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Project Child Health Impact Assessment

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Project Child Health Impact Assessment (CHIA)

Background

The 2005 Project Child Health Impact Assessment (CHIA) at the Boston Medical Center (BMC) for the UMass Emerging Leaders Program (ELP) is closely related to one that members of the 2004 ELP cohort assisted with. The 2004 project team provided BMC with preliminary research regarding similar concepts in Europe, Canada and the United States.

With this research in hand, the Project CHIA team at BMC decided to research, develop, write and publish pilot analyses that illustrated the impact of public policy on children's health. The 2005 ELP team was asked to provide guidance regarding a communications strategy for these pilot analyses. Over several months, the ELP team worked to meet this goal.¹

Members

The 2005 ELP team for Project CHIA consisted of five members from diverse industries and backgrounds:

Unyi Agba – Marketing Manager, Institute for Healthcare Improvement
(prior position: Marketing & Communications Manager, Urban Edge)
Kristina Chung – Director, Financial Services, Blue Cross Blue Shield of Massachusetts
(prior position: Finance Development Program participant, BCBSMA)
David Diehl – Area Operations Manager, Verizon Communications
(prior position: Manager, National Operations, Verizon Communications)
Marisol Olivera – Youth Opportunity Case Manager, Boston Redevelopment Authority
Yolanda Perez – Senior Research Associate, Boston Redevelopment Authority

Primary contact members at Project CHIA included **Lauren Smith**, MD, MPH (content mentor) and **Jenny Weisz**, JD, both from BMC, as well as others in the CHIA workgroup.

Process

Communications: A weekly conference call was established for ELP team members to check-in with each other and update members on individual progress. One team member was responsible for internal communications and provided documentation support throughout the project. This individual was also responsible for documenting the meetings external to the ELP group, which proved to be extremely helpful. The ELP team used e-mail to circulate minutes and research.

Most of the external communications (to Project CHIA) were funneled through one representative from each group (Project CHIA and the ELP team).

The BMC team also had a few workgroup meetings, which many on the ELP team attended. The ELP team had a few face-to-face meetings (during the monthly ELP sessions as well as a few others, held at the Boston Redevelopment Authority). These proved to be helpful to the team to re-connect, ensure that all members were in agreement, and facilitate the progress of the project.

¹ Throughout the remainder of this paper, "ELP team" refers to the 2005 Emerging Leader Program team, and "Project CHIA" refers to the BMC workgroup, led by Lauren Smith.

During the course of the project, individual team members were responsible for conducting interviews, summarizing the information, and presenting to other members.

Overcoming Challenges

The ELP team encountered a few challenges during the project.

- **Gap in Understanding between Healthcare and Non-Healthcare Professionals:** A significant gap exists in the understanding and perspectives on public health between healthcare and non-healthcare professionals. The ELP team consisted of members who work outside the public health arena and the CHIA concept was new to the team. Understanding the CHIA concept was critical in order to develop a communications strategy. The team was able to overcome this hurdle through active discussion and research.

However, this gap in understanding is not a small challenge and overshadowed much of the project. It took a significant amount of time for the team to become comfortable with the CHIA concept. It also became clear to the ELP team that, as professionals outside of the public health arena, they represented a sample audience for Project CHIA.

The diverse ELP background proved to be a strength for the ELP team, because members were able to provide insights regarding information external audiences would need in order to understand the CHIA concept. In particular, as the team performed interviews with external audiences, it was interesting to note that the ELP team faced challenges when explaining the concept to non-healthcare professionals.

- **Project Scope:** The ELP team initially understood the project to consist of developing a communications plan for the pilot analysis (or analyses) that Project CHIA developed. However, the ELP team soon discovered that the subject matter for the pilot analysis would not be decided until mid-March. The ELP group was concerned that this would delay their project, and in early March, the team re-grouped to evaluate what they could contribute within the time frame of the program.

The ELP team struggled with the concept of the deliverable – a communications plan. The group collectively felt that they could provide Project CHIA with more useful information. After various discussions, the team came to agreement with what they felt they could provide Project CHIA in a reasonable amount of time. It was important to the team that the final deliverable would be useful to Project CHIA.

- **Team Dynamics:** Team members did not know each other before the project began. However, the team was fortunate in that this project was the first choice for the majority of the team members. In addition, the team discussed their Myers-Briggs profiles during the January ELP week-long session, which helped the group understand teammate profiles early on. The team felt that they were able to “bond” at the early stages of the project through participation in the team social outing.
- **Time:** Obviously, this is a challenge for all teams. The ELP team recognized the fact that they were working with a BMC work group composed of practicing pediatricians and other professionals, which limited their availability. In addition, the ELP team itself had several personal developments which led to their own schedule limitations. For

example, several team members have been promoted or changed jobs since the beginning of the project.

- **Stress:** Overall, this project was ambiguous and challenging to all team members. The ELP team was concerned with the expectations for the original deliverable (a communications plan for a pilot analysis) when no subject matter had been determined. The team was also concerned because it took a significant amount of time for the team to understand the CHIA concept. Stress levels were elevated even further when the team conducted mini “focus groups” of their own to discuss Project CHIA, and faced significant hurdles. However, this reinforced the team’s desire to produce a binder with materials that members felt would be relevant and useful to Project CHIA.

Outcomes

The team developed the concept for the final deliverable after several important events.

Participation in BMC’s Project CHIA workgroup meetings: Members of the ELP team attended a few of BMC’s Project CHIA workgroup meetings. These meetings helped the ELP team develop an understanding of the issues faced by Project CHIA. It was also helpful to observe the BMC team “in action” – BMC members are clearly passionate and committed to children’s health issues. However, as members of an external audience, the ELP team felt there were some fundamental messages that would need to be communicated as part of the overall Project CHIA strategy.

Meeting with members of the ELP team: At a meeting with members of the 2004 ELP team, current members were able to express their concerns with the project timeline. The 2004 team relieved some of the stress the current group was experiencing by explaining their process from the prior year. This helped the 2005 team put things into perspective and understand that what they were experiencing was not unusual. The 2005 team expressed some of their frustration and was reassured by the knowledge that the 2004 team had felt similar emotions and was able to develop the binder. The current group was reassured because they had seen the binder in use by Project CHIA.

Discussion with content mentor: After this meeting, the ELP team developed a series of questions as part of a “communications plan” template that they hoped to present to the Project CHIA content mentor during a conference call. Some of these questions were based upon feedback from a conversation team members had with external resources. The team presented these questions to the Project CHIA content mentor, and was able to receive answers to some of these questions.

These meetings helped the 2005 team solidify their idea of a useful deliverable for Project CHIA. The team used many of these questions to develop a series of building blocks that they felt would be necessary to be answered in order to build a communications plan. The team felt that these would be helpful “concepts” for Project CHIA to use at a future date.

Interviews: The team conducted interviews with individuals in various industries and performed research to float the concept of a CHIA by individuals outside of the CHIA world. What did they want to hear? What did they want to know? Could the ELP team answer the questions? It became apparent to the team that regardless of the subject matter of the pilot analysis, there were issues that should be addressed in order to establish credibility first.

Research: During this project, team members discovered many helpful tools to provide guidelines for Project CHIA. There are some useful toolkits to conducting CHIAs in the United States and other countries. There were a number of sample CHIAs available on the internet, which the team has included in this binder (either the link or the actual document). There were some valuable "lessons learned" in other countries, as well as sample topics for consideration for a CHIA. The ELP team also found some local resources for Project CHIA. There is also a very useful report from the State Legislative Leaders Foundation, which provides their recommendations for creating a data resource and report for policy makers.

Final Deliverable

The final deliverable for the project will be a binder, similar to the 2004 ELP's deliverable, with a series of resources that BMC can use as they proceed with this project. The binder includes communication resources, advocacy organizations, research / report models, interview summaries and recommendations for BMC.

Recommendations

The ELP team feels that it would be beneficial to Project CHIA to step-back and take some time to ensure that they have built a sufficient foundation to be successful.

Communication Plan:

- **Define Scope:** Project CHIA should focus on limiting their scope initially, in order to demonstrate to their audience that the HIA works well, and that it is feasible and measurable. For example, for housing, BMC could look at one community that they serve, and show that they have reduced the number of emergency room visits due to the HIA.
- **Clarify Position:** Project CHIA should clearly identify their position and role in the discussion. Will Project CHIA be an information source, an opinion maker, or an advocate?
- **Define the Message:** There should be a clear and concise message that can be understood by a wide audience.
- **State Desired Outcome:** There should be a defined goal to help both audience and stakeholders evaluate the success of the HIA.
- **Be Specific:** Have a targeted message directed at specific stakeholders, with a clear "position" statement and measurable outcomes.
- **Build a Press Strategy, with Sound Bites:** Use the media, have short, simple, but powerful points ("sound bites").
- **Identify a Spokesperson:** Think beyond the obvious, and consider a "front person" that has esteem and influence.
- **Keep the Connections Simple:** Make it easy to understand.

Project Infrastructure:

- **Build a Diverse Team:** Create a network of participants who represent a wide variety of sectors and industries. This will build credibility and ensure that the Project CHIA message can be communicated and understood by a diverse audience. This will also build-in flexibility in the event there are external circumstances that dictate a shift in focus.
- **Develop Project Infrastructure:** Hire full time staff, dedicated to research and number crunching. Establish standing meetings, and clarify roles and responsibilities of participants.
- **Secure Project Support:** Seek fiscal partners.
- **Prepare Concise Mission and Value Statements:** This will encourage buy-in and engage participants. It also ensures that the message is consistent and that all participants can understand the message.

Resources

Concept of Health Impact Assessment & Guidelines

The following resources provide guidelines of what a Health Impact Assessment is, which may be used to provide guidance regarding project infrastructure, content and deliverables. They are also good resources that can be used to communicate the concept of a Health Impact Assessment to non-healthcare professionals.

These resources provide “step-by-step” guidelines to the HIA process and illustrate the roles of the member parties. They also provide guidelines on how to prepare a Health Impact Statement, what to include, and examples. These documents are useful because they help provide a structural framework to the Health Impact process.

American Perspective: Partnership for Prevention and the UCLA School of Public Health

Although Project CHIA discussed this partnership early on, it is worth including in this summary because the website covers a great deal of information that Project CHIA should also consider as their project develops. In particular, the very presence of a website indicates that the group is “advertising” their project to others, and serves as a good communication vehicle for the project. The Partnership for Prevention (Washington, DC) and the UCLA School of Public Health hope to develop prototype HIAs for use by decision makers when it comes to public health issues. With support from the Robert Wood Johnson Foundation, it will be a key participant in the public health arena.

The website offers some interesting resources for Project CHIA. In particular, the collaboration provides some high level information on a HIA, and typical elements of a HIA. These elements include:

- Analysis of a proposed policy / project
- Examination of potential health effects
- Model of population health
- Multi-disciplinary approach
- Structured framework – even though the research comes from a wide range of disciplines²

The website also provides sample “models” of HIAs (approaches) and examples. Although there is no “typical” HIA, the Partnership for Prevention and the UCLA School of Public Health do list three models and their strengths/ weaknesses. These models include

- Community Dialogue
- Quantitative Analysis – Risk Analysis and Others
- Bureaucratic Pragmatism

Source:

<http://www.ph.ucla.edu/hs/health-impact/index.htm>

²From the web page, <http://www.ph.ucla.edu/hs/health-impact/whatishia.htm> - item4

Australian Perspective

The Australian report in particular talks about incorporating the Health Impact Assessment into an environmental and planning impact assessment, and includes the additional data requirements that differentiate a health impact assessment from another type. In particular, the Australian model looks for demographic and health status data for the local / affected population, environmental health data, additional demands on community infrastructure, transport issue, and social and economic impacts that have an effect on health.³

It is interesting to note that Tasmania is the only Australian state to formally require a HIA as part of the resource management and planning agencies. They are incorporated into the Environmental Impact Assessment. A HIA is required for any activity/development that meets one of twelve criteria focusing mainly on environmental issues such as traffic, chemical exposure, impacts on open space or water, or demands on public utilities.

The Australian document provides useful "lessons learned, on page 33, that are worth noting here:

- HIA involves using a range of public health and related skills in new ways, rather than being a new discipline itself.
- HIA is a decision support tool and not a decision making tool.
- Consult widely before calculating deeply.
- Scoping is the essence of HIA.
- Consult early with the proponent.
- Consider positive impacts on health also.
- HIA does not add greatly to the cost of developing EIA.⁴

Source:

[http://www.health.gov.au/internet/wcms/Publishing.nsf/Content/health-pubhlth-publicat-document-metadata-env_impact.htm/\\$FILE/env_impact.pdf](http://www.health.gov.au/internet/wcms/Publishing.nsf/Content/health-pubhlth-publicat-document-metadata-env_impact.htm/$FILE/env_impact.pdf)

³ Commonwealth of Australia, "Health Impact Assessment Guidelines", September 2001, pg 2.

⁴ Ibid, pg 33.

London Perspective

The London report is similar in that it provides a great framework for Health Impact Assessment (HIA), including how to begin one. There are several briefing papers that give “lessons learned”, key findings, and an evaluation of HIAs in London.

Key success factors for the London Health Commission (LHC) include the following:

- **The Greater London Authority Act 1999 (GLA):** This Act includes a provision to consider health issues for all the Mayor’s strategies. The HIA was seen as the potential approach to meeting this provision.
- **Key Governmental Involvement and Support:** In addition to being the “solution” to the provision in the GLA, many decision makers were actively involved in developing the HIA model and raising awareness of public health issues.
- **Early Involvement in the Process:** Because the HIA was “expected”, decision makers sought to address health issues early on, in the scoping stage.
- **Collaboration:** Multiple agencies were involved in the HIA.
- **Feedback and Monitoring:** HIAs are evaluated for their impact on GLA strategies, and the results are communicated to the public.

The LHC notes some challenges:

- **Absence of Standards for HIAs:** Participants felt that there is little comparable evaluation data and no standards for HIAs, which makes it difficult to assess their success.
- **Flaws in Methodology:** Participants thought HIA aims were too ambitious and questioned the HIA methodology.
 - What data sources are used?
 - Were the right stakeholders involved?
 - Can stakeholders and decision makers understand the data quickly to discuss and determine policy?
 - How is success measured?

Sources:

The London Health Commission website provides links to their projects, HIAs, and publications. There are some terrific summary guides and schematics for the approach that are less than four pages and very useful.

<http://www.londonhealth.gov.uk/hia.htm>

Summary report (Guide to the HIA approach)

http://www.londonhealth.gov.uk/pdf/hiaeval_sum.pdf

Visual of the approach

http://www.londonhealth.gov.uk/pdf/hia_schematic.pdf

Full report

<http://www.londonhealth.gov.uk/pdf/hiaeval.pdf>

Work Group on Health Promotion and Community Development at the University of Kansas

The Work Group on Health Promotion and Community Development at the University of Kansas, in collaboration with Area Health Education Centers (AHEC) / Community Partners in Amherst, Massachusetts, has a Community Tool Box on their website. There are a variety of resources available, aimed at organizations that want to promote community health and development.

In particular, they list 16 core competencies that they feel are necessary to “do the work” (promote community health and development). They provide guidelines, checklists and examples for each competency.

The core competencies are:

- Creating and Maintaining Coalitions and Partnerships
- Assessing Community Needs and Resources
- Analyzing Problems and Goals
- Developing a Framework, or Model of Change
- Developing Strategic and Action Plans
- Building Leadership
- Developing an Intervention
- Increasing Participation and Membership
- Enhancing Cultural Competence
- Advocating for Change
- Influencing Policy Development
- Evaluating the Initiative
- Implementing a Social Marketing Effort
- Writing a Grant Application for Funding
- Improving Organizational Management and Development
- Sustaining the Project or Initiative

Although a communications strategy is not explicitly listed above, developing these core competencies would help Project CHIA verbalize and direct their message to a wide audience. One of the core competencies, “Implementing a Social Marketing Effort”, will be of particular interest. There is also a chapter on legislative advocacy in the “Organizing for Effective Advocacy” section that will also be helpful.

Source:

Main website

<http://ctb.ku.edu/about/en/>

Core Competencies Toolkits

<http://ctb.ku.edu/tools/corecompetencies.jsp>

Implementing a Social Marketing Effort

<http://ctb.ku.edu/tools/implementsocialmarketing/index.jsp>

Legislative Advocacy Chapter

http://ctb.ku.edu/tools/en/sub_section_main_1253.htm

Sample HIAs

The ELP team felt that a few sample HIAs would provide Project CHIA with a framework for published HIAs. These example reports also illustrate the depth of the research and necessary elements in HIAs.

Morice Town Home Zone: A Prospective Health Impact Assessment

This HIA focused on the impact of implementing "Home Zones" in England and Wales. Home Zones are residential streets that are shared by both motorists and residents (for walking, for example). The HIA examined the quality of life for residents and how to address issues raised by residents and motorists so that all can work together in a "neighborly" fashion.

For this HIA, a number of workshops were held where health and social care professionals and the public commented on the health impacts of the home zone project. Each workshop was 2-3 hours, where stakeholders discussed health impact concerns and issues. A task book was created that included a town profile, definition of health and urban planning issues.

The appendices in the back of the report show the tables used in the workshops, responses from the participants and HIA response grid that is a matrix to identify agencies responsible for dealing with health impacts from the development activities.

http://www.who.int/hia/examples/en/Morice_Town_Home_Zone.pdf

Partnership for Prevention / UCLA School of Public Health

The Partnership for Prevention / UCLA School of Public Health website, provided earlier, has a number of sample reports that would be of interest to Project CHIA, primarily because this is an American organization that Project CHIA has contact with. It is worth noting that the website is updated as HIAs are completed.

<http://www.ph.ucla.edu/hs/health-impact/reports.htm>

Urban Edge

Urban Edge is a local (Boston) organization that focuses on developing and sustaining healthy and diverse communities. They recently produced a Community Health Initiative for Asthma, which is included here. This document provides a great local example for Project CHIA to review.

www.urbanedge.org

Communication Strategy Resources

Economic and Social Research Council (ESRC – England): The Economic and Social Research Council (ESRC) provides research on issues of interest to businesses, the public and the government. This site provides a guide to creating a communications strategy for presenting research.

http://www.esrc.ac.uk/ESRCInfoCentre/Support/Communications_Toolkit/communications_strategy/step_by_step_guide/

Minnesota Department of Health: The Office of Public Health Practice in Minnesota produced the report “Educating local elected officials about public health” which would be of interest to Project CHIA. It also provides some recommendations at the end of the report.

<http://www.health.state.mn.us/divs/chs/schsac/edstrat.htm>

National Center for Chronic Disease Prevention and Health Promotion: As part of the CDC, this center produced a communication plan for cardiovascular health. This website provides valuable information to “translate a public health action plan into action” and provides a 10-step list for developing a long term information strategy.

http://www.cdc.gov/cvh/Action_Plan/Update/task_one.htm

Creating a Data Resource & Report for Policy Makers

The Annie E. Casey Foundation surveyed legislators about the usefulness of their “KIDS COUNT” data book. The report is published annually and provides data to measure the “educational, social, economic, and physical well-being of children state by state.”⁵ The foundation asked the State Legislative Leader Foundation to survey over 300 legislative leaders regarding their perceptions of the data book. Their recommendations would be useful to Project CHIA.

- **Get personal with legislative leaders.**
- **Determine what leaders want and need.**
- **Increase visibility of the website.**
- **Use the website to provide more timely information.**
- **Offer bullets and “sound bites.”**
- **Offer analysis and interpretation of data.**
- **Work with national organizations to increase visibility and acceptance.**
- **Continually seek input from users.**⁶

http://www.aecf.org/kidscount/pubs/kidscount_final_12_17_04.pdf

⁵ http://www.aecf.org/kidscount/kc_faq.htm

⁶ The State Legislative Leaders Foundation, “Summary of Research Findings: State Legislative Leaders’ Perceptions of KIDS COUNT”, September 30th, 2004, pgs 16-18.

Data Resources

The ELP team found a number of sources for data that might be of help to Project CHIA. These are listed alphabetically.

Annie E. Casey Foundation: This foundation is national in scope and dedicated to disadvantaged children and their families. There is a “Kids Count” specific project that is dedicated to improving the future for children in the United States. A wealth of data specific to children is available on their website. The KIDS COUNT data book would be a valuable resource for Project CHIA.

As mentioned earlier, the “Summary of Research Findings: State Legislative Leaders’ Perceptions of KIDS COUNT” provide recommendations that would be helpful to Project CHIA in terms of “lessons learned” for a communications plan.

<http://www.aecf.org/>

Annie E Casey: Kids Count website: <http://www.aecf.org/kidscount/>

Data book online: <http://www.aecf.org/kidscount/databook/>

Link to legislator report: http://www.aecf.org/kidscount/pubs/state_legislators_04.pdf

Link to summary of report: http://www.aecf.org/kidscount/pubs/kidscount_final_12_17_04.pdf

The Alliance for Community Health: Part of the Boston Public Health Commission (which is another useful source), this is a coalition of neighborhoods focusing on the health of their residents. The Alliance would be a great source for Project CHIA to see what the “hot” topics are in these Boston neighborhoods. In addition, Project CHIA could collaborate with the Alliance.

<http://www.bphc.org/>

<http://www.bphc.org/programs/program.asp?b=2&p=168>

Boston Foundation Indicators Project: This organization has a tremendous amount of Boston-specific data for Project CHIA. The “Boston Indicators Report” for 2000, 2002 and 2004 provides information on Boston’s Public Health agenda. There are also a great deal of links that would be helpful to Project CHIA, including legislative highlights and data sources for Boston.

<http://www.tbf.org/indicatorsProject/>

The Columbia Center for the Health of Urban Minorities (Columbia University): The center provides research, training, and education aimed at the northern Manhattan Latino and African-American population. It has a “report card on health” that might be of interest to Project CHIA.

<http://www.cumc.columbia.edu/dept/chum>

Federal Interagency Forum on Child and Family Statistics: Site has statistics and reports on population and family characteristics, children’s well-being, behavior and social environment indicators, education indicators.

www.ChildStats.gov

The Hospital Council of Northern and Central California: Project CHIA might find this website of use due to the 2004 Community Health Assessment "Building a Healthier San Francisco" (BHSF). This report is a collaboration of San Francisco hospitals, clinics, City departments, philanthropic foundations, and community organizations to collectively meet the community benefit planning and reporting requirements of SB 697.

<http://www.hcncc.org/doc/SF%20Needs%20Assessment%202004.pdf>

IssueSource.org: This is the statehouse website, and provides daily logs of important events in the Massachusetts political arena.

www.02133.org,

MA Chapter of American Academy of Pediatrics: MCAAP is involved with other coalitions at the state house level, and Megan Sandel, MD is a representative for district 7.

<http://www.mcaap.org/>

Metropolitan Area Planning Council: This organization provides a data source for the 101 communities in the Boston metro region. As Project CHIA searches for additional pilot analyses, the website provides useful Massachusetts-related information for planning, economic development, and has a Boston Children and Family database.

<http://www.mapc.org/>

Strategies for Children: This Boston-based organization focuses on early education for children, but is also "developing strategic alliances and relationships across sectors".

<http://www.strategiesforchildren.org/index.html>

Women's Educational and Industrial Union: The website and document, "The Self-Sufficiency Standard: Where Massachusetts Families Stand" provides a great deal of Massachusetts-specific information. The authors hoped it would be used as the benchmark for policy. Project CHIA will find a great deal of information including a model and step-by-step instructions for analysis. The ELP team also spoke with Allison Staton (member of Project CHIA) and has an additional resource, Susan Crandall (in the 2005 ELP cohort).

<http://www.weiu.org/>

http://www.weiu.org/pdf_files/WMFSFinalVersion.pdf

Healthy Communities and Active Living

There is a growing movement to “reconnect” urban planning and public health. There is a strong focus on design/development issues dealing with land use and transportation issues. Planners are trying to design neighborhoods or communities that promote walking.

The American Planning Association: This organization has a Massachusetts chapter with state-specific information, as well as two conferences that would be useful for the housing and public health debate.
www.massapa.org

- 1999 American Planning Association conference: a brief history of health communities movement <http://www.asu.edu/caed/proceedings99/LUND/LUND.HTM>
- 2005 American Planning Association conference: public health and urban planning <http://www.planning.org/conferencecoverage/2005/sunday/health.htm>

The Building Design and Construction organization: A 2004 Report on the Green Building Movement and its sustainability would be helpful to Project CHIA. The 2004 report reviews the recommendations made by Building Design and Construction, to see if any progress had been made over the past year. In particular, the 2003 paper recommended guidelines for “green buildings” based upon the scientific assessment of the health and social benefits of “green design”. The original report (“2003 White Paper on Sustainability”) is also on the website.
<http://www.bdcnetwork.com/article/CA601146.html>

The Urban Land Institute: This organization works to build better communities around the world. There is some focus on how to design for healthy communities. In some cases, access is for members-only.
<http://www.uli.org//AM/Template.cfm?Section=Home>

Interviews

As part of this project, the ELP team felt it would be helpful for members to conduct interviews with individuals that were not healthcare professionals. Team members sought to discover what other individuals wanted to know regarding the CHIA concept.

Team members spoke to government employees and business people. Individuals are not identified below but their profession, where possible, is indicated.

Key Findings

1. Advocacy Organization

- Be clear on the advocacy vs research organization position. If this is not an advocacy organization, who are they providing research to? Why?
- What is Project CHIA's mission, vision and goals? Members should do an "elevator speech" that clearly indicates what they stand for and why. It builds credibility.
- Is there funding? Once things get rolling, the last thing you want to do is worry about funding. Many non-profits spend a significant portion of their leadership's time on fundraising and it detracts from the project's original goals.
- Be flexible – if all the "eggs are in one basket" and there is no interest – then what? This organization spent a few years working on one project, only to learn that they would not be able to effect any change. They re-focused their mission and saw immediate results. There needs to be sufficient infrastructure so that the organization can adapt to external "forces".

2. City Workers

- Pros:
 - BMC was recognized as a medical center with strong community ties and felt that BMC had a good reputation.
 - The link between children and environment was an "easy sell", appealing, and of interest.
 - One worker, an economist, felt that part of CHIA's appeal was the focus on health outcomes, not just financial issues (because competition for this subject was tough).
 - The economist also felt that this was an important subject because the number of children and families in Massachusetts / New England was low. This topic would be of interest in the future as well.
- Cons:
 - There would need to be a "tight" connection with health. Expected topics included housing conditions and nutrition. Among city workers there was some debate on the topic of housing – some were able to make the connection while others did not see the link.
 - Current hot topics include health care costs / affordability, so why a HIA on children? Is this really a public health issue?
 - There were a lot of research-related questions. Comments included:
 - Research does not focus on a position.
 - There is a lot of information out there but not all is available or accessible.
 - Who is the audience for this data? Who collects this data? Why BMC?
 - Who is evaluating the data? What is the methodology? Why?
 - The BMC image was also a concern.

- Academics don't want to take action and are not comfortable with politics.
 - BMC could encounter "turf" wars – and need to be able to answer "Why is BMC doing this?"
 - Individuals at BMC were seen in a positive light, but initial reaction was that it was BMC and not a "Harvard" teaching hospital.
- What is the message? Is this an advocate group or an expert research group?
- How does BMC plan to implement their findings?
- Recommendations
 - Collaborate with existing agencies. Form alliances, talk to everybody – community leaders, government officials, non-profit organizations, etc.
 - Grab attention – play up the economic angle, budget issues, pick topics that will grab attention.
 - Be a research consultant – do health review for policy makers and provide value-added work.
 - Policy makers need information quickly so find out what timeframes legislators work in.
 - Define the message and provide specifics – for example, numbers of children that live within the district, instead of percentages.
 - Develop a way to measure success. Limiting the scope of the project will help measure results.
 - City workers felt the Boston Indicators project became too big, but recommended the Annie Casey model and felt this would be a good model to follow.

3. Communications Professional

- **Identify a Spokesperson:** Think beyond the obvious candidates, such as Lauren and consider a frontperson that has esteem and influence.
- **Create a solid, simple message.**
- **Think about the different venues** and outlets for messaging: health journals, local papers, internet, policy journals, State House News, etc.
- **Consider using a "guerilla" press strategy** by sending a letter to the editor, then following it up with an Op-Ed piece, and ultimately landing an editorial.
- **Engage legislators:** Rally contacts and friends in the policy making world and ask them to bring up CHIA on the session hearing floor. Even if it doesn't spark interests to for other legislators present, the motion will be recorded in the State House News and possibly others. Some potentially sympathetic policymakers include: Sen. Richard Moore; Sen. Sue Tucker; Rep. Peter Catusion (Chairs the Public Health Committee); Rep. Liz Malia; Rep. Cathleen Tianne; Sen. Harriet Chandler (healthcare ally); Sen. Tom McGee and Rep. Stephen LaDuc (both serve on Children's Caucus).
- **Link in environmental advocates and lobbyist:** there may be a natural fit.
- **Get CHIA into conference**
- **Book speaking engagements for Spokesperson**
- **Bring in experts**
- **Identify key players and stakeholders** such as business people, developers, legislators, policymakers, community leaders and opinion-makers.
- Be aware of which media outlet is used – NPR and newspapers are the most idealistic of media outlets. These journalists really do believe that their function is to hold "big business" and government accountable by reporting the truth and uncovering scandal. Television, on the other hand, is more challenging to engage and often times is more interested in racier storylines.

4. Corporate lobbyists

- This was a new concept, and the connection between BMC and CHIA was vague. There were a lot of questions such as why? What is it? What do they hope to achieve?
- Talk to other agencies and find out how they have become successful. Look at other advocacy groups and find out what information they are looking for, and how BMC can help. If they do not want to be an advocacy organization, what do they want to do? What differentiates BMC from other research organizations?
- Many of the questions asked were similar to the city workers. Did BMC have expertise in public policy (if that was what they hoped to change)? If so, talk to people – a lot of people – and get the message out in public. Network!
- Find out what information is needed by lobbyists or activists – and provide reliable, accurate information in a timely fashion. Keep providing these snippets of information and build up a reputation.

5. Political Perspective

- Know who is sympathetic to your policy issue.
- Meet with representatives early-on and build a rapport. Key Senator aides can be very influential.
- Hold the press conference on Monday or Friday, because the Senate is usually in session Tuesday – Thursday.
- Be able to answer the question “What sets us apart from other organizations”
- Prior to kick-off – send out a teaser press release.
- Have kids at the press conference.
- Make the press conference or breakfast in a location that is easily accessible.
- Invite the small papers – they will come.
- Have an action plan for next steps – such as a rally - after the kickoff event.