

Healthy Social Systems:

The Base of the HKHC Logic Model

Presented by:

Laura K. Brennan, PhD, MPH



rustria

translate evidence

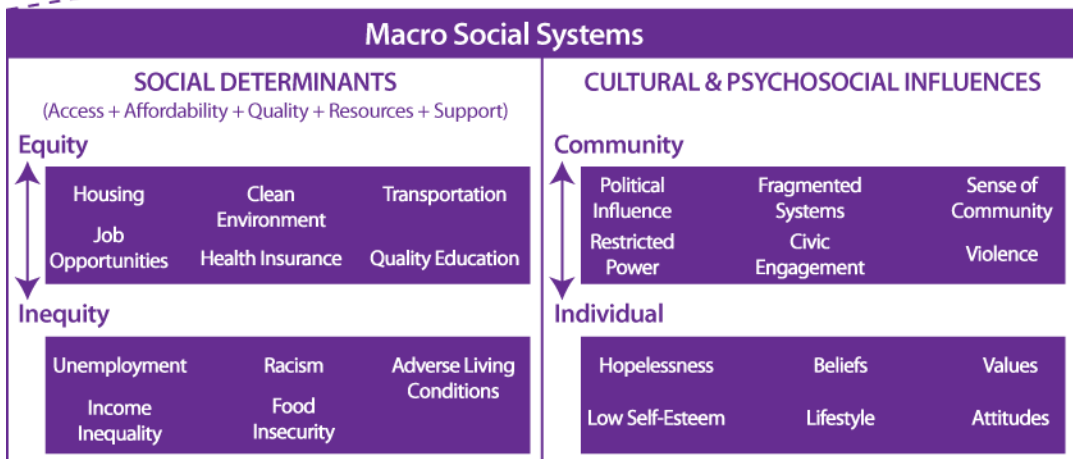
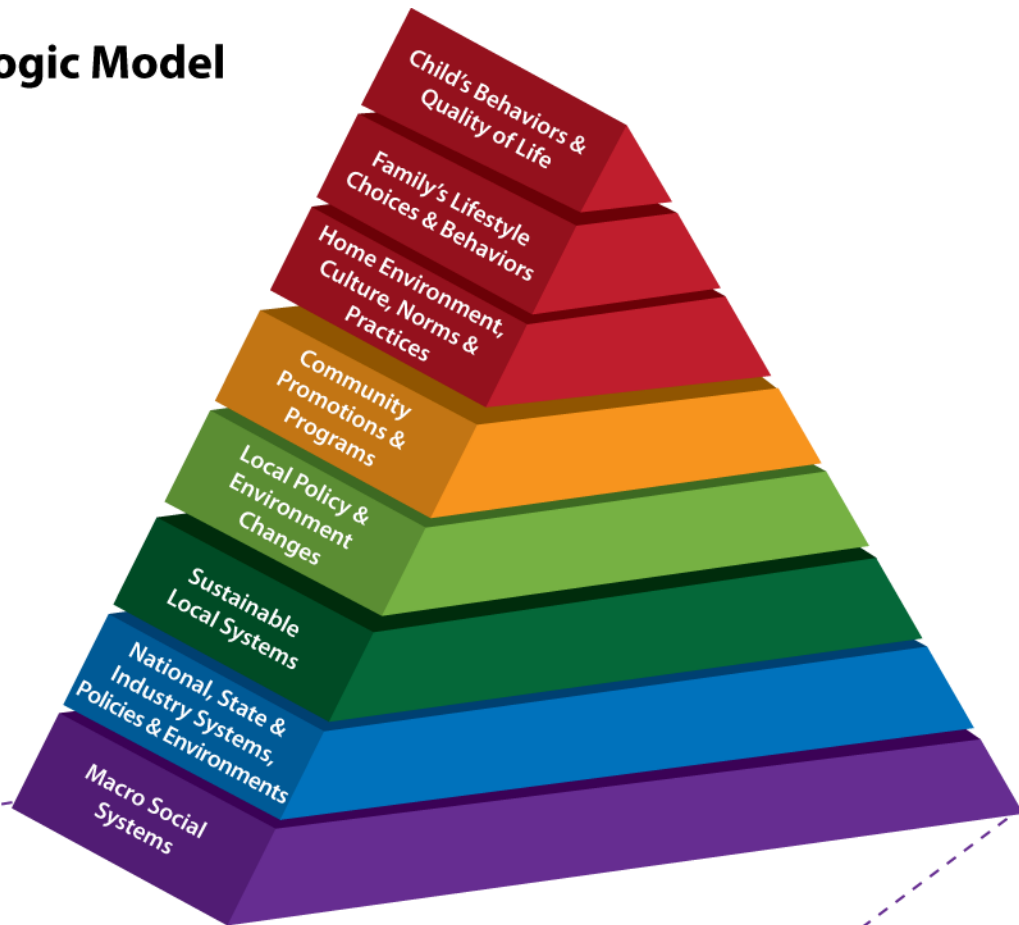
transfer skills

transform health

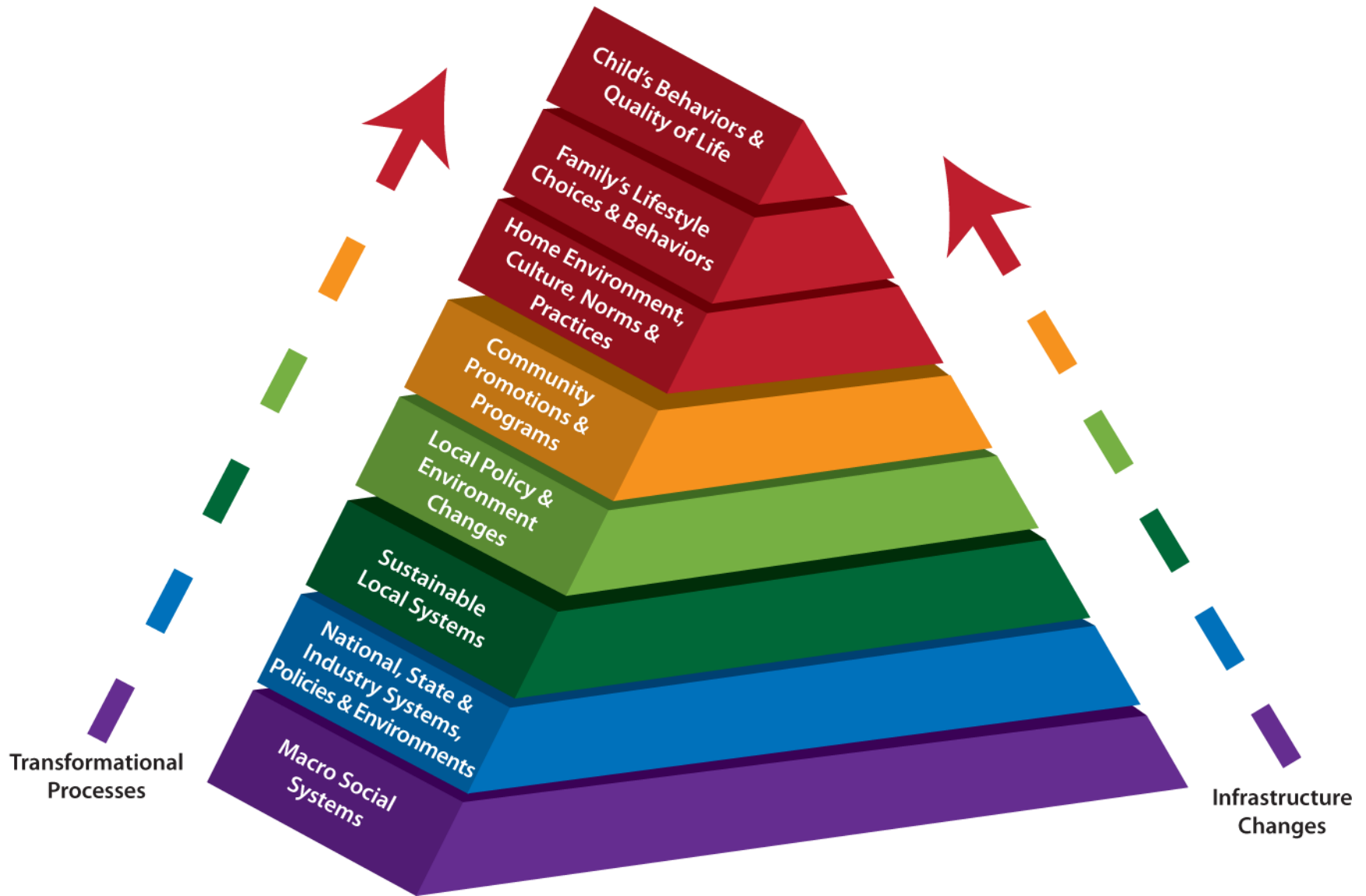
Healthy Kids, Healthy Communities Logic Model



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Promoting Health Equity
A Resource to Help Communities Address
Social Determinants of Health

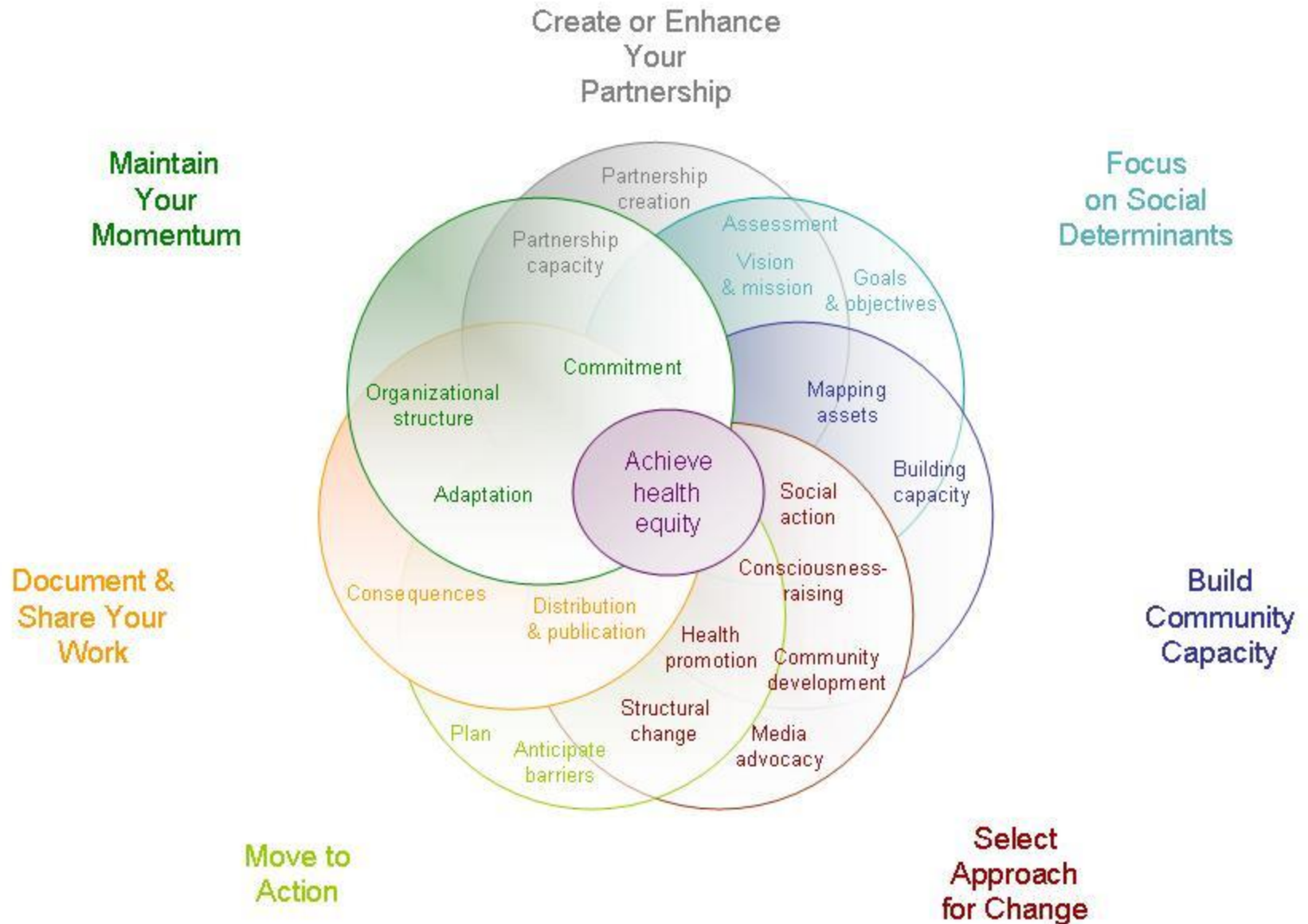


**Social Determinants of Health:
Learning from Doing**

“Health promotion is the process of ***enabling people to increase control over***, and to improve, their health. To reach a state of complete physical, mental and social well-being, an individual or group must be able to identify and to realize aspirations, to satisfy needs, and ***to change or cope with the environment...*** People cannot achieve their fullest health potential unless they are able to take control of those things which determine their health. ***At the heart of this process is [communities taking] ownership and control of their own endeavors and destinies.***”

Ottawa Charter for Health Promotion (1986)

Phases of a Social Determinants of Health Initiative



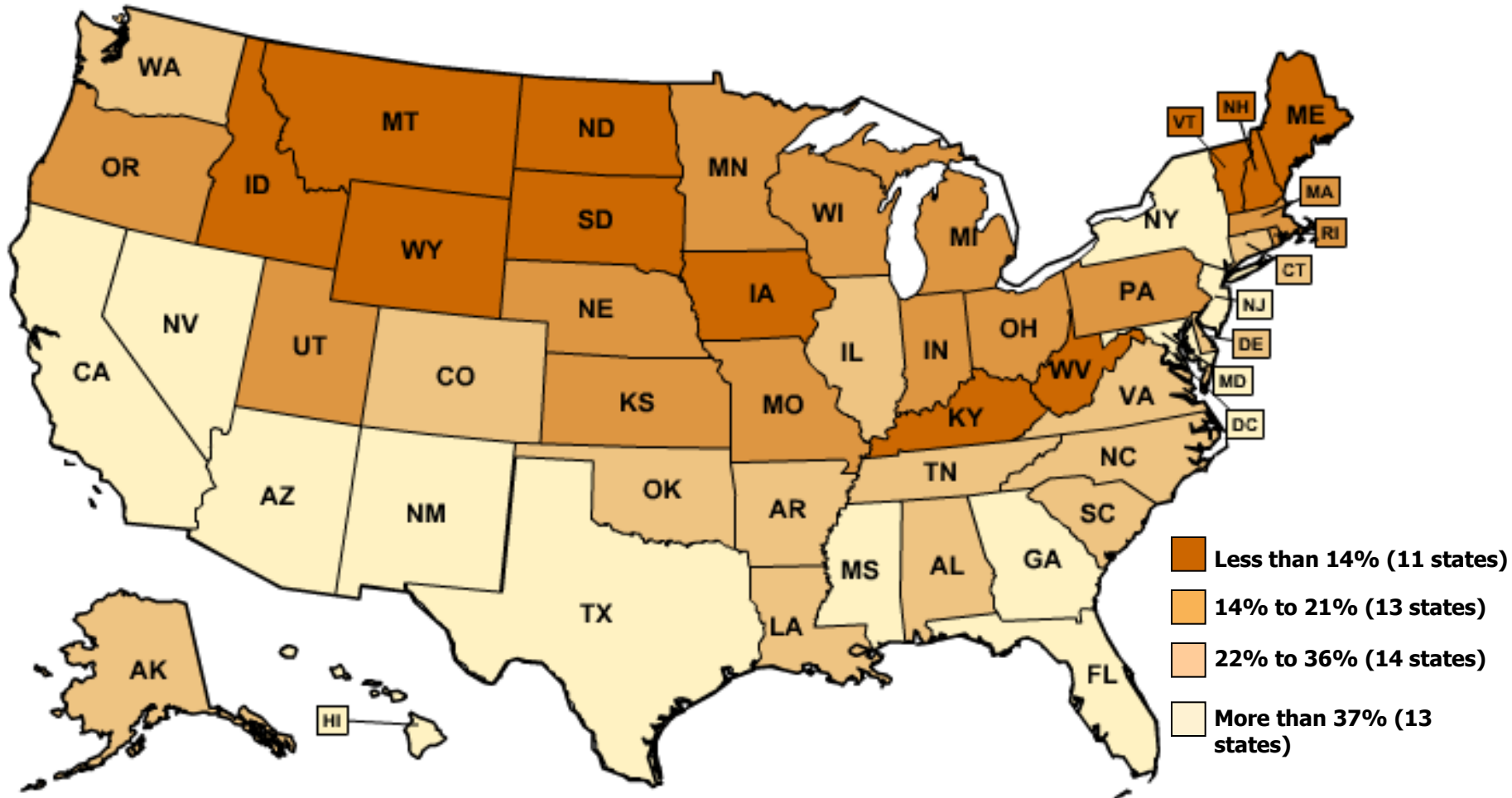
- ◀ Community
- ◀ Health disparities
- ◀ Health inequities
- ◀ Health equity
- ◀ Social determinants of health (SDOH)

- A group of people with a shared identity, including:
 - living in a particular geographic area;
 - having some level of social interaction;
 - sharing a sense of belonging; or
 - having common political or social responsibilities

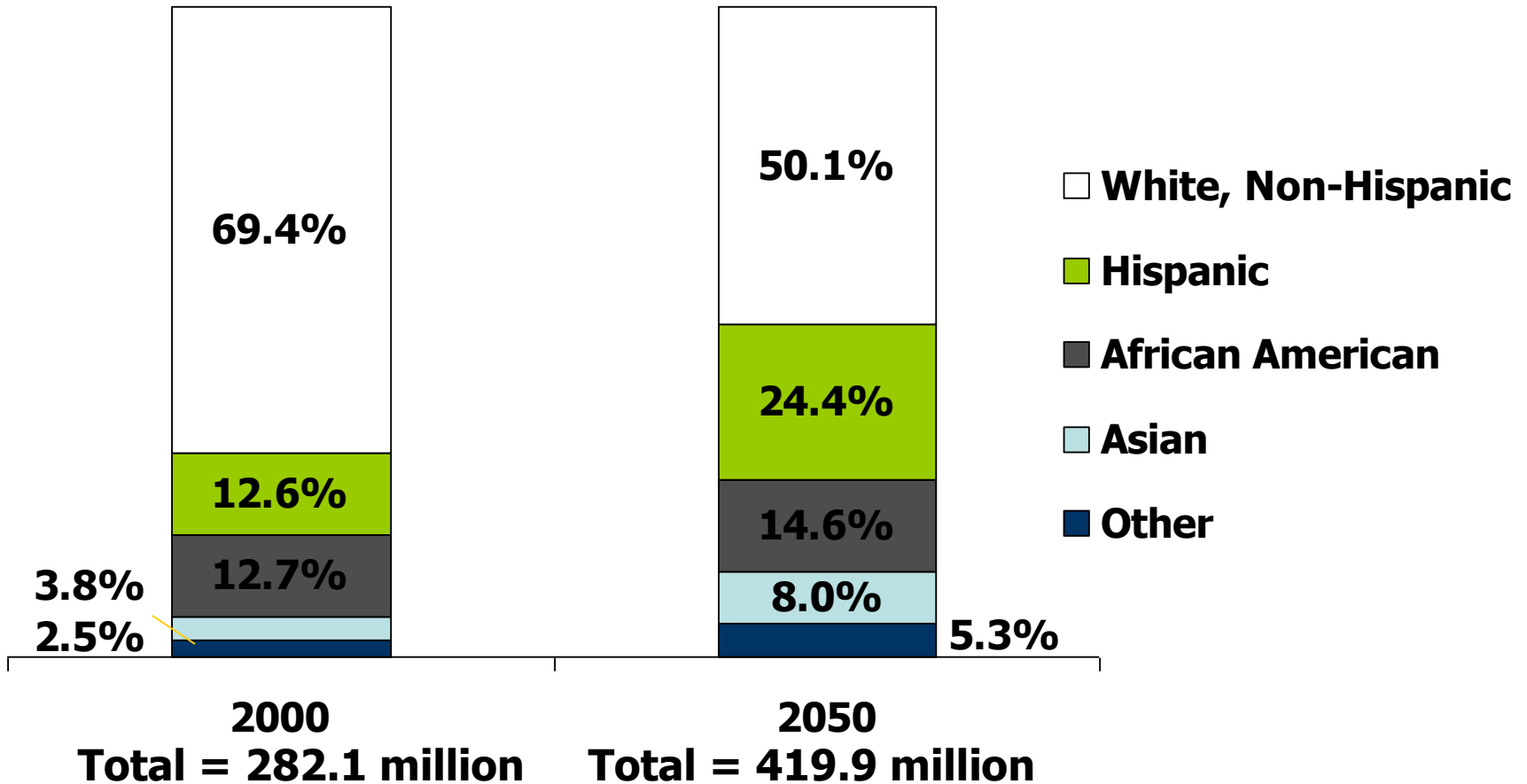
References: Eng, Parker (1994), Fellin (1995), Hunter (1975), Israel, et al (1994), MacQueen, et al (2001), McKnight (1992)

- Who does your community include? Who does it not include?
- What are the geographic boundaries?
- What are the cultural and psychosocial experiences of people in the community (e.g., traditions, social networks, history, representation in local government)?
- Does your community have multiple communities within it? How would you describe these communities? How do these communities relate to one another?

Share of Population that is a Racial/Ethnic Minority by State, 2005-2006



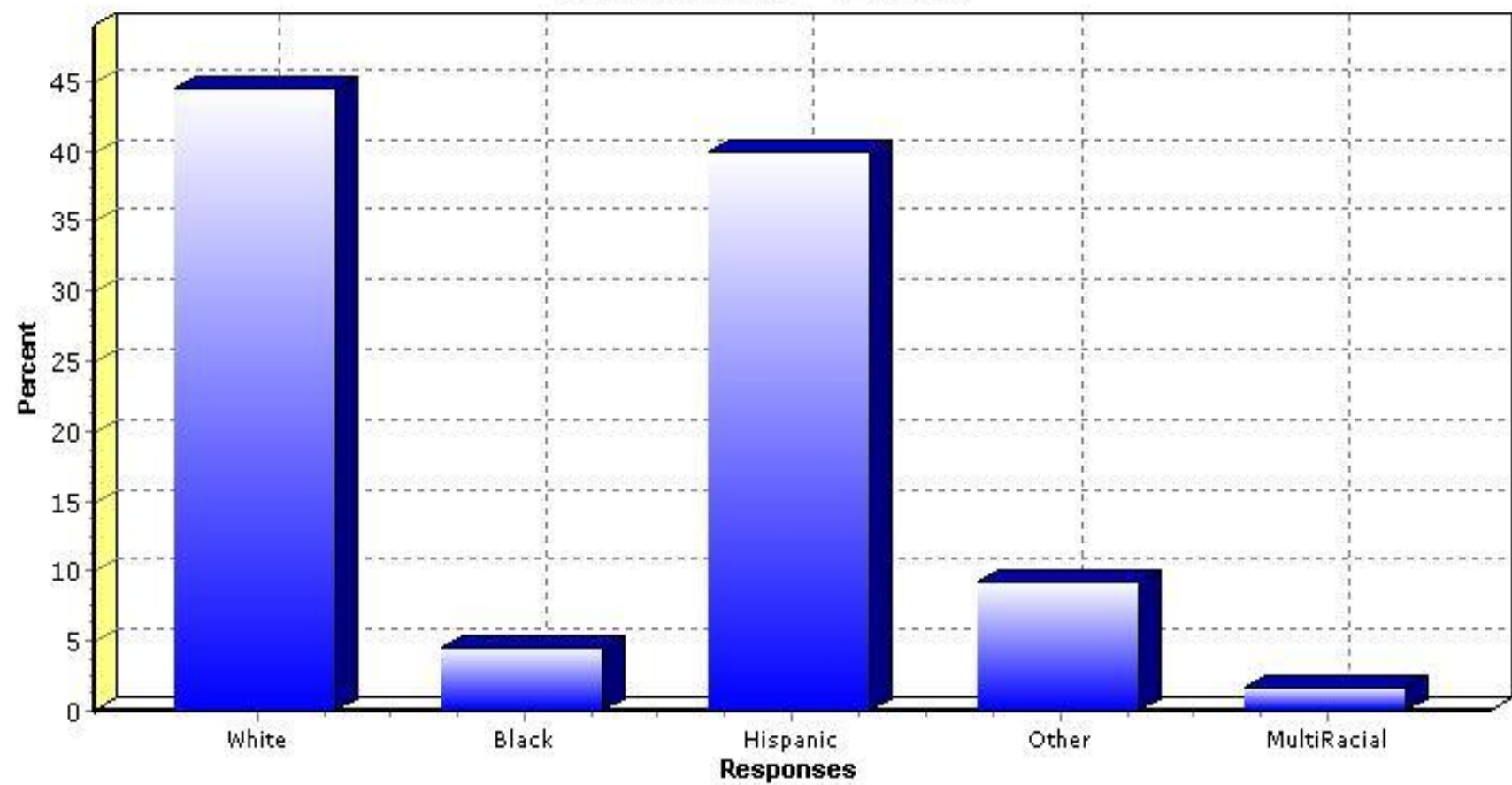
Distribution of U.S. Population by Race/Ethnicity, 2000 and 2050



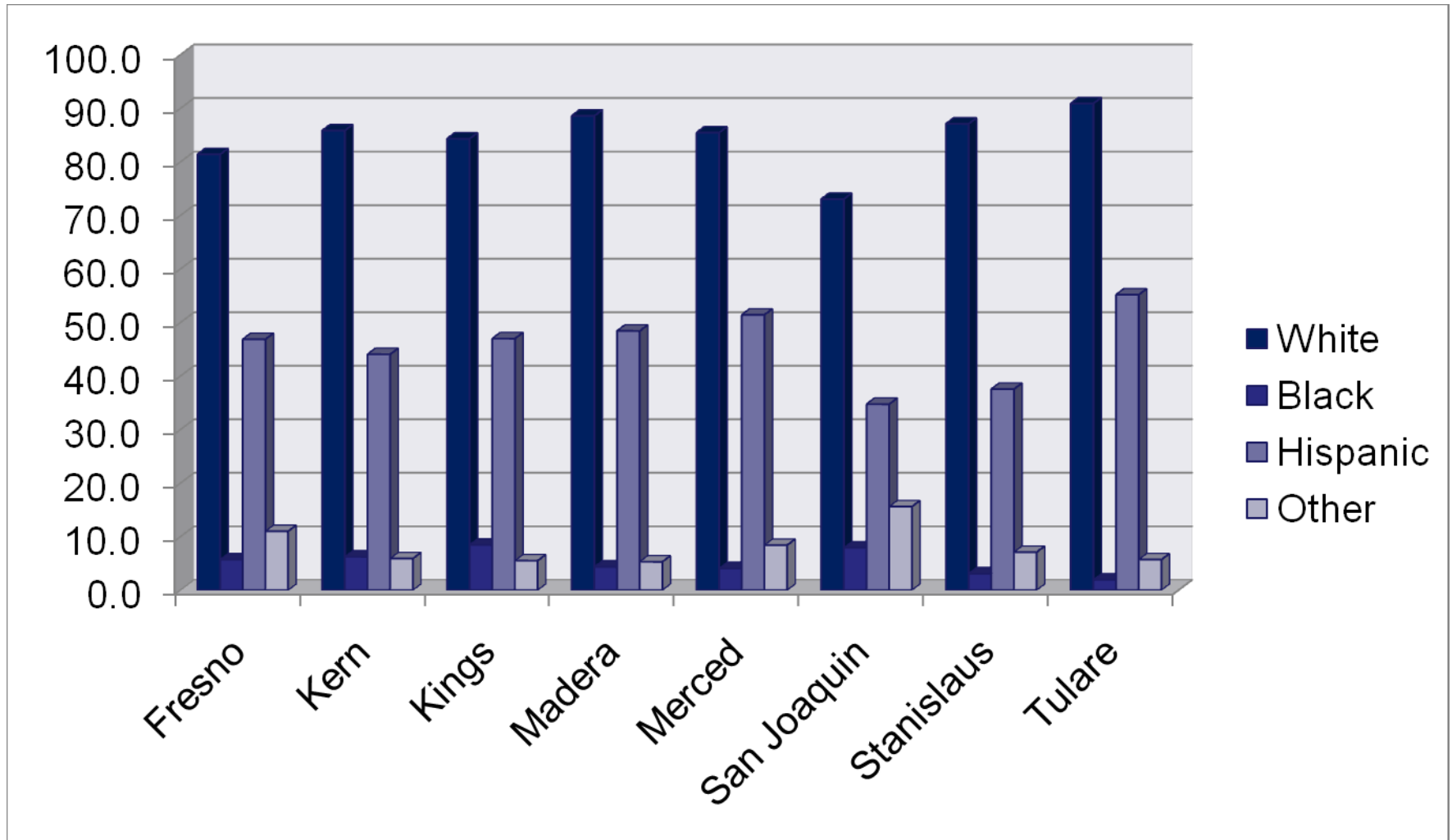
NOTES: Data do not include residents of Puerto Rico, Guam, the U.S. Virgin Islands, or the Northern Marina Islands. "Other" category includes American Indian/Alaska Native, Native Hawaiian or Other Pacific Islander, and individuals reporting "Two or more races." African-American, Asian, and Other categories jointly double-count 1% (2000) and 2% (2050) of the population that is of these races and Hispanic; thus, totals may not add to 100%.

SOURCE: Kaiser Family Foundation, based on <http://www.census.gov/population/www/projections/popproj.html>, U.S. Census Bureau, 2004, US Interim Projections by Age, Sex, Race, and Hispanic Origin.

Race/Ethnicity California - 2009

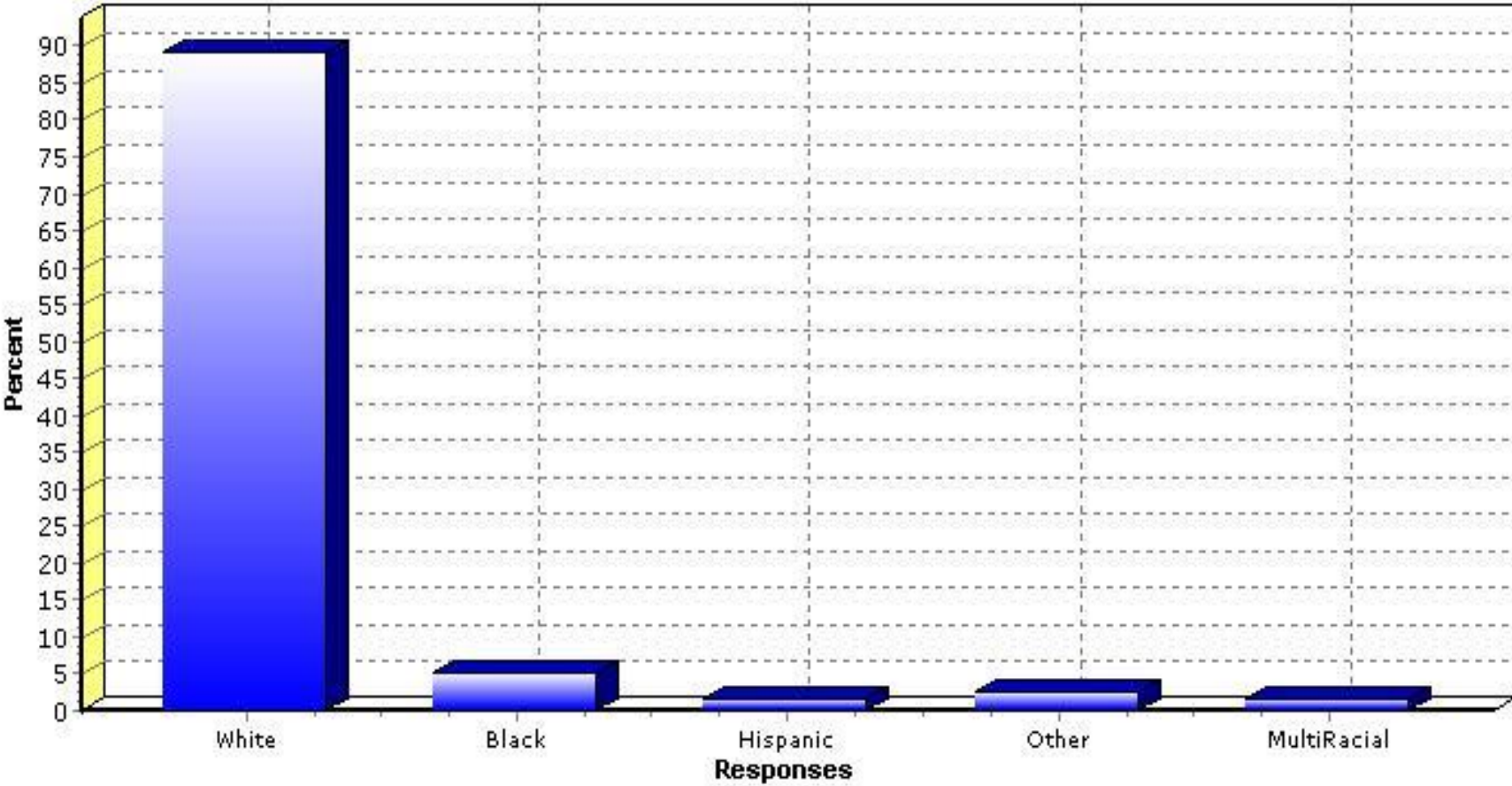


Race/Ethnicity California Counties



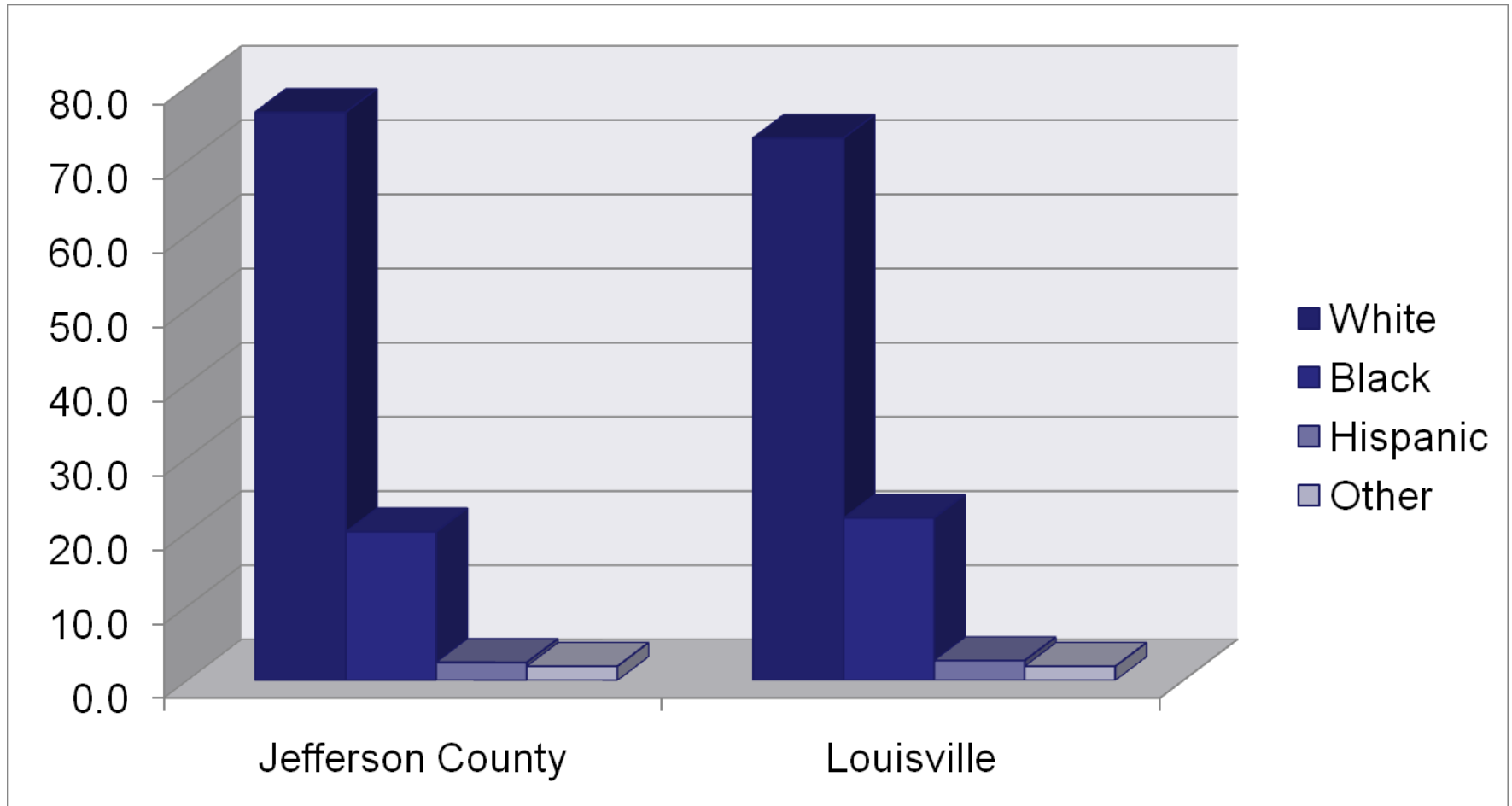
Source: U.S. Census Bureau, "County Population Estimates by Age, Sex, Race and Hispanic Origin: April 1, 2000 to July 1, 2005," released August 4, 2006 (related Internet site <<http://www.census.gov/popest/datasets.html>>).

Race/Ethnicity Kentucky - 2009



Race/Ethnicity

Kentucky – Jefferson County/Louisville



Sources:

U.S. Census Bureau, "County Population Estimates by Age, Sex, Race and Hispanic Origin: April 1, 2000 to July 1, 2005," released August 4, 2006 (related Internet site <<http://www.census.gov/popest/datasets.html>>).

Source: U.S. Census Bureau, American Community Survey, "DP-1. General Demographic Characteristics: 2005," using American FactFinder, accessed August 29, 2006 (related Internet site <<http://factfinder.census.gov>>).

- ◀ Differences in the incidence and prevalence of health conditions and health status between groups, based on:
 - Race/ethnicity
 - Socioeconomic status
 - Sexual orientation
 - Gender
 - Disability status
 - Geographic location
 - Combination of these

Reference: Braveman P. (2006)

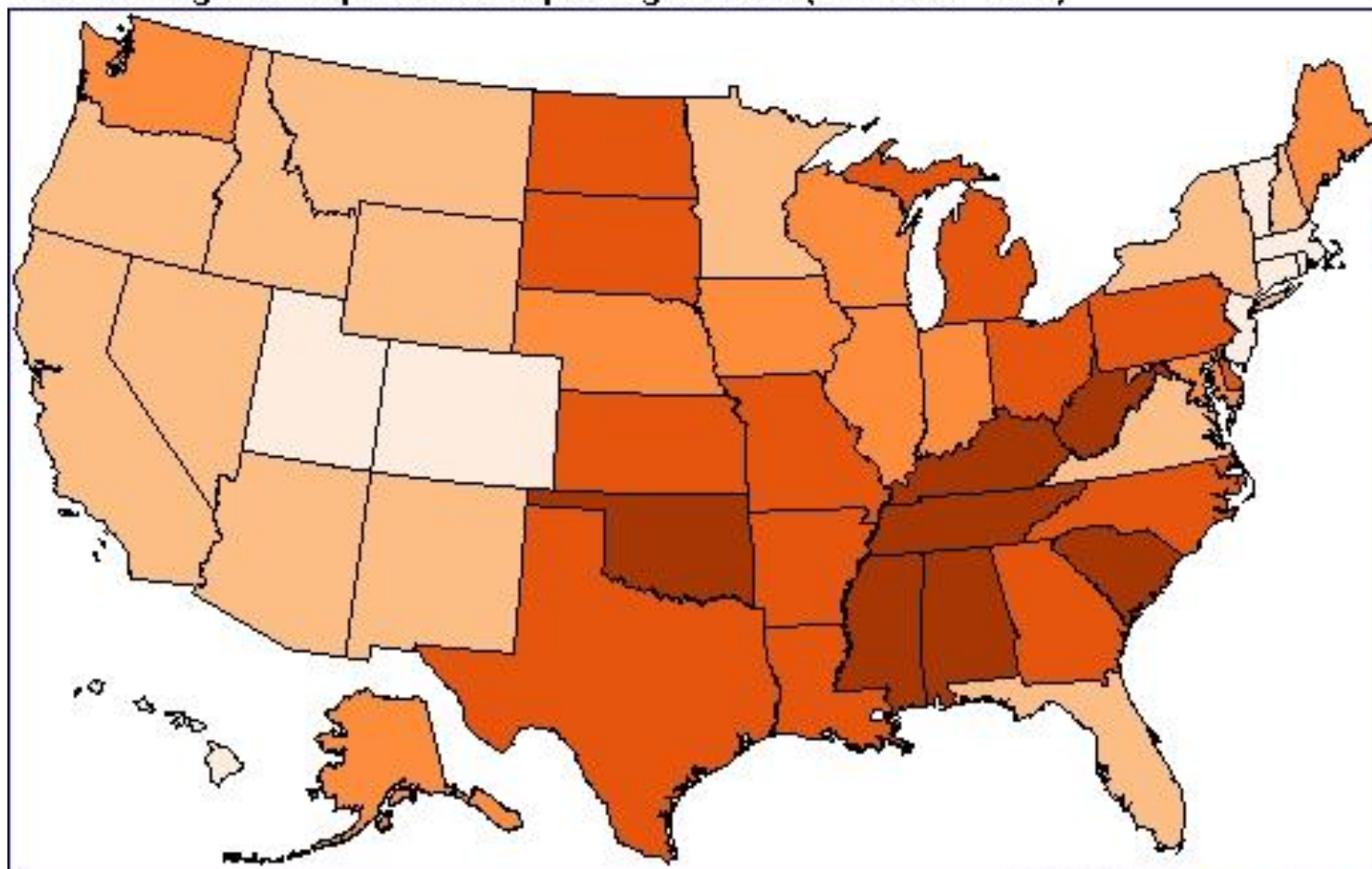
- What health concerns are experienced by people in your community (e.g., obesity, asthma, diabetes, heart disease)?
- What behaviors are more or less common among people in your community (e.g., food and beverage consumption, physical activity, tobacco or substance use, violence)?
- Do these health concerns or behaviors vary by subgroup? What are the differences?

BRFSS Maps

Year - 2008

Weight classification by Body Mass Index (BMI)

Percentage of respondents reporting OBESE (bmi 30.0 - 99.8)



Legend

Percent

<= 24.2

24.3 to 25.8

25.9 to 27.2

27.3 to 29.5

>= 29.6

No Data

Classification Method:
Natural Breaks

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HHS



CDC



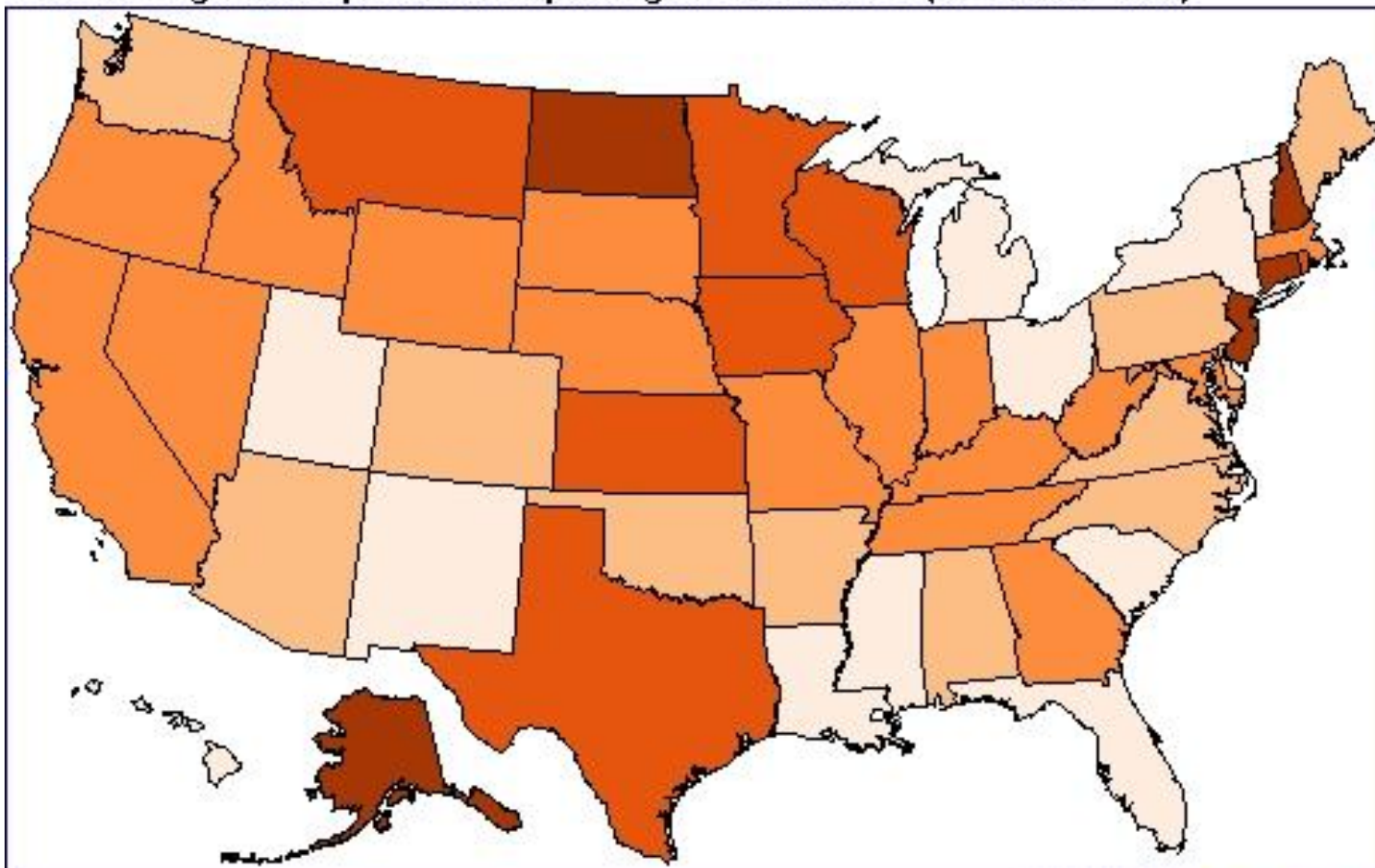
BRFSS

BRFSS Maps

Year - 2008

Weight classification by Body Mass Index (BMI)

Percentage of respondents reporting OVERWEIGHT (bmi 25.0 - 29.9)



Legend

Percent

- <= 35.5
- 35.6 to 36.2
- 36.3 to 37.1
- 37.2 to 37.9
- >= 38
- No Data

Classification Method:
Natural Breaks

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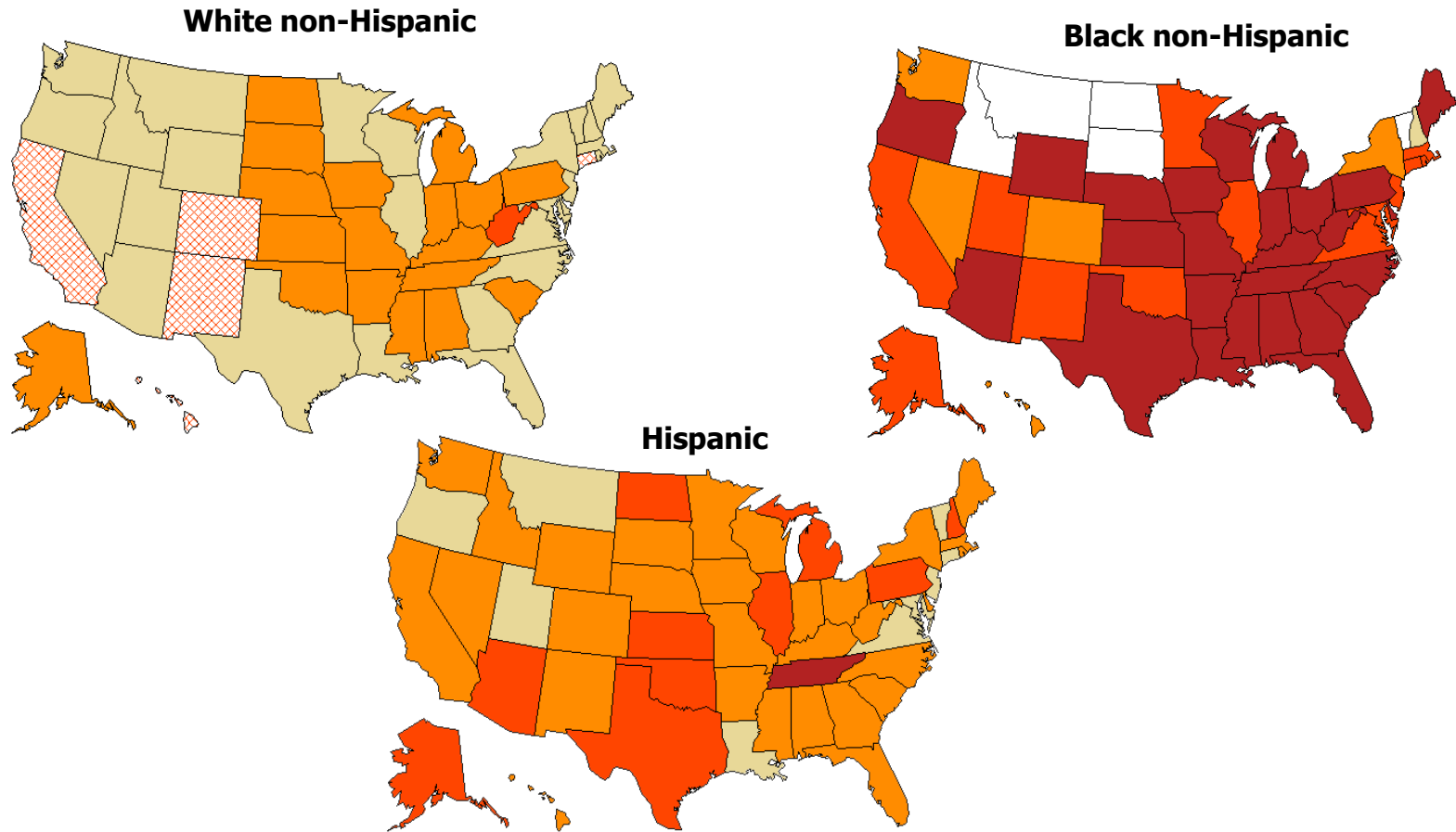


CDC



BRFSS

State-specific Prevalence of Obesity* Among U.S. Adults, by Race/Ethnicity, 2006-2008



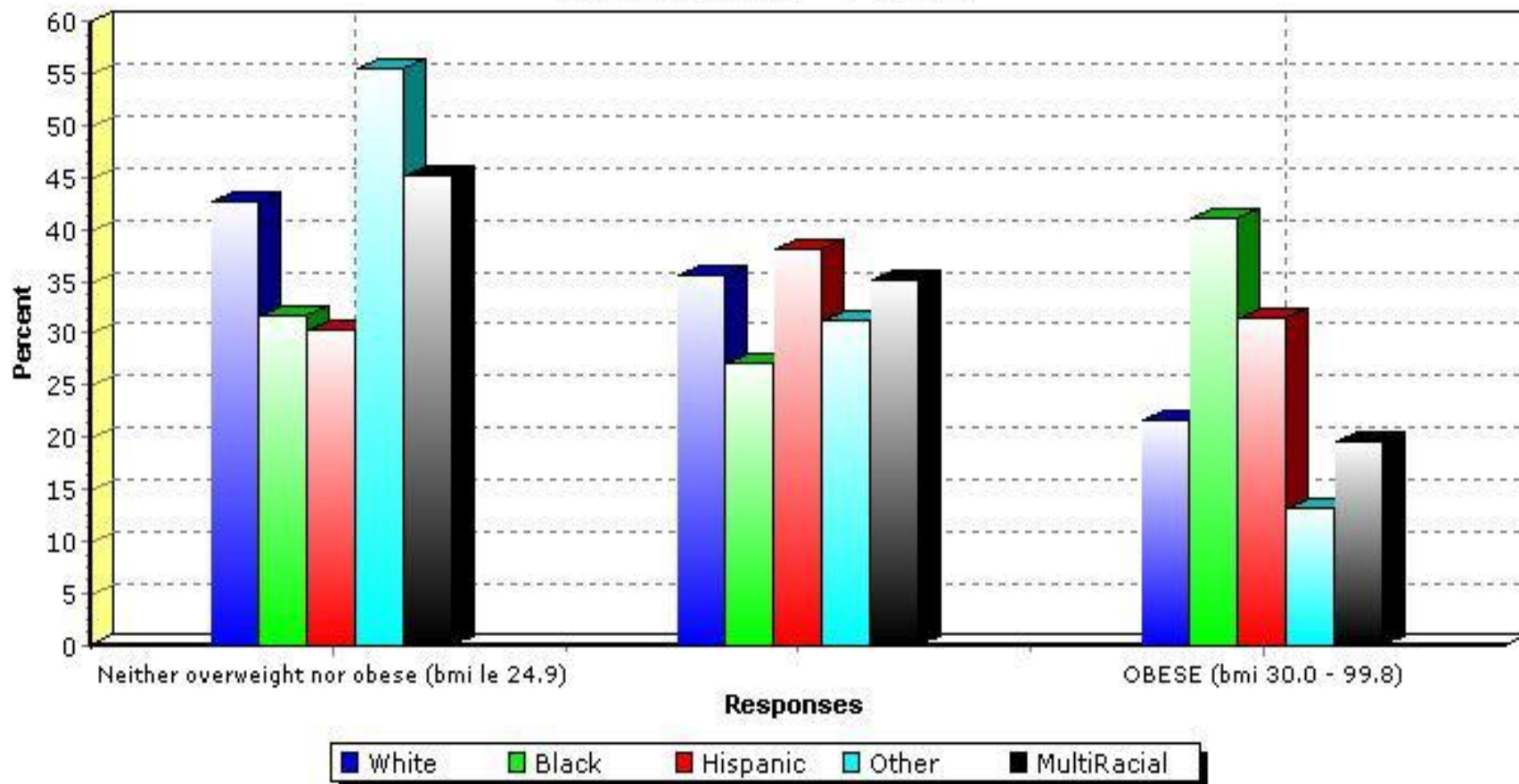
□ No sufficient sample**
 ■ 25-29

▨ < 20
 ■ 30-34

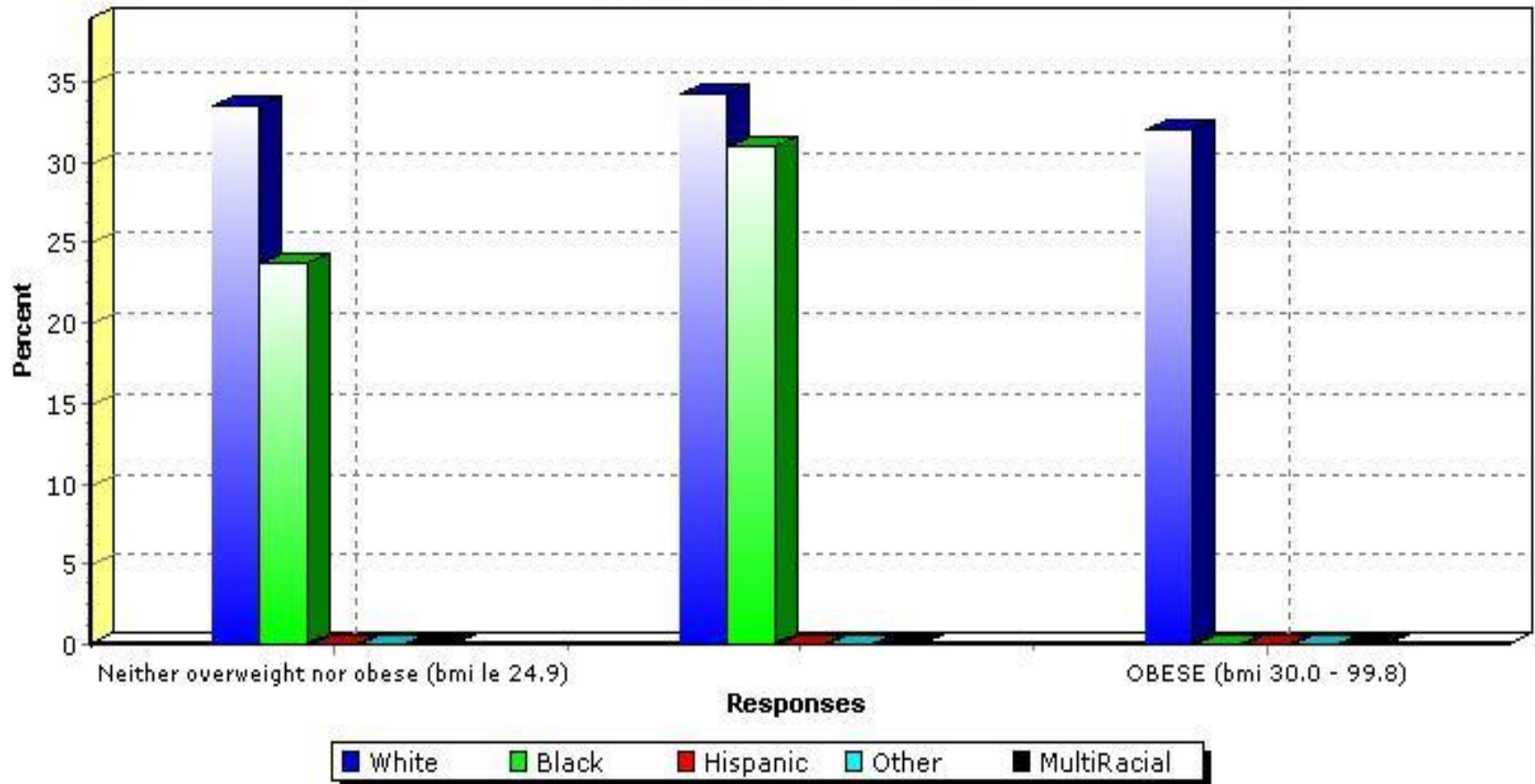
■ 20-24
 ■ 35+

(*BMI ≥ 30)

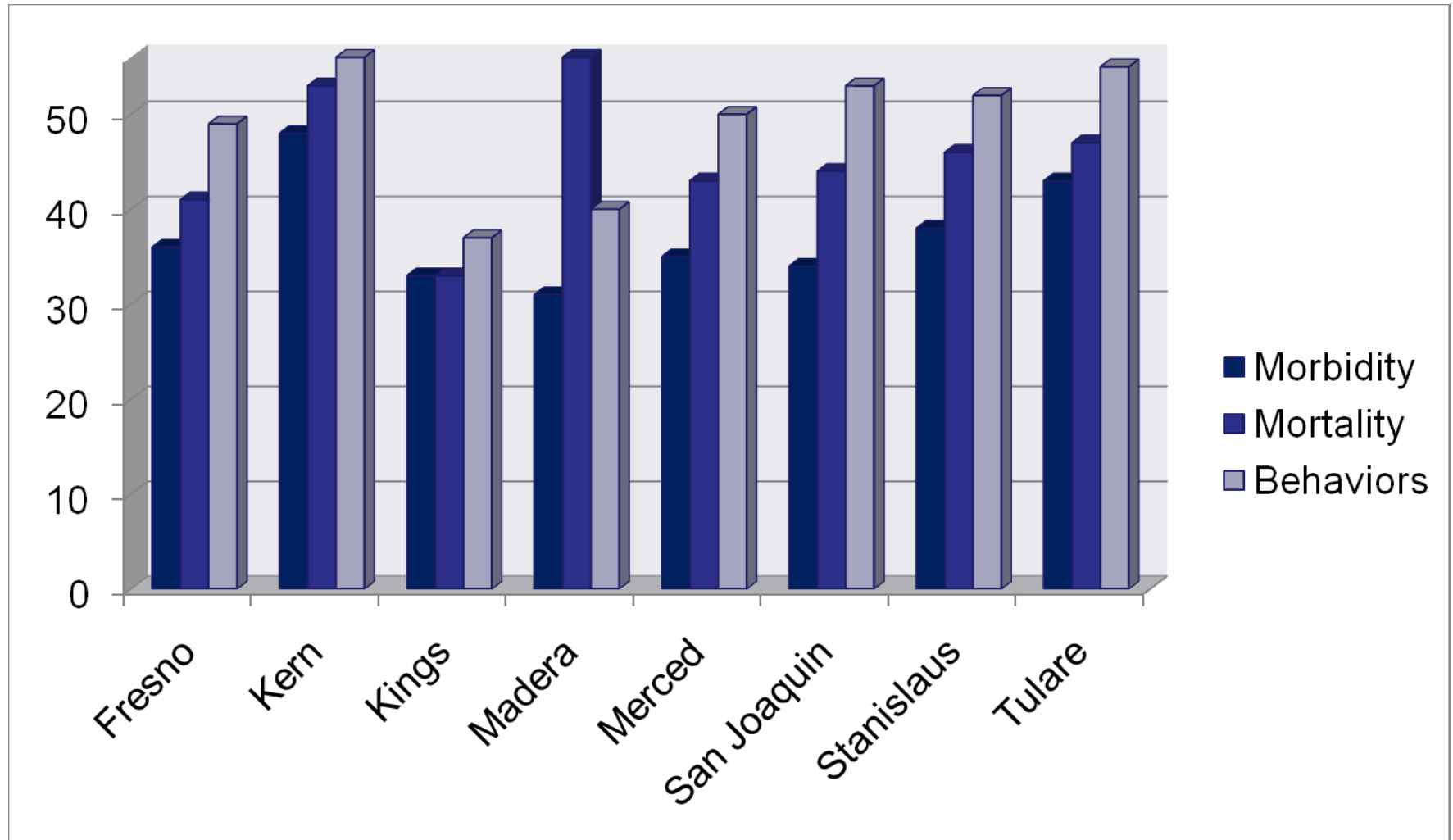
Overweight and Obesity (BMI) California - 2009



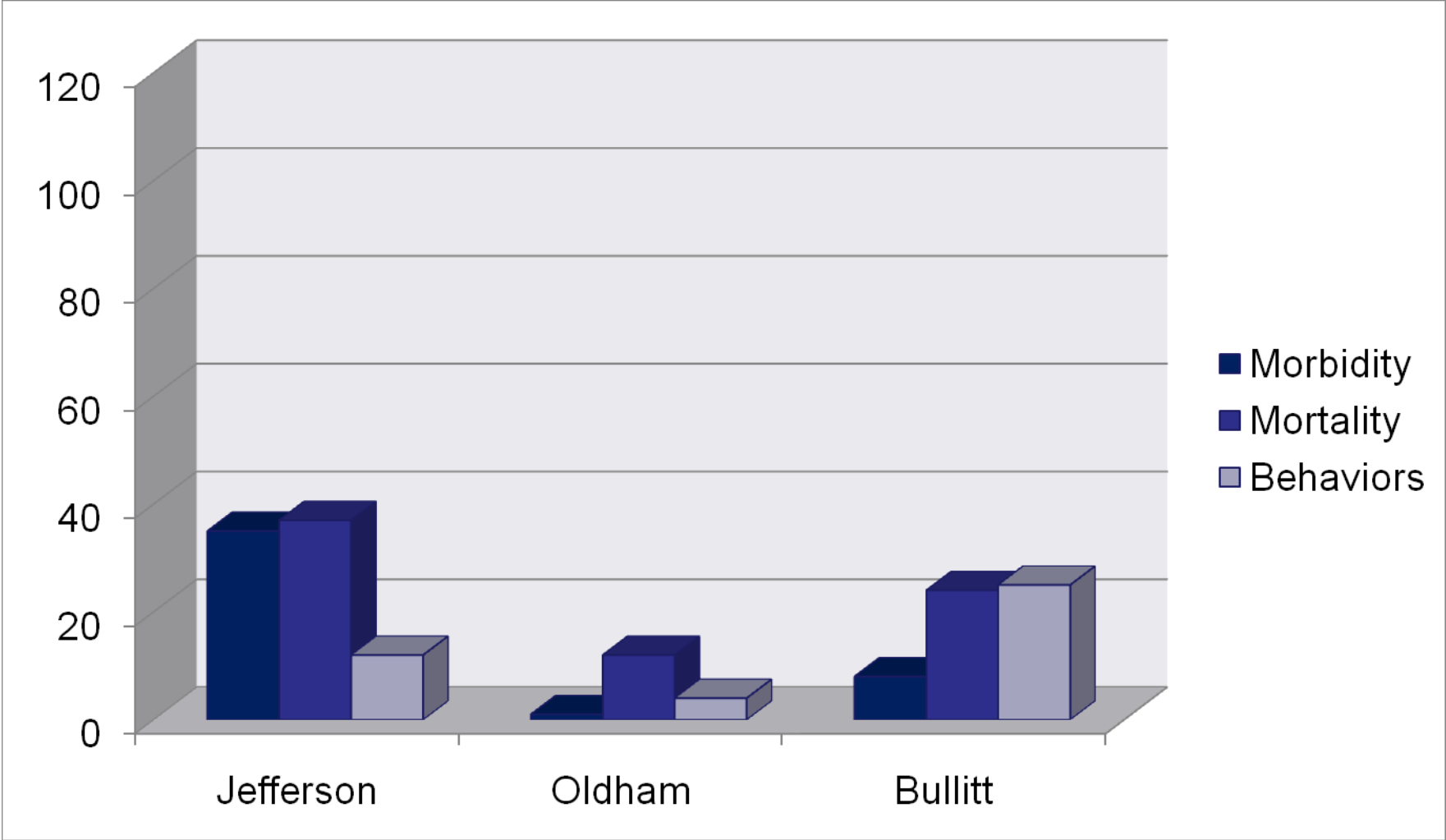
Overweight and Obesity (BMI) Kentucky - 2009



CA County Health Rankings (56 Counties Ranked) Health Outcomes (Morbidity & Mortality)



KY County Health Rankings (120 Counties Ranked) Health Outcomes (Morbidity & Mortality)



County Health Rankings is a program of the [Robert Wood Johnson Foundation](#) and the [University of Wisconsin Population Health Institute](#).

- ▶ Systematic and unjust distribution of social, economic, and environmental conditions needed for health
 - Access to healthcare
 - Employment
 - Education
 - Access to resources (e.g., grocery stores, parks)
 - Income
 - Housing
 - Transportation
 - Positive social status
 - Freedom from discrimination

Reference: Whitehead M. et al

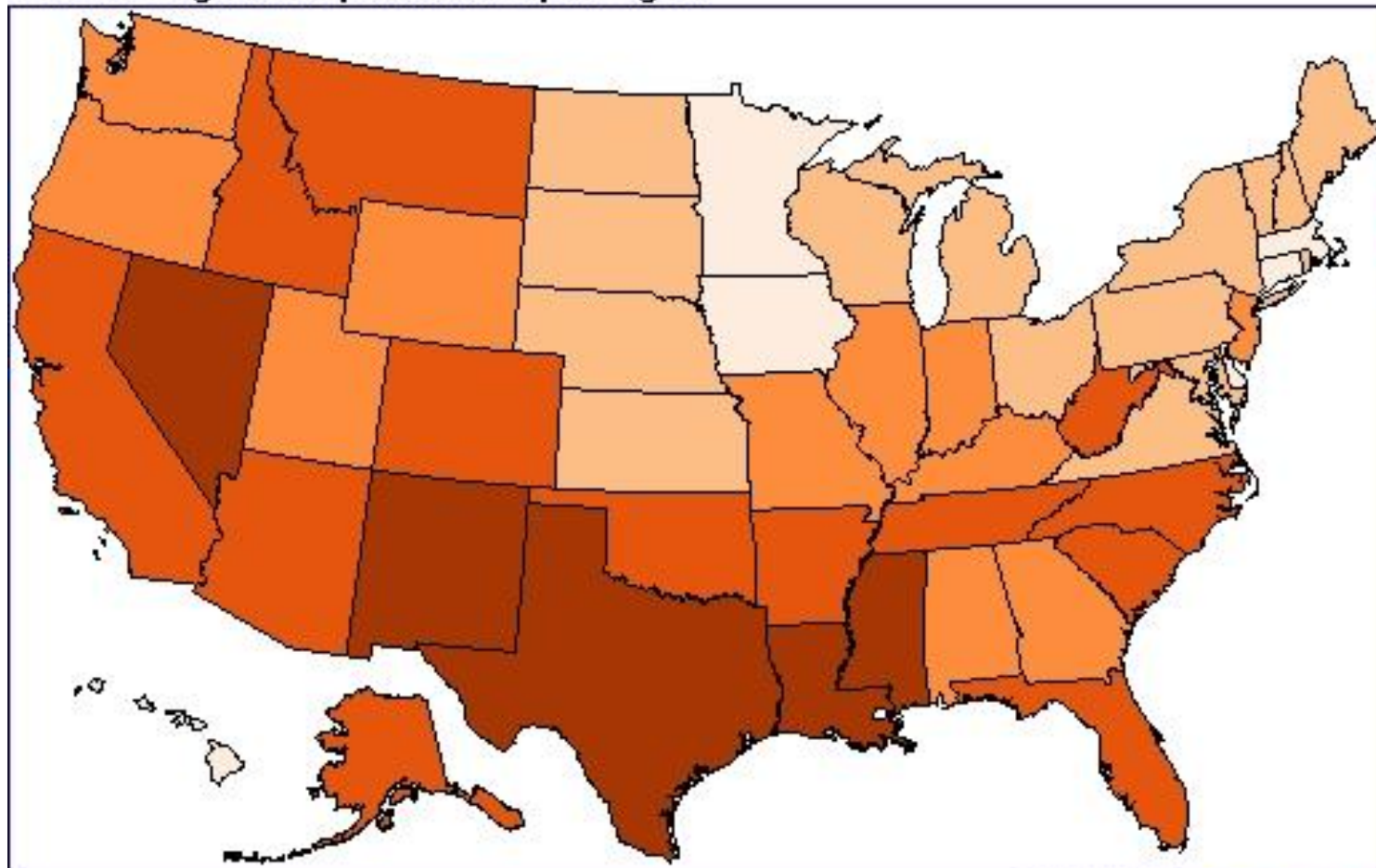
- What social, economic, or environmental conditions affect your whole community (e.g., air pollution, high concentration of fast food restaurants, inadequate public transportation system)?
- What conditions differentially affect subgroups in your community?
- Why are these conditions experienced differently for subgroups in your community?

BRFSS Maps

Year - 2008

Do you have any kind of health care coverage?

Percentage of respondents reporting No



Legend

Percent

<= 10

10.1 to 12.3

12.4 to 16

16.1 to 18.9

>= 19

No Data

Classification Method:
Natural Breaks

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HHS

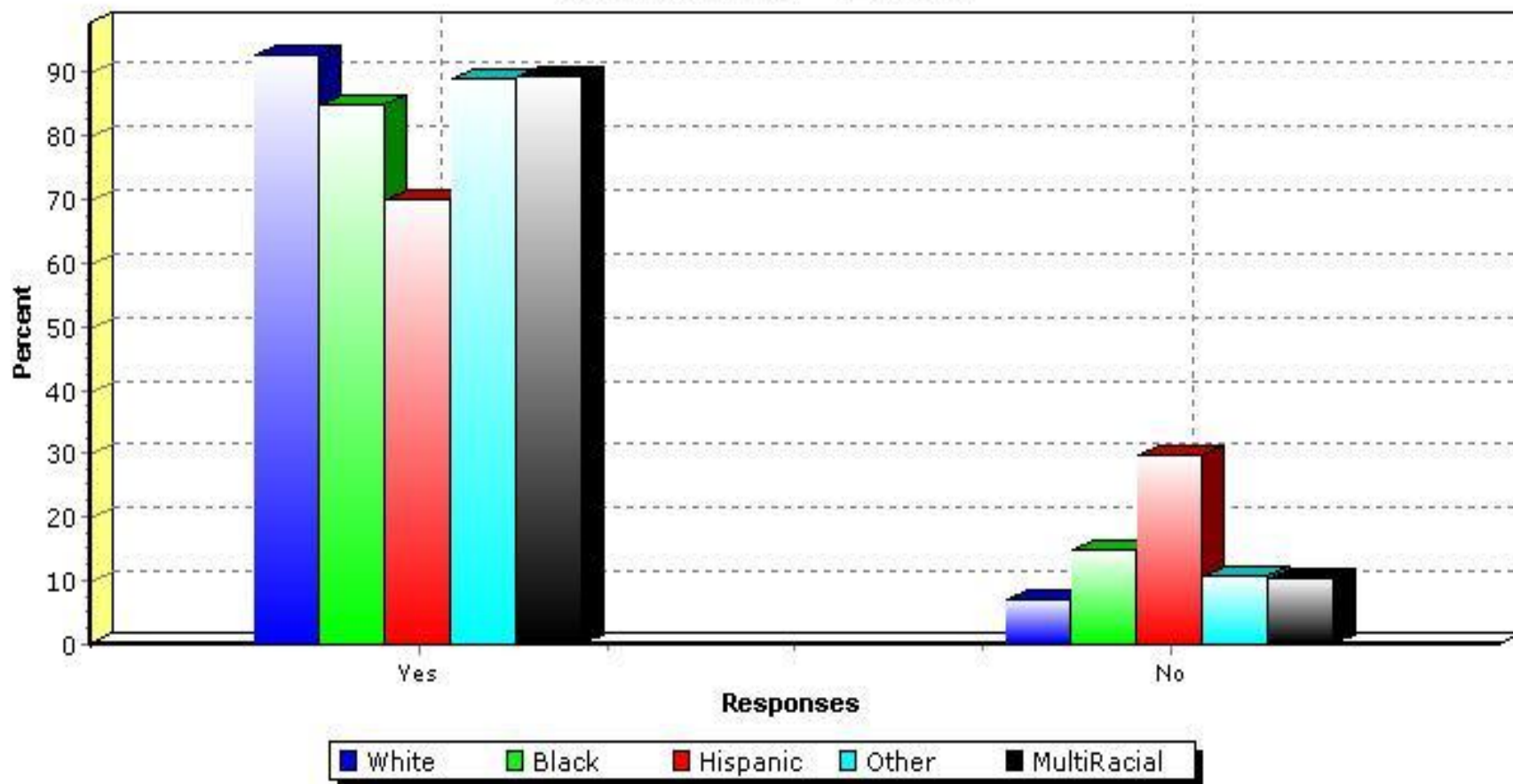


CDC

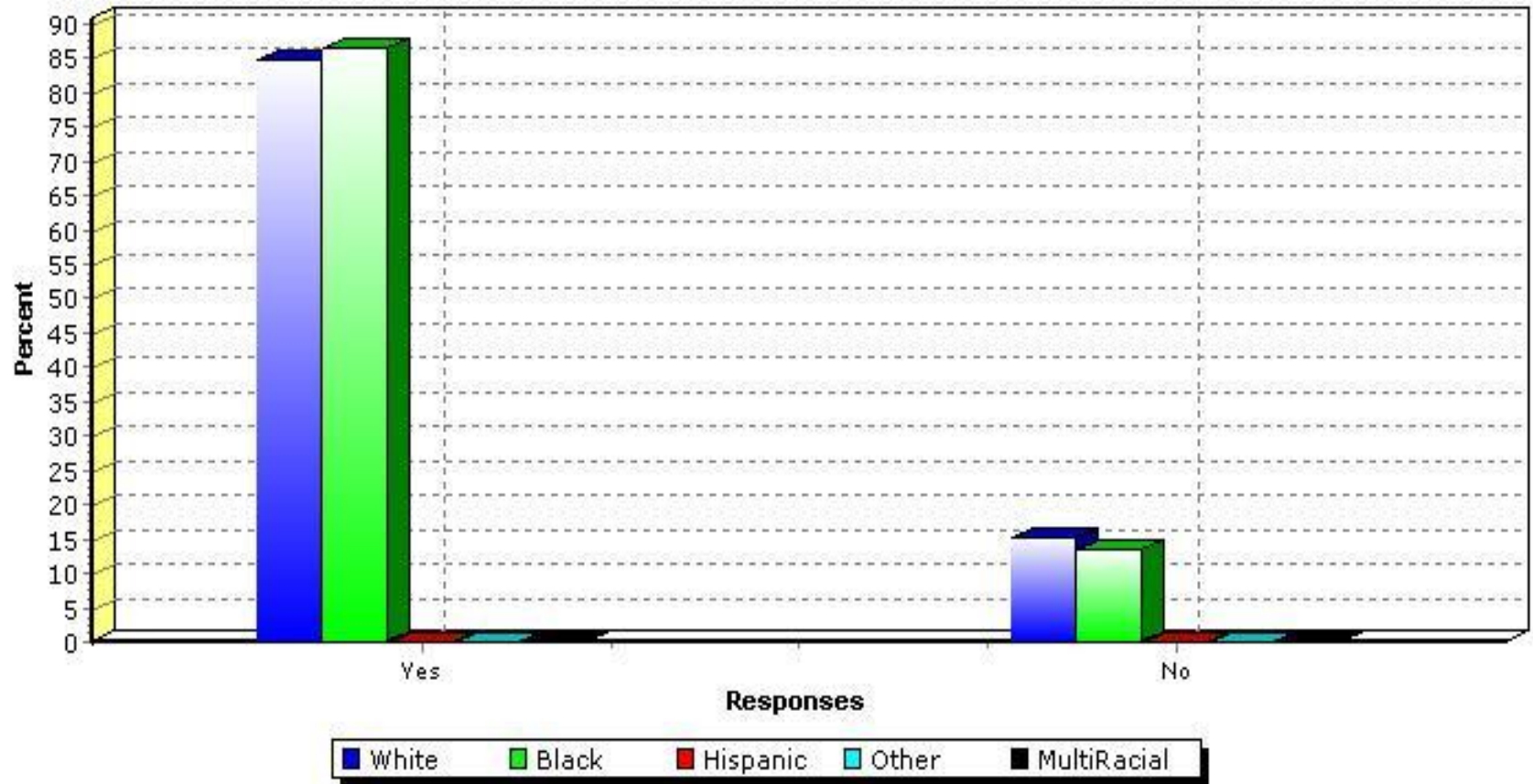


BRFSS

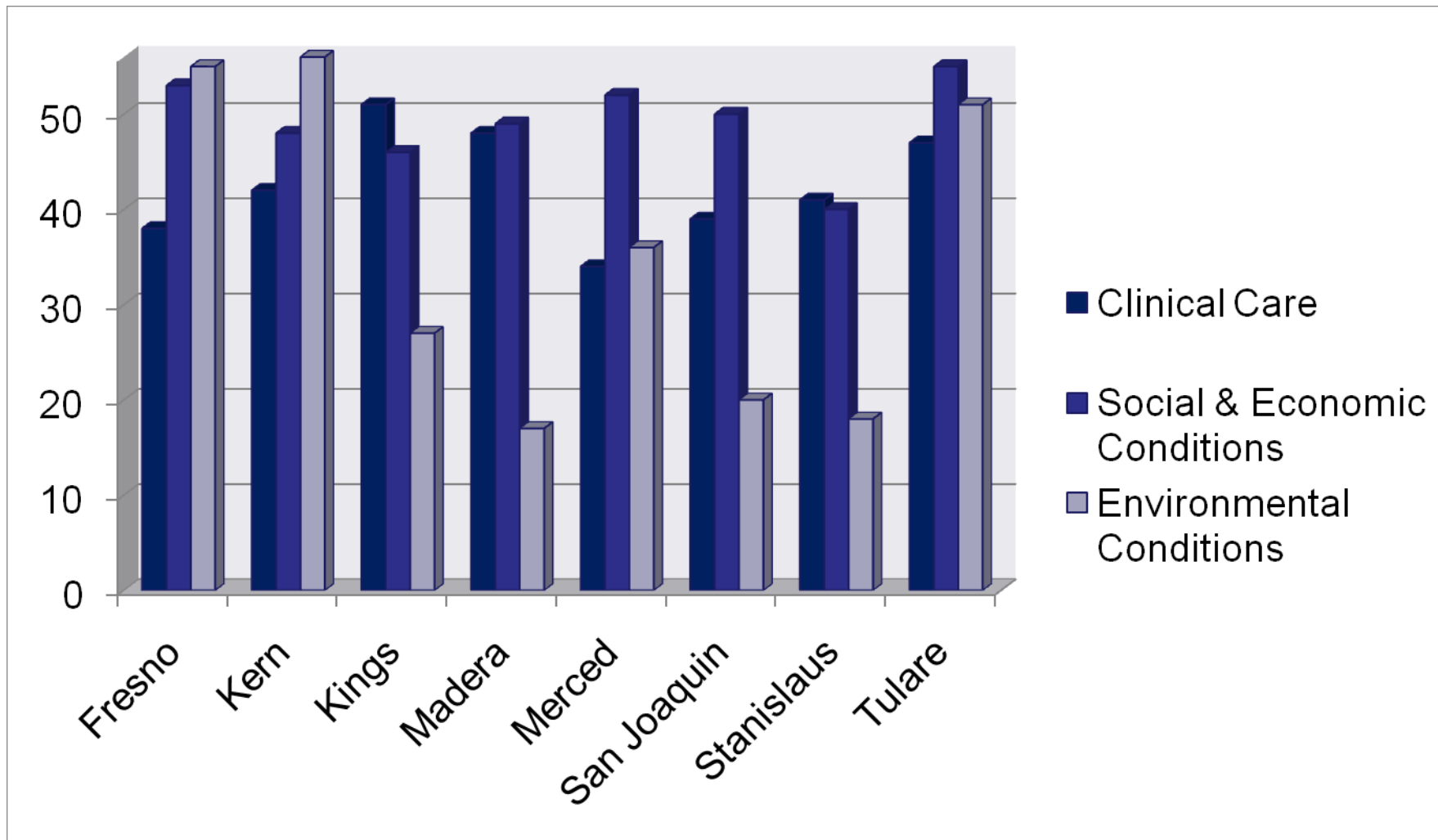
Have Health Care Coverage California - 2009



Have Health Care Coverage Kentucky - 2009

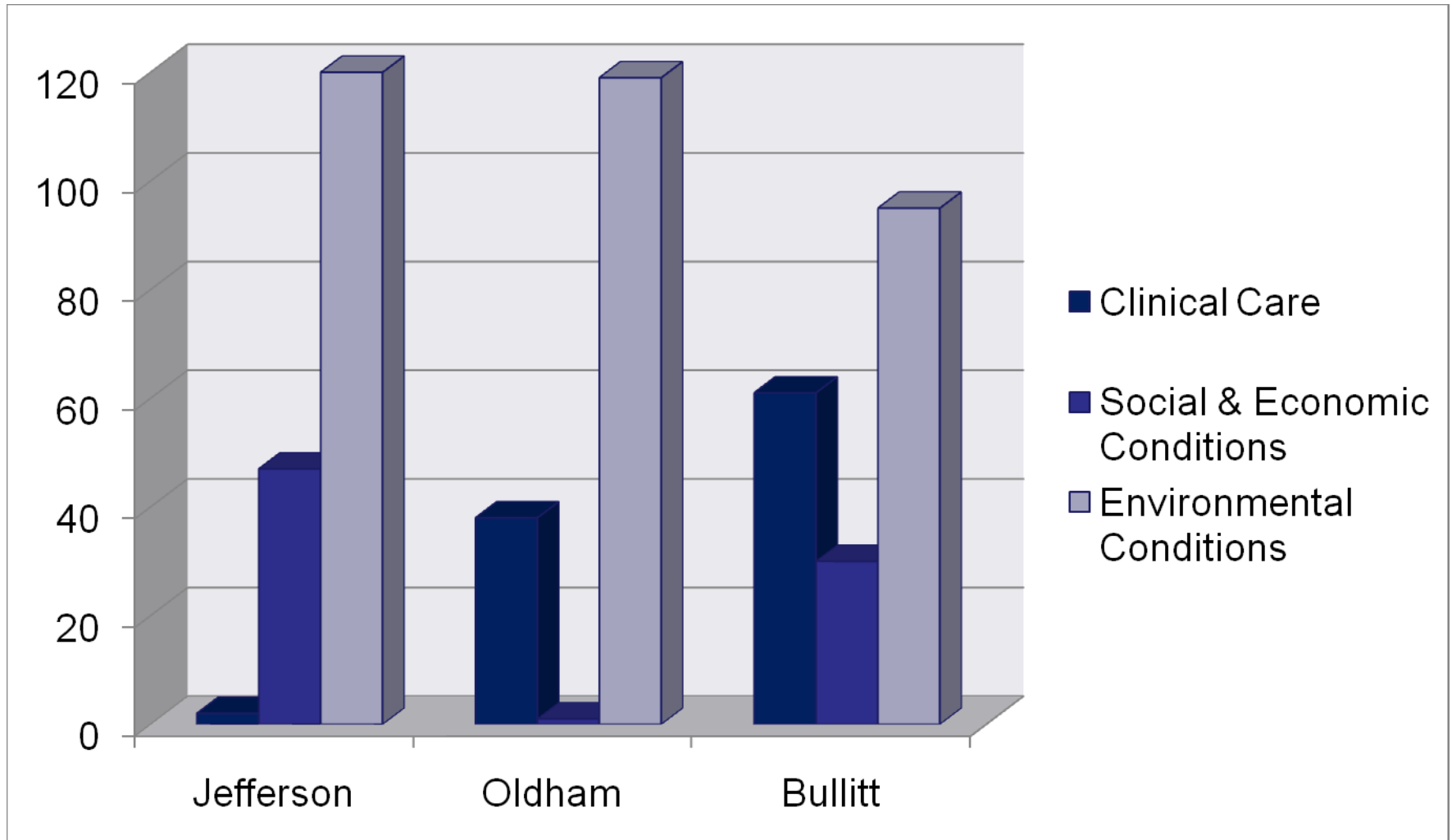


CA County Health Rankings (56 Counties Ranked) Clinical Care; Social, Economic & Environmental Conditions



KY County Health Rankings (120 Counties Ranked)

Clinical Care; Social, Economic & Environmental Conditions



Life-enhancing resources, such as food supply, housing, economic and social relationships, transportation, education and health care, ***whose distribution across populations*** effectively determines length and quality of life.

Reference: James S. (2002)

- How are resources (e.g., schools, food, housing, local businesses, transportation, parks, social or health services) distributed within your community?
- How does this compare to surrounding communities?
- What are the relationships among social determinants, cultural and psychosocial experiences of people in the community, and behaviors and health?

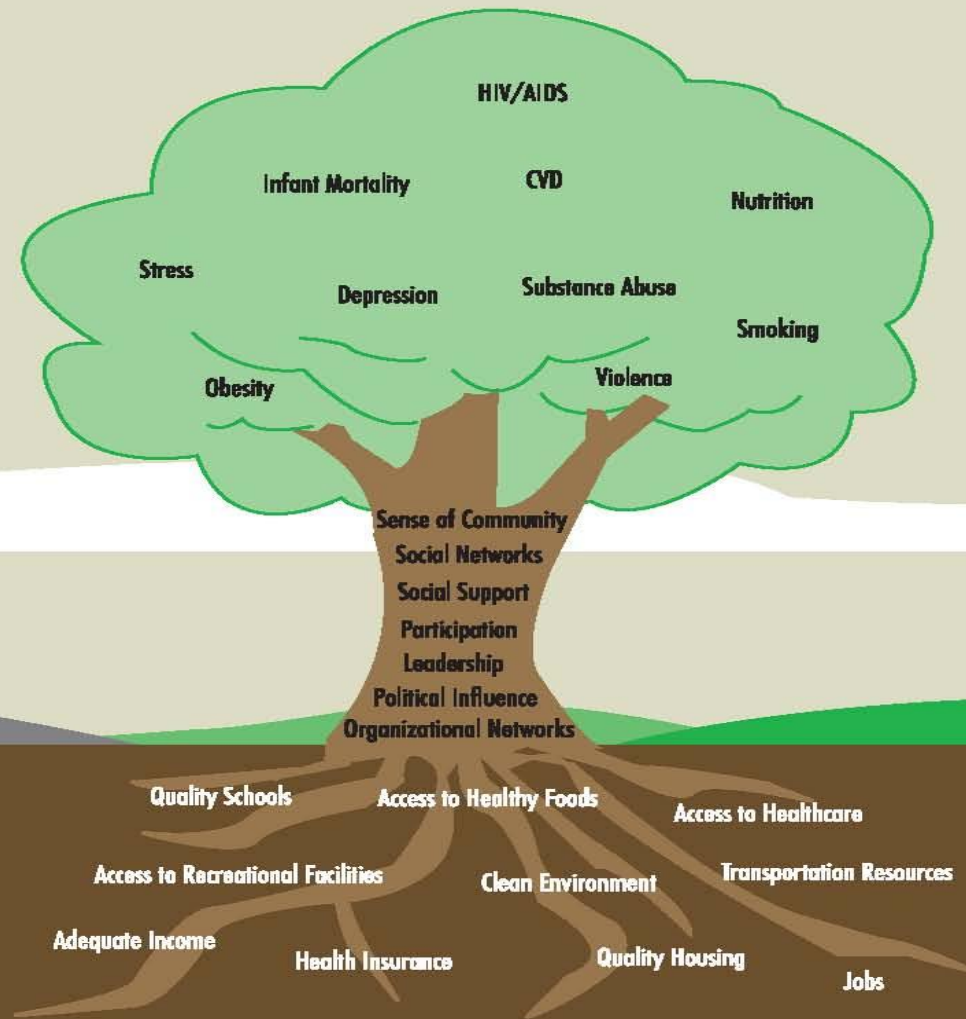
Growing Communities: Social Determinants, Behavior and Health

Our environments cultivate our communities and our communities nurture our health.

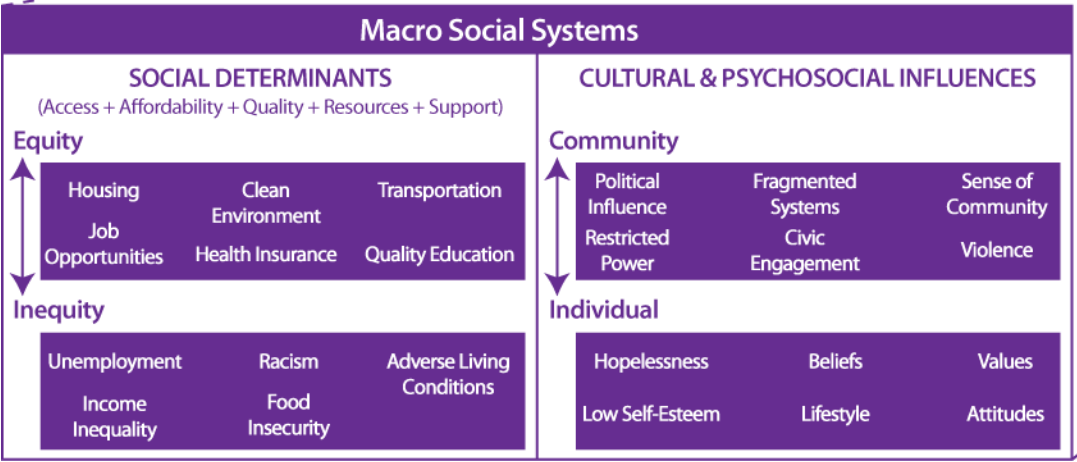
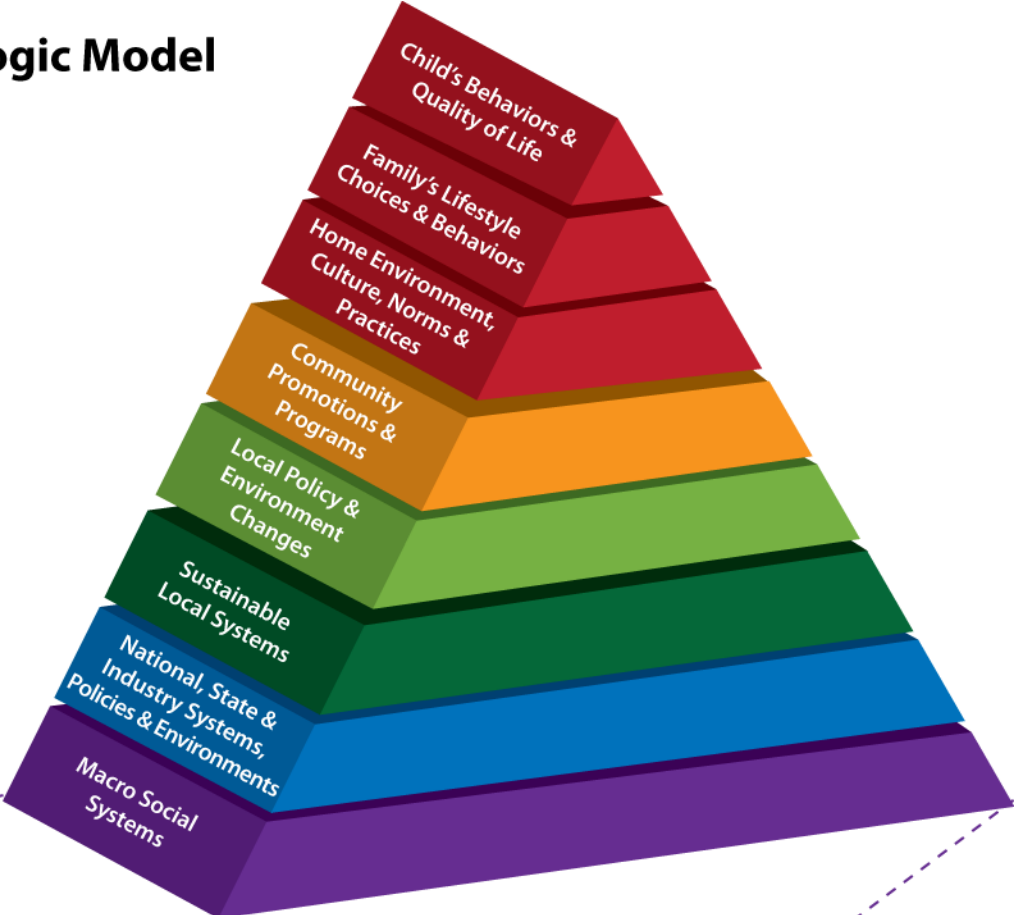
When inequities are high and community assets are low, health outcomes are worst.



When inequities are low and community assets are high, health outcomes are better.



Healthy Kids, Healthy Communities Logic Model



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The logo for Transtria features a stylized green graphic on the left composed of several overlapping triangles and a horizontal bar. To the right of this graphic, the word "transtria" is written in a purple, lowercase, cursive font.

transtria

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transfer skills
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- ▶ Identify what assets each partner brings to the table (e.g., skills, resources)
- ▶ Establish and adapt (as needed) communication, decision-making, conflict resolution and leadership transition processes
- ▶ Share decision-making and delegate responsibilities
- ▶ Provide opportunities for active participation from community representatives, especially those who experience inequities
- ▶ Identify what is currently being done in your community and build on existing efforts
- ▶ Develop and follow ground rules and partnership principles

- ▶ *Develop trust*: show respect, follow through, attend to each other's interests and needs
- ▶ *Provide leadership*: shared leadership, delegation, task/maintenance functions
- ▶ *Develop processes for shared power and influence*: equity, mutual influence, co-learning, balance of power
- ▶ *Address conflict*: necessary part of group process, identify reasons for conflict, establish norms for conflict management

Reference: Israel B.A. et al (2005)

- ▶ *Establish shared decision-making processes:* determine how decisions will be made and enable all members of the group to be engaged as appropriate
- ▶ *Willingness to acknowledge our own limitations.*
- ▶ *Willingness to revisit principles and bring in new partners.*

References: Israel B.A. et al (2005)⁷; NCC Annual Retreat, NC (2009)⁸

- ▶ **Consciousness Raising:** How social determinants of health connect with my individual experience
- ▶ **Community Development:** How we can enhance community power within change processes
- ▶ **How we actually create changes**
 - Health promotion and policy and environmental change
 - Media advocacy
 - Social action

- ▶ Reassess your organization structure
- ▶ Create local awareness
- ▶ Bring in new partners
- ▶ Ensure active participation
- ▶ Encourage shared leadership and decision making
- ▶ Develop a strong sense of group identity
- ▶ Revisit your partnership principles

Reference: The Lewin Group I. (2004)

- ▶ Increase community awareness
- ▶ Help partners develop the skills and resources necessary to continue efforts
- ▶ Build on existing efforts and recognize new efforts
- ▶ Identify potential funding opportunities
- ▶ Reflect on mission, goals and objectives
- ▶ Change strategies as necessary