2017 State Health Assessment: Advisory Committee
Summary March 2018 Meetings

Two meetings of the State Health Assessment and State Health Improvement Plan Advisory Committee were held on March 19th and 20th with roughly 25 Advisors at each. The goal of the meetings was to solicit recommendations regarding the highest priority health conditions for action to achieve greater health equity in the future.

Twenty issues identified by staff from the health department as significant public health issues were brought to the Advisory Committee. The twenty issues were selected from among 58 topics highlighted in the State Health Assessment using the following criteria:

- Magnitude: *To what degree is it a significant public health issue?*
- Impact on Equity: *To what degree is it a significant health equity[1] issue?*
- Economic and Social Cost: *To what degree does it create economic and social challenges?*
- Feasibility for Change: *To what degree are we able to act and make change?*

It is important to note that the original 58 topics excluded two important sections of the State Health Assessment. Data related to the "Populations in Focus" – people of color, people who identify as LGBTQ, people living with disabilities, and people living in poverty – was not included for two reasons: a) it would be unethical to prioritize among these different populations and b) once the priority health conditions are identified, we are committed to looking particularly at the impacts and opportunities within these populations. Data on access to health care was not included in the rating as assuring health access will be part of the strategy for creating improved health and equity regardless of which health conditions are selected.

In advance of the Advisory Committee meetings, participants were asked to review all the data collected through the state health assessment. This data describes what we know about health trends and conditions among Vermont residents with a focus on equity. At the meeting, Advisors conducted individual ratings of the twenty topical areas based on the same criteria used to select the 20 topics (above).

In conducting the rating, Advisors were offered the following guidance:
- Prioritizing here does not stop ongoing work rather it compels partners to focus efforts for alignment and additional funding should they be available
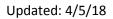- Assume that current programs and investments will continue

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[1] **Health equity** exists when all people have a fair and just opportunity to be healthy, especially those who have experienced socioeconomic disadvantage, historical injustice and other avoidable systemic inequalities that are often associated with social categories of race, gender, class, ethnicity, social position, sexual orientation, and disability

- Focus on public health issues in Vermont
- Expect the rating process will be difficult as you have limited data and knowledge
- Rating will reflect your values; that is expected and okay

Individual scores were tallied. The results (below) were shared with the Advisors for discussion. Advisors noted the challenge in rating, the differences in scale among the topics (some narrow others broad), and the overlap among issues. Upon viewing the results, Advisors noted surprise at some of the issues that rose to the top or dropped to the bottom. Concerns were raised about ensuring that equity be the most important criteria in the final determination. Advisors noted the opportunities to combine some of the topics. They also noted the potential that selected strategies might address multiple health outcomes. They urged consideration of strategies that address the underlying drivers of the health outcomes as the Steering Committee selects the final issues for inclusion in the State Health Improvement Plan.

The ratings from each of the Advisory Committee meetings will be shared with the Steering Committee for final approval in the next few weeks. Once approved, small workgroups will be convened to develop strategies for each priority. The workgroups will include partners in the delivery of health care and those engaged in creating healthy communities by addressing the social determinants of health. Suggested strategies offered during these March meetings and the list of assets and ongoing action identified at the October Advisory Committee meetings will be shared with Advisors and partners engaged in the workgroups.

VERMONT
DEPARTMENT OF HEALTH

Results of the Ratings from the Advisory Committee Meetings

Health Issues	AC1 Average Rank
Oral Health	3.89
Childhood Resiliency (Protective Factors, ACES, flourishing)	4.94
Opioid & illicit drug use	5.33
Mental Health	5.56
Chronic Disease (Cancer, Asthma/Lung Disease, Cardiovascular Disease, Diabetes)	5.72
Child Development (breastfeeding, lead poisoning, maternal depression, parental substance use)	6.22
Quality of Life (poor mental and physical health)	6.22
Risk Behavior During Pregnancy (drinking and smoking)	6.61
Family Planning (Unintended Pregnancy, prenatal care)	6.78
Smoking & Tobacco Use	6.83
Obesity and overweight	7.56
Intimate partner violence	8.65
Climate Change-related health impacts (Heat-related illness, Tick and Mosquito-borne Disease, Cyanobacteria blooms, Pollen/Allergies, Air quality, Drinking water, Food and water-borne disease, Flooding/Extreme weather, Pesticide Use, Mental Health, greenhouse gas reduction)	11.22
Alcohol Use	11.28
Sexually Transmitted Infections (Chlamydia, Gonorrhea, Syphilis & HIV)	11.53
Suicide injury & death	11.72
Fall-related injury & death	13.06
Hepatitis C	14.44
Vaccination	14.56
Tickborne Disease (Lyme, anaplasmosis)	16.39

Health Issues	AC2 Average Rank
Mental Health	4.5
Quality of Life (poor mental and physical health)	5.3
Chronic Disease (Cancer, Asthma/Lung Disease, Cardiovascular Disease, Diabetes)	5.3
Oral Health	5.3
Opioid & illicit drug use	5.5
Child Development (breastfeeding, lead poisoning, maternal depression, parental substance use)	5.8
Childhood Resiliency (Protective Factors, ACES, flourishing)	6.7
Obesity and Overweight	8.5
Smoking & Tobacco Use	8.8
Family Planning (Unintended Pregnancy, prenatal care)	8.9
Sexually Transmitted Infections (Chlamydia, Gonorrhea, Syphilis & HIV)	9.3
Risk Behavior During Pregnancy (drinking and smoking)	10.1
Intimate partner violence	10.3
Alcohol Use	10.6
Climate Change-related health impacts (Heat-related illness, Tick and Mosquito-borne Disease, Cyanobacteria blooms, Pollen/Allergies, Air quality, Drinking water, Food and water-borne disease, Flooding/Extreme weather, Pesticide Use, Mental Health, greenhouse gas reduction)	11.5
Suicide injury & death	11.7
Vaccination	12.3
Hepatitis C	12.4
Fall-related injury & death	13.1
Tickborne Disease (Lyme, anaplasmosis)	15.3