



## COLLECTIVE IMPACT: Policy Initiatives

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# We Own the Health of Our Community

## Collective Impact Initiative

- *Common agenda* - Participants share a vision for change.
- *Shared measurement systems* - Web-based technologies enable common systems for reporting performance and measuring outcomes.
- *Mutually reinforcing activities* - Participants undertake specific activities, where they excel, in a way that supports and is coordinated with the actions of others.
- *Continuous communication* - Trust among nonprofits, corporations, and government agencies is a monumental challenge that develops over years of regular interactions.
- Backbone support organizations - Creating and managing collective impact requires independent staff with a very specific skill set to serve as the backbone for the initiative.

- *Stanford Social Innovation Review*

# Policy Change from the Ground Up (Example)

## **TOBACCO RETAIL LICENSE (TRL): Goals and Objectives**

The goal of TRL projects has been to: Reduce youth access to tobacco by regulating sales to minors. The objectives have been to:

- Implement a successful campaign to adopt regulatory policy via city government;
- Implement community engagement models in ethnically/geographically diverse communities; and
- Enlist grassroots support for the effort to protect youth from tobacco access by focusing on building community support, educating policymakers, and advocating for the adoption/implementation of a tobacco retail license fee ordinance that requires tobacco retailers to obtain a license in order to sell tobacco products and that includes sufficient fees to conduct regular compliance checks.

# American Lung Association: Tobacco Control Policy Grades

## California's Report Card

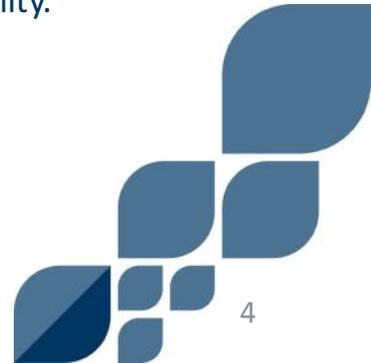
Top Ten Cities in California by Population	Overall Tobacco Control
1. <b>Los Angeles</b> (Population: 3,957,022)	<b>C</b>
2. <b>San Diego</b> (Population: 1,368,061)	<b>D</b>
3. <b>San Jose</b> (Population: 1,016,479)	<b>B</b>
4. <b>San Francisco</b> (Population: 845,602)	<b>B</b>
5. <b>Fresno</b> (Population: 520,159)	<b>F</b>
6. <b>Sacramento</b> (Population: 480,105)	<b>C</b>
7. <b>Long Beach</b> (Population: 472,779)	<b>C</b>
8. <b>Oakland</b> (Population: 410,603)	<b>B</b>
9. <b>Bakersfield</b> (Population: 369,505)	<b>F</b>
10. <b>Anaheim</b> (Population: 351,433)	<b>F</b>

Grades (A-F) are assigned to each city in three tobacco-control-policy categories:

- Smokefree Outdoor Air
- Smokefree Housing
- Reducing Sales of Tobacco Products

The three grades plus Emerging Issues Bonus Points are used to calculate an Overall Tobacco Control grade for each municipality.

[http://www.lung.org/local-content/california/documents/state-of-tobacco-control/2016/2016-sotc\\_california-full.pdf](http://www.lung.org/local-content/california/documents/state-of-tobacco-control/2016/2016-sotc_california-full.pdf)





## STATE OF TOBACCO CONTROL '16 CALIFORNIA LOCAL GRADES

### Top of the Class: Diverse and Different

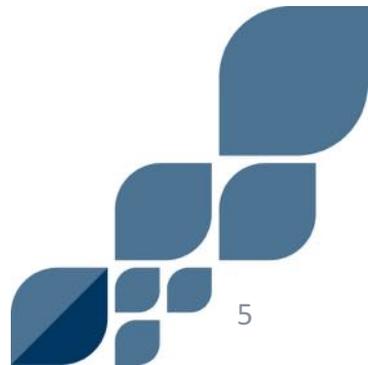
This year, there are 17 cities or counties that received an Overall Grade of A. These communities across California are a diverse mix in many aspects, demonstrating that support for tobacco control exists in all types of communities.



#### Population

Glendale	199,182	Union City	72,744
Pasadena	141,510	Marin County	68,488
Berkeley	118,780	Huntington Park	59,312
Richmond	107,346	San Rafael	59,214
Daly City	105,810	Dublin	55,844
Compton	98,506	Manhattan Beach	35,763
Santa Monica	93,283	El Cerrito	24,288
Santa Clara County	87,182	Mill Valley	14,439
Baldwin Park	77,047		

Glendale is the largest city in California, by population, to receive an Overall Grade of “A” from the American Lung Association for tobacco control policy.



# Policy Change from the Ground Up

## Five-phase campaign model

The methodology GAMC\* uses for implementing TRL policy is a five-phase policy campaign model that includes:

1. Conducting a community needs assessment (youth access surveys, community resources assessment);
2. Policy campaign strategies (strong media campaigns, educating key opinion leaders);
3. Coalition building/advocacy;
4. Policy implementation; and
5. Program evaluation.

\*GAMC is a member of the Los Angeles County Tobacco Control Coalition, which provides technical assistance pertaining to tobacco control policy implementation best practices.

# Policy Change from the Ground Up

## Non-traditional Advocacy

GAMC spearheaded successful campaigns for TRL policy in the cities of Glendale, La Canada, Monrovia, and Duarte.

- We adapted our model by developing a Youth Art and Advocacy Program that engages youth in policy initiatives. Staff utilized Coalition-Building and Art as non-traditional advocacy tools for addressing health risk. Teen students were trained to utilize mixed media & hands-on creative art work as a strategy, promoting civic engagement and community empowerment.
- Communities, thus, learned to hold their public officials accountable, and that collective effort became a powerful tool for changing policy in their community. Also, experiencing TRL's success contributed an enormous intangible benefit to students' personal growth as advocates and leaders.
- Additionally, the program fills a gap for needed art and health programming resources, recently eliminated from budget-constrained school curricula.

# Policy Change from the Ground Up

## Best-Practice Recommendations

- Engage business leaders and business community as early as possible in TRL planning. Create opportunities to educate the business community. Utilize data results to spearhead educational efforts, such as Youth Tobacco Purchase Surveys, Public Opinion Polls and community health data.
- Increase involvement from tobacco control advocates in the direct facilitation and development of enforcement procedures by providing individualized technical assistance to key decision makers. Advocacy efforts involves research that can help shape various compliance enforcement options and fee schedules, as well as identifying other community resources that can be leveraged to make a city's plan work.
- Face the economic, political, regulatory and tobacco market sector realities head-on, making use of information and resources available to design non-traditional advocacy and policy-making strategies.

# Choose Health LA Kids: Obesity Prevention

## **Childhood obesity in low-income Communities**

Los Angeles County DPH partnered with 20 funded\* agencies to implement community-based public education, skills-building workshops for parents, and policy change to promote healthful eating among nearly 700,000 children in LAC ages 0-5

As part of the policy-change component, each funded agency formed a parent collaborative, and through the use of PhotoVoice, parents documented how and where food and beverages are advertised in their neighborhoods. Subsequently, each collaborative pursued a local policy strategy to address food and beverage marketing aimed at children.

To organize, monitor, and evaluate their policy work agencies were trained on the Policy Adoption Model, Marketing Matters Toolkit, and RE-AIM Framework.

\*Three years - \$900,000

“I want my children to grow up and be healthy”

## City Council Passes Vending Machine Policy – LA Times

“All of the vending machines at local parks and on other city properties will be fully stocked with healthy snacks and drinks following City Council direction on Tuesday.”

“I don't think we have to be worried about revenue when it comes to the health of our children,” said Councilwoman Paula Devine.

The local organization, *Healthy Kids - Healthy Lives*, recently surveyed 376 Glendale residents and 94% of them said they would support buying healthier items.



Tim Berger / Staff Photographer

