History of HIP Partnership

• Existed since 1995.
• Founding partners
  – Washtenaw County Public Health (WCPH), Chelsea Community Hospital, St. Joe’s Ann Arbor, Michigan Medicine
• Funded countywide “HIP survey” every five years
• In 2007, adopted health improvement objectives for the year 2020
• In 2013, adopted goals and objectives through a CHNA and CHIP.
• The Community Health Committee (CHC) is the HIP partnership’s community coalition
• Worked on many equity focused projects – for example
  – Ypsilanti Health Coalition, Ypsilanti Farmers’ Market, Latino Health Survey, infant mortality reduction
Successes in Washtenaw County

- Productive collaboration
- Evidence-based practices
- Improved health outcomes
  - Smoking rates
  - Infant mortality
  - Recent decrease in obesity rates
Definitions

• Health inequities
  – *Systemic, avoidable, unfair and unjust* differences in health status and mortality rates

• Community Groups
  – 2015 HIP Survey, the Latino Health Survey (EBV), the Opportunity Index, Community Commons
  – experience with existing community based networks,
  – identified five community groups that experienced systemic, avoidable, unfair and unjust health differences

• Social Determinants of Health (SDOH)
  – Conditions in the places where people live, learn, work, and play affect a wide range of health risks and outcomes (e.g. housing, transportation, parks, etc).
County Health Rankings

- 7th healthiest (of 83 counties)
- 6th in children in poverty
- 80th in income inequality
- 75th in severe housing problems
Unjust Health Disparities

Average Age of Death by Race/Ethnicity in Washtenaw County

- **White** – 75
- **Black** – 62
- **Latino** – 55

Zip Code More Important Than Genetic Code

Childhood poverty rate

Educational Attainment

Percentage African-American

Unemployment

Community Commons – Washtenaw County Profile  http://www.communitycommons.org/maps-data/
Opportunity Index

http://www.opportunitywashtenaw.org/opportunity-index.html
Goals

• Identify and address community-identified health equity priorities.

• Broaden the definition of health
  – Support and guide the three groups that create health in addressing health inequities.

• Transform the community health planning process by embedding community voice.
Systemic Change vs. Intervention

**Social Conditions**
Social inequities occur when a person or group is treated unfairly because of race, gender, class, sexual orientation, or immigration status.

**Economic Conditions**
Institutions such as governments, churches, corporations, or schools use their authority to create unequal opportunities among groups of people.

**Environmental Conditions**
Where you live affects your health. Lower income neighborhoods tend to be in poor social, economic, and physical conditions.

**Health Behaviors**
Smoking, poor nutrition, and lack of exercise are all behaviors that may lead to poor health. Social, economic, and environmental conditions affect health knowledge and health behaviors.

**Disease or Injury**
Chronic disease or injury can result from inequities and health behaviors. Genetics also affect health differences.

**Mortality**
Your social status, economic opportunities, where you live, and health behaviors all affect life expectancy.

**Affected by Access to Quality Healthcare**
Current Health Dynamic

- Government
- SDOH Organizations
- Community
- Elected Officials
- Institutions
- Funders
Future Health Dynamic

- Community
- Government
  - SDOH
  - Organizations
- Elected Officials
  - Institutions
  - Funders
Community Empowerment → Health Equity

- Engaging & supporting leaders
- Collaboratively identifying challenges
- Supporting place-based interventions
Description

- A continuous process resulting in a five year plan
  1. Listen for needs assessment
  2. Do for implementation plan
  3. Evaluate effectiveness of process
     - HIP Survey data, Opportunity Index

- Guiding Team is organizing body

Health Equity

- Community
- Decision makers (Elected officials, institutions, foundations)
- Sectors working in social determinants of health
- Guiding team

Planning  Action  Evaluation

Improved Community Health
Guiding Team  
(formerly HIP Coordinating)

- YMCA (CHC Co-Chair)
- Corner Health/Ozone (CHC-Co-Chair)
- Washtenaw County Public Health
- UMHS
- St. Joe’s Hospital
- United Way
- 5 Healthy Towns
- Washtenaw Intermediate School District
- Michigan Institute for Clinical Health Research (MICHR)
- EMU
- Washtenaw County Sheriff’s Office
- Washtenaw County Office of Community and Economic Development
- Washtenaw County Parks
- Washtenaw Area Transportation Study (WATS)
- Ann Arbor Area Community Foundation
- Washtenaw Health Initiative
- Blueprint for Aging
- Washtenaw Housing Alliance
Decision Makers

- Board of Commissioners
- Board of Health
- Ann Arbor City Council
- Ypsilanti City Council
- Ypsilanti Township Supervisor
- Superior Township Supervisor
- Northfield Township Supervisors
- Washtenaw County Parks Commission
- Washtenaw Area Transportation Study (WATS)
- US Representative Dingell
- US Senator Stabenow/Peters
- MI Representative Driskell/Irwin/Zemke
- MI Senator Warren
Community Groups

- Five groups will guide the formulation of Community Health Equity Needs Assessment and Implementation Plan. While these groups will primarily provide input specific to their communities, they will also provide a lens through which to look at health needs in other communities and among other demographics.
  - New West Willow Neighborhood Association, Whitmore Lake, South of Michigan Avenue (SOMA) in the City of Ypsilanti, IDEA (Latino residents), Ypsilanti Youth Creating Change (Y2C2)
- If there are additional capacity and resources, there are a number of other groups that could be more actively involved in this process (e.g. Sugarbrook, Augusta Township, Manchester, LeForge, MacArthur Blvd, new immigrants, youth involved in the criminal justice system, low-income seniors).
Year 1

• For the first seven months of year one, the Guiding Team prepares for and attends a meeting with both one of the Decision Makers and at least one of the Community Group leaders. This meeting is
  – facilitated by one community member and one member of the Guiding Team.
  – Purpose of these meetings is to build relationships, learn about the health needs as seen by the Decision Makers, and to bridge the gap between community voice and existing institutions

• For the next five months of year one, the Guiding Team meets with one Community Group each month to hear about their health needs.
Year 2

• For the first seven months of year two, the Guiding Team organizes a meeting with both one of the Decision Makers and at least one of the Community Group leaders. This meeting is
  – facilitated by one community member and one member of the Guiding Team.
  – purpose of these meetings is to discuss findings from the needs assessment and to draft the implementation plan.

• For the next five months of year two, the Guiding Team meets with one Community Group each month to discuss findings from the needs assessment and to draft the implementation plan.
Role for Washtenaw County Public Health

- WCPH will be the primary staff for this process by providing backbone support and coordination.
- Commitments to this process
  - 1 FTE
  - $ towards community work
  - “HIP Internal” – monthly WCPH staff meetings to review progress and alignment of work
  - Meeting attendance from WCPH staff
    - Guiding team – all
    - Guiding team and decision makers – all
    - Guiding team and community groups – all
Role for Washtenaw County Public Health

- Continuously provide data on needs identified by the community and by ongoing surveillance
  - both acute community identified needs (e.g. health care access) as well as longer term, bigger picture health disparities (e.g. childhood obesity).
- Continue ongoing work with numerous community partnerships
  - Including Coordinated Funding, Washtenaw Alliance for Children and Youth (WACY), Washtenaw Health Initiative, among others
- Convene CHC four times/year to complement, amplify this process.
Communications

• Bi-weekly email newsletters
  – press releases, social media, meeting schedules and summaries

• Materials for Community Groups, Decision Makers, and the Guiding Team
Expectations of Guiding Team

- Commitment from Guiding Team members to attend as many meetings as possible
- Financial support is needed
  - approximately $50,000 for two years
- Guiding Team staffing support is needed
  - e.g. organizing meetings, facilitating meetings, developing internal and external communications, analyzing data, taking minutes, etc.
Discussion Questions

• Does this make sense?
• Do you think it could be effective?
• What is it missing?
• Do you have the time to attend meetings?
• Do we have enough resources?