



Getting nutrition research to the policy table

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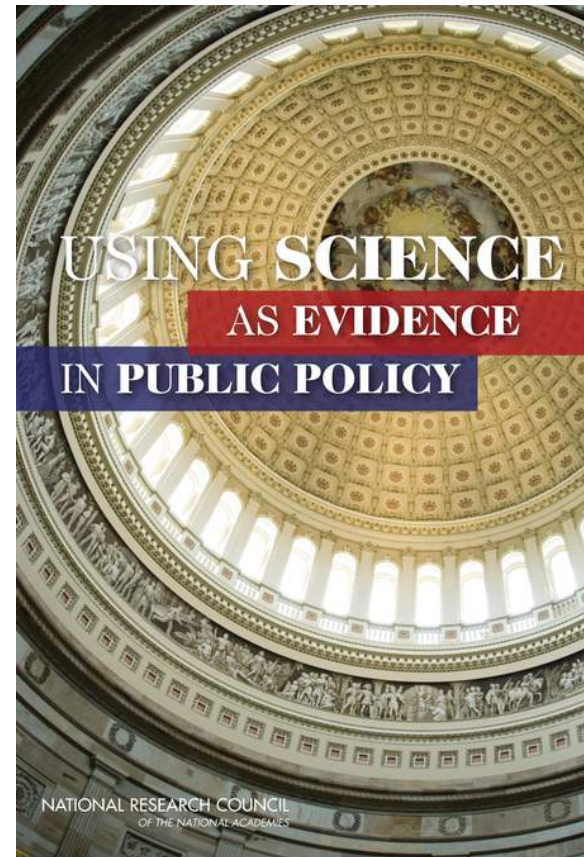
Objectives:

1. Why it's important to engage with policymakers
2. How the “highly involved” engage with policymakers
3. What we can do now to engage with policymakers

1. WHY IT'S IMPORTANT TO ENGAGE WITH POLICYMAKERS

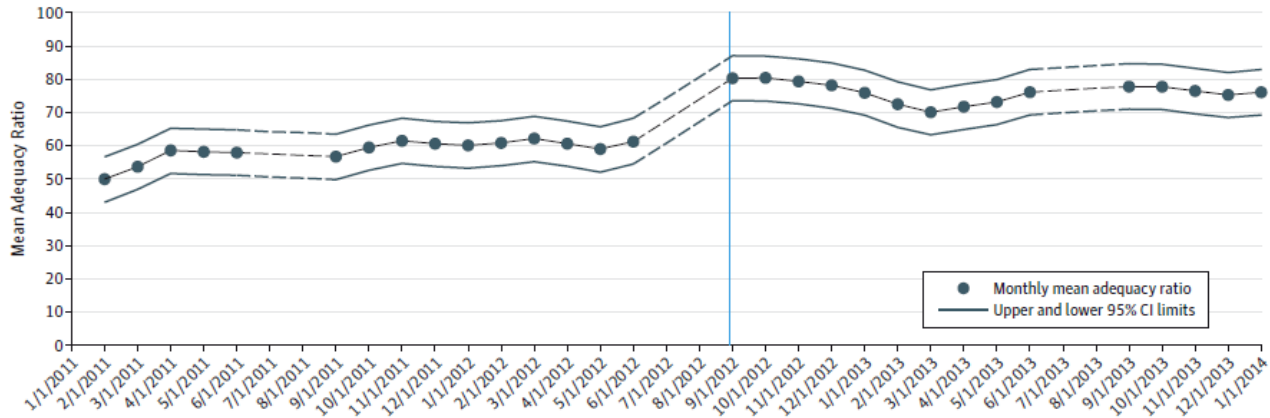
1. The importance of engaging with policymakers

- Policies can permanently and effectively change public health behaviors.
- Policies are often more powerful than many public health programs.



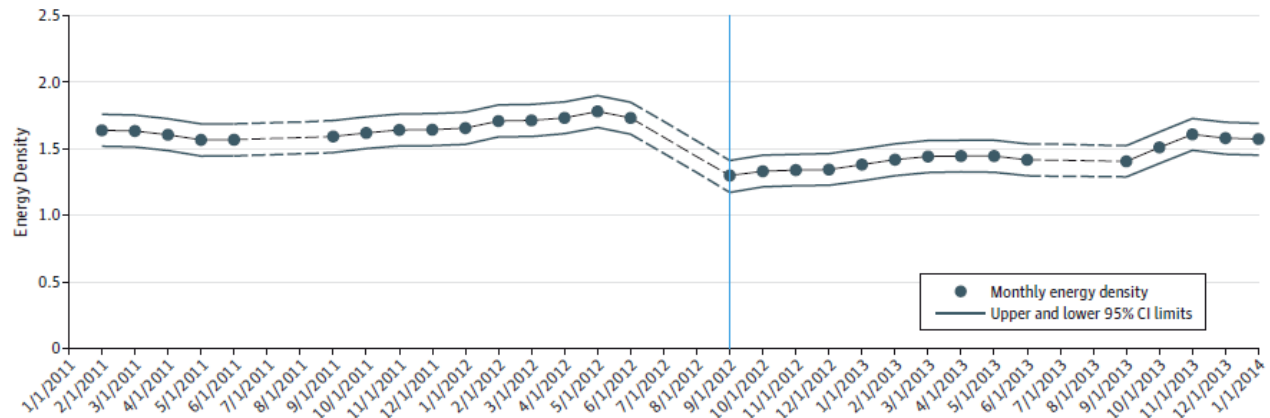
Effect of the Healthy Hunger-Free Kids Act on the Nutritional Quality of Meals Selected by Students

Figure 1. Estimated Mean Monthly Mean Adequacy Ratio Before and After Implementation of New Meal Standards (September 2012)



The vertical dashed line indicates the beginning of the Healthy Hunger-Free Kids Act policy implementation. The dashed horizontal lines between markers represent summer months when no data were collected.

Figure 2. Estimated Mean Monthly Energy Density Before and After Implementation of New Meal Standards (September 2012)



The vertical dashed line indicates the beginning of the Healthy Hunger-Free Kids Act policy implementation. The dashed horizontal lines between markers represent summer months when no data were collected.

An issue brief from the Pew-MacArthur Results First Initiative

| March 2015



MacArthur
Foundation

Legislating Evidence-Based Policymaking

A look at state laws that support data-driven decision-making



HR 5754: Evidence-Based Policymaking Commission Act of 2014

The image is a screenshot of a website's news page. At the top, there is a navigation bar with six tabs: Home, About, News, Budgets, Initiatives, and Hearings. The 'News' tab is currently selected. Below the navigation bar, there is a breadcrumb trail showing 'HOME' followed by a right-pointing arrow and 'NEWS'. The main content area is titled 'Press Releases' in a blue font. Below this title, there is a horizontal bar containing a printer icon on the left and social media icons for Facebook, Twitter, and a comment icon on the right. The main headline is 'Murray and Ryan Propose Commission to Promote Evidence-Based Policymaking' in a blue font. Below the headline, there is a sub-header in a grey box that reads: 'Washington, Nov 20, 2014 | Helen Hare, (202) 224-5398 (Senator Murray) Will Allison, (202) 226-6100 (Congressman Ryan) | 0 comments'. To the right of this sub-header are icons for Facebook, Twitter, a printer, and an envelope. The main body of the page contains two paragraphs of text. The first paragraph starts with 'WASHINGTON, D.C. — Today, U.S. Senate Budget Committee Chairman Patty Murray (D., Wash.) and U.S. House of Representatives Budget Committee Chairman Paul Ryan (R., Wisc.) announced the Evidence-Based Policymaking Commission Act of 2014. The bill would establish a 15-member commission to study how best to expand the use of data to evaluate the effectiveness of federal programs and tax expenditures. The commission would also study how best to protect the privacy rights of people who interact with federal agencies and ensure confidentiality.' The second paragraph starts with 'Specifically, the commission would determine whether the federal government should establish a clearinghouse for program and survey data, which qualified researchers from both the private and public sector could access and use to perform program evaluations and policy-relevant research. By coordinating data across federal programs and tax expenditures, and giving researchers greater access to that data, federal agencies would gain a better grasp of how effective they are, and lawmakers would gain a better grasp of how to improve them.' At the bottom of the page, there is a quote: 'The families and communities we represent deserve a government that works for them and delivers

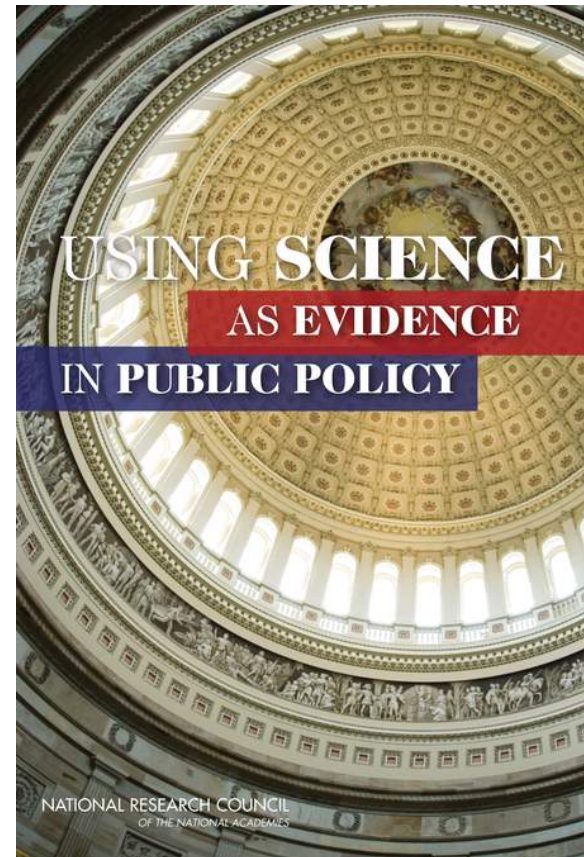
So, why don't we engage with policymakers more?

- Venus vs. Mars? Differences in decision making and persuasion among researchers and policy makers
- Timing?
- Uncertainty? Communicating a body of evidence vs. 1-2 studies
- Arms length? Balancing objectivity and advocacy

2. HOW THE “HIGHLY INVOLVED” ENGAGE WITH POLICYMAKERS

How do public health researchers engage with policymakers?

“Science, when it has something to offer, should be at the policy table.”



Getting research to the policy table: A qualitative study

- Aims:
 - Current practices
 - Drivers
 - Facilitators and barriers
 - Beliefs
 - Avenues for improvement
- Sample: “highly involved” researchers (n=18)
- Methods and analysis: Semi-structured interviews, double-coded

Key Findings

- Wide variation in practices
- Broad range of “driving” factors
- General agreement on barriers
- Some agreement on facilitators
- Mixed beliefs about whether and who should be doing this

Wide variation in practices

- Direct and indirect interaction
- Targeted dissemination
- Professional membership groups
- “Blue ribbon” groups and panels
- Partnerships
- Funded research

Broad range of “driving” factors

1. They come to us.

- “Policymakers look for experts in topics but not experts in policy.”

2. Strategic about informing the debate.

- “We think of our research in terms of moving public debate. You’ve got to think this way to make a difference in this world.

3. Driven by collaboration.

- “...have really started with collaboration with people in the policy realm and sort of having them say, this is what we need. We need some evidence, we need some support.”

Barriers

1. **Unsupportive culture: Not valued at institution/in academia**

2. **Lack of training or “know-how”**

-- “people in public health just need to understand the policy process....[for example] ... If you're just trying to get a law in the books on X, Y or Z topic, then you want to target legislative. But once that law's on the books, and you are trying to get very specific components included, that's you want to target the regulatory process.”

3. **Perceived lack of payoff**

- “You can read the paper every day and see, this study says this, and it does get you a lot of buzz, and really a few meetings with policy makers gets nothing near that level of impact.”

4. **Time constraints**

- “The reality is that there are too many other pressures.”

Facilitators and incentives

1. Strategic research funders

- “[A foundation] pushed me to do it [learn how to communicate with policymakers]. [The foundation] provided consultants and support.”

2. Valued by academic institution

3. Desire to make a difference

- “I was tired of doing research and not having it go anywhere or lead to anything.”

4. Training and mentorship (BIG!)

Mixed beliefs about whether we should be doing this (or what it should look like)

1. Not everyone should be doing this.
2. Everyone should be able to articulate how their work is relevant to society and/or be able to put it into a broader health context.
3. We bring the science. Others unpack the information.

All underscored

- the need to more systematically explore
- better support for this type of engagement

Tips:

- know your legislator (interests, partner's interests)
- learn the legislative process and terminology
- find a mentor or more formal training
- use intermediaries
- learn how to cultivate relationships

Next Steps

- Next paper: “Habits” of the highly involved
- Surveying the field at large

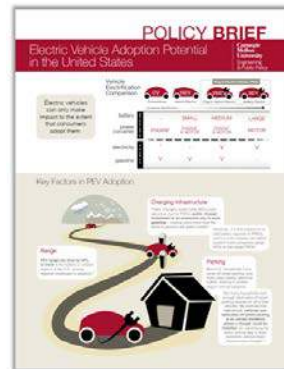
3. WHAT WE CAN DO NOW TO ENGAGE WITH POLICYMAKERS

What can we do to better engage with policymakers in the meantime?

1. Use short policy summaries
2. Use infographics
3. Effectively frame messages

1. Use Short Policy Summaries

- Effective, preferred tool
- 1-2 pages, inclusive of tables, figures, photos
- Include references and contact information for follow-up
- Include state or county level information available (or incorporate it)
- Target the dissemination





Policy Brief June 2010

The Patient Protection and Affordable Care Act at the State and Local Level

POLICY BRIEF

While health care reform has its foundation and framework at the federal level, many key elements will be carried out at the state and local level. Considerable attention has been focused on insurance reforms that will substantially alter the picture of coverage in the country, but the Act also includes other provisions that will affect the way care is delivered in every hospital and doctor's office in the country: everything from the way providers are paid and practitioners are educated to how quality is measured. Policy-makers, providers of care, individuals, foundations, and others interested in having an impact on the implementation of health reform will have many opportunities to do so at the state and local level.

Changes to health insurance coverage have been the subject of most reports on the Patient Protection and Affordable Care Act (P.L. 111-148). Rather than addressing changes that apply to private sector health insurance, this policy brief summarizes some of the most salient state requirements and state and local opportunities with regard to coverage and health care delivery. Section numbers follow each provision of the Act listed.



The Center for Healthcare Research & Transformation (CHRT) sponsors research and public information to promote evidence based care delivery, improve population health, and expand access to care. Housed at the University of Michigan, CHRT is a partnership between U-M and Blue Cross Blue Shield of Michigan to test the best ideas for improving the effectiveness and efficiency of the health care system.



Suggested citation: Eller, Patrice; Ogundimu, Tomi; Udow-Phillips, Marianne. The Patient Protection and Affordable Care Act at the State and Local Level, June 2010. Center for Healthcare Research & Transformation. Ann Arbor, MI.

2. Use Infographics

4 MINUTE READ | INFOGRAPHIC OF THE DAY

How Infographics Are Changing Congress

Could a recent push by the Congressional Budget Office to include data visualizations in their complex reports drive more nuanced, informed thinking?

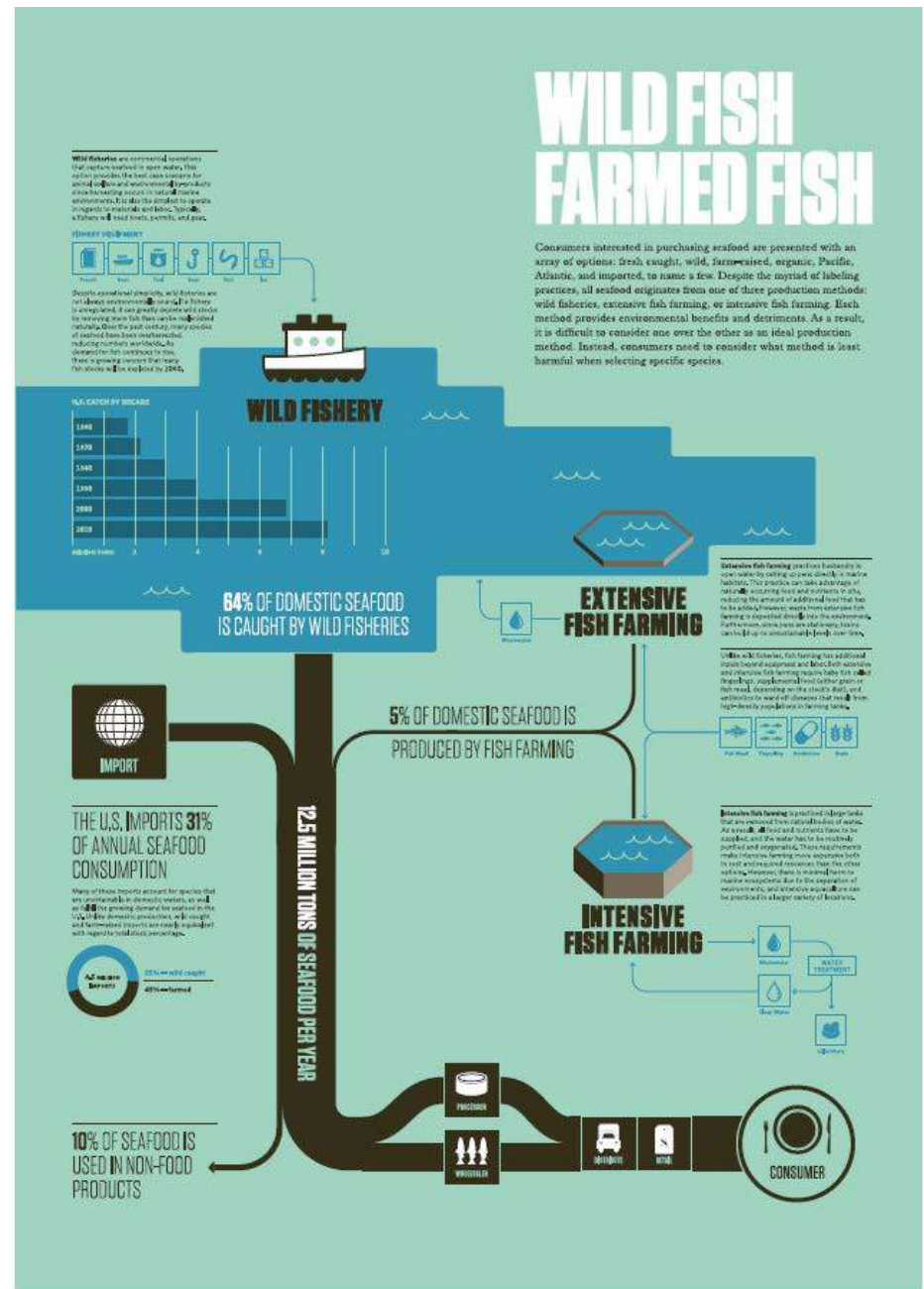


Why?

- Compelling
- Tell a story at the same time
- Rapidly used information: human brain can process a visual scene in less than 1/10th of a second!

Who else?

- News outlets increasingly using these to redesign the news (NYT to USA Today)
- Policymakers increasingly using them (CBO)
- Science journals (Nature, Health Affairs)
- Think tanks, non-profits (Urban Institute, Pew)



3. Effectively Frame Messages

Example: Should gov't take action? Messages on consequences of child obesity

Tested 11 messages, stratified by political ideology:

- Long-term health
- Mortality
- Health care costs
- Psychological
- Bullying
- Short-term health
- Workforce costs
- Military readiness
- Socioeconomic status disparity
- Racial/ethnic disparity
- Discrimination

3. Effectively Frame Messages

Example: Should gov't take action? Messages on consequences of child obesity

- Frame messages to hit a spectrum of values
 - Framing obesity in terms of its multiple and long-term consequences = strong justification
- Go beyond health
 - Messages about non-health-related consequences, including health care costs, bullying, and military readiness = added strength
- Be careful about “narrowing the constituency”
 - Messages about disparities in obesity rates = weak rationale

Political ideology matters

Example: Should gov't take action? Messages on consequences of child obesity

- Ceiling effects in liberals and moderates
- Conservatives were less likely to support gov't action: consistent with ideology that endorses limited government and individual responsibility
 - military readiness message strengthened support

Other dissemination tips

- Align with legislators interests
 - That's when they *value* evidence!
- Think in terms of political cover
- Don't forget to educate other players
- Making data talk is important
 - stories, social math, relevant to constituency

In sum

It's important to engage with policymakers!

1. Take-aways from the “highly involved”

- ✓ Know your legislator, the process, the terminology
- ✓ Find a mentor or formal training
- ✓ Use intermediaries
- ✓ Cultivate relationships

2. What we can do now:

- ✓ Make (better) policy briefs
- ✓ Use infographics
- ✓ Effectively frame messages that consider political ideology, legislator topic interests, and provide “cover”
- ✓ Include policy communication costs (\$, time)

Thank you! Questions?



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