2019 MAPP2Health

Louisa Interagency Council (IAC) Meeting Minutes

# **Thursday, February 14, 2019, 9:30am**

# Louisa County Administration Building, 1 Woolfolk Avenue, Louisa, VA 23093

# Our MAPP Vision:

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

# Our MAPP Values:

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

# **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 Louisa, will work with either the GED program and/or the Louisa Reentry Council.

**Louisa County Data Profile**

*What differences do you see in the data?*

* Played select clips form the four-hour *Unnatural Causes* Documentary:
  + [Living in Disadvantaged Neighborhoods is Bad for Your Health](https://www.youtube.com/watch?v=pzafgHG7EFE)
  + [Kim Anderson’s Story](https://www.youtube.com/watch?v=sdFzwPEfRhs)

*County Data Profile*

* *See presentation, draft Louisa County Data Profile handout, and TJHD Community Survey handout for Fluvanna & Louisa Counties (combined) for data and additional information.*
* MAPP priority indicators and other data are available online at: <https://public.tableau.com/profile/thomas.jefferson.health.district#!/>
* Reviewed data presentation and discussed Louisa County Data Profile + community survey results. Things to note:
  + There is a lag in collection and publication of data. Most of the data we are looking at currently is from 2016 or before.
  + The data comes from many different data sources. Each data source is listed in the presentation / handout.
  + When data 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.
* After meeting concluded, attendees had the chance to walk around and review data posters displayed on the tables using stars to highlight the following *(poster pictures are included at the end of the minutes)*:
  + **Blue** = What stands out to you?
    - % smokers (1 – Charlottesville)
    - Adult obesity map (1 – Louisa)
    - Child obesity map (1)
    - Physical inactivity (1 – Louisa)
    - Access to exercise opportunities (1 – Louisa)
  + **Green** = Do you see any differences in the data (better/worse outcomes) by geography, race, age, gender, etc.?
    - Louisa low birth weight (LBW) (1 – white LBW, 1 – black LBW)
    - Physical inactivity (2)
    - % of families below federal poverty level (1 – Nelson, 1 – Louisa)
    - % 3rd grade English SOL pass rate at Moss Nuckols (1)
    - % free and reduced lunch in Louisa schools (1)
  + **Yellow** = Is there a topic where you’d like to see more data or have more discussion?
    - School suspensions by race/ethnicity at Louisa County High School (5)
    - Adult obesity map (2 – Louisa)
    - Louisa overdose mortality rates (2)

*Data & Equity Considerations*

*Some questions to consider include:*

* *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 Louisa IAC MAPP Presentation:**

Thursday, May 9, 2019

