



Social Determinants of Health Series: Promoting Healthy Behaviors

Positive, healthy behaviors enrich an individual's health. It is no surprise that the conditions in which people live, learn, work and play are major influencers of health and well-being. Studies show that only 20% of health is a result of access to health care services, with the remaining 80% attributed to nonmedical factors, such as health behaviors, socioeconomic conditions and the physical environment.1 Health behaviors include diet and exercise, tobacco use, alcohol consumption and sexual activity - all of which influence an individual's overall health and well-being.

Refraining from unhealthy habits and adopting healthy ones - that is, eating an apple instead of cookies and walking for 30 minutes instead of watching television - can prevent, control and even reverse disease risk. A vast body of scientific literature links health behaviors to health outcomes and well-being. Overall, negative health behaviors - such as overeating, smoking, consuming excessive alcohol, getting insufficient sleep, having a diet high in saturated fat, or being sedentary or physically inactive - are associated with myriad adverse health outcomes, including obesity, heart disease and dementia.² More than 12% of American adults - or 25 million - engage in three or more unhealthy behaviors.3 Conversely, positive health behaviors, including getting regular physical activity and quitting smoking, have been tied to decreased risks of disease.

For example, when a person stops smoking, their stroke risk is reduced within two to five years to that of a person who has never smoked.⁴



How Can Health Care Organizations Influence People's Health Behaviors?

As anchors in their communities, health care organizations play pivotal roles in positively influencing health in so many ways beyond clinical care delivery. Many health organizations work with community partners to address medical, behavioral and social challenges to reduce disparities in health outcomes and achieve health equity. Additionally, hospitals are encouraging employees to practice healthy behaviors to reduce stress.⁵

This issue brief explores the role of hospitals, health systems and health care organizations in working with community partners to foster positive health behaviors to improve health and well-being.

The issue brief highlights hospitals and health systems with effective initiatives that are helping patients and people in their communities adopt healthy behaviors and decrease risky behaviors:

- NCH Healthcare The Southwest Florida system and its partners are raising health and well-being scores by sponsoring a Blue Zones Project®, a comprehensive prevention approach that helps make healthy choices the easiest choices for people.
- Spectrum Health The western Michigan-based health system's Healthier Communities initiative oversees and funds dozens of hands-on programs and partnerships aimed at reducing infant mortality, improving children's health and helping at-risk adults prevent and self-manage chronic disease.

Tanner Health System –

Through its Get Healthy, Live
Well initiative, the Georgia-based
health system has increased
the number of community
residents adopting healthy
behaviors. It has accomplished
this by pursuing policy changes,
connecting individuals with easyto-access wellness programs and
collaborating with local churches,
schools, worksites and community
organizations to integrate healthy
choices into everyday life.



What Influences Health Behaviors?

Individuals' behaviors serve as the foundation of their health. Factors that shape health behaviors are interconnected with social determinants of health. Health behaviors are influenced by many factors, including biological and psychological preferences, existing social and environmental factors, and structural and political forces.6 For example, a person's ability to eat healthy foods in a rural environment depends on the existence of and access to grocery stores, farmers markets or other sources of healthy foods. High rates of crime or lack of infrastructure, such as accessible sidewalks, can contribute to an individual's physical activity or lack of it, while smoking is influenced by peer behaviors.6

Factors that influence health behaviors tend to fall within five categories:

Demographic characteristics.

Vulnerable populations experience poorer health outcomes. A person's race, ethnicity, gender, age and sexual orientation – as well as a host of other intersecting demographic characteristics, such as geographic location – can influence access to care, health outcomes and life expectancy. Minorities living in low-income communities experience more stressful events due to socioeconomic disparities, contributing to the onset of depression and often leading to physical inactivity – all of which hinder healthy behaviors.⁷



Socioeconomic status.

Income level and years of education are two

socioeconomic factors that influence

Key Takeaways

- Health behaviors such as dietary choices and eating patterns, alcohol
 and tobacco use, and physical activity influence individuals' health
 outcomes and overall well-being and are heavily influenced by the
 communities in which they live, work and play.
- To encourage positive health behaviors, health care organizations are partnering with community stakeholders, such as schools, workplaces, public health departments, social service organizations, faith-based organizations, restaurants and policy groups.
- Hospitals, health systems and other health care organizations
 can play a variety of roles in their partnerships and collaborative
 initiatives. For example, they may anchor or lead an initiative, convene
 stakeholders or coordinate the work of partnering organizations. No
 matter which role, collaboration among diverse partners must have a
 defined structure and be grounded with a shared agenda.
- Evidence-based interventions and practices designed to encourage and foster positive health behavior adoption by individuals and communities continue to be refined by researchers and practitioners.
- Understanding and implementing culturally competent, evidence-based interventions can improve health outcomes for specific groups in a community. Health care organizations and their partners need to identify and address the priority health needs of all people in their communities.
- Evaluating processes and measuring outcomes related to health behavior initiatives are crucial. Health care organizations and community partners need mixed-methods approaches, such as simultaneously using surveys and focus groups, to help track health behaviors at macro and micro levels.
- As large employers in their communities, hospitals, health systems and other health care organizations can significantly influence population health outcomes by incentivizing their employees and their families to adopt positive health behaviors.
- Initiatives focused on building and sustaining positive health behaviors take time and consistent funding to achieve successful results.

a person's ability to engage in positive health behaviors. One study found that people with a college education were three times less likely to engage in negative health behaviors than those who did not attend college.8 Similarly, as a family's household income decreases, the less likely the family consumes fruits and vegetables.9 Overall, neighborhoods with more

low-income residents tend to have fewer parks, bicycle lanes and safe walking paths for residents to engage in physical activity.¹⁰

Income and education also can influence the social networks or people that we interact with on a daily or regular basis. Alcohol and food intake, both health behaviors, tend to be social activities or done in



the presence of others.¹¹ In this way, community behavioral norms may foster or hinder positive health behaviors that influence an individual's health.



Physical environment.

Air and water quality, safe and affordable housing,

and transportation to accessible and quality food choices are essential elements in fostering healthy and equitable communities. These factors can directly impact an individual's health and well-being, in addition to facilitating positive health behaviors among individuals. People who reside in walkable communities and areas with safe, well-lit sidewalks and spaces engage in more exercise in comparison to people residing in less walkable communities. 12 Among these active, exercising communities, residents are 30% less likely to be diagnosed with high blood pressure, diabetes, depression and heart attack, compared to other communities.13



Behavorial health.

Research shows that a person's socioeconomic

status and race correspond to self-reported stress, which may shape health behaviors. Individuals living in low-income communities experience higher levels of stress, which also is associated with alcohol consumption smoking, and lack of exercise as well as a higher risk of diabetes, heart disease, cognitive decline and other ailments. ¹⁴ In addition to unhealthy eating patterns associated with symptoms of depression, ¹⁵ older adults who don't exercise are at risk for depression, stress and dementia. ¹⁶

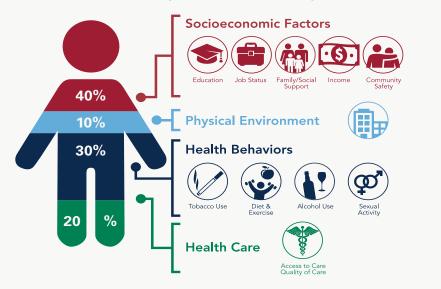


Choice architecture.

The field of behavioral economics examines why

a person makes certain decisions,

Figure 1. Factors Influencing Health and Well-being



Source: Institute for Clinical Systems Improvement. Going Beyond Clinical Walls: Solving Complex Problems (2014). Graphic designed by ProMedica.

especially ones that may not be in their best interest. According to this theory, the manner in which choices are presented - such as how food is displayed on fast-food menus influences the choices people make. People also may prioritize instant gratification for long-term advances and goal-setting, and may become overwhelmed when faced with competing or hard choices. Thus, an individual may select the option that is more convenient compared to one that may foster positive health behaviors and subsequently improve health outcomes. When making health behavior decisions, people also may be influenced by social norms, their willingness or motivation to change, and the trustworthiness of healthier options, as they weigh incentives based on immediate and long-term health goals.¹⁷

How Health Care Organizations Are Promoting Healthy Behaviors

Hospitals, health systems and health care organizations encourage

and promote healthy behaviors to improve the health of individuals and communities. By collaborating with diverse community-based organizations and public health departments, local government agencies and schools, hospitals and health systems are positioning themselves to successfully address complex, interconnected systemic and individual health issues within diverse communities. Medicare and other health plan payers also are incentivizing hospitals and health systems to help patients stay well and decrease health system utilization for progression of preventable conditions.

Strategic steps to improve health behaviors

Table 1 highlights strategic steps to foster and support positive health behaviors in individuals and communities, with key, applicable lessons learned from health care leaders, researchers and other experts. The table features insights from three hospitals and health systems.



Table 1. Six Strategic Steps to Improve Health Behaviors

1. Use data to set priorities.

- Use a community health needs assessment (CHNA) to identify and prioritize health behaviors and issues.
- Engage community members in understanding issues about health behaviors within the community.
- · Conduct focus groups with community stakeholders to delve into the issues identified by the CHNA and develop culturally competent action steps to address them.
- Analyze EHR and CHNA data together to help identify medical and socioeconomic issues and disparities in the patient population, in addition to the prevalence and root causes of diseases influenced by unhealthy behaviors.

2. Screen for positive and risky health behaviors over time.

- Implement a screening method to identify the positive and risky health behaviors a patient engages in.
- Incorporate information about patients' health behaviors into their care plans. Health behaviors change over time, so care plans will need to be adjusted accordingly.
- Record screening data in EHRs to track individual behaviors.
- Identify community resources to refer patients who need further support.

3. Seek and engage strategic partners.

- Strategically engage with community-based partners with aligned goals. Identify existing resources and potential partners in the community to support positive health behaviors. A Playbook for Fostering Hospital-Community Partnerships to Build a Culture of Health provides tools and strategies.
- Build a common understanding and mission with community partners that encourages positive health behaviors, optimizes health outcomes and promotes well-being.
- Develop task forces comprised of leaders from partnering organizations to guide initiatives.
- Keep the mission and vision of any partnership at the forefront of all action steps.

4. Set a strategic framework.

- · Adapt existing successful initiatives and use existing resources to meet needs regarding health behaviors. See Table 2 for examples.
- Use a collective impact model, which offers a flexible approach to enlist different sectors and work toward a common agenda.

5. Commit to evidence-based interventions and practices.

 Select communitywide, evidence-based interventions focused on health behaviors, to make an impact at the population health level. See the list of resources on page 7.

6. Measure and evaluate.

- Develop evaluation and measurement methods to sustain engagement of partners, while also identifying opportunities for improvement.
- Know that time and consistency are required to foster positive health behaviors.
- Use Behavioral Risk Factor Surveillance System, CDC Surveillance Resource Center, County Health Rankings and/ or City Health Dashboard to track health behaviors, by state, county, metropolitan statistical area and ZIP code.







Partnership Strategies to Improve Health Behaviors

The complexity of the root causes of unhealthy behaviors makes clear that health care organizations cannot improve health behaviors on their own. Working together, hospitals, health systems and community partners are taking proactive measures to identify the root causes of unhealthy behaviors, address those causes and create opportunities for individuals and communities to make healthier choices. Table 2 outlines specific strategies and case examples to spark positive health behaviors and empower health transformation in communities.

Strategy	Description	Examples
Make the healthy choice the easier or default choice.	Individuals tend to select a convenient or default option. Subsequently, health care organizations and community partners work to ensure that positive health options, such as eating fresh vegetables, are easier to select compared to unhealthy options, such as eating candy bars.	 NCH Healthcare has created walking routes around its hospital campuses and removed sugar-sweetened beverages from hospital cafeterias and vending machines. Instead of riding to school in a car or bus, children in Southwest Florida are getting more steps every day via "walking school buses" that have been organized by the Blue Zones Project.
Identify and address socio-economic factors on individual and community levels.	Hospitals collaborate with community partners to reduce and eliminate barriers to positive health behaviors, including addressing food insecurity and inadequate social networks, in addition to screening for healthy behaviors and social needs.	 Tanner Health arranged to double the value of food stamp benefits used at farmers markets. Spectrum Health's Strong Beginnings program connects at-risk new mothers with needed resources, including adequate housing as well as social support from other new mothers in the neighborhood.
Employ technology to help reach residents where they live, work and play.	As digital health technologies become more common, health care organizations and community partners are experimenting with digital tools and mobile apps to encourage healthy behaviors.	Tanner Health launched a "Menu It" app: Users see the calorie count and nutrient level of local restaurant items via their smartphone or tablet.

Strategy	Description	Examples
Facilitate ohysical environment modifications to encourage ohysical activity and other health oehaviors.	At a municipal policy level, health care organizations help their communities become more walkable and less conducive to tobacco and alcohol use. Additionally, health care organizations collaborate with other sectors, such as grocery stores, to encourage residents to adopt policies that influence positive health behaviors.	The Blue Zones Project in Southwest Florida, sponsored by NCH Healthcare, implemented a Complete Streets policy to ensure safe routes for walkers and bikers. The project also is working to increase the legal smoking age from 18 to 21 years.
Use culturally competent approaches and provide personfocused case management for individuals and families with complex needs.	Recognizing the importance of trusted relationships in influencing people to adopt healthy behaviors, hospitals and their partners design community health programs tailored to specific groups of people. Additionally, people with multiple morbidities and vulnerable families with complex issues may respond better to one-on-one case management, including coaching and support on healthy behaviors, instead of community-based efforts.	 Tanner Health enlisted local churches to sponsor community gardens, walking groups and other positive health behavioral opportunities for congregants. In Spectrum Health's Core Health program, culturally competent community health staff work one-on-one with at-risk individuals who have complex health needs, identifying how to best adopt positive health behaviors.
Keep wellness programming engaging and interactive by incentivizing people to engage in positive health pehaviors.	Educating residents about health behaviors is an important component to promoting positive health behaviors. Entertaining and interactive education captures and holds people's attention. Mobile educational presentations help spread information to more communities and environments, including the workplace. In addition, offering incentives and fun activities – from health insurance premium discounts to friendly competitions – may motivate people to adopt positive health behaviors.	Tanner Health's Kids 'N the Kitchen program supplies elementary schools with a fully equipped mobile kitchen – a cart that travels from classroom to classroom for healthy cooking demonstrations and food tastings.
Emphasize the importance of emotional health and well-being.	People who are emotionally healthy are more likely to participate in healthy activities. Some community health initiatives focus on encouraging people to socialize, de-stress and find a purpose in life, in addition to emphasizing that people quit smoking and get regular exercise.	Blue Zones Project in Southwest Florida encourages the formation of moais (pronounced "mow-eyes"), or small social-support groups of people who meet regularly to connect and pursue healthy behaviors. For example, there are moais that get together for plant-based potlucks, healthy restaurant dining and walking.

A New Approach for Advancing Health

Hospitals, health systems and health care organizations no longer treat only acutely ill individuals who arrive at their doors. As the field transforms, they are innovating and advancing health outside their walls – so individuals and entire communities are attaining better health and well-being. While improving health behaviors can be challenging, hospitals and community partners are making progress by taking a holistic, multisector approach to address all the factors that contribute to whether

people eat nutritiously, engage in regular physical activity and pursue other healthy behaviors.

Investing in promoting positive health behaviors can make a substantial impact. As trusted health care experts and major employers and purchasers in their communities, hospitals are leading community health improvement efforts. Hospitals have seen a decline in smoking rates, increase in exercise and healthy food intake, decrease in A1c levels for diabetes and reduction in readmission rates – all by implementing initiatives

that promote healthy behaviors. Many hospitals are leveraging their existing capabilities and staff, from fundraising and marketing to case management and patient education. Health care organizations can work internally to help patients identify and address their risky health behaviors, and collaborate externally with community-based organizations to promote healthy behaviors and healthy living choices across larger populations. These efforts will make it easier for individuals and communities to choose healthier options.

More Resources

These evidence-based resources and practices can help hospitals and health systems promote positive health behaviors by individuals and communities.

- CDC has multiple resources and studies and best practices to influence positive health behaviors and prevent chronic disease, including information on smoking, excessive alcohol consumption, poor eating and poor exercising habits.
- Pro-Change uses The
 Transtheoretical Model to help individuals and organizations adapt Health Risk Assessment
 + Intervention strategy, behavior change programs and targeted interventions for youth.
- Community Preventive Services
 Task Force, formed by the
 United States Department of
 Health and Human Services,
 describes interventions at
 thecommunityguide.org.
- National Diabetes Prevention
 Program, developed by the Centers for Disease Control and Prevention (CDC), aims to prevent or delay the risk of type 2 diabetes through recommended lifestyle changes.
- American Cancer Society's
 Freshstart® program focuses on integrating effective group-based tobacco cessation approaches.
- AHA case studies:
 - o <u>Christiana Care Health System</u> Newark, Delaware
 - o NCH Healthcare Naples, Florida
 - o <u>Spectrum Health</u> Grand Rapids, Michigan
 - o <u>Tanner Health System</u> Carrollton, Georgia
 - o <u>Winona Health</u> Winona, Minnesota



Endnotes

- Robert Wood Johnson Foundation and University of Wisconsin Population Health Institute. (2014). County Health Rankings Roadmaps. Retrieved from http://www.countyhealthrankings.org/our-approach
- Institute of Medicine (U.S.) Committee on Health and Behavior: Research, Practice and Policy. (2001). Health and behavior: The interplay of biological, behavioral and societal influences. Washington, DC: National Academies Press. Retrieved from https://www. ncbi.nlm.nih.gov/books/NBK43744/
- America's Health Rankings. (2016, April). Spotlight: Impact of unhealthy behaviors. Minnetonka, MN: United Health Foundation. Retrieved from https://assets.americashealthrankings.org/app/uploads/finalreport-spotlightunhealthybehaviors-4-apr-2016-1.pdf
- Centers for Disease Control and Prevention. (2018, January). Health effects of cigarette smoking. Retrieved from https:// www.cdc.gov/tobacco/data statistics/fact sheets/health_effects/effects_cig_smoking/index.htm
- Chiou, S.-T., Chiang, J.-H., Huang, N. & Chien, L.-Y. (2014). Health behaviors and participation in health promotion activities among hospital staff: Which occupational group performs better? BMC Health Services Research, 14, 474. doi: 10.1186/1472-6963-14-474. Retrieved from https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4282514/
- Short, S. E. & Mollborn, S. (2015). Social determinants and health behaviors: Conceptual frames and empirical advances. Current Opinion in Psychology, 5, 78-84. doi:10.1016/j.copsyc.2015.05.002. Retrieved from https://www.ncbi.nlm.nih.gov/pmc/articles/ PMC4511598/
- American Psychological Association, APA Working Group on Stress and Health Disparities. (2017). Stress and health disparities: Contexts, mechanisms, and interventions among racial/ethnic minority and low-socioeconomic status populations. Washington, DC: Author. Retrieved from http://www.apa.org/pi/health-disparities/resources/stress-report.aspx
- America's Health Rankings. (2016, April). Spotlight: Impact of unhealthy behaviors. Minnetonka, MN: United Health Foundation. Retrieved from https://assets.americashealthrankings.org/app/uploads/finalreport-spotlightunhealthybehaviors-4-apr-2016-1.pdf
- Produce for Better Health Foundation. (2015). State of the plate: 2015 Study on America's consumption of fruits and vegetables. Retrieved from https://fruitsandveggies.org/wp-content/uploads/2019/05/2015-State_of_the_Plate.pdf
- 10. Thrun, E., Chriqui, J.F., Slater, S.J. & Chaloupka, F.J. (2016). Disparities in active living zoning nationwide. Chicago, IL: Bridging the Gap Program, Institute for Health Research and Policy, University of Illinois at Chicago. Retrieved from http://www. bridgingthegapresearch.org/ pdf/BTG active living brief_Feb2016.pdf
- 11. Pachucki, M.A., Jacques, P.F. & Christakis, N.A. (2011. Social network concordance in food choice among spouses, friends, and siblings. American Journal of Public Health, 101(11), 2170-2177. doi: 0.2105/AJPH.2011.300282. Retrieved from https://www.ncbi. nlm.nih.gov/pmc/articles/PMC3222397/
- 12. Leider, J., Chriqui, J. F. & Thrun, E. (2017). Associations between active living-oriented zoning and no adult leisure-time physical activity in the U.S. Preventive Medicine, 95 Suppl, S120-S125. doi:10.1016/j.ypmed.2016.06.029. Retrieved from https://www.ncbi. nlm.nih.gov/pmc/articles/PMC5191996/pdf/nihms-803569.pdf
- 13. Gallup-Sharecare Well-being Index. 2016 community rankings for exercise. (2017). Retrieved from https://wellbeingindex.sharecare. com/wp-content/uploads/2017/12/2016-Community-Rankings-for-Exercise-2017.pdf
- 14. American Psychological Association, APA Working Group on Stress and Health Disparities. (2017). Stress and health disparities: Contexts, mechanisms, and interventions among racial/ethnic minority and low-socioeconomic status populations. Washington, DC: Author. Retrieved from http://www.apa.org/pi/health-disparities/resources/stress-report.aspx
- 15. Molendijk, M., Molero, P., Sanchez-Pedreño, F.O., Van der Does, W. & Martínez-González, M.A. (2017). Diet quality and depression risk: A systematic review and dose-response meta-analysis of prospective studies. Journal of Affective Disorders, 226, 346-354. doi: 10.1016/j.jad.2017.09.022
- 16. American Psychological Association, APA Working Group on Stress and Health Disparities. (2017). Stress and health disparities: Contexts, mechanisms, and interventions among racial/ethnic minority and low-socioeconomic status populations. Washington, DC: Author. Retrieved from http://www.apa.org/pi/health-disparities/resources/stress-report.aspx
- 17. Samson, A. (2014.) An introduction to behavioral economics. Retrieved from https://www.behavioraleconomics.com/introductionbehavioral-economics/

