

Co-Producing Health Policy: Collectively Promoting & Protecting Public Health

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Our Policy Role as Health Educators

<u>Area of Responsibility VII:</u> Communicate, Promote, and Advocate for Health, Health Education/Promotion, and the Profession

Competency 7.1: Identify, develop, and deliver messages using a variety of communication strategies, methods, and techniques

Competency 7.2: Engage in advocacy for health and health education/promotion

Competency 7.3: Influence policy and/or systems change to promote health and health education

Competency 7.4: Promote the health education profession



"Health policies are solutions but, not all solutions are policies"....

- 1. Public policies or authoritative decisions that pertain to health or influence the pursuit of health
 - Seat belt laws, ACA,
- 2. Health policies affect or influence groups or classes of individuals or organizations
 - Medicaid work requirements, WIC, abstinence only sex ed, mandated HIV reporting

An Example from an HIV Outbreak

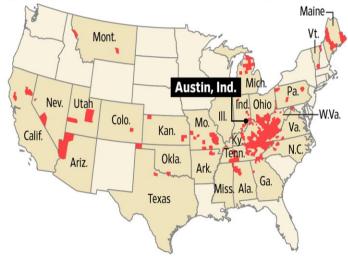
Indiana's HIV Outbreak

- In 2015 Austin, Indiana experienced,
 "one of the worst documented outbreaks of HIV among IV users in the past two decades" Jonathan Mermin, director of the CDC's National Center for HIV/AIDS, Viral Hepatitis, STD & TB Prevention
- Many vulnerabilities exist in communities like Scott County
- Addressing Harms Associated with Policy Interventions- New & Existing Challenges

Where Disease Eruption Is a Threat

A CDC report identified 220 counties where factors such as unemployment rates, overdose deaths and sales of prescription painkillers contribute to a high vulnerability for outbreaks of HIV and hepatitis C among injection drug users.

■ Counties vulnerable to outbreaks of HIV and hepatitis C





THE WALL STREET JOURNAL.



A Perfect Storm.....

- 1. The 5th vital sign and the overprescribing of painkillers
- Lack of mental health and addiction services.
- 3. Our war on drugs-possession of needle being a crime.
- 4. Lack of adequate public health spending and availability of services.
 - Indiana ranks 47th in the Nation for Public Health Spending Per Capita.
- 5. CDC's vulnerability recipe- includes high rates of fatal overdoses, prescription opioid sales and searing poverty



Community Vulnerabilities

Social

40% of Scott County's population has an income or falls below 200% of the Federal Poverty Line

17.01% of the total population aged 25 and older does not have a high school diploma

36.53% Occupied Housing Units with One or More Substandard Conditions

Stigma Associated with Injection Drug Use/HIV/HCV as well as lack of prevention and education

Health

Many residents uninsured

High rates of Preventable ED Visits

Limited Access to HIV/HCV Testing

Low public health investment

Warning Signs

Increased Overdoses and Overdose related deaths

Increased rates of HIV and/or HCV Rates



Harm Reduction & Syringe Exchange

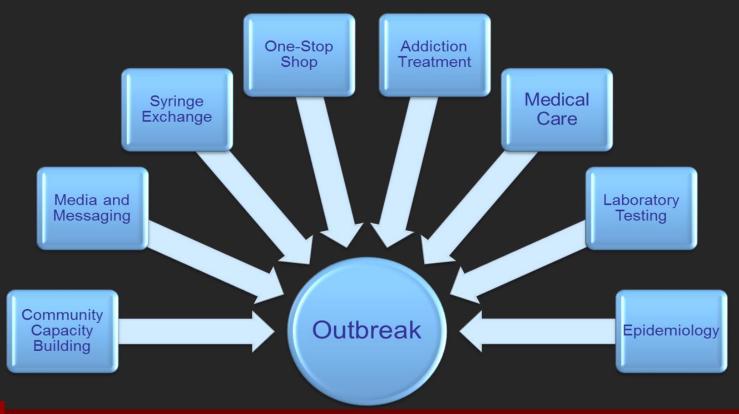
HIV/Hep C

Overdose

Health & Prevention Issues

Treatment Options

Harm Reduction in Austin

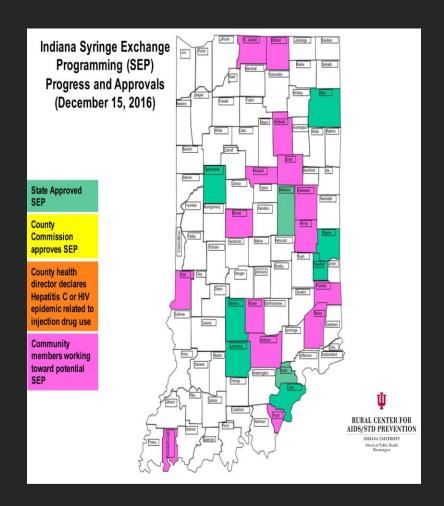


Policy Interventions - New & Existing Challenges

3-Steps of SEA 461

Indiana law requires counties wishing to establish syringe exchanges to move through the following 3 steps:

- The local health director declares an epidemic of HIV or Hepatitis C linked to injection drug use that cannot be addressed effectively in other ways.
- 2. The county executive body (commission) holds a public hearing and approves a program.
- State approves the county's application for a program.







Making the Case for Harm Reduction as HIV Prevention

Influencing Policy Decisions through Health Education



The Nuts & Bolts

Steps for Policy Advocacy Change

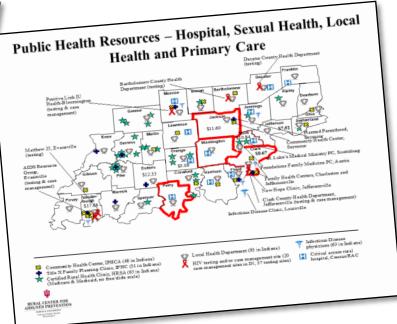
- 1. Identify the issue and develop fact sheets or issue briefs
- 2. Understand the steps needed to enact legislation
- 3. Building Partnerships & Coalitions
- 4. Get Involved in the Legislative Process
- 5. Work with Policymakers
- 6. Use Other Tools

Identify the issue and develop fact sheets or

issue briefs







Understand the steps needed to enact legislation

Opportunities for Input in the Legislative Process

Bill Introduction/Sponsorship

State or federal legislators can be encouraged to introduce a bill to address a specific issue or to cosponsor a bill introduced by another legislator. Obtaining a large number of cosponsors on a bill is one strategy for gaining attention and credibility for an issue.

Subcommittee

The most important time for constituent involvement is the subcommittee stage. Legislators are not yet committed to specific bills or legislative language. Grassroots advocates can communicate their positions on the issue and suggest specific provisions or language. Action by constituents of subcommittee members can be very effective at this point.

Committee

Grassroots advocacy at the committee stage is also important. Communications may focus on supporting or opposing specific language developed by the subcommittee; encouraging legislators to sponsor amendments; and asking committee members to vote for or against the bill. Again, action by constituents of committee members can be effective.

Floor

Constituent communication with all senators and representatives is important when it comes to the floor vote. Grassroots efforts at this stage focus on encouraging a legislator to vote either for or against the bill, to sponsor a floor amendment, or to vote for or against a floor amendment offered by another legislator.

Conference

Opportunities are more limited at the conference stage. The conference committee works out the differences between similar bills passed by the House and Senate. Communication at this point may influence whether the House or the Senate provision is accepted in the compromise bill.

Floor

Once a conference committee has worked out differences, passage of a bill is normally routine and is not affected by further constituent communication.



Source: Data from The legislative process, in Influencing Public Policy at the Grassroots, A Guide for Hospital

and Health System Leaders, American Hospital Association: 1999; and E. Winterfeldt, Influencing public

policy, Topics in Clinical Nutrition 16 (2001); 10 (Aspen Publishers, 2001).

Building Partnerships & Coalitions



Leadership Team (and growing!)

Covering Kids & Families of Indiana

Treatment Action Group

Harm Reduction Coalition (national)

Indiana Association of Local Boards of Health

Indiana Association of United Ways

Indiana Council of Community Mental Health Centers

Indiana Coalition for Prevention & Treatment

Indiana Legal Services, Inc.

Indiana Prescription Drug Abuse Prevention Task Force (OAG)

Indiana Minority Health Coalition

Indiana Public Health Association

Indiana Recovery Alliance

Indiana Rural Health Association

Indiana Sheriffs' Association

Judge Linda L. Chezem, Purdue, IUSM

Overdose Lifeline

Mental Health America in Indiana

National Alliance of State and Territorial AIDS Directors

Ross Silverman, Fairbanks, IU McKinney School of Law



Get Involved in the Legislative Process













Invite Legislators to Your Events









Testify at Legislative Hearings

- Giving legislative testimony is an opportunity not to be taken lightly. It is one of the most effective ways to educate legislators and policymakers about the impact, either positive or negative, that proposed legislation or legislative change might have, especially for specific groups of individuals.
- Legislators aren't always aware of all the implications a particular piece of legislation may have on their constituents, especially on underserved individuals.
- Providing this testimony and education clearly and professionally is very important, and can dramatically help you or your organization achieve the results you are seeking.





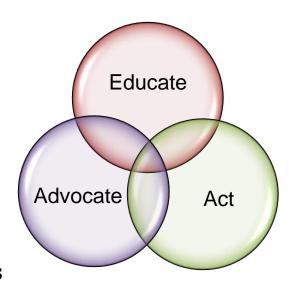






Overcoming Challenges and Defending Your Position in Advocating for Legislation

- 1. Prepare for Opposition
- 2. Mobilize Community Support
- 3. Prevent burnout
- 4. Deal with internal politics
- 5. Keep the bill moving through the legislative process



The Bottom Line! What the Legislator wants to know is...

- 1. What is your issue (grass root)?
- 2. Who is your opponent?
- 3. Why don't they agree with you?
- 4. Why should the legislator take your side?



Indiana Syringe Exchange Programming (SEP) Progress and Approvals (October 6, 2016)

State Approved SEP

County Commission approves SEP

County health director declares Hepatitis C or HIV epidemic related to injection drug use

Community members working toward potential SEP





Lessons Learned - Moving Forward

- 1. Increase or initiate overdose prevention education, including distribution of naloxone and training in its use to peers and first responders.
- Pass Good Samaritan-type laws, which allow overdose bystanders to call 911 without worrying about arrest for drug charges
- 3. Set-up syringe exchange programs
- 4. Support the scale-up of drug treatment efforts, especially Medication-Assisted Treatment-with medically assisted treatment for opioid dependence
- 5. Work with other community stakeholders especially law enforcement officers for harm reduction measures.

Moving Forward

- Examine HIV/Hepatitis C co-infection care and Hepatitis C eradication model
- Sustainability planning partnerships and transition from emergency response of outbreak
- Educate the public about injection drug use and related risks as well as harm reduction
- Identify state and local assets that can reduce harm as well as deficiencies that contribute to ongoing disparities- address social determinants
- Advocate for state and local resources
- Break down silos
- Understand what Harm Reduction is and build capacity to develop state and local strategies

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