



# CHRONIC DISEASE PREVENTION FRAMEWORK EXECUTIVE SUMMARY

*Produced by the CCLHO-CHEAC Chronic Disease Prevention Leadership Project*

Chronic disease is the leading cause of premature morbidity and mortality in California, with tremendous public health, economic, and societal consequences for the state. Despite some significant advances in reducing overall incidence and mortality, chronic disease is the major contributor to health inequities in our communities. Local health departments (LHDs), legally mandated to protect community health, must make chronic disease and obesity prevention a major priority. Most chronic diseases cannot be addressed effectively through education or preventive health care alone. Without addressing the social and economic conditions, as well as the physical environment and community attitudes or social norms that influence community health, behavior change is difficult to sustain and chronic disease risk factors cannot be controlled.

The CCLHO-CHEAC Chronic Disease Framework emphasizes an approach with the highest potential impact: policies and priorities aimed at the community or population level. It draws from the successful California tobacco control strategy, where individual and community change were achieved through environmental, policy, and institutional practices, and social marketing and other social norms interventions developed with public, private and community partners. It offers a common language and systematic approach for carrying out this work statewide and locally. It outlines an agenda that advances policy and systems changes; employs community engagement strategies; leverages state-local partnerships and cross-sector collaborations; and aligns with evidence-based and promising new practices. It makes recommendations for state and local public health leadership to collectively advance a common agenda throughout California.

**SPECIFIC RECOMMENDATIONS OUTLINED IN THE FRAMEWORK INCLUDE:**

## **RECOMMENDATION #1**

The California Department of Public Health (CDPH) should adopt the principals of this Framework, including the use of the full range of the Spectrum of Prevention and a health equity approach, both for its own state chronic disease prevention programs and in its support to all LHD efforts to address chronic disease.

## RECOMMENDATION #2

Adopt a tobacco-like model for programmatic and funding structures and mechanisms for all other chronic disease prevention efforts to ensure sustainability throughout California, including:

- › Effective state-local partnership to combine a statewide perspective with local experience.
- › Minimum allocations for all LHDs, with flexibility to support local priorities, strategies, and approaches.
- › Separate competitive funding for innovations that reflect the local context, climate, diverse community needs and interests, and opportunities to partner.
- › Designated funding to key community partners, such as voluntary/advocacy organizations that can work directly on policy with elected officials.
- › Consider baseline funding for appropriate institutional partners, with designated LHD oversight for coordinating efforts.
- › Earmarked funds for a materials clearinghouse, training and technical assistance, and external/independent evaluation services.

## RECOMMENDATION #3

In partnership with the California Department of Public Health (CDPH), the California Conference of Local Health Officers (CCLHO) and the County Health Executives Association of California (CHEAC), work to strengthen the authority, infrastructure and capacity of both the state and local health departments to address chronic disease as a priority in a coordinated and integrated fashion.

## RECOMMENDATION #4

The state and local health departments will collaborate to identify environmental and policy change priorities, goals, outcomes, and indicators that are achievable, measurable, and include health equity measures.

## RECOMMENDATION #5

Designate a portion of future taxes and other funds collected through passage of policies related to chronic diseases to go directly to chronic disease prevention at both the local and state levels.

## RECOMMENDATION #6

CDPH and LHDs should assess existing funding streams, such as Women, Infants and Children (WIC), California Transformation Grants (CTG) and USDA-SNAP-Ed, to identify opportunities to leverage and coordinate categorically funded programs to promote broader chronic disease prevention efforts.

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