

Systems Change Strategies to Address the Social Determinants of Health

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Capacity for Change, LLC

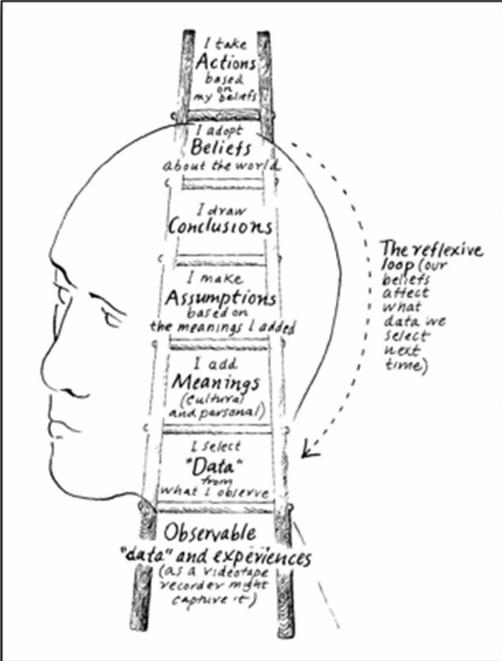
Capacity for Change, LLC

Capacity for Change, LLC is a public interest consulting firm based in West Chester, Pennsylvania that works with public, philanthropic and nonprofit organizations to create positive and lasting social impact through better strategy, culture and partnership design. Established in 2001 by Jason D. Alexander, MPP, and Meghan McVety, MPA, Capacity for Change has expertise in strategic planning, public-private partnership development, convening facilitation, organizational culture and effectiveness, design thinking for social innovation, social enterprise business planning, the Collective Impact framework, and Diversity, Equity and Inclusion (DEI) initiatives.

Systems Change Strategies to Address the Social Determinants of Health

Learning Objectives

- ★ Better understand the social determinants of health and their impact on individuals and communities
- ★ Explore systems change concepts, strategies & tools that can help improve health outcomes and ensure more equitable access to care
- ★ Identify and co-create new opportunities to work together to make a collective impact on the health of your community
- ★ Change the world



Actions
I will not invite David to the next meeting



Assumptions
If people don't care they shouldn't be invited to future meetings.



Add Meaning
When someone doesn't contribute it means they don't care.



Observable Data
One committee member is looking at his phone and not contributing to the meeting.

“We don't see things as they are, we see them as we are.”

– Anais Nin

Why Change?

Systems Change Strategies to Address the Social Determinants of Health



How Healthy Is South Central Pennsylvania?

Cumberland County

- **Ranks 5th for Health Outcomes in PA**
- **Health behaviors:** Physical inactivity, teen births lower than state average
- **Clinical care:** Uninsurance rates, ratio of primary care physicians, preventable hospital stays lower than state average
- **Social & economic factors:** HS graduation rates, some college, children in poverty, injury deaths better than state average
- **Physical environment:** Air pollution above state average but better over time; severe housing problems better than average

Perry County

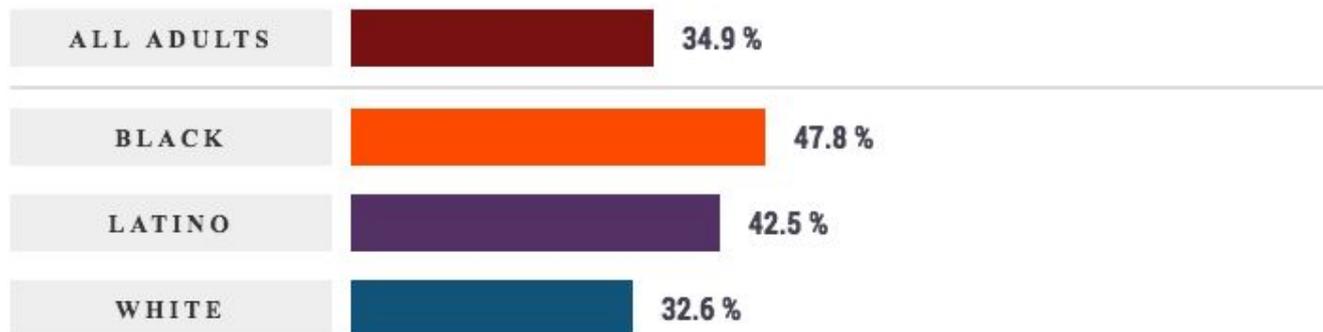
- **Ranks 18th for Health Outcomes in PA**
- **Health behaviors:** Adult smoking rates lower than state average
- **Clinical care:** Diabetes monitoring rates better than state average
- **Social & economic factors:** HS graduation, unemployment, children in poverty rates better than state average
- **Physical environment:** Air pollution above state average but better over time; severe housing problems better than average



29%

2017 Adult Obesity Rate in Pennsylvania

CURRENT OBESITY RATES AMONG ADULTS BY RACE AND ETHNICITY (2011-2012)



Adults 20 & up. Source: Wang Y and Beydoun MA. The Obesity Epidemic in the United States — Gender, Age, Socioeconomic, Racial/Ethnic, and Geographic Characteristics: A Systematic Review and Meta-Regression Analysis. Epidemiol Rev, 29: 6-28, 2007. And, CDC/NCHS, National Health and Nutrition Examination Survey, 2011-2012.

OBESITY TRENDS AMONG WOMEN BY RACE AND ETHNICITY



Adults 20 & up. Source: Wang Y and Beydoun MA. The Obesity Epidemic in the United States — Gender, Age, Socioeconomic, Racial/Ethnic, and Geographic Characteristics: A Systematic Review and Meta-Regression Analysis. Epidemiol Rev, 29: 6-28, 2007. And, CDC/NCHS, National Health and Nutrition Examination Survey, 2011-2012.

Obesity is a complex condition with biological, genetic, behavioral, social, cultural, and environmental influences.

Race-ethnicity, gender, age, income, and other socio-demographic factors also can play a role in this complex health issue.

- Food Research & Action Center
frac.org/obesity-health/factors-contributing-obesity

- Stress
- Inadequate sleep
- Access to healthy foods (inc. cost) and nutrition education
- Physical inactivity
- Food advertising
- Portion sizes
- Medical conditions
- Prescription drug use
- Chemical exposure
- Maternal pre-pregnancy weight status and smoking
- Adverse Childhood Experiences
- Lack of safe, green spaces for physical activity

WHAT IS A **COMPLEX SOCIAL PROBLEM?**



LACK OF URGENCY

The problem has persisted for so long that it feels normal. There is little incentive to approach it differently.



MULTIPLE ACTORS

Various institutions own pieces of the problem, but no one is responsible for the whole picture.



HIGH PUBLIC COST

The problem is expensive, and taxpayers bear the high cost of responding to it.



POOR OUTCOMES

Despite heavy taxpayer spending, existing responses do little to solve the problem long-term.



NEGATIVE USER EXPERIENCE

People in need have a difficult time navigating available resources. Institutions set up to help often make the problem worse.



CHANGING INFORMATION

The problem has moving parts, and new realities emerge constantly.

Obesity, like most public and community health issues, is a complex social problem.

See also:

- ❖ Homelessness
- ❖ Opioid addiction
- ❖ Mental health stigma
- ❖ Food insecurity
- ❖ Unresolved childhood trauma

Complexity of Social Problems Vs. Our Solutions

Traditional Approaches > Isolated Impact

- Funders select individual grantees
- Organizations work separately and compete
- Evaluation attempts to isolate a particular organization's impact
- Large scale change is assumed to depend on scaling organizations
- Corporate and government sectors are often disconnected from foundations and nonprofits

Large-scale social change requires broad cross-sector coordination, not the isolated intervention of individual organizations.

Case Study: Homelessness in Montgomery County PA

464

People were literally homeless in Montgomery County, PA on the night of January 30, 2013.

Before 2014, Montgomery County's housing crisis response system was...

- Fragmented, duplicative and lacking coordination
- On a "First come, first serve" basis for services
- Primarily based on a Housing Ready philosophy
- Rife with silos and side doors
- Not using data to drive decision-making
- Funded through isolated and unaligned public and philanthropic sources
- Hard to access and navigate for the consumer
- Disconnected from health, mental health, child welfare, employment and other public systems

Your Way Home Montgomery County PA

34%

Reduction in homelessness from January 2014 - January 2017, including exit to permanent housing and low return to homelessness rates that meet or exceed national benchmarks

- Systems change resulting in one unified housing crisis response system
- Embrace of housing first approach & strategies
- Public-private partnership premised on the Collective Impact framework
- Re-definition of homelessness as a public health crisis
- Five-year funding commitment from County Commissioners through the fee-based AHTF
- Braided and leveraged federal, state, local and philanthropic funding
- Your Way Home Fund to pool contributions that fill public funding gaps & build system capacity
- Leadership roles for consumers, providers, funders, landlords and community partners

Table Talk

1. What are the three most challenging health problems facing our region today?
2. Of these three, which might better be addressed by taking a collective systems change approach?

What Are We Changing?

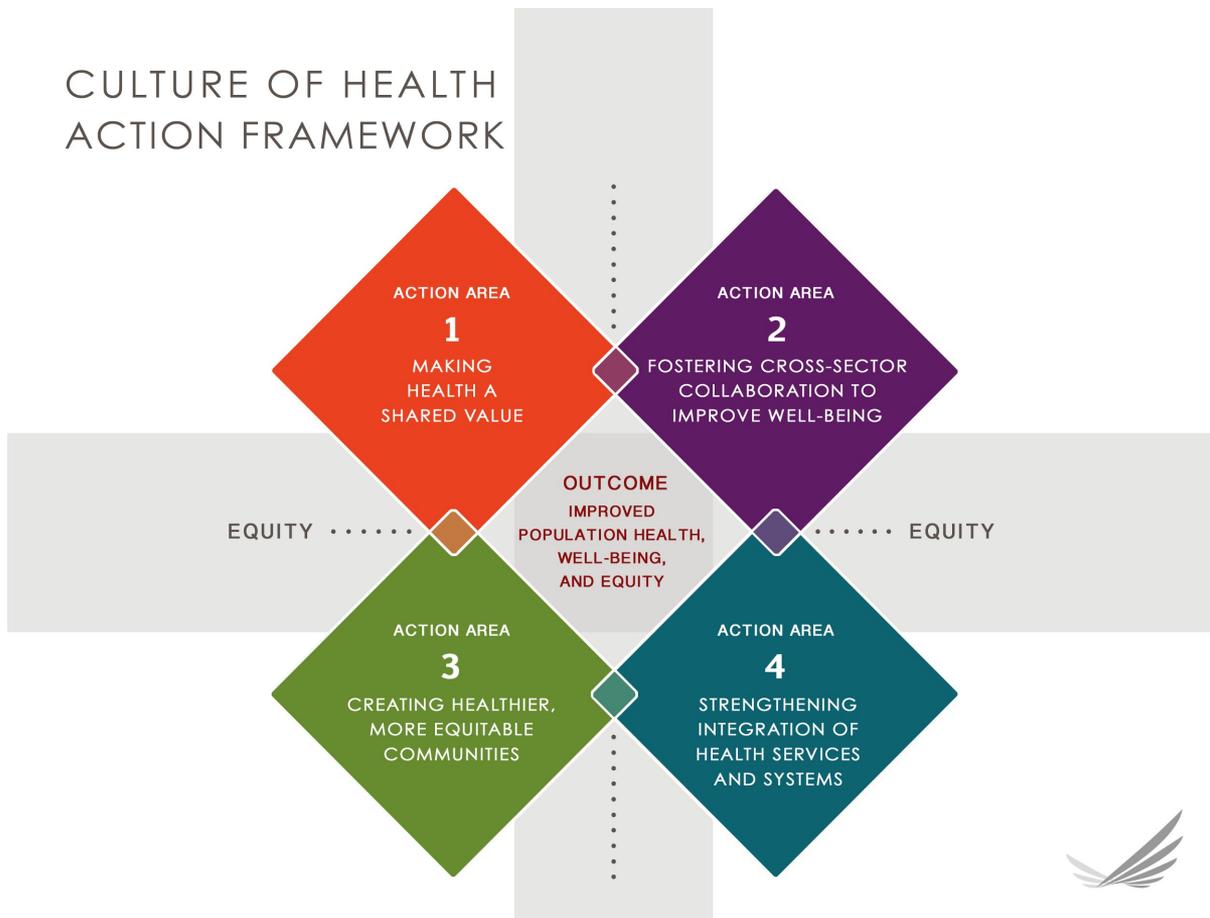
Systems Change Strategies to Address the Social Determinants of Health



Advancing Health Equity, Building Healthier Communities

When it comes to improving health, well-being, and equity in America, we often say that we are all in it together. But we as a nation have largely addressed health issues in parallel tracks, with limited cross-sector collaboration.

- Risa Lavizzo-Mourey, MD, MBA, former President and CEO, Robert Wood Johnson Foundation



SOCIAL DETERMINANTS

FACTORS THAT INFLUENCE YOUR HEALTH

The conditions in which you live, learn, work and age affect your health. Social determinants such as these can influence your lifelong health and well-being.

HOUSING	POVERTY
	
HEALTHY FOOD	GRADUATION
6.5 million children live in low-income neighborhoods that are more than a mile from a supermarket.	
	HEALTH COVERAGE
	
LITERACY	ACCESS TO CARE
	
	More than 89% of U.S. adults had health coverage in 2014. But 33 million Americans still lacked insurance.

The **NATION'S HEALTH**
A PUBLICATION OF THE AMERICAN PUBLIC HEALTH ASSOCIATION

www.thenationshealth.org/sdoh

SOCIAL DETERMINANTS

FACTORS THAT INFLUENCE YOUR HEALTH

HOUSING Housing and health are connected. Where and how people live can influence how healthy they are and how well they live. Housing is linked to:

OPPORTUNITY	EXPENSES	ASTHMA RISKS
	49.3% of renters spent more than 30% of their income on housing in 2014.	
LEAD POISONING	26.4% spent more than half of their income on housing.	24M Americans have asthma — including 6.3M children.
About 500K kids ages 1-5 have elevated blood lead levels.		Asthma can be triggered by pests, indoor allergens & poor ventilation.
High levels are often linked to lead paint & dust in homes.	EQUITY	COMMUNITY
		
GOOD HEALTH		
	Follow 8 principles for a healthy home: Keep it well-ventilated, contaminant-free, clean, safe, pest-free, well-maintained, dry & at a comfortable temperature.	

The **NATION'S HEALTH**
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SOCIAL DETERMINANTS

FACTORS THAT INFLUENCE YOUR HEALTH

EDUCATION Education and health are linked. People with better education are healthier. And with more education comes longer lives. Education is connected to:

OPPORTUNITY	INCOME	EMPLOYMENT
	More education means higher incomes.	
BEHAVIOR	Every additional year of schooling leads to an 11% increase in income.	Education means more employment.
Education is linked to healthy behaviors.		People ages 25 and over who lack high school degrees have an 8% unemployment rate, vs. a 2.8% rate among people with bachelor's degrees.
21.7% of adults with high school diplomas smoke, vs. 5.4% of adults who also have graduate degrees.	LITERACY	GRADUATION
		
LIFE EXPECTANCY		
	Education means a longer life. People who graduate from college live at least 5 years longer than people who don't finish high school.	

The **NATION'S HEALTH**
A PUBLICATION OF THE AMERICAN PUBLIC HEALTH ASSOCIATION

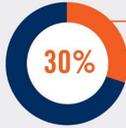
www.thenationshealth.org/sdoh

Adverse Childhood Experiences

ACEs are adverse childhood experiences that harm children's developing brains so profoundly that the effects show up decades later; they cause much of chronic disease, most mental illness, and are at the root of most violence.

- Nearly two-thirds (64%) of adults have at least one
- A person w/4 or more ACEs is:
- 12x as likely to attempt suicide
- 10x as likely to use injection drugs
- 7x as likely to be an alcoholic
- 2x as likely to have heart disease, stroke and/or cancer

POVERTY



30% MORE FAMILIES LIVE IN POVERTY NOW VS 10 YEARS AGO

- ▼ Lack of food security
- ▼ Academic underperformance
- ▼ Missed economic potential

- ▲ Making nutritious food available
- ▲ Preventing homelessness
- ▲ Increasing access to counseling and care



DOMESTIC AND SEXUAL VIOLENCE



WOMEN FACE A 30% HIGHER RATE OF SEXUAL ASSAULT

- ▼ Physical & emotional harm
- ▼ Loss of human potential
- ▼ Continued cycle of abuse & neglect

- ▲ Assisting victims through shelter, advocacy and counseling
- ▲ Teaching protective skills



ADVERSE CHILDHOOD EXPERIENCES

shorten lives by 20 years and cost society \$48 billion in lost productivity



20 YEARS LOST

- ▼ Early drug use
- ▼ Risky sexual behavior
- ▼ Mental health disorders

- ▲ Intervention
- ▲ Guidance & social development services
- ▲ Teaching skills needed to break cycle



POOR HEALTH



60% OF PEOPLE IN OUR COMMUNITY ARE OBESE OR OVERWEIGHT

- ▼ Chronic disease
- ▼ Increased health care costs
- ▼ Lower economic productivity

- ▲ Promoting healthy and active lifestyles
- ▲ Increasing access to medical, dental and mental health services



SUBSTANCE ABUSE



30% OF TEENS HAVE SMOKED POT & 40%+ HAVE CONSUMED ALCOHOL

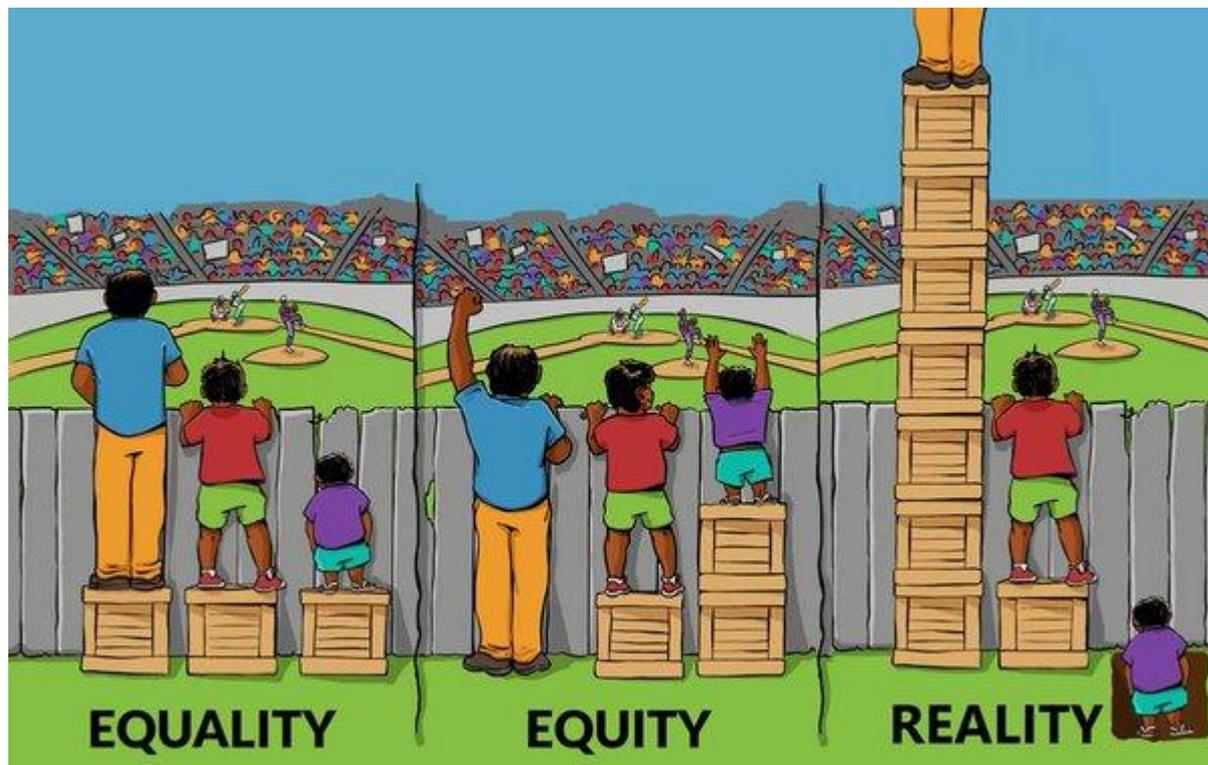
- ▼ Lower academic performance
- ▼ Increased crime
- ▼ Continued poverty, neglect & abuse

- ▲ Creating programs to educate youth and community



Health Equity

Healthy People 2020 defines health equity as the “attainment of the highest level of health for all people. Achieving health equity requires valuing everyone equally with focused and ongoing societal efforts to address avoidable inequalities, historical and contemporary injustices, and the elimination of health and health care disparities.”



Health Inequities and Disparities

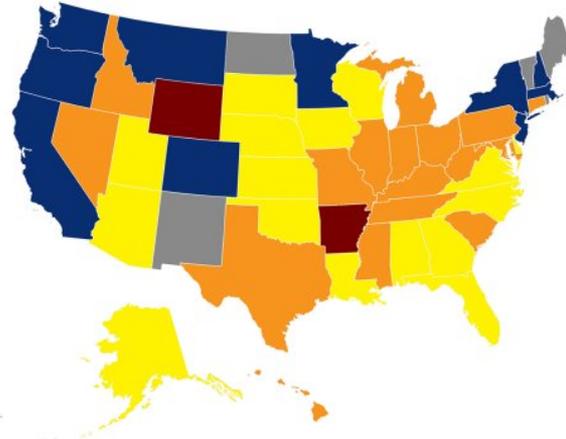
Health inequities are differences in health that are avoidable, unfair, and unjust.

Health disparities are differences in health among groups of people.

How much more do women pay for health insurance?



Before the Affordable Care Act



After the Affordable Care Act
(starting in 2014)



National Women's Law Center, "Turning to Fairness".

Based on comparable insurance plans for 25 year old women and men living in capitol cities.

<http://www.nwlc.org/resource/report-turning-fairness-insurance-discrimination-against-women-today-and-affordable-care-ac>

Fuse Washington - www.FuseWashington.org

Table Talk

1. What social determinants of health are most likely contributing to the major health problems facing our region?
2. Who is most likely to be experiencing health and health care disparities in our region?

How Might We Change Our Systems for the Better?

Systems Change Strategies to Address the Social Determinants of Health



Everything we do is tied to a coalition in which government, private sector, philanthropy, and nonprofits all come together to build trust, discuss the issue, come to an agreement on what the issue is, and then come up with a strategy to address the issue.

- Antonia Hernández, President and CEO of the California Community Foundation.

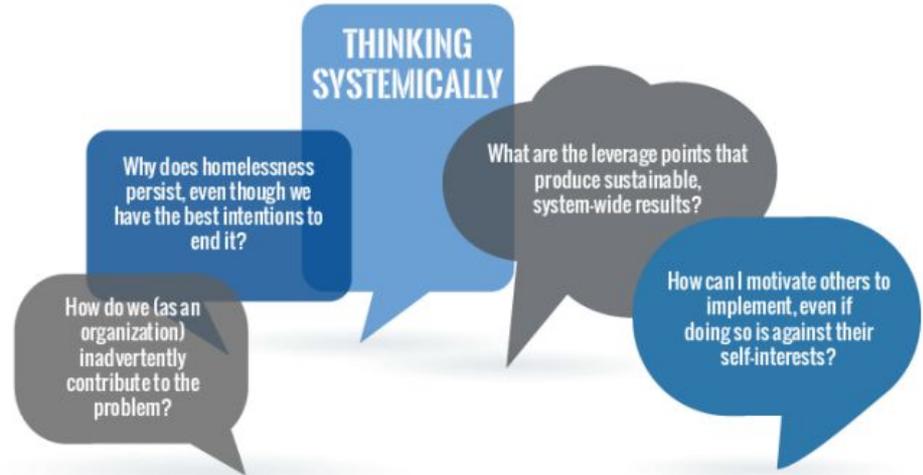
What is Systems Change?

A fundamental change in policies, processes, relationships, and power structures, as well as deeply held values and norms, as the pathway to achieve common goals and make positive social gains sustainable at scale, whether it's around increasing equity, improving health, or reducing poverty.

Source: Fostering System Change by Srik Gopal & John Kania, Stanford Social Innovation Review November 2015 www.sir.org

Systems Thinkers...

- Look at ecosystems, which are interconnected entities that cannot be reduced to discrete parts.
- Understand that every part of the system affects and is affected by other parts of the system. Cause and effect are not necessarily linear.
- Take a continuous learning, experimental and adaptive approach.
- Collaborate with and engage a diverse set of stakeholders (including those who are directly affected by the system).
- Are aware of their own power and identity and understand the different amounts and types of power among groups.
- Monitor the larger context of power relations (e.g., social, racial, cultural, political, economic) that can visibly or invisibly impact how systems function and change.



Case Study: Housing First

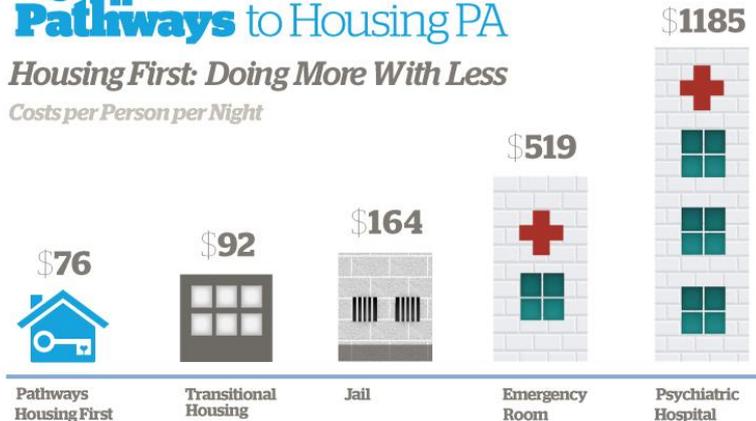
What's the Big Idea?

Housing First is a homeless assistance approach that prioritizes providing people experiencing homelessness with permanent housing as quickly as possible – and then providing voluntary supportive services as needed.

 **Pathways to Housing PA**

Housing First: Doing More With Less

Costs per Person per Night



What's Changed?

- Access, assessment and referral are coordinated across the entire system
- Consumers are prioritized for service based on vulnerability/severity of need
- Policies and funding aligned with interventions that exit people directly from homelessness to permanent housing (ex. Rapid Re-Housing)
- Federal funding based on system level performance and formal connections to other mainstream systems (e.g., healthcare, mental health, child welfare, early learning, etc.)

Case Study: Mental Health First Aid

What's the Big Idea?

Mental Health First Aid and Youth Mental Health First Aid teach anyone how to identify, understand and respond to signs of mental illnesses and substance abuse disorders in your community.



What's Changed?

- Normalizes conversations about mental health to reduce stigma
- Creates a more trauma-aware community that asks, “what happened to you?” instead of, “what is wrong with you?”
- Trains teachers, police officers, first responders, parents, managers and volunteers to recognize problems and encourage youth and adults to get help
- In just 10 years, Mental Health First Aid has become a full-blown movement in the United States—1 million Mental Health First Aiders strong and growing every day

Case Study: Health in All Policies

What's the Big Idea?

Health in All Policies is based on the recognition that our greatest health challenges—for example, chronic illness, health inequities, climate change, and spiraling healthcare costs—are highly complex and often linked.

Promoting healthy communities requires that we address the social determinants of health, such as transportation, education, access to healthy food, economic opportunities, and more.

The California Health in All Policies Task Force brings together 22 state agencies, departments, and offices. It has developed interagency initiatives focused on crime prevention, access to healthy food, and transportation.

In 2010, King County, WA, adopted an ordinance that codified bringing a health and health equity lens—a “fair and just” principle—to the county’s new strategic plan.

WHAT IS HEALTH IN ALL POLICIES? World Health Organization

Good health requires policies that actively support health

It requires different sectors working together, for example:

HEALTH TRANSPORT HOUSING WORK NUTRITION WATER & SANITATION

TO ENSURE ALL PEOPLE HAVE EQUAL OPPORTUNITIES TO ACHIEVE THE HIGHEST LEVEL OF HEALTH

HOW DOES IT WORK?

Here is one example:
Worldwide
1 IN 8 DEATHS
is linked to
air pollution exposure

TO TACKLE AIR POLLUTION COLLABORATION IS NEEDED

CLEAN ENERGY
SUSTAINABLE CLEAN FUELS
LESS WOOD, DIESEL, COAL

HOUSING
HEATING AND LIGHTING
CONSTRUCTION STANDARDS
COOKING VENTILATION

URBAN PLANNING
COMPACT AND EFFICIENT

TRANSPORT
LOW EMISSION VEHICLES
CAR ALTERNATIVES

INDUSTRY
REPLACE SMOKE STACKS
WASTE MANAGEMENT

WASTE MANAGEMENT
EMISSION CONTROLS
BIO-WASTE MANAGEMENT
REDUCE, REUSE, RECYCLE

LOCAL AND REGIONAL AUTHORITIES
PLANNING CODES
TAX INCENTIVES

HEALTH MINISTRY
TRACK HEALTH IMPACT
PERSONAL HEALTH RECORDS
HEALTH EQUITY

The health sector drives conversations within all sectors to keep good health at the top of everyone's mind

Case Study: DelCo Pediatric Asthma Initiative

What's the Big Idea?

Crozer-Keystone Health System (CKHS) addressed the prevalence of pediatric asthma in its community through a comprehensive, cross-sector approach.

As a result of these collaborative, multi-pronged efforts, the 911 calls for asthma-related symptoms in children have decreased to less than 1 percent of what they once were.

The program implemented with Chester Environmental Partnership showed a reduction in frequency of children's asthma flare-ups, improvement in asthma control, and a decrease in emergency room visits.

What's Changed?

- CKHS persuaded state EPA to fine companies for releasing pollutants above permissible levels
- CKHS joined with local schools to launch the Kids Asthma Management Program, providing screenings and asthma awareness days, and partnered with children's soccer leagues to encourage exercise
- CKHS collaborated with a community organization, Chester Environmental Partnership, to run an indoor/outdoor home intervention and environmental remediation and education program.

Case Study: ChesCo Financial Stability Center

What's the Big Idea?

The Chester County Financial Stability Center offers unemployed and underemployed individuals access to a blend of financial management, career and other supportive services to help them increase income and savings, decrease debt, and build assets, in an easy, accessible one-stop location in Exton, PA.

Center staff provides an assessment and develops a plan for reaching individualized goals. Counseling and navigation services are provided to ensure that people stay on track, along with an array of other skill building programs and services. Services are offered in a consumer-friendly and professional environment.



United Way Financial Stability Center
 Oaklands Corporate Center
 479 Thomas Jones Way, Suite 500
 Exton, PA 19341
 610-280-1023

PROGRAM & SERVICE PARTNERS	MY FINANCIAL FUTURE CHESTER COUNTY SERVICES																									
	Free Income Tax Preparation	EITC & Other Tax Credits	Job Training & Education Programs	Help With Accessing Workplace Benefits	Help With Accessing Public Benefits	Utility Assistance	Debt Reduction	Credit Repair	Financial Goal Setting	Financial Planning & Budgeting	Checking & Savings Accounts	Split Tax Refunds - Spend Some, Save Some	Matched Savings Programs	Housing Assistance	First Time Home Buyer Programs	Loan Programs for Homes	Home Repair Assistance	Insurance to Protect Assets	Long-term Savings Plans	Confidential Counseling	Medical & Dental Services	Civil Legal Services	Basic Needs: Food, Shelter, Clothing	Interpretation Services for Spanish Speakers	Tutoring - Language, ESL, Basic Math & Language Skills	Workforce Development
	INCREASE INCOME & DECREASE DEBT		BUILD SAVINGS		GAIN ASSETS		OTHER SERVICES																			
Bridge of Hope, Lancaster & Chester Counties 610-380-1360 www.bridgeofhopeLCC.org														✓										✓		
Chester County Department of Community Development 610-344-6900 www.chesco.org	✓														✓		✓									✓
Chester County Library & District Center 610-280-2600 www.chescolibraries.org	✓																								✓	
Chester County OIC 610-692-2344 www.cc-oic.org	✓	✓																								
PA CareerLink® - Chester County 610-280-1010 www.pacarelinkchesco.org	✓																									
Citadel 800-666-0191 www.citadelbanking.com											✓						✓									
Clarifi 800-989-2227 www.clarifi.org						✓	✓	✓	✓							✓		✓								
Coatesville Center for Community Health 610-383-4612 www.coatesvillecenter.org	✓									✓	✓													✓	✓	
Community Volunteers in Medicine (CVM) 610-836-5990 www.cvim.org																									✓	
Family Service of Chester County 610-696-4900 www.familyservice.us										✓														✓		
Good Works, Inc. 610-383-6311 www.goodworksinc.org																	✓									
Interfaith Housing Assistance Corporation of Chester County		✓							✓	✓														✓		

Case Study: Salad Bars to Schools

What's the Big Idea?

Obesity prevalence among children and adolescents has almost tripled since 1980. Approximately 17% (12.5 million) of children and adolescents ages 2 – 19 years are obese.

Let's Move Salad Bars to Schools was founded by the Chef Ann Foundation, National Fruit and Vegetable Alliance, United Fresh Start Foundation, and Whole Foods Market. The goal is for every school in the United States to have a salad bar as part of their school food service program so that every child—from elementary, to middle, to high school—has daily access to fresh fruits and vegetables, whole grains, and healthy proteins.



District or School	City	State	91 Salad Bars
Dallas County School System	Valley Grande	AL	8
Moreland School District	San Jose	CA	6
Sacramento City Unified School District	Sacramento	CA	5
Jefferson County Schools	Lakewood	CO	5
New Haven	New Haven	CT	6
Washington	Washington	DC	3
Orleans Parish School Board	New Orleans	LA	6
St. Tammany Parish School Board	Covington	LA	2
Baltimore City Public Schools	Baltimore	MD	10
Honey Creek	Ann Arbor	MI	1
PS155 123	Bronx	NY	1
Bronx Preparatory Charter School	Bronx	NY	1
Portland Public Schools	Portland	OR	10
Walter D Palmer Leadership Learning Partners Cha	Philadelphia	PA	1
Wordsworth Academy	Philadelphia	PA	1
Global Leadership Academy	Philadelphia	PA	1
Franklinton Charter High School	Philadelphia	PA	1
Richland County School District One	Columbia	SC	8
Houston ISD	Houston	TX	10
Seattle Public Schools	Seattle	WA	5

Case Study: Strive

What's the Big Idea?

In 2006, over 300 local organizations in Cincinnati and Northern Kentucky teamed up to improve education. Working within existing programs, this effort – called StrivePartnership – pursued a shared agenda with a specific set of measurable outcomes.

Strive is premised on the **Collective Impact** framework for solving complex social problems.

- **Common Agenda:** Supporting the success of every child from cradle to career.
- **Shared Measures** (over five years):
 - Kindergarden readiness +9%
 - High school graduation +11%
 - Postsecondary enrollment +10%
- **Mutually Reinforcing Activities**
- **Continuous Communications**
- **Backbone Support**

StriveTogether

Every child. Cradle to career.



CRADLE TO CAREER NETWORK

The StriveTogether Cradle to Career Network is a national network of community partnerships working to improve education success for every child by bringing together cross-sector partners around a common vision.

StriveTogether supports these communities with effective resources and a nationally-recognized collective impact approach focused on aligning existing resources and using data to determine what works best for kids. StriveTogether helps communities develop shared outcomes and success metrics, identifying best practices and solutions to address local disparities and improve outcomes for all children.

A national movement to improve education for every child from cradle to career

68

COMMUNITY PARTNERSHIPS
building local infrastructure to improve education outcomes for every child



32 STATES
PART OF
COLUMBIA



10,200+
ORGANIZATIONS
ENGAGED



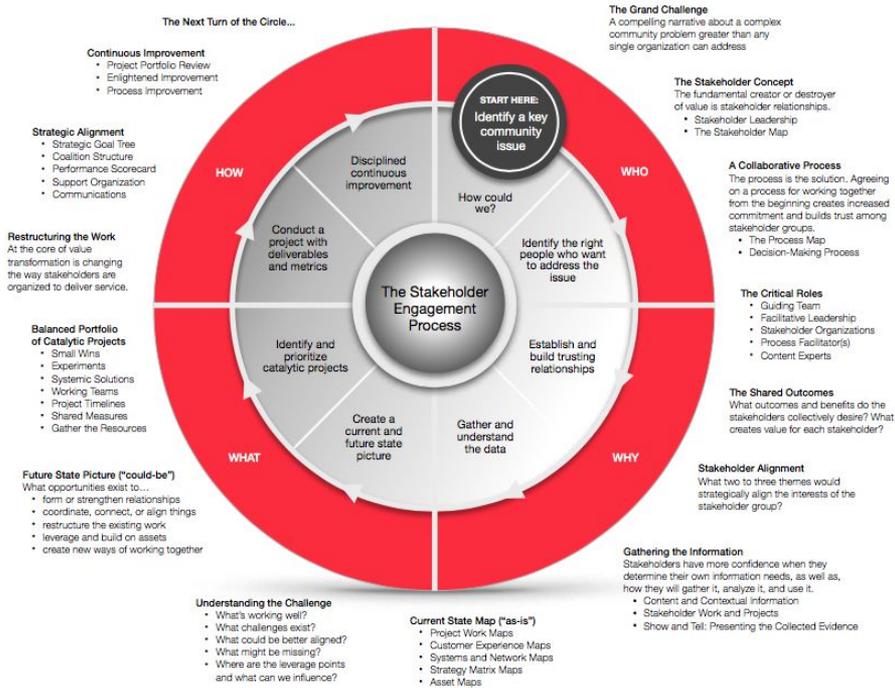
Table Talk

1. What big ideas might advance health equity and healthy communities in our region through systems change?
2. Who else needs to be part of the conversation?



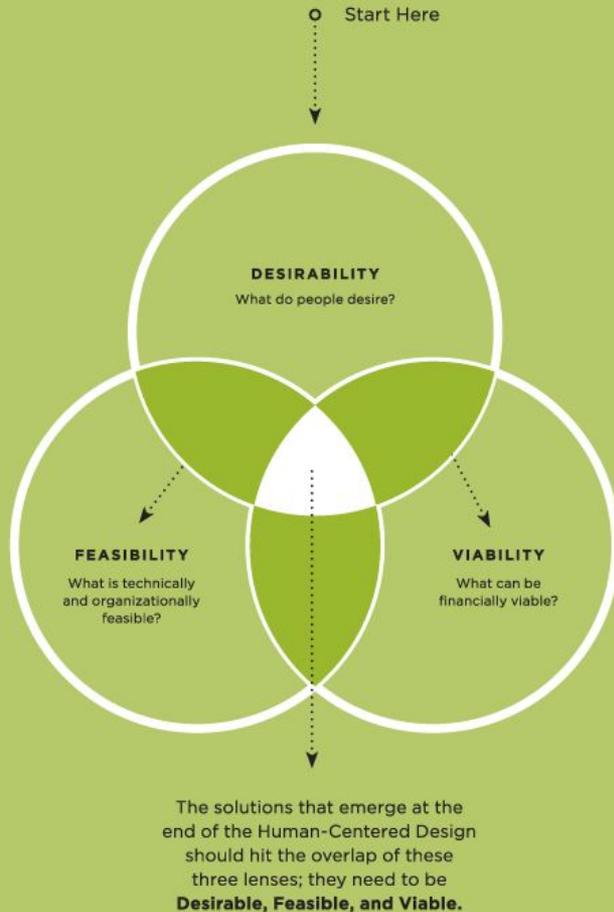
Systems change
begins with
community
conversations

Listen for (a) change



If your big idea has a “there there,” then consider a four-phased approach to systems change.

1. **Pre-planning:** What problem are we trying to solve?
2. **Planning:** How are we going to solve it? What does the future look like?
3. **Implementation:** How are we going to build the rocket while it’s flying into space?
4. **Maturation:** How are we going to continually improve and institutionalize change?



Use promising practice planning strategies and tools like:

- Community assessment
- Landscape scan
- Root cause analysis
- Future Search/Appreciative Inquiry
- System mapping
- Values network mapping
- Design thinking/
Human-Centered Design (hint: it's about empathy)

Keys to Successful Systems Change

- ★ Adopt a systems mindset.
- ★ Collaborate across sectors to bring your great ideas to life.
- ★ Ground your problem and progress in research, data and information.
- ★ Bake equity into the foundation of your work.
- ★ Build mutual trust among philanthropic, government, business, nonprofit, school and community partners.
- ★ Invest in continuous communications.
- ★ Engage beneficiaries.
- ★ Become a policy wonk.
- ★ Prepare for a long, messy yet ultimately rewarding journey.

Systems Change Strategies to Address the Social Determinants of Health

Resources to Guide and Inspire

Systems Change Thought Leadership

<https://ssir.org> (search: Systems Change)

<https://www.livingcities.org/>

Systems Change Tools & Resources

<http://systems.geofunders.org/tools-resources>

<https://www.cdc.gov/stltpublichealth/program/resources/systems.html>

<https://collectiveimpactforum.org/>

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Questions?

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