

**Comments on the Draft Framework for the National
Prevention Strategy
offered by Prevention Institute**



Recommendations for draft Vision, Goals and Strategic Directions.

Prevention Institute commends the National Prevention and Health Promotion Council (the Council) for its efforts in moving forward the draft framework for the National Prevention and Health Promotion Strategy (NPS). We were pleased to see such a strong emphasis on the following:

- **Prevention and Equity:** These cross-cutting strategic directions focus on transforming places to support the health and safety of where people live, work, learn, and play, particularly in populations that experience the most disparities in health.
- **Cross-Sector Collaboration:** High-level focus on encouraging efforts to be truly collaborative and involve multiple fields and sectors can draw an extensive depth of knowledge and skills and be a more effective way to achieve meaningful changes in communities.
- **Building on Existing Initiatives:** Building and complementing the progress of existing initiatives is an opportunity to leverage the successes and lessons learned around advancing the health and safety of communities.
- **Strengthening the Evidence Base:** Promoting evidence-based cross-sector, multi-field strategies and policies that address equity and environments will provide guidance about the approaches that will have the greatest potential to improve community environments. Additionally, funding innovation will be a key mechanism for expanding the research and evidence base for community prevention and seeding the next wave of evidence-based practices. In response to the request for comment on the second iteration of the NPS framework, we would like to share our recommendations to help support the *Vision, Goals, and Strategic Directions* as laid out in the framework, and to provide guidance for potential revisions.

1. We think the framework reflects important principles that support true collaborative multi-sector work. It would make it easier for communities to implement efforts if the information is laid out differently. Many organizations may be working in silos and may have difficulty understanding and applying effective cross-sector approaches without very explicit guidance and training. While we cannot provide the following example visually due to the submission format, we suggest creating a visual framework that illustrates how cross-sectoral work can occur. The framework could demonstrate the relationship between the **Goals; Example Policies, Strategies & Programs; Example Agencies Involved; Impact on the System; and Long Term Health Impacts.**

For example:

Goal: Development, implementation, and coordination of sustainable approaches to preventing violence that will have the greatest impact in neighborhoods, schools, and homes → **Example Policies, Strategies & Programs:** 1) Increasing the availability of and access to meaningful and safe jobs, starting in the areas with the most need → **Example Agencies Involved:** Economic

Development, Business Associations, Transportation → **Impact on System:** Increased number of jobs and capacity to advance economic development → **Long Term Health Impacts:** injury and violence-free living, less alcohol/ substance use, mental and emotional wellbeing.

2. The third draft goal, “*Empowered Individuals*” could be interpreted to reinforce the default frame of individual responsibility; changing the wording to “Empower and educate individuals by providing accessible, affordable opportunities to improve safety, physical activity and healthy eating,” would reflect that an individual’s “choices” are limited by their options.
3. (SD2) *Eliminate Health Disparities* should make the link between health disparities and the efforts to create *Healthy Physical, Social and Economic Environments (SD1)*. A suggested modification to the first recommendation in SD2 would read:
(R) Address physical, social, and economic environments to expand opportunities for health within communities and populations at greatest risk. Address key issues that disproportionately affect sub-populations such as diabetes, HIV/AIDS, Viral Hepatitis B and C, homicide, suicide and domestic violence.
4. We were pleased to see that breastfeeding was included as one of the recommendations for (SD7) *Healthy Eating* and would suggest stronger promotion of baby-friendly hospital policies and practices.
5. We suggest including a recommendation for (SD7) *Healthy Eating* that addresses land use and agriculture policies to improve local and regional food systems and increase access to affordable healthy foods. (see *Recipes for Change: Healthy Food in Every Community* for examples strategies http://www.convergencepartnership.org/atf/cf/%7B245A9B44-6DED-4ABD-A392-AE583809E350%7D/ConvergencePartnership_FoodAccess_final.pdf)

What evidence-based actions should the federal government take to address the Draft Recommendations?

Federal government agencies have a critical role in the efforts outline in the NPS, both in their grantmaking as well as the efforts they lead and participate in. Below are a list of resources that provide strategies and policies to improve the health and safety of communities:

1. ***Promising Strategies for Creating Healthy Eating and Active Living Environments*** offers a comprehensive and cross-cutting review of policy, strategy, and program recommendations to realize the vision of healthy people in healthy places. http://www.convergencepartnership.org/atf/cf/%7B245A9B44-6DED-4ABD-A392-AE583809E350%7D/CP_Promising%20Strategies_printed.pdf
2. ***Recipes for Change: Healthy Food in Every Community*** examines opportunities to change the food system to benefit our physical, economic, social, and environmental health. Fueled by research, innovative policies, and grassroots energy, the movement to increase access to healthy foods and to create a sustainable, equitable food system can provide a springboard for public action and local activism. (http://www.convergencepartnership.org/atf/cf/%7B245A9B44-6DED-4ABD-A392-AE583809E350%7D/ConvergencePartnership_FoodAccess_final.pdf)
3. ***Fostering Physical Activity for Children and Youth: Opportunities for a Lifetime of Health*** outlines a range of organizational practices and public policies being considered to improve quality and quantity of physical activity among our nation’s children and youth. This document is part of a larger strategy to identify high-impact approaches that

will move us closer to our vision of healthy people in healthy places.

http://www.convergencepartnership.org/atf/cf/%7B245A9B44-6DED-4ABD-A392-AE583809E350%7D/Convergence_Physical%20Activity_final.pdf

4. ***Strategies for Enhancing the Built Environment to Support Healthy Eating and Active Living*** outlines a range of organizational practices and public policies being considered to improve the built environment in support of healthy eating and regular physical activity. http://www.convergencepartnership.org/atf/cf/%7B245A9B44-6DED-4ABD-A392-AE583809E350%7D/CP_Built%20Environment_printed.pdf
5. **Health Equity and Prevention Primer** serves as a web-based training series for public health practitioners and advocates interested in policy advocacy, community change, and multi-sector engagement to achieve health equity. The Primer helps practitioners integrate a health equity lens into their initiatives in pursuit of overall health and safety. More specifically, *Module 7: Good Health Counts: Measuring and Evaluating Health Equity*, provides information about how community health indicators can be used in community assessments to improve health and safety outcomes and reduce inequities. <http://www.preventioninstitute.org/tools/focus-area-tools/health-equity-toolkit.html>

Additional actions that the federal government can take are as follows:

1. Provide support and capacity building to achieve healthy and safe communities through the implementation of cross-cutting, multi-field policy and environmental change efforts.
2. Make guidelines for cross-collaboration across fields and sectors required, specific, and intentional in Request for Proposal's and grant requirements. Collaborative efforts between diverse fields (health, education, labor, justice, etc.) and sectors can be a more effective way to address complexity of problems experienced by communities. Public-private partnerships at the local, state, tribal, and federal levels are also important for planning and implementing prevention approaches. In addition to collaboration across organizations and agencies, the engagement of community residents and leaders is critical for creating meaningful changes in the community. Community leadership should have authentic participation and influence in decision making and receive adequate funding to support this type of engagement.
3. Consider federal and partner structural changes (including technology) that will foster and support greater collaboration across agencies and organizations;
4. Focus on communities where greatest health inequities exists. All individuals should have an equal opportunity live in a safe, healthy community. Reducing inequities will require efforts that move away from individual disease orientation to a determinants of health framework—analyzing determinants of health reveals a set of social and physical factors that have an impact on population health. Public policies and institutional practices aimed at addressing these determinants of health can be key levers for change.
5. Adaptation of a “Health, Safety, and Equity in All Policies” approach that will consider, prioritize and protect health in every policy and practice;
6. Linking the National Strategy with and building on other initiatives including government funding (past and current HHS funding and funding from other government agencies) and philanthropic/business/civic resources.

What evidence-based actions should partners (national, state, Tribal, local, and Territorial governments, non-profit, and private) take to address the Draft Recommendations?

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What measures should be used to monitor progress on implementation of the National Prevention Strategy's Vision, Goals, and Recommendations?

1. Intentional and guided collection of intermediate measures of success—indicators that measure community results, including impacts on determinants of health, community environments, and policy;
2. Meaningful community and cross-sector engagement;
3. Long term, post-grant assessment of health impact and outcomes;
4. Evidence of highest impact shown where the greatest disparities exist.
5. ***Module 7: Good Health Counts: Measuring and Evaluating Health Equity*** of the **The Health Equity and Prevention Primer** provides information about how community health indicators can be used in community assessments to improve health and safety

outcomes and reduce inequities. The primer serves as a web-based training series for public health practitioners and advocates interested in policy advocacy, community change, and multi-sector engagement to achieve health equity. The Primer helps practitioners integrate a health equity lens into their initiatives in pursuit of overall health and safety. <http://www.preventioninstitute.org/tools/focus-area-tools/health-equity-toolkit.html>