PREVENTION POLICY AND ADVOCACY
GLOSSARY

Advocacy — Advocacy is any action that speaks in favor of, recommends, argues for a cause, supports or defends, or pleads on behalf of others.[i] Policy advocacy includes many different activities designed to build support for an issue or advance policy change, including educating the public and policymakers, letters to the editor, "call to action" email alerts, visiting elected officials, testifying for a legislative committee, attending rallies, etc. Lobbying is a specific form of policy advocacy (see Lobbying).

> **Issue advocacy** — An organization communicating positions on issues of social, economic or philosophical concern. Advocacy might include education or attempting to influence the public on health, social or economic subjects. The term is commonly used to mean all policy-related activities that are not intended to intervene in an election for or against a candidate for public office.[ii]
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> **Legislative advocacy** — Efforts to change policy through the legislative branch of government. This may include lobbying or other communications with the legislative branch that do not meet the definition of lobbying.[iii]
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> **Media advocacy** — The process of disseminating policy-related information through the communications media, especially where the aim is to effect action, a change in policy, or to alter the public's view of issues. The strategic use of media as a resource for advancing a social or public policy initiative.[iv]

Environmental change — Physical or material changes to the economic, social, or physical environment (such as water fluoridation, removing lead from paint, and improving the built environment with sidewalks and bike lanes).

Health equity — Equal opportunity for members of all populations to disease prevention, healthy outcomes, or access to health care, regardless of race, gender, nationality, age, ethnicity, religion, sexual orientation, immigration status, language skills, healthy status, or socioeconomic status.[v]

Health — A state of complete physical, social, and mental wellbeing, and not merely the absence of disease or infirmity.[vi]

Health Impact Pyramid — Introduced by Thomas Frieden in 2010, the Health Impact Pyramid describes the impact of different types of public health strategies and provides a framework for identifying activities with the greatest potential for improving population health. The pyramid has five levels: 1) Socioeconomic factors, 2) Changing the context to make individuals' default decisions healthy, 3) Long-lasting protective factors, 4) Clinical interventions, and 5) Counseling and education. Activities toward the base of the pyramid require minimal individual effort and have the greatest leverage for improving population health, while activities toward the top of the pyramid require increased individual effort and reach smaller segments of the population.[vii]

Health promotion — The process of enabling people to increase control over, and to improve their health.[viii]

Investment for health — Resources which are explicitly dedicated to the production of health and improved health outcomes. They may be invested by public and private agencies as well as by people as individuals and groups. Investment for health strategies are based on knowledge about the determinants of health and seek to gain political commitment to health public policies.[ix]

Legislation — Action by a legislative body, including the "introduction, amendment, enactment, defeat or repeal of Acts, bills, resolutions, or similar items." It includes actions by Congress, a state legislature, a similar local legislative body, or any actions by the general public in a referendum question, initiative petition, or proposed constitutional amendment. Note that judicial, executive, and administrative bodies, including special purpose bodies like school and zoning boards, are not legislative bodies. [x]

Lobbying — Lobbying is an attempt to influence specific legislation by communicating views to legislators or asking people to contact their legislators. See also direct lobbying and grassroots lobbying.[xi]

> **Direct lobbying** — Occurs when an organization communicates with a legislator or legislative staff member (or any other government employee who may participate in the formulation of the legislation, but only if the principal purpose of the communication is to influence legislation) about a specific piece of legislation and reflects a view on that legislation. Direct Lobbying also encompasses any communication with the general public expressing a view about a ballot initiative, referendum, bond measure, or similar procedure.[xii]

> **Grassroots lobbying** — A communication with the general public that reflects a view on specific legislation and includes a call to action that encourages people to contact their legislative representatives or staff in order influence that legislation.[xiii]

Media framing — The process of selecting and organizing information in order to present relevant events and suggest what is at issue in a manner than makes sense to media producers and audiences.[xiv]

Message framing — The way a story is told – its selective use of particular symbols, metaphors, and messengers, for example – and to the way these cues, in turn, trigger the shared and durable cultural models that people use to make sense of their world. *Reframing* changes the lens through which a person can think about an issue, so that different interpretations and outcomes become visible to them.[xv]

Policy — Laws, regulations, rules, protocols, mandates, resolutions, and ordinances designed to guide or influence behavior. *Public* policy refers to legislative (laws, ballot measures), legal (court decisions), fiscal (government budgets), and regulatory actions (including administrative rules and executive orders). *Organizational* policy refers to internal standards and protocols established by public or private organizations, such as workplace or school wellness policies.

Policy agenda — A set of policies or issues to be addressed or pursued by an individual, group, or organization. Agenda setting refers to the process of placing issues on the policy agenda for public consideration and intervention.

Policy analysis — The use of reason and evidence to select the best policy among a number of alternatives to address a particular policy problem.

Policymaker — A person with power to influence or determine policies and practices at a national, state, regional, or local level. Public policymakers include elected and appointed officials and leaders of public agencies. State-level public policymakers include legislators, the governor, state agency leaders, and state boards. Local level public policymakers include mayors, county commissioners, city council members, public boards and commissions, and school superintendents.

Policy, system and environmental change (PSEC) — Policy, system and environmental change is a way to modify the environment to make healthy choices practical and available to all community members.[xvi]

Population health — The health outcomes of a group of individuals, including the distribution of such outcomes within the group.[xvii] The field of population health focuses on the determinants of health (including medical care, public health interventions, social environment, physical environment, genetics, and individual behavior) and the policies and programs that influence those determinants and reduce health disparities among population groups.

Prevention — A systematic process that promotes healthy behaviors and reduces the likelihood or frequency of an incident, condition, or illness. Ideally, prevention addresses health problems before they occur, rather than after people have shown signs of disease or injury.[xviii]

There are two commonly used systems for classifying levels of prevention. The first is based on the timing of prevention activity relative to the onset of the health problem: Primary, Secondary, and Tertiary. The second classification was developed in the field of substance abuse prevention and refers to the level of risk in the population addressed: Universal, Selected, and Indicated. See below.

Levels of Prevention[xix]	Prevention Tiers[xx]
Primary — Methods to avoid the occurrence of disease. Primary prevention addresses problems before they occur rather than waiting to intervene after a condition or concern develops. Primary prevention often requires a shift from focusing on educating, counseling, or treating an individual towards addressing the broader physical, social, and economic environment.[xxi] (Examples: safe sleep campaigns to prevent infant death; workplace policies to promote breastfeeding as a way to prevent childhood obesity)	**Universal** — Strategies offered to the full population, likely to provide some benefit to all. (Examples: social skills training for all children in a school district to prevent bullying and teen dating violence; addition of sidewalks and crosswalks to increase walkability and promote physical activity)
Secondary — Methods to diagnose and treat existent disease in early stages before it causes significant morbidity. Preventing the escalation of an existing problem. (Examples: breast, cervical, and colorectal screenings to identify cancer in early stages; HIV screening and antiretroviral therapy to prevent transmission to others)	**Selective** — Targeted to populations with above-average risk for the problem. (Examples: needle exchange programs for IV drug users to prevent HIV transmission; healthy corner store initiatives in poor neighborhoods with high rates of obesity)
Tertiary — Methods to reduce negative impact of extant disease by restoring function and reducing disease-related complications. Treatment or intervention for an existing injury, condition, or disease. (Examples: diabetes self-management class to prevent health complications from diabetes)	**Indicated** — Targeted to individuals with increased vulnerability or early signs of a problem, disease, or condition. (Examples: tobacco cessation early intervention for middle school students who have experimented with tobacco; strength and balance exercise classes for frail elderly)

Prevention organization — Any organization that is working to promote health and prevent illness and disability. This includes government public health agencies, community-based organizations, trade associations, coalitions, health care providers, employers, philanthropies, grass-roots groups, and others who are working in the areas of prevention, wellness, population health, or health promotion.

Public health — The science and art of promoting health, preventing disease, and prolonging life through the organized efforts of society.[xxii] Public health organizations include government agencies at the federal, state, and local levels, as well as nongovernmental organizations that are working to promote health and prevent disease and injury within entire communities or population groups.

Public policy — Public policy is a series of governmental decisions and actions that are intended to address a perceived public problem. They can be expressed as local, state, or federal governmental action, such as legislation, appropriations, administrative practices, and court decisions.[xxiii]

Regulation — A rule or order that has the force of law that originates from the executive branch (usually from an agency), and deals with the specifics of a program.[xxiv]

Social determinants of health — Conditions in the environments in which people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks. In addition to the social, economic, and physical conditions of a person's environment, social determinants also include patterns of social engagement and sense of security and well-being. Examples of resources that can influence (or, "determine") health outcomes include safe and affordable housing, access to education, public safety, availability of healthy foods, local emergency/health services, and environments free of life-threatening toxins.[xxv]

Spectrum of prevention — A framework for developing effective and sustainable primary prevention programs. The spectrum consists of six levels of prevention activities that are most effective when implemented together as part of a comprehensive prevention strategy: 1) Strengthening individual knowledge and skills, 2) Promoting community education, 3) Educating providers, 4) Fostering coalitions and networks, 5) Changing organizational practices, 6) Influencing policy and legislation.[xxvi]

System change — System change involves change made to rules and practices within an organization, institution, or system (such as school, transportation, park, food distribution, or health care systems).

Wellness — Wellness is the optimal state of health of individuals and groups. There are two focal concerns: the realization of the full potential of the individual physically, psychologically, socially, spiritually, and economically, and the fulfillment of one's role expectations in the family, community, place of worship, workplace and other settings. [xxvii]

Notes

[i] *Bolder Advocacy Glossary*. Alliance for Justice. http://bolderadvocacy.org/afj-on-advocacy/glossary
[ii] ibid
[iii] ibid
[iv] *Unity Road Map Glossary of Terms*. The Prevention Institute. http://www.preventioninstitute.org/component/content/article/70-general/470-glossary-of-terms.html
[v] ibid
[vi] *Health Promotion Glossary*. World Health Organization, 1998.
[vii] *A Framework for Public Health Action: The Health Impact Pyramid*. Thomas R. Frieden. American Journal of Public Health, April 2010, Vol. 100, No. 4.
[viii] *Health Promotion Glossary*. World Health Organization, 1998.
[ix] ibid
[x] *Bolder Advocacy Glossary*. Alliance for Justice. http://bolderadvocacy.org/afj-on-advocacy/glossary
[xi] *ibid*
[xii] ibid
[xiii] ibid
[xiv] *Unity Road Map Glossary of Terms*. The Prevention Institute. http://www.preventioninstitute.org/component/content/article/70-general/470-glossary-of-terms.html
[xv] *Framing Public Issues*. FrameWorks Institute, 2002.
[xvi] *What is Policy, Systems, and Environmental Change?* Suburban Cook County Communities Putting Prevention to Work (CPPW), Cook County Department of Public Health, and the Public Health Institute of Metropolitan Chicago. August 2010.
[xvii] *What is Population Health?* David Kindig and Greg Stoddart. American Journal of Public Health, March 2003, Vol. 93, No. 3.
[xviii] The Prevention Institute. www.preventioninstitute.org
[xix] US National Library of Medicine
[xx] *An operational classification of disease prevention*. Gordon, R. in in Steinberg, J. A. and Silverman, M. M. (eds.), *Preventing Mental Disorders*, Rockville, MD: U.S. Department of Health and Human Services, 1987.
[xxi] The Prevention Institute. www.preventioninstitute.org
[xxii] *Health Promotion Glossary*. World Health Organization, 1998.
[xxiii] National Association of Local Boards of Health. http://www.nalboh.org/Take_Action.htm
[xxiv] *Bolder Advocacy Glossary*. Alliance for Justice. http://bolderadvocacy.org/afj-on-advocacy/glossary
[xxv] Healthy People 2020. http://healthypeople.gov/2020/topicsobjectives2020/overview.aspx?topicid=39#five
[xxvi] *The Spectrum of Prevention*. The Prevention Institute. http://www.preventioninstitute.org/index.php?option=com_jlibrary&view=article&id=105&Itemid=127
[xxvii] *Health Promotion Glossary: New Terms*. World Health Organization, 2006.

About the HPIO Wellness & Prevention Collaborative

The HPIO Wellness & Prevention Collaborative is a coalition of Ohio prevention organizations working together to build skills, capacity and coordination in order to communicate more effectively with public policymakers about the critical importance of investing in prevention and ensuring that all Ohioans live in healthy communities that support healthy behaviors. The Ohio Wellness & Prevention Network is a product of the HPIO Collaborative. Email astevens@healthpolicyohio.org or visit www.ohioprevention.org to learn more.