

# MEASURING IMPACT



## HEALTH IS LOCAL

Center for Health Progress works to increase understanding of the issues and experiences of Coloradans facing barriers to care due to factors like their race, income, or ZIP code. We do this in a variety of ways, from broadcasting our commentary on important issues to influence and lead the public dialogue, to curating and documenting the experiences of Coloradans to inform our conversations. In the fall of 2013, we undertook our largest communication project to date: *Health is Local*.

*Health is Local* is the story of the first year of health reform in Colorado. It challenged us to look at a very macro-level experience—the Affordable Care Act and health reform in general—in a very micro-level way. It is part documentary, part public testimony, and all authentic storytelling.

Center for Health Progress recognized that in a state as geographically-diverse as Colorado, state and national policy change impacts each community differently, due to their varying resources, population structures,

and systems. We planned to track the roll-out of health reform throughout Colorado, with a focus on individual community impact. It helped fill a gap in two ways: first, it would be reliable qualitative data in the absence of the quantitative data that would take months and years to collect and analyze; second, it would focus on community-level impact, rather than the state and national impact already in the news.

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***Understanding local impact is important because policies affect communities differently based on their resources and priorities.***

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We targeted four community types (Front Range urban, Eastern Plains rural, mountain resort, and Western Slope agricultural) to get a diversity of perspectives. We structured the project across a 12-18 month timeline, with interviews with the same group of local leaders every 3-4 months. We also collected data, photos, and video to build a powerful multimedia platform.



Initial community visits and interviews began in late 2013, prior to the coverage expansions brought about by the Affordable Care Act, in order to record the historic moment. It established a baseline for community sentiment and helped us understand the differences in the structure of each community's health system.

We launched a robust website in February 2014, which included health statistics, demographics, quotes from leaders and residents, news about local health issues, and a summary of each community's health system and perspective on

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reform. This was the first feedback anyone had collected on the ways local communities were feeling—sometimes very intimately—the impact of reform.

We collected audio interviews with local leaders, creating an invaluable oral history of health reform perceptions, expectations, and impact, which include nuanced explanations of each community's strengths and challenges. We also collected video interviews with residents of each of the communities, and with the passage of time, the shifts in concerns and tenor of the conversation are obvious.

Based on our observations, *Health is Local* was one of the leading efforts to track and share the impact of health reform on communities in Colorado. This allowed policymakers and health



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*Colorado has **very distinct regional differences**. I think we need to get back to the thought that **health care is local!** The resources in every community are different. The relationships in those communities are different. The needs of the consumers in the community are different.*

**CAROL BRUCE-FRITZ**

*CEO, Community Health Partnership*

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care leaders to make quick corrections to implementation efforts before quantitative data came out. This information has been useful not only locally, but nationally: with highly respected organizations, such as the Commonwealth Fund and Primary Care Progress sharing the project's findings.

A survey of participants revealed the project's true value: 1) it shared their community's experiences and concerns with a broader audience, 2) it explained how their community's experiences fit into the broader context of health reform around the state, and 3) it helped community leaders connect with others in this work.

*Health is Local* has ended up being a critical tool in our ongoing work. It has informed our understanding of

the different approaches of each community and the nuances of their experiences. We have been able to advocate better on their behalf because we can speak from a place of authenticity. We've been able to inform policymakers about the needs of their constituents and given them a tool in their own work. We anticipate the lessons of *Health is Local* will be useful in future periods of great change.

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[centerforhealthprogress.org](http://centerforhealthprogress.org)