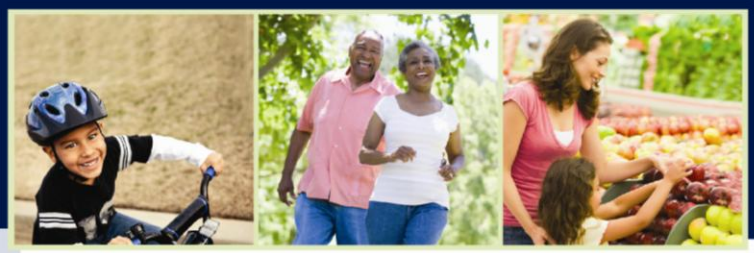

Improving Community Health through Policy: Case Studies

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Policy is a cornerstone of public health practice. Development and enforcement of polices and plans to promote and protect health and safety are essential public health services, and thus key standards for national public health department accreditation. In fact, few public health interventions can affect people's health so broadly and with such impact as policy. As communities band together to solve serious health problems, evidence-based public health policy will be a critical element in creating the opportunities and conditions that afford good health and wellbeing for all. In an effort to educate on promising practices in policy development, this is one of 10 case studies exploring the ins and outs of effective public health policy work.

Empowering Community Groups to Affect Public Health Policy Change

Ingham County Health Department, Michigan

In Ingham County, systems and environmental change is driven by community-based groups who are actively engaged in identifying priority public health issues as well as the appropriate actions to address them. Staff at the Ingham County Health Department (ICHD) play a pivotal role in supporting and enhancing the work of these groups. ICHD serves the approximately 281,000 residents[1] of Ingham County, which includes Michigan's capital city, Lansing. Ingham's tight-knit neighborhoods provide a level of group cohesion that has enabled health department staff to more effectively organize and facilitate community-level efforts. The health department encourages community members to engage as neighborhood groups in a variety of policy efforts, such as land-use policies, complete streets ordinances, and smoke-free policies, among others, by empowering them with the tools and information to build support at the grassroots level. The health department also facilitates communication and provides technical assistance and other support to ensure that community members lead the policy development process.

This case study outlines how ICHD successfully engaged community groups, as well as the lessons learned regarding community participation in policy development.

[1] Ingham County, Michigan. *U.S. Census Bureau.* Available at: http://quickfacts.census.gov/qfd/states/26/26065.html.

STRATEGIES AND SUCCESSES IN ENGAGING COMMUNITY GROUPS

Health department staff use various strategic tools when engaging community groups in dialogue around policy, such as Technology of Participation. Developed by the Institute of Cultural Affairs, Technology of Participation helps facilitate productive and meaningful group dialogue through focused conversation, consensus building and action planning. Using this approach, the health department organizes community members and encourages them to discuss their perceptions of health within the community, priority issues and the appropriate action plans to address them.

The Technology of Participation method is championed by Doak Bloss, health equity and social justice coordinator at the health department, who has introduced the methodology to departmental colleagues and partnering community members. The strategies have been used for policy initiatives in several health-related areas, including social justice, health equity, environmental justice and land use. For example, the health department utilized the strategies to gather input from one of Ingham County's communities on revising land-use policies in Lansing.

TECHNOLOGY OF PARTICIPATION

The Technology of Participation method for facilitating group dialogue involves focused conversation, consensus building, and action planning. ICHD staff described the following sequence:

- asking questions about what is sensed (e.g., what do the data show);
- reflecting on feelings or experience (e.g., does one's experience match what data show);
- interpreting lessons (e.g., what is learned from the data); and
- decision-making (e.g., what needs to be done to achieve change).

To ensure that decisions made during group dialogue sessions are truly community-led, the process includes a validation step. Following the community dialogue session, Bloss drafts talking and decision points and presents that information back to community members. By asking the community groups to validate the information, Bloss ensures that the issues and decisions identified in the health department-facilitated meetings truly reflect the communities' priorities. (To learn more, see "Additional Resources.")

In conjunction with the Technology of Participation methodology, ICHD may engage a community-based social marketing strategy. The health department encourages partners to reduce barriers to activities such as commuting on bike or foot in order to foster healthy behaviors and choices. For example, health department partner Mid-Michigan Environmental Action Council (Mid-MEAC) engaged both of these strategies when convening the Lansing Walking & Bicycling Task Force, which consists of about 35 representatives from transportation, city and county government, law enforcement, education, local businesses and neighborhood groups, to develop a comprehensive plan for making Lansing more accessible and safer for walking and biking. The plan was developed through facilitated discussions that involved the action council, the City of Lansing and the task force.

To hear more about residents' and business owners' concerns and gain further community input, the task force hosted dialogue sessions with 180 community groups and held four community forums to discuss creating a walking and bicycling network plan. These sessions helped shape the task force's priorities and identify volunteers who later obtained signatures to add a complete streets ordinance to the ballot. Ultimately, the Lansing City Council approved the citywide Complete Streets and Non-motorized Plan Ordinance, which states that the needs of people of all ages and abilities will be considered when city roads are constructed or rebuilt. This ordinance also ensures that roads can safely accommodate all commuters—pedestrians, bicyclists and users of public transit. Since the ordinance was approved, the task force has announced five major road reconstruction and trail development projects; initiated a sidewalk assessment project; and successfully advocated for a sidewalk snow-removal policy, a bicycle parking policy and a bike parking in downtown Lansing. To help

empower the task force, the health department provided staff support and seed money and engaged members in dialogue using Technology of Participation techniques.

ROLE OF THE HEALTH DEPARTMENT

Health department leadership recognizes policy approaches as an economical and efficient method for addressing the root causes of health-related issues and for encouraging healthy behaviors at the community level. As such, leadership encourages staff to collaborate with communities, and they promote the use of model programs and policies to address community-identified health priorities.

Throughout Ingham County and with the encouragement and support of the health department, community groups have been responsible for getting various public health policies adopted. Jessica Yorko, the health department's environmental justice coordinator, explained that the Lansing Walking & Bicycling Task Force initially thought that they alone could convince the city council to support the complete streets ordinance. However, Lansing's mayor said that the city council would not support such an initiative without grassroots, community-level support.

The health department has been instrumental in helping communities grow such grassroots coalitions, task forces and additional community-level groups necessary to support policy change. For example, the Ingham Substance Abuse Prevention Coalition was formed as a result of merging a tobacco prevention coalition and substance use prevention group, both originally convened as advisory committees by the health department. The Lansing Walking & Bicycling Task Force arose out of conversations facilitated by the health department with a regional collaborative, the Land Use and Health Resource Team.

The health department plays several roles in supporting community initiatives. In addition to engaging community members in group dialogue, health workers share data to help community groups prioritize which policy initiatives are important and identify model polices to help communities determine how best to advance those initiatives. To guide the identification of priorities, the health department refers to local health data collected by the Behavioral Risk Factor Surveillance System (BRFSS) survey. ICHD also uses qualitative data collection tools for assessing local policies and environmental factors related to activities of the Building Healthy Communities program, such as the Promoting Active Communities tool and the Community Health Assessment aNd Group Evaluation (CHANGE) tool.

In addition, Janine Sinno, health policy analyst at the health department, commented that mapping efforts are a valuable way to engage the community and facilitate data-based community prioritization of projects in certain neighborhoods. In 2011, a combination of data sources and mapping contributed to developing an evidence-based, three-year action plan that prioritized initiatives of the Building Healthy Communities program by neighborhood, including community gardens and healthy corner store initiatives. Sinno and local coalition partners used the Promoting Active Communities assessment as well as walking audits to help determine priorities for safe walking and biking initiatives; similarly, the health department has engaged stakeholders using the CHANGE tool to assess support for revising one Lansing-area hospital's policies for vending machines and breastfeeding.

When identifying model policies to share with community partners that could be adapted to local needs, the health department often looks to the following entities:

- National Association of County and City Health Officials (NACCHO),
- Centers for Disease Control and Prevention (CDC),
- Substance Abuse and Mental Health Services Administration (SAMHSA) National Registry for Evidence-base Programs and Practices,
- National Association of Local Boards of Health (NALBOH), and
- National Policy and Legal Analysis Network (NPLAN).

Health department staff noted that encouraging evidence-based policies and practices also enhances the department's eligibility for federal grant funds.

LESSONS LEARNED

By engaging community groups in dialogue, the health department helps support grassroots policy efforts that encourage healthy behaviors and help build healthier communities. Below are some lessons the health department has learned along the way.

Identify the most appropriate community members to engage. Health department staff emphasized the importance of identifying the right community members to engage in group dialogue — community members who are passionate, knowledgeable and primed to engage in policy efforts. It is also important to include residents who are likely to take the lead in the field following group dialogue sessions. To identify these community members, ICHD works closely with regional networks and coalitions that provide local connections. These groups also help ensure that the health department can bring "a wide diversity of professionals and community members to the table," said Karen Jennings, the health department's director of Public Health Services.

Recognize partners' strengths. It is essential that the health department identify partners who have expertise that the health department lacks in-house. When identifying partners who can handle particular policy efforts, Amy Moore, prevention program coordinator, suggested discussing with potential partners how they view their particular roles. Once a policy initiative is underway, ICHD ensures open communication among partners and promotes the successes of its partners. Moore explained that "when we have a success, I give credit to the coalition that was instrumental."

Provide seed grants to community groups. Because community organizations are the entities that "energize the community and educate them about the need for policy change," Sinno said, the health department can support policy efforts by providing seed funding to community groups. This funding from the health department can be enough to get an initiative started and help the entity to generate additional funds. Yorko explained that when contract funds from the health department support a community initiative, it validates activities for a particular issue and provides leverage for community groups to get funds from other sources. For example, through a Building Healthy Communities grant, the health department provided a small amount of start-up funds to one community group, which allowed them to convene the Lansing Walking & Bicycling Task Force, to develop a comprehensive community-driven plan and later to develop a complete streets policy. This small investment provided the initial foundation that the community group needed to gain the support of additional funders and stakeholders.

Determine the feasibility of adopting a policy and consider a trial period. Understanding feasibility is an important element of policy identification and subsequent adoption. ICHD must determine early on if stakeholders are receptive to particular policies. If a particular initiative is not achievable at the current time, it may be preferable to wait for another window of opportunity. In other instances, it may be best to employ a trial period for a policy by including a sunset provision. This may allow stakeholders to see how effective or influential a particular policy is prior to its indefinite implementation. This approach was used by Walk and Bike Lansing!, which supported the passage of a snow removal ordinance with a sunset provision. The fact that the ordinance was scheduled to sunset in two years allayed the fears of some city council members that the measure would impose an unfair financial hardship on residents. The council is currently reviewing the ordinance to determine whether to adopt a permanent version.

Use local data to monitor policy implementation or impact. The health department tracks progress on some initiatives by gathering data through the local BRFSS, as well as other local and state data. The health department has enhanced the local BRFSS by adding questions that help them measure the impact of policies and zero in on specific neighborhoods. The BRFSS data also helped Sinno track the impact of policy efforts resulting from the Building Healthy Communities program, on physical activity levels. For example, the health department noted a significant 10 percentage point drop in the number of people engaging in "no leisure time physical activity" between 2006 and 2010. And while the change cannot be solely attributed to a particular initiative, it suggests that the health department's active living work might be paying off.

Use a health impact assessment (HIA) tool for planning. The Land Use and Health Resource Team is a regional community collaborative of Ingham, Barry-Eaton and Clinton counties that has developed an HIA tool to encourage discussion around health and land-use plans. For example, the tool is used by planners to consider how a particular policy may impact the environment, physical activity levels, nutrition access and social capital practices, among other relevant health concerns. Sinno explained that using the HIA process at the site plan review stage has minimized project revision costs that might be incurred by the developer at a later stage of the project. The promise of minimized costs, in turn, incentivizes community groups to engage in planning discussions early on in the process.

Develop success stories. To share successes, the health department has asked particular communities to develop success stories that chronicle what worked well in the policy adoption process. Some of these success stories highlight how the health impact assessment tool enabled communities to revise or enhance project and policy elements to create positive health impacts. To disseminate lessons learned and support subsequent policy initiatives, the success stories have been shared in local coalition presentations to local leaders as well as nationally. For example, success stories were featured during a webinar with the Network for Public Health Law.

Collaborate with communications experts. ICHD learned that working with media and communication experts is important for improving materials that are shared with community members. To ensure that materials are appropriate for public dissemination, health staff explained that materials should:

- include images and figures to catch readers' attention;
- minimize excessive text on any one page; and
- utilize local (as opposed to national) data to ensure relevancy to the community.

In addition, Yorko explained that materials must appeal to audiences with different interests — not only should they address how the policy improves health, but, when possible, how the policy can add jobs, retain community residents or improve safety.

Educate community members when appropriate. Some of the community groups that the health department engages may be unfamiliar with policy, uncertain how to navigate the political arena or unsure how to introduce new policy for consideration. To help community groups become more comfortable with initiating policy change, the health department may need to educate community members about the importance of policy and provide education on how to identify policies that are feasible and appropriate to adopt. One way to achieve such engagement is through workshops. For example, ICHD recently held a workshop on community organizing, which included some guidelines to consider when identifying potential policy, system or environmental changes. The health department also assists groups by facilitating group conversations designed to narrow down possible policy goals and pinpoint the steps necessary to affect policy changes that improve community health.

ADDITIONAL RESOURCES

Ingham County Health Department

- hd.ingham.org/

Community Health Assessment aNd Group Evaluation (CHANGE) tool

- www.cdc.gov/healthycommunitiesprogram/tools/change.htm

Promoting Active Communities (PAC) tool

- mihealthtools.org/communities/

Technology of Participation

- www.ica-usa.org/resource/resmgr/ToP/ToP_Brochure_8-4-09.pdf

Walk and Bike Lansing!

- www.midmeac.org/Programs/WalkBikeLansing/tabid/1494/Default.aspx

Ingham Substance Abuse Prevention Coalition

- www.drugfreeingham.org/

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