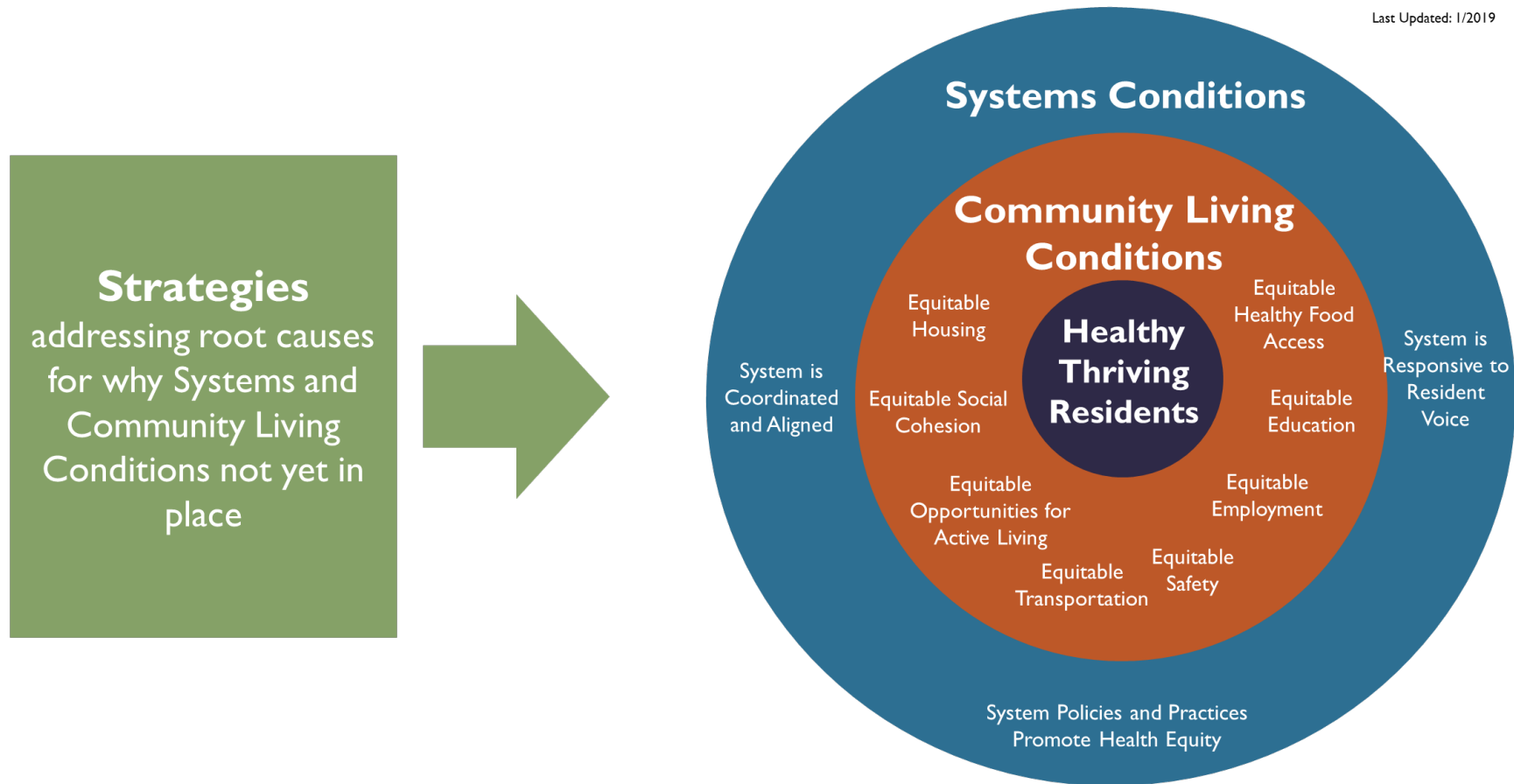


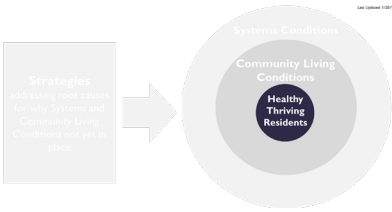
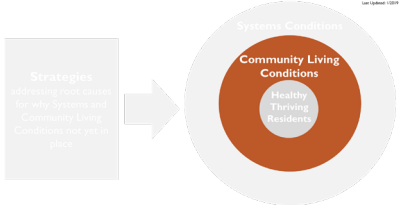
Example Shared Vision

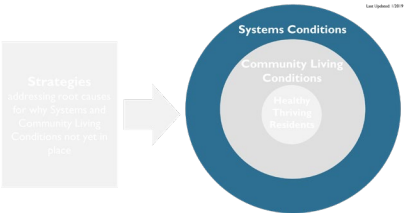
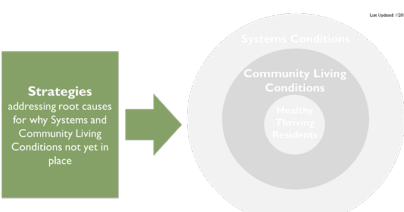


Example Shared Vision one community created to guide it's change efforts.

Last Updated: 1/2019



Visual Representation	Details
<p>Healthy Thriving Residents <i>Population-Level Impact</i></p> 	<p>More babies born at healthy birth weight INDICATOR: Percent of babies born at low birth weight (<2,500g), disaggregated by race and ethnicity</p> <p>More children and adults at a healthy weight INDICATOR: Percent of children and adults obese, disaggregated by race and ethnicity INDICATOR: Percentage of children and adults with inadequate fruit/vegetable consumption, disaggregated by race and ethnicity INDICATOR: Percent of adults age 20 and older with leisure time physical activity, disaggregated by race and ethnicity</p> <p>Fewer individuals experiencing depression INDICATOR: Percent of adults with depression, disaggregated by race and ethnicity</p>
<p>Community Living Conditions <i>What needs to be in place to realize Impact</i></p> 	<p>Affordable housing INDICATOR: Fewer affordable homes needed to meet demand of households earning less than \$50k per year</p> <p>Social cohesion and sense of community INDICATOR: Percent of adults age 18 and older without adequate social or emotional support</p> <p>Opportunities for active living INDICATOR: Number of people reporting barriers to participate in physical activity</p> <p>Accessible transportation INDICATOR: Number of communities that have expanded affordable/ reliable transportation options</p> <p>Neighborhood safety INDICATOR: Neighborhood crime rates</p> <p>Livable wage employment opportunities INDICATOR: Number and Percent of employers paying livable wage</p> <p>High quality education opportunities INDICATOR: School funding more equitably distributed across the county</p> <p>Access to healthy food INDICATOR: Percentage of population with low food access, disaggregated by race and ethnicity</p>

Visual Representation	Details
<p>System Conditions What needs to be in place to realize Impact</p> 	<p>System is Coordinated and Aligned INDICATOR: More organizations are coordinating intake, referral, service delivery, evaluation, and learning processes</p> <p>System Policies and Practices Promote Health Equity INDICATOR: More local policies and practices (e.g., related to strategic goals, procedures, decision-making and influence, service access, service quality) promoting equitable outcomes</p> <p>System is Responsive to Resident Voice INDICATOR: More local organizational decisions and priorities are responsive to needs and desires of local residents, especially those experiencing local inequities</p>
<p>Strategies</p> 	<p>Root Causes (see action plan for more details) Misaligned:</p> <ul style="list-style-type: none"> • Mindsets • Goals • Connections • Regulations • Power dynamics and decision-making • Feedback loops • Service components • Resources (human, financial, community) <p>Strategies to address root causes (see action plan for more details)</p> <ul style="list-style-type: none"> • Use social marketing to shift mindsets • Align goals and outcomes • Create shared data and referral systems • Engage residents in decision-making and action • Reduce barriers to accessing services • Embed new procedures and practices for building local capacity • Embed collaborative action learning processes