

# National Oral Health Conference Advocacy Workshop

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# Background



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## **American Association for Dental Research**

- 3500 Individual Members and 100 Institutional Members

- Mission:

1. Advance Research and Increase Knowledge for the Improvement of Oral Health
2. Support and Represent the Oral Health Research Community
3. Facilitate the Communication and Application of Research Findings

## Advocacy Campaigns: How do we influence elected officials?

Step 1: Define the goal and purpose of your campaign. Also, understand the current political environment.

Step 2: Develop written materials

Step 3: Understand the appropriations and lawmaking process

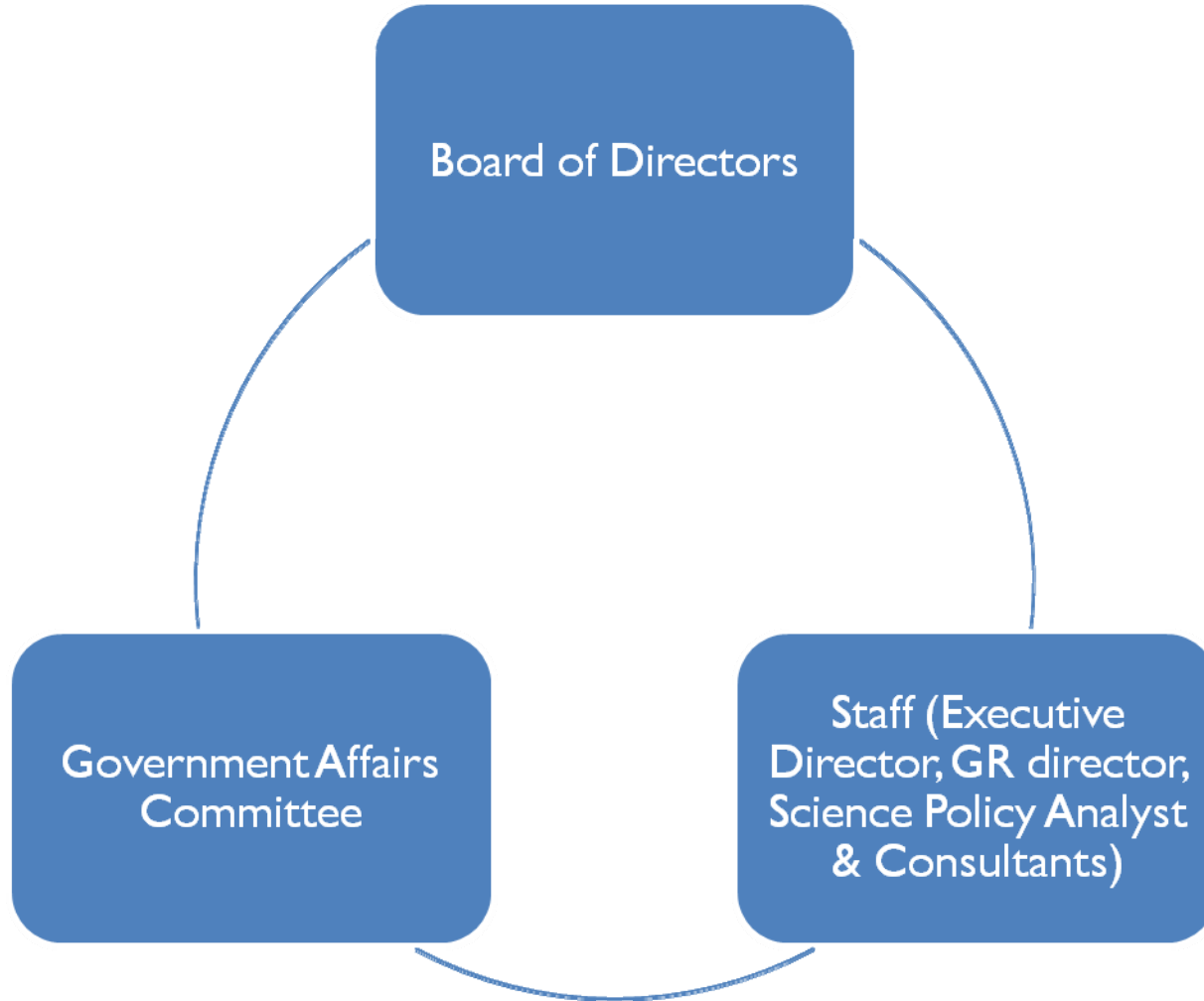
Step 4: Who should you influence?

Step 5: Who can help you?

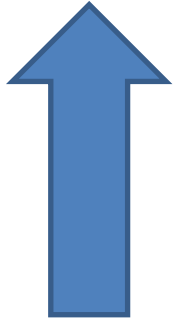
Step 6: How should you advocate?

Step 7: Evaluation and Reflection

## AADR Government Affairs Decisions



## **Step I: Define the goal and purpose of your campaign**



The goal of AADR advocacy is to increase federal funding for the National Institutes of Health, the National Institute of Dental and Craniofacial Research and other programs to improve oral health.

More Money=More Research  
More Research=More Jobs and More Lives Saved

Health Resources and Services Administration

Centers for Disease Control and Prevention

National Science Foundation

Food and Drug Administration

Department of Defense

1 (b) Section 223 of division G of Public Law 110–161  
2 is repealed.

3 (c) Subsections (a) and (b) shall take effect on Octo-  
4 ber 1, 2015.

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7 2015, the Agency for Healthcare Research and Quality is  
8 terminated.

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10 (1) In general.—The Secretary—

# Who Makes Funding and Policy Decisions?



009

H. R. 4681

## One Hundred Thirteenth Congress of the United States of America

AT THE SECOND SESSION

*Began and held at the City of Washington on Friday,  
the third day of January, two thousand and fourteen*

### An Act

To authorize appropriations for fiscal years 2014 and 2015 for intelligence and intelligence-related activities, for the United States Government, the Community Management System, the Intelligence Agency Retirement and Disability System, and for other purposes.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

#### SECTION 1. SHORT TITLE; TABLE OF CONTENTS.

(a) SHORT TITLE.—This Act is the Intelligence Authorization Act for Fiscal Year 2014.

(b) TABLE OF CONTENTS.—The table of contents of this Act is as follows:

- Sec. 1. Short title; table of contents.
- Sec. 2. Definitions.
- Sec. 3. Budgetary effects.

#### TITLE I—INTELLIGENCE ACTIVITIES

- Sec. 101. Authorization of appropriations.
- Sec. 102. Classified Schedule of Authorizations.
- Sec. 103. Personnel ceiling adjustments.
- Sec. 104. Intelligence Community Management Account.

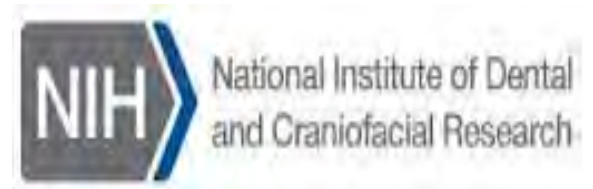
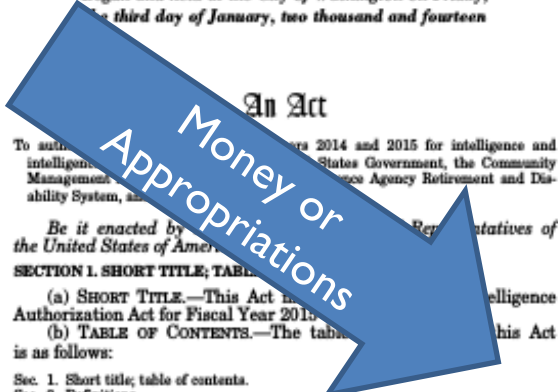
#### TITLE II—CENTRAL INTELLIGENCE AGENCY RETIREMENT AND DISABILITY SYSTEM

- Sec. 201. Authorization of appropriations.

#### TITLE III—GENERAL PROVISIONS

##### Subtitle A—General Matters

- Sec. 301. Increase in employee compensation and benefits authorized by law.
- Sec. 302. Restriction on conduct of intelligence activities.
- Sec. 303. National intelligence strategy.





## Step 2: Develop Written Materials



### NIH/NIDCR FY16 Funding Recommendations

Agency	FY12	FY13	FY14	FY15	F16 PBR	FY16 H	FY16 S	FY16 AADR
NIH	\$30.7b	\$29.07b	\$30.07b	\$30.31b	\$31.084b	\$31.184b	\$32.084b	\$32b
NIDCR	\$410.3m	\$386.8m	\$397.8m	\$397.7m	\$406.7m	\$404.8m	\$415.1m	\$425m

The American Association for Dental Research (AADR) calls on Congress to prioritize funding for the National Institutes of Health and the National Institute of Dental and Craniofacial Research (NIDCR) for FY2016. Rolling back sequestration cuts and providing increased funding will go a long way to improve the health of all Americans.

NIDCR is the largest institution in the world dedicated exclusively to research to improve dental, oral and craniofacial health. The health of the mouth and surrounding craniofacial (skull and face) structures is central to a person's overall health and well-being. Left untreated, oral diseases and poor oral conditions make it difficult to eat, drink, swallow, communicate and maintain proper nutrition. Scientists also have discovered important linkages between gum (periodontal) disease and heart disease, stroke, diabetes, and pancreatic cancer.

Treating oral health conditions is costly: the nation spent \$111 billion on dental services in 2013. While tooth decay and gum disease are the most prevalent threats to oral health, complete tooth loss, oral cancer, and craniofacial congenital anomalies, such as cleft lip and palate, impose heavy health and economic burdens on Americans. Below are examples of the important research supported by NIDCR:

- **Point of Care Diagnostics:** Salivary diagnostics are measures that draw and analyze saliva to test for conditions such as HIV, human papillomavirus (HPV), substance abuse, caries, periodontitis and oral cancer. As a result of research supported by NIDCR over the last decade, diagnostics also are showing great promise in screening for diabetes, heart disease, lung cancer, ovarian cancer and pancreatic cancer.
- **Enhanced Tissue Regeneration:** NIDCR-funded scientists have developed effective techniques to prevent inflammation from interfering with the use of stem cells to form bone and cartilage for oral, dental and craniofacial purposes. The isolation and enrichment of stem cells is also being explored, which would enhance the cells' ability to regrow bone and cartilage, with potential impacts throughout the health sciences sector.
- **HPV-Related Oral Cancer:** Scientists predict that this will be the most common HPV-related cancer by 2020. HPV-induced oral cancers among men are likely to exceed HPV-induced cervical cancers within the next eight years. In fact, HPV is now causing more oral cancers than smoking. But simply identifying the presence of HPV in a mouth swab or a blood draw does not definitively indicate the presence of cancer. More research is needed for the early detection of HPV-related oral cancer, and for the development of therapies that would lead to the prevention of cancer progression.

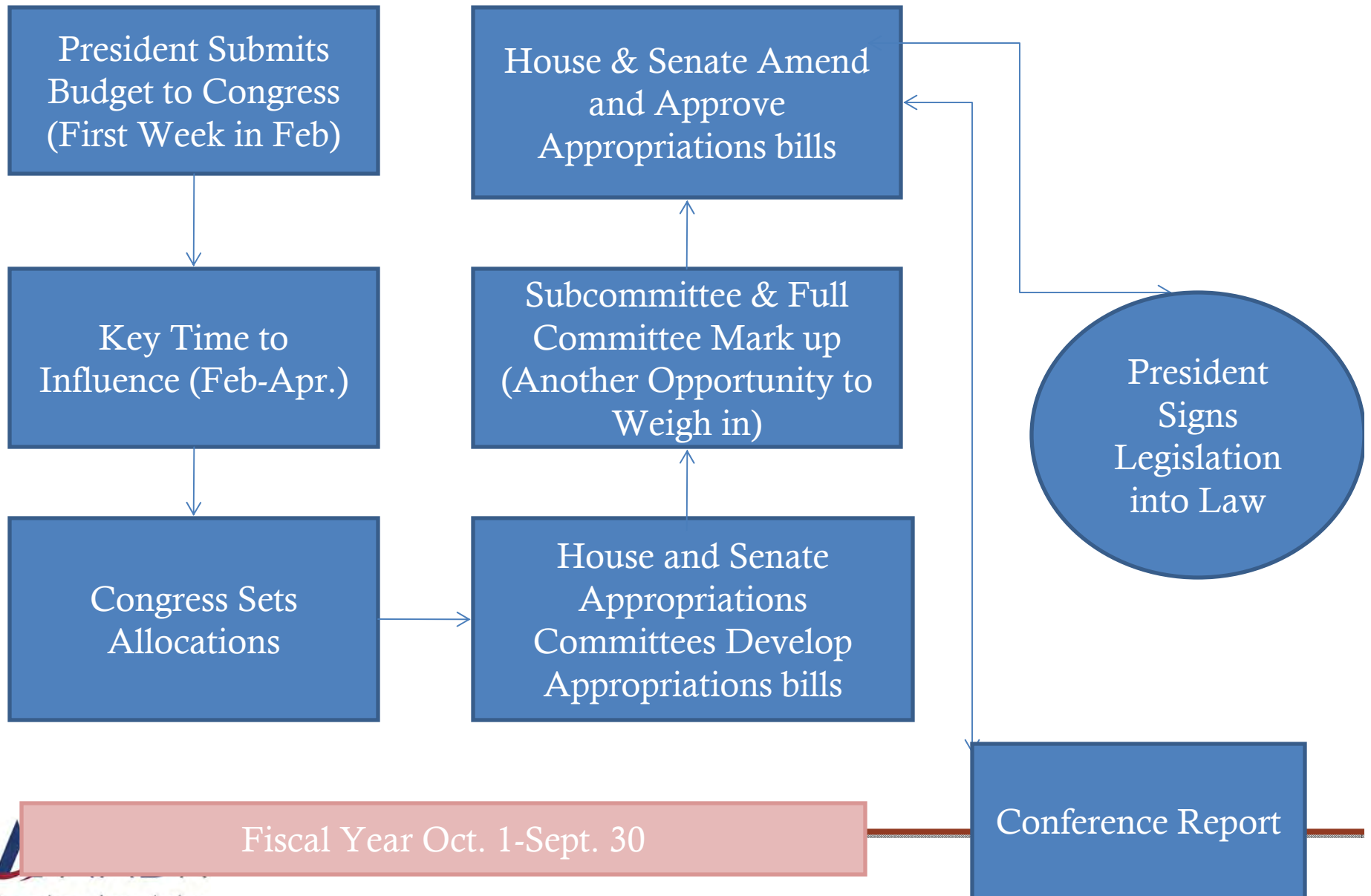
- Conduct research
- Interview members, volunteers and staff
- Discuss with external partners
- Solicit professional feedback
- Approval from board and executive director

*These documents formulate the foundation of your advocacy campaign.  
Accuracy, details and citation are critical.*





## Step 3: The Appropriations Process



## Step 4: Who should you influence?



### Congressional Oral Health Caucus

## Step 5: Who Can Help You?

Coalitions provide a forum for organizations to project a unified message on Capitol Hill which has a greater impact than acting alone.

**NDD  
UNITED**

WORKING TO  
STRENGTHEN AMERICA



COALITION *for* HEALTH FUNDING

### **The Ad Hoc Group for Medical Research**

A coalition in support of increased funding for the National Institutes of Health.

**ADA** American Dental Association®

America's leading advocate for oral health

**ADEA** | THE VOICE OF  
DENTAL EDUCATION

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 **AADR**  
American Association  
for Dental Research

## Step 5: Who Can Help You?

**Grasstops:** Volunteers, staff and/or members who have a good relationship with member(s) of Congress. These individuals are willing to contact members of Congress directly.



**Grassroots:** Volunteers, staff and or members who may or may not know members of Congress. These individuals are willing to call, write letters, testify and meet with members of Congress.

## Step 6: How Should You Advocate?





**If your Member/Senator has not already arrived at a firm decision on an issue, how much influence might the following advocacy strategies directed to the *Washington office* have on his/her decision?\***







# Day in the Life of a Hill Staffer

8:00 a.m.-Arrive at the office, read emails, news articles, turn on CSPAN

9:00 a.m.-11 a.m. Meetings with constituents and lobbyists at 30 minute increments

11 a.m.-12 p.m. Catch up on email, write briefing memos, check floor for votes and amendments

12 -12:15 p.m.-lunch

12:15 p.m. pre walk meeting for Senator, staff Senator's meeting, return Senator to office

2:00-5:00 p.m. Meetings with constituents and lobbyists 30 minute increments

5:00 p.m.-7:00 p.m.—Draft briefing memo, floor statements, catch up with other staff, and read mail.



**+** Hill Staff  
Schedule **=** ?

## Provide opportunities for constituents to engage with members of Congress in Washington, DC



**2014 AADR/ADEA  
Advocacy Day on Capitol Hill**

Washington, DC  
April 8, 2014  
9 a.m. - 5 p.m.  
Program Begins in the Rayburn House  
Office Building Gold Room (#2168)  
Register By March 24!

2013 was the year of budget cuts, uncertainty and a government shutdown. Join your colleagues to inform Congress about the impact of cuts to your program and urge them to increase funding for oral health research and education.

Your participation is extremely important in this current budget climate. Members of Congress need to hear from their constituents.

The program will include:

- ✓ A morning briefing with Members of Congress and staff from select Federal agencies.
- ✓ An afternoon of individual meetings with Congressional offices.

- Lobby days
- Testifying before Congress
- Congressional briefings
- Action alerts



## Encourage “At Home” Interactions with Members of Congress

### More Budget Cuts? It’s Possible. Advocate Today!

Posted on July 7, 2014 by Carolyn Mullen

Last year Congress implemented devastating budget cuts known as sequestration and shutdown the federal government. This year, despite the efforts of our community, the appropriations process has stalled and increased funding for dental, oral and craniofacial research may not happen.

#### What can you do?

This August, members of Congress will be working in your state and community. You can [invite](#) a member of Congress to tour your research facility or [schedule](#) a district office meeting. During these interactions it is imperative that members of Congress know that federal budget cuts have consequences and increased funding for dental, oral and craniofacial research is necessary.

#### Why?

Members of Congress listen and care deeply about the opinions of their constituents. While AADR works on your behalf in Washington, DC, local advocacy is extremely important to amplify our message here and for you to build a relationship with members of Congress.



## Media Strategies

SHREWSBURY, Mass. — *The Shrewsbury Daily Voice* accepts letters to the editor. Signed letters may be emailed to [jswinconeck@dailyvoice.com](mailto:jswinconeck@dailyvoice.com).

Dear Editor:

I feel compelled to share a story with you that bares repeating in the face of, all too often, negative news. This summer I had the opportunity to work with the constituents' office of US Senator Scott Brown in the hope that he could assist our family on a very important and personal issue.

Never before had I sought to avail myself of local government when I needed assistance. But my 13-year-old son, Teddy, an honors student at the Hillside School in Marlborough, was very sick. He had to take a medical leave of absence from school last spring, and we had exhausted all local resources.

Senator Brown's office helped to navigate the healthcare system and obtain a contact at the Mayo Clinic in Rochester, Minn., which led to his visit there. They specialize in complex cases like Teddy's, and I am thrilled to report that he is thriving and healthy after a short visit to the Mayo.

I have never worked on a political campaign or wrote a letter to the editor before, but I am so grateful for the help we received from the Senator Brown's office and the wonderful team at the Mayo. Teddy started school on the very first day, and he'll be taking classes this fall at MIT as well. We couldn't have done it without the Senator's help. I just thought your readers should know.

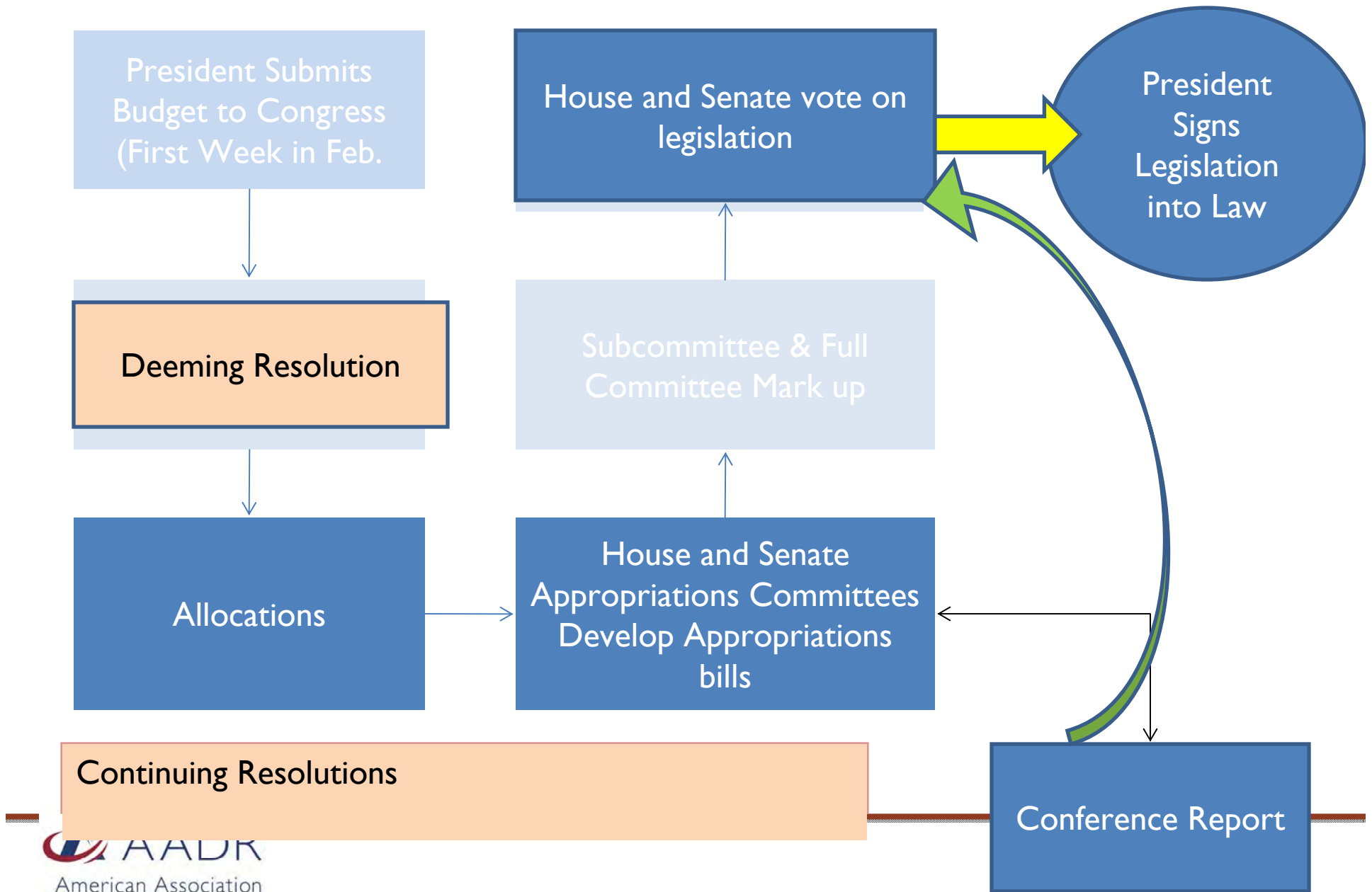
Pamela Provo  
Shrewsbury

American Association  
for Dental Research

- Letters to the editor
- Op-eds
- Celebrities
- Advertisements
- Twitter



## Step 7 Reflection: The Current Appropriations Process



## Why Does Advocacy Matter?

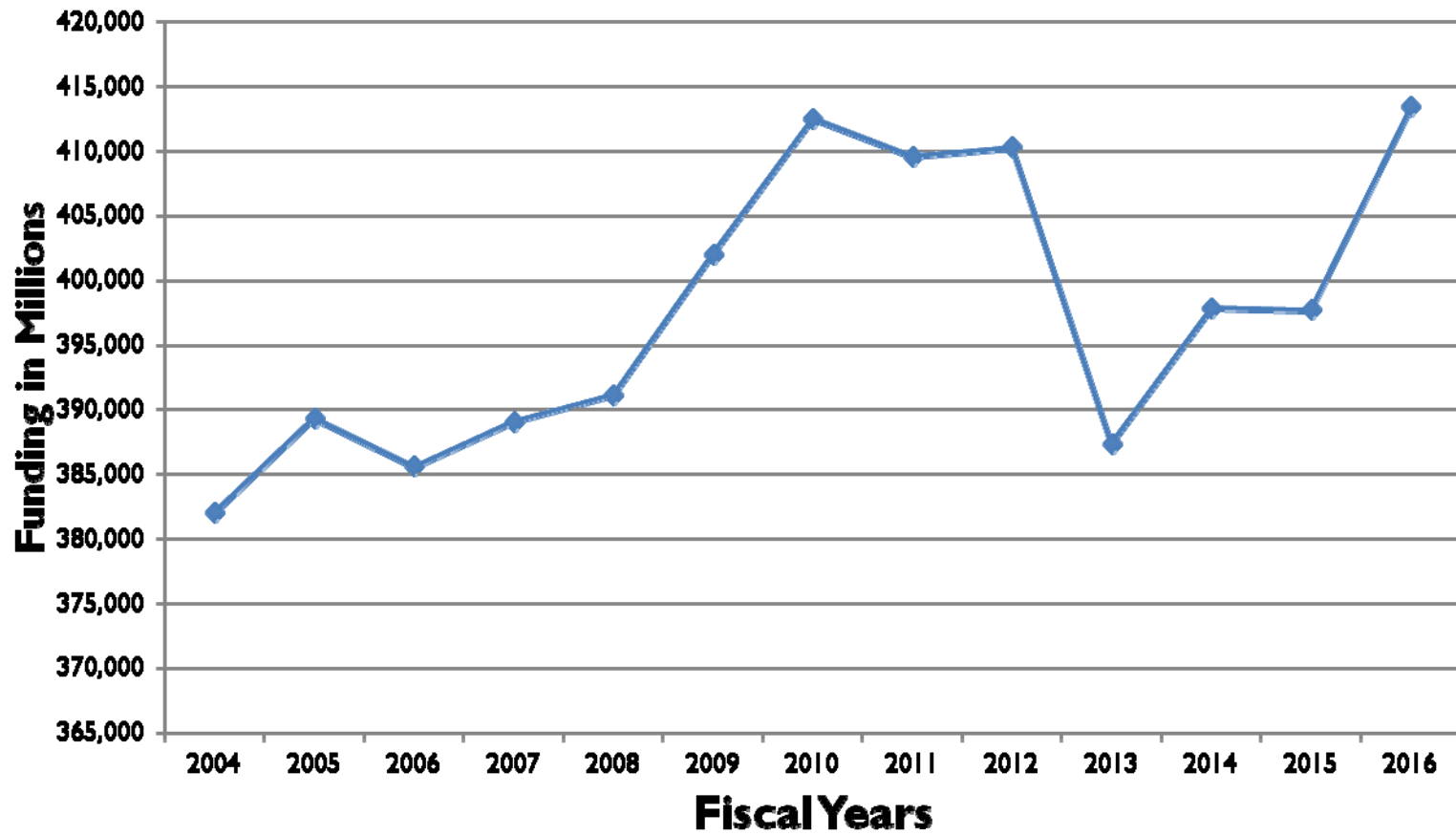


- Playing defense, protecting programs from cuts and raising awareness about research and other oral health programs.
- “Drain the swamp” was a popular campaign message and constituents are ever more important in advocacy.
- If Congress doesn’t hear from you, the programs you care about could be cut or outright terminated.

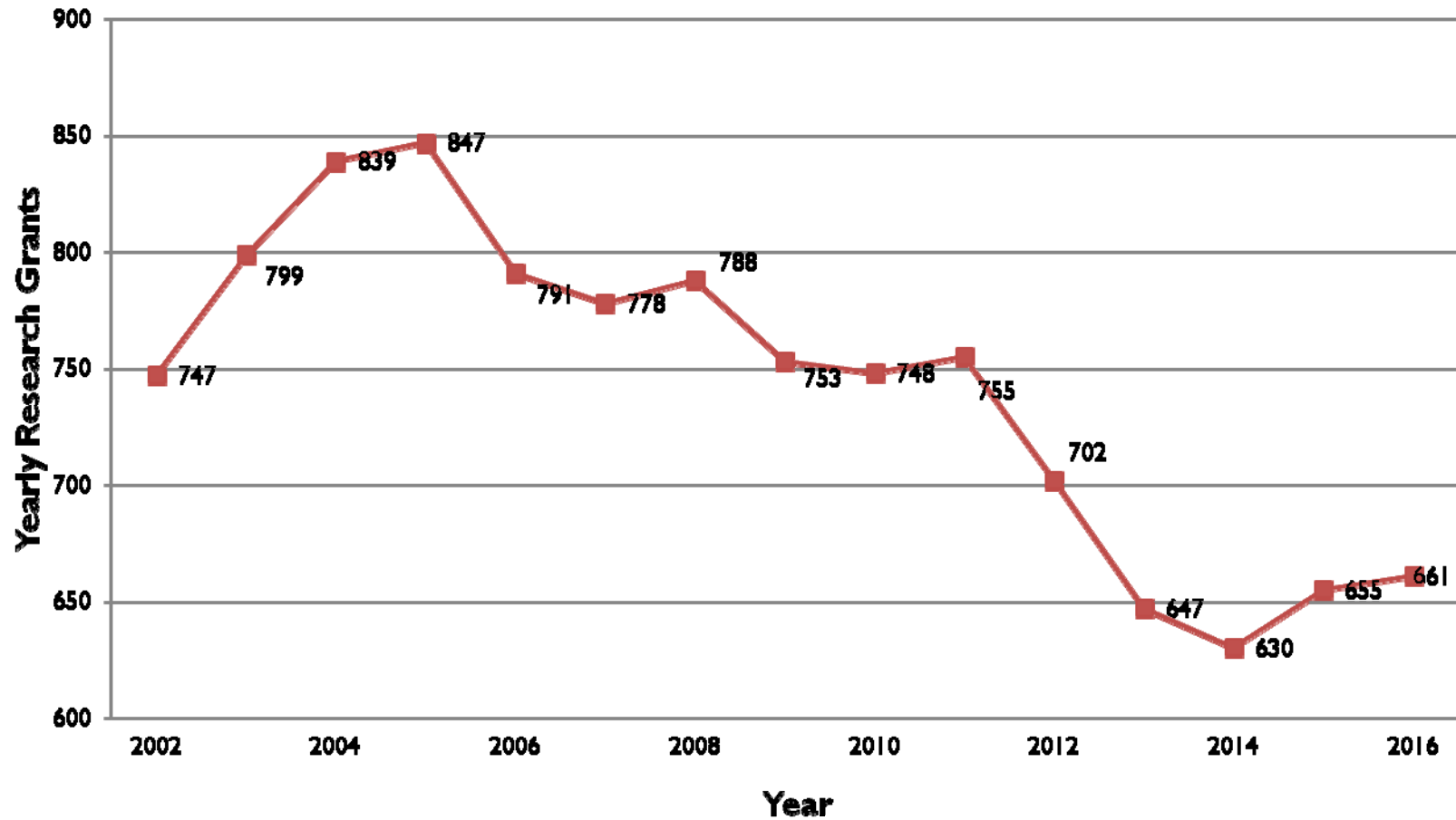




## NIDCR Funding 2004-2016



## NIDCR Research Grants From 2002-2016



## Advocacy in Action: Remember this?

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## Friends of AHRQ Sprung Into Action

- #Save AHRQ campaign was born!
- Generated 2,510 tweets
- Media Coverage
- Letters from the health community
- Op-eds drafted by members of Congress
- Dear colleague letters circulated by members of Congress

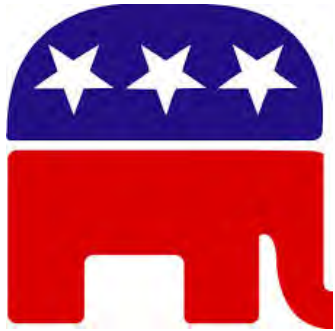
*As a result of efforts AHRQ's budget was only cut by 8.2%. Members of Congress emphasized that while these efforts made an impact this same level of energy is needed in February when the annual appropriations bills are written.*

## Redefining Success: End of the Year Evaluation

- √ Increase or sustain funding for biomedical research and other oral health programs
- √ Include report language in annual appropriation bill
- √ Increase number of meetings conducted with members of Congress
- √ Provide a forum for AADR members to engage with members of Congress in Washington, DC
- Limited advocacy activities by AADR members
- No media exposure by AADR members
- Limited use of social media

# Final Thoughts

## Politics



## Power

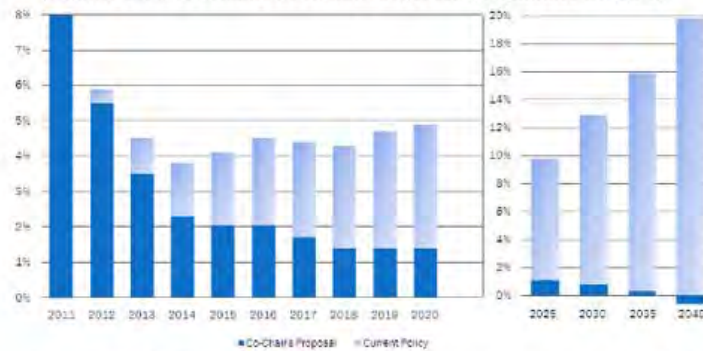


## Policy



### Reduces Deficit to Sustainable Levels by 2015, Balances the Budget by 2037 DRAFT

*Annual Deficits Under Co-Chairs' Proposal (as percent of GDP)*



Current policy based off of "plausible baseline" through 2020, which is based largely on parameters outlined in CBO's Alternative Fiscal Scenarios, with discretionary spending growth at requested levels rather than at GDP growth. Beyond 2020, Current Policy is based directly off the Alternative Fiscal Scenarios.

Deficit projections include off-budget impact of Social Security reform. Excluding these measures would result in a deficit of about 2.2 percent of GDP in 2015 and 1.6 percent of GDP in 2020.



Thank you!

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