

Partnership for Healthy Communities:

Utilizing an Equity, Place-Based Approach to Guide Our Collaborative Work on Health Equity in Delaware

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Abstract

When it comes to a healthy community, the University of Delaware’s Partnership for Healthy Communities (PHC) understands that place matters. Through the culmination of lived experiences and empirical research, there is a well-established understanding that there are healthy communities and less healthy communities and that this is a result of varying conditions in these communities, conditions referred to as the social determinants of health (SDoH). These varying conditions have been produced and reproduced through political systems, economic and social policies, and social norms, and resulted in persistent health inequities. PHC utilizes this knowledge and evidence to inform the collaborations and investments with communities that have the most to gain in the state of Delaware. Through a description of its four strategic partnerships, we outline how an equity, place-based approach guides our collaborative work to achieve health equity in our state.

Healthy Communities

When it comes to a healthy community, *place matters*. There are varying ways in which the term “community” can be defined; it can refer to populations that identify through shared values, characteristics, and/or cultural backgrounds. It can also be used to represent a geographic location or physical place. A growing body of evidence now highlights what many public health practitioners and community members long recognized, which is that place matters when it comes to health and health equity. This empirical and practical understanding not only outlines that there are healthy communities and less healthy communities, but also helps us to understand that this difference is the result of varying conditions in these communities.

These conditions are often referred to as the social determinants of health (SDoH) or the non-medical factors that influence health. WHO defines SDoH as “... the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life.”¹ These conditions include access to quality education, opportunities for a liveable income, stable housing, non-discrimination as well as social inclusion, among others. In 2008, the WHO Commission on SDoH summarized decades of research and concluded that health inequities were largely the result of differences in SDoH.²

The (In)Equity of Place

What is critical to note is that the variance in these conditions in communities is not by chance, but rather, is the result of political systems, economic and social policies, and social norms.¹ Due to the established relationship between SDoH and health equity, and the intentional nature of varying community conditions through existing policies and systems, this has led to an

understanding of health inequities as “differences in health which are not only unnecessary and avoidable, but, in addition, are considered unfair and unjust.”³

Recognizing the persistent health inequities specifically among Black communities, structural racism is increasingly being identified as the root cause.⁴ Structural racism has been defined as the “...totality of ways in which societies foster racial discrimination through mutually reinforcing systems of housing, education, employment, earnings, benefits, credit, media, healthcare and criminal justice.”⁴ These ‘reinforcing systems’ in turn deprived many communities of color from the vital conditions necessary to achieve one’s full health potential. A map of Wilmington outlined in Figure 1 shows that communities with a higher percentage Black population generally experienced the lowest life expectancy, with as much as a 16 year life expectancy difference across neighborhoods. This historical and present-day understanding is what informs and guides the work of the University of Delaware’s Partnership for Healthy Communities (PHC), specifically as it pertains to adopting an equity and place-based approach in our work.

Figure 1. Estimated life expectancy by percentage of black residents in Wilmington, Delaware neighborhoods, 2018.⁵

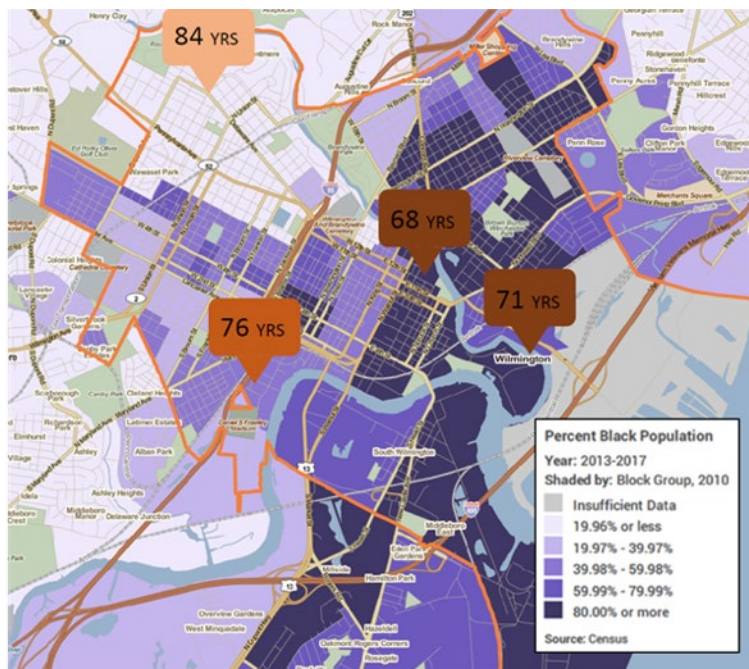


Figure 3. Estimated percent of all people who are Black residing in Wilmington neighborhoods and life expectancy

Partnership for Healthy Communities

PHC utilizes this knowledge and evidence to inform the collaborations with and investments in *communities that have the most to gain*. PHC is a university-wide community engagement initiative at the University of Delaware which works to align, strengthen, and partner the University’s research, educational and service capabilities with the expertise of community members and organizations on issues of health equity. Recognizing the impact of place on

health, PHC operates as a backbone to support four strategic partnerships in implementing place-based initiatives with communities.

Healthy Communities Delaware (HCD)

Healthy Communities Delaware (HCD) is managed as a collaboration among PHC, Delaware Division of Public Health, and the Delaware Community Foundation. This place-based initiative focuses on partnering with communities through sustainable financial investment to transform and improve the SDoH, or what HCD refers to as vital conditions, to create communities of opportunity. An in-depth description of HCD, including its core tenants of community engagement and place-based approach, is presented in another article in this journal issue.

State Health Improvement Plan (SHIP)

For the last four years, PHC has helped manage Delaware's State Health Improvement Plan (SHIP) process with the State of Delaware's Department of Health and Social Services, Division of Public Health. This process involves assessing progress and ensuring synergy among stakeholders in regards to recommendations from the 2018-2023 SHIP plan. A SHIP is considered best practice among state health departments and required for accreditation by the Public Health Accreditation Board (PHAB). Along with a focus on addressing prior recommendations, there is an opportunity to identify existing gaps and promising practices to support improvements in population health.

At the core of the SHIP work are the principles of community engagement and ensuring that community voices are not only heard, but inform the ways in which resources and investments in health will be allocated in the future. In May 2022, community conversations were conducted in all three Delaware counties to understand the broader needs and resources as it relates to community health and well-being. Specifically, the conversations sought to understand what residents felt were facilitators and barriers to health and well-being in their communities, identify community-based organizations key to resilience efforts, and co-create priorities and solutions to promote health equity in the state.⁶ When we understand that place matters, we recognize the unique aspects of varying communities and the essential nature of listening to the expertise of community members to guide the work of health equity.

H.E.A.L.T.H. for All (Health, Engagement, Access, Learning, Teaching, Humanity)

In 2021, the H.E.A.L.T.H. for All Program evolved from an existing Mobile Healthcare and Wellness program, designed to address SDoH through a collaborative, community-based approach while also training UD students as the next generation of the public health workforce. A partnership between PHC, Highmark Blue Cross Blue Shield Delaware, and the Lt. Governor's Challenge, the program works with community-based organizations to understand their needs and then embed and align health and wellness care initiatives with existing efforts at community sites in Delaware neighborhoods made most vulnerable through inequity. For example, in terms of health care access as a SDoH, H.E.A.L.T.H. for All works to alleviate gaps in care, so that as residents' needs and access to health services change in the community, the program can pivot accordingly. Another strength of H.E.A.L.T.H. for All is that it trains UD students in the practice of community engagement and the value of place-based approaches, conveying this principle, knowledge and experience to future public health professionals.

Community Well-Being Initiative (CWBI)

Finally, our fourth strategic partnership, the Community Well-Being Initiative (CWBI), utilizes a collective impact framework to promote well-being among communities made vulnerable through high levels of inequities and trauma. Funded by the State of Delaware’s Department of Health and Social Services, Division of Substance Abuse and Mental Health, the initiative partners a diverse group of stakeholders including grassroots coalitions, educational institutions, healthcare sectors, and community-based organizations who support the implementation and evaluation of engagement strategies. Adopting a community-driven, place-based prevention approach, a group of community members from targeted neighborhoods in Wilmington have been trained by Network Connect as community well-being “ambassadors.” The ambassadors promote resiliency and well-being across the lifespan.

The evidence behind the relationship between place and health guides where our work at PHC is focused in order to address health inequities in communities that have the most to gain in our state of Delaware. Our strategic partnerships continue to help us learn and reinforce to us the value of local knowledge and expertise as critical contributors to place-based work in advancing health equity, as well as ensuring that a focus on healthy communities includes being data-informed and requires staying intentionally focused on SDoH.

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