

CLINTON HEALTH MATTERS INITIATIVE

Houston and Harris County Blueprint for Action

The Clinton Foundation would like to thank and recognize GE for their support and dedication in working to improving health outcomes for Harris County residents.

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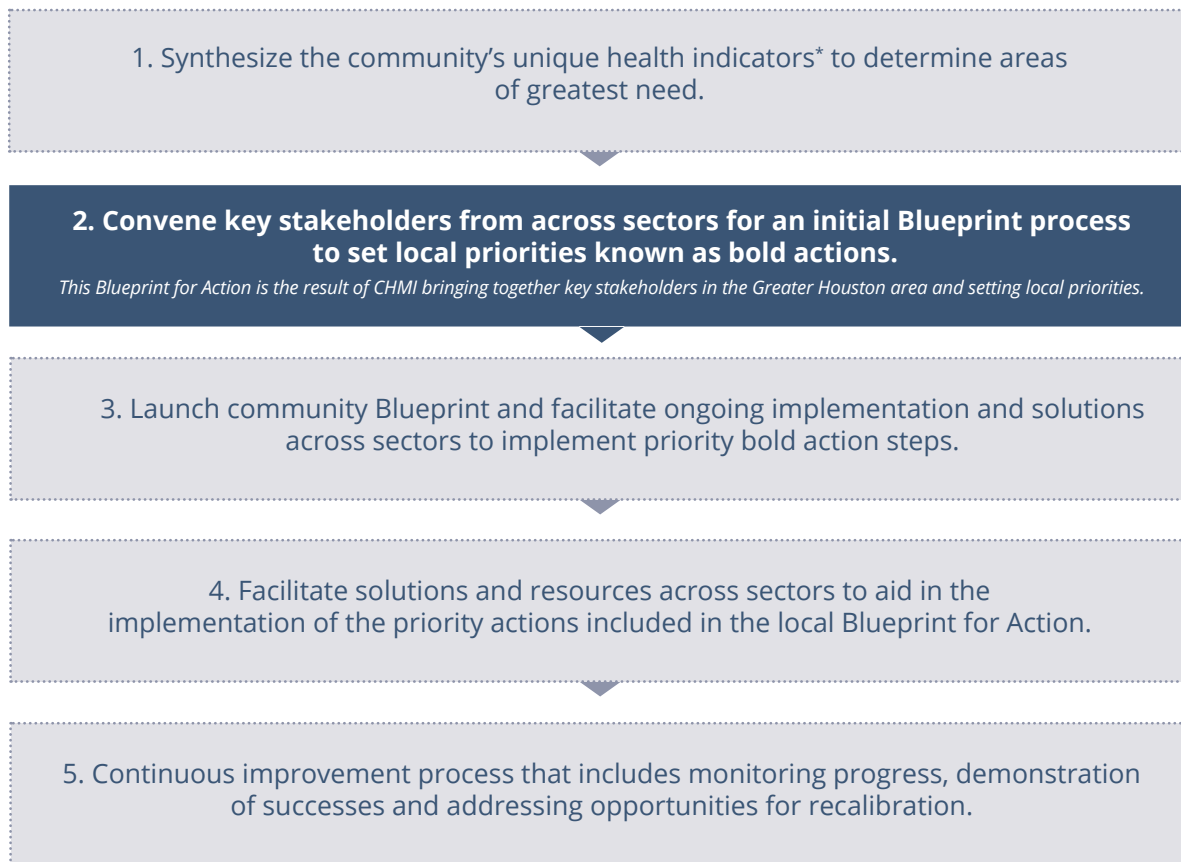
Background

THE CLINTON HEALTH MATTERS INITIATIVE

The Clinton Foundation helps transform lives and communities from what they are today to what they can be by creating partnerships of great purpose to deliver sustainable solutions and empower people to live better lives. The Clinton Health Matters Initiative (CHMI), an initiative of the Clinton Foundation, furthers this mission by working to improve the health and well-being of all people by activating individuals, communities, and organizations to make meaningful contributions to the health of others.

CHMI's goals are to reduce the prevalence of preventable health outcomes, close health disparity gaps, and reduce health care costs by improving access to key contributors to health for all people.

Figure 1: CHMI Community Health Transformation Process



* Based on County Health Rankings Model

CHMI uses the *County Health Rankings Model* to drive all of its work (see Figure 2). This model suggests that an individual's overall health is influenced by a constellation of factors, including healthcare quality and access, lifestyle behaviors, socioeconomic status, and access to a healthy environment. This multi-factorial perspective is woven into the fabric of CHMI's approach to Community Health Transformation, through which CHMI works in regions disproportionately impacted by chronic disease (focus regions) to improve health outcomes and close gaps in health disparities. Current focus communities include The Coachella Valley, California; Central Arkansas (Little Rock); Northeast Florida, Florida (Jacksonville); and Greater Houston, Texas.

CHMI's successes are showcased at the annual *Health Matters: Activating Individuals in Every Generation* conference, where hundreds of national thought leaders convene to discuss ways in which individuals, communities, and corporations can contribute to the health of others.

GE'S "TRANSFORMING CITIES" INITIATIVE

Transforming Cities is an initiative of GE Healthymagination. The initiative is born out of the recognition that, to fully realize the opportunity to improve health, productivity and healthcare value, we need a healthcare system we can rely on to deliver better value—to provide consistently high quality, better outcomes, greater access—and at an affordable price.

Since healthcare is local, the implication is that it is important to engage key healthcare stakeholders in the communities where people live and work. As healthcare purchasers, businesses need to focus on value and work collaboratively with healthcare providers, local leaders, health plans and other stakeholders to identify and prioritize value improvement opportunities, and put systems in place that measure and reward value creation.

In addition to Houston, GE Healthymagination is implementing Transforming Cities initiatives in Cincinnati, Ohio; Louisville, Kentucky; and Erie, Pennsylvania.

ABOUT HOUSTON AND HARRIS COUNTY

The Harris County is located in southeast Texas along the upper Gulf coastal plain, covers 1,778 square miles and has a population of 4,253,700, making it the third most populated county in the United States. Houston, the administrative center of Harris County, is the fourth largest city in the United States, with a population of approximately 2,100,000 and city limits spanning 655 square miles.¹ The greater region is the ninth most diverse metro area in the nation, with 60 percent non-white residents.¹ Over the past few decades, the Houston metropolitan statistical area experienced dramatic population growth, with a 26 percent increase since 2000.²

Harris County is home to many industries, universities, and cultural institutions, which include museums, galleries, and world-class restaurants. Major industries driving the region's economy include energy (Houston has more than 5,000 energy-related firms), aerospace, and medicine (The Texas Medical Center is the largest medical center in the world, with a local economic impact of \$10 billion, and more than 52,000 employees).³ The city also hosts the Houston Livestock Show and Rodeo, the world's largest event of its kind, which attracts more than 2.2 million visitors annually.⁴ Due in part to its economic strengths, Harris County weathered the 2008 recession better than other major metropolitan areas and unemployment remained below the national average as of 2011.⁵

Despite the resiliency and economic growth in Harris County, huge disparities remain in health, income, and opportunity. Income inequality is a major concern, and the majority of workers have seen their wages decrease since 1979.⁶ Racial gaps remain in unemployment; African Americans, Latinos, and Native American in the Houston-Galveston area experience higher unemployment rates than whites and Asian Americans in the region.⁷

WHY CHMI CHOSE TO FOCUS ON HARRIS COUNTY

As noted earlier, CHMI works with regions disproportionately impacted by chronic disease to improve health outcomes and close gaps in health disparities and uses the county health rankings model to guide its community health transformation work.

According to the County Health Rankings Model, Harris County has 29 percent of children living in poverty, which is substantially higher than the national benchmark of 14 percent. There are also major challenges to individual health; as of 2010, 65.8 percent of adults in the Houston-Baytown Sugarland Metropolitan Statistical Area (MSA) were overweight or obese, and there are disparities in this statistic between races (71.7 percent of blacks, 77.8 percent of Hispanics, and 62.5 percent of whites were overweight or obese).⁸ Among the population in Harris County, 27.9 percent is uninsured, which is significantly higher than the national average of 17 percent.⁹ Literacy and economic development also play a critical role in the prosperity and vitality of the region. According to the Barbara Bush Houston Literacy Foundation Blueprint for Community Action, 60 percent of Houston's children did not possess the reading-readiness skills expected upon entering kindergarten and one in five adults is considered functionally illiterate.¹⁰

In Harris County, CHMI and GE saw a unique opportunity to strengthen and accelerate system change within the community through partnerships and collaborations. To allow the city of Houston to realize its full potential and ensure a bright, vibrant future, rising inequality must be addressed.

Executive Summary

The Greater Houston area is distinguished in many positive ways—its robust economy, cultural diversity, and world-class medical centers, universities and arts among them. However, Harris County and its surrounding counties also stand out due to factors that reflect poor health, disparate access to healthcare services and a range of underlying socioeconomic and structural issues that conspire to predict persistent and worsening health and disparity in the region...unless something is done to change things.

Something is being done.

The Clinton Health Matters Initiative (CHMI), an initiative of the Clinton Foundation, has identified Harris County as a focus region for its Community Health Transformation Process (Figure 1). CHMI chose Houston because of the issues identified above, but also because of the opportunity to collaborate with General Electric Corporation (GE) which has a rapidly growing presence in the Houston area and—through GE healthymagination—is engaged in an effort to improve health and healthcare value in Houston as one of its Transforming Cities initiatives. Since healthcare is local, the implication is that it is important to engage key healthcare stakeholders in the communities where people live and work. GE's initiative focuses on communities in which the company has a substantial presence, and convenes stakeholders across these regions to prioritize and put in place systems that measure and reward value creation. In Harris County, GE and CHMI saw a unique opportunity to strengthen and accelerate their work within the community through partnership.

As pictured in Figure 1, CHMI's five-step approach to community transformation is to: 1) synthesize a set of community health indicators to determine areas of greatest need unique to the region; 2) convene key stakeholders from across sectors for an initial Blueprinting process to set local priorities; 3) facilitate solutions across sectors to implement priority actions included in a local Blueprint for Action; 4) leverage national, regional and local resources that will help advance priority actions; and 5) continuously monitor and evaluate progress. In each region, CHMI serves as a neutral convener to pull together key stakeholders across sectors to create a local Blueprint for Action based on the unique health indicators of each community.

On December 9, 2013, 150 stakeholders representing a broad array of sectors (including education, corporations, government and healthcare) from Houston and Harris County were convened by CHMI to participate in a Blueprint meeting. The meeting agenda featured: 1) a summary overview of findings from research and analysis of community health indicator data (step 1 of figure 1); 2) a review of nine priority areas of greatest need (based on research and analysis) and proposed Goals for each area (see table 1); and 3) breakout discussions in which participants were divided based on their interests/expertise to participate in one of nine discussion groups. Each group was charged to identify up to five “Bold Action Steps” to be implemented by 2019 in order to achieve the stated goal.

¹ Greater Houston Partnership (2013). Houston Facts [online booklet]. Retrieved from <http://www.houston.org/economy/#HoustonFactsPublication>.

² Houston Facts and Figures. Retrieved January 30, 2014 from <http://www.houstontx.gov/about/houston/houstonfacts.html>.

³ Houston Facts and Figures. Retrieved January 30, 2014 from <http://www.houstontx.gov/about/houston/houstonfacts.html>.

⁴ Houston Facts and Figures. Retrieved January 30, 2014 from <http://www.houstontx.gov/about/houston/houstonfacts.html>.

⁵ PolicyLink and USC Program for Environmental & Regional Equity (PERE). (2013). An equity profile of the Houston region, p. 14. p. 29.

⁶ PolicyLink and USC Program for Environmental & Regional Equity (PERE). (2013). An equity profile of the Houston region, p. 14. p. 27.

⁷ PolicyLink and USC Program for Environmental & Regional Equity (PERE). (2013). An equity profile of the Houston region, p. 14. p. 31.

⁸ Harris County Healthcare Alliance. (2012). The state of health in Houston/Harris County. Houston, TX, p. 36.

⁹ Harris County Healthcare Alliance. (2012). The state of health in Houston/Harris County. Houston, TX, p. 12.

¹⁰ Barbara Bush Houston Literacy Foundation. (2014). Available at: <http://www.bushhoustonliteracy.org/media/807/FINAL-Blueprint-Report-3-.pdf>.

Table 1: Nine Health Factor Opportunities (areas of need) and Corresponding Goals for Greater Houston

HEALTH FACTOR OPPORTUNITIES	GENERAL GOALS
Physical Activity	Promote positive behaviors that increase physical activity through social and ecological approaches such as improving infrastructure, access, and creating awareness campaigns.
Healthy Eating and Food Quality	To provide all Harris County residents with access to fresh, nutritious, and high-quality foods.
Substance Abuse	To reduce substance abuse in Harris County through health education efforts in community environments.
Sexual Activity	To promote and protect the sexual and reproductive health of residents in Harris County.
Quality of Care and Access to Care	Increase access to coordinated and comprehensive healthcare services to support quality of care improvements among community residents.
Education, Income and Employment	Strengthen primary education to increase graduation rates and career opportunities, to lead to stronger, healthier families and communities in Harris County.
Family and Social Support	Increase access to and utilization of social support services by residents in Harris County.
Community Safety	Increase access to coordinated and comprehensive healthcare services to support quality of life improvements among community residents.
Physical Environment	Implement <i>Our Great Region 2040</i> , where Houston will be viewed as one of the world's greatest places to live, work, and succeed.

Following the meeting, CHMI staff refined the Bold Action Step statements with key stakeholder input and identified specific “Indicators of Success” for each action step to achieve by 2019. The body of this document is dedicated to a review of the nine sectors and their related goals, Bold Action Steps and success indicators. Collectively, they comprise the CHMI Blueprint for Action for Houston and Harris County.

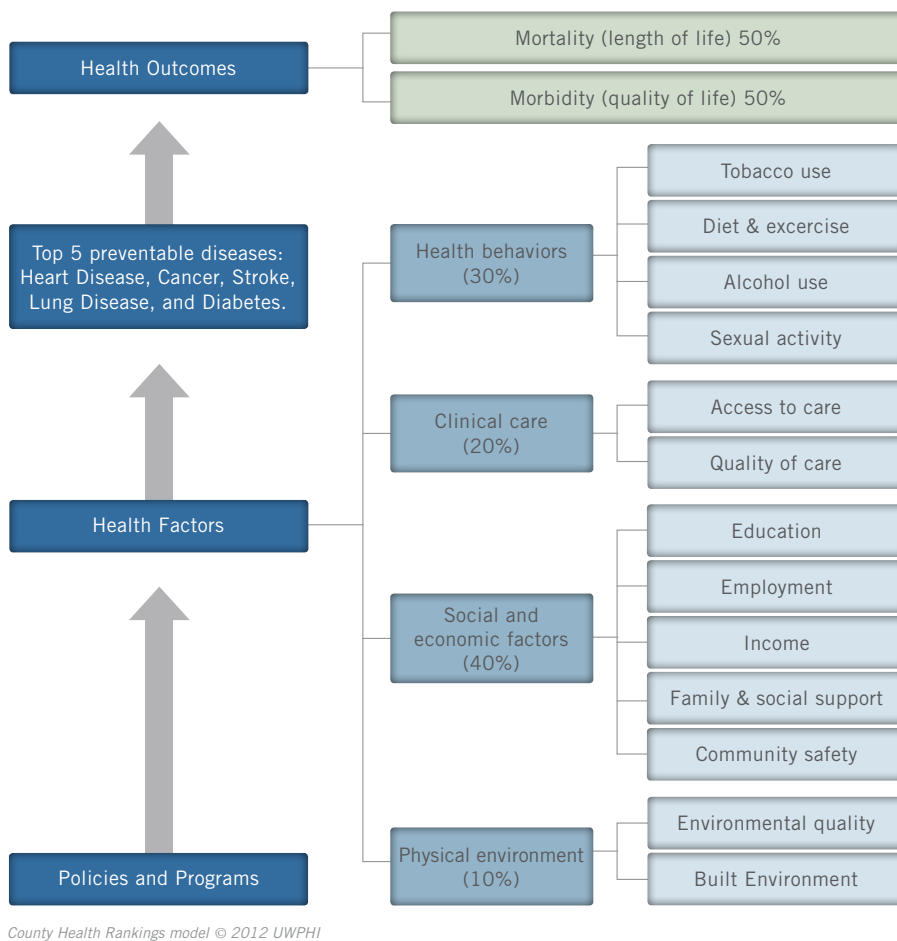
This document concludes the Blueprinting process (step 2 above) and establishes the foundation for the work that remains to be done. Success in improving health and closing gaps in health disparities will require focus and commitment from stakeholders across all sectors and throughout the county.

Harris County stakeholders are in a unique position to begin the regional work of CHMI due in part to these disparities and the existing efforts from public and private partnerships. Local government and non-profit organizations, businesses, and schools have been working together to improve the economy, physical environment, health, and educational opportunities in the region. By strengthening these partnerships within the community, elevating best practices, and providing national resources to address local disparities, we will positively impact health indicators in the county.

COUNTY HEALTH RANKINGS MODEL AS A STRATEGIC FRAMEWORK FOR ACTION IN GREATER HOUSTON

CHMI uses the County Health Rankings Model (Figure 2) as a framework for collecting and analyzing data relevant to population health (see Page 34 for complete list of measures). Applying the latest publicly-available data to the model, CHMI calculated statistics specific to Harris County and compared them to statewide and national benchmarks). This analysis led to the identification of nine areas of need and enabled development of goal statements used to stimulate discussion and decision-making regarding Bold Actions during the Blueprint meeting breakouts.

Figure 2: County Health Rankings Model



Beyond helping to establish priorities, the success of the Houston and Harris County Blueprint for Action will be tracked using measures in the County Health Rankings model, as well as process measurements designed to monitor the progress of each Bold Action.

For the most recent version of the County Health Rankings Model visit:
<http://www.countyhealthrankings.org/resources/county-health-rankings-model>

Health Factor Opportunities, Goals, Bold Actions and Indicators of Success

The next several pages feature information that constitutes the Blueprint for Action in Houston and Harris County. There are nine sections, corresponding to the nine areas of need identified in Step 1 of the CHMI process and presented to stakeholders attending the Blueprint meeting in December, 2013. The order in which the Areas of Need are presented does not reflect prioritization. Rather, the order reflects the order in which areas are presented in the County Health Rankings Model (Figure 2).

Each of the nine Health Factor Opportunity sections features four elements for those areas of need:

- 1) Background information about the **Health Factor Opportunities**
- 2) An **Overall Goal** statement
- 3) Up to five **Bold Action Steps**
- 4) **Indicators of Success** corresponding to each Bold Action Step

PHYSICAL ACTIVITY

With high temperatures and sprawling layout, Harris County residents face many barriers to engaging in physical activity. In a single month, 25 percent of adults reported not having participated in any physical activities.¹¹ Physical activity is one of the few lifestyle choices that has the biggest impact on health, decreasing the risk for most chronic diseases. The Center for Disease Control's (CDC) Healthy People 2020 has also acknowledged environmental barriers that limit engagement in physical activities and has designed objectives to increase active transport and create accessible built structures.¹²

Creating opportunities for children to participate in physical activity is increasingly important as most children who are obese remain obese as adults. Children in Texas ages 2 to 5 have obesity prevalence rates of 15.3 percent.¹³ Efforts may focus on increasing physical activity through school physical education and by creating safe, accessible areas out of school. In other communities, such as the workplace, wellness and physical activity have become a major focus. These spaces can create an atmosphere for initiation and continued motivation.

¹¹ Centers for Disease Control and Prevention National Center for Health Statistics. Behavioral risk factor surveillance system selected metropolitan/metropolitan area risk trends. Available at: <http://www.cdc.gov/brfss/smart/> Accessed January 27, 2014.

¹² Department of Health and Human Services. Healthy people 2020. Available at: <http://www.healthypeople.gov/2020/default.aspx> Accessed January 27, 2014.

¹³ Centers for Disease Control and Prevention National Center for Health Statistics. Available at: <http://www.cdc.gov/obesity/stateprograms/fundedstates/texas.html> Accessed January 27, 2014.

OVERALL GOAL: Promote positive behaviors that increase physical activity through social and ecological approaches such as improving infrastructure, access, and creating awareness campaigns.

BOLD ACTION STEPS				
Work in collaboration with Independent School Districts, parents, youth, School Health Advisory Councils, and residents to require and reinforce physical education and physical activity in primary and secondary schools.	Develop a well-integrated public transportation system as referenced in <i>Our Great Region 2040</i> that provides low cost and easily accessible options that include rail, bus, pedestrian, and cycling means of transportation.	Provide education and training to medical professionals in Harris County on health, wellness, and/or physical activity topics.	Create an innovative sandbox application that tracks all physical activity in application central location and allows interpersonal comparisons.	Create healthy opportunities for all by improving access to physical activity, engaging stakeholders, and changing behavior.

INDICATORS OF SUCCESS BY 2019				
Adoption of policy stating physical education requirements in all schools.	Advance steps to the implement <i>Our Great Region 2040</i> that impact a multi-faceted transportation system, which could increase ridership, expand location and abundance of bike lanes, or increase frequency of transit stops.	Integrate health, wellness, and physical activating education and training curriculum into medical schools and other health professional settings.	Implement new strategies to encourage physical activity among residents (i.e., adoption of Complete Streets, use of public transit, increasing access to green space within communities, among other programs).	Increased use of existing resources in promoting physical activity.

HEALTHY EATING AND FOOD QUALITY

The consumption of healthy, nutrient-dense foods is known to reduce the risk of health conditions such as heart disease, type 2 diabetes, and some cancers. Yet many adults and children in the United States do not meet fruit and vegetable recommendations, and are currently eating about 1 to 1.5 cup of each daily.¹⁴ According to the 2010 Dietary Guidelines for Americans, residents should consume between 5 and 13 servings of fruits and vegetables each day. This is equivalent to about 2 1/2 to 6 1/2 cups daily, depending on the amount of calories consumed, weight and level of activity. The bulk of calories consumed are those derived from refined grains, fats and oils, and added sugars, and the number of meals eaten outside the home has also dramatically increased. Additionally, the sale of food away from home has increased more than 10 percent from the previous year.¹⁵

Access to nutritious food is often limited by convenience, cost, and availability. In Harris County, more than 500,000 people are receiving federal food assistance,¹⁶ making economic disparities apparent across the county. In Harris County survey, 19.5 percent of residents experience food insecurity, as well as every 1 in 4 children.¹⁷ With recent changes, such as the U.S. Department of Agriculture's (USDA) Women, Infant, and Children (WIC) program increasing access to fruits and vegetables and other healthy choices, additional education about resources and nutrition is needed to bolster ongoing positive behavior change.¹⁸ Additional support through innovative ideas and upstream approaches should continue to be implemented to help meet the needs of a diverse resident base.

¹⁴ Centers for Disease Control and Prevention National Center for Health Statistics. National health and nutrition examination survey. Available at: www.cdc.gov/nchs/nhanes.htm Accessed January 27, 2014.

¹⁵ United States Department of Agriculture Economic Research Service. Food Expenditures. Available at: <http://www.ers.usda.gov/data-products/food-expenditures.aspx> Accessed January 27, 2014.

¹⁶ Texas Health and Human Services Commission. Texas TANF and SNAP Enrollment Statistics. Available at <http://www.hhsc.state.tx.us/research/TANF-FS-results.asp> Accessed March 04, 2014.

¹⁷ Feeding America. Map the Gap. Available at http://feedingamerica.org/hunger-in-america/hunger-studies/map-the-meal-gap/~/_media/Files/a-map-2011/2011-mmg-exec-summary.ashx Accessed March 04, 2014.

¹⁸ United States Department of Agriculture Food and Nutrition Service. WIC Program: Average Monthly Benefit Per Person. Available at [http://www.fns.usda.gov/pd/25wifayvfgfd\\$.htm](http://www.fns.usda.gov/pd/25wifayvfgfd$.htm) Accessed March 04, 2014.

OVERALL GOAL: To provide all Harris County residents with access to fresh, nutritious, and high-quality foods.

BOLD ACTION STEPS				
Convene faith-based organizations to participate in regular healthy eating education and training through general meetings or seminars.	Provide healthier food options at the annual Houston Livestock Show & Rodeo.	Create a comprehensive awareness campaign to promote healthy eating and related health behaviors by leveraging social media and marketing/advertising techniques.	Work with Harris County restaurants to offer and/or identify healthier food options.	Support the implementation of healthy eating environments, nutrition education, gardening classes, and produce markets via strategies that leverage relationships and build capacity with ISD leadership, parents, staff, youth, etc.

INDICATORS OF SUCCESS BY 2019				
A network of faith-based organizations would be formed and have regular meetings that provide training related to healthy eating such that representatives will be ambassadors for healthy change in his/her respective community.	Healthier food options at the annual Houston Livestock Show & Rodeo would be available by 2016, supported by awareness campaign.	A Houston-based marketing campaign to promote healthy eating and health behaviors would be developed and implemented on an ongoing basis.	Harris County restaurants and other food establishments will partner with local public health entities to identify healthy food options on existing menus.	Develop and implement standards and/or programs in Harris County school districts that support healthy eating behaviors and related health behaviors.

SUBSTANCE ABUSE

Smoking is a pervasive health issue in the United States that contributes to significant health and financial burdens. The Centers for Disease Control attributes 1 in 5 deaths to cigarette smoking and secondhand exposure.¹⁹ In Harris County, 17.3 percent of adults are currently smokers and 13 percent of high school students will have smoked one or more cigarettes in a month.^{20,21} Difficulty of cessation makes early prevention efforts, such as education and early intervention, particularly important.

Alcohol abuse is another important issue, since prolonged use is not only associated with medical complications such as liver damage and cardiovascular disease, but also impacts community safety and mental well-being. Alcohol abuse has become a community issue as well, with Texas leading the nation in alcohol-impaired driving fatalities. Binge drinking is practiced by a reported 20.4 percent of adults within the past month in Harris County.²² In state-wide data, almost a quarter of high school students report binge drinking.²³

Additionally, prescription drug abuse is becoming a concern nationwide, with 15 percent of high school students participating in this behavior. Unintentional drug overdose deaths from prescription as well as illicit drugs have increased over the last two decades.²⁴ Focused education and changing societal norms will be instrumental in reducing risky behavior related to substance abuse.

¹⁹ Centers for Disease Control and Prevention National Center for Health Statistics. Available at: http://www.cdc.gov/tobacco/data_statistics/fact_sheets/tobacco_industry/low_yield_cigarettes/ Accessed January 27, 2014.

²⁰ Centers for Disease Control and Prevention National Center for Health Statistics. Behavioral risk factor surveillance system selected metropolitan/metropolitan area risk trends. Available at: <http://www.cdc.gov/brfss/smart/> Accessed January 27, 2014.

²¹ Centers for Disease Control and Prevention National Center for Health Statistics. Youth behavioral risk factor surveillance system. Available at: <http://www.cdc.gov/HealthyYouth/yrbs/index.htm> Accessed January 27, 2014.

²² http://www.dshs.state.tx.us/sa/research/0708phonesurvey/Summary_AdultSurvey2007_08_Travis-County-02192009.pdf

²³ National Institutes of Health. National Institute on Drug Abuse. Available at: <http://www.drugabuse.gov/drugs-abuse/prescription-drugs> Accessed January 27, 2014.

²⁴ Center for Disease Control and Prevention, Home & Recreational Safety. Available at: <http://wonder.cdc.gov/mortsql.html>

OVERALL GOAL: To reduce substance abuse in Harris County through health education efforts in community environments.

BOLD ACTION STEPS

<p>Implement mandatory, evidence-based adolescent empowerment programs in schools that emphasize decision-making and positive choice making skills.</p>	<p>Train health care professionals and community health workers in City and County Human Services settings on evidence-based smoking cessation programs.</p>	<p>Develop coordinated, integrated treatment and recovery system for all Department of State Health Services (DSHS) licensed treatment providers.</p>	<p>Create coordination of evidence-based, age-appropriate alcohol, tobacco, and other drug prevention services between existing agencies by leveraging technology.</p>	<p>Adopt a smoke-free or tobacco free environment in indoor work spaces, outdoor common areas and/or public spaces in Harris County.</p>
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INDICATORS OF SUCCESS BY 2019

<p>Decrease in number of school drop-outs or school suspensions due to alcohol, tobacco, and other drug use and misuse</p>	<p>Percent of professional workers trained.</p>	<p>Number of DSHS licensed treatment providers offering integrated treatment and recovery support services.</p>	<p>Number of agencies using centralized database to implement recommended programs.</p>	<p>Percent of areas becoming a smoke-free environment.</p>
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SEXUAL ACTIVITY

In 2012, approximately 1.4 million national cases of chlamydia were reported to the Center for Disease Control, marking the largest number of cases ever reported. Nearly half of the 19 million new sexually transmitted diseases (STD's) each year are among young people ages 15 to 24. Unintended health complications can result in teen pregnancy, low birth weight, and lifelong disease if the sexually transmitted disease remains untreated.

At a rate of 516 cases for every 100,000 people, chlamydia is the most commonly reported STD in the Houston/Harris County area.²⁵ The highest number of cases exists among young adults and the latest data indicates that the rate of chlamydia among people ages 15 to 24 is 2,761 for every 1,000,000 people in Harris County. Although gonorrhea rates have decreased among adolescents and young adults, rates continue to remain high, specifically among females²⁶ ages 15 to 19, with 956 cases for every 100,000 females.²⁷ Compared to chlamydia and gonorrhea, syphilis has relatively few outbreak cases each year, however, the disease has increased among adolescents and young adults. Among these cases, 78 percent are found within the male population.²⁸

According to the Houston Youth Behavior Survey, 52 percent of high school students had sexual intercourse during the time of the survey; 41 percent did not use a condom during their last sexual intercourse; and 88 percent did not use birth control pills, Depo-Provera, Nuva Ring, Implanon, or any IUD before last sexual intercourse.²⁹ Additionally, 25 percent of these students reported not receiving an education about AIDS or HIV.

According to the 2012 Houston School Health Profiles, 89 percent of high schools had a health education curriculum that addressed all eight national standards for health education, but only 56 percent taught four key topics related to condom use in a required course. Furthermore, only 83 percent of the schools had a registered, full-time nurse who provided health services to students at school.³⁰ Increasing the percentage of health education teachers who receive professional development in pregnancy and HIV prevention as well as comprehensive health services, policies, family support, and promotion of contraception and condom use will help decrease the prevalence of STD's in Harris County.

²⁵ The 2013 Houston Area Integrated Epidemiological Profile for HIV/AIDS Prevention and Care Services Planning. (2013) http://www.houstontx.gov/health/HIV-STD/2013_Epi_Profile%20--APPROVED--05-09-13.pdf (pg. 46)

²⁶ The 2013 Houston Area Integrated Epidemiological Profile for HIV/AIDS Prevention and Care Services Planning. (2013) http://www.houstontx.gov/health/HIV-STD/2013_Epi_Profile%20--APPROVED--05-09-13.pdf (pg. 48)

²⁷ The 2013 Houston Area Integrated Epidemiological Profile for HIV/AIDS Prevention and Care Services Planning. (2013) http://www.houstontx.gov/health/HIV-STD/2013_Epi_Profile%20--APPROVED--05-09-13.pdf (pg. 48)

²⁸ The 2013 Houston Area Integrated Epidemiological Profile for HIV/AIDS Prevention and Care Services Planning. (2013) http://www.houstontx.gov/health/HIV-STD/2013_Epi_Profile%20--APPROVED--05-09-13.pdf (pg. 50)

²⁹ HIV, Other STD, and Teen Pregnancy Prevention and Houston Students. (2013) http://www.cdc.gov/healthyyouth/yrbs/pdf/hiv/houston_hiv_combo.pdf

³⁰ HIV, Other STD, and Teen Pregnancy Prevention and Houston Students. (2013) http://www.cdc.gov/healthyyouth/yrbs/pdf/hiv/houston_hiv_combo.pdf

OVERALL GOAL: To promote and protect the sexual and reproductive health of residents in Harris County.

BOLD ACTION STEPS				
Require all health, education, social service, and law entity professionals licensed in Harris County to receive sexual health training.	Form a cohesive workgroup to develop comprehensive approaches to support sexual health education and training by leveraging expertise, asset mapping, resources, and pursuit of joint funding.	Promote longer-acting contraceptives for sexually active youth ages 15 to 24.	Implement an awareness and education campaign focused on sexual health.	Educate key stakeholders on use of Children's Health Insurance Program (CHIP) funding for comprehensive sexual health care for Harris County residents.

INDICATORS OF SUCCESS BY 2019				
Monitor and develop a tracking database that illustrates licensed professionals that receive sexual health training.	Map projects, programming, needs, and gaps.	Increase the percentage of long acting reversible contraception (LARC) users as measured by the local Youth Risk Behavioral Surveillance System (YRBSS).	Implement a sexual health awareness campaign.	Obtain authorization and legal permission to use CHIP funding for sexual health care.

QUALITY OF CARE AND ACCESS TO CARE

Harris County's robust economy, diverse population, world-renowned medical center, and expansive community clinics can aid in improving health care delivery and access. However, the lack of coordinated care amongst health care systems in the area has caused confusion amongst the public, duplication of efforts (testing, treatment, etc.), funding constraints for services, and fragmentation amongst providers. At the same time, the community has not adequately invested in or implemented coordinated health information exchange and digital records, and more consumer engagement is needed to improve healthcare efficiency and better value. Comprehensive health care delivery models are necessary to increase productivity, decrease redundancy, collaborate on funding, and support an integrated technological health care system. A robust and collaborative system in Harris County will set the standard for system navigation fluency and quality care throughout the entire country.

By 2023, the Congressional Budget Office estimates the Patient Protection and Affordable Care Act (ACA) will expand coverage to 25 million people. If medical coverage options enacted by the ACA are fully extended to residents in the Houston and Galveston region, an estimated 5.9 million individuals are expected to have health insurance coverage, a 1.7 million person increase from the current 4.2 million people.³¹

The number of uninsured residents is one of the greatest challenges in the region. As of 2013, 30 percent of Harris County residents and 26 percent of Texas residents were uninsured. Fifty-four percent of residents attribute their lack of insurance to the inability to afford coverage and 20 percent are ineligible due to employment status.³²

The Harris County Healthcare Alliance reports that 72 percent of the State's uninsured population has at least one full-time working person in their family and 10 percent have a person working part time. Yet, 73 percent of all low-wage workers in small businesses do not receive employer based health insurance coverage.³³ Uninsured persons are often inclined to use the emergency room as their source of primary care, which contributes to overcrowded emergency rooms and increases health care costs.

³¹ Texas Medical Association. (2012). Health Insurance Coverage in the Houston-Galveston Area Under the patient Protection and Affordable Care Act. The Journal of Texas Medicine. <http://www.texmed.org/Nov12Journal/>

³² Harris County Health Alliance. (2013). Houston and Harris County Uninsured Myths and Facts. http://www.hchalliance.org/images/cabinet/resources/Harris_County_Uninsured_Myths_and_Facts1.pdf

³³ Harris County Health Alliance. (2013). Houston and Harris County Uninsured Myths and Facts. http://www.hchalliance.org/images/cabinet/resources/Harris_County_Uninsured_Myths_and_Facts1.pdf

OVERALL GOAL: Increase access to coordinated and comprehensive healthcare services to support quality of care improvements among community residents.

BOLD ACTION STEPS

<p>Create a culture of health and wellness in Harris County by implementing a health literacy campaign.</p>	<p>Implement coordinated healthcare infrastructure with public health overlay leveraging technology.</p>	<p>Identify opportunities to increase value in health care by increasing quality of care, increasing patient satisfaction, and/or reducing costs.</p>
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INDICATORS OF SUCCESS BY 2019

<p>Form a task force/working group to address, conceptualize, implement, and evaluate a health literacy campaign that leverages standard marketing, and advertising channels and the digital platform.</p>	<p>Successful implementation of coordinated health information exchange system.</p>	<p>Bring together key stakeholders in a collective initiative focused on increasing healthcare value by decreasing costs and improving quality, implemented within the next four years and evaluated with the use of both process and outcome.</p>
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EDUCATION, INCOME AND EMPLOYMENT

Studies have shown that the level of education that one has strongly correlates with their corresponding employment outlook and opportunities, and their overall state of health and well-being. These studies show that those with higher education are found to have improved health outcomes. In Harris County, about 28.1 percent of the population, age 25 years and above have a Bachelor's degree or higher, while about 78.3 percent of the population, age 25 years and above are high school graduates or higher.³⁴

There is a strong correlation between a lack of education and adverse health outcomes such as increased morbidity and mortality rates and increased use of sick days from work. In Harris County, about 17.9 percent of its inhabitants live below poverty limits.³⁵ These effects play a role in the retention of students at a young age within the primary and secondary school system and the opportunities for higher education that are pursued thereafter. Poor physical and financial health impact the vitality of the workforce, economy, and organizational productivity.

To curtail low-income and unemployment rates, an emphasis may need to be placed upon strengthening early through post-secondary education programs, and especially on those serving at-risk communities. Seeking to increase youth retention in schools will have a direct effect on the amount of students seeking post-secondary education and proceeding to enhanced career and employment opportunities. Poverty rates will predictably decline as a result of this and the number of individuals knowledgeable about preventative health behaviors will aid in improving health outcomes through the reduction of disease prevalence and mortality.³⁶

³⁴ U.S. Census Bureau: State and County Quick Facts. Data derived from Population Estimates, American Community Survey, Census of Population and Housing, State and County Housing Unit Estimates, County Business Patterns, Non-employer Statistics, Economic Census, Survey of Business Owners, Building Permits, 2013.

³⁵ U.S. Census Bureau. Small Area Income & Poverty Estimates (SAIPE). Harris County, Texas. Data year: 2012. Available at [<http://quickfacts.census.gov/qfd/states/48/48201.html>]. 2012.

³⁶ United Nations Educational, Scientific and Cultural Organization (UNESCO), Education Transforms Lives, 11-12. 2013.

OVERALL GOAL: Strengthen primary education to increase graduation rates and career opportunities, to lead to stronger, healthier families and communities in Harris County.

BOLD ACTION STEPS

<p>Create a city-wide, mass branded awareness campaign to support universal early education.</p>	<p>Strengthen primary education by providing parents with opportunities to obtain GEDs, postsecondary careers, or a technical education.</p>	<p>Leverage the County Health System to engage and support parents of at-risk 0–4 year olds.</p>	<p>Boost higher education entrance and completion among students by collaborating with secondary education, higher education, and businesses.</p>	<p>Maximize federal nutrition and health programs.</p>
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INDICATORS OF SUCCESS BY 2019

<p>Funding to support universal enrollment in Harris County public schools for of all children who are 4 years old.</p>	<p>The number of adults obtaining their GED or a postsecondary degree or credential will increase by 20 percent.</p>	<p>All County Health system providers will establish joint initiatives with community- and faith-based organizations to connect parents of at-risk 0–4 year olds with counseling and other parental support services.</p>	<p>FAFSA completion and direct high school-to-college enrollment will increase by 20 percent across all area high schools.</p>	<p>County residents will have access to affordable, healthy foods through increased outreach and enrollment in the School Nutrition Program, Supplemental Assistance Nutrition Program (SNAP) and Women, Infant, and Children (WIC).</p>
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FAMILY AND SOCIAL SUPPORT

The state of one's individual health is heavily dependent upon the support provided in family and social environments. Inadequate resources and lack of public knowledge from these environments to foster healthy behaviors are reflective of higher cases of morbidity and mortality from varying medical conditions. Studies have revealed that access to an outlet providing social support such as club-based organizations and community programs encourages people to not only lead healthy lifestyles, but to help maintain these habits through the accountability provided by these measures.³⁷

Major constituents to a healthy lifestyle are a proper diet and adequate daily physical activity. Deficiencies in these areas attribute to the increasing prevalence of obesity and obesity-related health conditions such as diabetes, hypertension, coronary heart disease, and respiratory problems.³⁸ The 2012 State of Health in Houston/Harris County reports that 34.4 percent of high school students are overweight or obese, compared to the nation's rate of 28.8 percent.³⁸ Among surveyed adults age 20 and older, 65.8 percent were reported as being overweight or obese, compared to the national average of 69.2 percent.³⁸ Ethnic minorities constitute a large percentage of the Houston and Harris county population at 74.34 percent, with non-white Hispanics representing the largest ethnic group at 43.8 percent of the total population.³⁹ To improve social and personal health outcomes, social support services must be accessible and culturally relevant to increase general health competence and compliance.

In order to effectively improve health outcomes through the utilization of support services, efforts should be placed upon increasing access to social, educational, and recreational services to the public.⁴⁰ These elements will impact families' understanding of health factors, awareness of resources, and encourage conscious participation in programs and activities that improve their quality of health physically, socially and mentally.

³⁷ Cohen, S., Gottlieb, B., & Underwood, L. (2000). Social relationships and health. In S. Cohen, L. Underwood, & B. Gottlieb (Eds.), *Measuring and intervening in social support* (pp. 3-25). New York: Oxford University Press.

³⁸ Harris County Health Care Alliance, *The State of Health in Houston/Harris County*. 2012. Available at [<http://www.houstonstateofhealth.org>].

³⁹ U.S. Census Bureau: State and County Quick Facts. Data derived from Population Estimates, American Community Survey, Census of Population and Housing, State and County Housing Unit Estimates, County Business Patterns, Non-employer Statistics, Economic Census, Survey of Business Owners, Building Permits.

⁴⁰ World Health Organization (WHO), Commission on Social Determinants of Health. *Closing the Gap in a Generation: Health equity through action on the social determinants of health*. Available at [http://www.who.int/social_determinants/en].

OVERALL GOAL: Increase access to and utilization of social support services by residents in Harris County.

BOLD ACTION STEPS				
Increase support for employers to adopt and implement childcare policies to support their employee base.	Foster collaboration between organizations that offer culturally relevant and integrated social services in the continuum of higher education and that are geared to increasing degree completion among students.	Reinstate and reinforce physical education in all schools by actively collaborating with ISD leadership, staff, parents and students.	Invite and engage residents to gather for culturally relevant social, health, and lifestyle activities through strategically located (or central) community spaces.	Increase access to affordable mental health services and assessment centers in communities throughout Harris County.

INDICATORS OF SUCCESS BY 2019				
Review and support organizational policy changes to adopt and implement childcare for employees.	Complete assessment of community assets and resources that can be centrally archived and leveraged to meet the social needs of students pursuing degree completion and higher education.	Agreement in writing by all Independent School Districts (ISD's) of a commitment to reinstate and reinforce physical activity and education.	Agreement in writing by all Independent School Districts (ISD's) of a commitment to reinstate and reinforce physical activity and education.	Increase the number of affordable mental health services and assessment centers in Harris County.

COMMUNITY SAFETY

In Texas, only a third of non-violent offenders are paroled each year compared to 40 percent of eligible aggravated sex offenders who are paroled. Many non-violent offenders are incarcerated until they become elderly and sick which cost the state tens of millions of taxpayer dollars each year.⁴¹

The County Health Rankings Model indicates that the violent crime rate is 834 per 100,000 people in Harris County.⁴² In Harris County, education, crime, health, and economic vitality are interconnected,⁴³ demonstrating that non-white men and women have worse outcomes than whites at nearly every level of educational attainment.

Additionally, gender gaps in unemployment and wages are highest among those without high school degrees and Harris County (84 percent) currently ranks below Texas state (86 percent) graduation rates. At every level of education, women have higher unemployment rates and earn lower wages than their male counterparts in the county.⁴⁴ As a result, there is a significant racial and gender disparity in the labor market.⁴⁵

The Harris County 2013–2017 Consolidated Plan was recently developed to improve the quality of life in low- and moderate-income areas of the county. The availability of recreational facilities and the feeling of one's safety in their community can influence the residents' choice whether to engage in physical activity and healthy behaviors. The 2013–2017 Consolidated Plan will address the Harris County's housing, homelessness, and non-housing needs over the next four years.⁴⁶ However, a more collaborative plan across jurisdictions may help strengthen this community safety strategic plan and ensure the appropriate level of security in each area.

⁴¹ Texas Civil Rights Project. (2012) <http://www.texascivilrightsproject.org/5074/rethinking-criminal-justice-in-texas/>

⁴² Robert Wood Johnson Foundation. (2013) Violent Crime Rate. <http://www.countyhealthrankings.org/app/texas/2013/measure/factors/43/data/sort-0>

⁴³ USC Program for Environmental and Regional Equality. (2013). An Equity Profile of the Houston-Galveston Region. Houston_June2013_FINAL-1.PDF 2013 (pg. 27)

⁴⁴ USC Program for Environmental and Regional Equality. (2013). An Equity Profile of the Houston-Galveston Region. Houston_June2013_FINAL-1.PDF 2013 (pg. 41)

⁴⁵ USC Program for Environmental and Regional Equality. (2013). An Equity Profile of the Houston-Galveston Region. Houston_June2013_FINAL-1.PDF 2013 (pg. 27)

⁴⁶ Harris County 2013 – 2017 Consolidated Plan Executive Summary. (2013) http://www.harriscountytexas.gov/CmpDocuments/103/py%202003-2007%20Consolidated%20Plan/Executive_Summary.pdf

OVERALL GOAL: Increase access to coordinated and comprehensive healthcare services to support quality of life improvements among community residents.

BOLD ACTION STEPS				
Expand number and use of specialty courts to address non-violent, low-level crimes in Harris County.	Increase early childhood education opportunities to lower truancy and increase high school completion.	Improve information sharing between law enforcement agencies, by providing a county-wide clearing house for justice information.	Develop cross-jurisdictional, county-wide law enforcement community safety strategic plan.	Decrease prevalence of violent crime defined as homicide, sexual assault, and assault among young offenders between the age of 17 and 25.

INDICATORS OF SUCCESS BY 2019				
80 percent of all Houston/Harris County courts to address non-violent, low-level crimes.	100 percent increase in the number of children enrolled in preschool in Independent School District's throughout Harris County by educating parents about the benefits of early childhood education, sharing resource information, transportation assistance, etc.	Streamlined database in which justice information is exchanged.	Develop and publicize county-wide law enforcement community safety strategic plan.	20 percent decrease in the number of reported aggravated offenses.

ENVIRONMENTAL QUALITY AND THE BUILT ENVIRONMENT

Despite the many advantages of a populous and diverse metropolis such as Harris County, there are also a number of ills associated with a county of this make-up and environmental condition. Among the concerns in Harris County are high ozone and other indicators of poor air quality, as well as composition of the built environment such as sufficient lighting, sidewalks, bike lanes, and access to transportation.

Emissions by different area industries combined with those caused by transportation have led to the continued formation of ground level ozone or smog, and caused the Houston region to be classified as a severe nonattainment area for ozone.⁴⁷ Despite nonattainment, the region has experienced marked improvement in the number and severity of bad air days over the last 30 years. However, these levels have still averaged around 0.087ppm (parts per million) per an 8-hour time period, which exceeds the national ozone standard of 0.075ppm.⁴⁸

An area with high pollution and poor air quality poses a great public health risk, leading to the development of negative health outcomes such as allergies, asthma, bronchitis, and other respiratory conditions.

The region plans to address these and other issues through a sustainable development plan called *Our Great Region 2040*. This high-level, 13-county plan focuses on challenges and opportunities in six key areas: economic development, environment, healthy communities, housing, transportation, and resiliency.⁴⁹

Other concerns about the built environment in Harris County include accessibility to services and resources which promote healthy behaviors, such as recreational parks; grocery stores within convenient distance; and affordable housing in safe neighborhoods. It has been well documented that neighborhoods with these resources foster better health outcomes for their residents.⁵⁰

⁴⁷ Harris County Pollution Control Services. Air Quality, Water Surveillance, Ozone, 2013. Available at [<http://www.harriscountytexas.gov/pollutioncontrol/airpage.aspx>].

⁴⁸ National Prevention Council, National Prevention Strategy, Washington, DC: U.S. Department of Health and Human Services, Office of the Surgeon General, 2011.

⁴⁹ Texas Commission on Environmental Quality. Air Quality Index Report. 2013. Available at [http://www.tceq.state.tx.us/cgi-bin/compliance/monops/aqi_rpt.pl].

⁵⁰ Houston-Galveston Area Council, Our Great Region 2040. 2013. p.6-14. Available at [http://www.ourregion.org/OurRegion2040Supporting_Documents/OurGreatRegion2040-FINAL.pdf].

OVERALL GOAL: Implement *Our Great Region 2040*, where Houston will be viewed as one of the world's greatest places to live, work, and succeed.

BOLD ACTION STEPS

<p>Create neighborhood green space in neighborhoods where levels of green space do not currently exist, hence enabling bicyclists and pedestrians to connect safely to bayou greenways and be physically active.</p>	<p>The City of Houston will adopt a general plan for the future land-use that supports healthy communities.</p>	<p>Establish an affordable housing investment plan, to strengthen housing conditions through state and local laws.</p>	<p>Organize a consortium of higher education institutions focused on land use and healthy living in Houston.</p>	<p>Begin to implement <i>Our Great Region 2040</i> within the next 5 years.</p>
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INDICATORS OF SUCCESS BY 2019

<p>Track the number of neighborhood greenways created in communities throughout the county.</p>	<p>Successful adoption of a general plan by the Houston City Council.</p>	<p>Growth of investment in affordable, healthy housing.</p>	<p>Formation of consortium.</p>	<p>Endorsements of <i>Our Great Region 2040</i> by local government bodies.</p>
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Conclusion

This Houston and Harris County Blueprint for Action report provides an overview of the many factors that determine the health and vitality of the Harris County region. While the task of addressing each of these major issues may seem daunting, the reality is that these factors are connected, and improvements in one area will contribute to improvements in another. For example, improving post-secondary education and boosting high school graduation rates will better prepare the workforce, and reduce disparities in income and unemployment. Improvement to the physical environment, through expansion of green space and improvements to transportation, can benefit health by encouraging more physical activity, and promote economic activity by connecting people with their places of employment.

Harris County—with its diverse population and potential for economic growth—serves as a model for the United States as the country undergoes a demographic shift. By 2043, the United States will be a majority people-of-color nation. However, the risk of inequality and disproportionate burden remains high. Disparities must be addressed proactively to ensure a healthy future for Houston. There is hard work ahead, but with an inclusive, collaborative, and cross-sector approach, and by following the Bold Actions outlined in this Blueprint, Houston and Harris County will be on a continued path to success.

Demographic County Health Rankings

	Harris County	Texas	National Benchmark
DEMOGRAPHICS			
Population	4,180,894	25,674,681	N/A
% below 18 years of age	28%	27%	N/A
% 65 and older	8%	11%	N/A
% Non-Hispanic African American	18%	12%	N/A
% American Indian and Alaskan Native	1%	1%	N/A
% Asian	6%	4%	N/A
% Native Hawaiian/Other Pacific Islander	0%	0%	N/A
HEALTH OUTCOMES			
MORTALITY			
Premature Death	6,995	6,928	5,317
MORBIDITY			
Poor or fair health	18%	18%	18%
Poor physical health days	3.6	3.7	2.6
Poor mental health days	3.1	3.5	2.3
Low birth weight (LBW)	8.6%	8.4%	6.0%
HEALTH FACTORS			
HEALTH BEHAVIORS			
Adult smoking	16%	18%	13%
Adult obesity	29%	29%	25%
Physical inactivity	23%	25%	21%
Excessive drinking	17%	16%	7%
Motor vehicle crash death rate	12	15	10
Sexually transmitted disease	545	476	92
Teen birth rate	60	60	21

Demographic County Health Rankings

	Harris County	Texas	National Benchmark
CLINICAL CARE			
Uninsured	30%	26%	11%
Primary care physicians**	1,806:1	1,766:1	1,067:1
Dentists**	1,788:1	2,200:1	1,516:1
Preventable hospital stays	62	72	47
Diabetic screening	81%	82%	90%
Mammography screening	59%	61%	73%
SOCIAL AND ECONOMIC FACTORS			
High school graduation**	84%	86%	
Some college	54%	57%	70%
Unemployment	8.2%	7.9%	5.0%
Children in poverty	29%	27%	14%
Inadequate social support	25%	23%	14%
Children in single-parent households	34%	33%	20%
Violent crime rate	834	483	66
PHYSICAL ENVIRONMENT			
Daily fine particulate matter	9.3	10.2	8.8
Drinking water safety	2%	6%	0%
Access to recreational facilities	7	7	16%
Limited access to healthy foods**	7%	9%	1%
Fast food restaurants	52%	52%	27%

*90th percentile, i.e. only 10% are better.

**Data should not be compared with prior years due to changes in definition.

Note: blank values reflect unreliable or missing data

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Harris County Medical Society

Cynthia Valdez Aguries
Latino HIV Task Force

Aijaz Ali Khowaja
Ibn Sina Foundation

Melissa Arredondo
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Diaa Alqusairi
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Alina Batool
Community Healthy Choice

Les Becker
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Pamela Berger
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Angela Blanchard
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Tony Canales
Telemundo

Jo Carcedo
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Geoff Carleton
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