



2021

VIRTUAL
PUBLIC HEALTH LAW
CONFERENCE

**Building and Supporting
Healthy Communities
for All**

September 21-23

2021

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**PUBLIC HEALTH LAW
CONFERENCE**

**Building and Supporting
Healthy Communities for All**

**Sep. 21-23, 2021
#PHLC2021**

Opportunities to Leverage Law and Policy to Improve the Health and Well-being of the Nation in the Coming Decade

Panel **Carter Blakey**
 Megan A. Kelly
 Therese S. Richmond
Moderator **Angela K. McGowan**



Law and Policy as Tools to Reach Healthy People Goals and Address the Social Determinants of Health

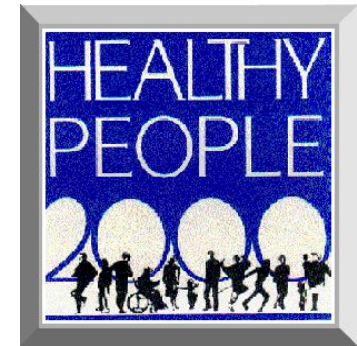
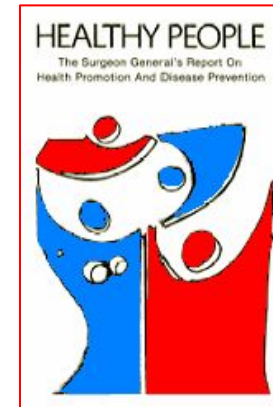
Carter Blakey
Deputy Director

Director of the Community Strategies Division
Office of Disease Prevention and Health Promotion
US Department of Health and Human Services

September 22, 2021

What is Healthy People?

- Provides a strategic framework for a **national prevention agenda** that communicates a vision for improving health and achieving health equity.
- Identifies science-based, **measurable objectives with targets** to be achieved by the end of the decade.
- Requires tracking of **data-driven outcomes** to monitor progress and to motivate, guide, and focus action.
- Offers model for international, state, and local **program planning**.
- Represents **collective input** from federal, state, local, public, private stakeholders.



Office of Disease Prevention
and Health Promotion



Evolution of Healthy People Across The Decades

Target Year	1990	2000	2010	2020	2030
Overarching Goals	<ul style="list-style-type: none"> Decrease mortality: infants–adults Increase independence among older adults 	<ul style="list-style-type: none"> Increase span of healthy life Reduce health disparities Achieve access to preventive services for all 	<ul style="list-style-type: none"> Increase quality and years of healthy life Eliminate health disparities 	<ul style="list-style-type: none"> Attain high-quality, longer lives free of preventable disease Achieve health equity; eliminate disparities Create social and physical environments that promote good health Promote quality of life, healthy development, healthy behaviors across life stages 	<ul style="list-style-type: none"> Attain healthy, thriving lives and well-being, free of preventable disease, disability, injury and premature death. Eliminate health disparities, achieve health equity, and attain health literacy to improve the health and well-being of all. Create social, physical, and economic environments that promote attaining full potential for health and well-being for all. Promote healthy development, healthy behaviors and well-being across all life stages. Engage leadership, key constituents, and the public across multiple sectors to take action and design policies that improve the health and well-being of all.
Objectives	226	319	~1,000	>1,200	355



Social Determinants of Health Framework

Social determinants of health (SDOH) are the conditions in the environments where 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.



Healthy People 2030 Objectives and Measures



Leading Health Indicators – Across Life Stages

All ages

Use of oral health care*

Calories from added sugars*

Drug overdose deaths

Exposure to unhealthy air

Homicides

Household food insecurity

Seasonal influenza vaccinations

Knowledge of HIV status*

Persons with medical insurance*

Suicides

*Apply to most of the life stages

Infants

Infant deaths

Children and adolescents

4th grade reading skills

Treatment for major depressive episodes

Obesity rates

Use of tobacco products

Adults and older adults

Binge drinking

Aerobic and muscle-strengthening activity

Colorectal cancer screening

Hypertension with blood pressure controlled

Cigarette smoking

Employment

Maternal deaths

New cases of diabetes in the population



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Healthy People 2030

Healthy People 2030 OHMs

Tier 1: Well-Being

OHM-1: Overall well-being

Tier 2: Healthy Life Expectancy

OHM-2: Life expectancy at birth — free of activity limitation

OHM-3: Life expectancy at birth — free of disability

OHM-4: Life expectancy at birth — in good or better health

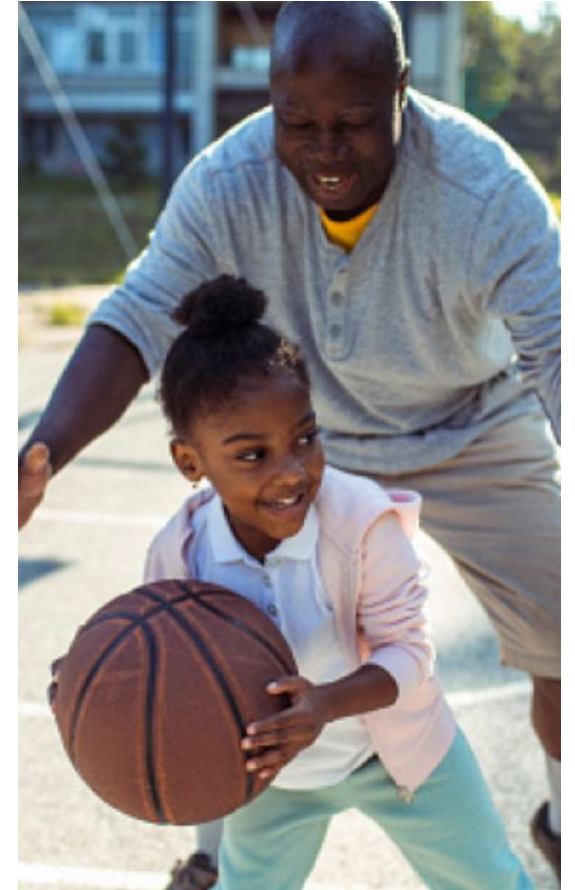
Tier 3: Summary Mortality and Health

OHM-5: Life expectancy at birth

OHM-6: Free of activity limitation

OHM-7: Free of disability

OHM-8: Respondent-assessed health status — in good or better health



The Role for Law and Policy in Improving Health and Well-being

■ Law and Health Policy Partnering Agencies and Organizations:

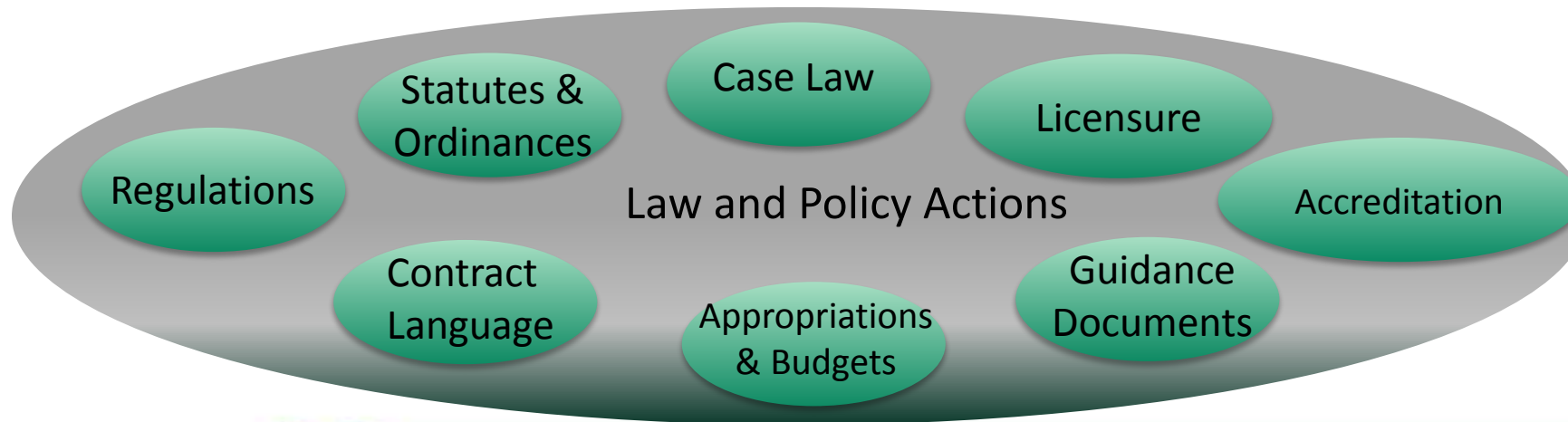
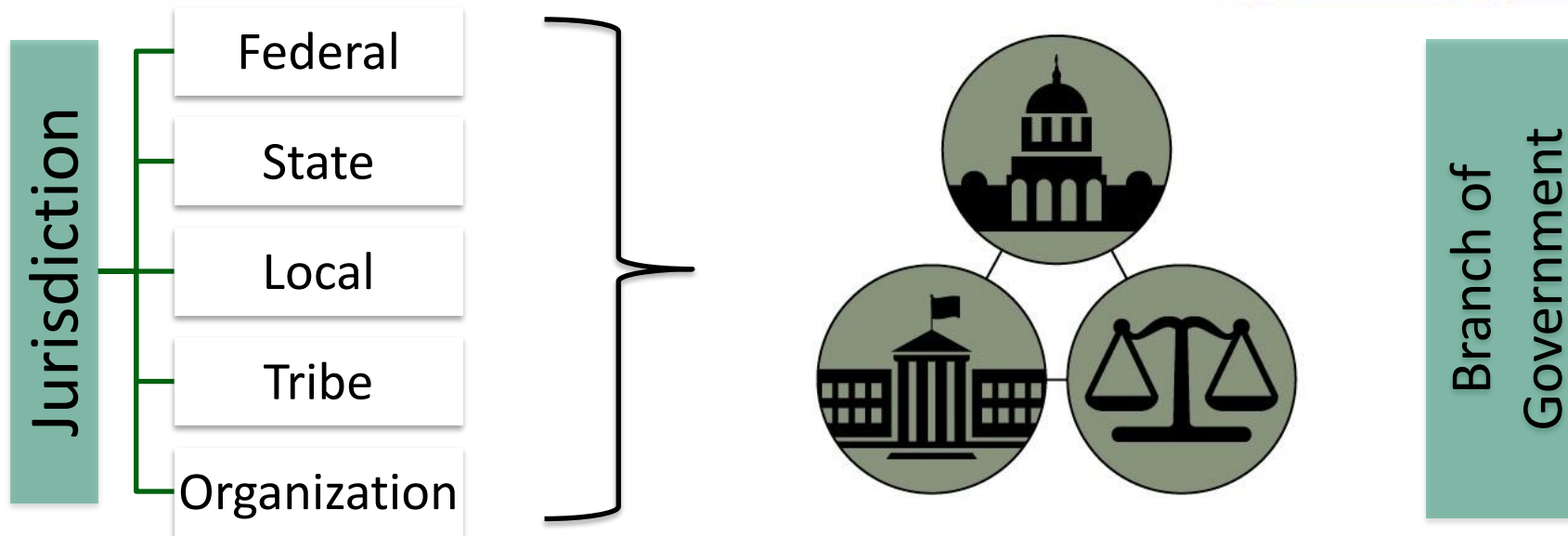
- HHS/ODPHP (Project Lead)
 - Robert Wood Johnson Foundation
 - CDC Foundation
 - CDC
- **Funded September 2013 – August 2020**
 - Developed Reports and Related Products including community “Bright Spots”
 - Hosted Law and Policy Webinar Series
 - Supported the Development of Healthy People 2030 (HP2030)

For more information:

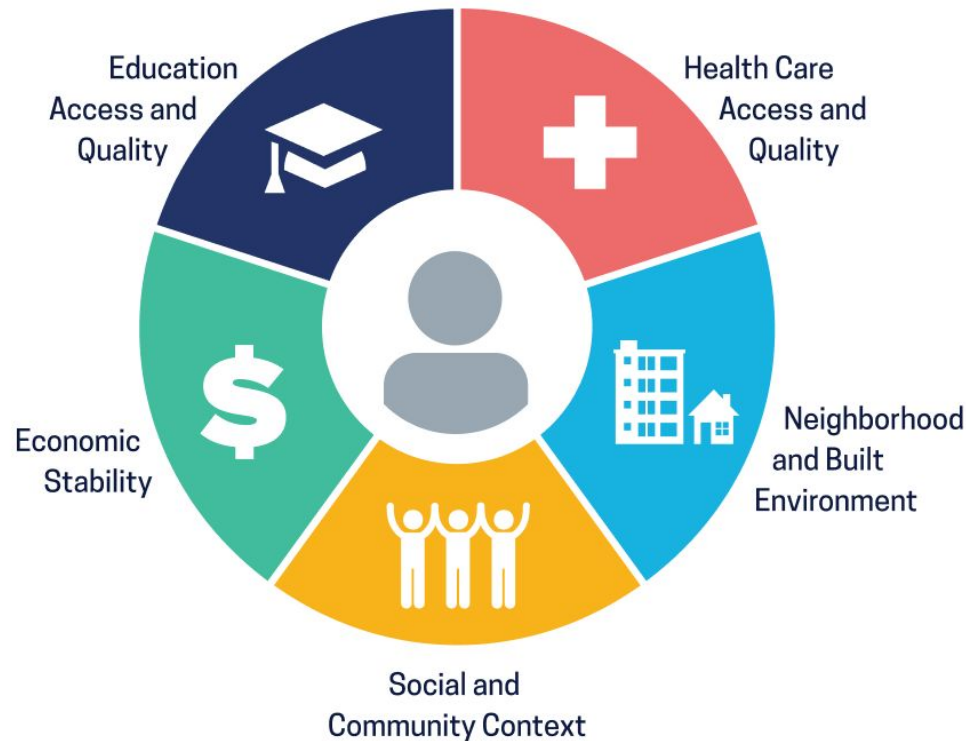
www.healthypeople.gov/2020/law-and-health-policy



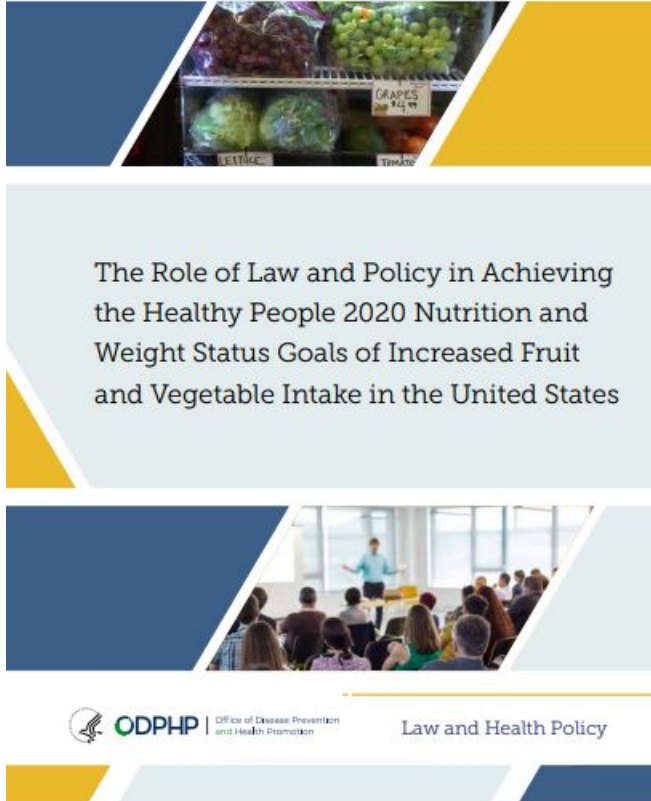
Why Use Law and Policy to Help Meet Healthy People Goals?



Social Determinants of Health



- Economic Stability
 - Food Insecurity
 - Housing Instability
- Health and Health Care
 - Access to Health Care (Oral Health)
- Neighborhood and Built Environment
 - Access to Foods that Support Healthy Eating Patterns
 - Crime and Violence
 - Environmental Conditions
 - Quality of Housing



Report - *"The Role of Law and Policy in Achieving the Healthy People 2020 Nutrition and Weight Status Goals of Increased Fruit and Vegetable Intake in the United States"*

- Selected HP2020 Objectives for this Report
 - **NWS-14:** Increase the contribution of fruits to the diets of the population aged 2 years and older
 - **NWS-15.1:** Increase the contribution of total vegetables to the diets of the population aged 2 years and older (LHI)
 - **NWS-15.2:** Increase the contribution of dark green vegetables, red and orange vegetables, and beans and peas to the diets of the population aged 2 years and older

Report available at:

https://www.healthypeople.gov/sites/default/files/LawHealthPolicy_Report_2018.10.pdf

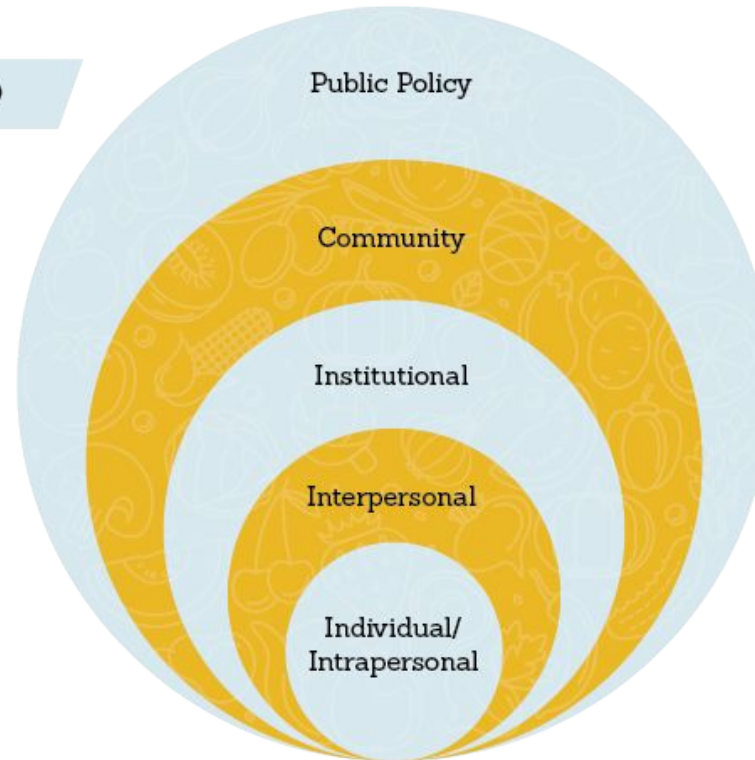
Where Can Law and Policy Intervene to Encourage Increased Fruit and Vegetable Intake?

Public Policy (Social, political, and economic factors)

- Food availability
- Population food security
- Supplemental nutrition programs
- Food labeling requirements
- Patterns of food production and sales initiatives

Community

- Geographic factors
- Community gardens
- Relationships with local farms and agricultural industry strengthened
- Cultural norms
- Evidence-based nutrition fostered in charitable and congregate settings



Institutional (Schools and ECEs, governments, food retailers, food producers, and employers)

- Fruits and vegetables required to be included in meals prepared or purchased
- Healthy nutritious foods prioritized
- Availability of fruits and vegetables in retail ensured
- Nutrition incorporated into wellness initiatives

Interpersonal

- Household food norms and traditions
- Peer support
- Food insecurity

Individual/Intrapersonal

- Knowledge
- Genetic and learned preferences for taste
- Ability to grow, purchase and prepare food

- Conclusions were that:
- To be most effective, laws and policies designed to meet these these targets will need to be both innovative and based upon the best scientific research.
- Also, to help the Nation meet these health objectives, it's important to:
 - Continue to implement laws and policies related to nutrition standards
 - Continue to advance alignment efforts among all federal food programs and policies
 - Encourage opportunities for policy innovations at the state and local levels
 - Consider geography, environment, and community needs in policy development
 - Expand the focus on reaching young children
 - Conduct rigorous evaluations of existing programs and policies

Nutrition and Weight Status Report Bright Spot - The Healthy Diné Act of 2014

- Encouraged healthy eating, eliminating food deserts, and indigenous foods
- Added 2% tax on food of little or no nutritional value
- Earmarked revenues for efforts to improve food environment
- Related law removed 5% sales tax on fruits and vegetables



Disability and
Health

Healthcare-
Associated
Infections

Health Equity

Healthy People
2030

Leading Health
Indicators

Maternal, Infant,
and Child Health

Mental Health and
Mental Disorders

Nutrition and
Weight Status

Oral Health

Policy Levers

Substance Abuse



Office of Disease Prevention
and Health Promotion

- For more on the Healthy People Initiative:
www.healthypeople.gov
- For more about the Law and Health Policy project:
<https://www.healthypeople.gov/2020/law-and-health-policy>



What Works: Evidence-Based Legal Interventions for Public Health Practice

Presenter: Megan A. Kelly, JD, MPH

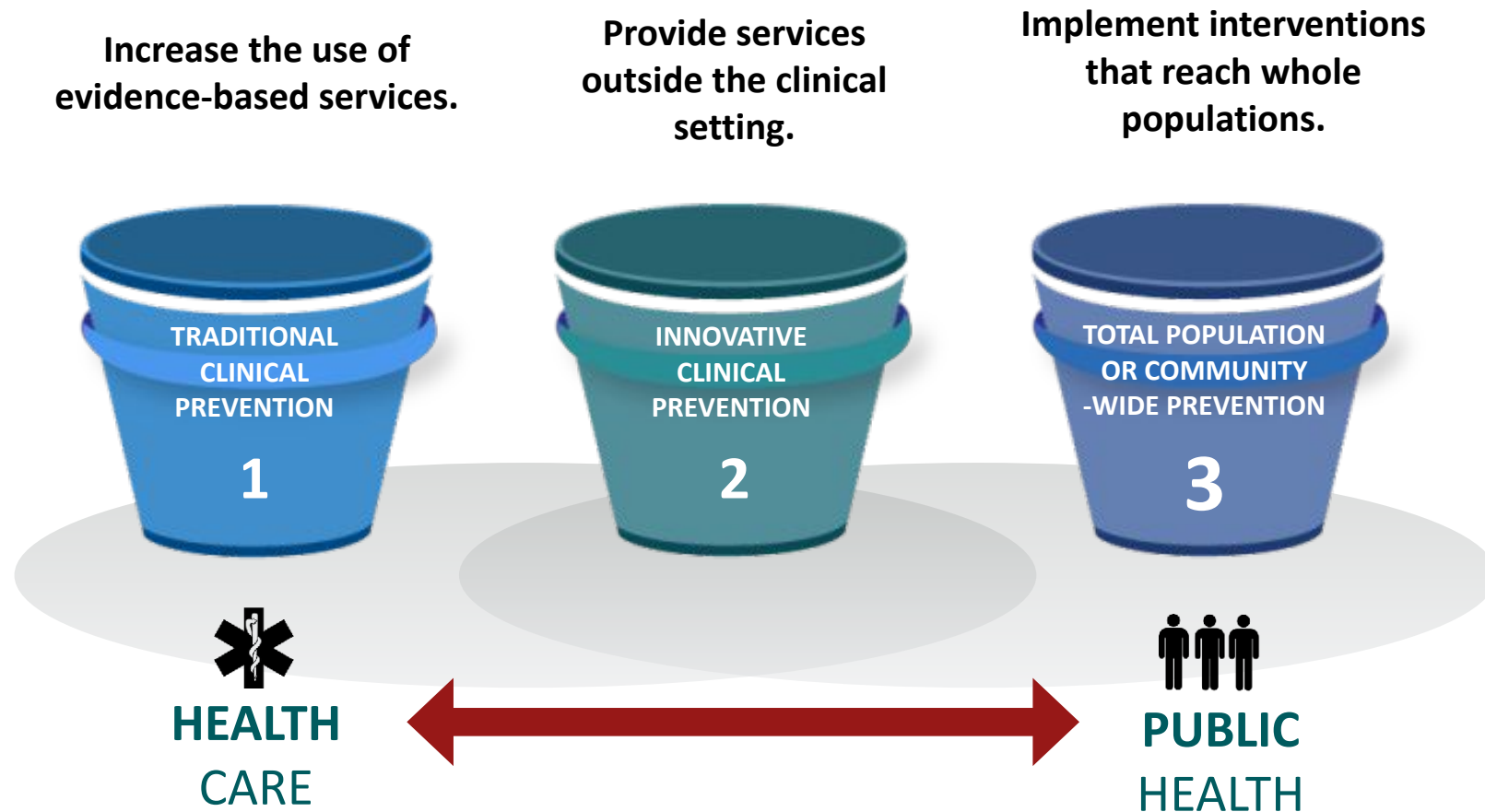
Co-author: Dawn Pepin, JD, MPH

Office of Policy Analytics and Population Health (OPAPH) (proposed)
Office of the Associate Director for Policy and Strategy (OADPS)
Centers for Disease Control and Prevention

September 22, 2021

Background

The "BUCKETS" of Prevention Framework





HEALTH **IMPACT** IN 5 YEARS

where it
begins.



LIVE



LEARN



WORK



PLAY

Healthy communities are a good value for all

14 Evidence-based, Community-Wide Interventions

Evidence Brief for each at www.cdc.gov/hi5

Change the Context: Making the Healthy Choice the Easy Choice

- School-based Programs to Increase Physical Activity
- School-based Violence Prevention
- Safe Routes to School (SRTS)
- Motorcycle Injury Prevention
- Tobacco Control Interventions
- Access to Clean Syringes
- Pricing Strategies for Alcohol Products
- Multi-Component Worksite Obesity Prevention

Address the Social Determinants of Health

- Early Childhood Education
- Clean Diesel Bus Fleets
- Public Transportation System Introduction or Expansion
- Home Improvement Loans and Grants
- Earned Income Tax Credits
- Water Fluoridation



Legal High Impact Policies (HIP)

Legal HIP

- **Law can**
 - Support an intervention
 - Fund an intervention
 - Be the intervention
- **Search terms:**
 - Law
 - Legislation
 - Regulation
 - Statute
 - Ordinance
 - Legal



Sources: Interventions for Legal HIP

County Health Rankings and Roadmaps (CHRR): What Works for Health

- Include only legal-based interventions
- Include interventions that are scientifically supported, have some evidence or are backed by expert opinion

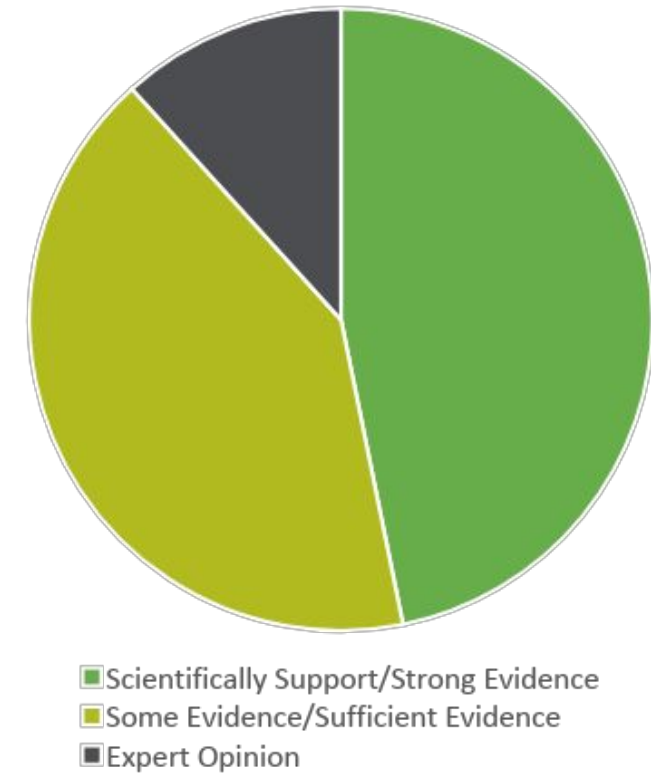
The Guide to Community Preventive Services (The Community Guide)

- Include only legal-based interventions with completed systematic reviews
- Include only recommended interventions, which can be based on either strong evidence or sufficient evidence

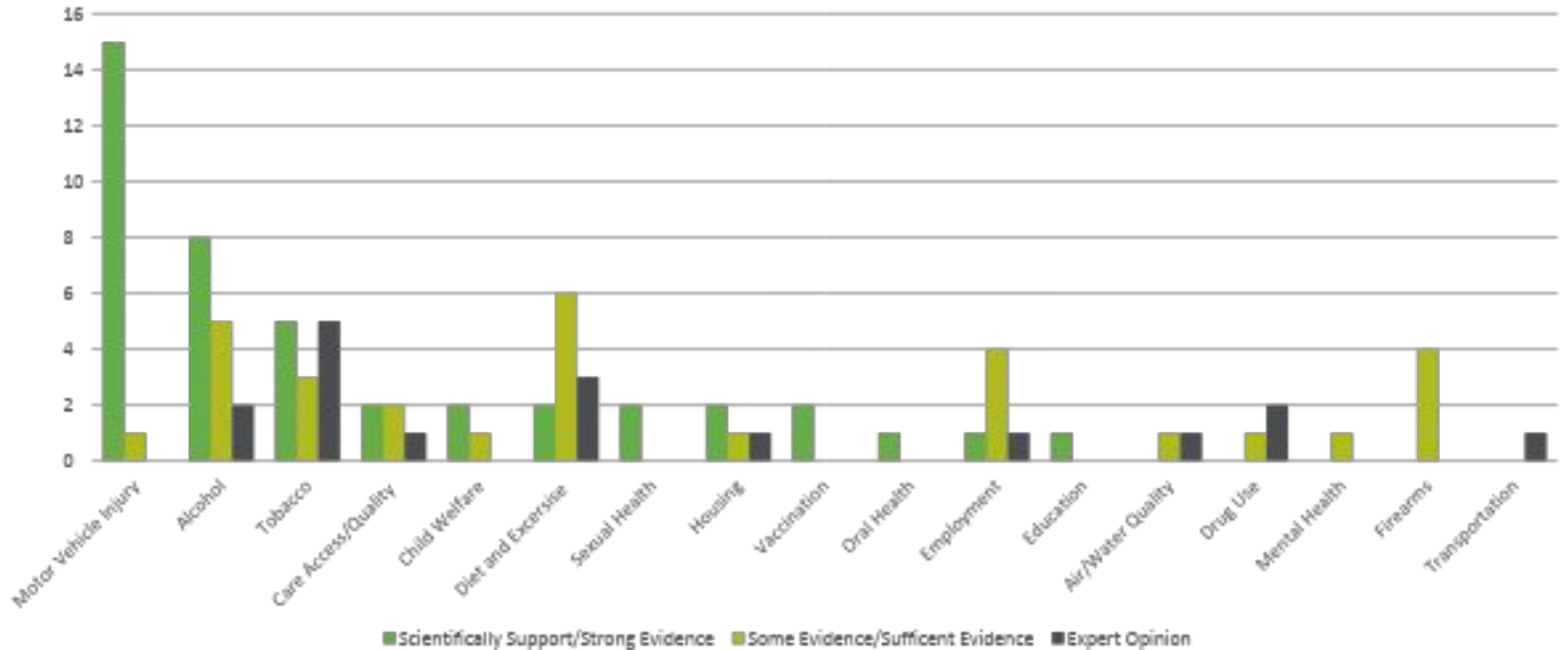
Types of Studies Reviewed in Legal HIP

- **Strong Evidence/Scientifically Supported**
 - 44 Interventions
- **Sufficient Evidence/Some Evidence**
 - 39 Interventions
- **Expert Opinion (from CHRR)**
 - 11 Interventions

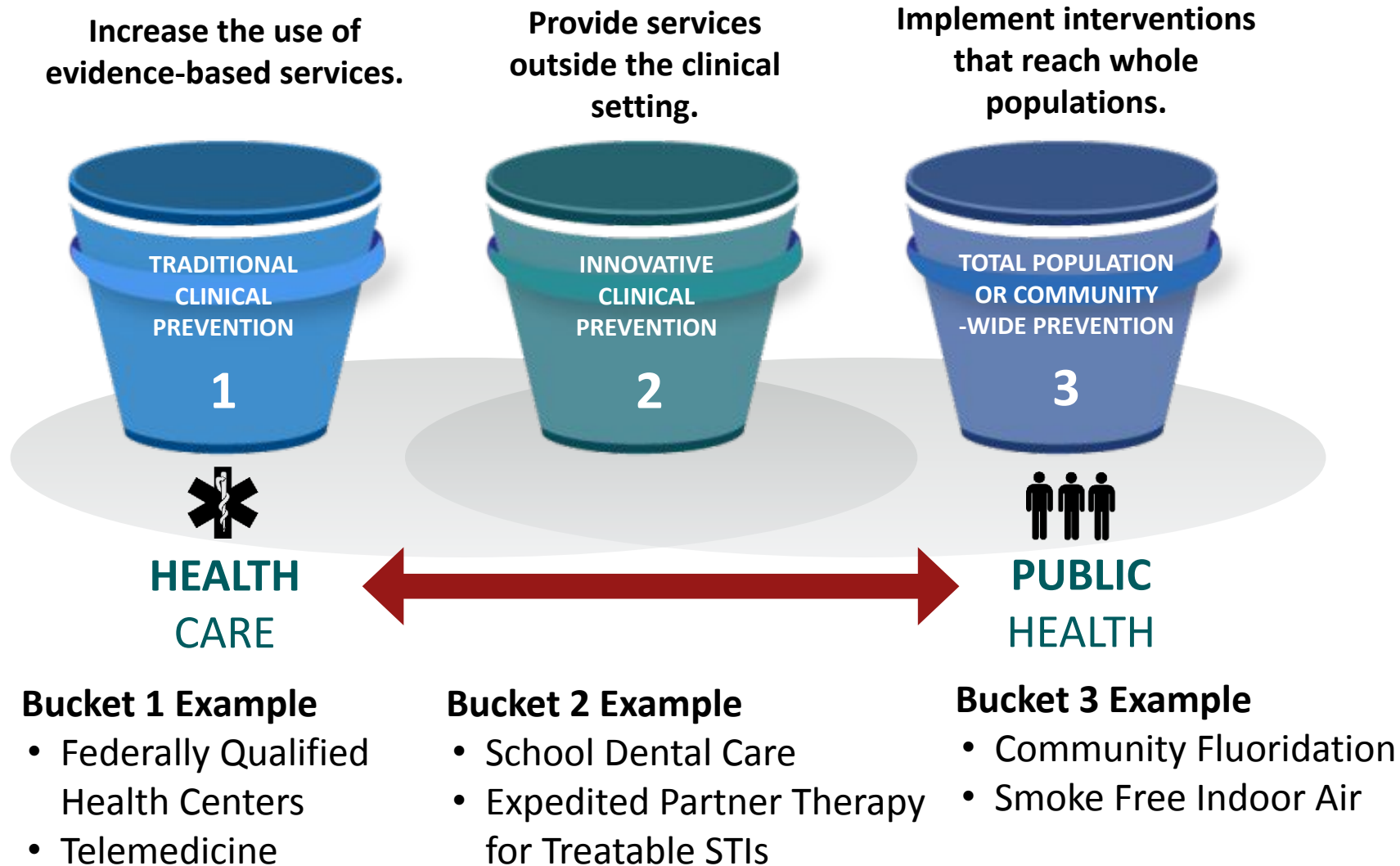
Types of Evidence in the Review



Interventions by Category in Legal HIP



Legal HIP: Examples in the "BUCKETS"



Legal HIP and SDOH

SDOH Domains & Legal HIP Examples

Education Access and Quality

- Early Head Start, CHRR

Economic Stability

- Paid Family Leave, CHRR

Social and Community Context

- Kindship Foster Care for Children in the Child Welfare System, CHRR
- Comprehensive Risk Reduction Sexual Education, CHRR



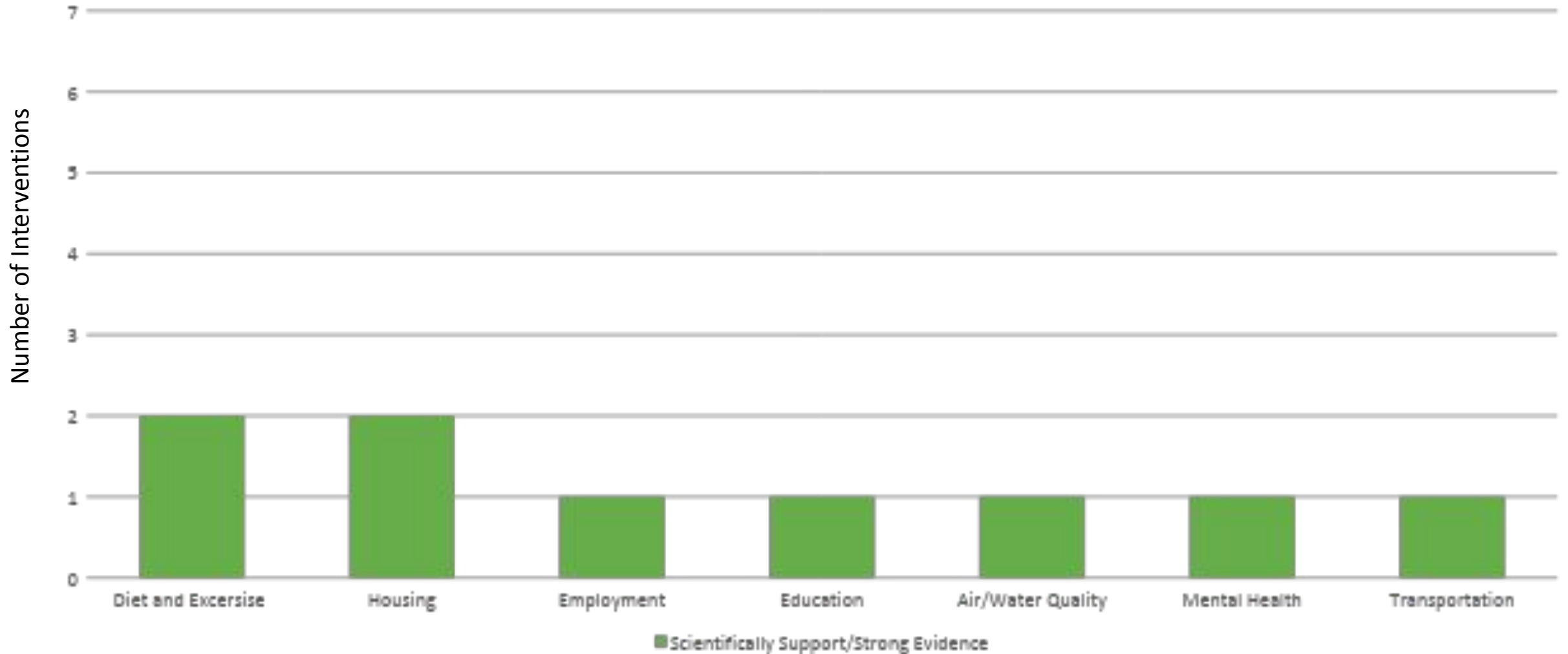
Health Care Access and Quality

- Vaccination Programs – Standing Orders, CG
- Nurse Practitioner Scope of Practice, CHRR

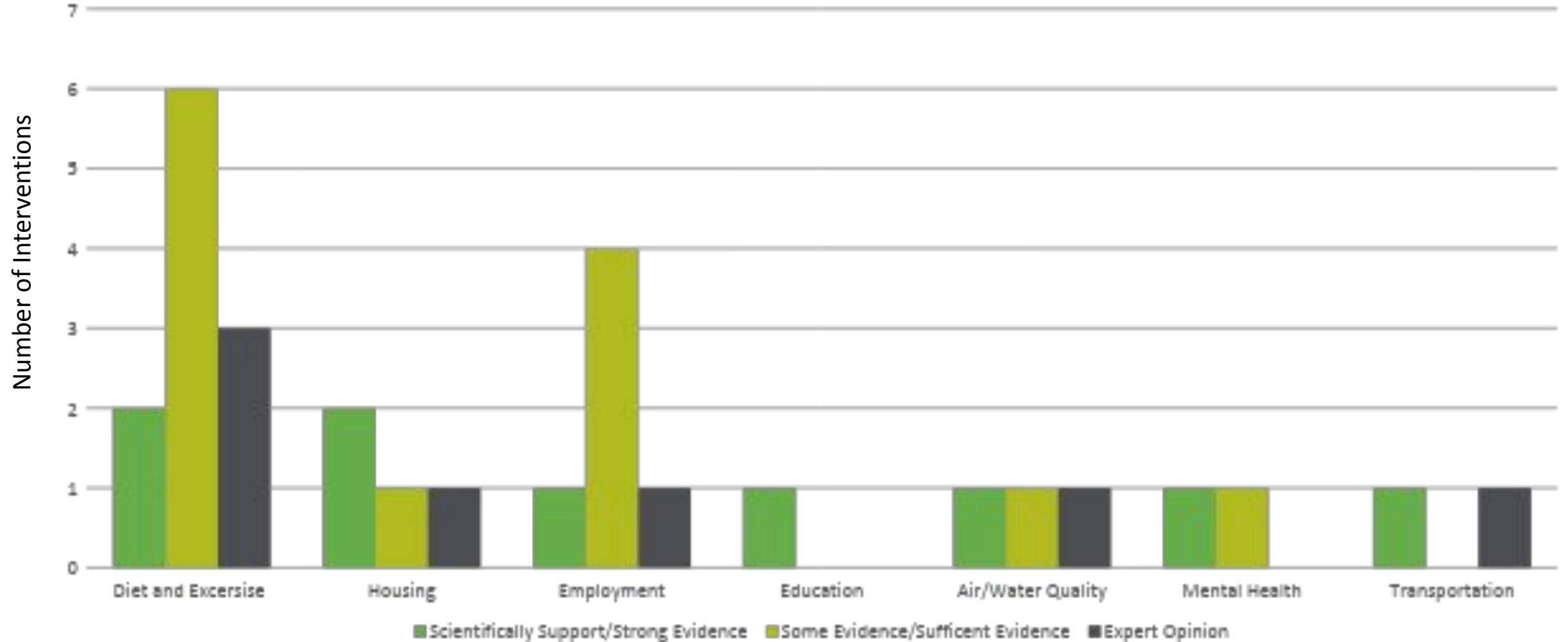
Neighborhood and Built Environment

- Zoning Regulations for Land Use, CHRR
- Lead Abatement Programs, CHRR
- Safe Routes to Schools

Legal HIP: SDOH Interventions by Category & Level of Evidence



Legal HIP: SDOH Interventions by Category & Level of Evidence



Economic Stability

Scientifically Supported

- Earned Income Tax Credit, CHRR
- Paid Family Leave, CHRR

Some Evidence

- Paid Sick Leave Laws, CHRR

Earned Income Tax Credit

“Receipt of the EITC decreases the incidence of low birthweight births (Markowitz 2017, Hamad 2015, Strully 2010), particularly among black mothers (Hoynes 2015). Effects may be larger with more generous EITCs (Markowitz 2017*). EITC receipt is associated with improved maternal (Evans 2014) and child health (Averett 2018*, Arno 2009), including reduced infant mortality (Arno 2009) and increased breastfeeding rates (Hamad 2015).” CHRR*

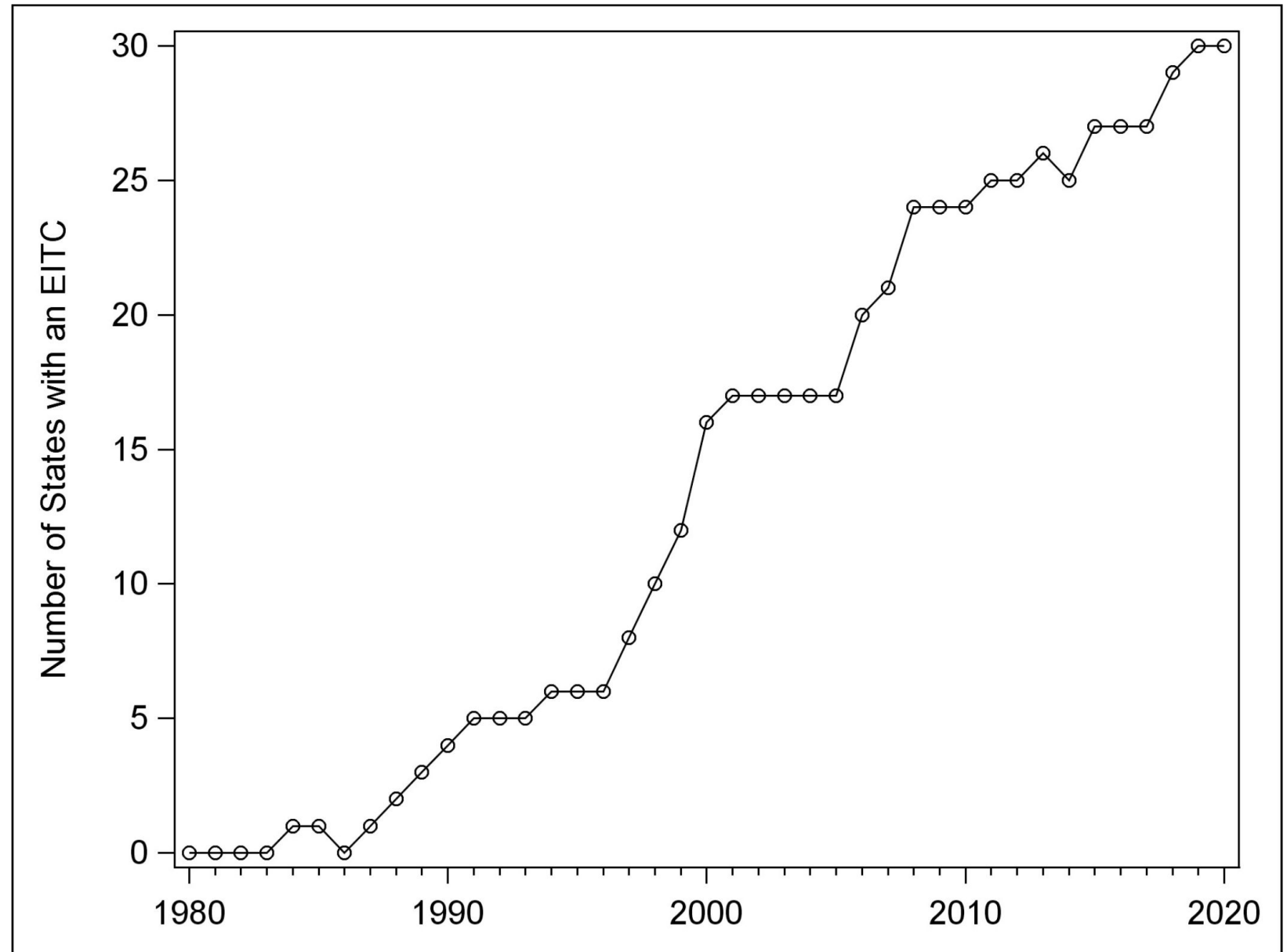
RESEARCH ARTICLE

Anti-poverty policy and health: Attributes and diffusion of state earned income tax credits across U.S. states from 1980 to 2020

Kelli A. Komro^{1*}, **Phenese Dunlap¹**, **Nolan Sroczynski¹**, **Melvin D. Livingston¹**, **Megan A. Kelly²**, **Dawn Pepin²**, **Sara Markowitz³**, **Shelby Rentmeester¹**, **Alexander C. Wagenaar¹**

1 Department of Behavioral, Social, and Health Education Sciences, Rollins School of Public Health, Emory University, Atlanta, Georgia, United States of America, **2** Policy Research, Analysis, and Development Office, Office of the Associate Director for Policy and Strategy, Centers for Disease Control and Prevention, Atlanta, Georgia, United States of America, **3** Department of Economics, Emory University, Atlanta, Georgia, United States of America

**Figure 1: U.S.
states
adoption of
EITC by year**



Komro, et al. Anti-poverty policy and health: Attributes and diffusion of state earned income tax credits across U.S. states from 1980 to 2020. PLoS One. 2020 Nov 20;15(11):e0242515.

EITC Diffusion Study: Conclusions and Implications

- Variations exist across states and time for key policy components
 - Eligibility
 - Size of credit
 - Refundability
- EITC benefits vary by household structure
- Continued research on health outcomes is warranted
- This work illustrates a multi-disciplinary collaboration between lawyers, policy analysts, epidemiologists, and economists
- Dissemination of research findings has taken different forms
 - Conversation with the Authors
 - Dataset is publicly available (CSV data file in [Appendix S4](#))
 - Visual Abstract

EITC Diffusion Study: Conclusions and Implications

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Community-wide Health Improvement Initiatives



www.cdc.gov/socialdeterminants



[www.cdc.gov/h
i5](http://www.cdc.gov/h
i5)

Megan Kelly
nkn4@cdc.gov

Dawn Pepin
ykj6@cdc.gov

For more information, contact CDC
1-800-CDC-INFO (232-4636)
TTY: 1-888-232-6348 www.cdc.gov



The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.



Improving in Health & Well-being for All by 2030 Perspectives from the Advisory Committee

Therese S. Richmond PhD, RN, FAAN
Andrea B. Laporte Professor
Associate Dean for Research & Innovation

Law and Policy as Tools in Healthy People 2030

Joel Teitelbaum, JD, LLM; Angela K. McGowan, JD, MPH; Therese S. Richmond, PhD, RN, FAAN;
Dushanka V. Kleinman, DDS, MScD; Nico Pronk, PhD, MA, FASCM, FAWHP; Emmeline Ochiai, MPH;
Carter Blakey, BS; Karen H. Brewer, MPH



Science, Law & Policy

Science

- Informs new laws & policies
- Provides robust & rigorous non-partisan evaluation
- Supports the removal of laws & policies that contribute to health inequities

Essential Ingredients

- Partnerships with stakeholders from all sectors
- High quality, representative data
- Frequently collected data
- Data released in a timely manner & available to researchers
- Funding for policy relevant research
- Policy makers who value rigorously produced evidence & will act on that evidence

Key Points

- Law & policy have enduring effects
- Action & opportunity at the state & local levels
- Law & policy are inextricable from politics
- Data are necessary but insufficient

Law & Policy: Enduring Effects

Reduce firearm-related deaths — IVP-13

Objective Overview

Data

Data Methodology and
Measurement

Evidence-Based Resources

Status: Little or no detectable change 

[Learn more about our data release schedule](#)



Most Recent Data:
11.9 firearm-related
deaths per 100,000
population (2019)



Target:
10.7 per 100,000



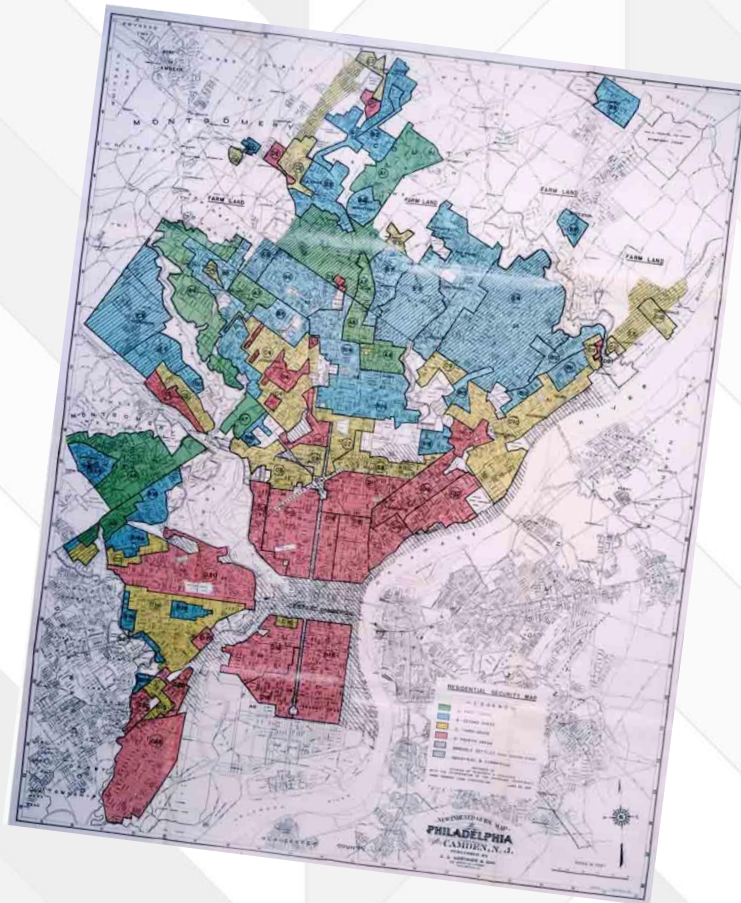
Desired Direction:
Decrease desired



Baseline:
11.9 firearm-related deaths per 100,000 population occurred in 2018 (age adjusted to the year 2000 standard population)

Law & Policy: Enduring Effects

J.M. Brewer's 1937 Home Owners Lending Corporation (HOLC) Map

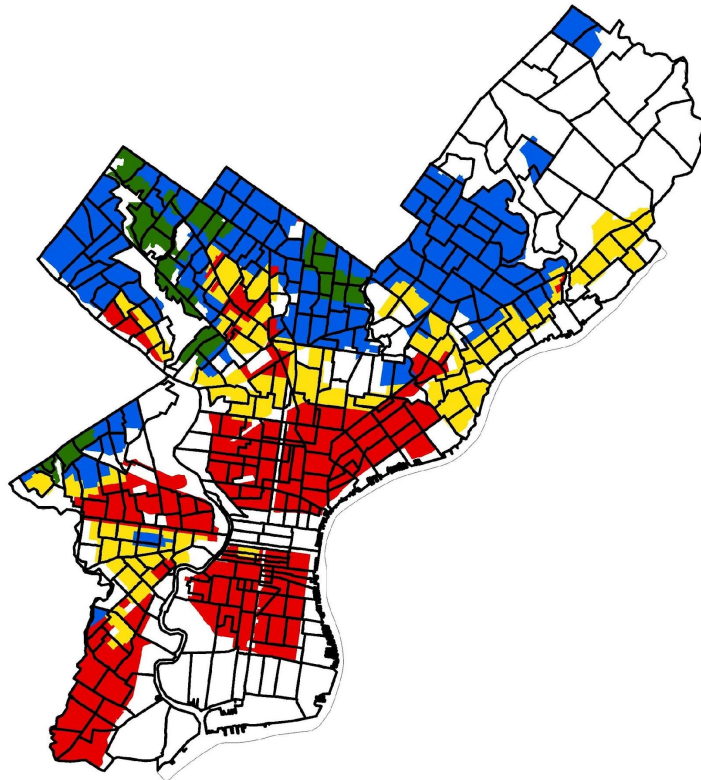


Redlining

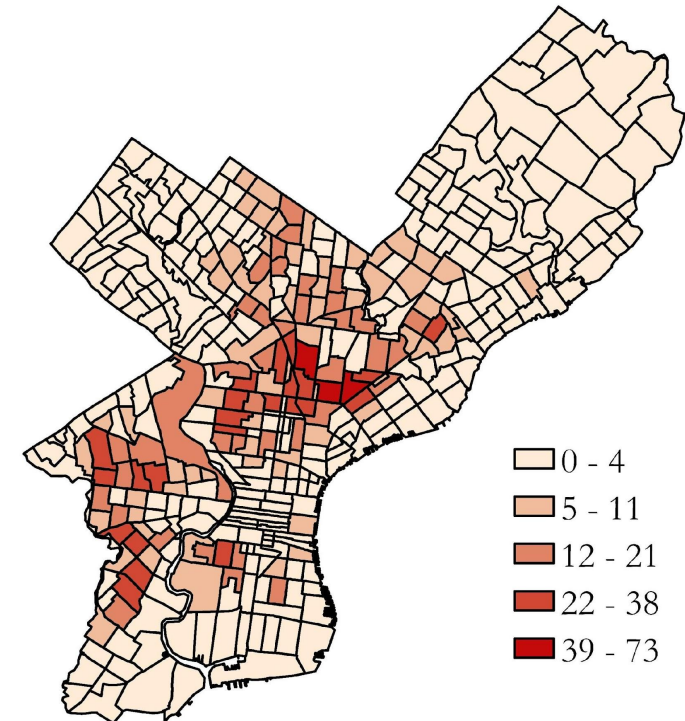
The enduring impact of historical and structural racism on urban violence in Philadelphia

Sara F. Jacoby, PhD, MPH ^{a, c, *}, Beidi Dong, PhD ^a, Jessica H. Beard, MD, MPH ^{a, b},
Douglas J. Wiebe, PhD ^{a, d}, Christopher N. Morrison, PhD ^{a, e}

Digitized HOLC Map



Firearm Assaults 2013-2014



In the aftermath of the Great Depression, the U.S. government set out to evaluate the riskiness of mortgages — and left behind a stunning portrait of the racism and discrimination that has shaped American housing policy.

Action & Opportunity at State/Local Levels

Reduce homicides — IVP-09



Objective Overview

Data

Data Methodology and
Measurement

Evidence-Based Resources

Status: Little or no detectable change 

[Learn more about our data release schedule](#)



Most Recent Data:
6.0 homicides per
100,000 population
(2019)



Target:
5.5 per 100,000

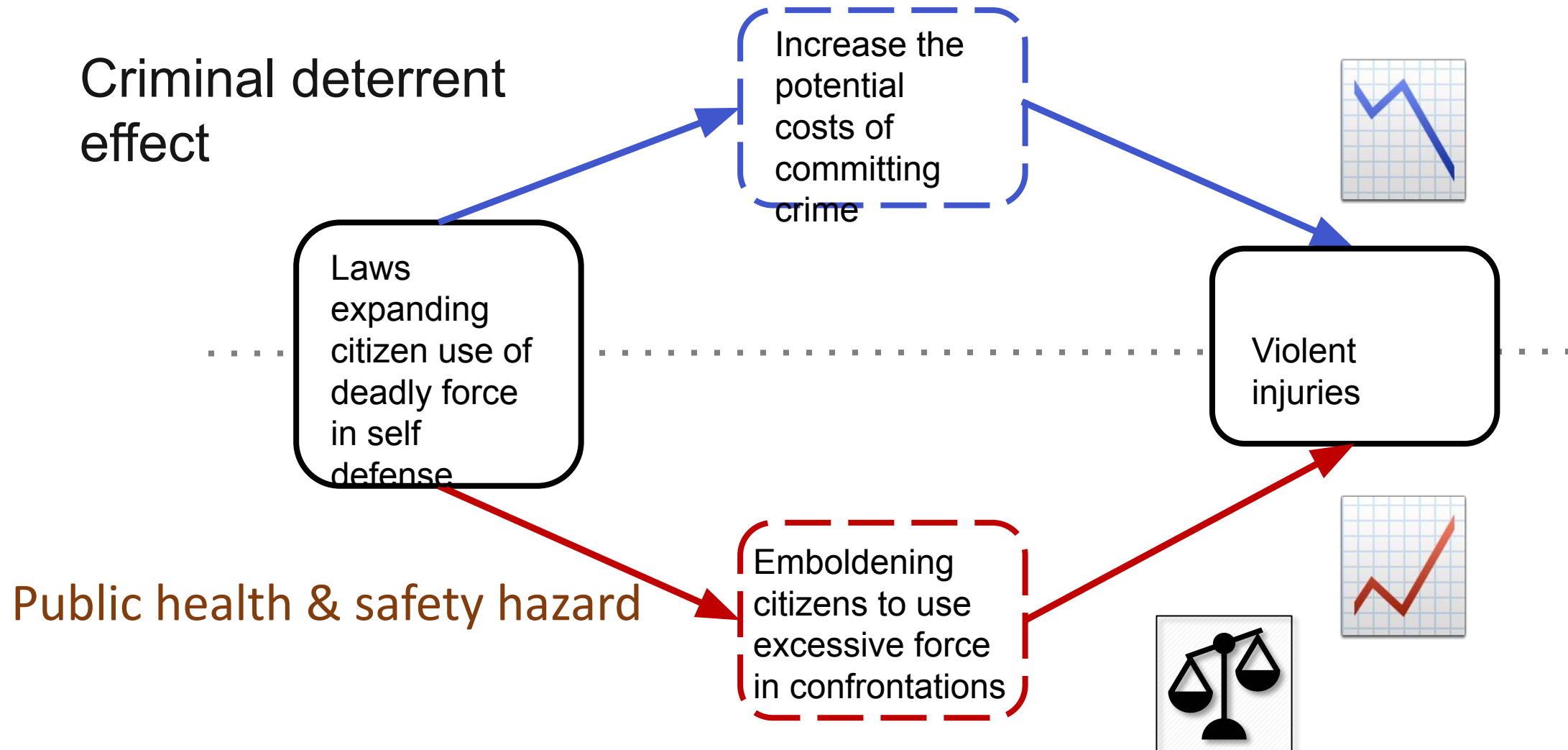


Desired Direction:
Decrease desired



Baseline:
5.9 homicides per 100,000 population occurred in 2018 (age adjusted to the year 2000 standard population)

Do Stand your Ground Laws reduce Homicides?



Research

JAMA Internal Medicine | [Original Investigation](#) | FIREARM VIOLENCE

Evaluating the Impact of Florida's "Stand Your Ground" Self-defense Law on Homicide and Suicide by Firearm An Interrupted Time Series Study

David K. Humphreys, PhD; Antonio Gasparrini, PhD; Douglas J. Wiebe, PhD

IMPORTANCE In 2005, Florida amended its self-defense laws to provide legal immunity to individuals using lethal force in self-defense. The enactment of "stand your ground" laws in the United States has been controversial and their effect on rates of homicide and homicide by firearm is uncertain.

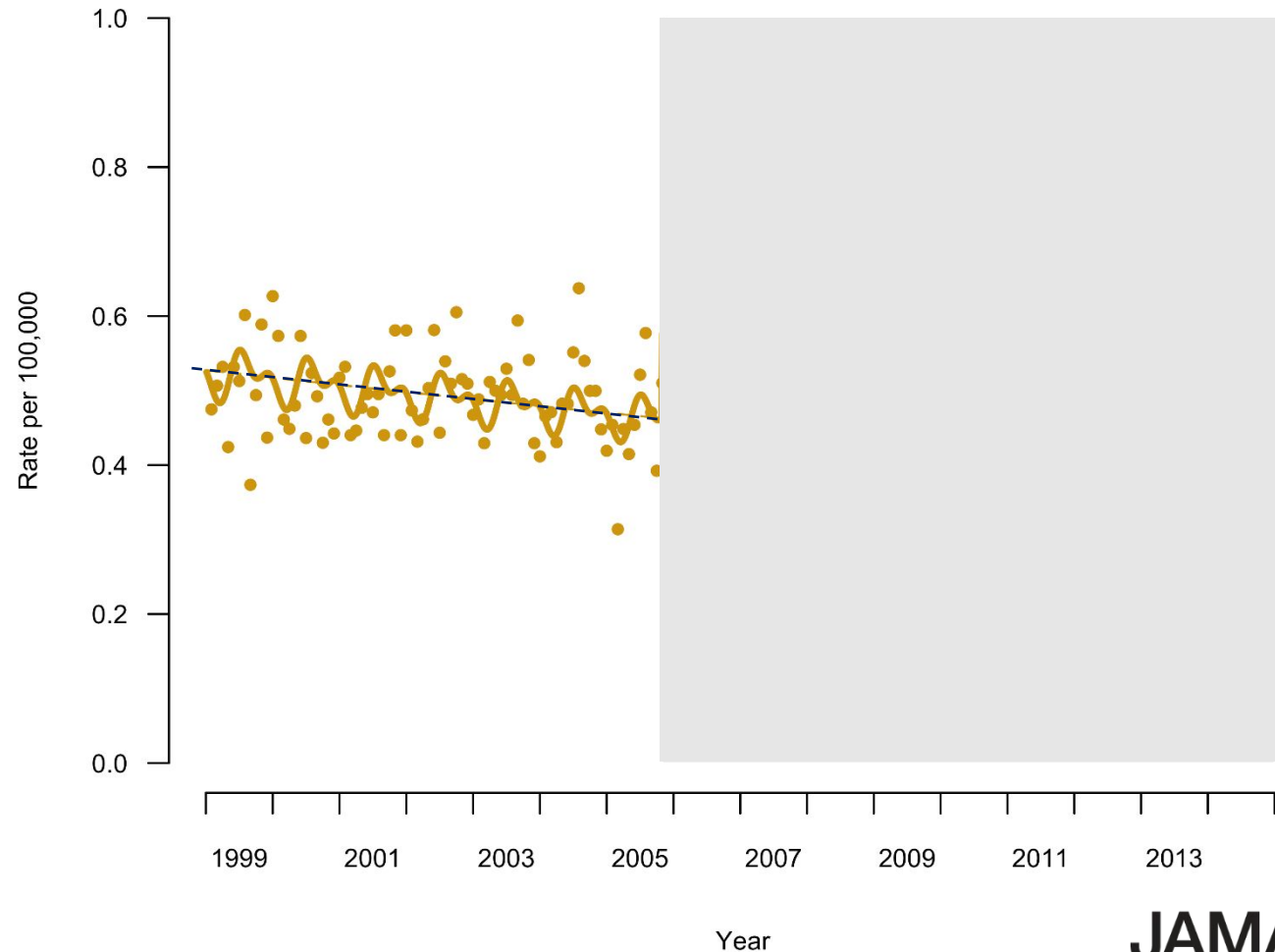
OBJECTIVE To estimate the impact of Florida's stand your ground law on rates of homicide and homicide by firearm.

DESIGN, SETTING, AND PARTICIPANTS Using an interrupted time series design, we analyzed monthly rates of homicide and homicide by firearm in Florida between 1999 and 2014. Data

[+ Author Audio Interview](#)

Homicide Rates in Florida

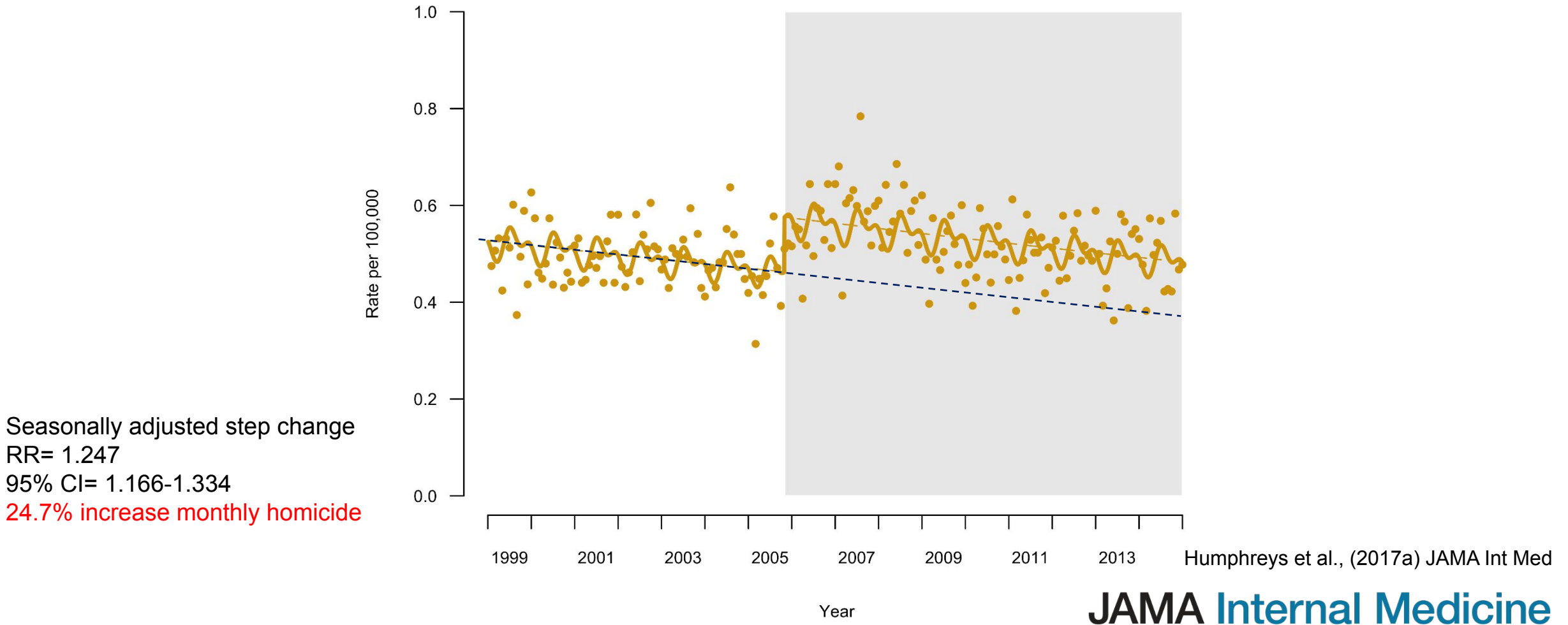
Figure 1: Monthly rates of all homicide in Florida 1999–2014



Humphreys et al., (2017a) JAMA Int Med

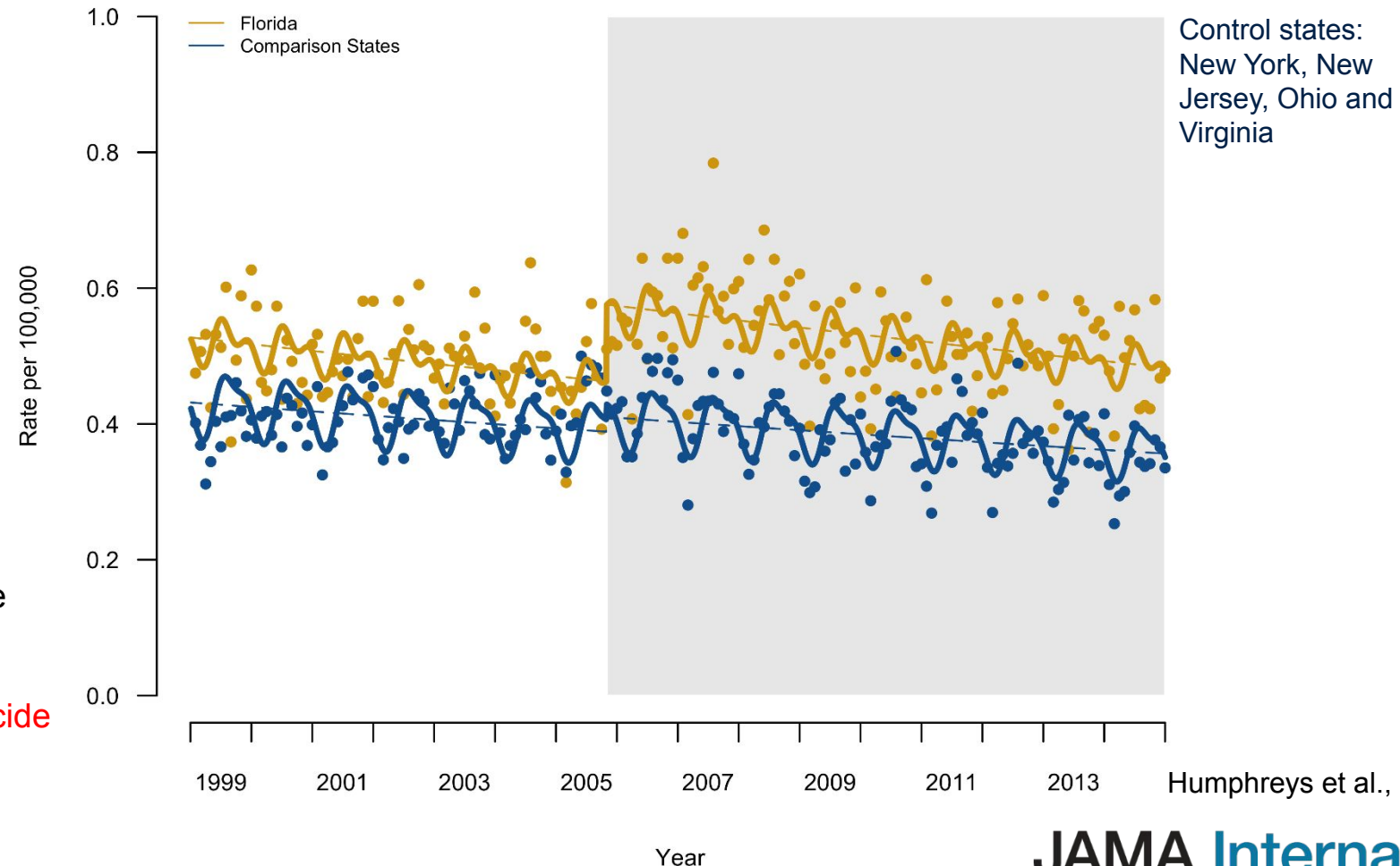
Homicide Rates in Florida

Figure 1: Monthly rates of all homicide in Florida 1999–2014



Homicide Rates in Florida

Figure 1: Monthly rates of all homicide in Florida 1999–2014



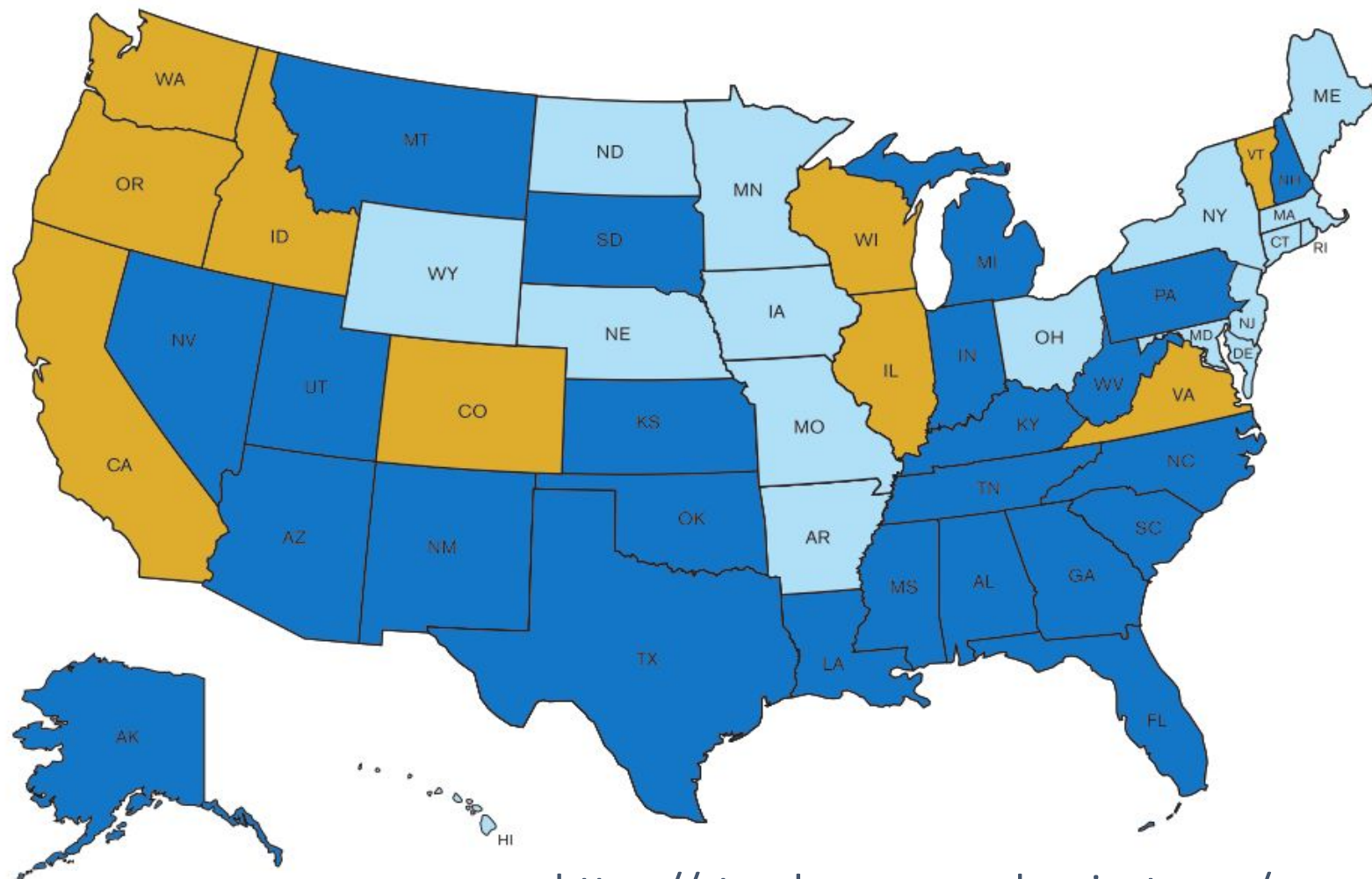
Seasonally adjusted step change
RR= 1.247
95% CI= 1.166-1.334
24.7% increase in monthly homicide

Intervention x control
= $p < .0001$

Humphreys et al., (2017a) JAMA Int Med

Stand Your Ground Laws By State

● SYG by Statute ● SYG by Case Law ● Duty to Retreat



<https://standyourgroundproject.com/research>

Law & Policy are Inextricable from Politics

Reduce consumption of added sugars by people aged 2 years and over — NWS-10



Objective Overview

Data

Data Methodology and
Measurement

Add to Custom List

Status: Baseline only 

[Learn more about our data release schedule](#)



Most Recent Data:
13.5 percent
(2013-16)



Target:
11.5 percent



Desired Direction:
Decrease desired



Baseline:
13.5 percent was the mean percentage of calories from added sugars consumed by persons aged 2 years and over in 2013-16 (age adjusted to the year 2000 standard population)

Law & Policy are Inextricable from Politics



Law & Policy are Inextricable from Politics

RESEARCH & ANALYSIS 

State Preemption: An Emerging Threat to Local Sugar-Sweetened Beverage Taxation

Eric Crasbie, PhD, Jennifer L. Pomeranz, JD, MPH, Kathrine E. Wright, PhD, MPH, Samantha Hoeper, MSc, and Laura Schmidt, PhD, MSW, MPH

The tobacco industry weaponized preemption in the 1980s,¹¹ followed by the firearm industry in the 1990s.⁶ Since 2000, state preemption has had

an impact on a growing range of policy innovations



Data are Necessary but Insufficient

Reduce drug overdose deaths — SU-03



Objective Overview

Data

Data Methodology and
Measurement

Evidence-Based Resources

Status: Getting worse ⊖

[Learn more about our data release schedule](#)



Most Recent Data:
21.6 drug-overdose
deaths per 100,000
population (2019)



Target:
20.7 per 100,000



Desired Direction:
Decrease desired



Baseline:
20.7 drug overdose deaths per 100,000 population occurred in 2018 (age adjusted to the year 2000 standard population)

Data are Necessary but Insufficient

Meisel et al. *Substance Abuse Treatment, Prevention, and Policy*
<https://doi.org/10.1186/s13011-019-0199-0>

(2019) 14:12


Substance Abuse Treatment,
Prevention, and Policy

RESEARCH

Open Access

Strengthening partnerships between
substance use researchers and policy
makers to take advantage of a window of
opportunity



Zachary F. Meisel^{1,2,3*} , Julia Mitchell², Daniel Polsky^{3,2}, Nada Boualam³, Ellen McGeoch³, Janet Weiner^{3,2},
Matthew Miclette², Jonathan Purtle⁴, Bruce Schackman^{5,2} and Carolyn C. Cannuscio^{6,1,3}

Policymakers Perspectives

- Engagement with evidence & evidence producers
 - Reach out to personal networks & researchers
 - Relationship continuity
 - Formal reports from trusted sources
- Usability of research
 - Cost & economic data (social vs. organizational cost)
 - Coarse vs. precise
- Balancing rigor & relevance
 - Frustration with jargon, overly technical language, relevance to their needs
- Communication of evidence & analysis
 - Desire for researchers to be involved in policy discussions

Meisel et al. *Substance Abuse Treatment, Prevention, and Policy* (2019) 14:12
<https://doi.org/10.1186/s13011-019-0199-0>

Substance Abuse Treatment,
Prevention, and Policy

RESEARCH

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- Law & policy have enduring effects on health & well-being
- Action & opportunity at the state & local levels
- Law & policy are inextricable from politics
- Data are necessary but insufficient



2021

**PUBLIC HEALTH LAW
CONFERENCE**

**Building and Supporting
Healthy Communities for All**

**Sep. 21-23, 2021
PHLC2021.org
#PHLC2021**

Discussion



Thanks!

Please remember to fill out the conference survey location in the description of this session