About NACCHO

The National Association of County and City Health Officials (NACCHO) represents the nation’s nearly 3,000 local governmental health departments. These city, county, metropolitan, district, and tribal departments work every day to protect and promote health and well-being for all people in their communities.
NACCHO’s Strategic Messaging Guide was created to use in communicating with media and other stakeholders. We deliberately selected themes and messages that are relevant to the current economic and political climate, as well as to upcoming known and expected events (e.g., food-borne illness outbreaks, natural disasters). These messages are intended for use this year and will be reevaluated annually or as circumstances warrant. We expect these themes and messages to be especially useful for NACCHO leadership and NACCHO’s media champions when responding to media requests and for all NACCHO members engaged in advocacy.

Why We Created This Messaging Guide

In recent years, NACCHO, local health departments, and the public health field as a whole have accomplished several major milestones and have faced significant challenges. To address these challenges:

First, it means we need to turn awareness into action. Widespread public support for public health and prevention already exists, and consensus is growing that health happens where we live, learn, work, and play. We know local health departments’ critical role in our communities, but the public and policymakers are often unaware of the quiet contributions they make to keeping local residents safe and healthy. Over the next year, we need to convert general awareness and understanding into support for local health departments and the vital role they play in making it easier for people to be healthy. Not only do we need to make a convincing case for our work, we need to make the case to others to speak on our behalf.

Second, we need to speak in one voice. Now more than ever, we must take the opportunity to generate new support for local health departments and drive policy changes that can improve Americans’ health. Whether we are talking to someone in your community, a local or national reporter, or a policymaker, we all need to be saying the same thing because we all have the same goal— generating support for local health departments and public health.

Third, we need to tell our stories. To really connect with the public, policymakers, the media, community advocates, and stakeholders from business, education, transportation, and other sectors, we need to illustrate how local health departments protect people and keep us safe. People in communities may not always see the work local health departments do, but they are safer and healthier because of it. Stories make your work visible. Local stories about local people and local data are most interesting to media and most persuasive to policymakers. Stories make the facts and numbers come alive and make you and your work more memorable to your audience.
This guide is designed to help all of us speak in a unified voice, to reinforce each other’s messages as we respond to unprecedented challenges, anticipate the opportunities ahead, build support for local health departments, and brand NACCHO as the national authority on local health departments. Everything in the guide is based on extensive discussion, review, and iterative feedback from NACCHO staff and local health department leaders. Please review it, use it, and make it your own by adding examples about your agency, project, or program. Together we can amplify the great work you do every day.
Overview and Background

What’s in this guide?

The NACCHO Strategic Messaging Guide provides NACCHO leadership and staff, the Board of Directors, and media champions with guidance and ready-to-use messaging resources to build support for the work of local health departments. Here’s how the guide is organized:

Overview and Background (pages 3–6) includes a brief overview of the messaging guide. This section also includes a description of the message platform development process.

Themes and Messages (pages 7–45) includes ready-to-use messaging in 16 strategic areas designed to build support for: Local health departments, NACCHO, public health funding, and 13 key programmatic areas that affect community health and safety.

Why do we need a message platform and consistent messaging?

“Public health” is a vast domain. Local health departments are part of that domain. To raise the visibility of local health departments, we need to talk about them specifically. Local health departments, with their special legal and statutory roles and responsibilities, have a unique role. This will increase the visibility of local health departments, raise the public’s understanding about the role of local health departments, and help others understand how their work benefits both individuals and the community-at-large.

We are often asked by the media and policymakers: Why is it important that local health departments exist? What is their unique role? How does that role differ from other organizations in the public health system? How does the work of a local health department improve the health of people in the community? It will have more of an impact if we have consistent answers to these questions.

Our issues compete with many others for the attention of our audiences. We know that in order to be successful, we need a way to quickly engage audiences about the value of local health departments.
Overview and Background

How did we select these messages?

NACCHO developed these strategic messages to be clear, concise, jargon-free, and acronym-free. When used consistently and over time, these messages help strengthen NACCHO’s brand as the leading expert on LHDs and educate external stakeholders (e.g., reporters, policymakers, funders, public health partners, advocacy groups, and others) about the important yet often invisible work of LHDs. In this Messaging Guide, our strategic messages consist of a lead message or messages, and supporting messages.

A useful message platform reflects choices. We uncovered these messages through a series of meetings with NACCHO management and senior staff in targeted program areas. We gathered input from those who know NACCHO, public health, and the work of local health departments. Messages were vetted with the NACCHO Board of Directors, with local public health officials, and NACCHO workgroup members.

Who are our intended audiences?

Our audience is policymakers, the media, and members of the public, particularly those who know public officials and will speak to them. A majority of policymakers support prevention, protection, and safety, but they do not fully understand the contribution of local health departments.

The stories that we have included illustrate the breadth of services that local health departments provide and underscore the importance of keeping local health departments fully staffed and funded. These are just examples; use yours to highlight your own good work.

What else do I need to know?

The NACCHO Strategic Messaging Guide is designed to be a ready-to-use resource for building understanding and support for local health departments and NACCHO. This document is not exhaustive. It reflects the choices NACCHO leadership has made regarding its advocacy priorities and addresses anticipated trends in news coverage. To that end, the guide provides messages on 16 key topics: The Role of Local Health Departments; What is NACCHO?; Affordable Care Act; Chronic Disease and Prevention; Climate Change; Food Safety; Health in All Policies; Health Information Technology; Healthcare-Associated Infections; Immunization; Healthy and Safe Women, Children, Youth, and Families; Impact of Budget Cuts; Prescription Drug Misuse and Overdose; Public Health Preparedness; Sugar-Sweetened Beverages; and Vector-Borne Disease.

Targeting these messages to specific audiences, illustrating them with story examples, and rehearsing before your meeting or interview are all steps you can take to maximize their effectiveness.
**Overview and Background**

**Telling Your Story: How to Use this Guide**

While there is no prescribed formula for using this guide, the following steps may assist you:

1. Choose one of the 16 topics to discuss, or navigate to the appropriate topic if you are responding to a media request.

2. Select a lead message to introduce the topic. There is often more than one lead message to choose from; be sure to choose one that will resonate with your particular audience.

3. Select a supporting message (or messages) to further explain what you mean. Most supporting messages can be used interchangeably, so choose one that best meets your needs, and that you can illustrate with a story.

4. Consider using an example from your work (or one of the examples provided) to help illustrate your point. Stories and examples are the key to helping people understand your message because they demonstrate its real-life impact.

5. Before using these messages, practice talking through the messages you have selected to make sure the connection between the lead and supporting message is clear and easy for a non-public health audience to understand.

6. Be prepared to answer follow-up questions about the statements you have made or the examples you have introduced.
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The Role of Local Health Departments

Goal

To educate the public and policymakers about the critical roles that local health departments perform to keep communities healthy and protected from public health emergencies.

Lead Message

1. Local health departments make it easier for people to be healthy and safe.

OR

2. Local health departments are on the front lines of public health. You may not always see the work they do, but you are safer and healthier because of it.

Supporting Messages for Lead Message 1

- Local health departments work [with partners] to ensure the safety of the water we drink, the food we eat, and the air we breathe.

- From implementing smoke-free air laws that promote clean indoor air to inspecting community farmers’ markets that make fresh, nutritious produce more accessible, local health departments lay the groundwork for the kinds of healthy choices that keep people from getting sick or injured in the first place.

Supporting Messages for Lead Message 2

- Local health departments help create and maintain conditions in communities that support healthier choices in areas such as diet, exercise, and tobacco. They lead efforts that prevent and reduce the effects of chronic diseases, including diabetes and cancer. They detect and stop outbreaks of diseases including measles and tuberculosis and of food-borne illnesses. They protect children and adults from infectious diseases through immunization.

- Getting regular checkups and having health insurance are important, but we know that much of what influences our health happens outside of the doctor’s office.
• Local health departments help ensure clean drinking water, access to safe and healthy foods, children’s safety through use of car seats, and smoke-free restaurants and public places.

• Local health departments develop emergency plans and respond to disasters when they occur.

• You live better because of the work of local health departments, which do the following:
  
  ‒ Conduct programs that are shown to make communities healthier (e.g., tobacco cessation programs, pregnancy-related home visitation programs, etc.).
  ‒ Track, investigate and stop diseases and other public health threats (e.g., food-borne illness, HIV/AIDS, etc.).
  ‒ Inform the public about health problems in the community and how to stay safe.
  ‒ Prepare for and respond to emergencies and disasters that endanger the public’s health and safety (e.g., bioterrorism, hurricanes, floods, wildfires, etc.).
  ‒ Mobilize community partners to work together to address local public health challenges (e.g., a lack of safe places for kids to play after school, limited access to fresh fruits and vegetables, etc.).
  ‒ Link people who need healthcare with services (e.g., diabetes management, blood pressure medication, public insurance eligibility, etc.).
  ‒ Enforce laws and regulations that keep people safe (e.g., smoke-free ordinances, restaurant inspections, water and sewer treatment, etc.).

Stories/Examples of LHD policies or programs aimed at making communities healthier

• According to the CDC, nearly 50,000 Americans die each year from lung cancer and heart disease attributable to secondhand smoke exposure. On May 23, 2011, Philadelphia Mayor Michael Nutter signed an executive order to make the more than 200 city-owned recreation centers, playgrounds, and pools 100 percent smoke-free, including outdoor spaces. The Philadelphia Department of Health is leading the effort, posting approximately 1,000 signs in recreation spaces notifying visitors and staff about the new smoke-free policy. Thousands of wallet-sized cards with information about the policy and resources for help with quitting will also be distributed. The Departments of Public Health and Parks and Recreation will also make additional smoking cessation classes available at recreation centers throughout the city. This is in addition to free classes held throughout the year in other community settings. This order has the potential to have an impact on more than 1.5 million residents.
The Role of Local Health Departments

Stories/Examples about tracking, investigating and stopping diseases

- In 2006, concerned about outbreaks of illness in elementary schools causing absenteeism among both students and teachers, the **Brevard County Health Department in Florida** developed a series of videos about a hand-washing superhero, “Super Hand.” Super Hand showed children in situations where there was a risk of passing on germs because someone hadn’t washed his or her hands, and demonstrated proper hand-washing technique. When the Super Hand videos were played on a regular basis, children and faculty responded with increased modeling of hand-washing technique, awareness, and vigilance. Over a two-year period, there were zero outbreaks of gastrointestinal illness in Brevard elementary schools.

Stories/Examples about informing the public how to stay safe

- In response to study data (1996–2005) confirmed that one-third of all gravel road crashes involved teens (15–19 years old), and that Lancaster County teen car crashes occurring on gravel roads were six times more fatal than those occurring on hard-surfaced roads, the Injury Prevention Program at the **Lincoln-Lancaster County Health Department in Nebraska** partnered with a local advertising firm to conduct an awareness campaign about the dangers of speeding on gravel roads. Student input received during the focus groups helped shape a campaign called “Change Your View of Gravel Roads” aimed at students. School administrators and student leaders understood the significance of this public health concern and were supportive of the initiative. Rural high schools submitting proposals to implement the campaign in their school communities received $500 mini-grants to implement the student-driven campaign, which included educational tools and materials.

Stories/Examples about preparing for and responding to emergencies/disasters

- During the anthrax attacks of 2001, the **New York City Department of Health and Mental Hygiene** was responsible for the epidemiologic workup of cases stemming from the Rockefeller Center exposure. The Department oversaw environmental sampling and clean-up, and provided antibiotics to people who had been potentially exposed. Once letters were confirmed to have had anthrax in them, health department staff had to map out the flow of the letters starting in the mailroom and extending throughout the building, even to the flow of garbage at Rockefeller Center.
The Role of Local Health Departments

Stories/Examples about mobilizing community partners to address health issues in a community

- In response to nationwide data ranking the health of Clare County poorly, the Central Michigan District Health Department in Michigan hosted a public health summit to begin generating ideas to improve the health of Clare County and the other five counties served by the department. The popular summit led quickly to the creation of the “Together We Can” Health Improvement Council to implement health improvement strategies. Council members include representatives from local, state and tribal government, local business, hospitals, schools, nonprofits, and other community partners. In its first year, the initiative won the 2010 Michigan Department of Community Health’s Director’s Award for successful collaboration. Among other successes and new initiatives, the Council and the City of Clare held an individual weight-loss competition, the “Shamrock Shrink-down,” which provided a public weigh-in, free health screenings, and access to reduced gym memberships.

- Since 2002, the Stanislaus County Health Services Agency in California has explored the area’s most pressing health issues through a strategic community health assessment process designed to engage public health partners and county residents. An early assessment revealed significant concern about infant mortality. In response, the Family Resource Center (FRC) was created. First piloted in 2005, this community resource has grown from three to ten sites throughout the county. One FRC program, “Healthy Birth Outcomes,” includes prenatal care referral, medical/preventive health services, social services, and infant care/parenting education. Among women enrolled in the program, including those who experience “high-risk” pregnancies, the percentage of premature births is now lower than the county as a whole.

- Each year thousands of people die from influenza and even more require hospitalization. While the CDC recommends that all healthcare workers get an annual flu vaccine, fewer than half report getting one. Studies have shown that higher vaccination rates among healthcare workers can reduce influenza-like illness, and even deaths, in settings like nursing homes. To promote flu vaccinations for healthcare workers, the St. Louis County Department of Health in Missouri partnered with the St. Louis University School of Public Health. After surveying thousands of local healthcare workers about their knowledge, attitudes, and beliefs about the influenza vaccine, the partners used the survey results to address two primary concerns: vaccine safety and efficacy in an educational campaign that includes the new website, “No Flu For You” at: http://www.nofluforyou.com/
Stories/Examples about linking people who need care with services

- Because of occupational exposure, firefighters have a great risk of contracting bladder cancer. The Randolph Health Department in Massachusetts recognized that because bladder cancer is not usually discovered until it is advanced and causing symptoms, it was important to connect their local firefighters to screening and treatment, if necessary. Since 2005, the Randolph Health Department, in partnership with the Randolph Board of Health and other community partners, routinely identifies active and retired firefighters who might be at risk for bladder or urinary tract cancers, screens them, and refers any who test positive for blood in the urine to their physicians for follow up.

Stories/Examples about enforcing laws and regulations that keep people safe

- According to the CDC, nearly 50,000 Americans die each year from lung cancer and heart disease attributable to secondhand smoke exposure. In July 2008, the Kanawha County comprehensive clean indoor air regulation was expanded to include all bars and gambling establishments. The Kanawha-Charleston Health Department in West Virginia, which is responsible for inspections and enforcement of the smoke-free ordinance, worked as part of the Kanawha Coalition for Community Health Improvement’s Tobacco Workgroup to develop a social marketing campaign called “Eat, Drink, and Breathe Easy” to encourage non-smokers to patronize the newly smoke-free establishments. When a well-known (and smoke-free compliant) bar owner placed a campaign sticker on his window and talked to the local paper about how important the campaign was to convince the public about the importance of smoke-free regulations, the tide in Kanawha County began to turn from controversy to acceptance to support of the new ordinance.
What is NACCHO?

Goal
To position NACCHO as the leading national authority on local health departments.

Lead Message
1. The National Association of County and City Health Officials is the voice of nearly 3,000 local health departments across the country. These city, county, metropolitan, district, and tribal departments work every day to protect and promote health and well-being for all people in their communities.

OR

2. As the national voice for local health departments, the National Association of County and City Health Officials is a leader, partner, and catalyst to ensure that people are able to make choices that keep them healthier, safe, and living longer.

OR

3. The National Association of County and City Health Officials is the best and most reliable source of information about the nation’s nearly 3,000 local health departments and more than 160,000 health department staff who run programs and services that make it easier for people to be healthy and safe.

Supporting Messages for Lead Messages 1–3

- NACCHO provides resources to help local health department leaders develop public health policies and programs to ensure that communities have access to the vital programs and services people need to keep them protected from disease and disaster.

- NACCHO equips local health departments with easy-to-use tools in many subject areas, including accreditation, epidemiology, healthy community design, influenza, emergency preparedness, and quality improvement.
NACCHO identifies and shares resources and best practices through the model practice program.

NACCHO provides grant assistance to local health departments for emergency preparedness, food safety, HIV/AIDS prevention, and other programmatic work taking place at the local level.

NACCHO convenes regional and national training courses, meetings, and conferences that help local health department staff connect to and learn from one another.

NACCHO offers local health departments a national platform for raising awareness of the role and perceived value of governmental public health. Local health departments are encouraged to use the public health logo in their own communities to link the work of their own health department to other health departments across the country.

NACCHO advocates on behalf of local health departments with federal policymakers for adequate resources, appropriate public health legislation, and sensible policies to address the myriad of challenges facing communities.

Examples for Lead Messages 1–3

- **Health Department Leadership and Participation**: NACCHO’s 27-member Board of Directors guides the work of the organization. Local health department staff participates in 40 workgroups and committees that develop policy for the organization and membership on a wide array of public health practice issues and provide guidance to NACCHO staff in carrying out their work.

- **Demonstration Sites**: In an effort to identify, support, and chronicle innovative local public health practices, NACCHO funds and supports demonstration site initiatives. Currently, NACCHO is actively supporting demonstration site activities in areas such as accreditation preparation and quality improvement, food safety, HAI healthcare-associated infections, breastfeeding, and HPV.

- **Toolkit**: This free, online collection of tools (produced by members of the public health community) contains materials and resources including presentations, fact sheets, drills, evaluations, protocols, templates, reports, and training materials that public health professionals and stakeholders can use to inform and improve their work in the promotion and advancement of public health objectives.
• **Model Practice Database:** Since 2003, NACCHO’s Model Practice program has honored initiatives—including programs, resources, and tools—that demonstrate how local health departments and their community partners can effectively collaborate to address local public health concerns.

**National Meetings and Conferences:**

- The NACCHO Annual Meeting is the largest gathering of local public health officials in the nation, attracting 1,000 attendees each year.

- The Preparedness Summit is the premier national conference in the field of public health preparedness. Nearly 1,800 attendees from all levels of local, state, and federal government, emergency management, volunteer organizations, and healthcare coalitions convene to share new research and learn how to implement model practices that enhance capabilities to prepare for, respond to, and recover from disasters and emergencies.

- The Public Health Informatics Conference, coordinated in partnership with the Centers for Disease Control and Prevention, provides direction and guidance to public health organizations navigating an era of interoperable and integrated health information exchange. The conference attracts an international audience of nearly 1,000 attendees and leaders in the field.

• **Congressional Action Network:** NACCHO’s Congressional Action Network (CAN) was started in 2009 to foster the grassroots voice in Washington, D.C. of local health departments and their communities. The CAN currently has more than 900 members who communicate regularly with their Members of Congress, who participate in NACCHO webinars on advocacy topics, and who receive e-mail updates on current issues in Washington.
Affordable Care Act

Goal

To educate the public and policymakers about the role of local health departments in implementing the Affordable Care Act (ACA) and its effect on local health department operations, programs, and services.

Lead Message

1. *(Varied role)* Local health departments face challenges and opportunities as the public health and clinical care environments transform due to the Affordable Care Act.

OR

2. *(Primary care)* Local health departments will continue to be either a safety-net provider or a primary provider of healthcare services for many individuals who remain uninsured.

OR

3. *(PPHF)* The Prevention and Public Health Fund created by the Affordable Care Act supports the work of local health departments in sustaining population-based prevention efforts that complement the individual clinical services provided by the medical care system.

OR

4. *(Partnerships)* In an increasingly competitive health care marketplace, local health departments are conveners who build, renew, and strengthen critical local relationships.

OR

5. *(Billing)* Many local health departments are billing public and private insurers for clinical and preventive services in response to expanded insurance coverage through the Affordable Care Act.

OR

6. *(Health IT)* As use of health information technology becomes more widespread, local health departments have the opportunity to improve population health by identifying health-related trends and taking action.
Supporting Message for Lead Message 1

- Local health departments across the country play an important yet varied role in ACA implementation. A local health department’s role is affected by the extent to which access to health insurance is expanded in their state.
  
  - Some local health departments have received grants to support navigation activities, outreach, and enrollment for the state or federal marketplaces.
  
  - Some local health departments in states with a state-based exchange conduct outreach and enrollment activities, create or enhance their own capacity to bill for services, and/or establish linkages with accountable care organizations.

- As more people pursue health insurance coverage, some local health departments are helping individuals enroll in Medicaid, the Children’s Health Insurance Program (CHIP), and the health insurance marketplace.

Supporting Message for Lead Message 2

- Local health departments receive funding to provide safety net services to the un- and under-insured. These programs are still needed as they provide clinical and support services to those who will not benefit from health insurance expansion. Approximately 30 million Americans will not have health insurance even when the ACA is fully implemented. Because Congress repealed the individual mandate in 2017, it is estimated an additional 13 million could become uninsured.

- Local health departments provide vaccinations to people who are still not eligible for insurance and will continue to do so post-ACA. Vaccines paid for by the Section 317 Immunization Program still have a critical role in protecting an individual’s health and the health of a whole community, as well as preventing resurgences of life-threatening diseases, including hepatitis and measles.

- Residents of communities in which health departments have reduced their clinical services as more people are insured via ACA implementation and Medicaid expansion would not access to those services if ACA is repealed. This could leave the newly uninsured without a safety-net provider.

Supporting Message for Lead Message 4

- The Prevention and Public Health Fund is a much-needed investment in the health and economic well-being of all Americans. It must continue to be supported, and not be eliminated, reduced, or reclassified to support non-public health initiatives.
• Local health departments benefit from the Prevention and Public Health Fund because it is a stable, reliable funding stream and is a dedicated investment in programs that prevent chronic and infectious disease at the community level.

• The Prevention and Public Health Fund provides 12% of the CDC’s budget and supports the state and local health department workforce in turn protecting the public.

• Tens of millions of Americans suffer from preventable diseases, including heart disease, diabetes, and cancer. Cutting funding to the Prevention and Public Health Fund jeopardizes the ability of local health departments to protect the public’s health and prevent disease.

Supporting Message for Lead Message 4

• Local health departments, as defined by the ten essential public health services, link people to health services and assure healthcare to those without access.

• Local health departments are seeking partnerships with new and non-traditional partners to meet the health needs of the community.

• Local health departments are collaborators, not competitors. In partnership with nonprofit hospitals, federally qualified health centers, accountable care organizations, and health reform coalitions, local health departments define and pursue their unique role in decisions about healthcare financing, provision of care, and prioritizing resources to address the most pressing community health needs.

• Primary care providers are critical within any community, but much of what influences our health happens outside of the doctor’s office. Partnerships with local health departments can provide a win-win outcome, because providers can focus on individual care and treatment and local health departments can support interventions to improve community and population health.

• Provisions in the ACA provide opportunities for local health departments to collaborate with a wide range of partners to improve community health. Examples include the following:

  • ACA Section 9007 and IRS Section 501(r), which require nonprofit hospitals to develop a community health needs assessment and implementation plan to maintain tax-exempt status. Local health departments have demonstrated expertise in this area.
  • The National Prevention Strategy, which requires working across governmental sectors to achieve goals in the areas of health, housing, transportation, and education.
  • Federal support for the development of accountable care organizations (ACOs), which must meet population health targets.
  • $11 billion in mandatory funding to federally qualified health centers.
  • Federal funding for new models for healthcare service payment.
Supporting Message for Lead Message 5

- People who have used the local health department as their primary care provider before the ACA will continue to seek their LHD’s services in the new environment. Local health departments should be reimbursed for services they provide in the same ways that other healthcare providers are reimbursed for comparable services.

- Historically, local health departments offering clinical services have been able to accept Medicare and Medicaid payments. As the federal government restructures funding opportunities to support ACA implementation, many local health departments are also establishing relationships with private health insurance companies to provide preventive and clinical services to newly insured individuals.

- Medicaid expansion has increased the number of people that have access to health care, making communities healthier.

Supporting Message for Lead Message 6

- Refer to Health Information Technology (lead and supporting message 1), page 26 of this guide.
Chronic Disease and Prevention

Goal

To educate the public and policymakers about the role that local health departments play in preventing disease and keeping people healthier through policy and environmental change at the local level.

Lead Message

- Local health departments play a key role in the development of policies and environments that make it easier for people to be healthy and safe.

Supporting Messages

- Local health departments work with a wide range of community partners to create conditions and policies that help people make healthy choices, such as avoiding tobacco use and eating healthier foods. Proactive measures like these ensure there are safe spaces to exercise and play, and contribute to the prevention of chronic diseases including obesity, diabetes, and heart disease.

- Local health departments are key partners in efforts to implement policies that protect or improve the health of people living in their community, such as bans on trans-fats in food served by restaurants.

- Local health departments sponsor and host screenings to identify people with chronic diseases, such as diabetes and heart disease, and connect them with services and tools to help them manage their diseases.

- Many local health departments are operating at a diminished capacity due to budget pressures on state and local governments. In the area of chronic disease prevention, this means there are fewer health educators to promote healthy lifestyle changes to combat obesity, cardiovascular disease, diabetes, and tobacco use.
Climate Change

Goal

To educate the public, policymakers and other stakeholders about the role local health departments play in addressing the health effects of climate change. These stakeholders include law enforcement/emergency responders, the private sector, and others not included as “public or policymakers.”

Lead Messages

1. *(Preparedness, response)* Local health departments investigate the health risks of a changing climate, respond to the health effects of climate change on their communities, and mobilize community partnerships and actions to identify and solve health problems and educate about the health risks of climate change.

OR

2. *(Partnerships)* As climate change impacts health, local health departments build, renew, and strengthen critical local relationships to keep people healthy and safe.

Supporting Messages for Lead Message 1

- Heat waves, wildfires, intense storms, flooding, and drought threaten human health in many ways. Extreme weather can be a result of climate change. It increases the transmission of diseases spread by insects and compromises air, water, and food quality. The World Health Organization estimates that between 2030 and 2050, climate change will cause approximately 250,000 additional deaths per year.

  - Geographic differences will result in varying climate-related health conditions, and local health departments work to identify those effects specific to their community. For example, coastal communities are particularly sensitive to sea-level rise and hurricanes, which may lead to increased flooding; arid communities are particularly sensitive to coping with the health impacts of drought; communities near rivers and streams are vulnerable to flooding; and forested/rural communities are particularly sensitive to the health impacts from wildfires.
Local health departments educate policymakers and the public about the health risks associated with extreme weather events for all populations, but particularly the community’s most vulnerable members, such as infants, children, seniors, and individuals living with chronic diseases including asthma and heart disease.

Recent studies such as the 2014 U.S. National Climate Assessment describe the impacts of climate change on chronic diseases. For example, air pollution exposure can worsen chronic diseases, including asthma and heart disease, and can shorten life. Extreme heat can lead to increased hospital admissions for cardiovascular, kidney, and respiratory disorders.

- Local health departments alert communities about days with poor air quality.
- Local health departments develop extreme heat preparedness plans.
- Local health departments educate those residents with chronic diseases about air pollution, as well as healthy adults who exercise or work outdoors, homebound elderly residents who are vulnerable to heat waves and mosquito-borne viruses, and people with limited economic resources without access to medical care.

- Local health departments investigate, respond to, and educate the community and key partners about the effects that a changing climate may have on water-, food-, and insect-borne diseases.
  - Local health departments prepare for and investigate outbreaks of emerging diseases spread by insects like the Zika and Chikungunya viruses, Dengue fever, West Nile virus, and Lyme disease.

- Local health departments are an essential part of the process to ensure the safety of the food we eat and the water we drink.
  - Local health departments conduct investigations to prevent, identify, and respond to outbreaks of water- and food-borne illnesses.
  - Local health departments inspect food establishments, investigate complaints, and educate business owners and community leaders in the food and beverage industry about food safety and food handling practices.

**Supporting Messages for Lead Message 2**

- Local health departments work closely with other government agencies, local businesses, and community partners to address the impact that a changing climate has on health and to develop and implement solutions that keep people healthy and safe.

- Local health departments train healthcare providers on health aspects of climate change and provide strategic guidance to healthcare facilities as they plan for surges in healthcare service provision following extreme weather events.
• Local health departments partner with other government agencies and community groups to ensure that an adequate number of shelters are available and accessible during a public health emergency.

• Local health departments work with government agencies and community groups to ensure clean and safe water by continuing to protect sources of drinking water from contamination and through strengthening compliance with drinking water standards.

• Local health departments work with community partners to advance local and sustainable food systems through farm-to-school programs and community gardening efforts.

• Local health departments identify and provide support to people with chronic diseases, such as diabetes and heart disease, and work with community groups to ensure that those at greatest risk receive vital services to help them manage their diseases during extreme weather events.

  – Local health departments work with government and industry partners to enhance building codes and land use plans to create neighborhoods where it is easier for people to engage in healthy behaviors, such as playing outside and walking.

  – Local health departments collaborate with transportation planners to improve infrastructure that supports active transportation like walking to school, work, or the mall, and exercise, such as biking and running. These routine daily activities get people out of their cars and reduce carbon emissions.
Food Safety

Goal

- To educate the public and policymakers about the role local health departments play in helping to ensure food is safe to purchase and eat.

Lead Message

- Local health departments help to keep your food safer.

Supporting Messages

- Local health departments are an essential part of the process to ensure that food is safe to eat at home, and public venues.

- Local health departments work with state, local, tribal, and national partners as well as the industry to prevent, identify, and respond to outbreaks of food-borne illness.

- Many local health departments inspect restaurants, grocery stores, daycare facilities, hospitals, schools, and some food manufacturing plants to ensure safe food handling practices and sanitary conditions.

- Local health departments inspect food establishments and investigate citizen complaints, and will take action to ensure that a food establishment complies with sanitation standards.

- Many local health departments are operating at a diminished capacity due to budget pressures on state and local governments. In the area of food safety, that means there are fewer inspectors and trained food service professionals—from restaurants and school cafeteria workers to street fair vendors—able to identify risks and prevent food-borne illness.
Health in All Policies

Goal

To educate the public and policymakers about how local health departments affect decision-making at the federal, state, and local government levels to impact and improve the health of all people.

Lead Messages

1. Local health departments, legally charged with protecting the public’s health, are trusted, credible sources of information about community health for other government agencies.

OR

2. Local health departments influence how local policies, laws, and regulations can be used to produce an environment that supports the health of people in their city or county.

OR

3. Local health departments work with a wide range of partners to protect our communities and make them healthy and safe places to live, learn, work, and play.

Supporting Messages for Lead Messages 1 & 2

- Local health departments factor health into all local policies, plans, and programs, such as helping to create smoke-free workplaces, ensure access to fresh foods, and provide input on the health impacts of economic development projects, such as community design, transit systems, roads, and schools.

- Because much of what influences health happens outside of the doctor’s office, local health departments also address socio-economic factors in the community that have the greatest potential to improve or harm health.

- Local health departments use evidence-based tools, such as health impact assessments and evidence-based practices to determine whether a policy or plan will promote, enhance, or discourage healthy choices.
Supporting Messages for Lead Messages 1 & 3

- Local health departments work with state and municipal planning and transportation agencies to adopt policies that support bike lanes, access to healthy foods, walkable neighborhoods, increased access to public transit, and increased access to parks and other recreational facilities.

- Local health departments use health impact assessments, good planning practices, and other strategies and tools to ensure that the health and safety of all residents are factored into all county and city decision-making. Health officials partner with local business leaders, boards of education, and planners to bring forth health concerns where they otherwise might not have been considered.
Health Information Technology

Goal

To educate the public and policymakers about how local health departments use health information technology (health IT) and collaborate with healthcare providers to improve health.

Lead Messages

1. A solid health information technology infrastructure will allow local health departments to improve the health and well-being of their communities.

OR

2. Local health departments use health information technology to build and sustain collaborations with local, state, and federal government partners, as well as other strategic partners.

Supporting Messages for Lead Message 1

1. Local health department professionals increasingly rely on information technology and data systems to assess community health.

2. Health information technology enhances local health departments’ ability to provide and evaluate the effectiveness of preventative services, provide direct care (if able), and identify resources for improving health initiatives within their community.

3. An effective and efficient Health IT system enables a local health department to:
   - Assess the overall health of communities and monitor for disease.
   - Identify and communicate population health needs, especially during times of emergency.
   - Work with healthcare providers to improve population health.
1. Data can provide a common language that can be used across sectors to assess, frame, and address critical public health issues.

- Text messaging and mobile health applications can help local health departments enhance the delivery of services and improve public health outcomes. These innovative technologies are also powerful communications tools for advocacy, public education, preparedness, and overall communication within a community, especially during an emergency.

- Local health departments using health IT save time and money and reduce paperwork. Health IT can also help improve customer service and billing accuracy by eliminating redundancies like duplicate immunizations, disease screenings, or additional payers.

- Electronic and automated reporting of diseases have helped local health departments realize efficiencies and prevented some loss of services. These cost saving measures have made a difference to the many local health departments currently operating at diminished capacity due to budget pressures on federal, state, and local governments.
Healthcare-Associated Infections

Healthcare-associated infections (HAI) are infections that patients acquire while receiving healthcare treatment for other conditions.

Goal

To educate the public and policymakers about the role that local health departments play in preventing, investigating, and responding to healthcare-associated infections and promoting antimicrobial stewardship.

Lead Messages

1. LHDs can play a vital and diverse role in healthcare-associated infection (HAI) prevention and response, identifying and investigating HAIs and providing recommendations for control measures.

AND

2. Local health departments play a critical role as conveners, connecting and coordinating with stakeholders in public health and healthcare to prevent the spread of healthcare-associated infections and antimicrobial resistance.

Supporting Messages for Lead Messages 1 & 2

- Local health departments collect and analyze surveillance data to identify outbreaks of healthcare-associated infections, establish trends, target prevention efforts, and support policy development.

- Local health departments investigate infections and outbreaks that occur in healthcare and community settings.

- HAI prevention efforts undertaken by local health departments include:
  - Identifying, notifying, and referring exposed people to screening or treatment services, and tracking compliance and health outcomes.
  - Identifying risk factors for infection during outbreaks, making recommendations to reduce risk, and monitoring compliance.
  - Supporting facilities in identifying gaps and implementing improvements in infection prevention and control practices.
- Convening healthcare providers and other local partners to determine ways to prevent these infections from occurring, identifying best practices, and promoting adoption of these practices.
- Providing HAI infection prevention and control education for healthcare providers.
- Promoting antimicrobial stewardship and other interventions to reduce the emergence and spread of antimicrobial-resistant pathogens that may pose particular challenges to combatting HAIs.
- Educating community partners and the public about HAI prevention and judicious use of antimicrobials.
- Addressing concerns and questions from the community and media.
- Supporting local, state, and national reporting requirements and policies that can prevent the spread of infections in healthcare settings.
- Actively participating in state and national committees and collaboratives to address HAI issues.

• There are several key elements that increase the effectiveness of local health departments in addressing healthcare-associated infections:
  - Local health departments have unique advantages in being able to proactively prevent and effectively respond to healthcare-associated infections because of their ongoing relationships with local healthcare facilities and other external partners.
  - HAI and AR activities often align with the work of local health departments, as they mirror everyday duties and responsibilities.
  - In order to effectively analyze, prevent, detect, and respond to outbreaks, it is important for local health departments to have access to data including data from CDC’s National Healthcare Safety Network (NHSN) data, the nation’s largest reporting system for healthcare-associated infections.
Healthy and Safe Women, Children, Youth, and Families

Goal

To educate the public and policymakers about the role of the local health department in ensuring that all individuals have the opportunity to be safe and healthy across their lifespan.

Lead Messages

1. Local health departments protect and promote the health, safety, and security of women, children, youth, and families.

OR

2. Local health departments strive to create healthy and safe opportunities, conditions and outcomes for all women, children, youth, and families regardless of race, gender, and income.

Supporting Messages for Lead Messages

• Local health departments provide public health and healthcare services to build foundations that promote health, safety, and security throughout one’s life from the earliest stages and across generations.

• Local health departments act as safety net providers and connect family members to support programs that provide parenting support; home visiting services; newborn screening; lead screening and assessment; supplemental nutrition for women, infants, and children; injury and violence prevention; and intimate partner violence screening as well as services such as HIV/STI testing and screening, immunizations, and oral health screening.

• Local health departments work with neighborhood leaders, law enforcement, schools, hospitals, businesses, libraries, faith-based organizations, and other community partners to address complex issues through solutions that are geared towards reducing health inequities, such as paid maternal and family leave, livable minimum wage, toxic waste siting, and safe and affordable housing.
Supporting Messages for Lead Messages

- Local health departments actively engage community partners in strategic planning and decision-making processes to inform programs, policies, and systems to ensure that all community members realize their full potential.

- Local health departments generate awareness about how social injustice creates and perpetuates inequities in health outcomes among women, children, youth, and families.

- Since 2008, local health departments have experienced persistent budget cuts that have reduced staff and eliminated programs. In the six economic surveillance studies NACCHO has conducted since 2009, programs and services for women, children, youth, and families have been among the top three most frequently reduced programs.
Immunization

Goal

To educate the public, policymakers, and healthcare providers about how local health departments are leaders in disease prevention through vaccine administration, promotion, and outreach. In addition to vaccines, local health departments also conduct vaccine-preventable surveillance and case/outbreak investigations.

Lead Messages

1. Local health departments vaccinate people in their communities, providing one of the most successful and effective services to prevent disease and death.

OR

2. Local health departments ensure that the most at-risk people in their communities receive life-saving vaccines.

Supporting Messages for Lead Message 1

- Local health departments monitor, prevent, and control disease to reduce the health risks and financial burden of infectious disease cases and outbreaks.

- Most local health departments provide direct immunization services (adult: 90% and childhood: 88%, according to NACCHO Profile data), and promote the importance of immunizations through education and policy.

- Local health departments use immunization information systems (registries) to record and track vaccine administration, provide immunization outreach and education within their communities, and make recommendations to local healthcare providers to ensure the community is protected from disease and inform immunization program decisions and planning.

- Many local health departments are operating at a diminished capacity due to budget pressures on federal, state, and local governments. In the area of immunization, that means that there are fewer epidemiologists to track the spread of diseases and identify pockets of underserved areas within the community with lower vaccination coverage rates. There are also fewer nurses to staff immunization clinics, provide vaccines, and conduct outreach within communities.
• Local health departments are instrumental in delivering vaccines and monitoring community providers that administer vaccines through the national Vaccines for Children program.

Supporting Messages for Lead Message 2

• Local health departments use community, provider, and school-based immunization coverage rates to assess and ensure protection against vaccine-preventable diseases.

• Local health departments assess their communities to identify pockets of lower vaccine coverage rates due to factors such as race and ethnicity, income, and location to ensure that underserved populations are protected against vaccine-preventable diseases.

• Local health departments educate providers and the community about the importance of vaccination for high-risk populations such as older individuals, pregnant women, and those with chronic conditions.

• Many local health departments are operating at a diminished capacity due to budget pressures on federal, state, and local governments. In the area of immunization, that means there are fewer people monitoring vaccine coverage and providing vaccines, which puts communities at risk of vaccine-preventable disease outbreaks.
Impact of Budget Cuts

Goal

To educate the public and policymakers on the impact of budget cuts on the local health department workforce and capacity, both in terms of what local health departments can no longer do and the creation of opportunities for innovation in the face of fewer resources.

Lead Message

1. Since 2008, nearly 56,000 local health department jobs have been eliminated due to budget cuts.

OR

2. In some communities, ongoing budget cuts and resulting local health department staff layoffs have jeopardized the safety of the food we eat, the water we drink, and the ability to be prepared for and respond to disasters and public health emergencies.

OR

3. In the face of ongoing cuts, local health departments are seeking to maximize the capabilities of staff and the reach of programs.

OR

4. Federal deficit reduction and ongoing state and local budget cuts mean that public health programs at the Centers for Disease Control and Prevention and local health departments are not able to keep pace with inflation and increasing demands. Austere federal budgets continue to challenge the capacity of local health departments to serve and respond to community health needs.

Supporting Message for Lead Message 1

- Local health departments continue to face shrinking budgets and diminished capacity due to budget pressures on federal, state, and local governments. These cuts are undermining their work and impeding innovation.

- Because local health department budgets and capacity are stretched thin, when an unexpected health threat like Zika or large disease outbreak hits, they are forced to stop or severely limit existing activities to move staff and resources to respond.
Impact of Budget Cuts

Supporting Message for Lead Message 2

- The cumulative effect of a decade of cuts, threatens the ability of local health departments to prepare for and respond to emergencies and to provide basic services that people count on. Lost local health department jobs due to budget cuts, layoffs, and attrition mean reductions in services offered—ranging from reducing maternal and child health clinic hours to ending substance abuse treatment programs.

- While workforce reductions and program cuts may have slowed on the whole, local health department budgets have not kept pace with the general economic recovery.

Supporting Message for Lead Message 3

- Some local health departments are using budget cuts as an opportunity to innovate by reassessing the services they provide, undertaking quality improvement activities, and taking steps to meet newly established national standards for health departments.

Supporting Message for Lead Message 4

- When Congress cuts CDC’s funding, they result in cuts to state and local health departments. Many state and local health departments rely on federal funding to support the majority of their public health programs.

- Many of CDC’s programs are funded below their FY2010 levels. Chronic disease, infectious disease prevention, and environmental health programs have been cut, reducing support for local health department programs in these areas.
Opioid Epidemic

Goal
To educate the public and policymakers about the role of local health departments in preventing opioid misuse and overdose to reduce death in cities and counties.

Lead Messages
1. Local health departments develop and implement policies to prevent opioid misuse and overdose.

OR

2. Local health departments implement and support key interventions to prevent opioid misuse and overdose, as well as related health consequences, including the spread of infectious diseases, neonatal opioid withdrawal syndrome, and falls and fractures in older adults.

OR

3. Local health departments are key to responding to the opioid crisis in communities. LHDs advocate for increased community access to substance use treatment and prevention related to opioid use, and for medications that reverse the effects of an overdose and save lives.

Supporting Messages for Lead Message 1

- Local health departments work with law enforcement, healthcare providers, and other stakeholders to develop and provide recommendations for legislation that prevents inappropriate prescribing practices and diversion.

- Local health departments actively promote the CDC Guideline for Prescribing Opioids for Chronic Pain.

- Local health departments educate policymakers and other community decision-makers on policies, laws, and regulations that protect individuals and communities from the devastating impacts of opioid misuse.

- Local health departments promote the widespread use of prescription drug monitoring programs to reduce prescription drug misuse and inappropriate prescribing practices.
Supporting Messages for Lead Message 2

- Local health departments work with a wide range of community stakeholders—from police, fire and emergency medical responders, to healthcare providers, business leaders, and families—to coordinate solutions that mitigate opioid misuse and reverse the effects of opioid overdose and prevent death.

- Local health departments work with police departments on drug take-back days and drug drop-off kiosks to ensure that people can safely dispose of unused prescription drugs.

- Local health departments work with hospitals, healthcare providers, and pharmacies to increase screenings for substance use disorders, and to increase availability of and access to substance use disorder treatment, including medication-assisted treatment.

- Local health departments work to reduce harms from injection drug use and opioid use disorder through syringe services programs, which provide comprehensive harm reduction services to reduce new HIV and viral hepatitis infections associated with injection drug use. In addition to providing sterile needles, syringes, and other injection equipment, syringe services programs offer safe disposal containers for needles and syringes, HIV and hepatitis testing and linkage to care, education about overdose prevention, vaccinations, condoms, and referral to substance use disorder treatment, as well as other medical, mental health, and social services.

Supporting Messages for Lead Message 3

- Local health departments educate medical providers and pharmacy personnel to reduce inappropriate prescribing practices and support use of prescription drug monitoring programs.

- Many local health departments train emergency medical responders, law enforcement, and community members to use life-saving medication, like naloxone or naltrexone, to reverse an overdose. In some jurisdictions, the local health department provides the medications.

- Local health departments support linkage to treatment to enable people who use opioids to reduce or stop using opioids. Treatment supports individuals to be productive in the family, at work, and in their communities.
Public Health Preparedness

Goal

To educate the public and policymakers about the role of local health departments in preparing for and responding to emergencies and disasters.

Lead Messages

1. Local health departments are on-call 24 hours a day, 7 days a week to protect their communities from all types of public health emergencies.

2. Local health departments are the “boots on the ground” alongside others, responding to and recovering from public health emergencies, such as disease outbreaks, natural and human-caused disasters, and terrorist attacks.

OR

3. Local health departments cultivate many partnerships within their communities to prepare for, respond to, and recover from public health emergencies.

OR

4. More than half of local health departments rely on federal funding alone to prepare for public health emergencies.

Supporting Messages for Lead Message 1

- Local health departments act quickly and efficiently to help protect people in their communities during emergencies because of ongoing public health preparedness activities. They develop emergency plans, purchase equipment and supplies necessary to execute plans, train their workforce and conduct exercises to test plans, and use lessons learned from trainings and exercises to improve those plans.

- Local health departments secure lifesaving medicines and resources including shelter supplies, vaccinations, and first-aid equipment. They know how to quickly deploy these resources during public health emergencies as the result of preparedness planning, training, and exercises.
• It has become increasingly clear that the public health and healthcare systems play a role in any emergency, whether natural or man-made. Essentially, local health departments are part of all types of emergencies.

Supporting Messages for Lead Message 2

• Local health department staff are dedicated public servants who use proven strategies and tactics to protect their communities during public health emergencies.
  - They dispense medications and vaccinations.
  - They conduct investigations to track and prevent the spread of diseases.
  - They collect and analyze data to inform preparedness and response activities.
  - They advise local leaders about public health laws.
  - They educate people in their communities about the importance of personal preparedness and to protect themselves and reduce their risk.
  - They work with groups like the Medical Reserve Corps to activate and coordinate trained volunteers.
  - They support those affected by emergencies by setting up and staffing shelters, reuniting families, and providing supplies, like potable water.
  - They inform community members about actions to take before, during, and after an emergency.
  - They provide environmental health, as well as mental health services (if applicable).

• Many local health departments rely on volunteers, such as the Medical Reserve Corps (MRC), to fill the gap widened by ongoing funding cuts. Two-thirds of the nation’s 1,000 Medical Reserve Corps units, composed of approximately 200,000 local volunteers, are managed by local health departments. These highly skilled volunteers are doctors, dentists, nurses, pharmacists, and other community members. MRC volunteers train alongside local health department staff to fill a critical role in increasing local health departments’ capacity to respond to emergencies.

Supporting Messages for Lead Message 3

• To protect the health and safety of the public during a public health emergency, a coordinated approach among local health departments and federal, state, and other local government agencies is crucial.
• To protect the health and safety of the public during a public health emergency, a coordinated approach among local health departments and federal, state, and other local government agencies is crucial.

• Local health departments partner with hospitals, emergency management, law enforcement, and other community stakeholders, such as volunteer groups, local business owners, faith-based organizations, and schools. These stakeholders work together to successfully coordinate plans, trainings, exercises, and response activities. Local health departments often take the lead in forming and supporting these coalitions.

• Local health departments regularly host trainings and exercises to prepare staff and healthcare coalition partners for public health emergencies. Trainings and exercises hosted by local health departments have helped to build consistent and ongoing communication between partners, clearly define roles during an emergency, and anticipate challenges to address before an emergency occurs.

Supporting Messages for Lead Message 4

• After 9/11 and Hurricane Katrina, the federal government created programs that provided resources for local and state health department readiness to respond to future public health emergencies. These programs were crucial to developing the preparedness capacity of local health departments.

• Since 2007, cuts to preparedness funding have resulted in thousands of local health department jobs lost. Decreased capacity has limited the ability of local health departments to respond to public health emergencies, make preparedness plans with community partners, maintain existing capabilities, and conduct trainings and exercises.
Sugar-Sweetened Beverages

Sugar-sweetened beverages are the greatest source of added sugar and calories in the American diet. These drinks increase the risk for obesity and diabetes. According to the Institute of Medicine, one out of three children in the U.S. is overweight or obese. Medical costs, on average, are three times higher for children treated for obesity than for children without the diagnosis. In the U.S., childhood obesity is estimated to cost $11 billion for private insurance and $3 billion for Medicaid patients. By eliminating or cutting down on drinking sugar-sweetened beverages will not by itself resolve our nation’s obesity epidemic, reducing the amount of sugary drinks consumed is one part of a strategy to help people live long and healthy lives.

Goal

To educate the public and policymakers about the role of local health departments in addressing the nation’s obesity epidemic by reducing the consumption of sugar-sweetened beverages in their community.

Lead Messages

1. Local health departments collaborate with local businesses and other community partners to ensure that everyone, no matter where they live, has access to healthy, affordable foods and beverages.

OR

2. As the primary government agency responsible for keeping people in the community healthy and safe, local health departments lead efforts to ensure that healthy food and beverage options are available in their communities.

Supporting Messages for Lead Message 1

- Local health departments work with schools, hospitals, businesses, and outdoor facilities to increase the number of water fountains and water bottle refill stations.

- From public communications and enforcing regulations, to shelf placement and promotional pricing, local health departments work with local business leaders to create healthier shopping environments.

- Local health departments encourage the beverage industry to voluntarily adopt guidelines to make their products healthier.
Supporting Messages for Lead Message 2

- Local health departments are responding to the surge in chronic health problems like diabetes, heart disease, and cancer resulting from excess consumption of sugar-sweetened beverages by increasing public awareness about the health risks caused by sugary drinks and informing people about healthy alternatives, such as water, low-fat milk, and natural juice beverages.

- Nationally, Hispanic and non-Hispanic African American children have a significantly higher rate of obesity than non-Hispanic white children. Local health departments strive to meet the needs of the community in culturally sensitive ways.

- To address the needs of at risk populations, local health departments work to reduce the marketing of sugar-sweetened beverages that targets minorities and people with low incomes.
Vector-Borne Diseases

Vector-borne diseases are illnesses caused by viruses, bacteria, or parasites transmitted by arthropods such as mosquitoes, ticks, and fleas. If addressing an audience to which ‘vector’ may be too technical of a term, consider using the phrase “mosquito, tick, and other vector-borne diseases.”

Goal

To educate the public and policymakers about the role that local health departments play in preventing and controlling vector-borne diseases.

Lead Messages

1. Vector-borne diseases, such as West Nile virus, Lyme disease, and certain types of encephalitis are a growing threat and are among the most difficult infectious diseases for local health departments to predict, prevent, and control.

2. Environmental changes (including climate change) and the expansion of global travel have increased the chances of vector-borne diseases spreading to new communities around the world.

3. Local health departments are on the front lines of protecting people in their communities from vector-borne diseases every day.

Supporting Messages for Lead Messages 1, 2, & 3

- Local health departments rely on surveillance and monitoring to detect outbreaks of vector-borne diseases to prevent more people from being infected. When a disease outbreak occurs in a community, local health departments conduct investigations and collect and analyze data to track and prevent the spread of vector-borne diseases.

- Environmental control measures, such as spraying insecticides and mosquito control, are an important part of preventing and controlling vector-borne diseases. Local health departments work with entomologists, mosquito control programs, and other partners to make decisions on the potential benefits and risks of control measures.

- Local health departments mobilize community partners such as medical providers to ensure people who are sick with a disease caused by a vector get the appropriate care.

- Local health departments educate the public about how to protect themselves from getting sick from a vector-borne disease.
Public Health 3.0 and the Role of the Community Health Strategist

Public Health 3.0: Transforming Communities

Public Health 3.0 is an initiative of the U.S. Department of Health and Human Services (HHS), a roadmap emphasizing collaborative environmental, policy, and systems-level actions that directly affect the social determinants of health inequity. It represents a challenge to business leaders, community leaders, state lawmakers, and federal policymakers to incorporate health into all areas of governance to address health disparities. Cross-sector partnerships and innovation have already been established across the country, and the report Public Health 3.0: A call to Action to Create a 21st Century Public Health Infrastructure, highlights five communities across the U.S. that are making innovative changes in their communities with approaches that support comprehensive public health. The report emphasizes five recommendations:

Public health leaders should embrace the role of the Community Health Strategist

The Community Health Strategist should work with all relevant partners so that they can drive initiatives including those that explicitly address “upstream” social determinants of health. The Community Health Strategist will lead their community’s health promotion efforts in partnership with healthcare clinicians and leaders in widely diverse sectors, and be deeply engaged in addressing the causes underlying tomorrow’s health imperatives. The CHS will participate in and support community-based coalitions that examine health data, set goals, and develop plans to improve health.

Cultivate Cross-sector Partnerships

Public health departments should engage with community stakeholders—from both the public and private sectors—to form vibrant, structured, cross-sector partnerships designed to develop and guide Public Health 3.0–style initiatives and to foster shared funding, services, governance, and collective action.
Consider Accreditation
Public Health Accreditation Board (PHAB) criteria and processes for department accreditation should be enhanced and supported so as to best foster Public Health 3.0 principles, as we strive to ensure that every person in the United States is served by nationally accredited health departments.

Document Success with Data and Metrics
Timely, reliable, granular (i.e., sub-county), and actionable data should be made accessible to communities throughout the country, and clear metrics to document success in public health practice should be developed in order to guide, focus, and assess the impact of prevention initiatives, including those targeting the social determinants of health and enhancing equity.

Enhance Public Health Funding
Funding for public health should be enhanced and substantially modified, and innovative funding models should be explored so as to expand financial support for Public Health 3.0–style leadership and prevention initiatives. Blending and braiding of funds from multiple sources should be encouraged and allowed, including the recapturing and reinvesting of generated revenue. Funding should be identified to support core infrastructure as well as community-level work to address the social determinants of health.

Models of Success
The report details the five examples of communities across the U.S. that are taking innovative approaches to public health, including California’s Accountable Communities for Health, a multi-payer, multi-sector alliance of healthcare systems, providers, insurers, public health, community and social service organizations, schools, and other partners. With innovative funding, partnerships, the capacity to collect, analyze, and share data, and a portfolio of interventions that address the social determinants of health disparities, including community programs and resources, California’s goal of saving money to reinvest into upstream prevention is achievable.

Priority Spokane supports improvements in economic vitality, education, the environment, health, and community safety. The collaborative’s partners include the Spokane Regional Health District, Spokane Public Schools, the City of Spokane, and the Spokane Housing Authority. Priority Spokane analyzed graduation rates to identify educational attainment as a priority indicator, and in its research and analysis, found three tipping points: low attendance, suspensions, and low course completion. Using these insights, Priority Spokane created essential supports to keep students on track, and advocated for new state laws that promote restorative versus exclusionary discipline; developed a mentorship program with Gonzaga University; and worked with community partners to create a community dashboard to monitor progress. In five years, Spokane’s graduation rate jumped from 60 percent to 80 percent.