

The Power of Policy

Why we need to use the mother of all environmental strategies



Policy is a long game.

It takes a long time to convince policy makers to make change, and it can take a very long time to see the impact of the policy change on health outcomes.

Think of tobacco

It took 50 years to get from smoking rates of over 45% in the 1950's to the current rate of 18% (in Vermont).

It was not until the 60's that the health risks of tobacco use were finally acknowledged and policy began to change.

1964: first surgeon general's report on health risks of tobacco began to turn the curve.

70's: The first major actions are taken to curb death and disease from tobacco use: TV and radio ads are banned, cigarettes get a strong warning label, and a handful of states and communities restrict smoking in some public places.

1990's: Policy and systems changes, such as higher tobacco excise taxes, smoke-free indoor air laws, and access to cessation treatments, become more widespread as national and advocacy partners join forces in a nationwide initiative to significantly reduce death and disease from tobacco. Smoking is banned on airplanes.

And most recently: Vermont has extensive indoor air laws, includes tobacco substitutes in all tobacco laws, and its most recent campaign is Tobacco 21, to raise the age of legal purchase.

Why Policy?

Policy is the ultimate environmental strategy. Its reach is the largest, and its impact is the biggest.

Example: at the individual level, you can work on convincing someone to enter treatment for addiction.

At the policy level, implementing new prescribing rules will limit the amount of opiates available.

Use of the Vermont registry will uncover people who are abusing the prescription system with multiple prescribers.

But then there's always heroin, and fentanyl.... Policy alone can't do it!

Prevention needs to be primarily about demand reduction, not just supply reduction.

WHO makes policy?

Policy happens at many levels: federal, state, local, organizational, institutional – even family!

Policy has a hierarchy:

Federal law trumps state law.

State law trumps local law.

Local law trumps organizational, institutional, family, and personal.

Federal Laws

Federal laws can be helpful to states that lack political will - consider Civil Rights legislation, seat belts, tobacco, safety, education.

- Many federal laws deem certain rights to the states.
- Tobacco: Federal law banned advertising on radio and television in 1970, required warnings on packages, restricted flavored products (except menthol), banned smoking on airplanes.
- Tobacco: But it is up to states to set the age of purchase, set indoor and outdoor air quality standards, and set policy on density and advertising (must be content neutral).
- States, in turn, may deem certain authorities to local entities. In Massachusetts, towns can set the age of purchase of tobacco higher than the state. In Vermont, towns cannot deviate from the state laws.
- Before we advocate, we need to determine who has the authority to make the changes we seek.

STATE - the Basics

State laws are passed by the Vermont state legislature. The legislature has two chambers: the House of Representatives (150 members) and the Senate (30 members).

All legislators are elected for two year terms.

The legislature works on a biennium – the session lasts for two years. Any bill introduced in the first year of the biennium remains alive for the entire biennium unless it is defeated.

Bills can be introduced in either chamber. Each bill is assigned to a committee. To become law, a bill must be passed by both the House and the Senate and signed by the Governor.

Mid-session, “crossover” occurs. Bills are passed from one chamber to the appropriate committee of the other chamber. Money bills get a little more time. If a bill is not ready to make the crossover deadline, it is unlikely to pass during the session. Sometimes a bill or a piece of a bill is resurrected and attached to another bill that is still active.

STATE - the Basics

How do I.....

Find out who my legislators are?

<https://legislature.vermont.gov/>

You can look them up and get contact information by name or town.

Find out what laws are already on the books?

<https://legislature.vermont.gov/statutes/>

You can look them up by number or topic.

Find out what is being worked on currently?

<https://legislature.vermont.gov/>

You can look them up by number or topic. When you click on the bill you will be able to see the committee and whether or not there is activity. You can read all drafts of the bill.

What's next?

2019 -2020 is a new biennium. Anything that is not passed by the end of the current session, sometime in May, is finished legislatively.

Committees may continue to work on issues that are of interest to them, but in the fall all legislators are up for re-election. Primary contests will take place in August, and the election is in November. So any work committees have done since the end of the session will be handed on to the next committee members in January.

The next session begins the first week of January, 2019. New committee assignments will be made.

While every session is a fresh start, there are issues that have been discussed in the past that will be re-introduced for the new session.

Here are some issues that we anticipate will be brought up in the next biennium:

- Changes to the medical marijuana system similar to the current S216.

- Some form of the tax and regulate (commercialization) system for marijuana.

- Tobacco 21



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Welcome to the
website of the
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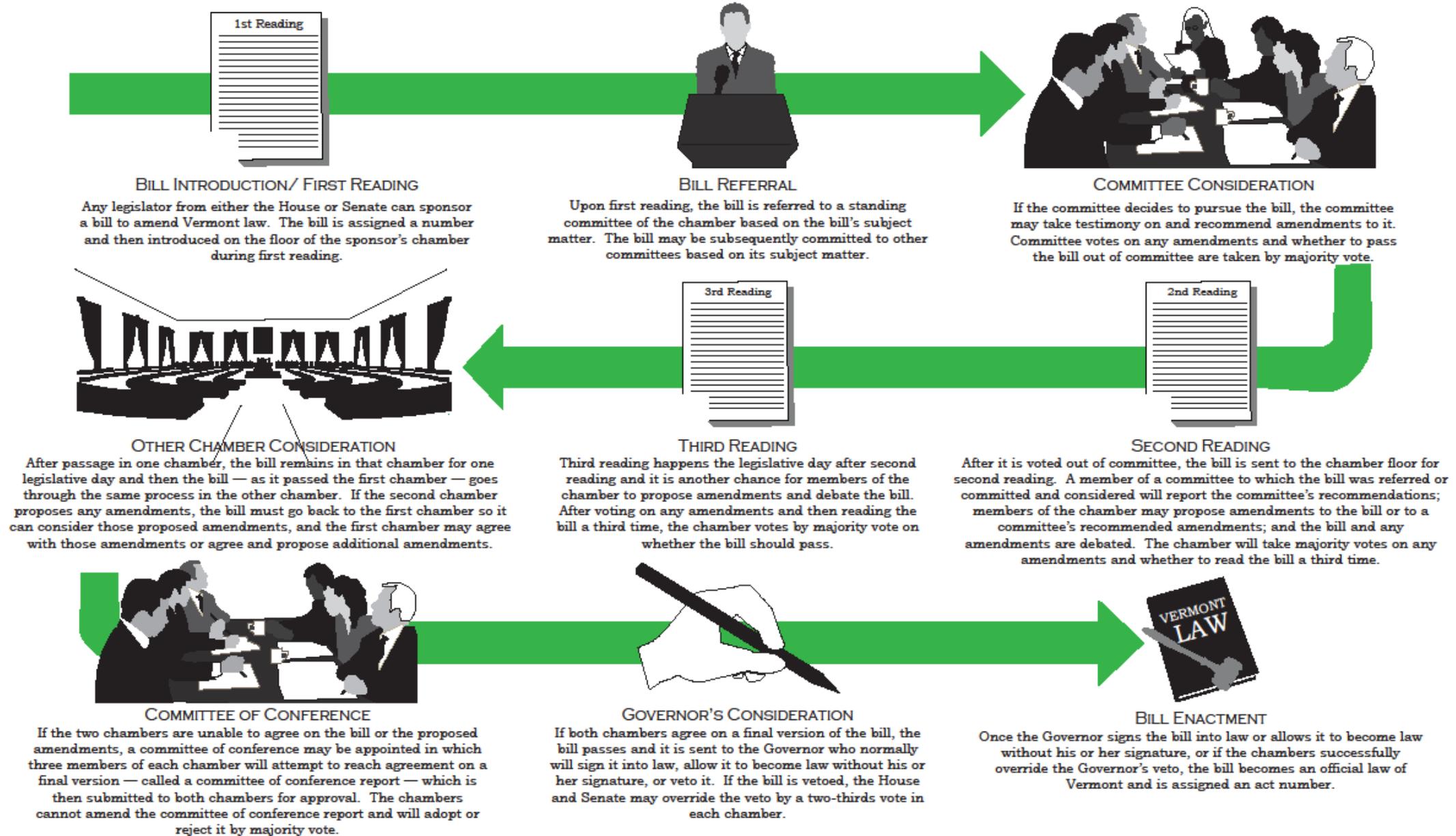
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HOW A BILL BECOMES LAW



LOCAL – the basics

Every town is unique.

Do your homework.

Try to visit a council or board and scope it out before you make a request.

Town websites are a great resource for information about the town's governance and resources.

City/town managers and clerks are a good resource.

Select Board or City Council – ordinances

Town Planning Board or Commission may be your best friend – Town Plan

Don't forget the Regional Planning Commission for your area

Zoning – (some towns do not have it) – lets you restrict land use

The Vermont League of Cities and Towns is a wonderful resource but only works for its clients. Most towns are clients and may be able to access the League if you need some advice on a policy issue.

<http://healthandlearning.org/wp-content/uploads/2017/03/VLCT-CCRPC-Study-11-21-FINAL.pdf>

Schools have policies too -- tobacco, weapons, drug and alcohol

<http://www.vtvsba.org/model-policy-manual>

How do we impact policy?

Our Role is Advocacy

How do we do this?

It is all about providing education – to policy makers, to the public. Here are some ways:

- Provide written material to a board, policy maker or the public
- Use 3-4-50 as a frame for beginning the public health/chronic disease discussion
- Make a presentation to a board/committee
- Testify – find out the rules. At the state, and many local boards, you must request the opportunity to be invited to testify. Other entities have an open comment period. Do your homework!
- Demonstrate public interest through polls and petitions
- Write a Letter to the Editor
- Write an Op/Ed – <https://vtdigger.org/2018/04/01/virginia-burley-medical-marijuana-bill-expansive/>

Advocacy continued

- Email policy makers – keep it clear and simple
- Call or visit a policy maker
- Attend legislative breakfasts or other local events
- To contact a legislator while in session, call the Sergeant at Arms and they will send a note to the legislator
jmiller@leg.state.vt.us 802-828-2228
- To give a letter to all or selected legislators, give it to the Sergeant at Arms and they will put it into the mailboxes
- Events – healthy community design walk; tabling at the farmers' market
- Partnerships – who else has an interest in this issue?
- **Other ideas? What has worked for you?**

EXAMPLES OF ADVOCACY VS. LOBBYING ACTIVITIES

National Association of County and City Health Officials (NACCHO)

Advocacy	Lobbying
Meeting with a Member of Congress to educate them about the importance of Zika funding for your community.	Meeting with a member of Congress to urge them to vote for a bill to provide emergency Zika funding for your health department.
Preparing educational materials that depict success stories from your local health department programs.	Preparing materials that include information on health programs at your local health department and contain messaging for or against specific legislation.
Tweeting statistics about diabetes and descriptions of how local health departments are helping reduce diabetes rates.	Tweeting a message urging Congress to vote against cuts for diabetes prevention programs in local health departments.
Sending a weekly e-newsletter discussing factual information on opioid abuse and outlining programmatic efforts that are proven to reduce this health issue.	E-mailing a “call to action” to members of your organization to encourage them to contact their legislator in favor of opioid prevention legislation.

Advocacy vs Lobbying: All lobbying is advocacy, but not all advocacy is lobbying!

Lobbying involves three parts: **Communication** with a **policy maker** that **takes a position on specific, pending legislation**. cltnetwork.org/wp-content/uploads/2014/01/Advocacy-vs-Lobbying-1-28-14-final.pdf

Marijuana

A brief history of marijuana laws in Vermont

2017-18: H511 (Act 86) passed - legalizes possession of small amounts of marijuana and home-grow

S216 is in committee – makes major changes to the “medical” marijuana system

<https://vtdigger.org/2018/04/01/virginia-burley-medical-marijuana-bill-expansive/>

S22 passed by both chambers – vetoed by the governor. Did not override the veto. A similar act, H511, was introduced in 2018 with enough language about motor vehicles to get the governor’s signature.

S16 (act 65) passed and was signed – expansion of medical marijuana

13 other marijuana bills were introduced in this biennium but did not make it out of committee. They ranged from tweaks to the medical marijuana system to commercialization of cultivation and sale.

In the 15-16 biennium, 12 bills were introduced. Only one, S 14, (Act 168) passed. It made changes to the medical marijuana system.

In the 13-14 biennium, 10 bills were introduced. H200, which became Act 76, decriminalized possession of small amounts of marijuana. S 247, which became Act 155, made changes to the medical marijuana system.

2004, the **Vermont** Legislature passed Act 135, “An Act Relating to **Marijuana** Use by Persons with Severe Illness.”

Marijuana resources worth watching

I subscribe to several local pro-marijuana newsletters and sites just to see what they are up to.

<https://headyvermont.com/>

<https://www.regulatevermont.org/>

<https://www.sevendaysvt.com/vermont/cannabeat/Category?oid=8468661>

<https://www.mpp.org/states/vermont/>

<https://www.mpp.org/about/>

<http://samaction.net/> (NOT pro!)

What are you reading?

Resources

Prevention Works www.preventionworksvt.org/

Steve Waldo's daily briefing steve597@vermontel.net

SAM-VT <http://sam-vt.org/>

Public Health Law Center <http://www.publichealthlawcenter.org/>

3-4-50 <http://www.healthvermont.gov/3-4-50>

YRBS <http://www.healthvermont.gov/health-statistics-vital-records/population-health-surveys-data/youth-risk-behavior-survey-yrbs>

Young Adult Survey http://www.healthvermont.gov/sites/default/files/documents/2016/12/ADAP_VT_PFS_YAS_Summary_Report.pdf

Behavioral Risk Factor Surveillance Survey

<http://www.healthvermont.gov/health-statistics-vital-records/population-health-surveys-data/brfss>

NIDA – National Institute on Drug Abuse <https://www.drugabuse.gov/>

VT League of Cities and Towns <http://healthandlearning.org/wp-content/uploads/2017/03/VLCT-CCRPC-Study-11-21-FINAL.pdf>

What else? What works for you?