Understanding Health Equity and Community Determinants of Health:

Introduction to the Tool for Health and Resilience in Vulnerable Environments (THRIVE)

Prevention Institute for the National Harm Reduction TA Center
Objectives

1. Understand how community conditions can impact health, safety, and wellbeing.

2. Identify three clusters of the community environment and 12 factors that impact health, safety, and wellbeing, including strategies for harm reduction.

3. Understand how the THRIVE tool can help identify upstream strategies to improve health, safety, and wellbeing, including harm reduction efforts.
What’s Health Got to Do with it?

How the Environment Affects Health
What do you see in the following photos and what does it have to do with health and wellbeing?
Vox: The protests over George Floyd’s death represent the collision of two public health crises steeped in structural racism: coronavirus and police violence.

Stephen Ferry/VIEWpress via Getty Images
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.

- Institute of Medicine
We are still standing on the bank of the river, rescuing people who are drowning. We have not gone to the head of the river to keep them from falling in. That is the 21st century task.”

Gloria Steinem
What can be done to prevent the problem from occurring in the first place?
Equality does not mean Equity
How and where are structural inequities coming up now in your community?

What does that tell us about where to begin intentional efforts?
“Health inequity is related both to a legacy of overt discriminatory actions on the part of government and the larger society, as well as to present day practices and policies of public and private institutions that continue to perpetuate a system of diminished opportunity for certain populations.”

- A Time of Opportunity: Local Solutions to Reduce Inequities in Health and Safety
THRIVE

Tool for Health and Resilience In Vulnerable Environments

Office of Minority Health
Institutes of Medicine
THRIVE

Framework
A way of thinking upstream

Tool
A way of moving upstream

People
Place
Equitable Opportunity

A way to engage communities in dialogue
THRIVE Factors

**People**
- Social networks & trust
- Participation & willingness to act for the common good
- Norms & culture

**Equitable Opportunity**
- Education
- Living wages & local wealth

**Place**
- What’s sold & how it’s promoted
- Look, feel, & safety
- Housing
- Parks & open space
- Air, water & soil
- Getting around
- Arts & cultural expression
Place
The physical environment in which people live, work, play, and go to school.

- Look, feel, & safety
- Parks & open space
- Getting around
- Housing
- What’s sold & how it’s promoted
- Air, water, soil
- Arts & cultural expression
Equitable Opportunity
The level and equitable distribution of opportunity and resources.

Living wages & local wealth
Education
People
The relationships between people, the level of engagement, and norms, all of which influence health outcomes.

Social networks & trust
 Participation & willingness to act for the common good
 Norms & culture
How do these community factors impact health, safety, and wellbeing in your community, and particularly substance misuse?
A Key Opportunity for Prevention

ENVIRONMENT → EXPOSURES & BEHAVIORS → MEDICAL CARE → Health Equity
How Inequities Become Structural...

From Countering the Production of Inequities, a Prevention Institute report developed for the Robert Woods Johnson Foundation, that analyzes policies and practices across multiple systems.
How Inequities Become Structural...

- Segregation Policies & Practices
- Redlining
- GI Bill
- School Funding Formulas
- Siting of Hazardous Land Use
- Interstate Highway System
- Suburban Investment
- Divestment in Urban Core

Increased Inequities
Quality
Prevention is the Prescription

• Aimed at the Community environment
• Comprehensive
• Changes Norms: Makes healthy options the default
Prevention

A systematic process that reduces the frequency and/or severity of illness or injury.

Primary Prevention

Promotes healthy environments and behaviors to prevent problems from occurring before the onset of symptoms.
The Prevention Continuum

**PRIMARY**

Approaches that take place **BEFORE** illness or injury occur.

**SECONDARY**

*Immediate* responses **AFTER** symptoms or risk of illness or injury.

**TERTIARY**

*Long-term* responses **AFTER** onset of illness or injury.
Prevention Works

- Child Restraint and Safety Belt Use
- Smoking Prevention
- Bans on School Junk Food
- School-Based Wellness Policies for PA
- Childhood Immunizations
- Motorcycle and Bicycle Helmet Laws
- Local examples?
What Are We Preventing?

Continuum of Substance Misuse and Addiction and Prevention
The Context: Ohio’s Opioid Epidemic

• **Complex challenges...**
  - Opioid use and misuse is complex and ever-changing
  - No one organization sector or system has the answer
  - Requires wide-scale, integrated solutions across sectors and systems

• **...and comprehensive solutions**
  - An eco-system approach to engage new multi-sector partners and implement new multi-faceted solutions
  - A single, integrated response to the opioid epidemic
  - Creating space for coordination and alignment of existing efforts for collective impact to address opioids and potentially other issues (e.g., mental health and chronic disease)
The Wicked Problem...and Strategies!

- **Local priorities...**
  - Social isolation and lack of connectedness
  - Loss of industry, high rates of unemployment, and lack of economic opportunity
  - Lack of access to transportation
  - Lack of affordable, supportive housing options

- **...Require local strategies**
  - Partnering with parks and rec
  - Partnering with faith communities
  - Working with local transportation agencies
  - Working with housing providers
A Community Prevention Approach using THRIVE

- **Assessment tool**: What factors in the community environment are driving the challenges?

- **Membership inventory**: Is there a partner(s) working to address that factor? Who’s missing at your table?

- **Strategy development and prioritization**: What are the highest priority THRIVE factors for your community?
How do we accelerate health equity?

...especially when structural drivers & adversity are pervasive and contribute to substance misuse?
Healing: A Starting Point for Community Agency

• Healing circles
• Vigils
• Restorative justice practices
• Acknowledgement/reconciliation
• Arts and engagement in the arts
• Community dialogues
• Practices that are culturally and community rooted and acknowledge harm and promote resilience

Creatively Voicing Collective Emotion

"Baptized when the levees broke."

St. Roch community: New Orleans, LA
Strategies Among People

- Increase **civic engagement and participation**
- Supporting **multigenerational relationships**
- Coming together to **build community efficacy**
- Advancing **positive norms**


Strategies Among People

• Uplifting positive narratives of hope and resilience from within the community
• Enhanced community engagement and advocacy
• Trauma informed community building
• Reconnecting with cultural identity
Community-Led Action

United Women of East Africa
San Diego, CA
Strategies within the Community (Place)

- Reclaiming **land, spaces and public places**
- **Arts and cultural reflection/expression** in the community
- Focus on **ensuring stable housing with dignity**
- Creating **safe and supportive places** for regular gathering/coming together


Establishing informal gathering places for networking, resource connection and support that also strengthen life skills and community/civic opportunities.

Engaging in Placemaking

Kalihi Valley Instructional Bike Exchange
Honolulu, HI
Strategies within the Community (Equitable Opportunity)

• Workforce and economic development
• Restorative justice in schools
• Resident ownership of businesses
Strategies Across Systems

• Trauma informed systems transformation

• Public health solutions to police-community violence

• Power-sharing (e.g., participatory budgeting, shared leadership and decision-making)

Adopting Community Participatory Budgeting in Tacoma-Pierce County, WA

Hilltop Urban Gardens, Tacoma, WA
Context for a Community Trauma Approach to Substance Misuse Prevention and Harm Reduction

Developing a community-trauma-informed approach to the opioid epidemic in Ohio
Ohio: Plans to Create Resilient Communities

Develop a Community-Level Prevention Plan that:

• Addresses the community environment, underlying to community conditions and/or norms contributing to OUD

• Potentially impacts other issues, such as mental health and chronic disease

• Sees the issue as complex and multi-faceted, with multi-sectoral partners
Factors Impacting the Substance Use Epidemic

• Substance use risk factor conversations cannot be addressed in isolation
  • Broader social context is key

• Upstream causes of opioid crisis
  • Rural social & economic instability
  • Loss of living-wage jobs
  • Underfunded schools
  • Criminalization of substance use
  • Limited health/social services access
  • Structural racism
  • Intergenerational poverty
  • Social isolation

Moving Upstream

“We spend so much of our time trying to teach people to swim or pulling them out of the river. We all knew that if we got out in front to find out why they’re falling in the first place, we’d keep people out of the river all together… If we don’t invest in prevention, whoever takes over for me will be taking on the exact same issues and trying to implement the same efforts….We have to look at our efforts as comprehensive. It can’t just be about overdose. It can’t just be about addiction.”

- Miriam Walton, executive director of the Ashtabula County Mental Health and Recovery Services Board

Comprehensive Solutions

• An eco-system approach to engage new multi-sector partners and implement new multi-faceted solutions
  ▪ Parks and recreation
  ▪ Faith communities
  ▪ Local transportation agencies
  ▪ Housing providers and developers
  ▪ Businesses and employers

• A single, integrated response to the opioid epidemic

• Creating space for coordination and alignment of existing efforts for collective impact to address opioids and potentially other issues (e.g., mental health and chronic disease)
The Power of Connection

“Community connectedness is the opposite of addiction.”

- Susan Heald, Coalition Coordinator, Lawrence County

Lessons Learned

• It is time to address community trauma
• Every community is different
• Primary prevention efforts that address the social determinants of health also support recovery from addiction
• Funding that prioritizes prevention and collaboration across sectors makes change possible
• Data matters—and we need more of it

The Best Thing We’ve Done

“In all the years I’ve worked with the Ohio Department of Mental Health and Addiction Services, this is the best thing we’ve done. People were just reacting, reacting, reacting. [This work] gave the community a way to feel like they were helping the issue.”

- Susan Heald, Coalition Coordinator, Lawrence County

Working on community determinants is both scary and reassuring. If we don’t do this level of prevention, we will always be chasing the problem.

-Ohio Community Collective Impact Model for Change Learning Community Partner
City paints over Brooklyn 'jail' playground with space-age replacement

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