

# Policy and Policy Briefs

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# Learning Objectives

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**At the end of this module, you will be able to:**

- **Define policy and policy brief**
- **Explain how health policy is formed**
- **Describe components of a policy brief**



# Module Requirements

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For this module, you will need to have the following ready:

- **The Participant Guide**
- **The Policy Brief titled: “KY Price of Smoking Policy Brief”**
- **The Policy Brief Checklist**



You can find these in the “Slack Channel [#d2p\\_module\\_resources](#)”

# What is Policy?

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# Many Types of Policy

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## 1. **Laws (including enforcement)**

- Strongest tool, difficult to pass, take a long time

## 2. **Regulations**

- Create limits; made by Ministries or other parts of gov't; usually require laws to create and enforce

## 3. **Procedures/Guidelines**

- Describe an accepted standard of practice (e.g., in a school or hospital); may require laws to make them

## 4. **Incentives (financial or non-financial)**

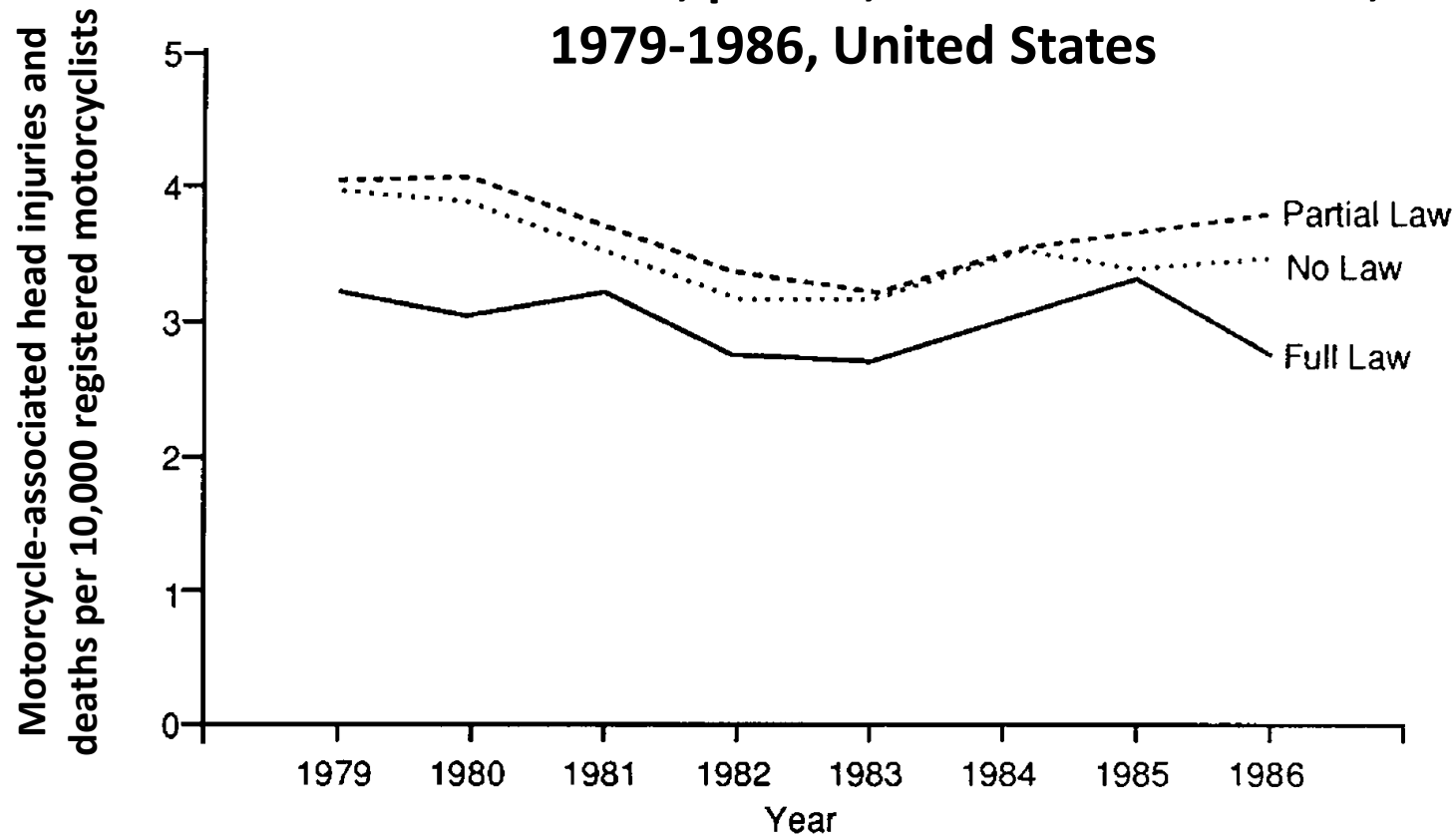
- Motivate change in behavior or organizational practices

## 5. **Resource allocation**

- Changing the way funds are divided

# Laws – Motorcycle Helmets (U.S.)

**Motorcycle-associated head injuries and deaths in states with full, partial, and no helmet laws, 1979-1986, United States**



# Regulations – Tobacco sales (South Africa)

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- In 1994, South Africa passed Tobacco Control Act
- In 1995, “Regulations Relating to the Labelling, Advertising and Sale of Tobacco Products”
  - Regulation is under the authority of the Tobacco Control Act
  - Requires warning labels on cigarette packages and advertisements



# Procedures/Guidelines – Indoor Residual Spraying (Asia)

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- Asia Pacific Malaria Elimination Network released guidelines for indoor residual spraying (2012)
- Included information on mapping, mixing, training, and spraying
- Non-binding (released by NGO) but could be binding if released by MOH





# Incentives – Tuberculosis (Swaziland)

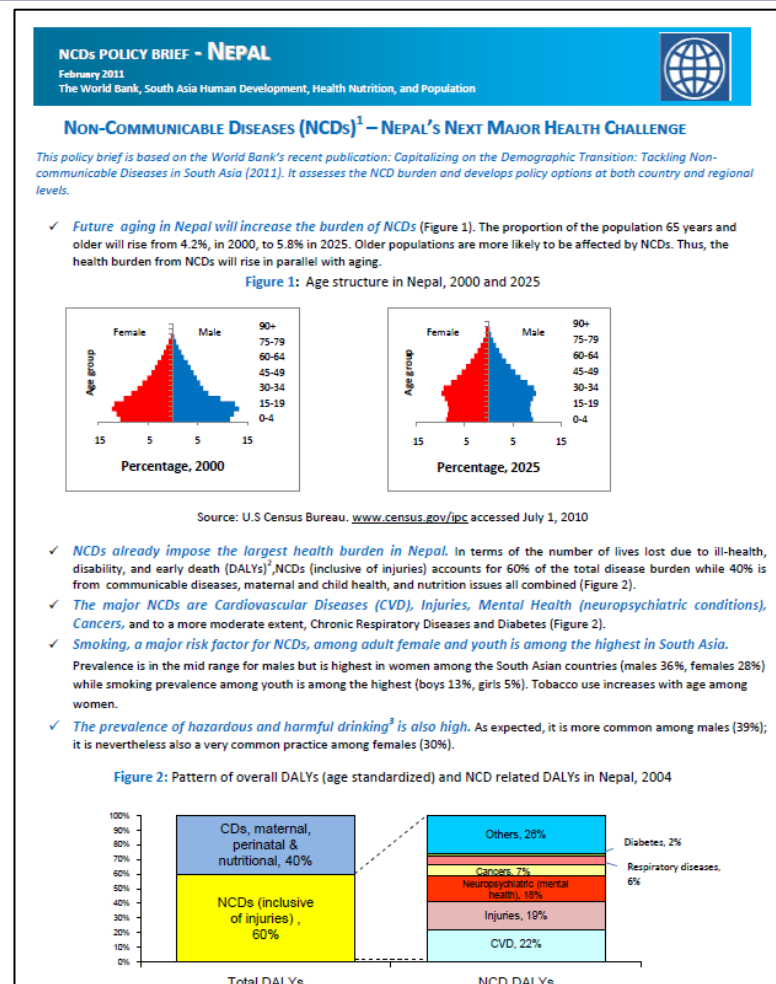
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- **Swaziland: Highest TB incidence in the world, very poor treatment success rates**
  - National TB Emergency Response Plan 2010/3 calling for financial incentives to social workers for successful treatment doubled success rates



# Resource Allocation – NCDs (Nepal)

- Non-communicable diseases (NCDs) accounted for 60% of the disease burden in Nepal in 2011
- However, little funding was directed towards NCDs; focus was primarily on infectious diseases

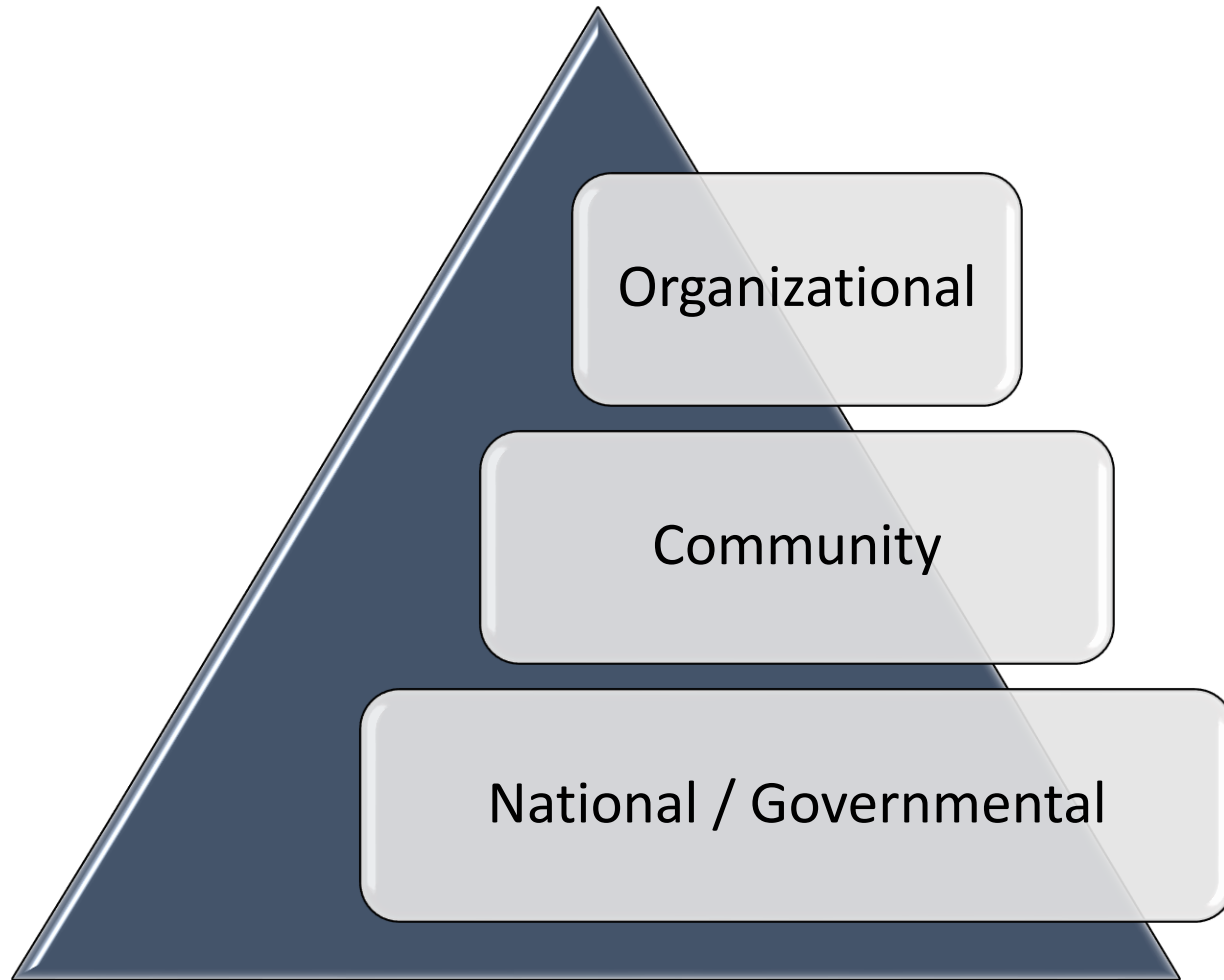


# Policy and Public Health

- **Policy plays a critical role in public health**
- **Policy affects both “traditional” diseases and other health risk factors or behaviors.**

# Policy Can Be Implemented at Multiple Levels

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# Review Question: What is Policy?

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**Q: Which of the following is NOT a policy?**

- ☐ **A:** A federal law mandating fines for bus operators
- ☐ **B:** A district's recommendation that parents bring their children to get vaccinated
- ☐ **C:** An individual's decision to exercise every day for a year
- ☐ **D:** A community decides to provide a small refund to members who recycle their old batteries instead of throwing them away

**PAUSE**

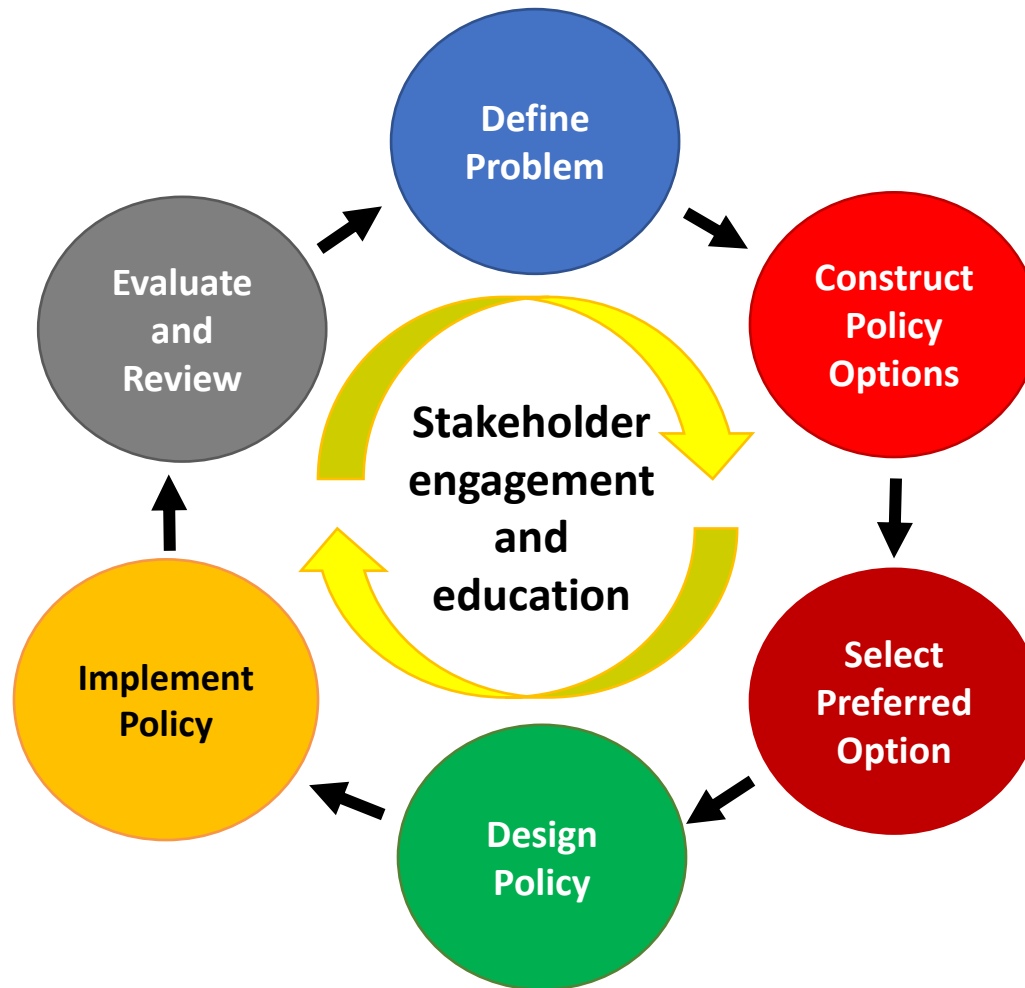
Go to your participant guide and answer the question in your guide.

# How Policy is Made

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# The Policy-Making Process is Cyclical

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# Influences Beyond Data

***“Clearly, evidence plays only part of a role in the decision-making process... Research is ‘one voice in a noisy room’ that must compete directly with easily accessible and influential sources such as newspapers and television.”***  
- Young & Quinn, 2012



## Other ‘voices’:

- Experience / personal views
- Lobbyists / opinion leaders / special interest groups
- Availability of resources
- Political climate
- Habit/tradition



# Overview of the Policy Brief

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# Policy Brief: Definition

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- A concise document that presents findings of policy-relevant data analyses, and evaluates policy options for non-technical audiences.
- Includes:
  - Context, scope, and impact of the problem
  - Viable solutions
  - Rationale for changing policies
- **Offers evidence for policy change!**

# Why Develop a Policy Brief?

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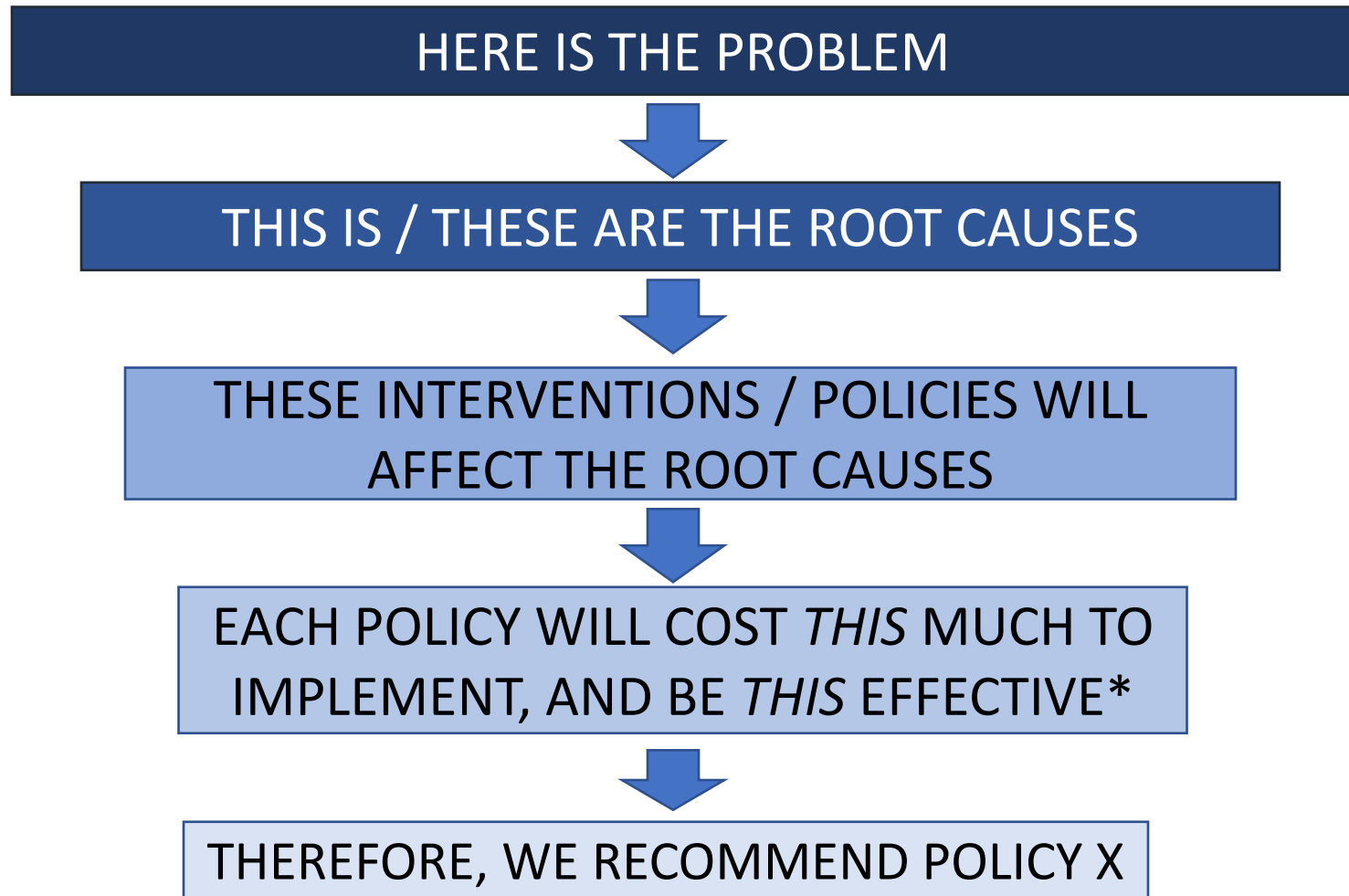
**Policy-makers have little time,  
and often do not have advanced  
technical skills.**

## **A policy brief:**

- Translates data and scientific information into understandable format
- Engages stakeholders who can act or advocate for changes needed to address health problems
- Communicates the importance of policy development or changes to decision makers

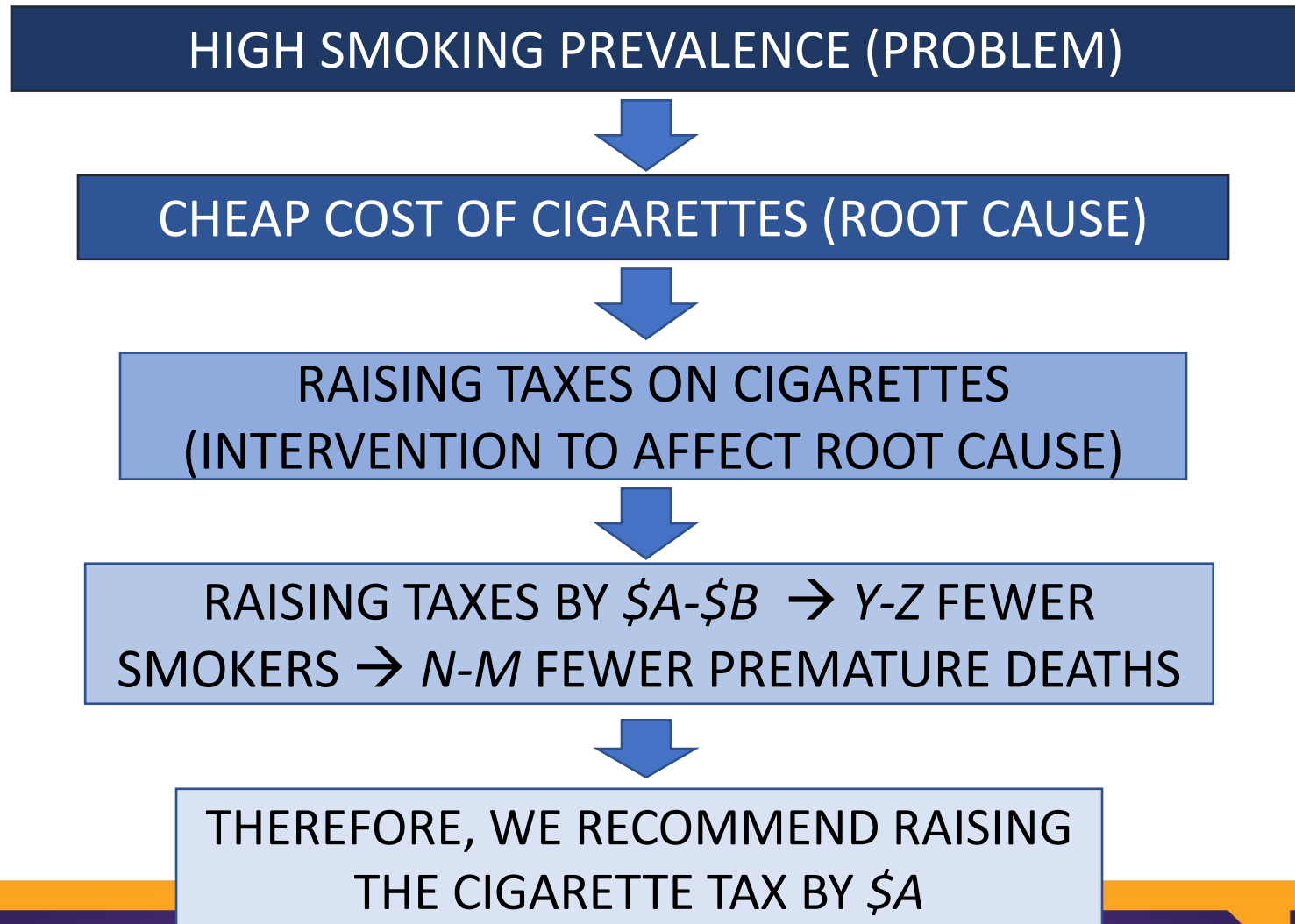
# Narrative / Storyline of a Policy Brief

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# Narrative / Storyline of a Policy Brief

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## The Price of Smoking

The Case for Increasing Kentucky Cigarette Taxes

# PAUSE

Go to your participant guide and answer the question in your guide.

### Reducing Smoking and The Case for Increasing Cigarette Taxes

Smoking is the single leading preventable cause of death and disability in the United States, causing cancer, cardiovascular disease, and chronic lung disease, among others, of which contributes to escalating health care costs. The evidence is clear that raising cigarette taxes reduces smoking, saves lives, lowers health care costs and generates much-needed state revenue. With the highest rate of adult smoking and one of the lowest cigarette taxes in America, Kentucky would benefit significantly by increasing the tax on cigarettes.



- What do you think this brief? Are you convinced that cigarette rates are a problem in Kentucky? Provide a strong case for raising cigarette taxes?

# Structure of a Policy Brief

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- 1. Title**
- 2. Key Messages**
- 3. Problem Statement or policy issue**
- 4. Policy Options**
- 5. Recommendation**
- 6. Resources/References**

# 1. Title

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- Captures the reader's attention; memorable
- Generates interest in the content of the brief
- Should be short – 10-15 words is enough!



## **The Price of Smoking**

**The Case for Increasing Kentucky's Cigarette Tax**



## 2. Key Messages

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- **One- or two-paragraph summary containing:**

- Description of the problem
- Statement on what change is needed
- Recommendation

### **Reducing Smoking The Case for Increasing Cigarette Taxes**

Smoking is the leading preventable cause of death and disability in the United States. It causes cancer, cardiovascular disease, and chronic obstructive pulmonary disease, among other conditions. The treatment of these diseases is expensive, and the evidence is clear that raising cigarette taxes reduces smoking, saves lives, lowers health care costs and generates much-needed state revenue. With the highest rate of adult smoking and one of the lowest cigarette taxes in America, Kentucky would benefit significantly by increasing the tax on cigarettes.

**PAUSE**

Go to your participant guide and answer the question in your guide.

# 3. Problem Statement

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- **Clearly identifies the health issue leading to the brief**
  - The public health problem
  - The main *modifiable driver* of the problem (root cause)
- **Describes the situation from a local perspective**
  - Quantifies the problem & impact on public health
  - Summarizes data, presenting it visually
  - Discusses data published by other local sources
  - Describes previous efforts to address the issue
- **Provides data from a global/regional perspective, if needed**
- **1-2 pages**

### 3. Problem Statement

#### **Smoking in Kentucky—We're Number 1!**

A 2007 assessment of Kentuckians' health by the Institute of Medicine at the University of Kentucky confirmed a grim statistic—Kentucky

- Kentucky has the highest rate of adults who smoke (876,000 people).
- An estimated 100,000 students also smoke.
- Pregnant women in Kentucky have the national rate—one out of four pregnant women (26%) smoke in Kentucky.
- Almost half of smokers, 47.7%, have tried to quit.
- Over 45% of Kentucky children live in a household where someone smokes, compared to a national average of 29.5%.

**PAUSE**

Go to your participant guide and answer the question in your guide.

## 4. Policy Options

- Outlines and compares up to three viable options (interventions) and their implications

### The Public Health and Economic Benefits of Increasing Kentucky's Cigarette Excise Tax

Benefit	30¢ Per Pack Increase	70¢ Per Pack Increase
Reduction in Youth Smokers	7.4% (24,500)	17.2% (57,300)
Future Youth Smoking Deaths Avoided	7,800	18,300
Lifetime of Health Savings from Reducing Youth Smoking (Millions)	\$428.8	\$1,002.8
Reduction in Adult Smokers	1.7% (15,500)	4.0% (36,200)
Future Adult Smoking Deaths Avoided	4,100	9,500
Lifetime Health Savings from Reducing Adult Smoking (Millions)	\$147.3	\$343.9
<b>Overall Long-Term Health Savings (Millions)</b>	<b>\$576.0</b>	<b>\$1,346.7</b>

Source: Campaign for Tobacco-Free Kids, Eric Lindbloom, 2008

# 5. Recommendation

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- **Should be specific, feasible, and practical**
- **Must be evidence-based; based on data presented in the brief**
- **Offers rationale for the option recommended**

## 5. Recommendation

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### **The Bottom Line Is Clear**

Raising Kentucky's cigarette tax closer to the national average will:

- Reduce smoking in Kentucky, currently with the highest rate in the nation, by over 17% for young people and 4% for adults
- Reduce the number of annual smoking-related deaths from the current level of 7,700
- Reduce the \$1.5 billion in smoking-related health costs and \$2.1 billion in lost productivity
- Increase much-needed state revenue by more than \$240 million per year

## 6. Resources/References

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- 5-10 usually sufficient – a brief is not a manuscript!
- The purpose is to offer a foundation for the issue
- May use peer-reviewed publications, locally-available data, or other relevant publications



## 6. References

### **Data Sources**

Kentucky Cigarette Excise Tax Increases:  
Estimated New Revenues, Cost Savings,  
and Other Benefits and Effects,  
Campaign for Tobacco-Free Kids,  
Lindbloom, October 2007

Kentucky State Survey Results, Campaign  
for Tobacco-Free Kids, 2007

Map of State Cigarette Tax Rates, Campaign  
for Tobacco-Free Kids, November 2007

Macro-Social Influences: The Effects of  
Prices and Tobacco Control Policies  
on the Demand for Tobacco Products,  
Nicotine & Tobacco Research, Frank  
Chaloupka, 1999



# Review Question: Policy Influences

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**Q: Which of the following affect whether or not a policy is adopted? (select all that apply)**

- ☐ Current
- ☐ Tradition
- ☐ Evidence
- ☐ Advocacy
- ☐ Available resources

**PAUSE**

Go to your participant guide and answer the question in your guide.

# Policy Brief Checklist

POLICY BRIEF CHECKLIST		
Name of Brief/Presenter: _____		
Component	Criteria	✓
<b>Title</b>	<ul style="list-style-type: none"> <li>Short: 15 words or less</li> <li>Attention-getting/memorable</li> </ul>	
<b>Key Messages</b>	<ul style="list-style-type: none"> <li>Appears on first page</li> <li>Short; limited to 1 paragraph or bulleted list</li> <li>Concise; clearly distills essence of brief</li> <li>Compelling; motivates reader to keep reading</li> </ul> <p><i>Big picture: Is the problem being addressed clear?</i></p>	
<b>Problem Statement</b>	<ul style="list-style-type: none"> <li>Problem/issue clearly outlined (size, cause, implications)</li> <li>Describes situation from local perspective                             <ul style="list-style-type: none"> <li>Quantifies the problem, including size and consequences</li> <li>Includes data visualization</li> <li>Describes previous efforts to address issue</li> </ul> </li> <li>Describes issue from a global/regional perspective, if applicable</li> <li>Describes the impact of the policy issue on health</li> </ul> <p><i>Big picture: Will the reader agree that the problem being addressed is important, and requires relatively immediate action?</i></p>	
<b>Policy Options</b>	<ul style="list-style-type: none"> <li>Potential solutions presented and supported by data</li> <li>No more than three options offered</li> <li>Policy options clearly described</li> <li>Options thoroughly evaluated</li> </ul> <p><i>Big picture: Will the reader be convinced that one or more solutions represent the best path forward?</i></p>	
<b>Recommendation/ Action Steps</b>	<ul style="list-style-type: none"> <li>One specific recommendation presented</li> <li>Evidence-based / well supported</li> </ul> <p><i>Big picture: Are there clear actions outlined to make the recommendation a reality?</i></p>	
<b>References/ Resources</b>	<ul style="list-style-type: none"> <li>Reasonable number of resources presented</li> <li>Contains quality, relevant resources</li> </ul>	
<b>Design and readability</b>	<ul style="list-style-type: none"> <li>Clear, impactful writing</li> <li>Easily understood by non-scientific audience</li> <li>Appropriate use of graphs, maps, models</li> <li>Preferably 2, but no more 4 pages in length</li> </ul>	
Overall impression/comments:		

# END