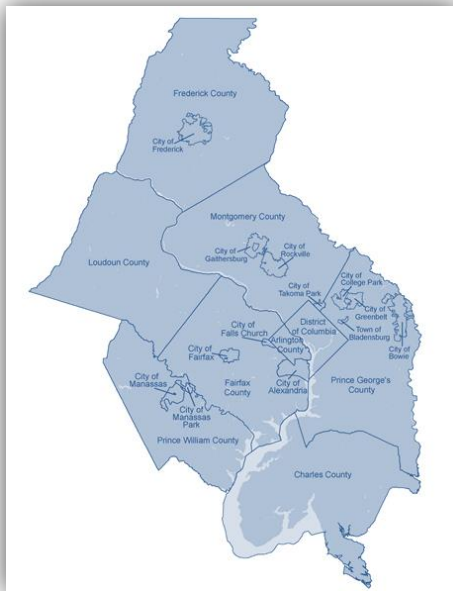# Health in All Policy

Region Forward Research Opportunity

I. Introduction

The Metropolitan Washington Council of Governments (COG) Health Officials Committee (HOC) has a research opportunity that will assist in developing a strategic approach for the implementation of Health in All Policy (HIAP) within the National Capital Region (NCR). This research will ultimately be used to identify successful strategies to influence policy change to impact health of the population at large, as well as within various population subgroups, to reduce disparities.

COG is an independent, nonprofit association that brings area leaders together to address major regional issues in the District of Columbia, suburban Maryland and Northern Virginia. The Health Officials Committee (HOC) is devoted to supporting the COG *Region Forward Vision* to advance the broader understanding of public health issues and helps meet the public health needs of member local governments and their residents within the following jurisdictions:

- District of Columbia

- Charles County, Maryland

- Frederick County, Maryland

- Montgomery County, Maryland

- Prince George's County, Maryland

- Alexandria City, Virginia

- Arlington County, Virginia

- Fairfax County, Virginia

- Loudoun County, Virginia

- Prince William County, Virginia

The Health Officials are looking to use a collaborative approach to improve population health by embedding health considerations into decision-making processes across a broad array of sectors. Health must be a consideration for all policies. In order to effectively change policy, health indicator data is essential to engage stakeholders, direct resources, and measure progress.

REGION FORWARD - HEALTH GOALS – UPDATED JANUARY 2015

Health Goal: *We seek communities in which every person enjoys health & well-being.*

Proposed Target: *Human health, including the health of subgroups, is increasingly considered as a component in the development and evaluation of all policies, plans, and projects.*

Health Indicators: *Number of jurisdictions adopting a model, example of, or framework to consider health in all policy-making decisions.*

II.   Problem Statement

The health of a population is impacted by the environment the community lives, works, and plays in. To address complex social determinants of health, it is import for Public Health to engage in a whole-of-government approach. This involves the partnership of non-traditional health partners (i.e., housing, transportation, education, air quality, parks, energy, etc.) to address health inequities and ultimately impact health outcomes. As state and local budgets are on a constant decline, it is more important than ever to leverage resources and enhance efficiencies with the collaboration of shared initiatives.

> *Health in All Policy (HIAP) is a collaborative approach to improving the health of all people by incorporating health considerations into decision-making across sectors and policy areas.*

Evidence is powerful. However, health outcomes can be difficult to evaluate and measure. There is a need to improve data collection, sharing, and analytics across disciplines to show the impact of Health in All Policy (HIAP) on health outcomes. Evidence based strategies are needed for overall accountability HIAP initiatives put forth by health and elected officials to effectively influence policy change and monitor the resulting health impact of the population.

This research will include an assessment of the following:
(1)   How have health indicators been used to successfully influence the HIAP approach?
(2)   How has the HIAP approach successfully impacted health indicators over time?

III.   Research Objectives

1.   **HEALTH IN ALL POLICY RESEARCH & COMPARATIVE ANALYSIS:**
     Perform a literature review of HIAP strategies used nationally and internationally over time.

     A.   **Health In All Policy Research** *(Perform literature review & research on the following)*
          ☐ HIAP Theory, Background, & Applicability
               i.   *What is HIAP?*
               ii.   *How does HIAP work?*
               iii. *What are the health indicators used to support HIAP policy change?*
               iv.   *What are the health indicators used to evaluate HIAP health impact?*
               v.   *What are the strengths/weaknesses of different HIAP approaches?*
          ☐ National Best Practices Including *(but not limited to)* the Following:
               i.   *Centers for Disease Control & Prevention*
               ii.   *California Department of Public Health*
               iii. *Minnesota Department of Health*
               iv.   *Chicago Department of Health*
          ☐ Approaches used in local and state HOC jurisdictions *(if applicable)*.

     B.   **Comparative Analysis** *(Compare approaches in 1.A. using the following considerations)*
          ☐ HIAP Approach: The HIAP approach each agency uses.
          ☐ Partners: The stakeholders/partners integrated within the HIAP approach.
          ☐ Health Indicator Data - Policy Change: The health indicators each agency used to influence policy change.
          ☐ Health Indicator Data - Health Impact: The health indicators each agency used to monitor health impact and/or program evaluation of policy change.
          ☐ Time & Effort: The estimated time and effort required to engage the HIAP approach effectively.
          ☐ Applicability: Ability for approach to be applied to different geographical / demographical jurisdictions.
          ☐ Strengths/Weaknesses: Overall strength and weakness of each approach utilized.

C. **Preferred HIAP Approach & Justification**
- ☐ Preferred HIAP Approach Strength/Opportunity
- ☐ Preferred HIAP Approach Barrier/Challenge
- ☐ Final Justification & Rationale for HOC Implementation

2. **APPLICATION OF APPROACH:**
   Apply the preferred HIAP approach determined in step 1 above for each local/state jurisdiction represented in the Health Officials Committee and the region as a whole.

   A. **Health in All Policy Strategic Plan**
   - ☐ Acquire information (i.e., health data, government structure) to support HIAP implementation.
   - ☐ Develop a strategic plan to implement HIAP for the Jurisdictions & HOC Region.

   B. **Health in All Policy Strategic Plan Analysis**
   - ☐ HIAP Approach: Description of the HIAP approach applied to each jurisdiction and the region and any information gaps.
   - ☐ Partners: List of stakeholders/partners to integrate within the HIAP approach.
   - ☐ Health Indicator Data - Policy Change: The recommended health indicators to influence policy change.
   - ☐ Health Indicator Data - Health Impact: The recommended health indicators each to monitor health impact and/or program evaluation of policy change.
   - ☐ Applicability: Ability to apply the approach to different geographical / demographical within the HOC member jurisdictions.
   - ☐ Time & Effort: The estimated time and effort required to engage the HIAP approach effectively, and the overall project timeline.
   - ☐ Barriers/Challenges: Any barriers/challenges for implementing a successful HIAP approach (i.e., working across three sovereign state entities).
   - ☐ Strengths/Opportunities: Proposed recommendations on how to eliminate barriers and challenges discussed above.

3. **REPORT FINDINGS:**
   Based on the HIAP research and the development of a strategic plan for implementation, develop a final report based on the findings, recommendations, and opportunities going forward.

   Research Paper
   A. **Health in All Policies & Comparative Analysis**
   - ☐ Theory & Best Practices
   - ☐ Comparative Analysis
   - ☐ Preferred HIAP Approach & Justification

   B. **Application of Health in All Policies**
   - ☐ Proposed HIAP strategic plan
   - ☐ HIAP strategic plan analysis

   C. **Conclusion**
   - ☐ Recommendations:
     - i. *What approach should be use to accurately & effectively measure the success of HIAP over time?*
     - ii. *How can health indicator data be used to effectively implement/evaluate the HIAP approach?*
     - iii. *How can HOC strengthen HIAP approach over time?*
   - ☐ Limitations: Provide the limitations to determining implanting the HIAP approach. List the potential confounding variables that would affect the accuracy of the health indicator data evaluation/monitoring of the approach.

☐ <u>Opportunities</u>: Provide opportunities for future HIAP research going forward.
  D. **Export Data Files**
    ☐ Provide health data that was found for the region. Be able to export complete datasets with the final report along with any associated charts, tables, and/or maps.

Final Presentation
  E. **Presentation Requirements**
    ☐ <u>Location</u>: Metropolitan Washington Council of Governments
    ☐ <u>Audience</u>: COG Health Officials Committee
    ☐ <u>Length</u>: 20 minute presentation, followed by 10 minutes for questions

IV.   Proposed Timeline

Timeline Negotiable

Dates	Description of Work
March - May 2015	Disseminate Research Proposal Request
June 30, 2015	Finalist will be identified
July 1 – July 31, 2015	COG Planning Meeting(s)
December 1, 2015	Final report due
December 14, 2015	Presentation to HOC

V.   Application Process

This opportunity is being extended to Schools of Public Health for their partnership with the Metropolitan Washington Council of Governments on important and impactful research.

Research Proposal Must Include the Following:
  ☐ **Research Background:** Experience with overseeing similar research projects
  ☐ **Student Engagement:** Description of which student group(s) being engaged
  ☐ **Proposed Implementation Plan:** Strategy for successful implementation
  ☐ **Timeline:** Proposed project timeline
  ☐ **Proposal Length:** Proposal may not exceed 3 pages of narrative

If you would like to apply, please submit a research proposal to Jennifer Schitter, Principal Health Planner at the Metropolitan Washington Council of Governments by **5:00PM EST on May 1, 2015**.

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