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A Communications Tool to Recruit Policymakers to a CBPR Partnership for Childhood Obesity Prevention

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Abstract

The purpose of this paper is to describe a process and technical requirements for the development of a video and related communications strategy that CBPR partnerships can use to recruit policymakers to participatory research. Policymakers play a critical role in social change agendas, yet are often difficult to engage for a variety of reasons, including limited availability and multiple, competing demands and constituencies. This paper draws on the experience of the Healthy Jacksonville Childhood Obesity Prevention Coalition, a 10-year-old partnership with a large membership and strong community roots in Duval County, Florida. The objectives of the communications strategy were to engage local and state policymakers in policy change that would positively affect childhood obesity prevention; educate policymakers about the social determinants of health, particularly those related to childhood obesity; and to do so in a way that elicited champions for the coalition’s goals.

Keywords

Community-based participatory research, childhood obesity, policy, practical tools, translation

A distinguishing characteristic of community-based participatory research (CBPR) is its emphasis on action.1,2 The involvement of community members in the process increases study relevance and validity, as well as cultural sensitivity, and facilitates the timely translation of study results.3 Increasingly, it is recognized both by researchers4-7 and funders8-11 that involvement of policymakers with the power and influence necessary to make changes suggested by the research is critical for successful translation. This is especially true in the case of population-level interventions, where whole populations or communities experience the intervention, rather than individual-level interventions.

Policy change, particularly at the local government level,12 can create the conditions necessary for healthy living by altering the physical and social environments in which people live.13 This can occur, for example, through regulations, increased access to resources, economic incentives, and agency guidelines.14,15 However, the extent to which research findings influence policy development is unclear. Recent work suggests a number of facilitators for integrating research results into policy, including the need to increase opportunities for interaction between researchers and policymakers, making research results more accessible to policymakers, and examining questions policymakers want answered so they might propose relevant legislation.16-20

CBPR, which includes reciprocal co-learning,21 is well-suited to increase the use of research results in policy development. However, attracting the attention and commitment of policymakers can be challenging. Consequently, a strategy to recruit, engage, and sustain policymakers’ interest in CBPR is necessary. This article describes the development of such a strategy by the Healthy Jacksonville Childhood Obesity

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Prevention Coalition (the Coalition) Research Partnership (the Partnership), with particular emphasis on the production of an advocacy recruitment video.

The Coalition was established in Jacksonville (Duval County), Florida, in 2001 and now includes a large and diverse membership. In 2008, the Coalition led over 100 community partners to develop priorities and action steps to address childhood obesity. The Call to Action identified seven priority areas. It also identified the city’s African-American population, resident in the urban core, as the priority population for intervention.

The Partnership formed in February 2010 as a subcommittee of the Coalition in response to a National Institutes of Health Request for Proposals (RFP) that announced funds available for childhood obesity prevention research that required participation by policymakers in the CBPR process. Interest in the Partnership was strong, with 15 to 20 coalition members attending an initial meeting, in which an academic partner with experience in CBPR described the philosophy and approach of participatory research and the funding opportunity.

Roles and Responsibilities, Group Decision-Making Model, and Leadership Structure

In subsequent meetings, CBPR principles were described and discussed, roles and responsibilities were identified and assumed, and a decision-making model was adopted. To identify and assume roles and responsibilities, the partners described their areas of expertise and the contributions they felt they could make to the project in an early meeting. These were acknowledged by the group as a whole. Several areas of expertise were recognized. These included local community (e.g., place, process, advocacy), content (e.g., obesity, built environment), research (e.g., methods), and social marketing. The core partners included (with areas of expertise): the War on Poverty (local community), the Health Planning Council of Northeast Florida (local community, content), Nemours Children’s Clinic (content), the Florida Center for Public Health Practice-Based Research (research methods), University of North Florida (content), and the Florida Department of Children and Families (local community). Representatives from the Coalition’s social marketing partner (ruckus.advertising + public relations) were essential members of the Partnership. Their responsibility was to lead the social marketing effort.

The Partnership chose a consensus decision-making model through which the group could engage in discussions to address disagreements and develop compromises about which most members could agree. The process was greatly facilitated by having identified and acknowledged participants’ areas of expertise, to which the group generally deferred in the decision-making process. Consensus was also facilitated by the Partners’ long history of working together through the Coalition.

The leadership structure similarly followed from the earlier definition of roles. Because the research partner was most familiar with CBPR, grant writing, and research design, she led the group, calling meetings, proposing agendas, and taking and disseminating notes. However, leadership was shared; the group relied on the inherent strengths and expertise of members of the Partnership to assume leadership roles in their respective areas of expertise.

The Partnership drew on their own Call to Action and recommendations from leading national organizations to identify joint use agreements (agreements between two or more entities, such as a school and a city, to share facilities to increase local opportunities for physical activity) for their research focus.

One of the first tasks was to recruit policymakers to the CBPR process, as required by the RFP. Although the Coalition had a long history of collaboration, the policy arm of the Coalition was relatively underdeveloped. Several of the partners familiar with the local political landscape described challenges to engaging policymakers, including competing interests, time demands, and lack of familiarity with childhood obesity prevention and the research process. To address these challenges, two partners visited with a city council member to gain insight on how to best engage policymakers in CBPR.

In subsequent brainstorming sessions, the partners decided on a broad strategy to engage policymakers in the Coalition and the CBPR response to the RFP. This included identifying policymakers with relevant affiliations or who were otherwise sensitive to childhood obesity prevention; development of a brief fact sheet describing the Coalition, the Partnership, Partnership goals and objectives, as well as the necessity, benefit and extent of policymakers’ involve-
ment in research; and the creation of a community-grounded video to inform them about childhood obesity prevention and engage them in the participatory research process. The Partners felt that a video presentation would be an effective tool to communicate the voice of the community in an emotionally compelling, yet time-efficient manner. The video was embedded in a larger presentation that more fully described Coalition activities and objectives of the Partnership with regard to participation in the CBPR process.

The remainder of this paper describes the participatory creation of the video and lessons learned.

CREATING THE VIDEO

For efficiency, members of the Partnership broke into work groups, but identified a number of critical decision points\(^2\) relevant to video production, where group consensus was considered necessary. These were primarily concerned with content, treatment, and control of the final product. Technical aspects of production were generally left to the social marketing partner.

### Table 1. Video Components

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<th>Purpose</th>
<th>Content</th>
<th>Speakers/Objective</th>
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<tbody>
<tr>
<td>General overview of the issue (5:09 minutes) <a href="http://youtu.be/GFrV0zb-grQ">http://youtu.be/GFrV0zb-grQ</a></td>
<td>&quot;Obesity in Jacksonville’s Urban Core.&quot; Describe the urgency of the problem; national and local statistics; social determinants of health; health disparities and the urban core; goals regarding environmental level interventions and policy change; and Coalition background, including current community mobilization efforts.</td>
<td>a. Community leaders (local college football star, elementary school teacher): children’s sedentary behavior and barriers to active living; b. Content expert (local pediatrician and Coalition Chair): overview of the childhood obesity epidemic, causes and consequences; c. Community members (local children and parents): barriers to active living.</td>
</tr>
<tr>
<td>Issue-specific content (4:24 minutes) <a href="http://youtu.be/Lq1X5-Yt9E">http://youtu.be/Lq1X5-Yt9E</a></td>
<td>&quot;Joint-use Agreements in Jacksonville.&quot; Illustrate the need for changes to the built environment to reduce obesity; stress the importance of prevention (rather than treatment); define and describe joint-use agreements and their implementation as an approach to promote active living among children and adults.</td>
<td>a. Community members (local college football star, parent): benefits of and obstacles to use of local facilities for exercise; b. Content experts (local pediatrician and Coalition Chair, local urban planner): obesity prevention (preferred to treatment), joint-use agreements.</td>
</tr>
<tr>
<td>Community voices (3:50 minutes) <a href="http://youtu.be/jCP4mad26ag">http://youtu.be/jCP4mad26ag</a></td>
<td>&quot;Building a Healthy Community&quot; Residents describe changes they would like to see made in their community to improve the health and well-being of the citizenry.</td>
<td>Urban core residents (children, adults).</td>
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</table>

Three core content areas for the video were developed (Table 1). The first of these provided a broad overview of childhood obesity in Jacksonville’s urban core. The second core content area described community approaches to confront childhood obesity, with an emphasis on environmental interventions and policy change. The built environment and joint use agreements were highlighted. Finally, the third core content area emphasized community voices of both children and adults, who described what they would like to see done to improve the health of their community.

### Treatment

Next, the social marketing partner led the development of a treatment, a brief narrative description of what the viewer would see and hear in the video. This helped the group to think deliberately and creatively about how the video should look and feel. The partners felt it was important that the video be recognized as a Coalition "product," both to lend it legitimacy.
from a clinical standpoint and to brand the Coalition as the local organizing entity for childhood obesity issues. It was also important that the urban core community was recognizable to communicate their needs and concerns to legislative officials in an emotionally compelling manner.

The group decided that the video should be shot entirely in the voice of community members, in unstructured interviews with residents and advocates and in structured interviews with subject matter experts. The video was filmed “wo/man on the street” style in the community with local children, parents, and teachers in unstructured interviews. Questions evoked participants’ perspectives regarding childhood obesity and the general health of their community. A local pediatrician and urban planner served as subject matter experts and a well-known, admired community advocate from the urban core was also interviewed.

Partners played instrumental roles in the creation of the video, serving as:

- Community experts to identify opinion leaders and organizational partners for interview on video (War on Poverty);
- Community experts to identify recognizable shooting locations that illustrated community concern regarding aspects of the physical environment (Healthy Jacksonville; Healthy Planning Council North East Florida; War on Poverty);
- Advisors for cultural consonance of urban core images (War on Poverty; Healthy Jacksonville);
- Technical production advisors (ruckus.); and
- Subject matter experts for children’s health, obesity, and the built environment (HPCNEF; Nemours Children’s Clinic).

Control of Final Product

The Partners controlled the final product through an iterative review process and consensus decision making. The group reviewed the video as it was shot in segments and in its entirety three times, reworking content as necessary. Initial critiques centered on issues related to community representation and voice, later moving to factual content, and finally evaluating its emotional appeal. Achieving the final product was facilitated by filming significantly more footage than was necessary. Generally, the group's recognized experts led the discussions relevant to their own areas of expertise. For example, when reviewing segments related to community representation, our community experts led the review and facilitated discussions related to representation and voice, ultimately leading the group to decision. Occasionally, it was necessary to re-edit and “re-review” various segments of video. These re-reviews were sometimes completed by the relevant experts and sometimes by the entire group, as considered necessary.

Technical Production

The Partnership was fortunate that a social marketing firm was a Coalition partner and member of the CBPR team, particularly in the technical production of the video. Nonetheless, the needs of the Coalition required a low-tech, low-cost production process. The marketing firm partners were sensitive to these needs and the video was produced in a manner that could be replicated without the assistance of a professional advertising agency. Their suggestions for production appear in Table 2.

Approximately 180 hours were spent creating the video, with 50 hours for filming, 36 hours for planning, and the

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<th>Table 2. Suggestions for Video Production</th>
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<td>Film the video with a handheld video camera or camera phone over a structured time period.</td>
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<td>Shoot multiple locations on the same day.</td>
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<td>Overshoot the video in anticipation of the group consensus process, which eliminates the need to re-shoot after each round of Partnership review and suggestions for revision.</td>
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<tr>
<td>Shoot in a “wo/man-on-the-street” style, which eliminates the need for lighting, make-up and other production concerns.</td>
</tr>
<tr>
<td>Shoot the video in stand-alone segments to maximize flexibility for use.</td>
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<tr>
<td>Use free “drag and drop” moviemaking software to edit.</td>
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remainder for editing. This included time spent reviewing video segments with partners and subsequent revisions.

IMPACT

Although a formal evaluation was not conducted, the Partners believe the video created viable momentum for support of childhood obesity prevention efforts, including the participatory research proposal, among policymakers for several reasons. First, letters of support for the proposal were received from key city officials, whose staff had viewed the videos. These included the Mayor’s Office, the Superintendent’s Office, a county commissioner, the Sheriff’s Office, and a county-funded children’s advocacy organization. The letters pledged support for the proposal, generally, but also pledged involvement of relevant staff in the participatory research process. Comments from key policymakers after viewing the video were generally supportive. For example, a child advocate observed that the video was “very well done. Clearly a lot of work went behind bringing these issues to this juncture. This [video] has shown us the possibilities.” A representative from the mayor’s office remarked, “the Mayor’s Office fully supports the Coalition, childhood obesity prevention and the research proposal—the presentation helped our staff think creatively about the effective use of resources and child health.” Similar comments were received from school system representatives.

However, not everyone who viewed the video was equally supportive. In a particularly thoughtful observation on process, a representative from the Housing and Neighborhoods Office, who had attended the presentation complimentary of the video, remarked, “I fully understand the necessity of limiting the scope of the grant [to joint-use agreements]. However, I would note, that you may not have really taken advantage of ‘the power of the room.’ There were a significant number of policymakers, influencers, and funders there. Limiting the discussion to Joint Use Agreements did not really take advantage of the audience.” He pledged support for the proposal, but would have liked to have seen a larger conversation around childhood obesity, given the rare opportunity to capture the attention of a number of policymakers at one time.

Other indicators of the impact of the video include increased attendance of policymakers at Coalition meetings and in Joint Use Workgroup activities, such as fact finding, community presentations, and other proposal writing.

As described, the video was produced as part of an overall strategy, which called for (1) identifying policymakers likely to be interested in childhood obesity prevention and/or required to enact necessary legislation or policy; (2) convening such a group to provide education on childhood obesity, and describe Coalition activities and the CBPR process; and (3) eliciting research questions related to childhood obesity and joint-use agreements. This was accompanied by a Fact Sheet, or “one-pager,” summarizing the issues and more fully describing the funding opportunity and the CBPR process.

LESSONS LEARNED: ENGAGING POLICYMAKERS THROUGH VIDEO

The Partnership’s rationale underlying the production of the video was its utility as a time-efficient, yet compelling tool to recruit policymakers to the participatory process. Given the limited availability of legislators and other community decision makers, the video made good use of time, but the overall strategy somewhat abbreviated the participation of policymakers by focusing on Joint Use Agreements in advance. However, this approach was supported by the Partners’ assessment of policymakers’ availability and will likely vary by community.

As part of a continuing strategy to attract the attention of key decision makers in obesity prevention, next steps include embedding the video in other communication vehicles such as e-newsletters targeting policymakers and community stakeholders. Plans are also in place to show the video to policymakers in one-on-one advocacy meetings. Beyond dissemination to policymakers, future plans include posting the video on the Coalition’s website and Facebook page. It may also be used to educate the community regarding the link between the social determinants of health and health disparities.

A CBPR-produced video can be especially useful for educating policymakers around community concerns and engaging them in the CBPR process. To have the most impact, the video should be embedded within a larger advocacy strategy built on a policy agenda, personal relationships, and grassroots support. Contributing to the overall utility of the Partnership’s video was its flexibility. Although the video was edited into a single presentation to engage policymakers, each segment was shot and edited to stand alone for presentation to multiple audiences. The Partnership was fortunate to have
a professional marketing firm as a community partner; however, the technical skill and equipment needed for production are relatively minimal. Nonetheless, CBPR partnerships are encouraged to partner with communications firms or utilize corporate partners who may have these services in-house.

ACKNOWLEDGMENTS

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REFERENCES


