

DELAWARE STATE HEALTH IMPROVEMENT PLAN

2020 ANNUAL REPORT



DELAWARE HEALTH AND SOCIAL SERVICES
Division of Public Health



UNIVERSITY OF DELAWARE
COMMUNITY ENGAGEMENT
INITIATIVE
PARTNERSHIP FOR HEALTHY COMMUNITIES

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DelawareSHIP

Charting a course to improve health



DELAWARE STATE HEALTH IMPROVEMENT PLAN (SHIP) TEAM

Delaware Department of Health and Social Services (DHSS), Division of Public Health (DPH)

Karyl Rattay, MD, MS, Director, DPH
Cassandra Codes-Johnson, MPA, Associate Deputy Director, DPH
Lucy Luta, MD, MPH, Chief, Bureau of Health Equity, DPH
Karen McGloughlin, Director, Office of Women's Health, Bureau of Health Equity, DPH

University of Delaware Partnership for Healthy Communities (UD PHC)

Rita Landgraf, SHIP Principal Investigator, Director, UD PHC
Erin Knight, PhD, MPH, Associate Director, UD PHC
Noël Duckworth, DVS, SHIP Project Manager, Program Coordinator, UD PHC

Special thanks to these UD students for their important contributions to this report:

Kalyn McDonough, PHC Graduate Assistant, Doctoral Candidate, Biden School of Public Policy and Administration, Gwen Simpson, MPH Practicum Student, and Hadja Toure, PHC Graduate Assistant with the Master in Public Health, Epidemiology Program, College of Health Sciences.

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For questions regarding this report, or to obtain additional copies, contact:

Noël Duckworth
SHIP Project Manager
Partnership for Healthy Communities, University of Delaware
The Tower at STAR
100 Discovery Blvd. Newark, DE 19713
302-831-0683 | noel@udel.edu

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EXECUTIVE SUMMARY

Following the second year of implementation within a five-year cycle, this 2020 Annual Report (July 1, 2019 - June 30, 2020) assesses policy improvements and activities in relation to the Delaware State Health Improvement Plan (SHIP) priority areas and recommendations (Table 1), including the work of key stakeholder groups and other organizations whose work addresses the priority areas. These priority areas were identified in the 2018-2023 Delaware State Health Needs Assessment, and recommendations on how to address these areas are outlined in the Summary of Delaware State Health Needs Assessment and Delaware State Health Improvement Plan Recommendations Report (2018). The development and implementation of a SHIP is a best practice for state health departments and is required for accreditation by the Public Health Accreditation Board (PHAB).

Table 1. SHIP Priority Areas and Recommendations, 2018.

Chronic Disease

- 1 Reduce obesity by promoting a healthy diet and exercise.
- 2 Increase access to healthy foods.
- 3 Improve the built environment.
- 4 Promote access to remote patient monitoring for patients with chronic conditions.
- 5 Increase access to community health workers and care coordination.
- 6 Reduce lung disease (e.g. asthma, lung cancer, chronic obstructive pulmonary disease).
- 7 Increase the number of primary care physicians in underserved areas.
- 8 Increase the number of Medicaid dental providers in underserved areas.
- 9 Develop a focused effort to “make the healthy choice the easy choice.”

Maternal and Child Health

- 10 Embed education for pre- and interconception care in schools.

Substance Use Disorders

- 11 Reduce tobacco and tobacco-substitute use.
- 12 Reduce substance use.

Mental Health

- 13 Improve access to behavioral and mental health services.

System-wide Recommendations

- 14 Adopt a policy, systems and environmental change approach, address the social determinants of health, promote health in all policies, and incorporate social marketing.

The 2019 SHIP report focused on the degree to which stakeholder groups were engaged in activities that aligned with the SHIP recommendations. The assessment focused particularly on the following nine stakeholder groups identified by DPH as having “high-impact”:

- Addiction Action Committee
- Delaware Behavioral Health Consortium (BHC)
- Delaware Cancer Consortium (DCC)
- Delaware Chronic Disease Coalition
- DPH - Health Promotion and Disease Prevention Section
- DHSS - Substance Use Disorder Strategy Mapping Team
- Delaware Healthy Mother and Infant Consortium (DHMIC)
- Healthy Communities Delaware (HCD)

The 2020 report moves beyond an assessment of alignment with the original 2018 SHIP recommendations and achieves the following:

- Reports on the main activities of the nine key stakeholder groups as they relate to both the original 2018 SHIP recommendations (Table 1) and additional evidence-based or promising strategies (Table 2) emerging in the literature for each SHIP priority area and system-wide recommendation.
- Expands Delaware’s SHIP network by identifying additional lead stakeholder groups and/or legislative efforts in health and non-health sector areas where actions and policies support SHIP recommendations (Table 1) and evidence-based or promising strategies (Table 2) for SHIP priority areas and system-wide recommendations.



SHIP stakeholders pose questions to panelists at 2019 Annual Meeting

Table 2. Evidence-based and Promising Strategies across SHIP Priority Areas, 2020.

Chronic Disease

- ▶ Improve surveillance systems to
 - 1) understand impact of chronic disease on communities
 - 2) determine effectiveness of interventions to address and prevent chronic disease
 - 3) understand social and environmental factors
 - 4) track policies.
- ▶ Improve environments to make it easier for people to make healthy choices.
- ▶ Strengthen the health care system in ways that focus on prevention and early diagnosis.
- ▶ Connect clinical services with community programs and resources.

Maternal and Child Health

- ▶ Ensure access to high quality preconception care, prenatal care, and interconception care for all women of childbearing age.
- ▶ Implement targeted strategies to better support women at higher risk of poor birth outcomes due to race/ethnicity and/or social and economic status.
- ▶ Implement policies to reduce social stratification (e.g., raising the minimum wage, criminal justice reform).
- ▶ Implement policies and programs to reduce exposures of disadvantaged people to health damaging factors (e.g., address housing instability).
- ▶ Implement policies and programs to reduce vulnerability and increase resilience of disadvantaged people (e.g., medical-legal partnerships).
- ▶ Implement policies and programs to reduce unequal consequences of illness in social, economic, and health terms (e.g., Medicaid expansions, home visiting programs, domestic violence prevention).

Substance Use Disorder

- ▶ Implement prescription monitoring programs.
- ▶ Use alternative health resources for pain management.
- ▶ Promote access to naloxone.
- ▶ Support and access to clean syringes.
- ▶ Promote smoking cessation.
- ▶ Include e-cigarettes in smoke-free indoor air policies.
- ▶ Restrict young peoples' access to e-cigarettes in retail settings.
- ▶ License e-cigarette retailers.
- ▶ Implement e-cigarette price policies.
- ▶ Develop e-cigarette educational initiatives targeting young people.
- ▶ Curb e-cigarette advertising and marketing that appeals to young people.
- ▶ Reduce access to flavored tobacco products by young people.

Mental Health

- ▶ Reduce trauma.
- ▶ Reduce adverse childhood experiences (ACEs).
- ▶ Improve the built environment.
- ▶ Implement policies to mitigate economic hardship.
- ▶ Reduce structural stigma.

Table 2. Evidence-based and Promising Strategies across SHIP Priority Areas, 2020 (continued).

System-Wide

- ▶ Adopt a policy, systems and environmental approach.
- ▶ Address the social determinants of health.
- ▶ Promote health in all policies.
- ▶ Incorporate social marketing.
- ▶ Institutionalize equity.

Sources: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP). *How we prevent chronic diseases and promote health*. Retrieved from <https://www.cdc.gov/chronicdisease/center/nccdphp/how.htm>.

National Institute for Children's Health Quality (NICHQ) (2017). *Infant Mortality CoIN Prevention Toolkit*. Retrieved from <https://static.nichq.org/prevention-toolkit/> Center for Disease Control. (2016, August 5). *The HI-5 Interventions*. Retrieved August 2, 2020 from <https://www.cdc.gov/policy/hst/hi5/interventions/index.html#7>

Surgeon General's Advisory on E-cigarette Use Among Youth (2019). Accessed October 19, 2020 at https://www.cdc.gov/tobacco/basic_information/e-cigarettes/surgeon-general-advisory/index.html

Population-Based Approaches to Mental Health: History, Strategies, and Evidence Jonathan Purtle, Katherine L. Nelson, Nathaniel Z. Counts, Michael Yudell *Annual Review of Public Health* 2020 41:1, 201-221: Summary of Delaware State Health Needs Assessment and Delaware State Health Improvement Plan Recommendations Report (2017)

Moving to Institutional Equity (2017). Retrieved from https://cdn.yimaws.com/www.chronicdisease.org/resource/resmgr/Gillan's_files/Health_Equity_June_2017.pdf

While current SHIP recommendations are grounded in evidence, there are opportunities to refine and further expand recommendations to include emerging best practices. Notably this year, a diverse group of stakeholders engaged in key activities that helped advance SHIP recommendations and additional evidence-based strategies highlighted in this report. Some gaps remain in progress around SHIP recommendations and implementation of evidence-based strategies for population health. Nevertheless, the SHIP Team identified over 100 active stakeholder groups from government, non-profit, business, and community-based organizations/grassroots collectives within health and non-health sectors.

Moving forward, the 2020 SHIP Report aims to help this increasingly robust network of SHIP stakeholders be well poised to revise the SHIP recommendations and plans, identify additional measurable outcomes or indicators as appropriate, and better define how traditional and newly emerged stakeholders share ownership of the plan and its implementation. Support for this expanding network and opportunities for collaborative SHIP implementation, such as virtual stakeholder meetings and digital communications, will be available through the newly revised www.delawareship.org and with support from Delaware's SHIP Project Team.

“Achieving greater equity in health outcomes will require collaboration and collective action across sectors and new forms of community engagement and partnership.”

National Academies of Sciences, Engineering, and Medicine.¹

¹National Academies of Sciences, Engineering, and Medicine. 2017. *Communities in action: Pathways to health equity*. Washington, DC: The National Academies Press. D0r 10.17226/24674

BACKGROUND & PURPOSE



DPH Director, Dr. Karly Rattray, addresses SHIP Stakeholders

There are many institutions and groups, from all sectors, working toward the common goal of a healthy Delaware. Given the complex health challenges facing our communities, coordination is critical, yet immensely challenging. To this end, the Delaware Department of Health and Social Services (DHSS), Division of Public Health (DPH) engages with stakeholders, the community, and partners across the state to assess the health needs of Delawareans and to develop and implement a State Health Improvement Plan (SHIP). According to the Association of State and Territorial Health Officials, a SHIP is not designed to assess the performance of any one agency or program, but the state's overall health system performance with the goal of quality improvement.

The SHIP process is also a key component of the National Public Health Accreditation Board's (PHAB) rigorous national health standards. PHAB is a nonprofit, nongovernmental organization created to serve as the national public health accrediting body. It is jointly funded by the U.S. Centers for Disease Control and Prevention (CDC) and the Robert Wood Johnson Foundation. The development of national public health accreditation involves and is supported by public health leaders and practitioners from the national, state, local, tribal, and territorial levels. Delaware's DPH is one of 36 state health departments currently accredited by PHAB.² Therefore, the Delaware SHIP is a plan for DPH implementation, planning, and evaluation as well as a system-wide guide for how organizations and sectors can partner to strengthen system capacity, align and move in common directions, put equity in the center of the work, and ultimately improve the health of the state's population.



Collaborators from the BarberShop Outreach (BRO) Project address disparities



² National voluntary accreditation for public health departments. Retrieved from <https://phaboard.org/who-is-accredited/>

PROCESS



In 2019–2020, the Partnership for Healthy Communities (PHC) at the University of Delaware (UD), working in collaboration with the Delaware Academy of Medicine/Delaware Public Health Association, worked to assess and communicate SHIP plan progress with Delaware SHIP stakeholders. The team participated in stakeholder meetings, gathering information about progress, gaps, and opportunities. Additional stakeholders working on SHIP priorities were also identified throughout the assessment process.

In October 2019, the SHIP team convened a day-long meeting of stakeholders from around the state to discuss the improvement plan, network across programs and organizations, and discuss ongoing priorities and needs, including opportunities to enhance current SHIP recommendations' Secretary Dr. Kara Odom Walker and DPH Director Dr. Karyl Rattay attended with representatives from each of the "high impact" stakeholder groups and other SHIP stakeholders. Following a series of presentations and a panel discussion, attendees convened smaller roundtables to discuss SHIP progress, gaps, opportunities, and related issues across each priority area and system-wide recommendation. Findings from these roundtable discussions and a detailed assessment of stakeholder activities are in Appendices C-G respectively.

Throughout the year, the SHIP team collected information from SHIP stakeholders in the form of studies, reports, meeting minutes, and stakeholder-specific community health needs assessments and improvement plans. Relevant resources were shared on the Delaware SHIP website (www.delawareship.org) and key findings are also included in this report. Additionally, following the end of Delaware's legislative session, the SHIP team conducted a legislative scan (Appendix B) of bills signed in 2020 that relate to SHIP priority areas and/or system-wide recommendations. State legislation enacted in this plan's first year (2018–2019) was reported in the 2019 SHIP Annual Report. The relevance of current pieces of legislation pertaining to various SHIP areas are addressed throughout this report.



Participants listen intently as SHIP findings are reviewed, October 2019



SHIP stakeholders network at a 2019 meeting



Stakeholders learn about new research during the SHIP poster session

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The emergence of SARS-CoV-2, the virus that causes coronavirus disease 2019 (COVID-19) and the subsequent restrictions in response to the pandemic disrupted many SHIP-related activities in the fourth quarter of 2020, as SHIP stakeholders shifted priorities in the midst of responding to the pandemic and the Delaware's State of Emergency declared on March 11, 2020. Originally, the SHIP team planned to hold webinars that focused on the use of data to inform state and community health improvements and a systematic assessment of the current SHIP priorities among stakeholder groups. However, the SHIP team decided to postpone data collection when more urgent needs among community partners surfaced. Instead, the SHIP team worked diligently to monitor and assess the efforts of "high-level" stakeholder groups and affiliate groups (e.g. grassroots collectives, non-health sector efforts, state and local legislature). The team addressed the immediate health needs of Delaware residents and the ongoing health inequities faced by vulnerable communities that have been further exacerbated by the impact of COVID-19. The SHIP Team was humbled by the many systems, sectors, organizations, and groups that worked expeditiously and collaboratively during these unprecedented times to help neighbors in need and protect the health and well-being of Delaware residents.

UD and DSU students provide screenings at the Claymont Community Center



2020 FINDINGS

The following findings are organized by the SHIP priority area. Each section includes:

- a brief description of the priority area
- Delaware SHIP current recommendations for the priority area
- evidence-based and/or promising practices for addressing the priority population health needs
- a table of key stakeholder activity between July 2019 – June 2020 that helped address current Delaware SHIP recommendations and evidence-based and promising practices.

After two years of SHIP plan implementation, these findings provide an opportunity to assess progress in meeting the priority areas and ensuring that stakeholder activity is aligned with emerging evidence-based and promising practices to address priority health needs. Therefore, the table of stakeholder activity includes meaningful actions that may go beyond the original SHIP recommendations and/or reflect new evidence-based strategies or promising practices that were not captured in the current Delaware SHIP plan. Additionally, the table of key stakeholder activities also extends beyond the “high impact” groups identified by DPH in Year 1 and attempts to capture the vast network of SHIP stakeholders working across health areas and sectors to improve Delaware’s population health and/or the conditions that support health and well-being. These findings are presented in this way to facilitate the revision of SHIP recommendations, better address evidence-based strategies and promising practices, develop metrics for current and refined recommendations, and establish shared ownership and accountability for implementing the plan across a robust and broadening network of Delaware SHIP stakeholders.

The report’s appendices are organized across each priority area and system-wide recommendation. They provide supplemental information about evidence-based strategies, promising programs, and further details about key stakeholder activities observed this past year. The appendices also provide additional information gathered relative to stakeholder input and the various ways in which SHIP stakeholder groups are collecting and/or utilizing data (i.e. surveys, questionnaires, focus groups, public meetings, direct observations, interviews, and data portals) to determine community needs and guide strategies.

“Without insurance with good benefits, such as through an employer, and enough income to afford deductibles and copayments (or having more affordable deductibles and copayments), it will be challenging to make progress on well-woman visits, adolescent well visits, and the other priority NPMs [National Performance Measures]. The stress of financial, nutritional, and housing insecurity takes a toll on the mental health and well-being of the people whom respondents serve.”

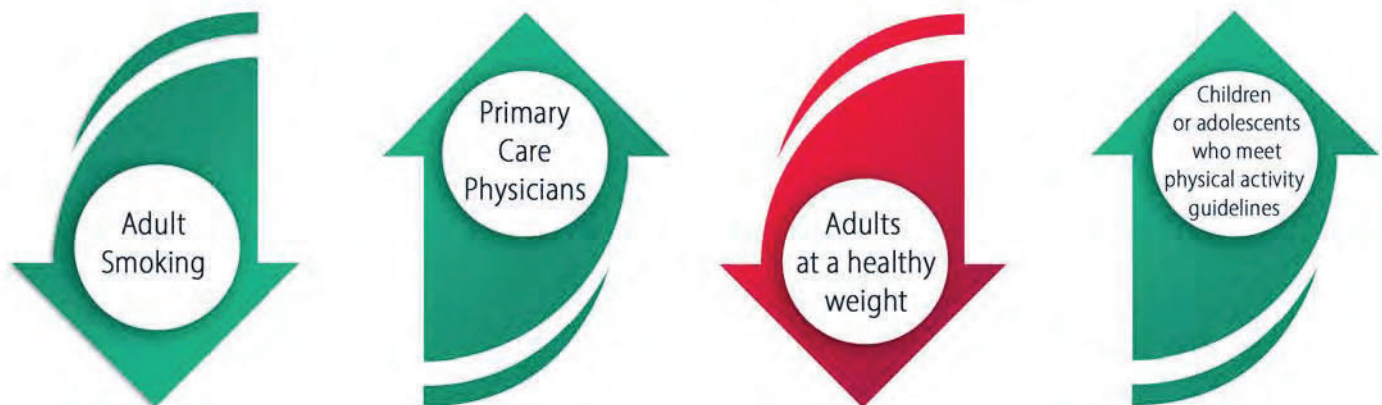
Results from the 2020 Delaware Title V Stakeholder Survey, June 2020

CHRONIC DISEASE

Chronic diseases such as heart disease, cancer, and diabetes are the leading causes of death and disability in the U.S. and in Delaware.³ As they often require ongoing medical attention, chronic diseases are also the leading drivers of healthcare spending. Importantly, chronic diseases are largely preventable, as their prevalence is often associated with behavioral risk factors such as poor nutrition, inadequate physical activity, and tobacco use. According to America's Health Rankings (2019), Delaware has seen progress relating to smoking rates, with 16.5% of the adult population smoking in 2019, compared with nearly 20% in 2015.⁴ Similarly, Delaware has improved in the rankings for the number of primary care physicians in the state, an important indicator of access to care for individuals with chronic conditions.⁴ While the State of Delaware, *My Healthy Community* data shows declines in the percentage of adults in our state who are at a healthy weight, the percentage of children and adolescents who meet physical activity guidelines has been gradually improving (from 41.4% in 2013 to 43.5% in 2017).⁴ These indicators related to chronic disease are captured in *Recent Trends* below.

Chronic diseases such as heart disease, cancer, and diabetes are the leading causes of death and disability in the U.S and in Delaware.

RECENT TRENDS



³Delaware Health and Social Services, Division of Public Health, Health Statistics Center (2018). Delaware Vital Statistics Annual Report, 2018. Retrieved from https://www.dhss.delaware.gov/dhss/dph/hp/files/ar2018_print.pdf

⁴Note: AHR indicators and Rankings are updated annually, while DE Vital Statistics typically use 5-year averages; therefore, annual comparisons or comparisons between the two data sources may not be appropriate.

Despite this progress, 37 percent of Delaware’s children are overweight or obese.⁵ Many factors contribute to childhood obesity, including genetics, metabolism, community and neighborhood design, safety, eating, and physical activity behaviors.⁶ Schools are an important setting to create opportunities for physical activity for Delaware youth. The Institute of Medicine recommends that children ages 6 to 17 years accumulate a minimum of 60 minutes of moderate to vigorous physical activity daily, and that schools should ensure that all students (kindergarten through 12th grade) participate in a minimum of 30 minutes of moderate to vigorous physical activity during the school day.^{7,8} Most schools in Delaware, however, struggle to meet this requirement.

Stakeholders involved in developing the Delaware SHIP specifically identified heart disease, diabetes, and asthma as priority focus areas. Mirroring national trends, Delaware has seen little progress since 2017 in terms of reducing the prevalence of these conditions. For instance, according to the State of Delaware’s My Healthy Community website, asthma remains a significant burden to the health of individuals who are affected by it and its costs to our healthcare system.⁹ Emergency department visits for asthma – a common indicator used to track management of asthma – increased in 2017 compared with the previous year.

According to the CDC, heart disease, diabetes, asthma and other chronic conditions put individuals at higher risk for severe illness associated with COVID-19.¹⁰ Further, while serious COVID-19 complications are less common among children, the CDC reports that chronic lung disease, including asthma, was the most frequently reported underlying health condition among people under age 21 who died from COVID-19 in the U.S. between February and July, 2020.¹¹

Chronic lung disease, including asthma, was the most frequently reported underlying health condition among people under age 21 who died from COVID-19 in the U.S. between February and July, 2020.

Racial and ethnic minorities and low-income communities have higher rates of these chronic diseases. As chronic diseases are often associated with poor living and working conditions, the risk of poor outcomes associated with COVID-19 is elevated among some of our most vulnerable communities.¹² For example, African Americans make up 23% of Delaware’s population and 44% of the positive COVID cases of which race is known.¹³ A higher percentage of racial minority groups in Delaware live in areas disproportionately impacted by environmental hazards, unhealthy land use, psychosocial stressors, and historical traumas, all of which drive health disparities.¹⁴

As Delaware seeks to reduce chronic disease prevalence and prevent COVID-19 and create conditions that give all community members equal access to resources that protect and promote their health, it will be important to examine social and environmental health conditions more closely in the coming months.

⁵Chang DJ, Gerber-Rosenberg A, Drayton VL, Schmidt S, Angalet GB. (2019, March). A statewide strategy to battle child obesity in Delaware. Retrieved from <https://pubmed.ncbi.nlm.nih.gov/20194990/>

⁶Obesity. (2019, October 17). <https://www.cdc.gov/healthyschools/obesity/index.htm>

⁷Appendix 1. Physical Activity Guidelines for Americans. (2015, August 6). Retrieved November 28, 2020, from <https://health.gov/our-work/food-nutrition/2015-2020-dietary-guidelines/guidelines/appendix-1>

⁸Increasing Physical Activity for Students in Delaware Schools. (2009). Retrieved from <https://www.nemours.org/content/dam/nemours/www/files/Service/preventive/nihs/policybrief/physa-tscho.pdf>

⁹State of Delaware (2020). My Healthy Community: Delaware Environmental Public Health Tracking Network. Retrieved from <https://myhealthycommunity.dhs.delaware.gov/location/ctake>

¹⁰CDC. (2020, February 11). Coronavirus Disease 2019 (COVID-19). Centers for Disease Control and Prevention. <https://www.cdc.gov/coronavirus/2019-nCoV/need-extra-precautions/people-with-medical-conditions.html>

¹¹Baker, D. (2020). SARS-CoV-2—Associated Deaths Among Persons Aged 21 Years—United States, February 12–July 31, 2020. *MMWR. Morbidity and Mortality Weekly Report*, 69. <https://doi.org/10.15585/mmwr.mm6937e4>

¹²CDC study finds coronavirus rarely kills children, but minorities at higher risk—CNN. (n.d.). Retrieved from <https://www.cnn.com/2020/09/15/health/coronavirus-children-deaths-wellness/index.html>

¹³How COVID-19 is Impacting Black Communities in Delaware and the Country. (n.d.). Retrieved from <https://www.wtde.com/Story/42012836/how-covid-19-is-impacting-black-communities-in-delaware-and-the-country>

¹⁴Environmental Justice for Delaware. (2017). Retrieved from <https://www.csusu.org/resources/environmental-justice-delaware>

SHIP Recommendations to Address Chronic Disease

- 1 Reduce obesity by promoting a healthy diet and exercise.
- 2 Increase access to healthy foods.
- 3 Improve the built environment.
- 4 Promote access to remote patient monitoring for patients with chronic conditions.
- 5 Increase access to community health workers and care coordination.
- 6 Reduce lung disease (e.g. asthma, lung cancer, chronic obstructive pulmonary disease).
- 7 Increase the number of primary care physicians in underserved areas.
- 8 Increase the number of Medicaid dental providers in underserved areas.
- 9 Develop a focused effort to “make the healthy choice the easy choice.”

The CDC’s National Center for Chronic Disease Prevention and Health Promotion recommends the strategies below to prevent chronic diseases.¹⁵

SHIP stakeholders concerned about chronic diseases were engaged in a variety of efforts that aligned with the above recommendations during the past year. Information from the high impact groups (i.e. Delaware Cancer Consortium) was derived from meetings, websites, and other resources. Highlights of these activities are presented in Table 3. Given the nature of our data collection, this list should not be considered exhaustive. SHIP welcomes feedback to ensure a complete picture of SHIP-related activities.

EVIDENCE-BASED AND/OR PROMISING STRATEGIES

- ▶ Improve surveillance systems to
 - 1) understand impact of chronic disease on communities
 - 2) determine effectiveness of interventions to address and prevent chronic disease
 - 3) understand social and environmental factors
 - 4) track policies.
- ▶ Improve environments to make it easier for people to make healthy choices.
- ▶ Strengthen the health care system in ways that focus on prevention and early diagnosis.
- ▶ Connect clinical services with community programs and resources.

¹⁵Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP). How we prevent chronic diseases and promote health. Retrieved from <https://www.cdc.gov/chronicdisease/coner/nccdphp/how.htm>

Table 3. Delaware SHIP Activity on Chronic Disease, 2019-2020.

Current SHIP Recommendations	Evidence-based Strategies	Key Activities (2019-2020)	Lead Stakeholder Group(s)
Reduce obesity by promoting healthy diet and exercise		Strengthening the utilization of the FitnessGram tool in schools	Division of Public Health (DPH) Physical Activity, Nutrition and Obesity Prevention (PANO)
Promote access to remote patient monitoring for patients with chronic conditions		Telehealth state-level policy changes following COVID-19 thru 7/1/21	Office of the Governor, Delaware Department of Health and Social Services (DHSS), Division of Medical and Medical Assistance (DMMA); Division of Professional Regulations (DPR); Office of the Insurance Commissioner, Delaware General Assembly (GA), Delaware Diabetes Coalition, Delaware Chronic Disease Coalition
		HB263 makes medications more affordable and accessible to patients with diabetes	
		Offering virtual Self-Management Programs	DPH-Health Promotion & Disease Prevention
Increase access to healthy foods	Improve environments to make it easier for people to make healthy choices	Emergency Delaware Supplemental Nutrition Assistance Program (SNAP)	DHSS
		Pandemic Electronic Benefit Transfer	Division of Social Services (DSS)
Online food purchases with SNAP		Amazon, ShopRite, Walmart	
Improve the built environment		Gardening Initiatives for Healthy Food Access in Communities	Delaware Center for Horticulture, Food Bank of Delaware
		Safe Routes to Schools continued expansion	Delaware Department of Transportation (DelDOT), Wilmington Area Planning Council (WILMAPCO), New Castle County (NCC), City of Wilmington, Urban Bike Project
Develop a focused effort to “make the healthy choice the easy choice”		NCC and Wilmington published Bicycling Plans; Increased no-cost bicycle giveaways and affordable sales following State of Emergency orders	

Table 3. Delaware SHIP Activity on Chronic Disease, 2019-2020 (continued).

<i>SHIP Recommendations</i>	<i>Evidence-based Strategies</i>	<i>Key Activities (2019-2020)</i>	<i>Lead Stakeholder Group(s)</i>
Increase access to community health workers and care coordination	Connect clinical services with community programs and resources	80-hour core competency Community Health Worker training for existing CHWs and DPH Contact Tracers.	DPH, DHSS
Reduce lung disease (e.g. asthma, lung cancer, chronic obstructive pulmonary disorder)	Strengthen the health care system in ways that focus on prevention and early diagnosis	Lung cancer screening patient navigators now statewide; Increased provider engagement in Screening for Life program; Academic Detailing; New or expanded social marketing campaigns	Delaware Cancer Consortium (DCC)
Increase the number of primary care physicians in underserved areas		Rural Residency Planning and Development Program	Bayhealth and Beebe Health Systems
Increase the number of Medicaid dental providers in underserved areas		Senate Substitute 1 for Senate Bill 92 (enacted in 2019), directs the Division of Medicaid and Medical Assistance (DMMA) to establish an adult dental benefit.	Office of the Governor; Delaware GA; DMMA
	Improve surveillance systems to 1) understand impact on communities; 2) determine effectiveness of interventions to address and prevent, 3) understand social and environmental factors, 4) track policies	The My Healthy Community: Environmental Public Health Tracking Network added a COVID-19 Data dashboard and more data related to: Chronic Disease, Environment, Mental Health & Substance Abuse, Healthy Lifestyles, Community Safety, Maternal & Child Health, Health Services Utilization, and Infectious Disease.	State of Delaware; DHSS; Delaware Department of Natural Resources (DNREC)
		A Food Resource Mapping tool was developed to assess Delaware communities' social vulnerability, health statistics, and food resources, and guide programming, planning, and policy decisions.	Delaware Council on Farm and Food Policy

Source: SHIP Team Assessment Tool, 2020 *For additional details see Appendix C – Chronic Disease.

MATERNAL AND CHILD HEALTH

Improving the health and well-being of women, infants, children, and families is an overarching goal of *Healthy People 2020* and a priority of health departments across the country. The health of mothers and babies is often viewed as a determinant of the health of future generations and considered an important indicator of the overall health of an entire community, state or country. Despite major advances in clinical care, critical threats to maternal, infant, and child health exist in the U.S. and in Delaware specifically.¹⁶

One of the most important indicators of maternal and child health is infant mortality. According to the Delaware Health Statistics Center, the 2014-2018 infant mortality rate (IMR) for Delaware was 7.3 infant deaths per 1,000 live births.¹⁷ This represents an overall decline of 21.5% from the 2000-2004 rate of 9.3 infant deaths per 1,000 live births.¹⁸ However, Delaware's IMR varies significantly by place and race. For instance, Wilmington's IMR is the highest in the state at 14.5 infant deaths per 1,000 live births during the 2014-2018 period.¹⁷ Similarly, the IMR among non-Hispanic African American mothers in Delaware is nearly three times that of the non-Hispanic white rate, and African American infants have experienced a lower percentage decrease in IMR since 2000.¹⁷ Racial disparities in birth outcomes also extend to mothers. In the U.S., African American women die from pregnancy-related complications three to four times as often as white women.¹⁹ Fortunately, maternal deaths are a rare event, making it difficult to interpret trends in Delaware; however, we do know that severe maternal morbidity rose by 37% between 2010 and 2014.²⁰



Michelle Drew, advance practiced registered nurse, certified nurse midwife, and family nurse practitioner, reports out from a group discussion on maternal and child health

The rate of African American babies dying in Delaware is nearly 3x that of white babies.

¹⁶U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion. *Healthy People 2020, Maternal, Infant and Child Health*. Retrieved from <https://www.healthypeople.gov/2020/leading-health-indicators/2020-lhi-topics/Maternal-Infant-and-Child-Health>

¹⁷Delaware Health Statistics Center. *Delaware Vital Statistics Annual Report, 2018*. Delaware Department of Health and Social Services, Division of Public Health; 2020. https://www.dhss.delaware.gov/dhss/dph/hp/files/ar2018_net.pdf

¹⁸Delaware Health Statistics Center. *Delaware Vital Statistics Annual Report, 2018*. Delaware Department of Health and Social Services, Division of Public Health; 2020. https://www.dhss.delaware.gov/dhss/dph/hp/files/ar2018_net.pdf

¹⁹Reproductive Health | CDC. (2020, September 30). <https://www.cdc.gov/reproductivehealth/index.html>

²⁰State of Delaware, Child Death Review Commission. *Delaware Maternal Mortality Review Report, cases from calendar years 2011-2017*. Retrieved from <https://courts.delaware.gov/forms/download.aspx?id=112358>



Cimone Philpotts discusses research findings from the National Coalition of Black Women, Delaware Chapter



Poster presentations for SHIP priority areas gather interest at 2019 meeting

Delaware SHIP has a focus on preventing teen pregnancy due to the health, social, and economic impacts of teen pregnancy and childbearing. According to the DPH website My Healthy Community, teen pregnancy rates are on a downward trajectory in Delaware. The most recent data (2017) show a teen pregnancy rate of 19.0 per 1,000 female teens, which is a 35% reduction since 2011. These indicators related to maternal and child health are captured in Recent Trends below.²¹

RECENT TRENDS



²¹ State of Delaware (2020). My Healthy Community. Delaware Environmental Public Health Tracking Network. Retrieved from <https://myhealthycommunity.dhss.delaware.gov/locations/state>

SHIP Recommendations to Address Maternal and Child Health

- 1 Embed education for pre- and inter-conception.

The National Institute for Children's Health Quality specifically recommends supporting the following policies and programs:

EVIDENCE-BASED AND/OR PROMISING STRATEGIES

- ▶ Ensure access to high quality preconception care, prenatal care, and interconception care for all women of childbearing age.
- ▶ Implement targeted strategies to better support women at higher risk of poor birth outcomes due to race/ethnicity and/or social and economic status.
- ▶ Implement policies to reduce social stratification (e.g., raising the minimum wage, criminal justice reform).
- ▶ Implement policies and programs to reduce exposures of disadvantaged people to health damaging factors (e.g., address housing instability).
- ▶ Implement policies and programs to reduce vulnerability and increase resilience of disadvantaged people (e.g., medical-legal partnerships).
- ▶ Implement policies and programs to reduce unequal consequences of illness in social, economic, and health terms (e.g., Medicaid expansions, home visiting programs, domestic violence prevention).
- ▶ Implement cross-cutting strategies (e.g., Health in All Policies, data collection, and surveillance).²²

SHIP stakeholders concerned about maternal and child health were engaged in a variety of efforts that aligned with the above recommendations during the past year. Information from the high impact stakeholder group (i.e. the Delaware Healthy Mother and Infant Consortium) and other relevant stakeholders was derived from meetings, websites, and other resources. Highlights of these activities are presented in Table 4. Given the nature of our data collection, this list should not be considered exhaustive. SHIP welcomes feedback to ensure a complete picture of SHIP-related activities.

²² National Institute for Children's Health Quality (NICHQ) (2017). Infant Mortality and Prevention Toolkit. Retrieved from <https://static.nichq.org/prevention-toolkit/>

Table 4. Delaware SHIP Activity on Maternal and Child Health, 2019-2020.

Current SHIP Recommendations	Evidence-based Strategies	Key Activities (2019-2020)	Lead Stakeholder Group(s)
<p>Embed education for pre- and inter-conception care in schools</p>	<p>Ensuring access to high quality preconception care, prenatal care, and interconception care for all women of childbearing age</p>	<p>DPH competitive contract awards to seven provider groups for "Healthy Women Healthy Babies" for comprehensive preconception, prenatal, and interconception care to women, regardless of insurance status; bundled services including enhanced services not fully covered by Medicaid or private insurance (e.g., oral health education and psychosocial risk assessment); and. prioritized service delivery in geographic areas found to have high rates of infant mortality.</p>	<p>DPH; Brandywine Women's Health Associates, Inc.; Children & Families First; Christiana Care Health Services; La Red Health Center, Inc.; Planned Parenthood of Delaware; St. Francis, Inc.; Westside Family Healthcare, Inc.</p>
		<p>Health care interventions to manage chronic conditions such as hypertension disorder, and to help at-risk women get identified early and receive treatment.</p>	<p>DHMIC Maternal and Mortality Workgroup</p>
		<p>SB 201 formally established the Delaware Perinatal Collaborative, which works to improve pregnancy outcomes for women and newborns and such issues as obstetrical blood loss management, pregnant women with substance use disorder, infants impacted by neonatal abstinence syndrome, and advancing evidence-based clinical practices and processes through quality care review, audit, and continuous quality improvement.</p>	<p>Office of the Governor; Delaware GA; Delaware Perinatal Quality Cooperative; Center for Drug & Health Studies, University of Delaware</p>
		<p>Assessing risk for obstetrical hemorrhage and providing appropriate and standardized treatment throughout the state</p>	<p>Delaware Perinatal Quality Cooperative; ChristianaCare Health System (Newark campus); Saint Francis/Trinity Health; Bayhealth (Kent & Sussex campus); Beebe Healthcare; Nanticoke Memorial; The Birth Center Holistic Women's Healthcare, LLC</p>
		<p>"Every Woman Every Time Delaware" approach to well woman care works to engage women at every health encounter (i.e. primary care, all medical specialties) about preconception care and reproductive health.</p>	<p>DHMIC</p>

Table 4. Delaware SHIP Activity on Maternal and Child Health, 2019-2020 (continued).

<i>SHIP Recommendations</i>	<i>Evidence-based Strategies</i>	<i>Key Activities (2019-2020)</i>	<i>Lead Stakeholder Group(s)</i>
Embed education for pre- and inter-conception care in schools	Ensuring access to high quality preconception care, prenatal care, and interconception care for all women of childbearing age	House Concurrent Resolution 67 proclaimed January 23, 2020, as "Maternal Health Awareness Day" in the State of Delaware. Subsequent Maternal Health Awareness event served as a kick-off for the Alliance for the Innovation of Maternal Health (AIM), a national data-driven maternal safety and quality improvement initiative that works through state teams and health systems to align national, state, and hospital level engagement efforts to improve overall maternal health outcomes.	Delaware House of Representatives; Delaware section of the American College of Obstetricians and Gynecologists (ACOG); Medical Society of Delaware; Association of Women's Health, Obstetric and Neonatal Nurses(AWHONN); Alliance for the Innovation of Maternal Health (AIM).
	Targeted strategies to better support women at higher risk of poor birth outcomes due to race/ethnicity and/or social and economic status	Statewide campaign to build awareness, create community programming, and create regulations and policies to improve African American maternal care in Delaware.	Black Mothers in Power; Network Delaware; Metropolitan Wilmington Urban League; DHMIC
		First of its kind multi-method research study launched to look exclusively at African American girls in Delaware and their lives.	Delaware Chapter of the National Coalition of 100 Black Women, Inc.; Delaware-CTR ACCEL, DPH, DSU, UD PHC
	Policies to reduce social stratification (e.g., raising the minimum wage, criminal justice reform)	Delaware's minimum wage, per SB 170 signed in 2018, increased to \$9.25 effective October 1, 2019, with another annual increase of \$9.75 per hour scheduled to take effect on October 1, 2020.	Office of the Governor; Delaware GA; Department of Labor (DOL); League of Women Voters of Delaware
		Local-level police and racial justice reform efforts, such as the Wilmington Mayor's Office \$400,000 budget amendment, introduced in July and later approved in October 2020, will provide a local match to help fund a police body-worn camera program. In October 2020, Wilmington received notification of a federal grant that will be used to cover the remaining \$542,000 balance of the program for Fiscal Year 2021.	Wilmington Mayor's Office, Wilmington City Council, Wilmington Police Department, City of Wilmington Law and Human Resources (HR) Departments, Fraternal Order of Police Lodge #1

Table 4. Delaware SHIP Activity on Maternal and Child Health, 2019-2020 (continued).

<i>SHIP Recommendations</i>	<i>Evidence-based Strategies</i>	<i>Key Activities (2019-2020)</i>	<i>Lead Stakeholder Group(s)</i>
	Policies and programs to reduce exposures of disadvantaged people to health damaging factors (e.g., address housing instability, place-based initiatives)	Policies and programs to reduce exposures of disadvantaged people to health damaging factors (e.g., address housing instability, place-based initiatives) Place-based initiatives, such as grants to six community-based organizations in targeted Healthy Women Healthy Babies Zones, designed to improve outcomes and reduce disparities in high-risk communities by reducing the negative impact of social determinants.	DHMIC; DPH; Delaware Adolescent Program Inc. (DAPI); Reach Riverside Development Corporation (REACH); Rose Hill Community Center; Delaware Coalition Against Domestic Violence (DCADV); Delaware Multicultural and Civic Organization (DEMCO, Inc.); Hispanic American Association of Delaware.
	Policies and programs to reduce vulnerability and increase resilience of disadvantaged people (e.g., medical-legal partnerships)	The Medical-Legal Partnership Project in Delaware provides free legal services to pregnant patients of participating HWHB 2.0 providers statewide and Nurse Family Partnership (NFP) providers in New Castle County.	Community Legal Aid Society, Inc. (CLASI); DPH; DPH; Brandywine Women's Health Associates, Inc.; Children & Families First; Christiana Care Health Services; La Red Health Center, Inc.; Planned Parenthood of Delaware; St. Francis, Inc.; Westside Family Healthcare, Inc.
	Policies and programs to reduce unequal consequences of illness in social, economic, and health terms (e.g., Medicaid expansions, home visiting programs, domestic violence prevention)	Senate Concurrent Resolution 66, passed in January 2020, requested that the DMMA study the extension of Medicaid coverage through the first year postpartum. Insurance coverage is a critical factor in determining women's access to affordable postpartum care and is a key strategy for reducing preventable maternal mortality and to close the disparity among African American women and women of other races.	Delaware Senate; DMMA
		In FY19, Delaware's Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program reported conducting 6,882 home visits to 592 households. Delaware utilizes four evidence-based home visiting models operated by five different agencies in total.	DPH; Children & Families First; Christina School District; Polytech School District; Lake Forest School District-DECC; Delaware Department of Education (DOE); UD

Table 4. Delaware SHIP Activity on Maternal and Child Health, 2019-2020 (continued).

<i>SHIP Recommendations</i>	<i>Evidence-based Strategies</i>	<i>Key Activities (2019-2020)</i>	<i>Lead Stakeholder Group(s)</i>
	Policies and programs to reduce unequal consequences of illness in social, economic, and health terms (e.g., Medicaid expansions, home visiting programs, domestic violence prevention)	<p>Through the CDC's Domestic Violence Prevention Enhancements and Leadership Through Alliances, Focusing on Outcomes for Communities United with States (DELTA FOCUS) program, the Delaware Coalition Against Domestic Violence (DCADV) and community partners have been engaged in comprehensive implementation and evaluation of both statewide and locally-based prevention strategies that seek to promote healthy, safe, nonviolent relationships across the social ecology.</p> <p>In February 2020, DCADV's Domestic Violence Community Health Worker (DV-CHW) project celebrated one year of delivering services to victims and survivors of domestic violence. Service delivery, data collection, referral pathways, and evaluation efforts have been strengthened and/or expanded throughout this first year.</p>	DCADV; DELTA/RPE State Leadership Team; DV-CHW Steering Committee, Child, Inc., Peoples Place II
	Cross-cutting strategies (e.g., Health in All Policies, data collection and surveillance)	Publication of Infant Mortality Delaware Profile 2010-2017	DPH; DHMIC
Maternal and Child Health Needs Assessment underway as part of the Title V Maternal and Child Health Block Grant. Key informant interviews and stakeholder surveys have been administered. Twelve focus groups across the state were conducted between July - September 2019.		Delaware Senate; DMMA; Needs Assessment Respondents	
In November 2019, DPH Director Dr. Karyl Rattay participated in a Congressional briefing on Capitol Hill for members of the U.S. Senate and U.S. House of Representatives regarding maternal and infant health.		DPH; March of Dimes	

Source: SHIP Team Assessment Tool, 2020

*For additional details see Appendix D – Maternal and Child Health.

SUBSTANCE USE DISORDER

Substance use includes the usage of alcohol or drugs including but not limited to cigarettes, tobacco and nicotine products, illegal, and prescription drugs.²³ Most of these substances are addictive and individuals who use them have a higher risk for health conditions such as HIV, Hepatitis C, liver and lung disease, cancer, disabilities, and increased mortality.²⁴ The National Institute on Drug Abuse reported that “there are more deaths, illnesses, and disabilities from substance use than from any other preventable health condition.”²⁵ Substance use can affect both children and adults. While genetics and biology influence development of a substance use disorder, there are several other risk factors including early aggressive behavior, lack of parental supervision, peer substance abuse, drug availability, and poverty. Further, adults with mental illness, those living in violent and disadvantaged environments, and those exposed to racism and lack of economic opportunity, are all at higher risk.²⁶

Delaware currently has the second-highest drug overdose death rate in the U.S.

The 2017 Delaware State Health Needs Assessment reported that 1 in 10 Delawareans has struggled with a substance abuse issue at some point in their life.²⁷ Further, the drug-related death rate in Delaware is more than double the national rate, has increased five-fold since 2000, and Delaware currently has the second-highest drug overdose death rate in the U.S.²⁸ In 2018, 88% of the 401 reported drug overdose deaths involved opioids, and the majority of deaths are among individuals aged 25-54 years old.²⁹

Other substance use issues involving tobacco and nicotine are apparent in Delaware, particularly among young people. In 2019, 3% of Delaware 11th grade students reported smoking cigarettes regularly, yet findings from the Delaware School Survey also found that vaping is far more prevalent and has more than doubled between 2014-2019 with 18% of eleventh grade students currently reporting vaping in the past 30 days.³⁰ Overall, 55% of students report using at least one substance in the past year, with alcohol remaining the most commonly used substance and marijuana as the second most used substance.³¹ These indicators related to substance use disorders are captured in *Recent Trends* on the following page.

²³ Substance Abuse and Mental Health Services Administration. (2019). Key substance use and mental health indicators in the United States: Results from the 2018 National Survey on Drug Use and Health. Retrieved from <https://www.samhsa.gov/data/sites/default/files/cbhsq-reports/NSDUHNationalFindingsReport2018/NSDUHNationalFindingsReport2018.pdf>

²⁴ Health Link British Columbia. (2019, October). Substance Use. Retrieved from <https://www.healthlinkbc.ca/substance-use>

²⁵ The National Institute on Drug Abuse. (2020, June). Health Consequences of Drug Misuse. Retrieved August 2, 2020 from <https://www.drugabuse.gov/drug-topics/health-consequences-drug-misuse/>

²⁶ Substance Abuse and Mental Health Services Administration. (2019). Key substance use and mental health indicators in the United States: Results from the 2018 National Survey on Drug Use and Health. Retrieved from <https://www.samhsa.gov/data/sites/default/files/cbhsq-reports/NSDUHNationalFindingsReport2018/NSDUHNationalFindingsReport2018.pdf>

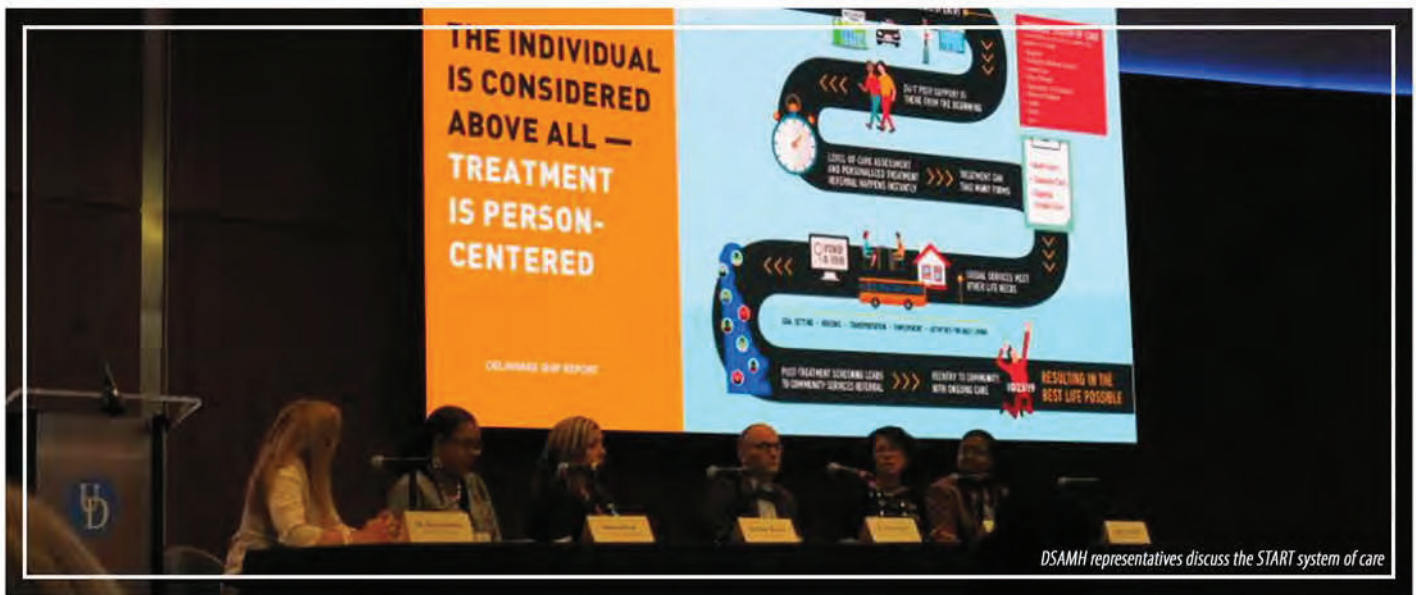
²⁷ Delaware Public Health Institute. (2018, November 26). Summary of Delaware State Health Needs Assessment and Delaware State Health Improvement Recommendations Report 2017. Retrieved from <https://delawareship.org/wp-content/uploads/2019/10/DE-SHIP-Needs-Assessment-and-Recommendations-v7.pdf>

²⁸ National Institute on Drug Abuse. (2020, April 3). Delaware Opioid Involved Deaths and Related Harm. Retrieved from [https://www.drugabuse.gov/drug-topics/opioids/opioid-summaries-by-state/delaware-opioid-involved-deaths-related-harms#:~:text=Opioids%20were%20involved%20in%2046%2C802,9.9\)%20overdose%20deaths%20in%202018.](https://www.drugabuse.gov/drug-topics/opioids/opioid-summaries-by-state/delaware-opioid-involved-deaths-related-harms#:~:text=Opioids%20were%20involved%20in%2046%2C802,9.9)%20overdose%20deaths%20in%202018.)

²⁹ Abuse, N. I. on D. (2020, April 3). Delaware: Opioid-Involved Deaths and Related Harms, National Institute on Drug Abuse. <https://www.drugabuse.gov/drug-topics/opioids/opioid-summaries-by-state/delaware-opioid-involved-deaths-related-harms>

³⁰ Delaware School Survey: Alcohol, Tobacco & Other Drug Abuse Among Delaware Students (2019). Retrieved from <https://www.cdhs.udel.edu/content-sub-site/Documents/2019%20DSS%20State%20Report.pdf>

³¹ Delaware State Epidemiological Profile Substance Use And Related Issues (2020). Retrieved from <https://www.cdhs.udel.edu/content-sub-site/Documents/2020%20Epi/2020%20Delaware%20Epidemiological%20Report.pdf>



RECENT TRENDS



SHIP Recommendations to Address Substance Use Disorders

- 1 Reduce substance use.
- 2 Reduce tobacco and tobacco-substitute use.

The CDC recommends promising strategies to prevent drug use, overdose, tobacco, and smoking through several different methods outlined below.^{32, 33}

EVIDENCE-BASED AND/OR PROMISING STRATEGIES

- ▶ Implement prescription monitoring programs.
- ▶ Use alternative health resources for pain management.
- ▶ Promote access to naloxone.
- ▶ Support and access to clean syringes.
- ▶ Promote smoking cessation.
- ▶ Include e-cigarettes in smoke-free indoor air policies.
- ▶ Restrict young peoples' access to e-cigarettes in retail settings.
- ▶ License e-cigarette retailers.
- ▶ Implement e-cigarette price policies.
- ▶ Develop e-cigarette educational initiatives targeting young people.
- ▶ Curb e-cigarette advertising and marketing that appeals to young people.
- ▶ Reduce access to flavored tobacco products by young people.

³²Center for Disease Control. (2016, August 5). The 14-5 Interventions. Retrieved August 2, 2020 from <https://www.cdc.gov/policy/hiv/hiv5/interventions/index.html#?>

³³Surgeon General's Advisory on E-cigarette Use Among Youth (2019). Accessed October 19, 2020 at https://www.cdc.gov/tobacco/basic_information/e-cigarettes/surgeon-general-advisory/index.html

SHIP stakeholders concerned about substance use disorders were engaged in a variety of efforts that aligned with the above recommendations during the past year. Information from the high impact stakeholder group (i.e. Addiction Action Committee, Behavioral Health Consortium) and other relevant stakeholders were derived from meeting meetings, websites, and other resources and highlights of these activities are presented in Table 5. Given the nature of our data collection, this list should not be considered exhaustive. SHIP welcomes feedback to ensure a complete picture of SHIP-related activities.

Table 5. Delaware SHIP Activity on Substance Use Disorders, 2019-2020.

Current SHIP Recommendations	Evidence-based Strategies	Key Activities (2019-2020)	Lead Stakeholder Group(s)
Reduce substance use		State Targeted Response (STR) grant and State Opioid Response (SOR) grant federal funds are being used in Delaware to improve the state's treatment and recovery systems. Goals relate to improving prevention efforts, increasing access to treatment through the development of new referral pipelines, increasing treatment capacity (specifically for medication-assisted treatment [MAT]), improving wraparound services, and developing/using data systems for action. Enhanced focus on youth/young adults and detainees leaving the Department of Correction (DOC); Department of Education (DOE) to help Local Education Agencies (LEA) and charter schools implement a Multi-Tier System of Support for Behavioral Health.	Division of Substance Abuse and Mental Health (DSAMH); DPH; Office of Health Crisis Response (OHCR); DOC; DOE
	Implement Prescription monitoring programs (PMP)	The Delaware Division of Professional Regulation began enabling electronic health record (HER) integration of prescription drug monitoring program (PDMP) data to ensure safer prescribing practices across the state. All major Delaware pharmacies have integrated the PMP into the pharmacy processing system and nearly all major health care systems in Delaware have integrated their EHRs with the PMP.	DPR; Delaware pharmacies; Delaware major health care systems; Addiction Action Committee
		A two-part Safe Prescribing webinar developed this year helps practitioners applying for a Delaware controlled substance registration (CSR) complete requirements for a mandatory two-hour, two-part course pertaining to safe prescribing and distributing of controlled substances, treatment of pain, and recognizing and treating opioid use disorder.	Addiction Action Committee; practitioners with CSR

Table 5. Delaware SHIP Activity on Substance Use Disorders, 2019-2020 (continued).

<i>SHIP Recommendations</i>	<i>Evidence-based Strategies</i>	<i>Key Activities (2019-2020)</i>	<i>Lead Stakeholder Group(s)</i>
	Implement Prescription monitoring programs (PMP)	The Prescription Opioid Impact Fund (POIF) was created to collect prescription opioid impact fees to be paid by pharmaceutical manufacturers. The fund allows DHSS to award grants and contracts based on recommendations by SHIP stakeholders (i.e. BHC, the Addiction Action Committee, and the Overdose System of Care Committee). Draft recommendations reviewed at committee meetings in the summer of 2019 included the following: harm reduction (i.e. purchasing additional Naloxone, revising materials to include nasal spray); crisis (i.e. stabilization and withdrawal management pilot, relaunching integrated crisis model in each county); quality treatment (i.e. purchasing additional lockboxes for medication, providing clients with equipment and services necessary for telehealth, assisting providers in purchasing HIPAA compliant software, retention payments for providers); social determinants (i.e. funding assistance for those with SUD: childcare, food, housing, transportation, employment, education, training); and, special populations (i.e. focused outreach efforts to individuals with SUD: criminally justice involved, youth in transition, individuals with developmental disabilities community, single parents, communities of color).	Office of the Governor; Behavioral Health Consortium (BHC); Addiction Action Committee; Overdose System of Care; AtTack Addiction
	Use alternative health resources for pain management	Following federal policy changes effective January 2020, Delaware now allows coverage of acupuncture for Medicare patients with chronic low back pain. Pilot program slated to start on July 1, 2020 for Medicaid and State Employee Managed Care Organizations (MCOs) to participate in reimbursement of acupuncture and massage therapy treatment for low back chronic pain based on medical necessity. Extensive toolkit on non-opioid pain management alternatives helps providers suggest safe, proven alternative therapies first that have fewer risks — such as acupuncture, yoga, and massage. The toolkit also helps providers enroll patients and their caregivers in free, six-week session Self-Management programs facilitated by trained volunteers. Following the arrival of COVID-19, the Chronic Pain Self-Management Program (CPSMP) program is now being offered virtually.	DPR; Delaware pharmacies; Delaware major health care systems; Addiction Action Committee

Table 5. Delaware SHIP Activity on Substance Use Disorders, 2019-2020 (continued).

	Promote access to naloxone	HelpsHereDE.com helps Delawareans navigate and locate naloxone distribution sites. The campaign included digital ads (e.g., Facebook, Instagram), stickers for syringe exchange bags, a quarter page print ad, and a radio public service announcement (PSA). Monthly naloxone distributions underway; partnering with emergency departments to distribute naloxone; working with DOC to distribute naloxone to inmates upon discharge; and, partnering with state and community-based agencies and non-profits hosting COVID-19 relief, testing, and food distribution events to provide naloxone access.	DSAMH; BHC; Addiction Action Committee; Emergency Departments; DOC; Food Bank of Delaware; COVID-19 Relief organizers
	Support and access to clean syringes	The Syringe Services Program (SSP) operated by Brandywine Counseling & Community Services (BCCS) continues to operate statewide. The program operates from BCCS' Treatment Centers and mobile Community Services van that travels to strategic locations throughout Delaware. In October 2019, BCCS announced an increase in SSP locations and services, including additional sites in Kent and Sussex counties.	DPH; Brandywine Counseling Center; Delaware HIV Consortium; DSAMHH; Addiction Action Committee; AtTack Addiction
Reduce tobacco and tobacco-substitute use	Promotion of smoking cessation	DPH offers the Delaware Quitline to help smokers who are ready to kick the habit. Effective November 2019, the age requirements of the Delaware Quitline were lowered so now those aged 13 years and up can use the Quitline. Programs to engage youth cessation, such as the "Not on Tobacco (NOT)", have been enhanced to address e-cigarettes. The new "In-Depth" program provides an alternative to suspending youth who are caught vaping on school grounds.	DPH; Delaware Cancer Consortium (DCC); American Lung Association; DOE; Schools; IMPACT Delaware Tobacco Prevention Coalition (IMPACT)
	Including e-cigarettes in smoke-free indoor air policies	Delaware's Clean Indoor Air Act was expanded in 2015 to include e-cigarettes. Continued efforts are underway to increase the number of indoor/outdoor locations and events declared and enforced as smoke-free zones.	IMPACT, DCC

Table 5. Delaware SHIP Activity on Substance Use Disorders, 2019-2020 (continued).

<i>SHIP Recommendations</i>	<i>Evidence-based Strategies</i>	<i>Key Activities (2019-2020)</i>	<i>Lead Stakeholder Group(s)</i>
Reduce tobacco and tobacco-substitute use	Restricting young peoples' access to e-cigarettes in retail settings	SB 25 went into effect on July 16, 2019, which increases the age for sales of tobacco products from 18 to 21. Delaware Alcohol and Tobacco Enforcement (DATE) was able to utilize Delaware School Survey data and corresponding heat maps developed by the Center for Drug and Health Studies (CDHS) at the University of Delaware (UD) to identify areas of elevated vape use in schools and then conduct vape compliance checks with retailers in those respective areas.	Office of the Governor; Delaware GA; DATE; DOE; Schools; CDHS; UD; DCC
	Licensing e-cigarette retailers	No new activity. Although a license is required to sell e-liquid, no license is required to sell e-cigarette devices in Delaware.	
	Implementing e-cigarette price policies	No new activity. Effective 01/01/2018, the excise tax is imposed on the sale or use of vapor products within the State of Delaware at the rate of five cents (\$0.05) per fluid milliliter. The American Lung Association 2019 "State of Tobacco Control" report graded Delaware's level of state tobacco taxes an "F".	
	Developing e-cigarette educational initiatives targeting young people	DPH developed a new commercial called "The Voice," which informs the public that some vape pods contain as much nicotine as a pack of cigarettes. The DPH Tobacco Prevention and Control Program also developed and launched an online toolkit on vaping awareness and prevention for schools, parents, providers, and community members. Programs to engage youth in prevention, such as the Kicks Butts Generation, were enhanced to address e-cigarettes.	DPH; DOE; Schools; DCC
	Curb e-cigarette advertising and marketing that appeals to young people	In February 2020, Delaware announced joining a multistate investigation of Juul Labs, the controversial e-cigarette company. The 39-state coalition will investigate Juul's marketing and sales practices, including whether the company targeted minors and made misleading claims about nicotine content in its products.	Delaware Office of the Attorney General
	Reduce access to flavored tobacco products by young people	While some Delaware lawmakers attempted to take aim at banning flavored e-cigarettes this legislative session, a federal partial ban on flavored e-cigarettes was later announced in January 2020 and went into effect on 2/5/20. The ban covers several youth-friendly flavorings but only applies to specific types of devices: cartridge or pre-filled pod devices. Other devices, such as disposable vape pods, were not addressed by this legislation.	

Source: SHIP Team Assessment Tool, 2020 *For additional details see Appendix E – Substance Use Disorders.

MENTAL HEALTH

Mental illness is an epidemic in the United States.³⁴ The National Institute of Mental Illness reports that 1 in 5 adults in the U.S. is living with mental illness.³⁵ In Delaware, more than 30,000 adults, 9,000 adolescents, and 82% of the prison population are estimated to suffer from mental illness or drug addiction.³⁶ The rate of Delaware adults who report having had 14 or fewer poor mental health days is declining, and Delaware adults who have been told they have a depressive disorder has increased 33% between 2012-2017.²¹ Only 57% of those Delawareans battling addiction seek help, leaving 43% without treatment.³⁴ Left unchecked, mental illness can have detrimental impacts at the individual and societal levels. For instance, at the societal level, unaddressed mental health problems can have a negative influence on homelessness, poverty, employment, safety, and the local economy.³⁷ Furthermore, mental health has an impact on the productivity of local businesses and healthcare costs, impedes the ability of children and youth to succeed in school, and leads to family and community disruption.³⁵ At the individual level, poor mental health can increase the risks of developing adverse physical health outcomes such as heart disease, diabetes, and stroke.³⁸

RECENT TRENDS



One-third of mental disorders are attributed to adverse childhood experiences.

Risk factors for mental illness include economic hardship, experiencing or growing up in poverty, poor work conditions and long hours, issues with the law, discrimination, lack of access to support services, social isolation, low self-efficacy, and traumatic life experiences.³⁹ During childhood, the main risk factor for mental health includes experiencing adverse childhood experiences such as unstable care, social disadvantage such as food insecurity and poverty, exposure to environments of violence, and abuse.³⁷ While more state-specific ACEs data and analysis are needed, initial data has shown that almost one in four children in Delaware experience one ACE, and more than one in five experience 2 or more.⁴⁰ Research has shown that children experiencing high levels of adversity are four times more likely to develop a mental health condition by adulthood. Globally, one-third of mental disorders are attributed to adverse childhood experiences.⁴¹ These indicators related to mental health are captured in *Recent Trends* above.

³⁴ Wang, P. S., Berglund, P., & Kessler, R. C. (2000). Recent Care of Common Mental Disorders in the United States. *Journal of General Internal Medicine*, 15(5), 284–292. <https://doi.org/10.1046/j.1525-1497.2000.9908044.x>

³⁵ National Institute of Mental Health. (2019, February). Mental illness. Retrieved from <https://www.nimh.nih.gov/health/statistics/mental-illness.shtml>

³⁶ Bottum, K. (2019, May 10). Moving Beyond Stigma. Retrieved from <https://www.udel.edu/udaily/2019/may/opioid-addiction-hayes-symposium-mental-health/>

³⁷ Unattended Mental Health's Impact on Society. (2016, March). Retrieved from <https://www.tpchd.org/home/showdocument?id=664>

³⁸ Center for Disease Control and Prevention. (2018, January 26). Learn About Mental Health. Retrieved from <https://www.cdc.gov/mentalhealth/learn/index.htm>

³⁹ American Mental Wellness Association. (2019). Risk and Protective Factors. Retrieved from <https://www.americanmentalwellness.org/prevention/risk-and-protective-factors/>

⁴⁰ Adverse Childhood Experiences (ACEs) Delaware State Epidemiological Profile: Substance Use and Related Issues (2018). Retrieved from [https://www.cdhs.udel.edu/content-sub-site/Documents/2018%20Epi/Adverse%20Childhood%20Experiences%20\(2018\).pdf](https://www.cdhs.udel.edu/content-sub-site/Documents/2018%20Epi/Adverse%20Childhood%20Experiences%20(2018).pdf)

⁴¹ American Psychological Association. (2017, April). The Long Shadow of Adverse Childhood Experiences. Retrieved from <https://www.apa.org/science/about/psa/2017/04/adverse-childhood>

SHIP Recommendations to Address Mental Health

- 1 Improve access to behavioral and mental health services.



Stakeholders discuss activities to address behavioral health needs across Delaware

A 2020 review by Purtle et. al of population-based approaches to mental health outlines recommendations that include social, economic, and policy approaches.⁴²

EVIDENCE-BASED AND/OR PROMISING STRATEGIES

- ▶ Reduce trauma.
- ▶ Reduce adverse childhood experiences (ACEs).
- ▶ Improve the built environment.
- ▶ Enact policies to mitigate economic hardship.
- ▶ Reduce structural stigma.

SHIP stakeholders concerned about mental health were engaged in a variety of efforts that aligned with the above recommendation during the past year. Information from the high impact stakeholder group (i.e. Behavioral Health Consortium) and other relevant stakeholders were derived from meetings, websites and other resources. Highlights of these activities are presented in Table 6 on the following page. Given the nature of our data collection, this list should not be considered exhaustive. SHIP welcomes feedback to ensure a complete picture of SHIP-related activities.

⁴² Population-Based Approaches to Mental Health: History, Strategies, and Evidence Jonathan Purtle, Katherine L. Nelson, Nathaniel Z. Courts, Michael Yudell Annual Review of Public Health 2020 41:1, 201-221

Table 6. Delaware SHIP Progress on Mental Health, 2019-2020.

Current SHIP Recommendations	Evidence-based Strategies	Key Activities (2019-2020)	Lead Stakeholder Group(s)
Improve access to behavioral and mental health services		Bridge clinics are now statewide, as additional locations were opened in Sussex and Kent counties respectively in July and October 2019. These clinics offer new support for individuals and families impacted by the effects of mental health and substance use issues.	Division of Substance Abuse and Mental Health (DSAMH)
		To help Delawareans cope with stress and address behavioral health needs during the coronavirus pandemic, in May, DSAMH launched the 24/7 Delaware Hope Line – a single point of contact where callers can connect to a variety of resources and information, including support from clinicians and peer specialists plus crisis assistance.	DSAMH; Behavioral Health Providers; Peer Specialists
		With the signing of HB355, the Advisory Council to DSAMH was dissolved and reestablished as the Behavioral Health Planning and Advisory Council. Behavioral Health Planning and Advisory Councils help states meet conditions for federal Community Mental Health Services Block Grants (CMHSBG) and to facilitate system planning for federal Substance Abuse Prevention and Treatment Block Grant (SAPTBG) in their joint applications.	DSAMH
		The Behavioral Health Consortium hosted four community forums on the state's mental health and addiction services across all 3 counties.	BHC
		The Behavioral Health Consortium Access and Treatment subcommittee is helping advance more crisis intervention, including mental health first-aid training to first responders and communities. This includes efforts to expand and enhance 24-hour crisis hotline for point of entry and referral.	BHC
	Reduce Trauma	<i>Promoting Resilience</i> – In June 2020, Trauma Matters Delaware (TMD), a statewide grassroots coalition working to make Delaware a trauma-informed state, awarded five mini-grants as part of phase I funding to support community efforts to respond to COVID-19 and to build individual and community resilience. In phase II, TMD plans to award additional mini-grants to activate community-driven mental health, wellness, and resilience initiatives that align with trauma-informed practices.	TMD; Ayuda Comunitaria contra COVID-19; Black Men Meditate and Self-Care (Kyma Belardo); Creating Calm (Lulu Ross Elementary School); Feed the Community (Nanticoke Indian Nation)

Table 6. Delaware SHIP Progress on Mental Health, 2019-2020 (continued).

SHIP Recommendations	Evidence-based Strategies	Key Activities (2019-2020)	Lead Stakeholder Group(s)
	Reduce trauma	<i>Policies to Prevent Violent Crime and Accidental Injuries</i> - House Concurrent Resolution 77, passed in January 2020, established the Gun Violence Prevention Task Force to study and make findings and recommendations regarding whether Delaware should become the point of contact to conduct background checks for firearms transfers.	Delaware House of Representatives; Gun Violence Prevention Task Force
		<i>Quality Early Childcare and Education</i> - Delaware continues its work on the Preschool Development Grant Birth through Five (PDG B-5). The grant requires Delaware to complete a comprehensive statewide birth through five needs assessment and subsequently develop a strategic plan, which has been underway in 2019-2020.	DOE Office of Early Learning
	Reduce ACEs	<i>Home Visiting to Build Resilience</i> - In FY19, Delaware's Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program reported conducting 6,882 home visits to 592 households. Delaware utilizes four evidence-based home visiting models operated by five different agencies in total.	DPH; Children & Families First; Christina School District; Polytech School District; Lake Forest School District-DECC; DOE; UD
		During this SHIP assessment period, Delaware submitted, and was subsequently awarded in August 2020, an invitation to be a part of an interstate ACEs collaborative hosted by the National Governors Association Center for Best Practices. This initiative will provide Delaware with access to 10 months of technical assistance, engagement with trauma-informed mentor states and information about innovative and evidence-based policies and practices for responding to adverse childhood experiences (ACEs). While Delaware has been instituting ACEs screening at Federally Qualified Health Centers through the Help Me Grow initiative, the state is still in the early stages of looking at if and how universal ACEs screening would take place.	Office of the Governor; Family Services Cabinet Council, Department of Services for Children, Youth and their Families (DSCYF), DHSS, Department of Human Resources, DOE; Delaware State Housing Authority (DSHA); Department of Labor (DOL); Department of Justice (DOJ)

Table 6. Delaware SHIP Progress on Mental Health, 2019-2020 (continued).

	Improve built environment	<p>In June 2020, the Delaware Forest Service's Urban and Community Grant Program announced awards of more than \$31,000 to fund nine community tree projects in all three counties.</p>	<p>Delaware Forest Service; Delaware Community Forest Council</p>
	Policies to mitigate economic hardship	<p><i>Housing assistance</i> - To assist Delawareans facing financial hardships because of the COVID-19 health crisis, DSHA launched the Delaware Housing Assistance Program (DE HAP) in March 2020. The program aims to provide emergency housing assistance to renters affected by shutdowns, closures, layoffs, reduced work hours or unpaid leave due to the COVID-19 health crisis. Households are eligible for up to \$1,500 in assistance, with payments made directly to the property owner or utility company. In April 2020, the program halted after it was inundated with applications. With the relaunch in August 2020, applications must now be submitted by landlords or property owners on behalf of tenants through a newly created application portal on DSHA's website.</p>	<p>DSHA; Landlords; Property Owners</p>
		<p>Eviction and foreclosure moratorium- Effective March 25, 2020, Governor Carney's sixth modification to his State of Emergency Declaration prevented landlords from evicting Delawareans from their homes during the COVID-19 crisis. Under the order, landlords also cannot charge late fees or interest and lenders may not charge interest or late fees on residential mortgage payments or initiate foreclosure proceedings during the State of Emergency. Changes to this were made by Governor Carney on July 1, 2020, when the twenty-third modification lifted the moratorium on foreclosure and eviction filings but ordered that all evictions would continue to be stayed to permit the Justice of the Peace Courts to determine whether the parties would benefit from a court-supervised mediation or a newly created alternative dispute resolution program.</p>	<p>Office of the Governor; Justice of the Peace Courts</p>

Table 6. Delaware SHIP Progress on Mental Health, 2019-2020 (continued).

SHIP Recommendations	Evidence-based Strategies	Key Activities (2019-2020)	Lead Stakeholder Group(s)
	Reduce structural stigma	The BHC Changing Perceptions and Stigma Committee has made progress on the following outcomes: creation and implementation of recovery to job pipeline into multiple directions; dissemination and increased awareness and continued messaging developed for how to assist individuals in recovery with acclimating; and, increased awareness of HelpsHereDE.com as a key resource. "Project Purple," an awareness and stigma campaign organized by the Sussex County Health Coalition, started statewide in October 2019. A virtual campaign was launched for fall 2020.	BHC; Sussex County Health Coalition

Source: SHIP Team Assessment Tool, 2020

*For additional details see Appendix F – Mental Health.

SYSTEM-WIDE RECOMMENDATIONS

Addressing the SHIP’s four priority health outcome areas independently, as they are different disease conditions, is often how they are treated for individuals and funded for agencies and organizations. These downstream approaches focus on the consequences of the health outcome and include such things as disease treatment or modifying individual behavior. However, system-wide strategies can increase effectiveness, efficiency, and enable a “whole-person” view of prevention and care, rather than focusing on one condition (possibly of many) that a person might have. Even more, studies suggest that social and economic factors are the primary drivers of health outcomes. These factors both shape the conditions in which we live, work, learn, play and pray, as well as health behaviors – the social determinants of health.

While both individual/disease-specific and population-based perspectives are both necessary to achieve optimal health for all, downstream approaches can often become prioritized and implemented at the expense of more upstream approaches that move beyond contending with the consequences and focus on cause. Fundamentally, efforts to improve Delaware health will require a public health and multi-sectoral practice of confronting societal power imbalances and forms of oppression, such as structural and institutional racism, which are at the root of health inequities.⁴³

Emerging public health practice calls for a dedicated focus, increased understanding and improved capacity to address these underlying causes; a nimbleness to work across agencies and sectors to develop shared ownership for health equity; and strategic community partnerships to build power and engage in social justice movements.⁴⁴

⁴³ Knight, E., McDonough, K., Codes-Johnson, C. Delaware Department of Health and Social Services, Division of Public Health. Health Equity Guide for Public Health Practitioners and Partners, Edition 2, November 2019. Retrieved from <https://www.dhss.delaware.gov/dhss/dph/mh/healthequityguide.htm>

⁴⁴ Expanding the Boundaries: Health Equity and Public Health Practice. (2016). Retrieved from https://nph.org/wp-content/uploads/2016/09/Expanding-the-Boundaries-Final_508-091814.pdf

The notion of an expanded health equity practice that can directly confront the sources of social inequalities is not a wistful claim to a romanticized history of public health. It is, rather, an argument that a public health that uses its resources, perspectives, commitment, and savvy to challenge the structures of power that create and maintain social inequalities and unhealthy living conditions is grounded in its own history.⁴⁴

National Association of County and City Health Officials



DPH Director Dr. Karyl Rattay discusses how health begins where we live, work, learn and play

Delaware system-wide recommendations put forth strategies that uphold and operationalize these foundational principles to support positive community change. The Delaware SHIP emphasizes that upstream approaches, such as PSE change and addressing the social determinants of health, be integrated system wide. These strategies help mitigate how social and institutional inequalities have been instilled in policy and resource allocation and manifest in places where people live, work, learn, play, and pray.

Importantly, ensuring that racial and social justice are firmly anchored in the center of such Delaware SHIP strategies will provide the foundation needed to help all Delawareans achieve their full health potential. Toward this end, equity is both an outcome and a process. As an outcome, we achieve equity when race, gender, class, sexual orientation, gender expression, and other dimensions of individual and group identity no longer determines one's health outcomes, as everyone has what they need to thrive. As a process, we apply equity when those most impacted by structural inequities are meaningfully involved in the creation and implementation of the institutional policies and practices that impact their lives.⁴⁵

⁴⁵What Is Racial Equity? (n.d.). Center for Social Inclusion. Retrieved from <https://www.centerforsocialinclusion.org/our-work/what-is-racial-equity/>

POLICY, SYSTEMS, AND ENVIRONMENTAL APPROACH

PSE approaches aim to produce healthier environments and make healthy lifestyle choices more feasible for all members in a community. Unlike behavior change interventions which focus on changing individual behaviors or lifestyle changes (e.g. fitness education, smoking cessation, etc.), a PSE approach aims to improve health outcomes at the population level (e.g. more parks, tobacco tax, etc.) through strategic changes to policies, systems, and environments where we live, learn, work, and play.

SOCIAL DETERMINANTS OF HEALTH

Healthy People 2030 refers to social determinants of health (SDOH) as the following:⁴⁶

SDOH are the conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life.

SDOH are found across the following categories:⁴³

- Neighborhood and the Built Environment (i.e. access to healthy foods, violence, conditions, quality housing)
- Education (i.e. early childhood, enrollment in high school, HS graduation, language and literacy)
- Economic Stability (i.e. employment, food insecurity, housing instability, poverty)
- Social and Community Context (i.e. civic participation, discrimination, incarceration, social cohesion)
- Health and Healthcare (i.e. access to healthcare, access to primary care, health literacy)

Social Determinants of Health



Social Determinants of Health
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Healthy People 2030

Source: Healthy People 2030, U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion. Retrieved December 2, 2020, from <https://health.gov/healthypeople/objectives-and-data/social-determinants-health>

SDOH also contributes to wide health disparities and inequities. For example, people who do not have access to grocery stores with healthy foods are less likely to have good nutrition. That raises their risk of health conditions like heart disease, diabetes, and obesity — and even lowers life expectancy relative to people who do have access to healthy foods.

Just promoting healthy choices will not eliminate these and other health disparities. Public health organizations and their partners in sectors like education, transportation, and housing need to take action to improve societal conditions.

⁴⁶Social Determinants of Health—Healthy People 2030 | health.gov. (n.d.). Retrieved from <https://health.gov/healthypeople/objectives-and-data/social-determinants-health>

HEALTH IN ALL POLICIES

Health in All Policies (HiAP) is a collaborative approach to improving the health of all people by incorporating health considerations into decision-making across sectors and policy areas.⁴⁷ Examples of HiAP implementation at two different levels might be (1) to examine HiAP opportunities by individual project or initiative, or (2) to institutionalize a HiAP “lens” through legislation or a “whole-government” approach.

A legislative approach to HiAP requires more political buy-in to achieve but creates a sustainable process and requirement that has widespread and long-lasting influence. Health Impact Assessments can support a Health in All Policies approach. Health Impact Assessments involve data, stakeholder input, and public health expertise to understand the risks and benefits of proposed policies. Several states have pursued legislation to institutionalize these assessments; case studies are presented in *Health Impact Assessment Legislation in the United States*.

The goal of HiAP is to ensure that decision-makers are informed about the health, equity, and sustainability consequences of various policy options during the policy development process. It engages diverse governmental partners and stakeholders across sectors to work together to promote health, equity, and sustainability, and simultaneously advance other goals such as promoting job creation and economic stability, assuring transportation access and mobility, strengthening the agricultural system, and attaining educational milestones.

Nearly 200 stakeholders gather for a SHIP meeting



⁴⁷Centers for Disease Control and Prevention, Health in All Policies. Retrieved from <https://www.cdc.gov/policy/hiap/index.html>

SOCIAL MARKETING

Social marketing uses commercial marketing strategies to change behaviors for the social good. It seeks to understand and address what people believe, need to know, and do to change specific behaviors. Social marketing can be part of a comprehensive approach to prevent disease, improve health, or gain public support for change for the good of individuals or the community.

Many different definitions of social marketing exist, but most have these common components:

- The adoption of strategies used by commercial marketers
- A goal of promoting voluntary behavior change (not just improved knowledge or awareness)
- An end goal of improving personal or societal welfare
- The use of pro-health messages (for public health campaigns)⁴⁸

The Ad Council is a national non-profit organization that has focused on social marketing since the 1940s. They use research, science, and creative storytelling to create ad campaigns that the public can use for free. Campaigns focus on a variety of topics including bullying prevention, Type 2 diabetes prevention, fatherhood involvement, gun safety, and racial justice. They are an excellent source for free public health social marketing materials.

SHIP Recommendations for System-wide Improvement

- 1 Adopt a policy, systems and environmental change approach, address the social determinants of health, promote health in all policies, and incorporate social marketing.

In their 2017 report, "Moving to Institutional Equity," the Health Equity Council of the National Association of Chronic Disease Directors recommends that public health practitioners not only systematically work to address the social determinants of health, but also work to identify institutionalized racism and, "constructively change each (and all) of the separate expressions of it to create a new reality called institutionalized racial equity."⁴⁹

EVIDENCE-BASED AND/OR PROMISING STRATEGIES

- ▶ Adopt a policy, systems and environmental approach
- ▶ Address the social determinants of health
- ▶ Promote health in all policies
- ▶ Incorporate social marketing
- ▶ Institutionalize equity

⁴⁸Centers for Disease Control and Prevention, Strategy 8. Social Marketing, retrieved from: <https://www.cdc.gov/breastfeeding/pdf/strategy8-social-marketing.pdf>

⁴⁹Moving to Institutional Equity (2017). Retrieved from https://cdn.ymaws.com/www.chronicdisease.org/resource/resmgr/Gillan's_files/Health_Equity_nine_2017.pdf

SHIP stakeholders concerned about system-wide recommendations were engaged in a variety of efforts that aligned with the above recommendations during the past year. Information from the high impact stakeholder group (i.e. Healthy Communities Delaware) and other relevant stakeholders were derived from meetings, websites and other resources. Highlights of these activities are presented in Table 7. Many stakeholder activities related to system-wide recommendations were described throughout this report in priority areas where they originated or were designed to have the most impact. However, given the nature of our data collection, this list should not be considered exhaustive and we welcome feedback to make sure we are more comprehensive in our ability to provide a more complete picture of SHIP-related activities going forward.

Table 7. Delaware SHIP Activity on System-wide Recommendations, 2019-2020

Current SHIP Recommendations	Evidence-based Strategies	Key Activities (2019-2020)	Lead Stakeholder Group(s)
Adopt a Policy, Systems, and Environmental (PSE) change approach. address the social determinants of health, promote health in all policies, and incorporate social marketing.	Policy, Systems and Environmental Approach	The Lt. Governors Challenge, including the 2020 Challenge, recognizes health and wellness initiatives and champions the opportunity for Delawareans to be drivers of change in their own family, neighborhood, workplace, faith organization/institution, community or school. The Lt. Governor's office contracted with a vendor to engage the community and public to become educated on policy, systems and environmental change strategies. 2020 winners implemented PSE strategies for emotional well-being and healthy living across workplace, school, and community settings.	Office of the Lt. Governor; DPH; DOC; ChristianaCare; Polytech School District; Khayree Bey; DE Council on Farm & Food Policy
	Address the Social Determinants of Health		
	Neighborhood & Built Environment	<i>Place-based Investments</i> - Healthy Communities Delaware (HCD) issued a call for proposals that resulted in investments in nine communities who will address issues ranging from environment and community vitality to housing and food security. Importantly, these projects will not only address long-standing issues of inequity, but in doing so will also help to mitigate the impact of COVID-19 on some of Delaware's hardest hit communities.	HCD; UD Partnership for Healthy Communities (PHC); DPH; Delaware Community Foundation (DCF); Northwest, Wilmington -Jefferson Street Center, Inc.; West Side, Wilmington -Cornerstone West CDC and Be Ready CDC; Eastside, Wilmington -Central Baptist CDC; Southbridge, Wilmington - South Wilmington Planning Network; Route 9 Corridor, New Castle County -Route 9 Master Plan Monitoring Committee; Wilmington/New Castle County Latino Community- Latin American Community Center

Table 7. Delaware SHIP Activity on System-wide Recommendations, 2019-2020 (continued)

SHIP Recommendations	Evidence-based Strategies	Key Activities (2019-2020)	Lead Stakeholder Group(s)
<p>Adopt a Policy, Systems, and Environmental (PSE) change approach. address the social determinants of health, promote health in all policies, and incorporate social marketing.</p>	<p>Neighborhood & Built Environment</p>	Address the Social Determinants of Health	
		<p><i>Housing</i> – The Addiction Action Committee is partnering with DSCYF on joint efforts to support youth in substance abuse treatment by helping their families address homelessness. The AAC has also been working with DSAMH to issue request for proposals for additional recovery housing in Delaware. Additionally, the Delaware Family Reentry Pilot (FRP) Program, a statewide initiative to give individuals recently released from incarceration the opportunity to access safe and stable housing by reuniting with their families who live in public housing, was launched in 2020. The Family Reentry Pilot represents collaboration between DOC, DCJ, and Delaware’s five public housing authorities to consider and implement recommendations that came out of a national technical assistance project the partners had participated in since 2018.</p>	<p>Addiction Action Committee; DSCYF; DSAMH; DOC; DOJ; DSHA, Dover Housing Authority, Wilmington Housing Authority, New Castle County Housing Authority, and Newark Housing Authority</p>
		<p><i>Transportation</i> – In August 2019, WILMAPCO released a social equity analysis of the region’s transportation system for public review that has implications for how inequities in the built environment might impact health care access and safe opportunities for physical activity and recreation. The 2019 Transportation Justice (TJ) Plan examines the experiences of historically disadvantaged populations within the transportation system and public planning processes. While WILMAPCO uncovered transportation inequities for people with low incomes and Hispanics; African Americans experienced more inequities. These inequities include: more difficulty reaching activities (also true of low-income residents), higher rates of bike and pedestrian crashes, more road traffic, and less community transportation project funding than expected based on population size.</p>	<p>WILMAPCO; DelDOT</p>
<p><i>Violence</i>- HB 350, signed in August 2020, creates the crime of Aggravated Strangulation. Under this Act, a chokehold is only justifiable when the person reasonably believes deadly force is warranted in order to protect the life of a civilian or law-enforcement officer.</p>	<p>Office of the Governor; Delaware GA; Delaware Legislative Black Caucus</p>		

Table 7. Delaware SHIP Activity on System-wide Recommendations, 2019-2020 (continued)

SHIP Recommendations	Evidence-based Strategies	Key Activities (2019-2020)	Lead Stakeholder Group(s)
Adopt a Policy, Systems, and Environmental (PSE) change approach, address the social determinants of health, promote health in all policies, and incorporate social marketing.	Address the Social Determinants of Health		
	Neighborhood & Built Environment	Through SB260, a Law Enforcement Accountability Task Force was established, made up of a wide range of stakeholders, including police officers and impacted citizens, assigned with considering additional issues and proposals regarding the use of force, civil rights protections, transparency and community policing.	Office of the Governor; Delaware GA; Delaware Legislative Black Caucus
	Education	The Redding Consortium for Educational Equity officially began its work in fall 2019. The Consortium was created to recommend policies and practices to the Governor and Delaware General Assembly that will achieve educational equity and improve educational outcomes for all Pre-K to grade twelve students in the City of Wilmington and northern New Castle County Delaware. Based on priority areas established by Consortium members, the Consortium formed three work groups: the Educators Work Group, Funding and Governance Work Group, and the Social Determinants Work Group.	Office of the Governor; Delaware GA; Redding Consortium for Educational Equity
	Economic Stability	<i>Coronavirus Response and Recovery</i> - The State of Delaware and New Castle County collaborated to make CARES Act funding available to small businesses, non-profits and Delaware residents. The availability of this and other federal coronavirus relief funding helped to stabilize families during a time of crisis. Financial supports positively impacted social determinants of health during the COVID-19 pandemic, including individual relief payments, increasing the unemployment benefit, increasing SNAP benefits to support families whose children no longer received free school meals, and providing rental and mortgage assistance to those who lost jobs.	State of Delaware; New Castle County; small businesses; non-profits; residents
		<i>Eviction Moratorium</i> - Policy also played a supportive role in mitigating the impacts of the coronavirus. The Governor declared a "state of emergency," renewed monthly, to enable Delaware to continue to receive federal emergency funding, and issued an executive order preventing evictions, stabilizing housing for nearly 50% of renters in Delaware.	Office of the Governor; Landlords; property owners; tenants

Table 7. Delaware SHIP Activity on System-wide Recommendations, 2019-2020 (continued)

SHIP Recommendations	Evidence-based Strategies	Key Activities (2019-2020)	Lead Stakeholder Group(s)
<p>Adopt a Policy, Systems, and Environmental (PSE) change approach. address the social determinants of health, promote health in all policies, and incorporate social marketing.</p>	Address the Social Determinants of Health		
	Social & Community Context	<p><i>Civic participation</i>- HB 346, signed in July 2020, provides for voting by mail for the 2020 primary and general elections and special elections due to the emergency caused by COVID-19.</p>	<p>Office of the Governor; Delaware GA; Department of Elections; League of Women Voters; American Civil Liberties Union (ACLU); Votamos/We Vote Coalition</p>
		<p><i>Discrimination</i>- In 2019, Delaware amended the state constitution to prohibit the denial or abridgement of equal rights under the law based on sex, but no such prohibition exists as to race, color, or national origin. SB 19, passed in June 2020, is the first leg of a constitutional amendment to add race, color, and national origin to the Article I, § 21 of the Delaware Constitution to explicitly declare that protection against discrimination based on race, color, and national origin is one of Delaware's fundamental rights.</p>	<p>Office of the Governor; Delaware GA</p>
		<p>Of note, Governor John Carney closed state offices on June 19, 2019 in recognition of Juneteenth Independence Day. Juneteenth commemorates the day in 1865 when, two years after President Abraham Lincoln signed the Emancipation Proclamation, formerly enslaved people in Texas were told they had been freed.</p>	<p>Office of the Governor</p>
		<p>Passage of SB191 was the first leg of an amendment to the Delaware Constitution that would explicitly make protection against discrimination on the basis of race, color and national origin a fundamental right. Moving forward, the 151st General Assembly must pass this for it to become part of the Constitution.</p>	<p>Office of the Governor; Delaware 150th GA</p>
<p>Through SB 260, an African American Legislative Task Force was established and entrusted with exploring the disparities experienced by people of color throughout Delaware and proposing remedies to address those inequities, including a commitment to significant, restorative investments in historically African American communities over the next 5 years.</p>		<p>Delaware Legislative Black Caucus</p>	

Table 7. Delaware SHIP Activity on System-wide Recommendations, 2019-2020 (continued)

SHIP Recommendations	Evidence-based Strategies	Key Activities (2019-2020)	Lead Stakeholder Group(s)
Adopt a Policy, Systems, and Environmental (PSE) change approach. address the social determinants of health, promote health in all policies, and incorporate social marketing.	Address the Social Determinants of Health		
	Health & Health Care	In June 2020, the Delaware Health Care Commission (DHCC) released preliminary data on health-care spending in the state in calendar year 2018, the latest step in the state's effort to reduce health care spending and improve quality of care for Delawareans.	DHCC; DHSS
	Promote Health in all Policies (HiAP)	The second edition of the <i>Health Equity Guide for Public Health Practitioners and Partners</i> was published in November 2019 and includes a section on HiAP. Partners are working to disseminate and provide training on the guide throughout the state.	DPH; UD Partnership for Healthy Communities (PHC), UD Biden School of Public Policy & Administration
	Incorporate Social Marketing	Several social marketing efforts with new and expanding campaigns put forth by Delaware stakeholders are discussed throughout the appendices of this report, such as Hope Line Delaware, HelpishereDE.org, HealthyDelaware.org, and DETHrives.com.	DHSS; DPH; DSAMH; DCC; DHMIC; Addition Action Committee
	Institutionalize Equity	The second edition of the <i>Health Equity Guide for Public Health Practitioners and Partners</i> was published in November 2019. Partners are working to disseminate and provide training on the guide throughout the state. Key SHIP stakeholder groups are also working internally and/or with partner institutions and organizations focused on health and/or the conditions that support it, to apply tools, frameworks, and accountability measures for creating a culture of racial equity.	DPH; UD Partnership for Healthy Communities (PHC), UD Biden School of Public Policy & Administration; United Way of Delaware; YWCA of Delaware

Source: SHIP Team Assessment Tool, 2020

*For additional details see Appendix G – System-wide.

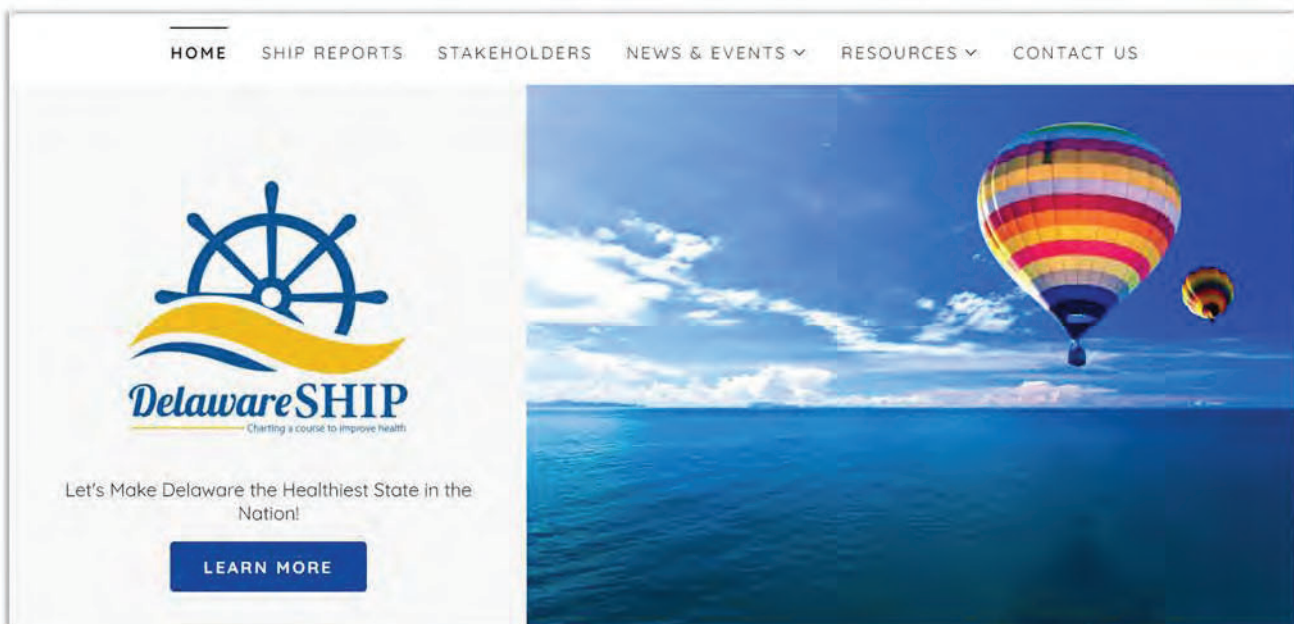
NEXT STEPS



The upcoming year of Delaware SHIP will include activities by the SHIP project team to assess and communicate SHIP implementation progress to date, help stakeholders identify and address gaps, and facilitate engagement from a broadening network of SHIP stakeholders that have important roles to play in helping improve Delaware’s health. Specifically, stakeholders will be invited to use the information gathered in this report to revise the SHIP recommendations and plans, identify additional measurable outcomes or indicators as appropriate, and better define how both traditional and newly emerged SHIP stakeholders can share responsibilities for implementing and updating the plan. Support for this expanding network and opportunities for collaborative SHIP implementation, such as virtual stakeholder meetings and digital communications, will be available through the newly revised www.delawareship.org and with support from Delaware’s SHIP Project Team.

UD implemented a SHIP Student Fellows program in the fall of 2020 to better leverage its resources for SHIP project management and support for stakeholder activities. PHC will oversee the SHIP Fellowship Program and provide structured opportunities for student engagement and scholarship to support SHIP stakeholders in the planning, implementation, and refinement of the state plan. The SHIP Fellowship Program and this type of community-engaged scholarship for health will be especially timely to support SHIP stakeholders in the immediate and long-term recovery in Delaware from COVID-19.

These strategies and activities, coupled with a collaborative and inclusive SHIP process, will help Delaware navigate the rough seas caused by the global pandemic and America’s reckoning with systemic racism. As health and non-health sectors – including public, private, and community-based organizations and grassroots collectives – come to the helm and work together to improve the health and equity of Delaware communities, we can chart a course to calmer waters and reach our destination of optimal health and well-being for all.



Charting a course to improve health at Delawareship.org

Thank you to the following agencies, organizations and groups for your key SHIP stakeholder activities this year:

Addiction Action Committee
Alliance for the Innovation of Maternal Health (AIM)
Amazon
American Civil Liberties Union (ACLU)
American Lung Association
Association of Women's Health, Obstetric and Neonatal Nurses (AWHONN)
AtTack Addiction
Ayuda Comunitaria contra COVID-19
Bayhealth
Be Ready CDC
Beebe Health Systems
Behavioral Health Consortium (BHC)
Biden School of Public Policy & Administration, University of Delaware
Black Men Meditate and Self-Care/Kyma Belardo
Black Mothers in Power
Brandywine Counseling Center
Brandywine Women's Health Associates, Inc.
Center for Drug & Health Studies (CDHS), University of Delaware
Central Baptist CDC
Child, Inc.
Children & Families First
ChristianaCare
Christina School District
City of Wilmington, Law and Human Resources (HR) Departments
College of Health Sciences, University of Delaware
Community Legal Aid Society, Inc. (CLASI)
Cooperative Extension, University of Delaware
Cornerstone West CDC
Delaware Academy of Medicine/Delaware Public Health Association
Delaware Adolescent Program Inc. (DAPI)
Delaware Alcohol and Tobacco Enforcement (DATE)
Delaware Cancer Consortium (DCC)
Delaware Center for Horticulture
Delaware Chapter of the National Coalition of 100 Black Women, Inc
Delaware Chronic Disease Coalition (DCCC)
Delaware Coalition Against Domestic Violence (DCADV)
Delaware Community Forest Council
Delaware Community Foundation (DCF)
Delaware Council on Farm and Food Policy
Delaware-CTR ACCEL
Delaware Department of Correction (DOC)
Delaware Department of Education (DOE), Office of Early Learning
Delaware Department of Health and Social Services (DHSS)
Delaware Department of Human Resources
Delaware Department of Justice (DOJ)
Delaware Department of Labor (DOL)
Delaware Department of Natural Resources and Environmental Control (DNREC)
Delaware Department of Services for Children, Youth and their Families (DSCYF)
Division of Medical and Medical Assistance (DMMA)
Delaware Department of Elections
Delaware Department of Transportation (DelDOT)
Delaware Diabetes Coalition (DDC)
Delaware Division of Professional Regulations (DPR), Insurance Commissioner
Delaware Division of Public Health (DPH)
Delaware Division of Social Services (DSS)
Delaware Division of Substance Abuse and Mental Health (DSAMH)
Delaware Forest Service
Delaware General Assembly (GA)
Delaware Healthy Mother and Infant Consortium (DHMIC), Maternal and Mortality Workgroup
Delaware HIV Consortium
Delaware Legislative Black Caucus
Delaware Managed Care Organizations (MCOs)
Delaware Multicultural and Civic Organization (DEMCO, Inc.)
Delaware Office of the Attorney General
Delaware Perinatal Quality Cooperative
Delaware Section of the American College of Obstetricians and Gynecologists (ACOG)
Delaware State Housing Authority (DSHA)
Delaware State Epidemiological Outcomes Workshop (SEOW)
Delaware State University (DSU)
Domestic Violence Community Health Worker (DV-CHW) Steering Committee

DELAWARE STATE HEALTH IMPROVEMENT PLAN

2020 ANNUAL REPORT

Domestic Violence Prevention Enhancements and Leadership Through Alliances, Focusing on Outcomes for Communities United with States (DELTA FOCUS)/Rape Prevention Education (RPE) State Leadership Team
Dover Housing Authority
DPH - Physical Activity, Nutrition and Obesity Prevention (PANO) Program
DPH - Health Promotion and Disease Prevention Section
Family Services Cabinet Council
Food Bank of Delaware
Fraternal Order of Police Lodge #1
Gun Violence Prevention Task Force
Healthy Communities Delaware (HCD)
Hispanic American Association of Delaware (HAAD)
IMPACT Delaware Tobacco Prevention Coalition (IMPACT)
Jefferson Street Center, Inc.
Justice of the Peace Courts
La Red Health Center, Inc.
Lake Forest School District
Latin American Community Center
League of Women Voters of Delaware
Lulu Ross Elementary School
March of Dimes
Medical Society of Delaware
Metropolitan Wilmington Urban League
Nanticoke Indian Nation
Nanticoke Memorial Hospital
Network Delaware
New Castle County (NCC) Government
New Castle County Housing Authority
Newark Housing Authority
DPH - Office of Health Crisis Response (OHCR)
Office of the Governor

Partnership for Healthy Communities, University of Delaware
People's Place II
Perinatal Quality Cooperative
Planned Parenthood of Delaware
Polytech School District
Reach Riverside Development Corporation (REACH)
Redding Consortium for Educational Equity
Rose Hill Community Center
Route 9 Master Plan Monitoring Committee
Saint Francis/Trinity Health
ShopRite
State of Delaware
South Wilmington Planning Network
Sussex County Health Coalition
The Birth Center Holistic Women's Healthcare, LLC
Trauma Matters Delaware (TMD)
United Way of Delaware
University of Delaware
Urban Bike Project
Votamos/We Vote Coalition
Walmart
Westside Family Healthcare, Inc.
Wilmington Area Planning Council (WILMAPCO)
Wilmington City Council
Wilmington Housing Authority (WHA)
Wilmington Mayor's Office
Wilmington Police Department
YWCA of Delaware



*Delaware***SHIP**
Charting a course to improve health

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