Healthy New Jersey 2020 (HNJ2030)
Healthy Living Action Team
Self-Care Subcommittee Meeting Minutes
May 19, 2020 11 am – 12 pm (via Zoom)

Attendees: Alycia Bayne, Laura Cerutti, Tiffany Neal

Overarching Topics and Questions

- Laura shared that Healthy New Jersey 2030’s website is clear and well laid-out compared to some other states’ websites.
- Tiffany shared that other states have written explanations of the process used to identify priorities in their SHIPs. Will HNJ2030 similarly explain our process? Do we have specific guidelines for how we will choose priorities and objectives across the three ACTs and across the four HNJ2030 domain areas? The definition of the priority is that we have to limit what we include. How do we decide which priorities are the most important? Are we engaging in this process in a similar way across the ACTs?
- Laura asked if Healthy Communities will explore topics related to green space.
- Tiffany asked if NJ is considering including developmental objectives for topics that are not currently measurable, or where there are less data available (for example, social connectedness).
- Alycia reiterated that we have a standing question from our last meeting: Will the Access to Quality Care Domain include well-care, immunizations and screenings?
- Tiffany suggested that we create a shared Google document for our subcommittee.
- Tiffany asked if there would be meetings across all four ACTs at any point.

Transportation (Laura)

- Laura shared a summary from her review of transportation objectives.
- HP2030 includes numerous transportation objectives including:
  - Reducing motor vehicle deaths
  - Decreasing unrestrained occupant deaths
  - Reducing alcohol impaired MV deaths/ increasing seat belt use
  - Reducing traffic deaths
- Some states link the concepts of drowsy driving and drunk driving
  - Drowsy driving is more difficult to enforce and self-regulate. It is tied to health.
- Tiffany shared that some studies have shown that drowsy driving is more dangerous than drunk driving.
- Laura shared that distracted driving was not included in Healthy People 2030, and distracted driving has not been covered by many other states.
- It is important to focus on bicyclists and pedestrians from an equity perspective.
- The equity lens is that people who cannot afford vehicles or do not have access to a vehicle in the household have to bike or walk. They are vulnerable road users in comparison to people who have access to and can afford vehicles.
- Tiffany shared a study that found that people of color were more likely to be involved in a pedestrian accident. She also shared that another study found that the more expensive the brand of car, the less likely the driver was to stop at the stop sign.
- Laura shared that ‘Vision Zero’ is an initiative with an equity focus. It is focused on vulnerable road users.
- NJ is a pedestrian focused state from the Federal Highway Administration. NJ has double the national average of pedestrian fatalities.
- Some states include objectives for motorcyclists.
- The NJ Division of Highway Traffic Safety releases an annual plan, and this plan has a comprehensive list of measures. There are opportunities to review this plan for transportation objectives for HNJ2030.
- Laura was involved in the development of the State Strategic Highway Safety Plan. There is a presentation (virtually) on June 19 where they will discuss the objectives.

**Social Connectedness (Alycia)**

- Alycia shared a summary from her review of social connectedness.
- Social connectedness is an abstract concept
  - Lack of consistency in what is being measured
  - Differing levels of analysis (individual, family, community-levels)
  - Different measurement approaches (interviews, surveys, other data)
- Minnesota has issued recommendations for social connectedness and ways in which public health entities and their partners can increase awareness and understanding of social connectedness.
- How can different policies and programs strengthen social connectedness among populations like older adults? Multiple sectors must be engaged.
- Population-based Indicators of social connectedness include household size, age, demographic characteristics, residential stability, single parent households, segregation, employment/unemployment rates, incarceration rates.
- Social connectedness is different than social cohesion.
- New York State has objectives for social connectedness as they relate to counseling and education. These include: 1) build community supports and services that facilitate social connectedness including integration and access to quality preventive and treatment services; 2) support identifying and building nurturing environments.
- Social connectedness can include structural and functional measures.
- A Rutgers report documented social connectedness in South NJ.
- Laura suggested looking into BRFSS for social connectedness and missed medical appointments.
- Tiffany suggested checking in with the Behavioral Health Subcommittee about whether they are exploring this topic.

**Safer Sex (Tiffany)**

- Tiffany shared a summary of her review of safer sex objectives.
• Safer sex has two main sub-topic areas in Healthy People 2030: unintended pregnancy and STIs, including HIV as a separate category.
  o Healthy People 2030 includes many objectives related to this topic. The ones that stood out included reduce unintended pregnancy, teen pregnancy, increase use of birth control/condoms, and access to care, among others.
• NY state has three main objectives
  o Decrease HIV
  o Viral suppression
  o STIs
• PA and CA have no safer sex goals at all.
• Tiffany raised that we are back to that question of: what if something is not on NJ’s list of priority topics? It does not necessarily mean it is not important, but that it does not rise to the top of state priorities.
• HIV and STIs in NJ 2020: For HIV, we are meeting/exceeding most goals. For STIs, we are not progressing or having negative progress towards the goals.
• It may not make sense to have safer sex listed as a top priority objective.
• The definition of the priority is that we have to limit what we include. How do we decide which ones are the most important? There are many organizations that will continue to work on sexual health.
• Tiffany was ambivalent about including this topic in HNJ2030. It is clearly important, but many topics are important. Does it rise to a top priority for the state? How do we determine what rises to the top as a priority?
• Tiffany will compare NJ with other states. How do our rates compare to that of other states?

Next Steps

• This group will meet biweekly on Tuesdays at 11 am.
• For our next call, we will continue to discuss our topic areas.
• Alycia will share the group’s questions with the co-chairs of Healthy Living as well as the other groups.
• The group suggested that the June ACT should be conducted via video call.
• In the June ACT, it would be helpful to discuss how we are prioritizing topics across the ACT so we can ensure we are using a similar process.