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# Advancing Organizational Priorities Through Health in All Policies

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## Public Health Infrastructure Grant (PHIG) Webinar

April 25, 2024



# Accessibility

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- Captions will be available in the recording of this event. Live transcription is also available in Zoom.
- Those who need additional accommodations, please let us know by reaching out to KHI, IT Help through direct message or chat.



# Objectives

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1. Identify three reasons for embedding Health in All Policies (HiAP) into internal and external operations.
2. Gain practical knowledge and insights into HiAP implementation by examining real-world examples of HiAP efforts from state and local governmental entities across the nation.
3. Develop skills in applying the Health Impact Checklist (HI-C) tool to assess the health impacts of policies by participating in interactive breakout room sessions.



# Hello!

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## Areas of Expertise:

- Health in All Policies
- Health Impact Assessments
- Population Health
- Facilitation
- Technical Assistance
- Qualitative Research

## Interests:

- Artificial Intelligence (AI)

## Contact:

- Email: [tlin@khi.org](mailto:tlin@khi.org)
- Phone: (785) 233-5443
- LinkedIn: (2) Tatiana Lin | LinkedIn



Tatiana Lin, M.A., Director of  
Business Strategy and Innovation,  
Kansas Health Institute





# Hello!

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## Areas of Expertise:

- Rural Health
- Health in All Policies
- Shared Service Arrangements
- Evaluation

## Contact:

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# Acknowledgments

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We recognize the following individuals for their contributions:



**Lyndsey Burkhart**

*Event Coordinator/  
Communication Assistant*



**Theresa Freed**

*Director of Strategic  
Communication and  
Engagement*



**Barb Hersh**

*Communication and  
Events Assistant*



# Acknowledgments

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- \$3.84 billion CDC grant over 5 years (FY2023 – FY2027)
- KHI serves as Region 7 Innovation Hub
- Provide Technical Assistance
- Collaboration with NNPHI, ASTHO, and PHAB



# Who We Are

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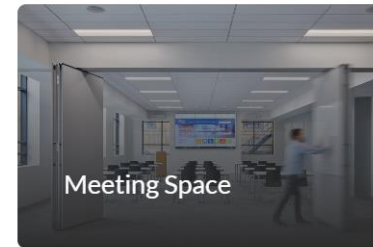
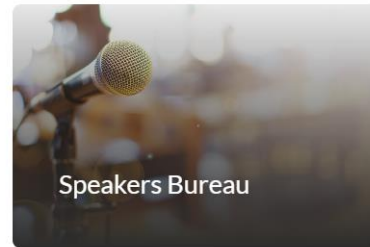
- Nonprofit, nonpartisan educational organization based in Topeka.
- Established in 1995 with a multi-year grant by the Kansas Health Foundation.
- Committed to convening meaningful conversations around tough topics related to health.



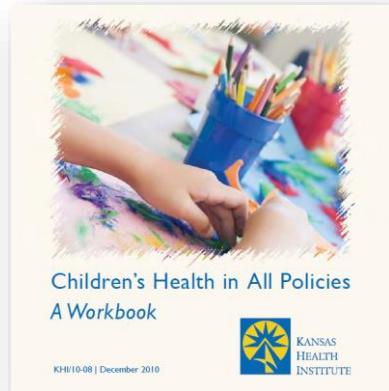


# Our Services

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# 10+Year Timeline

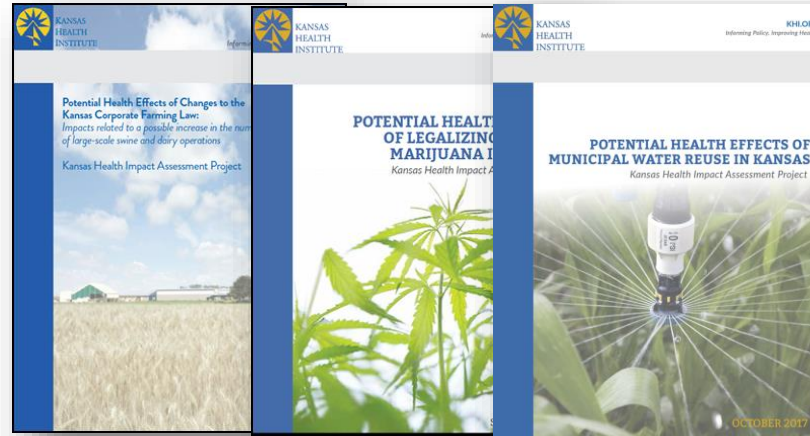
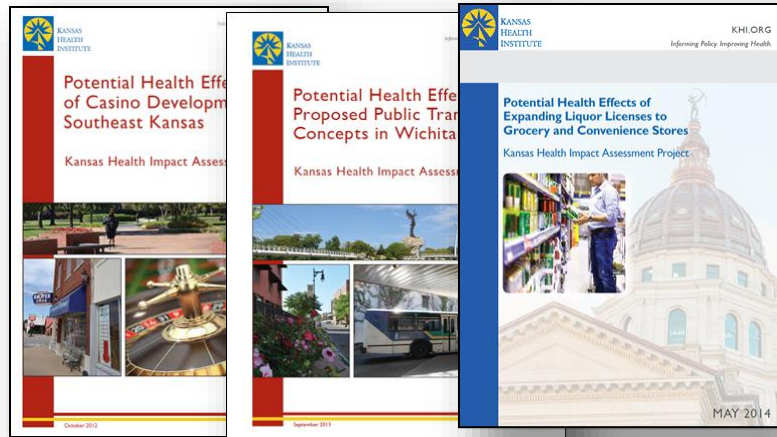


2010

HiAP –  
Children's  
Issues

Three  
HIAs

2012-2014



2015 - 2017

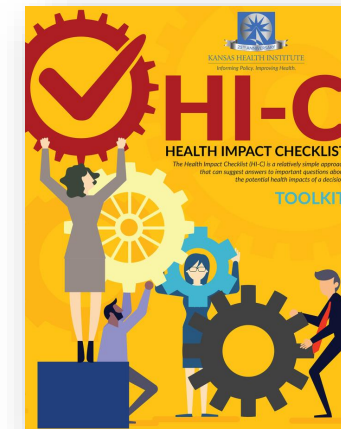
Three  
HIAs + Two  
Resources +  
Trainings

Health  
Impact –  
Checklist



2020 -2024

2020



Work with  
6 Pathways  
Communities  
and launch  
TA HiAP Hub



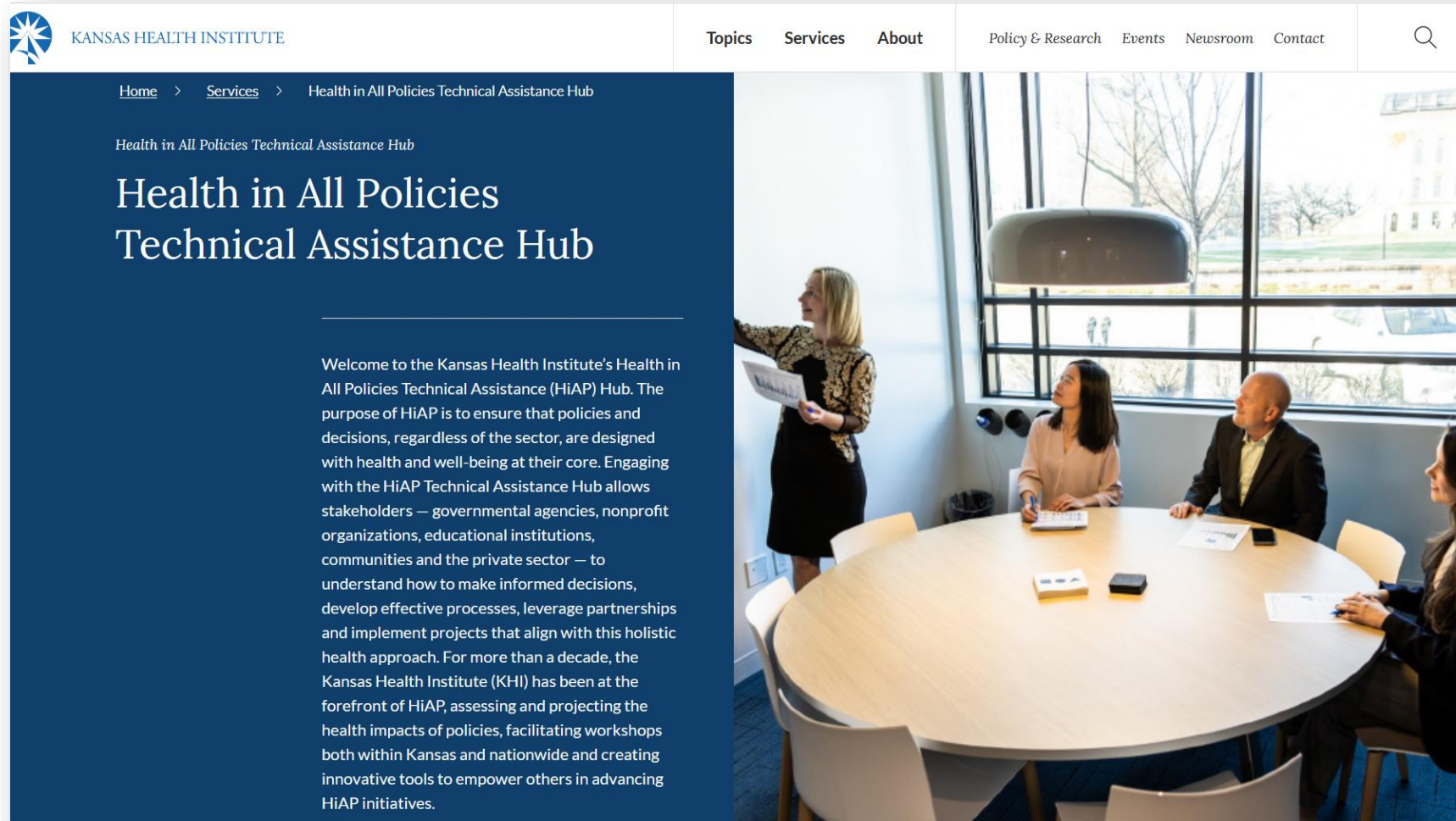
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# Health in All Policies



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# What is Health in All Policies?



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# HiAP Definition

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**HiAP is a collaborative approach that integrates and articulates health considerations into policy making across sectors and at all levels, to improve the health of all communities and people.**

*Source: Association of State and Territorial Health Officials (ASTHO) available at <http://www.astho.org/Programs/HiAP/>*



# What Does HiAP Mean in Practice?

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Holistic approach to health



Beyond one project - systemic changes



Cross-sector collaboration and partnership



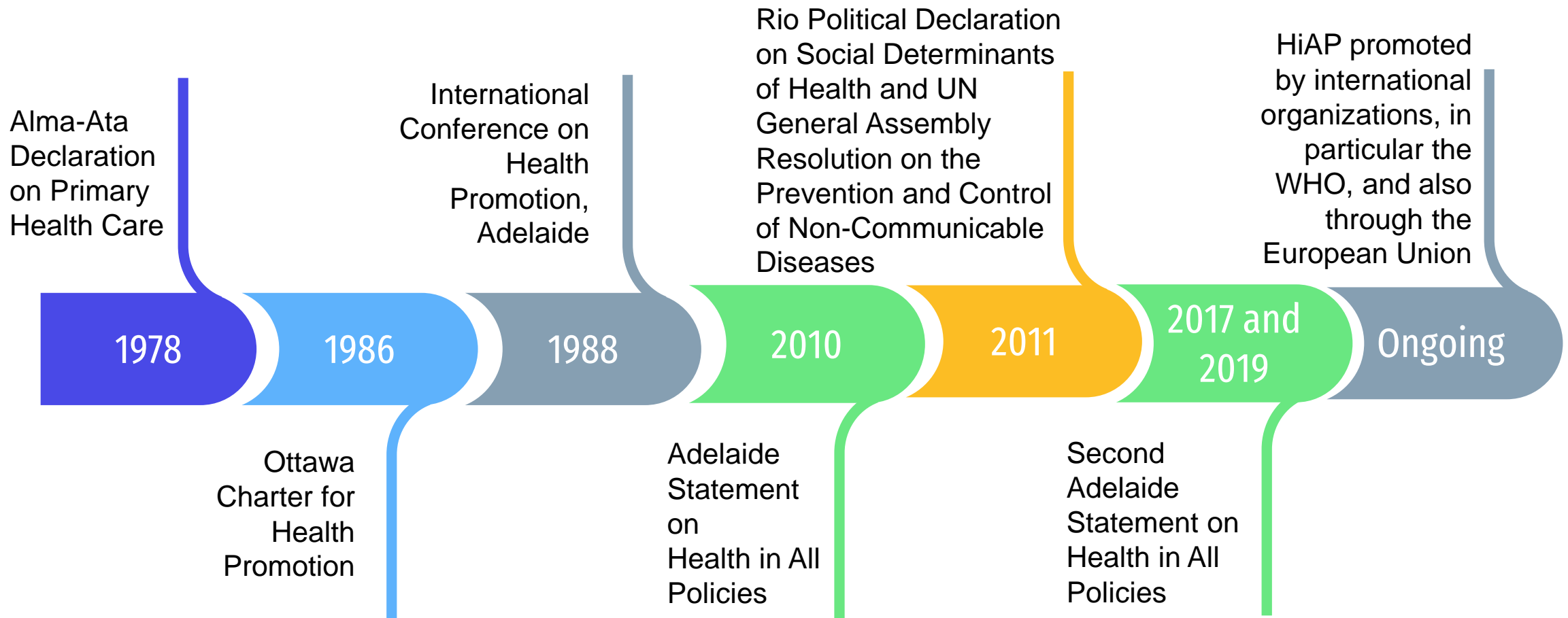
Evidence-based decision making



Long - term investment



# Health in All Policies: International Level





# Global Network for Health in All Policies

[Home](#) [About us](#) [Learn & Train](#) [Become a Member](#) [Country Action](#) [Sign up for our Mailing List](#) [Contact Us](#)



## Welcome to the website of the *Global Network for Health in All Policies: A partnership for integrated SDG action*

The **Global Network for Health in All Policies** (GNHIAP) is a country-led initiative, which mission is to work with various stakeholders to address the determinants of health, by strengthening the Health in All Policies (HiAP) approach, with an aim to support the implementation of the Sustainable Development Goals and Universal Health Coverage.

The GNHIAP was launched by the governments of Sudan, Finland and Thailand, the Province of Québec, and the State of South Australia during the 70th World Health Assembly in May 2017.



### News & Events

- **Two New WHO Resources on the Social Determinants of Health and Multisectoral Work for Health Equity**
- **New WHO Publication: Working Together for Equity and Healthier Populations: Sustainable Multisectoral Collaboration Based on Health in All Policies Approaches**
- **Seminar Material: Towards Sustainable Societies – Health in All Policies and Social Determinants of Health as Building Blocks**
- **Webinaire – La Santé dans toutes les politiques au Québec : Travailler de manière intersectorielle pour promouvoir la santé et l'équité (French Version)**
- **Webinar – Health in All Policies in Québec: Working Across Sectors to Promote Health and Equity (English Version)**



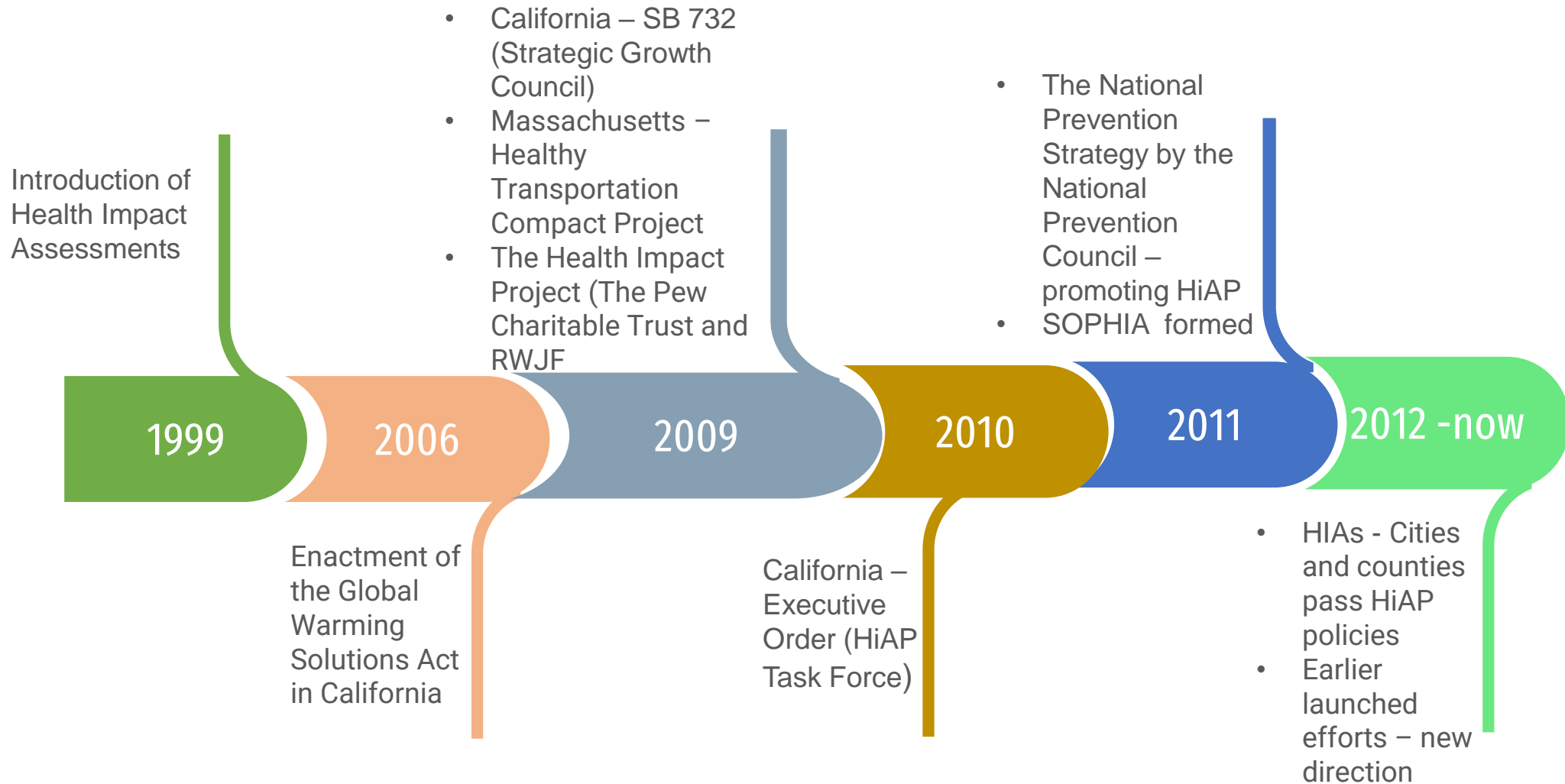
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# Health in All Policies: National Level



# Why Health in All Policies Matters?



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# Why HiAP?



Reason #1: Health happens outside of doctor's office.



Reason #2: Many decisions do not consider health and health equity.



Reason # 3: Collaboration and a proactive approach are essential to address complex problems and ensure better outcomes.



# Many Health Determinants and Inequities Arise from Factors Outside the Health Sector's Direct Control

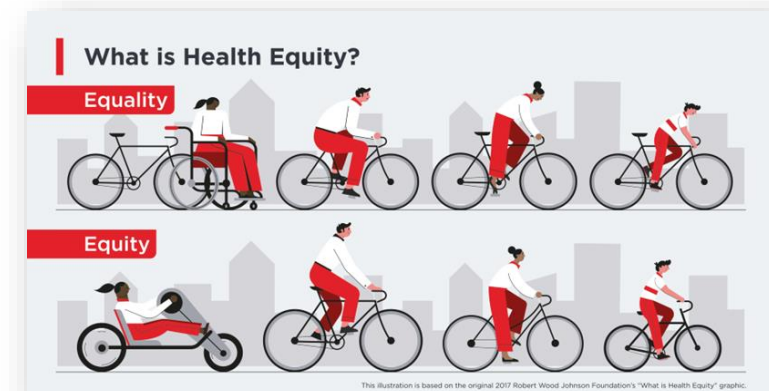




# Advancing Equity Through HiAP

- **Health disparities** is a term that refers to the fact that health outcomes in specific populations differ from the overall population “...a particular type of health difference that is closely linked with economic, social, or environmental disadvantage.”
- **Health inequity** is the idea that there is not a fair distribution of health determinants, outcomes and resources within and between segments of the population.
- **Health equity** means that everyone has a fair and just opportunity to be as healthy as possible.

***The difference between health disparities and inequities is that the latter causes the former.***



Source:  
<https://www.scientificamerican.com/custom-media/it-is-time-to-rethink-how-we-advance-health-equity/>



# Why HiAP?



Reason #1: Health happens outside of doctor's office.



Reason #2: Many decisions do not consider health and health equity.



Reason # 3: Collaboration and a proactive approach are essential to address complex problems and ensure better outcomes.



# Many Decisions Do Not Consider Health

## Reasons

- Sectoral Focus
- Short-Term Priorities
- Limited Collaboration
- Lack of Assessment
- Limited Awareness
- Complexity



# Why HiAP?



Reason #1: Health happens outside of doctor's office.



Reason #2: Many decisions do not consider health and health equity.



Reason # 3: Collaboration and a proactive approach are essential to address complex problems and ensure better outcomes.

# Need for Collaborative and Proactive Approach

## Role of Health - Related Agency/Organization:

- Serve as a convener.
- Work to identify common goals and develop strategies to address them.
- Assist in identifying connections between health and policies, decisions and regulations by utilizing tools such as health lens analysis.
- Provide and interpret public health data.



## California Department of Public Health

- **Health in All Policies Task Force:**  
Includes Public Health Institute and CDPH staff.
- **Location:** PHI at Strategic Growth Council, CDPH at Office of Health Equity.
- **Roles:**
  - Convening, facilitating and research
  - Technical assistance
  - Health and equity expertise
  - Drafting documents
  - Stakeholder engagement

# HiAP Can Support 10 Essential Services

## THE 10 ESSENTIAL PUBLIC HEALTH SERVICES

*To protect and promote the health of all people in all communities*

The 10 Essential Public Health Services provide a framework for public health to protect and promote the health of all people in all communities. To achieve optimal health for all, the Essential Public Health Services actively promote policies, systems, and services that enable good health and seek to remove obstacles and systemic and structural barriers, such as poverty, racism, gender discrimination, and other forms of oppression, that have resulted in health inequities. Everyone should have a fair and just opportunity to achieve good health and well-being.



Created 2020



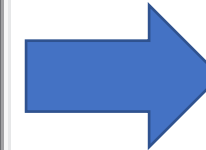
# HiAP Can Help Meet Accreditation Standards

## MEASURE 5.1.1 A: Required Documentation 1

1. Evidence that the health department stays informed of the public health issues that are being discussed by the health department's governing entity or advisory board, elected officials, or other individuals or entities that set policies and laws that impact public health or the health department.

## MEASURE 5.1.2 A: Required Documentation 1

1. A review of a current or proposed policy or law shared with those who set or influence policy. Each review must include:



## MEASURE 5.1.2 A: Required Documentation 1

a. Consideration of evidence-based practices, promising practices, or practice-based evidence.

b. Assessment of the impacts of the policy or law on equity.





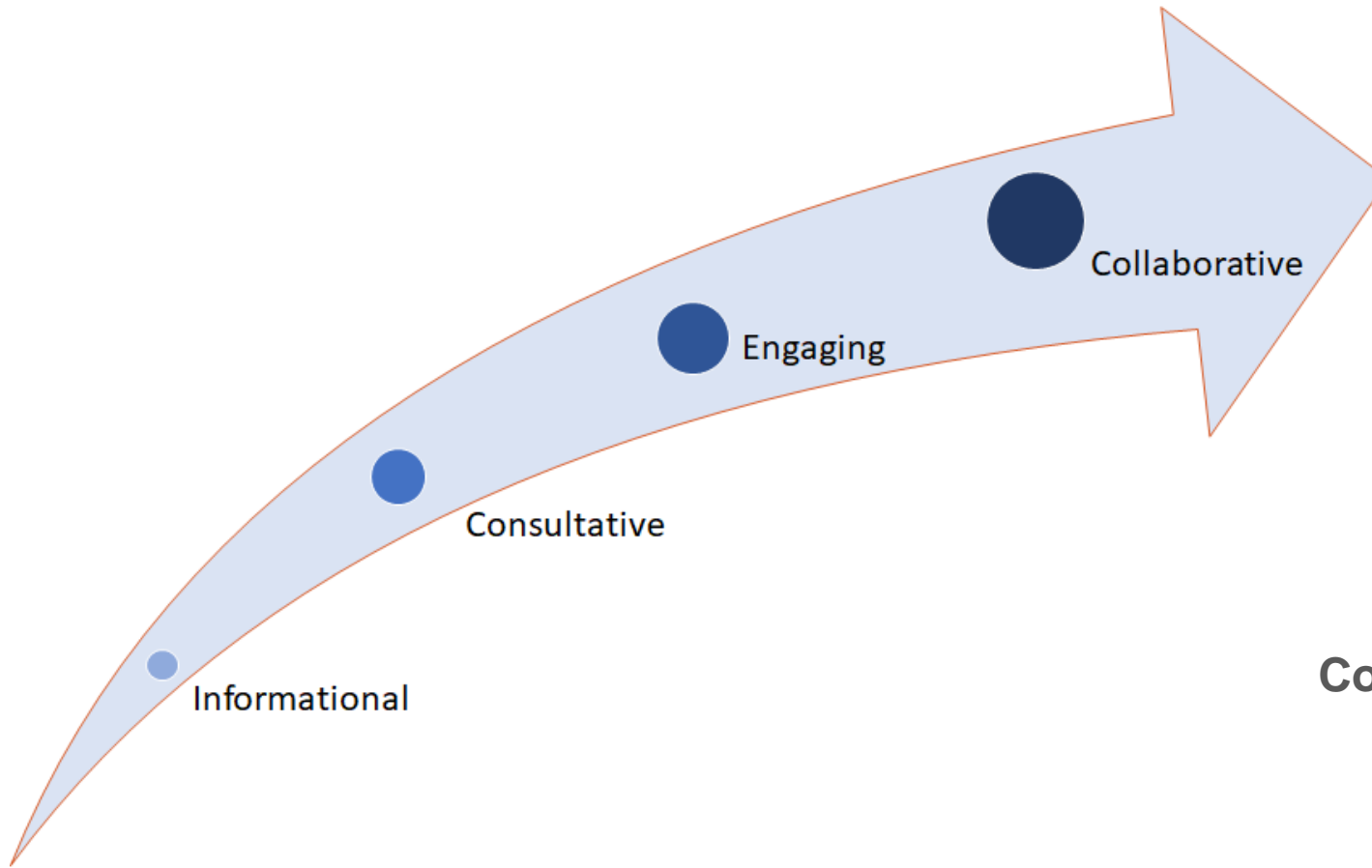
# HiAP Can Help Meet Accreditation Standards

<b>MEASURE 5.1.2 A: Required Documentation 1</b>	<b>Guidance</b>	<b>Number of Examples</b> 2 examples	<b>Dated Within</b> 5 years
<p>a. Consideration of evidence-based practices, promising practices, or practice-based evidence.</p> <p>b. Assessment of the impacts of the policy or law on equity.</p>	<p><b>For required element a:</b> Consideration of evidence-based practices, promising practices, or practice-based evidence could include, for example, a comparison to similar laws, the use of model public laws, or an analysis of laws by a practice-based research network. The intent of the requirement is to review current or proposed laws or policies considering the best available evidence. These could be demonstrated through, for example, meeting minutes, reports, presentations, or some other record of the discussion of the review.</p> <p>Because there may be limited availability of evidenced-based practices or promising practices in Tribal communities, Tribes could provide examples of practice-based evidence, including, for example, drawing from the lessons learned from similar policies that have been implemented in Indian Country. Health departments could also adapt models or create models based on a cultural framework or traditional forms of governance.</p> <p><b>For required element b:</b> The assessment of the equity impacts of current or proposed laws or policies might include an assessment of whether laws/policies have a disproportionate effect on one or more subpopulations within the jurisdiction. For example, transportation policies may have a greater effect on individuals who rely on public transit. Participation in a health impact assessment that considered the disproportionate effects on different people could be provided. The assessment could consider how laws or policies correct injustices that have contributed towards higher health risks or poorer health outcomes among subpopulations.</p>		





# Implementation Phases of HiAP



## **Informational**

- Relationship building
- Basic information exchange

## **Consultative**

- Single agency driver
- Participate on advisory groups

## **Engaging**

- Lead agency solicits feedback from partners
- Participate in policy implementation

## **Collaborative**

- Partners share responsibility for decision-making and implementation
- Health is routinely considered in policy and program decisions



# Implementing HiAP: Organizational and External Levels

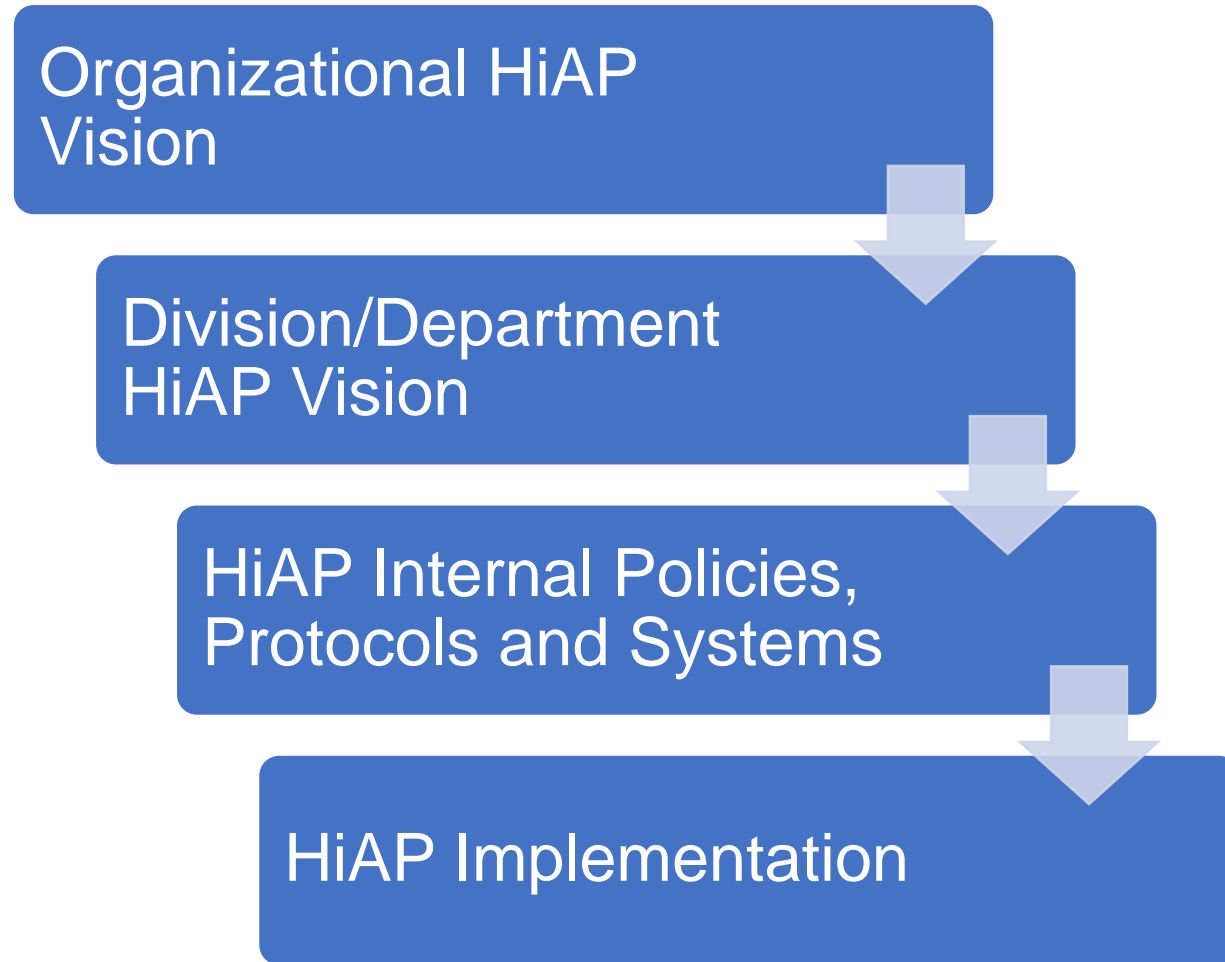


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# HiAP Implementation at the Organizational Level

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# Foundation: HiAP Internal Policies and Protocols

## Elements:

- Implement a Health in All Policies (HiAP) organizational policy that commits the organization to integrating HiAP in both its internal and external operations.
- Describe the scope of the HiAP efforts.
- Outline the process for implementing HiAP efforts.

### Health in All Policies Statement

**WHEREAS**, Health in all Policies (HiAP) is an approach that considers health and health equity in decision and policymaking to improve health outcomes, lessen health disparities, and achieve optimal health for all and;

**WHEREAS**, HiAP establishes a multidisciplinary framework that creates cross-sector collaboration to unite and advance the health of all communities and people and;

**WHEREAS**, defining mutual goals, cross-sector collaboration, stakeholder engagement, opportunity for policy change, and the promotion of health and health equity are the key elements of a HiAP approach and;

**WHEREAS**, the Health Impact Checklist (HI-C)<sup>1</sup> is a recommended tool that can be used to assess potential health impacts. The HI-C can be used to inform decision making at many local levels including organizational and governmental.

**Be it resolved by The Food and Farm Council of Riley County and the City of Manhattan that the FFC shall**

- Apply a Health in All Policies (HiAP) approach to its work, including policy development and implementation, budgeting, and creation and delivery of initiatives.
- Engage with populations of focus, defined as populations that are at a higher risk for poor health as a result of the barriers they experience to social, economic, political and environmental resources, as well as limitations due to illness or disability; communities and stakeholders who may be most affected by potential policies and practices to ensure that decisions incorporate their knowledge and perspectives.
- Work in collaboration with food system lead partners, stakeholders, and local government to develop and update policies and systems to address social determinants of health in decision making.
- Advocate for policies that improve health for all considering social, economic, and environmental causes of health, especially for populations of focus.
- Recommend food system lead partners at an organizational level plus city and county level decision makers take a Health in All Policies approach with decision and policy making.



# Examples of Internal HiAP Strategies

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- ❑ Ensure that **the process for** task orders, RFPs or contracts require (examples):
  - ❑ Clear articulation of how health will be more holistically considered (e.g., focus on addressing SDOH).
  - ❑ Allow compensation for individuals with lived experience for their time.
  - ❑ Include the establishment of a Community Advisory Board.
- ❑ **Enhance or develop the system** for monitoring policymaking processes at the state level and identify and assess the health impacts of decisions and policies.
- ❑ **Systematically conduct** a health impact review of licensing and regulations.
- ❑ Ensure that there is a **process in place requiring** that program development, implementation and changes are informed by community perspectives.





# What Opportunities Does an Agency Have to Embed the Health in All Policies (HiAP) Approach in Childcare? (Example)

## Type of Decision

- Planning
- Resource allocation
- Permits and licensing
- Rules and standards
- Laws and legislation
- Enforcement

## Questions

- Who makes the decision?
- What are the legal authorities?
- What changes could be made to embed HiAP?

## Federal Rulemaking

- HHS oversees the Child Care and Development Fund (CCDF), which provides financial assistance to low-income families for childcare.
- ACF administers funding and regulations related to childcare.

## State Licensing

- State health agency is the primary agency responsible for licensing and regulating childcare facilities.

## County/Local

- LHDs: Inspect childcare facilities.
- Municipal Governments: Local government units may have additional zoning laws or regulations that affect where and how childcare facilities operate.



# Integrating HiAP into Organizational Policies

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## Examples of Organizational Policies

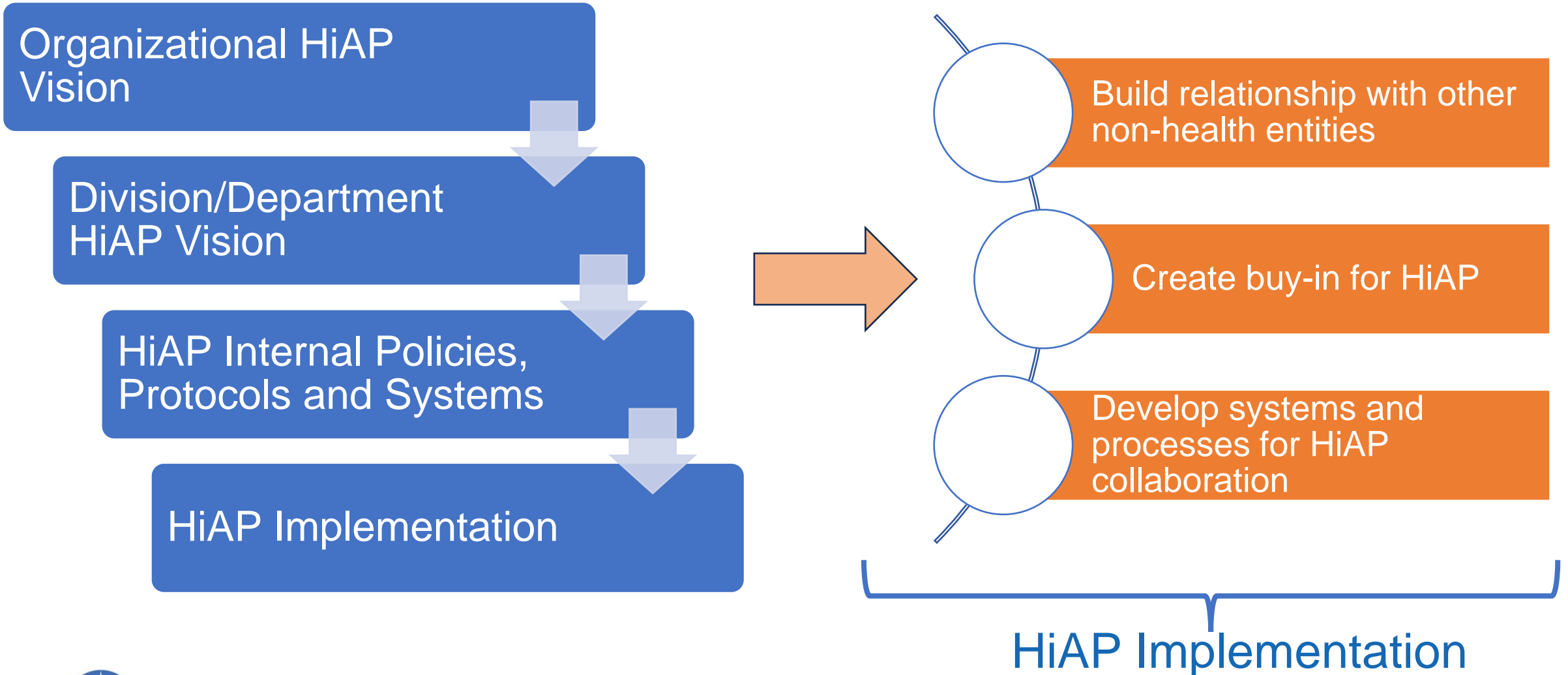
- Code of Conduct
- Human Resources Policies
- Health and Safety Policies
- Information Technology (IT) Policies
- Financial Policies
- Confidentiality and Privacy Policies
- Workplace Harassment and Bullying Policies
- Leave Policies
- Environmental Sustainability Policies
- Social Media Policies

## Key Questions

- *How does this policy directly or indirectly affect the health and well-being of employees, stakeholders and the broader community?*
- *Does this policy address or influence social determinants of health?*
- *Which populations within the organization or community may be disproportionately affected by this policy?*
- *Are there any potential effects that could exacerbate health disparities?*
- *Have the perspectives and input of those affected by the policy been considered in the decision-making process?*



# Moving From Internal to External HiAP Efforts



# Examples of External HiAP Strategies

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## ❑ Collaborate with other agencies/organizations to:

- ❑ Establish a system for sharing the role in monitoring policymaking processes at the state level and identify how to inform the decision-making process. Collaborate to assess the health impacts of decisions and policies and disseminate the information.
- ❑ Advocate for inclusion of health impact assessments in policymaking processes across sectors (e.g., Health Impact Note similar to a Fiscal Note).
- ❑ Create shared metrics or an interactive scorecard that outlines desired outcomes, indicators, programs and performance measures.
- ❑ Assist other agencies with considering health and equity considerations when drafting contracts, RFPs, Task Orders.
- ❑ Develop a joint stakeholder engagement strategy.



# Examples of HiAP Efforts

## State-Level Efforts



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# Pennsylvania Department of Health: Environmental Justice Strategic Plan



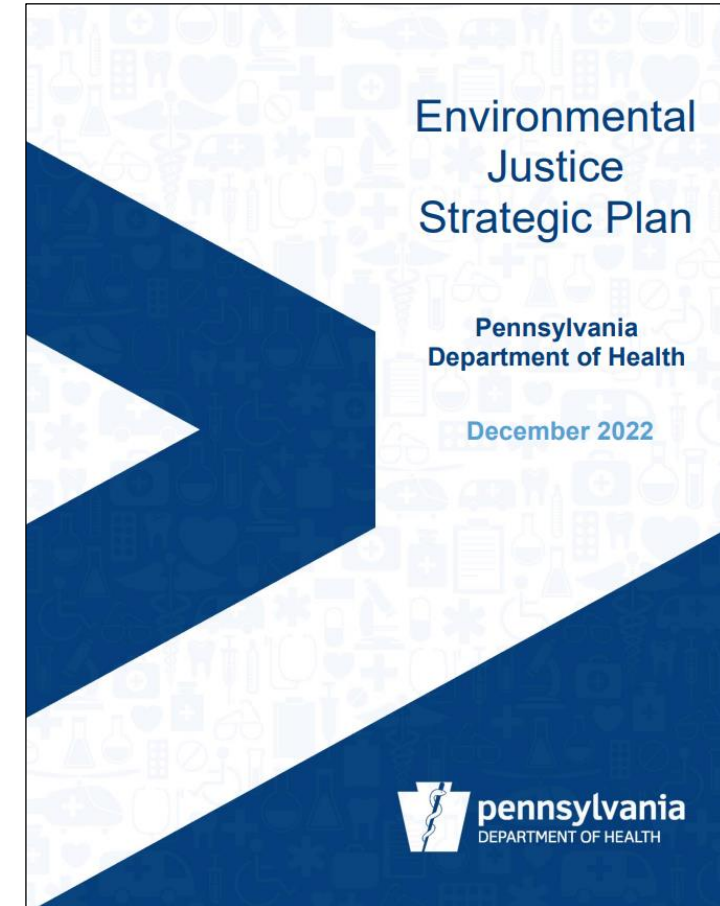
Department of Health

**Strategy 1:** Increase Awareness of EJ and the Connection Between EJ and Health Equity Among DOH Staff.

**Strategy 2:** Strengthen DOH's EJ, Health Equity, and Climate Change Programmatic Oversight.

**Strategy 3:** Integrate EJ and Health Equity Principles into Grant and Contract Processes.

**Strategy 4:** Collaborate with State Agencies to Promote EJ and Health Equity.



Source: Environmental Justice Strategic Plan.pdf (pa.gov)



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# Pennsylvania Department of Health: Grants and Contracts

## Strategy 3: Integrate EJ and Health Equity Principles into Grant and Contract Processes.

1. Revise the internal grant approval process document to include information on the proposed program's impact on health equity and focus on EJ areas.
2. Explore method of prioritization for organizations addressing health equity and EJ efforts in the contract approval process.
3. Work with other state agencies to assess ability of EJ communities to obtain state grants and contracts and develop a plan to build capacity among communities.

Source: Environmental Justice Strategic Plan.pdf (pa.gov)



# Maryland Department of the Environment: Addressing Lead through HiAP

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The Maryland Department of the Environment (MDE) has built robust cross-sector relationships to couple strong public enforcement of the Maryland Reduction of Lead Risk in Housing Act with local enforcement coordination and private enforcement actions by nonprofit agencies and *pro se* tenants to reduce childhood lead poisoning statewide. MDE utilizes a team from the state's attorney general's office to enforce actions, coordinate referrals from local housing code and landlord licensing officials at the city and county levels, and facilitate tenant access to family advocate attorney representation from the Green & Healthy Homes Initiative and other nonprofit legal services statewide.

Source: <https://www.naccho.org/uploads/downloadable-resources/HiAP-Lead-Fact-Sheet-NCHH.pdf>



# Minnesota Department of Health: Health Equity Networks



- Established Regional Health Equity Networks to bring together people across sectors, communities and geographies to eliminate disparities and advance health equity in the state.
- The networks work to connect, strengthen and amplify health equity efforts and community issues using a regional and relational approach.
- Provide a community of support for local public health, tribal public health, and community organizations to address long-standing health equity issues.
- Strengthen statewide public health system capacity to address health inequities.



## Minnesota Health Equity Networks

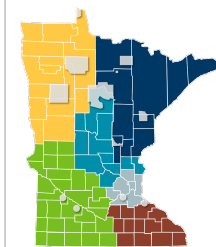
As COVID-19 response activities continue and recovery activities ramp up, our public health partnerships will need to build on successes and address the clear inequities that have long existed in all our communities across the state.

The Minnesota Health Equity Networks **connect, strengthen, and amplify** health equity efforts and community issues using a regional and relational approach. The Networks are a cooperative and evolving community of support for local public health, Tribal public health, and community organizations to address longstanding and emerging health equity issues.



**Health equity** is achieved when systems truly support all people and communities to have the opportunity to be as healthy as possible no matter who they are or where they live. This requires understanding the social inequities that impact health in each region, and actively working on those inequities.

**Every region, community, and Tribal nation experience different inequities and require different solutions.**



### CONNECT WITH NETWORK COORDINATORS

Six regional network coordinators will work alongside regional public health, community organizations, and Tribal partners to build relationships; support existing work and activities that build capacity; provide a space to share expertise; provide resources; and influence policy, structural, and system changes to provide the best health and wellness outcomes for all. These regions are not strictly defined; please connect with the coordinator in the region in which you identify.

To connect your coordinator, visit [www.health.state.mn.us/equitynetworks](http://www.health.state.mn.us/equitynetworks)



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Source: <https://www.health.state.mn.us/communities/equity>

# Minnesota Department of Health: Policy Area Overviews – Part of SHIP

## Policy area overviews

This assessment also includes policy area overviews for the first time, each of which define a policy area and discuss how it impacts health. Each section of the assessment contains a policy area overview:

- **Paid leave (opportunity):** This policy area expands on past work on paid family leave and health, including an MDH white paper<sup>14</sup> and a Healthy Minnesota Partnership narrative.<sup>15</sup> Read this policy area: Policy area overview: Paid leave.
- **Tree canopy cover (nature):** Tree canopy cover lends itself to many health benefits. The Healthy Minnesota Partnership chose this policy area as a more specific way to reflect the health impact of climate change. Read this policy area: Policy area overview: Tree canopy cover.
- **Universal broadband internet access (belonging):** In December 2020, the Healthy Minnesota Partnership recognized that a broad policy of universal broadband and virtual access could have reduced the impact of the COVID-19 pandemic by strengthening response activities and community resilience. Read this policy area: Policy area overview: Universal broadband internet access.



Source: [2023 Minnesota statewide health assessment: Draft for public comment \(October 2023\)](#)

2023 MINNESOTA STATEWIDE HEALTH ASSESSMENT  
FIRST DRAFT FOR PUBLIC COMMENT | OCTOBER 2023



## Policy area overview: Universal broadband internet access

### What is universal broadband internet?

Universal broadband internet access is defined as all people having access to broadband internet communications services.<sup>301</sup>

### Why does broadband internet matter for health?

The Federal Communications Commission has identified broadband connectivity as a super determinant of health and a gateway to other social determinants of health like education and employment.<sup>302</sup> From this point of view, access to broadband internet is the connector—to health services, social services, work, and each other.

Lacking of fast and reliable internet access is a clear barrier to belonging for many people in Minnesota, given its necessity to apply for jobs and for work, to do school homework, and to connect with others. The increase and necessity of remote work, education, and social arrangements during the COVID-19 pandemic, usually conducted via the internet, underscored the necessity of fast and reliable internet access to participate in many aspects of modern life.

### What systems and policies shape broadband internet?

Public policy decisions at the national, state, and local levels impact support for and distribution of broadband infrastructure and access.

Minnesota has a goal of universal broadband access at specific download and upload speeds by 2022 and by 2026.<sup>303</sup> These goals shape how the state and local communities direct funding dedicated to improving access. Recently, both state and federal government have allocated funding to achieve these goals.

- In May 2023, Minnesota adopted an agriculture and broadband law, which included \$100 million, to expand high-speed broadband internet in Minnesota.<sup>304</sup>
- In June 2023, the federal government allocated over \$600 million in funding to Minnesota to administer local grant programs from the wider Broadband Equity Access and Deployment program.<sup>305</sup>
- Rural and Tribal areas are less likely to have the infrastructure for broadband internet services compared to urban and suburban areas, owing to the limited profitability for corporate internet providers to build infrastructure in less populated areas.





# Washington State Board of Health: Health Impact Reviews

WASHINGTON STATE  
BOARD OF HEALTH  
Health Impact Review Request Form

Date of request: 8 / 16 / 2023  
Requester: Senator Van De Wege  
Note: Health impact reviews may only be requested by the Governor or a legislator.

Staff Contact: Name: Adam Bernbaum  
Phone: 360-786-7646 E-mail: adam.bernbaum@leg.wa.gov

What is the subject of the Health Impact Review?  
☒ Bill Number: SHB 1010 Title: Concerning the sanitary control of shellfish  
☐ Bill Draft Draft Number:  
☐ Decision Package If possible, please attach a copy of the relevant portion/aspect of what you are requesting to be reviewed.  
☐ Budget Proposal  
☐ Other:

Should the Health Impact Review analyze the entire proposal or only a portion?  
☒ Entire ☐ Portion  
If only a portion, please describe what portion(s) the review should analyze.

Requested completion date: Interim 2023  
If requesting less than a ten-day turnaround during session or less than a 60-day turnaround during the interim, please explain the reasons for the request (for example, needing a review completed in time for a committee hearing).



An objective, evidence-based analysis for the Governor and state Legislators. Health Impact Reviews analyze how proposed legislation may affect health and equity in Washington state. We have completed 120 Reviews at the request of 59 different Legislators and the Governor on a variety of topics.

[Read the Latest Health Impact Reviews →](#)

Source: [https://sboh.wa.gov/health-impact-reviews#:~:text=A%20Health%20Impact%20Review%20\(HIR,impact%20health%20and%20health%20equity](https://sboh.wa.gov/health-impact-reviews#:~:text=A%20Health%20Impact%20Review%20(HIR,impact%20health%20and%20health%20equity)



# Tennessee Department of Health



- In 2015, the Tennessee Livability Collaborative (TLC) was established as a working group of 21 Tennessee state agencies, departments, and commissions that have a shared mission of improving the prosperity, quality of life, and health of Tennesseans.
- Facilitated by Tennessee Department of Health
- TLC continues to collaborate across state partners around policy, funding, and programming to support the development of livable communities across the state.



## Collaboration

11 of 14 agencies collaborate more often than before with at least one other agency since joining the Collaborative, and the overall strength of interagency working relationships has increased. Most agencies are reaching out to others to participate in events, trainings, or conferences, and for input on plans, reports, or other products.



## Data Coordination and Assessments

4 agencies created new assessments or analyses related to livability. Agencies engaged one another in developing agency data profiles, and created shared datasets with other agencies.



## Policy, Procedure, and Staff Changes

4 agencies aligned their funding opportunities with one another. 6 agencies changed policies and plans to reflect other agencies' priorities. 3 agencies created new staff positions or changed existing positions to encourage cross-sector work.



## Development of New Initiatives

The Collaborative developed two new initiatives to encourage cross-sector collaboration at the local level: the ThreeStar Priority County Planning Meetings and the Tennessee Ambassador League training and leadership institute.



## Perceptions

All members have a better understanding of the work and goals of other agencies since joining the Collaborative. Most members feel a greater sense of personal commitment to improving livability in Tennessee and a stronger feeling of shared purpose with other member agencies since joining the Collaborative.



## Opportunities for Improvement

Recommendations include improved interagency data sharing, more intentional relationship building among agencies, greater translation of ideas into action, and adding new member agencies to the Collaborative.

Source: <https://www.tn.gov/health/health-program-areas/office-of-primary-prevention/redirect-opp/livability-collaborative.html>



# Vermont Department of Health: HiAP Task Force Efforts



**Establishment:** Created by Executive Order No. 7-15.

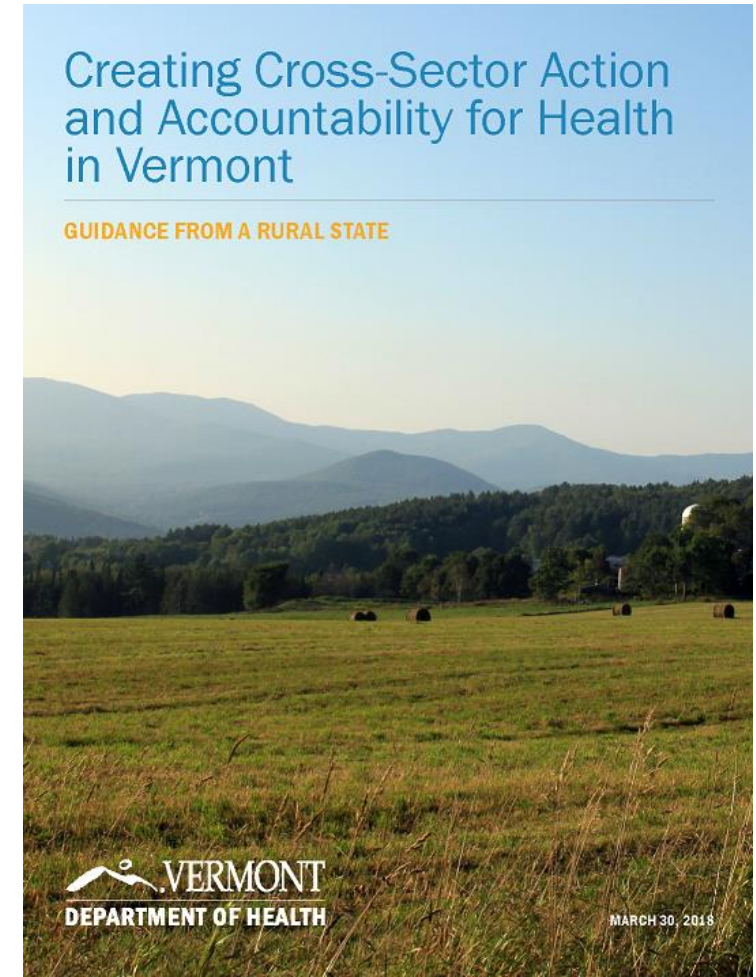
**Level:** Cabinet-level body.

**Primary Objective:** Identify ways agency policies, programs, and budgets can bolster the health of Vermonters.

**Members' Responsibilities:**

- Review practices within their respective agencies.
- Coordinate inter-agency efforts for healthier community.
- Submit report to the Governor

**Source:** <https://www.healthvermont.gov/about/vision/building-culture-health>





# Vermont Department of Health: Health Related Expenditure Analysis

TOTAL HEALTH EXPENDITURE ANALYSIS:  
AGENCY OF AGRICULTURE RESULTS



SUMMARY

Vermont is transforming the way we evaluate investments in health and wellbeing across all state sectors. One action is to conduct a cross-agency appraisal of state spending on factors that impact population health beyond the traditional health care system. The Total Health Expenditure Analysis (THEA) serves as a core tool for assessing cross-sector investments for health in non-health sectors. The Vermont Agency of Agriculture & Food Markets (VAAFM), a traditional non-health related agency, recognizes how its work influences population health in the following domains: Food Availability and Access, Food Safety, and Occupational Health Hazards. VAAFM took part in the Total Health Expenditure Analysis during Spring 2017. Below are the results from the Expenditure Analysis, along with a detailed analysis and utility of this project to the Agency of Agriculture and beyond. This is one approach used by the Health in all Policies Task Force which seeks to integrate health in the programming, policy, and budgeting activities of state government.

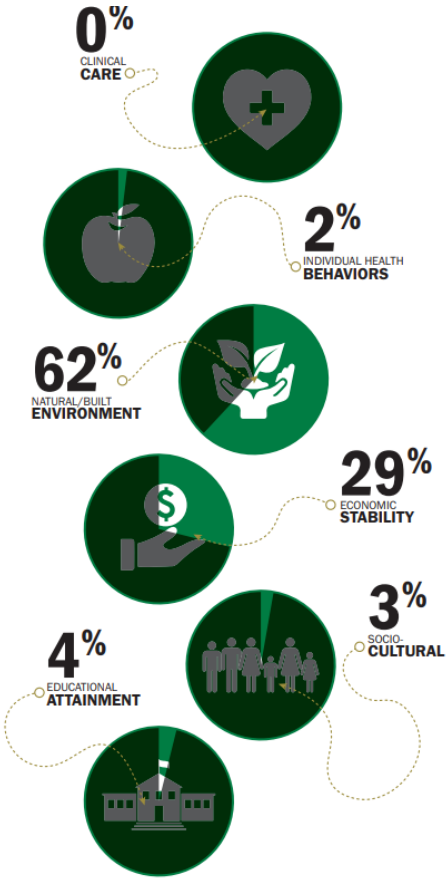
WHY ASSESS CURRENT INVESTMENTS?

In order to spend more effectively and promote population health, we must first understand what and how we are investing in health and wellbeing beyond the traditional medical care system. Information on how we spend and budget across sectors can help us understand 3 guiding questions:

WHY AGRICULTURE AND HEALTH?

Agriculture is fundamental for good health. Agricultural production provides the world's food, fiber and materials for shelter, and medicinal plants. It contributes to livelihoods and food security, and provides income which can be spent on health care and other resources that influence health and wellbeing. Agricultural policy and production, and the outputs they generate, can contribute to both good and poor

TOP SPENDING OF VAAFM'S PROGRAMS BY DETERMINANT	
	<b>INDIVIDUAL HEALTH BEHAVIORS:</b> Consumer Protection, Consumer Education and Access, Meat Inspection
	<b>ECONOMIC STABILITY:</b> Farm to School, Agriculture Economic Development Program
	<b>EDUCATIONAL ATTAINMENT:</b> Vet Loan Repayment Program
	<b>NATURAL/BUILT ENVIRONMENT:</b> Land Use Planning, Produce Program, Work Lands Enterprise Initiative, Agrichemical
	<b>SOCIOCULTURAL:</b> Farm to School
	<b>CLINICAL CARE:</b> No Spending



Source: <https://www.healthvermont.gov/about/vision/building-culture-health>



# County and Local Levels

## Examples of HiAP: Kansas



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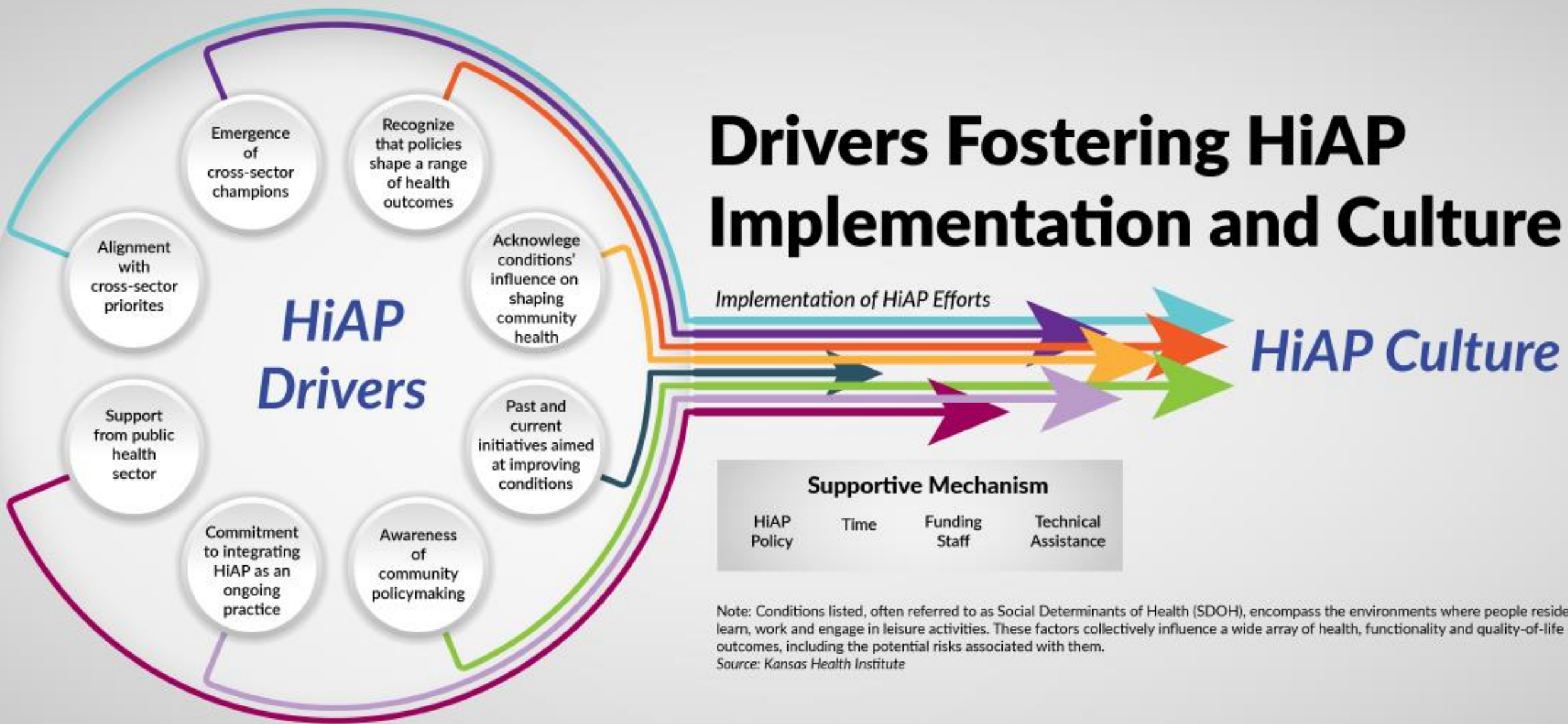
# Acknowledgments

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Funding for efforts described in the presentation were conducted through the Pathways to a Healthy Kansas Initiative, funded by Blue Cross and Blue Shield of Kansas (BCBSKS).

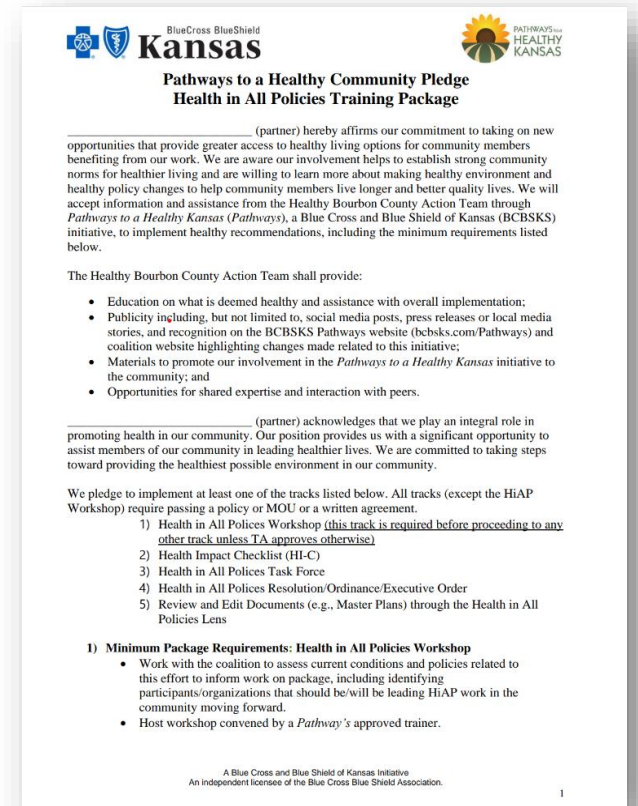
**#BCBSKSPathways**



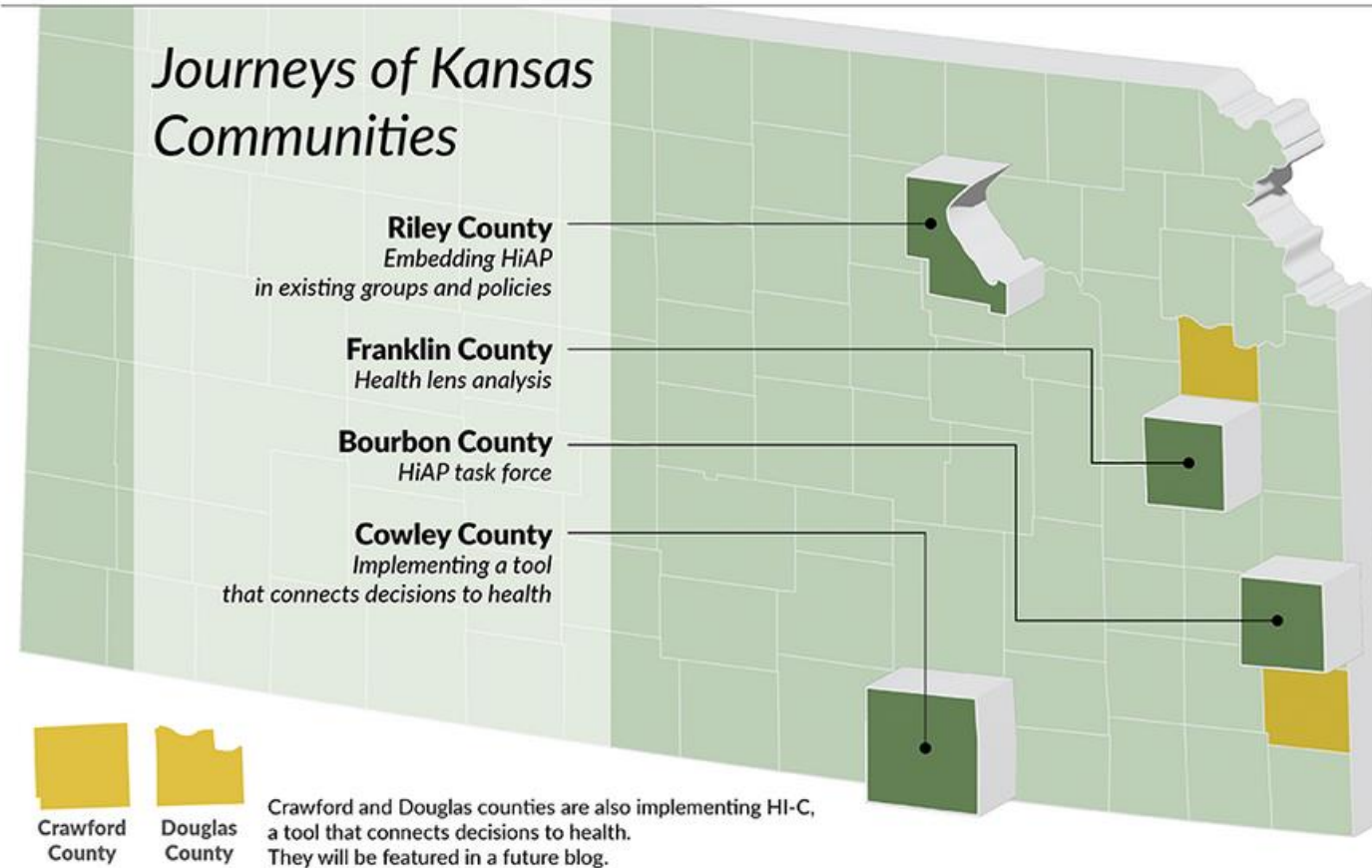


# Common Elements

- Pass a policy
- Wrap around technical assistance (e.g., Seed 2 Roots, Wichita State University, Kansas Health Institute )
- Develop protocols



# Health in All Policies:





# Bourbon County: HiAP Task Force

**Who:** City of Bronson, City of Fort Scott, USD 234 and Healthy Bourbon County Action Team.

**What:** Health in All Policies Task Force

**Type of Policy:** Memorandum of Understanding (MOU) and Resolution

**Why:** Incorporate health and equity into decisions, policies and projects

## ***BOURBON COUNTY HEALTH IN ALL POLICIES TASK FORCE*** **Memorandum of Understanding**

The Bourbon County Health in All Policies Task Force Memorandum of Understanding (MOU) is designed to support the development of a task force between the City of Fort Scott and the City of Bronson as part of a Health in All Policies (HiAP) initiative in Bourbon County, Kansas. The following MOU reflects the agreement between the City of Fort Scott and the City of Bronson as part of the *Pathways to a Healthy Kansas*, a Blue Cross and Blue Shield of Kansas (BCBSKS) initiative regarding the use of a *Pathways* implementation grant to support the development of a HiAP task force in Bourbon County.

Partners to this MOU recognize financial contributions provided by Blue Cross and Blue Shield of Kansas through *Pathways to a Healthy Kansas* initiative and commit to acknowledging this financial contribution in signage, social media, written documentation, or other forms of communication regarding the activities outlined in this MOU.

### **Background**

The Healthy Bourbon County Action Team (HBCAT) was selected as a grantee for the *Pathways to a Healthy Kansas (Pathways)*, a Blue Cross and Blue Shield of Kansas (BCBSKS) initiative in July 2016 and again in July 2022.



# Data Walks



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## Cowley County's Data Walk: Mobilizing Community Members to Improve Health

3 Min Read • Dec 08, 2022 • By Kansas Health Institute



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- [HUNGER Childhood Food Insecurity](#)
- [MENTAL HEALTH Depression](#)
- [MENTAL HEALTH Suicide](#)
- [POVERTY Children in Poverty](#)
- [POVERTY Racial Disparities](#)



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# Cowley County: Health Impact Checklist

**Who:** City-Cowley County Health Department

**What:** Sleeth Addition Housing Project in Arkansas City

**Type of Policy:** Joint Board of Health Resolution and Internal Protocol

**Why:** Incorporate health and equity into decisions, policies and projects



320 E 9<sup>th</sup> Suite B  
Winfield, KS 67156  
(620) 221-1430



City-Cowley County  
Health Department

115 E. Radio Lane  
Arkansas City, KS 67005  
(620) 442-3260

## Health in All Policies – Internal Protocols October 1, 2023

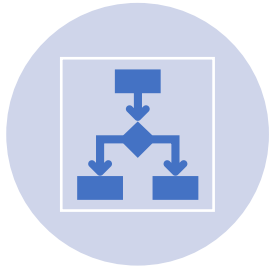
Subsequent to the approval of Resolution No. 901-2023 of the Joint Board of Health in Cowley County, Kansas:

- 1) A Health in All Policies (HiAP) leadership group of public health staff within the City-Cowley County Health Department responsible for policy-related matters shall be assembled and trained.
- 2) Policies and procedures outlining the scope, processes, procedures and responsibilities of the City-Cowley County Health Department related to performing HiAP evaluations using various templates and tools including the KHI HI-C tool will occur by June 30, 2024.
- 3) Update policies and procedures as needed outlining the scope, processes, procedures and responsibilities of the City-Cowley County Health Department related to HiAP and HI-C implementation.
- 4) Establish a timeline for policy identification, review, and HI-C implementation.

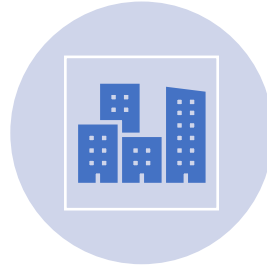
# Cowley County



Using the Health Impact Checklist, evaluated the project's impact on housing stability, environmental conditions and features like a proposed splash pad and the absence of a storm shelter.



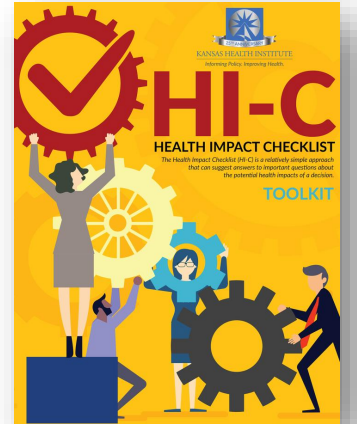
Commits to continuously offering assessments to inform decision-making, including creating an HiAP page on its website for community input on decisions to assess.



Shared findings with the city commission to consider maximizing positive and addressing negative health impacts.



Establishing internal protocols to stay informed on community decisions and provide evidence-based information.





# Cowley County KANSAS

GOVERNMENT

Alert

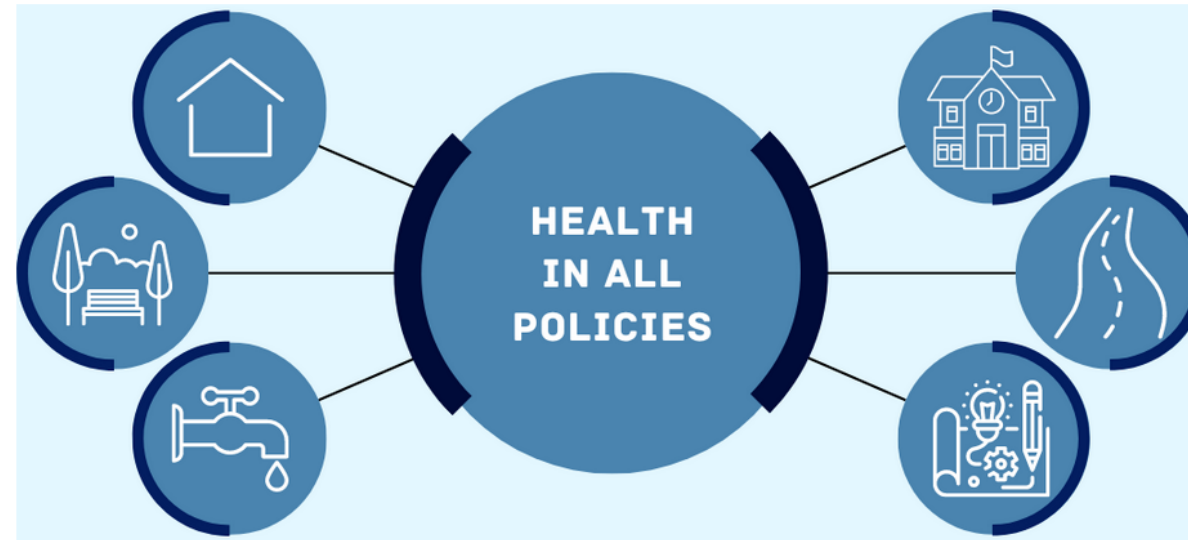
CONSTRUCTION ALERT: Second Floor of the South Annex is under construction.

1 of 3 Alerts ▶

Public Health Home Page

- Bed Bug Resources
- Board of Health
- Child Care Licensing
- Chronic Disease Risk Reduction
- Communicable Disease Control
- Community Health Needs Assessment
- Covid-19 Response Information
- COVID Archives
- Employment Opportunities
- Family Planning
- Family Planning Confidentiality Notice
- Food Service Protection
- > *Health In All Policies*
- Healthy Start Home Visitor Program
- Sexually Transmitted Disease and Infections
- Immunization Information
- Local Environmental Protection

## Health In All Policies



In the 1920's, the world began adding lead to gasoline. Leaded gasoline improved engine efficiency and performance, resulting in a smoother ride. For nearly fifty years, leaded gasoline was used without worry or care for the consequences to human health. However, in 1969, studies



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# Franklin County (Ottawa): Health Lens Analysis

**Who:** Ottawa Recreational Commission



**What:** Health lens analysis of Fiscal Assessment, Strategic Plan and Action Plan for 2024-2028 developed by PROS Consulting

**Type of Policy:** MOU between Rec. Commission and Live Well Franklin County

**Why:** Incorporate health and equity into documents

*Ottawa Recreation Commission*  
**HEALTH IN ALL POLICIES HEALTH LENS ANALYSIS**  
**Memorandum of Understanding**

The Ottawa Recreation Commission (ORC) Health in All Policies (HiAP) Health Lens Analysis Memorandum of Understanding (MOU) is designed to support the development of a process to apply the HiAP principles to the new ORC Strategic Plan. The following MOU reflects the agreement between the Ottawa Recreation Commission, Erin Laurie, and the Live Healthy Franklin County coalition as part of the *Pathways to a Healthy Kansas (Pathways)*, a Blue Cross and Blue Shield of Kansas (BCBSKS) initiative regarding the use of a *Pathways* implementation grant.

Partners to this MOU recognize financial contributions provided by BCBSKS through *Pathways* initiative and commit to acknowledging this financial contribution in signage, social media, written documentation, or other forms of communication regarding the activities outlined in this MOU.

**Background**

The Live Healthy Franklin County coalition was selected as a grantee for the *Pathways* initiative in July 2016 and again in July 2020.

The mission of the Live Healthy Franklin County coalition is to improve community health through policies that support healthy eating and active living. The coalition held an initial HiAP community leader training in 2019, and has sought opportunities to build upon this by implementing HiAP efforts.

The mission of the Ottawa Recreation Commission is to improve the mental and physical health and well-being of the citizens of our community. Efforts are guided by a strategic plan which expired this year; ORC wishes for the new plan to optimize positive impacts on health by incorporating a health lens analysis.

Erin Laurie, Assistant Professor of Public Health and Nutrition, Baker University, will serve in an independent consultant role to conduct the Health Lens Analysis in order to build local capacity and incorporate into future efforts undertaken by Baker University and the community.

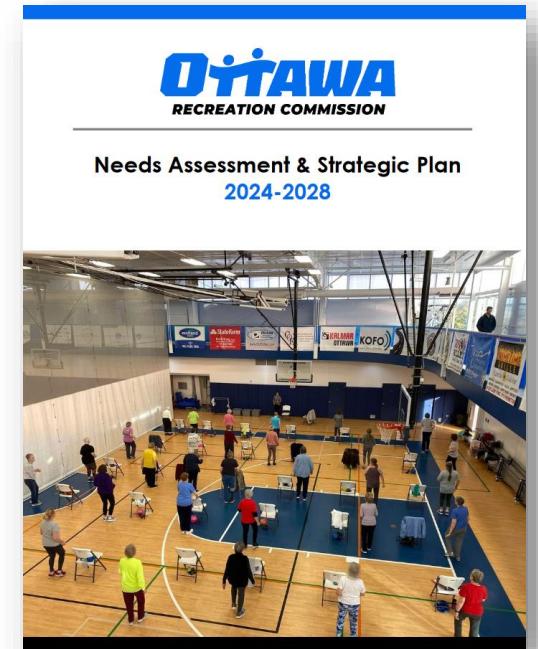
The *Pathways* initiative is structured in terms of "community pathways" that are designed to help the coalition take a holistic, community-wide approach to improving health outcomes by addressing the social determinants of health. This MOU addresses shared alignment in the HiAP package of the Community and Social Context Pathway. For the purposes of the *Pathways*





# Franklin County: Health Lens Analysis

- The analysis, carried out by KHI with support from Live Healthy Franklin County Coalition and a faculty member from Baker University, resulted in more than **50 recommendations** to enhance community engagement and inclusivity.
- The commission now incorporates the Health Lens Analysis method in operations and decision-making.
- Plans include developing an inclusive playground and a communication board to address diverse community needs.
- Baker University – exploring HiAP in the curriculum.

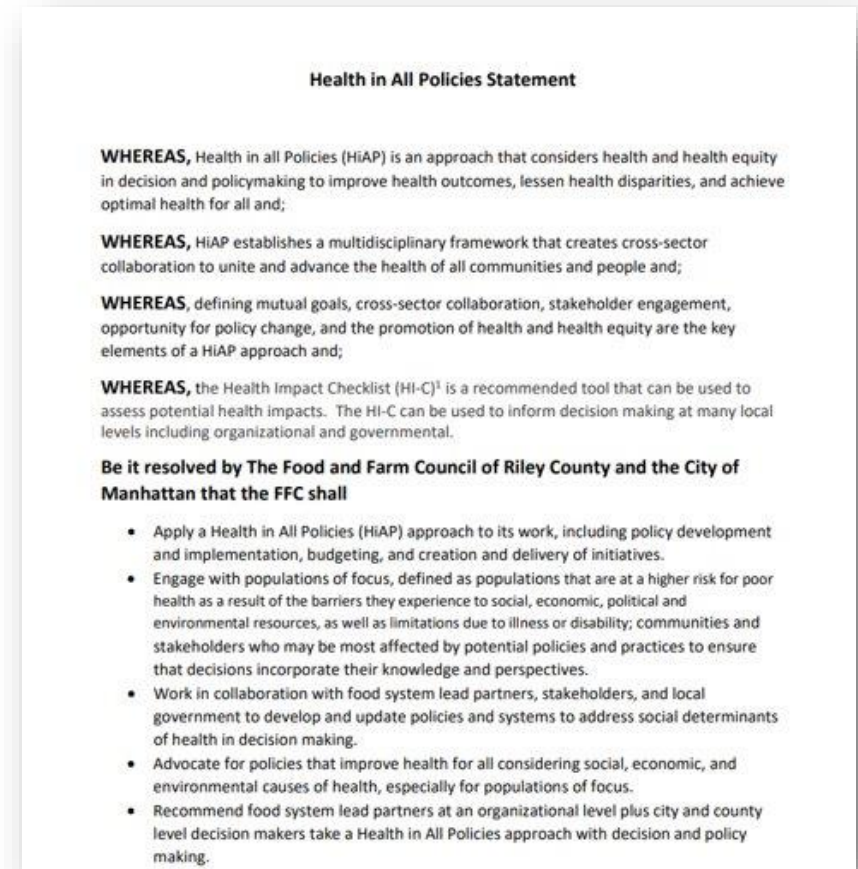


*Goal: equitable strategic planning to meet the needs of the entire community through the HiAP approach.*



# Riley County: Adopt HiAP Statement (e.g., Food and Farm Council of Riley County and the City of Manhattan)

- Spearheaded HiAP initiative through targeted training
- Developed an HiAP policy for the Food and Farm Council of Riley County and the City of Manhattan
- Suggested for inclusion of HiAP in Riley County Comprehensive Land Use Plan update, focusing on housing and health sections
- Convened a cross-sector HiAP event to integrate the HiAP approach into decision-making across sectors
- Providing mini-grants to encourage public entities and nonprofit organizations to adopt HiAP policies





## Flint Hills Wellness Coalition

### Pathways to a Healthy Kansas

### Health in All Policies (HiAP) Incentive Grants

#### **Phase I - \$500 grant (up to eight grants available)**

Agencies/organizations that adopt a Health in All Policies (HiAP) policy or resolution will be eligible to receive a \$500 incentive grant. The HiAP policy or resolution must be approved by a governing board or board of directors with the expectation that the policy or resolution will be followed agency/organization wide.

Agencies/organizations will be expected to submit their adopted policy/resolution to the Flint Hills Wellness Coalition (FHWC). Upon receipt, FHWC will provide a \$500 grant to the agency/organization to use in the manner they wish to further advance their adopted HiAP policy or resolution.

#### **Phase II - \$1,000 grant (up to eight grants available)**

Upon providing evidence to the FHWC that an agency/organization has adopted a HiAP policy or resolution, the agency is then eligible for a \$1,000 incentive grant to engage in one of the following activities:

- Conduct a health lens analysis on an existing policy or proposed policy.
- Develop a mechanism to routinely conduct a Health Impact Checklist, assessing the health impacts of proposed projects, policies, and ordinances.
- Zoning and licensing code review: Conduct a health impact review of zoning and licensing codes, recommending adjustments to improve health. Focus areas should include tobacco, alcohol, walkability, design, and/or other factors.
- Evaluating projects and funding decisions: Seek opportunities to include health-related criteria in project approval and funding decisions, piloting changes as necessary.
- Incorporate health criteria into Requests for Proposals (RFPs) and Requests for Qualifications (RFQs) for City, County, School District-funded and other projects where appropriate.
- Coordinate opportunities for cross-departmental community engagement to ensure a health perspective is more frequently brought to the community.

#### **Incentive Grants Timeline**

Grant requests for Phase I will be accepted starting Friday, April 12. Phase I grantees must complete their work no later than July 31, 2024.

Grant requests for Phase II will be accepted as soon as an agency has completed and provided evidence of their Phase I policy or resolution but no later than July 31, 2024. Phase II HiAP activities must be completed no later than October 31, 2024.



# State Level Efforts: Kansas Department of Health and Environment

- CDC's Public Health Innovation Grant (PHIG) Offered states an opportunity to bolster public health infrastructure and workforce.
- Focus on HiAP: The Kansas Department of Health and Environment (KDHE) prioritized Health in All Policies (HiAP) in their grant plan.
- Cross-Divisional Collaboration: KDHE convened its divisions of Public Health, Healthcare Finance, and Environment for a HiAP workshop.
- Workshop Goals: Aimed to enhance understanding of HiAP and strategize its incorporation into both internal and external operations.



# Discussion

**Which strategies seem feasible for your organization to implement?**



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# Poll – HiAP Strategies

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Strategies for Incorporating HiAP



# HiAP Activity

## Use the Health Impact Checklist to Identify Potential Health Impacts of a Proposed Policy

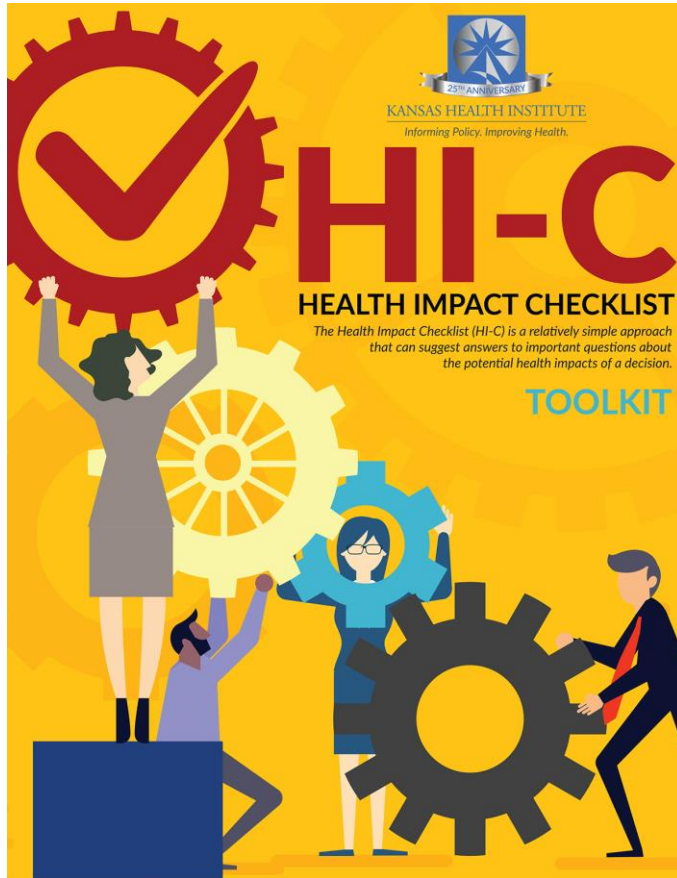


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# Overview of HI-C



*The **Health Impact Checklist (HI-C)** is a tool that asks several questions to help understand how a decision might impact health.*

*HI-C builds on the HIA tool and other similar tools.*



<https://www.khi.org/articles/2020-hi-c-health-impact-checklist/>



# Key Question

*How does the  
proposed  
project, plan,  
policy*



***affect***

Housing  
Air quality  
Noise  
Safety  
Social networks  
Nutrition  
Parks and natural space  
Private goods and services  
Public services  
Transportation  
Livelihood  
Water quality  
Education  
Inequities



*and lead to  
health outcomes?*



# Key Elements

---

## HI-C Form

- ☐ Structured template
- ☐ One-page summary
- ☐ Checklist component (SDoH)
- ☐ Includes a list of impacted populations
- ☐ Tables to describe the impact of a decision on SDoH and resulting health outcomes
- ☐ Scientific literature references
- ☐ Glossary of terms

## Supporting Elements

- ☐ User guide
- ☐ Examples of completed HI-C
- ☐ Fillable version
- ☐ Complete all or separate sections
- ☐ Pilot opportunities & KHI support



# HI-C Summary Page

## Health Impact Checklist Summary Page

<b>Proposal Name</b>		
[ ]		
<b>Key Points of Proposal</b>		
[ ]		
<b>Impacted Social, Economic and Environmental Conditions</b>	<b>Potential Health Impacts</b>	
[ ]	[ ]	
<b>Impacted Population(s)</b>	<b>Recommendations</b>	
[ ]	[ ]	
<b>Entity Completing the HI-C</b>	<b>Entity Receiving the HI-C</b>	<b>Completion Date</b>
[ ]	[ ]	[ ]

## Health Impact Checklist – Example

<b>Summary Page Proposal Name</b>		
Suspension of Disconnections of Utility Services due to COVID-19 (Hutchinson, Reno County)		
<b>Key Points of Proposal</b>		
The city of Hutchinson suspended disconnections of utility services (water, trash and sewer) in March 2020 in response to COVID-19. The grace period, originally set to expire on May 15, was extended to June 1. This HI-C assesses the health impacts associated with having uninterrupted access to water service, resulting from the suspension of disconnections of utility services. Although the HI-C does not focus on potential health impacts after the sunset of the grace period, it notes areas in which the policy might result in unintended consequences (see note on page 3). This HI-C was completed as an example only and was not developed to inform the policy.		
<b>Impacted Social, Economic and Environmental Conditions</b>	<b>Potential Health Impacts</b>	
<p><b>Housing Instability (HI):</b> Reduce risk of housing instability by preventing a water shutoff. Water shutoff can make homes uninhabitable, forcing families to relocate.</p> <p><b>Food Insecurity (FI):</b> Reduce risk of food insecurity by eliminating the need to do budget trade-offs between water bills and food expenditures.</p> <p><b>Misdemeanor (M):</b> Reduce risk of being charged with a misdemeanor for inhabiting a substandard building, which could result in potential loss of access to loans, employment, public housing and other benefits.</p> <p><b>Sanitation (S):</b> Reduce risk of poor sanitation by preventing water shutoff. Running water at home is essential for cooking, washing hands, bathing and flushing toilets.</p> <p><b>Custody of Children (CC):</b> Reduce risk of loss of custody of children in the home based on a potential finding of neglect. The lack of running water at home can be considered as exposure to hazards and be a reason for losing custody of children.</p> <p><b>Chronic Stress (CS):</b> Decrease stress associated with water shutoff. Increase stress due to accumulation of utility debt.</p> <p><b>Note:</b> Positive impacts might be reversed and become negative after the sunset of the deferment due to accumulation of utility debt during the grace period and inability to repay it without tradeoff.</p>	<ul style="list-style-type: none"> <li>• <b>HI:</b> Reduce risks of teen pregnancy, early drug use, depression, postponing medical care.</li> <li>• <b>FI:</b> Lower risk of poor general health, lower risk of chronic disease (e.g., diabetes).</li> <li>• <b>M:</b> Reduce risk of chronic disease.</li> <li>• <b>S:</b> Lower risk of respiratory illnesses, such as infant pneumonia, skin infections, severe bacterial infections and dehydration.</li> <li>• <b>CC:</b> Lower risk of additional trauma.</li> <li>• <b>CS:</b> Mixed impact (positive and negative) on general health and blood pressure.</li> </ul>	
<b>Impacted Population(s)</b>	<b>Recommendations</b>	
<ul style="list-style-type: none"> <li>• <b>HI:</b> Decrease risk of housing insecurity for children, racial/ethnic minority veterans, and low-income renters.</li> <li>• <b>FI:</b> Decrease risk of food insecurity for low-income individuals and individuals who are Black or Hispanic.</li> <li>• <b>M:</b> Decrease risk of receiving a misdemeanor for low-income people.</li> <li>• <b>S:</b> Reduce risk of poor sanitation for the elderly, children, pregnant women and people with chronic conditions by preventing water shutoff.</li> <li>• <b>CC:</b> Decrease risk of losing custody of children for low-income individuals and added stress and trauma for children.</li> <li>• <b>CS:</b> Mixed impact on stress. Decrease stress associated with water shutoff. Increase stress due to accumulation of utility debt.</li> </ul>	<ul style="list-style-type: none"> <li>• Ensure that sufficient notice is given before shutoff of utilities.</li> <li>• Work with medical providers to screen patients for social needs and connect patients with resources.</li> <li>• Review Utility Billing Extended Payment Plan and ensure that it positions potential applicants to successfully repay the debt.</li> </ul> <p><b>Note:</b> For all recommendations, see page 12.</p>	
<b>Entity Completing the HI-C</b>	<b>Entity Receiving the HI-C</b>	<b>Completion Date</b>
Kansas Health Institute	Example	10/08/2020



# Policy Example



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# Suspension of Disconnections Services Due to COVID-19



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# Policy Example Continued

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- The City of Hutchinson temporarily suspended water, trash and sewer utility disconnections and deferred payments for these services between March and June 1, 2020.
- The utility deferment initiative did not forgive any unpaid or accrued utility bills. Individuals remained responsible for the accumulated cost of deferred payments.
- Residents who experienced difficulty paying utility services after June 1 were encouraged to:
  - Contact the City of Hutchinson before the bill becomes due;
  - Set up a payment agreement before the scheduled disconnection date; and
  - Inform the City of Hutchinson if the financial situation changes and they have problems making those payments.



# Instructions

---

Using the HI-C, will work through:

## Question 3 (page 3):

- Identify 2-3 conditions the policy could impact.

## Question 5 (page 4):

- Describe how these condition could impact health.

Designate a facilitator. In your group, identify at least 2 conditions and describe their health impacts (10 min). Complete poll, and be ready to report back!



# Identifying Impacted Conditions - Instructions

Social, Economic and Environmental Conditions <sup>1, 2</sup>		
Economic Stability	Neighborhood & Physical Environment	Education
<input type="checkbox"/> Employment	<input type="checkbox"/> Housing Quality	<input type="checkbox"/> Early Childhood Education and Development
<input type="checkbox"/> Income	<input type="checkbox"/> Transportation	<input type="checkbox"/> High School Graduation
<input type="checkbox"/> Housing Instability/ Homelessness	<input type="checkbox"/> Environmental Conditions (e.g., water, air and soil quality)	<input type="checkbox"/> Higher Education
<input type="checkbox"/> Food Insecurity	<input type="checkbox"/> Access to Healthy Food	<input type="checkbox"/> Language
<input type="checkbox"/> Poverty	<input type="checkbox"/> Safety	<input type="checkbox"/> Literacy
<input type="checkbox"/> Other:	<input type="checkbox"/> Other:	<input type="checkbox"/> Other:
<input type="checkbox"/> Other:	<input type="checkbox"/> Other:	<input type="checkbox"/> Other:
Community and Social Context	Health and Health Care	<b>Note:</b> The number of social, economic or environmental conditions examined could depend on available resources, stakeholder interest and timeline. After examining three, additional conditions may be examined further.
<input type="checkbox"/> Civic Participation	<input type="checkbox"/> Health Coverage	
<input type="checkbox"/> Discrimination	<input type="checkbox"/> Provider Availability	
<input type="checkbox"/> Toxic Stress	<input type="checkbox"/> Access to Health Care	
<input type="checkbox"/> Social Isolation	<input type="checkbox"/> Access to Behavioral Health Services	
<input type="checkbox"/> Incarceration	<input type="checkbox"/> Quality of Care	
<input type="checkbox"/> Other:	<input type="checkbox"/> Other:	
<input type="checkbox"/> Other:	<input type="checkbox"/> Other:	



# Helpful Tips!

---

- Start with Brainstorming!
- Read each condition, and ask a question.  
*Would the Suspension of Disconnection of Utilities regulation impact this condition in any way?*
- Some answers might be: **yes, no, don't know, maybe.**
- Start with clear yes!





# Describing Impact on Health - Instructions

For each identified condition, discuss how this condition might be impacted, potential health impacts and an overall impact.

Social, Economic or Environmental Condition	Impact of the Proposal on Condition	Impact of the Condition on Health	Overall Impact on Health
Chronic Stress	Decrease stress = no water shutoff; increase stress due to accumulation of utility debt	Mixed impact on general health and blood pressure	<input type="checkbox"/> Positive <input type="checkbox"/> Negative <input checked="" type="checkbox"/> Mixed <input type="checkbox"/> None <input type="checkbox"/> Unclear



# Breakout

## 10 min



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# Poll – Impacted Conditions

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Impacted Conditions



# Impacted Conditions

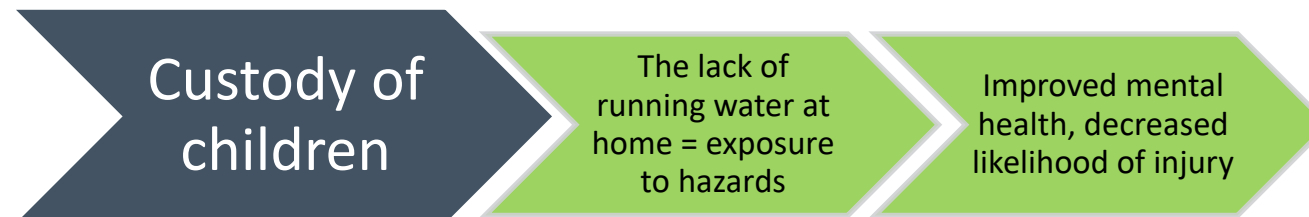
Social, Economic and Environmental Conditions <sup>1, 2</sup>		
Economic Stability	Neighborhood & Physical Environment	Education
<input type="checkbox"/> Employment	<input type="checkbox"/> Housing Quality	<input type="checkbox"/> Early Childhood Education and Development
<input type="checkbox"/> Income	<input type="checkbox"/> Transportation	<input type="checkbox"/> High School Graduation
<input checked="" type="checkbox"/> Housing Instability/ Homelessness	<input type="checkbox"/> Environmental Conditions (e.g., water, air and soil quality)	<input type="checkbox"/> Higher Education
<input checked="" type="checkbox"/> Food Insecurity	<input type="checkbox"/> Access to Healthy Food	<input type="checkbox"/> Language
<input type="checkbox"/> Poverty	<input type="checkbox"/> Safety	<input type="checkbox"/> Literacy
<input type="checkbox"/> Other:	<input checked="" type="checkbox"/> Other: Sanitation	<input type="checkbox"/> Other:
<input type="checkbox"/> Other:	<input type="checkbox"/> Other:	<input type="checkbox"/> Other:
Community and Social Context	Health and Health Care	<b>Note:</b> The number of social, economic or environmental conditions examined could depend on available resources, stakeholder interest and timeline. After examining three, additional conditions may be examined further.
<input type="checkbox"/> Civic Participation	<input type="checkbox"/> Health Coverage	
<input type="checkbox"/> Discrimination	<input type="checkbox"/> Provider Availability	
<input type="checkbox"/> Toxic Stress	<input type="checkbox"/> Access to Health Care	
<input type="checkbox"/> Social Isolation	<input type="checkbox"/> Access to Behavioral Health Services	
<input type="checkbox"/> Incarceration	<input type="checkbox"/> Quality of Care	
<input checked="" type="checkbox"/> Other: Misdemeanor	<input type="checkbox"/> Other:	
<input checked="" type="checkbox"/> Other: Chronic stress	<input type="checkbox"/> Other:	
<input checked="" type="checkbox"/> Other: Custody of children		



# Potential Health Impacts

5. Describe how the proposal could impact the social, economic and/or environmental conditions identified in Question 3 and how it could result in associated health impacts for the community overall. (Type in.)

Social, Economic or Environmental Condition	Impact of the Proposal on Condition	Impact of the Condition on Health	Overall Impact on Health
<b>Custody of Children</b>	Lack of running water at home can be considered an exposure to hazards and be a reason that parents and other guardians lose custody of children. Nationally, there have been several cases when water shutoff has led to children being taken from their homes under child protection laws.	The removal of children from their homes may result in various health impacts. Evidence suggests that removing children from their families is disruptive and traumatic and can have long-lasting, negative effects. <sup>23 24</sup>  By reducing the risk of loss of custody during the grace	<input checked="" type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Mixed <input type="checkbox"/> None <input type="checkbox"/> Unclear





# Impacted Populations



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# Impacted Populations

## ***Section IV: Glossary of Terms***

*Summary definitions for determinants of health were pulled from Healthy People 2020 <sup>3</sup> and additional sources.<sup>4,5</sup> Additional information is available [here](#).*

**Populations of Focus:** Populations may include racial and ethnic groups, including persons of Black, American Indian or Alaska Native, Asian, and Native Hawaiian or Other Pacific Islander races and persons of Hispanic or Latino ethnicity; rural/urban residents; children; persons who are pregnant; persons who are LGBTQIA+; older adults; persons with chronic illnesses; persons with housing instability or who are unhoused; immigrants with any documentation status; displaced persons; persons with limited English proficiency; persons with low literacy; persons with low income; persons with disabilities; persons with mental illness; uninsured or underinsured; and others.



# Identifying Impacted Populations in the HI-C

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Using the HI-C, you would:

- Identify populations that might be potentially impacted.
- Describe potential health impacts.

Social, Economic or Environmental Condition	Impacted Population	Impact on Health	Overall Impact on Health
			<input type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Mixed <input type="checkbox"/> None <input type="checkbox"/> Unclear



# Poll – Impacted Populations

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Impacted Populations



# Impacted Population

6. Based on the potential impact of the proposal on the social, economic or environmental conditions identified in Question 3, identify populations who could be impacted and how the proposal might affect their health. *(Describe at least three populations.)*

Social, Economic or Environmental Condition	Impacted Population	Impact on Health	Overall Impact on Health
<b>Chronic Stress</b>  The policy might have mixed impact on chronic stress: positive (alleviate fear associated with water shutoff during the grace period) and negative (stress associated with accumulation of utility debt during the grace period).	Low-Income Individuals	Low-income households often have a higher utility burden — meaning they pay a higher percentage of their income toward utility costs compared to higher income households. Accumulation of debt has been associated with increased anxiety, depression and even poor physiological functioning and decision-making. <sup>32</sup> Fear of water shutoff also could negatively impact mental health.	<input type="checkbox"/> Positive <input type="checkbox"/> Negative <input checked="" type="checkbox"/> Mixed <input type="checkbox"/> None <input type="checkbox"/> Unclear





# Recommendations (Example: Utility Shutoffs)

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- **Notice:** Review the current shutoff policies to ensure that they provide sufficient notice. Some practices may include using multiple notification methods, such as including notification in the bill, a bill reminder, a shutoff notice, a call and a door hanger.
- **No or limited penalties:** Review the current Utility Billing Extended Payment Plan and make sure that it positions potential applicants to successfully repay the amount owed.
- **Financial counseling:** Provide financial counseling as soon as possible to ensure that those who may owe payments manage their finances responsibly during the time of the deferment.



# What Now?



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# CALL TO ACTION

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Moving HiAP Forward



# KHI Blog: HiAP Article



# Resources (Selected)

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Resources	Links
Health Impact Checklist (Kansas Health Institute)	<a href="https://www.khi.org/articles/2020-hi-c-health-impact-checklist/">https://www.khi.org/articles/2020-hi-c-health-impact-checklist/</a>
SOPHIA: The Community of HiAP Professionals	<a href="https://hiasociety.org/">https://hiasociety.org/</a>
Association of State and Territorial Health Officials	<a href="https://www.astho.org/topic/health-equity/hiap/">https://www.astho.org/topic/health-equity/hiap/</a>
National Association of County and City Health Officials (NACCHO)	<a href="https://www.naccho.org/programs/community-health/healthy-community-design/health-in-all-policies">https://www.naccho.org/programs/community-health/healthy-community-design/health-in-all-policies</a>
Community Commons HIA	<a href="https://hia.communitycommons.org/">https://hia.communitycommons.org/</a>
International Association for Impact Assessment IAIA	<a href="https://www.iaia.org/">https://www.iaia.org/</a>

# Connect With Us

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# THANK YOU!

## Any Questions?



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