Massachusetts Department of Public Health

150 YEARS OF ADVANCING PUBLIC HEALTH

Amplifying Impact Through Community Collaboration and Sharing Power:

Achieving Equity by Addressing Root Causes

Health Equity Trends Summit 2024

June 6, 2024

150 YEARS OF ADVANCING PUBLIC HEALTH

Context Setting: The Department's Approach to Address Root Causes of Poor Health

DPH's Division of Community Health Planning & Engagement

Addresses root causes of chronic disease

Builds capacity of communities, municipal governments & health systems

To change policies and practices that perpetuate inequities

Building community capacity…

- improves physical and social conditions
- leads to more active partnerships across sectors
- more dollars invested in communities in ways that improve and support health
- creates healthier communities

What are Root Causes?

This Health Tree shows the relationship between health outcomes and root causes of health.

Health Outcomes
Tree Leaves

Health Behaviors
Tree Branches

Social Determinants of Health
Tree Trunk

Root Causes of Health
Tree Roots

Underlying Systems of Dominant Culture and Narratives
Soil

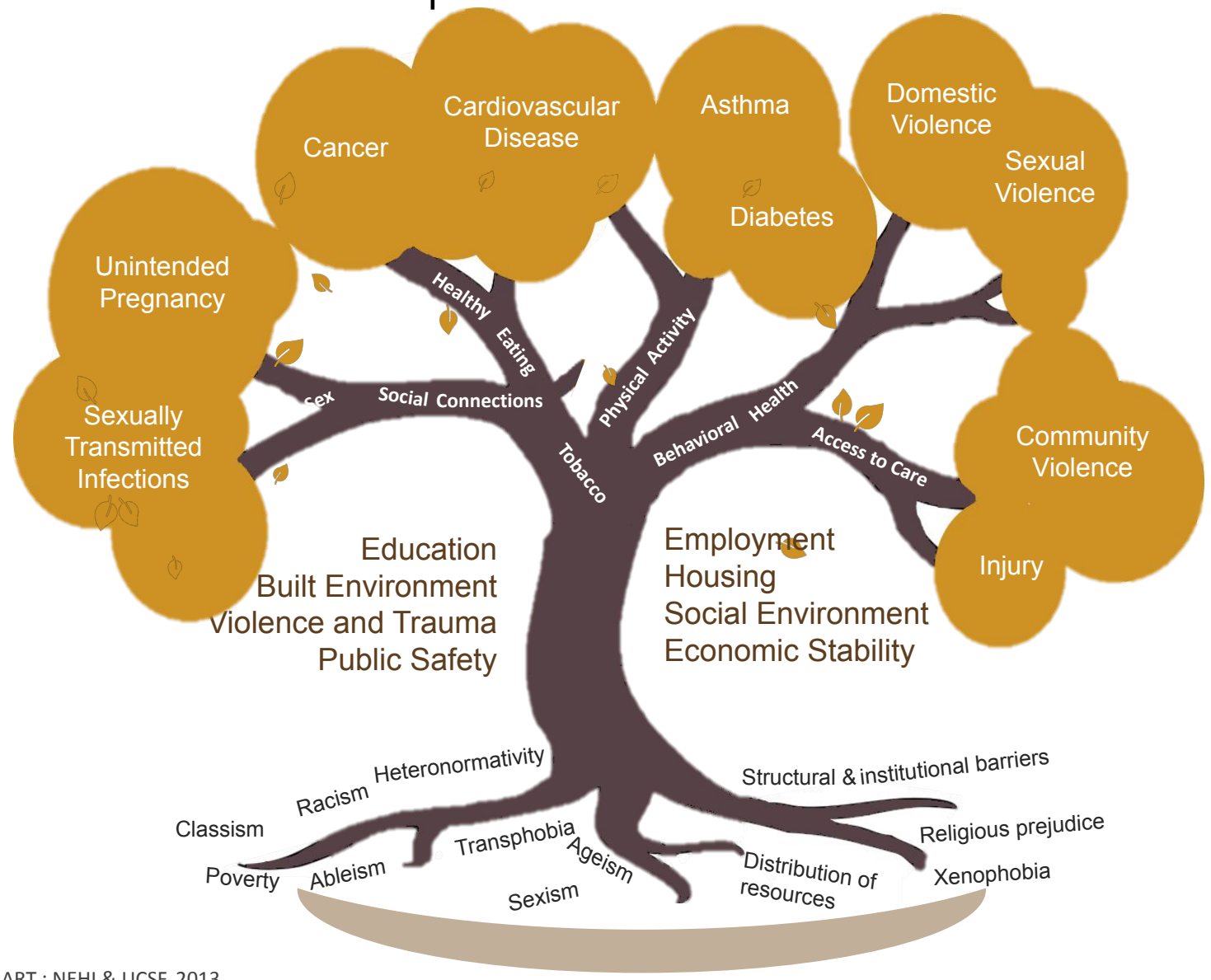
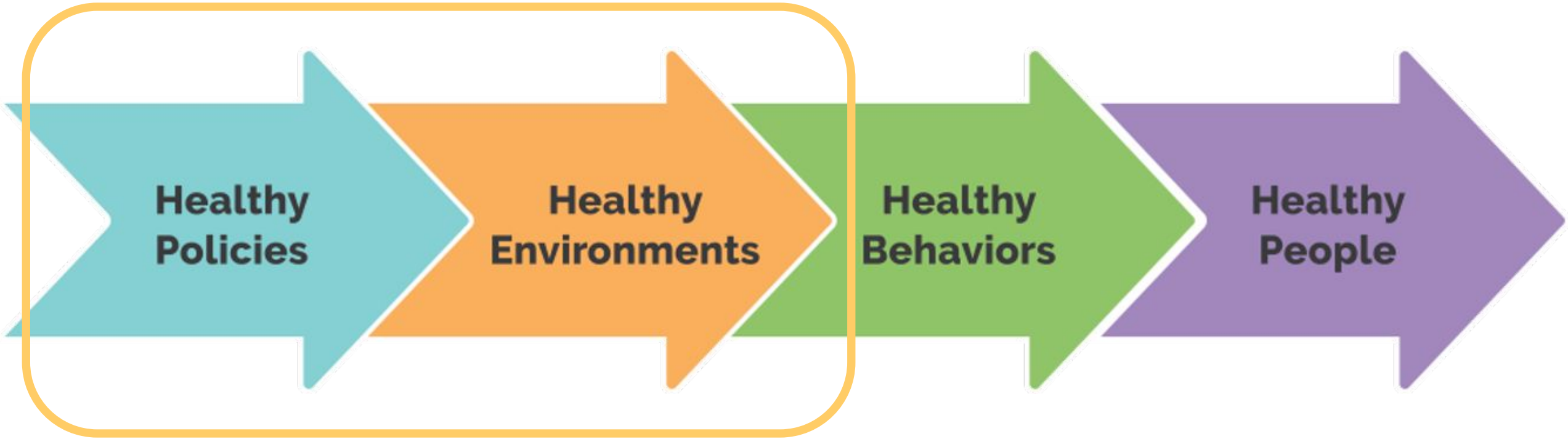


CHART : NEHI & UCSF, 2013
HEALTH TREE: ADAPTED BY HEALTH RESOURCES IN ACTION FROM THE HUMAN IMPACT PARTNERS MAY 2023.

How We Think Change Happens

Healthy Community Theory of Change



This is where the Division's program works

We lead with addressing structural racism

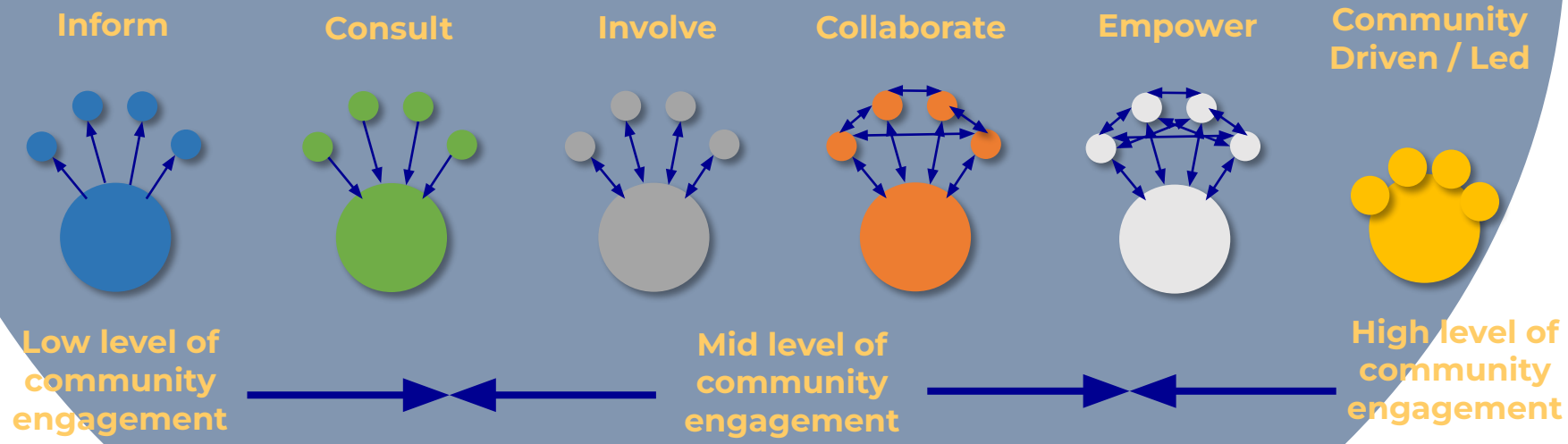
- Research and experience shows that structural racism **shapes opportunities** for health and wellbeing
- Racial inequities and racism also exist in **communities that are mostly white**
- We help people build their ability to use **practices based in racial equity** principles
- We lead with race and racism **explicitly but not exclusively:** society and institutions marginalize other identities too

Community engagement is...

Intentional, ongoing, relational.

Centers lived experience in decision-making at all steps to inform our actions.

Our role – provide resources, measure, share power, do no/limit harm, change policies and practices in our sphere of influence.



Source: Adapted from International Association for Public Participation

How does capacity building work?

Steps to addressing root causes of poor health and other issues

Learn

Learn key concepts about root causes and racial equity

1

Reframe

Reframe context and solutions to address root causes

2

Act

Choose an action to address root causes

3

Reflect

Reflect and adjust plans as needed

4

Share

Share success and tell stories about changes along the way

5

Heywood Hospital

Heywood Healthcare

Not-for profit community-owned healthcare system

Heywood Hospital

Gardner, MA
134 beds
Est. 1907

Athol Hospital

Athol, MA
21 beds
Critical Access Hospital
Est. 1950

Heywood Medical Group

26 Provider Based Clinic/Outpatient Sites

2 School Based Health Centers

Community Benefit Mission:

Heywood Healthcare is committed to advancing the community's well-being by intentionally addressing race, sexual orientation, and gender identity inequities and working collaboratively with community partners to increase prevention efforts, address social determinants of health, and improve access to care.

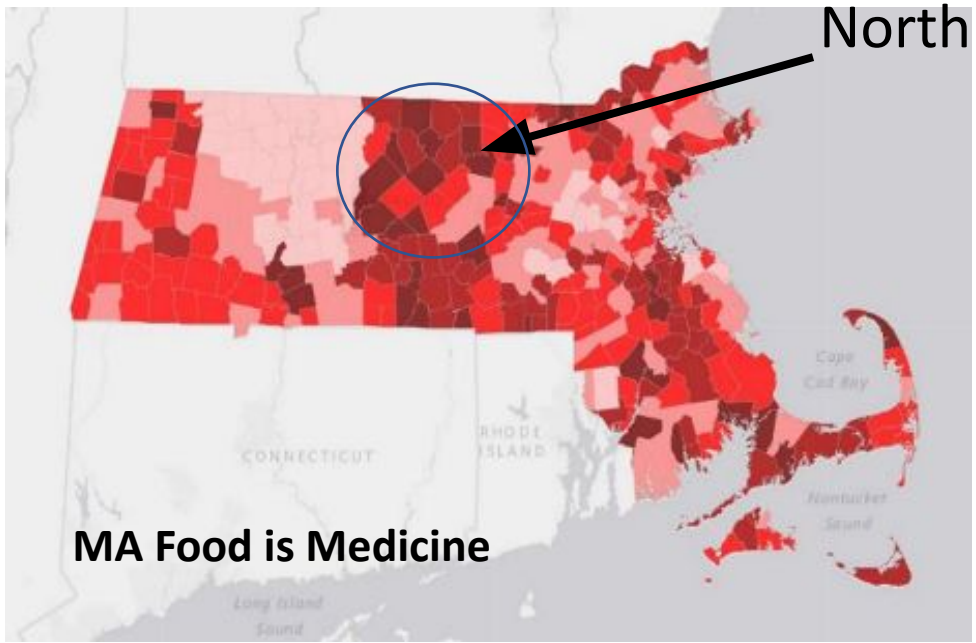
Heywood Healthcare Region

- 27 communities, Most communities rural/semi rural

  3 Urban Areas (Gardner, Fitchburg, Leominster)
- 11 USDA food desert tracts
- 11 Environmental Justice Communities
- 275,000 people
- Majority White but Diversifying Rapidly

  2010-2024 White population decrease of 3.3%

  86.1% of school-aged children classified as white vs 93% of the population
- Per capital income is $6,000 lower than MA
- Under 18 year old and 65+ poverty rates are higher



Darker Shading =

- A high level of food insecurity
- A high burden of chronic diseases associated with food insecurity
- A lack of accessible and reliable transportation.

NCMA Food Assessment

- 66% of NCMA households eat only one to two servings of fruits/vegetables each day
- Lack resources and equitable access to healthy cultural food
- 23% of residents get their food from a convenience/dollar store or food pantry
- Underutilized nutrition benefit resources ($6.5M SNAP / $1.9M MA HIP unused monthly)
- Disconnected local food supply chain
- Small/mid size and socially disadvantaged NCMA farms unable to make a living
- Missed employment opportunities in the food and farm sector
- Small town power dynamics and limited economic resources as mechanisms of social exclusion and disengagement.

HEAL Collaborative

Organization DEIB Assessment/Policies

Youth and Resident Civic Engagement and Leadership

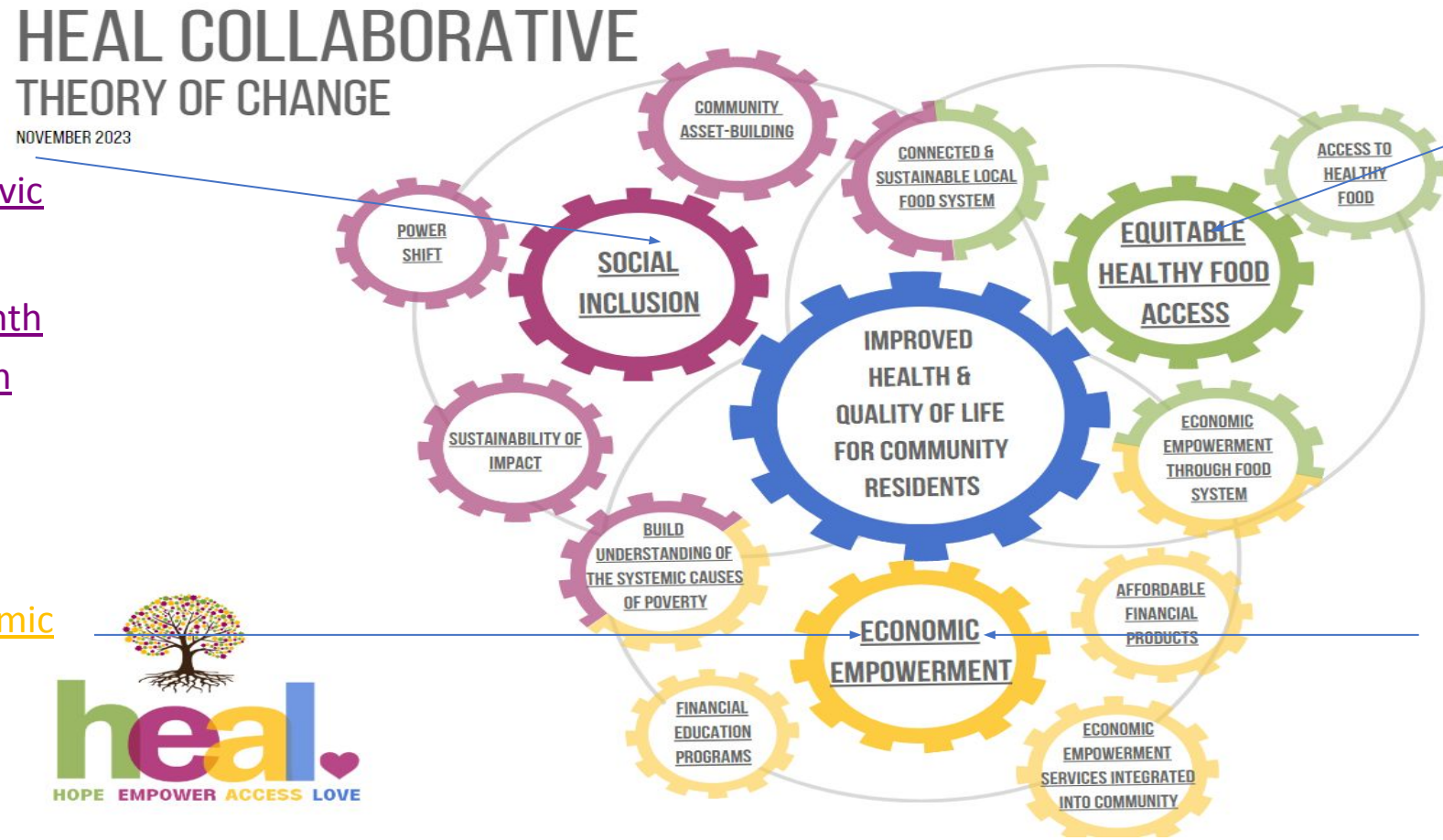
Adopt June Pride Month

Embed Civics Action in School Curriculum

Taste of Winchendon Cultural Event

Empowerment Economic Hub

Accessible Financial Products



heal.
HOPE EMPOWER ACCESS LOVE

SNAP/HIP Enrollment

Local Institutional Procurement

Gardner Food Distribution Center

Mobile Markets and Fresh Meal Kit Delivery

Local Grocery Store

Local Makers Space

Youth Changemakers' Cafe

Community-driven initiative to address upstream drivers of health inequities.

Youth Changemakers' Sunshine Cafe

HEALTHY FOOD ACCESS

ECONOMIC EMPOWERMENT

SOCIAL INCLUSION

Youth are Changemakers- Presentation to Select board Taste of Winchendon Approval

Collective Impact: Bringing people together in a structured way to achieve social change

Cohesive Vision, Trust, Communication, Agreed Upon Values

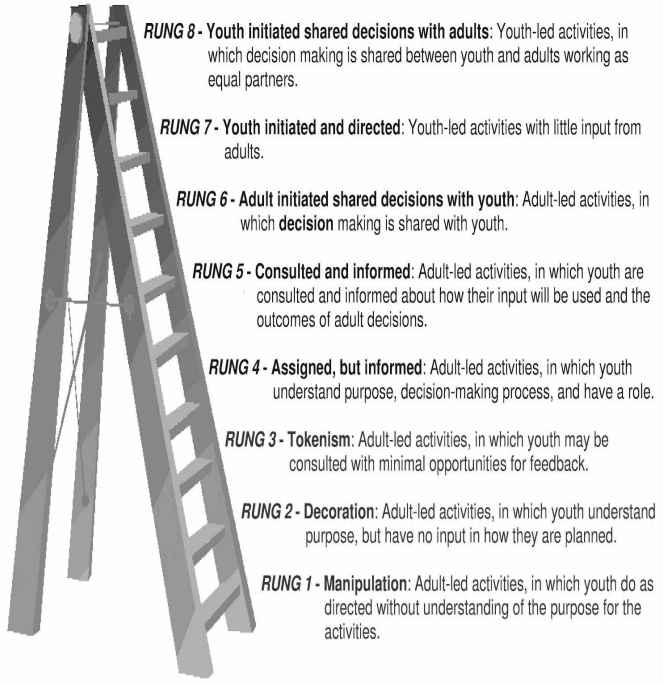
1. Prioritize community voice & youth voice
2. Committed to program design where residents and youth can fully participate, benefit, and lead solutions
3. Power with, not power over
4. Prioritize distributing resources & power equitably among community members and smaller CBO's
5. Learn from one another; we all bring different skills and perspectives to the table
6. Keep "action" as a factor in moving our work forward and keeping members motivated and engaged
7. Incorporate family, intergenerational strategies
8. Poverty is not a reflection of personal behavior but rather the result of historical, structural, political, and social systems
9. Incorporate equity, inclusion & belonging throughout work (it's part of the work, not a separate add on)
10. Diversity of race, culture, socioeconomics, gender, place and other identities are key assets
11. Step up- step back - no one dominates the conversation
12. Transparent and honest communication between members
13. Show up and be prepared
14. Stay on track with work plan, engage in process evaluation, willing to make changes as needed

Structure Tools

Pugh Matrix (adapted)

Criteria 1 no 2 maybe 3 yes	Option 1 Keep Structure as is	Option 2	Option 3
Moves Us Upstream (health, wealth, and power			
Within Current Capacity (time and $)			
Simplifies Our Work			
Aligns with HEAL Vision			
Contains Small Wins (1-2 years)			

Roger Hart's Ladder of Participation

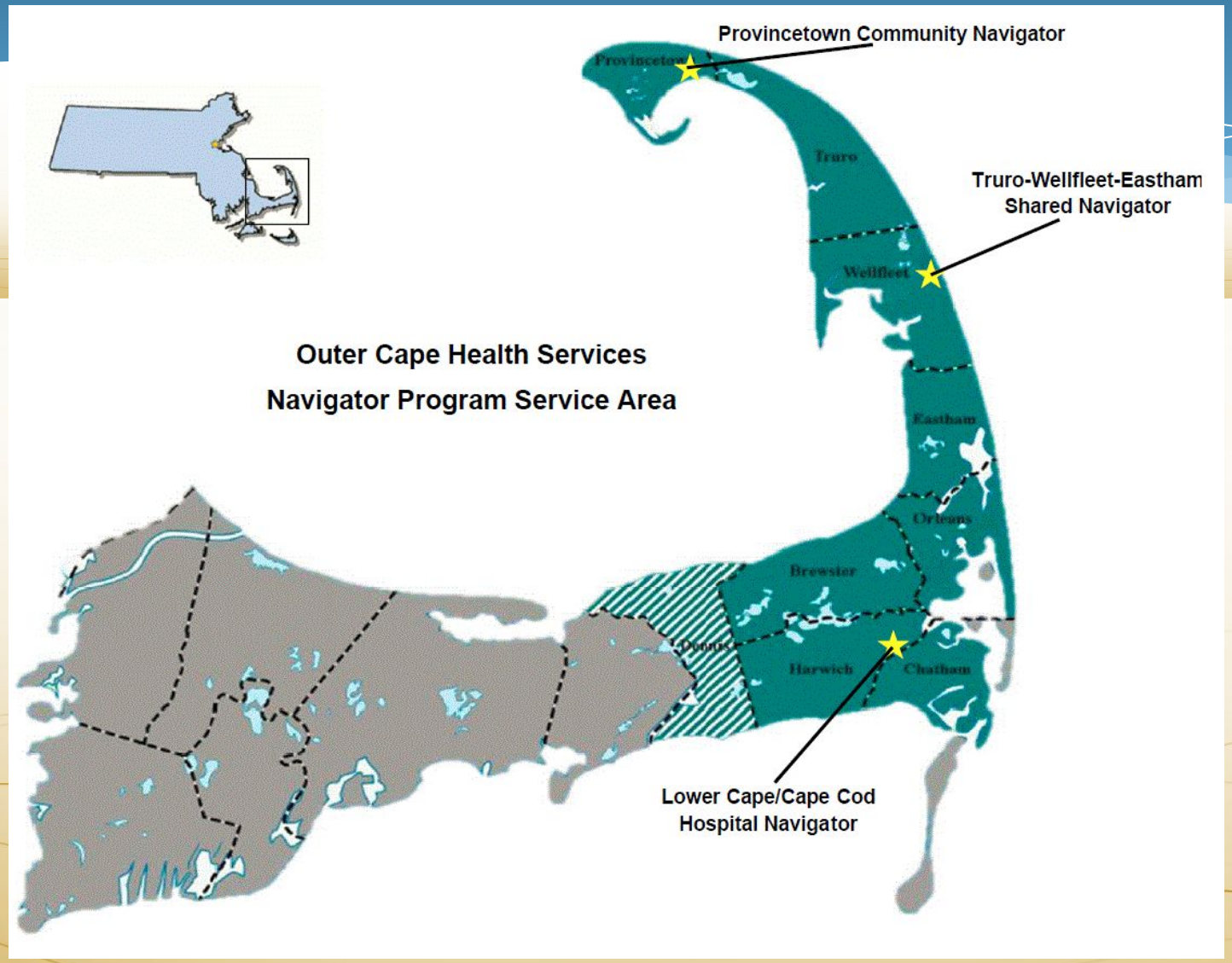


Outer Cape Health Center

About Outer Cape Health Services

- Rural FQHC formed 1987
- Serves more than 18k patients on the ten outermost towns of Cape Cod
- 200 square-mile catchment area
- Designated by HRSA as underserved for Medical, Dental, & Mental Health
- Closest Emergency Room is one hour away from Provincetown
- Year-round population of Cape Cod approximately 220k
- Estimated 5 million annual visitors to Cape Cod

The region



Outer Cape
HEALTH SERVICES
We Treat You Well

Community Health Framework

Timeline

- 2016- CHW Program to focus on SDOH and community resources
- 2019- Community networking: Outer Cape Community Solutions Network
- 2021- Area Health Education Center: Workforce Development
- 2021- Re-defining Health & Well-Being with more intention and inclusiveness

Resources

- HRSA grants
- State Office of Rural Health & DPH (TA & capacity building)
- Municipal collaborations
- Rural Hub Info: frameworks and toolkits
- CDC Community Health Frameworks

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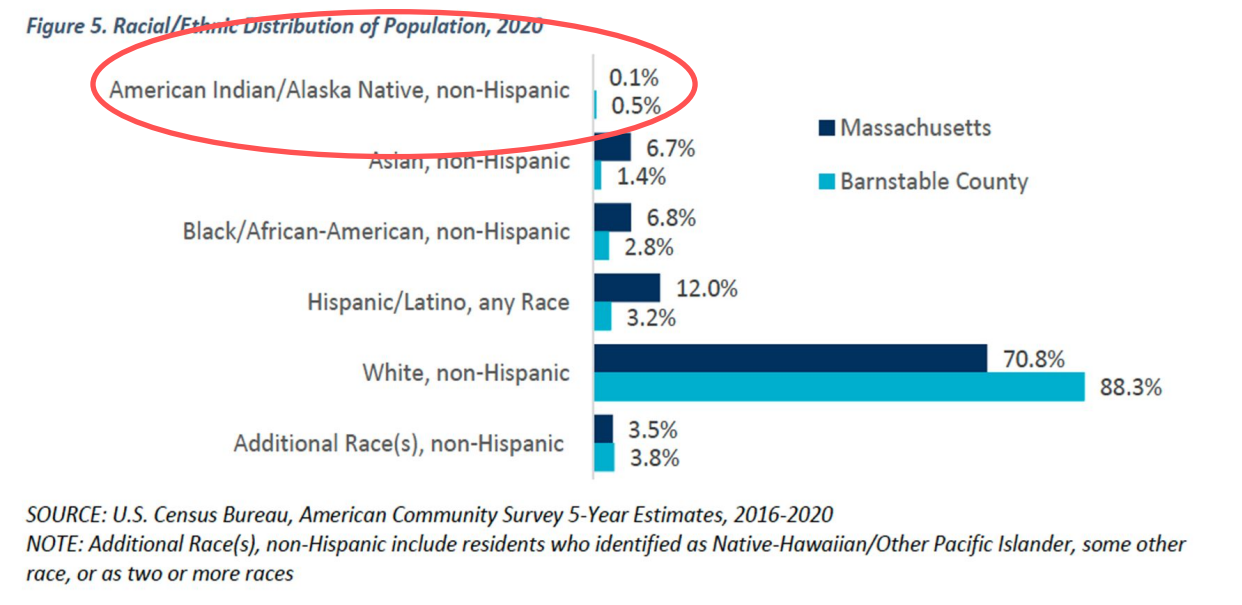
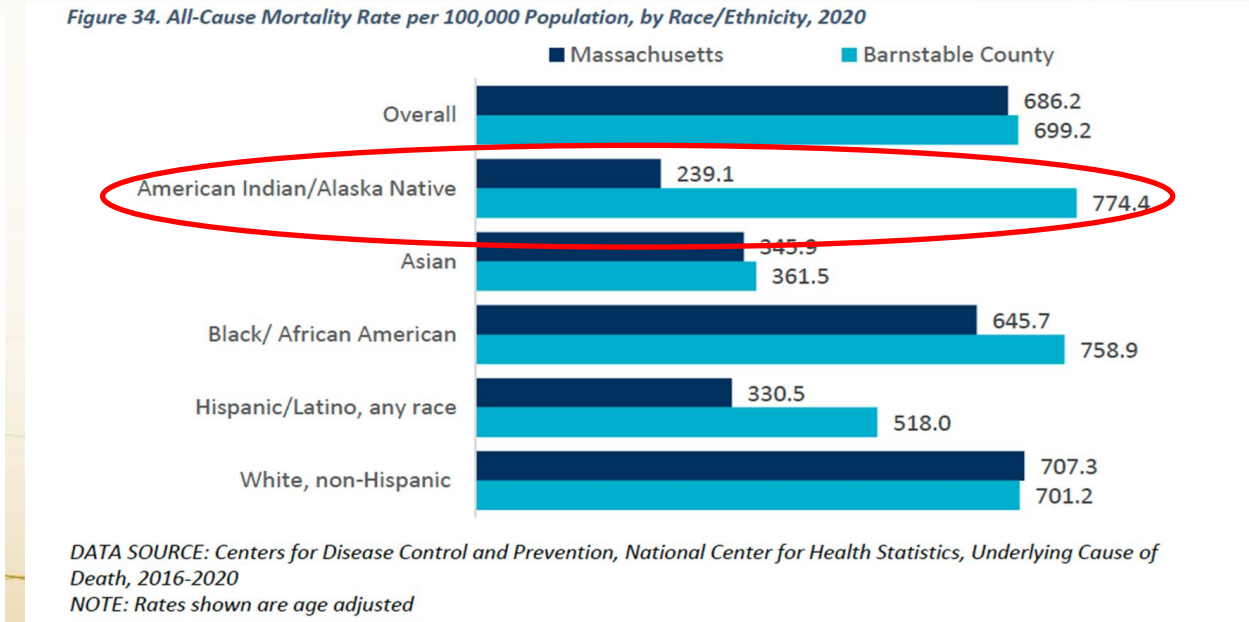
CDC Regional Data by Race & Ethnicity

Population by Race/ethnicity



All-cause mortality by R/E



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Re-defining Community Health & Well-being

Increasing Research to support collaborations and power sharing

- NIH: Reclaiming Indigenous Health in the US: Moving beyond the Social Determinants of Health
- Johns Hopkins: Why the Health of Indigenous People Impacts Us All

Community Action & Sharing Power

- Increased OCHS capacity for collaborations in relationship building and resources
  - Mass Cultural Council, historical societies, faith-based and social justice organizations, schools, arts & culture organizations, libraries, National Park Service, land conservations

Sharing Power

- Supporting grant applications, access to health data, clinical terminology, community-led, Indigenous-led community action

Impact

2022- Barnstable County: creation of land acknowledgement statement & official recognition of Indigenous Peoples Day

2022- Beach Fees exemption for Indigenous Tribal members on the Outer Cape

2023- NPS funded the Three Sisters garden and traditional "wetu" on the Outer Cape

2023- Year-long grant funded event series "Building Relationship, Building Equity: Acknowledging Continuing Wampanoag Presence on Cape Cod & the Islands"

2024- Regional healthcare grant to support Indigenous-led community event

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Questions & Answers

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Parting Shots:
One Key Take-Away

We sparked an idea, now what?

Root Cause Solutions Exchange

MA Root Cause Solutions Exchange Web Platform - Interest List

Be in Touch

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- Mary Giannetti, Director of Resource Development, Heywood Healthcare, mary.giannetti@heywood.org