Welcome to Module 4. In this module, we will describe *The Spectrum of Prevention* framework and explore how it can be used to *Address Health Equity*.
Learning objectives:

Describe the importance of promoting a multi-faceted range of prevention activities to achieve environmental change

Utilize the Spectrum of Prevention to develop the essential components of a broad approach to prevent complex health and safety issues

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

• Describe the importance of promoting a multi-faceted range of prevention activities to achieve environmental change. And you will be able to
• Utilize the Spectrum of Prevention to develop the essential components of a broad approach to prevent complex health and safety issues.
In the previous module, we introduced a set of 18 community factors that influence health and safety. These factors were organized into four clusters: people, place, equitable opportunity and health care services. We noted that each of these factors have been linked to health behaviors and outcomes in the research literature. Finally, we emphasized that each factor is relevant—and can be acted upon--at the community level.
In this module, we will use what we learned about community factors and apply it to the *Spectrum of Prevention*.

The *Spectrum of Prevention* is a framework that includes 6 strategies. Each strategy is named in a colored band above.

Together, these strategies can be part of a single, comprehensive effort to address significant health and safety concerns. Activities under each strategy should support one another in a unified approach.

Follow along as we go through each strategy and see examples of how they have been applied.
Strengthening Individual Knowledge and Skills, is a strategy that will be familiar to most health practitioners.

Activities at this first level of the Spectrum typically focus on providing one-on-one education and skills-building opportunities that are designed to reduce a person’s risk of injury or illness or to increase their capacity to promote health and safety.
Peer education and counseling is one method for building individual knowledge and skills.
### The Spectrum of Prevention

<table>
<thead>
<tr>
<th>Influencing Policy and Legislation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Changing organizational practices</td>
</tr>
<tr>
<td>Fostering coalitions and networks</td>
</tr>
<tr>
<td>Educating providers</td>
</tr>
<tr>
<td>Promoting Community Education</td>
</tr>
<tr>
<td>Strengthening individual knowledge and skills</td>
</tr>
</tbody>
</table>

Promoting Community Education is an activity that many health-focused organizations are already engaged in.

This second level of the Spectrum focuses on reaching groups of people with information and resources to promote health and safety.
The “Strengths Campaign” by Men Can Stop Rape, is a D.C-based media education initiative designed to prevent rape and other forms of dating violence. Ads, posters and mini-magazines are combined with tools and training workshops to move high school youth—especially young men-- from “awareness into action”.

For more information: www.mencanstoprape.org
But it is not just health organizations that do community education. Here we see a major tobacco company using the internet to reach large groups of people with information about quitting smoking.
At the same time, mass media and marketing campaigns also reach large groups of people. Typically, such campaigns promote unhealthy products and their budgets dwarf most traditional community education efforts.
Still, strategic use of the media can be an effective part of an overall approach.

Here is another example of community education. PBS’s acclaimed documentary series: Unnatural Causes…Is inequality Making us Sick? is a groundbreaking effort to educate the general public on how social and physical circumstances—such as where we live, work and go to school have a powerful influence on health and safety outcomes. The documentary makes the case that our environment determines our health far more than our genetics or our access to health care services.

For more information: www.unnaturalcauses.org
Level 3, Educating Providers, is about training professionals and trusted individuals in the community to transmit skills and knowledge to others.
The Loving Support Breastfeeding Program

When people hear the term provider, they typically think of health care providers.

Here, lactation consultants have been trained to provide new mothers with information and support to begin breastfeeding.

For more information: www.rivco-nutrition.org/lovsup.htm
But the term provider can be applied to any individual in the community who has the power to reach large groups of people and promote health and safety.

In Texas, the Special Supplemental Nutrition Program for Women, Infants, and Children had found that many people eligible for WIC benefits were not using them. They addressed this in a creative and impactful way by conducting professional training for grocery store clerks. The clerks were taught how they could support the health of women and children in their community. The training covered the health benefits of supplemental nutrition and how the clerks could say and do things that would support—rather than discourage—women using WIC vouchers. In this way, the WIC program was able to increase the number of vouchers being redeemed by their clients and enlist a new group of unusual ‘providers’—grocery store clerks.
The fourth level of the Spectrum is Fostering Coalitions and Networks. Nowadays, coalitions and networks are common. They are most valuable when critical health and safety issues call for far-reaching approaches that no single organization can achieve by working alone. This fourth level of the Spectrum is especially critical to health equity efforts which will require the strengths and skills of many groups and sectors.
In St. Louis, Missouri a collaboration between faith-based health advocates, lay church members, academics, and businesses resulted in a thriving produce market for the African American community it served. The Garden of Eden market uses space donated by the church. Local businesses guided the design and layout of the market. A local supermarket chain trained community members in handling and service. Lay health workers provided health counseling and information to members of participating congregations. And community members provided input to the staffing and management of running the store. By working in collaboration, each partner made a unique contribution to this effort to increase access to healthy foods.
The image of a jigsaw puzzle might be a helpful metaphor. Let’s say that each sector or agency represents a puzzle piece. When assembling a collaborative to address health inequities, we’ll want to identify which pieces are part of the puzzle. Each piece serves its own unique purpose. Just as each agency makes its own unique contribution. We’ll also want to think about how all the pieces fit together. What are the relationships between agencies? In a collaborative, just as in a puzzle, when interlocked together, a whole that is much greater than the sum of its pieces can emerge.

In Module 5, we will go more in-depth on how to build effective partnerships for health equity.
The Spectrum’s 5th level is Changing Organizational Practices.

Every organization has a set of practices and policies to guide it.

Some organizational practices contribute to health and safety. Others reinforce inequitable health and safety outcomes.

Activities at this level of the Spectrum are designed to shape organizational practices that support health and safety.

Activities at this level can focus on major community institutions, the organization you work for, community based organizations or any organization with the power to make changes that promote equity.
In many cities, libraries have adopted organizational practices to support health and safety. In Los Angeles, the libraries partnered with the city’s pools so that anyone with a library card could swim for free. In San Jose, the libraries have adopted 100% healthy vending machine policies to provide people visiting the library with access to healthier snacks. The example pictured here comes from Salinas, California, where the library worked with the public schools to simplify the application process. They issued all students with library cards as part of a broader effort to improve literacy rates in the City. The library also became a safe location for young students to spend time after-school.
Health Care Without Harm is an international coalition of over 440 organizations in more than 50 countries. The coalition works to change organizational practices of hospitals, clinics and others within the health care sector. Their goal is to encourage health care providers to make decisions that are healthier for people and safer for the environment. Through their research and advocacy, many hospitals have eliminated sources of pollution and toxic exposure, while others have begun purchasing locally grown produce, establishing vegetable gardens, and eliminating unhealthy foods from their campuses.

For more information: www.noharm.org
Influencing Policy and Legislation is the 6th Level of the Spectrum. Activities at this level focus on creating, modifying or enforcing policies that affect health and safety.
The Definition of Policy:

“Rules that guide the activities of government or quasi-governmental organizations and that provide authority for the allocation of resources.”

Policy can be defined as the “rules that guide the activities of government or quasi-governmental organizations and that provide authority for the allocation of resources.” Thus, policy sets the foundation or framework for action. By mandating what is expected and required, sound policies can lead to widespread change at a community, state, and national scale.
Useful policy is often developed locally

When people hear the word policy, they typically think of work in Washington DC or at their State Capitol. But, a lot of useful policy happens at the city, county and regional levels. Module 7 goes into greater detail about the how and why of local policy.
Recent efforts in Los Angeles provide an innovative example of local policy change to improve health equity.

In July 2008, the Los Angeles City Council became the first in the nation to pass a moratorium to halt development of new fast-food establishments in South LA. Their goal was to take some time to explore opportunities to attract healthier options like produce markets, sit-down restaurants and grocery stores. At the same time the redevelopment agency issued an incentive package to help fund the desired types of food retail. Here, policy was enacted and combined with a new organizational practice because of the detrimental impact that so much unhealthy food was having on the health of South LA’s residents.

For more information:
The Chicagoland Bicycle Federation has achieved policy successes at both local and state levels. Working to make an impact in communities that are struggling economically, this membership-driven organization has advocated for a range of laws that support walking and biking. To build a base of support for their issues, they combine their policy advocacy work with community education and events so people can walk and ride their bike on car-free streets. They are beginning to see physical activity and active transportation emerge as front-burner issues in the region.

For more information: www.biketraffic.org
Local Policy Database: Promising Practices in Nutrition and Physical Activity

Catalogues promising policies in nutrition and activity at the local level

If you’re interested in learning more about successful local policies, visit the Strategic Alliance’s ENACT Local Policy Database—an online resource for community advocates, health professionals, policymakers, and those working in related fields. The searchable database provides concrete examples of local-level policies that have been adopted to improve food and physical activity environments.

For more information: www.preventioninstitute.org/sa/policies/index.php
When activities at each level of the Spectrum are carefully selected, they can be inter-related and complementary. This can result in greater synergy and momentum than could be achieved through one free-standing activity at a time or through a set of disconnected efforts. The Spectrum can also be used to demonstrate that a range of strategies and activities can contribute to an overarching strategy. In other words the framework can also be a tool for galvanizing groups to work together and find synergies between existing efforts.
Throughout the life of any initiative, data, evaluation and feedback will provide useful information about what’s working and what needs refinement. Community-level data, formal and informal evaluation may all be used to help refine the activities being carried out.
To recap, The *Spectrum of Prevention* framework has been applied to many health and safety issues.

Local health departments, community based organizations and collaboratives have used it to develop comprehensive and unified approaches to diverse issues from sexual violence prevention to childhood unintentional injury prevention to improving eating and activity environments.

The Spectrum of Prevention can be applied to today’s health equity efforts, as well.

While many of the strategies outlined in the Spectrum are familiar to health practitioners and advocates, it is the careful selection of a set of inter-related activities that will result in a comprehensive approach that can yield greatest impact.