



Tomorrow's Doctors, Tomorrow's Cures®

Advocacy Toolkit for Physicians in Training



The AAMC (Association of American Medical Colleges) is a nonprofit association dedicated to improving the health of people everywhere through medical education, health care, medical research, and community collaborations. Its members are all 158 U.S. medical schools accredited by the [Liaison Committee on Medical Education](#); 13 accredited Canadian medical schools; approximately 400 academic health systems and teaching hospitals, including Department of Veterans Affairs medical centers; and more than 70 academic societies. Through these institutions and organizations, the AAMC leads and serves America's medical schools, academic health systems and teaching hospitals, and the millions of individuals across academic medicine, including more than 193,000 full-time faculty members, 96,000 medical students, 153,000 resident physicians, and 60,000 graduate students and postdoctoral researchers in the biomedical sciences. Following a 2022 merger, the Alliance of Academic Health Centers and the Alliance of Academic Health Centers International broadened participation in the AAMC by U.S. and international academic health centers.

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A photograph of three diverse young adults, likely medical students, gathered outdoors. They are looking at a document held by one of the individuals. The background shows a brick building and trees, suggesting a campus setting.

“Nothing can stop the power of a committed and determined people to make a difference in our society.” – Former U.S. Rep. John Lewis

Overview

With the release of the “Advocacy Toolkit for Physicians in Training,” the AAMC aims to equip and inspire medical students and residents to advocate for and with their patient populations. This toolkit was developed in response to recommendations and requests from learners and faculty at AAMC-member institutions within the District of Columbia and the surrounding area. Toolkit authors and contributors compiled relevant resources to catalyze advocacy efforts of passionate learners seeking to address the systemic challenges that affect patient and community health.

Although this resource was developed with a focus on medical students and residents, collectively referred to herein as “learners,” each concept applies broadly to health care advocacy and beyond. While this toolkit is centered around advocacy in the District of Columbia, each principle can be adapted and applied to other regions nationally.

While, at times, the power of advocacy is overlooked or underestimated, health care providers who act as advocates have the potential to contribute to the overall quality of life of the community. The training, experience, and knowledge, coupled with the candor of patients and the trusted relationship with them, make physicians and learners uniquely positioned to influence those who enact laws, promulgate regulations, and design and evaluate programs.

The presence of health practitioners who are prepared to respond to the needs of their communities is crucial to maintaining and promoting the health of society. The participation of a dedicated health care workforce motivated to advocate alongside other community advocates strengthens the effectiveness of our collective advocacy efforts to effect positive social change. Ultimately, equipping health professionals with the tools they need to improve civic engagement related to health can transform how we plan and address complex public health issues.

This toolkit provides a framework for physicians in training to use to leverage their role to drive positive social change as they advocate with and for their patients and communities. We hope learners will explore and utilize the links to resources and organizations we have included. In addition to their professional service, we thank physicians in training for their new, or ongoing, commitment to engage in advocacy.

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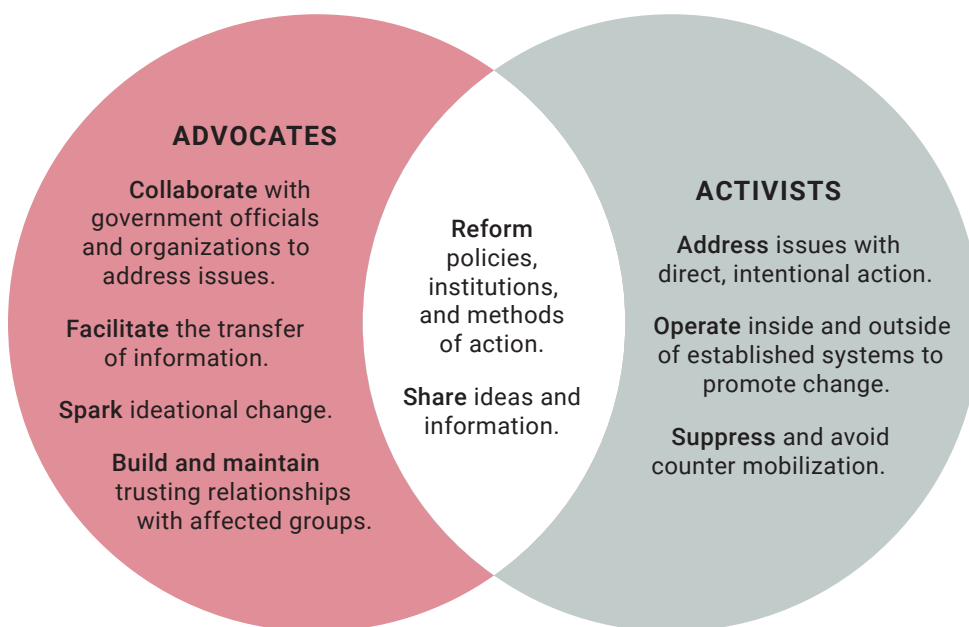
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Defining Advocacy, Activism, and Lobbying

What Are Advocacy and Activism?

Advocacy is the act or process of publicly supporting or recommending, either individually or within a group, a cause or proposal, usually on behalf of others. Activism is defined as the policy or action of using vigorous campaigning to bring about political or social change. Both approaches work in tandem to create meaningful change, but they are separate in nature and can be expressed differently. **Advocacy is about creating solutions together; activism is about getting others to listen.**¹ Depending on the issue, physicians and other health professionals can find both approaches to be helpful and necessary.

Advocates and Activists²



Advocacy typically focuses on a policy-centered approach, while activism is initially more focused on raising awareness and spurring action. The highlighted terms in the advocate circle of this Venn diagram illustrate how advocates are more likely to utilize established systems to raise awareness and educate decision-makers when representing a group of people with a shared interest. Educating political figures on the importance of funding disease-prevention services and sharing materials that depict gaps in health resources and detail the benefits of supporting more resources to advance health are examples of advocacy. By contrast, the bold terms in the activist circle describe how activism addresses issues with direct, intentional action. Marches, strikes, boycotts, sit-ins, and culture jamming all are examples of activism.

Advocacy and activism are often used synergistically to drive change and create equitable solutions that benefit communities or populations. Where the circles overlap at the center of the graphic describes how both tactics can be combined to develop new ways to address critical issues that impact health outcomes.

As a medical student or resident, it is important that you understand and clearly articulate the difference between advocacy and activism. Frequently, executive leaders, constituents, and, sometimes, your institution's legal counsel, will conflate both ideas. Because these institutional leaders have a vested interest in protecting the institution from any legal ramifications resulting from advocacy and activism, it is important to distinguish how both approaches work together to achieve similar goals.

What Is Lobbying, and How Does It Differ From Advocacy?

Although these terms are sometimes used interchangeably, it is important to understand the difference between lobbying and advocacy. According to Washington D.C.'s Board of Ethics and Government Accountability, lobbying is defined as communicating directly with any official in the legislative or executive branch of the district government to influence any legislative action or administrative decision.³ Advocacy is any action that speaks in favor of, recommends, argues for a cause, supports, defends, or pleads on behalf of others.⁴ Specifically, health advocacy is a "strategy that involves speaking up, pleading, or championing a cause while applying professional expertise and leadership to support efforts on an individual patient, family, community, or legislative and policy levels." The goal of health advocacy is to improve the quality of life for individuals, families, or communities.⁵ Not all advocacy is lobbying, but all lobbying is advocacy.

Advocacy Ladder of Engagement

There are various levels of engagement in advocacy and lobbying, ranging from activities that are less intensive to those that require more time and greater levels of expertise and contribution. Traditional grassroots advocacy led by membership organizations and associations brings together many advocates' voices in support of (or in opposition to) a policy or issue. When engaging in grassroots advocacy in Washington, D.C., individuals can expect to encounter advocacy groups, health coalitions from various Wards, civic associations, fellow students, and community members who share common concerns. Work with different groups to attend mayoral, city council, and congressional town hall meetings where you can share your thoughts on how policies are affecting the community. There are many grassroots platforms and tools that facilitate digital engagement in advocacy, including AAMC Action (aamcaction.org), the AAMC's grassroots advocacy community of students, residents, researchers, faculty members, and physicians.



As advocates move up the ladder, they can add their names and personal experiences to their advocacy engagement through op-eds, letters to the editor, and, more frequently, via social media posts. Social media also enables advocates to lead, convene, and organize those with similar positions regarding specific issues. Additionally, the [Office of the Attorney General for the District of Columbia has a Public Advocacy Division](#), which works with advocacy partners to address issues that affect the rights of district residents.

Higher levels of engagement tend to involve interacting directly with policymakers, including staff, who truly drive the development and execution of legislation and policies. At these stages, it is imperative that advocates connect with the government relations experts at their academic medicine institutions and professional societies, including the AAMC. These professionals' experience with lobbying and advocacy can help determine the best course of action based on an advocate's expertise and experience engaging with policymakers. They also can share important information that is critical to a successful advocacy strategy, such as the current political context and climate, as well as background on members of Congress that affects their views and actions on policy topics.

Advocacy Ladder of Engagement



It is important to connect with government affairs professionals at your academic medical center for guidance and background information.

Physicians as Advocates

What Is My Role as a Medical Student or Resident, and Why Is It Important?

Advocacy is a people-centered approach that can strengthen communities. Your advocacy can help spur the necessary changes to eradicate health inequities in your community. The medical knowledge and experience you gain in school and from your patients and community members can inform policymakers on how they can improve the health and livelihood of Washingtonians. Health advocates who have positions in government agencies, disease-specific voluntary associations, grassroots and national health policy organizations, and the media can work for positive change in the health care system, improve access to quality care, and protect and enhance patient rights.⁵

Health professionals who are willing to advocate with and for their patients are vital to ensuring that health issues are addressed with a multifaceted approach that accounts for the social drivers of health. These health professional advocates couple their knowledge with the experience shared by patients and then present this perspective to those in positions to implement policy change. Successful advocacy in health care can reduce health disparities and cultivate better partnerships to improve health.

What Is the Role of My Institution's Office of Government Relations and the Government Relations Representatives?

The government relations and federal affairs professionals at your institution manage relationships with elected officials and their staff at the local, state, and federal levels of government and also with individuals at government agencies. Typically, they represent the interests of the institution's faculty, students, staff, and patients before all levels of government. You read that correctly: your institution's government relations professional represents YOU.

Many AAMC-member medical schools, teaching hospitals, and health systems designate a [Government Relations Representative](#) (GRR) to represent the institution before elected officials and government agencies. They are the primary resource and point of contact for engaging with local, state, and federal policymakers and government agencies. As representatives of AAMC-member institutions, GRRs strategize with AAMC staff to advance the academic medicine policy agenda.



General Considerations and Guidance

Medical students and residents are encouraged to work with their institution’s government relations office to develop and communicate political engagement and advocacy policies. The policies and practices presented in this document can serve as a starting point to developing your approach.

As stated in the AAMC’s “[Guiding Principles for Civic Advocacy by Medical Students and Prospective Applicants](#),” students should understand that they represent only themselves when engaging in advocacy **unless** they are officially partnering with the government relations office.

EXAMPLE 1:

Representing Yourself

If students state that they are attending a specific medical school, they should clarify that they represent only themselves and not their institution.

Representing Your School

If students choose to wear their white coats, with their school’s logo visible, during advocacy events, they should be serving in an official capacity where they represent the school.

Not all advocacy is equal, and some forms of advocacy are inappropriate as school activities. Nonpartisan civic engagement is an appropriate, approved school activity, but partisan activities are not. Refer to your institution’s government relations office for best practices when engaging political candidates or representatives.

EXAMPLE 2:

Nonpartisan Engagement

Registering voters.
 Hosting a candidate forum for all candidates.
 Sharing nonpartisan voting guides.

Partisan Engagement

Endorsing candidates and campaigns.
 Contributing to a candidate’s campaign.
 Rating or ranking candidates.

EXAMPLE 3:

Appropriate Advocacy Strategies

Helping a student organization host an event to discuss health care reform, health disparities, or reproductive health.
 Writing op-ed/opinion pieces to raise awareness about housing insecurity as a public health issue.
 Engaging in community outreach programs with nonprofit organizations.
 Supporting nonpartisan voter registration.
 Promoting the screening of social determinants of health in routine clinical practice.
 Posting on your personal/student organization’s social media to creatively highlight health inequities.

Medical Student and Resident Advocacy Resources for Future Advocates

- [George Washington Students Advocate for Patients on Capitol Hill](#)
- [Georgetown University Hoyas on the Hill Advocate on Behalf of Patients](#)
- [AMA The Power of Medical Student Advocacy](#)
- [AMA Resident and Fellow Section \(RFS\) Advocacy Initiatives](#)
- [AMA How to Get Involved in Advocacy Work as a Medical Student](#)
- [American College of Physicians Self-Advocacy Resources for Residents and Fellows](#)
- [AMA How Medical Students Can Be Effective Advocates on Social Media](#)
- [Boston Children's Hospital Examples of Resident Advocacy](#)
- [Physician Assistant Education Association Grassroots Advocacy Resource Guide](#)
- [American Academy of Pediatrics Advocacy Guide](#)
- [American Medical Women's Association Advocacy](#)
- [Society of Teachers of Family Medicine Advocacy Resources](#)
- [AMA 4 Tips for Effective Lawmaker Visits](#)
- [University of California San Francisco Student Advocacy Efforts](#)



Addressing Community Issues

Community-Based Solutions and Equity-Centered Advocacy

The social determinants of health, commonly referred to as social drivers of health or social influencers of health, are the conditions in which individuals experience life. These conditions influence a wide range of health outcomes for people everywhere. [Evidence shows that, overall, clinical care drives only 20% of population health outcomes, with the remaining 80% generated by nonclinical determinants.](#)⁶ Disparities in health outcomes are often associated with social determinants of health, which include education, employment, income, housing, transportation, food access, and medical care. The location of your medical school or residency will determine the types of health issues that you are likely to encounter.

Define the Issue

To develop initiatives that target the main causes of community issues, it is important to define the issue by investigating who is being affected and also understanding the etiology of the issue. **Equity-centered advocacy** begins with advocates and community members identifying and understanding the inequities that affect their community. Equity is fairness and justice achieved through systematically assessing disparities in opportunities and outcomes and representing and redressing those disparities through targeted actions.⁷ Equity-centered advocacy focuses on achieving population-level and systems-based change. Equity-centered advocacy is catalyzed by grassroots engagement and building relationships with community leaders to stimulate action that causes long-lasting, positive social change.

Equity-centered advocacy involves understanding the lived experiences of various individuals or community groups, identifying health disparities, and creating a team dedicated to coordinating efforts to address these inequities. This approach to advocacy utilizes a collective impact framework to define problems and create a vision to solve them.

Collective Impact describes a committed approach to social change that is driven by a collaborative group of individuals having a common agenda.⁸ It is a structured process that comprises five essential conditions: a common agenda, shared measurement, mutually reinforcing activities, open and continuous communication, and a core team who works together to manage that collaboration.



A good example of equity-centered advocacy occurred recently in Wards 7 and 8. [According to a 2021 study from the Capital Area Food Bank, one in three district residents self-reported food insecurity.](#) A significant proportion of the population in Wards 7 and 8 live more than a mile away from the nearest grocery store, resulting in worse health outcomes for those unable to access healthy foods. These neighborhoods are characterized as predominantly Black and experience the district’s highest rates of poverty and obesity. [Wards 7 and 8 are affected by high rates of food insecurity because grocers and other retailers are not financially incentivized to open stores in these neighborhoods.](#)

Once this issue was identified, the community benefitted from equity-centered advocacy. [Following the coordinated efforts of residents, community leaders, and Washington D.C. officials, in 2022, the first full-service grocery store was opened for citizens in Wards 7 and 8.](#)

Understanding the burden of community issues will help you know how to address the conditions that contribute to negative health outcomes. Develop advocacy initiatives that address issues and are supported by relevant data and highlighted by the experiences of your patient population.

Resources

Use the resources below to gather health-policy information and data to justify your advocacy efforts.



[District of Columbia Behavioral Risk Factor Surveillance System](#)

The Behavioral Risk Factor Surveillance System (BRFSS) is the nation’s premier system of health-related telephone surveys that collect state data about U.S. residents regarding their health-related risk behaviors, chronic health conditions, and the use of preventive services. The BRFSS provides health data on chronic health conditions, preventive screenings, health care coverage, risk behaviors, and societal and environmental factors that impact individuals’ health and quality of life.



[DC Health Matters](#)

The DC Health Matters Collaborative is a coalition of district hospitals and health centers that works together with community partners to assess and address health needs. DC Health Matters provides a one-stop resource for online access to community health indicators and related resources that impact the health of district communities. It contains up-to-date demographic, health, and social determinants data; hundreds of maps, tables, and figures; and promising practices.



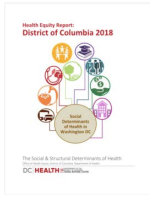
[County Health Rankings & Roadmaps](#)

The CHR&R program provides data, evidence, guidance, and examples to build awareness of the multiple factors that influence health and support leaders in growing community power to improve health equity. The CHR&R measures the health of nearly every county in all 50 states and is known for its use in supporting work and policies that keep communities healthy.



[StateNetwork](#)

The State Health Reform Assistance Network, a program of the Robert Wood Johnson Foundation, provides states with in-depth technical support to maximize coverage gains as they implement key provisions of the Affordable Care Act. StateNetwork consolidates timely, high-quality resources on state health policy for busy policymakers and researchers.



[DC Health Equity Report](#)

The “Health Equity Report for the District of Columbia 2018” is a comprehensive report that focuses on social and structural determinants of health in the district.



[DC Community Health Needs Assessment](#)

This assessment serves as a resource that catalogs the district’s existing assets, health care services and facilities, public health infrastructure, community partnerships mobilized to address priority needs, promising practices and policies, population health data, and funding opportunities.



[Pediatric Community Health Needs Assessment](#)

The “Community Health Needs Assessment, 2022” (CHNA) focuses specifically on children and is an assessment of Children’s National and Healthcare Systems’ primary service area (PSA), which includes Washington, D.C., and parts of Maryland. The federal government requires hospital organizations to conduct a CHNA every three years and to adopt an implementation strategy to meet the community health needs identified through the CHNA.



[United Health Foundations America’s Health Rankings](#)

“America’s Health Rankings” provides an analysis of national health on a state-by-state basis by evaluating a historical and comprehensive set of health, environmental, and socioeconomic data to determine national health benchmarks and state rankings.



[Racial Equity Tools](#)

Racial Equity Tools offers research, tips, curricula, and ideas for people who want to increase their own understanding and to help those working for racial justice at every level – in systems, organizations, communities, and the culture at large.

Develop Advocacy Goals That Focus on Changing Systems

Develop specific, measurable, achievable, realistic, time-bound, inclusive, and equitable (SMARTIE) objectives to guide the focus of your advocacy work. Forming a clear goal from the beginning of your advocacy efforts will make it easier to strategize how you will create systemic change.

Goals and objectives should address the root causes of the health inequities that affect your patients and community. Each goal should be intrinsically connected to a form of systems change. Systemic change can take place on a structural level when policies or practices are changed. On a relational level, systemic change involves shifts in connections or power dynamics. Systemic change happens on a transformative level when mental models and worldviews change. Work alongside community leaders and grassroots organizations that have a vested interest in achieving the goals you create together.

Consider [Healthy People 2030](#), the national public health resource that contains measurable health objectives as well as tools to help track progress toward achieving them. Healthy People 2030 focuses on keeping people safe and healthy through supporting laws and policies at the local, state, territorial, and federal levels. For example, Healthy People 2030 listed “Increase the number of states, territories, and D.C. that prohibit smoking in worksites, restaurants, and bars” as a health policy objective to be achieved by 2030.

Resources



[Healthy People 2030](#)

Healthy People identifies public health priorities to help individuals, organizations, and communities across the United States improve health and well-being.



[Department of Health](#)

The [DC Healthy People 2020 Annual Report and Action Plan 2017-2019](#) highlights work done across the city in four key priority areas of the [DC Healthy People 2020 Framework](#).



[Our Healthy DC](#)

Our Healthy DC provides information and opportunities to engage in coalition building and community organizing in the district.



[Pediatric Community Health Improvement Plan](#)

The “Community Health Improvement Plan, 2022-2025” (CHIP) describes the goals and strategies that the Children’s National Health Care System is using to address early childhood education, healthy food, health insurance coverage, and the employment rate.



[Developing SMARTIE Goals](#)

This resource contains an outline of SMARTIE goals and how to develop an advocacy agenda.

Identify Key Community Members and Collaborators

Identifying and gaining the support of invested partners is necessary for catalyzing the impact of your advocacy efforts. Typically, these potential stakeholders are people in the community, such as influential political figures, governmental legislatures, health directors, funding agencies, nonprofit leaders, and others with the power to make a change. The support you gain from community leaders will influence what you can implement and who you are able to reach. Community leaders may also work with hospital employee-resource groups, or they may be staff members at health institutions that focus on making connections between the institution and the community. Leverage your own relationships to identify and create opportunities for other staff members who serve as community leaders to support your advocacy initiatives.

Please be aware that some community members you identify might position themselves as an oppositional force if your advocacy efforts create a conflict of interest. Ensure that your advocacy strategy encounters a low level of resistance by accounting for the needs and interests of opposing decision-makers. When encountering pushback, neutralize the situation by facilitating a discussion with key leaders who might oppose your efforts.

Resources



[National Center for Medical-Legal Partnership](#)

The National Center for Medical-Legal Partnership leads education, research, and technical assistance efforts to help every health organization in the United States leverage legal services as an integral part of their response to social needs.



[Office of the Deputy Mayor for Health and Human Services](#)

The DMHHS supports the mayor in coordinating a comprehensive system of benefits, goods, and services across multiple agencies to ensure that children, youth, and adults, with or without disabilities, can lead healthy, meaningful, and productive lives.



[District of Columbia Interagency Council on Homelessness](#)

The ICH comprises cabinet-level leaders, providers of homeless services, advocates, and homeless and formerly homeless leaders who come together to inform and guide the District of Columbia's strategies and policies for meeting the needs of individuals and families in the district who are homeless or at imminent risk of becoming homeless.



[Department of Human Services](#)

The DHS provides individuals with meaningful connections to work opportunities, economic assistance, and support services.



[DC PACT](#)

Working in partnership with multiple district government agencies, DC PACT (Positive Accountable Community Transformation) is a collective impact coalition of community providers, including social service nonprofits, faith institutions, behavioral health providers, hospitals, and community health centers.



[Policy Link](#)

PolicyLink is a national research and action institute that advances racial and economic equity by Lifting Up What Works®.



[Collective Impact Forum](#)

The Collective Impact Forum supports community-centered solutions to strengthen collaboration, advance equity, and improve lives. The forum provides resources, hosts learning events, and offers coaching that can help advance collective impact work.



[Health Equity: The EveryONE Project](#)

The EveryONE Project offers resources to help family physicians confront health disparities, recognize bias, and improve patient health.

Develop Your Messaging

Advocacy messages are concise and targeted statements that answer the question, “Why should I care?” To craft your message, consider your target audience’s political beliefs and values. Your advocacy message should be aligned with the goals and outcomes of the community and also resonate with a wider audience. To prompt a response, advocacy messages typically contain a call to action.

Tips for Developing an Effective Advocacy Message⁹

- Write clear, simple, and compelling statements that inspire action.
- Develop statements that appeal to your audience’s morals, values, and lived experiences.
- Use multiple vehicles of communication to ensure the widest reach of your message.
- Clearly state what decision-makers can gain by supporting your cause.
- Provide realistic and practical solutions.
- Defend your arguments against opposing viewpoints using facts and statistics.

Resources



[FrameWorks](#)

FrameWorks is a think tank that helps mission-driven organizations communicate about social issues in ways that build public will to support progressive change.

Remember to contact the government relations office at your medical school or teaching hospital or clinic for guidance when reaching out to government entities.

Strategize and Implement Your Advocacy Plan

Your advocacy strategy will depend on your target audience, how your message is crafted, and what resources are available for sharing ideas. After you have crafted a targeted message, the next step is to determine how to reach your intended audience. Consider speaking directly with decision-makers to garner their support for community health programs. Oftentimes, the best method for communicating with the public about your issue will be through social media campaigns or attending or hosting a public event.

Resources



[DC Fiscal Policy Institute](#)

The DC Fiscal Policy Institute conducts research and public education on budget and tax issues in the District of Columbia, with a particular emphasis on issues that affect low- and moderate-income residents.



[Office of Health Equity](#)

The DC Department of Health (DOH) established the Office of Health Equity (OHE) in 2015 within the Office of the Director. The office collaborates with other government agencies, community partners, and all DOH administrations to ensure a multi-pronged, cohesive strategy is developed to identify and address the social determinants of health, which are the key drivers of inequities in health outcomes.



[DC City Council](#)

As the central and chief policy-making body for the District of Columbia, the council's mission is to provide strong, innovative, and effective leadership for the benefit of residents across the city. The council's central role as a legislative body is to make laws.



[DC Policy Center](#)

The mission of the D.C. Policy Center is to arm decision-makers with fact-based, unbiased, and reliable research and analyses to help create a vibrant local economy that can maximize opportunities for residents, workers, and businesses in the District of Columbia.

Social Media and Digital Advocacy

Social media is an easily accessible tool that can be used to raise awareness about issues, connect with influential decision-makers, and stay informed about what is happening in your communities. Strategize how you can use social media to advance your advocacy efforts and foster engagement with people who support your ideas.

Resources

1. [Community Toolbox – Section 19. Using Social Media for Digital Advocacy](#)
 - a. [Social Media Checklist](#)
 - b. [Social Media Advocacy Examples](#)
2. [American Library Association Social Media Toolkit](#)
3. [National MPS Society - Tips for Using Social Media for Advocacy](#)
4. [Exemplar: Social Media as a Format for Nursing Advocacy](#)
5. [Pew Research Center - Social Media Fact Sheet](#)
6. [When TikTok Is Not Enough: Engaging Nurses at All Levels in the Advocacy Process](#)

Policy Change Study Guide

Clearly, advocating for policy change is both challenging and time-consuming. However, developing and implementing effective policies is necessary to ensure the health of any population. All health policy changes begin with the recognition of an inadequate, or nonexistent, law or regulation that negatively impacts the health of a population. Such efforts are driven by individuals who are dedicated to making a change for the better. Additionally, the voices of coalitions, organizations, community groups, and even concerned individuals can be enough to influence policy change on a systemic level. To increase your chances of success and create the best opportunity to influence change, advocate for policies that serve the community’s best interests and generate public support. The following “Eight Ps of Policy Change” are fundamental guidelines to consider when advocating for policy change.

The Eight Ps of Policy Change^{9, 10}

Title and Description	How to Operationalize
<p>1 PREPARATION: Conduct the necessary research and become a subject-matter expert on the issue. Your research will help you effectively communicate the need for policy change and bolster public support for your proposal.</p>	<p>Reach out to other activists, academics, or journalists for help and guidance.</p> <p>Connect with advocacy groups who are doing the research you are planning.</p> <p>Identify who will oppose or support your ideas.</p> <p>Make a clear decision about how you will utilize the information you have.</p>
<p>2 PLANNING: Engage in a strategic planning process that represents the concerns of all groups affected by the policy or legislation you wish to change. The stakeholders affected by a particular issue should be involved in all steps of the advocacy process, as they are tied directly to the outcomes of your advocacy efforts. Planning takes place in every step of the advocacy process and should be continuously refined as you progress.</p>	<p>If you are advocating with a newly formed community group, develop or familiarize yourself with their VMOSA (Vision, Mission, Objectives, Strategies, and Action Plans).</p> <p>Obtain feedback on your work from community members, journalists, members of your coalition, and elected officials to improve your initiatives.</p> <p>Gather information from your constituents to find out what to prioritize and how your plans are being perceived.</p> <p>Determine what information is important to know. Find out whether and where this information exists and identify the best method for obtaining it.</p> <p>Implement necessary changes based on your findings.</p>

<p>3 PERSONAL CONTACT: Develop relationships with people who have the power and influence to create change. Legislative staff should recognize your name and think of you as a subject-matter expert. The relationship you have with these important stakeholders should be reciprocal and mutually beneficial in nature. Both parties should have something to gain by engaging with each other in this process.</p>	<p>Identify and connect with federal and state legislators and their aides.</p> <p>Identify public events where key stakeholders are often present.</p> <p>Prioritize legislators who represent the people who are affected by your initiatives.</p> <p>After establishing a connection, make formal appointments in the district or at the state capital with legislators or their aides.</p> <p>Phone conversations are effective when meeting in person is a challenge.</p> <p>Invite legislators or aides to visit your town or organization and give them a reason to attend.</p> <p>Testify at hearings or public comment sessions.</p> <p>Maintain contact after initial meetings.</p> <p>Attend fundraisers and other events honoring targeted legislators.</p>
<p>4 PULSE OF THE COMMUNITY: Identify which initiatives citizens will support or oppose, and determine how they can be persuaded.</p>	<p>Develop community-based initiatives that mitigate the effects of an undesirable policy.</p> <p>Host and invite community members to discussions about the issues that affect the community.</p> <p>Attend town halls and community meetings where citizens voice their concerns.</p> <p>Connect with community leaders and key informants who are established and well-known in an area.</p>
<p>5 POSITIVISM: Use strategies centralized around positive change by emphasizing the benefits of policy change and what people will gain when the change is implemented. Incentives are more effective motivators than punishments or negative outcomes.</p>	<p>List the economic, social, psychological, aesthetic, or health benefits that are possible because of the policy change.</p> <p>Generate awareness of what can be gained when a particular policy or legislation is enacted.</p>
<p>6 PARTICIPATION: The policy changes that you propose are for the community's benefit, so community members should be involved in all steps of advocacy planning and action. Provide opportunities for individuals in the community to volunteer to support your efforts and participate in a worthy cause.</p>	<p>Facilitate conversations with key stakeholders and trusted community members to determine the changes individuals in the area would like to see.</p> <p>Create a space where community volunteers can support your work and promote your ideas.</p>

7 PUBLICITY: Leverage social media, news outlets, and your community connections to build awareness about your issue and promote your efforts.

Create news stories or articles that can be covered by media outlets.

Use facts or human-interest stories to captivate people.

Share everything reporters need to tell your story.

Maintain your relationship with the media by serving as a resource and subject-matter expert.

8 PERSISTENCE: Evaluate your actions at every step of the planning and implementation processes to determine gaps or areas in need of improvement. Policy change is a lengthy and arduous process.

Continue implementing the elements of your advocacy strategy for as long as is necessary.



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Connecting Patient Care to Policy: A Case Study

During your first few months of residency training, you notice that many patients who are recovering from debilitating injuries have difficulty walking. Most of the patients who come in are unable to walk without using a cane, crutch, or walker. One afternoon, Christopher Williams, a middle-aged man in a wheelchair, comes in for his monthly evaluation. You review his medical records and ask him how he sustained his injuries. Christopher explains that he worked as an independent contractor in the area and was injured after a terrible fall earlier in the year. He has been unable to work since the incident, in which he sustained serious nerve damage. Christopher describes how he's been struggling to pay for his medical treatment and afford the rising cost of his rent. Christopher was recently evicted and is staying in an emergency shelter for people experiencing homelessness in the neighborhood.

You begin thinking about all the people who have visited you over the past few months and how each of them could have similar experiences to Christopher's. Along with some fellow students, you begin to draft an advocacy plan to ensure that people can secure and maintain housing if they are unable to work.

Become an Advocate

Example 1: Ward 7 Environmental Advocacy Plan

<p>WHAT DO WE WANT?</p> <p>Focus on the issues that affect your patient population and identify an opportunity to institute change. Research your issue and write a SMARTIE goal that addresses the problem.</p>	<p>ISSUE</p> <p>Homelessness in the district is at an all-time high. Housing voucher access does not guarantee users a living space because of the lengthy approval process.</p>	
	<p>GOAL</p> <p>By 2024, our health advocacy group will improve the speed of housing voucher use by three months by meeting with District of Columbia Housing Authority (DCHA) officials to encourage regular inspections of all properties before receiving housing vouchers from potential tenants.</p>	
<p>WHO DO WE CONTACT?</p> <p>For every issue you advocate for, there is a group of individuals and entities that has the power to influence change. These potential supporters are your target audience. Categorizing them in the Power/Interest Grid can help inform the strategies you use to manage each stakeholder. Prioritize entities with high levels of power, and always consider the needs of those who are interested in your work. Entities with high power and high interest should be actively consulted and receive most of your attention. Regularly engage and adhere to the needs of individuals with low levels of interest and high levels of power. Entities with low levels of power and high levels of interest should be regularly informed about your advocacy developments. Maintain engagement with those who have low levels of power and interest.</p>	<p>POTENTIAL SUPPORTERS</p> <p>Council of the District of Columbia, local nonprofit organizations, district council committees, community leaders, your university, residency, or training hospital.</p>	
	<p style="text-align: center;">Power/Interest Grid</p>	
		<p style="text-align: center;">High Levels of Interest</p>
	<p style="text-align: center;">High Levels of Power</p>	<p>Key Players</p> <p>District of Columbia Housing Authority</p> <p>Pathways to Housing DC</p> <p>Department on Disability Services</p>
	<p style="text-align: center;">Low Levels of Power</p>	<p>Minimal Contact</p> <p>DC Emergency Shelter Hotline</p> <p>Covenant House</p> <p>Housing Counseling Services Incorporated</p>
<p>WHAT DO WE DO?</p> <p>To spark a meaningful change, advocates must develop a structured campaign with a clear message and targeted actions. The message should answer the question, "Why should I care?"</p>	<p>MESSAGE</p> <p>Thousands of district residents are currently facing a housing instability crisis that contributes to poor health outcomes in the area. Through community action and legislative support, we can put an end to the housing crisis that plagues the nation's capital.</p>	
	<p>ACTIONS AND TIMELINE</p> <p>Jan.: Strategize DCHA outreach.</p> <p>Feb.-Aug.: Volunteer with Pathways to Housing DC.</p> <p>Mar.: Share housing voucher sign-up links with homeless shelters.</p> <p>Apr.: Attend Housing Administration public hearing, etc.</p>	

Develop Your Own Advocacy Plan

WHAT DO WE WANT? Focus on the issues that affect your patient population and identify an opportunity to institute change. Research your issue and write a SMARTIE goal that addresses the problem.	ISSUE		
	GOAL		
WHO DO WE CONTACT? For every issue you advocate for, there is a group of individuals and entities that has the power to influence change. These potential supporters are your target audience. Categorizing them in the Power/Interest Grid can help inform the strategies you use to manage each stakeholder. Prioritize entities with high levels of power, and always consider the needs of those who are interested in your work. Entities with high power and high interest should be actively consulted and receive most of your attention. Regularly engage and adhere to the needs of individuals with low levels of interest and high levels of power. Entities with low levels of power and high levels of interest should be regularly informed about your advocacy developments. Maintain engagement with those who have low levels of power and interest.	POTENTIAL SUPPORTERS		
	Power/Interest Grid		
		High Levels of Interest	Low Levels of Interest
	High Levels of Power	Key Players	Meet Their Needs
Low Levels of Power	Show Consideration	Minimal Contact	
WHAT DO WE DO? To spark a meaningful change, advocates must develop a structured campaign with a clear message and targeted actions. The message should answer the question, "Why should I care?"	MESSAGE		
	ACTIONS AND TIMELINE		

References

1. Flavell O. Activism versus advocacy: what is human rights advocacy? US Institute of Diplomacy and Human Rights [blog]. March 29, 2021. Accessed November 13, 2023. <https://usidhr.org/activism-versus-advocacy-what-is-human-rights-advocacy>
2. Gallagher J. The last mile problem: activists, advocates, and the struggle for justice in domestic courts. *Comp Polit Stud*. 2017;50(12):1666-1698. doi:[10.1177/0010414016688001](https://doi.org/10.1177/0010414016688001)
3. Washington DC Board of Ethics and Government Accountability. BEGA General Information. [bega.dc.gov](https://bega.dc.gov/page/general-information). <https://bega.dc.gov/page/general-information>. Published April 27, 2012. Accessed November 14, 2023. [No longer available].
4. District of Columbia Department on Disability Services. Advocacy across the life course: a guide to systems advocacy in the District of Columbia for people with intellectual and developmental disabilities and their families. Updated January 2016. Accessed November 17, 2023. https://dds.dc.gov/sites/default/files/dc/sites/dds/publication/attachments/SF_CoP_AdvocacyGuide_UpdatedJan2016_NoCaseStudy.pdf
5. Wright CJ, et al. Toward the development of advocacy training curricula for pediatric residents: a national delphi study. *Ambul Pediatr*. 2005;5(3):165–171. doi:[10.1367/A04-113R.1](https://doi.org/10.1367/A04-113R.1)
6. The University of Wisconsin Population Health Institute. County health rankings & roadmaps, 2023. Accessed November 20, 2023. <https://www.countyhealthrankings.org/sites/default/files/media/document/2023%20County%20Health%20Rankings%20National%20Findings%20Report.pdf>
7. Kania J, Williams J, Schmitz P, Brady S, Kramer M, and Splansky Juster J. Centering equity in collective impact. *Stanf Soc Innov Rev*. 2021;20(1):38-45. doi:[10.48558/RN5M-CA77](https://doi.org/10.48558/RN5M-CA77)
8. Kania J, Kramer M. Collective impact. *Stanf Soc Innov Rev*. 2011;9(1):36-41. doi:[10.48558/5900-KN19](https://doi.org/10.48558/5900-KN19)
9. World Health Organization. Cancer control: knowledge into action: WHO guide for effective programmes: module 6: policy and advocacy: 2008. Accessed November 13, 2023. <https://www.ncbi.nlm.nih.gov/books/NBK195422/>
10. University of Kansas Community Tool Box 2019. *Chapter 25, Section 1: Changing Policies: an Overview*. Accessed November 13, 2023. <https://ctb.ku.edu/en/table-of-contents/implement/changing-policies/overview/main>



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