

# Division of Public Health

## Physical Activity Nutrition Obesity Prevention (PANO)

### Advancing Healthy Lifestyles Kick-Off Meeting

#### Founding Members

- Lauren Butscher
- Peter Campbell
- Colleen Caufield
- Lori Ciabattoni
- Hailey Cockerham
- Norwood Coleman
- Kim Fisher
- Tanya Haley
- Fred Hanna
- Debbie Harrington
- Patty Hawkins
- Helen Arthur
- Cassandra Davis
- Kimberly Holmes
- Barbara Mallory
- Natasha Morris-Harrison
- Tracey Phillips
- Debbie Smith
- Shebra Hall
- Rochelle Tyler
- Jill Hutt
- Yinka Isichei
- Heather Klemanski
- Ebony Mapp
- Kito Morris
- La Vaida Owens-White
- Laurie Ruggiero
- Suzanne Saunders Tait
- Shawn Stevens
- Jo Wardell
- Molly Yoo
- Shorel Clark
- Denicia Youmens
- Karen McGloughlin
- Nancy Mears
- Sharon Smith
- Ana Sorona
- Bet Wong

#### Draft Vision

The AHL Coalition uplifts the well-being of all Delawareans and breaks down barriers to achieve healthy lifestyles.

#### Draft Mission

The AHL Coalition brings together coalitions and partners to focus on healthy lifestyles and equity through the PANO lens to leverage and expand resources in the community.

#### Draft Core Values

- Cultural inclusivity and responsiveness
- Understand different cultural needs of the counties and their communities..
- Provide a safe and respectful space for diverse community representatives.
- Listen to communities to build trust and buy-in.
- Shared responsibility, collaboration, and leadership.
- Collective action to effect meaningful broad systems change.
- Improvement of social determinants of health improve health outcomes.



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**Priorities**

- The most pressing need relating to health equity is to increase awareness.
- The area of focus should be mental health and wellness.
- The top outcomes for year one should be Increased community engagement.

**Strategic Goals/Primary Strategies**

- I. Collaboration/Partnerships:** Engage coalitions and key representatives across the health system with a PANO focus to serve as a repository, knowledge sharing and networking vehicle.

Potential Actions:

1. Create a health community list serve on the PANO website.
2. Develop a repository of programs and best practices.
3. Provide networking opportunities virtually and in-person for Coalition members and partners.
4. Share data and published reports.
5. Engage in partnerships with businesses, health care community, state systems, local government, faith-based institutions, the re-entry community, the unsheltered, public safety, and school systems.
6. Encourage healthcare system collaboration.
7. Establish relationships with leaders of growing special population groups.

- II. Community Outreach Engagement and Access:** Provide outreach opportunities to increase access to existing programs and services with a PANO focus, regardless of income, race, ethnicity, or sexual orientation.

Potential Actions:

1. Partner with the Statewide Health Improvement Plan to conduct a needs assessment and convene town halls. Conduct a Town Hall meeting in each county (or participate with other planned town halls). Solicit input from the community and from all age groups on existing needs. Ask what the communities want and need. Partner with the SHIP or hospitals to obtain needs assessments and share data with health community.
2. Remove barriers to health care in economically depressed areas.
3. Increase visibility in the community of existing programs and services that are available especially those that help to reduce health disparities.
4. Utilize community navigators, and community health workers, to assist the community with clinical questions and health system communication.
5. Create mentoring and support programs.



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**III. Program Development linked to PANO:** Identify gaps in services and programs that increase access to PANO related services that reduce health disparities and improve outcomes.

Potential Actions:

1. Access what is available for everyone, providing the tools and skills.
2. Identify and make available innovative evidence based community programs and preventative lifestyle practices and behavioral health.
3. Encourage municipalities to promote physical infrastructure to support healthy lifestyles.
4. Provide education on nutrition and wellness with facts, to change misperceptions.
5. Support and promote programs that make healthy lifestyles easier and promote healthy lifestyles.
6. Find ways to make health resources and information on nutrition, wellness and recreational programs more accessible to consumers.

**IV. Marketing and Communication:** Develop a marketing plan for existing programs linked to PANO and other Coalitions that promote equity and help reduce health disparities.

Potential Actions:

1. Develop a communication plan to reach the community with consistent language across the state on health and wellness.
  - a. Consider literacy levels, dual language audiences, cultural and generational differences, and learning styles in communication strategies.
  - b. Utilize multiple forms of interaction and outreach and reach meeting people where they are. Reach people where they are and recognize the different communication needs of different generations. Use social media, and app for the health care system.
2. Develop a marketing campaign to encourage communities to change daily decisions, and create new creative daily habits for nutrition, exercise, and health. Target every year the biggest risk factors and use the same messaging. Develop new ways to educate the public and increase awareness on preventative care and lifestyle changes.
3. Use platforms to communicate with communities like Unite Us to promote programs (free to nonprofits).

**V. Policy:** Advocate for policies that increase equitable access to health programs and services with a PANO focus that increase access and reduce health disparities.

Potential Actions:

1. Identify and pursue policy and legislature changes across the state that remove barriers to health equity. (i.e., Mental health/trauma, public safety, environmental disparities, food deserts/food swamp, etc.)



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2. Expand Medicaid to offer more prenatal care and expand to children in western Sussex County, immigrants, and children

### AHL Coalition Members

#### What is the role?

- Involvement.
- Link to communities.
- Make policy changes.
- Everyone should have a voice and a seat at the table.
- Stakeholders need to know that what they care about is heard.
- Advocate for the Coalition, messaging, and allies.
- Creative access to resources.
- Shared responsibility and accountability.

#### Who is missing?

- Federal and State agencies: DE Health Care Commission, Veterans Administration, DNREC, DeIDOT, State Leadership from DHSS/DPH, Family Services Cabinet Council, Public Safety, MPO, WILMAPCO, Health Equity Task Force.
- Educators - Colleges, high-schools, middle schools, and elementary schools, PTOs, PTA, Sports Clubs, School boards, superintendents, school districts.
- Higher Education: All universities, Higher education wellness programs, DelTech, (Carol Makin)
- Professional associations: nurses, doctors, pharmacists, DE Public Health Association, DE Academy of Medicine, American Hospital Association, Mental Health Association
- Counties and Municipalities: Parks & Recreation Departments, Police Department/ Law enforcement, Librarians.
- Other coalition leaders: National Coalition of 100 Black Women/Men, Delaware Chapters. Sussex County Health Coalition, Health Literacy Coalition, Cancer Coalition, Behavioral Health Coalition, Rural Health Coalition, La Plaza, Breast Cancer Coalition, Fathers Matter Coalition, Community grass roots coalitions.
- Business organizations: Service clubs, Chambers of Commerce, Entertainment and Hospitality, Barbershops/ beauty salons, pharmacies, corner stores, food outlets, Poultry Union, employee unions, Brandywine Lifesavers – youth
- Health care providers: Preventative and Behavioral Health professionals, Urgent Care, Beebe. St. Francis Hospitals, community health centers, population health representatives from across the health system, community health workers, social workers, health equity representatives, representatives from all acute care hospitals and health systems across the state.



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- Special populations and nontraditional groups: Indigenous communities, Lenape, Nanticoke, immigrants - Latin, Haitian-creole (Rose Simmons, contact), People with disabilities, Young Parents, lawyers. Retirees, farmers, Construction workers, Politicians
- Churches/ religious institutions, Panhellenic Council
- Nonprofits: CEOs, DANA.
- Other: Professional regulators, Legal services to immigrants
- Community organizations: Block captains, neighborhood leaders, Community centers, Junior Honor Society, Food pantries

**Opportunities for Community Visibility**

- Plan something for Peace Week October 8-15 (LaVaida Owens is contact). Each partner could plan something in their community.
- LaRed Health Center will sponsor a Women's Health Walk in Seaford (September 2023) and Maternal Health Fair in Seaford (October 2023)

