic plan)

Food
  • Provide tax subsidies/incentives to bring fresh/organic food into inner city areas
    – Mayor Bloomberg Signs Legislation Establishing 1,000 New “Green Cart” Permits
  • Provide grants for community gardening
  • Involve Agriculture in this effort to shape policy for a healthier nation
    – A Fair Farm Bill for Public Health

Transportation
  • Encourage subsidies for public transportation

Environment
  • Promote funding for safe and walkable communities
  • Ensure physical security when engaging in community development

Business / economic development
  • Take a compelling first step to convince business community why they should care
    – Use demographic analysis to explain their future workforce will come from these communities
    – Have a dialogue with private employers about resources and disparity
    – Help them understand the return on tax investments in community infrastructure
    – Emphasize community health, not workforce health
    – Appeal to people of various political orientations when explaining why government should be involved in these efforts
    – Raise their awareness of things that businesses can do

Living wage
  • Provide data - has living wage been successful in communities that have enacted it?
  • Educate about how living wage affects health
**Education**

- Focus on childcare subsidies
  - Supporting Child Care Subsidy Access and Retention: Strategies from Seven Midwestern States
  - Turning to Childcare: Subsidy Funding
- Bloomberg is looking at “Conditional Cash Transfer” – early education, early parenting
  - Mayor Bloomberg and Major Philanthropic Foundations Unveil Size, Scope, and Schedule of Opportunity NYC, the Nation’s First-Ever Conditional Cash Transfer Program
  - Mayor Bloomberg, Delegation Visit Mexico’s Oportunidades Program
- Create standards to guide how many nurses per number of students
- Encourage educators to interact with health professionals to reform standards
- Promote after-school programs
  - After School Alliance
  - Making Smart Investments in Afterschool: A Policy Primer for State and Local Leaders
- Use sports programs in different ways to teach children to respect contributions of others

**Pregnancy / parenting**

- Incorporate parenting programs into policy
  - Parenting Policy
- Allow kids, parents and caregivers to learn together; integrate safety education
  - Even Start
- Work with recreational/athletic teams for parenting
- Promote policies that support parental leave or community service

**Address specific health issues**

- Discuss interpersonal violence and how communities can address it
- Use a literacy campaign to help people learn important information

**Housing**

- Renters vs. owners – talk to property managers in highest risk multi-family units, protect the landlord’s investment (Tualatin Valley)
  - Making Sure Renters’ Rights Don’t Go Wrong

**Work together**

- Use messaging to educate people that we’re all in this boat together
- Remain positive while working through issues with disparities as you work through issues with disparities and hard-to-resolve problems
- Find partnership opportunities and resource opportunities that concentrate on disparities
- Create a forum with passion and interest in health equity issues; include transportation, housing,
and education experts to work with health professionals toward real change

- Accept incremental progress as one strategy in addressing equity issues
- Get everyone to the table
  - Encourage anti-poverty and infrastructure experts to have a place at the table
  - Involve the Senate Health Committee to enhance understanding of the important political issues and priorities involved
  - Encourage people with the greatest need to join in the community, state, national level discussion and identify what to work on
  - Involve the adult literacy community
- Collaborate and build partnerships within CDC and other federal agencies to understand Indian Health issues and the need to engage Indian Country in this process
- Mobilize mentors to partner with communities in need; include this in grant requirements
- Work with non-health agencies to develop a health equity lens to evaluate their work

Funding strategies

- Bring in family foundations to address issues at hand (Gates Foundation)
- Promote tax incentives that support a healthier environment / work place (if you want to build a stadium, you must build a trail in a low-income community)
- Fund local, regional coalitions for management and structural support
- Give grants to interfaith and care-giving communities
- Support and fund policies that are already in existence (Head Start)
- Continue to support State Children’s Health Insurance Program (SCHIP)

Community

- Promote a participatory model of community involvement
- Listen to community leaders about what they want and need
- Focus on opportunities (asset map) when creating a community-based wellness plan
  - Asset-Based Community Development Institute
- Pursue policies that can promote community connectedness to impact health disparities
- Recruit retired community members to help out with various tasks in the community
- Use existing programs as a model for getting into neighborhoods and communities
  - AmeriCorps Vista
  - Teach for America
- Promote “block nursing” for neighborhoods or “wellness champions” in communities; provide training, resources, and approaches to promote wellness in the community
  - Block Nurse Program
  - Healthy Native Community Partnership Supports Regional Community Wellness Champion Forums
• Train community members to do diagnostic procedures for basic health screening and services
• Create a media / messaging opportunity to reach rural communities
• Work with faith-based communities to promote social justice and address some of the social determinants of health

**Assessment**

• Review current policies and evaluate their adverse effects on communities
• Develop evidence-based database around social impact; make these things better known
• Link information on communities and health to define the problem
• Evaluate the efficacy of enterprise zones
• Persuade members to use data to relate to social determinants of health

**Advocacy and support**

• Create support for new policies by explaining the costs of inequality and poor health
  – Overcome aversions to taxes by explaining benefits of new health initiatives
  – Expand thinking from personal responsibility to community responsibility

**Unnatural Causes**

• Watch Unnatural Causes
  – [Unnatural Causes ... Is Inequality Making Us Sick?](#)
• Coordinate a screening and discussion of Unnatural Causes
  – In the worksite
  – With faith community
  – With family
  – In the neighborhood / community
  – In the classroom / incorporate into curriculum
  – With constituents / grantees
• Use Unnatural Causes materials, including fact sheets and shortened versions

**Other**

• Develop a set of next steps / best practices for health equity
• Work harder on minority recruitment

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**Health In All Policies Plays**

**Health in All Policies**

• Counsel staff to broaden their horizons when addressing health policy issues (incorporate “health,” prevention, socioeconomic issues, and Web links to raise awareness)
• Use a literacy campaign to help people learn important information
• Elicit at least one finite action from my own organization aimed at health in all policies

Livable communities / built environment
• Advocate changes to the built environment
• Emphasize better environmental policy (renewable energy, walkable communities, building standards, zoning policies, public transportation, etc.)
• Encourage quality growth and development, including benefits not intentionally planned to affect health
  – Introduction to Envision Utah
• Create a community planning model for community wellness
  – Community Wellness Index for Physical Activity and Nutrition
  – How to Build a Walking Trail
  – Healthy People in Healthy Communities: A Community Planning Guide Using Healthy People 2010
• Determine tangible and compelling health benefits that come from land use work
• Mobilize communities to remove barriers and make it easier to incorporate change
  – A Vision For a Healthier America: What the States Can Do

Housing
• Recommend policies that align housing and the environment with health care
• Look for opportunities in community/homeowners association to affect change

Transportation
• Use transportation money to improve sidewalks
  – Transit for Livable Communities
• Shut down highways one day per month for biking, walking (Bogota, Columbia)
  – The Wheel World
• Plow bike routes during winter

Food
• Involve Agriculture in this effort to shape policy for a healthier nation
  – A Fair Farm Bill for Public Health
• Develop community gardens

Work place
• Promote the increased productivity and economic competitiveness of a healthy workforce
• Help labor understand the health implications of wages, working conditions, job strain, etc.
• Help business understand the return on tax investments in community infrastructure
• Suggest little things that companies can look for to promote health – location, healthy buildings, access to things that enable good decisions
• Encourage businesses to be partners by offering tax credits and other incentives
• Support policies that reduce work hours to encourage preventive care and healthy activities

**Education**

• Encourage participation from the Department of Education

**Work together**

• Get everyone to the table
• Continue to forge cross-sector relationships
• Create innovative interagency coalitions for health
  – Suggest Health Fellows for policy committees
  – Bring in new partners
• Involve the Senate Health Committee to enhance understanding of the important political issues and priorities involved
• Communicate across governmental issues (transportation, health, education) and across coalitions (non-governmental organizations, for-profits)
• Create more effective health planning councils to put health into everything – not just health into every policy
• Integrate more of others’ language into how we do things
• Expand public health leadership program to include partners from public/private sector
• Reach out to church congregation to be advocates in the policy sector by attending council meetings, talking to neighbors
• Bring department of education, transportation, etc. to next meeting
• Improve communications with non-traditional partners
• Work together with experts from transportation, housing, education to create real change
  – [Healthy People 2020: The Road Ahead](#)
• Recommend another meeting like this but incorporate more stakeholders that are missing from this conference
• Create storyboard about how partnerships work, giving examples of how the smallest health departments are doing the best job with creating partnerships
• Create a forum with passion and interest in health equity issues; include transportation, housing, and education experts to work with health professionals toward real change
• Encourage anti-poverty and infrastructure experts to have a place at the table

**Funding**

• Promote tax incentives that support a healthier environment / work place (if you want to build a stadium, you must build a trail in a low-income community)
School / Education Plays

Parenting

• Provide home nurses for first-time mothers throughout the pregnancy – results in significant difference in school outcomes and reduction in juvenile delinquency
  – First-Time Mothers Benefit From Home Visitation Program
  – Minding the Baby: Program Overview and Summary of Initial Findings

• Incorporate parenting programs into policy
  – Parenting Policy

• Allow kids, parents and caregivers to learn together; integrate safety education
  – Even Start

• Bloomberg is looking at “Conditional Cash Transfer” – early education, early parenting
  – Mayor Bloomberg and Major Philanthropic Foundations Unveil Size, Scope, and Schedule of Opportunity NYC, the Nation's First-Ever Conditional Cash Transfer Program
  – Mayor Bloomberg, Delegation Visit Mexico’s Oportunidades Program

Pre-school and daycare

• Focus on childcare subsidies
  – Supporting Child Care Subsidy Access and Retention: Strategies from Seven Midwestern States
  – Turning to Childcare: Subsidy Funding

Public school system

• Start healthy behaviors in early education
  – Achieving National Healthy School Status

• Require healthy lunches

• Remove sodas from schools – stock vending machines with healthy snacks
  – Eliminating Soda and Unhealthy Foods from Vending Machines
  – Schools and School Districts That Have Improved School Foods and Beverages and Not Lost Revenue
  – Illinois Set to Ban Soda and Snacks in Schools
  – Sugary Soft Drinks to Be Absent from School Roll Calls

• Promote and enable supervised/safe walking to schools
  – National Center for Safe Routes to School

• Encourage collaboration with the Department of Education

After-school programs

• Promote after-school programs
  – After School Alliance
Making Smart Investments in Afterschool: A Policy Primer for State and Local Leaders

- Use sports programs in different ways to teach children to respect contributions of others

**Work Place Plays**

**Foster health improvement in the work place**

- Offer benefits that value and encourage health
- Embrace health promotion in the private sector
  - [Healthy Workplace Initiative](#)
- Create work place policies around working, smoking, exercise
- Support policies that reduce work hours to encourage preventive care and healthy activities
- Promote policies that support parental leave or community service
- Develop health/fitness policies
  - [Employers Focus on Weight as Work Place Health Issue](#)
  - [50 Million Pound Challenge Teams Up with Churches to “Spread the Gospel of Healthy Living”](#)
- Encourage local businesses to participate and sponsor things like walking clubs
- Share success stories of local companies that improve health
- Establish green/health policy development in work place

**Corporate designations**

- Establish purchasing policies to work with only healthy organizations / environments
- Develop a “Best Buys for Health” guide for CEOs
- Utilize scorecards that rate the health of companies
- Encourage “Healthy Company” designations
  - [The Fittest Companies in America](#)

**Collaborate across sectors**

- Broaden the conversation with non-health sectors
- Collect and disseminate data on increased productivity and economic competitiveness
- Strategically define and pursue partnerships within the organization and community
- Gain insight for industry leaders on the success of their health and wellness initiatives
- Partner actively with others to obtain good policy examples and develop good policy information and resources
- Communicate message to state health and legal officials
- Bring in new partners
- Build on the work of local rotary clubs
- Meet with state and local agency directors to develop a healthier state program
• Improve communications with non-traditional partners
• Help labor understand the health implications of wages, working conditions, job strain, etc.
• Continue to work with other partners and CDC to promote health promotion in health reform – especially with state government
• Build novel partnerships with health
• Get all sides of the table involved in contributing to our healthy workforce
• Begin exploring /searching for ways to get involved and promote “health” with local leaders
• Bring department of education, transportation, etc. to next meeting
• Involve the adult literacy community

Address health equity through work place actions

• Advocate a living wage
• Foster public / private partnerships to build community health initiatives
• Make the compelling case for businesses to understand community health, not workforce health
• Have a dialogue with private employers about resources and disparity; get them to invest in the communities and raise their awareness of things that businesses can do
• Encourage employers to invest in the communities where their employees live
• Promote corporate responsibility
• Provide incentives for development in economically challenged communities
• Promote tax incentives that support a healthier environment / work place (if you want to build a stadium, you must build a trail in a low-income community)
• Lobby for standards around Health Information Technology and interoperability
• Schedule a viewing of the video “Unnatural Causes” in the worksite
• Follow up with Robert Wood Johnson Foundation staff to explore opportunities to reduce health disparities via the work place
• Advocate for social determinants perspective in professional roles
• Work with non-health agencies to develop a health equity lens to evaluate their work
• Develop a set of next steps / best practices for health equity
• Work harder on minority recruitment

Alliance for the Healthiest Nation (AHN)

• Join, promote and support AHN
• Integrate AHN concepts into technical assistance and training
• Contact associates with “Healthiest Nation” concept
• Help develop concrete strategies for A Healthiest Nation
• Educate internally about AHN
• Build partnerships that support/sustain AHN
• Devote a session of an annual meeting to the Alliance
• Blog about the Alliance
• Invite AHN representative to speak
• Get buy-in for commitment to the Alliance from board
• Identify ways in which our agenda and the Alliance’s intersect and how we can connect to advance the larger national health agenda
• Frame a short message describing our organization’s role and commitment to AHN to share with colleagues
• Develop common messaging of AHN themes to assure message alignment
• Write article for our association journal to spread what learned about AHN at conference

Leadership

• Evangelize health as a social value
• Counsel staff to broaden their horizons when addressing health policy issues (incorporate “health,” prevention, socioeconomic issues, and Web links to raise awareness)
• Encourage staff to take time out of the workday to go exercise
• Stand for health equity and promote at work and with faith community
• Teach my team those leadership communication skills
• Report on conference to staff – discuss implications / opportunities in current scope of work; brainstorm future opportunities; use “leaderspeak”
• Elicit at least one finite action from my own organization aimed at health in all policies

General actions

• Examine personnel/employer health policies/practices, incentives
• Look at how our public health policies impact the public’s wellness
• Create a media/messaging opportunity to reach rural communities
• Develop a Healthier State conference
• Have a Taste of Health Festival
• Start my program at work focusing on, “What are we going to do or already doing to improve health and wellness?” and “What policies do we need to have toward improving wellness?”
• Add to the health risk assessment questions related to the health of the employee’s family and community and the employee’s wellness concerns
• Follow up with conference speakers to pursue speaking engagements in my work place
• Help clarify the “IT” of health system transformation
• Introduce steps to make office “green” (no paint necessary)
• Collect business case info for use in policy advocacy
• Work with my leadership to develop policy to influence legislation promoting wellness
• Establish a healthy food policy/green
• Incentivize wellness in our health insurance program
• Push discussion at employment site about being a model for employees and community and state
• Push Health Impact Assessment for policies and creating better measures for health
• Persuade members to use data to relate to social determinants of health
• Determine tangible and compelling health benefits that come from land use work
• Pursue plan to research and pilot a comprehensive parenting education program on health and safety; emphasize high-risk audiences
• Give multiple corporate presentations to business leaders around work place well-being

National public health sector
• Strategize about grassroots organizing
• Re-engage community organizations with a health message
• Plan for geo-coding community health assets / liabilities
• Develop scenarios / success stories with more emotional content

Academic sector
• Incorporate “Unnatural Causes” into curricula

Service/advocacy nonprofit sector
• Work with community based organizations to help their voice be heard by convening forums and dialogues and screening “Unnatural Causes.”
• Inform constituents, grantees, and local community of availability of “Unnatural Causes”

Community / Neighborhood Plays

Change the built environment of the community
• Advocate urban land use reclamation
• Fund safe and walkable communities
• Increase the number of children walking to school
• Encourage green space preservation in urban planning
• Create zoning policies to get more sidewalks, crosswalks and trails in neighborhoods
• Plow bike routes during winter
• Shut down highways one day per month for biking, walking (Bogota, Columbia)
  – The Wheel World
• Promote smart growth and intentional land use planning for healthier communities
• Try to get sidewalks in my neighborhood
• Determine tangible and compelling health benefits that come from land use work
• Encourage quality growth and development, including health benefits not intentionally planned to affect health
– **Introduction to Envision Utah**
  - Ensure physical security when engaging in community development

**Improve community food sources**
- Develop community gardens
  - **Starting a Community Garden**
- Require accessible low-cost foods in neighborhoods (New York green carts)

**Assess the community to improve health**
- Review current policies and evaluate their adverse effects on communities
- Focus on opportunities (asset map) when creating a community-based wellness plan
  - **Asset-Based Community Development Institute**
- Create an inventory of existing services in the community
- Geo-map – map community health assessment by zip codes, then pull in partners
- Plan for geo-coding community health assets / liabilities
- Link information on communities and health to define the problem
- Provide data on Healthy Communities initiative
  - **Healthy People in Healthy Communities – A Community Planning Guide Using Healthy People 2010**
- Find opportunities within my community to get involved in Healthy Communities
- Use existing programs as a model for getting into neighborhoods and communities
  - **AmeriCorps Vista**
  - **Teach for America**
- Survey neighborhoods regarding community health and well being issues
- Consider the concepts of geography / environment in public health

**Community involvement**
- Promote a participatory model of community involvement
- Listen to community leaders about what they want and need
- Listen to people in communities
- Recruit retired community members who’d like to help out in the community
- Help people connect their interests to others
- Build on the work of local rotary clubs
- Look for opportunities in community/homeowners association to affect change
- Lead by example in community and work
- Explore funding for coalitions to work on community health and social policies
  - **CDC’s Steps Program**
– **Common Health Action**
– **W.K. Kellogg Foundation health grants**
– **Robert Wood Johnson Foundation Program Areas**

- Advocate for a center to support people who work in underserved communities to help with issues of burnout
  - **Association of Clinicians for the Underserved**
- Support neighborhood safety and multi-generation health focus
- Discuss interpersonal violence and how communities can address it
- Create a media/messaging opportunity to reach rural communities

**Engage the faith-based community**

- Get congregation more connected to community
- Work with church community to promote social justice and address the social determinants of health
- Reach out to church congregation to be advocates in the policy sector by attending council meetings, talking to neighbors

**Promote equity in the neighborhood/community**

- Pursue policies that can promote community connectedness to impact health disparities
  - Have local businesses sponsor things like walking clubs
  - Have faith-based communities participate in health and wellness
- Conduct an outreach campaign to private employers; discuss resources and disparities; convince them to invest in communities
- Watch “Unnatural Causes”
  - **Unnatural Causes ... Is Inequality Making Us Sick?**
- Coordinate a screening and discussion of “Unnatural Causes”
  - In the neighborhood / community
  - With constituents / grantees
  - With faith community
  - With family
- Use “Unnatural Causes” materials, including fact sheets and shortened versions

**Community economic development and engagement of the business sector**

- Focus on economic and health development, involve big employers in the community
- Think beyond tax credits - tax credits have a limited impact on community health
- Evaluate the effectiveness of enterprise zones
- Encourage businesses to continue playing an important role in their community
- Encourage employers to invest in the communities where their employees live
• Provide incentives for development in economically challenged communities
• Add questions to the Health Risk Assessment related to the health of the employee’s family and community and the employee’s wellness concerns
• Promote work/life balance to encourage more time with family and community
• Talk to local chamber of commerce regarding engagement with Partnership for Prevention and add leadership development to their strategic planning agenda
• Promote policies that support parental leave or community service

Community-based education initiatives
• Advocate for equal public education

Coaching: Leadership

Workplace
• Be even more bold in leadership in my organization
• Commit to making my organization healthier
• Start my program at work focusing on “What are we already doing to improve health and wellness?” and “What policies do we need to have toward improving wellness?”
• Elicit at least one finite action from my own organization aimed at health in all policies
• Elicit at least one finite action by corporate friends of our organization
• Give multiple corporate presentations to business leaders around work place well-being
• Promote well-being. We can call it well-being. It’s accepted
• Get all sides of the table involved in contributing to our healthy workforce
• Push discussion at work about being model for employees, community and state
• Encourage my staff to take time out of the workday to go exercise
• Continue green / health policy development at my worksite
• Talk to local chamber of commerce regarding engagement with Partnership for Prevention and add leadership development to their strategic planning agenda
• Counsel staff to broaden their horizons when addressing health policy issues (incorporate “health,” prevention, socioeconomic issues, and Web links to raise awareness)
• Identify the common denominator, leave differences at the door – and drive execution
• Work with my leadership to develop policy to influence legislation promoting wellness

Leadership
• Continue to learn about and practice leadership
• Support accountable and responsible leadership
• Mobilize state / local officials; make public commitment
• Incorporate these ideas in our leadership development programs
• Develop collaboration training
• Get everyone to the table
• Tell the stories of companies getting it right

Develop / share information
• Build energy and excitement within staff
• Share with staff, board and constituents about presentations
  – Discuss implications / opportunities in current scope of work. Brainstorm future opportunities. Use “leaderspeak”
• Teach my team leadership communication skills
• Extend common messaging with local government agencies
• Share with leaders in my organization
• Learn more about the Prevention Partnership Leading by Example Initiative
• Develop scenarios / success stories with more emotional content

Disparities
• Work with non-health agencies to develop a health equity lens to evaluate their work
• Stand for health equity and promote it not only in my organization but also in my church
• Communicate that inequality is not tolerated
• Remain positive as you work through issues with disparities and hard-to-resolve problems

Unnatural Causes
• Watch Unnatural Causes
  – Unnatural Causes ... Is Inequality Making Us Sick?
• Coordinate a screening and discussion of Unnatural Causes
  – In the worksite
  – In the classroom / incorporate into curriculum
  – With constituents / grantees
• Use Unnatural Causes materials, including fact sheets and shortened versions

Alliance for the Healthiest Nation (AHN)
• Join, promote and support AHN
• Share information about the AHN with
  – Board
  – Coalition
  – Colleagues / employer / HR director / worksite
  – Local officials and congressional representatives
• Integrate AHN concepts into
– Technical assistance
– Article for association journal
– Presentations to professional field
– Globalization efforts
– Our agenda / larger health agenda

• Move concepts of AHN to action
• Build partnerships that support/sustain AHN
• Blog about the Alliance
• Invite AHN representative to speak

Broadcasts: Media Coverage

Media

• Increase media attention on what’s working at the state/local level
  – (Portland/biking)
• Disseminate lessons learned and promising practices to community
• Get large and small success stories out there
• Share goals and successes through outreach
• Develop scenarios / success stories with more emotional content
• Support grassroots communications to inform people when services are available
• Develop good public health marketing
• Use messaging to educate people that we’re all in this boat together
• Define what kind of universal health care every American should have the right to
• Define health
• Remain positive while working through disparities and hard-to-resolve problems
• Unveil injustices in health equity and mobilize action
• Create support for new policies by explaining the costs of inequality and poor health
  – Overcome aversions to taxes by explaining benefits of new health initiatives
  – Expand thinking from personal responsibility to community responsibility
• Appeal directly to business – the Return on Investment data is there
• Communicate across governmental issues (transportation, health, education) and across coalitions (non-governmental organizations, for-profits)
• Create a playbook that lists all of these policies - what to do and how to do it
• Create a media / messaging opportunity to reach rural communities
• Promote well-being
• Improve consumer food and beverage marketing - offer 2:1 purchasing for healthy products
• Discuss interpersonal violence and how communities can address it
• Write safety information at an appropriate literacy level
• Reframe Healthiest Nation language to include safety
  – More inclusive of preparedness and criminal justice
  – Test messaging with consumer product safety commission, firefighters, etc.
• Blog about the Healthiest Nation
• Develop common messaging of Healthiest Nation themes
• Look for additional and non-traditional opportunities to share our message
• Identify an “inconvenient moment” for this campaign

**Sponsors, Patrons, and Ticket Sales: Funding Strategies**

**Community**
• Use transportation money to improve sidewalks
• Provide incentives for full service grocery stores to locate in inner city areas
  – Economic Stimulus Bill to Attract Supermarkets to Underserved Urban Areas
  – The Fresh Food Financing Initiative
• Support tax subsidies/incentives to distribute fresh/organic food into the inner cities
  – Urban Farms: Oasis in the Inner City
• Provide grants for community gardening
  – Food Security Learning Center: Community Gardens
• Give grants to interfaith and care-giving communities
• Fund local, regional coalitions for management and structural support
• Involve big employers in the community; think of health and economic development

**Business**
• Use the power of purchasing policies to work with only healthy organizations/environments
• Encourage companies to pay for premiums based on employee risk assessment/dependents
• Develop a “Best Buys for Health” guide for CEOs

**Change funding**
• Provide support for groups with limited resources to apply for funding
• Support and fund policies that are already in existence (Head Start)
• Create tax incentives that produce health benefits (raising taxes on cigarettes)
  – Cigarette Tax Increase Could Have Large Public Health Impact
  – Benefits From Raising the Cigarette Tax in Nine Southern States to meet the National State Average
• Create support for new policies by explaining the costs of inequality and poor health
– Overcome aversions to taxes by explaining benefits of new health initiatives
– Articulate value, cost effectiveness

• Recommended health and social initiative funding sources include:
  – CDC’s Steps Program
  – W.K. Kellogg Foundation health grants
  – Robert Wood Johnson Foundation Program Areas
  – SAMHSA - Underage Drinking
  – SAMHSA – Strategies and Materials for Your Community
  – SAMHSA - The Safe Schools Healthy Students Initiative

**Scoreboard: Accountability/Measurement**

**Accountability**

*Accountable health care*

• Look at how our public health policies impact the public’s wellness

*Accountable businesses/corporations*

• Support boards, leaders, and governments that hold corporations accountable for maintaining the health of their populations
• Corporate Designations
  – Purchasing policies to work with only healthy organizations or in healthy environments
  – Scorecard on health of companies—various types of employer measurements
  • The Fittest Companies in America
• Add incentives around collaboration instead of working at cross-purposes
• Transparency – ask about costs of health care

**Measurement**

*Metrics*

• Seek consensus and metrics on definitions of health, healthy nation
  – Healthy People Leading Health Indicators
• Develop better HIA methods and measures
• Make sure metrics are timely and available at the community level
  – Data Set Directory of Social Determinants of Health at the Local Level
• Demonstrate future value of current investments in health improvement
• Develop evidence-based database around social impact; make these things better known
• Gather knowledge of what works - behavior change and health impact
• Review current policies and evaluate their adverse affects on communities
• Help labor understand the health implications of wages, working conditions, job strain, etc.

Community measures

• Create a community planning model for community wellness
  – Community Wellness Index for Physical Activity and Nutrition
  – How to Build a Walking Trail
• Communicate the tangible and compelling health benefits of land use work
• Measure the health impact of bike paths, sidewalks, walking trails, walkable communities, percentage of people making a living wage, etc.
• Use geo-coding to assess community health assets / liabilities
• Make the compelling case for businesses to understand community health, not workforce health
Long-Term Plays
Passing Plays: Engaging Partners

Multiple stakeholders
- For real sustainable change to occur

Coalitions / task forces
- Next administration: establish a cabinet-level task force across all agencies

Communities
- Empower people in communities to take action for change
- Pursue policies that can promote community connectedness to impact health disparities
- Empower local leaders in disenfranchised communities
- Empower people in communities to take action for change
- Public health should build partnerships (not preach) with business, states and communities to build community health initiatives

Health professionals
- Support collaboration between physicians, business, schools, and local governments
- Include traditional medical people and all other modalities in the solution (chiropractors, physical therapists, etc.)
- Help doctors to help patients (with advocacy, education, medical liability reform, etc.)

Business / economic development groups
- Embrace health promotion
- Link public health and economic development groups at state and local level
- Focus on economic and health development, involve big employers in the community
- Public health should build partnerships (not preach) with business, states and communities to build community health initiatives

Education
- Train teachers in health and/or provide health experts in the school system

Housing
- Address housing policies as part of health policies

Government
- Public health should build partnerships (not preach) with business, states and communities to build community health initiatives
Other

• Empower someone other than local boards to make K-12 policy decisions
• Expand public health leadership program to include public and private sector partners
• Meet with state and local agency directors to develop a healthier state program
• Professional organizations need to take a position and say that health is more than biomedical
• Advocacy organizations need to activate people at the neighborhood level; harness the “rage”; get into the political process

Principles of engaging partners

• Add incentives around collaboration instead of working at cross-purposes
• Make it easier for various groups to apply for funding and grants so that those demographic areas and associations that do not have the resources for filling out complex grant proposals can still get support
• Coordinate and integrate the services already available
• Support local (grassroots) initiatives; coordinate federal and state with local
• Develop a shared understanding of what we want to accomplish, then CDC can provide the science about how to get there
• Change reimbursement policies of Centers for Medicare and Medicaid Services to allow others to be a part of the team
• Acknowledge shared responsibility and shared problems - white people look at people of color as perpetrators of violence, problems
• Improve communications with non-traditional partners
• Re-engage community organizations with a health message
• Build novel partnerships with health

Food Plays

• Improve food safety; regulate chemicals in consumer products
• Require understandable food labeling
• Create policies related to produce costs for school cafeterias, hospitals, etc.
  – Food 2002 Policy Recommendations Towards Greater Food Security
  – Moving Food Policy Forward in Surrey and White Rock
• Promote food assistance programs that allocate percentage for healthy food items
• Distribute food stamps more often (people buy more processed items at the end of the month to stretch out their food budget)
• Take corn syrup out of everything
• Outlaw fast foods
• Provide tax credits for healthy eating or heavier taxation of unhealthy eating
- The Impact of Economic Instruments That Promote Healthy Eating, Encourage Physical Activity and Combat Obesity: Literature Review

- Require healthy lunches in schools

**Fitness Plays**

- Restore physical education in schools K-12 through school funding reform
- Create facilities for schools to be used in PE
- Push for usable recreation space in EVERY community
- Legislate smart growth / healthy community design
  - Require healthy community design - walkable communities
  - Urban Management, Sustainable Development and Smart Growth - Gateway to International Best Practices and Innovations
- Provide money through tax reform to provide opportunities for people to exercise

**Tobacco Plays**

- Reduce substance abuse and addiction
- Make all schools tobacco-free campuses
- Create smoking cessation/tobacco-free initiatives and BAC (.08) legislation
  - Tobacco Cessation Leadership Network
  - Smoking Cessation Leadership Center
- Create no-smoking public areas (already in some states)
- Raise taxes on cigarettes and alcohol
- Push for tax incentives for health benefits (e.g. raising taxes on cigarettes)
  - Cigarette Tax Increase Could Have Large Public Health Impact
- Advocate statewide smoking bans
  - Public Place Smoking Bans in States, 2008
  - California Lessons in Clean Indoor Air
- Give health tax credits for prevention
  - businesses and individuals
  - full coverage for tobacco cessation and weight loss programs
Mental Health Plays

- Develop new tools for mental health
- Achieve mental health parity through equal access to mental health/substance abuse prevention
- Integrate physical/mental health
- Determine how much mental health affects physical health

Technology Plays

Use technology to get health information to consumers in real time

- Improve search engines to improve access to health information
- Use Smart House technology to reach people with disabilities
  - University of Florida ‘Smart Home’ Demonstrates Concept of Automated Elderly Help and Care
- Make a virtual home for consumers to identify safety issues
  - Take a Virtual Home Safety Tour
  - Work on similar ideas for worksites and educational tools

Use technology to track consumer health and health care

- Personal Health Records
  - Google, Microsoft Launch Personal Health Record Systems
  - Ability to share health information selectively
  - Technology Helps Patients Take Charge of Health Records
- Use mobile/cell technology to track individual health data
  - Google Launches Online Personal Health Records Project
- Encourage data transparency on hospital infections, error rates, etc.
  - AboutHealthTransparency.Org
  - New York City Puts Hospital Error Data Online
- Use technology for foreign language translation
  - CAS Source Index (CASSI) on CD

Increase social networking about consumer health

- Covert marketing of healthy behaviors - begin a health movement
  - It’s an Ad, Ad, Ad World
Focus on children as early adopters

- Reach kids through school, get Department of Education to the table
- Give children a flash drive to save their health records
  - Flash Drives for Kids

Use technology for health care providers

- Creation of virtual teams to treat and manage patients
- Increase training/educational opportunities, disseminate science promising practices
  - Train the trainer
  - Association websites
  - Use in medical schools
- Telemedicine for home care
  - Federal rather than state-level licensure for telemedicine
  - Center for Telehealth and eHealth Law

Use technology for health care systems

- Systems integration, central repository, allow hospitals to talk to each other
  - eHealth Initiative Blueprint: Building Consensus for Common Action
  - Veterinarians do it better, my dog has more integrated care
  - Software as a subscription service could speed along health care records as being shareable
  - Use programs like HealthVault to combine different IT systems from one hospital
    - The Vault is Open
- Electronic Medical Records (EMR)
  - American College of Physicians is working on standards for Electronic Health Records (EHRs) with the Certification Commission for Health Care Information Technology (CCHIT), Health Care Information and Management Systems Society (HIMSS), eHealth Initiative (EHI), and Primary Care Partial Capitation Providers (PCPCP)
    - American College of Physicians Electronic Health Records
  - Focus on machine-readable data versus text
  - Veteran’s Administration (VA) is a model for portability of health information
    - VA Receives 2006 Innovations in Government Award
    - VA’s Model of Success

Use technology for governmental public health

- Standardize health data – put all measurement systems together
  - Community Health Report Cards
- Improve surveillance data
  - Integrated Surveillance Seminar Series
- GeoDa Center About US
- GeoDa Tutorials
- Track environmental data on individuals (living near a highway, farm, etc.)
  - The Benefits of Health Information Exchange and Electronic Health Records to Environmental Public Health
- Learn from the Department of Defense EHR system (used since 1990s, could connect anywhere in the world, studied why soldiers die on the battlefields)
- Use GIS maps to identify houses with lead paint and link to advice
- Get environmental and public health people together
  - Community Mapping
- Establish a viable national surveillance system to track community health problems
  - Community Issues Management
- Capture health data at the door-to-door level with hand-held devices
  - HandHeldsforHealth
  - Increase data exchange/sharing
  - Create an interagency task force/connector organization like the Alliance for the Healthiest Nation; include Public Health, Environmental Protection Agency, Department of Transportation, Department of the Treasury, Department of Agriculture, etc.
- National Immunization System accessible by all health care providers
  - Government Leadership
    - Include funding for IT, just like evaluation, in grant awards
    - Create a common vision for health technology
    - Include technology goals in Healthy People 2010
      - Health People 2010 23 Public Health Infrastructure
      - Improving the Accessibility of Government, Education and Healthcare

**Use technology in the private sector to improve health**

Expand Dossia (for Personal Health Records, etc.) to reach smaller companies
- Dossia
  - Use technology to link work place health data/clinics with private providers
  - Standardize health insurance forms
    - Health Information Technology Experts Say National Standardized Electronic Health Record System Could Save U.S. Millions Of Dollars, Prevent Errors
  - Link medical data with personal health data to make real time decisions
    - Share data between public and private sectors (Dow Chemical)

**Overall technology goals**

- Standardize systems
• Build value for all users - financial incentives, save time, money, offer tax credits
  – Hospital Rewards Program
• Establish leadership and accountability for ensuring use of technology
• Use TVs to access internet
• Public Health should experiment more, innovate
• Utilize different opportunities to measure return on investment
• Increase uptake of new technologies
• Develop ways to generate revenue around health
• Address technology needs of poor and rural populations
• Increase funding
• Address privacy issues of moving/sharing data; mental health data
• Reconcile increased use of technology with growing health disparities
• Establish the political will to make these changes

**Transportation Plays**

**Promote and enable safe and walkable communities**
• Try to get more sidewalks, crosswalks and trails in neighborhoods

**Make changes to the built environment**
• Legislate smart growth / healthy community design
  – Require healthy community design - walkable communities
  – Urban Management, Sustainable Development and Smart Growth - Gateway to International Best Practices and Innovations
• Emphasize better environmental policy (renewable energy, walkable communities, building standards, zoning policies, public transportation, etc.)

**Work together**
• Integrate services and perspectives (health implications of transportation policy)
• Communicate across governmental issues (transportation, health, education) and across coalitions (non-governmental organizations, for-profits)
• Create a forum with passion and interest in health equity issues; include transportation, housing, and education experts to work with health professionals toward real change
Environment Plays

Environmental protection

- Create a green campaign for health
  - Lead and Lead Paint
  - EPA Takes Final Step in Phaseout of Leaded Gasoline
  - Give a Hoot About How to Stop Global Warming
- Push for indoor and outdoor clean air policies
  - Smoke free ordinances
- Integrate solutions into climate change legislation

Land use / urban planning

- Legislate smart growth / healthy community design
  - Require healthy community design - walkable communities
  - Urban Management, Sustainable Development and Smart Growth - Gateway to International Best Practices and Innovations
- Emphasize better environmental policy (renewable energy, walkable communities, building standards, zoning policies, public transportation, etc.)
- Require/ mandate Health Impact Assessments prior to project development

Overall change

- Infuse health equity, social determinants of health and environmental health in curricula
- Provide incentives for going green at home, at school, and in the community
- Capitalize on this critical chance for people to change their lifestyle; energy crisis + “economic depression” + “food crisis” = opportunity for change

Equity Plays

Access

- Include dental services through Temporary Assistance for Needy Families
- Improve access to provide health care for all
- Eliminate medically underserved areas
- Advocate universal health care for all
- Reduce health care costs
- Work toward universal health care
Disparities

- Reduce racism and other inequalities
- Eliminate health disparities
- Address the health disparities of elderly populations and rural communities
- Promote food assistance programs that allocate percentage for health food items
- Distribute food stamps more often (people buy more processed items at the end of the month to stretch out their food budget)
- Improve consumer food and beverage marketing - offer 2:1 purchasing for healthy products

Fitness

- Push for usable recreation space in EVERY community

Environment

- Focus change efforts on zip codes that are poorest, most polluted, worst health (already doing this in U.K.)
  - Geo-map – map community health assessment by zip codes
  - Work toward more transparency about zip code data to drive policy and funding
  - Re-evaluate 0-5 educational system by zip code
- Implement change through zoning that is more oriented toward health and neighborhood equity

Business / economic development

- Create economic development in communities - jobs are critical to health
  - Link public health and economic development groups at state and local level
  - Involve big employers in the community
  - Provide incentives for development in economically challenged communities
- Equalize time off with pay – typically the higher / whiter levels get more
- Prevent chronic diseases by reaching low-income workers in small work place settings
- Promote corporate responsibility
  - Encourage employers to invest in the communities where their employees live
  - Support boards, leaders, and governments that hold corporations accountable for maintaining the health of their populations

Living wage

- Create a living wage standard at the local, state, and national levels, rather than tax policy or minimum wage
- Emphasize pay equity for women — women head more households than men, and yet that is not considered in living wage issues
Equitable resources

- Get targeted resources to communities that need them most
- Ensure that we have equality within neighborhood facilities
- Mandate assessment and placement of resources in all communities

Education

- Start equality through education at the local level
- Provide critical safe environment and nutrition for 0-2 pre-school
- Provide quality employer- and community-based daycare for all young children
- Advocate U.S. support of whole-child policies, as modeled by European countries
- Advocate for accessible/available pre-school
- Identify most at-risk neighborhoods (as they do in France) - start their education a year earlier and assign most experienced teachers to help
  - Early Childhood Education: Lessons from the States and Abroad: 2005
  - How to Prime Kids for School
  - Investing in Children: An Early Learning Strategy for Washington State
- Focus on early education (0-5 years)
  - Preschool for All: A Priority for American Business Leaders
  - Cost-Effective Investments in Children
  - Laying the Foundation
  - Governors Push Access to Preschool
- Equalize funding for public education
- Delink education funding from property taxes
- Examine impact of policies supporting magnet schools – drains talent from some schools/communities
- Bring arts and PE back into schools so children have access to more activities
- Advocate PE facilities for schools
- Require each curriculum to discuss race, gender, and class
  - Education for Diversity: Investing in Systemic Change through Curriculum, Textbooks, and Teachers
- Incorporate social and emotional health in addition to scholastic achievement in schools
- Provide access to electronic education for all
- Push for federal funding for nurses in every school
- Increase high school graduation rates
- Reduce costs of higher education
- Advocate for universal college education
Pregnancy / parenting

- Reduce teen pregnancies
- Reduce infant mortality rates

Address specific health issues

- Reduce gun violence
- Incorporate substance abuse into the larger health agenda; environmental strategies like billboard control, places for young to congregate, different strategies for public housing
- Combine safety and health; reduce unintentional, accidental injury by building safer homes, helping people learn to be safer, and managing land/water use
- Copy the neighborhood watch system into a community child safety program
- Focus on prevention, treatment, and recovery for mental health
- Achieve mental health parity through equal access to mental health/ substance abuse prevention

Housing

- Address housing policies as part of health policies

Work together

- Talk about ‘systems’ perspective of community wellness; beyond health, bridge across silos
  - International Healthy Cities Foundation

Funding

- Create a new New Deal to address the infrastructure issues related to health disparities
- Change the way federal agencies fund things - stop contributing to fragmentation
  - Start addressing contributory factors
  - Measure outcomes – long-term results can justify sustainable funding
- Simplify the funding and grant process so that those demographic areas and associations that do not have the resources for filling out complex grant proposals can still get support

Community

- Empower people in communities to take action for change
- Empower local leaders in disenfranchised communities

Assessment

- Collect and analyze data by the local government and encourage the local communities to use this data
- Use a baseline of a healthy community: infant mortality, living wage, school systems
  - Those that are below, give them money, those above get applause
  - One Maryland Tax Credit
Advocacy and support

- Organize people and give them a voice, a way to put pressure on their elected officials
  - One vehicle is churches
  - Professional organizations need to take a position and say that health is more than biomedical
  - Advocacy organizations need to activate people at the neighborhood level; harness the “rage”; get into the political process
- Advocate for a center to support people who work in underserved communities to help with issues of burnout
  - Association of Clinicians for the Underserved

Other

- Include a comprehensive focus on social determinants (Sweden’s national health plan)
  - Action on the Social Determinants of Health: Learning from Previous Experiences
    - World Health Organization Commission on Social Determinants of Health - Final Report
  - Advocate for social determinants perspective in professional roles
  - Change from the biomedical to the socio/economical model; think beyond the symptoms and address the philosophies of our problems
- Infuse health equity, social determinants of health and environmental health into work
- Establish an overarching national policy to address poverty

Health In All Policies Plays

Health in All Policies

- Follow the example of countries in the EU - especially Finland and Sweden – they’ve integrated health into all of their policies (agriculture)
  - Health In All Policies: Prospects and Potentials
- Push for health in all sectors
- Integrate services and perspectives (health implications of transportation policy)
- Increase integration of our health issues in others and in non-health issues
- Incorporate substance abuse into the larger health agenda; environmental strategies like billboard control, places for young to congregate, different strategies for public housing
- Combine safety and health; reduce unintentional, accidental injury by building safer homes, helping people learn to be safer, and managing land/water use
- Change from the biomedical model to the socio/economical model. We have to think beyond the symptoms and address the philosophies of our problems

Health Impact Assessments

- Filter every action or proposal through a Health Impact Assessment
• Tie federal funding (Housing and Urban Development, Department of the Interior, Department of Agriculture, Department of Transportation, etc.) to health impacts
  – Like environmentalists did with Environmental Impact Statements
• Department of Health and Human Services should issue an Executive Order for all departments / agencies to evaluate the public health impact of their actions / policies
  – Next administration: establish a cabinet-level task force across all agencies
• Measure the health impact of bike paths, sidewalks, walking trails, walkable communities, percentage of people making a living wage, etc.

Livable communities / built environment
• Legislate smart growth / healthy community design
  – Urban Management, Sustainable Development and Smart Growth - Gateway to International Best Practices and Innovations
• Talk about ‘systems’ perspective of community wellness; beyond health, bridge across silos
  – International Healthy Cities Foundation
• Address zoning issues to help bring more equity to neighborhoods

Housing
• Address housing policies as part of health policies

Transportation
• Create subsidies for public transportation

Natural environment
• Integrate solutions into climate change legislation
  – EPA Takes Final Step in Phaseout of Leaded Gasoline
  – Give a Hoot About How to Stop Global Warming

Food
• Use accreditation to encourage schools and day care to serve healthy snacks

Work place
• Create economic development in communities - jobs are critical to health
• Pay people a living wage so they can take care of their health needs

Education
• Advocate U.S. support of whole-child policies, as modeled by European countries
• Focus on early education (0-5 years)
  – Preschool for All: A Priority for American Business Leaders
– **Cost-Effective Investments in Children**
– **Laying the Foundation**
– **Governors Push Access to Preschool**
  • Require each curriculum to discuss race, gender, and class
  – **Education for Diversity: Investing in Systemic Change through Curriculum, Textbooks, and Teachers**
  • Copy the neighborhood watch system into a community child safety program

**Work together**

• Link public health and economic development groups at state and local level
• Public health should build partnerships (not preach) with business, states and communities to build community health initiatives
• Support collaboration between physicians, business, schools, and local governments
• Support local (grassroots) initiatives; coordinate federal and state with local

**Funding**

• Provide incentives for going green at home, school, and community
• Provide moneys through tax reform to provide opportunities for people to exercise
• Change the way federal agencies fund things - stop contributing to fragmentation
  – Start addressing contributory factors
  – Measure outcomes – long-term results can justify sustainable funding
• Create a new New Deal to address the infrastructure issues related to health disparities

**School / Education Plays**

**Pre-school and daycare**

• Re-evaluate 0-5 educational system by zip code
• Identify most at-risk neighborhoods (as they do in France) - start their education a year earlier and assign most experienced teachers to help
  – **Early Childhood Education: Lessons from the States and Abroad: 2005**
  – **How to Prime Kids for School**
  – **Investing in Children: An Early Learning Strategy for Washington State**
• Improve access to good employer- and community-based daycare for all young children
• Push for accessible/available pre-school
• Focus on early education (0-5 years)
  – Preschool for All: A Priority for American Business Leaders
  – Cost-Effective Investments in Children
  – Laying the Foundation
  – Governors Push Access to Preschool

Public school system
• Mandate nutrition guidelines for schools
  – Use accreditation to encourage schools and daycare centers to serve healthy snacks
• Restore physical education in schools K-12
  – Physical Education in Schools – Both Quality and Quantity are Important
  – Mandatory PE in Texas Schools is Victory for Kids
• Push for tobacco-free campuses
  – Tobacco-Free Schools Fact Sheet
  – 100% Tobacco-Free Schools
• Require each curriculum to discuss race, gender, and class
  – Education for Diversity: Investing in Systemic Change through Curriculum, Textbooks, and Teachers
• Enable access to electronic education – this is key to the future
  – Children, The Digital Divide, And Federal Policy
• Provide a nurse at every school
  – Wanted: A Nurse for Every School
• Train teachers in health and/or provide health experts in the school system
  – Wisconsin’s Model Academic Standards for Health Education
• Delink education funding from property taxes
  – Why It Matters: Property Taxes and School Funding
• Increase high school graduation rates
• Encourage schools and industry to collaborate in providing healthy alternatives

Higher education
• Integrate prevention/public health in medical and nursing school curricula
• Reduce costs of higher education / advocate for universal college education
  – Raise the Bar
  – Universal Higher Education
Work Place Plays

Foster health improvement in the work place

- Create a healthier workforce
- Change the work place environment (smoke-free, healthy food, fitness equipment, etc.)
  - [Healthy Work Environments Resource Guide](#)
  - [Creating Healthy States: Building Healthy Worksites](#)
- Hire for health (non-smoking policies)
  - [Hiring Only Nonsmokers Is Legal and Beneficial](#)
- Establish work / life balance
- Equalize time off with pay – typically the higher / whiter levels get more
- Establish four-day work weeks for better mental health
  - [Psychologists are Taking a More Comprehensive Approach to Wellness at Work](#)
- Pay the additional cost of premiums based on employee risk assessment / dependents
  - [County Workers’ Insurance Costs to Be Tied to Their Health Habits](#)

Collaborate across sectors

- Align interests among stakeholders (traditional health organizations, government, business, consumer organizations, etc.)
- Hold corporate and political leaders accountable for improving health in respective sectors
- Offer health tax credits for prevention
  - Businesses and individuals
  - Full coverage for tobacco cessation and weight loss programs
- Work with other corporations to influence health and wellness reform

Address health equity through work place actions

- Establish equitable pay for women
- Hold schools, businesses, and states accountable for the health of their constituents
- Infuse health equity, social determinants of health and environmental health into work

General actions

- Filter every action or proposal through a Health Impact Assessment
  - [Bulletin of the World Health Organization 2003, 81 (6)](#)
- Launch a health initiative within my organization
- Integrate health issues and non-health issues (health in all policies)
- Prevent chronic diseases by reaching low-income workers in small work place settings
- Transform health care with better information for better decisions - provide patients, doctors, government with better info to make better decisions on health
• Help doctors to help patients with advocacy, education, medical liability reform, etc.
• Continue research and education on wellness and prevention

Provider / payor sector
• Facilitate cost reduction of drugs for chronic illness (hypertension, diabetes, asthma, etc.)

Community / Neighborhood Plays

Change the built environment of the community
• Legislatesmart growth / healthy community design
  – Require healthy community design - walkable communities
  – Urban Management, Sustainable Development and Smart Growth - Gateway to International Best Practices and Innovations
• Mandate Health Impact Assessments prior to project development

Improve community food sources
• Decrease the number of “fast food” outlets
  – The Use of Zoning to Restrict Fast Food Outlets: A Potential Strategy to Combat Obesity
• Fix food chain and supply needs in poor communities
• Push for permanent vegetable and fruit carts in low-income neighborhoods

Assess the community to improve health
• Target resources to communities that need them most
• Use a baseline of a healthy community: infant mortality, living wage, school systems
  – Those that are below, give them money, those above get applause
  – One Maryland Tax Credit
• Create a community planning model for community wellness
  – Community Wellness Index for Physical Activity and Nutrition
  – How to Build a Walking Trail
  – Healthy People in Healthy Communities: A Community Planning Guide Using Healthy People 2010
• Talk about ‘systems’ perspective of community wellness; beyond health, bridge across silos
  – International Healthy Cities Foundation

Community involvement
• Empower people in communities to take action for change
• Mobilize mentors to partner with communities in need; include this in grant requirements
• Advocacy organizations need to activate people at the neighborhood level; harness the “rage”;
get into the political process
• Re-engage community organizations with a health message
• Public health should build partnerships (not preach) with business, states and communities to build community health initiatives
• Strategically define and pursue additional partnerships within community
• Mobilize communities to remove barriers and make it easier to incorporate change
  – A Vision For a Healthier America: What the States Can Do
• Incorporate substance abuse into the larger health agenda; environmental strategies like billboard control, places for young to congregate, different strategies for public housing
• Provide incentives for going green at home, at school, and in the community
• Promote “block nursing” for neighborhoods or “wellness champions” in communities; provide training, resources, and approaches to promote wellness in the community
  – Block Nurse Program
  – Healthy Native Community Partnership Supports Regional Community Wellness Champion Forums
• Train community members to do procedures for basic health screening and services
  – The Community Health Worker’s Heart Disease and Stroke Prevention Sourcebook

Promote equity in the neighborhood/community
• Pursue policies that can promote community connectedness to impact health disparities
  – Bring in family foundations to address issues at hand (Gates Foundation)
  – Collect and analyze data by the local government and encourage the local communities to use this data
  – Address housing policies as part of health policies
• Create support for new policies by explaining the costs of inequality and poor health
  – Expand beyond personal responsibility to focus on community responsibility
• Address the health disparities of elderly populations and rural communities
• Ensure that we have equality within neighborhood facilities
• Bring more equity to neighborhoods through zoning and property taxes

Community economic development and engagement of the business sector
• Create economic development in communities - jobs are critical to health
• Foster improved distribution of business and employment - increase access to jobs and products
• Persuade purchasers and payers of health care to invest in the health of the communities they serve
• Be model employment site for employees, community, and state
Community-based education initiatives

- Use schools to broaden access to physical activity in community
- Improve access to good employer- and community-based daycare for all young children
- Copy the neighborhood watch system into a community child safety program
- Identify most at-risk neighborhoods (as they do in France) - start their education a year earlier and assign most experienced teachers to help
  - Early Childhood Education: Lessons from the States and Abroad: 2005
  - How to Prime Kids for School
  - Investing in Children: An Early Learning Strategy for Washington State

Coaching: Leadership

Work place

- Launch a health initiative within my organization
- Work with other corporations to influence health and wellness reform
- Gain insight for other industry leaders on the success of their health and wellness initiatives
- Work toward strategic approaches to realizing the vision

Leadership

- Push for serious leadership at national level
- Hold corporate and political leaders accountable for improving health in respective sectors
- Seek leadership that is willing to take on tensions between societal good and individual rights and hold business and government leaders accountable
- Garner the political will to give up silos in order to get appropriate funding
- Establish the authority to make change
- Establish a federal health czar
- Empower local leaders in disenfranchised communities
- Understand that there’s imminent change in the political system
  - Avoid branding
  - Focus on the power at the local and state level
  - Think about timing, do groundwork during the transition
- We need a health revolution. We can’t wait for evolution

Disparities

- Work harder on minority recruitment
- Follow up with Robert Wood Johnson Foundation staff to explore opportunities to reduce health disparities via the work place
- Advocate for social determinants perspective in professional roles
Broadcasts: Media Coverage

Media
- Shift the focus from health care to wellness; create a paradigm shift to value health
- Engage media to change norms
- Promote health as a national priority
- Use the term “community health” rather than “public health” – it’s more accurate and encompassing
- Develop web-based tools that can be used by others
- Incorporate substance abuse into the larger health agenda; environmental strategies like billboard control, places for young to congregate, different strategies for public housing

Sponsors, Patrons, and Ticket Sales: Funding Strategies

Education
- Equalize funding for public education
- Support federal funding for nurses in every school

Community
- Get targeted resources to communities that need them most
- Fund safe and walkable communities
- Equalize recreation resources
- Provide moneys through tax reform to provide opportunities for people to exercise
- Create economic development in communities - jobs are critical to health
- Encourage employers to invest in the communities where their employees live
- Provide incentives for development in economically challenged communities
- Link public health and economic development groups at state and local level
- Get private employers to invest in communities; raise awareness of things business can do

Business
- Encourage businesses to be partners by offering tax credits and other incentives
- Seek a solution/balance between profit making and health-profit making

Health care
- Change the way insurance is provided, designated
- Incentivize primary care with health care reimbursement dollars
- Invest in health, rather than focusing on the cost of health care
- Secure adequate investment in public health wellness
• Pay for medical outcomes rather than services
• Reorganize federal funding to support prevention

Change funding
• Generate revenue around health (productivity; community wellness)
• Change the way federal agencies fund things - stop contributing to fragmentation
  – Start addressing contributory factors
  – Measure outcomes – long-term results can justify sustainable funding
• Ensure pilot programs have sufficient money to be sustainable
• Distribute food stamps more often (people buy more processed items at the end of the month to stretch out their food budget)
• Incentivize group changes, rather than individual
• Reform campaign financing

Scoreboard: Accountability/Measurement

Accountability
Accountable leadership
• Accountability must be linked to authority
• Leaders must be accountable and responsible

Accountable health care
• 60 percent of money to hospitals coming from welfare/government – but no expectations around return on investment
• Pay for performance
  – Indiana example: using carrot and stick approach—professional pay is related to health outcome
  • The Quality Health First® Program of Indiana
  – Pay for medical outcomes rather than services

Accountable businesses/corporations
• Business doesn’t see the ROI on tax investments to support community infrastructure development. It’s an accountability issue—business wants to maintain control of their resources
• CDC needs to have an accountability framework that can:
  – Demonstrate future value of current investments in health improvement
  – Produce short term accomplishments
  – Project future impact
  – Business case more complex - need to have dialogue with business community
• Valuing Health Outcomes: Policy Choices and Technical Issues

Accountable government and community services
• Hold schools, businesses and states accountable for the health of their constituents
• Use accreditation to encourage schools and day care to serve healthy snacks
• Use a baseline of a healthy community: infant mortality, living wage, school systems
  – Those that are below, give them money, those above get applause
  – One Maryland Tax Credit
• Governments don’t hold themselves accountable
• Regulations around standards of care – federal and state level

Measurement

Metrics
• Seek consensus and metrics on definitions of health, healthy nation
  – Healthy People Leading Health Indicators
• Develop better HIA methods and measures
• Make sure metrics are timely and available at the community level
  – Data Set Directory of Social Determinants of Health at the Local Level
• Demonstrate future value of current investments in health improvement
• Develop evidence-based database around social impact; make these things better known
• Gather knowledge of what works - behavior change and health impact
• Review current policies and evaluate their adverse affects on communities
• Help labor understand the health implications of wages, working conditions, job strain, etc.

Community measures
• Create a community planning model for community wellness
  – Community Wellness Index for Physical Activity and Nutrition
  – How to Build a Walking Trail
• Communicate the tangible and compelling health benefits of land use work
• Measure the health impact of bike paths, sidewalks, walking trails, walkable communities, percentage of people making a living wage, etc.
• Use geo-coding to assess community health assets / liabilities
• Make the compelling case for businesses to understand community health, not workforce health
HOW?
Coaching: Leadership

“We need a health revolution. We can’t wait for evolution.”
Work place

- Be even more bold in leadership in my organization
- Give multiple corporate presentations to business leaders around work place well-being
- Promote well-being. We can call it well-being. It’s accepted
- Work with other corporations to influence health and wellness reform
- Gain insight for other industry leaders on the success of their health and wellness initiatives
- Get all sides of the table involved in contributing to our healthy workforce
- Push discussion at work about being model for employees, community and state
- Talk to local chamber of commerce regarding engagement with Partnership for Prevention and add leadership development to their strategic planning agenda
- Counsel staff to broaden their horizons when addressing health policy issues (incorporate “health,” prevention, socioeconomic issues, and Web links to raise awareness)
- Identify the common denominator, leave differences at the door – and drive execution
- Work with my leadership to develop policy to influence legislation promoting wellness
- Work toward strategic approaches to realizing the vision

Leadership

- Push for serious leadership at national level
- Hold corporate and political leaders accountable for improving health in respective sectors
- Seek leadership that is willing to take on tensions between societal good and individual rights and hold business and government leaders accountable
- Garner the political will to give up silos in order to get appropriate funding
- Establish the authority to make change
- Establish a federal health czar
- Support accountable and responsible leadership
- Mobilize state/local officials; make public commitment
- Empower local leaders in disenfranchised communities
- Incorporate these ideas in our leadership development programs
- Develop collaboration training
- Understand that there’s imminent change in the political system
  - Avoid branding
  - Focus on the power at the local and state level
  - Think about timing, do groundwork during the transition
- Get everyone to the table
- Tell the stories of companies getting it right
- We need a health revolution. We can’t wait for evolution
Develop/share information

- Build energy and excitement within staff
- Share with staff, board and constituents about presentations
  - Discuss implications / opportunities in current scope of work. Brainstorm future opportunities. Use “leaderspeak”
- Teach my team leadership communication skills
- Extend common messaging with local government agencies
- Share with leaders in my organization
- Learn more about the Prevention Partnership Leading by Example Initiative
- Develop scenarios/success stories with more emotional content

Disparities

- Work harder on minority recruitment
- Follow up with Robert Wood Johnson Foundation staff to explore opportunities to reduce health disparities via the work place
- Work with non-health agencies to develop a health equity lens to evaluate their work
- Advocate for social determinants perspective in professional roles
- Stand for health equity and promote it not only in my organization but also in my church
- Communicate that inequality is not tolerated
- Remain positive while working through issues with disparities and hard-to-resolve problems

Unnatural Causes

- Watch Unnatural Causes
  - Unnatural Causes ... Is Inequality Making Us Sick?
- Coordinate a screening and discussion of Unnatural Causes
  - In the worksite
  - In the classroom / incorporate into curriculum
  - With constituents / grantees
- Use Unnatural Causes materials, including fact sheets and shortened versions

Alliance for the Healiest Nation (AHN)

- Join, promote and support Alliance for the Healiest Nation
- Share information about the Alliance for the Healiest Nation with
  - Board
  - Coalition
  - Colleagues / employer / HR director / worksite
  - Local officials and congressional representatives
• Integrate Alliance for the Healthiest Nation concepts into
  – Technical assistance
  – Article for association journal
  – Presentations to professional field
  – Globalization efforts
  – Our agenda / larger health agenda
• Move concepts of AHN to action
• Build partnerships that support/sustain AHN
• Blog about the Alliance
• Invite Alliance for the Healthiest Nation representative to speak
Broadcasts: Media Coverage

“Identify an ‘inconvenient moment’ for this campaign.”
Media

- Increase media attention on what’s working at the state/local level
  - (Portland/biking)
- Disseminate lessons learned and promising practices to community
- Get large and small success stories out there
- Share goals and successes through outreach
- Develop scenarios/success stories with more emotional content
- Support grassroots communications to inform people when services are available
- Develop good public health marketing
- Shift the focus from health care to wellness; create a paradigm shift to value health
- Engage media to change norms
- Promote health as a national priority
- Use the term “community health” rather than “public health” – it’s more accurate and encompassing
- Use messaging to educate people that we’re all in this boat together
- Define what kind of universal health care every American should have the right to
- Define health
- Remain positive while working through issues with disparities and hard-to-resolve problems
- Unveil injustices in health equity and mobilize action
- Create support for new policies by explaining the costs of inequality and poor health
  - Overcome aversions to taxes by explaining benefits of new health initiatives
  - Expand thinking from personal responsibility to community responsibility
- Appeal directly to business – the Return on Investment data is there
- Communicate across governmental issues (transportation, health, education) and across coalitions (non-governmental organizations, for-profits)
- Create a playbook that lists all of these policies - what to do and how to do it
- Develop Web-based tools that can be used by others
- Create a media/messaging opportunity to reach rural communities
- Promote well-being
- Improve consumer food and beverage marketing - offer 2:1 purchasing for healthy products
- Incorporate substance abuse into the larger health agenda; environmental strategies like billboard control, places for young to congregate, different strategies for public housing
- Discuss interpersonal violence and how communities can address it
- Write safety information at an appropriate literacy level
- Reframe Alliance for the Healthiest Nation language to include safety
  - More inclusive of preparedness and criminal justice
  - Test messaging with consumer product safety commission, firefighters, etc.
• Develop common messaging of Alliance for the Healiest Nation themes
• Look for additional and non-traditional opportunities to share our message
• Identify an “inconvenient moment” for this campaign

Campaigns
• “Give a hoot, don’t pollute” campaigns created a broad awareness of health impact
• Tobacco campaigns
• California “soda free summer” ads
• Use of sports figures to promote health

Unnatural Causes
• Watch Unnatural Causes
  – Unnatural Causes ... Is Inequality Making Us Sick?
• Coordinate a screening and discussion of Unnatural Causes
  – In the worksite
  – With faith community
  – With family
  – In the neighborhood / community
  – In the classroom / incorporate into curriculum
  – With constituents / grantees
• Use Unnatural Causes materials, including fact sheets and shortened versions
Interference: Barriers and Gaps

“There’s a difference between what people know and what they do.”
What is missing? What are the gaps?

Racial / ethnic disparities
- Disparities
- Treatment inequality
- Health care providers cultural competence
- Health disparity – lack of primary medical homes for diverse populations
- Racial disparities / cultural sensitivity

Workforce
- Assessment of health care workforce
- Number of health professionals in underserved areas (urban/rural)
- Recruitment into health professions
- Workforce shortages
- Public health service corps is too small including public health advisors
- Communicate with health care workforce efficiently and effectively
- Who’s going to do this work? Workforce gap
- Health care providers – gap in training with regard to health promotion / prevention

Cross-sectoral / inclusiveness
- Use of nontraditional settings to get the word out - hair salons, barber shops, churches, etc.
- Focus on all sectors, comprehensive approach to policies
- Need to be inclusive of all
- Transcend so called “competing interests,” – find the common ground
- Find way to get people to agree to travel the path together
- Engaging and working with the other sectors
- More community engagement
- Schools working with industry to provide healthy alternatives
- Alignment of interest among stakeholders (traditional health organizations, government, business, consumer organizations, etc.)
- Engagement among community in all different sectors instead of just among one
- Can bring an non-traditional problem health people/groups
- Community is left out of discussion
- Local level decisions instead of system wide
- Expansion/need to integrate w social, behavioral cultural
- Engagement of Department of Education
- Broader conversation with non-health sector
• Engage younger generation in a way that gets through to them
• Faith community missing?
• Look at all sectors that need to be involved and try to find common ground between all sectors
• Department of Education and other sectors are not here. How to integrate with schools?

**Time pressures**

• Need a long enough time horizon to think and change
• Need a long term approach to health that gets to people where they are
• Costs are short term and benefits are long term, no one really owns life town health
• Think in terms of long time horizon to effect change.
• How do you address shift of long term issues and current issues?

**Measurement**

• Rewards, standards and metrics, accomplishments
• There is no metric that quickly and easily translates into what is a healthy nation
• Knowledge of what works – behavior change and health impact
• Seek consensus and metrics on definitions of health, healthy nation
  – [Healthy People Leading Health Indicators](#)
• Lacking measures – data or measures or turn data into quantifiable benefit
• HIA methods still developmental
• No consensus and metrics on definitions of health
• Hard to convince citizens that health is a metric for other things
• Metrics – need better – but the sad thing is that the metrics we currently have aren’t timely and aren’t available at the community level
• Lack of data
• Lack of electronic and clinical standards on surveillance – cross sectors
• We need an impact tools to make sure policy gets integrated
• Assess impact of policy change on health expertise

**Mental health**

• Physical/mental health integration
• Health ↔ stress / mental health links
• New tools for mental health
• Mental health’s affect on physical health
• Depression
• Self esteem
Leadership

- Lack of serious leadership at national level
- Hold corporate and political leaders accountable for improving health in respective sectors
- Political will to give to our silos-give comprehensive funding
- Mobilizing state/local officials – Making public commitment
- When federal agencies come out with evidence-based suggestions they are not part of U.S. Preventive Services Task Force doesn’t enforce it
- Tensions experienced between societal good and individual rights – seek leadership that understands public/societal good – willing to take on public reaction to “restrictions of personal behavior”
- Leadership and accountability – CEOs to be accountable or local leadership to be held accountable
- We don’t have leadership at the national level
- The political will to give up silos in order to get appropriate funding
- Having authority to make change

Health service provision

- Integrate vertical health silos
- Better technology for keeping personal health records
- Duplicative/repetitive service
- Seeing health only as health care

Finance

- Way insurance is provided, designated
- Incentives concentrate on individual changes
- Don’t know the solution between profit making and health-profit making is primary and we don’t know how to solve that
- Lack of adequate investment in public health wellness.
- Focus is on cost of health care not investment in health
- We need to articulate value, cost effectiveness
- Propensity to take money is critical – too many unfunded mandates/unsustained pilot programs that aren’t sustainable because of lack of funds
- Balance between profit making and health
- Health care reimbursement=dollars to reward primary care
- Campaign financing reform is needed
Media

- Media commitment to changing norms
- Increasing media attention to what’s working state/locals (Portland/biking)
- Not been effective at getting messages out to grassroots
- Grassroots communications: even when services are available we can’t afford to inform people about them
- Lack of good public health marketing

Community

- Looking at the community
- Lack of community involvement and understanding in how the individuals contribute to the issue

Collaboration (or lack of)

- More emphasis on competition than collaboration
- Don’t have all the players we need
- How to truly collaborate, not just one taking the lead
- Structural obstacles to collaboration between federal (state and local too) agencies (Too many beltway bandits)
- Truly collaborate and provide benefits to collaborate

“What we don’t know”

- Lack of understanding how the individual fits into/plays into the HC system
- We really don’t know how to effectively change behavior
- Challenge to create motivators that people “buy”
- Knowledge gap between what works
- We underestimate the influence of culture-gap in cultural competence – not enough understanding

Common language

- Common language at health reform
- Common language – what is policy?
Other

- Accountability must be linked to authority to hold people accountable
- Most in PH field to talk about population based interventions
- Expert to analyze impact of policy change
- Taming the bureaucracy beast
- Companies get sued for monitoring employees’ BMI, for example
- Health promoting – use non-conventional methods
- Innovative programs that can be easily replicated
- Specifics - violence prevention, environmental health, vulnerable populations, substance abuse prevention
- Need policies which are nationwide
- Educating women and parents
- Gap between health of individuals and communities
- Research on how to get research USED – bench to bedside – hard to get funded and hard to do
“What if everyone had a job, was paid reasonably well, entered school and finished school and their living environments were clean – aren’t these the steps that are needed to give health for all?”
Education

- Equalize funding for public education
- Support federal funding for nurses in every school

Community

- Get targeted resources to communities that need them most
- Fund safe and walkable communities
- Equalize recreation resources
- Provide moneys through tax reform to provide opportunities for people to exercise
- Use transportation money to improve sidewalks
- Provide incentives for full service grocery stores to locate in inner city areas
  - Economic Stimulus Bill to Attract Supermarkets to Underserved Urban Areas
  - The Fresh Food Financing Initiative
- Support tax subsidies/incentives to distribute fresh/organic food into the inner cities
  - Urban Farms: Oasis in the Inner City
- Provide grants for community gardening
  - Food Security Learning Center: Community Gardens
- Give grants to interfaith and care-giving communities
- Fund local, regional coalitions for management and structural support
- Involve big employers in the community; think of health and economic development
- Create economic development in communities - jobs are critical to health
- Encourage employers to invest in the communities where their employees live
- Provide incentives for development in economically challenged communities
- Link public health and economic development groups at state and local level
- Get private employers to invest in communities; raise awareness of things business can do

Business

- Encourage businesses to be partners by offering tax credits and other incentives
- Seek a solution/balance between profit making and health-profit making
- Use the power of purchasing policies to work with only healthy organizations/environments
- Encourage companies to pay for premiums based on employee risk assessment/dependents
- Develop a “Best Buys for Health” guide for CEOs

Health care

- Change the way insurance is provided, designated
- Incentivize primary care with health care reimbursement dollars
- Invest in health, rather than focusing on the cost of health care
• Secure adequate investment in public health wellness
• Pay for medical outcomes rather than services
• Reorganize federal funding to support prevention

Change funding

• Generate revenue around health (productivity; community wellness)
• Provide support for groups with limited resources to apply for funding
• Support and fund policies that are already in existence (Head Start)
• Create tax incentives that produce health benefits (raising taxes on cigarettes)
  – [Cigarette Tax Increase Could Have Large Public Health Impact](#)
  – [Benefits From Raising the Cigarette Tax in Nine Southern States to meet the National State Average](#)
• Create support for new policies by explaining the costs of inequality and poor health
  – Overcome aversions to taxes by explaining benefits of new health initiatives
  – Articulate value, cost effectiveness
• Change the way federal agencies fund things - stop contributing to fragmentation
  – Start addressing contributory factors
  – Measure outcomes – long-term results can justify sustainable funding
• Ensure pilot programs have sufficient money to be sustainable
• Distribute food stamps more often (people buy more processed items at the end of the month to stretch out their food budget)
• Incentivize group changes, rather than individual
• Recommended health and social initiative funding sources include:
  – [CDC's Steps Program](#)
  – [W.K. Kellogg Foundation health grants](#)
  – [Robert Wood Johnson Foundation Program Areas](#)
  – [SAMHSA - Underage Drinking](#)
  – [SAMHSA – Strategies and Materials for Your Community](#)
  – [SAMHSA - The Safe Schools Healthy Students Initiative](#)
• Reform campaign financing
Scoreboard: Accountability/Measurement

“All policies will be vetted.”
Accountability

Accountable leadership

- Accountability must be linked to authority
- Leaders must be accountable and responsible

Accountable health care

- Look at how our public health policies impact the public’s wellness
- 60 percent of money to hospitals coming from welfare/government – but no expectations around return on investment
- Pay for performance
  - Indiana example: using carrot and stick approach—professional pay is related to health outcome
    - The Quality Health First® Program of Indiana
  - Pay for medical outcomes rather than services

Accountable businesses/corporations

- Support boards, leaders, and governments that hold corporations accountable for maintaining the health of their populations
- Business doesn’t see the ROI on tax investments to support community infrastructure development. It’s an accountability issue—business wants to maintain control of their resources
- Corporate Designations
  - Purchasing policies to work with only healthy organizations or in healthy environments
  - Choosing where to do business
  - Scorecard on health of companies—various types of employer measurements
    - The Fittest Companies in America
- CDC needs to have an accountability framework that can:
  - Demonstrate future value of current investments in health improvement
  - Produce short term accomplishments
  - Project future impact
  - Business case more complex - need to have dialogue with business community
    - Valuing Health Outcomes: Policy Choices and Technical Issues

Accountable government and community services

- Hold schools, businesses and states accountable for the health of their constituents
- Use accreditation to encourage schools and day care to serve healthy snacks
- Use a baseline of a healthy community: infant mortality, living wage, school systems
– Those that are below, give them money, those above get applause
– One Maryland Tax Credit

• Governments don’t hold themselves accountable
• Regulations around standards of care – federal and state level
• Add incentives around collaboration instead of working at cross-purposes
• Transparency – ask about costs of health care

Measurement

Metrics

• Make U.S. No. 1 by all health indicators
• Seek consensus and metrics on definitions of health, healthy nation
  – Healthy People Leading Health Indicators
• Develop better HIA methods and measures
• Make sure metrics are timely and available at the community level
  – Data Set Directory of Social Determinants of Health at the Local Level
• Convince citizens that health is a metric for other things
• Demonstrate future value of current investments in health improvement
• Develop evidence-based database around social impact; make these things better known
• Gather knowledge of what works - behavior change and health impact
• Focus on rewards, standards and metrics, accomplishments
• Promote a scorecard to compare the health of companies
  – The Fittest Companies in America

Health Impact Assessments

• Filter every action or proposal through a Health Impact Assessment
• Tie federal funding (Housing and Urban Development, Department of the Interior, Department of Agriculture, Department of Transportation, etc.) to health impacts
  – Like environmentalists did with Environmental Impact Statements
• Review current policies and evaluate their adverse affects on communities
• Help labor understand the health implications of wages, working conditions, job strain, etc.
• Follow the example of countries in the EU - especially Finland and Sweden – they’ve integrated health into all of their policies (agriculture)
  – Health In All Policies: Prospects and Potentials
• Department of Health and Human Services should issue an Executive Order for all departments / agencies to evaluate the public health impact of their actions / policies
  – Next administration: establish a cabinet-level task force across all agencies

Community measures

• Create a community planning model for community wellness
  – Community Wellness Index for Physical Activity and Nutrition
  – How to Build a Walking Trail
  – Healthy People in Healthy Communities: A Community Planning Guide Using Healthy People 2010

• Change the paradigm: coherent strategy versus fragmented
• Talk about ‘systems’ perspective of community wellness; beyond health, bridge across silos
  – International Healthy Cities Foundation

• Legislate smart growth / healthy community design
  – Require healthy community design - walkable communities
  – Urban Management, Sustainable Development and Smart Growth - Gateway to International Best Practices and Innovations

• Communicate the tangible and compelling health benefits of land use work
• Measure the health impact of bike paths, sidewalks, walking trails, walkable communities, percentage of people making a living wage, etc.
• Use geo-coding to assess community health assets / liabilities
• Make the compelling case for businesses to understand community health, not workforce health
• Make sure policies improve sustainability and financing – don’t focus on short-term fixes
WHY?
The Right Plays at the Right Time: Why now?

“I spend lots of time in rooms like this, but it never feels this real. This is IT—the time is right and we’re writing stuff down and we’re making real commitments.”
What makes the actions in this playbook critical/urgent right now?

**Cost**
- Resources going to end-stage rather than preventive
- Business is paying more money for health premiums
- Increase in health cost as a percent of GDP can’t be sustained
- Economics
- Impact of cost of innovation

**Timing**
- Society is at a tipping point in many areas (business, public, etc.)
- Time to take holistic approach
- Election
- Politics

**Demographics**
- Aging of Baby Boomers
- Forward thinking of different generations and their barriers – Gen X, Y, etc.

**Evidence**
- More evidence than ever that we must link these with policies for societal change
- Evidence base is getting more attention and awareness of impact
- Science is better than ever (esp. the business case) ~ Community Guide

**Business case is strong**
- Productivity
- Competitive advantage

**Other**
- Lack of coordination between public and business resources
- Health disparities are on the agenda
- U.S. is one of the least healthy nations (34) among developed nations
- Sick care system
- Energy crisis + economic depression + food crisis = opportunity for lifestyle change
- Preparedness/travel/connectivity
What is the Alliance for the Healthiest Nation?

We are a group of local, state, and national entities who have joined forces to build the truly integrated 21st century health system required for the U.S. to become the healthiest nation in the world.

What is our vision?

An integrated national system where the participants value health and work together to achieve optimal health for all. A comprehensive system that prioritizes prevention, and protects people and communities from emerging threats.

What organizations constitute the Alliance for the Healthiest Nation?

The three initial members are the Association of State and Territorial Health Officials, the Centers for Disease Control and Prevention and the National Association of County and City Health Officials. We are actively engaging partners from a variety of fields, including public health, medicine, third party payors, business, policy, government and academia.

How are we working to achieve our vision?

We have deliberately taken a “bottom up” or grassroots approach to the challenge...an approach that will engage consumers of the current system (individuals and businesses) and empower them to take responsibility for creating change within their piece of the system...whether that be “the healthiest me,” “the healthiest family,” “the healthiest business,” or “the healthiest community.” Given that the founding organizations are grounded in public health, we have chosen three specific routes to making the U.S. the healthiest nation:

• Change the debate from a focus on “health care” (with its discussions of access and cost) to a more proactive, prevention-focused national discussion on “health.”
• Change how we define a successful system...from measuring disease and “unhealthiness” to tracking measures of health.
• Engage the users of the system where they live, work, shop and play, providing specific actions that they can take immediately to create their healthiest home, healthiest community, etc.

We fully intend our efforts to be complementary to the more “top down” efforts already hard at work.

What are we doing right now?

To change the debate...

• We are developing a single vision of the Alliance for the Healthiest Nation, focused on prevention and health, with supporting messaging, communications tools, and an integrated communications plan.
• We are beginning to “connect the dots” across related efforts in order to break down silos and minimize duplication of efforts.
• We are continuing to advocate for “health in all policies” ... looking for opportunities to include health in a variety of legislative debates. One of our goals is to include a discussion of health in the 2009 State of the Union Address.

• We are working with partner organizations to identify their research and information needs, then mapping those needs against research available and/or in progress.

**To change the metrics...**

• We will leverage the work being done by Gallup and other organizations to establish an “Index of Well-Being.”

• We will also work with consumers, businesses, and our other partners to establish/leverage metrics that make sense to them, and are relevant to our “bottom-up” approach.

**To engage users...**

• We are engaging with representatives from across a variety of fields to hear their point of view on building the Alliance for the Healthiest Nation, understand what they are currently doing within their own organizations, and identify how the Alliance can help them.

• We are creating a clearinghouse of information re: related efforts, best practices, and available supporting research.

• We are working to create the “pull” ... building the case for action with a national, consumer, and community-focused campaign to launch in fall 2008.

• We are facilitating a horizontal and vertical integration ... establishing connections and building community.

• We are developing and disseminating training at the community level (meta leadership, best practices, learning communities).

**What are concrete next steps for each sector? For BUSINESS**

• Join the Alliance for the Healthiest Nation advisory committee and help define the plan to transform the health system from the bottom up.

  — [Alliance for the Healthiest Nation Membership Form](#)

• Make small changes that will make a huge difference in the health of your employees and your community ... changes that may ultimately contribute to your bottom line, as well. You may already be instituting some of these practices as you build a more sustainable approach to business.

• Work with the Alliance for the Healthiest Nation to support the consumer and community focused campaign through your own communications and community involvement.

• Share the resources dedicated to your own transformation efforts (research, staff, financial resources, etc).
For CONSUMERS

- Join the Alliance for the Healthiest Nation advisory committee and help define the plan to transform the health system from the bottom up.
  - [Alliance for the Healthiest Nation Membership Form](www.healthiestnation.org)
- Visit “(www.healthiestnation.org) to learn about the “Top 10” things you can do right now to become a “healthier me” and build a “healthier community”.
- How can they help change the policy debate?

For PUBLIC HEALTH ORGANIZATIONS and PROFESSIONALS

- Join a Alliance for the Healthiest Nation advisory committee and help define the plan to transform the health system from the bottom up.
- Tell us what you are doing within your community to empower consumers and businesses to create “a healthier me” and a “healthier community”
- How can they help change the policy debate?
This project was sponsored by the Centers for Disease Control and Prevention.

The Georgia Health Policy Center (GHPC) is a leading independent resource for public and private organizations and government entities seeking evidence-based research, program development and policy guidance to improve health status at the community level. The Center was established in 1995 as a research division of Georgia State University’s Andrew Young School of Policy Studies in Atlanta, Georgia. For more information about the Center, go to www.gsu.edu/ghpc.

Alliance for the Healthiest Nation (AHN) is a group of local, state, and national entities who have joined forces to build the truly integrated 21st century health system required for the U.S. to become the healthiest nation in the world. For more information about AHN, go to www.healthiestnation.org.