

# Stakeholder Engagement Subcommittee and Recommendations

Paul Halverson, DrPH, MHSA, FACHE  
Stakeholder Engagement Subcommittee Chair



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- Recommend an approach to increase awareness and utilization of Healthy People 2030 and to delineate the primary and secondary audiences for Healthy People 2030



# Subcommittee Meetings Held Since June Committee Meeting

DEVELOPING  
**HealthyPeople**<sub>2030</sub>

Since the June 27 Secretary's Advisory Committee meeting, the Stakeholder Engagement Subcommittee met twice by conference call:

- August 9, 2017
- August 16, 2017



# Overview of Issues Addressed

DEVELOPING  
**HealthyPeople**  
2030

- Focus of Recommendations:
  1. How to engage stakeholders in the development of 2030
  2. How to communicate with stakeholders regarding the development of, public comment of, and value of Healthy People 2030
- Other Issues Discussed:
  - Identify stakeholder groups for Healthy People 2030
  - Create a 2-way dialogue between HHS and stakeholders
  - Use simulation and gamification tactics in development, dissemination, and engagement



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# Overview of Subcommittee's Recommendations

DEVELOPING  
HealthyPeople  
<sub>2030</sub>

1. Adopt the Health in All Policies approach in identifying sectors for inclusion in the process
2. Broad engagement should include more than structured public comment periods for testimony or written comment
3. Simulation and gamification should be considered as tactics for improving development, dissemination, and engagement strategies



# Overview of Subcommittee's Recommendations

DEVELOPING  
HealthyPeople  
<sub>2030</sub>

- **Recommendation 1:** Adopt the Health in All Policies approach in identifying sectors for inclusion in the process
- **Rationale**
  - Developing health and well-being objectives for the nation will require the inclusion of input from more than the health sector alone if we are to achieve our goals in changing the culture of health and well-being in America
  - Health and well-being are determined not just by medical care provided, but even more so by improving upon the social determinants that are shaped outside of the doctor's office Medical care implies an integration of primary care, behavioral health, pharmaceutical care, dental health, and overall health care
  - The subcommittee can prioritize and develop example use cases to communicate with major sector representatives to begin the process of engagement



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# Overview of Subcommittee's Recommendations

DEVELOPING  
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<sub>2030</sub>

## Major Sectors Include\*:

- Non-agriculture wage and salary
- Goods-producing, excluding agriculture
  - Mining
  - Construction
  - Manufacturing
- Agriculture, forestry, fishing, and hunting
  - Agricultural wage and salary
  - Agricultural self-employed workers
- Nonagricultural self-employed workers
- Services-providing
  - Utilities
  - Wholesale trade
  - Retail trade
  - Transportation and warehousing
  - Information
  - Financial activities
  - Professional and business services
  - Educational services; private
  - Health care and social assistance
  - Leisure and hospitality
  - Other services
  - Federal government
  - State and local government



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# Overview of Subcommittee's Recommendations

DEVELOPING  
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- **Recommendation 2:** Broad engagement should include more than structured public comment periods for testimony or written comment
- **Rationale**
  - We believe that the Committee should pursue multiple ways to both solicit and receive feedback, particularly considering those that might not even recognize the health implications of their interest
  - Engaging speakers to disseminate information about the Healthy People process in other scientific meetings and panels in both health and non-health venues is important
  - A systematic and targeted approach to broadly communicating in industry-specific newsletters, blogs and online and print journals should be encouraged with an emphasis on highlighting the relevance of the Health People process
  - Encourage the targeted use of social media platforms and web-based tools to inform the public of the presence and relevance of the Health People process and products as well as providing easy and convenient ways for comment and feedback



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- **Recommendation 3:** Simulation and gamification should be considered as tactics for improving development, dissemination and engagement strategies
- **Rationale**
  - The subcommittee is attempting to find ways to more meaningfully engage policymakers and others in the value of the Healthy People process and products
  - The subcommittee recognizes budget limitations to these tactics but recommends that this approach be considered should funds become available

# Important Considerations

DEVELOPING  
HealthyPeople  
2030

- Engagement with non-traditional sectors is important and will require specific strategies and budget to reach out and bring in perspectives and recommendations
- Need to be proactive in reaching out to key stakeholders in the development of measures rather than completing work and then asking for feedback through public reaction sessions
- The reduction in objectives will require a careful plan to communicate priorities as compared to importance or value
- Traditional modes of engagement will probably lead us to advocacy positions in favor of maintaining current state.



- **Identifying Sectors:**

- Continue discussion around appropriate sectors to engage
- Develop example use cases to communicate with major sector representatives showing value and benefit of Healthy People 2030
- Develop a strategy and communication plan on how to engage with identified sectors

- **Broad Engagement:**

- Ongoing Public Comment on HealthyPeople.gov – through September 29, 2017
- HHS Town Hall Meetings
  - APHA Annual Meeting (2 sessions)



# Committee Discussion

Moderated by  
Paul Halverson, DrPH, MHSA, FACHE  
Stakeholder Engagement Subcommittee Chair



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# Next Steps and Committee Vote

Nico Pronk, PhD, MA, FACSM, FAWHP  
Committee Co-Chair



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