



Strategic Plan 2022-2027

The Center for Advancing Rural Health Equity

www.D-H.org/about/center-rural-health-equity

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TABLE OF CONTENTS

To Our Community	3
Our Journey	4
Values	5
Strategic Framework	6
Objectives	7
Appendix.....	9
A. Funded Projects.....	9
B. Leadership and Governance.....	11
C. Definitions	13

TO OUR COMMUNITY

The Center for Advancing Rural Health Equity was created to make a positive impact on the health of northern New England for everyone who lives here. From the earliest stages of planning, we knew that if community members weren't seeing and feeling the impacts of this work, then the Center wasn't living up to its mission.

"Action" is one of our values, and this document describes the actions we plan to take over the next five years to make sure all people living in rural areas have the chance to thrive, feel safe and live as healthy as possible. We will use this strategic framework to guide program development and project selection, as well as to check in on our progress. We hope community members will use this document to learn about our work, get involved and help keep us accountable.

Thank you to the many people who participated in this planning process and helped inform this strategic plan. We learned a lot from you and did our best to incorporate your feedback.

We look forward to the journey ahead. Although we know it will not be easy, we are committed to continuously learning and getting better at this work every day. By staying true to our values and working with you, our neighbors, we trust we will be able to make our rural region healthier for everyone who lives here.

Rudy Fedrizzi, MD
Chair, Leadership Council
Center for Advancing Rural
Health Equity

Sally Kraft, MD, MPH
Executive Director,
Center for Advancing
Rural Health Equity

Our vision is that everyone living in rural communities has the chance to thrive, feel safe, and be welcomed.



OUR JOURNEY SO FAR

Our mission is to make sure that people in rural areas have the chance to live healthy lives, by learning and acting together in our rural communities.

This document is the culmination of two years of foundational work and planning, which brought the Center for Advancing Rural Health Equity from imagination into existence.



Stakeholder Interviews

Beginning in 2021, Dartmouth Health Population Health interviewed community stakeholders to explore the need and opportunity for a community resource devoted to health equity. Informed by these conversations, the Population Health team created a framework to bring together four formerly separate sectors: education, research, healthcare redesign and community action.

Planning

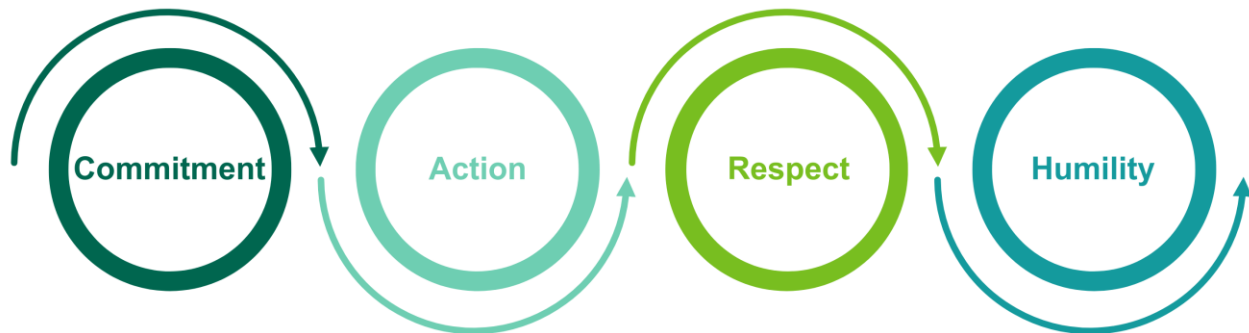
A planning team of healthcare, academic and community representatives came together in 2022 to craft the mission, vision, values and structure of the Center. This planning phase was comprehensive and professionally facilitated.

Official Launch

In August 2022 the inaugural Leadership Council met for the first time. In November, a public event officially launched the Center for Advancing Rural Health Equity. The first projects to receive Center funding were selected by the Leadership Council in January 2023.

VALUES

Our values are reflected in all that we do.



There are certain hurdles that make it harder for some people to get the care and support they need to be healthy. We commit to working with our rural neighbors to eliminate these unfair difficulties and harms.

We respond intentionally when our communities are in need. We take action to make sure support systems work for everybody. We listen, learn, and make decisions together to help everyone in our rural communities have a fair shot at living their healthiest life.

We value every person's experiences and strengths. We earn trust by listening and taking the time to understand one another. We reach out to people who are unsupported and try to prevent the discrimination that divides our communities. Every person deserves honesty, fairness and respect.

We recognize the harms done to some members of our rural communities. We try to earn trust and restore hope where it is lacking. We respect every person's unique life experiences and identities, including experiences of discrimination and oppression. We promote services that are welcoming, easy to use, and offer the best health and care possible.



STRATEGIC FRAMEWORK



VISION

Our vision is that everyone living in rural communities has the chance to thrive, feel safe, and be welcomed.

MISSION

Our mission is to make sure that people in rural areas have the chance to live healthy lives, by learning and acting together in our rural communities.

VALUES

Commitment

Action

Respect

Humility

PRINCIPLES

Equity

Inclusivity

Shared Leadership

Co-Creation

Stewardship

Shared Learning

Transparency and Accountability

STRATEGIES

Act and Learn
Together as
Partners

Positively Impact
the Conditions
that Impact
Health

Improve Access
to Healthcare
Services

OUR OBJECTIVES

All projects and programs of the Center for Advancing Rural Health Equity utilize at least one of the following strategies and help to meet at least one of the objectives.

Strategy 1 Act and learn together as partners.

Objectives



- Evaluate the embodiment of CARHE's values and equity principles within Center activities.



- Enhance staff and partner skills and knowledge in community engagement and co-creation.



- Learn from and find solutions together with people who have the hardest time staying healthy in our communities.

Strategy 2 Positively impact the conditions that impact health.

Objectives



- Address inequalities in access to healthy food and nutrition.



- Improve access to safe and affordable housing.



- Reduce transportation barriers and make it easier for people to get where they need to be.

Strategy 3 Improve access to healthcare services.

Objectives



- Improve access to care for rural people with behavioral health needs including substance use disorder.



- Provide a supportive system of care for those who are pregnant and postpartum in rural areas.

APPENDIX A

Funded Projects 2023-2024

Farm Shares for Health: Improving Access to Healthy Food and Education for Rural Cancer Patients

Applicant organization	Osher Center for Integrative Health at the University of Vermont
Project description	This project aims to help food insecure cancer patients in Vermont eat more fruits and vegetables. Participants will receive a prescription for healthy foods and will be given a free CSA to a local farm, which will provide them with weekly deliveries of fresh, local vegetables. Participants will also receive nutrition education and coaching.
CARHE strategy	Positively impact the conditions that impact health
CARHE objective	Address inequalities in access to healthy food and nutrition

Early Childhood Region 1: Building Early Childhood Supports in Rural New Hampshire

Applicant organization	Monadnock United Way
Project description	This project supports families with young children in Southwestern New Hampshire by creating and disseminating family supports through rural public libraries. By partnering with libraries, schools, family resource centers and other vital organizations, critical services and resources will be delivered to families and professionals supporting children and families.
CARHE strategies	Act and learn together as partners Improve access to health care services
CARHE objectives	Learn from and find solutions together with people who have the hardest time staying healthy in our communities. Provide a system of care for those who are pregnant and postpartum in rural areas.

Improving Food Security and Nutrition Equity for Residents of Income-Eligible Housing

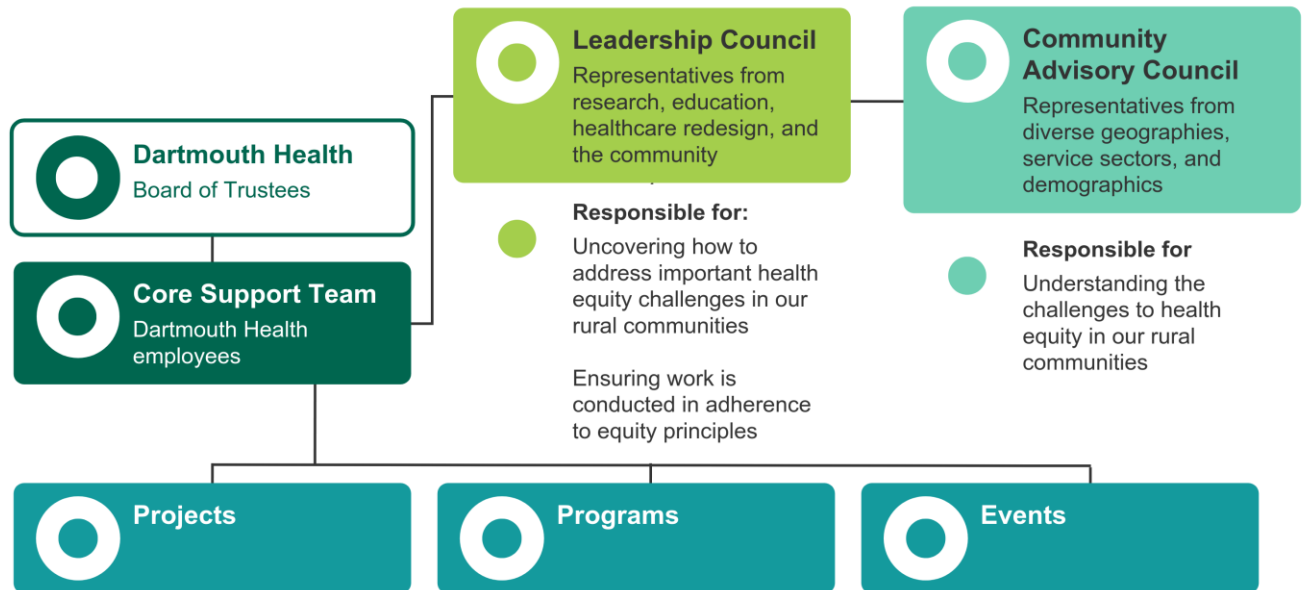
- Applicant organization** Willing Hands
- Project description** This project will study the impacts of food deliveries to income-eligible housing sites in the Upper Valley of New Hampshire and Vermont, specifically examining whether weekly deliveries of fresh food are improving residents' food security and health. The results of this study will help Willing Hands tailor their delivery services to meet the needs of these residents and will help inform other food security efforts in the region.
- CARHE strategy** Positively impact the conditions that impact health
- CARHE objectives** Address inequalities in access to healthy food and nutrition
Improve access to safe and affordable housing

Supporting Community Collaboration to Address the Impact of Climate Change on Allergies and Asthma in Children in Rural New Hampshire

- Applicant organization** New Hampshire Healthcare Workers for Climate Action
- Project description** This project will work the Boys and Girls Club of Central New Hampshire and other partners to support children with asthma and allergies and to increase family access to weatherization and energy efficiency programs that can reduce allergy and asthma triggers. Additionally, this project will raise awareness about the health impacts of climate change and promote environmental stewardship.
- CARHE strategies** Act and learn together as partners
Positively impact the conditions that impact health
- CARHE objectives** Learn from and find solutions together with people who have the hardest time staying healthy in our communities
Improve access to safe and affordable housing

APPENDIX B

Leadership & Governance



Leadership Council Members:

Andrew Loehrer, MD, MPH
Staff Physician, Dartmouth Health

Andy Lowe
Executive Director, New England Rural Health Association

Ann Fournier, PhD, MS, RN, AHN-BC, CNE, CCE
Associate Professor, School of Nursing & Health Sciences, Colby Sawyer College

Elisabeth Wilson, MD, MPH, MS-HPed
Chair and Professor of the Department of Community and Family Medicine, Dartmouth Health

Helen Hong
Executive Director, COVER Home Repair

Jacqui Baker
Family Treatment Court Coordinator, New Hampshire Judicial Family Treatment Court

Janet Hunt, MA
New Futures

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Director, Workforce Development & Public Health Programs, North Country Health Consortium

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Public Health Services District
Director, Vermont Department of Health

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Vice President, Population Health, Dartmouth Health

Tina Foster, MD, MPH, MS
Staff Physician, Professor, Dartmouth Health

Terri Lewinson, PhD, MSW
Associate Professor, The Dartmouth Institute

Community Advisory Council Members:

Aiyana Banks

Community Member from Lebanon, NH

Andra Daunhauer, PhD

Executive Director, Equal Access to
Broadband

Bryanna McConnell

TLC Family Resource Center

Cheri Bryer

Recovery Coach, Moms in
Recovery, Dartmouth Health

Denise Pouliot

Cowsuck band, Penacook-Abenaki people

Emily Zanleoni - Chair

Executive Director, Hartford Community
Coalition

Faye Grearson, MEd

Alice Peck Day Memorial Hospital, Formerly
Twin Pines

Greg Norman, MS

Senior Director, Community Health, Dartmouth
Health

Laura Byrne

Executive Director, HIV and Hepatitis C
Resource Center

Lindsey Boisvert

Community Health Worker, New London
Hospital

Rob Schultz

Retired, Formerly Vital Communities

APPENDIX C

Definitions

Community Engagement: A two-way exchange of information, ideas and resources that offers opportunities for communities to exercise power in decision-making. It considers the diversity of communities, including culture and race, and creates an inclusive and accessible process.

Discrimination: The unfair or prejudicial treatment of people and groups based on characteristics such as race, gender, age or sexual orientation.

Diversity: All the ways in which we are unique as individuals, encompassing both visible and invisible differences. Some dimensions of diversity include but are not limited to age, gender, race, ethnicity, physical ability, personal/thinking styles, strengths, nationality, relation, socioeconomic factors, health, religion, sexual orientation, veteran status, marital status, education, language, geographic location, job function etc.

Health: The WHO defines health as ‘a state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity’.

Health Equity: As defined by the United States Centers for Disease Control and Prevention, “health equity is achieved when every person has the opportunity to attain their full health potential, and no one is disadvantaged for achieving this potential because of social position or other socially determined circumstances.”

Northern New England: Maine, New Hampshire and Vermont.

Population Health: The health outcomes of a group of individuals, taking into consideration the distribution of such outcomes within a group.

Social determinants of health: Defined by the World Health Organization (WHO) as “the circumstances in which people are born, grow up, live, work and age, and the systems put in place to deal with illness. These circumstances are in turn shaped by a wider set of forces: economics, social policies, and politics.”

Thrive: When a person has the opportunity to make healthy choices, afford food and housing, have good jobs that can sustain a family, attend quality schools for better education, and fulfil their potential