Grassroots Movement Building and Preemption in the Campaign for Residential Fire Sprinklers*

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ABSTRACT

Home fires account for 85% of fire deaths in the United States, the majority in 1- or 2-family homes lacking fire sprinklers. Since 1978, however, a grassroots movement has successfully promoted more than 360 local ordinances mandating sprinklers in all new residential construction, including 1- and 2-family homes. The homebuilding industry has responded by seeking state preemption of local authority, a strategy previously used by other industries concerned about protecting their profits. From 2009 through 2011, 13 states adopted laws eliminating or limiting local authority over residential fire sprinklers. This study of the residential sprinkler movement adds to our understanding of grassroots public health movements and provides additional evidence that preemption can have a negative impact on public health and safety.

Lessons for the Field

Automatic fire sprinklers are considered the most reliable method for preventing residential fire deaths and injuries and are relatively inexpensive. The success of the grassroots sprinkler movement in promoting hundreds of local sprinkler ordinances and efforts by the homebuilding industry to hinder the movement via state preemption suggest 5 important lessons for advocates working to address other public health and safety concerns.

1. A small number of effective grassroots advocates can achieve major policy changes. The fire sprinkler movement began as a small national network of passionate, trusted local leaders in the fire service, later joined by other advocates. Together, their efforts resulted in the passage of more than 360 ordinances and 2 state laws mandating fire sprinklers in new 1- and 2-family homes.

2. To achieve this kind of success, advocates must work in venues in which their effectiveness is amplified and that of more ostensibly powerful groups is reduced. This generally occurs at local levels of government. There, advocacy results in tangible improvements in public health and safety that further energize grassroots activists. Local laws also have the advantage of local enforcement and educational capacity, which can facilitate implementation. Interestingly, a recent report from the Pew Center found that by a 61% to 31% margin, most Americans have a favorable view of their local government by contrast to their state government (52% to 42%) or the federal government (33% to 62%).

3. The successful pursuit of the grassroots strategy requires that local entities have support from state and national organizations. Depending on the issue, these can be nonprofits, public, or profit-seeking entities. In the case of residential fire sprinklers, national organizations provided training, technical assistance, advocacy tools, and other support to local advocates. In addition, grassroots fire sprinkler advocates relied on research that was funded or conducted by public agencies such as the US Department of Commerce.

4. The local strategy can achieve major changes and is the most likely to achieve significant improvements on many public health and safety issues. However, local strategies, particularly those relying on grassroots efforts, may take many years to succeed. The sprinkler movement has taken 30 years to achieve widespread success, which is consistent with the experience in other public health movements. It is important for funders and other public health leaders to recognize that, although successful movements can produce fundamental improvements in policies and society, they may take significant time to achieve their ultimate goals.

5. Preemption hinders grassroots movements. State preemption has had a negative impact on the grassroots sprinkler movement because it takes away the structural opportunity to advocate local policy change, a key reason that local movements form in the first place. Participants in the sprinkler movement were, for the most part, unaware of the historic role preemption has played in undermining other public health movements. A deeper appreciation of the power of grassroots movements and the risks associated with preemption can help the field take advantage of movement building and protect state and local public health authority.

Conclusions

The residential sprinkler movement adds to the evidence that grassroots movement building is a powerful tool in public health, regardless of the issue being addressed. As has been the case in other areas of public health and safety, however, local action is stymied by state preemption. To achieve enduring success, the public health community should, in most cases, support grassroots movements and oppose preemption. This case study also strengthens the argument that the fire service performs an important public health function and is thus an important partner in public health efforts.

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