

Mobilizing for Action through Planning and Partnerships (MAPP)

Forces of Change Assessment Final Report

Retreat Date: October 26th, 2018



“A healthy Nashville has a culture of well-being, where all people belong, thrive and prosper.”

MAPP Vision Statement
2018

Introduction

Nashville is using the Mobilizing for Action through Planning and Partnerships (MAPP) community health assessment process as the framework for convening a large variety of organizations, groups, and individuals that comprise the local public health system in order to create and implement a community health improvement plan. MAPP utilizes four assessments, which serve as the foundation for achieving improved community health. They are:

- Community Health Status Assessment
- Community Themes and Strengths Assessment
- Forces of Change Assessment, and
- Local Public Health System Assessment

The purpose of the Forces of Change Assessment is to identify forces – such as trends, factors, or events – that have the potential to impact the health and quality of life of the community and the work of the local public health system. The following are examples of trends, forces and events:

- Trends – Patterns over time, such as migration in and out of the community or growing disillusionment with government
- Factors – Discrete elements, such as a community’s large ethnic population, an urban setting, or proximity to a major waterway
- Events – One time occurrences, such as a hospital closure, a natural disaster, or the passage of new legislation

Methodology

The Forces of Change Assessment took place on October 26, 2018 at the Matthew Walker Comprehensive Health Center in Nashville. A facilitated consensus building process (Technology of Participation) was used to generate answers to the following question: “What is occurring or might occur that affects the health of our community or local public health system?”.

Twenty diverse stakeholders, representing the Nashville Chamber of Commerce, Metro Nashville Planning Department, Metro Transit Authority, Juvenile Justice Center, Metro Public Health Department, Metro IT, Greater Nashville Regional Council, Ascension-St. Thomas Health System, federally-qualified health centers, non-profit organizations and others, convened at the Nashville Matthew Walker Community Health Center on Friday, October 26th, 2018.

Facilitators led the process by:

1. Leading the participants through a data review of existing local indicators related to Forces of Change;
2. Asking participants to brainstorm individually and list forces;
3. Asking participants to consolidate forces by prioritization in groups of 4-6.

Participants brainstormed trends, factors, and events, organizing them into common themes and then providing an overarching ‘force’ for each of the category columns. During the consensus

workshop, participants were charged with answering the second assessment question: “What specific threats or opportunities are generated by these occurrences?” Participants generated threats and opportunities for all the ideas within each force of change category.

The results of this assessment will help to form priority areas for Nashville’s 2020-2022 Community Health Improvement Plan (CHIP).

Results

Institutional Racism

<p style="text-align: center;"><u>Threats Posed</u></p> <ul style="list-style-type: none"> • Disintegration of society • Decreased access to resources • Increased displacement • Increased reverse labeling • It is ingrained nature • Poor health outcomes • Inequity of opportunity 	<p style="text-align: center;"><u>Opportunities Created</u></p> <ul style="list-style-type: none"> • To recognize and accept it is real • To eliminate it • To raise consciousness among institutions
<p style="text-align: center;"><u>Recommendations (to prepare for/mitigate threats or leverage/maximize opportunities)</u></p> <ul style="list-style-type: none"> • Examine and share data • Consensus building around the fact of it • Policy changes (equity) based on data 	<p style="text-align: center;"><u>Partnerships (Stakeholders to include when planning for force)</u></p> <ul style="list-style-type: none"> • Affected communities • Government • Churches • Academia • Everyone

Fragmented Safety Net

<p style="text-align: center;"><u>Threats Posed</u></p> <ul style="list-style-type: none"> • Disease, death, injury • Inefficient expenditure of limited resources 	<p style="text-align: center;"><u>Opportunities Created</u></p> <ul style="list-style-type: none"> • Strategic/systems approach • Examine money streams • Increase personal health behaviors
<p style="text-align: center;"><u>Recommendations (to prepare for/mitigate threats or leverage/maximize opportunities)</u></p> <ul style="list-style-type: none"> • Expand Medicaid • Model of care for community • Approach it strategically 	<p style="text-align: center;"><u>Partnerships (Stakeholders to include when planning for force)</u></p> <ul style="list-style-type: none"> • Safety Net consortium • Metro/NGH • Universities • Community members

Technological Displacement

<u>Threats Posed</u>	<u>Opportunities Created</u>
<ul style="list-style-type: none"> • Loss of jobs 	<ul style="list-style-type: none"> • Create a new labor force for new technologically driven jobs
<u>Recommendations (to prepare for/mitigate threats or leverage/maximize opportunities)</u>	<u>Partnerships (Stakeholders to include when planning for force)</u>
<ul style="list-style-type: none"> • Train /retrain for emergency roles (youth and adults) • Monitor/forecast trends to prepare workforce 	<ul style="list-style-type: none"> • Create more public/private partnerships to create job opportunities for high school graduates

Cyber Attack

<u>Threats Posed</u>	<u>Opportunities Created</u>
<ul style="list-style-type: none"> • System failures (unanticipated) • Massive financial recovery • Public safety • Increase in crime 	<ul style="list-style-type: none"> • Opportunity to build better system
<u>Recommendations (to prepare for/mitigate threats or leverage/maximize opportunities)</u>	<u>Partnerships (Stakeholders to include when planning for force)</u>
<ul style="list-style-type: none"> • Plan for redundancy • Create a body to review/develop a plan 	<ul style="list-style-type: none"> • IT community

Disease Outbreak

<u>Threats Posed</u>	<u>Opportunities Created</u>
<ul style="list-style-type: none"> • Mass morbidity/mass casualties • Strain on existing resources • Lack of existing/sufficient resources 	<ul style="list-style-type: none"> • Create more jobs of emergency preparedness • New lessons learned from emergency • Collaborations

<p><u>Recommendations (to prepare for/mitigate threats or leverage/maximize opportunities)</u></p> <ul style="list-style-type: none"> • Increased access to vaccination • Increased surveillance • Audit existing systems 	<p><u>Partnerships (Stakeholders to include when planning for force)</u></p> <ul style="list-style-type: none"> • Health Department • Healthcare system • First responders
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Insufficient Transportation

<p><u>Threats Posed</u></p> <ul style="list-style-type: none"> • Access to job opportunities • Increased stress of traffic • Climate-emissions • Increased obesity/sedentary 	<p><u>Opportunities Created</u></p> <ul style="list-style-type: none"> • Multi-modal/alternative transportation • Green space • Less emissions, driverless cars • Decreased need for parking
<p><u>Recommendations (to prepare for/mitigate threats or leverage/maximize opportunities)</u></p> <ul style="list-style-type: none"> • Mass transit • Political will • Technological advances • Complete streets • Increased awareness/messaging about alternative transit • Promote telecommuting 	<p><u>Partnerships (Stakeholders to include when planning for force)</u></p> <ul style="list-style-type: none"> • More public and private partnerships

Budget Incongruent with Growth (Tax Base)

<p><u>Threats Posed</u></p> <ul style="list-style-type: none"> • Lack of services/cut services • Poor services/infrastructure • City bankruptcy • Workforce recruitment 	<p><u>Opportunities Created</u></p> <ul style="list-style-type: none"> • Increased taxes • Improved services
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<p><u>Recommendations (to prepare for/mitigate threats or leverage/maximize opportunities)</u></p> <ul style="list-style-type: none"> • Be a good steward of the budget • Increase messaging of urban vs. rural services (ex. Gulch paying for services across county) • Increase and diversify taxes/tax base • Change false assumptions about government waste 	<p><u>Partnerships (Stakeholders to include when planning for force)</u></p>
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Threats to Immigrants

<p><u>Threats Posed</u></p> <ul style="list-style-type: none"> • Lack of healthcare • Marginalization • Isolation • Mistrust of systems, i.e. banking, healthcare • Target for violence • Toxic stress 	<p><u>Opportunities Created</u></p> <p>iversity of thought</p>
<p><u>Recommendations (to prepare for/mitigate threats or leverage/maximize opportunities)</u></p> <ul style="list-style-type: none"> • Education-diversity training • Create community/social connection • Planned community response to ICE raid 	<p><u>Partnerships (Stakeholders to include when planning for force)</u></p> <ul style="list-style-type: none"> • Local politicians to connect to resources

Affordable Care Act Policy Changes

<p><u>Threats Posed</u></p> <ul style="list-style-type: none"> • Discrimination due to pre-existing conditions • Decrease access to coverage • Increased cost of insurance 	<p><u>Opportunities Created</u></p> <ul style="list-style-type: none"> • Affordable/connected service • Increase access to coverage • Decrease insurance cost
<p><u>Recommendations (to prepare for/mitigate threats or leverage/maximize opportunities)</u></p> <ul style="list-style-type: none"> • Increase safety net services • Alignment between services • Awareness/ managing of services 	<p><u>Partnerships (Stakeholders to include when planning for force)</u></p> <ul style="list-style-type: none"> • More public and private partnerships

Lack of Affordable Healthcare

<p style="text-align: center;"><u>Threats Posed</u></p> <ul style="list-style-type: none"> • Continued chronic disease • Death • Poor health • Access • Lack of prevention 	<p style="text-align: center;"><u>Opportunities Created</u></p> <ul style="list-style-type: none"> • Increased longevity • Increased prevention • Increased access
<p style="text-align: center;"><u>Recommendations (to prepare for/mitigate threats or leverage/maximize opportunities)</u></p> <ul style="list-style-type: none"> • Lower healthcare costs • Encourage private business to offer more coverage 	<p style="text-align: center;"><u>Partnerships (Stakeholders to include when planning for force)</u></p> <ul style="list-style-type: none"> • More public and private partnerships

Impact of Social Media

<p style="text-align: center;"><u>Threats Posed</u></p> <ul style="list-style-type: none"> • Bullying • Increased isolation • Increased withdrawal • Addiction to social media • Accessing inappropriate sites • Health risks 	<p style="text-align: center;"><u>Opportunities Created</u></p> <ul style="list-style-type: none"> • Anti-bullying campaigns • Positive Social Media • Can access positive support groups
<p style="text-align: center;"><u>Recommendations (to prepare for/mitigate threats or leverage/maximize opportunities)</u></p> <ul style="list-style-type: none"> • Anti-bullying campaigns • Positive Social Media • Can access positive support groups 	<p style="text-align: center;"><u>Partnerships (Stakeholders to include when planning for force)</u></p> <ul style="list-style-type: none"> • Schools • Public/private partnerships • Non-profit organizations • Corporations

Increased hate crimes

<p style="text-align: center;"><u>Threats Posed</u></p> <ul style="list-style-type: none"> • Death and injury • Increased marginalization • Increased psychological damage • Increased polarization 	<p style="text-align: center;"><u>Opportunities Created</u></p> <ul style="list-style-type: none"> • Conversation • Looking for root causes • Opportunity for consensus building • Opportunity to be more inclusive
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<p><u>Recommendations (to prepare for/mitigate threats or leverage/maximize opportunities)</u></p> <ul style="list-style-type: none"> • Community engagement • Clear definition of hate crime • Increase consciousness around the issue • Increase access to mental health services • Increase level of moral consciousness (God) 	<p><u>Partnerships (Stakeholders to include when planning for force)</u></p> <ul style="list-style-type: none"> • Churches/temples/religious community • Include all stakeholders, including hate groups • Government/non-governmental organizations • Victims and perpetrators
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Increased Psychological Trauma

<p><u>Threats Posed</u></p> <ul style="list-style-type: none"> • Institutional stress (hospitals/jails, etc.) • Increased cost • Decreased productivity • Disintegration of society • Isolation • Suicide/injury • Increased ACEs and all implications • Increased chronic disease 	<p><u>Opportunities Created</u></p> <ul style="list-style-type: none"> • Increase opportunity for collective impact response • Increase consciousness with in public to gather more resources
<p><u>Recommendations (to prepare for/mitigate threats or leverage/maximize opportunities)</u></p> <ul style="list-style-type: none"> • ID early • Collective impact response 	<p><u>Partnerships (Stakeholders to include when planning for force)</u></p> <ul style="list-style-type: none"> • ACE Nashville • People living the experience • MNPS/MPHD/Justice System/Mental health services/early childhood organizations • Pediatricians/health care providers (include training)

Institutional Racism

<p><u>Threats Posed</u></p> <ul style="list-style-type: none"> • Disintegration of the society • Increase incarceration • Decrease access to resources • Increase displacement • Increase reverse labeling • Its ingrained nature • Poor health outcomes • Inequity of opportunities 	<p><u>Opportunities Created</u></p> <ul style="list-style-type: none"> • To recognize and accept it is real • To eliminate it • To raise consciousness among institutions
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<p><u>Recommendations (to prepare for/mitigate threats or leverage/maximize opportunities)</u></p> <ul style="list-style-type: none"> • Examine and share data • Consensus building around the fact of it • Policy changes (equity) based on data 	<p><u>Partnerships (Stakeholders to include when planning for force)</u></p> <ul style="list-style-type: none"> • Affected communities • Government • Churches • Academia • Everyone
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Fragmented Safety Net

<p><u>Threats Posed</u></p> <ul style="list-style-type: none"> • Disease, death, injury • Inefficient expenditure of limited resources 	<p><u>Opportunities Created</u></p> <ul style="list-style-type: none"> • Strategic/systems approach • Examine funding streams • Increase personal health behaviors
<p><u>Recommendations (to prepare for/mitigate threats or leverage/maximize opportunities)</u></p> <ul style="list-style-type: none"> • Expand Medicaid • Model of Care for community • Approach it strategically 	<p><u>Partnerships (Stakeholders to include when planning for force)</u></p> <ul style="list-style-type: none"> • Safety Net Consortium • Metro/ NGH • Universities • Community Members

Pronounced Poverty

<p><u>Threats Posed</u></p> <ul style="list-style-type: none"> • Disintegration of society • Unnecessary and avoidable suffering 	<p><u>Opportunities Created</u></p> <ul style="list-style-type: none"> • To create a more just and equitable society
<p><u>Recommendations (to prepare for/mitigate threats or leverage/maximize opportunities)</u></p> <ul style="list-style-type: none"> • Education • Employment opportunities • Policy change to address 	<p><u>Partnerships (Stakeholders to include when planning for force)</u></p> <ul style="list-style-type: none"> • Everyone

Hazardous Materials Release

<p style="text-align: center;"><u>Threats Posed</u></p> <ul style="list-style-type: none"> • Trucks & Trains carrying hazardous waste through Nashville • Water treatment hazards • Domestic terrorist attacks • Accidents can happen at anytime • Local facilities that store hazardous materials 	<p style="text-align: center;"><u>Opportunities Created</u></p> <ul style="list-style-type: none"> • Increase capacity to handle disasters <ul style="list-style-type: none"> ○ Drills, training and prep on a community-wide level • Increase public notification methods and education about response (public)
<p style="text-align: center;"><u>Recommendations (to prepare for/mitigate threats or leverage/maximize opportunities)</u></p> <ul style="list-style-type: none"> • Central command center (OEM) improve preparedness and response planning • Ensure first responders are trained • Better federal law to navigate private operators (CSX train) and city/state laws 	<p style="text-align: center;"><u>Partnerships (Stakeholders to include when planning for force)</u></p> <ul style="list-style-type: none"> • OEM • Public Safety (Police/Fire) • Health Dept. • Public Works • Media (print & electronic) • Environmental agencies (including local/state/federal/advocates)

Lack of mental health resources/substance abuse

<p style="text-align: center;"><u>Threats Posed</u></p> <ul style="list-style-type: none"> • People with mental health disease are treated as criminals • People with mental health conditions don't seek medical treatment for any and all conditions • Increased substance abuse 	<p style="text-align: center;"><u>Opportunities Created</u></p> <ul style="list-style-type: none"> • Destigmatize mental health • Decriminalize mental health diagnoses • Increased education on mental health in a variety of places (the fact that lots of people have mental health conditions and where to go for resources and help)
<p style="text-align: center;"><u>Recommendations (to prepare for/mitigate threats or leverage/maximize opportunities)</u></p> <ul style="list-style-type: none"> • Increase funding for mental health services • Treat root cause of mental health conditions using best practices • Ensure that insurance properly covers mental health and root causes of substance abuse 	<p style="text-align: center;"><u>Partnerships (Stakeholders to include when planning for force)</u></p> <ul style="list-style-type: none"> • Criminal justice system • Health care providers • Law enforcement/first responders (training them on how to use Narcan and not shoot people with mental health condition) • Advocates • Employers (need to provide mental health services without threat of stigma/losing your job)

School-to-Prison Pipeline

<p style="text-align: center;"><u>Threats Posed</u></p> <ul style="list-style-type: none"> • Reduced workforce • Perpetuation of inequality and poverty • Eat up any portion of any budget • Gentrification/involuntary displacement • Mental health/ACEs/breakdown of social networks • Increased holes in safety net 	<p style="text-align: center;"><u>Opportunities Created</u></p> <ul style="list-style-type: none"> • Be intentional to decrease school to prison pipeline with creative policing and design of policies that have led to historically disinvested communities • Recognize the untapped potential/skills/talents of people
<p style="text-align: center;"><u>Recommendations (to prepare for/mitigate threats or leverage/maximize opportunities)</u></p> <ul style="list-style-type: none"> • Reviewing policies/laws that exacerbate school to prison pipeline • Affordable housing • Disincentivize prison industrial complex so that they don't keep profiting off of people's misfortune 	<p style="text-align: center;"><u>Partnerships (Stakeholders to include when planning for force)</u></p> <ul style="list-style-type: none"> • State legislature • Bail bondsmen • Judges • Private prisons

Increased Population

<p style="text-align: center;"><u>Threats Posed</u></p> <ul style="list-style-type: none"> • Health care • Social services • Transportation/infrastructure • Hate crimes • Lack of housing • School system stress 	<p style="text-align: center;"><u>Opportunities Created</u></p> <ul style="list-style-type: none"> • Increased resources for people who don't speak English • Increased diversity and the opportunity to embrace diversity • Diverse skill sets and workforce • New ideas
<p style="text-align: center;"><u>Recommendations (to prepare for/mitigate threats or leverage/maximize opportunities)</u></p> <ul style="list-style-type: none"> • Invest in infrastructure and a rate that is fast enough to support growing population • Regional plan for infrastructure, social services, health care, aging, community development/affordable housing, schools • Educate the public about new, diverse populations 	<p style="text-align: center;"><u>Partnerships (Stakeholders to include when planning for force)</u></p> <ul style="list-style-type: none"> • Business • Civic • Everyone-all jurisdictions, all sectors

Lack of affordable housing

<p style="text-align: center;"><u>Threats Posed</u></p> <ul style="list-style-type: none"> • Displacement (involuntary) of long-term residents/generational • We will become a city of high income earners (“the haves vs. the have nots”) • Loss of social networks/communities 	<p style="text-align: center;"><u>Opportunities Created</u></p> <ul style="list-style-type: none"> • Development of diverse housing types (not just new construction) • Improving planning/zoning laws/codes • Involve more people in the development of housing developments
<p style="text-align: center;"><u>Recommendations (to prepare for/mitigate threats or leverage/maximize opportunities)</u></p> <ul style="list-style-type: none"> • Intentionally develop and update existing laws, policies and funding sources to support affordable housing for all income levels • Identify best practices and creative solutions to affordable housing 	<p style="text-align: center;"><u>Partnerships (Stakeholders to include when planning for force)</u></p> <ul style="list-style-type: none"> • MDHA • Affected people-those at risk of involuntary displacement • Those involved with: NOAH, Promise Zones, Community Land Trust coalition, etc. (advocates)

Police-Community Relations

<p style="text-align: center;"><u>Threats Posed</u></p> <p>When Poor:</p> <ul style="list-style-type: none"> • Increased intimidation/violence • High stress/low sense of security in afflicted neighborhoods • Fewer reported incidents because of reticence • In emergencies, less cooperation and impacted services delivered 	<p style="text-align: center;"><u>Opportunities Created</u></p> <p>When Positive:</p> <ul style="list-style-type: none"> • Community policing • More secure neighborhoods • Stress and trauma of neighborhoods decreases • Better communication • Positive role models for youth
<p style="text-align: center;"><u>Recommendations (to prepare for/mitigate threats or leverage/maximize opportunities)</u></p> <ul style="list-style-type: none"> • Community policing • Improve communications • Regular informal engagement • Demographics of force mirror the neighborhoods • Police from the neighborhood • Gather strategies from officers in the neighborhood • Gather strategies from neighbors 	<p style="text-align: center;"><u>Partnerships (Stakeholders to include when planning for force)</u></p> <ul style="list-style-type: none"> • MNP • Neighbors • Courts • Oversight board • Schools • Local businesses • Churches

Gentrification

<p style="text-align: center;"><u>Threats Posed</u></p> <ul style="list-style-type: none"> • Displacement • Loss of community /identity • Educational instability • Loss of social fabric • Loss of diversity (economic/racial) • Neighbor conflict • Power struggle • “Living while Black” calls • Overreliance on police for disputes • Loss of service in new community 	<p style="text-align: center;"><u>Opportunities Created</u></p> <ul style="list-style-type: none"> • Increases in taxes • Less segregation by race/income • Affordable housing • Increase investments in historically low invested areas
<p style="text-align: center;"><u>Recommendations (to prepare for/mitigate threats or leverage/maximize opportunities)</u></p> <ul style="list-style-type: none"> • Proper use of TIF financing • Policies to increase/retain affordable housing • Incentives for developers • Inclusionary zoning • Cultural leadership (YIMBY-yes in back yard) • Gentrifying areas school groups that support public education 	<p style="text-align: center;"><u>Partnerships (Stakeholders to include when planning for force)</u></p> <ul style="list-style-type: none"> • State and local government • Representatives from impacted communities • Private developers • Policy makers • Corporate community • Health systems • Universities • Neighborhood associations • A bottom up approach

Impact of Chronic Disease

<p style="text-align: center;"><u>Threats Posed</u></p> <ul style="list-style-type: none"> • Death • Disability • Impaired cognitive development • Inability to work • Economic impact to community 	<p style="text-align: center;"><u>Opportunities Created</u></p> <ul style="list-style-type: none"> • Lower healthcare costs • More employee opportunity
<p style="text-align: center;"><u>Recommendations (to prepare for/mitigate threats or leverage/maximize opportunities)</u></p> <ul style="list-style-type: none"> • Reduce smoking • Increase physical activity across lifespan • Increase healthy eating and policy/systems/environmental change • Strengthen fabric of safety net • Increase access to healthcare 	<p style="text-align: center;"><u>Partnerships (Stakeholders to include when planning for force)</u></p> <ul style="list-style-type: none"> • Safety net consortium • Environmental agencies • Neighborhoods • Health care companies • Schools

Homelessness

<p><u>Threats Posed</u></p> <ul style="list-style-type: none"> • Death • Disease • Crime rate • To tourism/public nuisance • Policing • Over incarceration and criminal justice entanglement • To healthcare system/emergency • Educational attainment of children (toxic stress) • Mental health systems 	<p><u>Opportunities Created</u></p> <ul style="list-style-type: none"> • Forces us to look at affordable housing • Live our values • Spiritual/moral growth • Focus on mental health • Evaluate root cause
<p><u>Recommendations (to prepare for/mitigate threats or leverage/maximize opportunities)</u></p> <ul style="list-style-type: none"> • Housing first policy & practice • Prioritize • Look at sustainable structure beyond largesse • Drug and alcohol treatment • Diversion (criminal justice) • Employment opportunities • Destigmatization awareness campaign 	<p><u>Partnerships (Stakeholders to include when planning for force)</u></p> <ul style="list-style-type: none"> • Police/criminal justice • Local government • Homeless services agencies • Health agencies • Schools

Political Climate

<p><u>Threats Posed</u></p> <ul style="list-style-type: none"> • Policy paralysis • All talk no action • Very low trust • Can't believe anything • Too partisan • Apathy 	<p><u>Opportunities Created</u></p> <ul style="list-style-type: none"> • Find common ground • Cities rise up and lead around human factors • Engagement
<p><u>Recommendations (to prepare for/mitigate threats or leverage/maximize opportunities)</u></p> <ul style="list-style-type: none"> • Civic engagement • Build civic infrastructure for bottom up action (localism) 	<p><u>Partnerships (Stakeholders to include when planning for force)</u></p> <ul style="list-style-type: none"> • Parties • Community based organizations of disenfranchised

Food insecurity

<p><u>Threats Posed</u></p> <ul style="list-style-type: none"> • Malnutrition • Obesity • Poor health • Stunted cognitive growth • Infant mortality • Educational attainment • Stuck in survival mode-Maslow • Caretaker stress • Budget squeeze/tradeoffs • Senior isolation • Increased senior frailty/decreased lifespan 	<p><u>Opportunities Created</u></p> <ul style="list-style-type: none"> • Change the community conversation from charity to public support • Economic development and jobs in processing and creating food • Look at areas as markets
<p><u>Recommendations (to prepare for/mitigate threats or leverage/maximize opportunities)</u></p> <ul style="list-style-type: none"> • Decentralize food pantries • Policies that prioritize local food systems • Discussion on food availability as new products-complete neighborhoods • Total livelihood assessments • Enhance role of Farmers Market • Policies to address food deserts • Support healthy meals in schools 	<p><u>Partnerships (Stakeholders to include when planning for force)</u></p> <ul style="list-style-type: none"> • Groceries • Major food buyers • Food bank • Neighbors and neighborhood groups • Churches • Schools • Aging support agencies

Forces of Change Appendices

Appendix A: Background - Mobilizing for Action through Planning and Partnerships

Identifying Nashville's public health issues and improving the community's health and quality of life requires the knowledge and experiences of all of those who live and work in Nashville. Nashville is using the Mobilizing for Action through Planning and Partnerships (MAPP) community health assessment process as the framework for convening a large variety of organizations, groups, and individuals that comprise the local public health system in order to create and implement a community health improvement plan. As a community-based and inclusive process, MAPP provides an opportunity to build and maintain relationships with community partners and Nashville residents. Community involvement throughout the process creates community ownership of public health concerns and solutions.

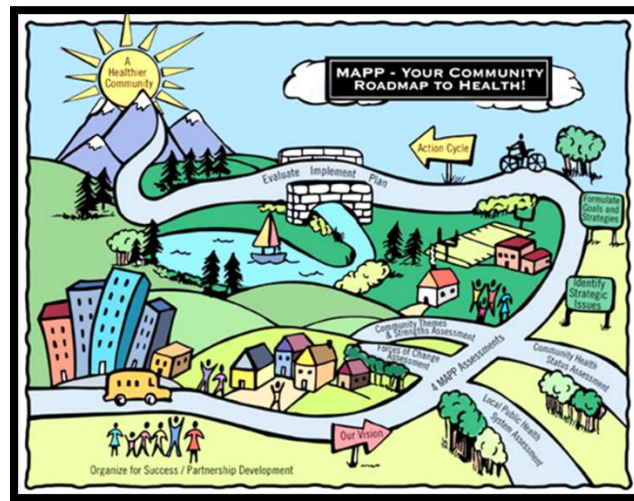
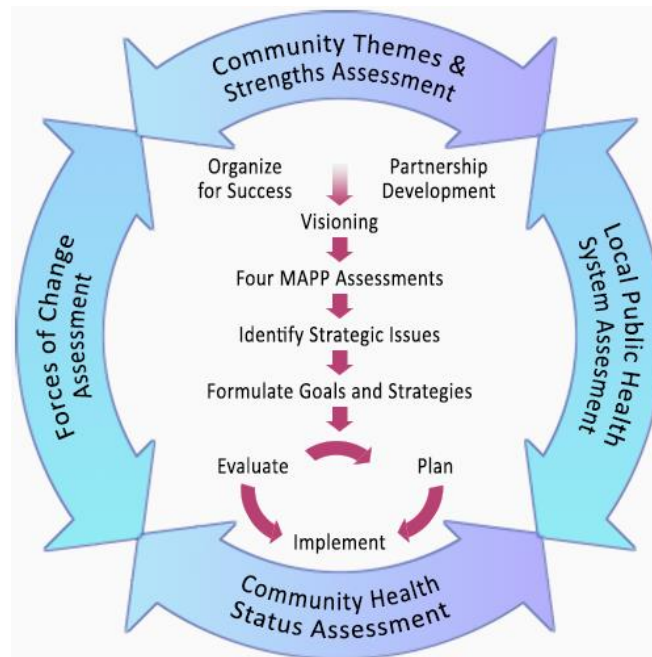


Fig 1: MAPP Process Roadmap to Improved Health

From 1997 through 2001, the National Association of County and City Health Officials (NACCHO), in collaboration with the Centers for Disease Control and Prevention (CDC), developed MAPP. Prior to MAPP's inception, public health practitioners did not have structured guidance on creating and implementing community-based strategic plans. In response, NACCHO and CDC created a process based on substantive input from public health practitioners and public health research and theory. As a result, MAPP is a process that is both theoretically sound and relevant to public health practice. (National Association of County and City Health Officials, 2008).

Nashville has used many public health assessment tools in the past and was one of the first communities to use the MAPP process for community health assessment and planning. Nashville was selected by NACCHO as a MAPP demo site from 2001 until 2003, during which time the Healthy Nashville Leadership Council (HNLC) was created as an overseeing body to help guide the MAPP process and prioritize strategic issues.

The HNLC is a mayoral appointed council, comprised of strategic thinkers and community leaders that is convened by the Metro Public Health Department (MPHD) to serve as the steering committee for the MAPP process. MPHD serves as the lead agency for conducting the MAPP assessments and has established a core support team, comprised of 11 members, diversely representative of the health department and its initiatives, who will serve as leadership for the MAPP assessment teams. See page 12 for the Executive Order establishing the Healthy Nashville Leadership Council.



MAPP utilizes four assessments, which serve as the foundation for achieving improved community health. As reflected in the organizational structure above, for this iteration of MAPP, Nashville has partnered with the Nashville Food Policy Council to utilize information from their Food System Assessment to inform the strategic issues in addition to the traditional four MAPP assessments. These four assessments are:

- **Community Themes and Strengths Assessment:** Provides community perceptions of their health and quality of life, as well as their knowledge of community resources and assets.
- **Local Public Health System Assessment:** Measures how well public health system partners collaborate to provide public health services based on a nationally recognized set of performance standards. The Local Public Health System Assessment is completed using the local instrument of the National Public Health Performance Standards Program.

- **Community Health Status Assessment:** Measures the health status using a broad array of health indicators, including quality of life, behavioral risk factors, and other measures that reflect a broad definition of health.
- **Forces of Change Assessment:** Provides an analysis of the positive and negative external forces that impact the promotion and protection of the public's health.

Once strategic issues are identified, the HNLC will formulate goals, strategies and an action plan for implementing the strategies.

This approach leads to the following:

- Measurable improvements in the community's health and quality of life;
- Increased visibility of public health within the community;
- Community advocates for public health and the local public health system;
- Ability to anticipate and manage change effectively; and
- Stronger public health infrastructure, partnerships, and leadership.

Appendix B - Healthy Nashville Leadership Council Executive Order

Article I. Mayor Megan Barry Executive Order Number 027

THE METROPOLITAN GOVERNMENT OF NASHVILLE AND DAVIDSON COUNTY

MEGAN BARRY, MAYOR

Article II. Subject: Healthy Nashville Leadership Council

I, Megan Barry, Mayor of the Metropolitan Government of Nashville and Davidson County, by virtue of the power and authority vested in me, do hereby find, direct and order the following:

I. The Metropolitan Government desires to improve the health of its citizens by assessing citizen's health status, the current systems, policies, and services available to support health, and potential forces of change affecting citizen health and establishing strategic priorities for community health improvement; and

II. Much of the chronic disease burden is preventable and the underlying contributors to chronic diseases include unhealthy diet, lack of physical activity, and tobacco use; and

III. Community-wide action is necessary to improve health, including action by individuals, families, schools, employers and businesses, community groups, religious communities, and various agencies within government; and

IV. The Healthy Nashville Leadership Council has been successful in drawing community-wide attention to and encouraging ownership of important public health problems and their solutions.

1. Healthy Nashville Leadership Council: There is a Davidson County citizens' council called the Healthy Nashville Leadership Council (hereinafter Council).

2. Council's duties: The Council shall be charged with:

a. Assessing the health status and quality of life of Davidson County residents, assessing health systems that promote and support health, and assessing potential forces of change, and

b. Establishing strategic priorities and mobilizing collaborative and effective community initiatives to achieve improvements in health.

c. Assessing and promoting the consideration of the health impacts of programs and policies across the metropolitan government, [i.e., Health in All Policies]

3. Council members: The Council shall be composed of eighteen (18) members appointed by the Mayor.

a. One of the members shall be a member of the Metropolitan Board of Health; and

b. One of the members shall be the Director of Health or her/his designee.

c. Other appointees to the Council shall include, but not be limited to, representatives of health care organizations, community organizations, and other interested community members.

d. Members of the Council shall be appointed with a conscious intention of reflecting a diverse mixture with respect to race, ethnicity, gender, and age.

4. Terms for Council members:

a. With the exception of the Director of Health, the regular term of a member of the council shall be three (3) years.

b. However, of the initial membership of the Council, five (5) members will serve one (1) year, six (6) members will serve two (2) years, and six (6) members will serve three (3) years so that the terms are staggered as to replace no more than one third (1/3) of the members each year. [Note: The Mayor will designate the term length for each initial Council member at the time of appointment.]

c. Members of the Council shall continue in office until the expiration of the terms for which they were respectively appointed and until such time as their successors are appointed, unless a member is administratively removed from the Council pursuant to section 10 below.

5. Vacancies: A vacancy shall be filled in the same manner as a regular appointment.

6. Compensation: Members of the Council shall not be compensated for services rendered.

7. Chair: The Mayor shall appoint a chair from among the members.
8. Officers: The Council shall elect other officers as the Council finds necessary and appropriate.
9. Quorum: A quorum for approving decisions by the Council shall consist of a majority of the currently filled positions on the Council.
10. Removal of Members: A member who fails to attend three (3) or more meetings in a calendar year will cease to be a member absent a vote of retention by the Council.
11. Staff: The Metropolitan Public Health Department shall provide staff support for the Council.

ORDERED, EFFECTIVE AND ISSUED:

Megan Barry - Metropolitan County Mayor

Date: February 24, 2016

Appendix C - FOCA Agenda

FORCES OF CHANGE ASSESSMENT – AGENDA

Matthew Walker Health Center

October 26, 2018: 8:30AM – 12:30 PM

AGENDA

- | | |
|----------|--|
| 8:30 AM | Registration & Welcome |
| 9:00 AM | Mobilizing for Action through Planning & Partnerships |
| 9:20 AM | Data, Trends and Forces of Change identified through Nashville’s 100 Resilient Cities initiative |
| 9:40 AM | What is Missing?
Key Question: <i>What else is occurring (or might occur) that affects the health of the community, the local public health system and creates or sustains health inequities?</i> |
| 10:00 AM | Break |
| 10:15 AM | Prioritization of Forces
Key Question: <i>Which forces need to be addressed in Davidson County?</i> |

- 11:00 AM Threats and Opportunities
Key Question: *What are the threats posed, opportunities created by and recommendations to address these forces of change?*
- 11:45 AM Group Report Out
- 12:15 PM Wrap Up/Adjourn