

HCCC Highlights Report

July-December 2021





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About the Healthiest Cities & Counties Challenge

The Healthiest Cities & Counties Challenge strives to reduce health disparities in chronic disease by improving access to food and health services. The \$2 million initiative began in July 2020 through a partnership between the Aetna Foundation, the American Public Health Association, the National Association of Counties, and Healthy Places by Design. Together, these organizations provide robust technical assistance – including one-on-one coaching and a peer learning network – to support 20 grantee teams.

A commitment to authentic community engagement and multisector partnerships is at the core of the Healthiest Cities & Counties Challenge. Our approach is highly flexible and responsive to community needs, supporting a shift in the conditions that hold systemic inequities in place. Since the start of the initiative, the 20 project teams have established new partnerships and shifted power to community residents, paving the way for systems and policy change to achieve health equity.

HCCC Core Pillars



Food Access & Health Services



Community Engagement



Multisector Partnership

About this report

The third HCCC Highlights Report provides an overview of accomplishments, successful approaches, lessons learned and community stories from the most recent reporting period, which took place from July through December 2021. The report is framed around the theme of community collaboration and resilience in honor of this year's National Public Health Week theme, "Public Health is Where You Are." In short, this theme recognizes that where we live, learn, work, play and pray impacts our health – an idea HCCC grantees have adopted from the beginning of our work together.

Throughout the report, we also included a few spotlights on food policy councils to highlight their critical role in bringing community members and cross-sector partners together to create a more resilient food system. While the report is for anyone interested in learning more about local efforts to advance health equity through food access and access to care, there are also sections for public health professionals and their partners with lessons and tips from our communities.

Executive Summary:

Key achievements from July to December 2021

The 20 Healthiest Cities & Counties Challenge project teams are meeting people where they are in their communities and making an impact on social determinants of health – the conditions that affect community health – with a focus on food access and access to health care.

Community

HCCC project teams reached a turning point in their community engagement efforts after spending the first year building relationships with community members and supporting their leadership capacity. In doing so, project teams have cultivated a greater sense of social connection across their communities. Despite the continued challenges of the pandemic, organizations have built trust with community members by including them in their work, being open and transparent, integrating community feedback and sharing decisionmaking power.

Collaboration

Multisector collaboration requires time, effort, patience and open communication to find common ground. The partnerships HCCC grantees have developed and further cultivated over the course of the initiative are essential to creating new pathways for community members' voices to be represented, heard and reflected in solutions to improve food access and health care access. HCCC project teams not only connected with new partners, but also increased alignment on their goals and shared resources with existing collaborators.

Resilience

The Challenge's goals of increasing sustainable access to both food and health services are key to community resilience. As project teams deepen the quality of their relationships with both community members and cross-sector partners, they are increasing community capacity to develop, implement and sustain programs and practices. Both organizational and governmental policies help to institutionalize these changes.

Watch this video to learn more about how HCCC communities define community resilience. 

Community

HCCC project teams reached a turning point in their community engagement efforts after spending the first year building relationships with community members and supporting their leadership capacity. Bringing community residents together with organizational and government representatives around common goals led to greater alignment around community health priorities.



Now, those same community members are leading their own projects to advance these goals. In doing so, project teams have cultivated a greater sense of social connection across their communities. Despite the continued challenges of the pandemic, organizations have built trust with community members by including them in their work, being open and transparent, integrating community feedback and sharing power.

By the numbers

381
community convenings
attended by
2,542
community leaders



104,483
people reached through
public communications



1,596 
community leaders stepped up
as volunteers to support
community initiatives

Key approaches implemented by HCCC project teams

- Informed community members of available community services through referral programs and communications efforts
- Consulted community by conducting surveys, meeting 1:1, and hosting public meetings
- Involved residents in decisionmaking through community advisory board meetings and offering opportunities to design programs, write bylaws and lead strategic planning
- Recognized community expertise and leadership by compensating individuals for their time and efforts
- Uplifted community members' voices through communications channels and connections with elected officials

Lessons learned & tips from HCCC communities

In order to shift power to community members, organizations have to invest in community capacity building. Community leaders want support to learn about systems so they can better tackle the big issues, and they appreciate guidance from organizational leaders who know the system when they are in the early stages of developing community-led projects. With new skills and knowledge to complement their existing expertise, resident leaders can be highly effective at changing food and health systems.

Another key lesson: earning trust takes time, patience and relationship-building with well-established community leaders. Trusted individuals are powerful for bringing in other community members, as well as local government and business partners who may not have traditionally been engaged in health equity issues.

Tip #1

“It is a challenge to engage community members in systems work because they do not always know the whole system, but it’s still important to include them [as partners] because what they want to see is not something we should presume we know. But how to make it effective and fruitful for everyone requires some honest conversations about respective capacities and transparency about intent and realistic goals.”



- Michaela Oldfield, Cincinnati, Ohio

Tip #2

“Communication is key. Keep the community informed of the work that is being done...The team is going out into the community where residents are isolated, thereby creating safe, welcoming public spaces for the residents to gather. This has given an opportunity to build trust, to connect more people to resources and to begin to break down social isolation.”

- Brenda Fudge, Kerrville, Texas

Community examples: Centering youth voices

Some of the HCCC project teams' goals are focused on improving health among youth in their communities. These teams uplifted the importance of sharing decisionmaking with the people they serve, the youth themselves, as well as trusted adults in their lives to make sure their solutions meet young people's needs, all while supporting leadership development.

Wheeling, West Virginia: The HCCC project team in Wheeling is centering children in their work to increase food access and create an outdoor community space – the “Edible Mountain” – by changing the Edible Mountain coalition’s bylaws to reflect youth leadership. They have also worked with local government leaders to draft a city ordinance that would create a youth city council to uplift youth voices. Their efforts prioritize community storytelling and history from a youth and caregiver perspective.



"Many conversations around centering Black voices and experiences have shaped how we think about community engagement and organizing...We cannot reach the level of success we desire unless we work hard to address the longstanding fears, concerns and frustrations present in our community."

– Rosemary Ketchum

New Brunswick, New Jersey: Thanks to the New Brunswick team’s Your Food, Your Choice youth advocacy program, the New Brunswick School District introduced a number of new lunch menu items designed to be culturally significant to a substantial population of the student body. There have been several iterations of this menu change so far this year, and it continues to inch closer to meeting students’ expectations. These changes integrated student and parent feedback from the program participants’ 2020-2021 peer survey to emphasize cultural significance in menu items.



Cumberland County, North Carolina: The Cumberland County project team identified and leveraged a new community partner, the Fayetteville-Cumberland Youth Council, to participate in data collection for their Food Environment Assessment. Recruitment of Food Environment Assessment participants was slow at the beginning of the project, and the youth council was the trusted community partner they had been looking for to bring more knowledge about the community into their work. The HCCC team trained the youth and offered incentives for them to participate in the data collection.



"We were grateful to be able to give back to those who have worked closely with us. Partnership is our focus, and we were just happy to have the support from the community and the youth council...This group has provided feedback along with others that will assist us in policy change in months and years to come."

- Martina Sconiers-Talbert

Spotlight on Food Policy Councils

Laying the foundation for a community-led Food Policy Council in Rochester, New York

From the beginning, Rochester partners Common Ground Health, Foodlink and the City of Rochester committed to a resident-led process of developing Rochester's first-ever Food Policy Council. Notably, they recruited members of the community to serve on their planning committee from the beginning of the design process, all the way through selecting and launching the inaugural cohort.

The membership application for the FPC positions was designed to be accessible to a wide range of residents and made broadly available in community settings. The planning team attempted a screening call with each applicant, then held extensive discussions to select 25 people to invite for second-round interviews. The planning team then convened and conducted a series of votes to select the new members and ultimately selected 10 community members to serve on the FPC.

These residents represent the diversity of the Rochester community and different neighborhoods, including those lacking equitable food access. Together with one member from each of the three lead organizations, these individuals make up the 13-member Rochester Food Policy Council.

Throughout the process, individuals in the community got to know each other and the institutions and organizations involved in food policy work. Beyond the residents and organizations serving on the planning team and FPC, hundreds of other individuals participated in town halls hosted by the partner organizations. When asked why this process was important, here's what Mike Bulger of Common Ground Health had to say:

“ It is necessary to build a broad coalition of both institutions and individuals. Personal relationships and trust must be formed so that all participants feel valued and are able to exercise their power within the coalition. By establishing the relationships and building group identity, the project team has taken the first steps in creating a community-led movement to create a healthier and more fair food system in Rochester.”



Collaboration

Multisector collaboration requires time, effort, patience and open communication to find common ground. The partnerships HCCC grantees have developed and further cultivated over the course of the initiative are essential to creating new pathways for community members' voices to be represented, heard and reflected in solutions to food access and health care access barriers.

Between July and December 2021, HCCC project teams not only connected with new partners, but also increased alignment on their goals and shared resources with existing collaborators.



By the numbers

344

cross-sector partners
collaborated with grantees to
advance community health

86

new food and health service
access points established
through partner expansion



Key approaches implemented by HCCC project teams

- Conducted meetings with individuals from local government, community-based organizations, health care systems, food markets, local farms, academic institutions, emergency food providers, school districts and faith communities
- Developed policies and practices to support collaboration, including strategic plans, work plans, meeting agenda templates, bylaws, operating procedures, financial practices, MOUs, data-sharing agreements and decisionmaking practices
- Extended reach of screening and referral programs through new health center, hospital and community partnerships

Lessons learned & tips from HCCC communities

Partnership development takes flexibility and willingness to try new relationship-building approaches at different stages of a project. For example, when scheduling demands made it difficult to coordinate whole team meetings or partner priorities shifted in response to the COVID-19 pandemic, a few teams pivoted to conducting 1:1 engagement with partners.

Other teams noted that engaging multiple partners has supported the sustainability of their work during staffing or government transitions. Teams expressed the importance of transparency and patience when communicating with their partners. Project coordinators took the time to learn about their partners' existing organizational structures, policies and procedures to better understand the barriers faced by key personnel they collaborated with. Over time, these communication practices cultivated greater alignment, trust and buy-in.

Tip #1

“We had to get comfortable with taking giant steps backwards while slowly making inroads and building relationships.... Even as the pandemic shifted everything, the process of engaging became the outcome we were most successful at accomplishing. Relationships between our community partners have been formalized with commitments defined in MOU as roadmaps forward.”

- Julian Levine, [Greenbrier County, West Virginia](#)



Tip #2

“Getting nonprofits on board and other agency partners has proven to take a lot longer than we had anticipated. One of the lessons learned that came out of this is the need for data sharing agreements and to accommodate longer time for legal reviews in the project timeline.”

- Brandon Kenney, [Forsyth County, Georgia](#)

Community examples: Cross-sector partnerships for community care coordination

Tompkins County, New York: The Tompkins County team designed a new Student Resource Navigator program to create smoother referral pathways and more opportunities for communication and relationship-building across multiple sectors. As the team prepares to pilot the program, they continue to build on the connection points between health care and social service providers. They are also leveraging the capacity of the local student population to bridge these sectors.



"Creating more opportunity for communication and connection across sectors will allow us to break down silos and connect more people to existing resources that support health, as well as building our understanding of gaps in our existing resources. Creating these connections through health care providers normalizes the concept that social and environmental conditions are crucial determinants of health, and addressing them is an important part of clinical care."

– Grace Parker Zielinski

Cambria County, Pennsylvania: In 2020, the Cambria County team implemented the Pathways Community HUB model in their local efforts to train and employ community health workers. The CHWs coordinate services and care for individuals experiencing social determinants of health barriers, including health care access and food insecurity. The HUB also works with payers, like health insurance companies and Medicaid, to secure contracts for the financial sustainability of HUB operations. One HUB population expansion opportunity that recently emerged with a payer includes working with people who have Type 2 diabetes.



Cleveland, Ohio: The CHANGE INC. program placed Community Health and Empowerment Navigators at health care and social service sites during the first year of the project. More recently, these partner organizations have collaborated with owners or leaders of community hubs, like the local library or barber shops, to allow the CHENs to be present at a location residents go to often. Community partners shared that having a CHEN at their Food as Medicine clinic helped them reach and serve more members of the community.



"Our partners reflected on the power and potential of community hubs for our CHENs, which has been eye-opening. This community outreach method has aided in building trust and visibility of our navigators within the community and continues to allow us to reach new and different audiences that we typically didn't have access to in Year 1 of the project."

- Laura Hopkins

Spotlight on Food Policy Councils

Paving the way for city-community collaboration in [Pittsburgh, Pennsylvania](#)

The Pittsburgh Food Policy Council, in collaboration with the Pittsburgh Department of City Planning and the Mayor's Office, launched the Pittsburgh Food Equity Ambassadors program in June 2021. The program raised awareness among resident leaders of the food system and engaged those leaders in policy advocacy. The PFPC and City Planning staff continued meeting weekly until December 2021 to plan each session, which increased transparency, communication and team input across the nonprofit and government partners. During this time, the Mayor's Office and City Planning leveraged their resources and reach to generate and distribute informational materials and press releases about the program.

This partnership has ensured the flow of financial and capacity-building resources to the participants of the ambassador program and to members of the Pittsburgh community. The program invited panelists from across the food system and government to share their knowledge and best practices with community residents for speaking with elected officials. Leveraging these learning opportunities, the PFPC and resident ambassadors advocated for the creation of a Food Justice Fund, gaining the support of Pittsburgh City Council members as well as newly elected Mayor Ed Gainey. When asked what they did to achieve this success, Dawn Plummer, executive director of the PFPC, said:

“ We remained steady in our collective impact model, and those who have power in this work actively listened and used our resources to uplift the resident ambassadors' decisions and recommendations. Without this change in power dynamics, relationship building and connections, resident-led solutions for transforming food and public health injustice...[are] not possible.”



Resilience

The Challenge's goals of increasing sustainable access to both food and health services are key to community resilience. As project teams deepen the quality of their relationships with community members and cross-sector partners, they are increasing community capacity to develop and implement new programs and practices.

Both organizational and governmental policies help to institutionalize these changes, which are shifting the way community leaders think about health equity. Ultimately, this supports project teams and their communities in being ready to continue their work after the grant ends.



By the numbers

44 

policies and procedures
changed at the organizational
and local government levels

Over
100,000 

people received services that
increased access to food and/or
care

Key approaches implemented by HCCC project teams

- Planned for and cultivated community gardens to create sustainable access to locally grown, fresh produce
- Equipped community members with leadership skills to support advocacy and systems-level project planning abilities
- Advanced public policies that expand opportunities for community-led food access initiatives and secured financial support
- Expanded eligibility and availability of nutrition benefits programs, including SNAP and food prescription vouchers

Community examples: Increasing community resilience through sustainable access to local, fresh produce

HCCC communities have come up with a wide range of approaches to support sustainable food access opportunities that will address food insecurity in the long-term. Learning and adapting throughout the pandemic has led to new programs and practices that will ensure community resilience in the face of future challenges.

Deerfield Beach, Florida: The Deerfield Beach project team established a brick and mortar pantry at Deerfield Beach Middle School, known as the DBMS Free Neighborhood Market. Due to pandemic-related restrictions, the pantry couldn't open for distributions within the school so the team pivoted to conduct 10 curbside weekly food distributions with items from the Neighborhood Market. Securing donations of excess fruits and vegetables and shelf-stable items from two partner agencies supported the ability to provide fresh produce and a wider variety of food items during distributions.



"The Neighborhood Market not only provides tangible sustenance of food, but also a network of individuals with whom families can consult for available food resources, information on improving their health and wellness, and increased community connection."

- Rose Shin

Dougherty County, Georgia: By delivering food boxes with fresh produce, the Dougherty County project team has increased capacity to support the nutritional needs and overall health of older homebound residents living in low-income households situated in acute food deserts. The project team also established a food gardening education communications plan using online and virtual platforms that will teach community members to cultivate home container gardens for self-sustained access to fresh vegetables.



Chula Vista, California: Based on the findings from a community needs assessment, participants from the Chula Vista team's Resident Leadership Academy have conducted extensive outreach across Chula Vista to advocate and secure local government, nonprofit and community support for developing a Chula Vista Community Garden and Healthy Living Learning Center. A key goal of the project is to connect with and motivate community members from diverse backgrounds through organic gardening. Through this community-led partnership, the resident leaders were able to develop a plan for a new community garden site at Lauderbach Park with support from the City of Chula Vista.



Paterson, New Jersey: With Paterson Public Schools reopening, the Paterson team focused their efforts on administering a Fresh Fruit and Vegetable Program, which aims to bring local produce into schools. During the fall, the team successfully purchased 100% of the district's produce from farms in New Jersey and Pennsylvania.

To increase access to fresh produce within the school district, the project team began to develop a district-wide school garden toolkit and applied for funding to support additional school gardens at community schools. The toolkit will enable teachers and administrators to start, maintain and expand school gardens, creating opportunities for sustainable, community-driven access to produce.

Wilkes County, North Carolina: The Wilkes County project design team, which includes community members, has used an innovative process known as human-centered design to develop and test potential solutions to food insecurity. One approach was to install refrigerated lockers at an elementary school where families can access produce once a week. The pilot program's goal was to determine if produce closer to someone's home would eliminate barriers to accessing fruits and vegetables. Families were satisfied with this experience, which included support from a social worker when they had questions about the items provided.



Perry County, Kentucky: To better understand community members' underreporting of food insecurity, the Perry County team developed a Food Assistance Acceptability Scale. This scale is used for research and projects aimed at reducing stigma associated with food assistance, which will ultimately lead more individuals to report their food insecurity needs and access related services.

"The pandemic elucidated the true impact of poverty and financial instability because middle-income families were suddenly without income and/or resources... These circumstances intensified the beliefs that food security in this region is influenced by multiple socioecological factors and is more prevalent than reported."

- Frances Hardin-Fanning



Orange County, New York: The Orange County team carried out an “Rx for Produce” voucher program with five hospital and health care sites and four farmers markets. Residents were screened at these sites for food insecurity and were provided information on food assistance programs including SNAP, WIC, senior meals and food pantries. Community members who screened positive for food insecurity were issued vouchers to purchase healthy fruits and vegetables at the farmers markets. The partners issued a total of 1,861 vouchers to residents at risk for food insecurity, and 876 vouchers were redeemed at the farmers markets.

In addition to the produce prescription program, health care partners set up three mini food pantries at their sites, and began providing shelf stable food to patients in need. Orange County Department of Health staff conducted surveys on food insecurity with five community members and received input on preferences for how best to link community members to food assistance programs, as well as barriers to participation, which will guide future efforts to improve food access across the county.



Spotlight on Food Policy Councils

Supporting food system resilience in [Collier County, Florida](#)

In response to unprecedented levels of food insecurity due to the COVID-19 pandemic, a new Collier County Food Policy Council has emerged as a critical structure for organizing community-based responses to multiple food system issues. Current and future activities of the partners include supporting emergency food program efforts to procure and supply more healthy food choices from local sources, initiating farm-to-school initiatives, supporting farmers markets to accept nutrition benefits and developing a local food guide with information about nutrition.

Given Collier County's location on the southwest coast of Florida, preparation for future natural disasters is also key to the FPC's work. Stakeholders will present evidence-based resources to prepare for and to respond to crises and establish procedures for distributing food and other essential grocery items when the need for immediate disaster relief arises.

To advance these goals, the FPC coordinator conducted research on best practices for how the FPC could expand, identified gaps in representation in their membership, then filled those gaps to ensure adequate representation of sectors and components across the food system. The coordinator also reached out to community residents to increase their membership and representation on the FPC, resulting in the addition of 10 new members, roughly a 30% increase in membership. When asked why the addition of these new partners is important, project coordinator Asmaa Odeh said:

“ Our partnerships established by the FPC have and continue to address hunger and food insecurity by supporting local food producers, school food programs, food chain workers, food equity and food system resilience.”





Additional Resources and Acknowledgements

- Visit the Communities4Health blog at www.healthiestcities.org/Blog, updated twice monthly with grantee interviews and posts on topics such as food insecurity, health equity, community engagement and more.
- Read our previous HCCC Highlights Reports to learn more about what our 20 communities have accomplished since the start of the Challenge in July 2020: <http://healthiestcities.org/About-the-Challenge/Reports>
- If you want to know more about a specific HCCC community, please visit their individual project page and view their project snapshot: <http://healthiestcities.org/Communities>
- To support our 20 communities, we've pulled together some resources on some of today's most pressing issues and topics related to the Challenge: <http://healthiestcities.org/Topics>

Many thanks to our 20 cities and counties for their diligence and hard work this past year.

Special gratitude to our advisory council for their expertise and support for grantee-related activities.



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