

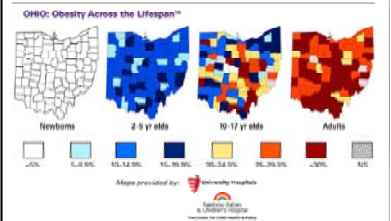
ABSTRACT

The purpose of the study, Advocacy through a Legislative Lens, was the first hand observation of the practical application of the legislative process from an advocacy standpoint. This involved a case-study analyzing the interplay between identified stakeholders non-profits, business, government, and community and the impact said interplay would have on the Healthy Choices for Healthy Children Legislation (SB210/HB373). Methods used in this study included research conducted through first hand participation and observation in meetings with identified aforementioned key stakeholders specifically through coalition calls, committee hearings, interested party meetings, and individual lobbying efforts. Findings of the study were the identification of the primary driver of each aforementioned stakeholder to participate in advocacy, the effect each stakeholder can have on the movement of legislation, and where the social work perspective can be utilized in the legislative process. Conclusions and general implications of this study were advocacy by various stakeholders are motivated by varying, multifaceted, and often times understated factors that can impact the interplay between them. In this case-study the effect of the interplay resulted in the delay in anticipated movement of the bill in the Ohio legislature and highlighted a need for advocates with a social work perspective in the legislative process.

THE CASE STUDY

The Identified Problem: Childhood Obesity

- 1 in 3 children in Ohio is overweight by the age of 8
- Children who are obese when they are 10 have an 80% chance of being obese as an adult.
- If current trends continue, by 2018: 50% of Ohioans will be obese



“Reforming the State’s Healthcare System”, a 2009 report conducted by the Ohio Business Roundtable was comprehensive study which begun in 2007 with the goal of finding a significant cost driver in the state healthcare system.

Conclusions of the report:

- Ohio spends between \$4 billion and \$6 billion annually on health care costs and lost productivity associated with obesity.
- Obesity is **expensive** and **preventable**.
- The legislative effort in its prevention resulted in the **Healthy Choices for Healthy Children Legislation**.

Advocacy through a Legislative Lens

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THE LEGISLATION

Ohio Senate Bill 210 and House Bill 373 – the Healthy Choices for Healthy Children legislation, is a three-pronged approach to fighting childhood obesity in a setting where it can have an immediate impact – Ohio schools.

- Nutrition
- Physical Education
- BMI Reporting



METHOD

Direct observation completed to analyze the interplay of those involved in the passage of legislation from its inception is done by answering the following questions:

Who are the key stakeholders What are the drivers for all involved?

- **Businesses:** Key Driver = Cost
- **Non-Profits:** Key Driver = Advocacy/ Mission Advancement Opportunity
- **Government:** Key Driver = Votes/Community Support
- **Community:** Key Driver = Ability To Support Changes
- **Observed universal drivers for all stakeholders:**
- **Corporate Social Responsibility**

- **Prior relationship/interaction of stakeholders**
- **Personal feelings/experience regarding issue**
- **Cultural implications**

How do they interact?

- The advancement of individual drivers along with the existence of universal drivers meant each stakeholder could benefit by creating Limited time collaborative effort formed with the intention of working for the passing of the legislative solution. Thus the **Healthy Choices for Healthy Children Coalition** was formed.

LEGISLATIVE ADVOCACY

The environment of advocacy for this legislation involved...

- **Interested Party Meetings:** Proponents and opponents of the bill brought together by sponsors to discuss bill freely
- **Coalition Calls:** Weekly calls with members of the coalition
- **Committee Hearing:** Giving testimony (offered by stakeholders or general public) or observing
- **Individual Advocacy:** Lobbying, grassroots, letter writing

THE INTERPLAY

Though anticipated to be an easy win, the coalition encountered Pushback!
Business: Change Products, Fines on them?
Risk to Driver: Cost

Non-Profit: Can you remain a neutral advocate?
Risk to Driver: Mission Advancement

Government: Negative reaction from the community/constituents?
Risk to Driver: Votes/Support

Community: Cannot meet changes financially or culturally?
Risk to Driver: Willingness and ability to meet change *See Public Feedback

Advocacy is not done in a vacuum. Issues between coalition members arose:

- **Cooperate Social Responsibility (CSR) vs. Cost**
New products ex. Vitamin Water & M&M’s Cookies MAX developed to offset revenue cost of lost revenue from less nutritious products, which would be banned with the passage of the legislation
- **Business Round Table (BRT) vs. Republican Senate**
BRT supported Governor Strickland’s education plan, atypical of them, Wounded relationship with Republican party has not yet mended
- **Legislators/Community personally tied to obesity**
Issues of Cultural Sensitivity in the community

PUBLIC FEEDBACK



The Hot Issue: Do you think the state should regulate the types of food offered in school vending machines and lunch halls?

Wednesday, November 18, 2009 4:06 AM
57% Yes 43% No

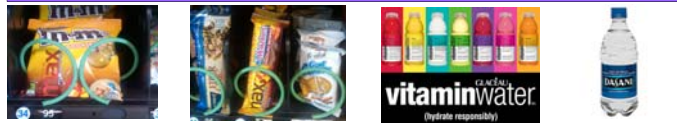
Comments:
•No
Let people eat what they want, always trying to run people’s lives!

•Yes
The problem is that local districts can’t regulate this issue because they are too dependent on the revenue, regulation is needed.

•No
No it should be the responsibility of the Federal Vending Machine Czar. The states should only collect taxes on what’s approved to be in the machine.

•Yes
Socialism? We the people send our kids to a Public school that we all pay for. Since we are underwriting the bill, we can change the d--- menu.

NEW PRODUCTS



LEGISLATIVE RESULTS

As a result of the interplay, movement of legislation stalled, meaning: No committee meetings, no grassroots efforts, no progress

- Legislative answer: Sub bill, which takes time and requires concessions made by all involved stakeholders ease tension and allow for productive interplay. Released 03/10/10.
- No movement since its introduced on 11/17/09. Ohio Children’s Hospital Association Advocacy Day planned for 05/18/09, ask will be passage of Healthy Choices legislation

Healthy Choices for Healthy Children Legislation

Communications Timeline

DATE	FEBRUARY	MARCH 24	APRIL	MAY 22	MAY 28
LEGISLATIVE ACTIVITY	Interested Parties Meeting Meeting with State Board of Education committee	Sub Bill Accepted By Committee Committee Observation of Changes, Opinions Testimony, Interest Public Testimony Preparation Testimony	No Activity	Committee Vote	Floor Vote
COMMUNICATIONS	Develop site-by-site of new efforts, call Review fact sheet to inform bill changes Meeting to Full State Board of Education	Begin meeting re-orientation with media CFR Send updated location list to legislators Coalition member letters to legislators and letters to the editor	Weekly re-orientation Op ed piece Dispatch, Dayton, Cincinnati, Cleveland, Akron Radio talk show Interview?	Weekly re-orientation	May 28: OCHA Advocacy Day

CONCLUSIONS

Advocacy through a legislative lens in this case study could be benefited from the field of social work through:
Knowledge of social welfare policy being applied to create legislation packaged in a way that makes the most effective societal impact.

A social work perspective and knowledge of systems theory could be used to identify issues and points of dysfunction among stakeholders to more efficiently and effectively navigate the interplay.

This case study highlighted questions pertaining to obesity and the social responsibility a social worker has to advocate for its prevention, such as:

Per the Code of Ethics, we must protect the value or the “dignity and worth” of our clients. Is this legislation...
Encouraging the stigmatization of the overweight?

A preventive measure designed to keep one from becoming overweight and ever knowing the stigma?
Our Ethical Responsibility to Broader Society calls us to “advocate for living conditions conducive to the fulfillment of basic human needs.”
Is preventing obesity a “basic human need”?

To learn more please visit:
<http://www.healthchoicesforhealthychildren.org/>

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