HCLHIC Priorities: Healthy Beginnings, Healthy Living, Healthy Minds

HCLHIC Workgroup: Health Literacy Advisory Committee (HLAC)

Goal 1: Engage community members in healthy lifestyle activities by increasing awareness; culturally appropriate opportunities; accessible and inclusive communications and initiatives related to promoting movement; healthier food choices; and social engagement to promote improved physical and mental health.

Goal 2 (*DFS*): Improve the health and independence of people with disabilities by promoting inclusive communications and initiatives related to accessibility; increasing awareness and utilization of accessibility procedures and policies in Howard County; actively involving community members living with disabilities in the activities of the Health Literacy Advisory Committee (HLAC) with guidance for implementation and evaluation efforts.

Key Measure(s): 2021 HCHAS:

- Percentage of children who were advised by a medical professional to lose weight increased from 7% in 2018 to 18% in 2021
- 29% of adults were overweight and 25% of adults were obese; 1 in 2 adults in Howard County is either overweight or obese
 - Of those identified as obese: 37% were Black, 27% were White and 7% Asian
- 11% of individuals drink regular soda daily; 18% of individuals eat fruits three times or more per day; and 16% of individuals eat vegetables three or more times per day while 32% of residents ate vegetables less than once per day over the past week
 - Of those reporting having eaten vegetables less than once per day over the past week 47% earn less than \$50K annually

Key Measure(s) (DFS): 2021 ACS & BRFSS/ Howard County Community Roundtables and Accessible Resources for Independence (ARI) Focus Groups:

- 9% of non-institutionalized adults in Howard County report having a disability
 - Columbia, Ellicott City, Savage were some of the areas identified with the highest prevalence of working age adults with any disability (above 7% of population)
- Adults with disabilities in Howard County were more likely to report poor physical and mental health, chronic conditions like cancer (16.1%), hypertension (36.4%), doctor diagnosed asthma (32.2%), doctor-diagnosed depressive disorder (52.1%) or being current or lifetime smokers.

- People with disabilities from Howard County were less likely than people without disabilities to engage in certain preventative health behaviors such as eating vegetables once per day (79.6% compared to 87.0%), getting some leisure-time physical activity (72.0% compared to 89.8%) or getting a routine health checkup in the last year (69.4% compared to 74.0%).
- Barriers to attaining good health for people with disabilities include stigma, communication challenges, physical obstacles, social determinants, and policy gaps

Alignment with Johns Hopkins Howard County Medical Center Priorities (if applicable): N/A

Alignment with Howard County Health Department Priorities (if applicable): Healthy Lifestyle - Goal 3

HCLHIC Staff: Ashton Jordan

Co-Chairs: Erin Ashinghurst – Accessible Resources for Independence & Chynáe Vicks - HCHD

Objectives	Measure	Action Steps	Timeframe	Status Update
Objective 1 (SP): By May 2023, collaborate with Coalition members to develop and pre-test key messages to promote improved physical and mental health based on identified facilitators, barriers, and engagement strategies related to movement, healthier food choices, and social engagement among priority	Baseline: 0 messages Target: 36 Messages total (6 for each community of focus)	 Year 1: Conduct Focus Groups with diverse community members to assess facilitators and barriers to healthy lifestyle Analyze data to ascertain key themes of Healthy Lifestyle Focus Group sessions Draft and revise healthy lifestyle key messages based on feedback Year 2: Review key messages and make updates as needed 	Start: October 2021 End: October 2022	11 Focus Groups conducted in October and November 2021 Focus Group findings presented at the January 2022 Full LHIC Meeting Messages drafted and initial feedback gathered in August 2022 Messages updated in October 2022 Focus group held with Community Health

populations in Howard County.				Workers (CHWs) in February 2023
				Messages updated in February 2023 Messages finalized in March 2023 72 messages developed (12 for each community of focus) Messages stocked for future use April – June 2023
Objective 2 (SP): By June 2025, collaborate with Coalition members to plan, implement, and evaluate a marketing campaign to promote improved physical and mental health across the lifespan in Howard County.	Baseline: 0 Campaign Target: 1 Campaign piloted	 Year 1: Convene regular HLAC meetings with partners and community members Plan pilot launch of healthy lifestyle campaign Year 2: Summer 2023: Launch pilot healthy lifestyle campaign Monitor campaign Fall 2023: Evaluate pilot of healthy lifestyle campaign 	Start: June 2022 End: June 2025	Initiated discussion of campaign promotion and launch strategies in March 2023 May – August 2023 Campaign materials made available in several language translations September – December 2023 Healthy Howard Campaign translations expanded to: English,

		 Winter 2023: Review and present findings from pilot healthy lifestyle campaign at Full LHIC Meeting Year 3: Make plans for full campaign launch and continuity of efforts 	Chinese, French, Korean, Spanish and Russian
Objective 3: By June 2025, periodically review Howard County Local Health Improvement Coalition (HCLHIC) website content and other digital and print materials to ensure that the American with Disabilities Act (ADA) guidelines are followed, and content materials are up-to-date, culturally appropriate, accessible, and inclusive.	Baseline: Annual update Target: Quarterly update	 Review HCLHIC website Disability Resources page and make updates as needed quarterly. Review HCLHIC messaging and make updates to meet ADA guidelines as needed. Promote HCLHIC website, disability resources, and other local and national accessibility resources widely. 	December 2022: Disability Resources webpage updated June 2023: Continued monitoring and review of LHIC website content September 2023: Reviewed and updated Accessibility Resources on LHIC website September – October 2023: Added new disability services resources to CAREAPP October 2023: 6 Health and Human Services Questions added to CAREAPP for data purposes

Objective 4 (DFS):	Baseline:	Year 1:	Start: October	Began Disability Inclusion
By October 2024, collaborate with coalition members to strengthen availability of disability and health resources and data by incorporating the Six (6) Human and Health Services questions into four (4) partner intake assessment tools/data collection system (i.e., CAREAPP).	O presentations on Human and Health Services (HHS) questions O health and independent living needs survey O partner intake assessment tool(s)/ data collection system(s) utilizing 6 HHS questions Target: 1 presentation on Human and Health Services (HHS) questions 1 health and independent living needs survey 4 partner intake assessment tool(s)/ data	 Build awareness of the Six (6) Human and Health Services (HHS) questions within LHIC Collaborate with HLAC members to construct a health and independent living needs survey that will be distributed among people with disabilities in Maryland Link adults with disabilities to preventative healthcare resources and programs Gather disability and health data Year 2: Build awareness of health department resources and action plans. Recommend information, training, and resources to increase the number of healthcare professionals that can effectively offer accessible preventative healthcare to adults with disabilities Implement utilization of Six HHS questions into partner intake assessment tool(s)/data collection system(s) Continue gathering of disability and health data 	End: October 2024	Grant (DIG) Project July 2023 DIG Scope of Works (SOWs) drafted and finalized August 2023 6 Health and Human Services Questions added to CAREAPP for data purposes October 2023 December 2023 Updated Disability Resources on LHIC webpage

	collection system(s) utilizing 6 HHS questions			
Objective 5 (DFS): By June 2025, develop a policy statement for public accommodations of people with disabilities to be used across health department programs.	Baseline: 0 focus groups for policy statement development 0 training or toolkit on disability and health inclusion, accessibility, or disability cultural competency 0 policy statement Target: 1 focus group for policy statement development 1 training or toolkit on disability and health inclusion, accessibility, or	 Conduct focus group(s) with inclusion from community members living with disabilities to develop language for policy statement Year 2: Identify and promote at least one training or toolkit on the topic of disability and health inclusion, accessibility, and awareness of disability cultural competency to public health professionals Year 3: Implement utilization of policy statement across HLAC programs/health department programs 	End: June 2025	Began Disability Inclusion Grant (DIG) Project July 2023 DIG Scope of Works (SOWs) drafted and finalized August 2023 Disability & Health Subcommittee (DHS) formed September 2023 Disability Focused Mission Statement, objectives, goals, measures and actions steps constructed by Disability & Health Subcommittee (DHS) September 2023 Disability Focused Mission Statement, objectives, goals, measures and actions steps incorporated into HLAC workplan October 2023

	disability cultural			Policy Statement created
	competency			March 2024
Objective 6 (DFS):	1 policy statement Baseline:	Year 1:	Start: October	Began Disability Inclusion
			2023	Grant (DIG) Project July
By June 2025, utilize	0 health and	 Partner with Howard County agencies to implement a health and 	5 . d . l 2025	2023
committee resources to implement at least one	independent living needs survey	independent living needs survey	End: June 2025	DIG Scope of Works
inclusion solution within	implemented	among people with disabilities in		(SOWs) drafted and
Howard County to	O published results	Maryland		finalized August 2023
improve the health and independence of the disability community. (Living Well in the Community)	O published results of health and independent living needs survey O Living Well in the Community program/Another evidence-based health program designed for individuals with disabilities implemented O evaluations of implementation of Living Well in the	 Year 2: Partner with Howard County agencies to publish the results of the survey as a Howard County Health and Disability Assessment, incorporating quantitative and qualitative data analysis and recommending disability and health inclusion solutions Year 3: Implement medium-large scale Living Well in the Community program Year 3: Evaluate implementation of Living Well in the Community program/another evidence-based 		1 Living Well in the Community Workshop (2 classes) held in September for Individuals living with disabilities January 2024 Awarded supplemental funding for DIG project Living Well in the Community Workshop scheduled for April/May 2024
	Community program/Another	health program designed for individuals with disabilities		

evidence-based	• Evaluate changes to policy, systems,	
health program	and environment	
designed for		
individuals with		
disabilities		
Target:		
1 health and		
independent living		
needs survey		
implemented		
1 published result		
of health and		
independent living		
needs survey		
1 Living Well in the		
Community		
program/another		
evidence-based		
health program		
designed for		
individuals with		
disabilities		
implemented		
4 ambatta a f		
1 evaluation of		
implementation of		
Living Well in the		
Community		

program/another		
evidence-based		
health program		
designed for		
individuals with		
disabilities		

HCLHIC Priorities: Healthy Beginnings, Healthy Livings, Healthy Minds

HCLHIC Workgroup: Movement Group

Goal 1: Engage community members in healthy lifestyle activities by increasing awareness; culturally appropriate opportunities; accessible and inclusive communications and initiatives related to promoting movement; healthier food choices; and social engagement to promote improved physical and mental health.

Key Measure(s): 2021 HCHAS:

- 73% of those aged 18-34 exercised in the past week (lower than any other age group).
- 69% of those making under \$50,000 exercised in the past week compared to 77% or higher in other income groups.

Alignment with Howard County General Hospital Priorities (if applicable): Healthy Living

Alignment with Howard County Health Department Priorities (if applicable): Healthy Lifestyle – Goal 2

HCLHIC Staff: TBD

Co-Chairs: Michelle Rosenfeld, Howard County Office on Aging and Independence & Natalie Hall - HCHD

Objectives	Measures	Action Steps	Timeframe	Status Update:
Objective 3 (SP): By May 2023, collaborate with Coalition members to develop and pilot a movement initiative including a community	Baseline: 0 events (2020) Target: 20 events	 Walktober - Annually: Convene Movement Group partner meetings to plan, implement and evaluate annual Walktober and WalkMDDay collaborative movement events and activities in October Engage diverse community partners Create Walktober calendar of events in Howard County 	Start: May 2021 End: November 2024	Walktober 2021: 27 events Walktober 2022: 22 events (plus 2 events post-ponded) with 597 participants and 823 miles walked/ran.

calendar and programming to encourage Howard County community	 Widely promote Walktober cale events and other State-led Wall and Walktober events Evaluate Walktober and WalkM 	Calendar of events created and promoted DDay widely
County community members of all ages and abilities to engage in movement for improved physical and mental health.	efforts to improve in subsequer Present results to partners in No Move All Year Quarterly Events/Pro Promote activities in collaborate diverse partners to encourage movement throughout the year Fall – Walktober Winter- Heart Health month Spring – Earth Day Summer - Parks and Trails Falls Prevention Week (September 2024): Collaborate to co-host and recons Falls Prevention webinar during Prevention Week. Evaluate efforts	widely Walktober 2023: 47 events (plus 2 cancelled) with 787 participants and 2,408 miles walked/ran. March 2023 – Ongoing promotion of Movement activities and events via social media, calendar, and website. September 2023 – Ongoing promotion of Movement activities and events via social media, partner meetings, calendar, and website. November 2023 – Ongoing promotion of Movement activities and events via social media, partner meetings, calendar, and website.
		Movement activities and events via social media, partner

					meetings, calendar, and website.
Objective 4 (SP): By June 2025, based on results of the pilot program plan, implement and evaluate a Movement Initiative that promotes physical activity and encourages Howard County community members of all ages and abilities to engage in movement for improved physical and mental health yearround.	Baseline: 0 flyer Target: 2 flyers Baseline: 0 Reduced Cost and Free Movement Exercise Programs Favorites Folder in CAREAPP Target: 1 Reduced Cost and Free Movement Exercise Programs Favorites Folder in CAREAPP Baseline: 0 Movement logo Target: 1 Movement logo	•	Update Howard County Department of Recreation and Parks 1-Mile Moving Map Create free and low-cost Movement flyers that utilize CAREAPP and promotes physical activity all year round in Howard County. Spring and Summer activities flyers Fall and Winter activities flyers Create a favorite's folder in CAREAPP that lists all the reduced cost and free exercise programs in Howard County. Create a Movement logo to be used on all LHIC physical activity flyers, social media pages and partners flyers to promote physical activity all year round.	Start: May 2021 End: May 2025	Fall 2021: 1-Mile Howard County Recreation and Parks maps updated March 2023: Low- cost/free Movement flyer for Spring and Summer created, placed on Physical Activity page, promoted on social media and by partners. March 2023: Reduced Cost and Free Movement Exercise Programs favorites folder created in CAREAPP. August 2023: Low- cost/free Movement flyer created for Fall and Winter and placed on Physical Activity page; promoted on

social media and by
partners.
September 2023:
Reduced Cost and Free
Movement Exercise
Programs favorites
folder in CAREAPP
updated to 29
programs.
November 2023:
Reduced Cost and Free
Movement Exercise
Programs favorites
folder in CAREAPP
updated to 33
programs.
December 2023:
Update of the low-
cost/free Movement
flyer for Fall and Winter
2023/2024 and placed
on LHIC's Physical
Activity webpage,
promoted on social
media.
December 2023:
Creation of 1

Objective 5: By June 2025, conduct quarterly review and update of the HCLHIC website and collaborate on a walk to school's social media campaign with HCHD Comms Dept. Gather resources on walk and bike to school and promote content widely among partners and community members and share on LHIC's website and social media pages. Objective 6:	Baseline: Annual update Target: Quarterly update Baseline: 0 Social Media Campaign Target: 1 Social Media Campaign	Review HCLHIC website's Physical Activity page and make updates as needed quarterly. Promote HCLHIC website, activity guides and other local and national physical activity resources widely. Review HCLHIC website's Older Adult	Start: May 2021 End: May 2025	Movement Logo to be used year-round in promotion of physical activity in Howard County. November 2022: Walk Maryland Registration Tool added to Physical Activity page March 2023: Physical activity website updated June 2023: Physical Activity website updated. August 2023: Walk to School Staples Social Media Campaign created. December 2023: Physical Activity website updated.
By June 2025, conduct review and update the	update	and Injury Prevention pages and make updates as needed quarterly.	End: May 2025	

Falls Prevention resources on the HCLHIC website and share via partners, community members and social media.	Target: Quarterly update Baseline: 1 Falls Prevention Resource Target: 5 Falls Prevention Resources	 Review and update the HCLHIC Fall Prevention Resource Guide. Update Falls Prevention Resources to ensure culturally appropriate and accessible. Promote HCLHIC website and other Falls Prevention resources during Falls Prevention Week in September and year- round.
	Resources	

HCLHIC Priorities: Healthy Beginnings, Healthy Livings, Healthy Minds

HCLHIC Workgroup: Chronic Disease Prevention and Management Group

Goal 2: Increase culturally appropriate, accessible and inclusive education on chronic disease prevention and support for management of chronic diseases and related health conditions in Howard County.

Key Measure(s): 2021 HCHAS & BRFSS:

Diabetes:

- Increase in the percentage of residents with both pre-diabetes (11%) and diabetes (13%) compared with 2018 (8% respectively for both).
 - o Diabetes rates among Non-Hispanic Blacks in 2019 was 12.3% compared with 6.1% for Non-Hispanic Whites (BRFSS, age-adjusted rate).
- Prediabetes among residents <30 years old increased from 9% in 2018 to 28% in 2021.

Tobacco:

- Data from the Youth Risk Behavior/Youth Tobacco Survey (YRBS/YTS) indicates that from 2016 2018, the prevalence of any tobacco/electronic smoking devices (ESDs), cigarettes, cigars, smokeless tobacco use among middle school (MS) students has increased 100% and 47% for high school (HS) students.
 - o In 2018, tobacco use was highest for Black (6.7%) and Hispanics (6.1%) MS students.
- Among adults, data from the 2016 Behavioral Risk Factor Surveillance System (BRFSS) showed a higher proportion of tobacco use among adults with incomes lower than \$50K (13.2%) compared to those with incomes greater than \$50K (8.0%).

Alignment with Johns Hopkins Howard County Medical Center Priorities (if applicable): Healthy Living

Alignment with Howard County Health Department Priorities (if applicable): Healthy Lifestyle – Goal 1

HCLHIC Staff: Ashton Jordan

Co-Chairs: Jennifer Lee – Howard County Office on Aging and Independence & Crystal Pope - JHHCMC

Objectives	Measure	Action Steps	Timeframe	Status Update:

Objective 1 (SP):	Baseline:	Year 1:	Start: June 2022	July – November
Through June 2025, convene quarterly Chronic Disease Community (public) forums to increase awareness of and access to resources to increase culturally appropriate, accessible, and inclusive disease prevention activities across the lifespan for Howard County residents.	Baseline: O Chronic disease related outreach activities O people reached by chronic disease related outreach activities O Chronic disease related outreach evidence-based programs O completers of chronic disease related evidence-based programs (adults) O CAREAPP searches/connections related to chronic disease prevention and/or management Target(s): 20 Chronic disease related events	 Year 1: Conduct outreach and educational activities in high-need areas including evidence-based programs Assist with screenings & referrals Plan and promote activities that align with key health observances Expand CAREAPP directory of relevant chronic disease prevention and management resources Year 3: Evaluate impact of outreach events and evidence-based programs Expand utilization of CAREAPP 	Start: June 2022 End: June 2025	July – November 2022: Nutrition, Fitness, free fitness memberships to residents, Health Fairs held – Screenings, mini—Farmers' Market, and other partners/programs July – December 2022: 22 Evidence-based programs held, 90 completers of evidence-based programs July – December 2022: 41 Chronic disease related outreach events held, 882 enrolled individuals for chronic disease related events January – June 2023: 23 Evidence-based programs held, 153 completers of evidence-based programs

250 enrolled individuals	26 Chronic disease
	related outreach
on disease prevention	
(adults)	activities held,
	>2000 individuals
25 Chronic disease	reached through
related evidence-based	chronic disease
programs	related activities
100 Completers of	July – September: 5
chronic disease related	Evidence-based
evidence-based	programs held, 32
	completers of
programs	evidence-based
OF CAREARA	programs
25 CAREAPP	13 Chronic disease
searches/connections	related outreach
related to chronic	activities held; 275
disease prevention	individuals reached
and/or management	through chronic
and, or management	disease related
	activities
	September-
	December 2023: 7
	Evidence-based
	programs held, 79
	completers of
	evidence-based
	programs,
	18 Chronic disease
	related outreach
	activities held; 203
	individuals reached
	through chronic
<u>I</u>	0

				disease related activities January – March 2024: 12 Evidence-based programs held, 130 completers of evidence-based programs, 6 Chronic disease related outreach activities held; 200 individuals reached through chronic disease related activities
Objective 2 (SP): Through June 2025, convene quarterly Chronic Disease Community (provider) forums to increase awareness of and access to resources across the lifespan and coordinated community planning to increase culturally appropriate, accessible and inclusive	Baseline: O new providers utilizing/promoting CAREAPP O CAREAPP searches/connections related to chronic disease prevention and/or management Target(s):	 Year 1: Convene regular CDPMG meetings with Coalition partners and community members Support and promote accessible and culturally appropriate evidence-based programs Year 2: Expand utilization of CAREAPP by providers as a tool for resource sharing and connections. Year 3: Monitor provider CAREAPP usage 	Start: June 2022 End: June 2025	February 2022: Meetings initiated to start place-based outreach efforts with 8 residential communities June 2022: Began partnerships with Columbia Association, HC Recreation & Parks, Roving Radish and,

support for	8 new providers	•	Review outreach event and evidence-	The Y in Ellicott City
management of chronic	utilizing/promoting		based program data	(Dancel)
diseases and related	CAREAPP			
health conditions				February 2023:
	25 CAREAPP			Began partnership
	searches/connections			with Claudia Mayer
	related to chronic			/ Tina Broccolino
	disease prevention			Cancer Resource
	and/or management			Center
				March 2023: Began
				partnership with
				American Lung
				Association
				ASSOCIATION
				April – August:
				Began Partnerships
				with Chase Brexton
				Health Care's
				Center for LGBTQ
				Health Equity,
				CareFirst
				Engagement
				Center, Priority
				Partners MCO,
				Food at the Center
				January –
				September 2023:
				Met regularly as
				workgroup to

				discuss ongoing chronic disease initiatives from providers(partners) September – December 2023: JHHCMC Co-Chair Announced
Objective 3: By June 2025, conduct quarterly review and update of the HCLHIC website and Chronic Disease Resource Guide and promote content widely among partners and community members.	Baseline: Monthly update Target: Quarterly update	 Review HCLHIC website Chronic Disease page and make updates as needed quarterly Review the Howard County Chronic Disease Resource Guide and make updates as needed quarterly Promote HCLHIC website, resource guide and other local and national chronic disease resources widely 	Start: May 2021 End: June 2025	January 2023: Chronic Disease webpage updated February 2023: Chronic Disease Self-Management Program Resource Guide created May 2023: Health Action Item Updated June 2023: Chronic Disease Webpage and Self- Management Program Resource Guide updated

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			August 2023:
			Chronic Disease
			Webpage and Self-
			Management
			Program Resource
			Guide updated;
			Health Action Item
			updated
			October 2023:
			Chronic Disease
			Webpage and Self-
			Management
			Program Resource
			Guide updated;
			Health Action Item
			updated
			December 2023:
			Chronic Disease
			Webpage and Self-
			Management
			Program Resource
			Guide updated
			January 2024:
			Chronic Disease
			Webpage and Self-
			Management
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Objective 4: By June 2025, create and promote flyer with nutrition class resources on the HCLHIC website's Chronic Disease page and share widely among partners, community members, and via social media.	Baseline: 0 flyer Target: 1 flyer	 Design and translate flyer with partner nutrition classes to promote healthy eating to manage and prevent the onset of chronic conditions. Promote flyer through partners, community events, social media, etc. 	Start: December 2023 End: June 2025	Program Resource Guide updated February 2024: Chronic Disease Self-Management Program Resource Guide updated/ Nutrition webpage created March 2024: Chronic Disease Webpage updated December 2023: Mi Flava Plata Presentation given by Dr. Holder February 2024: University of Maryland- Extension Presentation on Dining with Diabetes and Fresh Conversations given by Karen Basinger
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		March 2024:
		Nutrition Flier
		developed

HCLHIC Priorities: Healthy Beginnings, Healthy Livings, Healthy Minds

HCLHIC Workgroup: Healthy Minds and Suicide Prevention Coalition

Goal 3: Increase awareness of culturally appropriate, accessible and inclusive mental health resources and supports to reduce stigma around mental health, promote brain health, and promote social engagement across the lifespan in collaboration with Coalition and community partners in Howard County.

Key Measure(s): 2021 Maryland Vital Statistics Administration & BRFSS:

Mental Health:

- 14.0% of Howard County residents reported having 8+ days of not good mental health in 2020 compared to 11.3% in 2016 (BRFSS, age-adjusted rate).
- The prevalence of doctor-diagnosed Depression was 14.8% in 2020 compared with 12.2 in 2019 (BRFSS, age-adjusted rate).

Suicide:

• The (3-year age-adjusted rate per 100,000) death rate increased to 8.3 in 2019 compared with 7.6 in 2016 (Maryland Vital Statistics Administration).

Alignment with Johns Hopkins Howard County Medical Center Priorities (if applicable): Healthy Minds

Alignment with Howard County Health Department Priorities (if applicable): Behavioral Health – Goal 1

HCLHIC Staff: Ashton Jordan

Co-Chairs: Jessica Fisher – HCHD & Jessica LaFave - VA Maryland Health Care System

Objectives	Measure	Action Steps	Timeframe	Status Update

Objective 1 (SP):	Baseline:	Year 1:	Start: June 2021	April 2022: Suicide
Through June 2025, collaborate with coalition members through various partner forums to advance shared priorities and ensure awareness of and access to resources to increase social engagement of culturally appropriate, accessible and inclusive mental health resources and supports across the lifespan for Howard County community members.	1 campaign (youth- focused) 0 mental health forum 0 mental health presence at outreach events Target(s): 1 campaign (across lifespan) 2 mental health forums 4 mental health presence at outreach events	 Convene regular meetings with Coalition partners and community members Plan and launch of suicide prevention campaign across lifespan Plan and launch suicide prevention forum Year 2: Monitor and evaluate suicide prevention campaign Increase mental health presence at outreach events Host Veterans Mental health presentation at full LHIC meeting Plan trainings for staff related to mental health first aid and Veterans' outreach efforts Year 3: Make plans for continuity of efforts including future forums and presentations 	End: June 2025	Prevention campaign launched at full LHIC meeting May 2022: Suicide Prevention Forum held September 2022: Community Ambassador Mental Health Awareness Session October 2022: Howard County Out of the Darkness Walk December 2022: Soldier and Family Readiness and Resiliency Forum March 2023: Initiated planning of "Healthy Minds" Mental Health Fair for summer and winter, Light the Night 5k, Substance Use Tabling,

Community Mental
health St Johns
Baptist Church
April 2023: Not
"Check Box"
Training: Real
Practices in
Resilience for Police
hosted with 20+ law
enforcement officer,
NAMI Our turn to
talk documentary,
June 2023: Military
Culture
Presentation,
Sources of Strength
"Train the trainer"
training completed
by co-chair (Jessica
Fisher)
July 2023: Gun
Violence Solutions
Presentation
September 2023:
HCHD BH Suicide
Prevention Month
Activities, HCHD

		suicide awareness
		rock painting,
		Mental Health
		Information Forum
		at Savage Library
		(suicide awareness
		painting activity
		here)
		September 2023:
		Hosted CAMS-Care
		training
		L C L l
		June - September
		2023: Increased
		mental health
		presence at events,
		participated in or
		provided mental
		health resources for:
		 NAACP Blood
		Drive
		 HC Fall Festival
		HCPSS
		Networking Fair
		Several
		Back to School
		events
		Dragon Fair at
		HCC

		 988 Presentation Merriweather Teen and Family Night Rotary Club Youth Mental Health Summit HoCo Pride October – December 2023: Increased mental health presence at events, participated in or provided mental health resources for:
		presence at events, participated in or

By June 2025, collaborate with	Paseline: Monthly apdate Farget: Quarterly apdate	 Review HCLHIC website Healthy Minds pages and make updates as needed quarterly Promote HCLHIC website, Howard County Behavioral Health resources and Mental Health and Suicide Prevention Programs and other local and national behavioral health resources widely Conduct outreach and education around mental health resources and supports 	Start: June 2021 End: June 2025	August 2022: Healthy Minds – Mental Health and Suicide Prevention pages on the LHIC website updated August 2022: Howard County Behavioral Health – Program Guide Updated November 2022: Created a Veterans Resources Page on the LHIC website January 2023: Mental Health Suicide Prevention Programs Resource Guide updated February – May 2023: Mental Health webpage maintained; Suicide Prevention Resource Guide updated with
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Objective 3: By June 2025, collaborate with Coalition members and partners to promote mental health and suicide prevention classes among priority populations in Howard County.	Baseline: TBD # Classes offered TBD # Class completers Target: # Classes/participants	 Review and discuss Mental Health First Aid (adult and youth) and other suicide prevention class data offered by partners Evaluate impact of outreach events and evidence-based programs Create plan for increasing mental health and suicide prevention class uptake by priority populations such faith-based organizations and community groups 	Start: March 2024 End: May 2025	new relevant materials June - September 2023: Teen Health Matters webpage and print materials updated, Suicide Prevention Programs Resource Guide updated March 2024: HCHD Epis began developing heat map for MHFA class participant. April 2024: Heat Map finalized
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HCLHIC Priorities: Healthy Beginnings, Healthy Livings, Healthy Minds

HCLHIC Workgroup: Food Security Committee

Goal (new): Increase access to and awareness of culturally appropriate, accessible, affordable, and nutritious food to decrease food and nutrition insecurity among Howard County residents

Key Measure(s): 2021 HCHAS:

- 5% of residents indicated that it is *often true* and 11% of residents indicated that it is *sometimes true* that they worry about whether food would run out before they had money to buy more.
- 29% of adults were overweight and 25% of adults were obese; 1 in 2 adults in Howard County is either overweight or obese
 - Of those identified as obese: 37% were Black, 27% were White and 7% Asian
- 11% of individuals drink regular soda daily; 18% of individuals eat fruits three times or more per day; and 16% of individuals eat vegetables three or more times per day while 32% of residents eat vegetables less than once per day over the past week
 - o Of those reporting having eaten vegetables less than once per day over the past week 47% earn less than \$50K annually

Alignment with Howard County General Hospital Priorities (if applicable): Healthy Living

Alignment with Howard County Health Department Priorities: Healthy Lifestyle - Goal 3

HCLHIC Staff: TBD

Co-Chairs: Carrie Ross – Community Action Council & Genesis Caplan – Howard County SNAP-Ed

Objectives	Measure	Action Steps	Timeframe	Status Update
Objective 1: By June 2025, collaborate with partners to review and	Year 1: Baseline: 0 Food Security	 Year 1: Convene regular Food Security Committee meetings with Coalition partners and community members 	Start: May 2022 End: June 2025	June 2022: Food Security Committee meetings: bi-monthly

implement solutions to	Committee	Assess food and nutrition security needs	meetings convened
address food and nutrition security needs	meetings	of residents through survey data collectionGather feedback from partners related to	and held.
of Howard County	Target: Bi-monthly	barriers and needs related to food and	Food and Nutrition
residents	Food Security	nutrition security of residents	Survey created and
residents	Committee	Host collaborative partner Pop-Up food	translated into four
	meetings	pantries	languages: Spanish,
	V 2	Year 2:	French, Korean and
	Year 2:	Tear 2.	Mandarin. Distributed
	Baseline: 0 Food	Analyze and present food and nutrition	with the assistance of
	Security Panel	survey data	partners through
	session	Convene food and nutrition security round	February 2023; 406
		table discussion to determine gaps and	responses received.
	Target: 1 Food	solutions to decrease food and nutrition	March 2022, Harrard
	Security Panel	insecurityCreate framework with short- and long-	March 2023: Howard
	session	term plans for addressing food and	County Food
	Year 3:	nutrition insecurity	Connection GIS Map created and embedded
	Tear 5.	Disseminate summary data and	on the LHIC website.
	Baseline: 0 Pop Up	framework	on the line website.
	Pantries	Create collaborative plan for addressing	September 2023: 2
		identified gaps	Food Security
	Target: 1 Pop Up	Create a plan for the establishment of a food council	roundtable sessions
	Pantry	Host collaborative partner Pop-Up food	conducted on Food
		pantries	Access and Food
		·	Needs: 25-30
		Year 3:	participants
			A 112222 4.5 · · ·
		Host collaborative partner Pop-Up food	April 2023: 1 Pop Up
		pantries	Food Pantry held at
			low-income senior

Γ	monista matical commune : it
	residential community.
	A total of 150 bags of
	food were distributed.
	75 bags of fresh
	produce: bell peppers,
	potatoes, apples, and
	oranges. 75 bags of
	dried goods were
	distributed: rice, oats,
	black beans, and
	canned tomatoes.
	August 2023: 3 Pop Up
	food pantries held at
	Deep Run Elementary
	School. 4,492 pounds
	of food were
	distributed to 502
	individuals within 113
	households. Food
	items distributed: dried
	and canned goods,
	fresh produce including
	apples, oranges,
	bananas, potatoes,
	onions, green peppers,
	sweet peppers,
	habanero peppers,

				serrano peppers, salad mix, and peaches
Objective 2: By June 2025, increase awareness of and access to culturally appropriate, accessible, affordable, and nutritious food for Howard County residents across the lifespan	Year 1: Baseline: Non- updated Food and Nutrition Resource guide Target: Updated Food and Nutrition Resource guide Year 2: Baseline: No Food Access Brochure Target: Food Access Brochure Baseline: No Food Connection Map Poster Target: Food Connection Map poster	Year 1: Update and disseminate Partner Food and Nutrition Resource Guide Update guide bi-annually Year 2: Draft digital and print brochures for residents to easily access free and reduced-cost nutritious food places in Howard County Gather feedback, finalize, translate, and disseminate food brochures widely Update food brochures bi-annually Create a favorite's folder in CAREAPP that lists all the food pantries and hot meal services and programs in Howard County. Create a pantry spotlight video series highlighting the work of LHIC's food pantry partners in reducing food insecurity and stigma surrounding food access in Howard County. Establish and support container garden at	Start: November 2022 End: June 2025	
	Baseline: No Food Pantries and Hot	 senior residential community Establish a community garden and nutrition education program at two (2) 		placed on LHIC website.

Meals Favorites Folder in CAREAPP Target: 1 Food Pantries and Hot Meals Favorites Folder in CAREAPP Baseline: 0 Food Pantry Spotlight videos Target: 4 Food Pantry Spotlight videos. Baseline: 0 community gardens at Howard County Public School System Title I Elementary Schools Target: 2 community	Title I elementary schools in Howard County with assistance from partners. Year 3: Continue food pantry spotlight video series by engaging community members experiencing food insecurity to highlight their stories to advance food security initiatives. Provide food connection map posters and food resources to all the medical providers in Howard County. Encourage the establishment of community gardens in all Howard County public schools. Continue supporting container gardening at senior residential community.	May 2023: Resource Guide updated May 2023: Food Connection Map Poster created and distributed to partners. May 2023: Container Gardens established at senior residential community. 160 containers and grow bags were planted with 950 herb and vegetable plants. 150 residents participated in this event. July 2023: Howard County Food & Nutrition survey poster was presented at the Society for Nutrition Education and
Schools Target: 2		Nutrition survey poster was presented at the Society for Nutrition

Year 3:	Education program
icai 5.	established at Bryant
Baseline: No	Woods and Talbott
community	
members food	Springs Elementary
spotlight video	Schools
interview	September 2023:
interview	Resource Guide
Target: 2	
community	updated.
members food	September 2023:
spotlight video	Two in-person Food
interviews	Security Roundtable
	sessions were held in
	September with 25 –
	30 key stakeholders
	attending each
	October 2023: 181
	Food Connection Map
	posters distributed to
	partners.
	November 2023: Food
	Connection Map
	updated
	upuateu
	November 2023: All
	food pantries and hot
	meals brochures

updated on the LHIC
website (digital only).
November 2023: Food
Pantries and Hot Meals
Favorite's Folder
updated in CAREAPP to
45 listings.
November 2023: 4
food pantry spotlight
videos completed and
placed on YouTube;
LHIC's Healthy Eating
page.
December 2023: Food
resource guide
updated.
December 2023: 187
Food connection map
posters distributed to
partners.
December 2023: All
locations trifold
brochures and city-
specific bi-fold
brochures in English,
Spanish, French,

	Korean and Chinese	e
	printed.	
	April 2024: Veggie a	and
	her seedlings grown	
	LHIC partners and	
	HCHD staff from 17	75
	seed packed donate	ed
	by Ace Hardware w	vere
	donated to Owen	
	Brown Place.	

HCLHIC Priorities: Healthy Beginnings, Healthy Living, Healthy Minds

HCLHIC Workgroup: The Growing Healthy Families Workgroup focus is to improve birth outcomes for people of color in Howard County to advance efforts toward reducing health disparities.

Key Measure(s):

Infant Mortality Rate per 1,000 Deliveries by Race

Baseline: 5.09 Overall; 2.12 NH White; 10844 NH Black; 4.53 NH Asian and 5.96 Hispanic (2017-2019 VSA)

Target: 9.7 or below in NH Blacks

Maternal Mortality Overall

Baseline: 2 Deaths (2017 VSA)

Target: 0 Deaths

Infant Mortality Rate per 1,000 Deliveries by Race
Baseline: 176.6 per 10,000 (2017 MDmom.org, HSCRC)

Target: Under 160 Events per 10,000

Alignment with Howard County General Hospital Priorities (if applicable): N/A

Alignment with Howard County Health Department Priorities (if applicable): Maternal Infant Health Goals 1, 2, 3

HCLHIC Staff: TBD

Co-Chairs: Erica S. Taylor, Howard County Office of Children and Families & Samantha Cribbs, HCHD

Objectives	Measure	Action Steps	Timeframe/Resp.	Status Update

Goal 1: Improve early access to respectful prenatal care experience for reproductive-aged women of color.

Objective 1.1 (SP): Assess the barriers to PNC for women of color. Objective 1.2 (SP): Increase early enrollment into prenatal care for women of color	Baseline: No Prenatal Care: <1% overall; 1.8% NHB moms; 5.0% Hispanic moms (2015-2019 VSA) Target: <1% for all Race/Ethnic Groups Baseline: PNC Started in First Trimester: 77% NH White; 61% NH Black; 69% NH Asian; 50% Hispanic (2105-2019 VSA) Target: PNC Started in Frist Trimester for 67% NH Blacks and 55% Hispanics	 Optimizing first visit for prenatal care to encourage retention. Acknowledge and address barriers that exist for women of color. Communications to women in communities of focus and providers using CHWs and partners to share messages and help connect people in the community to pre-natal care (PNC.) Encourage OBs to start PNC early and promote pre-conception care in OB/GYN practices. 	Start: Fall 2024 (Year Three of CHW Network) Black Maternal Health Week (Spring 2024)	
Objective 1.3: Increase access to implicit bias training for	Baseline: 1 training Target: 2 trainings	Create a central resource for training opportunities on implicit bias	Jan 2024	Implicit bias training recording from February 11, 2020, on

healthcare providers and staff		Create a toolkit for onboarding maternal health workers, doulas, CHWs to include anti-racism and cultural bias training.		LHIC website's Special Program's page
Goal 2: Decrease dispariti	es in pre-term and lov	v birth weight births.		
Objective 2.1 (SP): Support community efforts to close gaps in PN support and education especially in Columbia, Ellicott City, Laurel, and Elkridge	Baseline: 0 Target:	 Identify and support community efforts in PN support and education in identified communities Plan and implement outreach to selected communities and their providers Incorporate as part of Black Maternal Health Week 	Start: January 2024 End: Ongoing as part of Workgroup Start: 2024	
Goal 3: Promote equitable	e access to bias-free ar	nd culturally congruent prenatal and post-partur	n support services.	
Objective 3.1 (SP): Improve equitable access to doula and midwifery services by increasing awareness of their availability and benefits among prenatal providers.	Baseline: 74 PN providers in county – found 7 with OBs and 2 with midwives that promote doula services	 Collect information from NH Black and Hispanic women on interest in doulas Provide information to prenatal providers about doulas and midwives Create a doula supportive environment within Howard County. 	Start: August 2024 December 2024 – Focus Group with CHWs recruiting Maternal Infant Health Forum (Spring 2024)	Midpoint: MomCares contracted to recruit, train, and support doulas in the county.

Facilitate access to anti- racist and culturally congruent education for home visiting programs staff. Target: 100% of programs will have access to training in anti-racist and culturally congruent practices Total event participation (missed a fe that came in the end) Raffled off 1 Play (HCHD) in a Box kits and 1 free n prenatal yog & Grow We Panel well results for the participation of the program will and the practices Total event participation (missed a fe that came in the end) Raffled off 1 Play (HCHD) in a Box kits and 1 free n prenatal yog & Grow We Panel well results for the participation (missed a fe that came in the end) Raffled off 1 Play (HCHD) in a Box kits and 1 free n prenatal yog & Grow We Panel well results for the participation (missed a fe that came in the end) Raffled off 1 Play (HCHD) in a Box kits and 1 free n prenatal yog & Grow We Panel well results for the participation (missed a fe that came in the end)		Target: 20 PN providers aware of doula services			
Massage + F great hit	Facilitate access to anti- racist and culturally congruent education for home visiting programs	as Teachers and Healthy Families have culturally congruent components Target: 100% of programs will have access to training in anti-racist and culturally congruent	 cultural organizations, in information practice and connecting families with home visiting services Black Maternal Health Week activities: start October/November 2023 for Spring 	40 15 Pa 10 To pa (m th th Ra Pl in ar pr &	anel attendees total: otal event articipation: 15-20 nissed a few sign-ins at came in toward e end) affled off 1 Pack n ay (HCHD), 2 Bedtime a Box kits (HCHD), nd 1 free month of renatal yoga (Blossom Grow Wellness) anel well received; assage + Reiki was

Objective 4.1: By June 2025, conduct quarterly review and update of the HCLHIC website and Healthy Beginnings> Maternal/Infant/Child Health Resources webpage and promote healthy beginnings resources and information widely among partners and community members.	Baseline: No updates Target: Quarterly updates Baseline: 0 partners attend Growing Healthy Families workgroup Target: 10 partners attend quarterly Growing Healthy Families workgroup.	 Review and update HCLHIC website's Healthy Beginnings> Maternal/Infant/Child Health Resources webpage quarterly. Share healthy beginnings resources, hospital classes, and information through LHIC communications including at meetings, newsletters, and social media. Collaborate with Johns Hopkins Howard County Medical Center to promote their child, infant and parent classes. 	Start: November 2023 End: May 2025	November 2023: Convened Growing Healthy Families workgroup; 20 partners attended meeting. December 2023: Updated HCLHIC's Healthy Beginnings webpage.
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