

2023 GEAR Group: Building Coalitions and Partnerships to Address Chronic Disease

Resources and References Document

About NACDD GEAR Groups

GEAR Groups explore their topic through case presentations, short didactic presentations, and active discussions throughout four 90-minute video conferences. A facilitator and strategist guide each discussion to explore opportunities for improvement through partnerships, promising interventions or policies, data, and evaluation. The 2023 GEAR Groups focused equity as a foundation and community voice at the center.

About: Examining the Disparate Impact of and Solutions to Health Debt after the COVID-19 Pandemic

This GEAR Group explored strategies that chronic disease practitioners can use to transition to a post-pandemic world with a focus on addressing and mitigating health debt. Using chronic disease programming as a foundation, case presentations explored effective or promising practices that enable state health departments to address health debt and emerge as more equitable and strengthened entities ready to embrace the new normal. Meetings were held in 2023 on February 8, 15, 22, and March 1.

Participating states

- Colorado
- DC
- Delaware
- Illinois
- Michigan
- Tennessee

Resources and References

Participants shared the following resources during the four-week GEAR Group in May 2022. The linked articles or resources do not necessarily represent the official views of individual participants, participants' respective organizations, or NACDD.

General Coalition Building Resources:

- **Community Tool Box**: There are SO MANY resources in this tool. In particular, the [Changing Policies, Working Together for Racial Justice and Inclusion](#), and [Communications to Promote Interest](#) sections.
- **Prevention Institute Tools**:
 - **Collaborative Effectiveness Assessment**: This tool can help you identify specific strengths and areas of growth in your coalition.



- [Collaboration Multiplier](#): an interactive framework and tool for analyzing collaborative efforts across fields.
- [Developing Effective Coalitions: An Eight Step Guide](#): a framework for engaging individuals, organizations, and governmental partners in addressing community concerns.
- [Health Equity and Prevention Primer](#): a web-based training series for public health practitioners and advocates interested in achieving health, safety, and health equity through policy advocacy, community change, and multi-sector engagement.
- **Center for Health Care Strategies [Partnership Assessment Tool for Health](#)**: This tool is designed for use by two organizations who are actively engaged in a partnership with established goals and services.
- **American Cancer Society [Environmental Scan Worksheet](#)**: This could easily apply to any program, partnership, or coalition planning effort, not just those for cancer.

Health Equity Resources:

- [NACDD Health Equity Primer](#): This tool can help individuals on your group develop a deeper understanding of health equity and processes to achieve it.
- [Chicago Beyond Guidebook](#): This resource relates to Zahra's comments in her introduction about ensuring the coalition is mutually beneficial for members and the community the coalition serves. I also heard Brittney comment about involving the community in your activities. This guidebook is specifically for research, but there's a lot of practices in here that can apply to coalition building as well.
- Prevention Institute's [Health Equity page](#) is full of relevant resources.
- Prevention Institute [Building Bridges](#) publication: This is a concept paper that explores how and why to bring together people working on health equity and racial justice.
- 2022 Webinar Series - [Strategies to include rural health in cancer control plans](#): This webinar series could provide you with data and language to present to your group. It may be especially helpful if rural health is of interest to the MCC.

PSE Change Resources:

- [American Cancer Society PSE Change Guide](#): A practical tool incorporating the latest research, case examples, and resources from partners across the country. It explains what the PSE change

approach is, the process for fostering coalition capacity to implement PSE changes, and explores key takeaways and themes from an extensive search of the recent literature. See page 12 to begin reading guidance for coalitions.

- **Rural Health Information Hub - [PSE Change](#):** This provides a good breakdown of PSE Change that may be helpful for guiding discussions among your group. This is specifically written for rural health, but can apply to other topics as well.
- **[Mobilizing Action for Resilient Communities through Policy and Advocacy](#):** This report is specifically for ACEs, but you may be able to apply some learnings from it to your coalition efforts. Specifically, see pages 9-15. Here's a [related infographic](#).
- **[GW Cancer Center Action for PSE Change](#):** This is a really well designed tool that includes digestible breakdowns of what PSE change is. Bonus that it's also written specifically for comp cancer professionals!

Member Engagement & Recruitment Resources:

- **County Health Rankings [Effective Coalition Member Recruitment](#):** This document poses some good questions that can help guide who you recruit for your workgroup/coalition, and what communication tactics you can use to recruit them.
- **Coalitions Work – [Recruiting, Engaging, & Retaining Coalition Members](#):** This is an older document and I think “Coalitions Work” (founded by Dr. Frances Butterfoss) is now integrated into SOPHE. That said, this document has practical tips for engagement and organization. Specifically, the “buddy program” approach to member recruitment was mentioned by one of your peers (Hannah in Colorado) on the GEAR call.
- **Purdue University Extension – [Building a Coalition: Investing in Health!](#):** The section titled, “If I Build It, Will They Come?” might be good guidance for the MCC’s new workgroup. Also, the “Plan, Action, Plan... Repeat” section reiterates what your peers on the GEAR call said about leading with data.

Member Empowerment & Coalition Planning Resources:

- **American Journal of Community Psychology – [What motivates people to participate more in community coalitions?](#):** This study explores how coalitions can foster greater member participation.
- **Minnesota Coalition Against Sexual Violence – Blog Post: [Developing Motivation When Rebuilding a Team](#)** – I thought the MOU signing party idea in this post was creative.



- **ATSDR [Useful Concepts for the Practice of Community Engagement](#)**: These pages are little dated (2015), but I appreciated the sub section on community empowerment.
- **CDC Public Health Professionals Gateway – [Communities of Practice](#)**: There's some good information here about sustaining, evolving, and evaluating CoPs.
- **Harvard Kennedy School – [Guiding Principles for Multisector Engagement for Sustainable Health](#)**: This paper is written from a global perspective, but is also intended to apply to local or regional program development.
- **RethinkHealth**
 - **[Pulse Check on Multi-Sector Partnerships](#)**: This pulse check offers considerations for partnerships throughout the continuum of working together (beginning, middle, and later phases), as well as considerations for potential allies and funders. Maybe there's some good ideas in here that you can apply to your CoP.
 - **[Modifiable Agenda for Shared Vision Making](#)**: This tool can help your group establish a shared vision, which may encourage CoP members to take ownership of their role in the group.

Rural Health Resources:

- **South Carolina [Rural Health Services Hypertension Control Initiative](#)**: This Initiative has two programs, one sponsored by YMCA and the other sponsored by RHS. Consider reaching out to the program coordinator to learn more.
- **Rural Health Information Hub – [Rural Health Coalitions Toolkit](#)**: This is specifically for coalition building, but you may find value in the [Program Models](#) and [Strategic Planning](#) sections.
- **Rural Health Information Hub – [Beaufort Success Story](#)**: This success story showcases how partners in one geographic region work together to achieve shared goals. It provides good examples of non-traditional partners. Maybe there are similar alliances already in existence in TN that you can tap into?
- **Rural Health Information Hub – [Health Equity in Rural America Podcast](#)** (Jan 2023): Featured guests provide an overview of rural health equity and tell about the formation of West Marion Inc., the improvements they've made in their community, and the changes they want to make moving forward.

Blood Pressure Monitoring Resources:



- **[Michigan Loaner Program Protocol*](#)**: Michigan has a few of these state protocols in place for various programming efforts. It might be worth reaching out to the State Health Department's CVH program manager to learn more. NACDD CVH Consultants or GEAR Group peers may be able to make an introduction for you.
- **Million Hearts Success Story – [Excellence in Hypertension Control in a Rural Setting](#)**: This success story features health clinics in Colorado and Oregon who have reached rural communities with blood pressure monitoring programs. Oregon started a monitor check out program. Both locations use EHR communication systems to connect with patients.
- Public Health National Center for Innovations **Innovation Story – [Richland, Ohio Library Partnership](#)**: This is one example of the library partnership program I mentioned on the call.
- **White Plains Public Library [Blood Pressure Monitor Loaner Program](#)**: Another example of a library loaner program. It looks like this program is in partnership with the area's heart association.

Pharmacy Resources:

- **NACDD Webinar Recordings - Your Prescription for Success with Pharmacies**: This two-part Diabetes Council professional development webinar series shares how State Department of Health staff can work with pharmacists and pharmacies to increase access to and enrollment in Diabetes Self-Management Education and Support and the National Diabetes Prevention Program.
 - **[Part 1, August 2021](#)** Featuring the National Community Pharmacy Association, CDC, and North Carolina, Wisconsin, Colorado, and Missouri diabetes programs.
 - **[Part 2, January 2022](#)** Featuring CDC, the American Pharmacists Association Foundation, and New York, New Mexico, and Oklahoma diabetes programs.
- **NACDD CVH [Pharmacy Resources](#)**: There are SO MANY resources on this page and of course Colorado's earlier work prior to your state protocol is featured. 😊 Maybe there is something in here you haven't explored yet.
- **CDC – [Collaborative Practice Agreements and Pharmacists Patient Care Services](#)**: This is an older publication (2013). But maybe it can still shed some insight on how to scale your protocol statewide.
- **Oregon State University – [Integrating Pharmacists into Student Health Service Care Teams](#)** (PDF slides): Reviews differences between collaborative practice agreements, statewide protocols, and unrestricted prescribing.

Statewide Protocol & Evaluation Resources:

- **National Alliance of State Pharmacy Associations – [Pharmacist Prescribing: Statewide Protocols and More](#)**: Looking at this webpage (which looks a little dated – 2018), I wonder if it would be worth reaching out to these folks to see if they can partner with you or provide regional contacts for you. Their page only covers contraceptives, tobacco, strep/flu, and naloxone.
- **[The Implementation and Evaluation of an Evidence-Based Statewide Prehospital Pain Management Protocol](#)**: This paper describes the evaluation of a state protocol in Maryland.
- **Vermont Secretary of State – [Evaluation of Pharmacist Prescribing Authority](#)**: The Office of Professional Regulation (OPR) evaluated the costs and benefits of expanding pharmacists' scope of practice to include prescribing authority.

Men's Health:

- **[Prevention Institute Making Connections Backpack](#)**: This Backpack is specifically for mental health and wellbeing among men and boys. But I thought that the resources section might be helpful to inform your approach to addressing diabetes among men. There's information about podcasts, books, blogs, conferences in more in this section.
- **[Black Women's Health Imperative Men's Room Project](#)**: NACDD's diabetes team has been working with BWHI for a few years now. They are a strong partner with a culturally tailored diabetes prevention program for Black women. Recently, NACDD began working with them to build a lifestyle change program for Black men. I don't have much more information about this project, but it might be worth reaching out to BWHI and/or Trish Herrmann at NACDD (pherrmann_ic@chronicdisease.org) to learn more.
- **[Black Men's Health](#)** hosted a webinar in February 2022 about how diabetes impacts Black people, specifically men. The 50-minute recording and a summary are posted online.

Historically Black Universities:

- **[This SOPHE Blog post](#)** from 2021 echoes what your peers said on the call about the value of working with HBCUs. "HBCUs have a major role in the Black community as trusted institutions with strong relationships tied to those local communities." The post includes some additional resources and examples of public health partnerships within HBCUs.
- **[HBCU List by State](#)**: Consider exploring school websites to learn about current public health projects within each school's curriculum. I haven't combed for this specifically, but maybe you will find some good examples that you can learn from.
- **[Consortium of African American Public Health Programs](#)** is a coalition of public health programs and schools established and operating at 10 of the nation's leading Historically Black



Colleges and Universities. I noticed that a number of our friends (ASPPH, SOPHE, CDC) are partners with CAAPHP. Maybe consider how Delaware can partner with them, potentially in the same way that you all have partnered with your business group on health for working with employers.

- Last summer, **North Carolina** [launched a paid internship program](#) in partnership with HBCUs and Minority Serving Institutions. I know this is a bit outside of the diabetes program's jurisdiction, but maybe this is an example you can take to the agency of how to deepen the department's effort to address health disparities.
- On the same thread as the bullet above, this is [another good example](#) of partnering with HBCUs to reach health equity.

Public Health & Employers:

- [Midwest Business Group on Health](#): The State of Illinois is a member of this organization. If you're not already partnering with them to tackle some of your Be Well priorities, you definitely should! They have been a great partner of NACDD's for health benefit projects.
- SHRM [Designing and Managing Wellness Programs](#): This doesn't specifically address competing priorities or sustainability amidst a leadership change, but maybe you'll find some of the sections insightful.
- SHRM [How to Design an Employee Benefits Program](#): I know you are not designing from ground up with BeWell, but maybe this article will be helpful for thinking about what set of standard information you could pull together for your new director or any other new partners.

Navigating Leadership Change:

- [Leadership Turnover and Organizational Effectiveness](#): Preaching to the choir with this resource, I know, but this case study describes the impact that leadership turnover has on an organization.
- [Keep Your Plan Momentum Going Through Leadership Change](#): This is not health-specific, but could still be informational for sustaining momentum even when leadership priorities change.
- Forbes – [Three Ways to Stay in the Lead When the Finish Line Keeps Moving](#): Same comment as the above bullet. This is more of a motivational piece. 😊

NACDD Resources & Connections

- [Healm](#): Healm is a brand new (and free to use) decision making tool from NACDD and CDC that helps HR and benefits staff navigate coverage of the National Diabetes Prevention Program. Even though this is diabetes prevention specific, I encourage you to create an account and



explore all the resources in the tool. My hope is that the information and learning modules might inform how you could tackle any benefits building projects from idea to implementation.

- Consider joining [NACDD's Health Equity Council](#) as a way to stay in regular contact with other states who are working to address health equity. Robyn Taylor & Renaldo Wilson are good contacts
- **Sharon Jackson** (sjackson_ic@chronicdisease.org) is a consultant on NACDD's diabetes team, who works primarily with the 1705 and MDPP projects. I will provide a warm introduction via email. She may have insights about working with BWHI, HBCUs, and fraternities/sororities.