HiAP Preparedness Guide

A Guide to Taking a Health in All Policies Approach to Public Health Preparedness

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Contents

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Public health preparedness requires cross-sector collaboration and coordination to protect community health and safety. This guide provides a framework to improve the depth and effectiveness of collaboration at all stages of preparedness, as well as examples of how to implement the framework and how preparedness activities map to the Health in All Policies (HiAP) framework so that any preparedness practitioner can integrate a HiAP approach into their practice.

This guide contains an introduction to HiAP and is organized using the four phases of the disaster management cycle. Each section begins with a description of the disaster cycle activities that take place and the partners that may provide support during each phase, as well as a chart that maps the activities to the seven HiAP strategies. Each section also describes how one or more HiAP tool(s) can be applied in that phase.

HiAP & Preparedness

According to the World Health Organization, HiAP is "an approach to public policies across sectors that systematically takes into account the health implications of decisions, seeks synergies, and avoids harmful health impacts in order to improve population health and health equity." Public health is impacted by policies, plans, programs, and projects across private, public, and community-based organizations. Healthcare providers and public health officials alone do not have the tools, knowledge, or capacity to address the root causes of all health and equity challenges, so collaboration with other sectors is essential. Many health departments already employ these strategies in their day-to-day operations, though they may not use the term "Health in All Policies."

Public health officials can use the HiAP framework detailed in this guide to create a multi-sector approach to disaster preparedness. While disasters have large-scale impacts on community health, safety, and wellbeing, they can also be inflection points to examine policies and practices, develop and deepen partnerships, engage the community around public health issues, and collect and use public health data to forge a healthier community.

Each of the seven HiAP strategies can be integrated into disaster preparedness activities. The graphic below shows how each strategy corresponds to a phase of the disaster management cycle.

Seven Health in All Policy (HiAP) Strategies

Below are the seven HiAP strategies as defined by Gase, et. al (2013).

Develop & Form Cross-Sector Collaborations

Collaboration, which involves coordination, cooperation, and communication, is an integral part of emergency operations but often fails due to poor preparation and a lack of relationship building. A HiAP framework can help partnering organizations share governance, communication, values, and common goals within a jurisdiction.

Incorporate Health into Decision Making

Health officials should strive to participate in the recovery planning effort and ensure that health and wellbeing is considered in all decisions and actions, rather than limited to health protection and disease control functions.

Enhance Workforce Capacity

Emergency management professionals exercise and train for disasters in the preparedness phase. Consistently conducting emergency exercises ensures that responders and community members know who to call, what to do, and how to manage resources before a disaster occurs.

Coordinate Funding & Investments

Preparedness staff can work with partners to develop cooperative agreements and contracts that include health equity criteria. During the mitigation and recovery phases, investments in rebuilding and revitalization projects should be distributed equitably.

Integrate Research, Evaluation & Data Systems

In the mitigation phase, include data and research from governmental and private actors to evaluate policies, plans, programs, and projects (P4s) for public health and safety impacts. HiAP tools such as health impact assessments or health impact reviews examine the health and equity impacts of existing and proposed P4s.

Synchronize Communication & Messaging

Consistent communication with partners and community members is paramount in all phases of the disaster cycle. Establishing standard messages about response measures such as evacuations, boil water notices, and the location of shelters can direct residents to safety and prevent illness and death.

Implement Accountability Structures

Ensure a single designated authority oversees the disaster response and that authority is accountable up, down, and across the incident. Creating shared accountability measures can help establish trust with response teams and communicators and can hasten recovery.

HiAP Framework for the Disaster Management Cycle

The Disaster Management Cycle emerged to describe how society and government can reduce the impacts of disasters. The model aims to guide disaster management before, during, and after a disaster. During the four phases of the disaster cycle, the model proposes specific actions that, when executed properly, can reduce loss of life and property and help expedite recovery efforts. These actions can be integrated into a HiAP framework. Each phase is outlined below, and sample activities for each phase are mapped to one of the seven HiAP strategies.

Strategies	Mitigation	Preparedness	Response	Recovery
Enhance workforce capacity	✔	✔		
Coordinate funding and investments	✔	✔	✔	✔
Integrate research, evaluation, and data systems	✔	✔	✔	✔
Synchronize communication and messaging	✔	✔	✔	✔
Implement accountability structures	✔	✔	✔	
Develop and form cross-sector collaborations	✔	✔	✔	✔
Incorporate health into decision-making	✔	✔	✔	✔

Mitigation Phase

The mitigation (or pre-disaster) phase aims to prevent or minimize the impacts of future disasters through planning. This is also known as disaster risk reduction. This phase involves activities such as assessing building codes and policies, hazard mapping, identifying vulnerable populations and locations, and addressing buildings in a floodplain. Many of the activities in this mitigation phase map directly to HiAP strategies.

In the mitigation phase, community needs assessments are vital to identify gaps in capacity. Addressing deficiencies in a jurisdiction's disaster management plan begins with recognizing physical assets, skills, and capacities. Standardized training for conducting needs assessments can improve the dissemination of accurate information. HiAP strategies that can be employed in the needs assessment process include using health data to inform mitigation efforts, creating diverse coalitions, and including health in urban planning processes like building code enforcement.

The mitigation phase is highly dependent on key stakeholders, such as code enforcement officials and public housing providers, to inform emergency managers about policies that can minimize the impacts of disasters. Establishing a coalition of diverse stakeholders during this phase ensures that the needs and lived experiences of all communities are considered. Stakeholders provide valuable insight into cultural norms and relationships as well as physical and social vulnerabilities.

Although it can be challenging to convince policy makers to prioritize potential risk, mitigation is the most cost-efficient phase of the disaster management cycle, and therefore it remains important for emergency management and public health officials to promote mitigation activities. The table below shows preventative actions that take place in the mitigation phase and the HiAP strategy that can be applied.

Mitigation Activity HiAP Strategies

Sample Mitigation Activity	HiAP Strategy
Identify and engage key stakeholders	Develop and form cross-sector collaborations
Create a mitigation plan	Coordinate funding and investments
Conduct a community needs assessment	Integrate research, evaluation, and data systems
Identify and address gaps in capacity	Enhance workforce capacity

Case Study – Synchronize Communication and Messaging

Allegheny County Health Department

The Allegheny County Health Department (ACHD) has worked in six priority Black communities through its partnership with local organizations to provide COVID-19 and influenza vaccinations. ACHD received supplemental funding from CDC to address prevention and mitigation of COVID-19 in these neighborhoods as part of the Racial and Ethnic Approaches to Community Health (REACH) Program. This work focused on implementing activities in the following strategies:

- Increased range of trusted community voices supporting vaccine education and delivery
- Increased availability of community or population-specific messages
- Increased number and diversity of vaccination opportunities in communities experiencing disparities
- Increased number and range of partnerships or collaborative activities between providers and community organizations
- Increased number and range of healthcare providers recommending influenza and COVID-19 vaccines to patients

Specific activities the coalition undertook to increase the messaging from trusted community voices were monthly 'Ask a Black Doctor' Facebook Live events, public service announcements, weekly interviews with the local CBS affiliate, and participation on the Lynne Hayes Freeland television show. ACHD also partnered in 'Back to Church' campaigns, canvassing events, and personal conversations to share population-specific messages. As a result of these activities, more than 150 vaccination clinics were held to provide vaccination to more

than 9,900 individuals in priority REACH communities. A formal evaluation will identify the most successful strategies so that they can be replicated in other communities within the county.

HiAP Strategies Employed

Develop and Form Cross-Sector Collaborations; Synchronize Communication and Messaging; Integrate Research, Evaluation, and Data Systems

Preparedness Phase

The preparedness phase requires planning, outreach, training, and community education, as well as identifying resources and expertise that can be mobilized during a disaster. Additional activities include drills, tabletop exercises, full-scale maneuvers, and creating contact lists. Partner engagement in the preparedness phase is vital and requires reaching diverse stakeholders (such as community-based organizations) and ensuring the inclusion of vulnerable and hard to reach communities.

Building relationships and incorporating support systems for vulnerable populations during the preparedness phase can reduce unnecessary illness and death. Efforts to create and measure inclusion are essential to secure equitable access to resources, treatment, and support during the response and recovery phases of the disaster management cycle.

To support the needs of the community and promote inclusion, this phase also requires a cadre of highly trained community volunteers in addition to medical and emergency professional staff. The table below shows sample preparedness activities and the HiAP strategies that can be applied.

Preparedness Activity HiAP Strategies

Sample Preparendness Activity	HiAP Strategy
Create response plans	Integrate research, evaluation, and data systems
Educate community	Enhance workforce capacity
Train with Medical Reserve Corp	Enhance workforce capacity
Conduct cross-jurisdictional exerercises	Integrate research, evaluation, and data systems

Case Study – Develop and Form Cross-Sector Collaborations

Florida Department of Health in Volusia County

Florida has taken a multi-sector approach to preparedness with the Public Health Ready certification. The goals of the certification are to help local health departments build partnerships with state and federal preparedness leads, community response partners, and other stakeholders; and to facilitate collaboration and teambuilding across the entire health department. Environmental health staff participated in the program to work across their community to build an all-hazards plan that included strategic community partnerships, using data to prioritize actions and policies, and creating efficiencies across funding sources.

HiAP Strategies Employed

Develop and Form Cross-Sector Collaborations; Integrate Research, Evaluation and Data Systems; Coordinate Funding and Investments

Response Phase

The response phase begins immediately after a disaster takes place and consists of actions taken to save lives and prevent further property damage. This involves distributing resources, including personnel, supplies, and equipment, as well as removing any ongoing or existing hazards. A needs assessment is likely conducted to evaluate the needs of the impacted community.

During this phase, emergency managers begin to implement search and rescue plans, while first responders assess damage, collect information, and coordinate communication among agencies to position resources and aid.

Disaster management officials should compile information and data collected during the disaster so it can be communicated to the public. It should be part of comprehensive data storage that is shared with others to avoid the need to repeat information.

HiAP strategies can be employed in response planning, communication, and coordination.

Response Activity HiAP Strategies

Sample Response Activity	HiAP Strategy
Communicate evacuation plans to residents	Sychronize communication and messaging
Measure efficiency of outreach efforts	Integrate research, evaluation, and data systems
Assess community health status during the disaster	Integrate research, evaluation, and data systems
Communicate with residents about the restoration of utilities	Sychronize communication and messaging

Case Study – Enhance Workforce Capacity

Minnesota Department of Health

The Minnesota Department of Health (MDH) worked with communities to understand the barriers to services needed to address COVID-19. The department formed a multi-sector work group to develop ways to increase COVID-19 testing in communities of color; LGBTQ communities; communities of people with disabilities; rural communities; and within other populations, such as those who are experiencing homelessness or have unstable housing and those in long-term care settings.

To build capacity within communities to respond to COVID, MDH shared COVID-19 information and gave technical help and resources to the Minnesota Council on Disabilities, the Council for Minnesotans of African Heritage, the Minnesota Black Nurses Association, and other key networks. The department also provided funding to media and organizations run by and for people of color statewide to disseminate accurate COVID-19 information and resources to their communities. COVID-19 illness and testing information created for Minnesota communities is shared on the MDH website and has been translated into Hmong, Somali, and Spanish.

HiAP Strategies Employed

Develop and Form Cross-Sector Collaborations; Enhance Workforce Capacity; Coordinate Funding and Investments; Synchronize Communication and Messaging

Recovery Phase

Recovery, unlike the other phases of the cycle, often does not have a clear end point. Rebuilding efforts often occur in tandem with regular operations. In the case of a natural disaster, recovery could take anywhere from months to years, depending on the extent of the damage. For chemical or nuclear disasters, the end is less clear and can span generations, as is the case with the Chernobyl nuclear catastrophe.

Recovery takes place in several sub-phases, from the immediate response that involves ensuring survival and restoring essential services, to caring for the medium-term human impacts, and, finally, to community rebuilding and betterment. These sub-phases overlap and may be longer or shorter for different groups of people. HiAP strategies can be employed in each of these sub-phases to enhance recovery and ensure that needs are met and that benefits are distributed equitably.

Outlined below are the activities that can take place during the recovery phase and the corresponding HiAP strategy.

Recovery Activity HiAP Strategies

Sample Recovery Activity	HiAP Strategy
Issue public health advisories	Synchronize communication and messaging
Create recovery plan	Develop and form cross-sector collaborations
Distribute information on economic development assistance	Synchronize communication and messaging
Assess after-action reports to improve performance and inform policy change	Integrate research, evaluation, and data systems

Case Study – Develop and Form Cross-Sector Collaboration

California Department of Public Health: Recovery Phase

In response to the COVID-19 pandemic, The California Department of Public Health released the COVID-19 Health Equity Playbook to support local communities to build an equitable recovery. Recognizing that there is no single solution or strategy for response and recovery that will work for every community, this document provides a collection of options for communities to select from to support customized approaches depending on the assets and needs of each community. The playbook provides both short and long-term strategies and includes a section on Cross-Sectoral Collaboration or Health in All Policies (HiAP). The four recommended strategies are:

- **Convene and connect** local health departments, other city/county/regional agencies, and impacted communities to identify and address upstream reasons why Black, Indigenous, Native Hawaiian/Pacific Islander, Latinx, and other communities of color experience more COVID-19 infections, prioritizing solutions that are championed by members of those communities.

- **Build capacity** for government staff and local stakeholders in the use of HiAP strategies. HiAP requires health and equity capacity-building across "non-health" organizations, as well as training in equity-centered facilitation techniques, HiAP principles, and collaborative practices for staff and stakeholders.

- **Consider potential health and equity benefits and harms** of all major policy and fiscal decisions. This can be done through community stakeholder input, recognizing the value of lived experience as well as data. Decision makers should consider the impacts, their severity, and whether impacts are experienced equally across communities.

- **Create rural economies of scale** so that rural health departments can share expertise and staff, such as public health specialists, epidemiologists, statisticians, and other positions that share a similar scope of work to meet the needs of the region.

The playbook also contains examples that show how California cities and counties have used the strategies.

HiAP Strategies Employed

Develop and Form Cross Sector Collaboration; Integrate Research, Evaluation and Data Systems; Enhance Workforce Capacity; Synchronize Communication and Messaging

HiAP Partners

These organizations and industries provide support in using HiAP for preparedness and response.

GOVERNMENT

Organization/Sector/Industry	Examples of Assistance Provided
Federal Emergency Management Agency (FEMA)	Funds for food, water, shelter, and a flood insurance program
Federal, state, and local governments	Financial and logistical support to help a community recover
Public Housing Providers	Communication, education, and preparedness activities among residents of public housing
Public Works/Road/Utilities	Clear roadways, restore services, and coordinate response
First Responders	Police, EMT, fire, medical staff, and search and rescue teams
Public Officials	Broad oversight of response by local and state governmental staff such as a mayor or governor and support staff for these leadership offices.
State and local policy leaders	Develop laws that support effective building requirements or prevent development near critical ecological areas
Military	Support logistics and search and rescue operations. Support activities such as clearing roads, water purification setups, augment medical services, etc.
Regulators	Create and enforce policy that could prevent future natural and human-made disasters
Community planners and code enforcement	Update zoning and building requirements for areas affected by a disaster
Code enforcement	Enforce building codes and secure critical infrastructure
Animal Control	Rescuing animals in distress and reuniting lost pets with owners
Shelters	Temporary housing for those displaced or required to evacuate

FINANCIAL

Organization/Sector/Industry	Examples of Assistance Provided
Business and Banking	Loans for rebuilding and support
Economic development/small business assistance	Bridge loans and assistance for small businesses

EDUCATION

Organization/Sector/Industry	Examples of Assistance Provided
Primary and Secondary Schools	Used as emergency shelters
Mental Health Providers	Care during and after the disaster for victims and responders
Academia	Advise and provide data

HEALTH & MEDICAL

Organization/Sector/Industry	Examples of Assistance Provided
Local health departments	Inform policy leaders on how a disaster can affect health outcomes
Local environmental health departments	Ensure safe food, water, housing, and other facilities
Hospitals and health care providers	Emergency medical services for victims and responders
Grocery stores and supermarkets	Food, water, and supplies before and after the disaster
Medical Reserve Corps	Shelter support, first aid, preparedness logistics; often includes retired public health and medical professionals
Pharmacists	Medication
Older Adult and Assisted Living Facilities	Coordinate services for vulnerable residents during all phases of the disaster cycle

COMMUNITY SERVICES

Organization/Sector/Industry	Examples of Assistance Provided
Landlord associations	Shelter for emergency workers and displaced residents
Childcare providers	Emergency childcare for displaced families
Food banks	Emergency food and water supplies long-term
Community advocates	Assist vulnerable communities to access needed resources
Vulnerable community advocates	Support vulnerable individuals such as those with disabilities, experiencing homelessness, or with limited or no income
Faith-based organizations	Aid and support to community such as volunteers, mass feeding site, etc.
Local/national non-profit organizations	Aid and support to community such as volunteers, mass feeding site, etc.

UTILITIES

Organization/Sector/Industry	Examples of Assistance Provided
Utilities industries	Power and water to keep hospitals open, secure heat, and keep medications refrigerated

PRIVATE SECTOR

Organization/Sector/Industry	Examples of Assistance Provided
Insurance adjusters	Help design the evaluation of mitigation measures
Hardware stores	Material/equipment for reinforcement/repair

EXPERTS & SPECIALISTS

Organization/Sector/Industry	Examples of Assistance Provided
Engineers and infrastructure specialist	Assess the safety of buildings or bridges
Nuclear, radiological, chemical, or biological disaster specialist	Guidance on how to respond and what steps the community needs to take
Land use specialist	Guidance on land use regulations, entitlements, land development, open space, and residential zoning
Land reuse specialist	Inform the use and zoning of land and share knowledge of brownfields or other contaminated areas that should be remediated
Local real estate associations	Advocate for zoning and building codes that can reduce property damage
Historical preservation authorities	Expertise on historical preservation policies and cultural resources management
Business developers	Support green infrastructure

Resources

Health in All Policies

- Centers for Disease Control and Prevention (CDC)
- American Public Health Association (APHA)
- Pan American Health Organization
- California HiAP Guide for State and Local Governments
- Rural Health Information Hub Toolkit
- ChangeLab Solutions HiAP Toolkit
- Association of State and Territorial Health Officials (ASTHO)
- National Association of County and City Health Officials (NACCHO)

Health Impact Assessment

- National Environmental Health Association (NEHA)
- Society of the Practitioners of Health Impact Assessment (SOPHIA)
- NACCHO HIA Resources for Local Health Departments
- ASTHO HIA Resources for State Health Departments

Health Lens Analysis

- Kent County, Michigan Health Lens Analysis Checklist
- Tacoma Pierce County Health Lens Analysis
- Cambridge, MA Health Lens Analysis of Urban Agriculture Policy

Health Notes/Health Impact Review

- Washington State Health Impact Review
- Harris County, TX Health Impact Review

Public Health Matrix

- Creating a Public Health Matrix Tutorial

Checklists

- San Francisco Healthy Development Index
- Riverside County Healthy Development Checklist
- CDC Healthy Community Design Checklist
- The Heart Foundation's Healthy By Design Tool
- Denver's Healthy Development Measurement Tool

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