

# The Role of Public Health Practitioners in Chronic Disease Prevention

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# Acknowledgements

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# The Role of Public Health Practitioners in Chronic Disease Prevention

## Learning Objectives:

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- ❖ Describe how health education connects to health policy
- ❖ Define key factors associated with policy development
- ❖ Describe the importance of health education in developing health policy
- ❖ Identify ways to recruit champions and mobilize coalitions

# Health Education and Healthy People

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Strong evidence base that policies can have an impact on population health

The following public health practice organizations have identified policy related competencies as being crucial to public health educators:

- ❖ Association of Schools and Programs of Public Health (ASPPH) released a series of reports recommending that “law and policy are core tools for intervening to advance public health” (ASPPH, 2013).
- ❖ The Council on Linkages Between Academia and Public Health Practice
  - ❖ 2A6, 2A7, 2A8, 2A9, 2A10, etc.

# Health Education and Healthy People

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- ❖ National Commission for Health Education Credentialing (NCHEC) identifies seven core areas of responsibility for health educators includes skills related to developing and implementing advocacy efforts, and assessing the health impacts of current or potential policies.
- ❖ Entry level/undergraduate competencies – 1.6.2, 1.6.4, 7.2
- ❖ Supervisor/Masters level- 7.3



# Policy and Programs

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# Socio-Ecological Model



# Policies

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- ❖ A system of laws, regulatory measures, courses of action, and funding priorities concerning a given topic
  - ❖ Public policy: regulation set by government or local authorities (e.g., laws for coverage, ordinances)
  - ❖ Organizational policy: organizational rule or regulation (e.g., worksite health plans, faith-based organizations, school etc.)



# Public Policy



North Carolina enacted legislation that prohibits the purchase of tobacco products by persons under the age of 18

**INTRODUCING THE NEW VERTICAL DRIVER'S LICENSE FORMAT:**  
An even easier way to prevent underage tobacco and alcohol sales.

**THREE THINGS YOU SHOULD KNOW ABOUT THE NEW VERTICAL DRIVER'S LICENSE FORMAT**  
for Limited Provisional Licenses, Driver's Licenses and ID Cards

- 1 The new vertical (up and down) format licenses have been issued since October 1, 2008 for those under 21 years of age.
- 2 The date(s) when the customer will turn 18 and/or 21 years old is clearly listed next to his/her photo.
- 3 The new vertical format cards follow the same RED-YELLOW-GREEN color coding as the horizontal (side to side) format.

**ARE YOU FAMILIAR WITH THE NC DRIVER'S LICENSE COLOR CODES?**

STOP	CAUTION	O.K.
RED BORDER means the customer is 15-17 years of age. DO NOT sell tobacco or alcohol.	YELLOW BORDER means the customer is 18-20 years of age. You may sell tobacco, but NOT alcohol.	GREEN BORDER means the customer is 21 years of age or older. You may sell tobacco and alcohol.
Both vertical and horizontal formats with red borders are acceptable forms of ID.	Both vertical and horizontal formats with yellow borders are acceptable forms of ID.	Only the horizontal format license is issued for those 21 years of age and older.

**Do your part to prevent underage tobacco and alcohol sales. Check ID before you sell.**  
For more information, contact the NC Division of Alcohol Law Enforcement at 919-733-4060 or [www.ncale.org](http://www.ncale.org)

**REMEMBER, IF YOU SEE RED, THE TOBACCO SALE IS DEAD.**

# Organizational Policy

A school or workplace implements *Recommendations for Cafeteria, Vending, and Break Room Food Standards in Workplaces*

Food Item	Recommendation	Rationale	Examples of what would be <u>IN</u> and <u>OUT</u>
<b>Beverages</b>	Contain 100% fruit juice with no added sweetener	Fruits/vegetables contain necessary nutrients	<u>IN</u> : Vegetable and fruit juice
<b>Snacks, sweets, and sides</b>	Sugar: No more than 35% by weight	Eliminate foods that <ul style="list-style-type: none"><li>•Are high in calories</li><li>•Are low in nutrients</li><li>•Promote dental caries</li></ul>	<u>IN</u> : trail mix, animal crackers, fat-free fudge bar, frozen fruit bar <u>OUT</u> : some cookies, all candy

# Packaged Programs

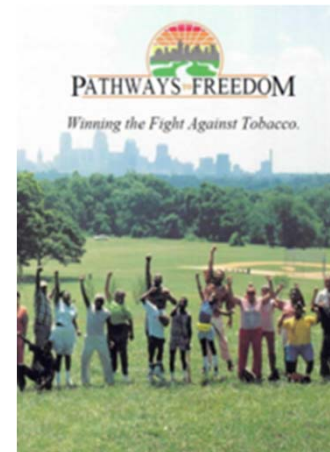
Interventions that include instructions and specify materials needed to implement with success



Pool Cool  
available on RTIPS  
and at [www.poolcool.org](http://www.poolcool.org)



Body and Soul  
available on RTIPS

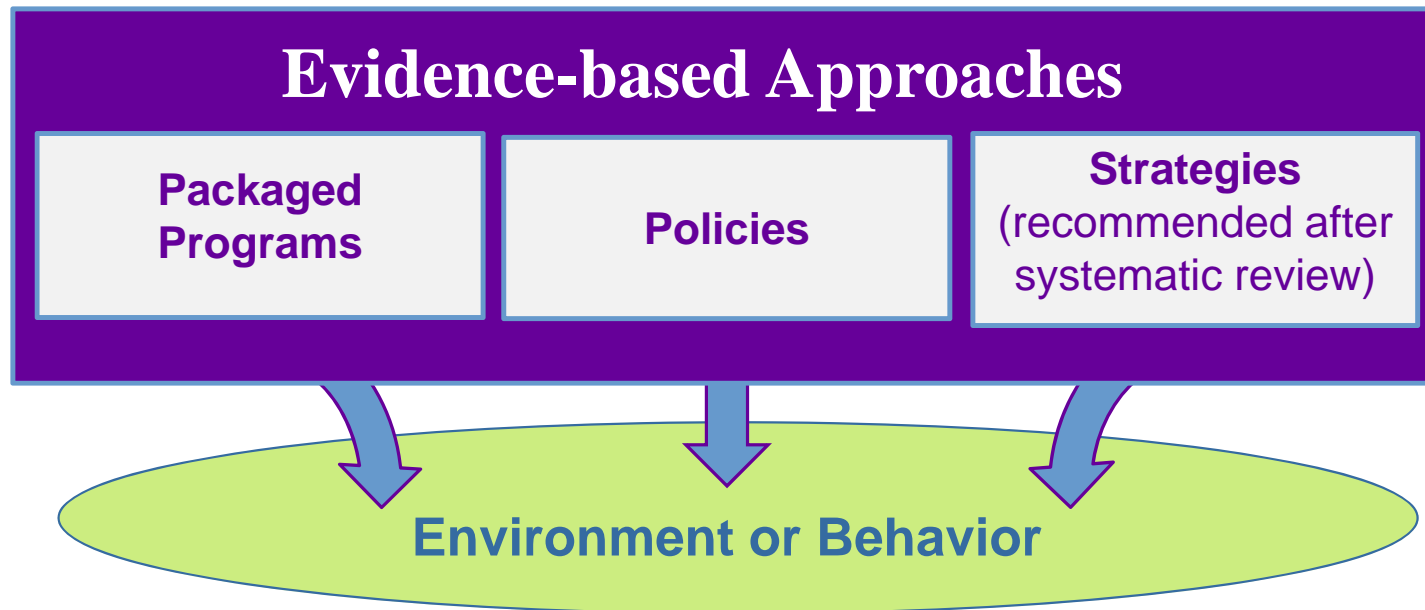


Pathways to Freedom  
available on RTIPS and  
the CDC's website

# What's the Difference Between Policy, Systems and Environmental Change and Programs?

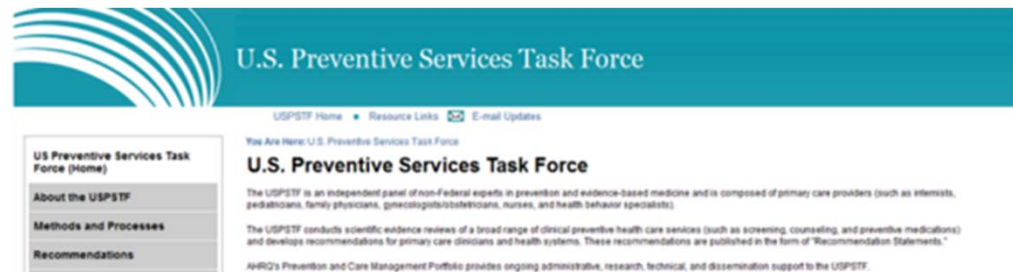
Setting	Programs/Events	Policy, Systems and Environmental Change
School	Celebrate national nutrition month	Add fruits and vegetables to the a la carte options in schools
Community	Host a community bike ride and parade	Implement a Complete Streets policy to ensure community roads are constructed for safe biking, walking and driving
Worksite	Hold health screenings for staff	Implement a healthy vending machine policy that offers healthy snacks at an affordable price
Hospital	Hold free breastfeeding courses for new moms	Implement the WHO 10 Steps to Successful Breastfeeding and become a baby friendly hospital

# Different Evidence-based Options for Promoting Public Health



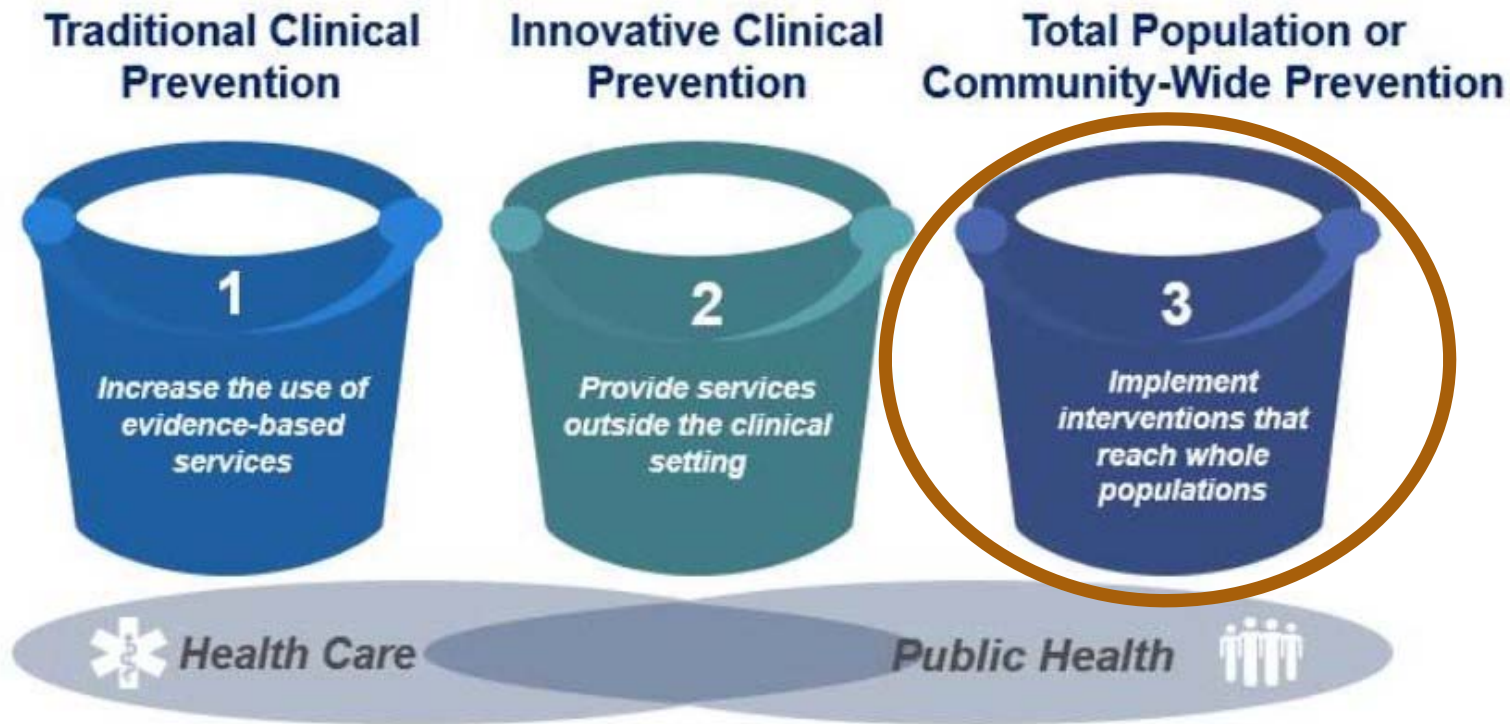
# Evidence-based Strategies

Broad recommendation based on systematic review of multiple studies





# The “Buckets” of Prevention Framework



# Buckets 1 and 2

traditional clinical | innovative clinical

## THE 6|18 INITIATIVE

Accelerating  
Evidence  
into Action

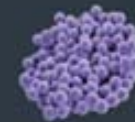
### SIX WAYS TO SPEND SMARTER FOR HEALTHIER PEOPLE



REDUCE  
TOBACCO USE



CONTROL  
BLOOD PRESSURE



PREVENT HEALTHCARE-  
ASSOCIATED INFECTIONS (HAI)



CONTROL ASTHMA



PREVENT UNINTENDED  
PREGNANCY



CONTROL AND  
PREVENT DIABETES



Centers for Disease Control and Prevention



HEALTH **IMPACT** IN 5 YEARS

[www.cdc.gov/hi5](http://www.cdc.gov/hi5)

Office of the Associate Director for Policy  
Centers for Disease Control and Prevention

# Policy Development

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Center for Disease Control and Prevention. Overview of CDC's Policy Process. Atlanta, GA: Centers for Disease Control and Prevention, US Department of Health and Human Services; 2012

# Policy Process Framework

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1. Problem Identification
2. Policy Analysis
3. Strategy and Policy Development
4. Policy Enactment
5. Policy Implementation
6. Stakeholder Engagement and Education
7. Evaluation



# Identify the Problem

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Clarify and frame the problem or issue

- ❖ Nature of the problem
- ❖ Who does this issue affect?
- ❖ Gather data and information about the problem (BRFSS, Communitycommons.org, YRBS, Community Health Assessments, etc.)
- ❖ Gather quantitative and qualitative data if possible, i.e. stories about how the issue affect residents

# Policy Analysis

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Identify different policy options to address the public health concern.

- ❖ Literature Review
- ❖ Environmental scan to identify policy options (i.e. recently passed policies, new articles, case studies, etc.)
- ❖ Identify evidence-based policy solutions
- ❖ Determine how the policy option will impact morbidity and mortality
- ❖ Determine the cost of implementation
- ❖ Assess all policy options to determine the best fit for your local community
- ❖ Prioritize policy options

# Strategy and Policy Development

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What would the policy look like once it is enacted?

- ❖ **Is there sample policy language that you can access?**
- ❖ If the policy has been enacted in other municipalities, how was it implemented?
- ❖ **Identify how the policy will operate (i.e. what agency is charged with enforcement, what happens if the policy is violated? Does the policy require funding? If so, how much and how will it be tracked?)**
- ❖ How will you inform the public and engage stakeholders including policy makers?
- ❖ **Develop a communication plan**

# Policy Enactment

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- ❖ Enact the law, regulation, rule, procedure
- ❖ Publish guidelines, procedures, administrative actions
- ❖ **Monitor policy enactment**



# Policy Implementation

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- ❖ Monitor and update the policy to ensure full implementation
- ❖ Is the policy being implemented that way you envisioned? Are there adjustments that should be recommended?
- ❖ Identify metrics to evaluate implementation and impact of the policy
- ❖ Provide capacity building opportunities to key implementers to ensure that policy will be successfully
- ❖ Implement a communication plan to share positive outcomes of the policy
- ❖ Assess the compliance to the policy

# Stakeholder Engagement and Education

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Engage stakeholders through coalitions to ensure that policy has the support of multiple local actors

- ❖ Engage stakeholders through the Community Health Assessment process, MAPP, Community Health Improvement Plan process, etc.
- ❖ Ensure broad approval of any policy recommendation by engaging partners throughout the Community Health Improvement Plan process ( or any similar process that engages communities around a shared vision of a healthier community)
- ❖ Identify supporters and opponents (understand their point of view to better position your message) this might require some key informant interviews, focus groups within the community
- ❖ Identify barriers to implementation or enforcement
- ❖ Create talking points, policy briefs, one pagers

# Stakeholder Engagement: Identify a Champion

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- ❖ Essential to implementation of public health policies
- ❖ An advocate of a program or policy. They bring a combination of skills including resiliency, knowledge, passion, persistence and persuasiveness to support public health policy or initiatives.
- ❖ Could be a member of the local coalition
- ❖ Dedicated community members, business leaders, political leaders
- ❖ If possible, identify and support more than one champion to assist in sustainability of the push for policy change

# Stakeholder Engagement: Identifying and Recruiting Champions

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- ❖ Identify people who are interested in the problem
- ❖ People who may have ideas about solutions
- ❖ Have different levels of power

(e.g. School Health Policy—Students, Parents, and School Staff, and School Admin and School Board Members will all play a role but have different levels of power)

- ❖ Get to know interest groups

Taxpayers, Citizens, industry, lobbyist, advocacy Groups, health organization

# Stakeholder Engagement: Strategies for Mobilizing Coalition

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- ❖ Establish a shared vision and mission, apply and use mission and vision statements
- ❖ Define organizational structure – assess needs, determine resources
- ❖ Develop a Framework – logic model for the effort
- ❖ Strategic Action Plans- Develop objectives
- ❖ Identify community organizer, define the responsibilities, provide sufficient trainings

# Stakeholder Engagement: Strategies for Mobilizing Coalition

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- ❖ Develop Leadership – recruit new leaders, develop leadership plans, support leadership development goals
- ❖ Implementing Evidence Based Interventions – engage coalition members in intervention design and evaluation measures
- ❖ Technical Assistance – identify and provide appropriate technical assistance
- ❖ Document Progress- use data to make program improvements and communicate success stories
- ❖ Make Outcomes Matter- Identify successful outcomes metrics, have shared evaluation metrics
- ❖ Sustaining the Work- Review outcomes from the intervention and determine if the intervention requires adjustments or if it should be sustained, diversify funding source when available.

# Evaluation

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- ❖ Define evaluation needs, purpose, intended users
- ❖ Determine effective outcomes measures, dedicate resources to policy evaluation
- ❖ Disseminate evaluation results (use the results to create recommendation for improvement if needed)
- ❖ Evaluation the process, outcome and impact
- ❖ Collect quantitative and qualitative outcomes

# Examples

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- ❖ **South Carolina's Healthy Food Financing Initiative**
- ❖ **School Health Policies:** <https://dph.georgia.gov/school-health-model-policies>
- ❖ **100% Tobacco Free Schools**
- ❖ **Asthma Friendly Schools**
- ❖ **Water Access**
- ❖ **Recess**
- ❖ **Food and Beverage Marketing**
- ❖ **Healthy Eating**
- ❖ **Nutrition**
- ❖ **Physical Activity**



# Georgia Society for Public Health Education (GASOPHE)

An organization for health educators in public or community health



An official chapter of the Society for Public Health Education

[www.sophe.org](http://www.sophe.org)



# GASOPHE Strategic Plan: Goals & Strategies

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- ❖ Expand the reach and impact of health education in Georgia
- ❖ Increase recognition and support for the health education profession in Georgia
- ❖ **Advance evidence-based health education knowledge and skills in a learning community of researchers, professionals and students**
- ❖ **Advocate for Policy, Systems, and Environmental (PSE) changes and Health in All Policies (HiAP) to reduce health disparities in Georgia**
- ❖ Strengthen and sustain GASOPHE operations

[www.gasophe.org](http://www.gasophe.org)



# GASOPHE Legislative Priorities

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GASOPHE supports state and local policies that promote tobacco cessation and smoke free environments. These policies include: Raising Georgia's tobacco tax by \$1.00. Georgia has the 49th lowest tobacco tax in the country at just 37 cents per pack. This makes tobacco much more accessible to youth in Georgia and places a significant burden on our Medicaid system. Increasing the tobacco tax to the national average will reduce youth smoking, addiction, and the burden of chronic disease in our state.

- ❖ Local city and county wide smoke free ordinances. Smoke free ordinances allow residents to enjoy clean air without the harmful effects of second-hand smoke.
- ❖ Strengthen the Georgia Smoke Free Air Act of 2005 to include model language following recommendations from the Americans for Nonsmokers' Rights
- ❖ Investment in policies that support cessation counseling and services, including the Georgia Tobacco Quit Line.
- ❖ Support education campaigns that promote the dangers of Electronic Nicotine Delivery Systems (ENDS) for youth and adults
- ❖ Support the Braves stadium in all tobacco free efforts

# GASOPHE Legislative Priorities

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## Ensuring the ability to breathe

- ❖ GASOPHE supports the adoption, implementation and enforcement of asthma friendly school policy in primary and secondary schools and school systems in Georgia.
- ❖ Research shows that children with persistent asthma miss more school days.
- ❖ In 2010, 58% of school-aged children missed 1 or more days of school because of their asthma. Schools can support asthma self-management by adopting asthma friendly schools policies.

# GASOPHE Legislative Priorities

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## Promoting physical activity as a foundational healthy habit

- ❖ GASOPHE supports the reauthorization of Georgia SHAPE by the General Assembly. Georgia SHAPE provides important data about the health of children in the state, facilitates opportunities for health education in schools and homes, and promotes physical activity and nutrition as foundational healthy habits for children.
- ❖ Evidence shows that people with more access to green environments, such as parks, tend to walk more than those with limited access. Park and recreation planners can influence community health by increasing access to parks. Therefore, GASOPHE supports policy efforts that will allow all community members access to parks and recreation facilities.
- ❖ The walkability of a neighborhood or a community is directly connected to the quality of life for members. Walking rather than driving can help to improve a community's air quality and reduce carbon emissions. Walking also contributes to a healthy lifestyle for all communities. GASOPHE will support and partner with communities across the state to implement policy and environmental changes that will sustain walkable communities.

# GASOPHE Legislative Priorities

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## Investing in public health and prevention at the state level

- ❖ GASOPHE will support re-investment in public health and prevention in Georgia.
- ❖ Our state's public health system plays a critical role by: vaccinating children, monitoring and preventing epidemics and chronic diseases, ensuring safe food and water, and providing both clinical and community-based preventive services.
- ❖ Despite an increasing need for these services and a growing awareness of the importance of social determinants to population health outcomes, Georgia's per-capita public health spending is low relative to most other states.
- ❖ This impedes Georgia's ability to conduct important health and prevention services, including health education in communities and with individuals that can lead improved population health.

# Policy, Systems and Environmental Change

- ❖ GASOPHE supports coalitions, public health agencies, schools, worksites, hospitals, and the community in applying a PSE change approach to decision-making, including policy development and implementation, budgeting, and delivery of services.
- ❖ GASOPHE supports local coalition groups/task forces to use PSE change to improve health:
  - affordable, safe and healthy housing;
  - active living and transportation;
  - access to healthy food;
  - clean air (tobacco use prevention), water, and soil;
  - parks, recreation, and green spaces;
  - economic opportunity;
  - and safety and violence prevention

# GASOPHE Resolutions

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❖ **No Menthol Resolution**

❖ **HiAP Resolution**

❖ **Tobacco Resolution**

<http://www.gasophe.org/legislative-priorities/>



# How to become a GASOPHE Member

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- ❖ **Go to [gasophe.org](http://gasophe.org)**
- ❖ **Click on the “Join” Tab**
- ❖ **Select the membership level**

# Additional Learning Opportunities

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# Mobilizing communities to engage in policy change to improve health outcomes

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**Location: 2018 GPHA at Jekyll Island Conference Center**

**Time: 8 AM – 12 PM**

**Description:**

**Through four, one-hour segments with brief case studies and real-world examples, participants will gain knowledge and skills to engage the community and define the public health problem they are working to solve; policy types and how to develop policy language and draft model policies using evidence-based strategies to improve health outcomes; . frame messages and develop pre- and post-adoption campaigns; and evaluate the impact of the policies they promote. Participants will also learn about state and federal laws that limit lobbying. All public health professionals representing different public health sectors should attend this fast-paced workshop**

**To register [gapha.org/annual-meeting-conference](http://gapha.org/annual-meeting-conference) by February 15, 2018**



# Influencing Staff: What Congress' Policy Advisers Want in Briefing Materials

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**February 22, 2018 at 1:00 PM EST**

**To advance the advocacy skills of faculty, staff, and students, Association of Schools and Programs of Public Health (ASPPH) has entered into a partnership with the highly respected and non-partisan Congressional Management Foundation. These programs are open to all faculty and students at ASPPH member programs and schools.**

**Register: <https://register.gotowebinar.com/register/2379984566223119361>**



# GASOPHE Summit 2018

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Date: Fri, February 23, 2018

Time: 8:00 AM – 5:00 PM EST

Location: Kennesaw State University - Convocation Center  
590 Cobb Avenue  
Kennesaw, GA 30144

Summit Theme: Public Health 3.0: Cross-Sector Collaboration

Public Health 3.0: Cross-Sector Collaboration is a major upgrade in public health practice to emphasize cross-sectoral policy, and systems-level actions that directly affect the social determinants of health and advance health equity. It represents a challenge to business leaders, community leaders, state lawmakers, and federal policymakers to incorporate health into all areas of governance.

Register: <https://www.eventbrite.com/e/gasophe-2018-summit-tickets-39495889268>



# Questions

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[gasophe@gmail.com](mailto:gasophe@gmail.com)

<http://www.gasophe.org/contacts/>

## GEORGIA SOCIETY FOR PUBLIC HEALTH EDUCATION MEMBERSHIP BENEFITS

### NETWORKING

#### PROFESSIONAL GATHERINGS

Connect with other public health professionals at local events.



### PROFESSIONAL DEVELOPMENT

#### WEBINARS, SEMINARS, CONFERENCES

Learn and earn professional development CHES and MCHES credits via webinars, seminars, and conferences.

### MENTORSHIP

#### PROFESSIONAL PAIRING

Become a mentee or mentor through our mentoring program where students and young professionals are match with senior public health professionals. Sharing your wisdom and expertise is invaluable to young professionals.



### ADVOCACY

#### EVENTS, LETTERS, PLATFORM

Partner with Health Professionals to advocate for policy, systems and environmental changes in local communities throughout the state.

For additional information join [Facebook](#), [LinkedIn](#), and [gasophe.org](#)  
We look forward to meeting you!

