MAKING THE CASE FOR COMMUNITY PREVENTION THROUGH MEDIA ADVOCACY

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As a leader responsible for implementing community prevention, you can harness the power of the media to make the case for community prevention. Ask yourself: if the only understanding that decision makers (and the public) had about community prevention was formed by the media, what would they know? What wouldn’t they know? Actively engaging with media allows you to broadcast and elevate your local efforts, thereby building an increased understanding of what prevention is, how it is showing success, and the value of bringing these efforts to scale.

By paying attention and responding to media coverage through letters to the editor or online comments, you can offer your own experiences and successes as a counterpoint to common misperceptions about community prevention (e.g. that it limits local control). And when you proactively share your community prevention efforts with the media—through op-eds or by pitching stories to reporters—you are directly building an understanding of community that deflects negative criticism.

The following pages provide a compilation of tips and talking points for making the case for community prevention. They are based on Prevention Institute’s daily analysis of how the media is (and isn’t) framing community prevention. Using this information, you can expand and shift the frame of how the media depicts community prevention, to ensure that the whole picture is shown and that community prevention is framed accurately and comprehensively. We encourage you to contact Ann Whidden, Prevention Institute’s Communications Manager (ann@preventioninstitute.org) for assistance in planning your media advocacy activities (anything and everything from pitching a story to a reporter to crafting a compelling op-ed). And for a weekly analysis of media coverage on community prevention, join our Health Reform Rapid Response Network.

Sincerely,

Prevention Institute Communications Team
TIPS FOR COMMUNICATING COMMUNITY PREVENTION

Community prevention works: it builds healthier communities, saves money and supports equity. Here are our suggestions for capturing and reflecting the full impact of your community prevention efforts:

Cue the environment first.
Paint a picture that describes why healthy communities matter:

*When neighborhoods don’t have safe parks, places to walk, vibrant retail, or healthy food available, everyone’s health suffers.*

Cueing the environment first also allows you to draw concrete links between the environment and how it shapes behaviors, such as with this quote from Marion Standish, Director of The California Endowment’s Community Health Program: “*When communities clean up neighborhood parks or open school playgrounds on weekends, children get more exercise. When we open up farmers’ markets in the middle of food deserts, families eat better.*”

Connect improvements to community environments, projected health outcomes, and projected savings.
It is important to connect improvements in the environments where people live, work, play and learn—from bike lanes to healthy school lunches—directly with positive health outcomes. Here’s an example:

Chronic disease related to unhealthy food options and lack of safe places to play costs the U.S. $215 billion a year in direct medical costs and lost productivity. In [My Community], one way we’re trying to prevent people from getting sick in the first place is by changing the community environment to increase safe opportunities for walking and biking, like the 35 miles of bike and walking paths we’ve connected throughout the city. By ensuring we have a strong network of bike and walking paths between residential and business areas, we are increasing walking and cycling to school, to work, and to run errands. These improvements make a community a healthier, more desirable place to live, which can also increase the likelihood that businesses will locate there.

*Information you may include: Regional health stats and costs, where available-current obesity/smoking/physical activity rates, specific disparities, healthcare costs in county, walkability, distance to grocery stores, number of ‘unhealthy’ food outlets, etc. In describing your outcome, be as specific as you can--this many miles of walking or bicycle paths from our complete street policy; this many servings of fruits and vegetables as a result of our farm to school project; this many kids who won’t be exposed to smoke.*
Keep it local.
A desire for local control and decision making is being reflected in our national conversation—people worry about someone making decisions for them, or taking their ability to make decisions away. It’s critical to emphasize that community prevention is local. Community prevention is about helping neighborhoods work together with local businesses, community groups and local health departments to figure out the best ways to build health where they live—whether that’s putting more fruits and vegetables on a child’s school lunch plate, or making the local park safer so a mom doesn’t have to put her kid in front of the TV. The essence of community prevention is about building health and supporting decision making in the ways that communities think will work best right where they live.

Data to include:
- Partnerships that have been strengthened or created, most particularly non-traditional and community-based partnerships, i.e. local business, local churches, parent groups, insurance orgs, gyms, childcare, farmers etc.
- Data that emphasizes ‘local’ nature of efforts: decision making processes, local leadership; community, parents, youth, elderly, high-need population involvement

Avoid the “Choice” Trap.
We encourage prevention leaders to use the term ‘Options’, not ‘Choices’, when they talk about prevention work. Focusing too much on “choices” can inadvertently shift the focus back to individual behaviors and responsibility. Using the term ‘options’ helps shift responsibility for accessibility and availability away from the individual, and back to the industries and policies that shape what is available in our communities. Families don’t have much control over what’s made available to them in the places they live, work, and play; they don’t “choose” what’s stocked on their grocery store shelves, whether parks are available nearby, whether their neighborhoods are safe or their neighbor smokes.

Here’s an example:

Children and families deserve healthy options. Policies that increase access to healthy foods and decrease access to unhealthy foods protect children and families. The restaurant industry alone spends more than $5 million every day marketing unhealthy foods to children. With numbers like these, the deck is stacked against parents who want to make healthy decisions for their children. Policies help right the balance, giving families more control, more options, and paving the way for better health.

Include benefits to the local economy.
With a high unemployment rate, concerns about the survival of small businesses, and a still struggling economy, people want to hear that any monetary investment is helping to create jobs, help small business and put/keep money in the local economy. Look for, collect and include these kinds of data and examples, like quotes from local businesses or associations, wherever you can. Here’s a great example from Steve Tarver of the Louisville YMCA, in the Louisville Courier-Journal:
“Funds from a $7.9 million federal stimulus grant (Communities Putting Prevention to Work) are making it possible for us to grow the number of Healthy Corner Stores in Louisville food deserts. ... The grant enables us to provide local store owners with new equipment, business planning, and minor construction improvements. Residents in those neighborhoods no longer have lengthy bus rides, long walks or inconvenient trips to supermarkets that exist miles away from their homes. Families will enjoy thousands more servings of fresh fruits and vegetables.”

Data to include: Economic benefits, including new jobs created or kept; job training/leadership opportunities for youth; equipment upgraded or purchased for local businesses; jobs or business kept locally; promotion of local merchants, farmers; increased access to or utilization of local businesses and services; community re-investment or revitalization
COMMUNITY PREVENTION TALKING POINTS

The following messaging and talking points were developed in response to our daily analysis of how community prevention is, and isn’t, framed in print and online media, including the blogosphere. Aligning your media advocacy activities around these themes and tailoring the talking points to reflect your community’s experience will strengthen your community prevention message.

Prevention Saves Money and Lives

- Many of the leading causes of illness, injury, and death are preventable. Every dollar invested in building healthy communities will reduce the burden and demand on our health care system, and ensure that more people will be healthier for longer periods of their life. We owe it to our families; we owe it to our kids.

- This is the first generation that is likely to have a shorter life span than their parents. We owe it to our children and grandchildren to start investing in building healthy communities now.

- Seven of ten deaths among Americans each year are caused by chronic diseases such as heart disease, cancer, stroke and diabetes—diseases that could be prevented. These same chronic diseases account for more than 75% of our nation’s health care spending. Community prevention dollars are working right now to alleviate some of these soaring costs—and improving health at the same time. A 5% reduction—just in diabetes and high blood pressure rates—would save our country as much as 24.7 billion dollars a year. [good to tailor with local data]

- Community prevention funding is a smart investment that will pay off by building health, preventing people from getting sick in the first place. Supporters in Congress call prevention funding "one of the most significant cost controls in the health care legislation." For every dollar we spend on prevention, we see a five-to-one return on investment in just five years. We simply can’t fix our economy without it.

Community Prevention is Evidence-Based

- Prevention is based on decades of solid science. We all deserve to be healthy, and we are proud of the communities across the countries that are already showing results and building health through community prevention.

- Experience and research show that building health in the places people live, work and play saves lives and money. Federal prevention dollars support strategies that have been field tested.

- We need to expand what is already working across the country so that everyone can enjoy health and prosperity. We can’t afford not to invest in what works.
The Public wants Prevention

- The American people support prevention. Seventy-three percent of the American people back community prevention. Their support is even stronger for the kinds of efforts federal legislation is focused on right now: bringing more fresh fruits and vegetables into our stores, providing healthier lunches for kids, and protecting our communities and children from tobacco. These strategies protect the health of children and families.

Community Prevention is Local

- Chronic diseases related to unhealthy food options, availability and promotion of tobacco products and lack of safe places for physical activity are one of the biggest drains on our economy. We here in ________________ know it, and we’re rolling up our sleeves and doing just what Americans do best: finding innovative solutions. The federal government has dedicated the resources, but our solution is unique—because our local leaders, churches, businesses and parents know best what works for us here.

- Our communities know what’s wrong, and when we work together, we can make it right. The good news is we can fix many of the health problems we face, and prevent other problems from starting. When we work together—our public health department, cities, schools, businesses, and community-based organizations—we can overcome even the most tenacious problems. We have skilled, creative and dedicated people who can make our region the best it can be.

- We’re working together with local businesses, faith leaders, community groups and local health departments to figure out the best ways to build health right here. And we’re keeping resources and decision-making right here in the neighborhood [example.]

Prevention is Good for Business

- A healthy community, where people can access healthy foods and safe places to be physically active, is good for business. Businesses spend $73 billion dollars a year on chronic diseases that these kinds of efforts can prevent. Our local businesses are going to save money on healthcare costs, lost work days and medical claims when their workforce is healthier.

- Community prevention is building our neighborhood infrastructure and the local economy; bike paths, pedestrian walkways and smart public transit make it easier and faster to shop at local businesses. Local business owners are getting equipment upgrades and publicity for their stores and products. Instead of shipping food in from out-of-state or out of the country, our kids are eating local foods, from local farmers, prepared right here in our city. [tailor depending on locale/efforts and make more specific]
• Our local businesses really deserve the extra boost that a healthy community will bring. Workplace wellness programs build a healthier workforce and a better bottom line: for every dollar a workplace spends on wellness programs like ours, medical costs fall by about $3.27.

• Chronic diseases related to unhealthy food options, tobacco products and lack of physical activity are one of the biggest drains on our economy. Business can be part of the solution by supporting prevention in their communities, and instituting wellness initiatives that make their businesses healthier places to work. Businesses will be more competitive, save money, and build health and goodwill in their neighborhoods.

• Instead of shipping food in from out-of-state or out of the country, our kids are eating local foods, from local farmers, prepared right here in our city. [tailor depending on locale/efforts and make more specific]

The Government has a Role in Public Health
One of the recurring criticisms against community prevention initiatives is that of government overreach, that it is not the government’s business to tell people what to eat or when to exercise. In response to this line of criticism, we’ve developed the following talking points that can be helpful in defusing “nanny state” pushback.

• Every time you buckle your child into a carseat, you’re practicing this same kind of community prevention: policies help protect our health, and they help shape our expectations. Kids didn’t use to be automatically put in carseats—parents couldn’t buy them or afford them, cars didn’t accommodate them, and our culture didn’t support them. We used policy to change that. That’s the same kind of shift we want to see here—we want children and parents to take for granted that the places they live, work, play, and learn are going to support them in healthy eating and physical activity—not make it harder.
COMMUNICATING WITH THE MEDIA:
HOW TO ELEVATE YOUR SUCCESSES

Focus on Solutions, not just Problems.
When speaking with reporters, resist the urge to focus solely on the problem you are trying to address. While describing rates of chronic disease or injury is certainly important, you also want to ensure that the solutions you are championing are just as easily understood.

Use “Real” People & Stories.
Reporters like to see real people—your challenge is to find people from the community who also can connect their story back to the broader community prevention message. For example, a mom whose child now walks to school thanks to a new crosswalk; a family seeing decreased asthma rates thanks to smoke-free policies in their apartment building.

Reflect Impact.
Explain the reach of your local efforts—when possible, show the impact that multiple strategies have together. Illustrate the number of people involved, and how your community prevention strategies are changing behaviors. Include other benefits—more jobs, more food purchased locally, better traffic flow to local storefronts, involvement and leadership from local sectors.

Find credible messengers.
Reporters are not surprised when public health leaders speak out about the importance of community prevention. However, when the community prevention message is also echoed by credible messengers beyond the usual suspects, reporters really begin to pay attention. Who are credible messengers?

- Add dimension and authenticity to your work;
- Are unexpected—a conservative businessperson or conservative mayor;
- Are respected in and by the community—faith leaders, PTA presidents, community leaders; and
- Speak to a new sector—big businesses, doctors, insurance companies.
**Op-Ed Example**


Rep. Paul Ryan’s (R-Wis.) 2012 budget plan is selling out the next generation of seniors. His proposal would cap what each state is allocated to spend on Medicare and asks our elderly to figure out how to pay for their treatment with private insurance companies and a voucher with ever-shrinking value.

We can reduce the amount of money we need to spend on healthcare for seniors, and for everyone else, but penalizing our aging adults and raiding Medicare is not the way to do it. The fiscally responsible approach must include policies that keep people healthier now, in order to reduce the demand for medical care throughout their lives.

That approach is prevention.

The Ryan plan doesn’t focus on any of the drivers of health costs, and it doesn’t make anyone less sick. Its magical thinking simply reduces the flow of money available for treatment and care, while failing to address the healthcare costs that will get passed along to families and businesses. This is detrimental to our nation and the deficit. If, instead, we reduce the number of people injured and ill in the first place, we won’t just save money. We will save lives.

Ryan and his friends are laser-focused on cutting over a trillion dollars, but their myopic view prevents them from seeing the innovative and responsible way to get there—not by making your grandma search for a health insurer on the open market, or by having your dad cover close to 70 percent of his own medical costs by 2030, both real scenarios under the Ryan plan. Older adults, like the entire population, need multiple interventions to protect their health and save money. Eliminating medical mistakes, better utilization of health information technologies, and reducing costs and increasing efficiencies of care are all important elements—and prevention is crucial.

California is facing a $59 billion obligation for state retiree health costs. State Controller John Chiang’s response? We must make “prevention and chronic disease management a priority to reduce the demand for healthcare.” Chiang said, “If we can reduce the assumed rate of healthcare inflation by 1 percent, that could cut our unfunded liability by $7.4 billion.” Our nation can achieve that same 1 percent reduction—and save just under a trillion dollars over ten years—not by leaving our elderly sick and untreated, but by making them healthier, stronger and more independent.

Falls, one of the leading causes of injuries to seniors, cost our country more than $19 billion a year in direct medical costs and lead to a cascade of debilitating and avoidable medical
complications. Similarly, unhealthy eating cost our country $147 billion in medical bills in 2008, double what it was a decade ago. Much of that was financed by Medicare and Medicaid. We need simple changes like curb cuts, increased crosswalk safety, access to fresh fruits and vegetables for our parents and grandparents, and opportunities for them to get out and be physically active—safely and easily. These strategies show a 5-to-1 return on investment—a better value, and a better outcome, than anything the Ryan plan has to offer.

Ryan’s plan wouldn’t start for another 10-plus years, when today’s 54-year-olds turn 65. During that time, a prevention focus would save money for seniors, start to lower the costs of those now aged 55-65, and provide a 10-year down payment on prevention for the younger generation. Seniors prefer the current Medicare system by a 2-to-1 margin—62 percent vs. 30 percent—when compared to Ryan’s plan, according to The Kaiser Family Foundation’s April Health Tracking Poll released this week. They know what we know: saving money can’t come at the expense of the frailest members of our society.

We can take on Medicare as a means to address the budget deficit—but we have to do it effectively and compassionately. The right approach is to invest now in prevention.
Letter to the Editor Examples

**Health and the government**, Los Angeles Times, June 9, 2011


Stier and Miller are wrong about Communities Putting Prevention to Work, or CPPW. Communities across the country are building health, saving money and saving lives using evidence-based strategies that are showing results. If common sense isn’t enough to elucidate the connection between having sidewalks and being able to walk in your neighborhood, or having access to affordable fresh foods and being able to eat them, there is a wealth of research to back up these efforts. Each CPPW community is deciding for itself the strategies that work best for them, and they’re working with local organizations to make them happen. We’re proud to work alongside CPPW communities that are joining together to find solutions that work.

*Larry Cohen*
*Oakland*

The writer is executive director of the Prevention Institute.

Stier’s and Miller’s arguments are not new. Most gains in health over the last century have been due to policy and environmental interventions, including sanitation, workplace safety measures and smoking restrictions. While evoking similar complaints of government intrusion, these actions contributed to an unprecedented 25-year increase in life expectancy and a markedly improved quality of life. Continued smoking and the obesity epidemic threaten to reverse these gains and worsen runaway healthcare costs.

For these reasons, the Centers for Disease Control and Prevention’s CPPW and community transformation grant programs are vitally important investments. They are based on strong science and supported by more than 100 years of public health experience.

*Paul Simon, MD, Jonathan Fielding, MD*
*Los Angeles*

Simon is director of the L.A. County Department of Public Health’s Division of Chronic Disease and Injury Prevention. Fielding is the public health department’s director.
Beyond the Food Labels, New York Times, May 21, 2011

To the Editor:

Parents shouldn’t need a magnifying glass — or an advanced degree in nutrition — to figure out if a food product is healthy for their children (“Foods With Benefits, or So They Say,” May 15). And it shouldn’t take a lawsuit to stop food companies from making deceptive health claims.

We need our federal government to set nonvoluntary standards for marketing products to kids, and to put some teeth into existing health claim regulations. It is ironic that the very foods we want our children and families to eat — whole and minimally processed foods — often have little to no dollars spent on advertising and promotion.

Amid a national crisis of unhealthy eating, our parents deserve honest information and affordable, healthy options.

Juliet Sims
Oakland, Calif., May 16

The writer is a program coordinator at Prevention Institute.
Op-Ed Template

Prevention works.

In the past two years, [our city] has made an historic investment in prevention and wellness with the goal of helping our residents thrive. Through funding from Communities Putting Prevention to Work, we are transforming the places where we live, work, play and learn. That smart investment is already reaping big rewards.

Chronic diseases related to unhealthy eating, smoking and lack of physical activity are one of the biggest drains on our economy, here locally, and nationwide. Seven of ten deaths among Americans each year are caused by chronic diseases such as heart disease, cancer, stroke and diabetes -- diseases that could be prevented. These same chronic diseases account for more than 75 percent of our nation’s health care spending. An American Lung Association study shows that every year, "smoking results in costs to the US economy of more than $301 billion." A 5 percent reduction -- just in diabetes and high blood pressure rates -- would save our country as much as 24.7 billion dollars a year. [If you have more local data, please use it!]

Community prevention dollars are working right now to alleviate some of these soaring costs -- and improving health at the same time.

Our families, the kids your children play with at school, the family that lives next door to you, deserve support as they strive to be healthy. [Your city name] businesses trying to prosper shouldn’t be brought down by skyrocketing health costs and low productivity related to the declining health of their workforce.

The [city name] people know it, and we are rolling up our sleeves and doing just what Americans do best: finding innovative solutions. We are immensely proud of their work. Prevention work believes that parents want their kids to eat healthily; and prevention also makes sure every child can access fresh, affordable food right where they live and go to school. [Insert your healthy eating example here, ie: That’s why we’ve recruited nearly 500 corner stores into the Healthy Corner Store Initiative, with the goal of bringing fresh fruits and vegetables to every parent, child and family here in [our city]. We’ve also given resources to local business owners for equipment upgrades, shelving and refrigeration to sell produce, low-fat dairy products, and lean meats.]

Our local businesses really deserve the extra boost that a healthy community will bring. Businesses spend $73 billion dollars a year on chronic diseases that these kinds of efforts can prevent. Our local businesses are going to save money on healthcare costs, lost work days and medical claims when their workforce—all of us in ____—are healthier. [Insert an example where local business has been involved or benefited from your efforts, ie: In Bartholomew County, Indiana, the Columbus Area Chamber of Commerce has worked with other local groups to create Reach Healthy Business, a workplace recognition program designed to support companies who are committed to creating a workplace that supports employee health. Chamber of Commerce president Jack Hess came on board to address what he thought were the two single biggest costs to small businesses: health insurance costs and the loss in productivity]
based on the treatment of health-related disease, such as employee absenteeism. Hess said, "A healthy community is one in which companies want to locate, businesses want to grow and expand, and the best workforce in the world wants to live."

Prevention is local, and involves all of us. [Insert an example that shows involvement of local leaders, local parents, local business, etc., ie: La Crosse County Wisconsin’s Farm2School program is helping Wisconsin kids eat Wisconsin food. Over 5,000 students are eating and learning how to cook locally-grown foods including cabbage, beets, wild rice, potatoes and winter squash, grown by local Wisconsin farmers, and prepared locally instead of being shipped in from California, Florida or even Chile. Local food processing facility Wisconsin Innovation Kitchen pre-processes the food to reduce labor costs in the school kitchens, and had to add a third shift to keep up with the new demand.]

[City name] could be -- should be -- a community committed to the health of its people, not solely to the treatment and management of its sick. Our children are now projected to have a shorter life span than their parents, due largely to preventable chronic diseases. Fortunately, we know what works—and what is working—to turn this around. [City citizens] are putting prevention to work because we care about the health of our children, the vitality of our community, and the devastating impact of skyrocketing health care costs on our nation. Community prevention is showing real success—and that’s something that we can all take pride in and celebrate. We want children and parents to take for granted that the places they live, work, play, and learn are going to support them in healthy eating, physical activity and living smoke-free -- not make it harder.

Community prevention is making that possible today.