

The American Heart Association's Approach to Advocacy

- Identify and aggressively advocate for policies that advance and support the mission, strategic priorities & health impact goals
- Serve as a <u>credible</u>, <u>nonpartisan</u>, <u>evidence-based</u> resource that public officials can rely for vital information relating to heart disease and stroke
- Influence policy at the federal, state and local levels
- Embedded in our work is the commitment to improve the lives of all Americans by assuring our advocacy efforts work to eliminate health disparities, including racial, ethnic, gender and socioeconomic disparities.

 American Heart Stroke

Anchors of Advocacy

AHA advocacy goals are achieved through efforts in four specific areas:



POLICY RESEARCH

- Policy development
 - Translating
 science/experiential
 evidence into policy that will have a health impact
- Policy Evaluation
- Policy Statements
 - Putting the AHA on record
- Review of Legislation/Regulatory Comments
- Managing External Relationships/Coalitions Relevant to our Work

- Partnering with other organizations in policy development/research
- Fact Sheets
- Reviewers for policyrelated journals
- Reviewers for national surveillance systems (esp. CDC)
- Development of strategic policy agenda



- TEN YEAR STRATEGIC VISION AND IMPACT GOAL
 - Advocacy Aligns
- THREE YEAR STRATEGIC PLAN
 - 3-year Strategic Policy Agenda
- ANNUAL REVIEW
 - Federal, State and Local Prioritization



The AHA's Strategic Policy Checklist: A rigorous process for choosing our priorities

- Evidence Assessment
- Strategic Alignment
- Health Impact
- Feasibility
- Ability to address SDOH
- Positioning
- Grassroots/Vol Engagement
- Level of Risk
- Internal Will
- Resource Commitment
- Likelihood of Success



Evidence-based Policy Making

- Guided by our scientific foundation
 - AHA Scientific statements and clinical guidelines
 - Other landmark science
 - Evidence –based assessment tools (e.g. Community Guide, USPSTF)
 - Experiential evidence

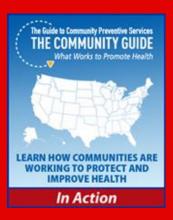
Evidence-Based Policy Making: Assessment of the American Heart Association's Strategic Policy Portfolio

A Policy Statement From the American Heart Association

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Strategic Priorities 2017-20

- Heart Disease and Stroke Research
- Prevention
 - Nutrition
 - Physical Activity
 - Tobacco
 - Air Pollution
- Access to Care
- Quality and Value of Care
- Post-event Rehabilitation
- Surveillance
- Non-Profit Issues

- Cross Cutting Issues
 - High Blood Pressure
 - Cholesterol
 - Telehealth





Latest Issue of the Policy Report



www.heart.org/policyreport

www.heart.org/burden



PROJECTIONS CVD INDIRECT COSTS THROUGH 2035

Cardiovascular disease not only exacts a heavy toll on the health of Americans, its economic burden is enormous. Right now it is America's costliest disease, and this price tag will soar in the coming decades.

"In 2016, CVD cost America \$555 billion. By 2035, the cost will skyrocket to \$1.1 trillion."

	Current (In Billions)	2035 (In Billions)
High Blood Pressure	\$42	\$67
Coronary Heart Disease	\$99	\$151
Congestive Heart Failure	\$11	\$19
Stroke	\$30	\$49
Atrial Fibrillation	\$7	\$11
Other	\$48	\$71
Total Medical Costs	\$237	\$368



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Peer Reviewed Policy Statements

- AHA Policy Research Department works with leading experts around the world
- Position the American Heart Association on issues that will impact cardiovascular health and mortality, guide our advocacy work at all levels of government, and inform:
 - Policy makers
 - Practitioners
 - Health care professionals
 - Researchers
 - Media
 - Public.
- Cited by the US Surgeon General, WHO, CDC, EU Publications, and NASEM.
- Published in AHA journals as well as other leading American Properties of the Published in AHA journals as well as other leading American Properties of the Published in AHA journals as well as other leading American Properties of the Published in AHA journals as well as other leading American Properties of the Published in AHA journals as well as other leading American Properties of the Published in AHA journals as well as other leading American Properties of the Published in AHA journals as well as other leading American Properties of the Published in AHA journals as well as other leading American Properties of the Published in AHA journals as well as other leading American Properties of the Published in AHA journals as well as other leading American Properties of the Published in AHA journals as well as other leading American Properties of the Published in AHA journals as well as other leading and the Published in AHA journals as well as other leading as well as well as well as well as well

AHA Policy Statements

- Cited thousands of times, billions of impressions in US and global media outlets, shared on social media, and read throughout the world.
- Contributing to the national and international policy dialogue.
- 73% of AHA policy statements are in the top 25% of all research tracked by Altmetric, over half of our statements are in the top 10% and 40% are in the top 5%. AHA policy statements are consistently in the top 10% in the journals in which they are published and for articles of the same age.







Measuring the impact of our policy work

- Population Reach
 - Potential vs. Actual
- Strategically-aligned Health Impact Measures/Surveillance Systems
- Modeling
- Pre/Post Implementation



Recent Federal Wins

- Three years of budget increases for the NIH
- Budget increases for the CDC's Division for Heart Disease and Stroke Prevention
- National Coverage Determination for Exercise Therapy in Peripheral Artery Disease
- Preservation of ACA
- Stronger nutrition standards in schools



Updates from the States

- More than 2.26 million high school students in 37 states and DC will learn CPR before they graduate.
- Cook County, IL, Boulder, CO, Seattle, WA, and Albany, Oakland, and San Francisco, CA passed sugary drink taxes-impacting more than 7 million people across these communities.
- CT, DE, IN, MO, SC, and PA became the latest states to recognize all three tiers of nationally certified stroke care facilities ensuring close to 37 M people in the two states and more than 215,000 patients that suffer from stroke each year will benefit from improved stroke systems of care.
- CA and PA increased their state's tobacco taxes. CA also increased funding for tobacco control and approved enhancements to its tobacco cessation services.
- CA and RI aligned state policy to current federal nutrition standards so close to 7 million kids will have healthier foods at school, more than half of which are students eligible for free or reduced-price lunch. In Chesterfield County, VA legislation has been passed to eliminate marketing of unhealthy foods and beverages in schools.

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• 13 communities and 1 state have dedicated funds to make it safer and easier for more than 67 million people to walk and ride bicycles.

Voices for Healthy Kids

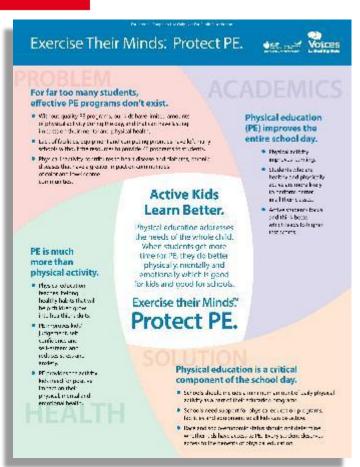




Campaign Development

Key Components

- Campaign Brand
- Policy Research
- Legal Research
- Message Research
- Grassroots Advocacy
- Media Advocacy
- Decision-maker Engagement



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- Legislative, technical, policy and campaign consultation
- Access to legal counsel to ensure funding is maximized and stays within c3 limits



Policy Successes

A study published in 2016 in the *American* Journal of Public Health affirmed the model when it reported that Voices for Healthy Kids support—both financial and through technical assistance and support—could increase the chances of passing state policy by 50%.

Bleich, Sara N, et al. *The Voices for Healthy Kids Campaign and US State Legislation to Prevent Childhood Obesity.* American Journal of Public Health: March 2016, Vol. 106, No. 3: 436-439

Policy Successes

The Voices for Healthy Kids initiative achieved 56 policy wins in 2016-2017, impacting an estimated 88,564,054 people across the country.

Questions?

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