

Stories from the Field: Minnesota



SHIP (Statewide Health Improvement Program) Sets Sail

Promoting obesity prevention in a time of economic downturn was both a challenge and an opportunity for the Minnesota Department of Health. Minnesota, like other states, has rising obesity rates: according to 2009 data from the Behavioral Risk Factor Surveillance System of the Centers for Disease Control and Prevention, more than 60% of Minnesota adults are obese or overweight. Although more than half of Minnesota adults are meeting weekly recommendations for physical activity, only 22% are meeting daily recommendations for fruit and vegetable consumption. The result is that many Minnesotans live with costly chronic diseases, including coronary heart disease or angina, stroke, diabetes, and pre-diabetes.

The Nutrition, Physical Activity and Obesity (NPAO) staff at the Minnesota Department of Health leveraged these newsworthy health statistics in addition to cost-savings information to educate Minnesota legislators and local, county, and tribal governments. In May 2008, the Minnesota legislature allocated \$47 million to establish the Statewide Health Improvement Program (SHIP). Part of Minnesota's health reform initiative, SHIP was created to reduce obesity and tobacco use in Minnesota. SHIP was funded as a 2-year grant program and provides funding to all 86 local county public health departments and 9 tribal governments in Minnesota.

Here's how SHIP works: local public health programs can select from a menu of evidence-based policy and environmental interventions put together by state NPAO staff, such as Safe Routes to School and Farm to School programs. State staff also provide technical assistance to local health departments by assisting with program design, providing content expertise, aiding in cultural adaptation, and advising on evaluation methods and measures.



How did NPAO staff get buy in?

They quickly learned that language matters. For example, staff initially referred to SHIP as a "health promotion effort," but later settled on "health improvement" after hearing that many policymakers associate the term "promotion" with trinkets and give-aways instead of substantive policy change and improved outcomes. Further, NPAO staff found that legislators saw terms such as "physical inactivity" as off-putting jargon. To avoid that problem, NPAO staff used more easily understood terms such as "obesity" and "tobacco use" to communicate with legislators.



Legislative understanding of SHIP was also greatly dependent on the ability of NPAO staff and partners to show that decreases in chronic disease would lead to long term savings and reductions in health care costs. Some of the state's largest employers shared information with legislators about their efforts to address soaring health care costs through in-house health promotion programs and provided legislative committees with details of the cost effectiveness of prevention programs. Similarly, partners informed state legislators and local and tribal governments about the problems of insufficient physical activity and poor nutrition and presented feasible strategies to address these problems.



Another key factor was having a state governor and commissioner of health who were both firmly behind SHIP. Throughout the legislative process, the commissioner of health and several members of the Health Care Transformation Task Force remained vigilant about the importance of addressing prevention in the overall health reform effort and not focusing solely on the costs of health care delivery. Bill Burluson, Obesity Communications Coordinator for the Minnesota Department of Health, explained, "Health improvement champions cannot back down. Even in a good economy, much less tough economic times like the past 2 years, new initiatives like SHIP face an uphill battle. That support was crucial."

An overarching challenge for SHIP was that no funding was provided for planning. Design and implementation of SHIP required intensive staffing, involving approximately 135 Minnesota Department of Health staff, which equates to about 10% of the entire state health department workforce. SHIP would not have been possible without the NPAO grant and critical support of existing state NPAO staff.

Importance of Early Success

Burluson sums up the success of SHIP in a few words: "We're doing what we do best. We're public health experts, not politicians." Minnesota Department of Health NPAO staff were able to use their public health expertise to educate state and local policymakers, who can potentially effect even greater change. Ultimately, Minnesota NPAO staff have demonstrated success in navigating the health policy seas and in getting others on board to support prevention efforts.

Lessons Learned

- Don't underestimate the importance of public-private partnerships. Tap community resources. The energy created by these partnerships adds breadth and depth to the potential impact of SHIP.
- Engage health improvement champions. Share health promotion program efforts with policy makers to garner support.
- Give legislative committees details of the cost effectiveness of prevention programs. Data drives decision-making.
- Consider the target audience for the program message and identify issues that concern your audience. Language matters. Know what kind of information your target audience needs and desires to quickly gain buy-in to the program.

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