HCCC Highlights

January-June 2021



Report 2 of 4



About the Healthiest Cities & Counties Challenge

The American Public Health Association, with funding from the Aetna Foundation, is working in partnership with the National Association of Counties and Healthy Places by Design to support 20 communities across 11 states to address local health challenges through the Healthiest Cities & Counties Challenge.

The primary goal of the Challenge is to reduce disparities in chronic disease outcomes in communities impacted by inequitable:

- access to foods that support healthy eating patterns; and
- access to health services.

At the core of the Healthiest Cities & Counties Challenge is the commitment to authentic community engagement and multisector partnerships. 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 project in July 2020, Challenge project teams have adopted community engagement and multisector partnership practices that are beginning to address inequities related to food access and health services. The Challenge has positively impacted the way community members and organizations work together by providing financial support, technical assistance and a peer learning network.



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Executive Summary

The 20 <u>Healthiest Cities & Counties Challenge grantees</u> work 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 the work of the grantees.

The 20 project teams will continue to establish new partnerships and shift power to community residents through September 2022 and beyond, paving the way for systems and policy change to achieve health equity. This HCCC Highlights Report provides an overview of accomplishments, success stories and lessons learned during the second reporting period.



Key Achievements: January - June 2021



Doubled the number of attendees at community convenings: Grantees used these opportunities to keep their communities informed about their work and shared leadership and decision-making power with individuals with lived experience.

Engaged 396 partner organizations across 20 communities: Project teams broke down barriers to advance common goals with local government agencies and officials, schools, faith-based organizations, academic institutions, farmers, food system partners, and health systems.



Added 60 new food access points and 5 new health services access points: Communities added food pantries, meal distribution sites and health hubs to reach 252,215 individuals with foods that support healthy eating patterns, 262 individuals with health services and 14,248 individuals with education or support services.

Successful Approaches for Changing Systems in Communities



Shift organizational policies and practices to establish consistent meetings and clear agreements with partners, food procurement and distribution processes that align with community needs and fair compensation mechanisms for community members.



Make authentic connections with partners through transparency about goals and challenges, sharing funding, pooling data and information, offering and inviting expertise, connecting partners with each other and establishing referral systems.



Draw connections between local conditions and individual needs to support people and organizations in understanding diverse perspectives and root causes of health disparities and show them how they can contribute to solutions.



Implementation Update

In the past six months, Challenge grantees have accelerated their efforts to address key barriers to accessing food and health services. Challenge communities continue to find new ways of sharing leadership and decision-making power with both community members and their organizational partners to advance health equity.

The project teams have grappled with the unique challenges of building relationships in a physically distanced world during the COVID-19 pandemic. The Healthiest Cities & Counties Challenge recognizes that authentically engaging communities isn't easy under normal circumstances, and commends the 20 grantee communities for the strides they have made during this unprecedented time.

This section highlights some of the key activities carried out in the first half of 2021 and the immediate impact project teams have made on access to food and health services in their communities.

- Community Engagement
- Multisector Partnership
- Access to Food & Health Services



Community Engagement

The following community engagement strategies kept members of the HCCC communities informed. The strategies also created a pathway for shared leadership and power so project teams could implement what the community decides.

Key approaches to working with community members:

- Informed them of available resources and services through communications channels, community meetings and referral services
- Consulted them on barriers to food access through conversations at meal distribution sites, research studies and meetings
- Involved them in exploration of the food system and established advocacy priorities through formal resident engagement programs
- Collaborated with them to directly integrate their ideas into strategic planning and to lead efforts to collect and analyze data
- Shared leadership and decision-making power with them by getting feedback on proposed strategies before implementation and offering paid advisory roles



Despite the limitations of the pandemic, the 20 project teams formed unique social connections with their community members.

By the Numbers

Project teams **DOUBLED the number of attendees at community convenings to 2,096 individuals** compared to the first six months of the Challenge.





Community Examples



The Your Food, Your Choice program provided educational and community-building opportunities for students during the summer through gardening and other activities.

Youth advocacy in New Brunswick, New Jersey

The New Brunswick team successfully launched the Your Food, Your Choice New Brunswick cohort in March 2021. Nine high school students meet bi-weekly to learn about how their school food system works, identify barriers within the food system at their school, and develop skills to advocate for changes and improvements.

Ambassadors in Greenbrier County, West Virginia

The Greenbrier County team has offered 11 mini grants through the Community Ambassador Project. The mini grants support efforts to increase power and leadership capacity in communities and incubate evidence-informed community projects focused on health equity. One ambassador community is working to increase community knowledge, participation and overall well-being through programs aimed at health, nutrition, safety and emotional health.



Greenbrier Valley hosted its first-ever Pride event through one of the Community Ambassador Project mini grants, offering resources for prevention of drug overdose, suicide, intimate partner and sexual violence, along with sexual health education.



Multisector Partnership

At the start of the Challenge, many grantees expressed concerns about partnering with their local government and others in positions of power. Historically, they encountered barriers due to a lack of shared vision and communications pathways. Since January, multiple project teams have made breakthroughs in establishing partnerships across sectors.

Key approaches to partnership

- Collaborated with local government agencies and officials, schools, faithbased organizations, academic institutions, farmers, food system partners and health systems to advance common goals
- Identified duplicative activities and opportunities for further integration of partners
- Established backbone support for collaboration and clarified partner roles
- Applied for joint funding that will expand on the work of the Challenge and further solidify the practice of sharing resources across sectors
- Shared person power, expertise, data and commitments to a process and vision

By the Numbers

The 20 grantees have **engaged a total of 396 partner organizations in the last six months**, an average of roughly 20 partners per community!





Deerfield Beach is collaborating with their local middle school to provide families with a network by which to communicate ideas to local leaders and impact local health-related policies and systems.



Community Examples

Improving local foodbanking in Cincinnati, Ohio

The Cincinnati team has worked diligently with representatives at their local food bank to expand their organizational focus to include nutrition access. This partnership enabled their team's community advisory board members to have candid conversations with strong power holders. Now, a coalition with the food bank and other partners is emerging as a strategy for incorporating nutrition in local foodbanking.



The Cincinnati team began conducting site visits for partners and community members to learn more about each other and their work.

How have multisector partnerships advanced your Challenge work?

Pittsburgh, Pennsylvania: "Our increased partnership with the City has the potential to sustain interest in food issues ...[and is] slowly shifting the power dynamic to our Ambassador community, which can be carried with them throughout their neighborhood and beyond the program."

Cumberland County, North Carolina: "We have found that building a rapport with local business and university-based entities initiates trust and supports our community partnership efforts."

HEALTH SYSTEM PARTNERS IN ORANGE COUNTY, NEW YORK

The Healthy Orange team engages three county hospitals and other partners to strengthen systems and connect residents to the resources they need. This partnership has created opportunities for hospital staff to connect directly with members of the community to share information about local services.

One partner said, "Our hospital is small, so our collaboration with the county is helping us reach more people. As part of this project, we have expanded the sites where we refer people facing food insecurity."



Access to Food & Health Services

Challenge project teams have achieved critical success in meeting food and health services needs during the pandemic. Despite the emergence of unplanned priorities like vaccinations, the teams implemented strategies to address longstanding food insecurity and barriers to health care.

Key approaches to increasing access:

- Provided culturally appropriate foods through newly built pantries and meal distributions
- Screened for food insecurity and referred individuals to related services, often through health navigators or community health workers
- Expanded awareness of relevant issues and services through professional relationships and capacity-building activities in health care settings
- Created opportunities for advocacy by developing and participating in policy councils and providing community members with platforms to share their experiences
- Assessed community needs and access barriers to inform the development of strategies
- Built infrastructure to support data collection and identified needs for sharing information across organizations



Dougherty County's Spring Festival is an annual event that brings together members of the community to improve habits and lifestyles.

Dougherty County: "...more community members are encouraged to grow food at home no matter where they live. Some residents within food deserts have a better understanding of the significance of learning how to grow fruits and vegetables and how empowered they become with the knowledge and skills to grow fruits and vegetables at home."



Access to Food & Health Services

By the Numbers



Since January 2021, an additional 60 new food access points and 5 new health services access points established



Teams reached 816,890 individuals with advocacy or awarenessraising activities, an increase of 16,000 over the previous reporting period



252,215 individuals provided with foods that support healthy eating patterns

262 individuals provided with health services, an increase of 162 individuals



14,248 individuals provided with education or support services that support food access and/or access to health services, more than double the reach of the first six months



264 individuals provided with training or capacity-building through new programs



Community Examples



The Perry County team has reached 30,000 individuals through their print and web-based public communications.

Education and Support Services in Perry County, Kentucky

The Perry County team developed a calendar of food resource availability that is being used by other community organizations to donate food from events. The team also created a tri-fold brochure that includes resource-availability information on nutrition programs. Their strong social media campaign provided community members with nutrition-science information on how to use various local foods to support their health.

Food recovery in Collier County, Florida

Using a web-based application, the Collier County team recovered and redistributed 24,500 pounds of local food that would otherwise be thrown away to assist 11 non-profit organizations. This application allows food retailers and emergency food providers to manage donations, track data associated with donations, establish connections and streamline donation logistics.



Through collaborative partnership, Collier County has expanded access to high-quality foods for those facing food insecurity.

SERVING STUDENTS AND FAMILIES IN CAMBRIA COUNTY, PENNSYLVANIA

The Cambria County team's HUB, a network of community-based organizations that connect at-risk individuals to services, expanded their priority population to include students and families in a local school district.

The team's network of community health workers is assisting these families to connect them with the appropriate health resources and services. The team anticipates that close to 50 more families will be referred to them in the coming months.



Systems & Policy Change

The Challenge design was based on the belief that communities need to address the systems and policies that influence social determinants of health – like food access and access to health services – if they are to achieve health equity. In order to meaningfully change systems within communities, individuals and organizations must work together to ensure no one is left behind, rather than blaming individual behaviors for chronic disease disparities.

The community engagement and multisector partnership practices detailed earlier in this report impact both immediate access to food and health services and the conditions that hold systemic inequities in place. The following section provides an overview of the key activities that support systems change in Challenge communities and the observed impact of those changes.

- Policies & Practices
- Making Connections: Resource flows, Relationships & Power Dynamics
- Mental Models



Policies & Practices

Changes to policies and practices have been observed in Challenge communities over the last six months, serving as drivers of long-term change that can begin to address systemic inequities.

Pivotal organizational policy and practice changes established across communities:

- Consistent cadence for convening with partners
- New partnership agreements, committee by-laws and accountability processes
- Updated food procurement and meal distribution practices
- Compensation for community members to honor their contributions

How have changes to established policies/practices advanced equity in your community?

Chula Vista: "Local funding to support and complement federal funding for nutrition incentive programs is a game changer in San Diego County, especially if this funding can be secured on an ongoing basis, which is something that we are working on."

The county government committed to expanding SNAP eligibility and providing \$3 million to scale up the Mas Fresco/More Fresh nutrition incentive program to the entire county.

By the Numbers

Adopted 36 new or modified organizational policies and practices



PUBLIC POLICY WIN IN ROCHESTER, NEW YORK

The project team in Rochester successfully advocated for the local city council to pass a bill that established a food policy council, making it one of just a handful of such councils across the entire country backed by legislation.

PRACTICE CHANGE EXPLAINED

"Our county's food systems planning team developed a procedure for compensating community members for participating in working groups, interviews, or focus groups...

This procedure honors the importance of context expertise and seeks to equitably engage the community to make our analysis of the assets and challenges in our food system as honest and comprehensive as possible."

-Tompkins County



Making Connections: Resource flows, Relationships & Power Dynamics



Along with more than 40 other participants from the community, the Cambria County team formed a COVID task force to provide vaccinations and vaccine education.

HCCC project teams stepped up to support their partners in meeting the immediate needs of community residents, while also planting the seeds for long-term systems change. Through the open exchange of information within their partnerships and direct community engagement, the teams developed new connections across sectors and shifted power to members of the community.

How has your work cultivated new relationships and connections within your community?

Paterson, New Jersey: "United Way took over the fresh produce ordering as a temporary measure to alleviate the administrative burden on the school district and then used their new position to support systemic change in procurement practices. United Way also connected the school district with transportation providers like ModivCare who were willing to deliver the meals."

Kerrville, Texas: "The San Antonio Food Bank placed a hold on certifying new pantries due to COVID-19. We established the pantry at Barnett Chapel but our plan for sustainability included being certified with the San Antonio Food Bank. [Our project partner] advocated for the pantry at Barnett Chapel...and [their] relationship with [the food bank] resulted in an on-site inspection and certification for the pantry."



Making Connections (cont.)

Pivotal changes in resource flows & relationships:



Sharing funding, data and information, expertise, insights, networks, communications pathways, referral systems and compensation



New food procurement pathways, access points and delivery methods to increase the amount of fresh, local produce available to community residents with food insecurity



Creating a direct path for community voices to be heard by powerholders by serving as conduits between members of the community, government and other organizations



Leveraging existing relationships and introducing contacts to Challenge partners



Connecting local systems with previously unknown resources

RELATIONSHIP BUILDING EXPLAINED

"This year our Wilkes Fresh team focused on building genuine connections with our growers to secure a seamless flow of produce from the beginning to end of our market season. When you know your local farmers, you know how your food is grown, made and where it comes from...

With this knowledge, we can better support healthy eating habits, share farm to table recipes with customers straight from our growers while strengthening our local food economy and revitalizing our community."

-Wilkes County, North Carolina



Mental Models: Changing Beliefs & Assumptions

Challenge teams have noticed subtle shifts in thinking within themselves, their organizations, their partners and the broader community – the unifying theme is inclusivity.

Pivotal changes in mental models:



Recognition of the connection between local conditions and individual health outcomes



Sense of accountability to others and desire to understand diverse experiences



Interest in being an active part of the solution to addressing access barriers

What changes have you seen in mental models within your project team, partners or community members?

Cincinnati, Ohio: "[Our partners] have applied lessons on DEI themes and actually forced themselves and their organizations to reckon with the discomfort of not being as diverse, equitable, and inclusive as they might have hoped. Applying trainings to daily life, seeing coworkers differently, and asking not only, "How can we hold ourselves accountable?" but also, "How can we push others to be accountable?"



Mental Models (cont.)



The Forsyth County team gathered feedback from various partners on gaps and functionality of their system prototype designed to improve care coordination for individuals with behavioral health needs

Forsyth County, Georgia: "The other major influence on our project is the continued realization just how prevalent mental illness is within our county. As we continue to meet with our stakeholders, we are reminded just how many interactions are occurring with the very citizens our solution is designed to support. Now more than ever, the technology team and our stakeholders can see how data and technology can be another tool in the toolbox to provide necessary services to those most requiring of assistance."

Wilkes County, North Carolina: "...people who identified as hardworking but struggling were resentful of discounts to people they assumed must not be similarly hard-working if they were accepting public assistance. We immediately seized the opportunity and began doing more education around the widespread prevalence of food insecurity in our community and the level of income people could earn and still qualify for benefits. ...People are starting to see and understand the scope of hunger in our community, and how solutions such as Wilkes Fresh create opportunity for everyone to access healthy foods."

MENTAL MODELS EXPLAINED

"We have advanced and more clearly articulated our belief that impacted communities should provide guidance, background, and vision for the development of our project...

This change has allowed us the opportunity to see a different perspective and work in more effective, historically sensitive ways."

- Wheeling, West Virginia



Tips for Funders & TA Providers

While we are only a year into the Healthiest Cities & Counties Challenge, regular communication with our grantees through one-on-one coaching calls, feedback at the end of each peer learning session and responses shared in their interim reports have supported our ability to be flexible and responsive to the needs of our project teams. Through this feedback, we are learning in real time what works to support our 20 communities, and this section shares our tips and reflections from the grantees themselves on their experience.

Tip #1: Supporting compensation for community members helps achieve equity.

Tip #2: Communications support accelerates partnership development.

Tip 3: Backing operational activities for collaborative work drives systems change.

Tip 4: Capacity-building and funding provide a synergistic effect.



Tip #1: Supporting compensation for community members helps achieve equity

"Prior to the Chula Vista Healthiest Cities & Counties Challenge Project, Resident Leaders were not compensated for their time and contribution to creating a healthier community. During the course of the last year, this mental model has changed, with the realization that Resident Leaders do need to be compensated for their time and contribution. This has resulted in consensus for compensation on the amount of approximately \$20 per hour for this work. The Challenge Project put into action a more equitable model."

- Chula Vista, California

In April 2021, the Challenge communities came together for a half-day virtual workshop led by Advisory Council member Sarah de Guia, CEO of ChangeLab Solutions, to explore ways to move toward deeper engagement with community residents. Each project team member was asked to identify one small step they could take immediately to shift some of their own power into the hands of community members.



Tip #1 (cont.)

Project teams expressed their interest in continuing to meet about community engagement through monthly ad hoc peer exchanges, and these conversations spurred further discussion around community compensation with peers and coaches. Project teams leveraged examples shared in peer learning and coaching calls by integrating new compensation structures into their budgets for year two. Now, nearly every grantee provides stipends or other forms of payment to community members for their time and context expertise, as appropriate for their population and project.

According to our grantees, Challenge support has been integral to engaging resident leaders.

In Deerfield Beach, for example, the project team implemented both a teacher training and an internship program focused on foodwaste recovery and redistribution efforts at their local middle school. The project team shared that, while there was initially some hesitation in the community to providing youth with compensation, resources gleaned from the Challenge supported the team in advocating for financial support or gift cards, which "has allowed for individuals to dedicate increased time and energy to their desired health efforts."



Tip #2: Communications support accelerates partnership development

"The Challenge has assisted with our online growth as we are continuing to professionalize our social presence and be more inclusive...This has been instrumental in drawing in new customers to Wilkes Fresh and attracting potential vendors to the program."

- Wilkes County, North Carolina

Many community-based organizations don't have in-house communications experts to disseminate key messages about their work. Since the start of the Challenge, APHA has supported grantees' communications efforts by providing a project website, templates, toolkits and capacity-building around effective communications practices.

Grantees observe that leveraging multiple partner organizations' communications platforms has generated more attention and support for projects within local communities and even attracted new partners from neighboring communities. They have also noticed that it has given their residents the ability to more actively use their voices in advocating for change.



Tip #2 (cont.)

The Kerrville, Texas, team works in the Doyle neighborhood, a historically segregated community that fell below the radar for decades. The team reported:

"The Challenge has helped move Doyle from a hidden, isolated community to the city's example of a model for change to improve health and wellness. The ability to share the link to the [Challenge] website has been a huge benefit. The information allows people to see the bigger picture and gives credibility to the work being done in the Doyle community. The information inspires people to take action to be a part of this movement for change."

Check out these media spotlights to learn more about Challenge partnerships and to see communications efforts in action:

Food Equity Ambassador Program Comes to Pittsburgh

(https://www.pittsburghmagazine.com/food-equity-ambassadorprogram-comes-to-pittsburgh/);

Leaders: Community assistance pilot program at GJES a success (https:/www.tribdem.com/news/leaders-community-assistance-pilotprogram-at-gjes-a-success/article_2782a136-ae88-11eb-a476-7bdee5413749.html)



Tip 3: Backing operational activities for collaborative work drives systems change

"Much of our local nonprofit work consists of programs delivering direct services, the demands of which mean that staff often have little time to analyze and design innovations aimed at systemic problems. By funding a project team and Coordinator position whose scope of work explicitly includes convening stakeholders across sectors to pursue collaborative systems change strategies, the Challenge has empowered us to think bigger."

- Tompkins County, North Carolina

Financial resources provided by the Challenge have created an opportunity to change practices within organizations and communities because many teams have been able to hire staff to coordinate across partners after receiving Challenge funds. Coaching and technical assistance provided by the Challenge also has included best practices for meeting facilitation and structure that supported positive practices across project teams.



Tip #3 (cont.)

For example, the Pittsburgh team, which uses part of their funds to support staff time leading collaborative efforts, requested support around best practices in collaborative decision-making,

This ultimately led the team to adopt a consent decision-making process that has improved their work flows:

We needed an equitable decision-making practice to ensure all partners' opinions were heard and considered, and the Challenge presented us with the opportunity to develop an informed method of addressing challenges we faced with decisionmaking as a team...

> This process helped move us productively forward in a way that created space for all perspectives and identified a range of tolerance for all team members to express themselves and develop a solution that was comfortable with each team member."



Tip 4: Capacity-building & funding provide a synergistic effect

"The lessons learned through the Challenge were applied by the Planning Team to promote a better understanding of... the importance of community voice in the policymaking process...The Challenge provided financial resources to compensate residents for their participation... [which allowed] diverse voices to influence the structure, bylaws, and membership [of our food policy council]."

- Rochester, New York

Resource flows between the Challenge team and grantees, as well as between peer communities, have been instrumental to the preliminary successes of the cohort. The Challenge provided financial resources and technical assistance for communities to find new ways of partnering together, which resulted in new opportunities.

Despite being spread out across the country, our technical assistance team has modeled best practices in virtual meeting facilitation.

Tip #4 (cont.)

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In order to cultivate a culture of learning and shape grantee practices, the Challenge has provided monthly webinars and peer-learning affinity sessions. The Challenge also hosts coaching sessions monthly with each grantee team. During the peer learning exchanges, project teams come together to discuss their challenges and solutions on topics that arise during one-on-one coaching conversations.

We also distribute a monthly newsletter with carefully curated information and web-based resources relevant to the technical assistance needs of the grantees. While grantees value the direct financial resources provided by the Aetna Foundation, they also have expressed the significance of these other investments and resources shared.

The Cincinnati team reported that, in addition to funding, the coaching, peer learning and resource sharing have influenced their success:

Coaching has been invaluable. Being able talk through someone who is seeing the work from a 50,000 foot level at multiple entities has helped us develop implementable and effective strategies for overcoming barriers...

The workshops and peer-connections have likewise helped us gather resources from people who are doing similar work in other regions and have the personal relationships to talk through with them how the tools have worked/not worked and to learn strategies for making small shifts that can translate into better outcomes."



Additional Resources & Information

Visit the Communities4Health blog at www.healthiestcities.org/Blog, updated twice monthly.

Our blog features bi-weekly posts on topics related to the work of the Healthiest Cities & Counties Challenge and interviews with members of the Challenge community. We explore topics such as food insecurity, health equity, community engagement and more.

Hear how each of our HCCC communities are advancing racial equity through these six-word stories: https://youtu.be/08Q6kUFncV4



Coming soon: "Going beyond Public Health 3.0: How flexible funding streams can help to break down silos, change systems and advance health equity in local communities"

This opinion editorial — a must read for funders of systems change initiatives — has been accepted for publication in the American Journal of Public Health. The article explores how flexible funding streams can support multisector strategies that address local public health challenges, social determinants of health and health equity. Be on the lookout in November at https://ajph.aphapublications.org.



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- <u>Dougherty County,</u> <u>Georgia</u>
- <u>Tompkins County, New</u> <u>York</u>
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