What Works?

Social and Economic Opportunities to Improve Health for All

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ABOUT CHR&R

This report builds on the data, evidence, guidance, and community stories provided by County Health Rankings & Roadmaps (CHR&R).

- The County Health Rankings bring actionable data to counties across the country each year, serving as a call to action to improve local health.
- What Works for Health provides evidence ratings and summaries for more than 400 policies, programs, and systems changes that communities can use to guide their actions.
- CHR&R's Action Center provides step-by-step guidance and tools to help communities assess their needs, drive local policy and systems changes, and evaluate the impacts of their health improvement efforts.

- CHR&R's Partner Center helps changemakers in all sectors identify how they can connect and leverage their collective power when putting ideas into action.
- CHR&R elevates compelling stories of local leaders and community members who are coming together to create conditions for health and prosperity by transforming neighborhoods, schools, and businesses—so that communities everywhere can thrive.

Creating Healthy and Equitable Communities

How much stronger could our communities be if all of our children attended high quality schools, if everyone earned enough money to afford essentials, and if we all felt connected to our communities, regardless of where we live, the circumstances we are born into, or the color of our skin? When we work together to improve education, employment, income, and family and social supports—the social and economic factors that influence our communities—we can improve the health of all who live, learn, work, and play there.

Creating healthier communities where everyone can thrive and have a voice in the process for creating solutions requires bringing people together to:

- Look at the many factors that influence health,
- Select strategies that can improve everyone's health, and
- Make changes that will have a lasting positive impact.

There is no single strategy that can ensure everyone in a community can be healthier. The County Health Rankings model helps us understand the many factors that influence health, and should be considered in an approach to improving health in a community. Social and economic factors like education and income are not commonly considered when it comes to health, yet strategies to improve these factors can have an even greater impact on health over time than those traditionally associated with health improvement, such as strategies to change behaviors.

This report outlines key steps toward building healthier and more equitable communities and features specific policies and programs that can improve social and economic opportunities and health for all. Policies and programs that are likely to reduce unfair differences in health outcomes are emphasized.

COUNTY HEALTH RANKINGS MODEL

County Health Rankings model © 2014 UWPHI
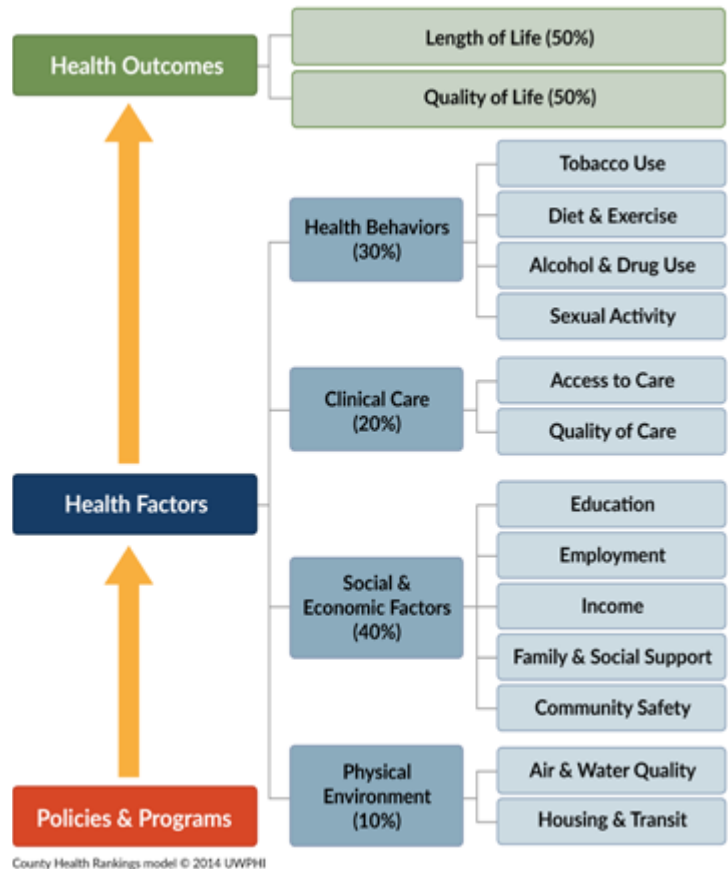
How Can Jobs, Education, and Social Supports Improve Health and Equity?

Health is about more than what happens at the doctor's office—it is influenced by a range of factors. The places where we live, learn, work, and play, the opportunities we have, and the choices we make all matter to our physical, mental, and social well-being. Social and economic opportunities, such as good schools, stable jobs, and strong social networks are foundational to achieving long and healthy lives. These opportunities affect our ability to make healthy choices, afford medical care and housing, and manage stress.

Not everyone has the means and opportunity to be their healthiest. Across the nation, there are meaningful differences in social and economic opportunities for residents in communities that have been cut off from investments or have experienced discrimination. These gaps in opportunities disproportionately affect people of color—especially children and youth.

Policies and practices put in place have marginalized population groups and communities, such as people of color, keeping them from the resources and supports necessary to thrive. Limited access to opportunities creates disparities in health, impacting how well and how long we live. These differences in opportunity can be narrowed, if not eliminated, if we take ongoing, meaningful steps to create more equitable communities.

Here's a closer look at how each of the social and economic factors influence health.

EDUCATION

Individuals with more education live longer, healthier lives than those with less education, and their children are more likely to thrive. This is true even when factors like income are taken into account.

EMPLOYMENT & INCOME

As income increases or decreases, so does health. Employment provides income that shapes choices about housing, education, child care, food, medical care, and more. Employment also often includes benefits that can support healthy lifestyle choices, such as health insurance. Unemployment and under employment limit these choices and the ability to accumulate savings and assets that can help cushion in times of economic distress.

FAMILY & SOCIAL SUPPORT

People with greater social support, less isolation, and greater interpersonal trust live longer and healthier lives than those who are socially isolated. Neighborhoods richer in social connections provide residents with greater access to support and resources than those that are less tightly knit.

Finding Strategies that Work

This report can help you get started on the path to creating healthier, more equitable communities by selecting strategies to improve social and economic factors and remove barriers to opportunity. A good first step is to explore strategies that have worked in other communities or are recommended by experts. With evidence ratings, literature summaries, and implementation resources for more than 400 strategies, What Works for Health (WWFH) is a great place to start.

WWFH offers in-depth information for a variety of policies and programs that can improve the many factors that influence health, including social and economic opportunities, health behaviors, clinical care, and the physical environment. For each policy and program, you will find:

- Beneficial outcomes (i.e., the benefits the strategy has been shown to achieve as well as other outcomes it may affect)

- Key points from relevant literature (e.g., populations affected, key components of successful implementation, cost-related information)

- Implementation examples and resources, toolkits, and other information to help you get started

- An indication of the strategy's likely impact on the gaps or disparities in outcomes among groups of people (e.g., differences among racial, ethnic, or socio-economic groups)

This report outlines some of the policies and programs you will find in WWFH to support local initiatives to:

- Improve educational outcomes
- Increase income and employment
- Build family and social support

These examples emphasize policies and programs that are likely to reduce disparities in health outcomes, and those with strong evidence of effectiveness. To see the full list of strategies in WWFH, go to countyhealthrankings.org/whatworks.

EVIDENCE RATING

WWFH includes six evidence of effectiveness ratings. Each strategy is rated based on the quantity, quality, and findings of relevant research.

Ratings include:

- **Scientifically Supported (SS):** Strategies with this rating are most likely to make a difference. These strategies have been tested in multiple robust studies with consistently positive results.

- **Some Evidence (SE):** Strategies with this rating are likely to work, but further research is needed to confirm effects. These strategies have been tested more than once and results trend positive overall.

- **Expert Opinion (EO):** Strategies with this rating are recommended by credible, impartial experts but have limited research documenting effects; further research, often with stronger designs, is needed to confirm effects.

- **Insufficient Evidence (IE):** Strategies with this rating have limited research documenting effects. These strategies need further research, often with stronger designs, to confirm effects.

- **Mixed Evidence (Mixed):** Strategies with this rating have been tested more than once and results are inconsistent; further research is needed to confirm effects.

- **Evidence of Ineffectiveness (EI):** Strategies with this rating are not good investments. These strategies have been tested in multiple studies with consistently negative or harmful results.
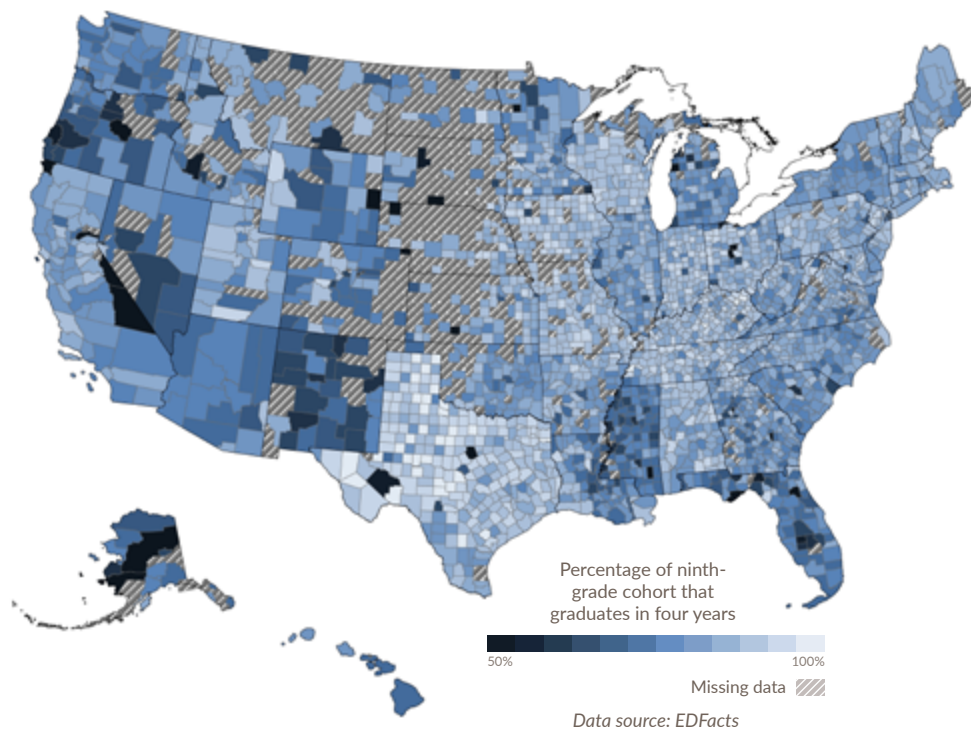
To learn more about WWFH methods and the criteria used to select strategies for inclusion in this report, see page 19.
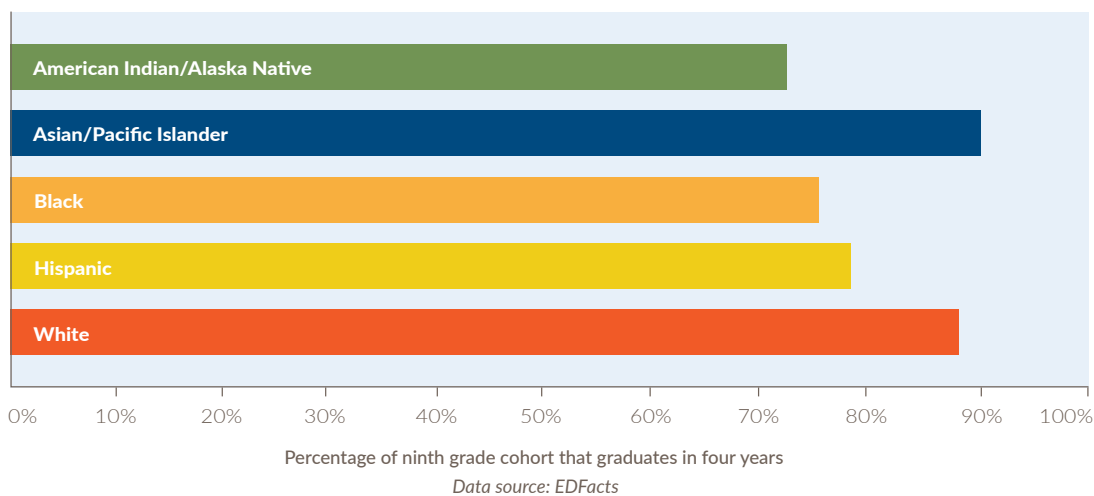
A Look at Education

Individuals with more education live longer, healthier lives than those with less education, and their children are more likely to thrive. This is true even when factors like income are taken into account. Across the U.S., there are large gaps in educational attainment between people who live in the least healthy counties and those in the healthiest counties. Often, for American Indian/Alaskan Native, Black, and Hispanic people, barriers to educational attainment create gaps within communities that are similar, if not greater. Educational institutions, governments, funders and community members can work together to set all children and young adults on a path towards academic and financial success.

HIGH SCHOOL GRADUATION AMONG U.S. COUNTIES, 2014-15

Percentage of ninth-grade cohort that graduates in four years

50%   100%

Missing data

Data source: EDFacts

HIGH SCHOOL GRADUATION BY RACIAL/ETHNIC GROUPS, 2014-15

- American Indian/Alaska Native
- Asian/Pacific Islander
- Black
- Hispanic
- White

Percentage of ninth grade cohort that graduates in four years

Data source: EDFacts

In Spokane, Washington, a 2014 RWJF Culture of Health Prize winner, a multi-pronged effort was launched to raise the science, technology, engineering, and mathematic abilities of students through mentoring, internships, and project-based learning.

WHAT'S WORKING TO IMPROVE EDUCATIONAL OUTCOMES?

Examples of approaches and strategies with strong evidence of effectiveness that communities can implement to improve educational outcomes include:

Increase early childhood education, for example:

- Preschool education programs provide center-based support and learning for young children
- Universal pre-kindergarten provides early education for all 4-year-olds

Improve quality of K-12 education, for example:

- Attendance interventions for chronically absent students include resources and support to address individual, familial, and school-related factors that contribute to poor attendance
- Full-day kindergarten offers early education for 4- to 6-year-olds, every weekday for at least five hours
- Summer learning programs provide continuous learning throughout the year

Increase high school graduation rates, for example:

- Alternative high schools for at-risk students provide an alternative setting for education
- Dropout prevention programs provide supports or undertake environmental changes to help students graduate

Create environments that support learning, for example:

- School breakfast programs offer students a nutritious breakfast at school
- School-based health centers provide attending students health care services on school premises
- School-based social and emotional instruction efforts help kids recognize and manage emotions, set and reach goals, appreciate others' perspectives, and maintain relationships
- School-based violence and bullying prevention programs address students' disruptive and antisocial behavior through skill building
- Trauma-informed schools use a multi-tiered approach to address the needs of trauma-exposed youth

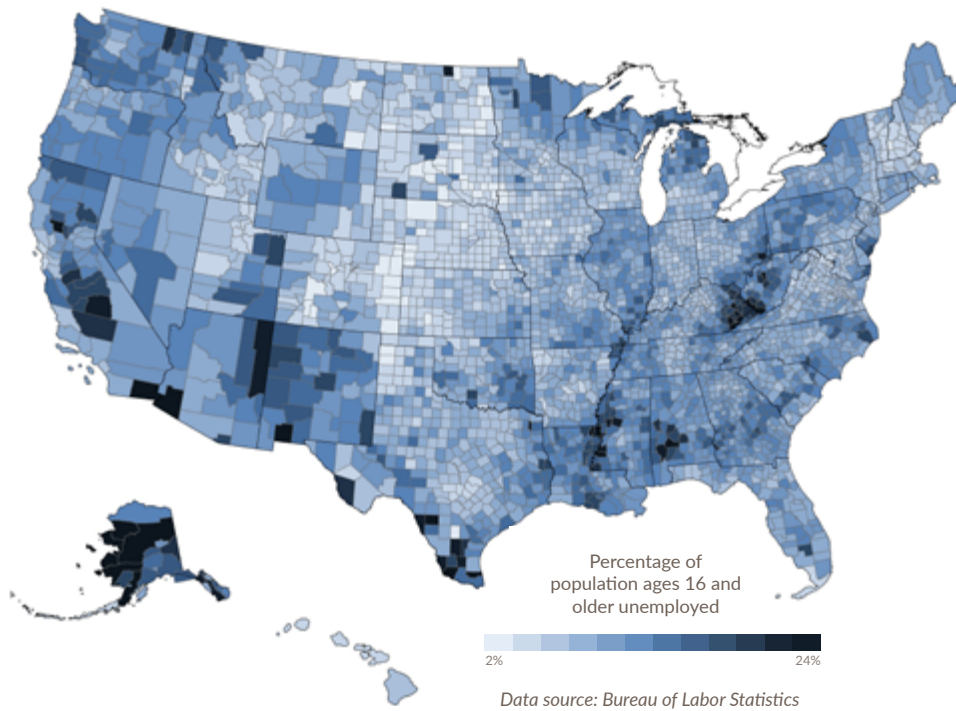## Increase education beyond high school, for example:

- College access programs help underrepresented students prepare academically, complete applications, and enroll
- Health career recruitment for minority students helps train and prepare for careers in health fields

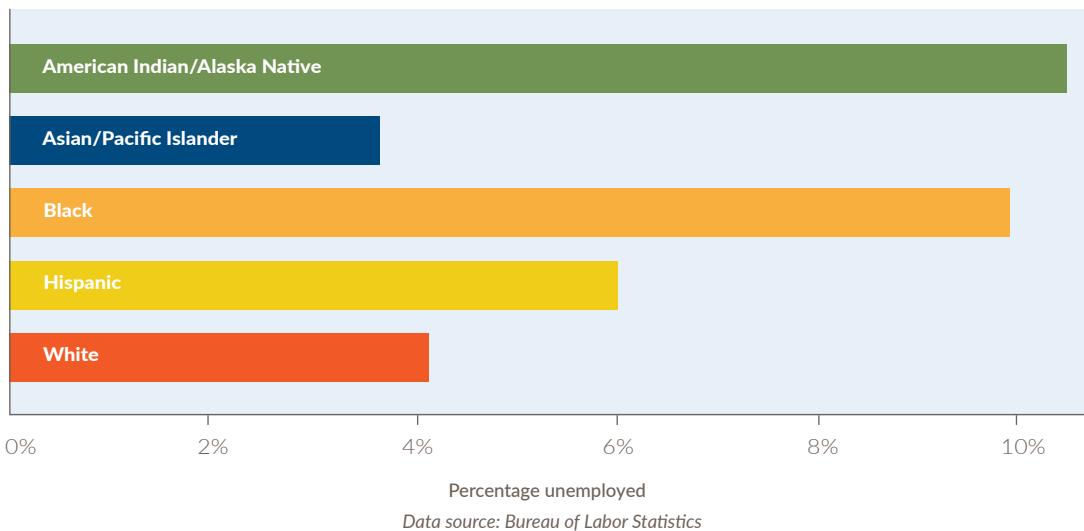**Learn more about these and other strategies on pages 13 and 14.**

A Look at Income and Employment

Employment provides income and, often, benefits—such as paid sick leave—that can support healthy lifestyle choices. Unemployment limits these choices and negatively affects both quality of life and health overall. Across the U.S., there are large gaps in employment and income between people who live in the least healthy counties and those in the healthiest counties. Often, for American Indian/Alaskan Native, Black, and Hispanic people, barriers to opportunities for employment or higher income create gaps within communities that are similar, if not greater. Employers, educational institutions, and community members can work together to increase job skills for residents and enhance local employment opportunities.

UNEMPLOYMENT AMONG U.S. COUNTIES, 2016

Percentage of population ages 16 and older unemployed

2%   24%

Data source: Bureau of Labor Statistics

UNEMPLOYMENT BY RACIAL/ETHNIC GROUPS, 2016

American Indian/Alaska Native

Asian/Pacific Islander

Black

Hispanic

White

0%   2%   4%   6%   8%   10%

Percentage unemployed

Data source: Bureau of Labor Statistics

In Durham County, North Carolina, a 2014 RWJF Culture of Health Prize community, the Holton Career and Resource Center houses a virtual high school with onsite mentoring and a career center that exposes students to careers ranging from cosmetology to computer engineering.

WHAT'S WORKING TO INCREASE INCOME AND EMPLOYMENT?

Examples of approaches and strategies with strong evidence of effectiveness to successfully reach these goals include:

Increase worker employability, for example:

- Adult vocational training programs support acquisition of job-specific skills through education or on-the-job training

- Career pathways and sector-focused employment programs provide occupation-specific training and supportive services in high-growth industries and sectors

- General Education Development (GED) certificate programs help those without a high school diploma achieve a GED

- Transitional jobs establish time-limited, subsidized, paid job opportunities to provide a bridge to unsubsidized employment

Create supportive work environments, for example:

- Paid family leave provides employees with paid time off for circumstances such as birth, adoption, or caring for family member with a serious medical condition

- Paid sick leave laws require employers to provide paid time off for employees when ill or injured

Increase or supplement income, for example:

- Child care subsidies that provide financial assistance to working parents, or parents attending school, to pay for center-based or certified in-home child care

- Expand refundable earned income tax credits for low to moderate income working families and adults

- Living wage laws establish locally-mandated wages that are higher than federal and state minimum wage levels

Support asset development, for example:

- Children's development accounts build savings and assets over time with contributions from family, friends, and supporting organizations

- Matched dollar incentives for saving tax refunds build savings for low or moderate income individuals

Learn more about these and other strategies on page 15.

A Look at Family and Social Support

Social support stems from relationships with family members, friends, colleagues, and acquaintances. Social capital refers to those aspects of society that help us to create beneficial relationships and networks in a community, such as interpersonal trust and civic associations. People with greater social support, less isolation, and greater interpersonal trust live longer and healthier lives than those who are socially isolated. Communities richer in social connections provide residents with greater access to support and resources than those that are less tightly knit. Non-profit organizations, governments, health care, public health and community members can build and sustain partnerships that reflect the diversity of the community and work together to implement strategies that increase social connections and supports.

WAASWAAGANING ANISHINAABEG (LAC DU FLAMBEAU) TRIBE, WI, 2015

In Waaswaaganing Anishinaabeg, a 2015 RWJF Culture of Health Prize community, family support and fostering cross-generational connections are priority through the program Cooking with Grandmas where community elders teach youth the "Ojibwe way."

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WHAT'S WORKING TO BUILD FAMILY AND SOCIAL SUPPORT?

Examples of approaches and strategies with strong evidence of effectiveness that communities can implement to improve social support and connectedness include:

Ensure access to counseling and support, for example:

- Employee Assistance Programs provide confidential worksite-based counseling and referrals to employees to address personal and workplace challenges

- Mental Health First Aid provides an 8- or 12-hour training to educate laypeople about how to assist individuals with, or at risk for, mental health problems

- Social service integration efforts coordinate access to services across multiple delivery systems

Increase social connectedness, for example:

- Extracurricular activities for social engagement offer social, art, or physical activities for school-aged youth outside of the school day

- Intergenerational mentoring establishes relationships between older adults and children or adolescents

- Youth peer mentoring establishes ongoing relationships between an older youth or young adult and a younger child or adolescent

Build social capital within communities, for example:

- Community centers facilitate local residents' efforts to socialize, participate in recreational or educational activities, gain information, and seek support services

- Trauma-informed approaches to community building support and strengthen traumatized and distressed residents and address effects of trauma

Build social capital within families, for example:

- Early childhood home visiting programs provide expectant parents and families with young children with information, support, and training

- Father involvement programs support fathers' active involvement in child rearing via various father- or family- focused interventions

Learn more about these and other strategies on page 16.

Perhaps no other innovation embodies what is taking place in Waaswaaganing Anishinaabeg (Lac du Flambeau), a 2015 RWJF Culture of Health Prize community, better than Envision. Though still in its infancy, this youth-driven learning program bridges generations while conveying life skills that do not fit neatly into any academic category. Envision immerses middle school students in the Ojibwe culture. Using traditional tribal methodologies, youth considered at risk are redirected, often with the gentle guidance of community leaders and elders.

Choosing the Right Strategy for Your Community

This report provides examples of strategies that have been shown to make a difference in improving social and economic factors, especially for those who face barriers to opportunity. Visit **What Works for Health** to learn more about the specific outcomes and health factors each strategy has been shown to affect, and the decision makers who can help move it forward. This will help you develop your own short list of potential strategies.

As you explore strategies that may be a good fit for your community, be sure to:

1. **Consider the context:** Strategies, even those that are rated Scientifically Supported, may not be right for every community. To evaluate whether a strategy might work where you are, ask yourself:
   - Is the strategy a good fit for our community and our partners?
   - Have we included those most affected by poor health or poor social and economic conditions in choosing the strategy?
   - Is our community ready and able to support our chosen strategy? Do we have what we need to implement and evaluate the strategy?
   - Does our community's political environment support our strategy?

2. **Consider the community:** Communities are not always ready for change. It's important to consider your community's unique makeup, characteristics, and culture. Involving community residents along the way can help build support for change.

3. **Consider your stakeholders:** Stakeholders are people who care about your issue. Often when we think of the political environment, we think of key decision makers. They're important, but it is equally important to consider all stakeholder groups, including:
   - *The public.* All those with vested interests. This might include community residents (particularly those who face barriers to opportunity and good health), advocacy groups, non-profit agencies, and businesses.
   - *Specific political stakeholders.* Those who have the power to give you what you want, including elected and appointed officials or lobbying groups.
   - *Implementers.* Those tasked with making the strategy work, such as administrators. This is an important group – a strategy only works when it's implemented or enforced.

4. **Select the best strategy:** As you make your selection, consider a balance of strategies. Start with short-term strategies that give you early wins. At the same time, lay the groundwork for strategies that have a longer-term impact.
   - Generate a list of your top choices. (This is a good time to look back at WWFH)
   - Check your inclusiveness — have you engaged those most impacted by the issue?
   - Choose a strategy — pull together what you know about your top choices, their impact, and your community to make a decision.

5. **Consider whether to adapt the strategy:** Policies and programs may not be a fit for your community straight "out of the box." You may need to adjust the strategy to fit your community's needs. If you do, be ready to conduct more rigorous evaluation to make sure it is working as intended.

Now what? Once you have decided what you want to do, the next step is to make it happen. CHR&R's guide to **Act on What's Important** can help your community build on strengths, leverage available resources, and respond to unique needs.

Learn More about Social and Economic Strategies

The tables on the following pages provide more detail on strategies that can improve the social and economic factors that influence our communities. For each strategy, you will find an evidence rating (e.g., Scientifically Supported, Some Evidence) and decision makers who can help move the strategy forward. WWFH is updated regularly. Visit our website to see the most current listings and learn more about these and other strategies that can make a difference in your community: **countyhealthrankings.org/whatworks**.

EDUCATION Evidence ratings: Scientifically Supported **(SS)**; Some Evidence **(SE)**; Expert Opinion **(EO)**	Evidence Rating	Decision Maker								
		Community Development	Community Members	Educators	Business	Government	Funders	Health Care	Nonprofits	Public Health
Increase early childhood education										
Preschool & child care quality rating and improvement systems: Support quality improvement efforts in early child care and preschool via financial incentives, standards, processes to monitor standards and ensure compliance, etc.	SE		✔	✔		✔				
Preschool education programs: Provide center-based programs that support cognitive and social-emotional growth among children who are not old enough to enter formal schooling	SS		✔	✔		✔				
Preschool programs with family support services: Provide center-based programs that support cognitive and social-emotional growth among young children from low income families, with supports such as home visiting or parental skills training	SS			✔		✔			✔	
Universal pre-kindergarten: Provide pre-kindergarten (pre-K) education to all 4-year-olds, regardless of family income	SS			✔		✔				
Improve quality of K-12 education										
Attendance interventions for chronically absent students: Support interventions that provide chronically absent students with resources to improve self-esteem, social skills, etc. and address familial- and school-related factors that can contribute to poor attendance	SS			✔		✔	✔		✔	
Full-day kindergarten: Offer kindergarten programs for 4 to 6-year-old children, five days per week for at least five hours per day	SS			✔		✔				
Summer learning programs: Provide academic instruction to students during the summer, often along with enrichment activities such as art or outdoor activities	SS			✔					✔	
Technology-enhanced classroom instruction: Incorporate technology into classroom instruction via computer-assisted instruction programs, computer-managed learning programs, use of interactive white boards, etc.	SS			✔		✔				

EDUCATION — Evidence ratings: Scientifically Supported **(SS)**; Some Evidence **(SE)**; Expert Opinion **(EO)**	Evidence Rating	Decision Maker								
		Community Development	Community Members	Educators	Business	Government	Funders	Health Care	Nonprofits	Public Health
Create environments that support learning										
School-based health centers: Provide health care services on school premises to attending elementary, middle, and high school students; services provided by teams of nurses, nurse practitioners, and physicians	SS			✔		✔	✔	✔		
School-based social and emotional instruction: Implement focused efforts to help children recognize and manage emotions, set and reach goals, appreciate others' perspectives, and maintain relationships; also called social and emotional learning (SEL)	SS			✔						
School-based trauma counseling: Help students process trauma exposure and develop coping skills through individual or small group counseling with mental health professionals or school staff with trauma-specific training	SE			✔		✔				
School-based violence & bullying prevention programs: Address students' disruptive and antisocial behavior by teaching self-awareness, emotional self-control, self-esteem, social problem solving, conflict resolution, team work, social skills, etc.	SS			✔			✔			
School breakfast programs: Support programs to provide students with a nutritious breakfast in the cafeteria, from grab-and-go carts in hallways, or in classrooms	SS			✔		✔	✔			
Trauma-informed schools: Adopt a multi-tiered approach within schools to address the needs of trauma-exposed youth, including school-wide changes, screenings, and individual intensive support	SE			✔		✔				
Universal school-based suicide awareness & education programs: Deliver a curriculum-based program that helps all students learn to recognize warning signs of suicide in themselves and others in a school setting	SE			✔			✔			
Increase high school graduation rates										
Alternative high schools for at risk students: Provide educational and social services in an alternative setting for students at risk of dropping out of traditional high schools	SS			✔		✔			✔	
Career & technical education for high school graduation: Provide career and technical education (CTE) as an integrated part of an academic curriculum for students at risk of dropping out of high school; also called vocational training	SS			✔		✔			✔	
Dropout prevention programs: Provide supports such as mentoring, counseling, or vocational training, or undertake school environment changes to help students complete high school	SS			✔			✔		✔	
Dropout prevention programs for teen mothers: Provide teen mothers with services such as remedial education, vocational training, case management, health care, child care, and transportation assistance to support high school completion	SS		✔	✔		✔	✔	✔		
Increase education beyond high school										
Bridge programs for hard-to-employ adults: Provide basic skills (e.g., reading, math, writing, English language, or soft skills) and industry-specific training with other supports; often incorporated in career pathway programs	EO			✔	✔	✔			✔	
College access programs: Help underrepresented students prepare academically for college, complete applications, and enroll, especially first-generation applicants and students from low-income families	SS			✔		✔	✔		✔	
Health career recruitment for minority students: Recruit and train minority students for careers in health fields via information about health careers, classes, practicum experiences, advising about college or medical school admissions, etc.	SS			✔		✔				

INCOME AND EMPLOYMENT Evidence ratings: Scientifically Supported **(SS)**; Some Evidence **(SE)**; Expert Opinion **(EO)**	Evidence Rating	Decision Maker								
		Community Development	Community Members	Educators	Business	Government	Funders	Health Care	Nonprofits	Public Health
Increase worker employability										
Adult vocational training: Support acquisition of job-specific skills through education, certification programs, or on-the-job training, often with personal development resources and other supports	SS			✔	✔	✔			✔	
Career pathways and sector-focused employment: Provide occupation-specific training in high-growth industries and sectors, combining education and supportive services, usually with stackable credentials and work experience	SE			✔	✔	✔			✔	
Certificates of employability: Issue certificates of employability to individuals with criminal convictions who have met pre-specified standards of rehabilitation; also called certificates of relief, reentry, good conduct, rehabilitation, recovery, etc.	EO					✔				
GED certificate programs: Implement programs that help individuals without a high school diploma or its equivalent achieve a General Education Development (GED) certificate	SE			✔		✔			✔	
Transitional jobs: Establish time-limited, subsidized, paid job opportunities to provide a bridge to unsubsidized employment	SS				✔	✔			✔	
Create supportive work environments										
Flexible scheduling: Offer employees control over an aspect of their schedule through arrangements such as flex time, flex hours, compressed work weeks, or self-scheduled shift work	SS					✔				
Paid family leave: Provide employees with paid time off for circumstances such as a recent birth or adoption, a parent or spouse with a serious medical condition, or a sick child	SS				✔	✔				
Paid sick leave laws: Require employers in an affected jurisdiction to provide paid time off for employees to use when ill or injured	SE	✔			✔	✔				
Increase or supplement income										
Child care subsidies: Provide financial assistance to working parents, or parents attending school, to pay for center-based or certified in-home child care	SS					✔	✔		✔	
Earned Income Tax Credit: Expand refundable earned income tax credits for low to moderate income working individuals and families	SS					✔				
Living wage laws: Establish locally or state mandated wages that are higher than federal minimum wage levels	SE					✔				
Unemployment insurance: Extend or raise the compensation provided to eligible, unemployed workers looking for jobs	SE					✔				
Support asset development										
Child development accounts: Establish dedicated child development accounts (CDAs) to build assets over time with contributions from family, friends, and sometimes, supporting organizations; also called children's savings accounts (CSAs)	EO		✔			✔	✔		✔	
Matched dollar incentives for saving tax refunds: Support programs that provide matched dollar incentives for low or moderate income individuals to place some or all of their tax refund in a savings account	SE					✔			✔	

FAMILY AND SOCIAL SUPPORT

Evidence ratings: Scientifically Supported **(SS)**; Some Evidence **(SE)**; Expert Opinion **(EO)**

	Evidence Rating	Decision Maker								
		Community Development	Community Members	Educators	Business	Government	Funders	Health Care	Nonprofits	Public Health
Ensure access to counseling and support										
Crisis lines: Provide free and confidential counseling and service referrals via telephone-based conversation, web-based chat, or text message to individuals in crisis, particularly those with severe mental health concerns	SE					✔		✔	✔	✔
Employee Assistance Programs: Provide confidential worksite-based counseling and referrals to employees to address personal and workplace challenges	SE				✔	✔		✔		
Mental Health First Aid: Provide an 8- or 12-hour training to educate laypeople about how to assist individuals with mental health problems or at risk for problems such as depression, anxiety, or substance use disorders	SE		✔	✔	✔			✔	✔	✔
Social service integration: Coordinate access to services across delivery systems and disciplinary boundaries (e.g., housing, disability, physical health, mental health, child welfare, workforce services, etc.)	EO					✔			✔	✔
Increase social connectedness										
Activity programs for older adults: Offer group educational, social, or physical activities that promote social interactions, regular attendance, and community involvement among older adults	SS					✔		✔	✔	
Extracurricular activities for social engagement: Support organized social, art, or physical activities for school-aged youth outside of the school day	SS			✔		✔			✔	
Intergenerational mentoring: Establish a relationship between an older adult and an at-risk child or adolescent; programs are often based in schools, community centers, or faith-based organizations	EO			✔	✔			✔	✔	
Youth peer mentoring: Establish an ongoing relationship between an older youth or young adult and a younger child or adolescent, usually an elementary or middle school student; also called cross-age peer mentoring	SE		✔	✔		✔			✔	
Build social capital within communities										
Community centers: Support community venues that facilitate local residents' efforts to socialize, participate in recreational or educational activities, gain information, and seek counseling or support services	EO	✔				✔	✔		✔	
Social media for civic participation: Support individual and group use of internet-based tools to receive news, communicate or share information, collaborate on ideas, mobilize networks, and make collective decisions	SE			✔		✔			✔	
Trauma-informed approaches to community building: Support and strengthen traumatized and distressed residents and communities, and address effects of trauma (e.g., violence, poverty, homelessness, social isolation, racism, etc.) via a comprehensive, multi-stakeholder approach	EO					✔			✔	
Build social capital within families										
Early childhood home visiting programs: Provide at-risk expectant parents and families with young children with information, support, and training regarding child health, development, and care from prenatal stages through early childhood via trained home visitors	SS					✔	✔	✔	✔	✔
Father involvement programs: Support fathers' active involvement in child rearing via various father-focused or family-focused interventions	SE					✔	✔		✔	✔
Group-based parenting programs: Teach parenting skills in a group setting using a standardized curriculum, often based on behavioral or cognitive-behavioral approaches and focused on parents of at-risk children	SS					✔		✔	✔	✔

Moving to Action

Having trouble getting started? This may be a good time to ask some simple questions that can guide the next steps of your work. You and your partners can begin by:

Defining your goal:

Ask yourself: What do you want? Why do you want it? Who can make it happen?[1]

WHAT DO YOU WANT?

Think about what you would like to change.

- What are the barriers to social or economic opportunities in your community that you would like to address?
- What specific strategy would you like to implement to address those barriers?

WHY DO YOU WANT IT?

Think about the data and the strategies already in place.

- What does the data show about the barriers and strategy you have selected?
- What are the benefits and challenges to making these changes? And who might be most affected by the potential positives or negatives?

WHO CAN MAKE IT HAPPEN?

Think about who has the influence to do what you want to accomplish.

- Who in your community has decision-making power and influence in shaping opportunity for quality education, good jobs, or family and social supports and specifically for the strategy you want to implement?
- How can you grow the influence of those you are working with and those most impacted by the issues?

1   Reference: Power Prism® - Answering the Three Key Questions, M+R Strategic Services New England Office, www.powerprism.org

In the Columbia Gorge region, a 2016 RWJF Culture of Health Prize winner, community health workers connect residents to helpful services and resources as well as provide parenting support and education.

COLUMBIA GORGE REGION, OR & WA, 2016

Making Change

The way we go about making change in our community matters. Putting policies and systems in place that create social and economic opportunity for all requires attention to who may benefit or be harmed, and consideration of long-term implications. Be sure to:

- **Engage a variety of stakeholders.** Harnessing the collective power of local leaders, partners, and community members—including those who experience poor conditions for good health—is key to making change. Ensuring that everyone has a say in your community health improvement work can help to close gaps in health outcomes and improve health for all.

- **Build strategic partnerships.** Building meaningful connections across organizations and networks that care about health and equity can strengthen the capacity within your community to make change and support short- and long-term wins. Visit CHR&R's Partner Center to help you identify and engage the right partners.

- **Communicate.** Consider how you will get your most important messages to the people who influence your goals. What you say and how you say it can motivate people to take action when you need it.

Visit CHR&R's Action Center to find step-by-step guidance and tools to help assess your needs, drive local policy and systems changes, and evaluate the impacts of health improvement efforts.
countyhealthrankings.org/action-center

Technical Notes and Glossary of Terms

What is health equity? What are health disparities? And how do they relate?

Health equity means that everyone has a fair and just opportunity to be as healthy as possible. This requires removing obstacles to health, such as poverty and discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care.

Health disparities are differences in health or in the key determinants of health—such as education, safe housing, and discrimination—which adversely affect marginalized or excluded groups.

Health equity and health disparities are closely related to each other. Health equity is the ethical and human rights principle or value that motivates us to eliminate health disparities. Reducing and ultimately eliminating disparities in health and determinants of health is how we measure progress toward achieving health equity.

Braveman P, Arkin E, Orleans T, Proctor D, and Plough A. What is Health Equity? And What Difference Does a Definition Make? Robert Wood Johnson Foundation. May 2017

How did we select strategies to include in this report?

We selected strategies from the Social and Economic Factors section of What Works for Health based on those assigned the highest evidence of effectiveness ratings: Scientifically Supported, Some Evidence, and Expert Opinion (see page 5 for definitions). The availability of evidence about the effectiveness of strategies varies by topic. For example, there is much stronger evidence about the effectiveness of educational interventions than for employment and income-related interventions.

Among this set of strategies, preference was given to those where there is scientific support (with consistently favorable results in robust studies) and favorable disparity ratings (see below). Preference was also given to broader strategies versus specific named programs, programs that can be implemented locally, and those that can be described and understood easily. The report also sought a balance in representation across the different approaches to improving social and economic opportunity, such as increasing early childhood education and increasing high school graduation. This report reflects content as of August 14, 2018.

WWFH Disparity Ratings

As WWFH evidence analysts review the available evidence on individual strategies, they assess each strategy's likely effect on racial/ethnic, socioeconomic, and geographic disparities based on the best available evidence related to disparities in health outcomes and the strategy's characteristics (e.g., target population, mode of delivery, cultural considerations). Strategies are rated:

- Likely to decrease disparities
- No impact on disparities likely
- Likely to increase disparities

Strategies that are likely to reduce differences in health outcomes (i.e., close a gap) are rated 'Likely to decrease disparities,' while strategies likely to increase differences are rated 'Likely to increase disparities.' Strategies that generally benefit entire populations are rated 'No impact on disparities likely.'

To learn more about evidence analysis methods and evidence-informed strategies that can improve health for all, visit What Works for Health: **countyhealthrankings.org/whatworks.**

Credits

RECOMMENDED CITATION

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Photo on cover: ALGOMA, WI, 2017
In Algoma, Wisconsin, a 2017 RWJF Culture of Health Prize community, local businesses are joining forces with Algoma High School's Wolf Tech training center to help prepare more students for careers in technology driven manufacturing. Students also share their skills with community members through the Community Fab Lab.

County Health Rankings & Roadmaps
Building a Culture of Health, County by County