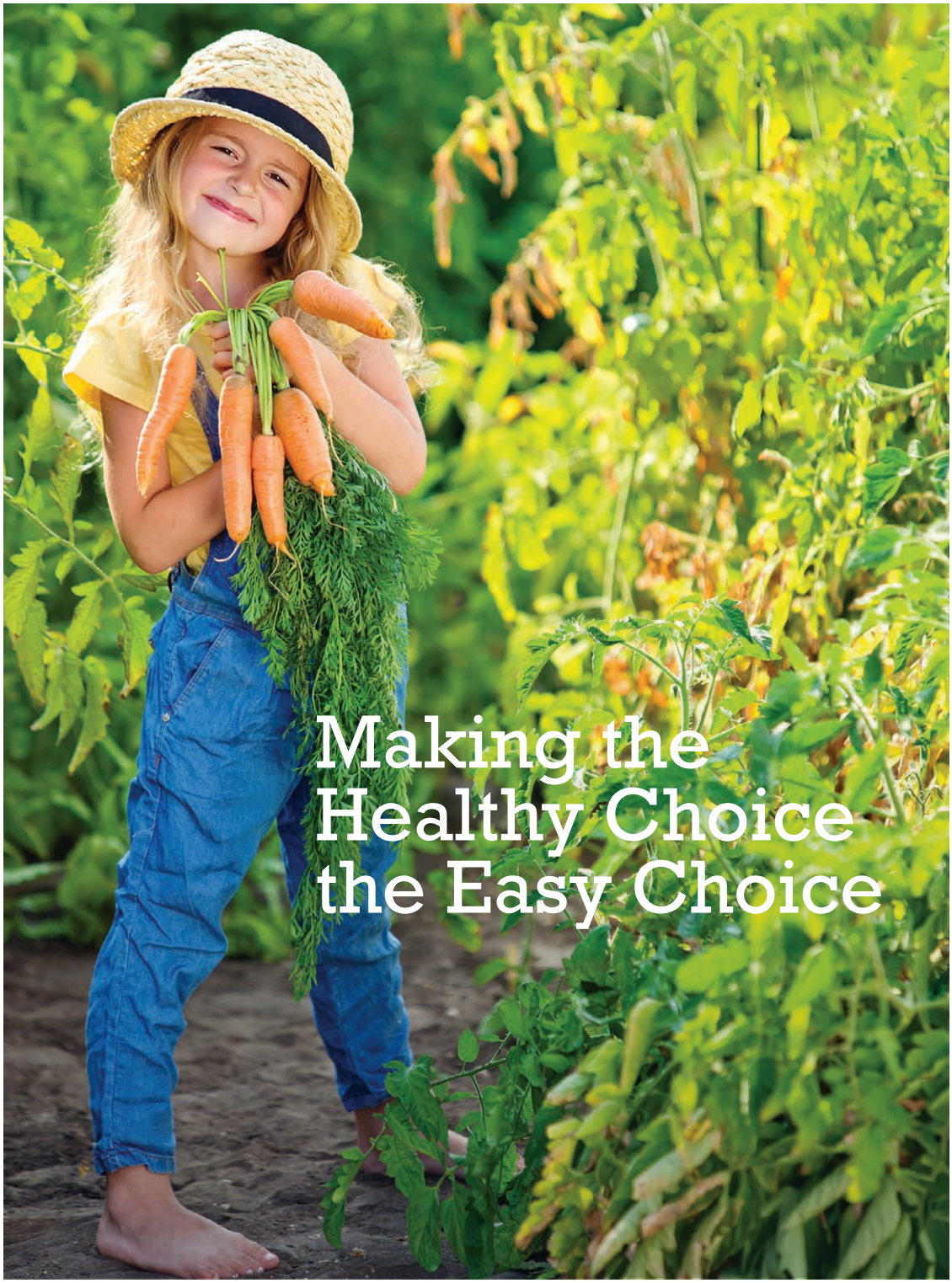


Making the Healthy Choice the Easy Choice

Creating Healthy Communities
Preventing Chronic Diseases in Ohio

2010-2014 Program Evaluation Report

Ohio Department of Health

PLAYGROUNDS

Mission:

Creating Healthy Communities (CHC) is committed to preventing and reducing chronic disease statewide. Through cross-sector collaboration, we are activating communities to improve access to and affordability of healthy food, increase opportunities for physical activity, and ensure tobacco-free living where Ohioans live, work and play. By implementing sustainable evidence-based strategies, CHC is creating a culture of health.

EQUITY

HEALTHY FOODS

Introduction

Today, more than ever, community leaders understand that improving the health and well-being of individuals and families means changing health-related behaviors which is most effectively done by addressing factors that influence those behaviors. In light of changing funding opportunities and increased competition for resources, communities need to ensure that they maintain the capacity to work in partnership to identify and address public health challenges, and that their resulting health initiatives can have lasting, sustainable impact.

In 2009, the Ohio Department of Health's (ODH) Bureau of Health Promotion and Risk Reduction engaged in a strategic planning process, prompting a thorough review of the Centers for Disease Control and Prevention's (CDC) Preventive Health and Health Services (PHHSBG)Block Grant objectives. In the course of this planning, the bureau identified as "guiding principles" for prevention a sustained focus on disparate, high-need populations as well as geographically diverse populations who are at the highest risk of developing chronic diseases. In reviewing the results of Ohio's prevention program from its earliest inception in 2001 through the 2005-2009 Cardiovascular Health (CVH) Program, it was clear that these efforts had an impact that reached beyond cardiovascular disease alone. As a result, the program was renamed to reflect the many ways a healthy lifestyle improves quality of life: and the CVH program was retitled the Creating Healthy Communities program.

The Creating Healthy Communities (CHC) program served high-need communities in 16 counties with a collective population of 5,797,335. In this new program, counties with the highest need were given priority, as determined by weighted data based on the number and percent of individuals below poverty level (based on 2007 data) as well as the number and percent of deaths from prioritized chronic diseases. Within these targeted areas, CHC continues to emphasize a grassroots, population-based approach to prevention in schools, workplaces, communities, and healthcare institutions.

The Creating Healthy Communities program served high-need communities in 16 counties with a collective population of 5,797,335

As further evidence of excellence in prevention, Ohio received the PHHSBG 2010 Champion Award for Program Delivery from the U.S. Department of Health and Human Services for the achievements of the 2005-2009 CVH program. This award is presented to individuals and/or groups for extraordinary national, state, and community efforts supporting the mission of the PHHSBG. This award recognized Ohio's CVH program for exceptional leadership, program delivery, public policy achievements in prevention, public policy achievements in promotion and protection of the health and safety of all people, and fiscal integrity of the PHHSBG.

Like its predecessor, the CHC program is designed to enhance local communities' abilities to develop and implement and sustain policy, systems, and environmental change strategies that can help prevent or manage health-risk factors for heart disease, stroke, diabetes, cancer and obesity.

CHC is working to increase opportunities for physical activity, improve access and affordability of healthy food, and ensure tobacco-free living for all Ohioans. CHC coordinators in 16 counties across the state have activated and engaged local stakeholders through coalitions to accomplish these objectives and ensure sustainability.

Need

While all Ohioans are at risk for developing a chronic disease, rates of heart disease, stroke, and diabetes in Ohio are higher among blacks, residents of Appalachian and rural counties, and those with the lowest income and education. Similarly, differences in rates of associated risk factors (i.e., high blood pressure, lack of physical activity, insufficient fruit and vegetable consumption, and overweight and obesity) are identified among these same populations. Called health disparities, these differences are often due to individual characteristics, such as age, sex and genetics, as well as differences in access to health care and social services, availability of community resources (e.g., safe places to be active, healthy food options), and lack of economic and educational opportunities.

The causes of chronic disease, like most public health priorities, arise from more than just individual actions and decisions. Social and environmental conditions—such as neighborhood safety, community isolation, poverty, access to employment and education; and ability to find affordable healthy foods—are often the common thread to much of the disease burden. No organization is capable of reducing that burden alone, and because health begins in homes and communities, it takes collaboration and a cross-cutting approach to make change.

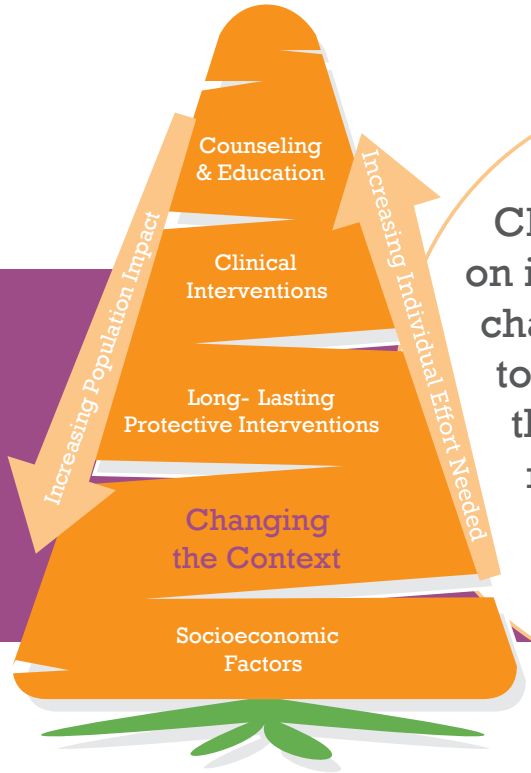
Creating Healthy Communities
Preventing Chronic Diseases in Ohio

neighborhood safety
community isolation
poverty
employment
education
affordable healthy foods

Our Approach

During the 2010-2014 CHC grant cycle, 16 counties were funded through a competitive application process. Fourteen local health departments and one area health education center, serving two counties, were awarded grants to serve the 16 counties. Each project staffed a full-time CHC coordinator to commit to healthy eating, active living, and tobacco changes in their community. CHC projects established and utilized coalitions in order to engage community members, analyze local health issues, shape policies and environments, and create sustainable, community-based improvements. CHC interventions focus on priority communities within each county that face a disproportionate rate of chronic disease and poverty.

State CHC staff provided one-on-one technical assistance as well as advanced state level prevention objectives. Webinars and in-person trainings were provided to keep CHC projects up-to-date with national promising practices, networking between local program coordinators and sharing ODH updates. For example, in November of 2013 CHC held a healthy corner store training utilizing local, state and national experts. ChangeLab Solutions was contracted to provide pre-training, in-person training and post-training assistance. CHC coordinators brought local partners such as retailers, hunger advocates, and non-profit stakeholders to collaborate on increasing access to healthy foods.



CHC focuses on interventions that change the environment to make healthy options the default choice, regardless of income, education, or other societal factors.

Connections can be made between policy and environmental strategies and longer term health outcomes.

Policy

Policy improvements may include "a law, regulation, procedure, administrative action, incentive, or voluntary practice of governments and other institutions." Example: a school wellness policy that ensures that 20 percent of food and beverage offerings are sourced locally as a farm to school initiative.

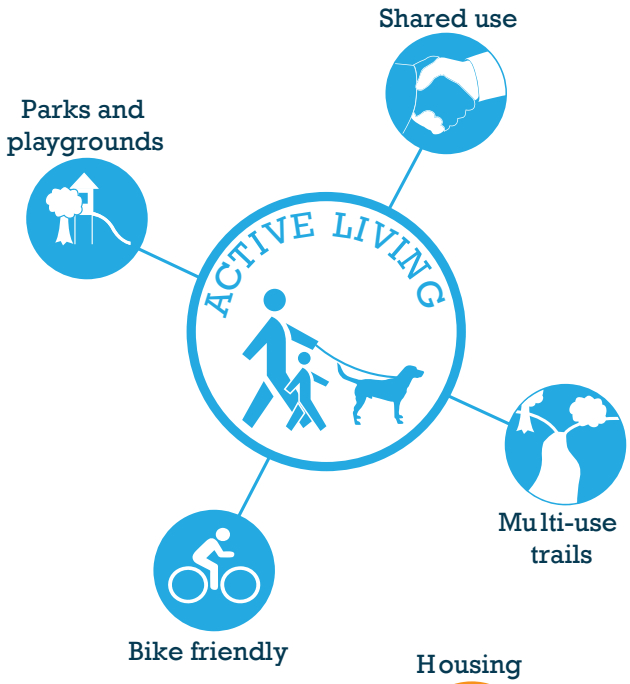
System

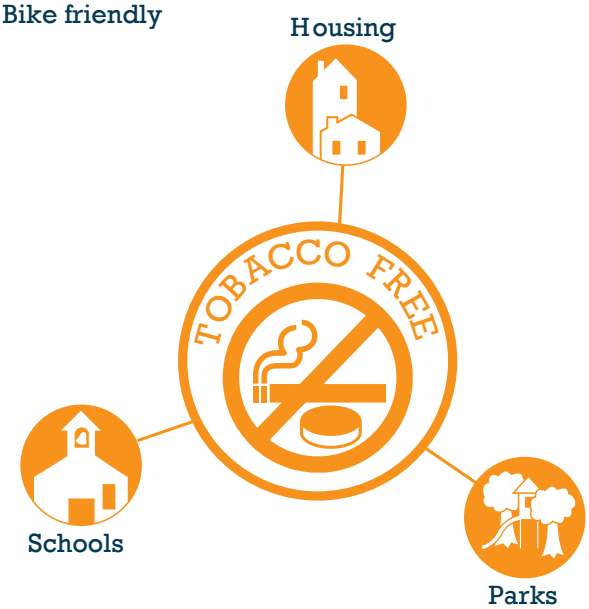
System improvements may include a "change that impacts all elements, including social norms of an organization, institution, or system." Example: Encouraging employee physical activity through walking meetings and incentives (such as flex time) for engaging in physical activity.

Environmental

Environmental improvements may include changes to the physical, social, or economic environment. Example: A change to street infrastructure that enhances connectivity for bicyclists and pedestrians and promotes physical activity.

Strategies to…

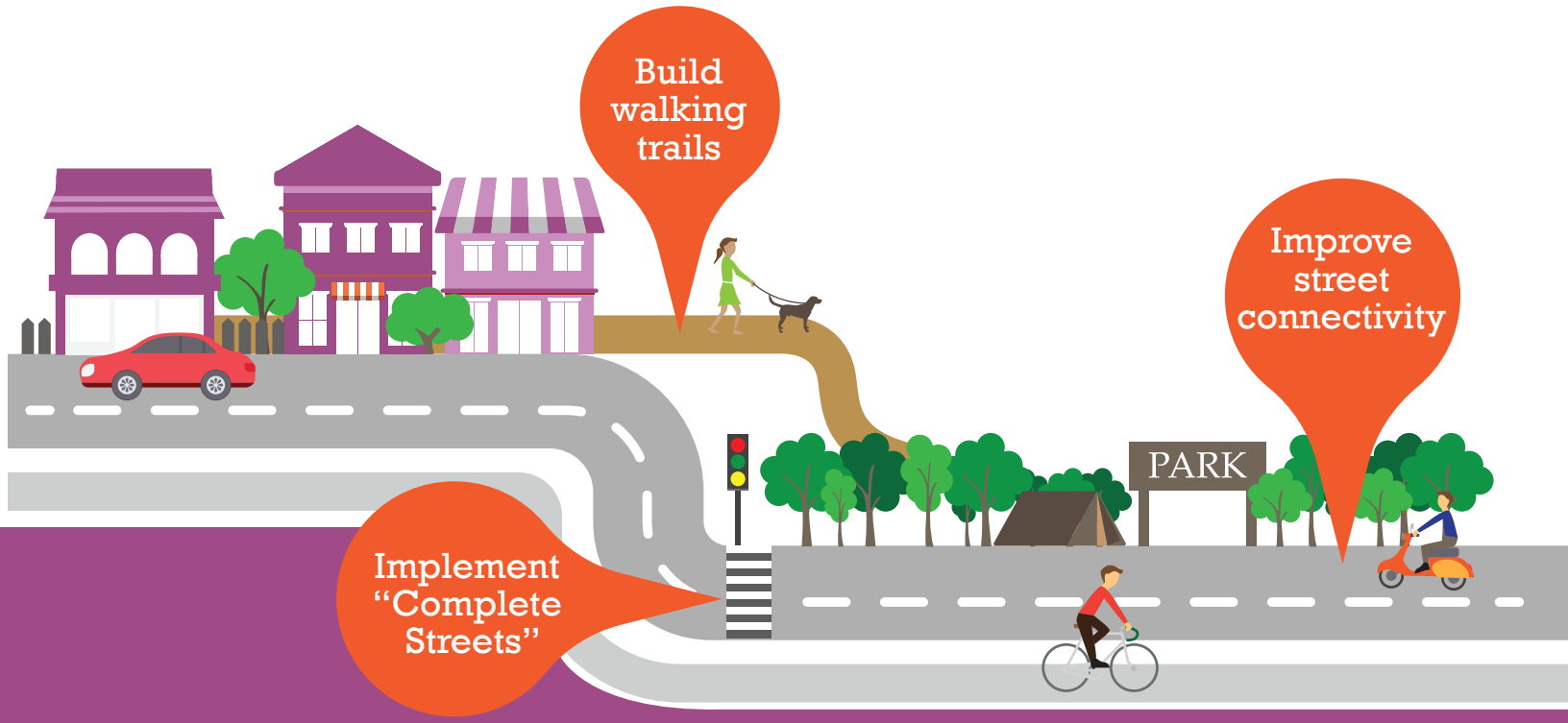




These strategies have been recommended by national health authorities such as the Centers for Disease Control and Prevention, Institute of Medicine, and Robert Wood Johnson Foundation to prevent obesity in the United States, and they represent only a handful of potential strategies.

... Improve Health

People are more likely to walk when their environment provides safe and convenient walking opportunities. Constructing walking trails and improving street connectivity has been shown to be effective in encouraging people to be physically active.



SHORT-TERM OUTCOMES

More walk-friendly neighborhoods

More opportunities for physical activity

Improved pedestrian safety

INTERMEDIATE OUTCOMES

Increased pedestrian use of trails and streets

Increased physical activity

LEADS TO

Improved health

Decreased chronic disease rates

Decreased obesity

FRESH PRODUCE

> It has been amazing... bikes for seniors, bike racks for the community, exercise equipment, smoking policies for schools, fresh food in schools, greenhouses, salad bars, exercise leader training... things that really matter and projects that will live on long after the grant.
>
> – Washington County CHC Coalition member

CLEAN AIR

Program Results

Local Partnerships

The success of CHC would not be possible without working with a multitude of partners to help drive positive change. Partners made it possible to leverage additional funding and resources, ensure sustainability, administer community health assessments, and advocate for the health of the community.

The 2014 annual coalition evaluation survey showed that 80 percent of CHC coalition members across the state have a sense that they are improving the health of their community.

In 2014, CHC's 16 local coalitions were represented by members from nearly 400 organizations!

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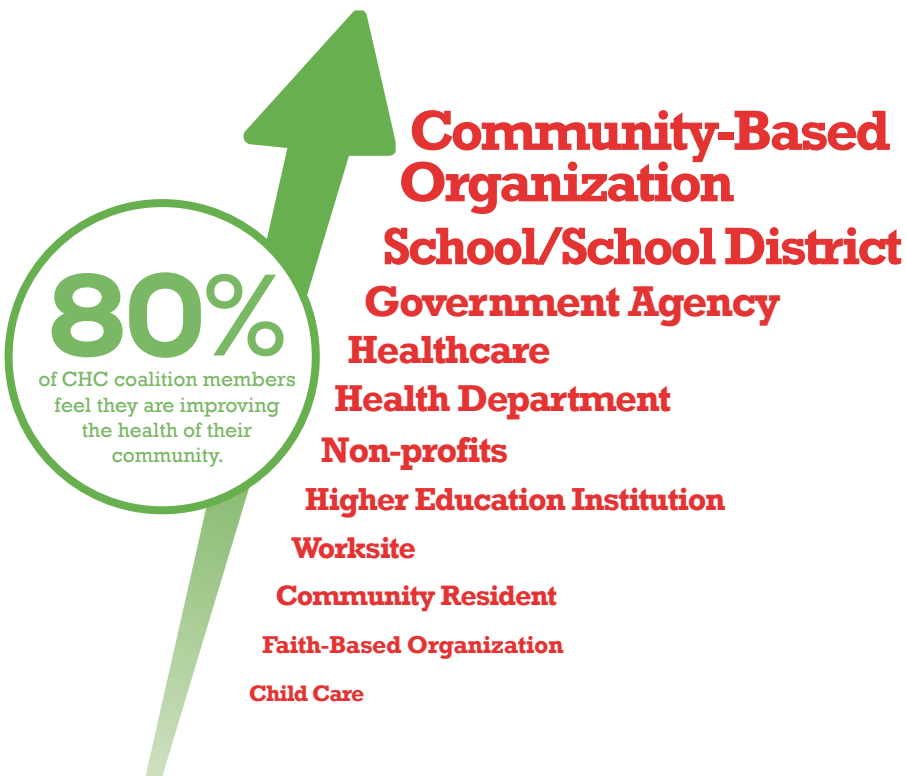


> The biggest benefits are improved coordination, less duplication of efforts, better communication and planning for the county, sharing of information and resources- overall; a great collaborative effort to affect change.
>
> – Lorain County CHC Coalition member

Assessment & Evaluation

Checklist

The Checklist was adapted from a number of existing documents including the Community Health Assessment and Group Evaluation (CHANGE) tool from CDC.

The Checklist served both as an assessment and evaluation tool for communities addressing chronic disease risk factors in their populations.

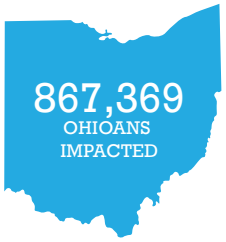
As an assessment the Checklist gave an overview of a community's resources, capacities and needs. The Checklist helped to identify opportunities, services, messages, policies, and social and political environments related to prevention and management of chronic disease.

The Checklist was used as an evaluation tool for monitoring progress toward community goals. Four health indicators were assessed: nutrition, physical activity, tobacco use, and chronic disease management in four settings: community, schools, worksites, and health care.

Impact

28% IMPROVEMENT

- 111 Physical activity programs
- 74 Physical activity programs in school
- 67 Walking/ bike trails additions
- 37 Physical activity programs in workplace
- 30 Bicycle Infrastructure Improvements
- 22 Bike Racks
- 22 Playground Equipment
- 16 Safe Routes to School
- 13 Physical Activity Programs in the Community



23% IMPROVEMENT

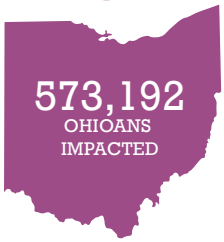
- 241 Community Gardens
- 105 Farmer's Market
- 75 School Nutrition Changes
- 67 Worksite/ Community Food Changes
- 48 Healthy Beverage Policies
- 22 Healthy Vending
- 19 Lactation Support Policies
- 13 Healthy Corner Stores

33% IMPROVEMENT

- 96 Tobacco-free schools and campuses
- 38 Tobacco-free campuses and workplace
- 15 Signage
- 9 Tobacco-free public spaces
- 4 Cessation resources
- 3 Tobacco-free housing

NEW
POLICIES & PROGRAMS

- 70 Childhood obesity prevention toolkit for healthcare providers
- 20 School district wellness policies
- 12 Wellness trainings
- 9 Shared Use Policies or Agreements



Between 2010 and 2014 the CHC program and their local partners engaged in more than **2,500** media-related activities.

Media and Recognition

Between 2010 and 2014 the CHC program and their local partners engaged in more than 2,500 media related activities in order to raise public and policy maker awareness about the CHC program and its accomplishments.

CHC state and local staff are seen as a model throughout the nation. CHC staff have presented nationally at the Food and Nutrition Conference and Expo, American Public Health Association, and Association of State Public Health Nutritionists Conferences. CHC has been spotlighted on several national webinars hosted by changelab solutions. Additionally, CHC local staff have leveraged their work to gain more leadership experienced through the Robert Wood Johnson Foundation and National Association of City and County Health Officials.

Throughout the last 5 years, CHC has published success stories from each of the 16 counties in 2012, 2013, and 2014. These stories were highlighted including in briefs from Trust for America's Health, Association of State and Territorial Health Officials, and Community Commons.

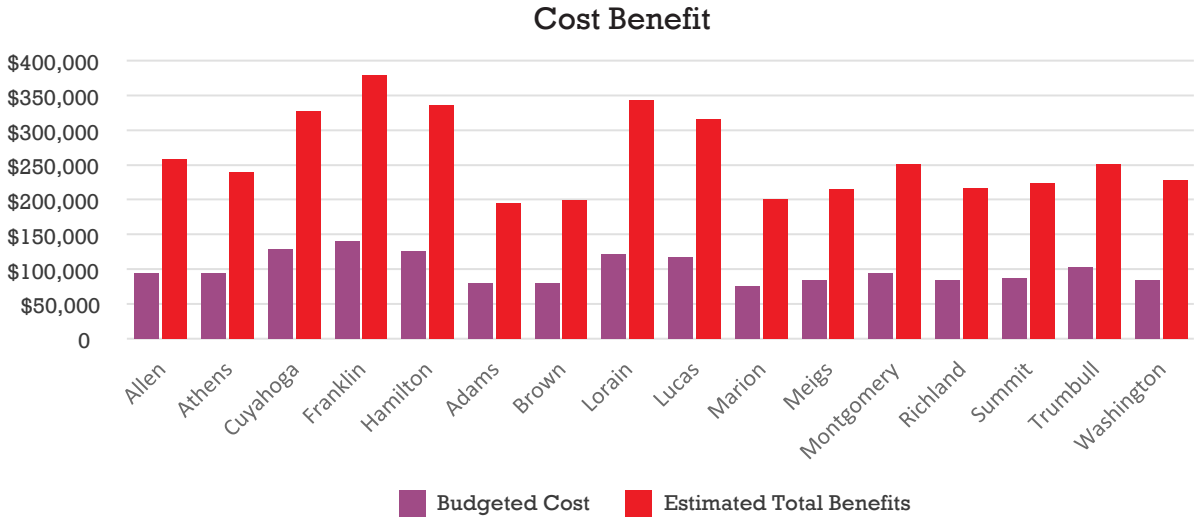
IMPROVING HEALTH

> CHC changes are really working to improve health, food access, physical activity and tobacco prevention in every sector; it crosses barriers and disparities.
>
> – Marion CHC Coordinator

Funding, Leveraged Resources and Investments

Since 2010, the ODH has invested almost $8 million into the CHC program through the CDC's PHHSBG. In addition, ODH and their local CHC partners have leveraged almost $5 million additional dollars to support CHC strategies and initiatives.

ODH and their local CHC partners have LEVERAGED almost $5 million additional dollars.



The above diagram depicts an analysis of the total budgeted costs and estimated total benefits of the CHC Program in 2014. A secondary analysis examined the aggregate economic benefits of the CHC Program, looking over the entire five-year budget cycle. Throughout the five years (2010 to 2014), the CHC Program invested approximately $487,700 per county for the three priority areas combined. This investment yielded an estimated economic benefit of $1,276,700 per county.

Acknowledgements

CHC is housed within the Ohio Department of Health's Office of Health Improvement and Wellness in the Bureau of Health Promotion. We would specifically like to thank the continued support from Ann Weidenbenner, MS, RD, LD, Primary Prevention Section chief and Andrew Wapner, DO, MPH, physician administrator for providing leadership and direction to the program.

CHC is funded by the Centers for Disease Control and Prevention's (CDC) Preventive Health and Health Services Block Grant (PHHSBG). PHHSBG allows 50 states, two American Indian tribes, eight U.S. territories, and the District of Columbia to address their own unique public health needs and challenges with innovative and community driven methods, while working to meet the goals of Healthy People 2020.

Healthy People is a set of goals and objectives with 10-year targets designed to guide national health promotion and disease prevention efforts to improve the health of all people in the United States. All the states, territories, and tribes aim to keep the block grant funding flexible to:

- **Address emerging health issues and gaps.**
- **Decrease premature death and disabilities by focusing on the leading preventable risk factors.**
- **Work to achieve health equity and eliminate health disparities by addressing the social determinants of health.**
- **Support local programs to achieve healthy communities.**
- **Establish data and surveillance systems to monitor the health status of targeted populations.**

References

YMCA of the USA
Making the Case to Stakeholders; Linking Policy and Environmenta Strategies to Health Outcomes

Centers for Disease Control and Prevention (CDC)
A Practitioner's Guide for Advancing Health Equity: Community Strategies for Preventing Chronic Disease (Health Equity Guide)

State Partners

Strategic Partners:

Internal:

Ohio Department Of Health:
- Tobacco Use Prevention And Cessation Program
- Office Of Health Equity

Bureau Of Healthy Promotion:
- Chronic Disease Programs
- Sexual Assault/Domestic Violence
- Violence And Injury Prevention
- Healthy Ohio Business Council
- School And Adolescent Health Program

Office Of Health Improvement And Wellness:
- Child And Family Health Services Program
- Wic Program

External:

American Dairy Association Mideast
American Heart Association
Association Of State Public Health Nutritionists
Buckeye Healthy School Alliance
Case Western Reserve University Prevention Research Center
Changelab Solutions
Local Health Departments
Ohio Academy Of Nutrition And Dietetics
Ohio Action For Healthy Kids
Ohio Association Of Physical Health, Education, Recreation and Dance
Ohio Chapter, American Academy Of Pediatrics
Ohio Child Care Resource And Referral Agency
Ohio Department Of Agriculture
Ohio Department Of Education
Ohio Department Of Job And Family Services
Ohio Department Of Transportation
Ohio Nutrition Council
Ohio Hospital Association
Ohio Safe Routes To Schools Network
Ohio Society For Public Health Education
The Center for Health Outcomes Policy and Evaluation Studies – The Ohio State University College of Public Health
The Ohio State University – Extension
The YMCA Of Ohio

www.healthy.ohio.gov/chc

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