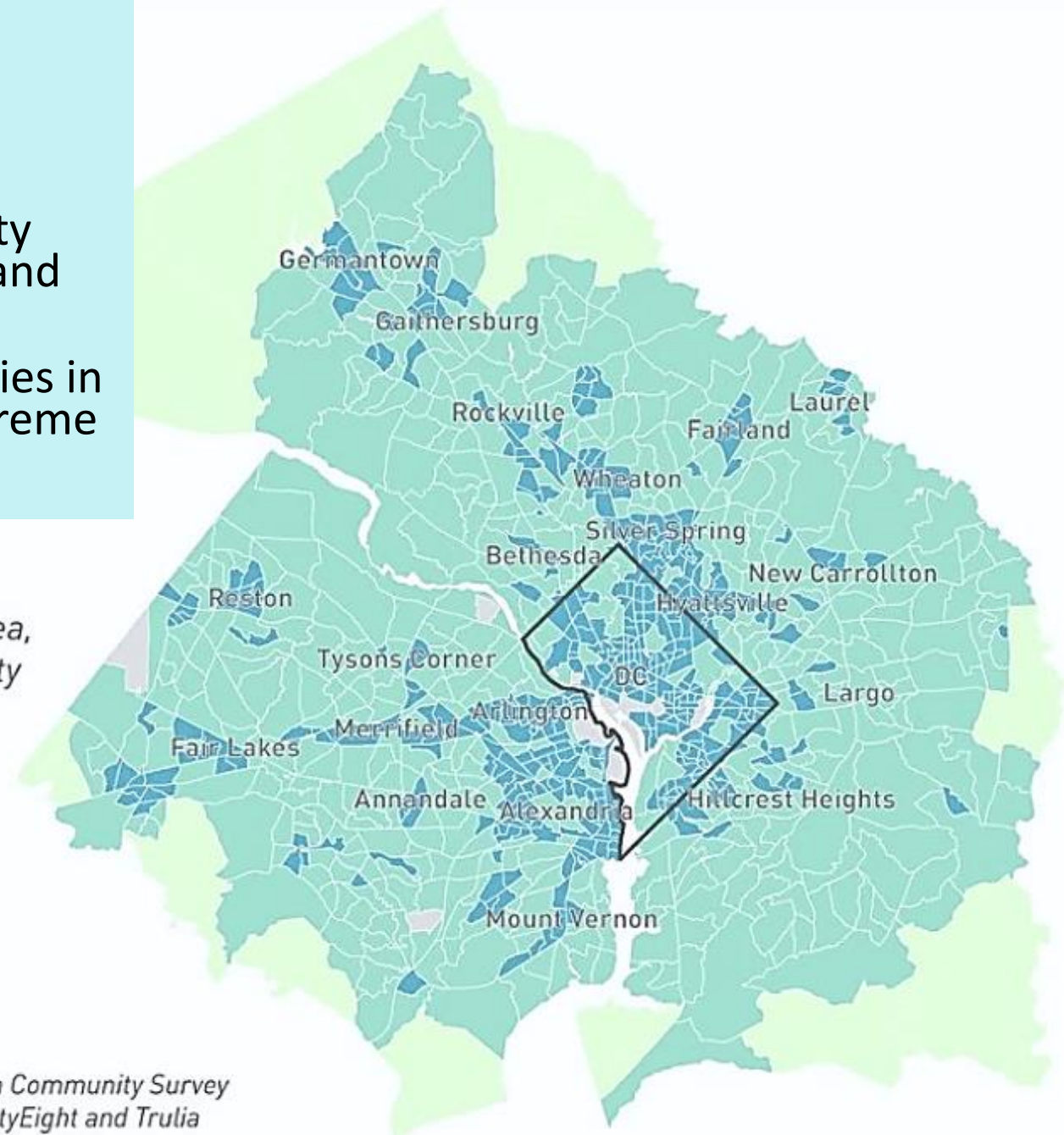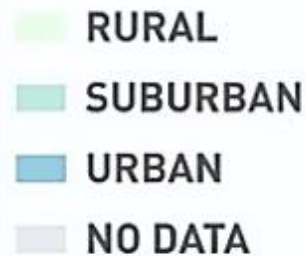# HEALTH:
how we build it

Anna Ricklin, MHS
Health in All Policies Manager

Fairfax County

- 400 square miles
- 1.2 million people
- 50% white, 50% POC
- Approx. 12,000 staff in county govt across 40 agencies big and small
- Among the wealthiest counties in the US – with pockets of extreme disadvantage

Census tracts in the DC area, classified by housing density

- RURAL
- SUBURBAN
- URBAN
- NO DATA

Dan Reed
justupthepike.com
Data from the 2009-2013 American Community Survey
Inspired by research from FiveThirtyEight and Trulia

FAIRFAX

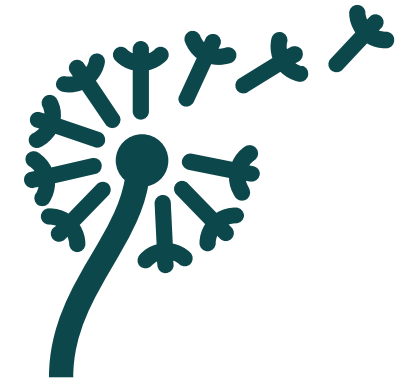# IS THIS HEALTHY?

The big idea:

"Health in all policies" recognizes that health is shaped by social and environmental factors outside the doctor's office – and works **upstream** with partners to create the conditions where everyone can be healthy.

Health and place

Zip code > Genetic code

Health is shaped over a lifetime of living in homes, using transportation, accessing services, and participating in the economy

We live out our lives, and our health, in places.

Community factors shape our health

Housing

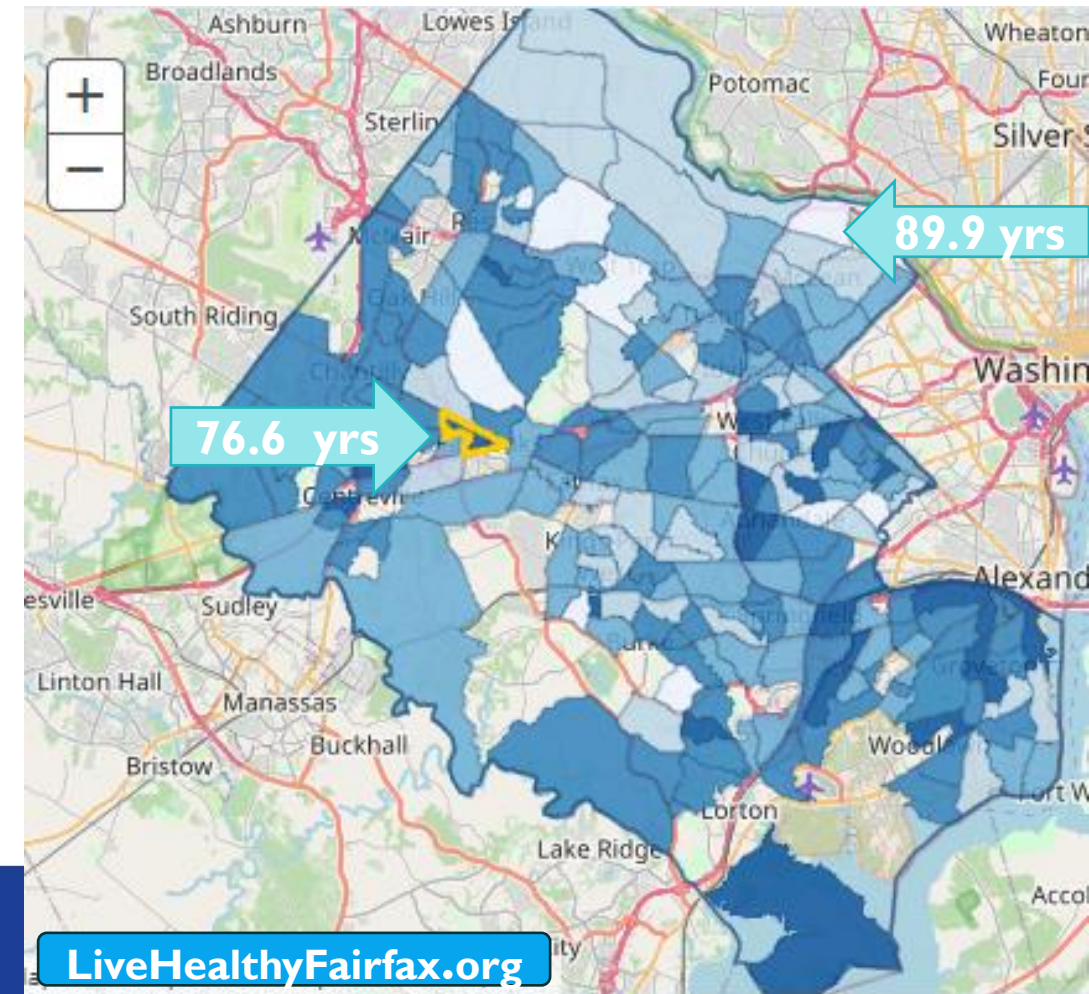Household Resources

Education

Transportation

Environment

Social Connections

= social determinants of health

Equity is the ultimate social determinant of health

FAIRFAX COUNTY HEALTH DEPARTMENT

89.9 yrs

76.6 yrs

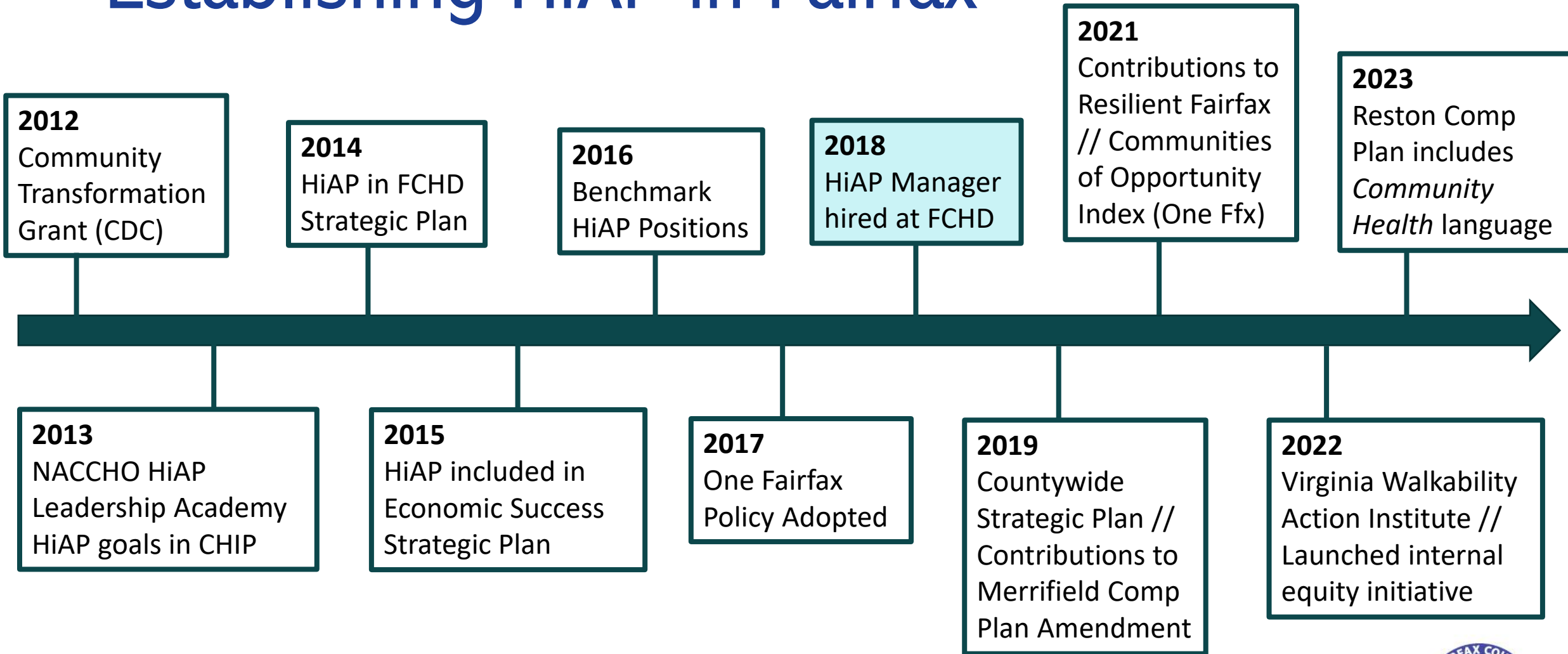LiveHealthyFairfax.org

Jacob A. Riis, Museum of the City of New York

But… Using health conditions to propel policy change for the built environment *is not so new*

Establishing HiAP in Fairfax

2012
Community Transformation Grant (CDC)

2013
NACCHO HiAP Leadership Academy HiAP goals in CHIP

2014
HiAP in FCHD Strategic Plan

2015
HiAP included in Economic Success Strategic Plan

2016
Benchmark HiAP Positions

2017
One Fairfax Policy Adopted

2018
HiAP Manager hired at FCHD

2019
Countywide Strategic Plan // Contributions to Merrifield Comp Plan Amendment

2021
Contributions to Resilient Fairfax // Communities of Opportunity Index (One Ffx)

2022
Virginia Walkability Action Institute // Launched internal equity initiative

2023
Reston Comp Plan includes *Community Health* language

Potential impacts of our built environment on human wellbeing

Factor	Direct impacts	Indirect or longer-term impacts
Transportation	Respiratory illness; Crashes and injuries; Cardiovascular health	Mental health; Community cohesion; Access to education, jobs, services (grocery, healthcare)
Housing	Ability to afford other basic needs (food, childcare); Injuries; Respiratory illness; Maternal and child health; Mental health	Family stability; Educational attainment; Job opportunity; Access to parks and transportation options; Life expectancy
Community Design	Community and social cohesion; Mental health, Public safety	Access to education, jobs, services (grocery, healthcare); Educational attainment; Life expectancy
Environment	Respiratory illness; Drinking water; Cardiovascular health; Mental health	Community cohesion; Learning

Considerations for an environment that promotes connection and livability

Big roads v. smaller streets

Parks v. parking lots

Schools and playgrounds

Benches, signage, lighting

Public art v. empty spaces

Community supporting businesses

Public space v. privately owned space

Your ideas

Can you think of places or organizations in Fairfax that <u>already</u> embody some of the goals in the SHAPE plan?

Places that foster social connection for people of all ages and abilities?

Services for Older Adults and Family Caregivers
Housing and Neighborhood Supports
Access to Mobility Options
Personal Well-Being
Economic Stability and Planning

Changing *structures* or creating new programs?

The public health system

Challenges you may experience

Legal or policy restrictions at the state and local level

Government structure – bureaucracy?

Buy-in – even from obvious allies

Bandwidth – volunteer teams / turnover

Endurance – change takes time

What can you do?

- Keep watch for opportunities to be involved in policy beyond "aging"

- Ask questions – be inquisitive about initiatives happening around you!

- Strengthen partnerships internal to county structure and build allyship with non-profit/advocacy orgs

- Share your stories and data!

- Keep showing up and don't give up

FAIRFAX COUNTY HEALTH DEPARTMENT

Thank you for all
that you do!

Anna.Ricklin@fairfaxcounty.gov

Partners are people - inside and outside gov't

Land Development
- Transportation
- Planning and Development
- Public Works

Health and Human Services
- Health Department
- Housing and Community Dvpt.
- Neighborhood and Community Services
- Parks Authority

NGOs
- Advocacy organizations
- Social service organizations
- Issue-focused coalitions

Boards and Councils
- Partnership for a Healthier Fairfax
- Healthcare Advisory Board
- Planning Commission
- LTCCC

The Health in All Policies approach in Fairfax

1. Upstream – not programmatic

2. Collaborative – with county partners

3. Educational – to build buy-in & understanding of health impacts

4. Equity-focused – changing culture

5. Iterative – long term investment

Connect on values

Illustrate the problem

Show what is possible: examples from other places

Creatively link to existing policy or process

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