FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

# ADDRESSING ARTHRITIS: COMMUNITY HEALTH DETAILING & AAEBIs

October 2023

# PROJECT OVERVIEW

**Purpose**
To support access to and engagement in arthritis-appropriate, evidence-based intervention (AAEBIs) by implementing the Community Health Detailing (CHD) method and processes for social needs screening.

**Contributors**

- HealthBegins, an organization focused on moving upstream to advance social and other drivers of health and equity
- Nine local YMCAs with AAEBI implementation experience
- Y-USA

**Project Scope**

- **Community Health Detailing**
  - Each participating Y participates in a training on the Community Health Detailing method, then develops and implements their own CHD campaign to help generate a minimum of 10 referrals into their AAEBI of focus from the health care sector
- **Social Needs Screening & Referral**
  - Ys implement internal processes and workflows for screening and referrals to support social needs, including identification of at least 6 organizations for cross-referrals to support social needs

 | ©2023 YMCA of the USA

# PROJECT GOALS

Goal 1: Increase clinical AAEBI referrals to Ys

Goal 2: Increase social need screening within Ys

Goal 3: Increase Cross-Referrals between Ys and CBOs

 | ©2023 YMCA of the USA

# Community Health Detailing™

"Detailing" has been proven to be an effective means of disseminating Evidence-Based Health Interventions by changing knowledge and behaviors of frontline professionals and caregivers.

- The "detailing" approach to educational outreach was first developed by the pharmaceutical industry to influence prescriber behavior.
- The approach uses brief, semi-structured, and repeat face-to-face visits that tailor and deliver key messages to fit the learners' needs.
- The academic and public health community then adapted it to deliver key messages.

Community Health Detailing was developed to advance health equity through goal-directed educational campaigns that improve clinical-community relationships

HEALTH BEGINS

©HealthBegins 2023. All Rights Reserved.

# MORE ABOUT COMMUNITY HEALTH DETAILING

**History**

Evolved from pharmaceutical detailing where sales reps were described as "detailers" because of role promoting specific details about drugs in one-on-one meetings with doctors. Similar approaches were then applied to academic and public health detailing.

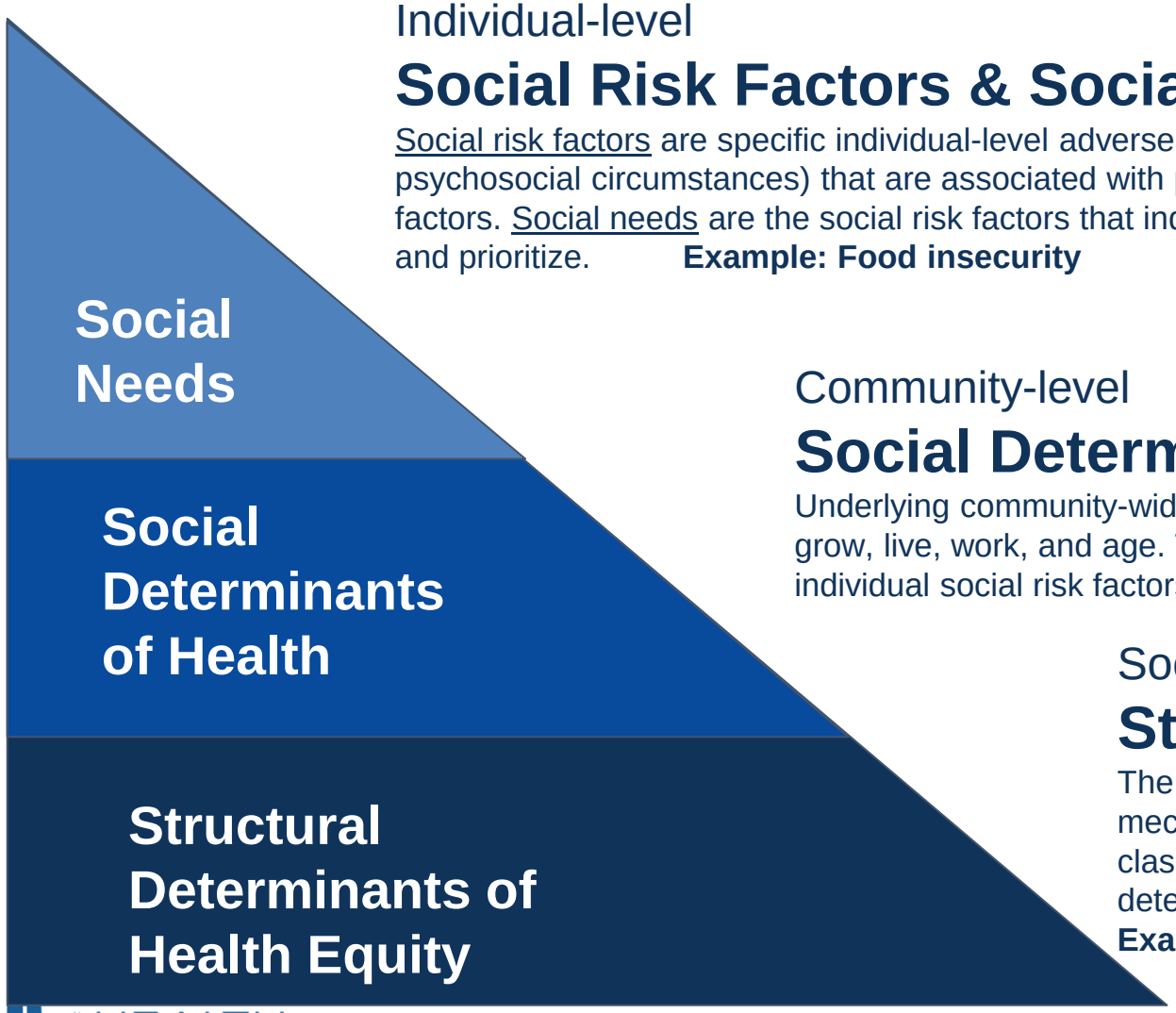
Adapted into community health detailing in 2012 by HealthBegins to promote preventive & disease management practices that impact clinical outcomes and health inequities among patients with health-related social needs

**How CHD is unique**

- Engages educators with community expertise and/or lived experience to understand and apply evidence-based practices to improve health equity and to address social and structural drivers of health
- Involves development of structured CHD campaign that is focused on achieving clear health equity goals through charter development, quality improvement planning, and using key messages to drive the various stages of engagement with the health care sector

 | ©2023 YMCA of the USA

# We need to counteract social arrangements and structures that cause harm and inequities through proactive, place-based action at all levels




Individual-level

## Social Risk Factors & Social Needs:

Social risk factors are specific individual-level adverse social conditions (i.e., adverse material and psychosocial circumstances) that are associated with poor health. Behavioral risk factors are not social risk factors. Social needs are the social risk factors that individuals (e.g., patients, clients, beneficiaries) identify and prioritize. **Example: Food insecurity**

Community-level

## Social Determinants of Health:

Underlying community-wide social, economic, and physical conditions in which people are born, grow, live, work, and age. These conditions shape the distribution, chronicity, and severity of individual social risk factors and social needs. **Example: Food desert**

Societal-level

## Structural Determinants of Health Equity:

The societal norms; macroeconomic, social & health policies; and the structural mechanisms that shape social hierarchy and gradients (e.g., power, racism, sexism, class, and exclusion), and, in turn, the distribution, quality, and chronicity of social determinants of health and individual social needs.

**Example: Supermarket redlining  Structural racism**



HEALTH BEGINS

Source: HealthBegins Upstream Communications Toolkit. February 2022.

©HealthBegins 2023. All Rights Reserved.

# SOCIAL NEEDS SCREENING & REFERRAL

**Engaging and listening** to the community to understand how social risk factors being experienced

**Checking** assumptions about what needs should be prioritized and when referrals should be made

**Relying** on the power of community collaboration where multiple organizations have seats at the table and the attributes and expertise of each are recognized/leveraged

**Focusing** only on the specific social needs identified by potential and current AAEBI participants and where resources are available to facilitate ongoing program engagement and to expand network of support

 | ©2023 YMCA of the USA

# PARTICIPATING COMMUNITIES

| ARTHRITIS MANAGEMENT: COMMUNITY HEALTH DETAILING & SOCIAL NEEDS SCREENING | |
|---|---|
| **AWARDED YMCA** | **PROGRAM SELECTION (AAEBI)** |
| Florida's First Coast YMCA – Metropolitan: FL | Enhance®Fitness |
| Saratoga Regional YMCA: NY | Walk with Ease |
| Summerville Family YMCA: SC | Enhance®Fitness |
| Williams YMCA of Avery County: NC | Enhance®Fitness |
| YMCA of Bucks County: PA | Walk with Ease |
| YMCA of Greater Cleveland: OH | Walk with Ease |
| YMCA of Greater Fort Wayne: IN | Enhance®Fitness |
| YMCA of Greater Indianapolis; IN | Enhance®Fitness |
| YMCA of San Francisco: CA | Enhance®Fitness |

 | ©2023 YMCA of the USA

# THANK YOU!