

INTERACT FOR HEALTH



2022 Partner Update

July 21, 2022

- Welcome! We are glad you are here.
- All participants are in listen-only mode.
- Slides will be shared after the webinar.
- We encourage frequent use of the chat box to participate and ask questions.
- Say hello now using the chat box to tell us your name and organization.



Agenda

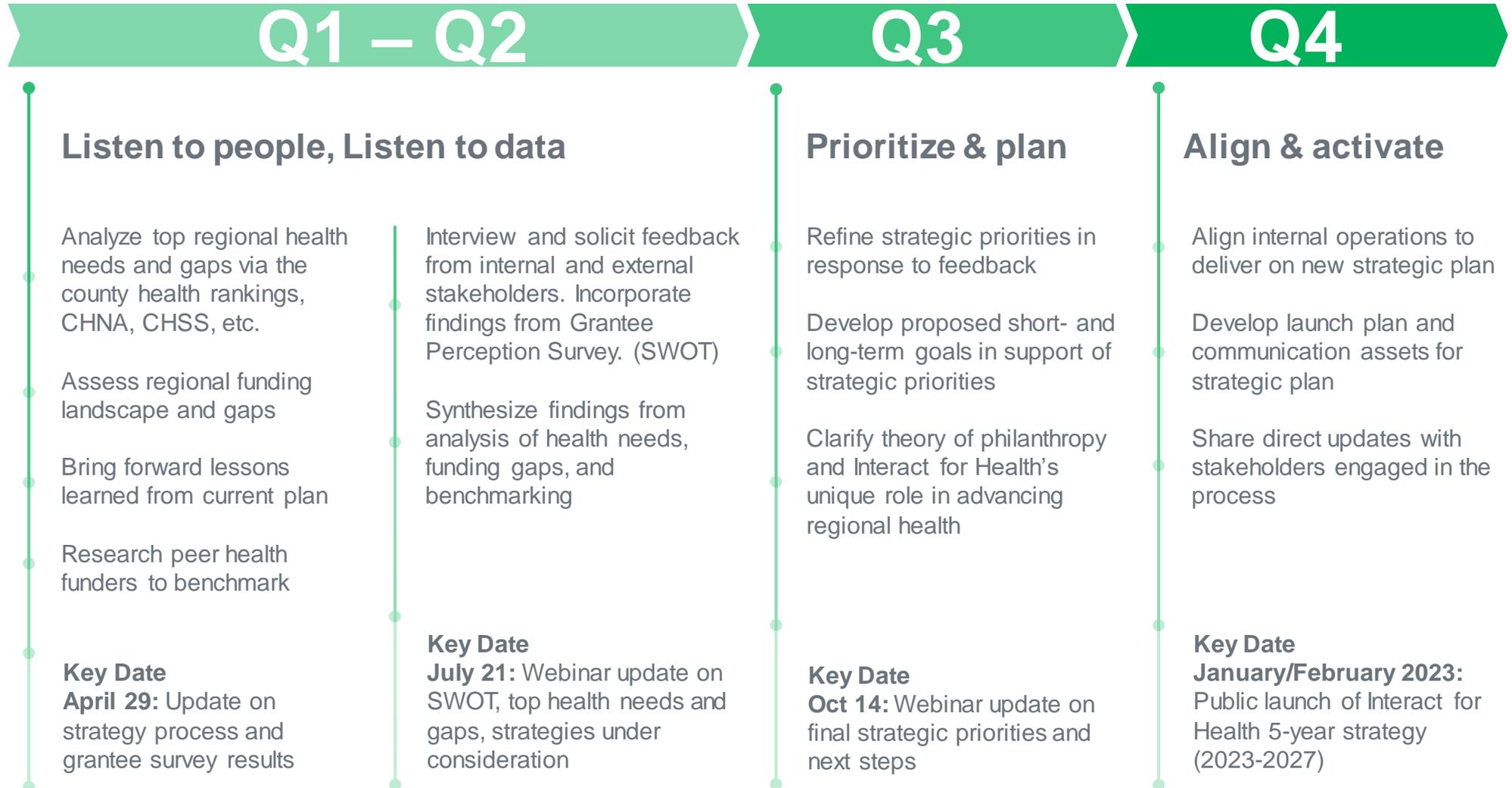
1. Strategic Planning Timeline, Process and Aim
2. What We've Learned
 - Listening to Data
 - Listening to People
3. Where We're Going
4. Discussion



STRATEGIC PLANNING TIMELINE, PROCESS AND AIM



2022 Strategic Planning Timeline



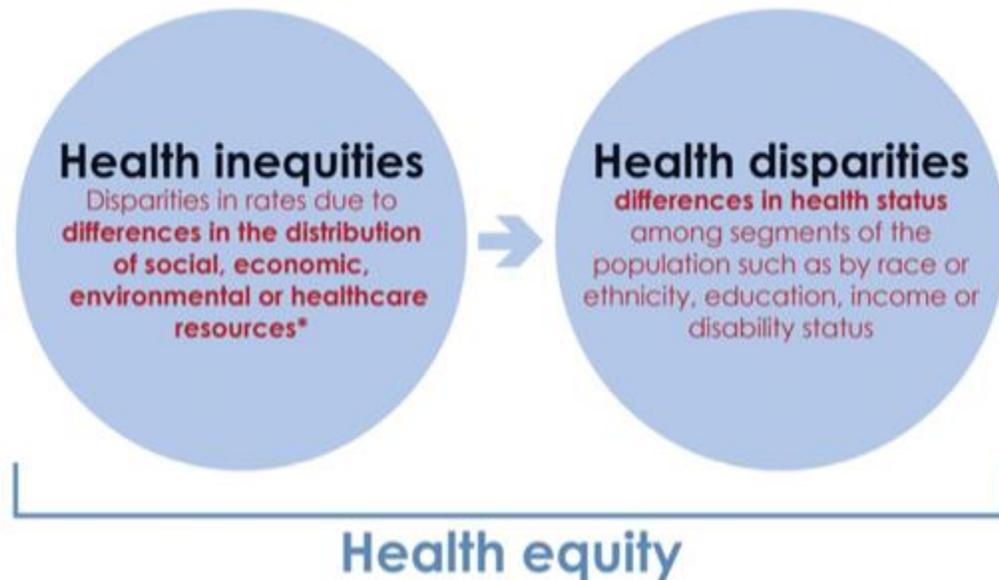


**INTERACT FOR HEALTH PROMOTES
HEALTH EQUITY TO IMPROVE THE
HEALTH OF ALL PEOPLE IN OUR REGION.**



How do we define health equity?

When every person has the opportunity to attain their **full health potential**, and no one is disadvantaged from achieving this potential because of social position or other socially determined circumstances.



*Working definition from the CDC Health Equity Working Group
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A photograph of three people sitting on a wooden bench outdoors. The image is overlaid with a semi-transparent green filter. The text 'WHAT WE'VE LEARNED BY LISTENING TO DATA' is centered over the image in a bold, white, sans-serif font with a thin black outline. The person on the left is a woman wearing a baseball cap and a dark jacket, looking towards the other two. The person in the middle is a woman wearing a hoodie, looking towards the man on the right. The person on the right is a man wearing a striped polo shirt, looking off to the side. The background consists of dense green foliage.

WHAT WE'VE LEARNED BY LISTENING TO DATA



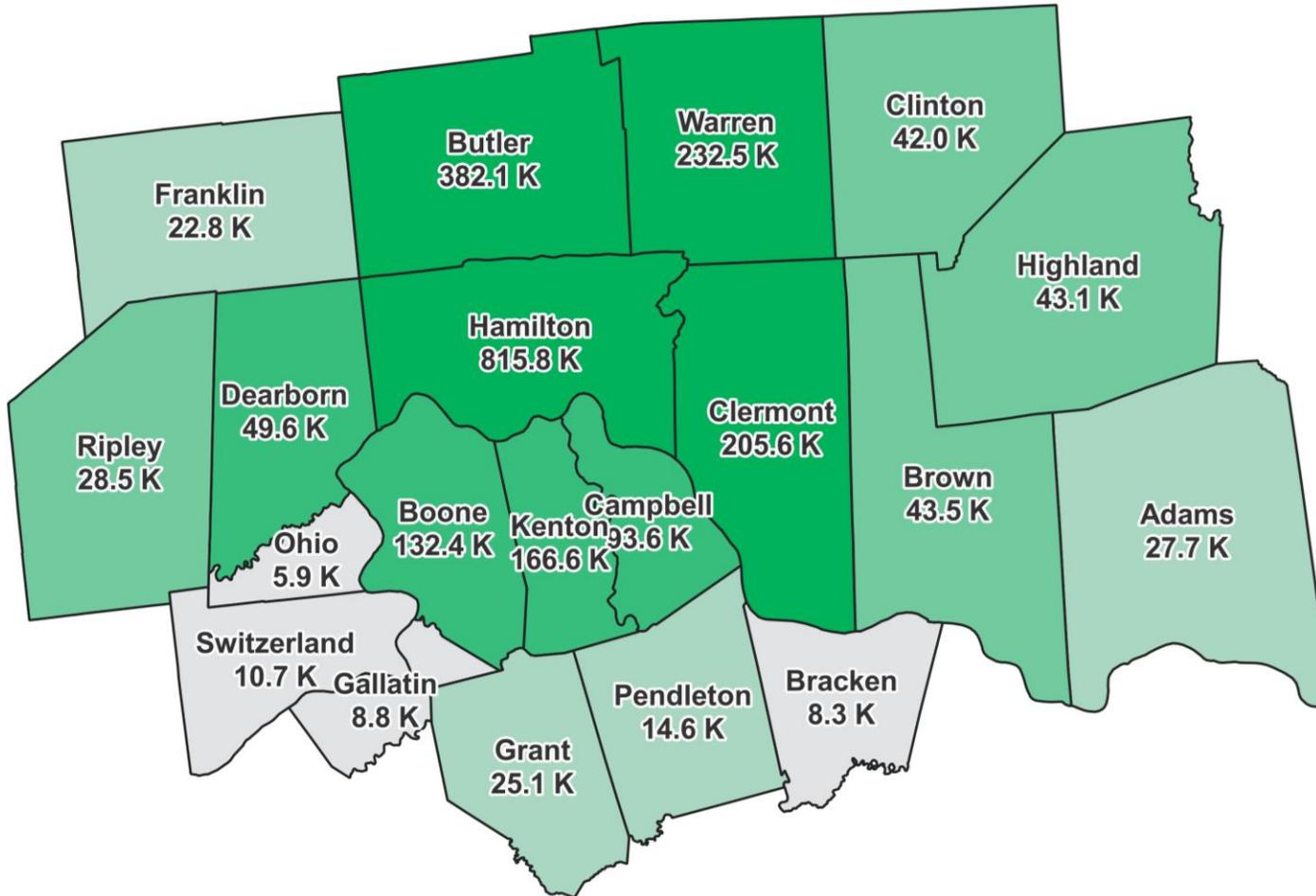
Overview of regional health data

- **Population demographics:** Who lives in the region?
- **Length of life:** How long do we live?
- **Quality of life:** How well do we live?



2.4M people live in our 20-county region

(Indiana: 5%; Kentucky: 19%; Ohio: 76%)



Over 500,000 children live in the region.

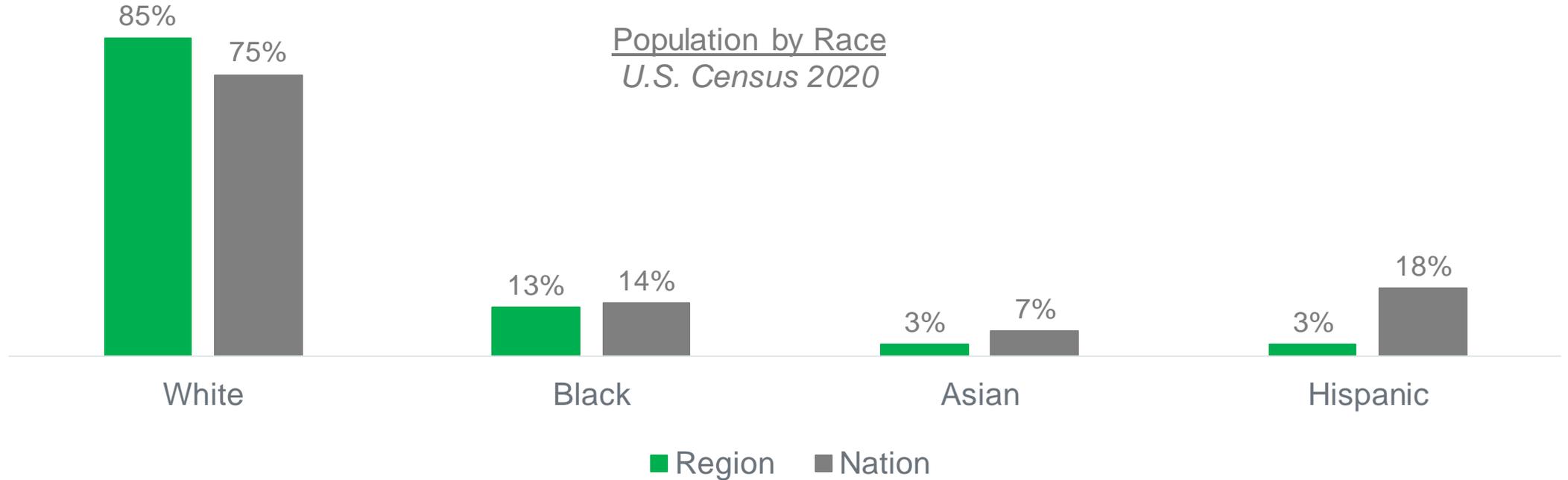
Total Population

Population

- 5,900 - 13,800
- 13,800 - 28,100
- 28,100 - 45,900
- 45,900 - 174,400
- 174,400 - 815,800



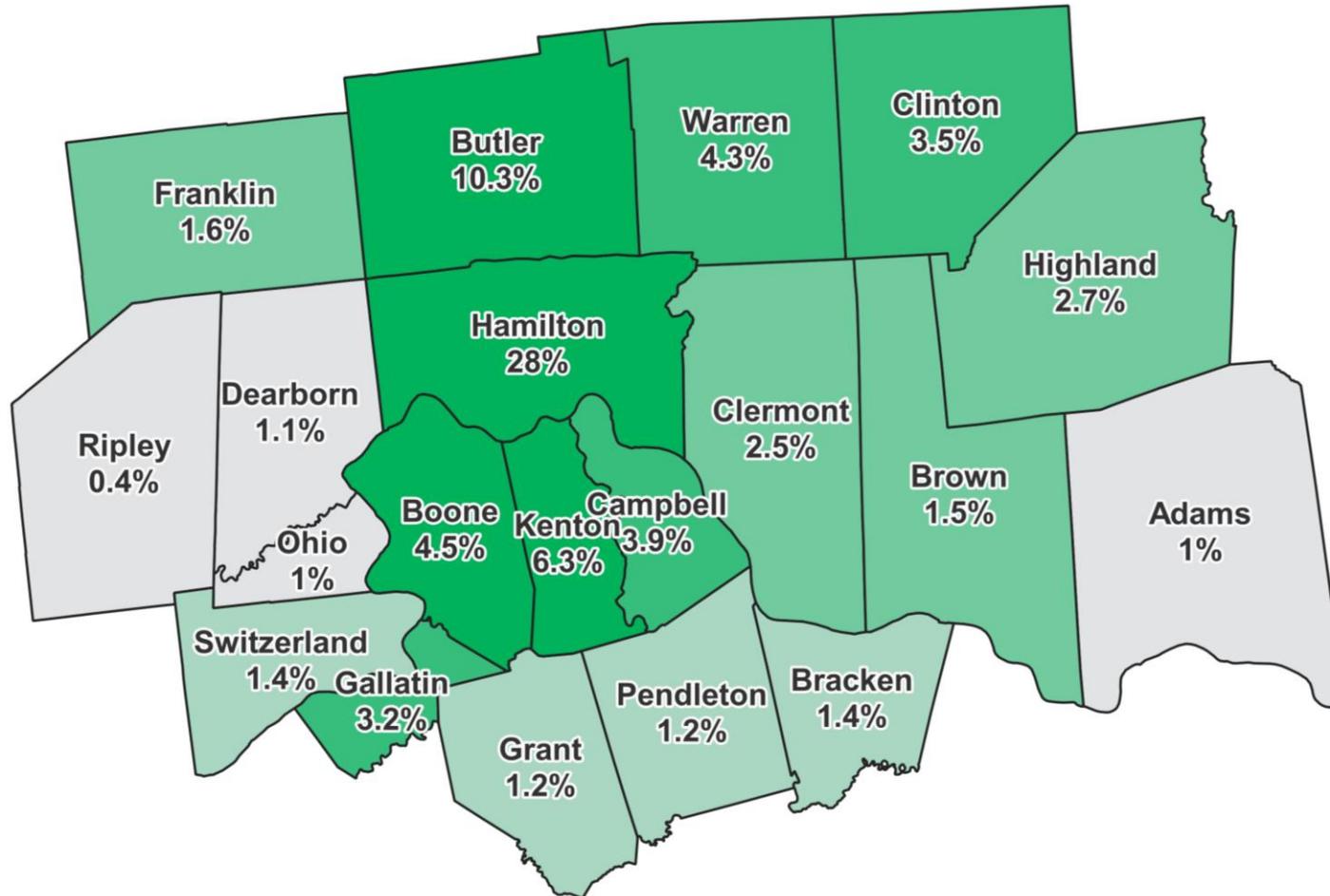
Region is more white, less diverse than nation



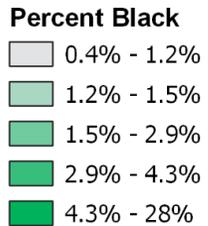
- Hispanic population is low overall – yet likely undercounted



Black population is highest in urban and suburban areas



Percent Total Population Black



Percentage of residents who are Black in region's largest cities:

- Cincinnati: 44%
- Middletown: 15%
- Hamilton: 13%
- Covington: 13%
- Newport: 12%
- Florence: 8%
- Lawrenceburg: 4%

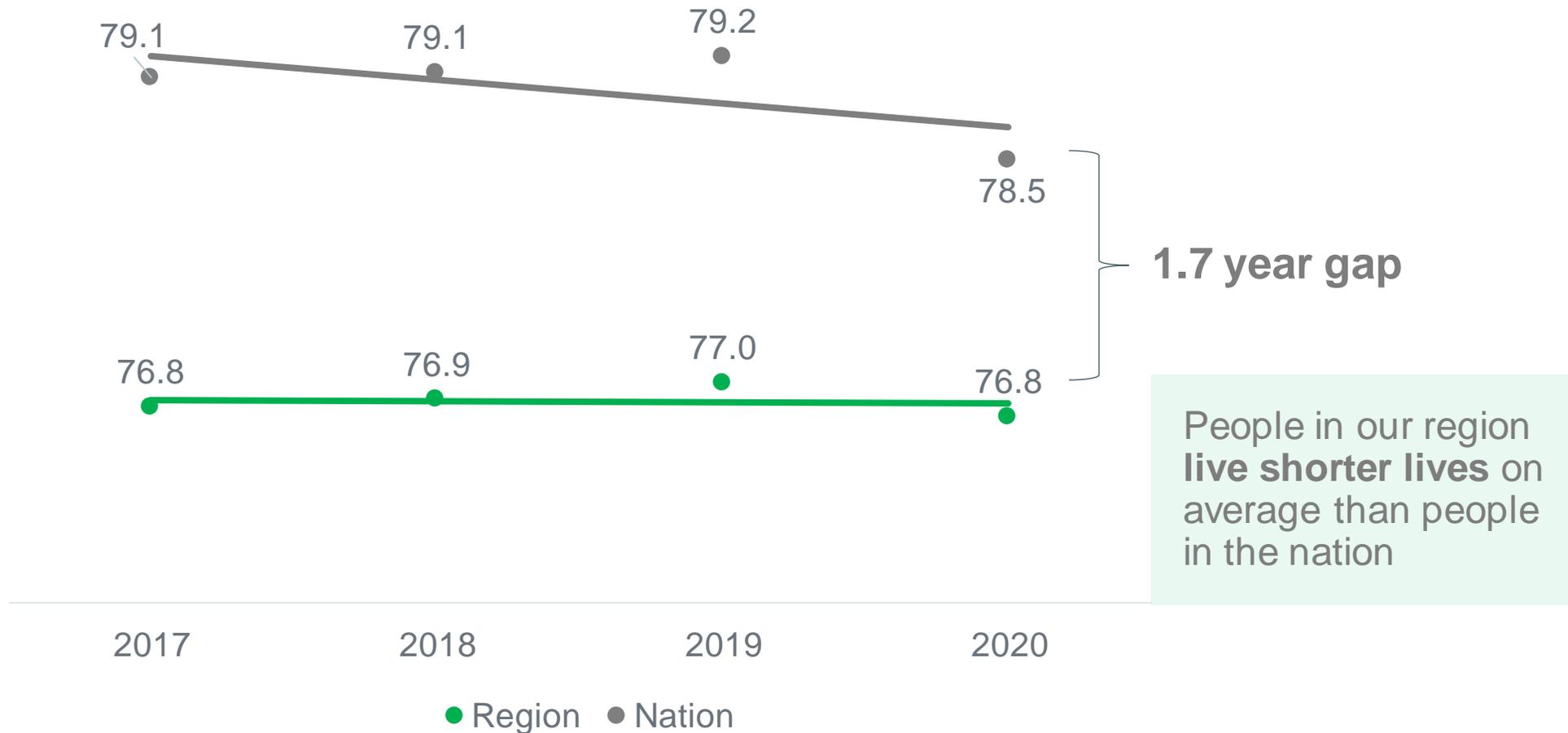


Overview of regional health data

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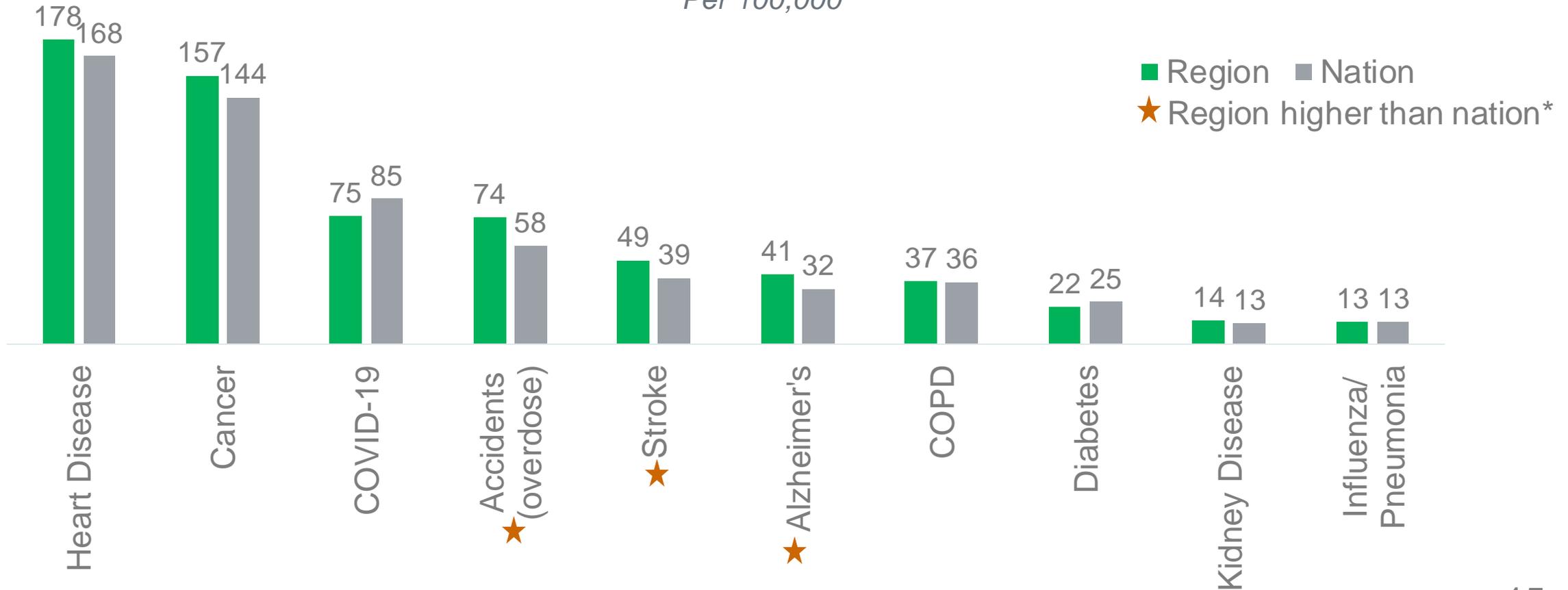
Regional life expectancy has been relatively flat – and below national average by ~2 years





Region has higher or similar death rates than nation for top causes of mortality

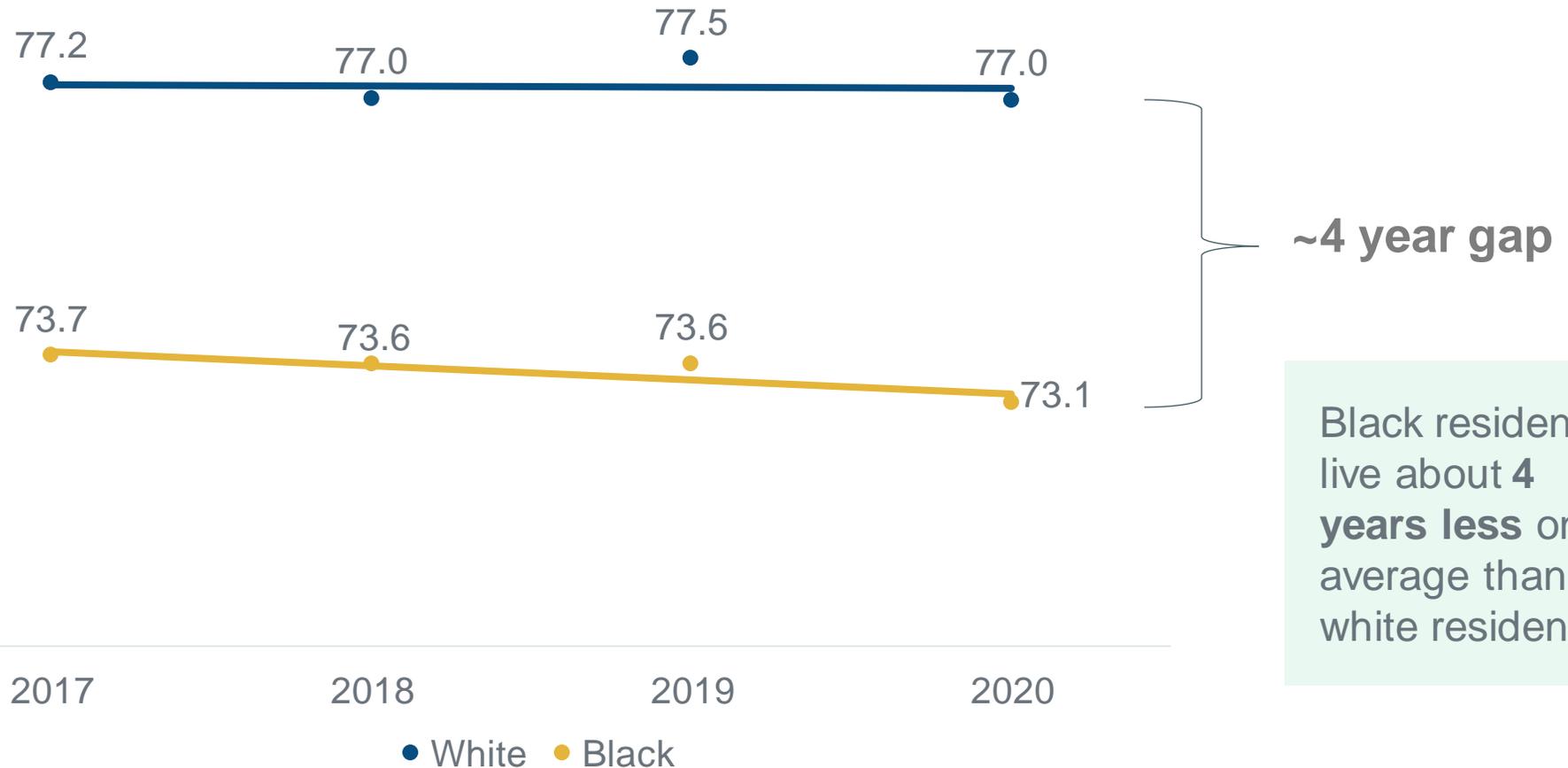
Top Causes of Mortality in 20-County Region (2020)
Per 100,000



CDC Wonder, 2020.
*Based on 95% Confidence Interval



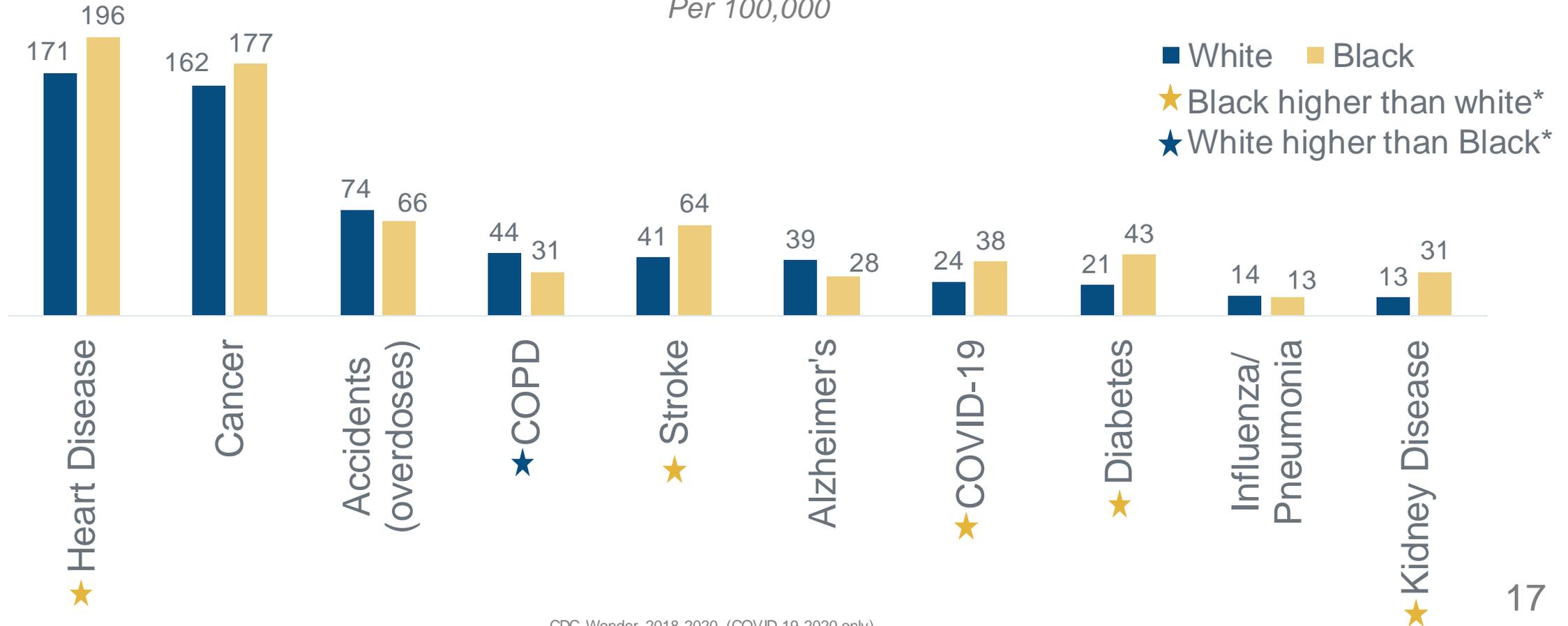
Black life expectancy is ~4 years below white life expectancy in region, and gap is widening





Black residents have higher death rates than white residents in 5 of top 10 causes of death

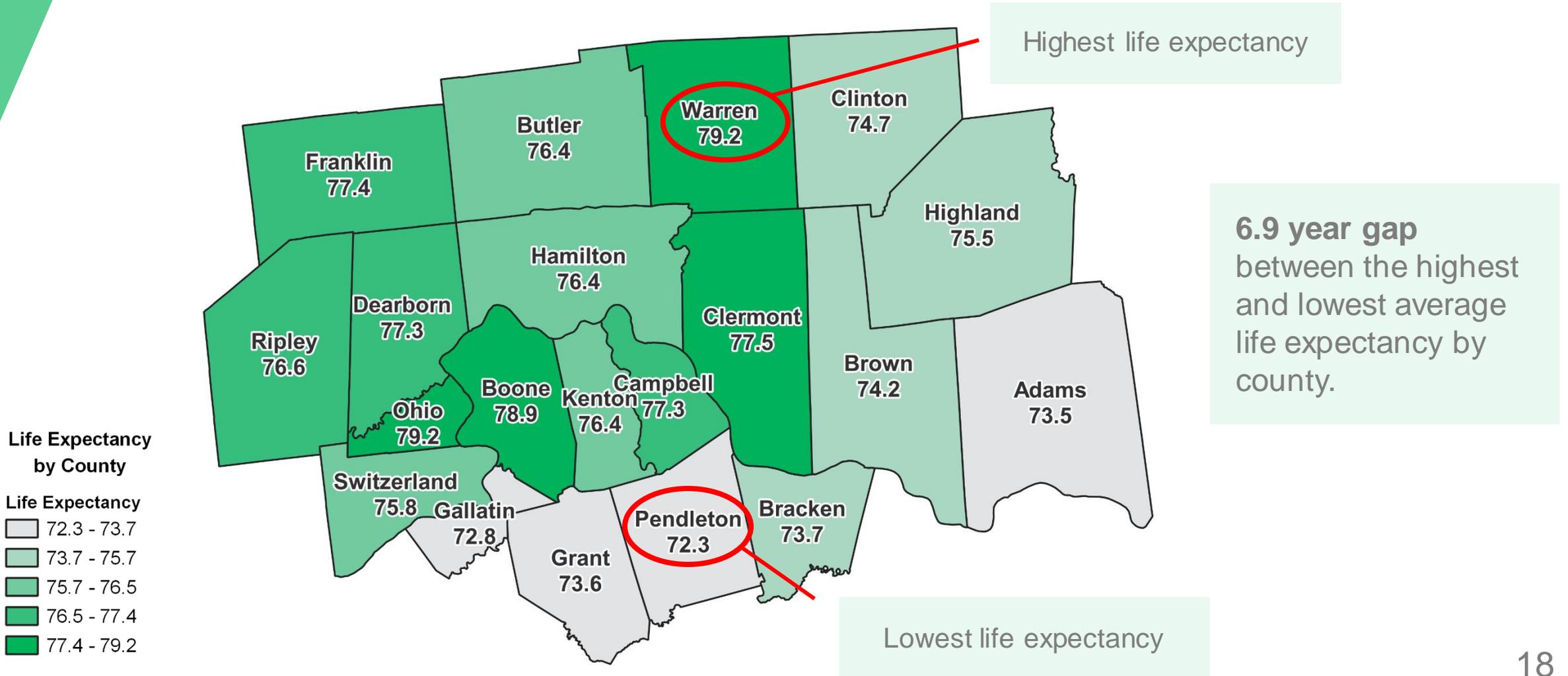
Top Causes of Mortality in 20-County Region (2018-2020)
Per 100,000



CDC Wonder. 2018-2020. (COVID-19 2020 only)
*Based on 95% Confidence Interval

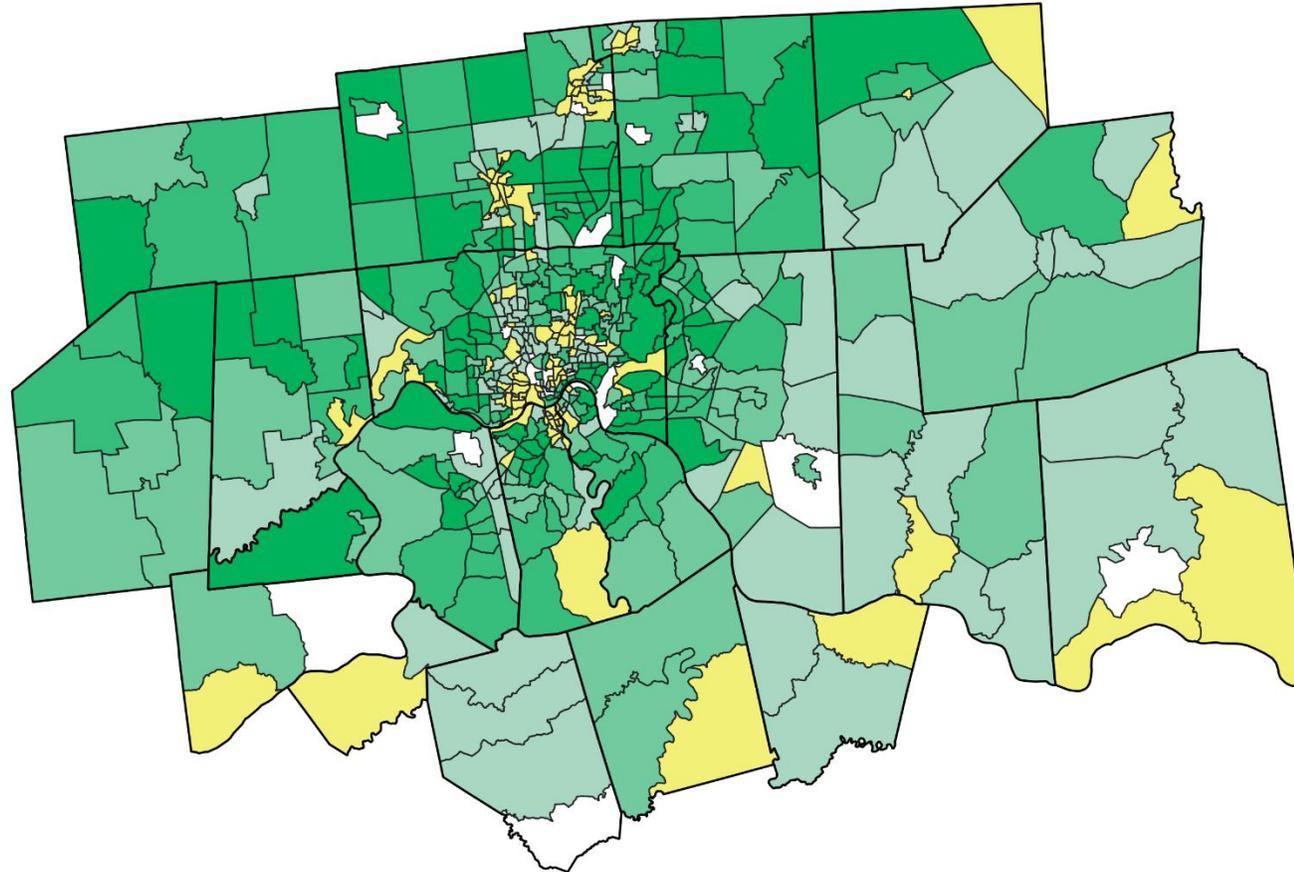


Across the region, life expectancy varies by ~7 years between counties



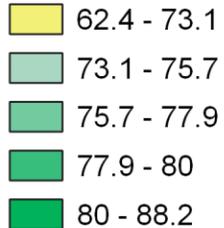


Life expectancy can vary by ~26 years between census tracts in the region



Life Expectancy by Census Tract

Life Expectancy



Census tracts with **shortest life expectancy:**

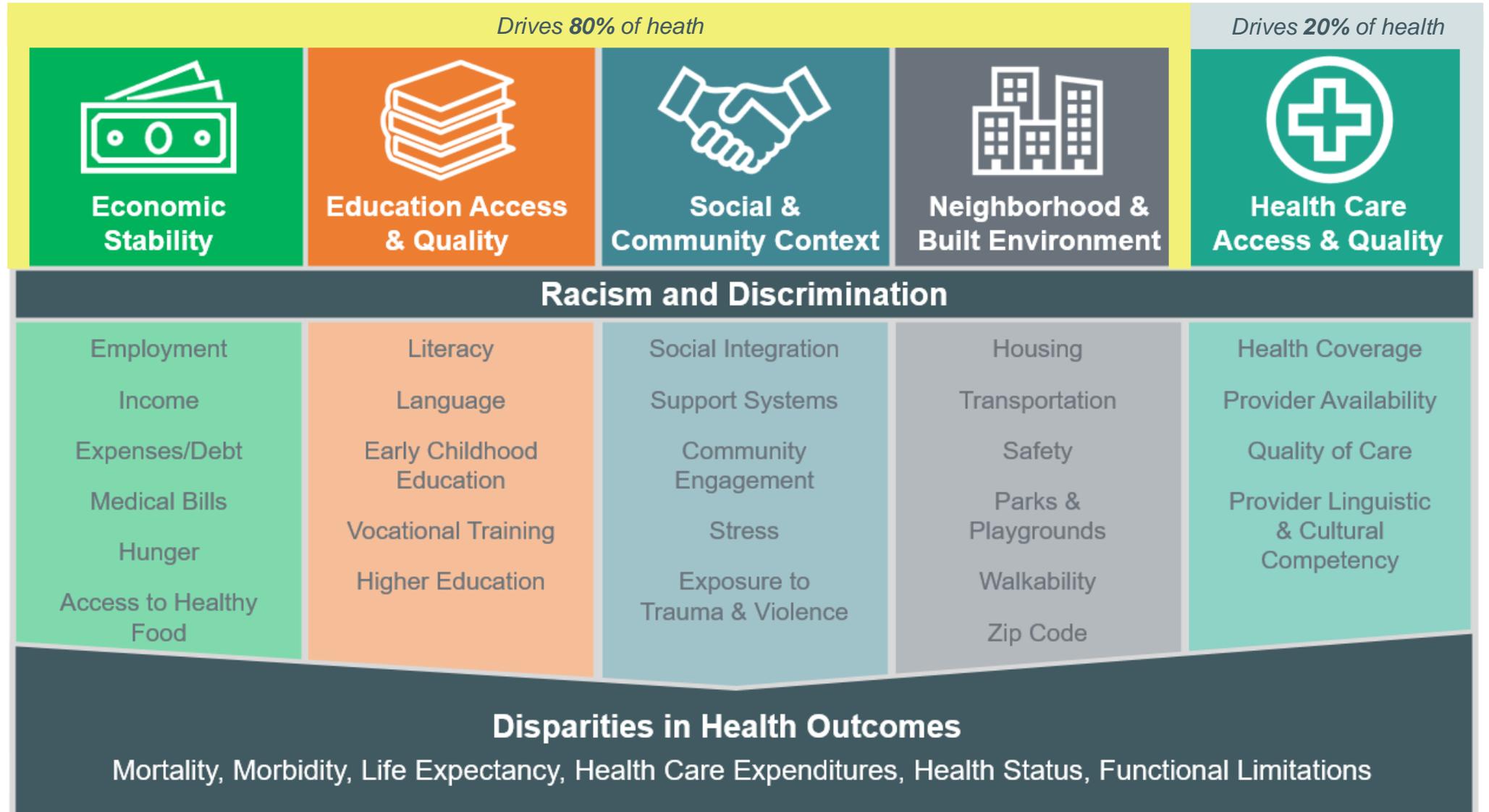
- West Newport (62.4)
- Walnut Hills (63.3)
- Covington (63.8)
- Corryville (63.8)
- West Price Hill (64.9)

Census tracts with **longest life expectancy:**

- West Chester (85.5)
- St. Leon (85.7)
- Blue Ash (86.5)
- Mt. Adams (86.7)
- Indian Hill (88.2)



Factors affecting health and well-being





Characteristics of census tracts with lowest and highest life expectancies in the region

Residents in census tracts with the lowest life expectancy are *more likely to ...*

- Be younger
- Be Black or Hispanic
- Have less income
- Rent their home
- Not have a vehicle

... than those with the highest life expectancy

Census tracts and life expectancy	Total population	Median age	Black	Hispanic or Latino	Median Household Income	Renter Occupied Units	No Vehicle Available
Highest life expectancy census tracts (79.3-88.2 years)	554,267 people	40.6 years old	7%	3%	\$93,735	22%	4%
Lowest life expectancy census tracts (62.4-73.3 years)	336,432 people	36.8 years old	32%	5%	\$38,724	56%	18%



Place and race matter to health in our region

~2 years less

Life expectancy in the **region** compared with the **nation**.

~4 years less

Life expectancy of **Black residents** compared with **white residents**.

~7 years less

Life expectancy of residents in the **county** with the lowest life expectancy compared with those who live in the county with the highest life expectancy.

~26 years less

Life expectancy of residents in the **census tracts** with the lowest life expectancy compared with residents of census tracts with the highest life expectancy.

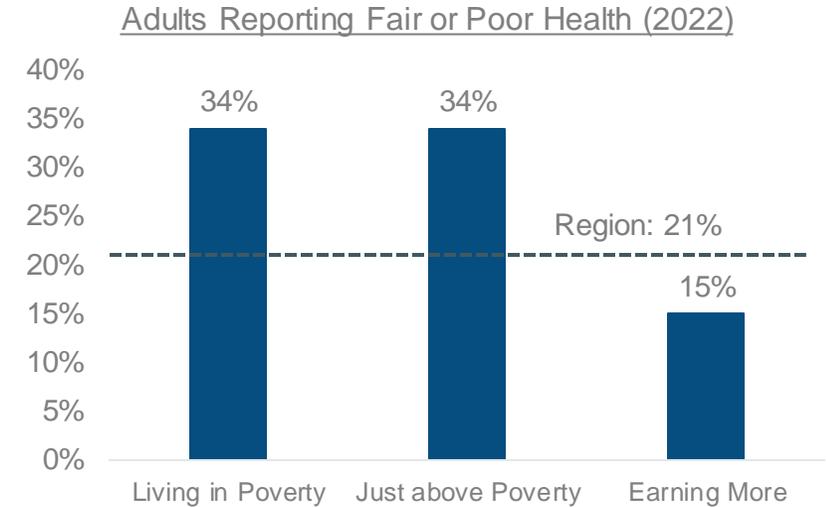
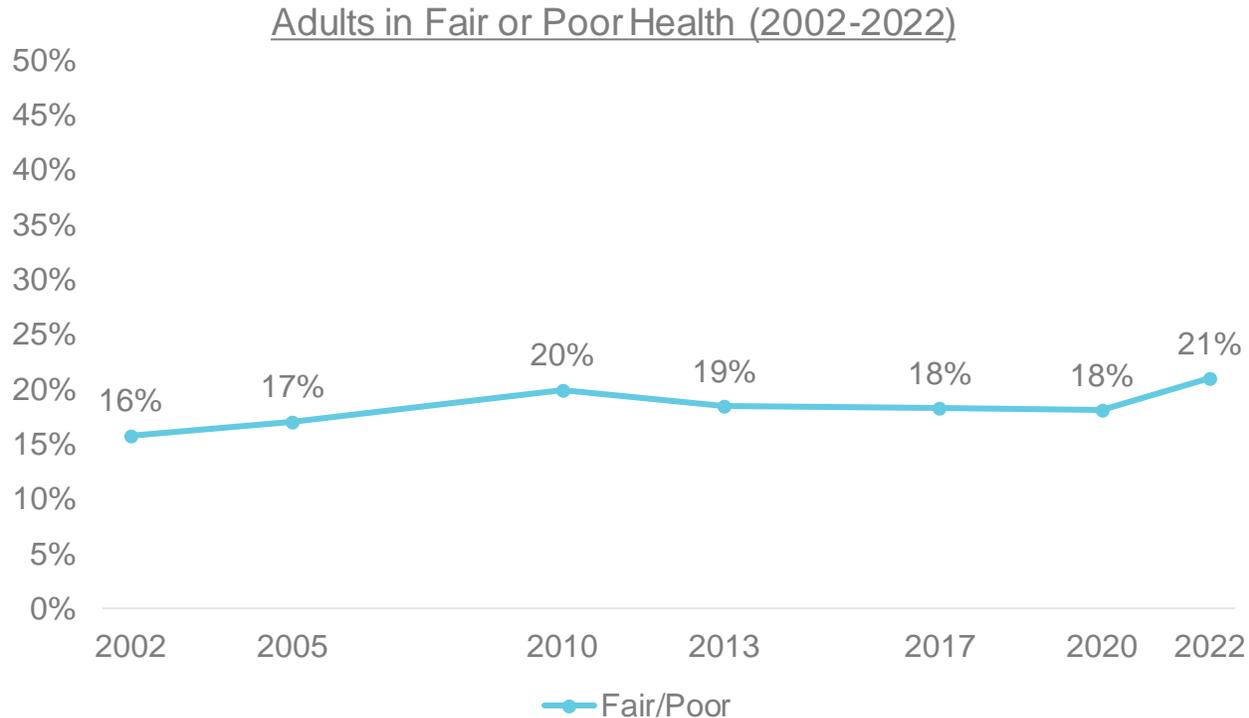


Overview of regional health data

- **Population demographics:** Who lives in the region?
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People in the region reporting poor or fair health has not improved in past 20 years



About 2x as many people living in or just above poverty say they are in fair or poor health compared to those earning more.

CHSS asked: "In general, would you say your health is excellent, very good, good, fair, or poor?"

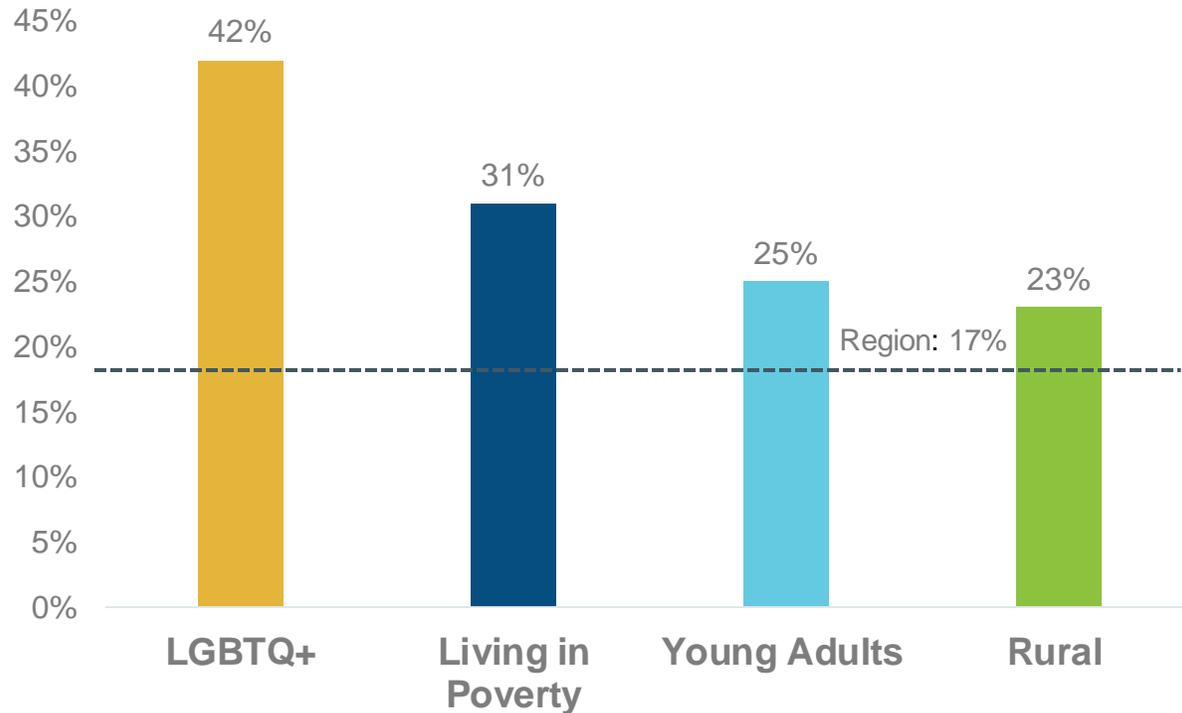
In 2021, a family of four living in poverty had a household income of \$26,500 or less. A family living just above poverty had a household income between \$26,501 and \$53,000. A family earning more had a household income greater than \$53,000.



Some people and places in the region report higher levels of frequent mental distress

Access to mental health services lacking, particularly in rural areas

Adults Reporting Frequent Mental Distress (2022)



Frequent mental distress is defined as 14 or more mentally unhealthy days in the past month.

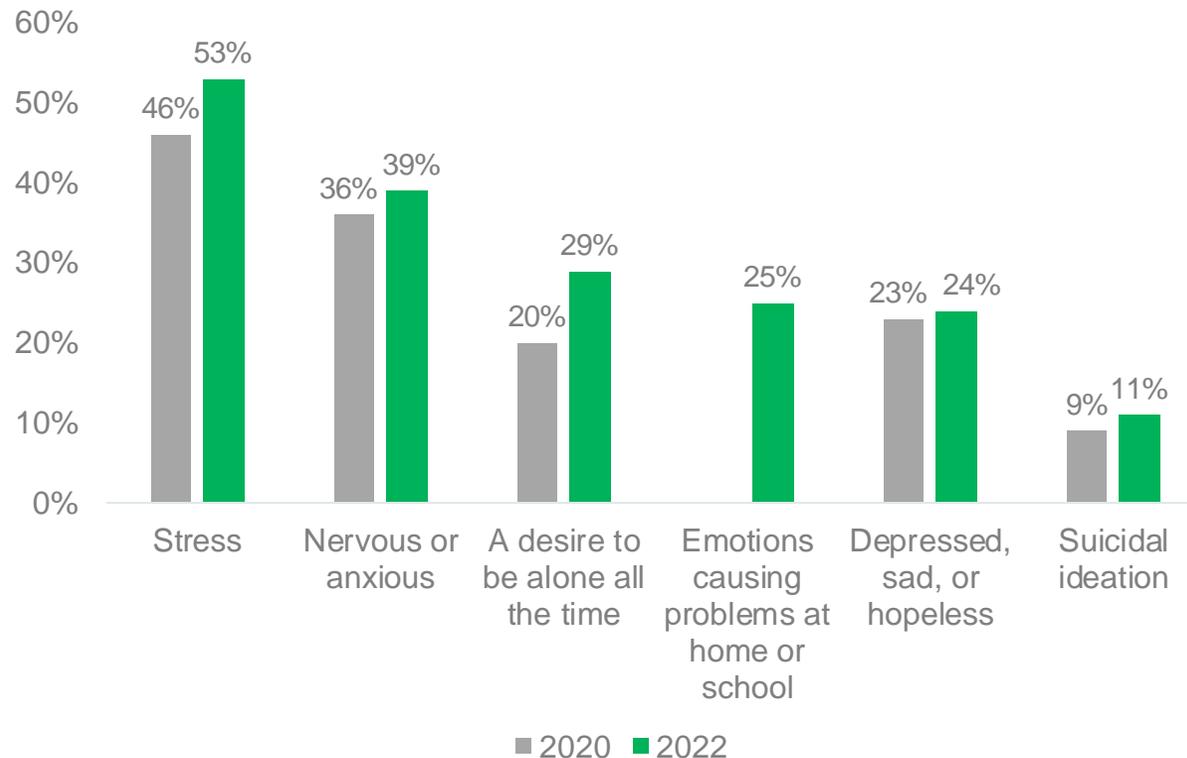
Access to Mental Health Services

Population to Mental Health Ratio	Nation	Region	Lowest Rated County
# of individuals served by one mental health provider	355:1	538:1	4,143:1 Bracken



Regionally, students are struggling with mental health

Students who report frequent mental health indicators (2022)



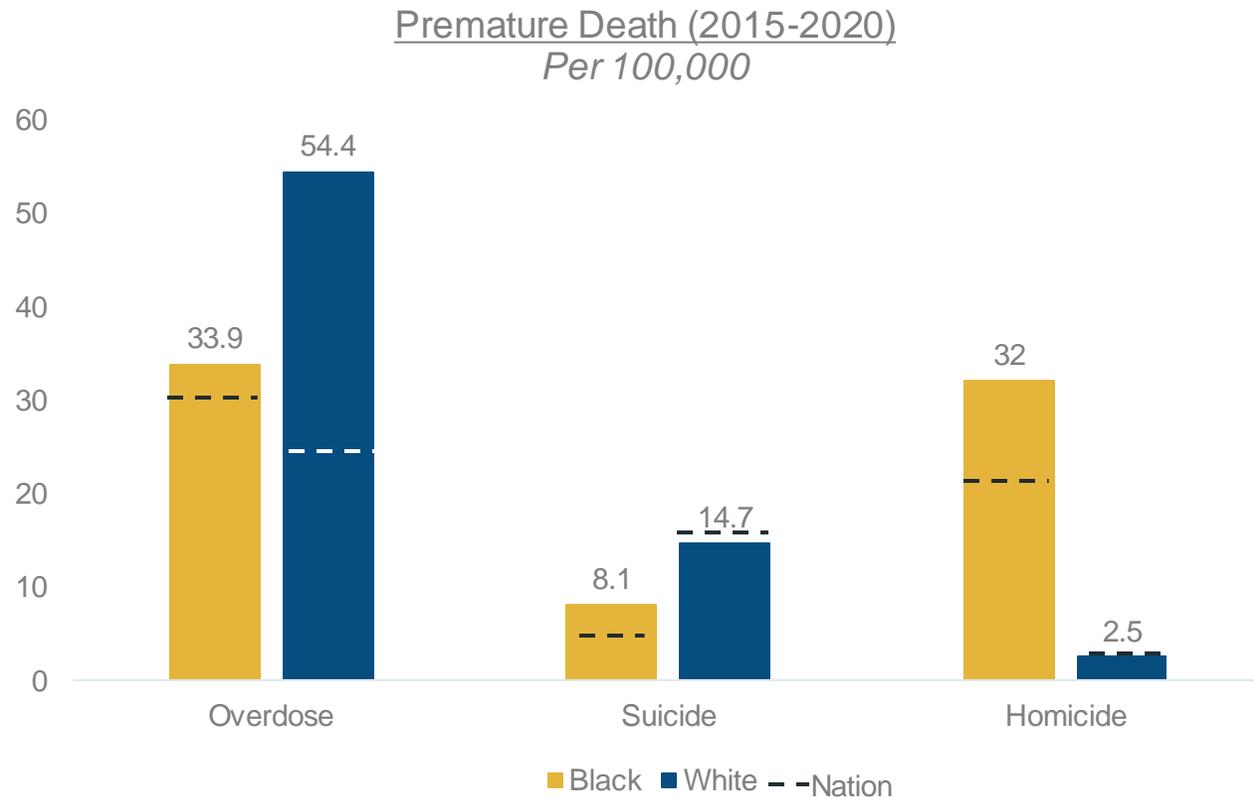
Declaration of National Emergency in Child and Adolescent Mental Health

“We are caring for young people with soaring rates of depression, anxiety, trauma, loneliness, and suicidality that will have lasting impacts on them, their families, and their communities...”

American Academy of Pediatrics, the American Academy of Child and Adolescent Psychiatry, and the Children’s Hospital Association (10/2021)



Overdose, suicide and homicide prematurely end many lives in the region – disparities exist



Challenges with mental health and substance use contribute in part to about one-third of premature deaths.

- The regional **overdose** rate is **2.4x higher** than the nation.
- **1.2x more** Black residents in the region die of **suicide** than Black residents nationwide.
- In the region, nearly **13x more** Black residents than white residents die by **homicide**.



Key takeaways from regional health data

- Our region lags the nation in how long we live.
- We have not improved how well people in the region live.
- Some people and places have been left behind, experiencing health disparities.
- Underlying root causes – and inequities – drive these disparities.



Listen to People

10K+

Community
respondents

Community Health Needs Assessment

2021 with Health Collaborative

- 26 counties across Greater Cincinnati
- 36 hospitals, 22 health departments
- 10,000+ survey respondents, focus groups, interviews, data, literature review

44

Grantees

Grantee Perception Survey

May-June 2021 with Center for Effective Philanthropy

- Competitive grants from the 2017-2022 strategic plan
- 57% response rate

258

Key
stakeholders

84 people interviewed

March-June 2022

174 people surveyed

April-May 2022

- 19% Black, 75% white
- 70% women, 20% men
- 20 county region plus statewide organizations
- 26% current grantees

1,578

Community
members

36 people in focus groups

Oct.-Nov. 2021 with Cohear

- 47% Black, 25% Latino, 25% white, 3% South Asian
- 72% women, 28% men
- 6 counties across 3 states

116 people in community conversations

April 2022-ongoing

- 54% Black, 46% white
- Urban, rural counties

1,426 people surveyed

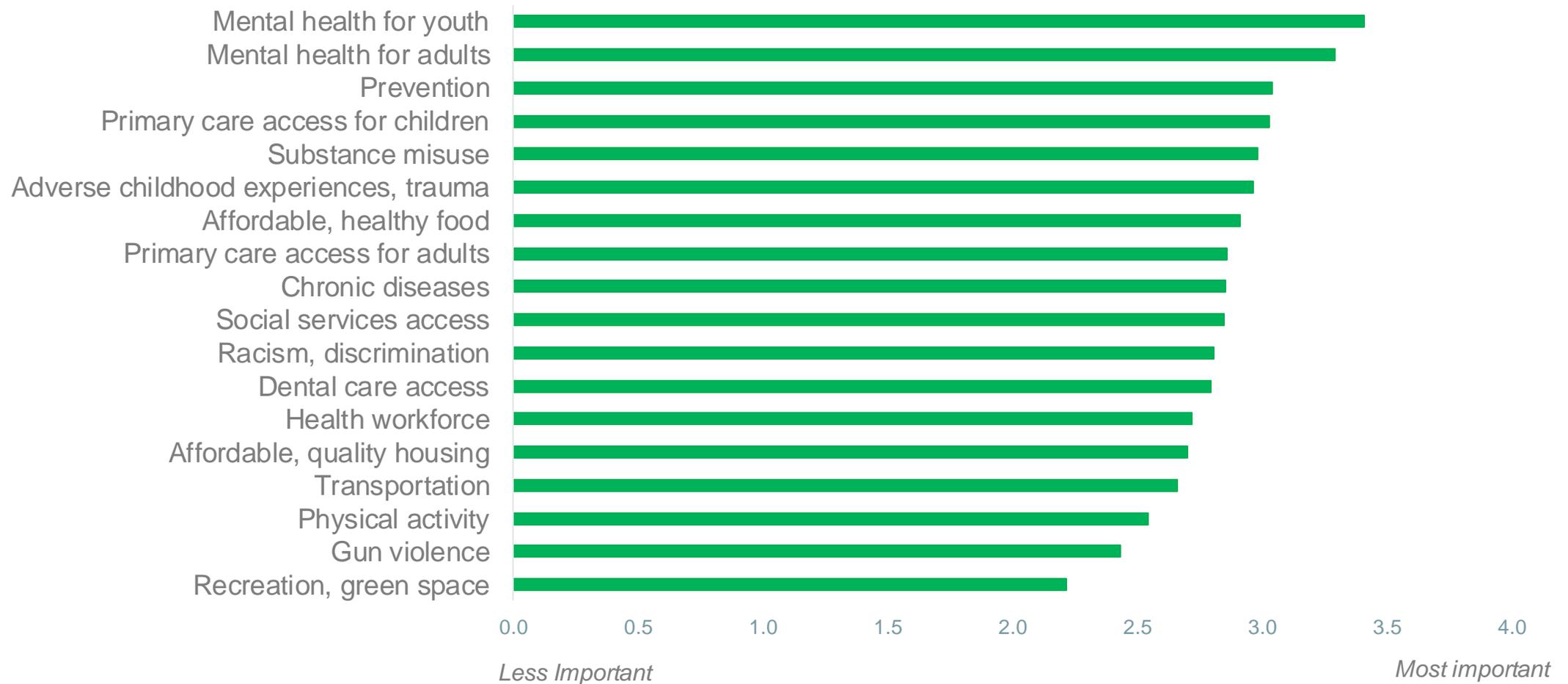
April-May 2022, Community

Health Status Survey with UC IPR



Top health needs: Key stakeholder survey

From your perspective, rate the importance of Interact for Health addressing the following health needs in our community. (n = 174)





Top health needs: Key stakeholder survey subgroup differences

Race

Rank	Black Respondents (n=34)	White Respondents (n=137)
1	Mental health for youth	Mental health for youth
2	Mental health for adults	Mental health adults
3	Racism, discrimination	Social services access

Black respondents were also more likely than white respondents to:

- Rank **chronic diseases** higher
- Give more weight to addressing **gun violence**

Geography

- Rural respondents (n=43) ranked **transportation** higher than Hamilton County (n=104) and suburban (n=60*) respondents
- Rural and suburban respondents ranked **substance misuse and dental care access** higher than Hamilton County



Similar top health needs identified across surveys, interviews

- Mental health of youth and adults
- Social determinants of health
 - Affordable housing, racism, transportation, etc.
- Health care: workforce diversity, coverage, cost, etc.
- Substance use
- Prevention
- COVID-19

SOURCES:

- Stakeholder survey
- Community Health Status Survey
- Community conversations/focus groups
- Community Health Needs Assessment



Top health needs: Key stakeholder interviews

“If **mental health** was the only thing Interact focused on over the next 5 years, it would be time well spent.”

“Until **Black and Brown people** do well, our city won't do well. No Band-Aids - we need **systemic solutions for root causes.**”

“Keep focus on **rural counties**. They have huge needs and very few (if any) other funding.”

“We should focus on **prevention for the youngest children and their families** to have the most impact.”

“**Workforce pipeline and diversity** a major challenge – need providers who look like the patients served.”

“**Addiction** – not substance specific.”



Top health needs: Community conversations and focus groups

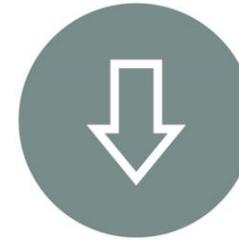
“My son is struggling with some health issues and because of this, I have started to have issues with **anxiety and depression**. I have gone several times to the clinic and asked for a psychiatrist but they **never have found someone to speak Spanish** with and can help me.”

“The first (priority) for me is **housing**, because once you have a place to lay your head and you are not worried about where you are going to sleep, a lot of things fall into place, 'cause that is what a lot of families worry about.”



STRENGTHS

- Independent regional convener
- Flexible, responsive funding
- Support beyond the check
- Policy, systems work
- Regional focus – includes rural



WEAKNESSES

- Focus areas too narrow
 - Short inflexible grants
 - Limited engagement in regional health efforts
 - Risk averse
 - Unclear strategy, goals



INTERACT
FOR HEALTH



OPPORTUNITIES

- Can build on COVID-19 and CHNA collaboration
- Momentum for affordable housing
- Increase in public health funding
- Opioid settlement money



THREATS

- COVID-19 worsened health inequities
- Workforce shortages in health, nonprofits
- Lack of diversity among health providers
- Eroding trust of public health





WHERE WE'RE GOING



Interact for Health's role

- **Neutral regional convener on health and health equity** to align partners and to facilitate collective problem solving – particularly for upstream prevention efforts that are bigger than any one organization can address.
- **Trusted, proactive, non-partisan policy voice** for health in the region and at the state level.
- **Go-to resource for data on health and health equity** – tracking regional progress consistently over time
- **Flexible, catalytic funder** that addresses priority regional health issues at scale, fills critical gaps and takes risks to advance evidence.



Priority Populations

- Communities of color, particularly Black and Hispanic residents
- Rural communities
- Children/youth in families with low incomes



Emerging Strategic Themes



Advancing Health Equity Leadership

- Leadership and Engagement
- Data
- Policy and Communications



Improving Mental Health and Well-Being

- Resilient and thriving children and youth
- Recovering and flourishing adults

Approach: Community-led efforts to reduce disparities and address underlying inequities

DISCUSSION





Next Steps



- Please complete the webinar evaluation.
- Save the date for our next update:
Friday, Oct. 14, at 10:30 a.m.



Data Definitions

Measure	Definition	Year(s)	Source	Slide(s)	Notes
Population	Number of people living in the Interact for Health 20-county service region .	2020	American Community Survey, ACS Demographic and Housing Estimates: https://tinyurl.com/jfk8x6eb	10	
Race	Number of people living in the Interact for Health 20-county service region reporting their race alone or in combination with other races.	2020	American Community Survey, ACS Demographic and Housing Estimates: https://tinyurl.com/jfk8x6eb	11,12	
Life Expectancy	The average number of years of life a person can expect to live from birth.	County: 2015-2020 Census Tract: 2010-2015	County: County Health Rankings: https://tinyurl.com/ydurjfp8 Census Tract: USALEEP: https://tinyurl.com/5av89cf6	14, 16, 18-19, 21, 24	Regional estimates are the weighted average of each county for which data is available.
Cause of Death	The underlying cause of death based on death certificates for all residents of the Interact for Health 20-county service region .	2020	CDC Wonder: https://tinyurl.com/2p9tnss2	15, 17	Regional estimates are the weighted average of age-adjusted death rate per 100,000 in each county for which data is available.
Poor/Fair Health	Percentage of adults in the Interact for Health 22-county survey region who report their own health is fair or poor.	2002-2022	Interact for Health, CommunityHealth Status Survey: https://tinyurl.com/2d7vsamz	26	
Frequent Mental Distress	Percentage of adults in the Interact for Health 22-county survey region who report their mental health was not good on at least 14 of the last 30 days.	2022	Interact for Health, CommunityHealth Status Survey: https://tinyurl.com/2d7vsamz	27	
Student Mental Health	The combined percentage of regional students who report they experience <i>stress</i> or <i>suicidal ideation</i> often or a lot; are <i>nervous</i> or <i>anxious</i> , have a <i>desire to be alone all the time</i> , or are <i>depressed</i> , <i>sad</i> , and <i>hopeless</i> all the time or most of the time; and report they have experienced <i>emotions causing problems at home or at school</i> .	2020, 2022	PreventionFirst! Student Survey: https://tinyurl.com/yc36ne8f	28	
Premature Death	The underlying cause of death based on death certificates for all residents under the age of 75 in the Interact for Health 20-county service region	2015-2020	CDC Wonder: https://tinyurl.com/2p9tnss2	29	Regional estimates are the weighted average of age-adjusted death rate per 100,000 for those under the age of 75 in each county for which data is available.