



WISCONSIN HEALTHIEST STATE — SUMMIT —

Agenda Setting Convening

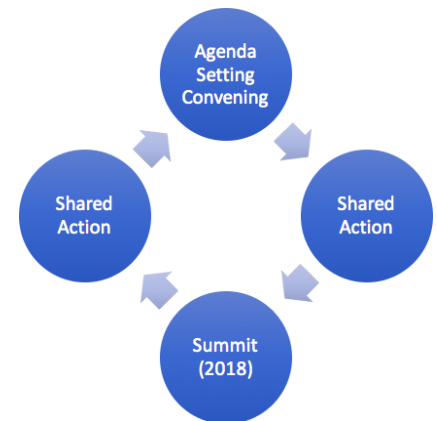
Summary and Next Steps

Background

The Wisconsin Healthiest State Summit is an effort of the Mobilizing Action Toward Community Health (MATCH) Group at the University of Wisconsin Population Health Institute. Wisconsin has a long legacy of a strong commitment to advancing the public's health and we are excited to continue and deepen this work. The Healthiest State Summit will build on the foundation of the Prevention Conference, which set the stage for cross-cutting skill development of public health leaders and coalitions. The Healthiest State Summit also aims to advance shared action on conditions that advance health equity and community well-being. Through engaging networks, coalitions, and multi-stakeholder partnerships, the Healthiest State Summit will not focus on any particular health issue, but will:

- Convene and support diverse leaders in setting and taking action on a common agenda to align and catalyze efforts (e.g. policy agenda, funder agenda, shared metrics);
- Provide capacity building and support to address cross-cutting needs, challenges, and opportunities; and
- Advance a shared narrative that expands the understanding of what shapes health and equity.

During odd years, an Agenda Setting Convening will be held to identify shared priorities. In even years a Summit will be held to provide training and capacity building and to support coalition building and further alignment. The outcomes and planning for these events will be linked to shared action between convenings. It is our goal that these efforts will lead to a strong and diverse network of effective coalitions, working together to achieve sustainable changes to advance health equity.



2017 Agenda Setting Convening Overview

A small targeted group of individuals met October 31 - November 1 in Madison for a strategic visioning session to shape shared work and the inaugural Wisconsin Healthiest State Summit debuting in fall 2018. Participants were comprised of leaders from across the state who work to advance the public's health. This includes representatives from the Wisconsin Public Health Association, the Wisconsin Association of Local Health Departments and Boards, local health departments, health care systems, coalitions, community organizing groups, faith-based organizations, academic institutions, non-profit organizations and others (See *Appendix A*). In future meetings we look forward to increasing the diversity of participants.

The Agenda Setting Convening was intended to engage in agenda setting for aligned action to improve health equity and to develop our collective capacity to ensure that everyone has the opportunity to be healthy. The efforts to align actions build toward the Healthiest State Summit, scheduled for September 20-21, 2018 in Green Bay, WI. In addition to agenda setting, we aimed to strengthen our collective voice to expand the understanding of what shapes health in Wisconsin's policy arena through training and Capitol visits. The agenda for this fall's meeting was shaped by the guidance of a planning committee comprised of statewide partners representing different sectors (See *Appendix B*).



Jeanne Ayers



Jonathan Heller

Jeanne Ayers, Assistant Commissioner and Chief Health Equity Strategist for the Minnesota Department of Health (<http://www.health.state.mn.us/divs/comm/ayers.html>) and **Jonathan Heller**, Co-Director and Co-Founder of Human Impact Partners, (<https://humanimpact.org/about-us/staff/#bio-jonathan-heller>), facilitated this event.

Goal

- Build our collective capacity to assure conditions for everyone to be healthy

Objectives:

- Build and strengthen relationships to support future action
- Develop a shared understanding of the influence of inequity on public health
- Identify actions we can take within our own sphere of influence to advance health equity
- Explore options for collective action to advance health equity
- Develop our understanding of narrative and introduce skills to advance health equity
- Build relationships with policy makers and Wisconsin legislators as a step toward collective action

During the meeting, attendees engaged in thoughtful discussion and began digging into important conversations and tensions related to narrative and setting priorities. This included scratching the surface on racism, diversity and representation, and rural and urban political dynamics, and working to to define feasible change goals. We are excited to carry these important conversations forward in the collectively generated priorities summarized below.

Overall participants expressed positive feedback on the meeting.

"The terrific energy in the room [was exciting to me], and I'm sure among broader participants as well. The space to hold tension, to have differing perspectives, to disagree (even strongly) without being disagreeable."

"What a timely, thoughtful training and agenda setting gathering this week. Kudos! I am so glad I did [attend], because it was, frankly, one of the most productive gatherings I have been to. It gave me a clear vision for next steps in my own organization, career, and collaborations. For that—and your vision for our state and hard, necessary, long-term work—I am deeply thankful."

Summary of Priorities

Participants engaged in an interactive, crowdsourcing activity to identify the following shared priorities:

- Center leadership of those most impacted by inequity
 - Partner with and fund community organizers
 - Partner with youth organizing, impacted communities, with those working on penal system injustice, racial inequity, etc.
- Build alliances and partnerships- locally and nationally
 - Diverse sectors, diverse ways of thinking, LGBTQ, racial equity, local and state, rural and urban, etc.
 - Coalition building training for power
- Racism is a public health emergency
 - Develop standards
 - Sign on declaration
- Develop a health equity narrative with strong frames
- Health equity legislative/policy agenda
- Identify and support public health champions to run for office

Next Steps

Meeting participants completed action step pick lists to determine their own next steps and to share how they might like to be involved in shared next steps (See *Appendix C*). MATCH staff are engaging participants to serve as co-facilitators to help guide the discussions around each priority area and will convene groups around each priority to create action plans in early 2018.

2017 Agenda Setting Convening Summary of Activities

Day 1 Activities:

Framing our collective work and sharing perspective, which included:

- Understanding why we have inequities and what public health's role is in addressing them
- Introduction of health, health equity, and power
- Introduction of the Triple Aim
- Reflection of individual core values and beliefs-how core values and beliefs shaped the individual and their work in public health
- Focus on Action: What can the public health community do? What can you do in your role and institution?

Challenging inequities: stories of change panel speakers

The purpose of sharing stories of change was to understand the influence of inequity on public health. Following the panel, group reflection and discussion was used to recognize what you can do in your own sphere of influence to assure conditions for everyone to be healthy.

Jonathan Heller served as moderator for this panel discussion. The panel consisted of the following speakers:

Mark Rice, Ex-Prisoners Organizing (ExPO)/WISDOM, spoke about his work to build Ex-Prisoners Organizing (ExPO), an organization led by folks impacted by incarceration that aims to policy and systems change around criminal justice.

Alia Stevenson, Madison & Dane County Public Health, spoke about their organizational efforts to include a racial equity and social justice lens in their work.

Mimi Johnson, Office of Policy and Practice Alignment, Division of Public Health in Wisconsin Dept. of Health Services, spoke about work to include equity processes into the State Health Plan.

Building a shared analysis

Geoffrey Swain, MD, MPH presented data on health inequities in Wisconsin, crossing issues such as maternal and child health and chronic diseases. He described how inequities exist due to structural/systemic issues and how we must address them by closing gaps in the social determinants of health.

Following the presentation, facilitated group discussions addressed:

- Policies surrounding greater equity in social determinants of health and greater opportunities for health and reasons for why such policies are not in place
- Power, concentrated capital, and oppression
- Actions needed to address power imbalances: public health's role? individual's role?

Changing the narrative

Jeanne Ayers presented on developing a narrative capacity to advance health equity. Key elements of the presentation and group discussions included:

- Describing public and dominant narratives and their role on health equity
- Identifying key elements of the dominant and emerging health narrative
- Sharing tips for reinforcing emerging health narratives
- Demonstrating the practice of "organizing the narrative" through examples in action

Day 2 Activities

Developing a shared agenda

As a group, we explored options for collective action to support health equity. This included:

- Recognizing what one can do in their own sphere of influence to assure conditions for everyone to be healthy
- Building relationships to support future action
- Sharing common actions and themes
- Discussing priorities and next steps

Skill building for legislative visits

A goal of this convening was to build relationships with Wisconsin legislators as a platform for future influence. Building relationships with legislators is essential for creating policy change for public health and advancing health equity in Wisconsin, and this convening served as an additional and intentional platform for participants to do this together.

David Liners (WISDOM organization), Sam Austin (UW Population Health Institute's Evidence-Based Health Policy Project), and Maureen Busalacchi (Healthier Wisconsin Partnership Program) prepared the group to effectively communicate a message and navigate a meeting with elected officials and/or their staff.

Call-to-action

Participants were asked to engage in commitments to action for themselves, groups, and networks through both written and publicly declared commitments. The MATCH group will use this information to engage individuals and take stock of ways in which the MATCH group can be supporting this work.



Legislative research visits

Small groups met with the elected officials (or their staff) in their districts to build relationships, learn about the legislators' health interests, and share messages around health equity. Groups completed 14 visits with elected officials on both sides of the aisle. The goal of these visits was to present a unified front as a public health community. We aimed to demonstrate that we are present, we care, and that there are many of us coming together in our state. We recognize that building relationships with legislators is essential for creating policy change for public health and advancing health equity in Wisconsin, and this convening is an additional and intentional platform for us to do this together. It is our intention to leverage the Healthiest State Summit to continue to grow this presence.

During our legislative research visit debrief participants expressed appreciation for the opportunity to build these relationships. Attendees expressed that some conversations were challenging and others were hopeful. Themes during debrief included the need to open up conversations and increase understanding of the broad factors that shape health as well as needing to learn the stories and interests of elected officials and staff.

Evaluation Summary

Following the convening, an evaluation survey was sent to participants that roughly a quarter of the participants completed.

Participants shared about what they are still reflecting on from the meeting. For many this included the conversations regarding race and power inequities, addressing equity in rural versus urban communities, as well as including more diversity into these conversations:

"How we can better partner with affected communities for our work? How we can adjust hiring practices to diversify our workforce? If we should be "leading with race" in our community, how we can adjust our communications to align better with the narrative we'd like to be communicating?"

Others reflected on the enormity of the challenges to achieving equity in our society and the importance of focusing on the priorities and next steps.

Participants shared when they were particularly challenged during the meeting.

"The policy focus is challenging. . . I found it challenging to envision the concrete collaborative and community-driven steps we can take to get there."

"Considering the complexity of the barriers in this political climate."

They shared what they are most excited about moving forward with this work.

"The possibility of alignment and synergy among and between multiple groups and organizations, and the will to reshape the narrative. There was a lot of passion about creating change, and that was exciting."

"The movement of health equity and establishing health in all policies to address social disparities."

"Real grassroots engagement to drive a different kind of agenda."

Responses also provided considerations as we implement next steps:

"Ensuring momentum is not dropped--how do you continue building on this?"

"Framing messages that do not confirm or deepen the dichotomies that may be dividing us."

"Engaging other populations, setting expectations appropriately, and involving other health systems."

"There needs to be more diversity (especially people of color, folks with disabilities, rural folks) in the planning process."

Healthiest State Summit Staff - MATCH Group, UW Population Health Institute

Paula Tran Inzeo, Director (ptran@wisc.edu)

Ann McCall, Communications and Project Manager (ann.mccall@wisc.edu)

Lexi Handrick, Graduate Project Assistant (lahandrick@wisc.edu)

Appendix A: 2017 Healthiest State Agenda Setting Convening Participant List

Selma Aly	Ninjas for Health
Sam Austin	UW Population Health Institute
Melody Bockenfeld	UW-ICTR Community Academic Partnerships
Marian Boyle Rohloff	West Side Moravian Church & JOSHUA of WISDOM of Wisconsin
Maureen Busalacchi	Healthier Wisconsin Partnership Program
Amber Canto	University of WI-Extension, Cooperative Extension
Ken Carlson	Sauk Prairie Healthcare
Linda Conlon	Oneida County Health Department
Blanca Cruz	Public Health Madison & Dane County
Sarah Davis	The Center for Patient Partnerships
Andrea Dearlove	Wisconsin Partnership Program
Amanda Dederich	WI Department of Health Services
Jerome Dillard	EXPO (EX-Prisoners Organizing)
Mary Dorn	Outagamie County Public Health Division
Kurt Eggebrecht	Appleton Health Department
Nancy Eggleston	Wood County Health Department
Niki Euhardy	UW Population Health Institute
Victoria Faust	Population Health Institute
Tana Feiner	WI Tobacco Prevention and Control Program
Sara Finger	Wisconsin Alliance for Women's Health
Gary Garske	Portage County HHS
Lieske Giese	Eau Claire City-County Health Department
Marjory Givens	UW Population Health Institute
Kat Grande	Public Health Madison & Dane County
Gina Green-Harris	UW School of Medicine and Public Health
Stephanie Gyldenvand	Winnebago County Health Department
Dakota Hall	Leaders Igniting Transformation
Lexi Handrick	UW Population Health Institute
Stephanie Harrison	Wisconsin Primary Health Care Association
Janel Heinrich	Public Health Madison and Dane County
Julie Hladky	Ascension Wisconsin
Paula Tran Inzeo	UW Population Health Institute
Mimi Johnson	Department of Health Services/Division of Public Health
David Kindig	UW Population Health Institute
Amy Korth	healthTIDE/UW-Madison
Eric Krawczyk	Oneida Community Health Center
Robin Lankton	Community Health Improvement - UW Health
David Lee	Feeding Wisconsin
Sara Lindberg	UW Population Health Institute
David Liners	WISDOM
Kristin Litzelman	UW-Madison
Gavin Luter	WI Campus Compact
Salli Martyniak	Forward Community Investments
Ann McCall	UW Population Health Institute
Carolyn	Winnebago County Health Department
Carl McCarty	Public Health Madison & Dane County
Tia Murray	Public Health Madison & Dane County
Erica Nelson	Kids Forward
Jennifer Park-Mroch	University of Wisconsin Extension

Appendix A continued...

Mary Pesik	Wisconsin Department of Health Services
Kyle Pfister	Ninjas for Health
Carol Quest	Watertown Department of Public Health
Darren Rausch	Greenfield Health Department
Patrick Remington	UW School of Medicine & Public Health
Mark Rice	EXPO of Wisconsin
Kadi Row	UW-Extension
Samira Salem	Forward Community Investments
Courtney Saxler	Wisconsin Partnership Program
Shelly Shaw	Healthy Kids Collaborative of Dane County
Julia Sherman	Wisconsin Alcohol Policy Project
Tim Size	Rural Wisconsin Health Cooperative
Alia Stevenson	Public Health Madison & Dane County
Geoffrey Swain	UW School of Medicine and Public Health
Ken Taylor	Kids Forward
Barb Theis	Juneau County Health Department
Karen Timberlake	Michael Best Strategies
Jen Walker	healthTIDE / UW Madison
Kate Westaby	Wisconsin Partnership Program
Kim Whitmore	UW Madison
Tracy Wilson	Advancing a Healthier Wisconsin Endowment
Lesley Wolf	Healthy Wisconsin Leadership Institute
Lori Zierl	UW-Extension

Appendix B: 2017 Healthiest State Agenda Setting Convening Planning Committee

Sam Austin	UW Population Health Institute
Melody Bockenfeld	UW ICTR CAP
Stevie Burrows	Public Health Madison Dane County/Population Health Fellow
Maureen Busalacchi	Advancing a Healthier Wisconsin Endowment
Lauren Cochlin	healthTIDE
Sara DeLong	Department of Health Services
Tana Feiner	DHS/Tobacco Prevention and Control Program
Mimi Johnson	Department of Health Services
Julie Lederhaus	Wisconsin Public Health Association
Kristin Litzelman	UW Cooperative Extension
Gavin Luter	Wisconsin Campus Compact
Carolyn McCarty	Winnebago County Health Department
Carl Meyer	Public Health Madison Dane County
Jennifer Park-Mroch	UW Extension, Cooperative Extension
Courtney Saxler	Wisconsin Partnership Program
Jen Walker	healthTIDE, Wisconsin Active Communities Alliance (WACA)
Tracy Wilson	Advancing a Healthier Wisconsin Endowment

Appendix C: Action Step Picklist

This action step picklist is intended to provide a list options from which leaders can select concrete action steps to take between the 2017 Healthiest State Agenda Setting Convening and the inaugural Healthiest State Summit in September 2018. A few of the action items are part of more comprehensive tools that offer several additional options for steps to take, and these are linked to websites for your reference (these tools and other resources are also available at the 2017 Healthiest State Agenda Setting Convening website). MATCH staff would also like to know how we can best support your efforts and have provided a space for you to identify those needs below.

Name: _____

Inaugural Healthiest State Summit: Sept. 18 - 20, 2018, Green Bay, WI

I commit to:

- ☐ Attend the 2018 Healthiest State Summit
- ☐ Share the 2018 Healthiest State Summit save-the-date with partners
- ☐ Bring folks from my community/organization to the 2018 Healthiest State Summit

I would like to:

- ☐ Join the planning efforts for the 2018 Healthiest State Summit

Advancing Health Equity Locally and/or within my Organization

I commit to:

- ☐ Incorporate health equity language and principles into my work
- ☐ Have this conversation with three to five people in my community or in my organization
- ☐ Use the [Foundational Practices Tool](#) to jump start a conversation within my organization and/or with partners (includes seven practices with related steps)
- ☐ Meet with people in my area to plan research visits with our local and state elected leaders
- ☐ Host a Community Conversation that includes community members as well as representatives from health care, public health, people running for office, etc.
- ☐ Begin to implement one of several strategic practices from Human Impact Partner's [HealthEquityGuide.org](#) website
- ☐ Join Public Health Awakened, a group of public health professionals organizing for health, equity, and justice, at [publichealthawakened.com](#)

What do you need from the MATCH Group to advance health equity?

- ☐ Training
- ☐ Data and data support
- ☐ Coalition building
- ☐ More information on the Healthy Communities Designation Program
- ☐ Other _____