

Partnering with Public Health Agencies

Friday morning 8:30 – 10:00 a.m.

From Amy Carroll-Scott's [presentation](#) at the 2017 NNIP meeting, public health views population health as the health of human populations (e.g., general population, demographic subgroups, geographically defined). Its focus on the full continuum of health and wellness fits with our vision of having all neighborhoods as places where people can thrive. NNIP and the public health field also have many values in common. Its recognition of the social determinants of health relate to the NNIP belief that "place matters for equity." The recognition that [racism is a driver of health disparities](#) (Centers for Disease Control) aligns with one of our goals to improve the use of data in advancing racial equity: to identify and name the root causes and the systems that perpetuate inequities.

Collaboration between NNIP partners and public health agencies can have great payoff for both sides, as demonstrated by many partners over the past two decades. Examples include:

- Analyzing the spatial distribution of health outcomes, access to health care, and community conditions affecting health across neighborhoods
- Connecting with the local agency and communities around data tools to understand social determinants of health or neighborhood health
- Co-producing the required Community Health Improvement Plan
- Partnering with the health department to locate air quality monitors and engage neighbors around the data

Because public health is so decentralized, each state's structure is unique and the roles of state, city, and county public health jurisdictions vary widely. Each partner organization will need to educate themselves and get to know their own public health landscape.

The purpose of this session is to share experiences collaborating with public health agencies to provide lessons for NNIP partners and explore interest in developing a cross-site project.

Three partners will share an overview of their organization's relationships with public health departments and **Katie Pritchard**, alumna of Data You Can Use, will moderate a conversation among the panelists to share details and lessons learned from past collaborations. After the short presentations, we will have an opportunity for the audience to ask questions and discuss what they learned at their tables.

Panelists

- **Sara Jaye Sanford**, Public Health - Seattle & King County
- **Laura McKieran**, Community Information Now (San Antonio)
- **Camille Seaberry**, DataHaven (New Haven)

Discussion

- Share examples of engaging with your public health agencies in your own cities.
- How could your organization begin or deepen the relationship with your public health community to benefit neighborhoods? What barriers do you see?
- What potential activities involving public health agencies could form the basis of a cross-site project and provide examples for NNIP partner cities and other places?

Strategic Framework Connections

Goals:

- Local actors make data-informed changes through policy and practice to distribute resources more fairly and equitably across neighborhoods in their community.
- A stronger and expanded NNIP network supports influence and impact in NNIP cities and nationally.

Strategies:

- Expand the roles and engagement opportunities of NNIP Network members.
- Increase visibility and understanding of the network's values, approach, and insights among our target audiences.
- Resource the plan with diversified funding.

Resources

[Informing Racially Equitable COVID-19 Responses across Seattle Neighborhoods](#) | Communities Count

- Communities Count produced a COVID Vulnerable Communities Data tool that was shared through Public Health Department's dissemination channels. Stakeholders used the tool for resource allocation, program planning, advocacy, and policy planning.

[Powering Healthy Lives in Connecticut](#) | DataHaven

- DataHaven and Purple States TV, in partnership with local public health departments and community-based organizations in Hartford, New Haven, and the Naugatuck Valley, led a process to create multiple short-form documentary videos that integrate personal stories to bring implications of life expectancy data and other small-area health data to life.

[Helping people understand and use data on social determinants of health in San Antonio](#) | CI:Now

- CI:Now and its partners received an HHS grant to publish an online data portal on health outcomes with sub-county data on social determinants of health like income, education, and housing. The grant also supports outreach, training, and technical assistance to help people understand and use the data.

[Five NNIP partners participate in new CDC Foundation project on equitable use of data](#) | NNIP Activity

[Milwaukee Health Data Users Group \(HUG\)](#) | Data You Can Use

- A convening of people from neighborhood groups, the City of Milwaukee Health Department, Zilber School of Public Health, community health clinics, hospital systems, and other community organizations to explore different data about health outcomes and community conditions related to health.

[Close to Home: The Health of Philadelphia's Neighborhoods](#) | Urban Health Collaborative

- Co-branded report on spatial patterns of health outcomes and influencing factors

[NNIP Partners' Role in the Social Determinants of Health](#) | Urban Institute

[Transforming Public Health Data Systems: Public Health 3.0: A Call to Action for Public Health to Meet the Challenges of the 21st Century](#) | Robert Wood John Foundation