



What is ANCHOR?

**Accelerating National Community Health Outcomes through
Reinforcing Partnerships Program**

**Otherwise known as by CDC and our public health
partners...**

4. National Implementation and Dissemination for Chronic Disease Prevention (DP14-1418)

Category “A”

Role of Category A

- Awardees will use at least **75% of their annual award** to identify, fund, monitor, and **support two cohorts of 15-20 sub-recipients** from among their chapters/affiliates
- Selected chapters/affiliates will have **6-8 months to develop or strengthen their coalitions and examine community needs assessment data**
- Then implement a **15-month locally-driven community action plan**, or work plan, that addresses one or more of the following chronic disease risk factors selected by their national organization: **tobacco use and exposure, poor nutrition, physical inactivity, or lack of access to chronic disease prevention, risk reduction, or management opportunities.**

Role of National Organizations

- Increase collaboration between national and community partners
- Increase community capacity to implement policy, systems and environmental change (PSE) improvements
 - Multi-sectorial coalitions
 - Community data
 - Community action plan
- Increase messages on the importance of PSE improvements

Role of Category “A” Sub-recipients (Local Grantees)

- **Lead a new or enhanced multi-sectoral coalition**
- **Community assessment**
- **Identify chronic disease risk factors**
- **Select evidence-based PSE strategies**
- **Reach 50% of the population in the funded area**

Organizations That Were Funded

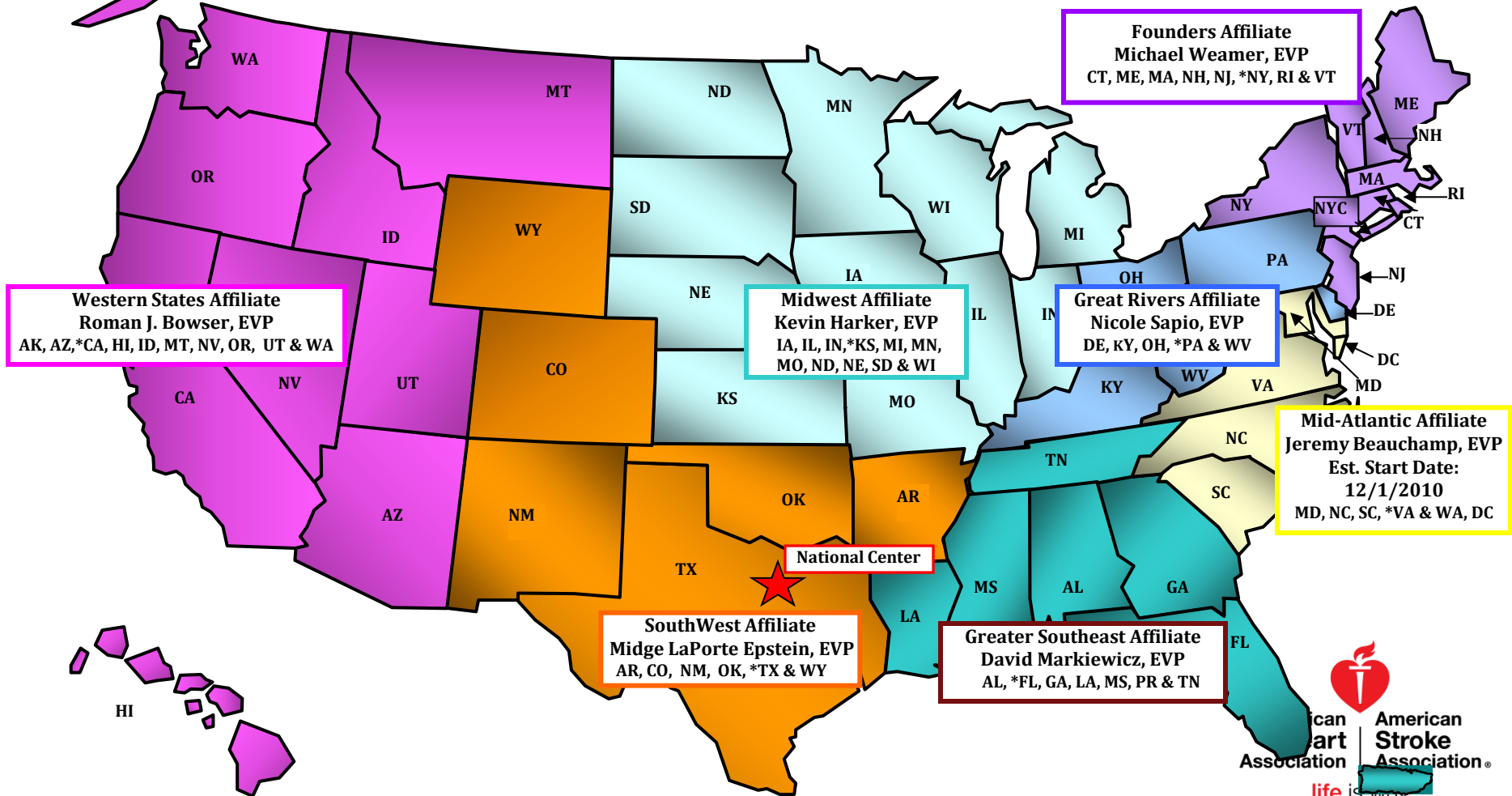


Awardee	Amount
Category A:	
National WIC Association	\$2,391,722
American Planning Association	\$2,998,075
American Heart Association	\$3,000,000
Category B:	
Society for Public Health Education	\$480,282
ASTDHPPE	\$500,000

AHA Approach to Our Application: Build upon Existing Programs

- Voices for Healthy Kids
- Tobacco Control Policy
- Check. Change. Control. and other AHA clinical programs

AHA Affiliates



AHA Strategies and Intervention Identified in ANCHOR Grant Proposal



Tobacco Use and Exposure Strategies: Educate community residents on the benefits of tobacco and smoke-free environments

- Increase the number of settings that have 100% smoke-free policies

AHA Strategies and Intervention Identified in ANCHOR Grant Proposal



Nutrition Strategies: Increase the number of people with access to environments with healthy food and beverage options

- Increase availability and affordability of healthy foods and beverages in institutional settings, workplaces, prisons, senior centers, childcare settings, and government facilities
- Increase availability of healthy foods in communities, including working with community partners to incentivize new grocery store development, expanding farmers markets, community and school gardens, small store initiatives, mobile vending carts, and restaurant initiatives
- Promote purchase of fruits, vegetables, and other healthy foods through food assistance program incentives such as accepting EBT payments at farmers' markets

AHA Priorities Identified in ANCHOR Grant Proposal



Physical Activity Strategies: Increase the number of people with access to physical activity opportunities:

- Work with education partners to share information on how quality physical education programs can improve their children's health and academic performance
- Increase opportunities for physical activity in public settings:
 - Improve community designs to make streets safe for pedestrians, bicyclists, and public transit users
 - Shared use agreements
- Improve physical activity and education policies and practices in early child care settings

AHA Strategies and Intervention Identified in ANCHOR Grant Proposal



Chronic Disease Prevention, Risk Reduction and Management: Increase the number of people with access to opportunities for chronic disease prevention, risk reduction or management through community clinical linkages:

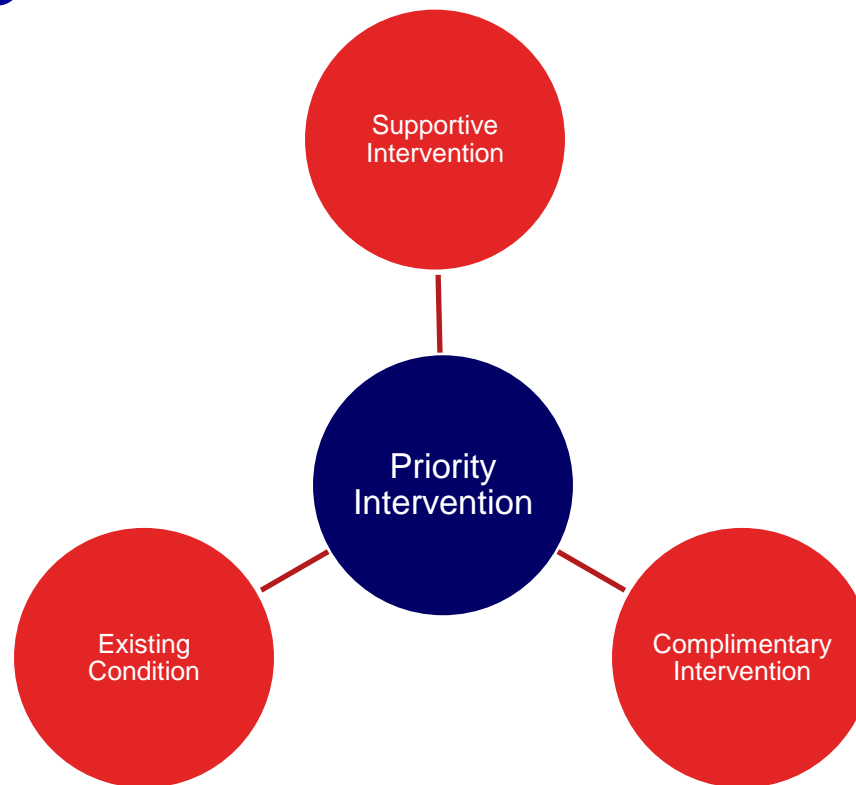
- Increase access to chronic disease preventive services and self-management programs in community settings
- Increase number of referrals to community-based resources and services for risk reduction and disease management
- Increase number and training of multi-disciplinary teams including core competency training for community health workers, cultural competence training for health care providers
- Leverage health IT systems to:
 - Collect data on populations bearing a disproportionate burden of chronic disease
 - Provide feedback on quality of care across health care providers and health care organizations



Alignment of AHA with CDC's Approach and Priorities to Address Chronic Disease

The AHA is committed to high impact at the population level through population-wide policy, systems and environmental change improvements.

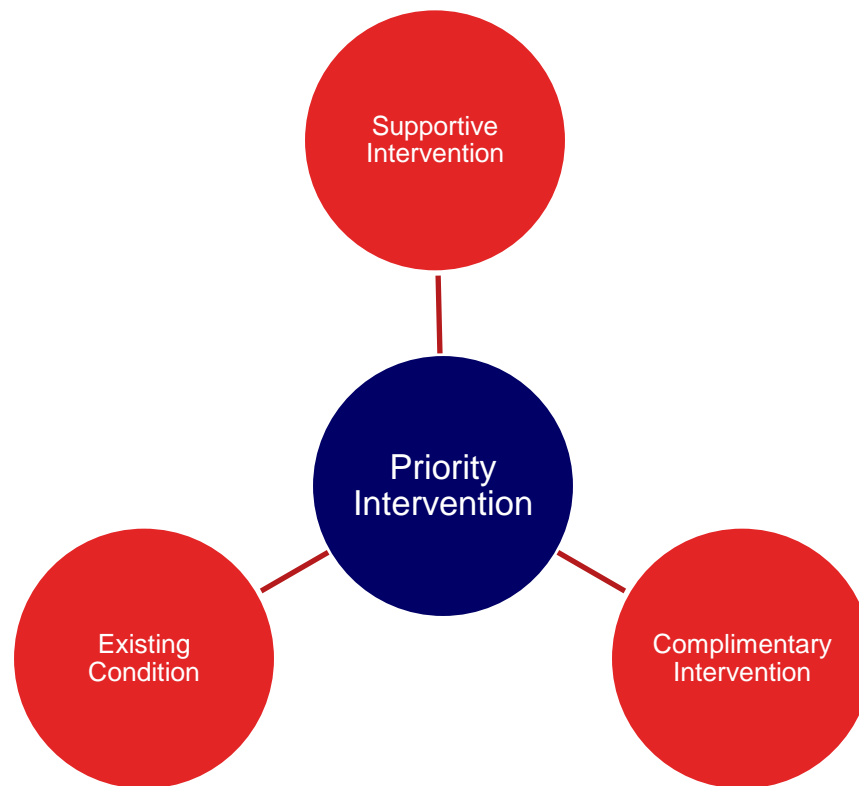
We do this by selecting high-impact priority policy interventions.



Defining Terms

Priority Interventions:
an intervention that
more directly affects
risk factors or
behaviors

Supportive
Interventions: an
intervention that may
not have high impact
on their own, but can
enhance the reach,
effectiveness or
knowledge about a
primary intervention



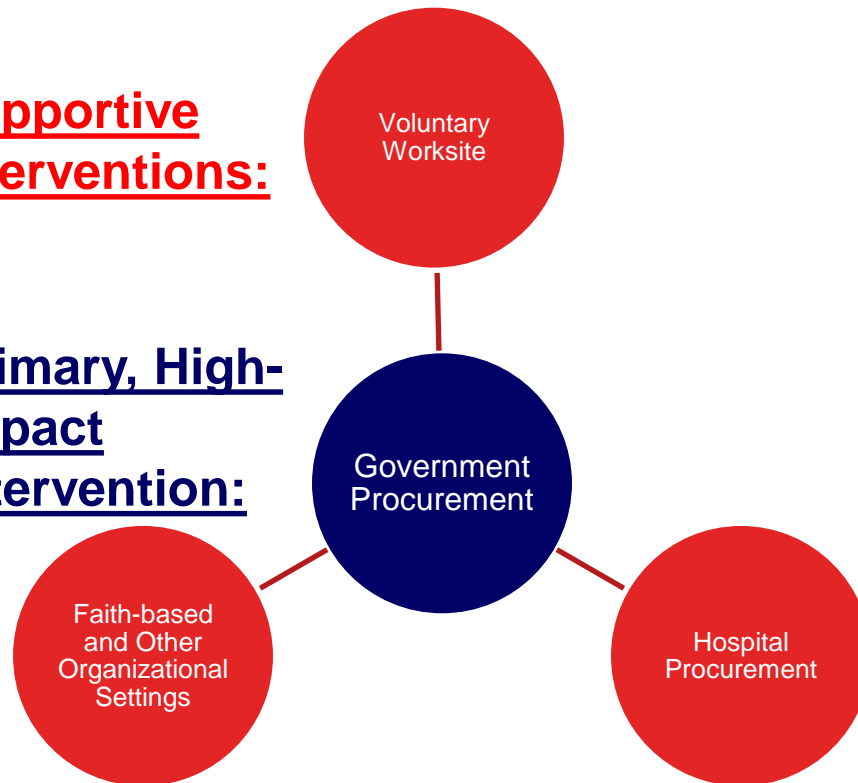


How Can We Apply This to Our Work?

Strategy: Increase availability and affordability of healthy foods and beverages in institutional settings, workplaces, prisons, senior centers, childcare settings, and government facilities

Supportive Interventions:

Primary, High-impact Intervention:



Timeline



Task	Timeline
Finalize and publish application	November 10 th
Affiliates write and submit proposals	November 10 th – December 12 th
Notice of Award to Affiliates	January 26 th
Select Community Leadership Team	January 26 th – February 25 th
Kick-off face-to-face meeting for all sub-recipients	February 25 th -27 th or Week of March 16 th
Community Action Plans written	Kick-off meeting – May 31st
Community Action Plans approved	June 30th
Implementation of 15 month CAP begins	August 1st – onwards

Need to follow-up?

Jill Birnbaum

jill.birnbaum@heart.org

612-202-1980