County Health Rankings & Roadmaps
Building a Culture of Health, County by County
A Robert Wood Johnson Foundation program

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HEALTH & WEALTH: USING DATA TO ADDRESS INCOME INEQUALITY

A County Health Rankings & Roadmaps and Prosperity Now Webinar

June 16, 2020

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County Health Rankings & Roadmaps is a partnership of the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute

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YOUR PRESENTERS AND FACILITATORS

Carla Freeman
Action Learning Coach
County Health Rankings & Roadmaps

Lindsay Garber
Network Strategist
County Health Rankings & Roadmaps

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Director, Savings & Financial Capability
Prosperity Now

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JOIN US FOR MORE DISCUSSION – TODAY!

- **When:** Immediately following the webinar
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- **How:** Videoconference and/or phone via Zoom
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LEARNING OUTCOMES FOR TODAY

- Explore how the Prosperity Now Scorecard can provide data on financial stability and income inequality
- Understand the data and resources available from County Health Rankings & Roadmaps
- Identify ways to combine data and tools from difference sources to address local challenges

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WHY WE DO WHAT WE DO

To Improve Health Outcomes & Advance Health Equity

Menominee Nation 2015

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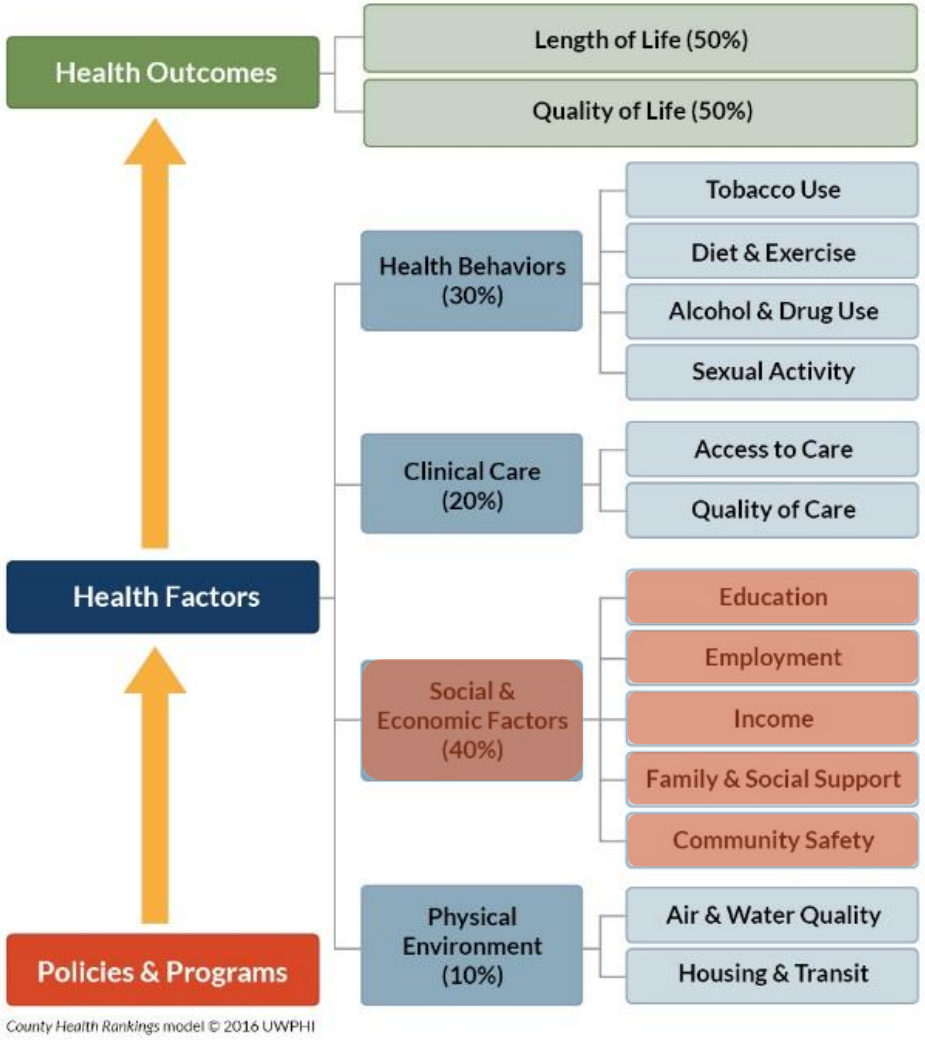
RANKINGS MODEL: WHAT MATTERS TO YOUR HEALTH



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PROSPERITY NOW INTRODUCTION

Prosperity Now's mission is to ensure everyone in our country has a clear path to financial stability, wealth and prosperity.

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PROSPERITY NOW SCORECARD

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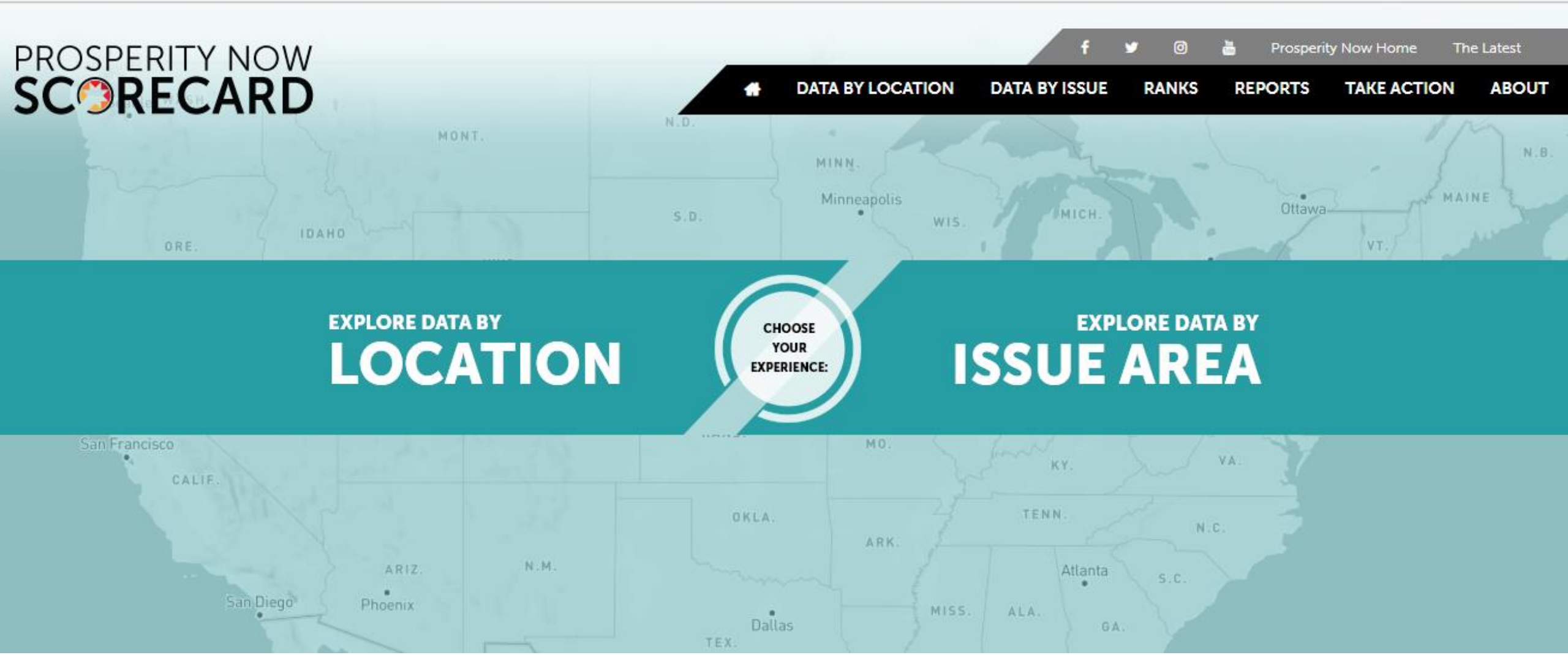

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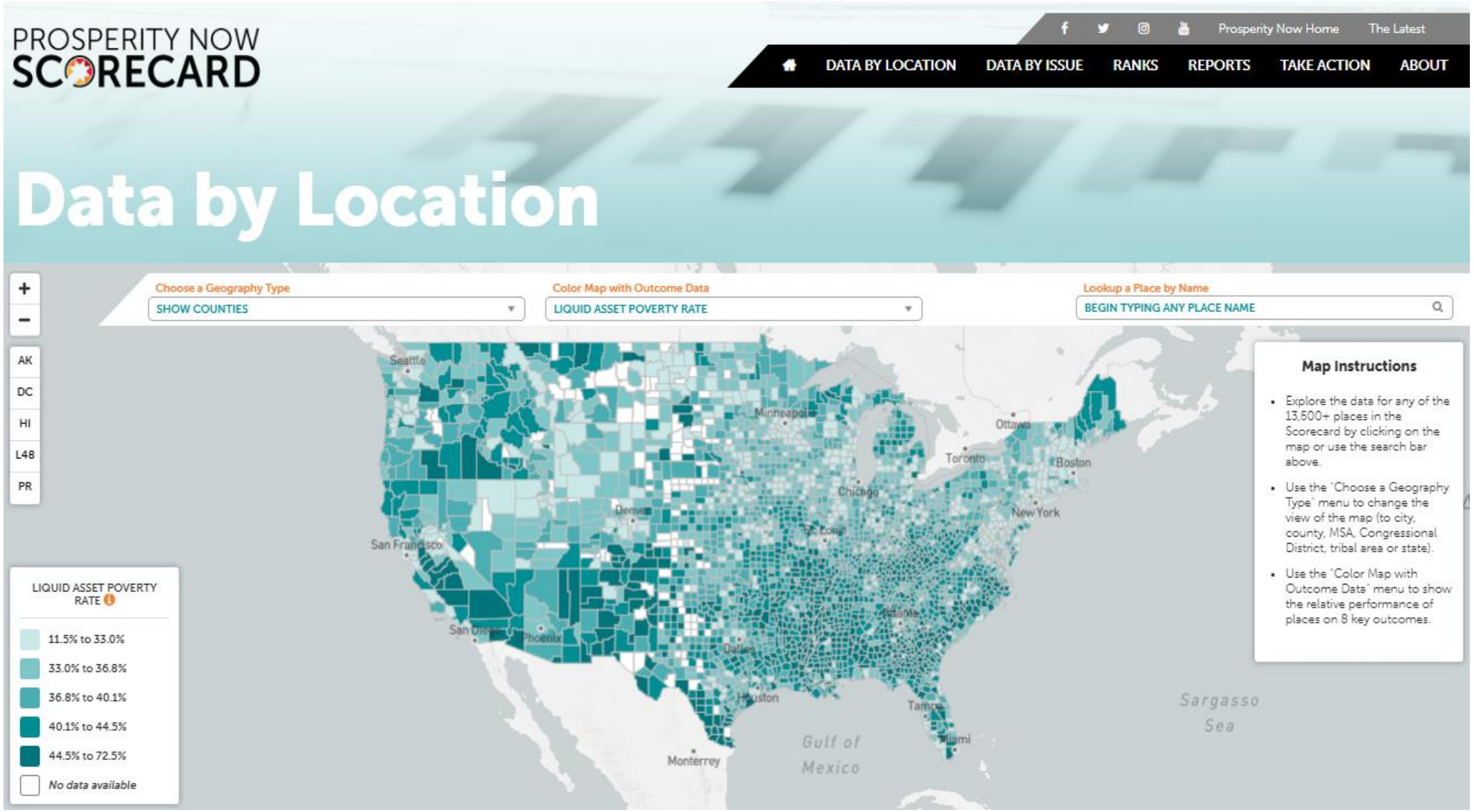

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PROSPERITY NOW SCORECARD

75 Outcome Measures

26 Disaggregated by Race, 49 Overall

Disaggregated data by disability status, gender, and income

Trend data across 44 data measures

28 Policy Measures

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MEETING THE NEEDS OF A DIVERSE FIELD

- **Challenge:** People want more help taking action in, and on behalf of, their communities.
- **Solution:** Deeper community engagement and skill-building initiatives with stakeholders.
- **Challenge:** People need help defining and disseminating a unified message to their stakeholders.
- **Solution:** Improve rankings; create and share specialized local analyses, with focus on impact of race and policy.

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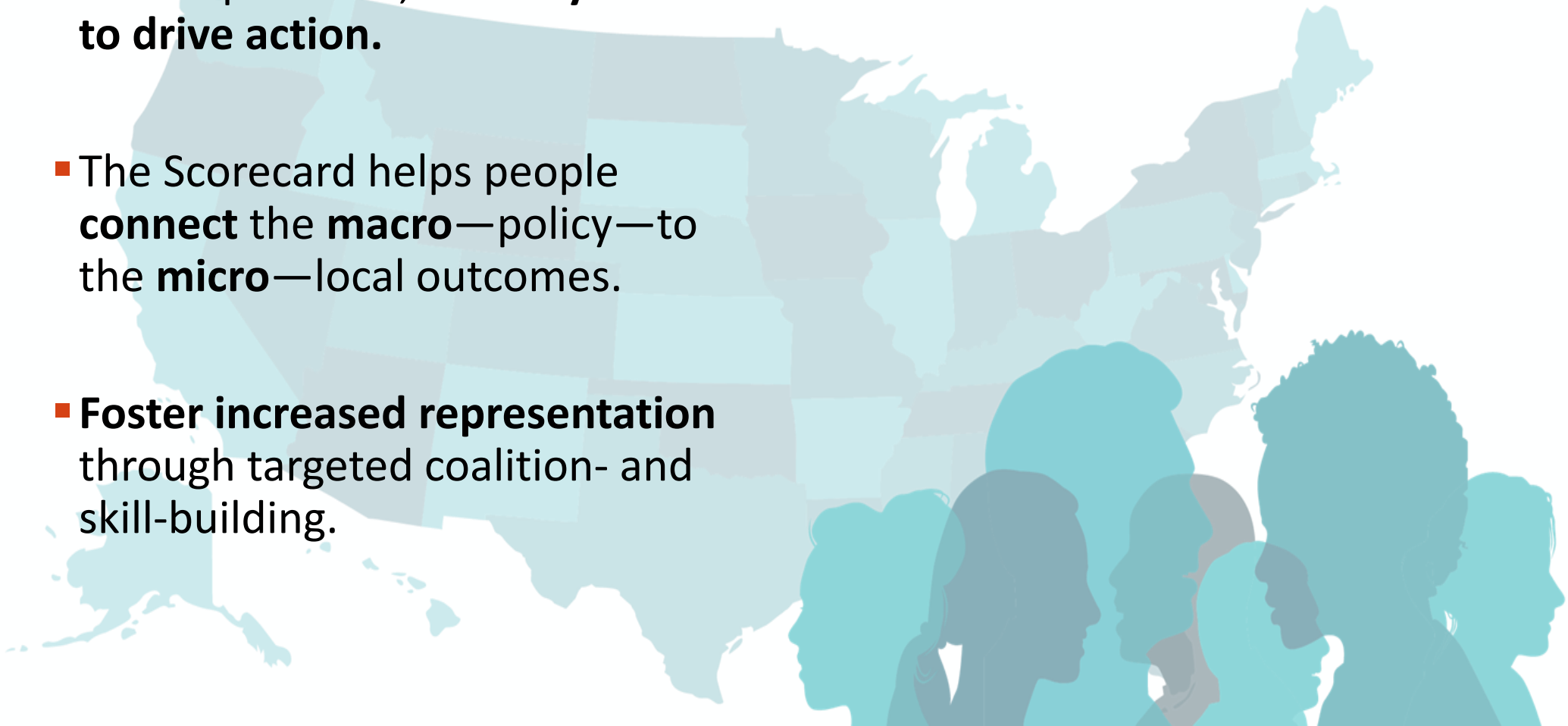
THE PURPOSE OF THE SCORECARD

- Data is powerful, but **only if used to drive action.**
- The Scorecard helps people **connect** the **macro**—policy—to the **micro**—local outcomes.
- **Foster increased representation** through targeted coalition- and skill-building.



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THE HEALTH-WEALTH NETWORK

- Purpose:
  - Build cross-sector understanding and collaboration around the intersections of health and wealth
  - Explore innovative practice and policies that enhance both health and wealth outcomes and address disparities in health and wealth.

- Activities
  - Webinars, blogs, videos, and other engagements
  - Medical Financial Partnership Network bringing together practitioners working at the nexus of health and wealth

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HEALTH AND FINANCIAL INSECURITY

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COVID-19 AND FINANCIAL INSECURITY

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COUNTY HEALTH RANKINGS DATA

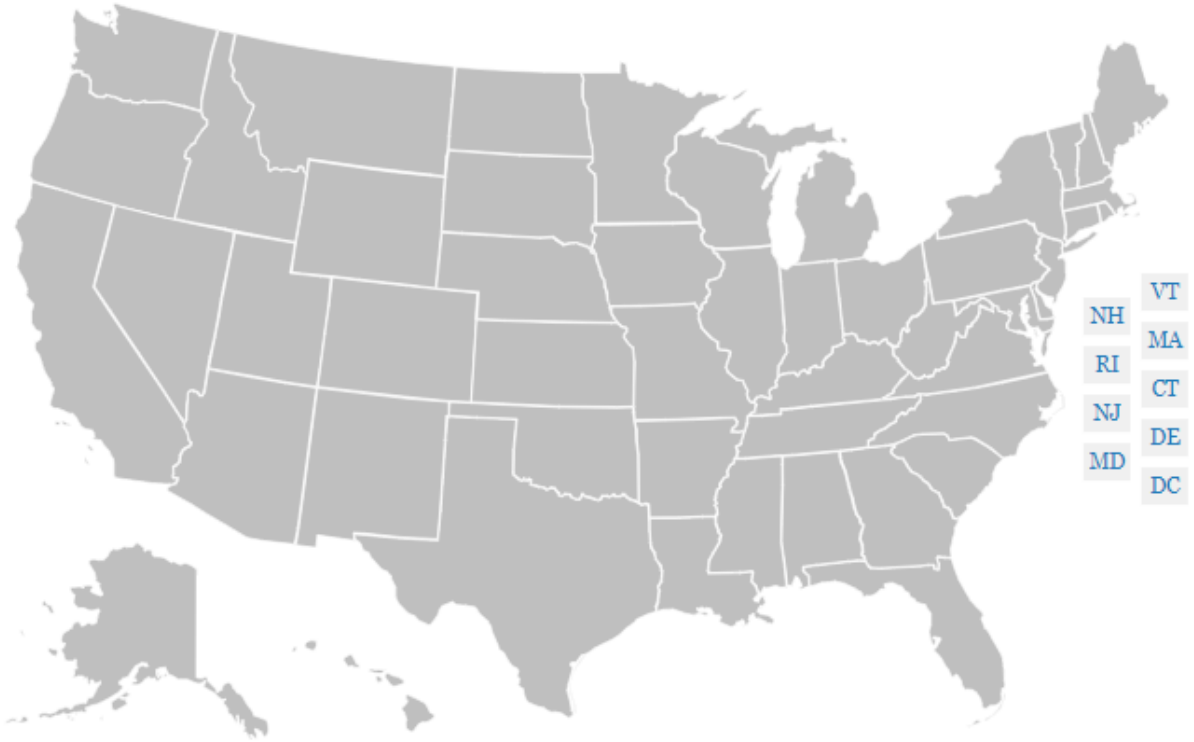
Explore Health Rankings | Take Action to Improve Health | Learn From Others | What Is Health? | Reports

How Healthy is Your Community?

The annual Rankings provide a revealing snapshot of how health is influenced by where we live, learn, work, and play. They provide a starting point for change in communities.

Enter your state, county, or ZIP Code

Search



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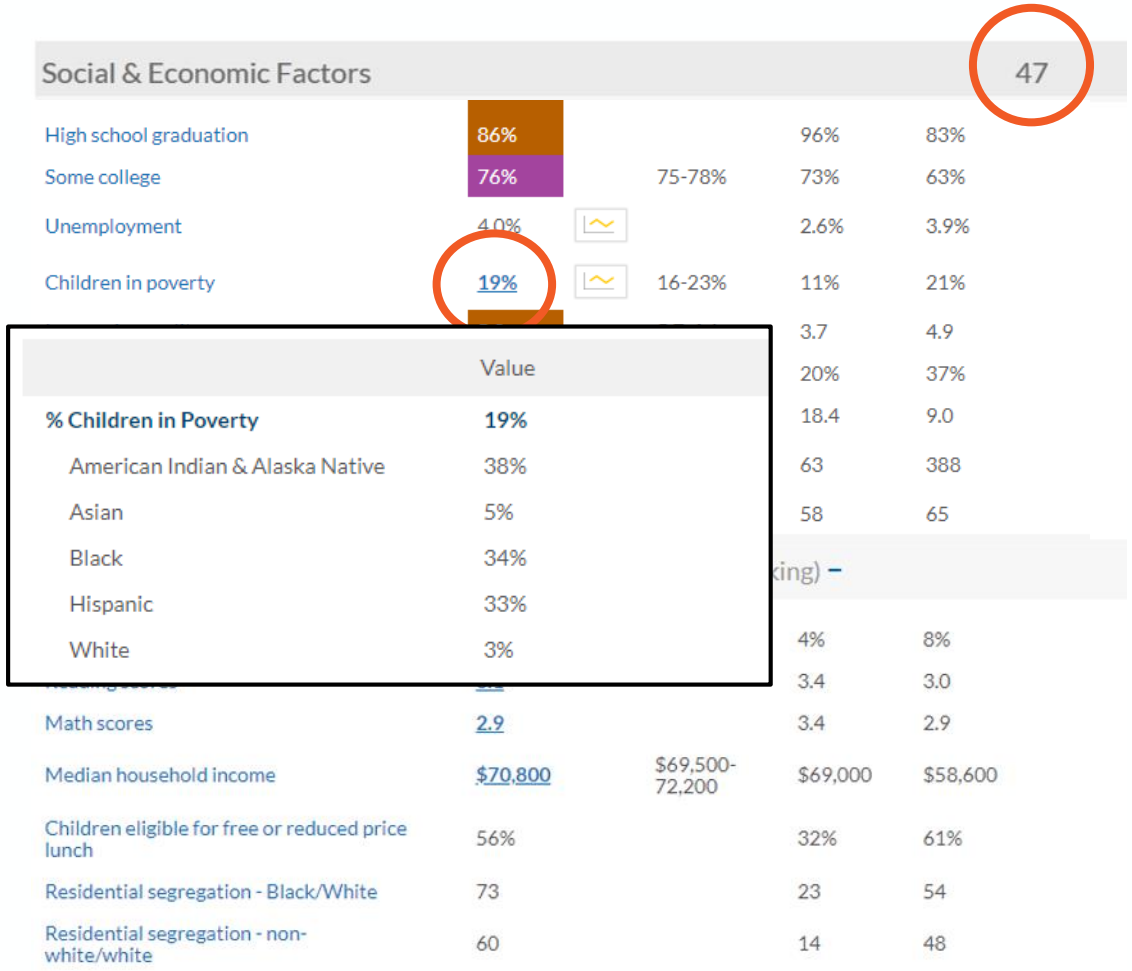
CHR&R SNAPSHOTS



Social & Economic Factors				47
High school graduation	86%		96%	83%
Some college	76%	75-78%	73%	63%
Unemployment	4.0%		2.6%	3.9%
Children in poverty	19%	16-23%	11%	21%
			3.7	4.9
			20%	37%
			18.4	9.0
			63	388
			58	65
			4%	8%
			3.4	3.0
Math scores	2.9		3.4	2.9
Median household income	$70,800	$69,500-72,200	$69,000	$58,600
Children eligible for free or reduced price lunch	56%		32%	61%
Residential segregation - Black/White	73		23	54
Residential segregation - non-white/white	60		14	48

	Value
% Children in Poverty	**19%**
American Indian & Alaska Native	38%
Asian	5%
Black	34%
Hispanic	33%
White	3%

1. Look at the big picture – health factor and health outcome ranks
2. Check your health factors – which are strongest? Which could use some work?
3. Begin to explore the measures using Areas to Explore and Areas of Strength

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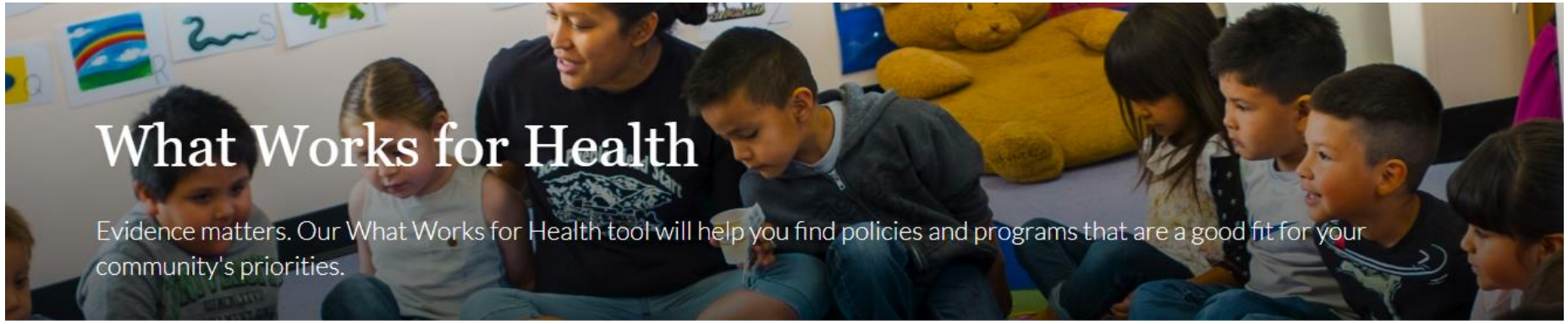
MOVING TO ACTION



Find Strategies by Topic

Health Behaviors

- Alcohol and Drug Use
- Diet and Exercise
- Other Health Behaviors
- Sexual Activity
- Tobacco Use

Clinical Care

- Access to Care
- Quality of Care

Social & Economic Factors

- Community Safety
- Education
- Employment
- Family and Social Support
- Income

Physical Environment

- Air and Water Quality
- Housing and Transit

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Evidence Rating

Scientifically Supported

Strategies with this rating are most like make a difference. These strategies ha been tested in many robust studies wit consistently positive results.

Health Factors

Employment

Decision Makers

Business

Government

Evidence Ratings

- **Scientifically Supported:** Strategies with this rating are most likely to make a difference. These strategies have been tested in many robust studies with consistently positive results.
- **Some Evidence:** Strategies with this rating are likely to work, but further research is needed to confirm effects. These strategies have been tested more than once and results trend positive overall.
- **Expert Opinion:** Strategies with this rating are recommended by credible, impartial experts but have limited research documenting effects; further research, often with stronger designs, is needed to confirm effects.
- **Insufficient Evidence:** Strategies with this rating have limited research documenting effects. These strategies need further research, often with stronger designs, to confirm effects.
- **Mixed Evidence:** Strategies with this rating have been tested more than once and results are inconsistent or trend negative; further research is needed to confirm effects.
- **Evidence of Ineffectiveness:** Strategies with this rating are not good investments. These strategies have been tested in many robust studies with consistently negative and sometimes harmful results. Learn more about our methods

Saved Strategies (1)

nt birth or adoption, a parent
her paid time off, such as sick
ernity and paternity leave.
ount of benefit and maximum
tinct from the federal Family
s of job-protected leave

likelihood that mothers
), particularly mothers
Rossin-Slater 2018*, Jou

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mortality (Heymann 2011*, Tanaka 2005*), with longer durations resulting in greater reductions in death among infants and young children (Ruhm 2000*).

Impact on Disparities

Likely to decrease disparities

Implementation Examples

Legislation guarantees paid leave for eligible employees in California, New Jersey, New York, and Rhode Island and several cities across the country, including New York City and San Francisco (NCSL-PFL resources, LAW-Resources). Washington state and Washington DC's programs will go into effect in 2020 (NCSL-PFL resources), and the program in Massachusetts will begin paying leave benefits in 2021 (MA-Leave). State legislation pre-empts local laws related to leave in 13 states (Grassroots Change).

Five states (California, New Jersey, New York, Rhode Island, and Hawaii) also provide paid maternity leave through state-level Temporary Disability Insurance programs (NPWF-TDI).

The US is the only OECD country that does not provide paid parental leave (Adema 2016*).

Implementation Resources

NCSL-PFL resources - National Conference of State Legislatures (NCSL). Paid family leave resources.

NCSL-State leave laws - National Conference of State Legislatures (NCSL). State family medical leave and parental leave laws.

CA EDD-Family leave - State of California Employment Development Department (EDD). Paid family leave.

NJ LWD-Family leave - State of New Jersey Department of Labor and Workforce Development (LWD). Family leave insurance.

RI TDI-Paid leave - Rhode Island (RI) Temporary Disability Program. RI paid leave.

LAW-Resources - Legal Aid at Work (LAW). Work & family.

Citations - Evidence +

Citations - Implementation Examples +

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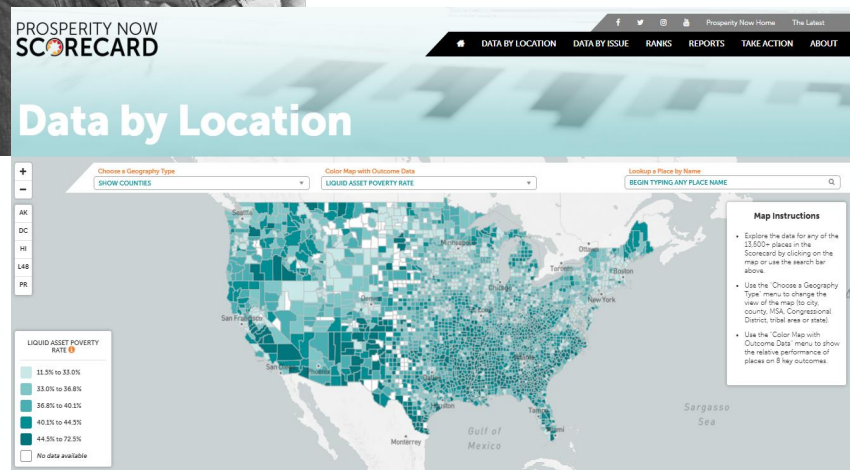
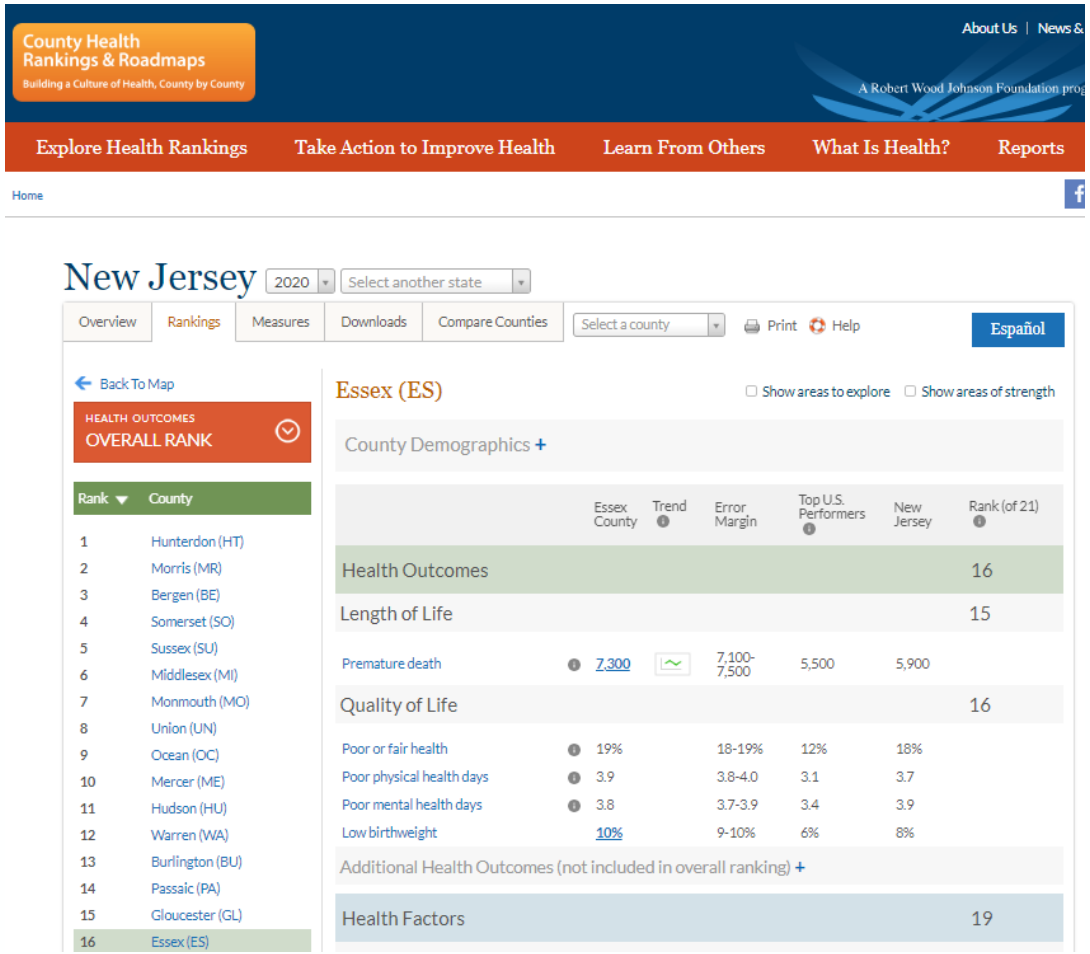
BRIDGING RESOURCES – DATA





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DIG INTO DATA

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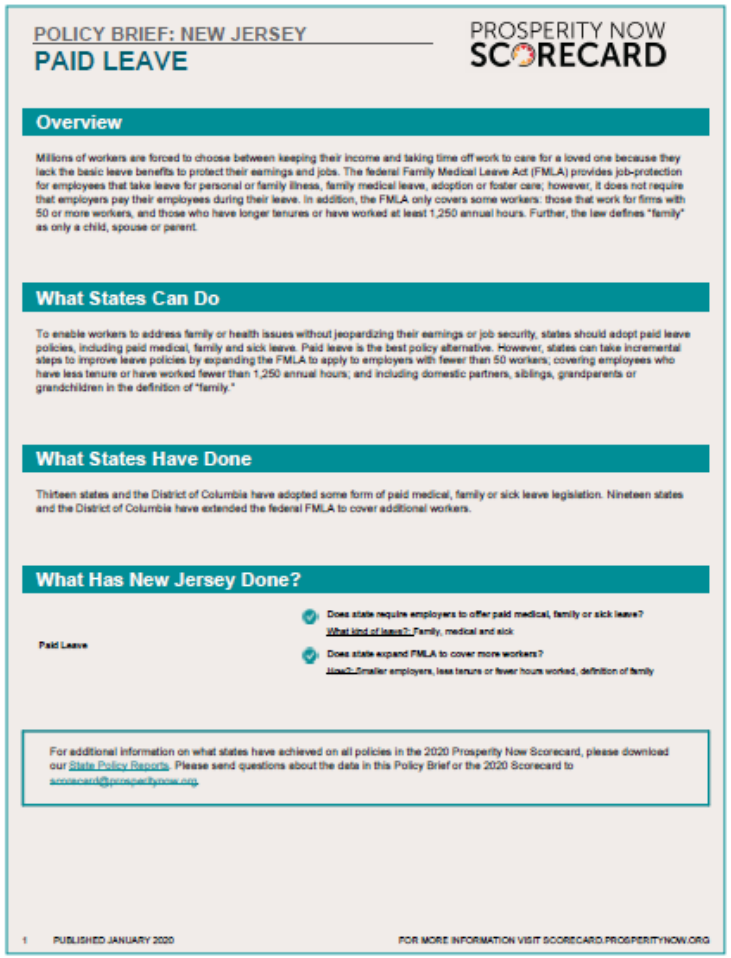
BRIDGING RESOURCES – POLICIES & PROGRAMS



POLICY BRIEF: NEW JERSEY
PAID LEAVE

PROSPERITY NOW SCORECARD

Overview

Millions of workers are forced to choose between keeping their income and taking time off work to care for a loved one because they lack the basic leave benefits to protect their earnings and jobs. The federal Family Medical Leave Act (FMLA) provides job-protection for employees that take leave for personal or family illness, family medical leave, adoption or foster care; however, it does not require that employers pay their employees during their leave. In addition, the FMLA only covers some workers: those that work for firms with 50 or more workers, and those who have longer tenures or have worked at least 1,250 annual hours. Further, the law defines "family" as only a child, spouse or parent.

What States Can Do

To enable workers to address family or health issues without jeopardizing their earnings or job security, states should adopt paid leave policies, including paid medical, family and sick leave. Paid leave is the best policy alternative. However, states can take incremental steps to improve leave policies by expanding the FMLA to apply to employers with fewer than 50 workers; covering employees who have less tenure or have worked fewer than 1,250 annual hours; and including domestic partners, siblings, grandparents or grandchildren in the definition of "family."

What States Have Done

Thirteen states and the District of Columbia have adopted some form of paid medical, family or sick leave legislation. Nineteen states and the District of Columbia have extended the federal FMLA to cover additional workers.

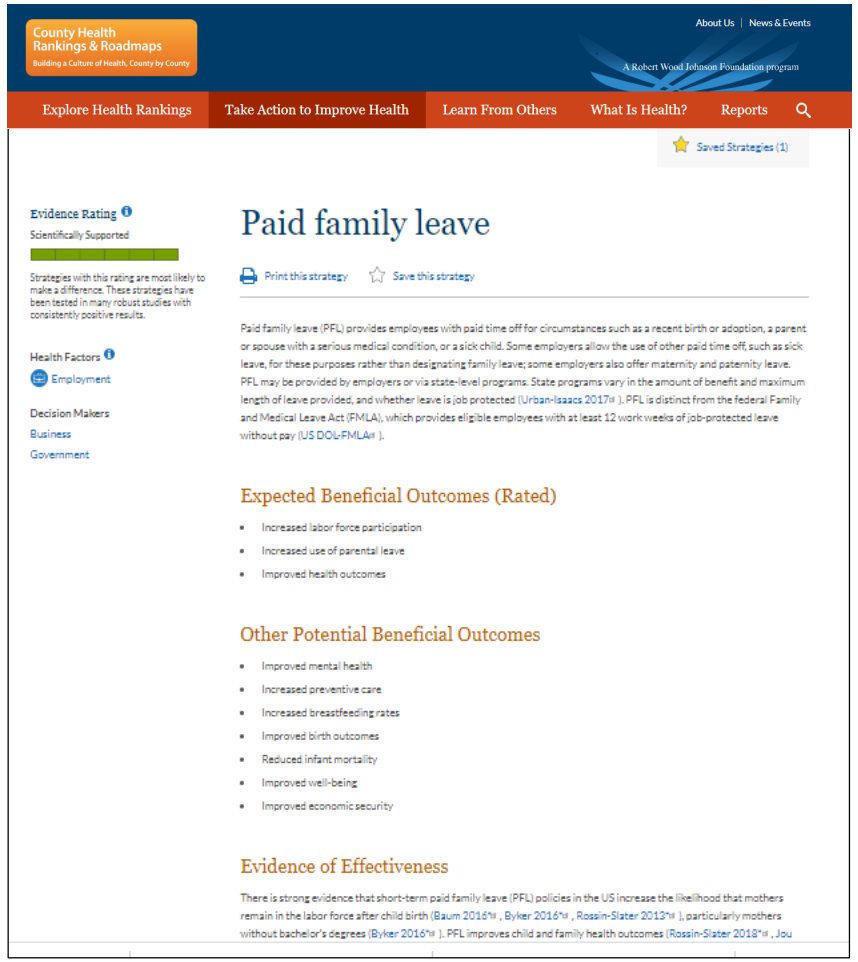
What Has New Jersey Done?

Paid Leave

- Does state require employers to offer paid medical, family or sick leave?
  What kind of leave? - Family, medical and sick
- Does state expand FMLA to cover more workers?
  How? - Smaller employers, less tenure or fewer hours worked, definition of family

For additional information on what states have achieved on all policies in the 2020 Prosperity Now Scorecard, please download our State Policy Reports. Please send questions about the data in this Policy Brief or the 2020 Scorecard to scorecard@prosperitynow.org.

1 PUBLISHED JANUARY 2020 FOR MORE INFORMATION VISIT SCORECARD.PROSPERITYNOW.ORG



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Saved Strategies (1)

Evidence Rating
Scientifically Supported
Strategies with this rating are most likely to make a difference. These strategies have been tested in many robust studies with consistently positive results.

Health Factors
Employment

Decision Makers
Business
Government

Paid family leave

Print this strategy Save this strategy

Paid family leave (PFL) provides employees with paid time off for circumstances such as a recent birth or adoption, a parent or spouse with a serious medical condition, or a sick child. Some employers allow the use of other paid time off, such as sick leave, for these purposes rather than designating family leave; some employers also offer maternity and paternity leave. PFL may be provided by employers or via state-level programs. State programs vary in the amount of benefit and maximum length of leave provided, and whether leave is job protected (Urban-Isaacs 2017[#]). PFL is distinct from the federal Family and Medical Leave Act (FMLA), which provides eligible employees with at least 12 work weeks of job-protected leave without pay (US DOL-FMLA[#]).

Expected Beneficial Outcomes (Rated)

- Increased labor force participation
- Increased use of parental leave
- Improved health outcomes

Other Potential Beneficial Outcomes

- Improved mental health
- Increased preventive care
- Increased breastfeeding rates
- Improved birth outcomes
- Reduced infant mortality
- Improved well-being
- Improved economic security

Evidence of Effectiveness

There is strong evidence that short-term paid family leave (PFL) policies in the US increase the likelihood that mothers remain in the labor force after child birth (Baum 2016[#] , Byker 2016[#] , Rossin-Slater 2013[#]), particularly mothers without bachelor's degrees (Byker 2016[#]). PFL improves child and family health outcomes (Rossin-Slater 2018[#] , Jou

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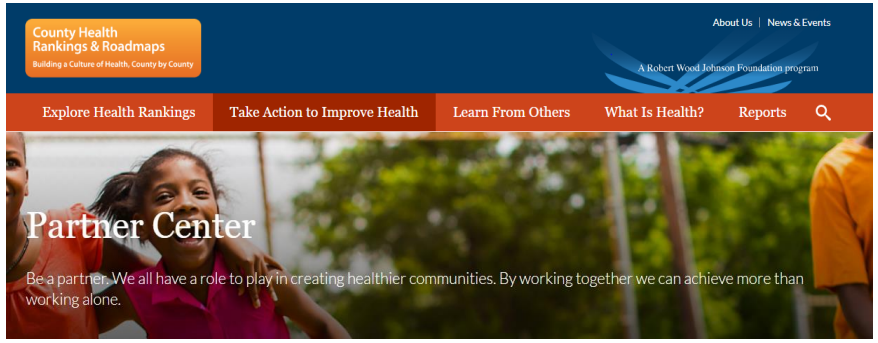
BRIDGING RESOURCES – FIND PARTNERS

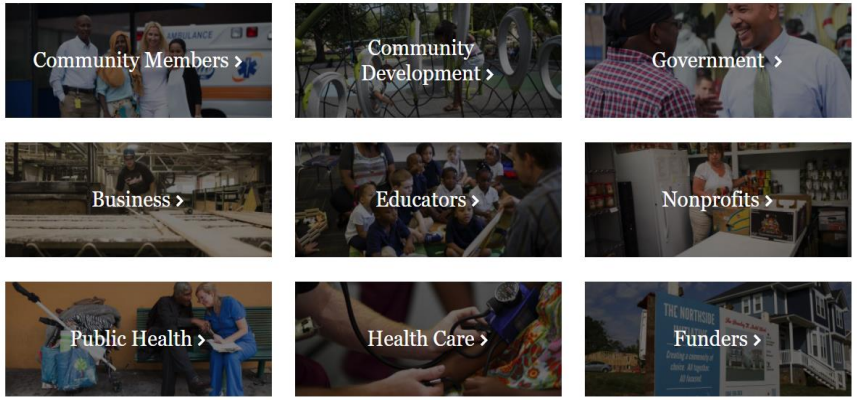
Find Your Community Champion

Explore the map below to find contact information for the Community Champion in your state or community.



What roles do you play in your community? Who do you want to partner with?

Think about the people in your community who make positive changes happen. Call them leaders, changemakers, or stakeholders - these are the people with whom you want to partner. This section is all about joining with others to make lasting change in your community.



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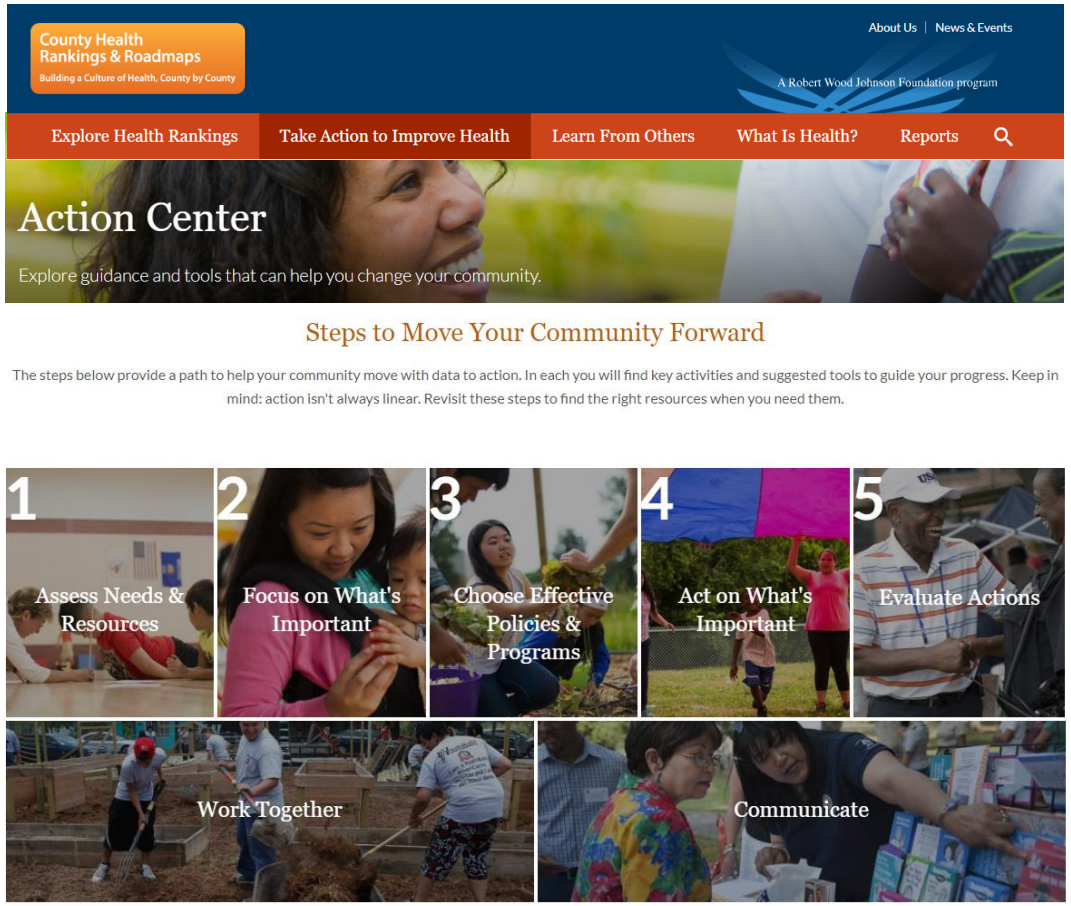
BRIDGING RESOURCES – TAKE ACTION



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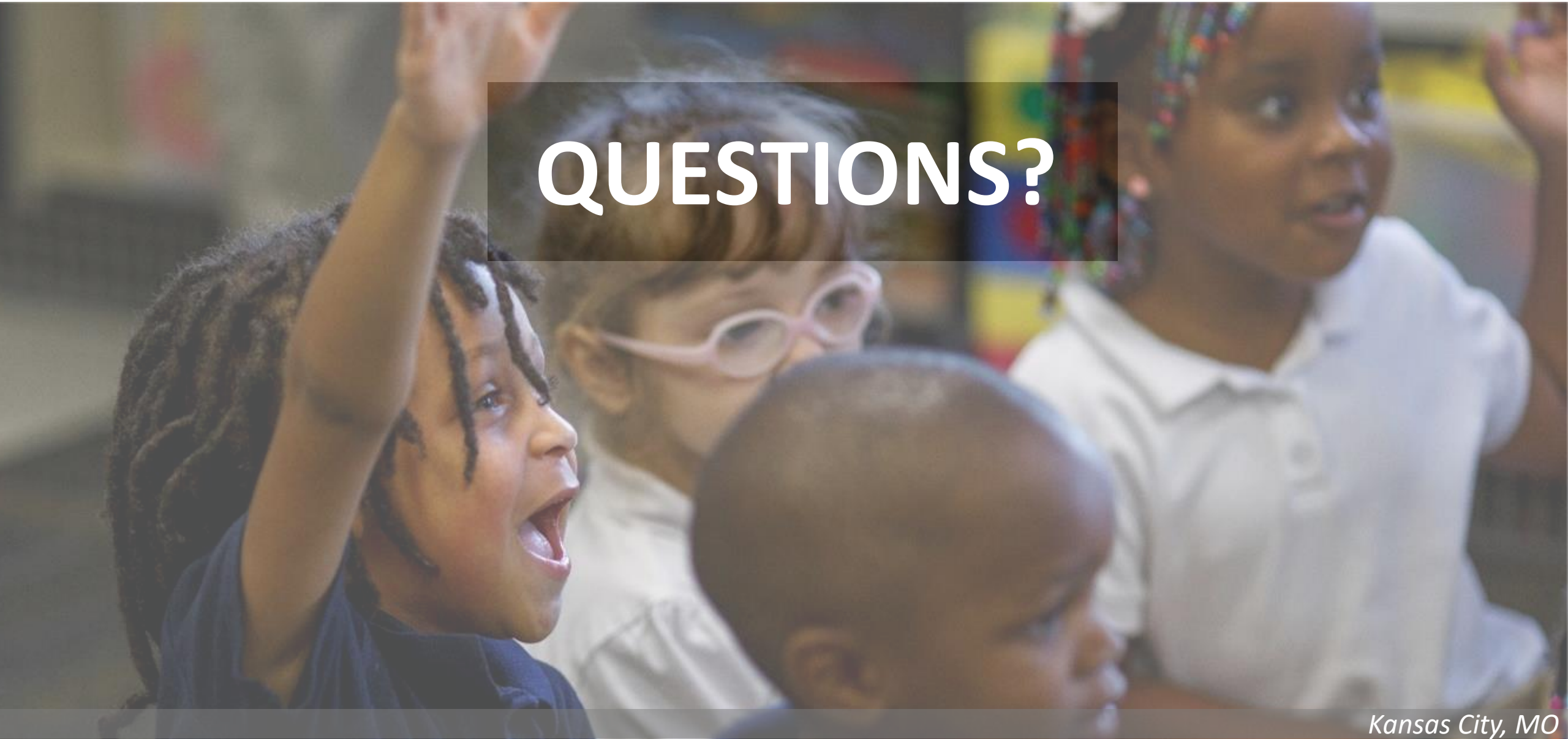
QUESTIONS?



Kansas City, MO

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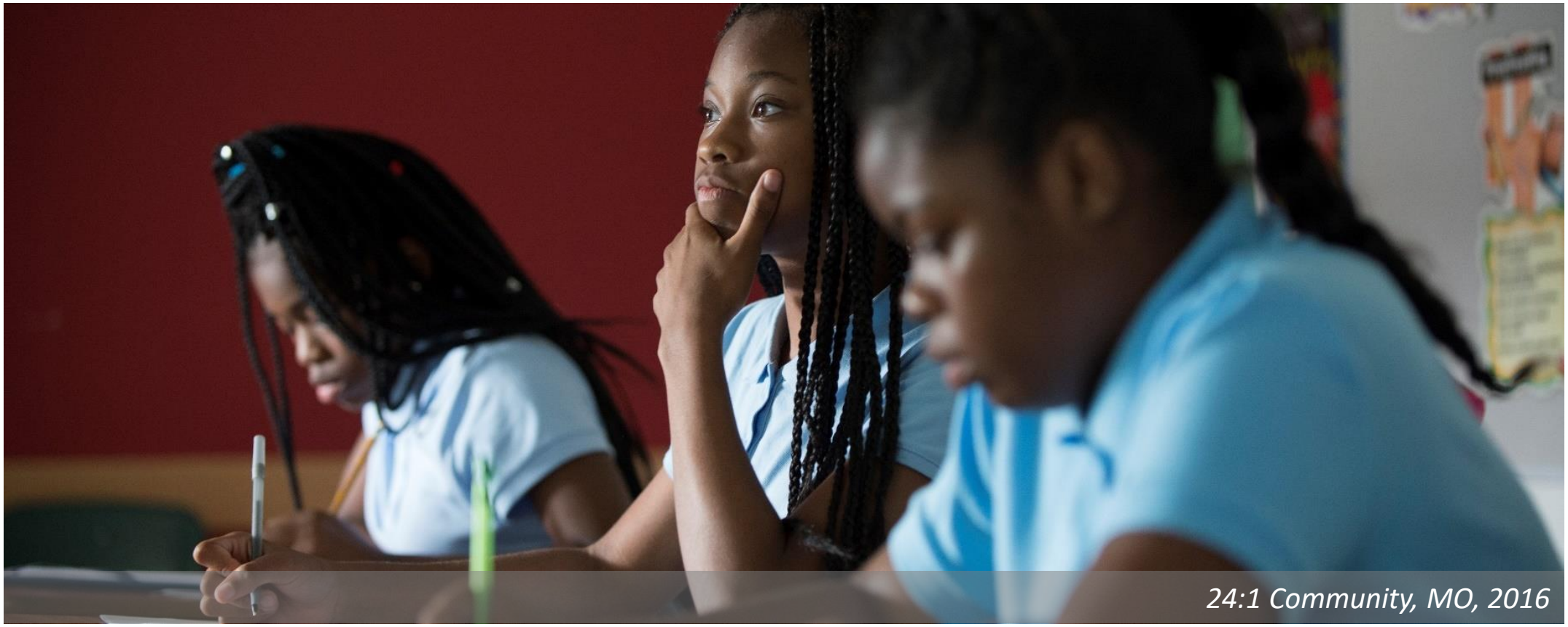

WE WANT TO HEAR FROM YOU!

Click the link to answer a few questions about today's webinar

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COVID-19: NEW CRISIS, SAME STORY


EBONY WHITE


LILLIAN SINGH


CAT GOUGHNOUR


MADELAINE SANTANA


SHARICE DAVIS


MYRTO KARAFLOS

THE LEADERS BEHIND THE SCENES OF PROSPERITY NOW'S RACIAL WEALTH DIVIDE INITIATIVE BRING YOU A SIX-EPISODE SERIES

HIGHLIGHTING GRASSROOTS AND COMMUNITY INNOVATORS ADDRESSING THE CHALLENGES OF RACIAL ECONOMIC INEQUALITY IN LIGHT OF COVID-19

ALL EPISODES WILL BE RELEASED ON THE FOLLOWING WEDNESDAYS AT 3PM EDT:

- SERIES OVERVIEW: JUNE 3, 2020
- HEALTH EPISODE: JUNE 17, 2020
- EMPLOYMENT EPISODE: JULY 1, 2020
- INCOME EPISODE: JULY 15, 2020
- HOUSING EPISODE: JULY 29, 2020
- EDUCATION EPISODE: AUGUST 12, 2020

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Webinars will highlight challenges communities are facing as they respond to COVID-19 and offer insights from local and national leaders as we work toward a more inclusive and equitable recovery for all.

COVID-19: Disproportionate Impact on Black Communities
Thursday, June 25 | 3:00 – 3:45pm ET

COVID-19: Disproportionate Impact on Tribal Nations
Thursday, July 9 | 3:00 – 4:00pm ET

US COVID-19 Atlas: Exploring Data to Move to Action
Tuesday, July 21 | 3:00 – 4:00pm ET

Responding to Crisis in the LatinX Population with an Equity Lens
Tuesday, August 13 | 3:00 – 4:00pm ET

Learn more: www.countyhealthrankings.org/webinars

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THANK YOU!

Contact us

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