



Chapter 1 Leverage Policy to Promote Health



Preview

Inside this Guide, you'll find:

- Step-by-step advice about educating state and local policy makers.
- Case studies of health promotion experts who have increased attention to prevention and wellness priorities in their states and local communities.
- Resources and tools for additional information or assistance.

Much of the Guide's content relates to preventing chronic diseases, but many principles could be adapted to other health issues. Using policy to change systems and environments is one of the most powerful ways that we as public health professionals can improve and protect the health of communities (Frieden, 2010).

This Guide to Effectively Educating State and Local Policymakers will help you create an action plan to educate decision makers who have the ability to alter policy. Created by the Society for Public Health Education (SOPHE), this Guide will help you:

- Serve as a resource to policymakers and the media.
- Educate policymakers, the media, and stakeholders in your state or community.
- Inform policy debates through the delivery of relevant, objective, and timely communications.
- Build and sustain an active coalition that educates policymakers.
- Train stakeholders to communicate effectively with policymakers and the media.
- Evaluate your educational efforts.

Overall Objectives

This Guide has been developed to address the general limited knowledge and skills in educating policymakers among public health professionals. After reading this Guide, users will be able to apply best practices to:

- 1. Develop, implement, and evaluate an action plan to expand policymakers' knowledge about evidence-based prevention and wellness.
- 2. Establish and maintain effective relationships with policymakers, the media, and stakeholders.
- 3. Improve communications with these audiences about effective programs and policies.
- 4. Develop an active coalition to advance prevention in state and local policy arenas.
- 5. Train stakeholders to effectively educate policymakers about chronic disease prevention and control.
- 6. Create a policy education kit that stakeholders can use to inform decision makers and involve additional stakeholders.

Why?

With or without us, state policymakers will make a multitude of decisions in the next few years that will alter the course of our health systems and communities. For example, these policy initiatives could relate to:

- Preventing childhood obesity.
- Maximizing the return on investment in prevention.
- Reducing the growing burden of chronic diseases, especially among populations with disparate burdens.
- Strengthening tobacco prevention and control.
- Addressing the needs of an aging population.

As public health professionals, we have useful data and other information about the health of people in our communities. We know which policies are proven to reduce the burden of preventable diseases and injuries. We are skilled in formulating realistic policy solutions and educating stakeholders.

This expertise will have limited impact unless we become more effective in communicating with policymakers in both legislative and executive branches of government. Codes of ethics for both health education and public health professions affirm the moral and ethical duty to encourage, accurately inform, and assist with evidence-based policy development to protect and promote the public's health (Coalition of National Health Education Organizations, n.d.; Public Health Leadership Society, 2002).

In addition, we can and should also engage stakeholders and use the media to communicate our messages (Association of State and Territorial Directors of Health Promotion and Public Health Education, CDC, 2001; Emery, 2006).

The need has never been greater. As articulated by then-Surgeon General David Satcher, MD, PhD (2000): "We must advocate. We must dare to step inside circles that are unfamiliar to us as public health leaders. We must advocate for a broader view than our own borders dictate. We must be willing to argue that public health should take a higher place on political and budgetary agendas."

n. especially among populations

Affordable Care Act (ACA) Resources

ACA Prevention and Wellness Provisions (SOPHE):

http://www.sophe.org/Sophe/ PDF/Health%20Care%20 Reform.pdf

ACA legislative summary and full text (HHS):

www.healthcare.gov

ACA Implementation and State Health Reform (National Academy for State Health Policy):

http://www.nashp.org/acaimplementation-state-healthreform-0

National Prevention Strategy:

http://www.healthcare.gov/ prevention/nphpphc

Healthy People 2020

Healthy People 2020:

CDC Video Overview of Winnable **Battles**

CDC Administrator Dr. Thomas Frieden presents Winnable Battles:

Healthy People 2020 and Winnable Battles

Healthy People 2020 has an overall focus on health equity and social determinants. Multi-sector collaboration and systems-level changes are essential to meet Healthy People objectives.

Under the Centers for Disease Control and Prevention's (CDC) leadership, the "Winnable Battles" initiative further focuses our attention on public health priorities. Each battle priority area (see Figure 1-1, next page) has a large-scale burden on health and can be addressed through effective strategies to markedly improve population health.

The Winnable Battles strategies are from the Guide to Community Preventive Services (also called Community Guide). The Community Guide is a resource for evidencebased recommendations and findings about what works to improve public health. The Task Force on Community Preventive Services—an independent, nonfederal, volunteer body of public health and prevention experts-makes these findings and recommendations based on systematic reviews of scientific literature conducted under the auspices of the Community Guide. CDC provides ongoing scientific, administrative and technical support for the Task Force.

has an overview of the evidence-based public health framework.

Healthy People 2020 and Winnable Battles :: continued

Figure 1-1 lists domestic Winnable Battles priorities and examples of evidence-based policy interventions with the potential to achieve significant progress in a relatively short time.

Figure 1-1. Winnable Battles

Evidence-based F
• Improve detection o
Establish surveillandIncrease prevention
 Increase HIV testing Assure access to compersons with negative
Enforce seat belt usaEstablish graduated
 Create programs that businesses, and low-in Expand access to part
Reduce cost barriers
Increase the price ofRequire smoke-free

Source: http://www.cdc.gov/winnablebattles/

Winnable Battles relates to CDC Director Thomas R. Frieden's health impact pyramid framework, which emphasizes broad-based changes in socio-economic systems and at policy and practice levels as a way to maximize gains in population health (Frieden, 2010). Public health experts Lawrence W. Green and Marshall W. Kreuter have noted that to achieve Dr. Frieden's goal of realizing significant population impact, the evidence base directs us to multi-level and systems (or ecological) approaches (Green et al, 2010).

Policy Interventions

of food-borne illness

nce systems

n in non-hospital settings

ng for all Americans mprehensive sex education for ive HIV status

sage drivers licensing

at bring local produce to schools, income communities

arks and recreational facilities

s to family planning services

f tobacco products environments

Evidence-Based Strategies

The Guide to Community Preventive Services:

CHES Competencies

The following are examples of policy-related competencies for CHES.

- Inform policy development on health promo-
- Develop support for programs and policies that improve population health.
- Facilitate stakeholder collaboration.
- Train stakeholders.
- Serve as a technical expert on health promotion policy.
- Create action plans for educating policymakers that adhere to all relevant laws, policies, and regulations.

(National Commission for Health Education Credentialing, Inc., et al, 2010)

Resources

Certified in Public Health (National Board of Public Health Examiners):

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Advocacy as a Core Health Professional Skill

Policy development is one of three core public health functions. Specifically, public health must:

- Engage people and organizations in health issues
- Plan and implement sound health policies.
- Enforce public health laws and regulations.

(Institute of Medicine, 1988)

In its seminal report – Who Will Keep the Public Healthy?, the Institute of Medicine emphasized the role of public health professionals in translating scientific knowledge and effectively communicating about organizational and government policies that support population health.

(Institute of Medicine, 2003)

Policy development and advocacy are an integral part of professional certification requirements. Certified Health Education Specialists (CHES), Master CHES (MCHES), and Certified Public Health (CPH) professionals must demonstrate competency in communicating health policy issues (see CHES Competencies sidebar). This Guide can help professionals prepare to meet certification standards.

As previously described, professional codes of ethics establish the duty to be involved in policy education, development, and advocacy.

How to Use this Guide

We structured this Guide to enable public health professionals to quickly find what they need.

Option 1: Sequential

You can read the Guide sequentially. The order of contents is:

- Policy and the Role of Public Health Professionals
- Framework for Educating Policymakers
- Action Plans to Educate Policymakers
- Policy Education Kits
- Case Studies
- Resources
- Templates and Training Tools
- State Health Policy Institute Agendas

Option 2: Browsing

Click on what you want to learn using the chart in Figure 1-2. (Note: The steps in Figure 1-2 are intended to represent a combination of actions, not necessarily a linear process)

Figure 1-2. **Framework for** Educating **Policymakers**

Recommended Steps

- 1. Understand your education & advocacy limits and rights
- 2. Establish your policy
- 3. Assess policy landscape
- 4. Develop a strategy & action plan
- Periodic review
- Adjustments
- 5. Build strong base of support
- Coalition
- Policy education kit
- 6. Frame & communicate your messages
- Policy communications
- Media outreach
- 7. Evaluate

About SOPHE

The Society for Public Health Education (SOPHE) is a nonprofit professional organization founded in 1950 to provide global leadership to the profession of health education and health promotion and to promote the health of society.

SOPHE's 4,000 national, international, and chapter members work in various public and private organizations to advance health education theory and research, develop disease prevention and health promotion programs, and promote public policies conducive to health.

Visit SOPHE at:

http://www.sophe.org

Development of this Guide

This Guide caps a four-year SOPHE initiative to train health promotion policy experts through the State Health Policy Institutes. We based the content on institute presentations and resources provided to participants . The Guide is also informed by participants' experiences, and we incorporated their feedback on a draft. Other peer-reviewers included an advisory committee whose members have policyrelated expertise and experience.

Acknowledgement

This publication was supported by Cooperative Agreement Number 5U58DP001335-04 from the U.S. Centers for Disease Control and Prevention ("CDC"). Its contents are solely the responsibility of the authors and do not necessarily reflect the view of the CDC or the Society for Public Health Education.

Disclaimer

This Guide shall not, in any way or interpretation, be construed to constitute legal counsel regarding electioneering, advocating, lobbying, or lobbying activities at any level of government. Legal counsel should always be sought to ensure compliance before implementing a policy involving electioneering or lobbying.

References

Association of State and Territorial Directors of Health Promotion and Public Health Education, Centers for Disease Control and Prevention. (2001). Policy and Environmental Change: New Directions for Public Health. Available from: www.dhpe.org

Caira NM, Lachenmayr S, et al. (2003). The health educator's role in advocacy and policy: Principles, processes, programs, and partnerships. Health Promotion Practice 4: 303-313. Available from:

http://www.sophe.org/chronicdiseasepolicy/doc/The%20Health%20Educator's%20 Role%20in%20Advocacy%20and%20Policy.pdf

Code of Ethics for the Health Education Professional. (n.d.) Normal, IL: Coalition of National Health Education Organizations. Available from: http://www.cnheo.org/

Emery J, Crump C. (2006). Public Health Solutions Through Changes in Policies, Systems, and the Built Environment: Specialized Competencies for the Public Health Workforce. Washington, DC: Directors of Health Promotion and Education. Available from: www.dhpe.org

Frieden TR. (2010). A framework for public health action: the health impact pyramid. AJPH 100(4):590-595.

Green LW, Kreuter MW. (2010). Evidence hierarchies versus synergistic interventions. AJPH 100:10, 1824-1825.

Institute of Medicine, Committee for the Study of the Future of Public Health. (1988). The Future of Public Health. Washington, DC: National Academies Press.

Institute of Medicine, Committee on Educating Public Health Professionals for the 21st Century. (2003). Who Will Keep the Public Healthy? (L. Hernandez, Ed.). Washington, DC: National Academies Press.

References :: continued

National Commission for Health Education Credentialing, Inc. (NCHEC), Society for Public Health Education (SOPHE), American Association for Health Education (AAHE). (2010a). A Competency-Based Framework for Health Education Specialists 2010. Whitehall, PA: Authors. Available from:

http://www.nchec.org/_Files/_Items/NCH-MR-TAB3-110/Docs/Areas%20of%20 Responsibilities%20Competencies%20and%20Sub-competencies%20for%20the%20 Health%20Education%20Specialist%202010.pdf

Public Health Leadership Society. (2002). Principles of the Ethical Practice of Public Health. Version 2.2. New Orleans, LA: Author. Available from:

http://www.apha.org/NR/rdonlyres/1CED3CEA-287E-4185-9CBD-BD405FC60856/0/ethicsbrochure.pdf

Satcher D. (2000). Eliminating global health disparities. JAMA 284(22):2864-2864.

End Chapter One

