Forsyth County
Department of Public Health
Promoting Health, Improving Lives

NCPH
North Carolina Public Health

Forsyth County Community Health Action Plan _2011_

Designed to address Community Health Assessment priorities

County: Forsyth **Partnership, if applicable:** Healthy Community Coalition **Period Covered:** 2012-2015

LOCAL PRIORITY ISSUE

- Priority issue: Translating Social Determinants Messages for Lay Audiences
- Was this issue identified as a priority in your county's most recent CHA? _X_ Yes __ No

LOCAL COMMUNITY OBJECTIVE Please check one: _X_ New __ Ongoing (was addressed in previous Action Plan)

- By (year): 2015
- Objective: To raise public awareness of social determinants of health
- Original Baseline: Baseline data will be established within 2-3years (Pre & Post measurement of campaign awareness of SDH using social media tools.)
- Date and source of original baseline data: N/A
- Updated information (For continuing objective only): N/A
- Date and source of updated information: N/A

POPULATION(S)

- Describe the local population(s) experiencing disparities related to this local community objective: FC Adult Residents and Diverse Community leaders.
- Total number of persons in the local disparity population(s): 250,000
- Number you plan to reach with the interventions in this action plan: 150,000

HEALTHY NC 2020 FOCUS AREA ADDRESSED

__ Tobacco Use
__ Physical Activity and Nutrition
__ Substance Abuse
__ STDs/Unintended Pregnancy
__ Environmental Health

__ Social Determinants of Health (Poverty, Education, Housing)
__ Maternal and Infant Health
__ Injury
__ Mental Health
__ Oral Health

__ Infectious Diseases/ Food-Borne Illness
__ Chronic Disease (Diabetes, Colorectal Cancer, Cardiovascular Disease)
__ Cross-cutting (Life Expectancy, Uninsured, Adult Obesity)
_X_ Other

- Check **one** Healthy NC 2020 focus area: (Which objective below most closely aligns with your local community objective?)
  - **List HEALTHY NC 2020 Objective**: (Detailed information can be found at http://publichealth.nc.gov/hnc2020/ website)
  - **Healthy People 2020 New Topic: Social Determinants of Health.** http://www.healthypeople.gov/2020/about/default.aspx
  - **Goal-** Create social and physical environments that promote good health for all.
  - **Objective:** Increase public awareness and understanding of the determinants of health, disease, and disability and the opportunities for progress. This will achieve greater consensus among diverse leaders about the social factors that affect health and the need to act across sectors to improve the health of Forsyth County residents.

RESEARCH RE. WHAT HAS WORKED ELSEWHERE*

List the 3-5 evidence-based interventions (proven to effectively address this priority issue) that seem the most suitable for your community and/or target group.

Intervention	Describe the evidence of effectiveness (type of evaluation, outcomes)	Source
Breaking Through on the SDH and Health Disparities: An Approach to Message Translation (issue brief: translating social determinants messages for lay audiences) Engaging public and private sector decision makers by overcoming challenge of translating the technical information about social determinants and health disparities into language that would resonate with a diverse group of leaders. Explains Commission's faming of issues, describes research based process used to develop messages and shares messages for broader use.	Messages were used by Commissioners representing different sectors and points of view (political). Acceptance as an accomplishment and a measure of success of how topics were positioned.	Robert Wood Johnson Foundation http://www.rwjf.org/pr/product.jsp?id=53235
A Participatory Method to Identify Root Determinants of Health: Co-learning as a principle of CBPR. Must engage community in participatory dialogues around root factors. Use of photo-elicitation process allowed a community-academic partnership to engage members in a dialogue. Similar of focus group processes, photo-elicitation uses photographs and questions to prompt reflection and dialogue. PE opens the dialogue to those with low literacy, focus on institutional and collective events, partnerships. Sustainable Livelihoods framework to guide the PE process.	Community Members were able to discuss how historical and structural factors have affected health. Allowed for understand of how community members perceive the relationship of factors (education and employment) within local context. Programs and Policies need to consider the social, political, economic, and historical contexts to be successful.	Barnridge, E., Baker, E. A., Motton, F., Rose, F., & Fitzgerald. (2010). A Participatory Method to Identify Root Determinants of Health: The Heart of the Matter. *Progress in Community Health Partnerships: Research, Education, and Action, 4*(1), 55-63.
The Value of Good Health-California: Process of creating community health as a new infrastructure. Putting community health at the center of how we do business. To do so: Raise consciousness about community health, change organizational and government practices, and promote policies that ill improve community health. Includes elements of effective tools and process. Includes indicators and accountability questions.	Community Indicator Report-set of indicators to track social, health, and economic conditions in a defined geographic area. Report Cards-community indicator reports that use letter grades or ranking.	Prevention Institute http://www.preventioninstitute.org/component/jlibrary/article/id-85/127.html
Message Design Strategies to Raise Public Awareness of Social Determinants of Health… Focuses on message framing, narratives, and visual imagery. Offers a framework. Based upon prior studies, evidence shows that framing messages should acknowledge a role for individuals decisions about behavior, but emphasizes a SDH.		Robert Wood Johnson Foundation http://www.rwjf.org/pr/product.jsp?id=35691
A New Way to Talk About the Social Determinants of Health Health starts where we live, learn, work and play. A portfolio that shares a way to create more compelling, effective and persuasive messages that resonate across the political spectrum. Includes, evaluation and measurement of ideas put forward. Tested messages which worked to help them communicate more effectively. 3 Steps-Determined how		Robert Wood Johnson Foundation http://www.rwjf.org/pr/product.jsp?id=66428

policy-makers see the world of health, developed messages that we can road test, 3 strengthened the messages with testing. Which words, phrases, and framing work and why. Chapters on Choosing Words (best practices); Finding Fact to fight fiction (data source identification); Thinking in Picture (metaphors); & Changing Frame of mind.		

WHAT INTERVENTIONS ARE ALREADY ADDRESSING THIS ISSUE IN YOUR COMMUNITY?

Are any interventions/organizations currently addressing this issue? Yes_X__ No___ If so, please list below.

Intervention	Lead Agency	Progress to Date
Promote translational studies in basic, clinical, health services, behavior, policy and population-based research aimed at improving minority health outcomes and eliminating health disparities. Increase the knowledge-base of students, faculty, researchers, healthcare providers and community stakeholders regarding minority health and health disparities. Disseminate and translate research findings to community residents and provide opportunities for investigators and providers to obtain important information from the community. Recommend policies, practices, strategies and programs for healthcare providers, insurers, educators, community organizations and other stakeholders related to improving minority health outcomes and eliminating health disparities.	Center of Excellence for the Elimination of Health Disparities- Winston-Salem State University- http://www.wssu.edu/centers/center-of-excellence-for-the-elimination-of-health-disparities/default-m.aspx	**2012 Health Equity Town Hall Meeting**-To bring forth a community voice by providing a forum for learning through dialogue about health disparities and health care reform, in order to create a course of action for individuals and the community to collectively eliminate health disparities.
Conducting translational research to impact population health, Developing sustainable and mutually-beneficial community partnerships, and Delivering educational initiatives to diversify the clinical, biomedical, and public health workforce	Maya Angelou Center for Health Equity- Wake Forest School of Medicine: http://www.wakehealth.edu/MACHE/	**2012 First Annual Maya Angelou Center for Health Equity Bowl**- Interdisciplinary Student Health Care Competition
The Health Equity Action Team addresses challenges and problems created from racism and poverty. Focus areas of this team include: • The link between neighborhood characteristics & health disparities and a health advisory body that works with the City-County Planning Board to ensure that development in minority neighborhoods positively impacts the health of residents. • Empowering minority population through voters' registration drives that impact voter turn out and future public policies. • Facilitating the planning and hosting of a County Health, Housing & Neighborhood Summit that addresses neighborhood	Health Equity Action Team- Forsyth County Healthy Community Coalition: http://www.healthycommunity.ws/racial.aspx	•Using "Unnatural Causes" in ongoing outreach efforts • A living minimum wage policy to raise income and improve overall health and economic development in minority neighborhoods in our community. This initiative is in partnership with CHANGE, Communities Helping All Neighbors Gain Empowerment. As its first step, the team has encouraged the City of Winston-Salem to set a minimum wage of $9.00 per hour for all its employees

characteristics and health disparities.		

WHAT RELEVANT COMMUNITY STRENGTHS AND ASSETS MIGHT HELP ADDRESS THIS PRIORITY ISSUE?

Community, neighborhood, and/or demographic group	Individual, civic group, organization, business, facility, etc. connected to this group	How this asset might help
Community organization	CHANGE (Communities Helping All Neighbors Gain Empowerment)	• Advocating for different health and wellness issues. • Build a stronger community by developing relationships across racial, ethnic, economic, political, social, and religious lines.
Community Coalition	Healthy Community Coalition with its action teams • Healthy Equity • Environmental Health • Infant Mortality Reduction Coalition • BeHealthy coalition • Domestic violence	• Address specific health concerns and advance healthy policies in Forsyth County
Education	Center of Excellence for the Elimination of Health Disparities-Winston-Salem State University	• Improve minority health outcomes and eliminate health disparities within the community, state and nation through research, education, and community outreach activities.
Education	Maya Angelou Center for Health Equity-Wake Forest School of Medicine	• Conducting translational research to impact population health, • Developing sustainable and mutually-beneficial community partnerships, and • Delivering educational initiatives to diversify the clinical, biomedical, and public health workforce.
Media	WFDD, Newspaper, TV, Radio, social media	• Promote the awareness of social determinants of health through media stories
Funding Agencies	Winston-Salem Foundation Kate B. Reynolds Charitable Trust	• Provide funding to address community/neighborhood projects that highlight effects of social determinants of health and equity
Businesses	Targeted businesses with healthy behavior practices e.g Johnson Control	• Highlight businesses with a list of healthy behavior practices for their workforce with measurable success

INTERVENTIONS: SETTING, & TIMEFRAME	COMMUNITY PARTNERS' Roles and Responsibilities	PLAN HOW YOU WILL EVALUATE EFFECTIVENESS
INTERVENTIONS SPECIFICALLY TARGETING HEALTH DISPARITIES		
Intervention: Community Forums to raise consciousness and awareness of Social Determinants of Health among diverse community leaders and residents. Intervention: _X_ new __ ongoing __ completed Setting: Community	**Lead Agency:** FC Healthy Community Coalition: Health Equity Action Team Role: Convene and Mobilize Partners Partners: Center of Excellence for the Elimination of Health Disparities-Winston-Salem State University	**1. Quantify what you will do:** • Number of community forums convened • Health Equity Awards for agency, neighborhood or individual who advocates for a healthy community • Number of human interest stories or interviews conducted regarding

Start Date – End Date (September 2012-December 2015): Level of Intervention - change in: _X_ Individuals __ Policy &/or Environment	Role: Organizing and convening different partner groups Partners:_ Maya Angelou Center for Health Equity-Wake Forest School of Medicine: Role Organizing and convening different partner groups Marketing of this intervention will be done through public TV & Radio e.g. WFDD, Channel 13 and social media	health equity **2. Expected outcomes:** • Community forums will increase the number of Forsyth County residents who are aware of the social determinants of health\equity. • At least 4 elected officials are made aware of the Social Determinants of Health
INDIVIDUAL CHANGE INTERVENTIONS		
Intervention: Blue Zones Project campaign to make Forsyth County the healthiest county in North Carolina. Intervention: _X_ new __ ongoing __ completed Setting: Home or Agencies or Neighborhoods Start Date – End Date (September 2012—No End Date	The lead agency is Healthy Community Coalition and it will encourage individuals to utilize and understand Blue Zone Projects and for the community to make healthy choices available (easy & Convenient) to all Forsyth County residents. List other agencies and what they plan to do: Public & Private Sectors, Educational institutions, Businesses, Neighborhood and Media outlets Community –wide campaign for all Forsyth County residents transforming their neighborhoods into happier, healthier places to live, work and play Forsyth Futures will keep track of Community participation and progress towards Blue Zone Community designation. Marketing of this intervention will be through social media, websites of different agencies, coalitions, community organization	**1. Quantify what you will do:** • Number of individuals, families, agencies, neighborhoods who have registered or joined the Blue Zones Project. • Number of events held **2. Expected outcomes:** • Forsyth County residents will begin to think about choices that affect their long-term health. They will make better choices as it relates to their individual health to live longer and better. • Evidence: Blue Zones study of world's long-lived, happiest people and applications into evidence-based interventions. In a pilot project one community raised life expectancy, lost 12,000 pounds, and dropped healthcare costs of city workers by 40%.
POLICY OR ENVIRONMENTAL CHANGE INTERVENTIONS		
Intervention: Social Determinants of Health Media Campaign for Lay Persons Intervention: _X__ new ___ ongoing ___ completed Setting: Community Start Date – End Date (September 2012-December 2015):	The lead agency is Healthy Community Coalition will convene, mobilize and advocate for social determinants of health to be a part of community wellness dialogue. List other agencies and what they plan to do: Media outlets Educational Institutions Public & Private Businesses Coalitions & Community Agencies Will assist in planning, organizing, and framing messages acknowledging individual decision about behavior but emphasizing	**1. Quantify what you will do:** • Partner with one or more media outlet to promote the coalition's community health message. • These partnerships will result in the number of TV segments/ads/ commercials, Radio Discussions/commercials, and Print articles/ads as a form of media advocacy to encourage policy change. • Community Surveys **2. Expected outcomes:** • Educating county residents,

	social determinants of health. Marketing of this intervention will be through social media, websites of different agencies, coalitions, community organization.	organizations, and businesses to engage in practice and policy change to promote health through social determinant of health improvements.
Intervention: County Wide Social Determinants of Health Dialogue and Promotion Intervention: _X__ new ___ ongoing ___ completed Setting: Community Start Date – End Date (September 2012-December 2015):	The lead agency is Healthy Community Coalition. It will engage local elected leaders in discussions on social determinants of health and county entities in promoting practices that address social determinants of health. List other agencies and what they plan to do: Urban League (Election Forums) Facilitate forums, interviews regarding possible initiatives or ways to address social determinants of health for candidates running for elected office Include how you're marketing the intervention Marketing of this intervention will be through organizing agencies and possibly social media	**1. Quantify what you will do:** • Number of SDH discussions or forums held • Community Forum participation • Candidate Forum participation **2. Expected outcomes:** • Increased awareness of SDH among elected candidates • Increased awareness of SDH among Forsyth County residents within their own organization, power, or realm.