

## **Tarrant County Public Health Partners with Community to Improve Health and Quality of Life**

**June 2013**

### ***Background***

What are health departments doing to create healthy environments for the most people? The economic burden of preventable chronic diseases in the U.S. exceeds \$1 trillion annually.<sup>1</sup> Traditionally, health care services have been the go-to side of the equation when it comes to our health, with less emphasis placed on prevention.

Only 8 percent of U.S. health care dollars are spent on disease prevention.<sup>2</sup> Health care services alone cannot resolve the chronic disease problem or financial burden because, by design, health care treats people once they are in need, one at a time. To have a more meaningful impact on health in the U.S., we must place more emphasis on prevention.

Because behavior is closely linked to health, it makes sense to evaluate the drivers of behavior. For example, a reduction in both obesity and tobacco use could yield 24 million fewer cases of illness over the next 20 years.<sup>3</sup> Health disparities and social determinants of health are closely tied to behavior, and behavior is greatly impacted by environment—where we work and play. Among Tarrant County residents, 34.5 percent of non-Hispanic blacks were classified as obese and 21.4 percent as current smokers. Non-Hispanic blacks also had a significantly higher prevalence of high blood pressure (36.8 percent) compared with Hispanics (20.3 percent) and others (18.5 percent), a condition associated with unhealthy weight and tobacco use (*Table 1*). If one believes environment helps to shape behavior, it makes sense for the community to address these issues collectively.

The case has been made for healthy behaviors leading to improved health. Healthy communities are those with the elements to enable healthy behavior that can lead to improved health for residents. “It is unreasonable to expect that people will change their behavior easily when so many forces in the social, cultural and physical environment conspire against such change.”<sup>4</sup>

**Table 1. Prevalence of High Blood Pressure and Associated Risk Factors by Race/Ethnicity, Tarrant County<sup>i</sup>**

Race/ethnicity	High blood pressure <sup>ii</sup>		Obesity <sup>iii</sup>		Current smoker	
	Weighted percentage <sup>iv</sup>	95% confidence interval <sup>v</sup>	Weighted percentage	95% confidence interval	Weighted percentage	95% confidence interval
Hispanic	20.3	16.0–25.5	31.7	25.5–38.6	14.1	9.6–20.3
Non-Hispanic black	36.8	29.3–45.0	34.5	27.4–42.4	21.4	15.7–28.5
Non-Hispanic white	28.5	26.0–31.2	27.1	24.5–29.8	19.7	17.1–22.6
Other	18.5	11.8–27.8	16.6	8.9–28.7	12.0	5.5–24.2
Tarrant County	27.4	25.3–29.6	28.2	25.9–30.5	18.5	16.4–20.8

<sup>i</sup> Data were collected from October 2009 through February 2010.

<sup>ii</sup> Diagnosed by a health professional.

<sup>iii</sup> Body Mass Index  $\geq$  30.0.

<sup>iv</sup> Estimates weighted to population characteristics.

<sup>v</sup> The confidence interval reflects the range of values within which the true population prevalence rate is expected to occur with 95 percent probability.

SOURCE: Tarrant County Public Health.

### **Tarrant County Health Improvement Plan**

Tarrant County Public Health (TCPH) is taking steps to improve the health of the community by implementing the Mobilizing for Action Through Planning and Partnerships (MAPP) program with community partners. The goal of this 18- to 24-month program is to create an environment that is conducive to reducing health disparities and developing greater health opportunities for all.

Tarrant County is an urban county in north central Texas with a population of about 1.8 million, and Fort Worth serves as the county seat. Since the TCPH's inception in the 1950s, it has been a valuable local resource to county residents, providing services aimed at promoting, achieving and maintaining a healthy standard of living. TCPH has a client base and scope of services as diverse as the county's population, a staff of more than 350 public health professionals and annual funding resources totaling approximately \$36 million.

In September 2011, TCPH began planning for the implementation of the MAPP process. The desired result is a Community Health Improvement Plan (CHIP).

### ***What is MAPP?***

MAPP is a tool that helps communities improve health and quality of life through communitywide strategic planning. Using MAPP, communities identify and use their resources wisely, taking into account unique circumstances and needs and forming effective partnerships for strategic action.

The MAPP approach was developed by the National Association of County and City Health Officials in cooperation with the U.S. Centers for Disease Control and Prevention (CDC) Public Health Practice Program Office. A work group of local health officials, CDC representatives, community representatives and academicians developed MAPP between 1997 and 2000.

MAPP follows six phases: organize for success/partner development, visioning, assessments, identify strategic issues, formulate goals and strategies and the action cycle.

### ***Where has Tarrant County MAPP Been?***

On Feb. 8, 2012, TCPH kicked off the community-driven process to make the county healthier by prioritizing public health issues and identifying resources to address them. “The MAPP approach has successfully been used nationally to help communities map a better future for their residents,” said Lou Brewer, TCPH director.

At the kick-off meeting, business, community and neighborhood leaders, academicians and health officials learned how the MAPP approach could be used in Tarrant County to accomplish shared health goals. Dr. Eduardo J. Sanchez, who was the chief medical officer and vice president of Blue Cross and Blue Shield of Texas and is the current chair of the National Commission on Prevention Priorities, served as keynote speaker.

According to Sanchez, “... it’s not just about doctors writing prescriptions—it’s about creating an environment where being healthy is easier than not being healthy.” He said that includes eliminating so-called food deserts—areas without a grocery store but plenty of fast-food and convenience stores—and he called on employers to pay more attention to strategies that can create healthier workers because healthier workers are more productive.

Larry Tubb, senior vice president at Cook Children’s Medical Center, also a guest speaker, noted that major health concerns facing Tarrant County, such as diabetes and heart disease, haven’t changed in years. “That tells me no one organization has the resources or talent to make a difference,” he said. “So we have to do it in collaboration to move the needle forward.”

In a follow-up training meeting in March 2012, guest speaker John McKnight, author and professor emeritus of education and social policy at Northwestern University, shared his perspective on social services delivery systems, health policy, community organizations and neighborhood policy. McKnight is codirector of the Asset-Based Community Development Institute in Illinois and oversees research projects focused on asset-based neighborhood development and methods of community building.

During Phase One, Organizing for Success, 30 community partners agreed to join the MAPP Steering Committee. The committee has since grown to more than 65 community partners. These partners represent sectors that include business, law enforcement, public health, hospitals, community development, media, community health centers, faith-based, education, mental health and neighborhood coalitions.<sup>5</sup>

Phase Two began June 18, 2012, when the Visioning Subcommittee conducted a two-week survey throughout Tarrant County. The survey included several questions asking Tarrant County citizens how they felt about their community and what they would like to see in the future. The subcommittee held nine focus groups within the four-county precinct area and received 371 responses from the online survey. One of the questions was: “When you think of a healthy Tarrant County for those who live, work and play here, what five things do you think are most important?” The following were the top five responses:

1. Clean and safe physical environments and neighborhoods
2. Access to affordable health services, including dental, public health and prevention programs
3. Economic and social development
4. Affordable, accessible, nutritious foods
5. Access to affordable, safe physical activities.

The subcommittee planned a day to share the survey results with and gather input from MAPP Steering Committee members. On July 18, the MAPP Steering Committee participated in a casual working session to emphasize how individuals come together with different ideas and experiences but can work together to reach a common goal. Steering Committee members developed the following vision statement: “Empowered people living healthy in a vibrant and safe community.” They also agreed on a new name for this countywide effort: Tarrant County Voices for Health.

Tarrant County Voices for Health has now completed Phase Three, the assessment phase. On July 20, 2012, over 50 partners participated in an all-day retreat to complete the Local Public Health System

Assessment (LPHSA). The LPHSA measures the capacity and performance of the local public health system to conduct essential public health services. Three other assessments—Forces of Change, Community Themes and Strengths, and the Community Health Status—have been completed as well. The Forces of Change Assessment helps identify forces that will affect the community or the local public health system. The Community Themes and Strengths Assessment helps identify themes that interest and engage the community, perceptions about quality of life and community assets. The Community Health Status Assessment analyzes data about health status, quality of life and risk factors. Reports from the four assessments will be used by the committee to identify strategic issues that will be addressed.

### ***Where Is Tarrant County MAPP Going?***

The information gathered by the assessments will help identify strengths and weaknesses and will guide the committee in choosing which issues to focus on. Next they will decide how they will address these issues.

Tarrant County Public Health hopes to complete the process by September 2013 and thereafter will implement their plan. The activities of Tarrant County Voices for Health are expected to go a long way toward improving the health of Tarrant County through shared and unified collaboration.

### Notes

<sup>1</sup> See “An Unhealthy America: The Economic Burden of Chronic Disease,” by Ross DeVol and Armen Bedroussian, Anita Charuworn, Anusuya Chatterjee, In Kyu Kim, Soojung Kim and Kevin Klowden, The Milken Institute, October 2007.

<sup>2</sup> See “Quantifying National Spending on Wellness and Prevention,” by George Miller, Charles Roehrig, Paul Hughes-Cromwick and Craig Lake, in *Advances in Health Economics and Health Services Research*, vol. 19, 2008, pp. 1–24.

<sup>3</sup> See note 1.

<sup>4</sup> “Promoting Health: Intervention Strategies from Social and Behavioral Research,” Institute of Medicine of the National Academies and Prevention Institute, 2000.

<sup>5</sup> To view the specific groups, go to <http://health.tarrantcounty.com> and click on “Tarrant County Voices for Health.”

For more information contact:

Lou K. Brewer, RN, MPH, PhD

Public Health Director

[lkbrewer@tarrantcounty.com](mailto:lkbrewer@tarrantcounty.com)

817-321-5300

Yvette M. Jones, MPA

MAPP Coordinator

Senior Policy Analyst

[ymjones@tarrantcounty.com](mailto:ymjones@tarrantcounty.com)

817-321-5318

To follow the progress of the Tarrant County Voices for Health activities, go to:

<http://health.tarrantcounty.com> and click on

