

Mobilizing for Action through Planning and Partnerships: A Community Approach to Health Improvement



Improving Health Requires Partners

Public health is “what we as a society do collectively to assure the conditions in which people can be healthy.”¹ Health is more than the absence of illness; rather, health is a “dynamic state of complete physical, mental, spiritual, and social well-being.”² In ensuring the public’s health, collective action involves a variety of community organizations, agencies, groups, and individuals. In order to create the conditions in which people can be healthy, communities must collectively address social, economic, environmental, and biological factors.³ Therefore, ensuring the public’s health is not just the responsibility of healthcare providers and public health officials. Improving the public’s health requires the expertise of all those who live and work in the community.

No single entity provides public health services in a community, and all entities make important contributions to the local public health system. The following are examples of how communities protect the public’s health:

- Police, fire, and emergency departments prevent and respond to emergencies that threaten personal safety.
- Teachers, school nurses, and parents protect the health and safety of children.
- City planners, transportation authorities, neighborhood associations, and businesses provide access to services that promote and support healthy lifestyles, such as safe parks and recreational facilities, bus routes to healthcare providers, and vendors that sell nutritious foods.

- The judicial and penal systems identify potential risk factors and health trends, such as increases in drug use, domestic abuse, and personal injury.
- Community groups such as churches, homeowners’ associations, and civic organizations provide insight into the quality of health and services in a community.

MAPP, which stands for *Mobilizing for Action through Planning and Partnerships*, provides the framework for convening the variety of organizations, groups, and individuals that comprise the local public health system in order to create and implement a community health improvement plan. Through the MAPP process, communities can create and implement a well-coordinated plan that uses resources efficiently and effectively. Resulting community plans do not focus on one agency or public health challenge; rather, MAPP health improvement plans provide long-term strategies that address the multiple factors that affect health in a community. Community involvement throughout the creation and the implementation of a health improvement plan results in creative solutions to public health problems. Moreover, continuous community involvement leads to community ownership of the process. Community ownership, in turn, increases the credibility and sustainability of health improvement efforts.

Public health belongs to the community.

What is MAPP?

MAPP is a community-wide strategic planning framework for improving public health. MAPP helps communities prioritize their public health issues, identify resources for addressing them, and implement strategies relevant to their unique community contexts.

MAPP will help communities use broad-based partnerships, performance improvement, and strategic planning in public health practice. This approach leads to the following:

- measurable improvements in the community's health and quality of life;
- increased visibility of public health within the community;
- community advocates for public health and the local public health system;
- ability to anticipate and manage change effectively; and
- stronger public health infrastructure, partnerships, and leadership.

BENEFITS FOR SYSTEM PARTNERS

Participation in a MAPP process results in the following benefits for community partners:

- increased recognition within the community and among peers;
- access to accurate and current data—partners comment that access to data collected through a MAPP process is the number one benefit of participation;
- improved focus on priorities;
- reduction in the duplication of services within a community;
- increased collaboration on projects and activities; and
- increase in financial resources—data have been used to acquire grant and government funding.

BACKGROUND

From 1997 through 2001, the National Association of County and City Health Officials (NACCHO), in collaboration with the Centers for Disease Control and Prevention (CDC), developed MAPP. Prior to MAPP's inception, public health practitioners did not have structured guidance on creating and implementing community-based strategic plans.⁴ In response, NACCHO and CDC created a process based on substantive input from public health practitioners and public health research and theory. As a result, MAPP is a process that is both theoretically sound and relevant to public health practice.⁵



MAPP'S PROCESS

The MAPP process has six phases. The figure below shows the six phases in a linear fashion down the middle of the graphic. Four arrows surround the linear process to illustrate that the four MAPP assessments inform the entire MAPP process.



Phase 1:

Organize for Success and **Partnership Development** are part of the planning phase. This phase identifies who should be involved in the process and how the partnership will approach and organize the process.

Phase 2:

The **Visioning** phase is a collaborative and creative approach that leads to a shared community vision and common values.

Phase 3:

The **Four Assessments** inform the entire MAPP process. The assessment phase provides a comprehensive picture of a community in its current state using both qualitative and quantitative methods. The use of four different assessments is a unique feature of MAPP. Most planning processes look only at quantitative statistics and anecdotal data. MAPP provides tools to help communities analyze health issues through multiple lenses.

Join one of the most important coalitions
your community has ever had.

- The **Community Themes and Strengths Assessment** provides qualitative information on how communities perceive their health and quality of life concerns as well as their knowledge of community resources and assets.
- The **Local Public Health System Assessment** is completed using the local instrument of the National Public Health Performance Standards Program (NPHPSP). The NPHPSP instrument measures how well public health system partners collaborate to provide public health services based on a nationally recognized set of performance standards.
- The **Community Health Status Assessment** provides quantitative data on a broad array of health indicators, including quality of life, behavioral risk factors, and other measures that reflect a broad definition of health.
- The **Forces of Change Assessment** provides an analysis of the positive and negative external forces that impact the promotion and protection of the public's health.

Phase 4:

Identify Strategic Issues uses the information gathered from the four assessments to determine the strategic issues a community must address in order to reach its vision.

Phase 5:

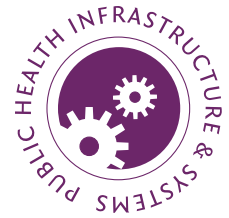
The **Formulate Goals and Strategies** phase involves specifying goals for each of the strategic issues identified in the previous phase. Many communities create a community health improvement plan at the end of this phase.

Phase 6:

The **Action Cycle** includes planning, implementation, and evaluation of a community's strategic plan.

[FACT SHEET]

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References

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- ⁴ Lenihan, P. (2005). MAPP and the evolution of planning in public health practice. *Journal of Public Health Management and Practice*, 11, 381.
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NACCHO

National Association of County & City Health Officials

The National Connection for Local Public Health

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NACCHO is the national organization representing local health departments. NACCHO supports efforts that protect and improve the health of all people and all communities by promoting national policy, developing resources and programs, seeking health equity, and supporting effective local public health practice and systems.

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