

Discussion Guide for the 2017 Minnesota Statewide Health Assessment

MARCH 2018



Discussion Guide for the 2017 Minnesota Statewide Health Assessment

Minnesota Department of Health
Center for Public Health Practice
Healthy Minnesota Partnership
PO Box 64975
St. Paul, MN 55164-0975
651-201-3880
health.ophp@state.mn.us
www.health.state.mn.us

Upon request, this material will be made available in an alternative format such as large print, Braille or audio recording. Printed on recycled paper. Find materials relating to statewide health assessment discussions online: [2017 Minnesota Statewide Health Assessment Discussions](#).

Contents

2017 Minnesota Statewide Health Assessment	2
Why a discussion guide?	2
Part One: Preparing for the discussion	3
The purpose	3
Participants	4
Focus	4
Questions	4
Part Two: Leading the discussion.....	5
Room and materials.....	5
Discussion structure.....	6
Appendix: Facilitation tips.....	9
Staying on track	9

2017 Minnesota statewide health assessment

In late 2017, the Minnesota Department of Health and the Healthy Minnesota Partnership published the [2017 Minnesota statewide health assessment](#). The assessment documents that on average, Minnesota does well overall when it comes to health, economic opportunity, and civic engagement. The averages, however, mask a number of stark inequities affecting health in everything from education to employment, rates of home ownership and incarceration. The assessment raises and answers the questions:

- Who is healthy? Who is not?
- What conditions shape health for different populations in Minnesota?
- What do we have—and what do we need—to assure that all people in Minnesota can enjoy healthy lives and healthy communities?

The assessment clarifies how factors like economic opportunity, living conditions, and social connections shape health in Minnesota communities.

People: Describes the demographic characteristics of the state, including aging and increasing racial and ethnic diversity.

Opportunity: Shows how opportunities for education, income, housing and transportation shape health.

Belonging: Connects social inclusion/exclusion and social connections to health throughout the lifespan.

Nature: Connects interactions with the natural environment to the health of people and nature itself.

Why a discussion guide?

While the assessment provides an overall picture of health and the conditions for health, it does not go into detail on all possible topics, nor does it give action steps to improve health. However, the assessment's data and the framing provide an entry point for many people and institutions across the state to expand their understanding of how health is created and to consider their contribution to creating a healthier Minnesota.

Discussions focused through the frame of the assessment—opportunity, nature and belonging—can broaden conversations about what creates health. They can deepen understanding by connecting the information in the assessment to the real-life experiences and conditions of people across Minnesota.

Discussions can stimulate the collective imagination about how to strengthen the conditions for health. They can help people identify actions and partnerships that can make a difference. For example, community planning and organizing, adopting new or changing existing organizational policy, or crafting state and local legislation.

Using the framing provided by the assessment, this discussion guide will provide guidance for preparing and leading small group discussions about health. This discussion guide includes a set of questions to use, and things to consider, in preparation for the discussions, including:

- What you hope for as the results of the discussion/s you will hold
- Who should/could participate in the discussion/s
- Which section of the assessment should be your focus
- Which questions will best suit your purpose

Part one: Preparing for the discussion

The key decisions you will need to make as you prepare to hold a discussion of the *2017 Minnesota statewide health assessment* are:

- What is your purpose—what do you hope to accomplish?
- Who should be involved in the conversation?
- What focus will be most fruitful for your purpose and your participants?
- Which questions will work best for your purpose and participants?
- What physical arrangements will best facilitate the group's discussion?

The purpose

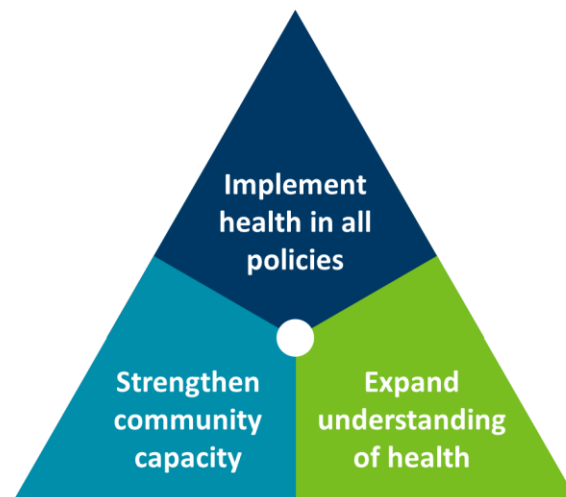
Being clear about your purpose will help you know who should be engaged in the conversation and what issues you want to explore. The Triple Aim of Health Equity might serve as a useful tool for helping you think about what you hope will result from your discussion.

Expanding the conversation around health: Do you hope to stretch participants' thinking about what creates health and who is responsible?

Health in all policies: Do you want to explore the range of policies that affect the conditions for health featured in the assessment?

Strengthening communities to create their own healthy future: Do you hope to build the capacity of your community or group to make a difference for health and well-being? Do you hope to consider the assets of your community and the potential for collective action?

Write out your purpose statement below. Share the purpose statement in the event invitation.



Triple Aim of Health Equity

- Implement a health in all policies approach with health equity as the goal
- Expand our understanding of what creates health
- Strengthen the capacity of communities to create their own healthy future

Purpose:

Participants

Who needs to be part of this discussion so you can meet the purpose of the conversation?

You may want to select your participants carefully, or simply want to extend an open invitation and see who shows up. Perhaps you will receive an invitation to hold this discussion from an existing group, or have a group of your own already in mind. Knowing who the participants are will help you plan the discussion. Some questions to ask yourself are:

- How big will the group be? The size of the group will affect how you facilitate the conversation.
- Do they share an identity or affiliation? Are they part of a particular organization, agency, community or team? A shared affiliation will factor into the purpose of the discussion.
- Are they focused on a particular project, issue or field? This also could affect the purpose and which section of the assessment you focus on.
- Do they meet or work together on a regular basis, and already know each other, or are they coming together only for this discussion? This will determine if you need to allow time for introductions and develop comfort for participants to share their thoughts and ideas.
- Are they coming to the discussion as part of their work or primarily as community members?
- Do they have the desire and the capacity to move to collective action? It may be easier for groups that share an identity or are part of a single organization or team to think collectively about meaning and action.

Focus

The *2017 Minnesota statewide health assessment* contains a lot of detailed important information. Your discussion will go deeper and be more productive if you focus on just one of the three main content sections: **opportunity, belonging, or nature**.

To choose a focus, consider:

- The group's particular project, issue or field
- The potential for advancing the group's purpose or goals
- The potential for new insight or connections to emerge in the discussion
- The preference of discussion participants (if possible, ask them in advance)

A brief overview of the *2017 Minnesota statewide health assessment* is available online to share with the group: [2017 Minnesota statewide health assessment discussions](#). You will choose just one of the main sections (opportunity, nature, or belonging) to have participants to read aloud.

Questions

Once your focus is clear, you will need to select questions to guide the discussion.* These conversations should be about more than sharing information; the questions in this guide will help to generate a rich conversation, build connection, and possibly even produce some ideas for action.

Choose questions and customize them to fit your group, context and goals. There are three sets of possible questions.

* Please read the "Staying on track" facilitation tips in the Appendix. This "expanded" conversation on health may be new to your group, and these tips will help you keep them in the kind of conversation that you want to have.

Connecting to experience

The first set of questions opens the conversation by having participants connect the focus area to their own personal and/or professional experience. This type of questions can get the conversation started; and they can deepen the conversation about the focus area. These are questions designed to connect to participants' own experience, both personal and collective. These are the "What does this mean to me?" questions.

Making meaning

The second set of questions will help move the participants from personal reflection toward action by starting to reveal the implications of this way of thinking about health for the work they do. These are questions designed to identify relevance, importance, implications. These are the "So what?" questions.

Moving to action

The last set of questions helps move participants from an interesting conversation to active involvement in changing the conditions for health. These are questions designed to identify possible actions. These are the "Now what?" questions.

Part two: Leading the discussion

Room and materials

Plan carefully so that the room arrangements and materials facilitate and do not distract from the conversation you are aiming to have.

Room

- Secure a space that will accommodate the size of the group—small or large. Make it as comfortable and welcoming as possible.
- Make sure that the arrangement of the furniture allows full participation by all. Many people are uncomfortable speaking from the back of the room, and if participants sit too far away from each other they are less likely to feel involved.
- Consider how to meet accessibility needs.
- If you can, and your budget allows, provide beverages and snacks. Coffee/tea and food encourage attendance, and help people feel more at home.

Materials

- Have copies of the brief overview handout of the *2017 Minnesota statewide health assessment* for participants (find it online: [2017 Minnesota statewide health assessment discussions](#)).
- Write your purpose statement (see p. 3). You could make copies for attendees, write it on an easel or white board, or be prepared to share it verbally.
- Familiarize yourself with the assessment overview and the WHO definition of health on the first page of the overview.
- Use a highlighter to mark or underline the section (opportunity, nature, or belonging) and the questions you will start with, in the text below.

You have readied the room and the materials. Now it is time to lead the discussion! (Note that the amount of time each part of the conversation takes will vary depending on the size of the group.)

Discussion structure

Note: the actual timing of each section depends on how much time, total, you have for the discussion. You could choose to have just two rounds of discussion, for example, instead of three.

Welcome and introductions

5-10 minutes

- Introduce the purpose and structure of the discussion.
- Welcome everyone. Introduce yourself.
- Share the purpose and/or goals of the discussion.
- Clarify how much time you have.
- If everyone does not already know one another, have participants introduce themselves.

Introduce the focus

5-10 minutes

- Distribute the handouts.
- Point out that the statewide assessment and this discussion take a broad view of health and of what creates health that may not be our “normal” way of thinking; it may take some stretching.
- Note that everyone has their own perspective and exposure to these issues, and each person should feel free to share at the level they feel comfortable.
- If useful, read or ask a volunteer to read the definition of health.
- Introduce the focus. Read framing paragraphs for the selected section(s) aloud or ask volunteers to take turns reading aloud.
- Note that this is a particular way of thinking about opportunity, nature or belonging. Point out the list of topics addressed in this section of the assessment. If desired, ask the group to name other topics that could fit based on your reading of the framing paragraphs.

First question(s): Connecting to experience

15-20 minutes

Open the conversation with a focus on each person’s personal experience—in other words, the statewide health assessment is about all of us, not just “other” people. For this question series and the two that follow, select the most appropriate questions for your discussion from the bulleted lists provided. Use additional questions as needed or desired.

- In what ways has [opportunity/nature/belonging] as described in the assessment had a positive impact on your health or allowed you to thrive?
- How does [opportunity/nature/belonging] as described in the assessment reflect your own experience or the experiences of people in your community?
- How does [opportunity/nature/belonging] as described in the assessment reflect the experience of communities you engage?
- What in this way of thinking about health and how health is created/supported rings true for you?
- What else could you include in this list of topics addressed in the [opportunity/nature/belonging] section of the assessment?

Allow five minutes for pair/triad discussions (about two minutes for each person) and 10 minutes to share back from the pair discussions.

Second question/s: Making meaning

15-20 minutes

As you think about [opportunity/belonging/nature] as described in the statewide health assessment...

- What is the value of [opportunity/belonging/nature] to your community?
- How do you support or enable [opportunity/belonging/nature] for others?
- How does your work support [opportunity/belonging/nature] _____?
 - Options to fill in the blank: “for others,” “in your community,” “in communities you engage,” “in communities you support,” or whatever makes sense for your group.
- What does this way of understanding health mean for your community?
- What are the implications for your work?
- What might this mean your partners, supporters, or those you work with?
- How could you use the framing of the assessment or the connections it makes to advance or add power to your efforts?
- How could you use the framing of the assessment or the connections it makes to support the conversations you want to have?

Allow five minutes for pair/triad discussions (about two minutes for each person) and 10 minutes to share back from the pair discussions.

Third question/s: Moving to action

15-20 minutes (Optional: 15 minutes to prioritize[†])

Based on how the statewide health assessment describes [opportunity/belonging/nature] and our discussion so far...

- What opportunities to strengthen conditions for health does this raise for you?
- What existing groups or partnerships might you want to connect with or join?
- What can you do—even within your current constraints—to strengthen the conditions for health (in your community)?
- What can you do—even within your current constraints—to strengthen [opportunity/belonging/nature] (in your community)?
- What is a next step for you? For example, an action you will take, a person you will talk with, a question you will explore...

Allow five minutes for pair/triad discussions (about two minutes for each person) and 10 minutes to share back from the pair discussions.

Optional: If time allows and the group wants to, give them another 15 minutes to prioritize actions and assign responsibility.

[†] If there is no desire or capacity to take action, skip to conclusion/wrap-up.

Conclusion/wrap-up

10-15 minutes

Conclude in a way that allows participants to share. Ways to do this include asking:

- “What is one thing you are taking away (or want to hang on to) from this discussion? This might be an insight, a next step, or a question.”
- “What is one word that describes how you are feeling about this conversation or what this discussion was like for you?”

If possible, allow each person to respond. If time is limited, ask for a few or a handful of responses.

Name any next steps. Thank the participants!

Discussion Notes:

Appendix: Facilitation tips

As the discussion leader/facilitator, set the tone and expectations for the meeting, and make it clear for participants what they are to do. For example:

- Name your intention to give all participants a chance to participate—you can refer back to this if needed during the discussion
- Introduce the right to pass—no one should have to share if they are uncomfortable or need more time to think
- Set time expectations—make it clear at the beginning when you plan to end; state how much time you have for responses to a particular question or for each person to speak
- Give everyone a moment to think before speaking—this help the introverts participate and helps extroverts be prepared to get to the point
- Model active listening—this encourage others to listen as well

There are many ways to guide the conversation while participants do most of the speaking. Some reminders you could share include:

- “‘Community’ can mean many things—we don’t have to be restricted to just one definition...”
- “You can respond from any of your roles or identities, personal or professional...”
- “We are thinking ‘big’ about health and what creates health...we are expanding the conversation...”
- “When you think about this, try to keep to the understanding of [opportunity/belonging/nature] as described in the statewide health assessment, which might be a little different than how you are used to thinking of it....”

If there will be more than five or six participants, consider having some conversations in pairs or triads to give everyone a chance to speak and be heard. Pair or triad conversations can also be useful in a group where people do not know each other, where participants may be reluctant to speak in the larger group, or where they are not accustomed to sharing personal reflections.

When you bring participants back to the large group after pair or small group conversations, some statements you can use are:

- “Let’s take ___ minutes to hear a bit of what you had to say.”
- “Who would like to share one thing that came up for you?”
- “Does anyone have something different to share?”
- “Can we hear from one more person?”

If possible, have one facilitator plus one “listener” for your conversation. The listener may hear or notice things that the facilitator does not, and can take notes.

As you explain or clarify things, do not use jargon that assumes everyone in the room will know that you mean. If participants use acronyms or jargon, ask them to please explain or clarify.

Staying on track

The overall intention of this discussion guide is to expand the conversation about health, and the imagination of what is possible in creating the conditions for health. Themes that are more familiar (e.g., everyone should eat right, exercise, and get health care) can derail these new and emerging kinds of conversation about health.

While individual behaviors and health care are not unimportant, they can take the conversation in a direction that reinforces a limited understanding of what creates health rather than expanding the conversation. Try to help participants stay in a discussion about conditions for everyone that promote health in populations.

During the discussion, be attentive to ways participants might get off track. For example:

- Are participant comments about the individual, independent actor? Are they raising issues focused on health care?
- Are participants focusing on individual behaviors, or services for individuals?
- Are participants thinking of their “usual” partners?

If you notice any of the above happening, gently but carefully use the opportunity to remind the group that the *2017 Minnesota statewide health assessment* takes a very big view of health and the conditions that create and support health that goes beyond individual choices and health care. You can explain that we are trying to stretch beyond our usual thinking and expand our possibilities for partnerships and for action. You might also simply ask if anyone has a different answer or way of thinking about it or if anyone has or can think of a different perspective that hasn't been brought into the discussion yet.