

Board of Health Presentation February 15, 2024

Risk and Protective Factors Across the Lifespan

- Communities That Care
 - Maternal Child Health
 - Youth Engagement

Health Equity and Strategic Initiatives Division

Outline

- Primary Prevention: Risk and Protective Factors
 Michele Haugh, Community Policy & Prevention Supervisor
- Maternal and Child Health
 Sadie Wych, Maternal, Child and Family Health Systems Supervisor
- Communities that Care
 Libby Harrington, Community Policy & Prevention Specialist
- Youth Engagement
 Samantha Decker, School Health Policy & Prevention Specialist

Primary Prevention: Across the Life Span

Examples of Risk and Protective Factors in a Socio-ecological Context			
Societal	Environmental/Community	Interpersonal	Individual
Laws, Systems, Media, Widespread social norms Income stability (+) Access to jobs (+) Paid sick leave law (+) Persistent poverty (-) High unemployment (-) Structural racism and discrimination (-)	Neighborhood Safe & stable housing (+) Community violence (-) School Positive school climate (+) Bullying (-) Care settings/preschool context Positive Childhood Experiences (+) Adverse Childhood Experiences (-) Institutional racism & discrimination (-)	Peer Relationships Prosocial peers (+) Risky peer behavior (-) Caregiver-Child Relationship Positive Childhood Experiences (+) Adverse Childhood Experiences (-) Family/Household Relationships Social Support Network (+) Adverse Childhood Experiences (-) Interpersonal racism & discrimination (-)	Neonatal/Infancy Safe Sleep Environment (+) Exposure to substances (-) Childhood Emotional regulation (+) Hyperactivity/inattention (-) Adolescence Prosocial behavior and activities (+) Substance use (-) Young-Adulthood Identity Achievement (+) Stress (-) Parenthood/Caregivers Educational Level (+) Anxiety, depression, & stress (-) Internalized racism & discrimination (-)

2023 Brief from the Office of Human Services Policy: https://aspe.hhs.gov/sites/default/files/documents/8228e700f6e369df9382ac8e0d3976c1/primary-prevention-convening-brief.pdf

ACE's (2023): https://www.cdc.gov/violenceprevention/pdf/ACEs-Prevention-Resource_508.pdf

Parisms and determinent of health and health area (2023): https://www.pdf.ace.gov/violenceprevention-convening-brief.pdf

Racism as a determinant of health and health care (2023): https://www.ncbi.nlm.nih.gov/pmc/articles/PMC10498908/
Racism as a Determinant of Health: A Systematic Review and Meta-Analysis (2015) https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4580597/

Primary Prevention - Risk and Protective Factors

Primary Prevention:

Intervening before health effects occur, through measures such as vaccinations, altering risky behaviors, or banning substances known to be associated with a disease or health condition

- Risk Factors conditions or attributes at the individual, family, community, or larger societal level that precede and are associated with a higher likelihood of negative outcomes
- Protective Factors conditions or attributes at the individual, family, community, or larger societal level associated with a lower likelihood of negative outcomes or that reduce a risk factor's impact

Risk and Protective Factor Theory:

A foundational approach to determine the causes and solutions of a public health issue, including the social determinants of health, to help identify appropriate primary prevention strategies.

The benefits of using a shared risk and protective factor approach for prevention

TRADITIONAL PARTNERSHIPS

- · Partnerships are based on the programmatic issue
- Relationships are "owned" by programs

SILOED PROGRAMS/STRATEGIES

- · Programs are developed by funding available
- Strategies are issue specific and sometimes developed in a vacuum

ISSUE SPECIFIC FUNDING

- Funding is siloed to the topic area and not blended across strategies
- · Efforts begin and end with funding cycles
- There is less vision for how strategies are connected

VERTICAL ORGANIZATIONAL STRUCTURE

- Team members are hired based on experience in programmatic issue
- Work unit is organized based on programmatic issue or functional similarities

NOT ADDRESSING ROOT CAUSES

- Strategies address specific issue rather than the root cause of the issue
- The perspective of work is focused on the short-term using the resources available "right now"

Pri

APPROACHES

SRPF

NON

INCONSISTENT AND INDEPENDENT MEASUREMENT

- Evaluation is inconsistent
- Measures are selected based on specific programmatic issues and/or funder requirements only



- Partnerships are based on shared protective or risk factors/root causes
- Relationships are shared across program team members

INTEGRATED PROGRAMS/STRATEGIES

 Strategies are developed based on protective factors that are shared across programmatic issues

BLENDED/BRAIDED FUNDING

- Funding is blended/braided across funding streams to fund shared strategies that address shared risk and protective factors
- Efforts are sustained past any one specific project period



NETWORKED ORGANIZATIONAL STRUCTURE

- Team members are hired based on attributes that support SRPF work
- · Work unit is organized to support collective work

ADDRESSING ROOT CAUSES/DRIVERS OF HEALTH

- Addressing SRPFs is also addressing social drivers of health which are the root causes
- The perspective of work is focused on building capacity and connecting prevention strategies for long-term outcomes



APPROACHES

SRPF

SHARED MEASUREMENT

- Evaluation is based on identified shared protective factors
- Programs and partners share measures and accountability





Board of Health Presentation February 15, 2024

Maternal, Child and Family Health

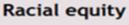
MCH Framework



Vision: To Increase Community and Family Resilience

STRATEGIC ANCHORS







Community inclusion



Moving upstream

HEALTH IMPACT AREAS



Behavioral health



Access to care



Nutrition security

PRIORITIES 2021-2025



Create safe and connected built environments



Increase prosocial connection



Promote positive child and youth development



Improve access to supports



Increase social emotional well-being



Reduce racial inequities









Maternal and Child Health – Key Strategies

Focus on population-based and infrastructure-building strategies.



Barriers for ACHD Families

- Financial Wellbeing Housing/Cost of Living, Expensive Childcare
 - Persistent poverty (-)
- Maternal Mortality, Mental Health
 - Structural racism and discrimination (-), Anxiety, depression, and stress (-)
- Language barriers
 - Structural racism and discrimination (-)

Key Strategies for Improving Access to Supports and Reducing Racial Inequities

- Identify trends and address associated risk and protective factors (Strengthening Families Partnership, Child Fatality Review Committee, HCP care coordination)
 - Parental resilience (+), Knowledge of parenting and child development (+)
- Pilot and develop model for program expansion (i.e., Tax Prep Site, Family Connects)
 - Increases crucial supports in times of need (+), Parental resilience (+), Knowledge of parenting and child development (+)
- Language Access and Language Access Planning
 - Parental resilience (+), Social Connects (+)
- Policy/Advocacy (Maternal Mortality, Financial Wellbeing)
 - Increases crucial supports in times of need (+)

Maternal and Child Health – Strengthening Families Partnership





ACHD MCH Team, Adams County Human Services Prevention Unit, Early Childhood Partnership of Adams County (ECPAC)

Align efforts and work collaboratively to move from a reactive child welfare system to a prevention-oriented, equitable child and family well-being system that includes a comprehensive service continuum achieving the following shared results:

- Decreased incidence of child maltreatment in Adams County
- The Adams County community ensures equitable systems, environments, and supports for parents and caregivers
- The Adams County community shares accountability for improved family and caregiver outcomes

Butler Institute for Families at DU (Evaluation Consultant)

Maternal and Child Health – Increase Economic Stability

Free Tax Preparation Site Pilot at ACHD

- Low-income households with an income of \$64,000 or less
- Offered at HSC and Anythink Commerce City Library
- Hired staff instead of volunteers
- Strong partnership with Mile High United Way for technical assistance

CTC (Child Tax Credit) and EITC (Earned Income Tax Credit) as a poverty reduction strategy

- 2021 federal expansion of CTC created a historic reduction in poverty
- Families meet basic needs and increases financial stability











Maternal and Child Health- Language Access





Language Access

 ACHD phone tree changes -expand language options in the ACHD phone tree (Spanish, Hmong, Russian, Dari, Pashto) for easier access to an interpreter when calling the health dept

Language Access Planning

- Better align with Title VI of Civil Rights Act and Executive Order to have language access plans for any agencies/programs that receive federal funds
- Pilot project with Nurse Support Program
 - Conduct an analysis to determine the top languages this program serves
 - Determine which documents are vital and need to be translated into top languages



Maternal and Child Health – <u>HCP Program</u>

HCP

A Program for Children and Youth with Special Health Care Needs

Adams County Health Department provides services to Adams County children from birth to 21 years who are at risk for physical, developmental, behavioral, or emotional conditions. No diagnosis is needed. No income restrictions or legal residency is required.



Contact

Anne Brack, RN 303.517.0427



2023 Services Numbers:22 care coordination clients137 information and referrals



Board of Health Presentation February 15, 2024

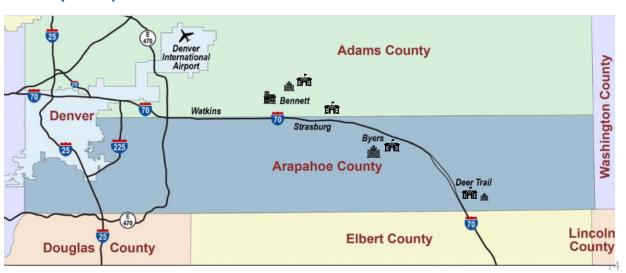
Communities that Care (CTC)

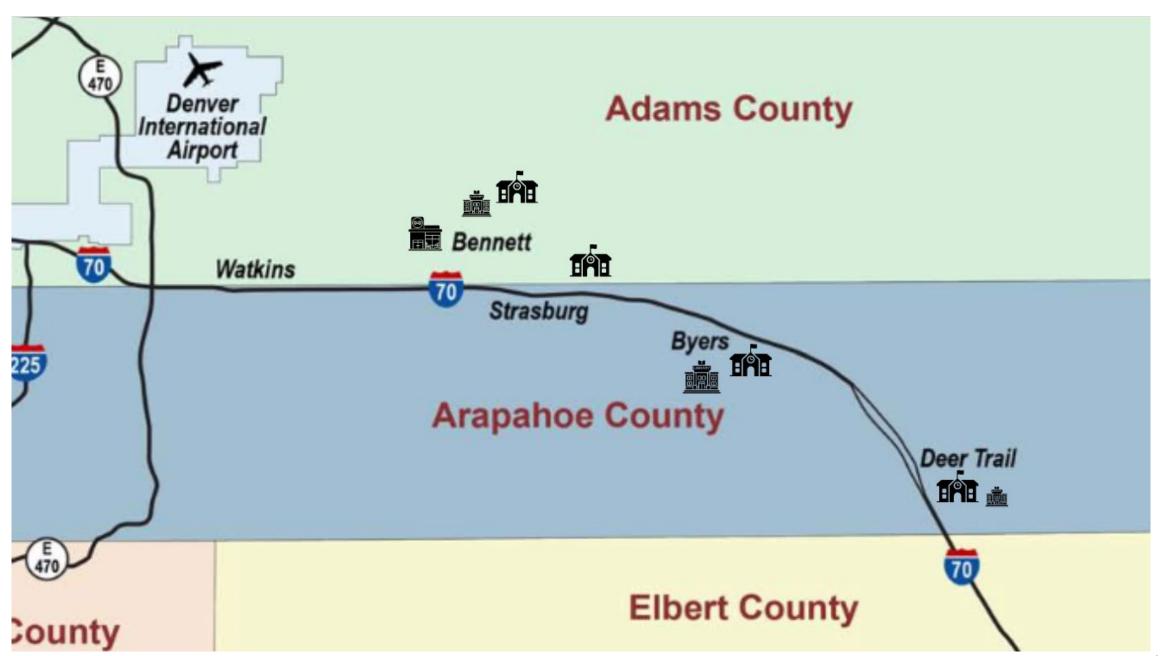
Communities that Care (CTC)

With funding from a CDPHE Community Organizing for Prevention grant and support from Bennett Park and Recreation District, the I-70 Communities that Care Coalition, is implementing the CTC model in Watkins, Bennett, Strasburg, Byers, and Deer Trail.

The CTC Model is:

- ✓ Grounded in Theory and Practice
- ✓ Inclusive and Participatory
- ✓ Takes a Community Perspective
- ✓ Involves Training and Technical Assistance at Every Step
- ✓ Includes Evaluation and Adjustment
- ✓ Creates Lasting Positive Change





I-70 Communities that Care Coalition

Our Coalition:

The goal of CTC in Colorado is to give communities the skills they need to make lasting change in their community. CTC builds the capacity of parents, youth, and other community members to identify local problems and promote local solutions to transform their community.

Our Mission:

I-70 Corridor Communities that Care strives to provide equitable opportunities for improving youth health in our schools, families, and community through educational and economic outreach focusing on youth substance prevention and safety.







Communities that Care

Selected Risk and Protective Factors:

Risk Factor: Limited Economic Opportunity

Strategy: Build Public Support to Alter the Physical Environment

Strategy: Facilitate Hot Spot Mapping to Increase Community Organization

Strategy: Make Community Assistance Programs and Resources More Accessible to Eligible Families

Risk Factor: Limited Parental Supervision for Any Reason

Program: Raising Healthy Children

Protective Factor: Family Opportunities for Prosocial Involvement

Strategy: Build Public Support for and Organize Family-Friendly Community Events

Program: Raising Healthy Children

CTC Coalition - Teens For Change

Mission Statement

Teens for Change promotes youth-led positive change along the I-70 corridor by involving our community in events, projects, and outreach to improve youth health, equity, and safety.



Mural Project, Trupp Park, Bennett

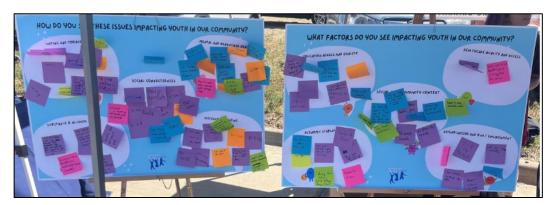


Trunk or Treat



State of the Youth Presentation

CTC Coalition - Teens For Change



Collecting Community Feedback...



Planning...



Doing!



Board of Health Presentation February 15, 2024

Youth Engagement

Youth Engagement

Risk and Protective Factors Influenced by Youth Engagement

Youth Engagement Work in 2023:

- Teens For Change
- Northglenn Vaping Solutions Project
- Youth Engagement in State Policy
- Municipal Youth Commissions and Advisory Councils
- Tobacco Focused Community Profile interviews and listening sessions
- Early Stages of Youth Advisory Council





Adams 12 High School Students Displaying Their Vape Prevention Campaign Posters

ACHD YOUTH ENGAGEMENT

2024 Timeline

Quarter 1

Hire the Youth Engagement Team

Develop youth focused workplace policies

Quarter 2

Adopt youth focused workplace policies and train Youth Engagement Team

Begin Adams County youth Health Advisory Council (ACYHAC) recruitment

Quarter 3

Formalize ACYHAC and train youth members

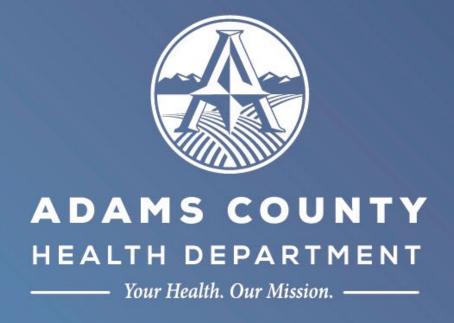
Quarter 4

ACYHAC members will establish an action and evaluation plan focused on Shared Risk & Protective Factors strategies









Thank you!