

# Healthy Iowans 2017-2021

## Iowa's Health Improvement Plan



Health Equity / Social Determinants of Health

REVISED August 2019



Coordinated by the  
Bureau of Public Health Performance  
Iowa Department of Public Health



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# FOCUS AREA: Health Equity/Social Determinants of Health

## What Health Issues Are Included

Health Equity & the Social Determinants of Health  
Safe, Affordable Housing  
Income/Poverty

## Health Equity/Social Determinants (ESD) of Health Measures of Health Improvement

\*\*Additional measures of health equity and social determinants of health are included throughout other focus areas\*\*

**ESD-1** Economic stability, income and poverty: Decrease ↓ the percentage of people below 100% of the federal poverty level.

<u>Overall ☺</u> Target: 11% Baseline: 12% [2016] Newest: 11% [2017]≈9%↓ decrease	<u>Black or African American ☹</u> Target: 33% Baseline: 36% [2016] Newest: 32% [2017]≈10%↓ decrease	<u>Native American/Alaska Native ☺</u> Target: 24% Baseline: 26% [2016] Newest: 24% [2017]≈7%↓ decrease
<u>Hispanic/Latino ☺</u> Target: 21% Baseline: 23% [2016] Newest: 18% [2017]≈22%↓ decrease	<u>With any disability ☹</u> Target: 17% Baseline: 18% [2016] Newest: 19% [2017]≈6%↑ increase	

Data Source: U.S. Census Bureau, American Community Survey 1-Year Estimates. Poverty Status in the Past 12 Months. American FactFinder, Table S1703. <https://factfinder.census.gov/faces/nav/jsf/pages/searchresults.xhtml?refresh=t>

**ESD-2** Economic stability, income and poverty: Decrease ↓ the percentage of children (0-17) below 100% of the federal poverty level.

<u>Overall ☺</u> Target: 14% Baseline: 15.3% [2012-2016] Newest: 14.8% [2013-2017]≈3%↓ decrease	<u>Black or African American ☹</u> Target: 42% Baseline: 45% [2012-2016] Newest: 45% [2013-2017]≈0%↔ no change
<u>Hispanic/Latino ☺</u> Target: 28% Baseline: 29% [2012-2016] Newest: 28% [2013-2017]≈4%↓ decrease	<u>Native American/Alaska Native ☺</u> Target: 34% Baseline: 36% [2012-2016] Newest: 32% [2013-2017]≈12%↓ decrease

Data Source: U.S. Census Bureau, American Community Survey 5-Year Estimates. American FactFinder, Tables S1703, B17020B, B17020C, B17020I. <https://factfinder.census.gov/faces/nav/jsf/pages/searchresults.xhtml?refresh=t>

**ESD-3** Education: Increase ↑ the percentage of public high school students who graduate in 4 years or less.

<u>Overall ☺</u> Target: 96% Baseline: 91% [2016] Newest: 91% [2018]≈0%↔ no change	<u>English language learners ☹</u> Target: 85% Baseline: 81% [2016] Newest: 79% [2018]≈2%↓ decrease	<u>American Indian ☹</u> Target: 85% Baseline: 81% [2016] Newest: 76% [2018]≈6%↓ decrease
<u>Low socioeconomic status ☹</u> Target: 89% Baseline: 84% [2016] Newest: 84% [2018]≈0%↔ no change	<u>African Americans ☺</u> Target: 84% Baseline: 80% [2016] Newest: 81% [2018]≈2%↑ increase	<u>Hispanic ☺</u> Target: 89% Baseline: 85% [2016] Newest: 84% [2018]≈0%↔ no change
<u>Students with an Individualized Education Program ☺</u> Target: 73% Baseline: 69.5% [2016] Newest: 77% [2018]≈10%↑ increase		

Data Source: Iowa Department of Education. <https://www.educateiowa.gov/graduation-rates-and-dropout-rates>

**ESD-4** Health services access: Increase ↑ the percentage of people with health insurance.

<u>Adults, ages 18-64 ☹️</u>	<u>Non-Hispanic Black adults ☹️</u>	<u>Hispanic/Latino adults ☹️</u>	<u>Children under age 19 ☹️</u>
Target: 99%	Target: 96%	Target: 84%	Target: 100%
Baseline: 94% [2016]	Baseline: 91% [2016]	Baseline: 79% [2016]	Baseline: 97% [2016]
Newest: 94% [2017]≈0%↔ no change	Newest: 91% [2017]≈0%↔ no change	Newest: 80% [2017]≈1%↑ increase	Newest: 97% [2017]≈0%↔ no change

Data Source: US Census Bureau, Small Area Health Insurance Estimates. <https://www.census.gov/data/data-tools/sahie-interactive.html>

**ESD-5** Neighborhood, the built environment, and safe, affordable housing: Decrease ↓ the percentage of substandard housing units.\*

Overall ☹️  
 Target: 22%  
 Baseline: 24.1% [2012-2016]  
 Newest: 23.8% [2013-2017]≈1%↓ decrease

Data Source: US Census Bureau, American Community Survey 5-year estimates. Courtesy: University of Missouri Extension, Center for Applied Research and Engagement Systems (CARES) Engagement Network, Build a Report, Physical Environment data category.

<https://engagementnetwork.org/>

\*Includes households with one or more of four housing problems: incomplete kitchen facilities, incomplete plumbing facilities, more than 1 person per room, and cost burden (mortgage or rent) greater than 30% of monthly income.

**ESD-6** Neighborhood, the built environment, and safe, affordable housing: Increase ↑ the percentage of children living in neighborhoods with no poorly kept or rundown housing.

Overall ☹️  
 Target: 93%  
 Baseline: 88% [2016]  
 Newest: 86% [2017]≈2%↓ decrease

Data Source: Child and Adolescent Health Measurement Initiative. [www.cahmi.org](http://www.cahmi.org). Data Resource Center for Child and Adolescent Health. National Survey of Children's Health. Indicator 7.5. <https://www.childhealthdata.org/browse/survey>

**ESD-7** Social and community context: Increase ↑ the percentage of children who live in neighborhoods that are supportive.\*

<u>Overall ☹️</u>	<u>Hispanic ☹️</u>	<u>Income less than 200% of poverty ☹️</u>
Target: 68%	Target: 47%	Target: 55%
Baseline: 64% [2016]	Baseline: 44% [2016]	Baseline: 52% [2016]
Newest: 62% [2017]≈3%↓ decrease	Newest: 55% [2017]≈25%↑ increase	Newest: 46% [2017]≈11%↓ decrease

Data Source: Child and Adolescent Health Measurement Initiative. [www.cahmi.org](http://www.cahmi.org). Data Resource Center for Child and Adolescent Health. National Survey of Children's Health. Indicator 7.1. <https://www.childhealthdata.org/browse/survey>

\*Respondents were asked their level of agreement with 3 statements: (1) People in my neighborhood help each other out; (2) We watch out for each other's children in this neighborhood; and (3) When we encounter difficulties, we know where to go for help in our community. Children are considered to live in supportive neighborhoods if their parents reported "definitely agree" to at least one of the items and "somewhat agree" or "definitely agree" to the other two items.

**ESD-8** Social and community context: Increase ↑ the percentage of children who live in neighborhoods with a park/playground, sidewalks/walking paths, a library/bookmobile, and a community/recreation center/boys' and girls' club.

Overall ☹️  
 Target: 39%  
 Baseline: 36% [2016]  
 Newest: 36% [2017]≈0%↔ no change

Data Source: Child and Adolescent Health Measurement Initiative. [www.cahmi.org](http://www.cahmi.org). Data Resource Center for Child and Adolescent Health. National Survey of Children's Health. Indicator 7.4. <https://www.childhealthdata.org/browse/survey>

## Iowa Health Issue: Health Equity & the Social Determinants of Health

### Iowa Counties with Local Strategies

- Allamakee (culture and immunization)
- Black Hawk (low-income, health literacy)
- Boone (access to Medicaid)
- Buena Vista (food security, ethnic food options)
- Calhoun (low-income/poverty, safe and healthy housing, people with disabilities)
- Carroll (fall prevention for people with disabilities, home safety/modification)
- Cass (oral health underserved populations)
- Cerro Gordo (food subsidy programs, food security, substandard housing)
- Cherokee (nutrition/physical activity efforts focused on people with disabilities)
- Clarke (low-income access to health care providers)
- Clayton (food security)
- Dallas (cultural competence and sensitivity to diversity, food security)
- Decatur (economic development)
- Des Moines (access to community services and resources for lower income residents)
- Dubuque (promoting healthy behaviors: cultural and economic diversity, healthy homes)
- Franklin (health of Hispanic females)
- Greene (maternal/child health services-low-income, resources-people with physical limitations, homeless, dental services-Medicaid)
- Grundy (transportation issues for disabled and low-income residents)
- Henry (dental care services-Medicaid)
- Ida (home safety/modification)
- Jefferson (support for persons with traumatic brain injury)
- Johnson County (pre-diabetes program for Hispanic and/or Latino residents)
- Lee (dental care services-Medicaid, reach vulnerable populations with barriers to access)
- Linn (maintained/affordable housing, care/community resources-vulnerable populations, mental health services-Medicaid/homeless)
- Marshall (language barriers to health services)
- Mitchell (Medicaid changes)
- Monona (poverty)
- Montgomery (Hispanic health, dental care services-Medicaid)
- Scott (access to medical providers for under-insured, uninsured, or Medicaid)
- Sioux (access to health care-Hispanic, stressed housing, interpretation/translation services, health literacy-cultural expectations)
- Story (food security, physical activity opportunities outside urban center)
- Taylor (access to services for people with disabilities)
- Warren (food security, communication strategies to achieve health equity)
- Woodbury (bilingual staff)
- Wright (outreach to Latino and underinsured population for mammograms)

These community health improvement plans are available on the Iowa Department of Public Health, Community Health Needs Assessment and Health Improvement Planning (CHNA&HIP) website: <https://idph.iowa.gov/chnahip/health-improvement-plans>

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## Goals, Objectives & Strategies

### Health Equity & the Social Determinants of Health

**Goal #1** Address health access and barriers in rural and agricultural communities.

#### Alignment with National Plans

Healthy People 2020 Social Determinants of Health

<https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health>

#### Alignment with State / Other Plans

N/A

### Health Equity & the Social Determinants of Health

#### Objective 1-1

Each year, submit a white paper to the Iowa Department of Public Health on access and barriers to health care in rural health and agricultural communities.

Baseline Year
2016

Baseline Value
0

Target Year
2021

Target Value
5

Data Source & Location | To be developed

### Health Equity & the Social Determinants of Health

#### Strategy 1-1.1

Discuss topics related to health access and barriers to rural and agricultural communities at quarterly advisory committee meetings.

#### Strategy Type

Community-focused

#### Strategy Source & Location

Center for Rural Health and Primary Care Advisory Committee. Minutes for the advisory committee located on the Iowa Department of Public Health website:

<https://idph.iowa.gov/ohds/rural-health-primary-care/committee>

#### Who's Responsible

Center for Rural Health and Primary Care Advisory Committee

#### Target Date

Quarterly

### Health Equity & the Social Determinants of Health

**Goal #2** Continue to promote and support efforts to address social determinants of health in Iowa.

#### Alignment with National Plans

Healthy People 2020, Social Determinants of Health

<https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health>

#### Alignment with State / Other Plans

Iowa Social Determinants of Health Statewide Strategy Plan (in development) <https://idph.iowa.gov/SIM>

### Health Equity & the Social Determinants of Health

#### Objective 2-1

Increase the number of recommendations produced by the Patient-Centered Health Advisory Council focused on social determinants of health from 0 to 10 by 2021.

Baseline Year
2016

Baseline Value
0

Target Year
2021

Target Value
10

Data Source & Location | Minutes/issue briefs to be posted on the Iowa Department of Public Health website.

## Health Equity & the Social Determinants of Health

**Strategy 2-1.1** Educate members of the Patient-Centered Health Advisory Council on social determinants of health and strategies to address them.

Strategy Type  
Community-focused

### Strategy Source & Location

Patient-Centered Health Advisory Council Standing Agenda Item

### Who's Responsible

Patient-Centered Health Advisory Council

### Target Date

Dec 30, 2018

## Health Equity & the Social Determinants of Health

**Goal #3** Ensure that Federally Qualified Health Center (FQHC) patients receive an assessment that includes socioeconomic factors affecting their health.

### Alignment with National Plans

Healthy People 2020, Social Determinants of Health

<https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health>

### Alignment with State / Other Plans

Iowa Social Determinants of Health Statewide Strategy Plan (in development) <http://idph.iowa.gov/SIM>

## Health Equity & the Social Determinants of Health

**Objective 3-1** Increase from two to four the number of Federally Qualified Health Centers (FQHCs) using Protocol for Responding to and Assessing Patients' Assets, Risks, and Experiences (PRAPARE).

Baseline Year	Baseline Value	Target Year	Target Value
2016	2	2018	4

Data Source & Location | Iowa Primary Care Association.

## Health Equity & the Social Determinants of Health

**Strategy 3-1.1** Provide project management support, training, and technical assistance to the FQHC clinic sites to implement the PRAPARE tool.

Strategy Type  
Professional/provider-focused

### Strategy Source & Location

Iowa Primary Care Association

### Who's Responsible

Iowa Primary Care Association Performance Improvement and Health Information Technology Team

### Target Date

Jun 30, 2018



## Health Equity & the Social Determinants of Health

**Goal #4** Assure access to high quality family planning services for low-income Iowans.

### Alignment with National Plans

Healthy People 2020, Family Planning <https://www.healthypeople.gov/2020/topics-objectives/topic/family-planning>

### Alignment with State / Other Plans

N/A

## Health Equity & the Social Determinants of Health

Objective 4-1	Increase or maintain the unduplicated count of low-income Iowans [defined as living below 150 percent of the poverty level (FPL)] served by Title X family planning providers.	Baseline Year	Baseline Value	Target Year	Target Value
		2015	31,000	2021	32,553

Data Source & Location | Family Planning Annual Report  
<https://fpar.opa.hhs.gov/Public/ReportsAndForms>

## Health Equity & the Social Determinants of Health

**Strategy 4-1.1** As required by the Federal Title X, provide culturally sensitive and age-appropriate outreach to make individuals aware of where, when, and how they can access family planning services in their community.

Strategy Type  
Individual/interpersonal-focused

Strategy Source & Location  
U.S. Department of Health & Human Services, Title X Family Planning  
<https://www.hhs.gov/opa/title-x-family-planning/index.html>

Who's Responsible  
Iowa Department of Health and the Family Planning Council of Iowa

Target Date  
Jan 1, 2021

## Health Equity & the Social Determinants of Health

**Goal #5** Increase health equity and quality of life for people with disabilities.

### Alignment with National Plans

Healthy People 2020, Disability & Health <https://www.healthypeople.gov/2020/topics-objectives/topic/disability-and-health>

### Alignment with State / Other Plans

N/A

## Health Equity & the Social Determinants of Health

Objective 5-1	Increase the percentage of public health staff exhibiting cultural competency for disability.	Baseline Year	Baseline Value	Target Year	Target Value
		2016	Unknown	2021	85%

Data Source & Location | Iowa Department of Public Health workforce skill assessment survey. To be developed: The IDPH Disability Community Planning Group will draft and recommend questions to add to the survey.

## Health Equity & the Social Determinants of Health

**Strategy 5-1.1** Provide public health professionals training on public health workforce competencies for disability inclusion.

Strategy Type  
Professional/provider-focused

Strategy Source & Location  
Iowa Department of Public Health Improving the Health of People with Disabilities grant work plan.



Who's Responsible

Iowa Department of Public Health Disability and Health Program

Target Date

Dec 31, 2018

Health Equity & the Social Determinants of Health

**Strategy 5-1.2** Provide public health professionals training on Americans with Disabilities Act (ADA) accessibility guidelines.

Strategy Type

Professional/provider-focused

Strategy Source & Location

Iowa Department of Public Health Improving the Health of People with Disabilities grant work plan.

Who's Responsible

Iowa Department of Public Health Disability and Health Program

Target Date

Sep 30, 2020

Health Equity & the Social Determinants of Health

**Objective 5-2**

Increase the proportion of people with disabilities who report doing physical activity or exercise during the past 30 days other than their regular job.

Baseline  
Year

2014

Baseline  
Value

63.8%

Target  
Year

2018

Target  
Value

70%

Data Source & Location | Health in Iowa: Annual Report from the Behavioral Risk Factor Surveillance System <http://idph.iowa.gov/brfss>  
Disability in Iowa: Public Health Needs Assessment <http://publications.iowa.gov/16066/>

Health Equity & the Social Determinants of Health

**Strategy 5-2.1** Identify and distribute health risk factor knowledge awareness training materials.

Strategy Type

Individual/interpersonal-focused

Strategy Source & Location

Iowa Department of Public Health Improving the Health of People with Disabilities grant work plan.

Who's Responsible

Iowa Department of Public Health Disability and Health Program

Target Date

Dec 31, 2019

Health Equity & the Social Determinants of Health

**Strategy 5-2.2** Develop Iowa disability service organization capacity using the Easter Seals Iowa WE wellness empowerment strategies.

Strategy Type

Professional/provider-focused

Strategy Source & Location

Iowa Department of Public Health Improving the Health of People with Disabilities grant work plan.

Who's Responsible

University of Iowa Center for Disabilities and Development and Easter Seals Iowa

Target Date

Dec 31, 2019

Health Equity & the Social Determinants of Health

**Strategy 5-2.3** Partner with local public health agencies with identified willingness and implement policy, systems and environmental activities for people with disabilities in their community.

Strategy Type

Professional/provider-focused

Strategy Source & Location

Iowa Department of Public Health Improving the Health of People with Disabilities grant work plan.

Who's Responsible

University of Iowa Center for Disabilities and Development

Target Date

Aug 1, 2018

## Health Equity & the Social Determinants of Health

**Objective 5-3** Increase the percentage of Easter Seals Iowa clients measuring in the healthy body mass index (BMI) range.

Baseline Year	Baseline Value	Target Year	Target Value
2012-15	20%	2018	30%

Data Source & Location | Easter Seals Iowa database (unpublished)

## Health Equity & the Social Determinants of Health

**Strategy 5-3.1** Identify, coordinate, and establish health and wellness activities across multiple sectors and settings by 2018.

Strategy Type  
Community-focused

Strategy Source & Location

Easter Seals Iowa (unpublished)

Who's Responsible

Easter Seals Iowa health and wellness committee

Target Date

Jan 1, 2018

## Health Equity & the Social Determinants of Health

**Objective 5-4** Increase the number of Easter Seals Iowa clients who have a formal health and wellness goal.

Baseline Year	Baseline Value	Target Year	Target Value
2012-15	527	2018	700

Data Source & Location | Easter Seals Iowa balanced scorecard (unpublished)

## Health Equity & the Social Determinants of Health

**Strategy 5-4.1** Present health and wellness tools/data/information to all 14 departments within Easter Seals Iowa to increase awareness.

Strategy Type  
Individual/interpersonal-focused

Strategy Source & Location

Easter Seals Iowa (unpublished)

Who's Responsible

Wellness Coordinator, Easter Seals Iowa

Target Date

Jan 1, 2018

Report Date

April 25, 2018

Progress on Strategy

☒ Complete ☐ On track ☐ Off track ☐ No progress

Progress notes: Our wellness trainings consist of various topics. We offer a freedom from smoking course as we have two trained facilitators within our agency. We also offer an evidence based training called WRAP (Wellness Recovery Action Plan). In addition, we have a basic nutrition course offered and a Hy-Vee dietitian that comes regularly to meet with clients and team members. We also provide mediation and yoga classes as well as cooking classes and financial classes.

Report Date

Feb 8, 2019

Progress on Strategy

☒ Complete ☐ On track ☐ Off track ☐ No progress

Progress notes: In addition, to all trainings mentioned above, we also now offer c3 de-escalation training to team members. Our vision is to equip team members with more tools so that they can access to assist with burn out and compassion fatigue and also assist clients so they stay safe. In addition, we have offered resources on self care.

## Health Equity & the Social Determinants of Health

**Strategy 5-4.2** Develop and/or strengthen community partnerships to increase awareness.

Strategy Type  
Community-focused

Strategy Source & Location

Easter Seals Iowa (unpublished)

Who's Responsible

Easter Seals Iowa health and wellness committee

Target Date

Jan 1, 2018

Report Date

Feb 8, 2019

Progress on Strategy
☒ Complete
 ☐ On track
 ☐ Off track
 ☐ No progress

Progress notes: We have many excellent community partners that have been instrumental in our success. Hy-Vee, the American Lung Association, the Polk County Health Department, Eat greater Des Moines, the downtown farmer's market, lifelong smiles coalition, wellness champions and much more. We continue to build on what is listed above.

Health Equity & the Social Determinants of Health

**Goal #6** Improve health equity among Iowans in low and moderate-income communities by increasing access to healthy foods.

Alignment with National Plans

Healthy People 2020, Social Determinants of Health

<https://www.healthypeople.gov/2020/leading-health-indicators/2020-lhi-topics/Social-Determinants>
Alignment with State / Other Plans

N/A

Health Equity & the Social Determinants of Health

**Objective 6-1** Secure public funding to create or expand healthy food financing initiatives to increase the number of healthy food retail outlets in under-served communities.

Baseline

Year

2016

Baseline

Value

0 (No funding)

Target

Year

2019

Target

Value

1 (Public funding)

Data Source & Location | To be developed.

Health Equity & the Social Determinants of Health

**Strategy 6-1.1** Through public funding, create or expand a healthy corner store initiative that increases the amount of healthy food offered in existing corner stores in low and moderate income communities.

Strategy Type

Policy-focused

Strategy Source & Location

ChangeLab Solutions. Health on the Shelf

<http://www.changelabsolutions.org/publications/health-on-the-shelf>

*Pediatrics*. November 2009, VOLUME 124 / ISSUE 5. *Snacking in Children: The Role of Urban Corner Stores*  
<http://pediatrics.aappublications.org/content/124/5/1293>

The Food Trust. *Healthier Corner Stores: Positive Impacts, Profitable Changes*
[http://thefoodtrust.org/uploads/media\\_items/healthier-corner-stores-positive-impacts-and-profitable-changes.original.pdf](http://thefoodtrust.org/uploads/media_items/healthier-corner-stores-positive-impacts-and-profitable-changes.original.pdf)

The Food Trust. The national Healthy Corner Stores Network

<http://thefoodtrust.org/what-we-do/administrative/healthy-corner-stores-network>
The Food Trust. *Moving From Policy to Implementation*
[http://thefoodtrust.org/uploads/media\\_items/moving-from-policy-to-implementation-a-99845.original.pdf](http://thefoodtrust.org/uploads/media_items/moving-from-policy-to-implementation-a-99845.original.pdf)

## Health Equity & the Social Determinants of Health

**Goal #7** Reduce arthritis-related disparities in health and health care.

### Alignment with National Plans

Arthritis Foundation Strategic Plan <http://www.arthritis.org/Documents/Sections/About-Us/strategic-plan-rev-10.11.pdf>

### Alignment with State / Other Plans

N/A

## Health Equity & the Social Determinants of Health

Objective 7-1	Ensure that all individuals with arthritis can access the knowledge, skills and resources they need to be proactive in improving their health and quality of life.	Baseline Year	Baseline Value	Target Year	Target Value
		2016	15,976	2021	32,136

Data Source & Location: Data collected internally to track the total number of individuals in Iowa that utilize our resources. (Does not include website visits.) The objective is a 15% increase year-over-year.

## Health Equity & the Social Determinants of Health

Strategy 7-1.1	The Arthritis Foundation will provide a centrally-managed source of information and support tools to ensure quality, consistency, depth and responsiveness to identified needs. The Iowa office will serve as a hub for guidance and information to assist all individuals in Iowa with arthritis to find resources and appropriate care.	Strategy Type
		Individual/interpersonal-focused

### Strategy Source & Location

Arthritis Foundation Tools & Resources: <https://www.arthritis.org/living-with-arthritis/tools-resources/>

Arthritis Foundation Annual Report: <https://www.arthritis.org/about-us/annual-report/>

Arthritis Foundation Strategic Plan:  
<http://www.arthritis.org/Documents/Sections/About-Us/strategic-plan-rev-10.11.pdf>

Who's Responsible  
Arthritis Foundation

Target Date  
Dec 31, 2021

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## Health Equity & the Social Determinants of Health

### Goal #8 Reduce HIV-related disparities and health inequities.

#### Alignment with National Plans

National HIV/AIDS Strategy <https://www.aids.gov/federal-resources/national-hiv-aids-strategy/overview/>

Healthy People 2020, HIV <https://www.healthypeople.gov/2020/topics-objectives/topic/hiv>

#### Alignment with State / Other Plans

Iowa Comprehensive HIV Plan 2017-2021 <https://idph.iowa.gov/hivstdhep/hiv>

#### Health Equity & the Social Determinants of Health

Objective 8-1	Reduce the diagnosis disparity rates of African Americans/Blacks (AA/B) and men who have sex with men (MSM) by 15%.	Baseline Year	Baseline Value	Target Year	Target Value
		2015	AA/B: 20 MSM: 362	2021	15% reduction

Data Source & Location: Enhanced HIV/AIDS Reporting System (eHARS); HIV Prevention Program data; EvaluationWeb; Iowa Disease Surveillance System (IDSS). Rates are number of diagnoses per 100,000 population.

#### Health Equity & the Social Determinants of Health

**Strategy 8-1.1** Implement a coordinated statewide marketing initiative. Strategy Type  
Individual/interpersonal-focused

##### Strategy Source & Location

Iowa Comprehensive HIV Plan 2017-2021

##### Who's Responsible

Iowa Department of Public Health Bureau of HIV, STD, and Hepatitis, the Community Planning Group, and the Gay Men's health Committee, and other community partners.

##### Target Date

Dec 31, 2021

#### Health Equity & the Social Determinants of Health

Objective 8-2	Reduce the percentage of people with HIV disease classified as stage 3 (AIDS) within 3 months of HIV diagnosis to 30%.	Baseline Year	Baseline Value	Target Year	Target Value
		2014	38%	2021	30%

Data Source & Location: Enhanced HIV/AIDS Reporting System (eHARS).

#### Health Equity & the Social Determinants of Health

**Strategy 8-2.1** Increase the percentage of people who have ever been tested for HIV. Strategy Type  
Professional/provider-focused

##### Strategy Source & Location

Iowa Comprehensive HIV Plan 2017-2021

##### Who's Responsible

Iowa Department of Public Health HIV Prevention Program in collaboration with Iowa Medical Society, other professional medical associations, medical schools, Primary Care Association, Department of Corrections, Iowa Medicaid Enterprise, IDPH-supported test sites, and other community partners.

##### Target Date

Dec 31, 2021

## Health Equity & the Social Determinants of Health

**Goal #9** Increase access to care and improve health outcomes for persons living with HIV (PLWH).

### Alignment with National Plans

National HIV/AIDS Strategy <https://www.aids.gov/federal-resources/national-hiv-aids-strategy/overview/>

Healthy People 2020, HIV <https://www.healthypeople.gov/2020/topics-objectives/topic/hiv>

### Alignment with State / Other Plans

Iowa Comprehensive HIV Plan 2017-2021 <https://idph.iowa.gov/hivstdhep/hiv>

## Health Equity & the Social Determinants of Health

**Objective 9-1** By December 31, 2021, increase the proportion of people diagnosed with HIV and living in Iowa who have achieved viral suppression to 90%.

Baseline Year	Baseline Value	Target Year	Target Value
2015	76%	2021	90%

Data Source & Location | Enhanced HIV/AIDS Reporting System (eHARS).

## Health Equity & the Social Determinants of Health

**Strategy 9-1.1** Partner with mental health stakeholders, substance use stakeholders, correctional facilities, and refugee services to better serve persons at increase risk and PLWH with co-occurring health issues.

Strategy Type  
Professional/provider-focused

### Strategy Source & Location

Iowa Comprehensive HIV Plan 2017-2021

### Who's Responsible

Iowa Department of Public Health Bureau of HIV, STD, and Hepatitis, the regional outreach liaisons, and the Community HIV and Hepatitis Advocates of Iowa Network (CHAIN).

Target Date  
Dec 31, 2021

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## Health Equity & the Social Determinants of Health

### Goal #10 Increase health literacy among Iowans.

#### Alignment with National Plans

National Action Plan to Improve Health Literacy <https://health.gov/communication/initiatives/health-literacy-action-plan.asp>

CMS Person and Family Engagement Strategy

<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/QualityInitiativesGenInfo/Person-and-Family-Engagement.html>

Healthy People 2020, Health Communication and Health Information Technology (HC/HIT) Objective 1

<https://www.healthypeople.gov/2020/topics-objectives/topic/health-communication-and-health-information-technology>

#### Alignment with State / Other Plans

Iowa State Innovation Model, Statewide Strategy Plans for Person and Family Engagement, Care Coordination and Diabetes

<https://idph.iowa.gov/SIM>

#### Health Equity & the Social Determinants of Health

Objective 10-1	By 2019, increase the number of healthcare providers and community-based service providers who use Teach Back with patients and clients by 15%.	Baseline Year	Baseline Value	Target Year	Target Value
		2016	TBD	2019	15% increase

Data Source & Location: Composite figures based on hospitals reporting use of Teach Back and attendance figures for providers and services who attend Teach Back trainings; Iowa Healthcare Collaborative self-reported data sources

#### Health Equity & the Social Determinants of Health

Strategy 10-1.1	Increase provider and allied professional education and training focused on patient engagement and activation, including motivational interviewing, Teach Back, and health literacy best practices.	Strategy Type
		Professional/provider-focused

#### Strategy Source & Location

Iowa Care Coordination Statewide Strategy

#### Who's Responsible

Iowa Healthcare Collaborative, Iowa Department of Public Health, and the Care Coordination State Plan Task Force/Work Group

#### Target Date

Dec 31, 2020

#### Health Equity & the Social Determinants of Health

Strategy 10-1.2	Deliver and promote trainings that educate health-care professionals on person-centered communication techniques and shared-decision making strategies, including active listening, Teach Back, and motivational interviewing.	Strategy Type
		Professional/provider-focused

#### Strategy Source & Location

Iowa Person and Family Engagement Statewide Strategy

#### Who's Responsible

Iowa Healthcare Collaborative, Iowa Department of Public Health, and the Iowa Person and Family Engagement State Plan Task Force/Work Group

#### Target Date

Dec 31, 2020

#### Health Equity & the Social Determinants of Health

Objective 10-2	Increase the number of Iowans who report they are able to understand health information provided to them by their healthcare provider by 5%.	Baseline Year	Baseline Value	Target Year	Target Value
		2016	84%	2021	89%

Data Source & Location: Performance based on the Hospital Consumer Assessment of Healthcare Providers and Systems Survey (HCAHPS). This measure used due to wide availability and public reporting access.



## Health Equity & the Social Determinants of Health

**Strategy 10-2.1** Increase awareness and address health literacy, including the use of patient conversation resources such as Teach Back and Ask Me 3.

### Strategy Type

Professional/provider-focused

### Strategy Source & Location

Iowa Care Coordination Statewide Strategy; Iowa Person and Family Engagement Strategy

### Who's Responsible

Iowa Healthcare Collaborative, Iowa Department of Public Health, Iowa Care Coordination State Plan Task Force/Work Group, Iowa Person and Family Engagement State Plan Task Force/Work Group

### Target Date

Dec 31, 2021

## Health Equity & the Social Determinants of Health

**Strategy 10-2.2** As part of best practices, create and maintain policies for patient-centered care practices across team settings, emphasizing inclusive team-based care, shared-decision making, and patient activation strategies.

### Strategy Type

Policy-focused

### Strategy Source & Location

Iowa Care Coordination Statewide Strategy

### Who's Responsible

Iowa Healthcare Collaborative, Iowa Department of Public Health, Iowa Care Coordination State Plan Task Force/Work Group, Iowa Person and Family Engagement State Plan Task Force/Work Group

### Target Date

Dec 31, 2021

## Health Equity & the Social Determinants of Health

### Goal #11 Reduce the African-American infant mortality rate.

#### Alignment with National Plans

Healthy People 2020, Maternal Infant and Child Health

<https://www.healthypeople.gov/2020/topics-objectives/topic/maternal-infant-and-child-health>

#### Alignment with State / Other Plans

N/A

## Health Equity & the Social Determinants of Health

Objective 11-1	Reduce the mortality rate for non-Hispanic African-American infants from 8.4 infant deaths per 1,000 live births to 6.0 by 2021.	Baseline Year	Baseline Value	Target Year	Target Value
		2015	8.4	2021	6

Data Source & Location: United States Department of Health and Human Services (US DHHS), Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS), Division of Vital Statistics (DVS). Linked Birth / Infant Death Records as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program, on CDC WONDER Online Database. <http://wonder.cdc.gov/lbd-current.html>

## Health Equity & the Social Determinants of Health

**Strategy 11-1.1** Increase safe sleep education of new parents through education of child care providers on safe sleep.

### Strategy Type

Individual/interpersonal-focused

### Strategy Source & Location

Existing program through contracts with Title V Maternal Health Contractors and the Statewide Perinatal Network and Team <http://idph.iowa.gov/family-health/resources>

Who's Responsible  
Iowa Department of Public Health

Target Date  
Jan 1, 2021

Health Equity & the Social Determinants of Health

**Strategy 11-1.2** Prevent unintended pregnancies.

Strategy Type  
Individual/interpersonal-focused

Strategy Source & Location

Existing program through contracts with Title V Maternal Health Contractors and the Statewide Perinatal Network and Team <http://idph.iowa.gov/family-health/resources>

Who's Responsible  
Iowa Department of Public Health

Target Date  
Jan 1, 2021

Health Equity & the Social Determinants of Health

**Strategy 11-1.3** Provide education at birthing hospitals on shaken baby syndrome.

Strategy Type  
Individual/interpersonal-focused

Strategy Source & Location

Existing Program through contracts with Title V Maternal Health Contractors and the Statewide Perinatal Network and Team <http://idph.iowa.gov/family-health/resources>

Who's Responsible  
Iowa Department of Public Health

Target Date  
Jan 1, 2021

Health Equity & the Social Determinants of Health

**Goal #12** Continue to provide specialty care to Iowans 200% below poverty level through the Polk County Medical Society (PCMS) Volunteer Physician Network Program.

Alignment with National Plans

Healthy People 2020, Access to Health Services  
<https://www.healthypeople.gov/2020/topics-objectives/topic/Access-to-Health-Services>

Alignment with State / Other Plans

N/A

Health Equity & the Social Determinants of Health

<b>Objective 12-1</b>	Through the Volunteer Physician Network of the Polk County Medical Society provide Iowans in need of specialty care referred from the 56 free clinics in Iowa through the funding received from the State of Iowa.	Baseline Year	Baseline Value	Target Year	Target Value
		2016	2,400	2021	3,000 per year

Data Source & Location | VPN Program database, Volunteer Physician Network, a program of the Polk County Medical Society, 1520 High Street, Des Moines, IA 50309

Health Equity & the Social Determinants of Health

**Strategy 12-1.1** Navigate patients in need for specialty care through the PCMS Volunteer Physician Network Program.

Strategy Type  
Individual/interpersonal-focused

Strategy Source & Location

Polk County Medical Society

Who's Responsible  
Polk County Medical Society

Target Date  
Jan 1, 2021

## Iowa Health Issue: Safe, Affordable Housing

### Iowa Counties with Local Strategies

Calhoun, Carroll, Cerro Gordo, Dubuque, Greene, Ida, Linn, Montgomery, Sioux

These community health improvement plans are available on the Iowa Department of Public Health, Community Health Needs Assessment and Health Improvement Planning (CHNA&HIP) website: <https://idph.iowa.gov/chnahip/health-improvement-plans>

## Goals, Objectives & Strategies

### Safe, Affordable Housing

#### Goal #1 Improve housing and infrastructure for low and moderate-income Iowans

##### Alignment with National Plans

Healthy People 2020, Social Determinants of Health

<https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health>

##### Alignment with State / Other Plans

State of Iowa Consolidated Plan for Housing and Community Development

<https://www.iowaeconomicdevelopment.com/our-agency-detail-resources/6501>

### Safe, Affordable Housing

Objective 1-1	Improve conditions of owner-occupied housing for low and moderate income individuals by increasing the number of owner-occupied houses that are rehabilitated.	Baseline Year	Baseline Value	Target Year	Target Value
		2015	164	2019	665

Data Source & Location: State of Iowa Consolidated Plan for Housing & Community Development Consolidated Annual Performance Report (CAPER) <https://www.iowaeconomicdevelopment.com/our-agency-detail-resources/6501>

### Safe, Affordable Housing

**Strategy 1-1.1** Invest a portion (22%) of CDBG funds into owner occupied rehabilitation activities for low and moderate income individuals.

#### Strategy Type

Demographic/socioeconomic-focused

#### Strategy Source & Location

State of Iowa Consolidated Plan for Housing and Community Development

#### Who's Responsible

Iowa Economic Development Authority and communities receiving Community Development Block Grant funds

#### Target Date

Jan 1, 2019

### Safe, Affordable Housing

Objective 1-2	Improve water and wastewater systems serving low and moderate income individuals.	Baseline Year	Baseline Value	Target Year	Target Value
		2015	21,541	2019	25,000

Data Source & Location: State of Iowa Consolidated Plan for Housing & Community Development CAPER <https://www.iowaeconomicdevelopment.com/our-agency-detail-resources/6501>

### Safe, Affordable Housing

**Strategy 1-2.1** Invest a portion (33%) of CDBG funds into owner occupied rehabilitation activities for low and moderate income individuals.

#### Strategy Type

Demographic/socioeconomic-focused

#### Strategy Source & Location

State of Iowa Consolidated Plan for Housing and Community Development

## Iowa Health Issue: Income/Poverty

Iowa Counties with Local Strategies

Monona

This community health improvement plan is available on the Iowa Department of Public Health, Community Health Needs Assessment and Health Improvement Planning (CHNA&HIP) website: <https://idph.iowa.gov/chnahip/health-improvement-plans>

## Goals, Objectives & Strategies

### Income/Poverty

**Goal #1** Statewide goals, objectives, and strategies for these issues have not yet been identified.

#### Alignment with National Plans

Healthy People 2020, Social Determinants of Health, Economic Stability  
<https://www.healthypeople.gov/2020/topicsobjectives/topic/social-determinants-of-health>

#### Alignment with State / Other Plans

N/A

### Income/Poverty

**Objective 1-1** Statewide goals, objectives, and strategies for these issues have not yet been identified.

Baseline Year	Baseline Value	Target Year	Target Value

Data Source  
& Location

### Income/Poverty

**Strategy 1-1.1** Statewide goals, objectives, and strategies for these issues have not yet been identified.

**Strategy Type**  
Demographic/socioeconomic-focused

Strategy Source & Location

Who's Responsible

Target Date