

Visioning a Culture of Health. A parent participating in a Family Success Alliance planning activity recently articulated a vision for Orange County that captures a common sentiment: “We dream big for our kids. We want them to have success in life, health, happiness, and safety, plus the opportunity to live up to their full potential.”

A Culture of Health isn’t cultivated by one person, one organization, or one coalition; it is the result of common goals and a collection of efforts that integrate the principles of justice, inclusion, and sustainability. Our Phase I essay highlighted the strategic, policy-driven efforts of the Board of Health, which has the authority to adopt rules necessary to protect and promote public health. Even though the Board defines health very broadly, as exemplified by the work of the Family Success Alliance, the authority to develop and cultivate many of the policies, norms, systems, and environments that affect health reside with a myriad of other policymakers and with residents themselves. Transportation access, safety, availability of fresh foods, a healthy physical environment, social connectivity, and other factors cannot efficiently be addressed under the auspices of one initiative – but can be worked on synergistically such that they reinforce each other and further deepen our commitment to health.

In our effort to create a healthy community, we must start by acknowledging that Orange County has one of the highest levels of income inequality in the state. With such a stark contrast between wealth and poverty, it is imperative that we cultivate a community that truly allows all children to live up to their full potential, especially those who history and society have set at a disadvantage, and that maximizes their potential throughout the course of their lives. The accomplishments described below highlight specific initiatives to maximize health from the very beginning of life through the golden years, as well as initiatives that support and empower immigrants and refugees. We also describe efforts to sustain a healthy economy through a resilient food system that prioritizes the needs of those most in need. Lastly, a particular area of concern for a university community is high-risk alcohol use, which has led to targeted efforts by a broad-based coalition.

Advancing Your Vision.

Improving Outcomes for Mothers and Children. Orange County is an increasingly supportive place to be pregnant, give birth, and raise a child. After NC Institute of Medicine’s *Growing Up Well* Report was released in 2012, a multidisciplinary Early Childhood Mental Health Task Force formed to work on its recommendations and to increase collaboration and efficiency of services. Their work supports a robust system of policies and environments that bolster the cradle-to-career pipeline that the Family Success Alliance is strengthening. These supports focus on improving the socio-emotional well-being of young children and their families, as well as their physical health. For instance, UNC Horizons, a comprehensive substance abuse treatment program helps mothers have birth outcomes much better than the state average for substance-exposed pregnancies – with up to one fifth fewer premature babies. In addition, the county has streamlined resources by integrating support for pregnant women and new parents through its prenatal care, prenatal and baby oral health programs, WIC, and home visiting services with free lactation support.

The benefits of breastfeeding extend beyond those related to health, nutrition, and immunity to developmental, psychologic, social, economic, and environmental benefits – and it takes a supportive environment for mothers to be successful at it. UNC Hospital and the local birthing center consistently support breastfeeding and are the only two Baby-Friendly certified facilities in the Raleigh-Durham area. Extending this support, the Board of Health has passed a resolution on lactation, consistent with its

strategic plan objective to promote an Orange County lactation policy/program for all county departments. The robust system of lactation support throughout the county results in a breastfeeding rate among WIC clients that is 12% higher than the NC average and 17% higher than the average for southeastern US. Continuing to enhance this support, two of the county's three municipalities are working to become "Breastfeeding Family Friendly Cities" by World Breastfeeding Week, 2016. This newly minted designation, developed by the locally-based Carolina Global Breastfeeding Institute, includes community-wide policy and environmental changes to support breastfeeding.

Harnessing the Strengths of Aging Adults. Across the United States the older adult population is increasing, even more so in Orange County, which has become an increasingly popular retirement destination. This requires new responses to the needs, expectations, and contributions of a growing class of older residents. In 2003, Orange County was the first in North Carolina to create a five-year Master Aging Plan (MAP). The 2012-2017 MAP marks the third cycle of strategic planning for the Orange County Department on Aging and is the first to include public input throughout every step of the process. It is also explicitly dedicated to the promotion of equity to support people of diverse cultures, lifestyles, geographic locations, and socioeconomic statuses. Aiming to address health and wellness holistically, the objectives address cross-cutting issues including: affordability and economic concerns, geographic equity, attention to under-represented groups, and workforce preparation.

Every year the county shares its progress toward the MAP's measurable performance measures through a report available on its website. An example of a successful effort that empowers seniors as leaders is Project EngAGE. Through an innovative, experiential learning program consisting of 13, five to six-hour weekly sessions, Project EngAGE prepares participants to serve as resource leaders in their individual communities and to form self-directed senior resource teams to fill resource gaps with their own unique projects. Three classes have graduated and formed nine Senior Resource Teams throughout the county: SALT (Visiting isolated seniors), Falls Prevention/Exercise Promotion, End of Life Choices Team, Rural Hunger, Faith-Based, Transportation & Mobility, Caregiver Support, and Government Outreach. Senior Leaders identify assets, needs, and issues of importance in their communities and advocate for solutions to those issues. To date, the teams have created neighborhood community groups, organized three faith-based leader symposiums, held falls prevention outreach events, several end of life choices events, and much more. More than 40 Senior Leaders have graduated since the project began in 2012 and continue to participate with ongoing support for through monthly meetings.

Prioritizing Refugee Health. By 2008, the county had welcomed more than 200 refugees from Burma and in the following years several hundred more resettled here. The Health Department arranged for an analysis of the community's strengths and needs, which led to the formation of the Orange County Refugee Health Coalition, considered a model in the state. It has served as a unifying body for numerous agencies, student groups, volunteers and community members, including: the Refugee Support Center (RSC), Immigrant and Refugee Community Partnership, UNC Student Health Action Coalition's Refugee Health Initiative, and UNC School of Social Work's Refugee Wellness program. In 2011 and 2015, the Health Department organized and facilitated focus groups with refugee community members, who continue to provide guidance on coalition priorities. The coalition has a mental health subcommittee and has helped support the specialized services of agencies, such as the Art Therapy Institute of NC, that help refugees find avenues to work through trauma and increase self-esteem. The coalition defines health broadly, facilitating discussions and coordinating efforts on diverse issues ranging from access to drivers licenses, literacy, and housing to mental health, domestic violence, emergency communications, and strategies to increase availability of and access to high quality interpretation services. Partners are

working towards sustainable solutions to persistent problems, such as the RSC's success preparing almost 100% of clients to pass the citizenship test and their proposal to establish a revolving loan fund. The strong relationships and networks built among the refugee community and service providers help maximize scarce resources and lift the voice of community members.

Looking forward, Orange County anticipates receiving several dozen Syrian refugees and potentially more refugees from the Democratic Republic of the Congo in the coming year, at a time when a culture of fear threatens to make refugees feel more isolated and less welcome. The coalition is strategizing ways to prepare for the linguistic and specialized needs of these new neighbors. Additionally, as an example of a policy-oriented solution, the Town of Carrboro recently adopted a resolution declaring it a safe haven for Syrian refugees and aiming to best coordinate financial resources to support their arrival.

Building a Resilient and Sustainable Food System. As a county with a mix of urban and rural areas, several hundred farms contribute to efforts to create a sustainable and just food system. Three that exemplify an effort to create equal opportunity for all residents are:

- **Transplanting Traditions Community Farm:** At this farm, 150 refugee adults and youth from more than 30 families from Burma grow healthy food on 5 acres and sell it at two of the county's six local farmers markets. Participating families report now having access to enough fruits and vegetables to eat (95%, up from 5%) and directly profited over \$57,000 in income. Almost all farmers (95%) reported a reduction in stress because of their involvement with the farm.
- **Anathoth Farm & Garden:** This farm's income-inclusive Community Supported Agriculture program provides free shares to half of its 130 members, who connect with the program through community members, health clinics, WIC, and local churches. It was founded as a way to address the effects of rural poverty brought to light by the murder of a community member and is now a place that strengthens and unites the community.
- **The Farm at Penny Lane:** This 40-acre farm's community garden and Horticulture Therapy Program provide respite for people with severe and persistent mental illness. Just a couple miles from town, this collaboration between the UNC Center for Excellence in Community Mental Health and the NC Botanical Gardens, is expanding to include trails, an art and music studio, and housing.
- **PLANT @ Breeze Farm:** This initiative provides training for farm apprentices on small scale sustainable farming techniques and enterprise development. Apprentices can then lease land and borrow equipment to start businesses.

These farms represent innovative models that cultivate leadership, foster connections among neighbors, integrate services, and increase community resilience.

In the context of this robust agricultural system, Orange County began developing a food policy council in 2014. It assessed the local food system, highlighting several assets including a 40% decrease in garbage collection at local schools because of composting. Both school districts are revising their menus to include new, student-approved, nutritious options through "Try-Days" that introduces new recipes to cafeteria staff and students to test and rate. Child care centers, like the Spanish is Fun Academy, are busy implementing "NAPSACC" to start kids off with healthy food and active lives. Although the percent of preschool aged, low-income children who are obese or overweight has dropped from 39% (2004) to 32% (2012), there is still much work to be done, and the Orange County Food Council will be working to deepen connections within the food system and promote policies that make it even more resilient.

Addressing High-Risk Alcohol Use: High-risk drinking is often cited as the single biggest issue negatively impacting universities and their communities. As home of the state's flagship university, UNC at Chapel

Hill, Orange County is no exception. After a parent-led coalition pushed for change for several years, a Town/Gown Collaborative was formed to address this complex public health issue. This diverse and engaged group of town leaders, campus administrators, students, and community leaders worked closely together to understand the myriad factors that contribute to high-risk drinking and to identify evidence-based and promising environmental strategies to reduce its negative effects.

After carefully reviewing the data, conducting many stakeholder listening sessions and reviewing evidence-based practices, the Town/Gown Collaborative developed a comprehensive set of 22 recommendations to reduce the negative impacts of high-risk drinking on three areas: the University, Neighborhoods/Community, and Downtown. These synergistic recommendations address needed changes to policies (e.g., adopting an ordinance requiring businesses with alcohol permits to provide Responsible Beverage Service training for its managers, sellers and servers), systems (e.g., educating the judicial system about the need & strategies for swifter adjudication), norms (e.g. a social norming campaign on campus), and programs (e.g., creating a required First Year Experience academic course to assist students in making a smooth transition into the college environment). To maximize resources, the collaborative has jointly funded a permanent director to oversee the adoption and successful implementation of all recommendations in close coordination with the on-going Town/Gown coalition.

Defining Success. In Orange County, “success” is not just a data point or an end goal we strive to meet; it is achieved throughout our approach to getting things done. We always start by looking at best practices when planning our work – such as the Family Success Alliance that is based on the Harlem Children’s Zone and Promise Neighborhoods, and our Healthy Homes initiative that is informed by the Community Guide. We heed the guidance of experts, like John Ratey, creator of “SPARK,” which has inspired local elementary schools to systematically integrate physical activity leading to better behaved students who score higher on math and reading tests. But we know that when policies and interventions are also driven by the community’s needs, hopes, and desires, and not just the opinion of “experts” or informed by a booklet of evidence-based approaches, then we are one step closer to our definition of success. Our definition includes the decrease in percent of families living under the poverty limit *and* the stories of how their lives change for the better with more income. The decreased number of days a child misses from school when their house is free of mold *and* how it reduces parents’ stress to know they can go to work without worrying. The percent of children passing their third grade reading test as well as the excitement a child feels picking out a new book they can read. This combination of quantitative and qualitative data is Orange County’s definition of success in building a culture of health, and the stories mean just as much as when our indicators meet or surpass our targets.

Orange County achieves this kind of success by incorporating data and evaluation throughout its efforts, with an emphasis on hearing the voice of the community and using their guidance and the data to inform decision-making and drive measureable outcomes. The Health Department has played a leading role in promoting data collection, sharing, and utilization in Orange County. For instance, the county has created two new informatics-specific positions. This is a rare resource in local government in the state, and showcases our community’s emphasis on data. One of these positions focuses on health and population-level data and the other focuses on mining county-maintained data to maximize its utility for informed decision-making. Examples of ways in which data are more readily available for both internal and external audiences are: 1) population health dashboards regularly published for surveillance and high-level communication on each of the thirteen Healthy North Carolina priority areas; 2) partnerships with schools to implement the YRBS, and 3) partnerships with farmers markets and others that have enabled data-sharing and coalition building. There are also ad hoc projects that enable evaluation and

planning – such as the creation of Poverty Index Maps that identified potential implementation zones for the Family Success Alliance, and the mapping of client residence and demographics before and after closing of a safety net dental clinic to analyze the impact of policy and funding decisions on those most needing services.

Beyond program and organization-level data collection and use, Orange County partners have come together to implement new ways of defining shared indicators and systems for data-sharing across organizations and topical siloes. This is most readily seen in the work of the Family Success Alliance to develop shared measures of child and family success, and to develop and use a shared measurement and evaluation system incorporating health, education, and program data. Nine organizations are currently piloting a shared intake tool and data-sharing processes to more effectively utilize information and better serve children and families over time and across programs and organizations.

Ensuring Equal Opportunity for Health. We have often found meaningful and creative ways to help amplify the voice of “the community” – such as high school youth who have appealed to the Board of Health and met with their legislators to demand change, and focus groups with refugees and immigrants that identify specific needs and challenges that are then incorporated into the county’s health improvement plan. However, continuously ensuring the authentic participation by those most affected by poor health outcomes is a challenge that is ever-present and that we regularly take on and try to overcome. The Family Success Alliance is a strong example of how we work to integrate participation and representation by design. FSA’s leadership structure and staff include several people who are from the pilot zones, helping to ensure that decisions and programming are based on the realities and priorities of residents most affected by poor health outcomes. Knowing that a select few people cannot hope to represent the diverse views of an entire community, FSA also regularly consults with community members themselves – with outreach usually conducted by community members on staff – through listening sessions, surveys, and one-on-one consultations. In addition, two parent leaders serve on the Advisory Council to ensure they have the same voice and vote as elected officials and non-profit leaders. In this same spirit, should we be selected for the “Culture of Health” award, we will empower community partners to determine how decisions will be made about using the award money.

Building for the Future. Orange County has a strong emphasis on promoting health, whether it is in the form of a proclamation, ordinance, plan, budget allocation, or an advisory board. Our leaders, government and otherwise, value clean air and water, a living wage, preventing discrimination, quality housing, strong schools, local food, small businesses, arts, recreation, recycling, safe streets; all necessary for good health and quality of life. These are the lenses and frames for action. We codify this through adopting ordinances and policies – like the Smoke-Free Public Places Rule, Complete Streets ordinances, and breastfeeding friendly policies – and by building and maintaining healthy environments – like the Riverwalk in Hillsborough and robust bike and pedestrian infrastructure throughout Carrboro and Chapel Hill, the result of strategically acquired resources and visionary planning – all of which promote health and safety for generations to come.

Numerous, carefully crafted plans - like the Board of Health Strategic Plan, the Master Aging Plan, and the county and towns’ Comprehensive Plans – all address current priorities, but also track trends in health, demographics, and the economy and prepare the community for emerging issues. As we look to the future, our county commissioners have committed to a Health in All Policies approach, which will guide us as we prepare to tackle the challenges of ensuring affordable, quality housing and sustainable transportation options. We are pleased with, but also undeterred by, the consistently favorable health

rankings, and we stand by our ground truthing that tells us health inequities persist and demand our attention. We are firm in our commitment to improving health and inspiring change for all residents.

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