

ASSOCIATION OF STATE & TERRITORIAL
PUBLIC HEALTH  NUTRITION DIRECTORS

**ASTPHND Chronic Disease Prevention and Health Promotion Domains
Simplified and Adapted to reflect Public Health Nutrition Activities (1/13)**

ASTPHND expects that the four domain framework will shape the future of work funded by CDC's, Combined Chronic Disease Prevention Grant Program (CCDPGP). While still being decided, affected categorical programs may include diabetes, cancer, heart disease/stroke and nutrition, physical activity and obesity.

In Federal Fiscal Year 2011, as part of the Consolidated Chronic Disease Prevention Grant Program (CCDPGP), funding for several chronic disease programs and Prevention and Public Health Fund dollars were combined into one funding stream. A grant program was established for state health departments to strengthen overarching chronic disease functions related to "four domains". Funding was provided to all states to plan and design systems across chronic disease programs and to coordinate work across these four domains. The four domains include 1) Epidemiology and Surveillance, 2) Environmental Approaches, 3) Health System Interventions and 4) Improving Community-Clinical linkages.

The following is an adaptation of a CDC, National Center for Chronic Disease Prevention and Health Promotion resource describing the four domains. ASTPHND has condensed CCDPGP information about the four domains and included some additional examples relevant to public health. Please go to the ASTPHND website to review the [original CDC documents](#).

Domain 1: Epidemiology and Surveillance: Gather, analyze, and disseminate data and information and conduct evaluation to inform, prioritize, deliver, and monitor programs and population health.

Investment in epidemiology and surveillance allows states to collect data and information; develop and deploy effective interventions; identify and address gaps in program delivery; and monitor and evaluate progress in achieving program goals. Data and information is used to inform decision makers and the public about preventive intervention effectiveness and the burden of chronic diseases. It is important to widely publicize public health results as the need to assure the public that the return on their investment in prevention has never been greater.

Domain 1 Example Activities that Require Public Health Nutrition Expertise

- Conduct surveillance of behavioral risk factors, social determinants of health, and monitor environmental change policies related to healthful nutrition, physical activity, tobacco, community water fluoridation, and other areas.
- Conduct surveillance of behavioral risk factors, social determinants of health, and monitor environmental change policies related to nutrition. (Adapted by ASTPHND)
- Collect, use, and disseminate data relevant to medical nutrition therapy. (Adapted by ASTPHND)

Domain 2: Environmental approaches that promote health and support and reinforce healthful behaviors (statewide in schools, worksites, and communities).

Improvements in social and physical environments make it easier and more convenient for Americans to engage in healthy behaviors. These types of interventions have broad reach, sustained health impact and are best buys for public health.

Domain 2 Example Activities that Require Public Health Nutrition Expertise

Expand access to and availability of healthy foods and beverages through a variety of strategies, including:

- Nutrition standards for food and beverages offered in settings including state, local and tribal governments, private sector businesses, schools, child care and education facilities, senior centers and other facilities serving older adults, and other settings.
- Accessible, available, and affordable healthful foods in communities, including provision of full service grocery stores, farmers markets, small store initiatives, mobile vending carts, and restaurant initiatives.
- Comprehensive school strategies to promote healthful nutrition, such as
 - Implementing IOM recommendations on competitive foods (e.g., vending or a la carte items).
 - Limit the availability of unhealthy foods;
 - Offer drinking water free of charge throughout the day
- Supporting access to community based food and nutrition programs such as WIC, Supplemental Nutrition Assistance Program, Elderly Nutrition Programs and others. (Adapted by ASTPHND)

Domain 3: Health system interventions to improve the effective delivery and use of clinical and other preventive services in order to prevent disease, detect diseases early, and reduce or eliminate risk factors and mitigate or manage complications.

Specific health systems interventions allow the clinical environment to more effectively deliver quality preventive services, better allowing people to use and benefit from those services. This will lead to better health outcomes by avoidance of some chronic diseases and conditions, as well as early detection and better management. Examples include: use of electronic health records; systems to prompt clinicians and deliver performance feedback; and outcome reporting requirements that encourage focusing on preventive services. Effective consumer outreach and barrier reduction to accessing services is vital.

Domain 3 Example Activities that Require Public Health Nutrition Expertise

- Birthing hospitals using Baby Friendly Hospital Initiative policy recommendations and implementing “Ten Steps for Successful Breastfeeding in Hospitals.”
- Organized systems of care to deliver high-quality care including medical nutrition therapy, clinical and preventive nutrition services (as recommended by the U.S. Preventive Services Task Force and the Community Guide). (Adapted by ASTPHND)
- Increased screening for, access to and use of medical nutrition therapy, clinical and preventive nutrition services provided by registered dietitians. (Adapted by ASTPHND)

- Health care information systems with automated physician prompts or patient reminder letters for screening and follow-up clinical counseling or referral.

Domain 4: Strategies to improve community-clinical linkages ensuring that communities support and clinics refer patients to programs that improve management of chronic conditions. Such interventions ensure those with or at high risk for chronic diseases have access to quality community resources to best manage their conditions or disease risk.

Strengthening community-clinical linkages helps ensure that at-risk individuals have access to community resources and support to prevent, delay or manage existing chronic conditions. These supports include: clinician referral, community delivery, and third-party payment for effective programs that assist people in taking charge of their health and following care plans. Expected outcomes include improved quality of life, averting or delaying onset or progression of disease, avoiding complications (including during pregnancy), and reducing the need for additional health care.

Domain 4 Example Activities that Require Public Health Nutrition Expertise

All of the following examples have been adapted by ASTPHND.

- Increase use of the CDC-approved evidence-based lifestyle change program addressing healthy weight to prevent or delay chronic disease among people at high risk.
- Effective outreach to the population to increase use of medical nutrition therapy, clinical services provided by registered dietitians and preventive nutrition education services.
- Ensure coverage and reimbursement for services provided by registered dietitians.
- Access to community based food and nutrition programs such as WIC, Child and Adult Care Food Program, Supplemental Nutrition Assistance Program, Elderly Nutrition Programs and others.
- Use of allied health providers (nurses, dentists, registered dietitians etc.), community health workers, and/or patient navigators in supporting control of high blood pressure, high cholesterol, and A1C.