



Muskegon SHIP:

A Landmark NIH ComPASS Community Award



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The NIH ComPASS Opportunity

Community-Led Research



The NIH Opportunity



- NIH Common Fund Community Partnerships to Advance Science for Society (ComPASS)
- Landmark **community-led research** program to study ways to address the **underlying structural factors** within communities that affect health, announced in 2022
- Renewable 5-year awards made to 25 communities across the country
- ComPASS will enable research into sustainable solutions that promote health equity to create lasting change in communities across the nation.

NIH ComPASS

ComPASS has three initiatives:



Community-Led, Health Equity
Structural Interventions (CHESIs)



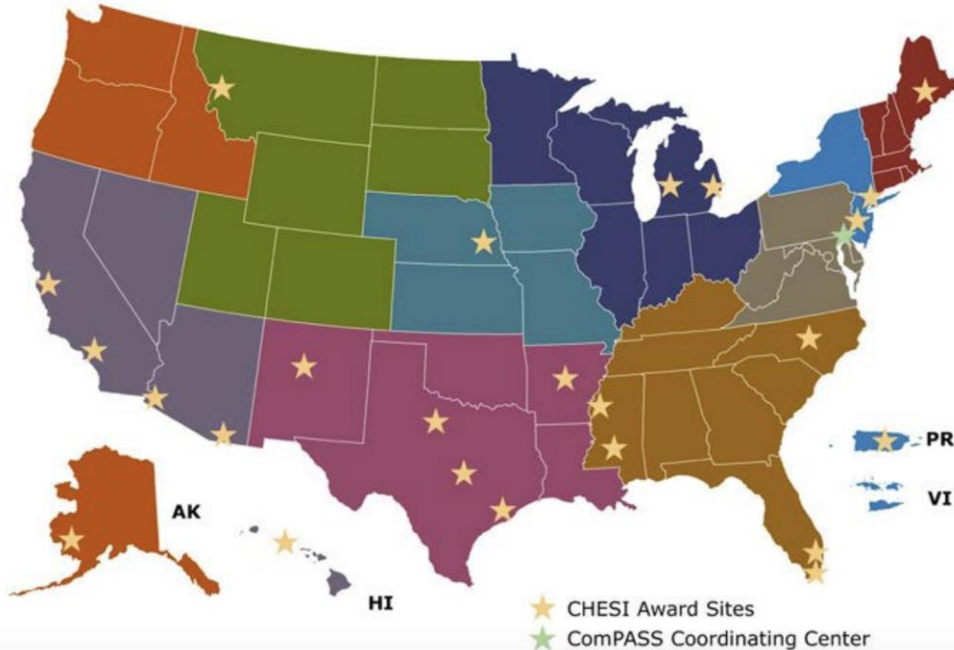
ComPASS Coordination Center
(CCC)



Health Equity Research Hubs
(Hubs)

NIH ComPASS

ComPASS Awardee Locations and States/Territories Represented in the CHESI Projects by HHS Region



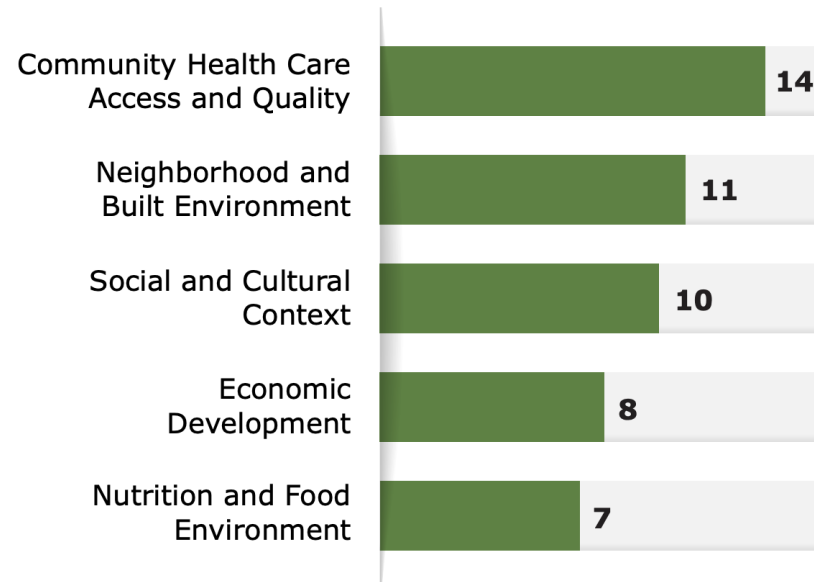
HHS Region	# of Projects	States/Territories Represented in Interventions*
1	1	ME
2	4	NJ, NY (2), PR
3	3	PA, MD (2), (and DC)
4	5	NC, MS (2), FL (2)
5	3	MI (3)
6	6	AR, TX (4), NM
7	1	MO
8	1	MT
9	5	CA (2), HI, AZ (2)
10	1	AK

*Note that some interventions are taking place in multiple states.

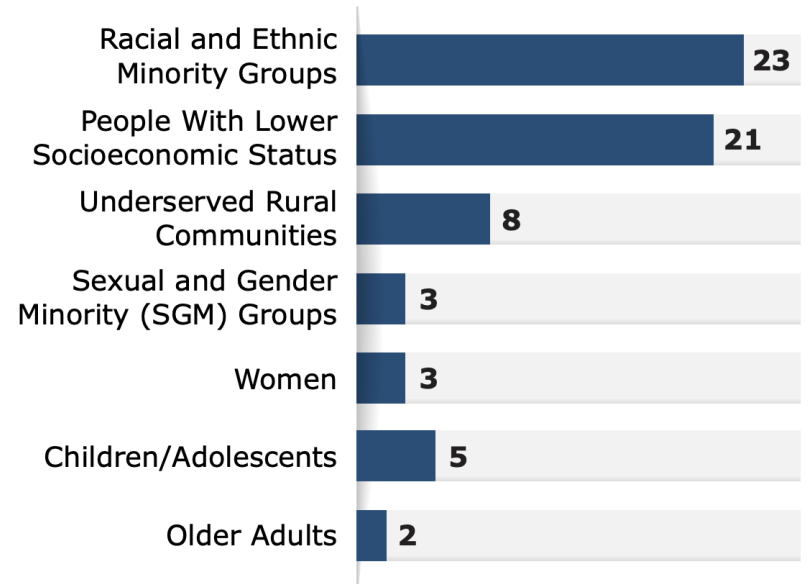
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The 25 CHESI Structural Factors and Participant Populations

Social Determinants of Health and Structural Factors of the Projects



Populations That Experience Health Disparities and Other Participant Populations*



*Note that CHESI projects that focus on more than one social determinants of health and/or population experiencing health disparities are counted more than once.

NIH ComPASS: 10 Year Timeline

Years 1-2

Years 3-8

Years 9-10



Planning

Implementation

Evaluation



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Designing a Community Based Intervention

Identifying need, assets, and change levers



The Problem: Poor Health

Muskegon County is one of the least healthy counties in Michigan.

Ranked #69 out of 83 counties in Michigan

according to County Health Rankings and Roadmaps

Residents experience high rates of:

Adult Smoking

Adult Obesity

Physical Inactivity

Excessive Drinking

Teen Births

Sexually Transmitted Infections

Diabetes

Adult Asthma

Low Birthweight Babies

High Cholesterol

Kidney Disease

High Blood Pressure



Why Poor Health?

Residents of Muskegon County have spent a lot of time asking the **WHYs** to identify the **root causes** of our health disparities.

A lot of those WHYs came down to MONEY.
Income, Employment, and Employment Barriers & Deterrents

From some of our Livability Lab 4.0 Surveys:

“Can not earn enough money to sustain our basic needs.”

“Sometimes you have to work two jobs to make ends meet nowadays.”

“Not making enough money at work, lack of health benefits.”



Some of the populations in Muskegon County experiencing health disparities

People with lower socioeconomic status ("Low SES")
Racial and ethnic minority groups
Underserved rural communities

Muskegon County Population: 175,633
Core City Population: 47,690

The county is **81.2% White**, and **14% Black**.

26% of residents live in **Rural** areas.



Economics in Muskegon County

42% of households in Muskegon County are **ALICE** or below.

ALICE: Asset-Limited, Income-Constrained Employed

In 2021: **\$25,932** for a single adult

\$59,016 for a family of four

Muskegon Heights: **65%**

North Muskegon: **23%**

Cedar Creek Township: **43%**

Married (w/ children): **17%**

Single, Male-Headed (w/ children): **58%**

Single, Female-Headed (w/ children): **80%**



Resident Voice – Framing the Need

“You're **giving up almost all your paycheck just for childcare**. What's the point? And so, then children are going to homes where they're **not safe** because it's a friend of a friend watching someone's child now.”

“Our children have state insurance, but I'm **always concerned about losing it** due to **small increases in income** but not enough to actually cover medical bills if they had to go in my husband's work policy.”

“**Lack of transportation** to rural areas.”

“**My hopes and dreams for me and my family are:**

*to **not have to live paycheck to paycheck** worrying about how much the cost of inflation is affecting us in our everyday lives.*

Resident Voice: Structural Barriers

Q: What gets in the way of your hopes and dreams?

A: Not having enough support for free college or trades training, no affordable housing worth living in. The reason suicide, substance abuse and violence are everywhere is because you **can't dream in a broken system.**

Source: Resident to Resident Survey from Livability Lab 3.0



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The Intervention: Muskegon SHIP

Sustainable Health
Investment Partnership

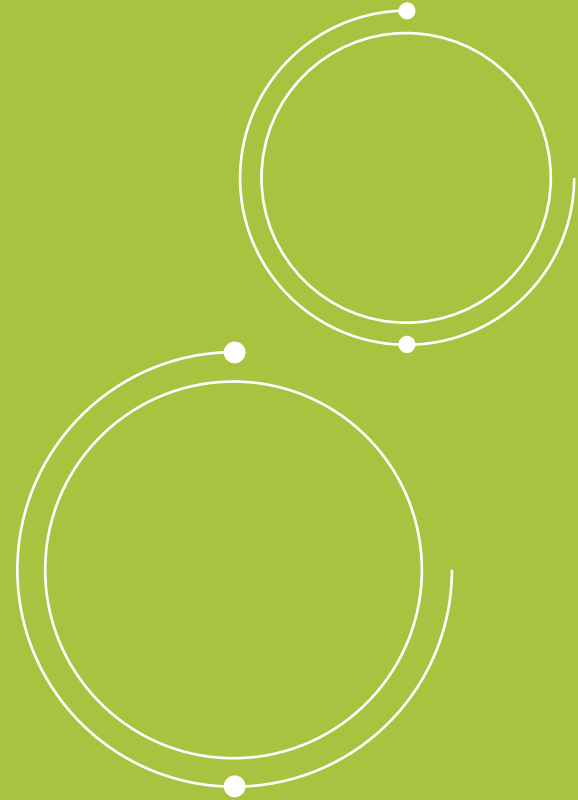


Muskegon SHIP

Funded by the National Institute of Health, the **Muskegon SHIP** is a multi-year program that will have a positive impact on the people of Muskegon.

The program seeks to improve community health, provide economic mobility for workers and their families, and support employers by reducing absenteeism and turnover.

www.accesshealth.org/SHIP



Muskegon SHIP:

a **community wellness plan** designed to improve health by addressing **barriers to health and economic mobility**

- ✓ Community-designed solution
- ✓ Core focus on aligning access to health care, childcare and transportation within a relationship-based health coaching model
- ✓ Research-informed design and evaluation



SHIP Research Team

Access Health

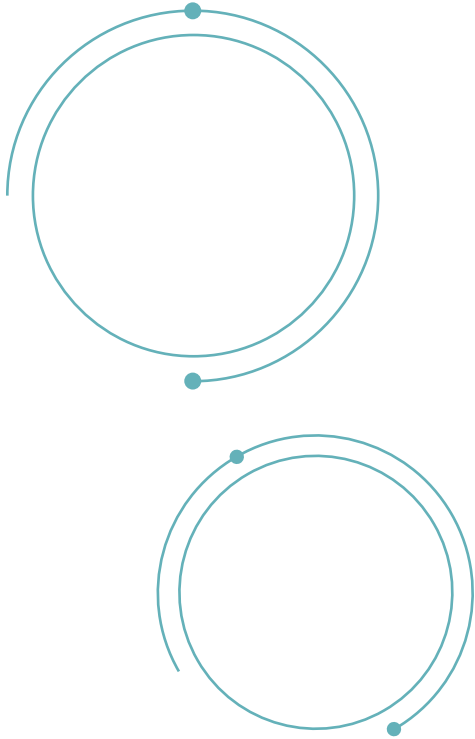
Primary Investigator: Samantha Cornell
Co-Investigators: Jennifer Barangan (Community Data)
Dr. Byron Varnardo (Health Impact)
Project Manager: Allison Revell

SHIP Think Tank

Community Intervention Partners

Research Partners:

Michigan Public Health Institute (MPHI) - Health
W.E. Upjohn Institute for Employment Research – Economic



A Community Benefits Cliff Bridge

- Aligning Siloed Innovations
- Targeted Policy Changes
- Changing Institutional Norms



What is in the SHIP?



Personalized health coaching and resource navigation support



Access to health literacy, health improvement, and financial literacy activities



On-demand online resource navigation through social care platform co-created with safety-net, clinical, and payor partners



HR can refer workers to the SHIP to address social barriers to health and stable employment

Align and Coordinate Local Supports

Anchor supports are all **multi-sector** and **community-led**



Access Health

Zero-deductible health coverage for small business ALICE workers. 25 years of coverage in Muskegon.



Tri-Share Childcare

Three-way split of childcare costs between worker, employer and state – modeled on Access Health and piloted in Muskegon.



Wheels to Work

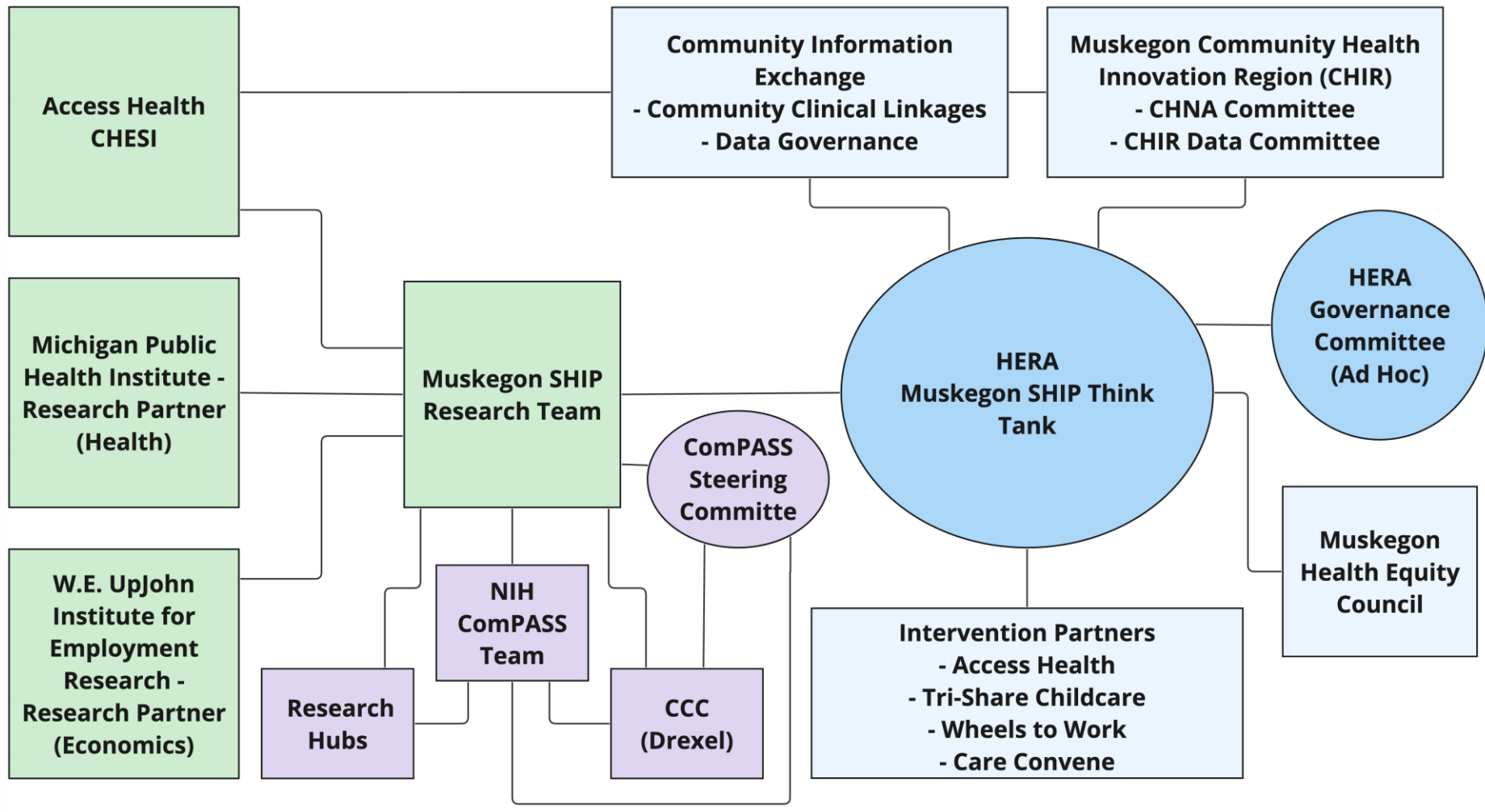
Ride to work program for workers – cost split between worker and business.

Alignment and coordination supports include:

Care Convene Community Data Platform, Common Eligibility Assessment, CHWs / Navigators

Aligned Systems Change Model







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Community-Engaged Design

Ensuring the SHIP meets local needs, priorities, and leverages local assets



Building the SHIP: A Community Effort

We cannot create an effective solution without thoroughly understanding the problem.

In the first year, we will complete a **Community Assessment** that takes a close look at the Muskegon County data and structural factors related to health, income, and employment.



Community Research Activities

Interviews

Residents

Medical System

Elected Officials

Labor Leaders

Human Services

Service Organizations

Businesses

Faith Community

Focus Groups

Low-Income (ALICE) Workers

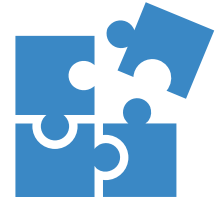
Small & Midsize Businesses

Individuals Not in the Workforce

Countywide Online Survey



We are trying to learn how people see how these topics **fit together**:



- Healthy behaviors
- Social support
- Stress & depressive symptoms
- Health: mental, physical, behavioral
- Access to resources & safe environments
- Public benefits
- Public policy
- Net income
- Workplace benefits
- Wages
- Organizational policy/culture
- Job attractiveness
- Employment status



Refining the SHIP: Structural Intervention Planning

Following the community assessment, we will utilize findings to **refine the SHIP** in preparation for pilot implementation. Considerations include:

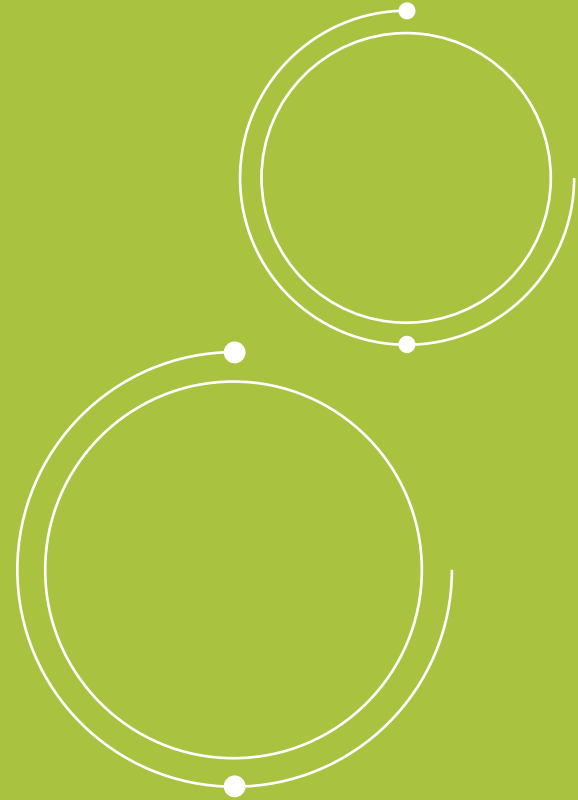
- Identifying priority populations for enrollment
- Identifying opportunities for structural change
- Developing eligibility criteria
- Finding opportunities to expand access to the SHIP
- Defining success and identifying early indicators



Phase 2: Implementation

Begins September 2025

- **Enrollment begins**
Focus on benefits cliff and those at risk of losing sick care / crisis-based supports
- **Community Data Platform operational**
Aligned health, social care, employment and economic data
- **Research and multi-sector engagement continues**
Evidence based learning to increase and expand impact, identify policy levers, and assess outcomes.



THANK YOU.

www.accesshealth.org/SHIP

