2019 MAPP2Health

Charlottesville/Albemarle MAPP Council Meeting Minutes

# Tuesday, February 12, 2018, 8:30–10:00 am

## Charlottesville/Albemarle Health Department, Entrance #3, 1138 Rose Hill Drive, Charlottesville, VA 22903

# Our MAPP Vision:

*Together we support equitable access to resources for a healthy, safe community.*

# Our MAPP Values:

|  |  |
| --- | --- |
| *Accountability* | *Respect* |
| *Inclusivity* | *Teamwork* |

**Introductions & Welcome**

* Showed more clips from *Unnatural Causes*:
  + [Kim Anderson’s Story](https://www.youtube.com/watch?v=FPCpB8zZP20&list=PLayHb3ehfKbfxdMAmIkFm2wlRikR4Ka6f&index=17)
  + [Living in Disadvantaged Neighborhoods is Bad for Your Health](https://www.youtube.com/watch?v=e48K4RN2nrI&index=19&list=PLayHb3ehfKbfxdMAmIkFm2wlRikR4Ka6f)

**Photovoice Project Selection**

* Photovoice is a qualitative research method that uses photography to capture community voices and gather community input.
* Showed video of the first project: [Sisters of Nia Photovoice Project](https://bcove.video/2PCQVLW)
* Photovoice will provide a community voice as part of the *2019 MAPP2Health Report.*
  + Photovoice is asset-based and aims to learn from participants about who/what they consider to be community and cultural assets.
  + At the next/third meeting, we will share the results of the Photovoice project (assets + photos) as you consider recommended best practices for each MAPP priority. Ideally, assets will inform selection of strategies and assets with be incorporated into strategies in order to build health equity.
* In Cville/Albemarle, groups were selected based on interest in participation:
  + City Schoolyard Gardens
  + Friendship Court
  + JABA–Scottsville and Esmont
  + Potentially a group from Region 10
  + Boys and Girls Club in Southwood

**What Differences Do You See in the Data?**

* Meeting attendees walked around and reviewed data posters hung on the walls using stars to highlight the following *(poster pictures are included at the end of the minutes)*:
  + **Blue** = What stands out to you?
    - % obese adults map (6 + 1 purple)
    - Albemarle and Charlottesville black low birth weights (5)
    - Charlottesville overdose mortality rates (3)
    - Life expectancy estimates (1 – Cville, 1 – Nelson/Albemarle line)
    - % of families below federal poverty level (2)
    - % uninsured (On Charlottesville line – 2)
    - ALICE Report by race/ethnicity in Albemarle (2)
    - Physical inactivity (Albemarle – 2)
    - % Smokers (1 – Fluvanna)
    - Poor Mental Health Days (1 – Albemarle)
    - Albemarle overdose mortality rates (1)
    - Albemarle neonatal abstinence rate (1 – next to state rate)
  + **Green** = Do you see any differences in the data (better/worse outcomes) by geography, race, age, gender, etc.?
    - % Smokers (5 – Charlottesville)
    - % obese adults map (4)
    - Albemarle High School on-time graduation rates (2); Monticello High School (1)
    - Charlottesville High School on-time graduation rates (3)
    - Access to exercise opportunities ( Charlottesville – 1; Fluvanna/Greene – 1)
    - Western Albemarle High School on-time graduation rates (2)
    - Albemarle and Charlottesville black low birth weights (2)
    - Life expectancy estimates (2)
    - Poor mental health days (1 – Charlottesville)
    - % of families below federal poverty level (1)
    - % uninsured (On Greene line – 1)
    - Physical inactivity (Charlottesville/Albemarle – 1)
  + **Yellow** = Is there a topic where you’d like to see more data or have more discussion?
    - Albemarle overdose mortality rates (6)
    - % of obese children map (5 + 1 hand-drawn red star)
    - Life expectancy estimates (4)
    - Charlottesville overdose mortality rates (3, 2 out of 3 placed next to fentanyl/heroin overdoses)
    - Poor mental health days (2)
    - ALICE Report by age in Charlottesville (2)
    - Charlottesville High School on-time graduation rates (1)
    - Western Albemarle High School on-time graduation rates (1)
    - Albemarle and Charlottesville black low birth weights (1)
    - % of families below federal poverty level (1)
    - ALICE Report by race/ethnicity in Charlottesville (1)
    - % obese adults map (1)

**Albemarle County / City of Charlottesville Data Profile**

* *See presentation, draft Albemarle County and City of Charlottesville Data Profile handouts, and TJHD Community Survey handout for Albemarle and Charlottesville for data and additional information.*
* MAPP priority indicators and other data are available online at: <https://public.tableau.com/profile/thomas.jefferson.health.district#!/>
* All data sources are listed on the slides; there are many different sources that are used to be able to report on all the different metrics. Also important to note there is a lag between collection and publication of data.
* When noted as a rate, the rate is usually calculated/reported per 100,000 people (or sometimes 10,000 or 1,000) so that it is comparable between localities/to state or national trends.

Questions:

* Q: Mental healthcare and necessary access – would non-English speakers be represented in that group? A: both BRFSS (statewide self-reported phone survey) and TJHD’s community health survey (mailed self-reported) reach a randomized selection of households/individuals in the district. In Virginia, [BRFSS](http://www.vdh.virginia.gov/brfss/frequently-asked-questions/) is conducted in English and Spanish. For the TJHD survey, the questionnaire included a card in Spanish that could be mailed in to receive a copy of the survey in Spanish.
* Q: Is there a source for more concrete data for mental health? A: In addition to BRFSS, other data sources are included on the MAPP [dashboard](https://public.tableau.com/profile/thomas.jefferson.health.district#!/vizhome/MAPP2Health-MentalHealthandSubstanceUsePriorityIndicators/MHSUStory), the Virginia Department of Health’s [Data Portal](http://www.vdh.virginia.gov/data/), and Region Ten Consumer [data](http://regionten.org/about-us/key-documents/).
* Q: What is happening at the next meeting?A: MAPP Core Group will share the Photovoice results of photos and identified community and cultural assets as well as recommendations of evidence-based best practices from the Best Practices Work Group. We will share details of the locality-specific MAPP grants for organizations to partner together to move forwarded MAPP strategies (ideally a blend of recommended best practices and community/cultural assets identified through Photovoice).

**Data & Equity Discussion**

*Some questions to consider include:*

* What patterns to you see? *From Unnatural Causes*: What patterns do you observe? How do neighboring communities compare?
* *From Unnatural Causes*: How do you feel about this data profile as a snapshot of your life or community? What does it fail to capture?
* Health disparities are differences in health status (different than health equity); disparities could be by income, race, ethnicity, gender, education, age, employment status, sexual identity, homeownership and housing status, immigration status, etc.
  + Do you see any differences in health outcomes?
* Did you see anything in the data that supported what you saw in the *Unnatural Causes* video clips or from the “Ten Things to Know about Health?” For example:
  + *From Unnatural Causes*: Built space and the social environment have a direct impact on residents’ health. Neighborhood conditions can have an indirect impact on health by making healthy choices easy, difficult, or impossible. Public policy choices and private investment decisions shape neighborhood conditions 🡪 Did you see any data to support this?
  + *From Unnatural Causes*: Layoffs, unemployment, and job insecurity have a negative effect on health 🡪 Did you see any data to support this?
* Place matters. Our zip code is a strong indicator of our health. Do you see any geographic differences in the data? Did you see any differences in life expectancy between counties, census tracts, or neighborhoods?

**Final meeting:**

**Tuesday, May 7, 2019**

8:30–10:00 AM

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