



MOBILIZING FOR ACTION THROUGH PLANNING AND PARTNERSHIPS • MAPP

MAPP 1.0 and MAPP 2.0 Crosswalk

Overview

Mobilizing for Action through Planning and Partnerships (MAPP) is the National Association of County and City Health Officials' framework for community health improvement. This Crosswalk is designed to help communities compare the MAPP 1.0 and MAPP 2.0 Phases, Assessments, and Supplements. Visit naccho.org/mapp for more information about MAPP 2.0 and to access the materials.

Background

MAPP 1.0 was originally developed in 2001. A national evaluation was conducted in 2018 to identify improvements and updates to the framework. The evaluation included a mixed-methods survey of existing or potential MAPP users, key informant interviews, and focus groups with various MAPP user groups including local public health and healthcare, veteran and new MAPP users, and rural users. The evaluation demonstrated that MAPP is an effective tool for community health assessment and planning, but that it required updates to further embed health equity and community engagement, be more adaptable and responsive to community needs, facilitate sustained partner engagement, and offer more advanced training and guidance. The [MAPP Evolution Blueprint Executive Summary](#) details the planned updates to create MAPP 2.0 based on evaluation findings and additional field input. MAPP 2.0 was released in July 2023.

MAPP 1.0 vs. MAPP 2.0 – Major Updates

MAPP 2.0 includes the major steps of MAPP 1.0, with some significant changes and additions. They include:

- Focus on Health Equity
- Tools and Supplements
 - Addition of the Power Primer
 - Addition of the Stakeholder and Power Analysis
 - Addition of the Starting Point Assessment
 - Editable tools and resources
- Three Phases (streamlined from six)
- Three Assessments (consolidated from four)
- Detailed guidance for the following added steps (*see MAPP 2.0 handbook for details*)

- Development of CHI Infrastructure Workgroups (Phase I)
- Data Triangulation Guidance (Phase II)
- Community Partner Profiles (Phase III)
- Power Analysis on CHIP Priorities (Phase III)
- Continuous Quality Improvement Action Cycles (Phase III)

Focus on Health Equity in MAPP 2.0

The goal of MAPP 1.0 was to improve population health, and a supplement was added to help communities incorporate health equity. The goal of MAPP 2.0 is to achieve health equity. MAPP 2.0 is based in a set of foundational principles including: community engagement, continuous quality improvement, cross-sectoral partnerships, full-spectrum action, and others, to address the root causes of health inequity. For more information:

- The MAPP 2.0 Theory of Change on page 16 of the MAPP 2.0 handbook
- The MAPP 2.0 Foundational Principles on page 18 of the MAPP 2.0 handbook
- The Stakeholder and Power Analysis on page 27 of the MAPP 2.0 handbook (read more below)
- The Health Equity Action Spectrum on page 91 of the MAPP 2.0 handbook
- The Power Primer supplement (read more below)

New Supplements and Tools

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| Stakeholder and Power Analysis | The Stakeholder and Power Analysis is the first step in MAPP 2.0. The purpose is to identify all who can impact MAPP, and all who will be impacted by MAPP, to determine who to engage throughout MAPP. |
| Starting Point Assessment | The Starting Point Assessment is a tool used in Phase I of MAPP 2.0 to determine how to improve the process of the current MAPP cycle based on areas for improvement from the previous MAPP cycle. It examines areas for improvement across: community engagement, partnerships, data and assessments, the community health improvement plan, leadership support to address health equity, and resources and skills for MAPP. <i>See the Starting Point Assessment tool.</i> |
| Power Primer | MAPP 2.0 encourages communities to transfer power over the decision-making process to community members, organizations, and those who are most negatively impacted by inequities. The Power Primer explains why and how to address power dynamics within MAPP, acknowledge societal power imbalances as a root cause of health inequities, and support building community power through MAPP and CHI. The Power Primer is intended for communities who are already addressing health equity, and who are ready to move further upstream by addressing power imbalances as a root cause of inequities. |

MAPP 1.0 and MAPP 2.0 Phase Comparison

These table summarizes how the phases and steps of MAPP 1.0 and MAPP 2.0 are aligned.

| MAPP 1.0 (2001) Phases & Steps Goal: Improve public health. | MAPP 2.0 (2023) Phases & Steps Goal: Achieve health equity. |
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| <p>Phase 1: Organizing and Engaging Partners The organizations and individuals planning MAPP structure a planning process that builds commitment, engages participants as active partners, uses participants' time well, and results in a plan that can be realistically implemented.</p> <p>Steps:</p> <ol style="list-style-type: none"> 1. Determine the necessity of undertaking a CHA/CHIP. 2. Identify and organize participants. 3. Design the planning process. 4. Assess resource needs. 5. Conduct a readiness assessment. 6. Develop a work plan and guiding assumptions. | <p>Phase 1: Build the Community Health Improvement Foundation The goals of Phase 1 are to prepare for the rest of the process by setting a strong foundation of partnerships, resources, and planning.</p> <p>Steps:</p> <ol style="list-style-type: none"> 1. Do a Stakeholder and Power Analysis 2. Establish or Revisit CHI Leadership Structures 3. Engage and Orient the Steering Committee 4. Establish Administrative Structures for MAPP 5. Develop the Community Vision 6. Do the Starting Point Assessment 7. Identify CHI Infrastructure Priorities and Develop Workgroups 8. Develop the Workplan and Budget |
| <p>Phase 2: Visioning Guides the community through a collaborative, creative process that leads to a shared community vision and common values.</p> <p>Steps:</p> <ol style="list-style-type: none"> 1. Identify and connect with other visioning efforts. 2. Design the visioning process and select a facilitator. 3. Develop a 5-10-year vision and identify common values. 4. Formulate the vision statement and common values. | <p>Phase 2: Tell the Community Story Emphasizes the need for a complete, accurate, and timely understanding of community health and well-being across all sub-populations within the community. This phase guides communities through a CH[N]A done through an array of views, ranging from health outcomes to root causes of those outcomes.</p> <p>Assessments: Described in detail below</p> <ul style="list-style-type: none"> • Community Partner Assessment • Community Status Assessment • Community Context Assessment |
| <p>Phase 3: The Four Assessments The four assessments are conducted. Each yields important information for improving community health, and they are most valuable when their findings are considered as a whole.</p> <p>Assessments: Described in detail below</p> <ul style="list-style-type: none"> • Community Themes and Strengths Assessment • Local Public Health System Assessment • Community Health Status Assessment • Forces of Change Assessment | |

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| <p>Phase 4: Identify Strategic Issues</p> <p>Participants develop an ordered list of the most important issues facing the community. Identify strategic issues by exploring the collective results of the four MAPP Assessments and determining how they impact achievement of the vision.</p> <p>Steps:</p> <ol style="list-style-type: none"> 1. Identify potential strategic issues based on Visioning and MAPP Assessments findings. 2. Consider strategic issues based on assessment findings. 3. Consider urgency or immediacy of the issues. 4. Consolidate issues into no more than 12. 5. Arrange issues in priority order.* | <p>Steps:</p> <ol style="list-style-type: none"> 1. Form the Assessment Design Team 2. Design the Assessment Process 3. Do the Three Assessments 4. Triangulate Data, Identify Themes, and Develop Issue Statements 5. Develop Issue Profiles through Root Cause Analysis 6. Share CH[N]A Findings |
| <p>Phase 5: Formulate Goals and Strategies, and an Action Plan</p> <p>Participants take the strategic issues and formulate goal statements for them. They identify broad strategies for addressing issues and achieving goals related to the community's vision. The result is the development and adoption of an interrelated set of strategy statements.</p> <p>Steps:</p> <ol style="list-style-type: none"> 1. Develop goals related to the vision and strategic issues. 2. Generate a range of strategy alternatives. 3. Consider barriers to implementation. 4. Explore implementation details. 5. Select strategies from the options. 6. Draft and adopt the planning report. | <p>Phase 3: Continuously Improve the Community</p> <p>This is the final phase of MAPP. This phase involves developing a CHIP, which is a three- to five-year, systematic effort to address public health issues based on the results of the CH[N]A from Phases I and II. This plan is used in collaboration with community partners to set priorities, coordinate actions, and target resources. It will also further define the vision established in Phase I.</p> <p>Steps:</p> <ol style="list-style-type: none"> 1. Prioritize Issues for the CHIP* 2. Do a Power Analysis of Each Issue 3. Set Up Priority Issue Subcommittees 4. Create Community Partner Profiles 5. Develop Shared Goals and Long-term Measures 6. Select CHIP Strategies 7. Develop Continuous Quality Improvement Action Planning Cycles 8. Monitor and Evaluate the CHIP |
| <p>Phase 6: Action Cycle</p> <p>The local public health system develops and implements an action plan for addressing priority goals and objectives. The Action Cycle links three activities—Planning, Implementation, and Evaluation. Each builds upon the others in a continuous and interactive manner. While the Action Cycle is the final phase of the CHA/CHIP, it is by no means the "end" of the process.</p> | |

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| <p>Steps:</p> <p><u>Planning</u></p> <ol style="list-style-type: none"> 1. Convene participants and an oversight committee and prepare for implementation. 2. Develop objectives for each strategic goal and identify responsible parties. 3. Develop action plans for the outcome objectives and selected strategies. <p><u>Implementation</u></p> <ol style="list-style-type: none"> 1. Review and coordinate action plans. 2. Implement and monitor the progress of the action plans. <p><u>Evaluation</u></p> <ol style="list-style-type: none"> 1. Prepare for evaluation. 2. Select the evaluation questions, process, methodology, and reporting strategy. 3. Gather evidence to answer the evaluation questions. 4. Use and share evaluation results. Celebrate the successes of the process. | |
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**Note: MAPP 2.0 Phase III includes prioritization of strategic issues, which is a step within Phase 4 in MAPP 1.0.*

Alignment of MAPP 1.0 and MAPP 2.0 Assessments

| | MAPP 1.0 Assessments | MAPP 2.0 Assessments |
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| Assessment | Community Themes and Strengths | Community Context Assessment |
| Description | Provides a deep understanding of the issues that residents feel are important. | Assesses the insights, expertise, and views of community members. |
| Methods | Qualitative | Qualitative |
| Guiding Questions | <ul style="list-style-type: none"> What is important to our community? How is quality of life perceived in our community? What assets do we have that can be used to improve community health? | <ul style="list-style-type: none"> What strengths and resources does the community have that support health and well-being? What current and historical forces of change locally, regionally, and globally shape political, economic, and social conditions for community members? What physical and cultural assets are in the built environment? How do those vary by neighborhood? What is the community doing to improve health outcomes? What solutions has the community identified to improve community health? |
| Assessment | Local Public Health System Assessment | Community Partner Assessment |
| Description | Focuses on all the organizations and entities that contribute to the public's health. | Assesses community partners' individual systems, processes and capacities, and collective capacity as a network of community partners to address health inequities. |
| Methods | Qualitative, open-ended responses and quantitative scoring rubric | Discussions and quantitative/qualitative survey |
| Guiding Questions | <ul style="list-style-type: none"> What are the components, activities, competencies, and capacities of our local public health system? How are the Essential Services being provided to our community? | <ul style="list-style-type: none"> What capacities, skills, and strengths does each organization involved in MAPP bring that could contribute to improving community health and advancing the MAPP goals? Who is involved in MAPP? Who else needs to be involved? |
| Assessment | Community Health Status Assessment | Community Status Assessment |
| Description | Identifies priority community health and quality of life issues. | Measures the community's health status using a survey, existing secondary quantitative data, and observational data. |
| Methods | Quantitative | Quantitative |
| Guiding Questions | <ul style="list-style-type: none"> How healthy are our residents? What does the health status of our community look like? | <ul style="list-style-type: none"> What does the status of your community look like, including health, socioeconomic, environmental, and quality-of-life outcomes? What populations experience inequities across health, socioeconomic, environmental, and quality-of-life outcomes? How do systems influence outcomes? |

| Assessment | Forces of Change Assessment | No dedicated assessment tool |
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| Description | Identifies forces such as legislation, technology, and other impending changes that affect the context in which the community and its public health system operate. | <i>Forces of Change is threaded throughout the three assessments above, particularly in the Community Context Assessment.</i> |
| Methods | Qualitative | |
| Guiding Questions | <ul style="list-style-type: none">• What is occurring or might occur that affects the health of our community or the local public health system?• What specific threats or opportunities are generated by these occurrences? | |