

# Healthy Places, Healthy People: A Framework for Oregon

## Health Promotion and Chronic Disease Prevention Program Framework and Best Practices Report - December 2008



# Health Promotion and Chronic Disease Prevention Program Framework and Best Practices Report

Together, heart disease, stroke, cancers, diabetes and chronic lower respiratory diseases account for more than three of five deaths in Oregon. For Oregon as a whole, 61 percent of adults have at least one of the following chronic conditions: arthritis, asthma, diabetes, heart disease, high blood pressure, high cholesterol or stroke. A startling 89 percent of Oregon adults have at least one of these risk factors: current smoker, overweight or obese, physically inactive or consume too few fruits and vegetables.

In 2005, the hospitalization costs of these chronic diseases were more than \$1.4 billion in Oregon. This does not include additional outpatient costs such as doctor visits or medications. An estimated 75 percent of medical care dollars are spent on treating chronic diseases. Tobacco use is the single most preventable cause of death and disease in Oregon. Poor nutrition and physical inactivity together are the second leading cause of preventable death, disability and disease. These risk factors contribute to the development of the leading chronic diseases such as asthma, arthritis, many cancers, diabetes, and heart disease and stroke.

The Health Promotion and Chronic Disease Prevention Program (HPCDP) in Oregon's Public Health Division has developed vision and mission statements and a framework to focus resources and work on tobacco-free lifestyles, easy access to healthy foods, easy and safe access to physical activity, early disease detection services, and access to self-management supports for people living with chronic diseases.

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## Healthy places, healthy people: A framework for Oregon

**Statewide**

Policies support the healthy choice as the easy choice for adults and children:

- Workplaces, schools and public places are tobacco-free.
- Safe biking and pedestrian routes, alternative transportation and recreational opportunities are easily accessible and affordable.
- Healthy foods are easily accessible and affordable.
- Schools offer physical education.
- Tobacco and obesity prevention and education infrastructure is funded.

Policies protect adults and children from unhealthy influences:

- Tobacco is expensive.

Awareness and education messages promote chronic disease prevention, early detection and management.

Information about health and economic cost of chronic disease is collected and reported.

**All Communities**

Optimal availability of:

- Chronic disease self-management programs
- Healthy food choices
- Physical activity opportunities

Minimal exposure or access to:

- Secondhand smoke
- Tobacco products
- Unhealthy foods
- Advertising and promotions of tobacco and unhealthy food

**Schools • Worksites • Health Systems**

Policies and environments support healthy eating, daily physical activity and tobacco-free lifestyles. They also promote chronic disease early detection and management.

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**Vision 2020:**  
All people in Oregon live, work, play and learn in communities that support health and optimal quality of life.

**Mission:**  
To advance policies, environments and systems that promote health and prevent and manage chronic diseases.

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The HPCDP Vision 2020 is for **all people in Oregon to live, work, play and learn in communities that support health and an optimal quality of life. The mission is to advance policies, environments and systems that promote health and prevent and manage chronic diseases.** Involvement from key partners, leaders and stakeholders in Oregon's communities, schools, worksites, health systems and state agencies is critical to achieve a healthy Oregon. We all must work together to reduce exposure to tobacco products and secondhand smoke, make it easier to access healthy foods and be physically active, and make sure people can easily manage their chronic diseases.

**Creating a visual framework.** To guide this vision and mission, HPCDP developed *Healthy Places, Healthy People: A Framework for Oregon* that describes the ideal conditions contributing to a healthy Oregon. The framework includes five key settings: statewide, communities, schools, health systems and worksites. The ideal conditions are based on evidence of effectiveness.

**Outline of the framework report.** This is a companion document to the visual framework. It is intended to further define the one page depiction of the framework. This report can help communities, organizations, state agencies, advocates and leaders see where and how they fit and contribute to the larger vision of a healthy Oregon.

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The report provides a list of condition statements that summarize what needs to be available or minimized to support tobacco-free lifestyles, healthy eating, physical activity and chronic disease self-management. These condition statements are in bold. The bulleted items under each condition statement are best and promising practices for each of the five settings (statewide, community, school, worksites and health systems). The best and promising practices are examples of effective policy, systems and environmental change that will lead to the desired condition. For example:

**A community has access to tobacco-free and smokefree environments** (condition statement),

- Public policy establishes a public park as tobacco-free (promising practice).

**For the purpose of this report, best and promising practices are defined as follows:**

**Best practices:** The Centers for Disease Control and Prevention (CDC) Community Guide calls best practices "recommended interventions." These are proven population-based interventions with strong or sufficient base of evidence of effectiveness.

**Promising practices:** Promising practices are those that continue to lack a strong or sufficient evidence base, but have some evidence of effectiveness and are supported by expert opinion.

Also included in this report is a basic overview of how stakeholders can work together to achieve policy, systems and environmental change that support healthy lifestyles.

The Health Promotion and Chronic Disease Prevention Section of the Oregon Public Health Division is comprised of nine programs: Arthritis, Asthma, Comprehensive Cancer, Diabetes, Heart Disease and Stroke Prevention, Tobacco Prevention and Education, Obesity Prevention, the Oregon State Cancer Registry and the Oregon Childhood Diabetes Database. Information about these programs can be found at [www.healthoregon.org/hpcdp](http://www.healthoregon.org/hpcdp).

## Statewide setting

Statewide efforts require coordination and collaboration from partners in communities, organizations, schools, worksites and health systems. Statewide means that every person in Oregon — regardless of where they live, work, play or learn — will benefit from media campaigns, policies and laws that support the healthy choice as the easy choice, and policies that protect from unhealthy influences. Statewide efforts must include assessing and monitoring health disparities among population groups and contribute to eliminating those disparities.

### **Statewide laws and policies support the healthy choice as the easy choice for adults and children.** Examples of best or promising practices to achieve this condition:

- Public and private policies make workplaces, schools and public places tobacco-free.
- Public policy and statewide land use planning increase safe biking and pedestrian routes, expand alternative transportation options, and assure recreational opportunities are easily accessible and affordable.
- Public policy makes healthy foods easily accessible and affordable.
- Public policy assures that all schools offer physical education.
- Public policy assures tobacco and obesity prevention and education infrastructure is adequately funded.

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### **Statewide policies protect adults and children from unhealthy influences and choices.** Examples of best or promising practices to achieve this condition:

- Tobacco is expensive.

### **Statewide awareness and education messages promote prevention, early detection and management of chronic diseases.** Examples of best or promising practices to achieve this condition:

- Statewide campaigns promote the Oregon Tobacco Quit Line.
- Statewide campaigns educate all Oregonians about the dangers of secondhand smoke.

### **Information about health and economic cost of chronic disease is collected and reported.** Examples of best or promising practices to achieve this condition:

- Oregon maintains a comprehensive data collection, analysis and dissemination system for health behaviors, risk factors and some chronic diseases.
- Oregon maintains statewide cancer and childhood diabetes registries.





## Community setting

Similar to the statewide setting, community efforts also require collaboration between statewide initiatives and local organizations, schools, worksites and health systems. Best and promising practices include interventions for land use planning, parks, transportation, housing and public health law enforcement, and the availability of products and goods that facilitate healthy choices and discourage unhealthy choices. Various population groups in communities that experience health disparities will benefit from approaches that are tailored to meet cultural and linguistic needs.

**Every community has access to tobacco-free and smokefree environments, access to tobacco cessation resources and minimal exposure to tobacco products and advertising.** Examples of best or promising practices to achieve this condition:

- Public policy assures that tobacco is not available to youth and is not readily accessible to adults.
- Public and private policies establish workplaces and public places as tobacco-free.
- Community colleges adopt tobacco-free policies.
- Public and private policies require smokefree multi-unit housing.
- Policies are well understood and enforced.
- Community efforts support statewide campaigns (Oregon Tobacco Quit Line, etc).





**Every community has optimal availability of and access to evidence-based self-management programs.** Examples of best or promising practices to achieve this condition:

- Evidence-based self-management programs are established and are consistently available and accessible.
- Health systems, worksites, community programs, aging services providers and schools promote and provide referrals to local evidence-based self-management programs.

**Every community has access to healthy food choices and physical activity opportunities, and minimizes access to unhealthy options (e.g. low-nutrient, high-calorie foods and beverages).** Examples of best or promising practices to achieve this condition:

- Grocery stores selling fruits and vegetables are established in underserved communities, fresh produce at smaller neighborhood grocery and convenience stores is increased and improved, and community gardens and farmers markets are established.
- Organizations have policies that limit access to sugar-sweetened beverages and low-nutrient, high-calorie foods at meetings, events, cafeterias and vending machines.
- Community campaigns promote fruit and vegetable consumption (at community centers, local parks and recreation, libraries, ball parks, medical centers, hospitals, government buildings, etc.).
- Community campaigns promote healthy foods and appropriate portion sizes.
- Community and street design and land use policies and practices are in place to promote physical activity and healthy eating.
- Communities develop trails, parks and recreational facilities to create, enhance and promote access to places for physical activity.
- Community campaigns promote places for physical activity.

## School setting

Public schools are governed by school boards. School boards in Oregon are locally controlled and comprised of elected officials. Private schools may have a different governing structure. Schools must meet state and federal laws and standards while also meeting their own local needs and requirements. Coordination and collaboration among state, community and other local organizations are critical to success. For the purpose of this framework, both public and private pre-kindergarten through 12<sup>th</sup> grade schools as well as colleges are included in the best and promising practice strategies.



### **Schools have comprehensive policies and environments that support tobacco-free lifestyles, healthy eating, daily physical activity and health management for all students and staff.**

Examples of best or promising practices to achieve this condition:

- Policies require district property and campuses to be tobacco-free all hours of the day, every day of the year.
- Schools promote and provide access to fruits and vegetables and limit access to sugar-sweetened beverages and low-nutrient, high-calorie foods.
- Schools require all students receive the daily recommended level of physical activity.
- Health management policies support students in managing chronic diseases.
- Communities establish safe bike and walking routes to school.
- Schools limit non-education screen time during school hours.



### **Schools assess and monitor policies and student and staff behavior in support of tobacco-free lifestyles, healthy eating, daily physical activity and health management.**

Examples of best or promising practices to achieve this condition:

- Schools use the school health index and coordinated school health approach to assess and identify evidenced-based strategies that support staff and student health and well-being.

## Worksite setting

For the purpose of the framework, the worksite setting includes on-site activities and interventions in workplaces themselves as well as health care and other employee benefits. Note that schools and health care settings are also worksites. Coordination and collaboration among representatives in all settings will help identify opportunities to promote healthy worksites and to assure the healthy choice is the easy choice for all public and private sector employees in workplaces of all sizes.

**Worksites policies support tobacco-free workplaces and outdoor spaces, tobacco cessation, healthy food and beverage choices, and physical activity opportunities; they also minimize access to unhealthy options.** Examples of best or promising practices to achieve this condition:

- Worksites adopt tobacco-free campus and breastfeeding-friendly policies. These policies are well understood and enforced.
- Worksites have policies to assure the availability of healthy foods, including preferential pricing for healthy options in vending machines and cafeterias.
- Worksites have policies to assure the availability of physical activity opportunities including flex time policies, accessible and attractive stairwells, and incentives for fitness center memberships and alternative commuting options.
- Worksites assure that automated external defibrillators (AED) are present and cardiopulmonary resuscitation (CPR) and AED training is accessible, affordable and promoted.



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**All worksite wellness programs and policies promote breastfeeding, early detection, risk reduction and self-management of chronic diseases.** Examples of best or promising practices to achieve this condition:

- Worksite wellness campaigns promote tobacco cessation, healthy eating, physical activity and self-management of chronic diseases.
- Worksite wellness programs or health benefits include health risk assessments or chronic disease screening with risk factor education.
- Worksite wellness campaigns post and maintain signage within clear view of all work areas of the signs and symptoms of heart attack and stroke and the importance of dialing 9-1-1.
- Worksite wellness campaigns promote cancer risk reduction, prevention and early detection messages.



Health care benefits are regularly promoted and include coverage for tobacco cessation, early detection and chronic disease management (including education, medication, and self-management program referral).



## Health system setting

Within this framework, the health systems setting includes all public and private health care delivery sites (e.g., doctor's office, clinic, hospital) as well as health plans, Medicare and Medicaid. A critical component in the health systems setting is the identification and development of champions who promote prevention, early detection and management of chronic diseases within the health system itself, as well as in communities, schools, worksites and statewide policy development.

- **Hospitals and clinics adopt and enforce tobacco-free campus policies.**
- **Tobacco cessation messages and information about evidence-based assistance for quitting that meet literacy and linguistic needs (such as provider-offered services and the Oregon Tobacco Quit Line) are appropriately integrated into all provider-patient interactions.**
- **Health care providers refer patients to evidence-based self-management programs in the community.**
- **Health systems support health care providers who champion and advocate for the prevention, early detection and management of chronic diseases in all settings.**



## Public health strategies for realizing the ideal conditions

To advance policies, systems and environments that promote health, and to prevent and manage chronic diseases, it is helpful to have a basic description of how communities, organizations, state agencies, advocates and leaders can work together. The following public health strategies describe a process for establishing policies and environmental change that support healthy lifestyles.



### 1. Collect data in order to identify and monitor community health problems, and policies and environments that affect community health.

- Assess policies, systems, and practices related to the identified health issue.
- Collect data to assess who is and is not benefiting from current policies, systems and practices.
- Learn from the work of others who are implementing and enforcing health promoting policies, systems, and practices.
- Learn from the work of others to determine suitable content of evidence-based policies, systems and practices.
- Evaluate the above to determine impact on the community and to assure elimination of disparities.

### 2. Mobilize community members to participate in the identification of health problems and the solutions that will improve health.

- Recruit leaders and representatives of key organizations to establish partnerships to advocate for a policy, environmental or systems change.
- Meet with local media to highlight the problems and advocate for change.
- Evaluate the above to determine the impact on the community and to assure elimination of disparities.

### 3. Inform, educate and empower people about health issues.



- Provide trainings and resources on current policy and policy changes to community members with influence or to a specific population necessary to advocate for change.
- During teachable moments (presentations or conversations), engage people in a conversation about what they and others can do to advocate for change.
- Evaluate all of the above to determine the impact on the community and to assure elimination of disparities.

#### 4. Develop policies and plans that support individual, community and statewide health efforts.

- Work with key partners and influential organizations to advocate for the adoption of policies.
- Work with policy makers to develop public policy.
- Work with leaders in various settings to develop voluntary policies for their environment.
- Evaluate all of the above to determine the impact on the community and to assure elimination of disparities.



#### 5. Implement and communicate policies, laws and regulations that protect health and assure safety.

- Develop a plan to assure enforcement of public health laws and ordinances, for example the smokefree work place law.
- Evaluate all of the above to determine the impact on the community and to assure elimination of disparities.



