



TRAINERS GUIDE

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 explore how pediatric residents can craft their message and use broader mediums for communicating their message in order to advocate on behalf of children's health. The intent of the module is:

To define advocacy communication; the role it plays in bringing attention to children's health and wellbeing; and how pediatric residents are uniquely positioned to use advocacy communications on behalf of children.

To provide pediatric residents with the tips and tools for crafting their advocacy message.

To increase pediatric resident's confidence and comfort level in using advocacy communication strategies, such as giving a speech, making a presentation, writing a letter to the editor, or using a newsletter or Web site to get their advocacy message out and build support for children's health.

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 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.

If using AAP press articles or position papers in place of PowerPoint:

- Copies of recent AAP press articles and position papers.
- One-pagers on a recent and timely children's health issue. Every congressional session the AAP Department of Federal Affairs creates fact sheets/position papers on the top child health issues. These can be found at: <http://www.aap.org/advocacy>, select child health issues.
- If resources permit, a video camera for recording the PSA (Public Service Announcements).

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.

As a pediatric resident, you are already engaged in individual advocacy. Individual advocacy describes the work you are already doing to improve the health and well-being of individual patients. This could include calling the insurance company, school, another provider, or a social service agency on behalf of an individual patient.

Individual advocacy easily translates to the community, state, and federal level advocacy that we will talk about during today's module. At its core, each level of 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.

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 advocacy communications.

Share that for the purpose of today's training, advocacy communications refers to the intentional use of any type of media or communication mechanism to bring about awareness and, eventually, change, on behalf of your issue.

Explain that the best way to help people understand why your issue is important is to tell them a story about the real people affected by it. Advocacy communications allows you to share your story with a broader audience than is possible through person-to-person strategies alone.

The purpose of today's module is to demonstrate how you can use media and communication vehicles to tell your story and effect change.

Share a case study that illustrates how another pediatric resident used an advocacy communications tool in order to advance a children's health issue they cared about:

PEDIATRICIAN ADVOCACY STORY

As a second year resident, I participated in a round table discussion with the associate editor of the LA Times to learn more about media advocacy. The associate editor gave us tips for telling an effective story and told us about how the media can be a powerful tool for helping us effect change on behalf of our patients.

The round table discussion inspired me to write an op-ed article about an issue I cared about. I had been collecting survey data from other residents about their views on health disparities. I was learning that many residents don't get formal training on how to advocate for our patients with service providers or connect our patients with vital community resources that can begin to address health disparities.

The LA TIMES decided to publish my op-ed article. The published article helped generate discussions at my place of residency and the county hospital about creating a training program that would better help residents and physicians advocate for their patients and link them with other resources as it relates to health disparities.

Not only did the op-ed piece help effect change around health disparities training, but a clinic I was interested in working at contacted me after reading my op-ed article and offered me a job.

Dr. Rishi Manchanda, 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:

Communications and media allowed the pediatric resident to get their message out to more people than they could have done through word of mouth alone.

The media can be a powerful and compelling tool to creating change on behalf of issues pediatric residents care about.

The media, decision-makers, and the general public—all potential targets of advocacy communications—don't differentiate between pediatricians and pediatric residents. They look to pediatric residents as credible and well-respected children's health experts. Media, decision-makers, and the general public all care about what you have to say because you have both powerful stories to tell and science on your side.

Advocacy communications can fit into the busy schedule and competing demands of pediatric residents. Many advocacy communication activities, including writing an op-ed article or a letter to the editor, can be done in under an hour.

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 Advocacy Communications 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

State again that media and communications advocacy refers to the intentional use of any type of media or communication mechanism to bring about awareness and, eventually, change, on behalf of your issue.

Ask pediatric residents for examples of media or communication tools. (Examples could include newsletter or newspaper articles, letters to the editor, an internet blog, or an appearance on the local news, Web sites, social networking sites, e.g. YouTube, or commercials).

Write the examples on a flip chart or white board. State that these are all great examples of media and communication tools that can be used by pediatric residents to build support and awareness for the issues you care about.

Note that the PowerPoint you are about to walk through focuses on how to use these tools to get your message out.

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.

Mention that AAP has dedicated staff and resources available to assist pediatric residents and their chapter with a variety of media and communication activities and has sample messages and templates available. Share link to AAP Member Media Center: <http://www.aap.org/moc/pressroom/pressroom.htm> and contact information for the AAP Department of Communication (commun@aap.org).

OPTION #2: LEGISLATIVE EXPERT PRESENTATION

State again that media and communications advocacy refers to the intentional use of any type of media or communication mechanism to bring about awareness and, eventually, change, on behalf of your issue.

Ask pediatric residents for examples of media or communication tools. (Examples could include newsletter or newspaper articles, letters to the editor, an internet blog, or an appearance on the local news, Web sites, social networking sites, e.g. YouTube, or commercials).

Write the examples on a flip chart or white board. State that these are all great examples of media and communication tools that can be used by pediatric residents to build support and awareness for the issues you care about.

Emphasize that no matter what media and communication tools pediatric residents choose to use, it is important to keep in mind two important things:

- Your message.
- How you deliver your message.

State that your message is the core statement of why your issue is important and should be the underpinning of all your media and communications work. *Write this definition on the flip chart/white board.*

Emphasize that effective messages: *Write these points on the flip chart/white board as well.*

- Create consistency in the way your issue is talked about and cuts across the many stories that relate to your issue.
- Easily understood and can be internalized and repeated by others.
- Convince people that your issue is something they can support

Divide pediatric residents into small groups of four to five people each. Give each group a copy of AAP position paper. Go to <http://www.aap.org/org/advocacy.html> and select Child Health Issues under Federal Advocacy.

Let the groups know that they will have ten minutes to:

- #1: Identify the message.
- #2: Identify what makes the message memorable.
- #3: Identify what makes the message persuasive.
- #4: Identify how the press article or position paper was able to repeat the message.
- #5: Find the human story within the article.

Circulate around the room while the pediatric residents are working in small groups. Make yourself available to answer their questions.

If time permits, ask a representative from each group to briefly report back to the larger group by sharing the main message from their press article or position paper.

Thank each group for their work and if time permits, answer remaining questions.

Mention that AAP has dedicated staff and resources available to assist pediatric residents and their chapter with a variety of media and communication activities and has sample messages and templates available. Share link to AAP Member Media Center <http://www.aap.org/moc/pressroom.htm> and contact information for the AAP Department of Communication (commun@aap.org). There you will find links to:

- In the Media Spotlight
- Sample Editorials
- Speaker Ready Room Award News Release Templates
- Sample Letters to Editor Questions & Answers
- Speaking Points
- AAP Spokesperson AAP Fact Sheet
- PR Handbook
- Television Dress Guidelines
- Contact Info

PRACTICE

TRAINER NOTE:

The Practice section of the Advocacy Communications 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.

DEVELOPING PSA'S (PUBLIC SERVICE ANNOUNCEMENTS)

Divide pediatric residents into four to five small groups.

Assign each group a relevant and timely children's health issue. Give each group a briefing sheet that contains background information and statistics on the health issue.

Let groups know that their job is to create a one minute PSA on the children's health issue.

Their PSA should have a clear and concise message, be memorable and persuasive, and include intentional repetition. Pediatric residents should also look for opportunities within their PSA to include a personal story and let others know how they can get involved.

Groups will have ten minutes to create their PSA and then will perform their PSA in front of the larger group.

If time permits, invite feedback from pediatric residents about what elements from each PSA were the strongest and what they would do differently next time.

TRAINER NOTE:

Consider videotaping the PSAs and posting them on hospital Web site, sharing them with the AAP or AAP chapter, or posting on YouTube. Encourage pediatric residents to go to these sites to see their PSAs and forward the link to their friends, family members, or colleagues.

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 craft their message or one thing they will do to get their message out to a broader audience on behalf of children's health and wellbeing.

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.