

From January 29, 2020 – Healthy Communities Session

Healthy Communities: How Do We Define The Concept?

- **Gallup Well-Being Index**
 - The Well-Being Index measures Americans' perceptions of their lives and their daily experiences through five interrelated elements that make up well-being: sense of purpose, social relationships, financial security, relationship to community, and physical health.
- **Blue Zones**
 - Demographers Michel Poulain and Gianni Pes two found that Sardinia held the highest concentration of male centenarians (people 100 years old or older) in the world. They circled areas of interest on their maps with concentric blue circles; referring to them as Blue Zones. Since then the definition of a Blue Zone has expanded to more broadly describe examples of community well-being and longevity.
- **The Blue Zones Power 9**
 - Move Naturally: People in the longest-lived communities really are not going to the gym, but rather live in areas that force them to move naturally.
 - Purpose: Knowing your purpose and having a sense of worth in your life has been shown to grant up to seven extra years of life.
 - Down Shift: It's important to have methods of dealing with this stress and have healthy ways of coping/dealing with the stress of our day-to-day lives.
 - The 80% Rule: In Okinawan society, people eat until they know they're stomach is around 80% full, which is the difference between losing and gaining weight.
 - Plant Slant: Beans and legumes are the cornerstone of the majority of centenarian diets and generally only eat meat in 3-4 oz serving sizes.
 - Wine @ 5: Most data shows that moderate drinkers outlive non-drinkers.
 - Belong: All significant number of centenarians interviewed for the research belonged to a faith-based community which can supposed add anywhere four to fourteen years on to your life expectancy.
 - Loved Ones First: Most of the centenarians had loved ones like parents or grandparents living nearby or in the home with them as well as most of them having committed to a life partner.
 - Right Tribe: In Okinawa, people choose a circle of friends that they will stick with a close-knit group of friends that promote healthy behaviors to one another and support each other.
- **Well-Being vs. Wellness**
 - The term wellness is often thought to be just physical in nature. The term well-being encompasses a broader set of domains – purpose, physical, mental, relational, and financial.

- **Healthy Communities Defined**

- Healthy Communities seek to promote the overall health and well-being of every community member and help them achieve that through goal-directed activities aimed at increasing each person's sense of purpose and place, safety, physical and mental health, financial security and relationships to others and the community as a whole.

Healthy Communities: How Do We Measure Their Health? Define Tactics?

1. Purpose & Place (measurables)

- a. Measuring/empowering/increasing the % of our population that looks / has different backgrounds
- b. Create a baseline of the "health" of our nonprofit/civic service organizations
 - i. Are these places getting out to those who need/use their resources and are those people seeing stability?
 - ii. Are these organization growing? New volunteers, employees, growth of funds, etc.
- c. Population movement
 - i. Who
 - ii. Where
 - iii. Commuter
 - iv. How long
 - v. Demographics
 - vi. Why – individual drive, income, jobs, etc.

2. Purpose & Place (tactics)

- a. Support newcomer welcome strategies (town & county) / welcome wagon in-person engagement
- b. Increasing coordination between parks – building the map and events
- c. Encourage communication and coordination with communities of faith
- d. Increase awareness and participation with community recreation options (current first)

3. Safety (measurables)

a. Charted and Presented

- i. ACE scores decrease over time
- ii. Shelter cares decrease housing
- iii. Decrease in crimes / crime statistics
- iv. Decrease stigma – increase in receiving services
- v. Intergenerationally more people will be equipped or trained to address mental health issues at all levels
- vi. Decrease rates in PTSD, suicides, AA and DV depression

b. Written Notes

- i. Down measures
 1. Crime
 2. Suicide
 3. Substance abuse
 4. Child/sexual abuse
 5. Depression

- ii. Up measures
 - 1. Fitness
 - 2. Clubs
 - 3. Events
 - 4. Work
 - 5. Family
 - 6. Intergenerational awareness increase involvement topics attendance
- iii. Aces Scores
- iv. Crime
 - 1. Police reports
 - 2. School data
 - 3. Social service agencies
 - 4. Emergency room numbers
- v. Low crime/public safety/emergency response time
- vi. Addressing opioid/substance abuse
- vii. Respect for difference of thought
- viii. Safety in home-physical, emotional, verbal, financial, sexual, spiritual
- ix. Presence of safety measures->create safe environment by may increase perceived danger
- x. Proper infrastructure-roads, water/sewage, trash, living environment, food, etc.
- xi. Crime rate
- xii. Emergency response time
- xiii. Number of instances intervention is needed-for substance abuse (medical, mental health, public safety)
- xiv. Increased engagement in minority coalitions/gatherings (political, ethnicity, etc)
- xv. Provide respectful, candid conversation, events/trainings
- xvi. Instances intervention measures for issues in the home (emergency shelter, public safety, mental health, etc.)
- xvii. Number of public education and prevention trainings about healthy relationships addressing risk factors-ACES-scores, 40 Developmental Assets
- xviii. Conduct safety assessment-measure actual resources/measure available and public perception about them
- xix. Conduct infrastructure audit of all environmental health areas
- xx. *Random idea-how do we equip business to better offer wages at a more acceptable living wage?
 - 1. Budgeting training
 - 2. Explore higher county-wide minimum wage or incentives for credits

4. Safety (tactics)

- a. Collecting data from schools (anonymous reporting to 1st responders)
- b. Safety assessment collecting information on what makes the community feel unsafe
- c. Analyze infrastructure; better water and sewer
- d. Safety in your own homes: ensure healthy relationships (domestic violence, addictions)

5. Physical & Nutritional Health (measurables)

- a. Chronic disease rates; long-term trend
- b. Participation / enrollment in recreational and wellness activities; data reports from providers; more outreach for involvement from parks
- c. Access to healthy food; community gardens, education/preparation; food desserts
- d. Reduction in drug/tobacco use; sales data, coroner cases, surveys
- e. Emergency room statistics; safety risks

6. Physical & Nutritional Health (tactics)

a. Charted and Presented

- i. Community Gardens – access, education, advertisement
- ii. HCHP – prevention & interventions
- iii. Coordination of care
- iv. Navigation of information

b. Written Notes

- i. Physical
 - 1. Weight
 - 2. Functional fitness-Subjective
- ii. Nutritional
 - 1. Diet
- iii. Participation in recreational activities throughout parks system
- iv. Participation in nutritional education activities
- v. Access to healthy food via community gardens
- vi. Reduction of tobacco use
- vii. Life expectancy/cause of death
- viii. Chronic disease rates
- ix. Enrollment/participation at fitness centers, youth sports and nutritional programs
- x. Safety/emergency room stats (fall prevention, safe driving)
- xi. Obesity rates-chronic disease
- xii. Risk of premature placement in nursing homes-older adults and people with disabilities
- xiii. Decrease in tobacco/vaping use/drug
- xiv. Functional fitness
- xv. Community gardens/nutritional
- xvi. Nutrition in schools/options

7. Mental Health (measurables)

- a. Centralize data
 - i. ACES scores / DCS / school reports / law enforcement
 - ii. Measuring intervention numbers
 - iii. Emergency response times and availability
 - iv. Crime rates
- b. Create safety assessment and education
- c. Infrastructure audit on environment

8. Physical & Mental Health (tactics)

- a. Support (financial and awareness) of current initiatives
 - i. MHWC, SATF, parks/outdoor, HCTRC, crisis response teams
- b. Unified PR campaign between existing services and organizations
- c. Create programs to fill gaps and increase diversity of providers, services and access (ex. tele-health therapy)
- d. Mental health is whole health

9. **Financial Security (measurables)**

a. **Charted and Presented**

- i. Increased access to personal financial education / stability
- ii. Infrastructure – education, transportation, child care and housing
- iii. Decrease free & reduced lunch as snapshot of larger issues (food pantries/clothing closets)
- iv. Diversity of jobs – employment rates & graduation rates
- v. Intentional engagement with at-risk populations to decrease need for services (housing crisis management)

b. **Written Notes**

- i. Employment rate
- ii. Graduation rates
- iii. Personal financial literacy
- iv. Tax burden-livable & equitable
- v. Developed infrastructure
 - 1. Access to skills development/college/post-secondary education/senior services/retirement readiness/fewer 211 Crises calls/entrepreneurial competence

10. **Financial Security (tactics)**

a. **Charted and Presented**

- i. Exploring funding options for transportation needs (grants, taxes, etc.)
- ii. Community unity centers (finding big struggles basing buildings off it – youth, seniors, etc.)
- iii. Personal Finance Education – curriculum change – school board – state – student outreach

b. **Written Notes**

- i. Online classes
- ii. Curriculum requirement
- iii. Leadership backing

11. **Relational Health (measurables)**

a. **Charted and Presented**

- i. Index of health issues affecting households, and rates of accessing and utilizing available health services.
- ii. Index of participation / usage rates of public spaces (parks, trails, libraries), social clubs, physical and digital communities, voter turnout, volunteer opportunities, interaction with local government and school boards.

- iii. Evidence-based measures from CDC, Gallup, local health department, school systems, that accurately reflect household and relational health.
- iv. Connection between social determinants and personal/relational health

b. Written Notes

- i. Number of people who engage/participate in social activities such as :
 - 1. Public events
 - 2. Churches
 - 3. Volunteer opportunities
 - 4. Service clubs
 - 5. Diversity of opportunities to connect (Folks must know what county is up too.)
 - 6. Clubs
 - 7. Park usage
- ii. Index of how many people from different cultures, races, ethnicities, language-groups. Personal/household is in positive relationship with.
- iii. index of familial health, including but not limited to: divorce rate, rate of domestic violence cases, rate of DCS cases, rate of mental illness untreated, rate of substance abuse/addiction->per household.
- iv. Generations-young and oldest
- v. Pre-K Senior
- vi. Different community resources-connect
- vii. Providing hub for connections
- viii. Sports clubs
- ix. Youth organizations
- x. One centralized hub for all the community health resources
- xi. % of community accessing Home resources
- xii. Bridging gaps with community trails creates health and unity

12. Relational Health (tactics)

a. Charted and Presented

- i. Community Centers, church, wellness centers, schools, community unity centers, parks & rec with an organizational liaison
- ii. To communicate, utilize cell phone technology, data base collection, print-based and web-based social media
- iii. Expand and create mentoring programs

b. Written Notes

- i. More exposure to candidates/community leaders
- ii. Front porch/neighborhood opportunities increase civic engagement, sense of belonging
- iii. *County-wide vs town-based activities

The Hendricks County Healthy Community Initiative is an initiative launched by to improve the overall health and well-being of the Hendricks County community, its families, and its individuals through goal-directed activities.

Hendricks County Healthy Community Initiative

- Encompasses:
 - Purpose
 - Physical
 - Mental
 - Financial
 - Relationships: Personal and Community
- Requires:
 - Accountability
 - Support
 - Encouragement
 - Multigenerational
 - Social Activity Partners