How Lifestyle Change Programs Can Be Leveraged to Engage Communities and Improve the Social Determinants of Health

Lifestyle change programs are community-based interventions designed to improve overall patient health by changing individual behaviors, typically to prevent or manage a chronic disease. Examples include the National Diabetes Prevention Program and Stanford Chronic Disease Self-Management Program (CDSMP). Since health is a function not only of lifestyle but also living and working conditions, then effective efforts to improve health and reduce health inequities need to also address the factors that impact an individual’s ability to choose a healthy lifestyle. These conditions – and the distribution of money, other resources and power that shape them - are collectively referred to as the social determinants of health (SDoH). This brief highlights how a local health department leveraged a patient based lifestyle change program to engage community residents in improving the SDoH.

Overview: The Merced County Department of Public Health leveraged the Stanford Chronic Disease Self-Management Program (CDSMP) curriculum to improve community conditions for physical activity through policy change. The CDSMP lifestyle change program participants successfully worked with their City Council to adopt a joint use agreement to provide access to school facilities for a community recreational opportunity.

How did this effort lead to Merced residents shifting from taking disease self-management classes to becoming active community leaders and advocates?

Braiding funding to maximize resident engagement: The Merced County Department of Public Health (MCDPH) receives Mental Health Services Act funding from the Merced County Behavioral Health and Recovery Services Department to provide CDSMP classes, as an entry point to link more people to mental health services. In 2016, when MCDPH started teaching the CDSMP lifestyle change curriculum, participants brought up issues in the community that hindered them from achieving the goals of the curriculum. The MCDPH staff began looking for opportunities to address those barriers. At the same time, MCDPH was implementing two Centers for Disease Control and Prevention grants: (1) Partnerships to Improve Community Health (PICH), and (2) Lifetime of Wellness (18-1422) through the California Department of Public Health. MCDPH saw an opportunity to link the lifestyle change classes to the broader community focused work being promoted by these grants. They began training community...
health workers, known as promotores in Spanish, through the PICH grant and continued additional training under the Lifetime of Wellness grant. MCDPH invited the lifestyle change class participants to a Public Health 101 training developed by MCDPH that highlighted how to make policy changes in their community to support healthy lifestyles. This training was a springboard to activating the residents, who then successfully advocated at the City Council in the City of Winton for a joint use agreement to open a school as a site for Zumba classes.

“We’re ready for the next topic we want to embark on and educate our community on”

- Resident leader, 2019

How the Public Health 101 training was developed: The Community Health Assessment (CHA) report that had been developed by the Department in 2016 for public health accreditation was lengthy and not practical for residents to use. MCDPH staff created the Public Health 101 training to examine the root causes of the issues that surfaced in the CHA. MCDPH subsequently used the Public Health 101 training to share the narrative of the CHA with residents.

Impacts: As a result of the expanded approach being incorporated into the Public Health 101 curriculum, community members embraced the concept of improving community conditions to improve health, and assumed roles as advocates and leaders for health in their communities. MCDPH plays an ongoing convener role to connect residents to grassroots advocacy organizations.

Next Steps: MCDPH is sustaining resident engagement through its community health worker program, linking residents to other organizations and building community capacity to have a bigger voice on issues they care about. Some residents are now involved in quality education, immigration, and healthcare access initiatives, as well as leadership programs. MCDPH, in partnership with UC Merced and Golden Valley Health Centers, is working on a robust curriculum for community health workers, to train them to work with residents to build their skills and knowledge to address community conditions in Merced County that impact health.

Opportunities Going Forward: This example shows how lifestyle programs can link to policy, systems and environmental approaches to improve community health, promote health equity and support positive patient outcomes. As coverage increases for lifestyle change programs, such as the new Medi-Cal benefit that covers the National Diabetes Prevention Program, there is great potential to leverage these efforts for increased engagement of community leaders, broader community health improvements, and building power in communities to improve health equity.
Takeaway for Providers

When offering or funding lifestyle change programs, build in a community engagement component – e.g., by linking with a promotores network, to address community conditions that support healthy lifestyles.

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Acknowledgements: Funding for this brief was provided by the California Department of Public Health’s California Wellness Plan Implementation Program with a Centers for Disease Control and Prevention Preventive Health and Health Services Block Grant (CDFA #93.758) funding, and The California Endowment, and supported by California State University, Sacramento. Written by Lindsey McDermid; edited by Mary Anne Morgan.

Drafted June 2019. For more information, please visit the California Chronic Disease Prevention Leadership Project (http://www.chronicdiseaseleadershipproject.com/).