



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 emphasize the important role that voting and nonpartisan civic engagement has on children's health issues at the local, state, and national level. The module also explores the voting process and how pediatric residents can find an opportunity to vote—and encourage others to vote—within the confines of their demanding schedule. The intent of the module is:

To explore the multiple types of elections that take place and how children's health issues are tied to each of these elections.

To provide pediatric residents with the tips and tools for exercising their right to vote, even amongst their busy and demanding schedules.

To demonstrate that advocacy—including voting—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 evaluation for each pediatric resident participating in the module.
- 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.

- Copies of the Political Campaign Activities and Lobbying Guidelines of 501(c)(3) and 501(c)(6) Organizations hand out.

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) Presenter:

If using AAP chapter representative or children's advocacy guest speaker presentation in place of PowerPoint:

- Invite a representative from the AAP chapter or children's advocacy organization (staff or elections chair) who can participate in the module, help pediatric residents understand the role that elections at all levels of government affect children's health issues, and share examples of how the AAP and other pediatricians have used voting and elections to advance children's health and well-being.
- Prior to the module, the AAP representative or children's advocacy organization representative 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:
 - Examples of different types of elections and how they play a role in children's health and well-being.
 - Tips and tools on how to use voting and elections in a nonpartisan capacity to advance children's health issues.
 - Ways that pediatric residents can fit voting and other nonpartisan election activities into their busy and demanding schedules.
 - The rules to keep in mind when participating in voting and election activities.
- Non-partisan election buttons/car magnets for the winning team (or all pediatric residents). Check with your hospital or AAP chapter to see if child health buttons/magnets are available.

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

The purpose of today's module is to explore the ways that pediatric residents can participate in the voting process in a nonpartisan manner in order to elevate children's health and well-being in the minds of candidates and elected officials and also how they can fit voting into their busy schedules.

State that today's module will focus solely on nonpartisan voting activities.

Nonpartisan—for the purpose of this module—is defined as engaging people to vote in a manner that is completely free and devoid of any connection whatsoever with any political party or specific candidate. The focus is on urging people to vote with a particular issue in mind—such as children's health—not a particular candidate.

Share a case study that illustrates how another pediatric resident used voting to advance a children's health issue they cared about:

PEDIATRICIAN ADVOCACY STORY

As a pediatrician and a patient advocate, I see many parents who will sacrifice anything to be by their child's side in their time of need. Before the 2006 elections, a mother of a child in the Immunocompromised Unit for cancer care was one of those parents. She was determined to be with her child, but still wanted to vote in the crucial election. Unfortunately, voting laws in the state of Ohio only allowed absentee ballots to be obtained by hospitalized patients, while parents of hospitalized children were not eligible to vote via absentee ballot.

Identifying a need, we worked with our hospital Government Relations Office to draft legislation that was included in Ohio's biennial budget bill (HB 119), which allows parents the ability to partake in the political process without ever leaving their child's side by obtaining an emergency absentee ballot if their child is hospitalized on Election Day. This legislation especially benefits parents of children with chronic diseases, who have already given so much for the care of their child. Today, our office works with head nurses of every facility in our health care system to ensure that patients and parents of hospitalized children can exercise their right to vote without ever sacrificing time spent with their child.

Lolita McDavid, MD, FAAP

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

Ask if anyone has a story of their own that they would like to share about how they used voting and elections as a way to advance an issue they cared about. Probe on what motivated them to use voting and elections as a vehicle to create change and what was the result of the action.

Note that the case study illustrates that:

- Explain that many of the priorities and much of the voting behavior of elected officials is shaped by their desire to be reelected.
- Voting is a way to capture decision-makers attention and let them know that pediatric residents (as well as others who care about children) are paying attention and voting with children's health in mind.
- Voting and other types of nonpartisan election activities allow pediatric residents (as well as others who care about children) to advance the children's health issues that are important to them.
- Voting can fit into the busy schedule and competing demands of pediatric residents.

Briefly mention that pediatric residents can engage in almost any political campaign or election activity as a public citizen (including donating money or volunteering on a campaign or on behalf of a candidate), but political and election activity on behalf of the AAP, your AAP chapter, or your place of residency has some restrictions. For example, endorsing a candidate is prohibited for 501(c) (3) organizations.

Certain political and election activities are restricted or prohibited due to your chapter or organization's tax status and it is crucial to be aware of the activities that you as a pediatric resident, and that you as part of your chapter, place of residency, or nonprofit organization, can legally participate in. That is why this module is focused on nonpartisan activities.

Mention that the AAP Division of State Government Affairs, the AAP Department of Federal Affairs, and the hospital government affairs staff can provide you with more information about permissible nonpartisan political campaign and election activities. To access the AAP's permissible non-partisan activities, please visit: ([insert link here](#)).

In addition, the Division of State Government Affairs and Department of Federal Affairs develops an Election Resource for chapters. This resource can be found on the respective area's Web pages on the AAP Member Center.

CORE CONCEPT

TRAINER NOTE:

The Core Concept section of the Voting with Children's Health and the Demands of a Pediatric Resident's Schedule in Mind 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 pediatric residents what children's health issues they are most passionate about or what issues they see commonly in their work.

Write the examples on a flip chart or white board. State that elected officials at all levels of government can set policy that improves children's health and well-being and many of the examples listed have a direct correlation to voting at the local, state, or national level.

Walk through one or two examples to illustrate the connection between a children's health issue and local, state, and federal elections. A few examples or ideas of what this could look like include:

Public health issues:

- Childhood obesity issues can be related to voting because school board members (elected locally) vote on vending machine policies; city council or park board members (again, elected locally) vote on land use that affects open spaces and safe parks; state legislators vote on funding for after-school recreation programs; and at the federal level, the U.S. Department of Agriculture (USDA) develops and approves the food pyramid and federal legislators consider funding for child nutrition programs.
- Asthma issues can be related to voting at the local level (local smoking ordinances or restrictions on pollution from local companies); state level (state-wide second hand smoke legislation), and federal level (funding for asthma research and treatment).

Access to care issues: examples of how this issue is related to voting at local level could include programs for coordinated school health services or home nursing visits for newborns/first time mom/young moms; state level could include state legislative mandates requiring insurance plans to provide certain benefits; national level could include S-CHIP funding and emergency medical services funding and regionalization for children.

Community/family support services: examples of how this issue is related to voting at the local level could include early intervention programs; early childhood education funding at the state level; and national children's study funding and federal regulations on pharmaceutical testing for children at the national level.

Note that the PowerPoint you are about to walk through focuses on how pediatric residents (and others who care about children) can use elections at all levels of government to effect change on behalf of the children's health issues they care about.

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 the AAP Division of State Government Affairs, the AAP Department of Federal Affairs, and their hospital government affairs staff are available to provide help and assistance on what pediatric residents can do to advance children's health through nonpartisan voting and election activities.

OPTION #2: GUEST SPEAKER FROM AAP CHAPTER OR CHILDREN'S ADVOCACY ORGANIZATION

Ask pediatric residents what children's health issues they are most passionate about or what issues they see commonly in their work.

Write the examples on a flip chart or white board. State that elected officials at all levels of government can pass policy that improves children's health and well-being and many of the examples listed have a direct correlation to voting at the local, state, or national level.

Walk through one or two examples to illustrate the connection between a children's health issue and local, state, and federal elections. A few examples or ideas of what this could look like include:

Public health issues:

- Childhood obesity issues can be related to voting because school board members (elected locally) vote on vending machine policies; city council or park board members (again, elected locally) vote on land use that affects open spaces and safe parks; state legislators vote on funding for after-school recreation programs; at the federal level, the U.S. Department of Agriculture (USDA) develops and approves the food pyramid and federal legislators consider funding for child nutrition programs.
- Asthma issues can be related to voting at local level (local smoking ordinances or restrictions on pollution from local companies); state level (state-wide second hand smoke legislation), and federal level (funding for asthma research and treatment).

Access to care issues: examples of how this issue is related to voting at local level could include programs for coordinated school health services or home nursing visits for newborns/first time mom/young moms; state level could include state health insurance coverage; national level could include S-CHIP funding and emergency medical services funding and regionalization for children.

Community/family support services: examples of how this issue is related to voting at the local level could include early intervention programs; early childhood education funding at the state level; and national children's study funding and federal regulations on pharmaceutical testing for children at the national level.

Note that the guest speaker they are about to hear from will focus on how pediatric residents (and others who care about children) can use elections at all levels of government to affect change on behalf of the children's health issues they care about.

Briefly introduce the AAP chapter representative or children's advocacy organization representative, including how long they've been active or collaborated with the AAP.

Give the guest speaker the floor. Encourage them to share:

- Examples of how their chapter or organization has gotten involved in nonpartisan voting and election activities at various levels of government and how this has made a difference on behalf of children's health and well-being.
- Tips on how pediatric residents can fit voting into their busy schedules (absentee ballots, early voting, vote by mail, whatever is applicable), why voting is important, and where they can find credible and nonpartisan information about where candidates stand on children's health issues.

After the AAP chapter or children’s advocacy organization representative has shared a few examples and tips and tools, ask pediatric residents if they have questions for the AAP chapter representative. As time permits, allow for questions and answers.

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

- Elections take place at every level of government and all elections can help advance children’s health issues.
- Elections—especially those at the local level—are often overlooked and provide crucial opportunities for pediatric residents to advocate on behalf of children and children’s health issues.
- Pediatric residents have the power to vote, as well as engage others who care about children’s health and well-being, to get involved in nonpartisan election activities on behalf of the issues that are important to them.
- Don’t forget about the rules!

PRACTICE

TRAINER NOTE:

The Practice section of the Voting with Children’s Health and the Demands of a Pediatric Resident’s Schedule in Mind 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.

FITTING VOTING INTO THE PEDIATRIC RESIDENT'S SCHEDULE

Divide the pediatric residents into seven small groups (one group for each of the following pediatric residency rotations).

Tell the groups that they will be working in small teams to identify the ways they can fit voting in with the demands of a pediatric residents rotations.

Assign each group one of the following pediatric residency rotations:

- Pediatric Intensive Care Unit (PICU)
- Neonatal Intensive Care Unit (NICU)
- Emergency Department (ED)
- Primary Care
- Development and Behavioral Pediatrics
- Adolescent Medicine
- Inpatient units or inpatient services (such as Cardiology, Gastroenterology, Endocrinology, Hematology/Oncology, Infectious Disease, Nephrology, or Rheumatology)

The teams will have only five minutes to identify three realistic, yet creative ways that they can manage to find the time to vote while serving on their assigned rotation.

Tell teams that after their five minutes is up, they will be asked to share their ideas back to the larger group.

Add that since this is the voting module, they will each have an opportunity to vote for the team that came up with the best ideas.

Ask if there are any questions before they begin. Once questions are answered, begin the five minutes. Let group know when they have two minutes and one minute left as a team.

Once the five minutes is up, ask a representative from each team to share their assigned rotation, along with their ideas with the larger group.

Once each team has had an opportunity to share their ideas, ask the group to vote via a show of hands for the group that they think came up with the best ideas.

Give AAP or children's hospital non-partisan election buttons/bumper magnets to the winning team. Alternatively, you can give them to everyone, regardless of their team.

Thank the teams for their participation, energy, and great ideas.

Encourage them to remember these ideas and try them out next Election Day.

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 voting and nonpartisan election activities don't have to be hard or take a lot of their time. Hand out the Political Campaign Activities and Lobbying Guidelines of 501(c)(3) and 501(c)(6) Organizations for them to use as a reference.

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 through voting at every level of government and that voting gives pediatric residents (and others who care about children) another opportunity to advocate on behalf of children's health.

Encourage each pediatric resident to register to vote and to vote in the upcoming election. Let pediatric residents know the date(s) for upcoming elections in their area, as well as the date they must register to vote by and/or apply for an absentee ballot. Write these dates on the flipchart/whiteboard.

TRAINER NOTE:

This information can be found by contacting your AAP chapter, your hospital government affairs office, the local League of Women Voters, or your local election board. Additional voting related resources are available through: www.vote411.org

Hand out voter registration cards to all pediatric residents. Remind them that they will need to re-register if they changed addresses or had a name change since the last time they voted. Encourage them to register to vote in the state they are currently living in.

TRAINER NOTE:

Voter registration cards are available by contacting your local election board or the Secretary of State's office. Additional voting related resources are available through: www.rockthevote.org/ or www.vote411.org)

EVALUATION

Invite any final questions or observations from the group.

If time permits, consider going around the room and ask each pediatric resident to share one thing that they learned today about how voting and elections affects children's health or one thing they will do to assure they have the opportunity to vote on Election Day.

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.

TRAINER NOTE:

Make a note to follow-up with pediatric residents by e-mail two weeks after this module to remind them to register to vote. Also include the dates of upcoming elections in the area, as well as deadlines to request an absentee ballot or register to vote.