

# Hot Topics in Public Health: Community Advocacy in Action *Webinar Summary*



Community of Practice  
for US Advocacy Groups  
*Webinar Series*

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**sanofi**

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## Why it Matters

Community advocacy remains central to improving outcomes and expanding access for patients. In today's complex public health environment, prevention, early screening, and trusted local engagement are essential for ensuring that individuals receive timely care and support. This session highlighted two community-centered models that strengthen

***"We must all come together to bring solutions to patients in the community because we know that is where health happens."***

**Angie Bricco**  
**Head, US Public Affairs & Patient Advocacy**  
**General Medicines**  
**Sanofi**

preventive care delivery, build trust, and create meaningful policy and practice change.

The webinar focused on learning from proven models, sharing practical strategies, and identifying next steps that patient advocacy organizations can take to strengthen community-based advocacy efforts.

## Key Takeaways: Project Prevent



**June Cha, PhD, MPH**  
**Head of Policy**  
**FasterCures, Milken Institute Health**

Project Prevent is an initiative to foster a prevention first health system by elevating community partnerships, maximizing the roles of non-physician providers, and aligning policy levers to support sustainable preventive service delivery.

### Prevention must be treated as an investment

Prevention improves quality of life, reduces avoidable disease burden, and addresses rising costs driven by chronic conditions and workforce shortages. June emphasized that prevention cannot be viewed solely through a cost saving lens. Instead, it is a long-term investment in population health and community resilience.

***"We must frame prevention as an investment for the future, not only as a tool for cost saving."***

**June Cha**

## Community partnership is the foundation of scalable preventive care

Project Prevent's research showed that preventive models succeed when they are rooted in trusted community partnership. Community organizations, local leaders, and culturally fluent partners create the conditions needed for people to engage in screening, follow up, and long-term preventive behaviors.

## Non physician providers are essential for delivery and trust

Nurses, community health workers, patient navigators, coordinators, and pharmacists strengthen preventive care by meeting people where they are. They enhance trust, reduce barriers, and extend capacity in an overstretched system. June noted that sustainable reimbursement for these roles is needed to support effective preventive service delivery.

## A data driven, risk-based approach improves targeting and impact

Clear risk profiles help clinicians and community teams identify populations who would benefit most from early screening, proactive interventions, and follow up.

## Policy alignment is needed for prevention to scale

Recent work includes an issue brief, a Project Prevent Collaborative with more than 40 organizations, and new report highlighting the opportunity to shift Medicare and Medicaid incentives toward preventive care. June noted immediate opportunities such as community health integration codes in Medicare and longer-term efforts to strengthen Medicaid reimbursement for CHWs and other non-physician providers.

## Key Takeaways: Neighborhood Nursing



**Sarah L. Szanton, PhD, RN, FAAN**

**Dean**

**Patricia M. Davidson Health Equity and Social Justice Professor**

**Johns Hopkins School of Nursing**

Neighborhood Nursing is a universal, community-based model that embeds nurses and community health workers in defined geographic areas to provide relationship based, preventive support for all residents.

## A shift from treating illness to supporting what matters to people

***“We shift the question from what is the matter with you to what matters to you.”***

**Sarah Szanton**

Sarah described a mindset shift that anchors care in individuals goals and daily realities. Neighborhood Nursing asks what matters to you instead of what is the matter with you. This approach builds trust, strengthens engagement, and allows earlier identification of health needs.

## Universal access promotes equity and prevention

Unlike traditional models that focus only on high cost or high-risk individuals, Neighborhood Nursing serves everyone in a community. This universal approach helps uncover needs that might otherwise go unnoticed and prevents deterioration that could lead to crisis level care.

## Community health workers (CHW) and nurses work together to address clinical and social needs

The model pairs a nurse with a community health worker to deliver holistic support. This includes clinical assessment, navigation, social service connection, preventive education, and trust building with residents who may be isolated or disconnected from the health system.

## Community strengthening activities improve health indirectly and directly

Walking groups, social gatherings, and health education sessions build social connection, reduce isolation, and support healthy behaviors. These activities also increase access to information about Medicare, screening guidelines, and advance care planning, which can drive earlier and more effective use of services.

## Sustainable change requires parallel work across implementation, research, policy, and education

Neighborhood Nursing is advancing through four interconnected pathways. Implementation provides real world experience, research builds evidence, policy work identifies pathways for payer support, and education prepares future nursing leaders to work in community settings. Sarah highlighted active expansion into rural and suburban areas and strong interest from insurers.

## Insights from the Community

Participants shared real world examples and challenges from their own community centered work.

- **Faith Health Alliance**

Bishop J. L. Carter described a nationwide network of Black and Latino churches that address health disparities through holistic, community informed interventions. He shared success during COVID, when faith-based outreach significantly improved vaccination rates in Baltimore. He emphasized the importance of long-standing trust.

***“You cannot attack one problem.  
You must take a holistic approach.”***

**Bishop J. L. Carter  
Faith Health Alliance**

- **Kidney disease early detection**

Stephanie Cogan from the National Kidney Foundation discussed efforts to increase diagnosis rates for chronic kidney disease by training community facing providers, including community health workers, to promote testing and guideline concordant care for people with diabetes or hypertension. This approach is being rolled out state by state.

- **Community health worker training**

Venus Gines emphasized the need for rigorous and consistent CHW training to prevent misinformation. [Dia De La Mujer Latina](#), based in Texas, provides certified training programs and specialized modules for patient navigation, behavioral health navigation, and clinical trial navigation.

- **Movement as medicine and community wellbeing**

John Clymer from the National Forum for Heart Disease and Stroke Prevention highlighted strong alignment between Neighborhood Nursing and the National Forum’s [Move with the Mayor](#) initiative, a network of more than 200 mayors promoting physical activity and social connection. He noted that “there are clear opportunities for collaboration,” especially as both efforts use movement to strengthen community bonds and support prevention.

- **Funding and sustainability**

Participants asked about payment models for Neighborhood Nursing. Sarah shared that early phases are funded through philanthropy, but insurers have expressed interest in supporting the model as evidence builds. June added that Medicare’s new community health integration codes offer a near term opportunity for providers to utilize auxiliary personnel such as CHWs, and she highlighted long term efforts to secure stronger Medicaid reimbursement and policy alignment.

## Call-to-Action: How can you get involved?

### Engage in community partnerships

Strengthen relationships with local leaders, faith communities, housing organizations, and other trusted partners who can expand screening, reach underserved populations, and build sustained engagement.

### Elevate non physician provider roles

Advocate for reimbursement and integration of CHWs, nurses, and navigators in community settings, particularly for preventive services and patient support.

### Share evidence and outcomes

Collect and communicate measurable results from community-based programs to influence payers and policymakers and support long term sustainability.

### Participate in collaborative efforts

Join [Project Prevent collaborative](#), [Neighborhood Nursing quarterly calls](#), or similar networks to share lessons and connect with potential partners.

### Advance local advocacy

Use community success stories, participant feedback, and local needs assessments to shape policy engagement and elevate the patient voice.

## Resources

1. [Project Prevent | Milken Institute](#)
2. [ProjectPreventCollaborativeOneSheet.pdf](#)
3. [Toward Self-Sustaining Models for Preventive Health Investments | Milken Institute](#)
4. [Scaling and Sustaining Better Health Outcomes Through Prevention | Milken Institute](#)
5. [Improving and Sustaining Health Through Prevention Across Medicare and Medicaid | Milken Institute](#)
6. [Neighborhood Nursing - Johns Hopkins School of Nursing](#)

7. [Now What? Neighborhood Nursing's Answer to the US Health Care Paradox of Spending More but Getting Less | Milbank Quarterly | Milbank Memorial Fund](#)
8. [Faith health alliance - Sustainable Health Care](#)
9. [CKDintercept | National Kidney Foundation](#)
10. [Dia De La Mujer Latina](#)
11. [Move with the Mayor | National Forum](#)