Evaluation of the 2017 Year of Healthy Communities
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This report was funded by Vitalyst Health Foundation and is intended for use by Vitalyst staff and board.
Background
In 2017, Vitalyst Health Foundation launched the Year of Healthy Communities to identify, connect and integrate efforts to improve well-being and health across Arizona. Recognizing that health is more than just health care, Vitalyst and its community partners developed the Elements of Healthy Community wheel in 2016. Informed by work of the World Health Organization and Centers for Disease Control and Prevention, the wheel demonstrates the interrelated nature of 14 community elements that impact health. There are four key goals for this initiative:

- Identify, lift up, and celebrate efforts to help Arizonans be healthier and live well.
- Facilitate connections between groups and sectors.
- Shift the health paradigm beyond health care and individual behaviors to the significant roles our systems, policies and environments play.
- Influence policies, systems and strategies for change for great health improvement impact.

Using this broader contextual framework, the Year of Healthy Communities engaged and connected with as many stakeholder groups as possible via conferences, meetings and workshops throughout the year. An interactive website was launched featuring a clickable Elements of a Healthy Community wheel – with each element page designed to provide visitors with quick access to top national experts and recommendations, key Arizona resources, projects already underway, and a short list of successful national projects that could be happening in Arizona soon. Webinars were conducted to further the message and engage leaders across the state.

In 2018 and beyond, the Year of Healthy Communities continues as Live Well Arizona with the launch of mini-grants to catalyze cross sector thinking and action. Vitalyst will continue working towards the four key goals to support the overarching vision enabling all Arizonans to Live Well.

The Purpose
The purpose of this project was for Pinnacle Prevention to support Vitalyst Health Foundation in learning from its experience during the 2017 Year of Healthy Communities as it continues this work in 2018 and beyond as Live Well Arizona. Pinnacle Prevention developed the evaluation plan, in concert with staff from Vitalyst Health Foundation, based on the six step Centers for Disease Control and Prevention framework for program evaluation This report is intended to describe what was done during the 2017 Year of Healthy Communities, understand the relationship between program activities and the intended goals, and establish a baseline for continuing to monitor activities for improvement with Live Well Arizona. As with all evaluation reporting, this is a living document and should be adapted as Live Well Arizona evolves.
Methodology
Pinnacle Prevention created a logic model found in Appendix A, outlining process, short, medium and long-term indicators for each of the four goals of Live Well Arizona. To collect the indicators, three key activities were completed:

1) Assessed activities completed and tools and resources developed during 2017 Year of Healthy Communities including website content, events, workshops, and podcasts.
2) Conducted and themed key informant interviews with leaders across the state that interacted with the 2017 Year of Healthy Communities.
3) Distributed and analyzed an online survey to participants who attended one or more of the 2017 webinar series.

The following sections further describes the methods, analysis and results each one from each of these activities.

Activities, Tools and Resources
Pinnacle Prevention worked with Vitalyst staff to collect records of key activities completed as part of the 2017 Year of Healthy Communities. This includes resources posted on the website as well as presentations and workshops conducted in the community throughout the year.

Website Resources
Vitalyst worked with staff and partners to create the livewellaz.org website. Resources were organized under four major headings: national resources, Arizona resources, key projects, and signature projects. Partners could submit resources for each of the 14 elements of a healthy community. Pinnacle Prevention inventoried the resources listed by each element as well as cross referenced the partners’ submissions.

There were a total of 423 resources listed on the livewellaz.org website. The social justice element contained the most resources (49) and the resiliency element contained the fewest resources (7). The following chart summarizes the resources listed under each element on the website.
There were 26 unique contributors that submitted one or more resources for the website for one or more elements. A total of 273 resources were submitted by external partners during 2017. Of those submissions, 104 were directly linked to the livewellaz.org and 151 were not able to be located under the element resources. There were 21 submissions that were indirectly linked through a broader organizational webpage. For example, the ASU health clinic was submitted but the link on the access to care element takes you to the ASU health and nursing innovations main page which is predominantly focused on enrollment in degree programs. It would take some additional navigation to get to the clinic webpage. Additionally, the quality of submission ranges from simply naming a program/organization to providing more...
detail about the program with a website. Finally, submissions for each element did not always align with the actual description of the element and may have been intended for a different element.

There were 32 events promoted on the livewellaz.org website. The majority of the events were hosted in Phoenix metro area (28) and four events were hosted in the Southern (3) and Northern (1) parts of Arizona. The events most often aligned with the education element. The social justice and parks and recreation elements were the least likely to be aligned with promoted events.

**Presentations and Workshops**

Vitalyst staff completed 36 presentations and 10 workshops across the state during 2017, reaching as far south as Yuma and as far north as Flagstaff.

Presentations were done in various settings, including conferences (14), boards/committees/commissions (10), workgroups/community collaborations (5), organizations/membership associations (5), and philanthropic/funder organizations (2).

While the number of attendees at each presentation or workshop was not tracked, the target audience for each interaction indicated that efforts were made to reach stakeholders across the state.

**Figure 2: Workshops and Presentations by Venue’s Target Audience**

![Figure 2: Workshops and Presentations by Venue’s Target Audience](image-url)
Key Informant Interviews

Key Informants were identified by Vitalyst staff and represented a wide range of community sectors and organizations. Invitations to complete an interview were emailed to 25 key informants and 18 were completed. Discussions from key informant interviews were transcribed and analyzed using an inductive content analysis approach. Interview questions were used to create broad categories and open coding was used to determine key emerging themes within each category.

Perception of Health

Participants defined health in three ways: health encompasses the whole person; health means that individuals have access to health resources and services; and health focuses on the quality of life rather than the quantity of years in life. These definitions were in alignment with one of the Year of Healthy Community’s goal to shift the health paradigm beyond health care and individual behaviors to more holistic views of health, including the roles of systems, policies and environments.

“It is not just the absence of disease but opportunity for everyone to reach their full potential. Not just physical, but complete state of wellbeing, mental health and happiness. Everyone has the opportunity to have that state of wellbeing.”

Participants perceived their organizations as contributors to community health in a variety of ways including creating partnerships and collaborations, building community capacity, educating students and communities on the social determinants of health, engaging in policy and advocacy efforts, developing health leaders, and influencing the built environment to promote health. Participant organizations also focused on specific health-related initiatives such as access to food, homelessness, or domestic violence.

Utilization of Live Well Arizona and the Elements of a Healthy Community

Participants heard about the Year of Healthy Communities from a variety of sources. Community presentations and personal outreach by Vitalyst staff were the most frequently reported methods of engagement.

Perceptions about the wheel

All participants had positive reflections about the elements of a healthy community wheel. They appreciated the comprehensive yet simple design. It touched on what they perceived to be all the key social determinants of health, and they thought it was helpful in summarizing the greater picture of community health. Most of the participants had shared the wheel and resources with staff, partners and members in the community, and stated that it was a helpful
tool for initiating conversations, building collaborations and deepening goals and scope of their project.

“Handing this to someone that has never thought of healthy communities, it really helps connect people to those elements on the wheel and to healthy communities. I think the message is really helpful. I wish more people could see that. To me that is probably one of the best tools that Vitalyst has. You can talk until you are blue in the face about healthy communities but if you use the wheel and talk about healthy communities it can change the conversation.”

“The wheel aligns with the way I look to at big problems. Whatever piece you work in you are part of that bigger system and you probably can connect with more than one of the wedges. I wish it existed before we did our need and assets report.”

Using framework to structure projects and plans
Multiple participants described how they are using the elements of a healthy community to guide their town general plans, project plans, and organizational structures. For example, one participant described how he is using the elements to shape their active transportation plan. Another described how they have organized their policy initiatives around the elements. For example, they are using the elements as categories for legislative bills they are tracking. Another participant shared how they are including elements in their wheel in their requests for proposals to ensure that they are included in town projects. These accounts provide evidence to suggest that the elements of the wheel are moving beyond familiarity within organizations, but are actively being incorporated into policy and system operations.

“We do legislative policy each year. We track bills and use that info to educate our staff to help educate people. This year we aligned the bills with each element and tried to use the definition provided in the framework to categorize legislation.”

“Then I started this process to develop a scope of work for the active transportation plan and included a heavy emphasis on public health.”

Benefits of Being Part of Live Well Arizona
Greater collaboration across community sectors
Participants shared that learning about the elements of a healthy community through the Year of Healthy Communities helped to provide a framework for bridging the gaps between community sectors, allowing them to engage in more collaborative efforts. Year of Healthy Communities events have also helped to connect people and resources within a community.

“We are coordinating with each other in a different way. We now know we need to have all these elements in place. It helped us bridge some of the gaps in terms of what we have. We
were all siloed and now we are intentionally trying to collaborate with each other more because of how we are doing this under the healthy community lens.”

“I do feel like the silos are starting to come down. And that’s really exciting and we can start to address much deeper issues that we are facing locally and statewide because we have multiple perspectives and looking at how they are all related.”

“One of the relationships we’ve been investing time and energy has been with our community food bank down here. We are mutually interested in looking at access to healthy food and the physical piece of access- can you get there, what are the things that are keeping people from getting healthy food? We’ve been exploring that relationship with them and that started when we were both panelists on that webinar. That’s lead to much deeper conversation around poverty and equity and what are kind of the shared challenges we see around those issues.”

**Improved communication**
Community sectors have also shifted their language to be more consistent with the elements of a healthy community which has made having conversations about actions, strategies, and the social determinants of health much easier.

“Yes, using good terminology and having ways to break things down. It’s helped with talking points and why those sectors see themselves as contributors to health.”

“I think what I’ve heard is that the language that we are using to talk about different areas that we are working in is aligned with the Year of Healthy Communities”

**Promote a broader perspective on health**
Live Well Arizona helped community sectors develop a broader perspective on health and helped stakeholders to encourage sectors within their communities to have a broader perspective on health. It has also encouraged previously non-engaged sectors to have a greater interest in the role they play in community health and has helped them to see their work through a public health lens.

“When you can make transportation planners think about people and not just roads and cars, that is huge. Our transportation director is now talking about our role of connecting people too.”

**Reinforcement of the work taking place**
For many participants, their engagement with Year of Healthy Communities helped to reinforce the work they were already doing in their communities and helped to validate their efforts. During Year of Healthy Communities presentations and interactions on the elements of a healthy community, participants found comfort in knowing they were on the right track
“Very little was changed, as in many ways our services incorporate the elements already. It reinforced what we already do, and our conversation have stayed the same. [We] are a very collaborative entity, we have a long history of interacting well with school district, non-profits, with faith based, all of the potential partnerships. More than any other city I’ve worked in. I feel this reinforces our current work more than anything.”

Staff and resources
Participants felt the Vitalyst staff are very professional and engaging with community presentations and meetings. They were grateful for the knowledge and expertise that the Year of Healthy Communities staff provided and were grateful for the connections and resources that Vitalyst offered to help them move their work forward.

“I think highly of staff that I’ve worked with at Vitalyst. They are professional and knowledgeable, and it has been a pleasure working with all of them.”

“I wish we had 20 more organization like them in the state.”

Challenges and Pitfalls of Live Well Arizona
Preaching to the choir
In some respects, participants felt that Year of Healthy Communities outreach efforts were targeting organizations and sectors that are already focus on the social determinants of health and the elements of a healthy community. While it was useful to have additional resources, some participants felt that the information and outreach should focus on the decision makers as they are the ones who have the power to guide and implement the actions and strategies that are being recommended. Participants thought they were prohibited in working in some of the elements because they lacked power or authority to move the needle.

“Various organization can be involved in this, but for many of the elements the local governments are going to be the main players. So, I think it is important that this perspective of a healthy community becomes more central in how they are setting priorities.”

Lack of community funding
There is little doubt that communities and stakeholders are ready and inspired to work on implementing strategies within the elements of a healthy community, however; most strategies require funding to guide the work, which limited their capacity to move their work forward or take on certain elements of the wheel. Participants also expressed that they often struggled with making compelling funding arguments, especially in rural communities where resources are scarcer and the competition for funding is much greater.
“There are great ideas and inspired to do it but may not have the staffing or funding available to dedicate to it.”

**Concern for duplication of efforts**
Improving communication and collaboration across sectors can help to ensure that duplication of efforts is not taking place. However, participants discussed a general lack of awareness of efforts that are taking place within their own communities. This could potentially limit their ability and confidence to engage in certain strategies for fear of duplicating efforts.

“There is a lot of stuff happening in the healthy communities world. A lot of conferences and people are aware and interested in healthy communities. Its great but it becomes challenging to figure out how not to be duplicative or stepping on toes or that we are fighting for turf here.”

**Opportunities for Live Well Arizona**

**Tangible directions and guidance**
Participants were looking for direction and guidance from Vitalyst staff on what specific things they could work on given their community needs and their available resources. They hoped that Live Well Arizona could work to serve in an advisory capacity, where it is not just a hub for resources, but it is also a place communities can go for recommendations on what elements and strategies would be obtainable within the context of their community. They felt that Live Well Arizona and Vitalyst staff have greater perspective and knowledge of the elements and they could use this perspective to make specific recommendations.

“I had envisioned that Vitalyst would help each organization identify activities that they could follow through.”

“Something more directly tangible and how to put in it to practice.”

“Recommendations on what kind of projects to do or where to go and for an individual community to figure out what makes sense for us given what resources we have available.”

**Strategies that focus on funding**
Participants, particularly in rural areas, stressed the need for strategies within each element for generating funding for projects aimed to address healthy community elements. Since finding funding sources for community work was identified as a challenge of Year of Healthy Communities, having examples of projects and efforts within each element that were either no or low cost would help move the work forward. Also sharing case studies of how communities generated funding for specific elements, or created innovative solutions on limited funding.
“If there are funding ideas in the toolkits it would be helpful. If Live Well Arizona can highlight not only how you do it but also how you fund it and support it in your area. Or give ideas on how others have gotten it done.”

A need for defined roles
While all informants and their collaborators understood the elements of a healthy community, there was uncertainty among community members of what their specific role was and how they could contribute to community health within their job description. One participant suggested designing toolkits for jobs within each sector, for example, for community design, identifying specific strategies for each specialty area such as city planners, architects, surveyors, engineers. Tailoring strategies for specific job descriptions would be helpful.

“Most planners now understand what is a healthy community but maybe not their role.”

Focus on developing community champions
Shifting the focus of Live Well Arizona from raising awareness of the elements of a healthy community to developing champions within the community that can lead the work once the information is disseminated would help ensure the sustainability of the initiative. Participants often described having a greater awareness of the elements after attending a community presentation or talking across sectors, but often times the enthusiasm for efforts diminished as stakeholders returned to their regular routines. Identifying a leader within the community that can continue to serve in a supporting role once Vitalyst staff leave is needed.

“And during the year it was Vitalyst staff going out and doing presentations and going to various communities throughout Arizona and that could be an opportunity for [others] to take on those roles and lead those conversations.”

Engagement with elected officials
Lack of interest among elected officials and community decision makers was identified as a challenge in making progress within some of the community elements. While Year of Healthy Communities has helped to breakdown silos within communities, there is a need to create connections to elected officials and decision makers. Participants recommended shifting the focus of outreach and educational efforts to elected officials to help them understand the root causes of key health issues in the community along with tangible strategies they could implement.
“We need have more key players. Go back to the organizations and begin to identify the key players in the community that have the ear of the decision makers that can make them think in a different way.”

Greater emphasis on equity and resiliency
Participants described having a hard time explaining the equity and resiliency portions of the wheel compared to the individual elements. Providing more examples during presentations of how communities can work towards equity and resiliency, in addition to what the terms mean, would be helpful.

“One thing I’ve have been playing with is how to describe health equity. I am not sure that was a heavy emphasis in the presentations, but expanding on those terms both equity and resiliency. I don’t have a really good model from this initiative to describe those two cross cutting issues.”

Additional suggestions made by stakeholders included:

- Providing information of participating organizations on the Live Well Arizona website along with the various projects and initiatives that are taking place across the state, perhaps using a state map.
- Include strategies and resources that help different sectors find common goals.
- Create an opportunity for users to network and share experience, such as in-person meetings and listservs.
- Social justice was also identified as an element that was the hardest to comprehend and build capacity around.

Webinar Participants
Over the course of 2017, Vitalyst hosted 6 webinars as part of the Year of Healthy Communities featuring 24 guest speakers. There were a total of 363 unique attendees who participated in these six webinars that covered topics from across the elements of a healthy community. As part of the evaluation of the Year of Healthy Communities – now Live Well Arizona – in February 2018 an electronic survey was sent to all 363 people who attended at least one of the six year of Healthy Communities webinars. Of the 363 webinar attendees who the survey was sent to, 15 email addresses were no longer valid, and 40 people responded to the survey for a response rate of 11.5%.

The survey respondents were a cross sector representation of webinar attendees from healthcare (7.5%), for-profit business (7.5%), public health (22.5%), government (15.0%), non-profit (25.0%), and other (22.5%) sectors. Eighteen (45.0%) respondents reported attending
only one webinar, 11 (27.5%) reported attending two webinars and two (5%) respondents reported attending all six webinars.

**Engagement through Webinars**

The survey asked respondents to reflect on how their work was impacted by the webinars. Goals of the webinars include connecting attendees with resources, partners and projects, introducing a holistic view across all the elements of healthy communities, and bringing a diverse group of community members together working on projects that impact the health of communities in Arizona. Almost half (47.5%) of the survey respondents reported they made a connection to either resources, a partner or a project through the webinars and 18.8% of respondents have used resources on livewellaz.org. A smaller cohort of respondents reported making contributions to the website with 12.5% reporting they have contributed resources, 12.5% reporting they have contributed project information and 6.25% reporting they have contributed event information.

**Capacity Building through Webinars**

Over half (54%) of respondents reported that they have identified other sectors and elements in the community that impact their work through the Year of Healthy Communities webinars. Respondents were asked to reflect on their work prior to the webinars and report which elements of a healthy community they were familiar with and connected to through their work. They were then asked to reflect on which elements had been introduced to them through the webinars. Figure 3 illustrates that each element of a healthy community was already familiar to a subset of webinar attendees and each element was also freshly introduced to a subset of webinar attendees. Half (50%) of respondents listed at least two elements of a healthy community were introduced to them through these webinars and 48.7% of survey respondents noted they now use the Live Well Arizona elements of a healthy community wheel in their work. This diversity across all the elements of a healthy communities provides evidence that bringing these elements together in framework that crosses sectors is helping to build health-focused connections across communities.
Opportunities for Live Well Arizona

Respondents were also asked to provide open-ended feedback about the webinars and Live Well Arizona. When asked to reflect on what would make Live Well Arizona a success in five years the majority of respondents noted that there needs to be an integration of the principles of Live Well Arizona and the wheel across multiple sectors, including those not traditionally aligned with health, and woven into policies and decisions at the state and local levels. It was also noted that there should be strategies to approach common metrics, create dedicated pool of funds for projects and mini-grants, and that the resources and framework of Live Well Arizona should become ubiquitous across all work done in communities in Arizona.
Conclusions
How successfully was the Year of Healthy Communities implemented?
It is clear that the Year of Healthy Communities laid strong groundwork toward achieving its goals. A well-received communication framework through the wheel has been developed and the platform to identify and connect has been established through the website. Stakeholders are interested as evidenced by their attendance in webinars, and contributions of resources and they are using the framework in their own work. Some have facilitated connections between groups and sectors. Staff have introduced the framework across the state and built relationships with cross-sector representations. The goals to shift the health paradigm and influence policy and systems will take longer to measure change. Baseline indicators have been established and should continue to be monitored for progress. As Live Well Arizona continues, there are opportunities to focus on how to do this work through developing of champions, defining roles of community members, refining and creating additional tools and tangible examples, increasing the utilization of the livewellaz.org website and resources, targeting communication with key leaders, and increasing the financial investments in the work.

Are people being reached as intended?
Presentations and workshops have achieved a statewide reach; however, there is opportunity to improve the engagement of rural partners with the Live Well Arizona initiative. Online webinars also lent themselves to statewide engagement and contributed to the goal of facilitating connections between groups and sectors. There is some concern by key informants that Live Well Arizona is preaching to the choir and interacting with those already doing Live Well Arizona and social determinants of health work. Also, there is an opportunity to focus on the goal to shift the paradigm and influence policy and systems by targeting the decision makers and key leaders in communities. This includes dialogues with elected officials, business leaders and funders that are not as engaged with healthy community work, or that are not looking at their work through a public health lens.

What innovative activities have been implemented?
The elements of a healthy community wheel was identified as the most utilized resource for all that engaged with the Year of Healthy Communities. It is well received by both those intimately involved in social determinants of health and those that are on the periphery. The opportunities identified are to help better define roles on how to advance work with the wheel framework as well as enhance the dialogue, tools, and visuals specific to equity and resiliency.
Was implementation more successful in some places than others?
Efforts were made to reach both rural, urban and statewide partners. While events promoted tended to be located in the Phoenix metro area, workshops tended to be completed with rural communities. There is opportunity to improve the reach to rural communities, particularly locations in the northern region of the state. There was a wide variety of types of organizations reached including universities, municipalities, county health departments, association/councils of governments, statewide and regional membership organizations, and funders that represented the elements of a healthy community. Webinar topics included the 12 elements of a healthy community, but did not address equity or resiliency as a sole topic. Key informant interviews indicated that equity, resiliency and social justice were the hardest to address and would appreciate additional talking points, tools, and visuals on these elements.

What barriers were observed to implementation?
Time and funding tend to be a common listed barrier particularly for rural communities that feel stretched by limited resources. Additionally, those working in the healthy communities field felt concerned about duplication of efforts and were challenged identifying their role in how to contribute to the Year of Healthy Communities beyond submitted resources to the website and participating in events.

How might these barriers be overcome?
There were many opportunities identified to overcome barriers. These included increasing funding for cross-sector projects, sharing data and common metrics, and increasing the adoption of the framework at decision-making levels, both locally and state level. It was clear there is a need among partners to better understand how to do the work and how to contribute to Live Well Arizona. Convening partners to jointly identify specific roles and opportunities within their organization or community would help to provide clarification and a clear vision of a path forward.

What facilitators of implementation were observed?
The elements of a healthy community wheel has been a key facilitator for engagement with the Year of Healthy Communities, particularly in creating conversations and connections among cross-sector partners. It is not clear why some participants were more ready to adopt the Live Well Arizona framework in their work than others. This should continue to be explored particularly if a champion model is used to facilitate this work in communities.
Were critical partners engaged throughout implementation?

There is a lack of understanding about who is involved with Live Well Arizona or who was reached by the Year of Healthy Communities. To some, partners are already part of the healthy communities work and this is information that is already known. To others, they find this work overwhelming to consider and indicated that staff would need to be hired to truly embrace this work. Some felt engaged at the beginning and not towards the end of the year. Only a limited number of participants joined the entire webinar series. Many partners expressed desire to be more engaged but did not know how.

Questions to continue to explore in future evaluation and progress monitoring include:

1) Are trends moving in a desirable direction?
2) Have activities led to better outcomes (i.e., are there better outcomes where activities were targeted compared to other settings, and/or do outcomes improve over time in targeted settings?)

Recommendations

Build on the Wheel

The wheel resonates with both those that work closely with healthy communities as well as those that see themselves on the periphery. Both webinar participant surveys and key informant interviews reveal that partners are using the wheel in their work, whether it is in discussions with internal teams or looking to cross sector engagement. The wheel is a useful tool to help engage in dialogue around healthy communities. However, a few key informants indicated that they get stuck on equity and resiliency and do not feel the wheel helps them navigate these discussions. It is recommended to spend some time thinking about equity and resiliency visual aids to complement the wheel and enhance those elements of the work. Those are also two elements with less resources listed on their webpage than other elements. Invest time in building the content of the website through partnerships with community members doing this work well.

Define Roles and Provide the How

A clear opportunity for Live Well Arizona is to help get partners unstuck around what their role is with Live Well Arizona. Those in the healthy communities’ field want to contribute but do not know what that looks like or how not to duplicate. Those on the periphery are concerned with competing priorities, lack capacity, both time and staffing to identify how they may start with the framework which results in organizations staying involved but not engaged. Consider developing a team of cross sector representatives
that can develop possible roles for different organizations and different levels of staff. Use this to develop a toolkit on how to adopt and implement Live Well Arizona. Consider co-learning with a community and invest staff time and resources in two pilot areas, one rural and one urban, to learn what roles may look like and how this work unfolds on the ground. Keep the statewide work and framework, but focus staff time and energy on the ready to adopt pilot areas. Using this learning to truly share the story of how to do this work. This learning could enhance the goal to shift the paradigm.

Focus Staff Efforts and Develop Champions for Groundwork
Key informant interviews see Vitalyst staff playing a role in bringing decision makers in to the Live Well Arizona initiative to help shift the traditional frame of health and lead to community partners ability to influence policies and systems. Over the coming years, it is recommended that Vitalyst staff consider focusing their community work with elected officials, business leaders, funders and key decision makers to help bring them to the table. In order to keep the community work moving forward, develop a champion model, where key individuals are the agents for Live Well Arizona in their organization or community. Work with partners to develop and clarify the role of the champion and identify tools that will support the champion in being successful. Consider the development of toolkits to support champions and their capacity building needs.

Website Enhancements
Website is an evolving resource, but not always utilized. Results from webinar participant surveys and key informant interviews responded indicated the website was not used regularly. Key informants indicated they liked the clean, simple layout of the website, however, they reported lack of time as a barrier to using the website more regularly. The most talked about item of the website was the key projects and resources, but few people indicated going there on a regular basis. There were a few suggestions to make the resources more user friendly through an interactive map that shows what has been implemented where, so communities can quickly see who to contact for implementing similar strategies. Consider hosting focus groups or working with stakeholders that can help identify solutions to increasing contribution and utilization of the website in the coming year.

In addition, consider exploring the submission form for resources to improve the quality of submissions. A few key informants reported contributing resources to the website, but not sure what happened to the resources. A crosswalk between submission and posted resources indicates that there is more than half that do not get posted under the element it was submitted to. This can be potentially discouraging to contributors. It may be useful to spend time developing criteria for what is posted on the website and then designing a submission form that aligns with criteria. For example, if for-profit organizations will not be listed, that should be quickly identified in the submission form. This could potentially help keep partners engage as well as alleviate the time staff spend on evaluating the credibility of each submission.
Collect Data and Tell the Story

As Live Well Arizona moves forward, it will be important to continually monitor progress through data and communicate this data to stakeholders. Using the logic model as guidance, collecting and sharing the indicators for Live Well Arizona will help all partners better understand the broader impact of the work, celebrate successes, and identify opportunities and future roles. To better understand the outcomes of this work, partners and projects must find a way to measure change over time in cross-sector work. Communities will need help identifying the right set of indicators and enhance capacity for using, analyzing and sharing data with communities. Additionally, the context behind the data is important and can be captured through storytelling as one key informant indicated. Collecting and sharing stories involving equity and resiliency elements could be an opportunity to improve progress around the shift and influence goals (Goals #3 and #4).
Appendix A:
Logic Model and Key Indicators
<table>
<thead>
<tr>
<th>Goals</th>
<th>Process Indicators</th>
<th>Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Identify</strong> - Identify, lift-up and celebrate efforts to help Arizonans be healthier and live well.</td>
<td>Number of resources posted on the livewellaz.org website: <strong>423</strong></td>
<td><strong>Percent of survey respondents who report they have used the resources:</strong> <strong>18.8%</strong></td>
</tr>
<tr>
<td></td>
<td>Number of contributors of resources on the livewellaz.org website: <strong>26</strong></td>
<td>**Number of Signature Projects identified: <strong>44</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Percent of Key Projects meeting expected outcomes:</strong> <strong>Not Currently Available</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Number of Signature Projects kicked off:</strong> <strong>0</strong></td>
</tr>
<tr>
<td><strong>Connect</strong> - Facilitate connections between groups and sectors.</td>
<td><strong>Number of participants on webinars:</strong> <strong>363 attendees over the 6 webinars</strong></td>
<td>**Is ‘connections between groups and sectors’ a theme identified in key informant interviews?: <strong>Yes</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Number of attendee for presentations:</strong> <strong>Attendees not currently tracked – 36 presentations completed</strong></td>
<td>**Is ‘action taken as a result of connections made between groups’ a theme identified in key informant interviews?: <strong>Not yet</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Number of participants in workshops:</strong> <strong>Attendees not currently tracked – 10 workshops completed</strong></td>
<td>**Is ‘action taken as a result of connections made between sectors’ a theme identified in key informant interviews?: <strong>Not yet</strong></td>
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<td><strong>Percent of survey respondents who state they have identified sectors or elements of the community that impact in their work:</strong> <strong>54.1%</strong></td>
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<td>Goals</td>
<td>Process Indicators</td>
<td>Outcomes</td>
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<td><strong>Shift - Shift the health paradigm - health is more than health care.</strong>&lt;br&gt;Number of participants in webinars discussing elements of a healthy community: <strong>363 attendees over the 6 webinars</strong>&lt;br&gt;Number of opportunities to introduce the elements of a healthy community identified: <strong>46</strong>&lt;br&gt;Percent of survey respondents who identify multiple community elements when selecting components of health introduced through Live Well Arizona: <strong>50%</strong>&lt;br&gt;Number of systems identified that projects are working to influence: <strong>Not currently available</strong>&lt;br&gt;Percent of survey respondents who report the Live Well Arizona webinars helped them identify any other sectors or elements of the community that impact in their work: <strong>48.7%</strong>&lt;br&gt;Percent of survey respondents who state they have used the wheel in their work: <strong>48.7%</strong>&lt;br&gt;Is ‘use of the wheel outside of Vitalyst’ a theme identified in key informant interviews?: <strong>Yes</strong>&lt;br&gt;Number of Key Projects that include an advocacy component: <strong>TBD</strong>&lt;br&gt;Number of Signature Projects that include an advocacy component: <strong>TBD</strong>&lt;br&gt;Percent of Key Projects that include an advocacy component that meet their expected advocacy outcomes: <strong>Not currently available</strong>&lt;br&gt;Percent of community members surveyed through CHAs who identify multiple community elements when selecting perceived components of health: <strong>Not currently available</strong></td>
<td><strong>Short-Term</strong>&lt;br&gt;Percent of survey respondents who identify multiple community elements when selecting components of health introduced through Live Well Arizona: <strong>50%</strong>&lt;br&gt;Percent of survey respondents who state they have used the wheel in their work: <strong>48.7%</strong>&lt;br&gt;Is ‘use of the wheel outside of Vitalyst’ a theme identified in key informant interviews?: <strong>Yes</strong>&lt;br&gt;Number of Key Projects that include an advocacy component: <strong>TBD</strong>&lt;br&gt;Number of Signature Projects that include an advocacy component: <strong>TBD</strong>&lt;br&gt;Percent of Key Projects that include an advocacy component that meet their expected advocacy outcomes: <strong>Not currently available</strong>&lt;br&gt;Percent of community members surveyed through CHAs who identify multiple community elements when selecting perceived components of health: <strong>Not currently available</strong></td>
<td><strong>Medium-Term</strong>&lt;br&gt;Percent of survey respondents who identify multiple community elements when selecting components of health introduced through Live Well Arizona: <strong>50%</strong>&lt;br&gt;Percent of survey respondents who state they have used the wheel in their work: <strong>48.7%</strong>&lt;br&gt;Is ‘use of the wheel outside of Vitalyst’ a theme identified in key informant interviews?: <strong>Yes</strong>&lt;br&gt;Number of Key Projects that include an advocacy component: <strong>TBD</strong>&lt;br&gt;Number of Signature Projects that include an advocacy component: <strong>TBD</strong>&lt;br&gt;Percent of Key Projects that include an advocacy component that meet their expected advocacy outcomes: <strong>Not currently available</strong>&lt;br&gt;Percent of community members surveyed through CHAs who identify multiple community elements when selecting perceived components of health: <strong>Not currently available</strong></td>
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<td><strong>Influence - Influence policies and systems for change.</strong>&lt;br&gt;Number of participants in webinars discussing influence: <strong>TBD</strong>&lt;br&gt;Number of Key Projects that include an advocacy component: <strong>TBD</strong>&lt;br&gt;Number of Signature Projects that include an advocacy component: <strong>TBD</strong>&lt;br&gt;Number of policies identified that projects are working to influence: <strong>Not currently available</strong>&lt;br&gt;Number of systems identified that projects are working to influence: <strong>Not currently available</strong>&lt;br&gt;Percent of community members surveyed through CHAs who identify multiple community elements when selecting perceived components of health: <strong>Not currently available</strong></td>
<td><strong>Short-Term</strong>&lt;br&gt;Number of Key Projects that include an advocacy component: <strong>TBD</strong>&lt;br&gt;Number of Signature Projects that include an advocacy component: <strong>TBD</strong>&lt;br&gt;Number of policies identified that projects are working to influence: <strong>Not currently available</strong>&lt;br&gt;Number of systems identified that projects are working to influence: <strong>Not currently available</strong>&lt;br&gt;Percent of community members surveyed through CHAs who identify multiple community elements when selecting perceived components of health: <strong>Not currently available</strong></td>
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