

# OVERVIEW/SCHEDULE

This module is designed to take 45 minutes. Options for additional and follow-up activities are included. A general break down of the time is as follows:

WELCOME, INTRODUCTIONS, AND CASE STUDY Welcome and Why We're Here (5 minutes)
Case Study (5 minutes)

CORE CONCEPT (15 minutes)

PRACTICE (15 minutes)

CLOSING, EVALUATION, AND OPPORTUNITIES (15 minutes)

### EDUCATIONAL OBJECTIVES

This module will emphasize the key points pediatric residents should keep in mind when working with or communicating to decision-makers. The intent of the module is:

To define advocacy; the role it plays in improving children's health and well-being; and the unique role pediatric residents and pediatricians can play in advocating on behalf of children

To provide tips and tools for communicating with decision-makers, including how to use their personal stories to educate and persuade decision-makers.

To increase pediatric residents' advocacy-related confidence and comfort level in working with decision-makers.

To demonstrate that advocacy is doable and can fit within the demands of a pediatric resident's busy schedule.

# MATERIALS AND EQUIPMENT

For this module, you will need the following handouts, materials, and equipment:

#### Handouts:

- Copies of the Legislative Interview Simulation worksheets for each pediatric resident.
- Copies of the evaluation.
- Copies of the Opportunities Worksheet. The Opportunities Worksheet contains a list of advocacy activities that relate to the module's topic and can be performed by pediatric residents following the module as their interest and time allows.
- Quick Reference Cards that contain instructions for looking up chapter contact information and links to additional resources.

#### Equipment:

- Flip chart or white board
- Markers/Dry erase markers for flip chart/white board

#### If using PowerPoint:

- PowerPoint projector
- Screen or white wall for viewing PowerPoint
- Copy of PowerPoint with trainer notes on computer or zip drive.

#### (Optional) Legislative Expert Presentation

If using advocacy/legislative expert presentation in place of PowerPoint:

Invite a supportive decision-maker or lobbyist from the residency program or AAP chapter who can participate in the module, share tips and tools that get his/her attention on issues, and can help pediatric residents understand that decision-makers want to hear from pediatric residents.

Prior to the module, the advocacy/legislative expert should be briefed by you in terms of what to expect from the class, background on the pediatric residents, the time allotted for their presentation, and what you are looking for in the presentation, including:

- What type of contact and communication captures decision-makers attention.
- Examples of contact and communication that was highly persuasive or influential.
- Tips to keep in mind when contacting their decision-maker.
- How a pediatric resident's story can build support from a decision-maker and complement direct lobbying tactics.

## ROOM SET-UP AND ENVIRONMENT

You are encouraged to set-up the room in a way that promotes participation and provides a safe learning environment for pediatric residents. Some room set-up tips to consider include:

- Setting up tables in a "u-shaped" formation to encourage sharing.
- Greeting residents as they enter the room and providing refreshments.
- Playing upbeat music as residents are coming in to the room.

# WELCOME, INTRODUCTIONS, AND CASE STUDY

#### TRAINER NOTE:

The Welcome, Introductions, and Case Study section is designed to give you the opportunity to welcome pediatric residents and quickly highlight the topic and skills that will be covered within the module. It also includes a "case study" or story from an actual pediatric resident that illustrates the role a pediatric resident can play in relation to the module's advocacy topic. The purpose of the case study is to provide a familiar and comfortable format for introducing the module's topic in a way that pediatric residents can relate to.

The Welcome, Introduction, and Case Study section is designed to take about ten minutes total. The Welcome and Why We're Here sections should take roughly five minutes total and the Case Study section taking another five minutes.

#### WELCOME

Welcome everyone.

Acknowledge that pediatric residents have a lot going on in their lives right now and thank them in advance for being here today.

Briefly introduce yourself. Some things to consider sharing include:

- Your experience with advocacy work.
- Why you got into your career path.
- How you've personally seen advocacy improve the health and well-being of children and/or the profession of pediatrics.
- A personal quotation that relates to the training module topic.

Mention that there is a lot of wisdom and experience in the room. Encourage pediatric residents to share and participate throughout the training module.

#### WHY WE'RE HERE

#### TRAINER NOTE:

The Why We're Here section is meant to be included in each module. The intentional repetition is designed to help underscore the key training principles for the pediatric residency training program—that advocacy is important and doable, that pediatric residents are uniquely positioned to be powerful advocates, and that advocacy is not much different from the work pediatric residents are already doing.

Briefly share why advocacy is an important part of being a pediatrician. Some talking points include:

Advocacy means speaking out on your patients' behalf. Advocacy assumes that there is a problem that needs to be changed and it is a way to drive, or effect that change. At its core, advocacy is about speaking out on behalf of children's health and well-being, whether it is for one child or for systematic solutions that benefit many children.

Pediatric residents work with others everyday. The same skills you use when working with patients, hospital administrators, or insurance companies can be applied when working in advocacy partnerships. Through working together we can accomplish more than we can alone.

Pediatricians can play a powerful role in creating lasting and meaningful change for the patients they serve. We're here today to continue that tradition—Isaac Abt, MD, the first AAP President, said: "It should be our aim to discover neglected problems and, so far as in our power, to correct evils and introduce reform."

#### CASE STUDY

Focus of today's module is on working with decision-makers.

Tell pediatric residents that for the purpose of this training, decision-makers are defined as the people who have decision-making authority over the children's health issues most important to you.

Ask pediatric residents for examples of decision-makers. Write the responses on the flip chart or white board. Mention that decision-makers could include appointed or elected government officials (mayors, legislators, or state or federal department heads), as well as non-elected leaders of influential groups or organizations (business

The purpose of today's module is help you feel more comfortable and confident in communicating with decision-makers and provide you with tips and tools on how to use your personal story to educate and persuade them.

Share a case study that illustrates how another pediatric resident shared their personal experience and expertise with a decision-maker in order to advance a children's health issue they cared about:

#### PEDIATRICIAN ADVOCACY STORY

I am a third year pediatric resident and this year I, along with a few of my fellow residents, met with members of our state legislature on how proposed budget cuts to Medicaid would affect our patients. We chose this topic because most of our patients rely on some government program for their health care, and we were very passionate about helping them.

I didn't have any prior experience with lobbying, and I didn't know exactly what to expect. Along with my fellow residents, I received a couple of training sessions about how to lobby through our pediatric residency training program, researched the topic, and collected some patient stories. We also prepared a packet of information and scheduled legislative visits with both Democrats and Republicans working on our issue.

The experience itself was fantastic. The amazing realization I think we all had was that these powerful and important lawmakers actually work for us. Anyone can schedule a visit with them and your presence really can influence how policy is made.

All in all it was a great experience, and I think it helped us understand better how to wield our power as pediatricians to effect policy change as advocates for children.

Rebecca Dudovitz, M.D.

Following the case study, ask pediatricians their reactions to the case study, including what they liked about it and what surprised them about it.

If time allows, ask if anyone has a story of their own that they would like to share about a time when they worked with or communicated with a decision-maker or if they know someone else who did. Probe on what motivated them to reach out to the decision-maker and the result of the communication.

Note that the case study illustrates that:

Being a decision-maker does not automatically make someone an expert in children's health. Decision-makers need to hear from peoples—including pediatric residents—in order to learn about how the decisions they make affect children's health.

By telling your story and sharing the experiences you see as a pediatric resident through your work, you can help decision-makers put a human face on the issue.

Decision-makers don't differentiate between pediatricians and pediatric residents. They look to pediatric residents as credible and well-respected children's health experts. You are a powerful and influential advocate to decision-makers because you have compelling stories to tell and have science on your side.

Advocacy can fit into the busy schedule and competing demands of pediatric residents. If you don't have the time to meet with a decision-maker personally, you can still influence them by sending them an e-mail, calling them, or writing a letter on behalf of an issue you care about. Many advocacy activities, including communicating with your decision-maker—can be completed within five to thirty minutes.

Briefly mention that pediatric residents—acting as individual citizens—can contact decision-makers on behalf of any issue; however, they need to be careful that unless they have been given explicit permission, they should never speak on behalf of the AAP, their hospital, or their training program. When in doubt, please check with your place of employment or the AAP.

## CORE CONCEPT

#### TRAINER NOTE:

The Core Concept section of the Working with Decision-Makers module emphasizes the "how to" or the basic tips and information pediatric residents need to keep in mind in relationship to the module's topic. The purpose of this section is to emphasize how the skills used in this concept relate to the skills pediatric residents use in their work everyday.

This section includes two options for presenting the core concept:

- A brief PowerPoint accompanied by guided group brainstorms and prompting questions that you can use to present the skills and encourage pediatric residents to share their experiences and input.
- An alternate activity that includes a different medium for presenting the core concept.

The two options are designed to help you build flexibility into the pediatric residency advocacy training program curriculum. It allows you to pick and choose which teaching medium to use based on your time, resources, and the current needs and make-up of the pediatric resident participants.

The Core Concept section is designed to take about 15 minutes.

# OPTION #1: POWERPOINT AND GUIDED QUESTIONS

Ask the group why they chose to become pediatricians. After a few pediatric residents have shared their stories, note that many of the reasons you heard stem from wanting to make a difference in the lives of children.

Mention that sometimes this difference means providing information to parents on how to keep their children healthy and at other times, it means providing critical and life-saving treatment. The children that you have made a difference to have names and faces. They are part of the collective story of what drives you to provide the best care possible every day.

Mention that the same stories that drive you to provide the best care to your patients are also what drive many pediatricians to get involved in advocacy efforts. For example:

- Pediatricians don't want to see another child with a brain injury because there are inadequate child helmet laws or enforcement in their community.
- Pediatricians don't want to see another child miss their immunizations or preventive care because of lack of affordable health insurance.
- Pediatricians don't want to limit the number of patients they see because of inadequate payment and burdensome regulations.

Your patients' stories and your direct experience providing care put a human face on the broader advocacy issues that need to be changed in order to protect children's health and well-being.

These stories also give pediatricians power and influence to drive change. Your story can make the issue real to decision-makers in a way that fact sheets and statistics alone do not. This personal touch can capture the attention of decision-makers and help propel your issues and concerns forward.

Note that the PowerPoint you are about to walk through focuses on how to use your story in order to communicate effectively with decision-makers.

Show PowerPoint. As you are presenting the PowerPoint, pay special attention to the notes section. The PowerPoint notes section includes key points and prompting questions to include in your presentation.

Following the PowerPoint, ask the pediatric residents if they have questions. As time allows, spend a few minutes answering their questions.

Close by encouraging pediatric residents to make an initial contact with their decision-makers. The purpose of this initial contact should be to introduce and identify themselves as a pediatrician and a resource on children's health and wellbeing. Emphasize that a short introductory call begins to build a relationship and this relationship will help them down the line when they are making a request of their decision-makers.

Also, encourage pediatric residents to use their chapter as a resource when contacting their decision-makers. AAP chapters can provide pediatric residents with key messages and speaking points, helping reinforce strength in numbers by creating a consistent message. AAP chapters can also provide key background information on where their decision-maker stands on an issue and may be able prepare residents for their contact.

# OPTION #2: LEGISLATIVE EXPERT PRESENTATION

Ask the group why they chose to become pediatricians. After a few pediatric residents have shared their stories, note that many of the reasons you heard stem from wanting to make a difference in the lives of children.

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Mention that today a legislative expert is going to spend some time talking about what they view as the most effective ways to capture decision-makers attention and why pediatric residents' stories are needed to help educate and persuade decision-makers.

Briefly introduce the legislative expert.

Give the legislative expert the floor. Encourage them to share a few examples of personal stories that persuaded or influenced decision-makers and tips to keep in mind when contacting their own decision-makers and common mistakes to avoid.

After the legislative expert has shared a few examples and tips and tools, ask pediatric residents if they have questions for the legislative expert.

As time permits, allow for questions and answers.

Following the presentation, reiterate the following important points to keep in mind:

- Effective advocacy—or getting decision-makers to support your issue—is about letting decision-makers know what you think about the issues you care about.
- Through personal and ongoing contact, not only can you gain their attention, but you can ultimately build a relationship with your decision-maker that will make them more likely to support children's health and well-being in the future.
- Regardless of whether you are reaching out to your elected official through an e-mail, letter, phone call, or meeting, keep in mind the following:

State you are a constituent and a pediatrician.

Make your contact personal.

Tell your story.

Include a concrete or direct "ask" in your communication.

Make regular contact.

Thank legislators for actions that are in line with the things you care about.

Mention that their AAP chapter, along with the AAP Division of State Government Affairs and AAP Department of Federal Affairs, can help pediatric residents find out information about their decision-makers and how to contact them. Visit the State Government Affairs and Federal Affairs sites on the AAP Member Center at: http://www.aap.org/moc. Contact information is available there or by calling the national AAP office.

Close by encouraging pediatric residents to make an initial contact with their decision-makers. The purpose of this initial contact should be to introduce themselves and offer to be a resource on children's health and well-being. Emphasize that a short introductory call begins to build a relationship and this relationship will help them down the line when they are making a request of their decision-makers.

### PRACTICE

#### TRAINER NOTE:

The Practice section of the Working with Decision-Makers module allows pediatric residents to practice what they have just learned and increase their comfort level with the advocacy topic in a safe, fun, interactive, and open environment.

The practice section is designed to take about 15 minutes.

#### LEGISLATIVE INTERVIEW PROFILES EXERCISE

Divide pediatric residents into five groups. Assign each group a legislative interview simulation.

Explain that each group will have ten minutes to work through their assigned legislative interview scenario. Ask each group to identify the top one to three tips they found most useful from their legislative interview scenario.

Ask the groups if they have any questions before they begin.

Keep track of time and give groups both a five minute and two minute warning.

After the ten minutes has passed, ask each group to quickly share back to the larger group their legislative interview scenario and one to three helpful tips for working with decision-makers that fit this scenario.

If time permits, ask pediatric residents if they have additional questions about working with decision-makers.

Alternatively, this exercise could be done through role play with the advocacy/legislative expert and/or other faculty playing the role of the legislator. In order for the role play to be successful, it is important to find people who are comfortable and confident playing this role.

# CLOSING, EVALUATION, AND OPPORTUNITIES

#### TRAINER NOTE:

The purpose of the closing, evaluation, and opportunities section is to provide closure on the module's topic, identify action steps that pediatric residents can do next as a result of attending this training module, and gives pediatric residents a chance to evaluate the session.

The closing and evaluation section is designed to take about five minutes.

#### CLOSING

Thank pediatric residents for participating in the training module.

Emphasize that advocacy doesn't have to be hard or take a lot of their time. Communicating with your decision-makers uses the same communication skills you are already using in your professional setting.

Don't get frustrated if you don't see immediate results. Change takes time. Know that your actions make a difference, celebrate the small steps, and stay persistent.

Remind them that they can be effective advocates for children's health by telling their story to, and communicating with, their decision-makers. Pediatric residents can provide decision-makers with information and expertise in the area of children's health and well-being, and also help put a human face on children's health issues. Remind the residents that people outside of the hospital walls—including decision-makers—do not differentiate between pediatric residents and pediatricians.

#### **EVALUATION**

Invite any final questions or observations from the group.

Optional: If time allows, go around the room and ask each pediatric resident to share one thing that they learned today about how they can share their story with decision-makers or one thing they will do to persuade their decision-maker on behalf of children's health issues.

Pass out an evaluation form to each pediatric resident and ask them to fill it out and turn it in.

#### **OPPORTUNITIES**

While pediatric residents are completing their evaluations, hand out the Opportunities Worksheet that contains a list of activities that residents can do over the next month to deepen their understanding of the skills highlighted in today's module.

Tell pediatric residents that these opportunities were designed with their busy schedule in mind and many of them can be done in as little as five minutes.

Consider offering an incentive or prize to residents who complete opportunities listed on the sheet. One idea is to ask residents to e-mail the opportunities they completed to you and allow a couple minutes at the beginning of the next module to recognize residents' efforts and give them a round of applause.

Also, hand out Quick Reference Cards with links to accompanying information and materials related to this module. Encourage pediatric residents to put this card in their pocket or wallet and access the link when they have time.

Thank pediatric residents one last time for their time and participation at today's module.