



Creating Healthy Communities

2015-2019

Responsive. Community-Driven. Impactful. Sustainable.



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This report is the visual summary of Ohio's Creating Healthy Communities (CHC) Program from 2015-2019; a more detailed version of findings from this five-year period is available. CHC is intentionally designed to be responsive, community-driven, impactful, and sustainable.

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IT TAKES ALL OF US TO CREATE A CULTURE OF HEALTH

Creating Healthy Communities, by design, incorporates multiple voices to create a culture of health. Three distinct perspectives informed this report.

Ohio Department of Health

"The story doesn't start with CHC but starts before. CHC comes in and elevates. This is how CHC works best – when it starts in the community."

CHC Local Coordinators

"I think the work that we've tried to do through the CHC Program is really community-organizing centric. That means we seek to be in neighborhoods, building relationships with residents and leaders."

Community Partners

"The CHC Coalition is a driving force for city policy implementation. The CHC Program is providing the grassroots efforts towards community change and social norming."



Introduction

- + *Introduction to CHC*
- + *CHC communities, 2015-2019*
- + *CHC's approach*
- + *CHC Principles: Values in action*
- + *Orientation to this report*

Cuyahoga County, Ohio



INTRODUCTION TO CREATING HEALTHY COMMUNITIES

The CHC Program is housed within and managed by the Bureau of Health Improvement and Wellness at the Ohio Department of Health (ODH).

Vision Making the Healthy Choice the Easy Choice



All Ohioans deserve the opportunity to reach their full health potential no matter where they are born or live.

An estimated 80% of the factors that impact health are modifiable, including health behaviors and community conditions related to transportation, built environment, and housing. Systemic inequities built into policies, systems, and environments influence the likelihood that an individual can reach their full health potential. Some Ohioans, such as those who are African American/Black, who have a disability, who have lower incomes, and/or who live in Ohio's Appalachian counties, have been denied access to health-supporting resources and environments.

CHC addresses state priorities.

From 2015-2019, ODH funded 23 counties/cities to implement strategies that address the federal Healthy People 2020 goals and the 2017-2019 Ohio State Health Improvement Plan. CHC strategies address many of the cross-cutting priorities outlined in the State Health Improvement Plan, including physical activity and access to healthy food, tobacco use, transportation, and health equity.

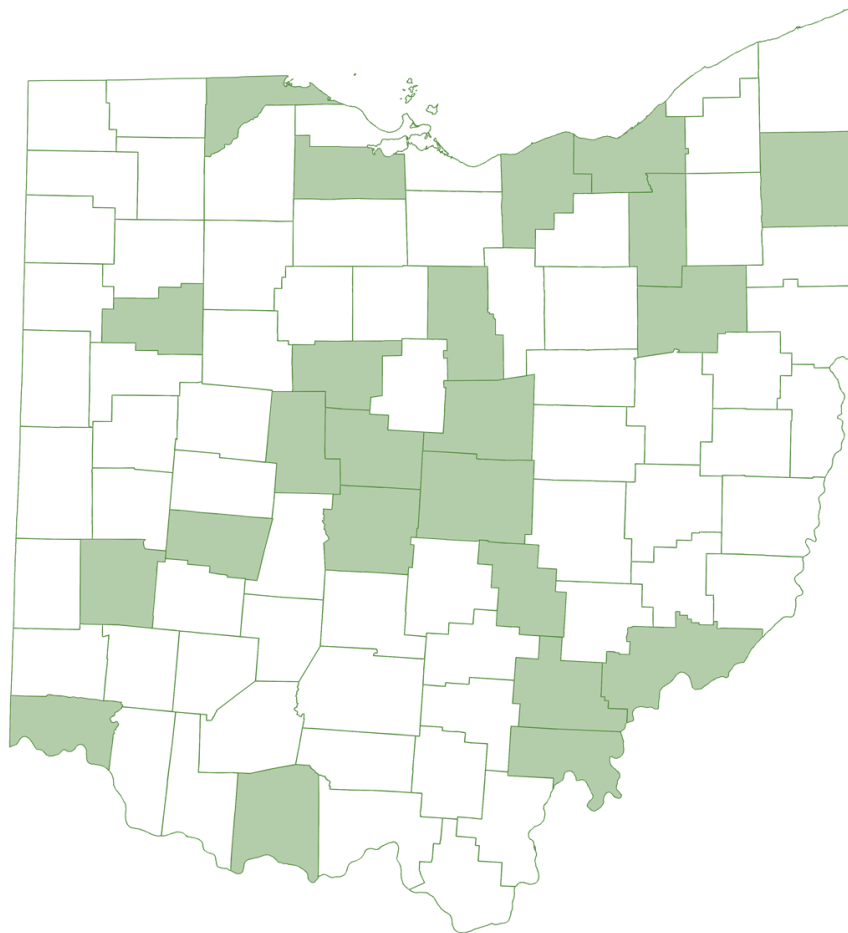
CHC is funded by the Centers for Disease Control and Prevention's (CDC) Preventive Health and Health Services Block Grant (PHHSBG).

CHC COMMUNITIES, 2015-2019

Communities across the state were funded through grants and selected using a competitive process.

23 *coordinators* were funded at the city or county level. Each coordinator works with three priority communities, for a total of

69 *communities* funded. These communities are identified using **data** to pinpoint the presence of health inequities, as well as demonstrated **partnership** support to show readiness.



CHC'S APPROACH CREATES OPPORTUNITIES FOR HEALTH

CHC intervenes on upstream factors – policy, systems, and environments (PSE) – to create and expand Ohioans' opportunities for physical activity, healthy eating, and tobacco-free living. The assumption underlying this approach is that intervening on these PSE drivers of health offers the greatest potential for creating population-level change. This is complex and generational work that requires a serious commitment to ongoing partnership and learning.

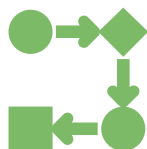


Policy

Policies like the University of Cincinnati's tobacco-free policy make it easier for people to work, live, and play in smoke-free settings. Signage pictured below supports communication of this policy across campus.



University of Cincinnati tobacco-free signage.



System

System change, like the Supplemental Nutrition Assistance Program (SNAP) benefits at farmers' markets, are a commonly adopted CHC strategy. In Marion County, healthy foods are now more affordable for all residents.

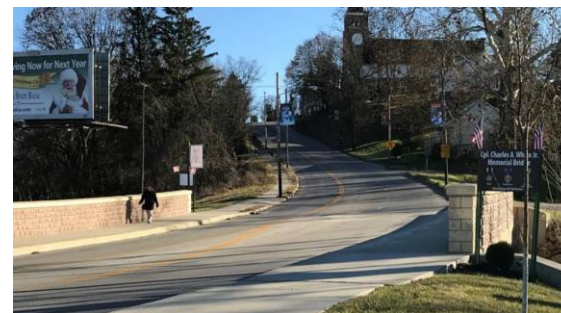


Marion County farmers' market with SNAP.



Environment

Perry County engaged in the development of a comprehensive, community-led active transportation plan. Implementation includes sidewalks that meet the requirements of the Americans with Disabilities Act (ADA) and a county-wide safety campaign.



Perry County infrastructure improvements.

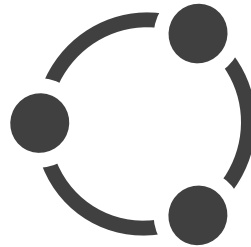
CHC'S APPROACH RELIES ON STRONG STATE AND LOCAL COLLABORATION

CHC is implemented by a cross-sector collaboration of individuals and organizations at the state and local levels. Each group plays a critical role in supporting and implementing CHC activities, building on the strengths of one another's level of influence.



State program staff

Provide infrastructure to support collective CHC activities (e.g., technical assistance, monthly calls, specific trainings, in-person meetings, site visits, program administration).



Local CHC coordinators

Lead and engage a cross-sector coalition of local level partners to implement CHC strategies (e.g., manage mutually beneficial partnerships, implement sustainable policies, systems, and environmental change).



Local community partners

Collaborate with CHC coordinators to implement CHC strategies (e.g., implement projects, participate in coalitions, spread the word).

CHC PRINCIPLES: VALUES IN ACTION

While all CHC coordinators are accountable to the same grant requirements, the unique context of each community means that CHC **implementation looks different in each community.**

The principles to the right are **grounded in CHC values.** Principles inform decision making and provide guidance for navigating complex systems.

CHC's principles **provide direction** for implementation while **maintaining flexibility** to allow communities to tailor activities to fit unique contexts and priorities.

1

Activate and Engage Communities. CHC is the conduit for motivating and driving change, through community engagement and mobilization. Activities of CHC are rooted in community priorities.

2

Cross-Sector Collaboration. There is coordination of work and consistent messaging among partners in diverse sectors at the national, state, and local levels around policy, systems, and environmental change in healthy eating and active living.

3

Ease of Access. By addressing barriers, CHC improves accessibility of healthy choices to Ohioans, especially for those groups facing the steepest obstacles.

4

Health Equity. CHC is invested in individuals and populations disproportionately affected by chronic disease.

5

Sustainable Change. CHC leverages resources, forms partnerships, and builds capacity to ensure lasting policy, systems, and environmental change.

ORIENTATION TO THIS REPORT

The report is designed to reflect the context and complexity of the CHC program.

The purpose of this report is to **synthesize the contributions of the CHC program from 2015 to 2019**. The systems in which CHC is implemented are complex and multi-faceted, which requires a lens that is responsive to these complexities.

This report was created by Professional Data Analysts (PDA), in collaboration with the CHC Program staff at ODH. Questions about the program should be directed to Sarah Ginnetti, RD, LD, Sarah.Ginnetti@odh.ohio.gov.

This report is organized into four sections describing how CHC works in and with communities to make lasting change:

1 Responsive: CHC is designed to be responsive to community priorities and contexts.

2 Community-Driven: CHC brings community voices together to spark broader change.

3 Impactful: CHC creates opportunities for millions of Ohioans to eat healthy food, be physically active, and live tobacco free.

4 Sustainable: CHC seeds change in communities for lasting impact.

The report concludes by looking ahead to CHC's next steps.



CHC is Responsive

-
- + CHC is responsive to statewide health priorities*
 - + CHC is responsive to health equity*
 - + CHC is responsive to context*
 - + CHC is responsive to data*

1

CHC IS RESPONSIVE TO STATEWIDE HEALTH PRIORITIES

Overall well-being for Ohioans is falling farther behind the rest of the country.

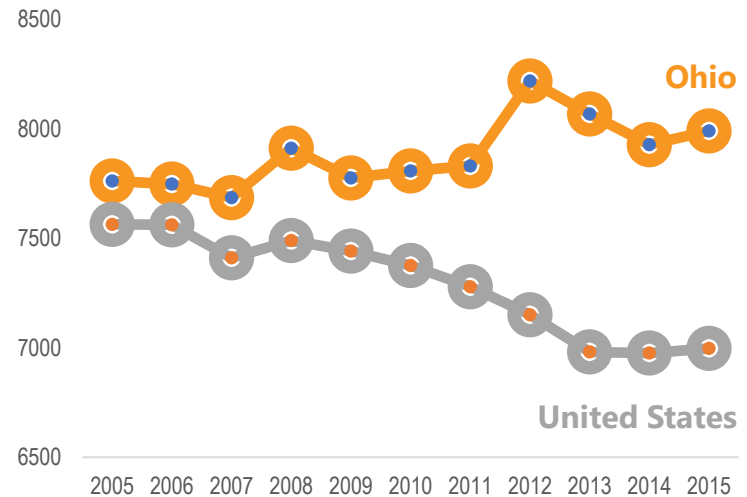
Not all Ohioans have equal access to resources and opportunities to support optimal health. The 2016 Ohio State Health Assessment found that that **Ohio ranked in the bottom quartile of all states** for overall health, with persistent disparities by race, ethnicity, income, disability status, and geography due to lack of opportunities for all residents to reach their full health potential. Ohio's rate of premature death began to diverge from the national rate in the early 2000s, generally increasing, while in the United States the rate has continued to decrease. Premature deaths may be preventable through a combination of behavioral modifications and changes in social factors.

CHC intervenes upstream to improve well-being.

The CHC program is responsive to state priorities for improving health and well-being. The statewide plan to address the priorities in the 2016 State Health Assessment are detailed in the 2017-2019 [State Health Improvement Plan \(SHIP\)](#). **Chronic disease prevention** and management is one of three prioritized topics.

Premature death

Years of potential life lost before age 75 per 1,000 population, from America's Health Rankings analysis of CDC WONDER Online Database



In this plan, promoting **healthy eating, active living, and tobacco prevention and cessation** are strategies identified to promote cross-cutting factors that impact all three priority topics. These strategies are related to community environments and systems and require coordinated and collaborative efforts at the state and local levels to improve the health of Ohioans.

CHC is designed to address these priorities.

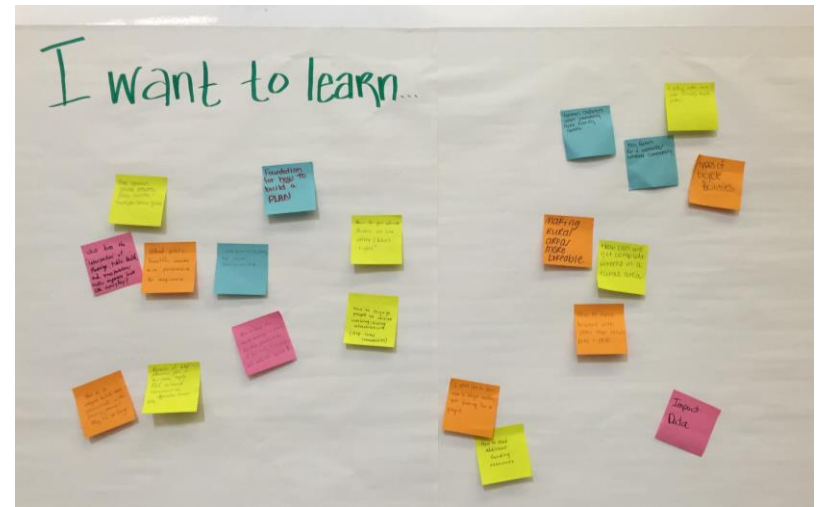
CHC IS RESPONSIVE TO HEALTH EQUITY

Many Ohioans do not have access to resources because of systemic inequities built into policies, systems, and environments.

Ohioans who are African American/Black, those who have a disability, those who have lower incomes, and/or those who live in Ohio's Appalachian counties have disparate opportunities to reach their full health potential.

Addressing the root causes of these inequities requires changing policies, systems, and environments. This type of work requires cross-sector collaboration; partnerships between public health and community residents, organizations, and leaders; and dedicated time and funding to facilitate the work.

CHC is designed to address these needs.



CHC IS RESPONSIVE TO CONTEXT

Context influences availability of resources to implement activities, strategies selected, and local approaches to working in and with community. Context also informs how strategies are addressed and who partners are, as well as the best way to engage the community residents and other partners.



Individual context

CHC coordinator's education, experience, approach, and professional or lived experiences related to racial and economic justice and health equity.

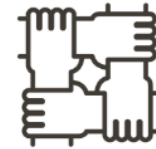
"I was fortunate enough to have already worked in this community for a while. If I didn't know the right person, I knew the person that knew the right person." – CHC coordinator



Organizational context

Local public health's support for chronic disease prevention programs and capacity to support grant writing or other content expertise.

"I definitely think it helps to have that support, being at a Health Department that has resources, and good leadership. I think that really helps." – CHC coordinator



Community context

Community size, geography, culture, and resources.

"In Appalachia, we don't have the luxury of having a plethora of resources at our fingertips, so we have to work together to figure out a way to get it." – CHC coordinator

"When you're in a bigger county, there's more people working in silos." – CHC coordinator

CHC IS RESPONSIVE TO DATA

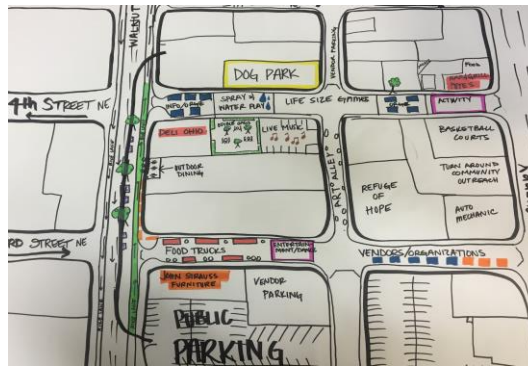
Data drives implementation

Data is at the forefront as the local CHC work is being proposed and planned. CHC coordinators referenced data on health disparities to inform their selection of priority communities. Communities with the highest rates of chronic disease and/or historically marginalized populations were prioritized for intervention.

Prior to implementing strategies, CHC coordinators also regularly collected feedback from and engaged community members in creative ways. This feedback and engagement informed the implementation of strategies and is a way to gain buy-in from the community to ensure changes are sustainable.



Sandusky County, idea generation with Post-Its.



Stark County, neighborhood planning.



Cuyahoga County, after speaking with the local finance committee to secure funds for an outdoor basketball court.

CHC is Community-Driven

- + Creating a culture of health is complex*
- + Communities have power to make change*
- + How communities drive CHC*
- + What CHC partnership looks like*

2

CREATING A CULTURE OF HEALTH IS COMPLEX BUT POSSIBLE

The process of engaging communities increases the possibility of creating culture change



Washington County, residents use a newly expanded trail.

"We have people that are very passionate about their health and their communities, and they want to see it be better. They're tired of the stereotype [that] people have to get out, there's nothing here. No, there's beauty here. They may need some more resources, but there's definitely something to say for it and there's more to build on. That's definitely a strength."

– CHC coordinator



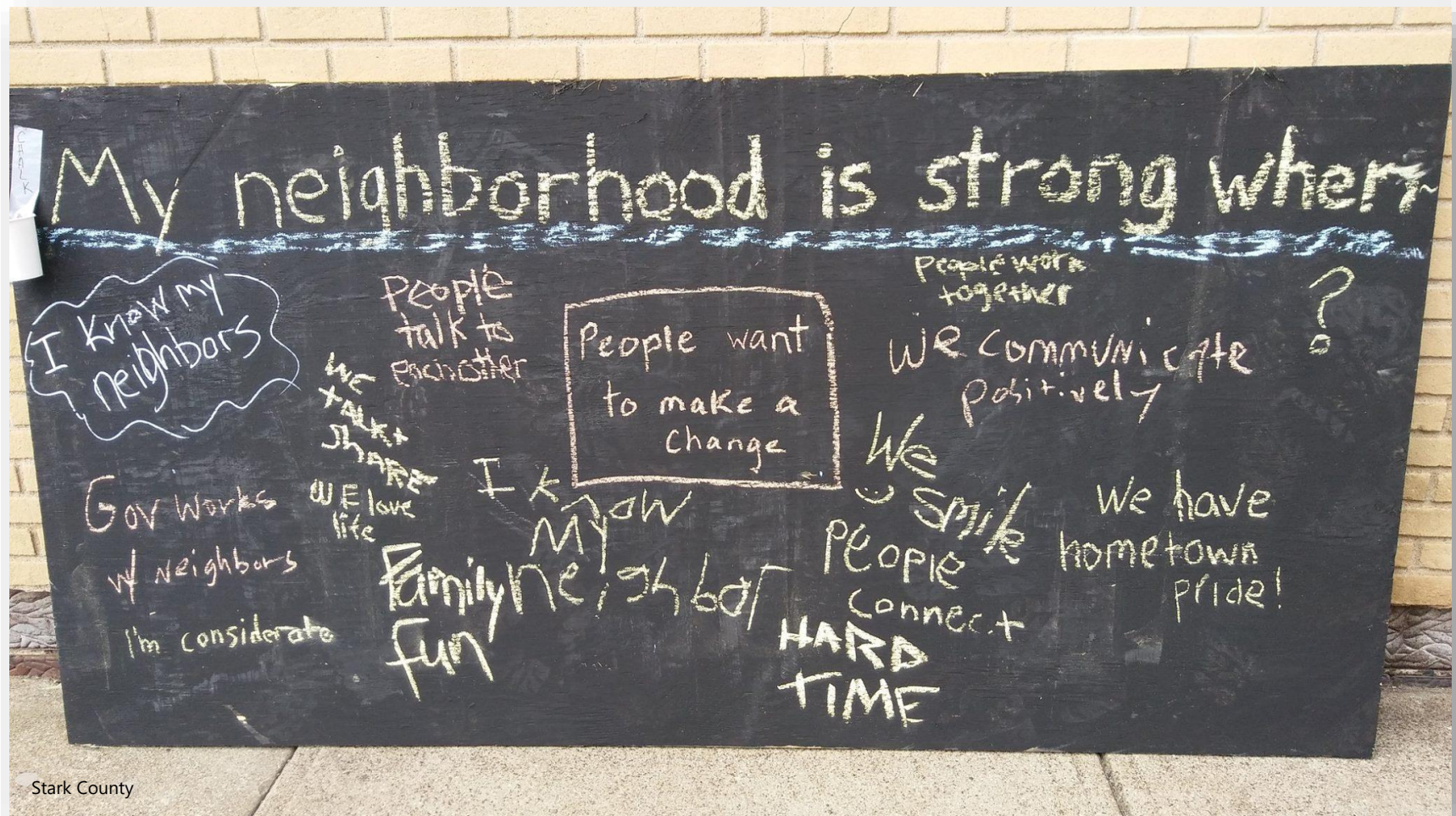
Adams County, mobile farm to table bus.

"We've really invested a lot of time and training, and it's paying off. We're all starting to talk the same language. Whether it's cross-sector talking – if it's planning, they have that health lens. Or, if it's community development, they have that lens on health equity."

– CHC coordinator

COMMUNITIES HAVE POWER TO MAKE CHANGE

"What CHC does is huge. It **gives a voice to the community** when so many times the community feels like it's not heard. But through this program they can actually identify ways in which **THEY** can improve their community." – CHC coordinator



HOW COMMUNITIES DRIVE CHC

Coalition members and other community partners decide what gets implemented

Coalition members represent the community and attend formal meetings to drive change. They select strategies to improve access to healthy food, opportunities for being physically active, and environments that are tobacco-free. CHC partners have installed adaptive playground equipment and built trails and community gardens to be accessible to people of all abilities.

"It's so important to have a formal coalition to make health and wellness a funded priority." – CHC coordinator

Unified voice sparks broader change

A history of coordination with other programs expands impact and promotes sustainability.

"The strength of the coalition is that the coalition members really do have a shared vision. They will talk about the coalition in the context of the work that they do. Such as going to a meeting and representing their agency and the Creating Healthy Communities Coalition. Now this is the work CHC does in the community. The CHC Coalition gets this type of work done, and I think that understanding is a reflection of the maturity, and trust, and experience that the coalition has had together, getting things done." – CHC coordinator



WHAT CHC PARTNERSHIP LOOKS LIKE

There are some key aspects of partnerships that are important in CHC work, such as partnering across sectors and engaging community residents in planning and implementing CHC strategies. Results of a 2019 survey of CHC partners are shown below.

About **two-thirds** of partners:



Franklin County, Columbus Bike Friendly Franklinton Coalition.



Trumbull County, cross sector experiential community walkabout.

Spread the word about CHC, either as an overall program or about a specific CHC project.

Engaged in cross-sector collaboration in their local CHC work.

Half of partners:



Summit County, Barberton Bike Share.



Cuyahoga County, community door knocking event.

Spent time supporting the work of a CHC project, like a bike share, playground, or farmers' market.

Focused on health equity as a process – how communities are engaged matters.

CHC is Impactful

-
- + CHC makes the healthy choice the easy choice*
 - + Increased opportunities for healthy eating*
 - + Increased opportunities for active living*
 - + Increased opportunities for tobacco-free living*
 - + Invisible work of CHC*

3

CHC MAKES THE HEALTHY CHOICE THE EASY CHOICE



Athens County

CHC intervenes on upstream factors – policies, systems, and environments – to provide Ohioans with opportunities to make the healthy choice not just possible, but easy.

Healthy eating, active living, and tobacco-free living reduce the risk of developing chronic diseases. Yet it is not always easy or even possible to live this way. CHC communities select and implement strategies targeting each behavior that their residents most need to increase opportunities for health.



Healthy eating



Active living



Tobacco-free living

HEALTHY EATING STRATEGIES IMPACTED 1 IN 10 OHIOANS



Larger font sizes represent greater numbers of people impacted by the strategy.

HEALTHY EATING STRATEGIES IN ACTION



Union County farmers' market



Lucas County small retail store



Allen County Bradfield garden



Licking County farmers' market



Athens County small retail store

ACTIVE LIVING STRATEGIES IMPACTED 1 IN 6 OHIOANS



Larger font sizes represent greater numbers of people impacted by the strategy.

ACTIVE LIVING STRATEGIES IN ACTION



Meigs County playground



Richland County mid-block crosswalk



Athens County active commuting support



Summit County bike share

TOBACCO-FREE LIVING STRATEGIES IMPACTED 1 IN 9 OHIOANS



Larger font sizes represent greater numbers of people impacted by the strategy.

TOBACCO-FREE LIVING IN ACTION



Adams County trail



Trumbull County bus shelter



Union County school



Delaware County park



Athens County library

INVISIBLE WORK OF CHC



"It is difficult to report in just a few sentences all of the background work, legwork, conversations, and everything that leads up to that final implementation of the project. So just knowing all of the work that was done and all of the partners that have been involved in the entire process to get where we are today...people outside of CHC need to know the invisible work."

– CHC coordinator

CHC is Sustainable

- + *CHC generates a domino effect*
- + *Seeding change in communities*
- + *Simon's Supermarket: CHC's contribution to sustainable change*
- + *What's next*

4

CHC GENERATES A DOMINO EFFECT

*"We purchased trash cans for a park, which seems like ... I mean, they're trash cans, doesn't seem super exciting. But we partnered with a church organization and they had a night where we came and painted the trash cans really colorful and we also partnered with an artistic group and they helped us with the designs and with painting the trash cans and then what spurred from that was at that park, they decided to do a mural on the pool house. So it was kind of cool that **something as simple as trash cans spurred this whole park improvement...**"*
– CHC coordinator

Sustainability for CHC, by design, sparks a domino effect through which one smaller change leads to a cascade of changes in priority communities.



Lorain County inclusive playground

SINGLE PROJECTS TURN INTO MULTI-YEAR, MULTI-LEVEL PROJECTS

CHC generates ripple effects that expand impact beyond the scope of singular projects.

There are numerous examples of how CHC work created domino effects in communities, where CHC served as a spark that contributed to a cascade of subsequent positive changes. Aspects of this domino effect that make CHC work sustainable include:



Leveraging **tens of millions of dollars** from federal, state, and local organizations, public and private sectors.



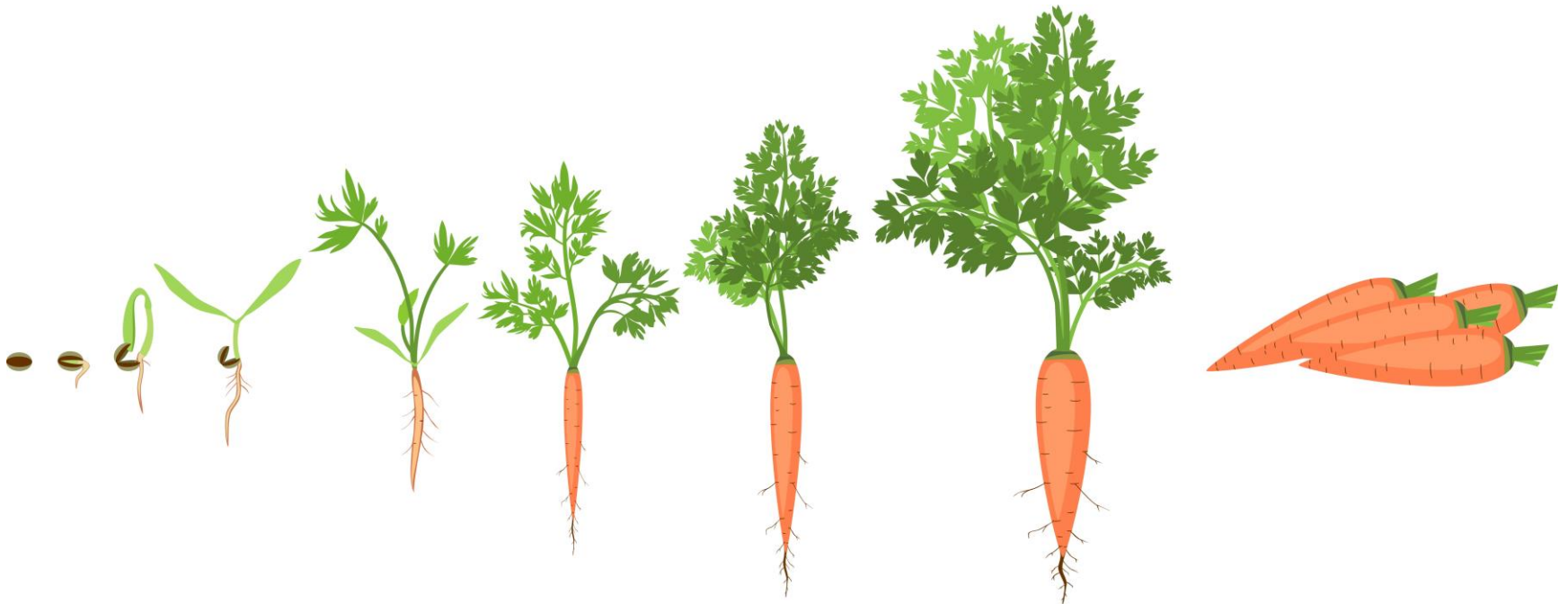
Coordinating **thousands of volunteer hours** to build playgrounds, staff farmers' markets, staff a bike rodeo, or collect community feedback.



Spreading the word about CHC through local media, participation in a CHC coalition, or speaking to a decision-making body (city government, local school boards, etc.).

SEEDING CHANGE IN COMMUNITIES

The ODH CHC program is funded by the Centers for Disease Control and Prevention's Preventive Health and Health Services Block Grant. This work is amplified by funding through partnerships, grants, and volunteer hours. State and local CHC programs leveraged an **additional \$27,333,680 over five years to make the healthy choice the easy choice.**



Many of the CHC strategies and activities need additional funding from varied sources to be successfully implemented, particularly strategies that involve infrastructure development or improvements. CHC might germinate work at the beginning stage or amplify work that is in development.

WHERE THE FUNDS CAME FROM

"Sustained funding over many years is what will truly change the culture in our communities."
– CHC coordinator

Additional funds came from a wide range of sources, often driven by the needs of the specific project or strategy, and the partnerships built to implement that work. Highlights include:



Centers for Disease Control and Prevention

- State Physical Activity and Nutrition (also known as 1807).
- State and Local Public Health Actions (also known as 1422).



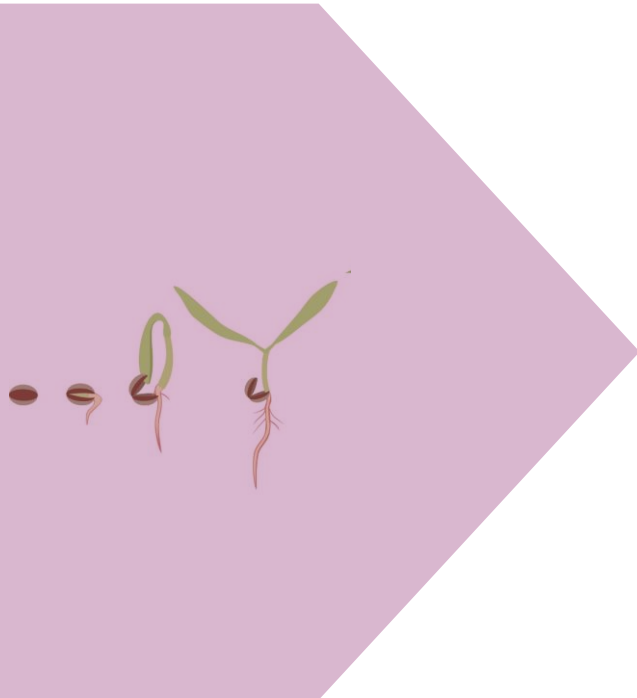
Grants, foundations, and membership organizations

- Extension offices, metropolitan planning organizations, YMCAs, elected bodies.
- Community Development Block Grant.
- National Association of Chronic Disease Directors.



Community organizations and institutions


- Hospitals, universities, local restaurants and businesses.




Simon's Supermarket: CHC's contribution to sustainable change.




Cuyahoga Supermarket Assessment identified **food deserts**, including certain Euclid neighborhoods.



Strong partnerships developed between CHC coordinator, supermarket owner, city government, and residents.



CHC coordinator wrote a **grant** to secure \$650K of state funding, which was used to **leverage** an additional \$125,000 from the city.



CHC partners held **six forums** to engage residents in the store design.



Coordinated media efforts drew attention to the development, launch, and anniversaries of the supermarket.



2017: Euclid Supermarket Opens!
Fresh food available to 3,000 Euclid residents (23% of the target population).



2018: \$2.3 million investment into the Buckeye neighborhood's Simon's Supermarket, in a former food desert in Cleveland.



2020: Bedford Simon's Supermarket opens in another former food desert.



Creation of 50 local jobs plus social capital with Euclid residents, which continues to this day with community forums.

\$4.6 million of revenue in the first 10 months, including \$400K in fresh produce and \$1.6 million in meat sales.




Photo of Simon Hussain, owner of Simon's Supermarkets

WHAT'S NEXT FOR CHC

CHC has sustained funding to provide grants to 23 local city and county public health departments in a new grant cycle, 2020-2024. New priorities and opportunities include:

- Addressing health equity, **creating health opportunity** and combatting systemic injustices.
- **Capacity building** for newly funded CHC communities.
- Creating **virtual engagement and training** opportunities during COVID-19.
- **Aligning with** the State Health Improvement Plan, the 2021-2030 Ohio Cancer Plan, Public Health 3.0 initiatives, and the federal Healthy People 2030 goals.

"Let's see what we can do to expand it (CHC). We have to protect this funding because it really is precious and really actually addresses health disparities in the communities that we work in."

– CHC coordinator



ACKNOWLEDGEMENTS

The Ohio Department of Health CHC staff provide the backbone for the CHC work, including funding and time for professional development, evaluation, and technical assistance. The CHC coordinators are the backbone of the local implementation. All make CHC possible.



Ohio Department of Health CHC staff and CHC coordinators celebrate Public Health Week at a state-wide training, April 2019.

The work of CHC is made possible by countless state and local staff, partners and contractors, and volunteers across the state of Ohio. Thank you for making the healthy choice the easy choice for millions of Ohioans!