

Learning Community 11 Policy Engagement for Health Equity

Health Equity Assessment and Response Team (HEART) 1.11.24



Welcome!

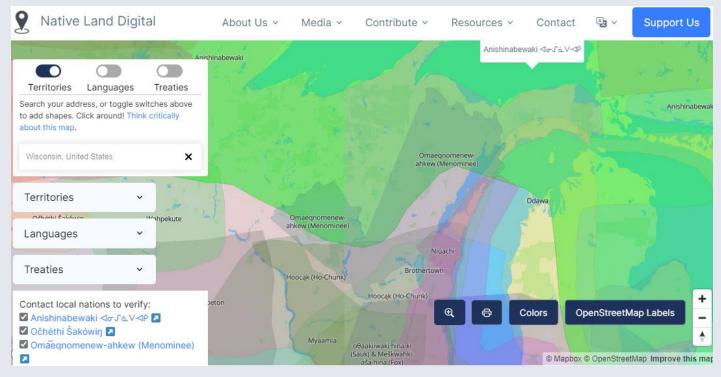
Today's Agenda

- Welcome and meeting objectives
- Guest presentation
 - Dr. Keshia Pollack Porter, Johns Hopkins University, Bloomberg School of Public Health
- Questions and answers
- Resource provision and overview
- Conclusion and next steps
- Post Zoom survey

Meeting Objectives

- 1. Describe the role of policy as a method to achieve health equity.
- 2. Cover key points to consider for policy engagement to advance health equity.
- 3. Discuss peer-reviewed approaches to affecting policy to improve health equity, including Health in All Policies.

Whose Land Do You Occupy?



https://native-land.ca/

Policy Engagement for Public Health Professionals

Overview

Promoting Policies that Achieve Health Equity

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Health Equity Assessment and Resource Team WI Department of Health Services Division of Public Health January 11, 2024



Outline

- Discuss the importance of policy change for improving public health.
- Describe how policy change can advance and achieve health equity.
- Describe Health in All Policies (HiAP) and provide examples of how HiAP can advance and achieve health equity.
- Present key points for policy engagement to advance health equity.

STRATEGIC SKILLS FOR PUBLIC HEALTH PRACTICE SERIES

Policy Engagement

Shelley Hearne, DrPH, MPH Keshia M. Pollack Porter, PhD, MPH Katrina S. Forrest, JD

Johns Hopkins Bloomberg School of Public Health

Why try to Change Policy?

- Policy is made by people for people
- Policy change is one path to permanent social change; can help with long term systems reform
- Changed policies can change people's minds and attitudes
- Policy change can remedy entrenched oppressive and racism systems
- Changed policies can help with the long-term work of shifting power—both building power among communities that have been marginalized and contesting those who wield power for exploitation or to maintain inequitable power hierarchies

Policy-Making Body	Type of Policy			
	Legislation ^a	Regulation	Litigation	Other ^b
Governmental				
Federal	Created by US Congress Codified in US code	Created by federal administrative agencies Codified in Code of Federal Regulations	Cases heard within the federal court system US Supreme Court is highest court in the nation	Presidential and gubernatorial executive orders are legally binding and allow for rapid policy change
State	Created by state legislature Codified in state legislative code	Created by state administrative agencies Codified in state code of regulations	Cases heard within the state court system	Some policies do not have the force of law (eg, guidance documents produced by federal, state, or local agencies)
Local	Created by local legislative body Codified in local legislative code	Created by local administrative agencies Codified in local code of regulations	Cases heard by local courts	
Nongovernmenta	I			
Private				
Institutional	Must comply with laws at the federal, state, and local levels	Must comply with regulations at the federal, state, and local levels	May initiate or be subject to litigation	May develop policies to be applied by institutions

Table I. Examples of policy types, by government level of enactment and category

^aIncludes appropriations processes.

^bIncludes policies that do not carry the force of law and/or are created outside the processes associated with legislation, regulation, and litigation.

Table 1. Examples of policy types, by government level of enactment and category

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Principles for Effective Public Health Policy Change



Pollack Porter et al. 2018

Defining Health Equity

- Health equity means that everyone has a fair and just opportunity to attain their highest level of health.
- Achieving health equity requires ongoing societal efforts to:
 - Address historical and contemporary injustices;
 - Overcome economic, social, and other obstacles to health and health care;
 - Address power imbalances; and
 - Eliminate preventable health disparities.
- To achieve health equity, we must change the systems and policies that have resulted in the generational injustices that give rise to racial and ethnic health disparities.

https://www.cdc.gov/healthequity/whatis/index.htm ns Hopkins Bloomberg School of Public Health

Visualizing Health Equity

EQUALITY:

Everyone gets the same - regardless if it's needed or right for them.

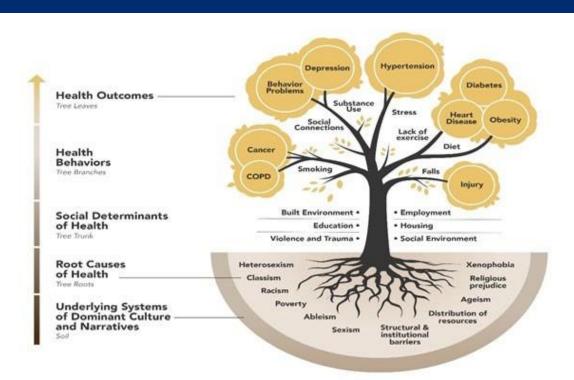
EQUITY:

Everyone gets what they need - understanding the barriers, circumstances, and conditions.





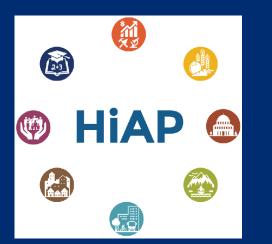
Root Causes and Social Determinants of Health (SDOH)



Health in All Policies

- Collaborative
- Data-driven
- Systems level change
- Addresses social determinants of health &root causes







Pan-Canadian Meeting on Health in All Policies (HiAP)

October 9, 2019 Québec City

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HiAP in Practice: Federal Level

- "Integrate health criteria into decision making across multiple sectors...identifying and prioritizing actions across many sectors to reduce the incidence and burden of the leading causes of death and disability." (*National Prevention, Health Promotion, and Public Health Council. 2010 Annual Status Report. National Prevention Strategy*)
- Engage multiple sectors to take actions *to* "strengthen policies and improve practices that are driven by the best available evidence and knowledge." (*Healthy People 2020*)
- "Working to attain the full potential for health and wellbeing of the population is a component of decision-making and policy formulation across all sectors" (*Foundational Principles, Healthy People 2030*)

https://www.hhs.gov/sites/default/files/disease-prevention-wellness-report.pdf; https://www.healthypeople.gov/2020

HiAP in Maryland

- Maryland HB1225/SB340 (2017): Workgroup on Health in All Policies
- Requiring the University of Maryland School of Public Health, Center for Health Equity, in consultation with the Maryland Department of Health, to convene a workgroup to study and make recommendations to units of State and local government on laws and policies to implement that will positively impact the health of residents of the State



HiAP in Maryland

- Recommendations from the HiAP Workgroup (Sept 2019)
 - 1. Develop a HiAP Framework and create a HiAP Council.
 - 2. Develop a HiAP toolkit with a reference guide.
 - 3. Encourage applicants for funding announcements to include a HiAP framework in their funding proposals.
 - 4. Develop a process to provide guidance to state and county agencies to facilitate data sharing between and within agencies.
 - 5. Encourage Maryland localities to consult the HiAP toolkit and Reference Guide during the Comprehensive Planning and Zoning regulations development process.
- Briefed Moore-Miller Transition Team in January on value of viewing policy priorities that are beyond health care (education, public safety, etc.) through a HiAP lens.

Barriers to Implementing HiAP







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Tools and Tactics to Achieve HiAP

- There is no one single way to "do" health in all policies
- Creating cross-sector government structures
- Integrating health into planning processes including zoning updates and General Plans
- Integrating health language into RFPs
- Developing health-related grant scoring criteria
- Using Health Impact Assessment (HIA) and related tools

Defining HIA

The International Association of Impact Assessment defines HIA as: "a combination of procedures, methods and tools that systematically judges the potential, and sometimes unintended, effects of a policy, plan, program, or project on the health of a population and the distribution of those effects within the population. HIA identifies appropriate actions to manage those effects. With roots in the practice of Environmental Impact Assessment (EIA), HIA aims to inform the public and decisionmakers when decisions about policies, plans, programs, and projects have the potential to significantly impact human health."

Applying HIA to Policy Proposals

- Intended to change practice and make policies more health sensitive
- Aims to inform policy development and implementation to promote health equity
- Involves policy actors: decision-makers (generally in positions of power who can implement decisions) and policymakers (legislators)
- To be effective, need to consider social, political, and economic context, and practical constraints (e.g., timing)

Limited Application of HIA for Policy

- Policy is not a linear process thus challenging
- Policymaking impacted by a range of complex interrelated factors, of which HIA is only one
- Belief by some that health is not deemed "sufficiently" important against other considerations in the policy process
- Uncertainty with HIA predictions
- Topics of EIAs (root of HIAs) are politically charged
- Timing can be challenging for short legislative sessions

Health Note

Vision for Health Notes

- The goal of the health note is to help policymakers identify the potential and often-overlooked connections between bills from non health sectors and health.
- Findings can also be used between legislative sessions to conduct more research on legislative topics.
- Health notes can help the public to better understand how specific bills or amendments might protect, promote, or harm health.
- Health notes can help examine impacts of legislation on health equity.

Developing Health Notes

• Learning, reading, and having conversations

• Formative research

Health Impact Assessment Legislation in the States **BMC** Public Health https://doi.org/10.1186/s12889-019-7165-7 HEALTH**IMPACT** PROJECT **RESEARCH ARTICLE Open Access** Considering health and health disparities Check for during state policy formulation: examining Overview Health care consumes a large percentage of state budgets, and legislators are looking for ways to reduce those Washington state Health Impact Reviews costs and improve the public's health. One way to meet these goals is by identifying and addressing the health risks and benefits of public policy decisions made outside the health sector in areas such as transportation, housing, education, natural resources and energy, and the economy. Health impact assessments (HIAs) bring together public health expertise, scientific data, and stakeholder input to evaluate the potential health effects of Keshia M. Pollack Porter^{1*†}, Ruth Lindberg^{2†} and Arielle McInnis-Simoncelli^{3†} proposed policy changes and to develop practical solutions that minimize risks and maximize health benefits. Government officials, academics, nongovernmental organizations, and industry have used this flexible, datadriven approach in communities across the country. HIAs can help state decision-makers and local communities craft smarter policies that protect the public's health: Abstract facilitate collaboration between government agencies, health officials, and constituent groups; and streamline the way health concerns are integrated into policy decisions. According to the National Research Council, HIA Background: As part of efforts to expand Health in All Policies (HiAP) in Washington State in the U.S., the is a promising tool to improve people's health and decrease health care costs because of its "broad applicability. its focus on adverse and beneficial health effects, its ability to incorporate various types of evidence, and its emphasis on stakeholder participation."

A brief from the Health Impact Project

Health Note Pilot

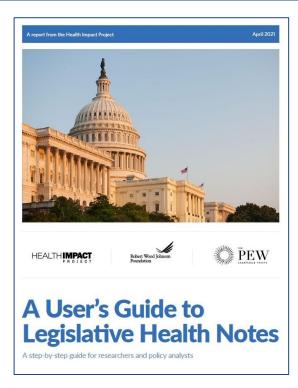
- Partner with states or localities to build capacity for conducting health notes
- Identify a sustainable process for application of the health note
- Identify agencies and organizations that have the capacity to screen legislation and draft health notes
- Initial emphasis on 4 sectors: education, labor and employment, housing, land use planning



Pilot Program to Help States and Localities Consider Health in Policymaking

HEALTH IMPACT

Legislative Health Note Methodology



Health Note: 2018-2022

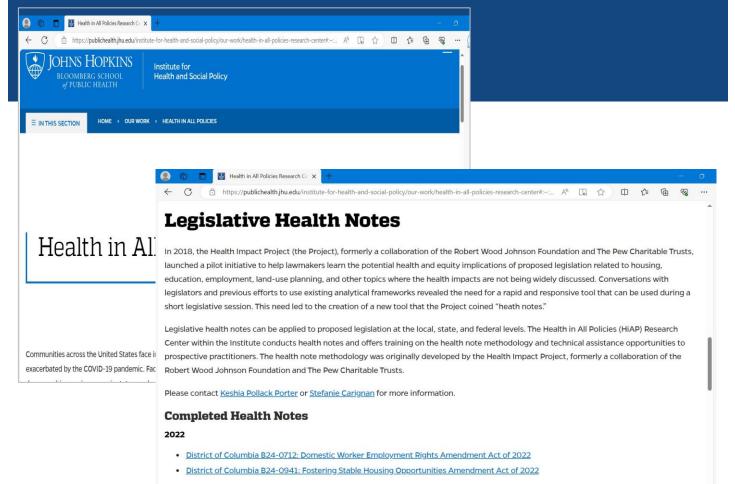
- Started in 2018-2019, pilot, intentionally worked with partners in Indiana and Colorado.
- Partnered with the Center on Budget and Policy Priorities to work with three states CA, NC, OH.
- Convening held in December 2019 to share lessons learned.
- 2020-2022 partnered with the DC City Council.
- 22 legislative health notes completed to date.
- Evaluated (paper under review)

Evaluation

- The Project's partners conducted outreach to all legislators and legislative staff that received at least one health note in California, Colorado, Indiana, Ohio, and North Carolina, all subject matter experts that reviewed a health note, and all government affairs specialists the Health Impact Project engaged to build relationships with policymakers in the jurisdictions.
- Atotal of 75 individuals were contacted to participate in this phase of the research. Twenty-five individuals agreed to participate, including six legislators, 2 legislative staff members, 1 state agency staff member, 2 government affairs specialists, and 14 expert reviewers.
- * Did additional data collection with DC City Council

Evaluation: Key Findings

- Most respondents said that the health notes were easy or very easy to understand and contained an appropriate level of detail.
- Perspective that legislators who do not normally engage in research would find it difficult to understand &level of detail was appropriate only for bill sponsors or a small number of legislators that are highly invested in the proposed legislation or subject matter.
- Desire for cost benefit analysis data in the health note.
- Perception that some or all the evidence presented in the health notes was useful or relevant to the policy decision.
- Although health notes are intended to inform policymaking where health is not already a focus of discussion, it was conveyed that the notes would be <u>most useful for health-related legislation</u> or as a tool for health committees because the health notes provide assessments of scientific literature that is not otherwise available to legislators and bill sponsors.



Judicial Health Notes

- Health notes on legislation, but what about judicial decisions?
- Judicial rulings can have profound consequences for health and equity. For this reason, many health experts attempt to sway judges by submitting amicus briefs before a decision is reached; however, there is no process for assessing the potential impacts of court decisions after they are made.
- Bloomberg American Health Initiative High Impact Project
 - Develop, apply and test, and promote use of health notes for judicial decisions
 - Identify the potential and often overlooked health impacts of legal decisions for policymakers, public health agencies, and community members, and to inform future judicial action



Policy Engagement

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Chapters:

- Policy Matters and So Do You
- A Look into Where Policy is Made
- Five Guiding Principles to Policy Engagement
- Policymakers: What do they need to make Good Public Health Decisions?
- It has to be Fair and Inclusive: Approaching Policy with Equity in Mind
- Leaning In: Selecting Your
- Policies and Ways to Engage
- Ready, Set, But Don't Go it
- Alone

Five Guiding Principles to Policy Engagement

Policymaking is messy (very messy at times!)
How you engage is personal
"Lobbying" is not a dirty word
Your message should align with your target audience
Policymaking takes a village

What Do Policymakers Need?

Evidence

Use data to tell a compelling story. Center people first, succintly articulate the issue, and recommend a viable solution.

Context

Shape the narrative arc.

Inform the decision-maker of history, participants, and factors.

Clear and Concise Messaging Know your ask.

Craft a message that is clear, consistent, concise, and memorable.



Credible Messengers Enlist allies with a unique message/shared stake, close relationships with/trusted by decision-maker, and access to an organized network.



Timing

Know when the time is right. Understand decision-maker priorities and the Overton Window.

Figure 4-2. Influencing Policymaker Decision-Making

Conclusions

- Using a HiAP lens can make policies from non-health sectors health and equity promoting and less harmful for health.
- HiAP can be a successful strategy to expand collaborations between health and non-health sectors.
- Framing matters: use influential narrative of the health issues that resonates with non-health partners.
- Benefits for policy formulation and implementation
- Capacity building is critical (new HiAP Center at JHU)
- You/we all have a role in policy!

ASTHO 2021; Framing Health in All Policies: Terms that Resonate

https://www.astho.org/ASTHOReports/Framing-Health-in-All-Policies-Terms-That-Resonate/07-29-21/

Multisector Influences on Health



Source: Humboldt County Community Health Assessment, 2018

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Contact Information

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Questions for Presenter



Resources

Resource Guide

Policy Process 101	Local Examples of Policy Engagement for Equity	Strategies for Engaging in Policy Process	Health Impact Assessment and Health in All Policies
Introduction to <u>Wisconsin's State</u> <u>Government (video)</u>	<u>State Policy and</u> <u>Program Strategies to</u> <u>Advance Health and</u> <u>Racial Equity</u>	Building Health Equity Policy Agendas - Population Health Institute	Health Impact Assessment A Community Commons Space
<u>How a Bill Becomes</u> <u>Law</u>	<u>Minnesota Dept. of</u> <u>Health - LHD Practices</u> <u>to Advance Equity</u>	<u>ASTHO Health Equity</u> <u>Policy Toolkit</u>	<u>Health in All Policies</u> <u>Research Center</u>
Equitable Enforcement to Achieve Health Equity (Change Lab)	National Case Studies	Policy Approaches to Advancing Health Equity	<u>Health Impact</u> <u>Assessment Toolkit</u> (Human Impact <u>Partners)</u>

Contact Us!

• Would you like more resources on a similar or different topic? Please contact the HEART team, and we will provide you with the appropriate resources.

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Next Meeting

March 14th, 2024 *Data for Health Equity 10:00 – 11:30 A.M. CST*

Please remember to fill out the post-meeting survey!

Thank You!