

Community as a Learning System for Health: Using Local Data to Improve Community Health

National Committee on Vital and Health Statistics
Focused Community Health Initiatives
Gwendolyn Flynn, Policy Director
February 8, 2011
Washington, D.C.

Program Initiative

- * REACH U.S. Initiative – Goal: Eliminate health disparities
- * Partnership with U.S. Dept. of Health & Human Services, Centers for Disease Control and Prevention
- * African Americans Building a Legacy of Health (AABLH) is a partnership of organizations to promote nutrition and increased physical activity
- * AABLH/ REACH U.S. is a project of Community Health Councils
- * AABLH Goal: Increase access to nutritious food and physical activity opportunities through institutional practices, public policy, and local investment as a means to reduce CVD and diabetes disparities in the African American communities of South Los Angeles.

Population/Region Characteristics

South Los Angeles

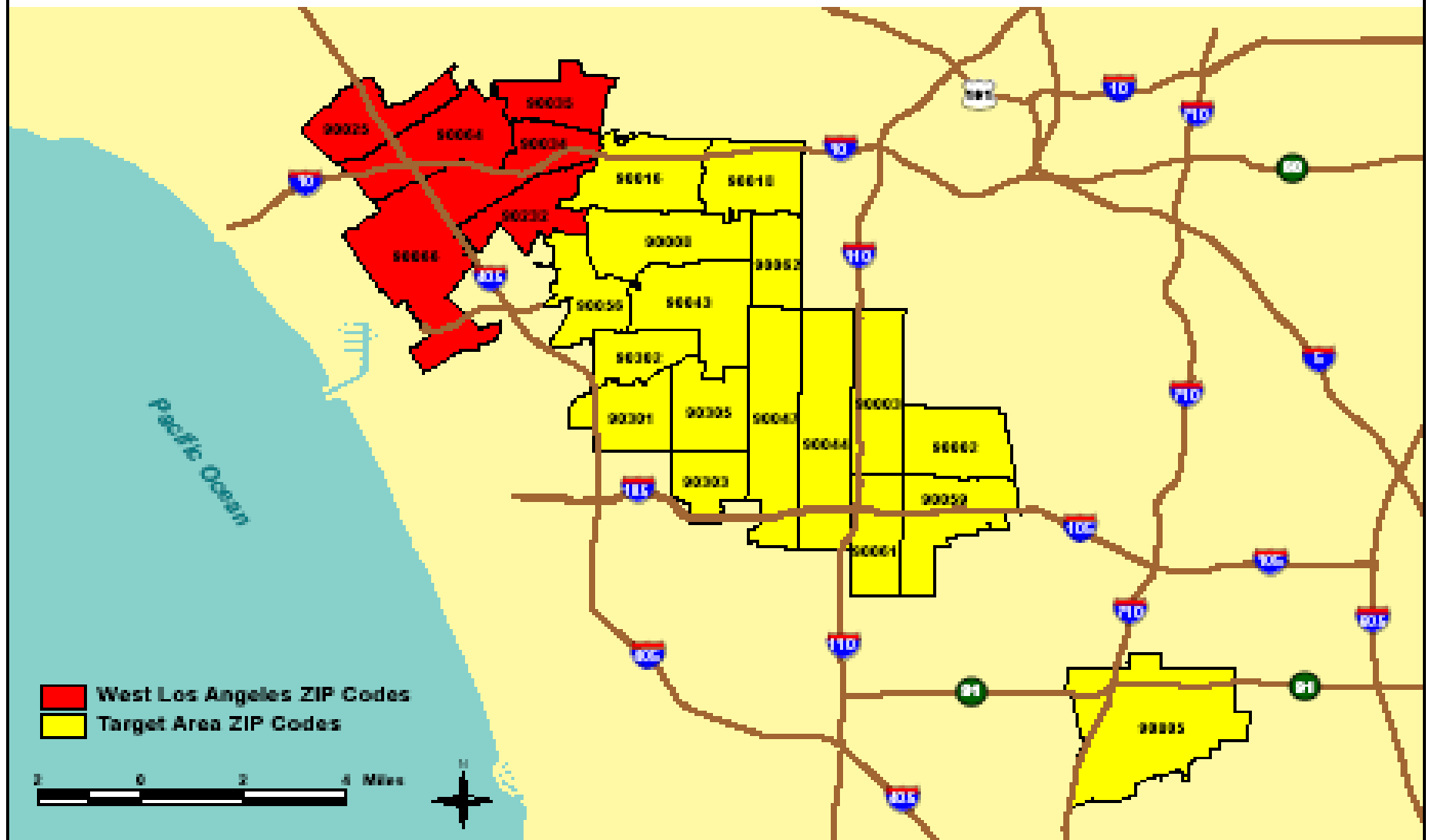
Approximately 100 square miles
Total population 1.3 million; more than Montana

Race/Ethnicity	Percentages
Latino	64%
African American	30%
White	2%
Asian/Pacific Islander	2%
Other	<2%
Population Density	14,136 people per sq. mi.

Source: ESRI Business Analyst Online: <http://bao.esri.com/> January 2010

REACH Target and Contrast Areas

West Los Angeles -- South Los Angeles -- Inglewood -- North Long Beach



Population/Region Characteristics

South Los Angeles

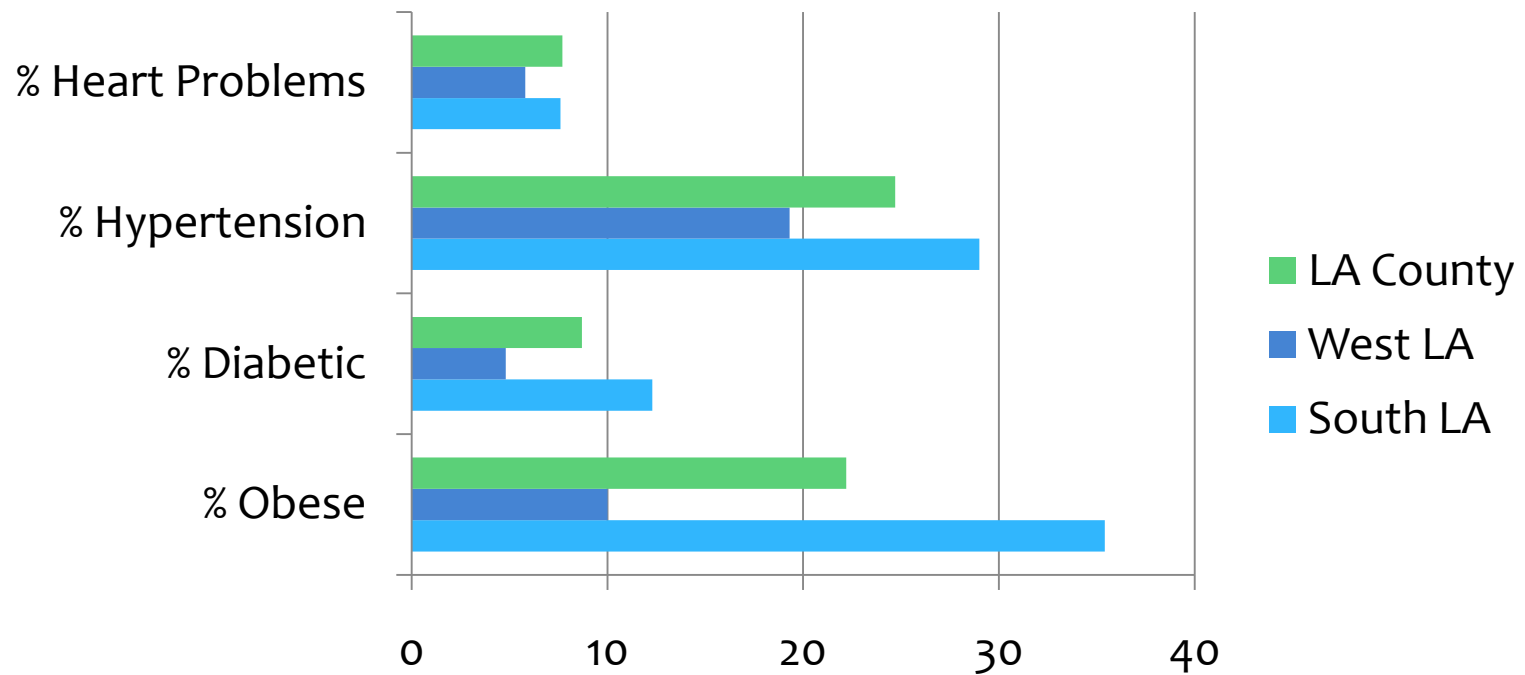
Household Income

Total Households	359,632
Average Household Income	\$48,098
Average Disposable Income	\$40,083
Income Density	\$181,963,503 per sq. mi.

Source: ESRI Business Analyst Online: <http://bao.esri.com/January 2010>

Population/Region Characteristics

Adult Health Outcomes by Geographic Area

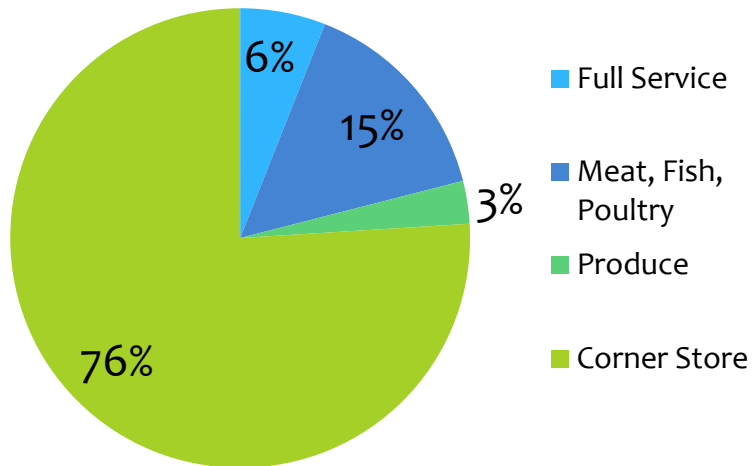


Source: Los Angeles County Dept. of Public Health, Office of Assessment & Epidemiology, Key Indicators of Health by Service Planning Area, June 2009

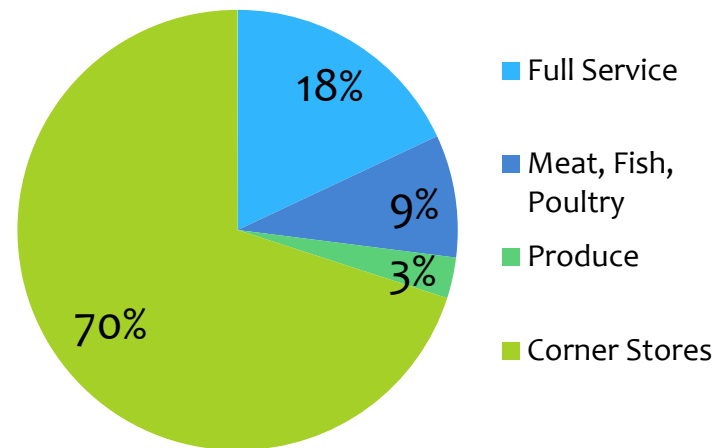
Population/Region Characteristics

Food Retail Outlets

South LA



West LA



Data Sources & Related Information

- * Primary Data Sources
 - * Healthy Food Assessment
 - * Restaurant Assessment
 - * Consumer Preference
 - * Physical Activity Site Assessment
 - * Store Quality Checklist
 - * Physical Activity Participant Survey
 - * Organizational Wellness Participant Survey
- * Secondary Data Sources
 - * California Health Interview Survey (CHIS)
 - * Behavior Risk Factor Surveillance System (BRFSS)
 - * REACH U.S. Risk Factor Survey
 - * L.A. County Department of Public Health, Office of Health Assessment and Epidemiology

What has Helped/Hindered Efforts?

CHC Model for Social Change

- * Catalyst
- * Coalition Building
- * Issues and Values Identification
- * **Research**
- * Policy Development
- * Policy and Program Implementation
- * Monitor and Evaluation

Community Health Councils Zoning and Land Use Strategies to Improve Health

- * Fast Food Interim Control Ordinance (ICO) replacement.
- * Community Plan Updates.
- * Fresh & Healthy Food Enterprise Zone.
- * Policy to promote re-purposing of vacant lots/under-utilized land.
- * Policy to promote pedestrian, bike routes integrated into transit systems.

Challenges/Obstacles

- * Finding available data by race or ethnicity
- * Sample size is usually small
- * Inconsistent data collection time periods
- * Available data beyond morbidity/mortality
- * Finding data on the resource environment

Data and other Resource Needs

- * Stats that measure the resource environment
- * Timeliness
- * Greater flexibility – data at different geographic levels
- * Funding beyond 3- 5 year cycles

Important Messages

- * Data is an important policy change tool
- * Include environmental measures in survey design
- * Seek input from impacted populations in survey design
- * Race/ethnicity data important to addressing health disparities

Community Health Councils

3731 Stocker Street, Suite 201

Los Angeles, CA 90008

323.295.9372

Lark Galloway-Gilliam, Executive Director

Gwendolyn Flynn, Policy Director

www.chc-inc.org

