Creating Thriving Communities: Primary Prevention

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What goes on around us, shapes us.

“People’s brains develop in response to their environments” (Centers for Disease Control & Prevention Institute, 2014)
Definition: Primary Prevention

*Prevention is a systematic process that promotes safe and healthy environments and behaviors, reducing the likelihood or frequency of an incident, injury or condition occurring* (Prevention Institute, 2007).
Distinctions: Prevention, Awareness and Risk Reduction

- **Awareness efforts** tell people about the problem.

- **Risk reduction strategies** seek to minimize the impact of a problem; they may or may not be effective in protecting an individual, but they don’t change the problem.

- **Prevention efforts** change things (laws, norms, rules, expectations, etc) so that a problem is less likely to happen.
Prevention Strategies: How?

The prevention spectrum

Primary prevention
- Activities which take place **before** violence has occurred to prevent initial perpetration and victimisation

Secondary prevention
- Immediate after violence has occurred. Deals with short term consequences of violence and prevent the problem from reoccurring or progressing

Tertiary prevention
- Long term responses after violence has occurred to deal with the lasting consequences of violence, minimise its impact, and prevent further perpetration and victimisation

Primary Prevention
Behavior is Complicated

What goes on around us, shapes us.

Resi
Prevention Strategy: Levels

Don’t Smoke
Don’t be poor
Don’t be a deadbeat dad
Don’t bully

Don’t eat fast food
Don’t drink
Don’t be sedentary
DON’T USE DRUGS
Limitations of Individual Level Prevention Strategy

Don’t eat fast food
Chili Cheese Fries

Why do people eat them?
Why do people eat them?

<table>
<thead>
<tr>
<th>Individual</th>
<th>Relationship</th>
<th>Community</th>
<th>Society</th>
</tr>
</thead>
<tbody>
<tr>
<td>They are yummy.</td>
<td>Mom always made them on Fridays.</td>
<td>They are on the menu.</td>
<td>There are lots of commercials encouraging me to eat chili fries, etc.</td>
</tr>
<tr>
<td>I’ve never had a problem with them in the past.</td>
<td>My friends eat chili fries and support me in eating them.</td>
<td>They are affordably priced.</td>
<td>There’s not a lot of legal regulation around healthy eating (big gulp legislation)</td>
</tr>
<tr>
<td>They make me feel good when I feel bad.</td>
<td></td>
<td>Healthy eating isn’t a strong norm in my community.</td>
<td></td>
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</table>
Limitations of Individual Level Prevention Strategy

Don’t eat fast food
Limitations of Individual Strategy

What people know is not a strong predictor of what they do. In addition to educating individuals about the problem, we must work to change the social conditions that enable the problem.
Limitations of individual level prevention strategy

“It is unreasonable to expect that people will change their behavior easily when so many forces in the social, cultural, and physical environment conspire against such change.”

Smedly and Syme, Institute of Medicine (2000)
Prevention Strategy

- Is it effective?
- Is it ethical?
- Is it efficient?
- Is it equitable?
Focus on Conditions/Context

Work to change the context to make the desired behavior the easy and expected choice.
Health Impact Pyramid

Increasing Population Impact

- Counseling and Education
- Clinical Interventions
- Long-Lasting Protection Interventions
- Changing the Context to Make Individuals’ Default Decisions Healthy
- Socioeconomic Factors

Increasing Individual Effort Needed

Frieden T. American Journal of Public Health | April 2010, Vol 100, No. 4
Determinants of Health

**Structural Determinants of Health:** The economic and social policies, processes and norms that structure opportunities for the health of individuals, communities and jurisdictions. *The structural determinants constitute the contexts of our lives.*
For example

- Neighborhood conditions
- Housing
- Transportation
- Education
- Food
- Employment
- Childhood conditions
- Social conditions
- “Isms”

Wellbeing across these determinants is not evenly distributed resulting in zipcode being a stronger predictor of health outcomes than genetic codes.
Conditions: Health Disparities

From youth violence, to Zika, to sexual violence, to obesity, to delinquency, to lead poisoning, to intimate partner violence, etc, etc, safety is not evenly distributed. Resulting in:

• **Health Inequity**—Health differences that are socially produced, systematic in their distribution across the population and unfair (WHO, 2010).

• In cities across the country (New Orleans, San Francisco, Indianapolis just to name a few) we see 15-20 year disparities in life expectancy between affluent and poor neighborhoods.
Example: <Structure and/or quality of one’s neighborhood> has been investigated as a risk factor for these problems:

- **Chronic diseases**
  - Asthma
  - Blood pressure
  - Cancer
  - Cardiovascular disease
  - Diabetes
  - Kidney disease
  - Obesity
  - Stroke

- **Mental health**
  - General mental health
  - Depression
  - Stress
  - Suicide
  - Substance use

- **Childhood**
  - Child development
  - Conduct problems
  - Resilience

- **Other**
  - Cognitive decline
  - Disability
  - Eye problems
  - Infections
  - Mortality
  - Sleep

- **Crime-related problems**
  - Child abuse
  - Delinquency
  - Domestic violence
  - Gun use
  - Homicide
  - Teen dating violence
  - Workplace violence
  - Violence (general)

- **Sex/Reproduction**
  - Sexual risk behavior
  - Paying for sex
  - HIV & other STIs
  - Pregnancy outcomes
  - Teenage parenting
Where Do We Begin?

Go to the roots—work to modify risk and protective factors shared between multiple social and physical health problems.

*Risk factor:* A factor that is associated with an increase in the occurrence of a particular disease, injury, or other health condition.
Addressing Childhood Conditions to increase community health

Examples of primary prevention policies & practices at the federal, state, and local levels across the lifespan!!
Paid Family Leave

- U.S.A (and Papua New Guinea) only two countries in the world without paid family leave.

- 1993 FMLA – 12 weeks unpaid leave
  - Must be FT/Salaried
  - 50+ employees or more
  - Been there at least 1 year

- Benefit currently unavailable to 40% working Americans
Paid Family Leave

**Benefits for Caregivers**

- Birth of a child, foster or adoption placement
- Care for a spouse, child, or parent with a serious illness
- A personal illness
- Any exigent circumstances for family of active duty military

How does this policy connect to the determinants of health?
Paid Family Leave

**BENEFITS for PARENTS & CHILD**

- Shared bonding time between parents
- More shared caregiver/infant biological processes:
  - Heart rate, blood sugar, body temperature, calm/soothing goodness, bonding = healthier baby
- Self-efficacy as a parent
- **Other outcomes**: child goes to other parent as often as they go to mom, norms change around masculinity
Determinants of Health

- Neighborhood conditions
- Housing
- Transportation
- Education
- Food
- Employment
- Childhood conditions
- Social conditions
- “Isms”

What are the potential impacts of Paid Family Leave on the determinants of health?
Safe, Stable, Nurturing Environments and Relationships Strategies

Skin to Skin Contact

- Shared bonding time between parents
- More shared biological processes:
  - Heart rate, blood sugar, body temperature, calm/soothing goodness, bonding = healthier baby
  - Neurological healing from trauma
- Self-efficacy as a parent
- Shared parenting (child goes to other parent as often as they go to mom)
- Other outcomes: norms change to masculinity, hospital/WIC policy and practices (shirts, forms),

Pick up materials at our table or order materials at: icadv@icadvinc.org
Our vision is to see cultural norms around sports change in Grant County through the commitment of sports programs to create fun, safe and respectful environments in which parents/fans act as encourages, coaches serve as supportive role models, and players have absolute fun while learning lessons of respect on/off the field along the way.
Safe Passage & Youth Services Bureau of Monroe County

Developmental Assets Strategies

Safe Passage Youth Council (Franklin County)

- SPYC members facilitate the Stand4Respect curriculum
- PALS Program:
  - Asset Building
  - Collaboration between shelter and public library

Monroe County Youth Council

Building assets in children, teens, and in the community through reading, reflection, and engagement.

- Youth leadership
- Mentoring skills in youth
- Empathy, Nurturing
- Self-efficacy

http://www.safeassageinc.org/safe_passage_youth_council

http://www.monroecountyouthcouncil.org/page-
This Summit & BTCC’s Healthiest Cities & Counties Challenge

To name a few more local primary prevention strategies!!
Questions and reflections

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