

**APHA Annual Meeting—Philadelphia
Advocacy for Leaders: Session 2020.0**

November 3, 2019

***Becoming Better Messengers:
Millennials, Health Equity & Our Public Health Advantage***

Colleen Healy Boufides

Scott Burris

Lizzie Corcoran

Gary R. Gunderson

Don Hoppert

Sue Lynn Ledford

Gene W. Matthews

Kimberlydawn Wisdom



***Becoming Better Messengers:
Millennials, Health Equity & Our Public Health Advantage***

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Today's Agenda

1. Introductions & Moral Foundations Theory:
Gene Matthews
2. Reflections on Our Public Health Advantage: *Sue Lynn Ledford, Don Hoppert, Scott Burris, Gary Gunderson*
Discussion
3. Millennials as New Messengers for Public Health:
Colleen Healy Boufides & Lizzie Corcoran
Discussion
4. Health Equity and the Reproductive Well-Being Narrative:
Kimberlydawn Wisdom
Discussion & Concluding Thoughts

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Resources to Becoming Better Messengers

https://www.networkforphl.org/resources/topics_resources/becoming_better_messengers/



Becoming Better Messengers
Moral Foundations Theory
&
The Public Health Advantage

The 5 Essential Public Health Law Services



*Changing Law & Policy Requires
Interdisciplinary Collaborations
...and Smart Advocacy*

Better Health for All Faster

“The Hidden Tribes of America”

14% of America, roughly half left and half right, consistently shouts, posts and votes, while 67% of us are exhausted

LIBERAL WING

Progressive Activists 8%

EXHAUSTED MAJORITY

Traditional Liberals 11%

Passive Liberals 15%

Politically Disengaged 26%

Moderates 15%

CONSERVATIVE WING

Traditional Conservatives 19%

Devoted Conservatives 6%

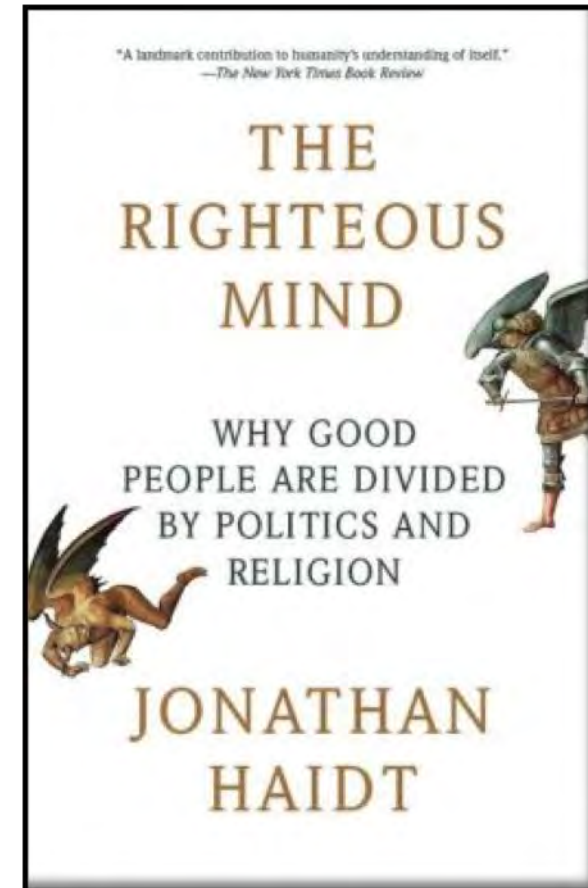
[Hidden Tribes: A Study of America's Polarized Landscape](#)

Source: October 2018 by More In Common

Chart: Adapted from Axios Visuals 10/17/2018

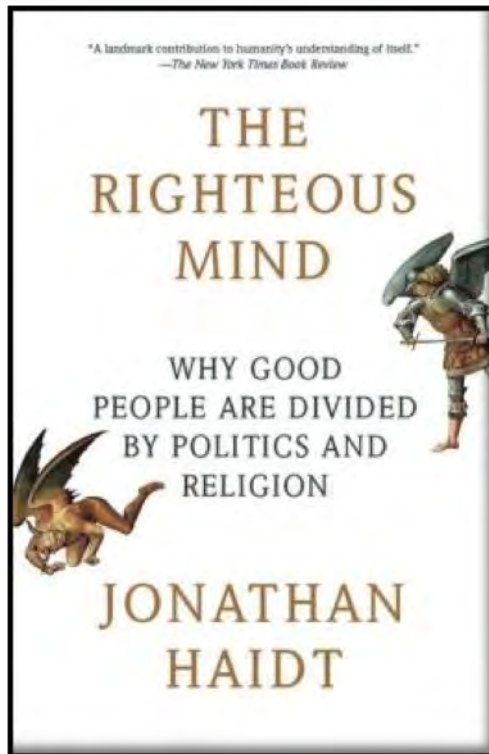
There's a lot of new thinking about the old art of persuasion

- **Those same unconscious, intuitive processes apply to our values and political beliefs**
- **We've made up our minds before we know it**
- **Our reason serves our intuition**



Moral Foundations Theory

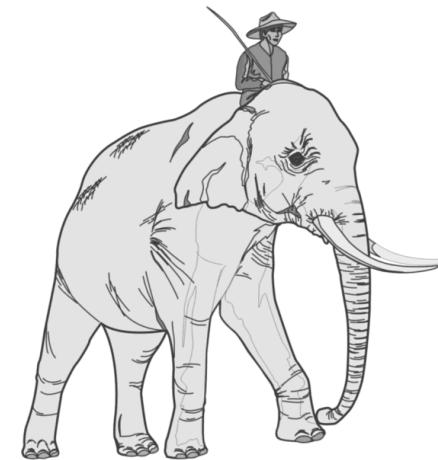
(understanding evolutionary moral psychology)



**SOCIAL & POLITICAL JUDGMENTS
ARE PARTICULARLY INTUITIVE**

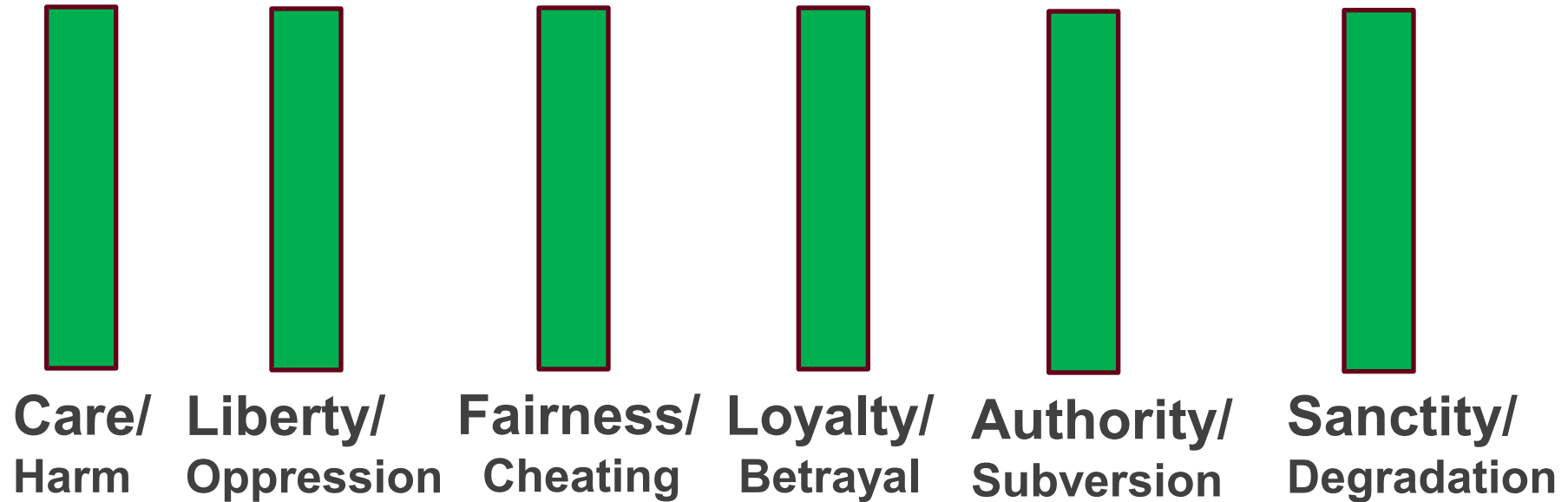
***Intuitions come first,
strategic reasoning second***

**90% = Intuitive Elephant
10% = Rational Brain**



Adapted from: Haidt, *The Righteous Mind*, Vintage Books (2012)

Haidt Looked at the Distribution of Foundations in America



Haidt's Six Moral Foundations

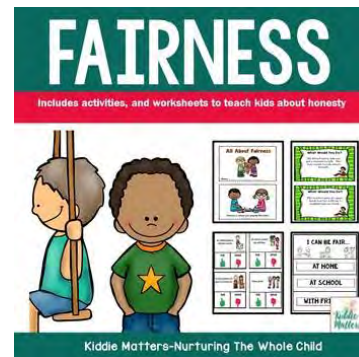
Adapted from: Haidt, *The Righteous Mind*, Vintage Books (2012)



1. Care/Harm
Compassion for those
suffering or vulnerable



2. Liberty/Oppression
Free Choices & Actions
Social Intolerance of Bullies



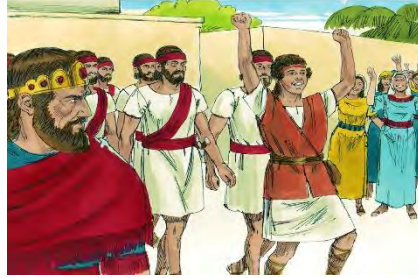
3. Fairness/Cheating

People Treated Fairly & Getting What They Deserve
Social Intolerance of “Free-Riders”



Haidt's Six Moral Foundations

Adapted from: Haidt, *The Righteous Mind*, Vintage Books (2012)



4. Loyalty/Betrayal

- Personal Trust, Group Identity,
- Social isolation who betray



6. Sanctity/Degradation

- Not simply a religious value
- Some parts of the human spirit are elevated & pure
- Social aversion to personal degradation



5. Authority/Subversion

- Competitive advantage of organized groups
- Social intolerance of those who subvert the system



Haidt's Six Moral Foundations

Immunization Example

1. Care/Harm

“Vaccination saves lives.” **“I have to protect my baby from those deadly shots.”**

2. Liberty/Oppression

“I have a right to privacy for my medical records.” **“Government has no business telling me how to care for my baby.”**

3. Fairness/Cheating

“Everyone should get their shots.” **“People who don't vaccinate their kids are just free-riders.”**

Haidt's Six Moral Foundations

Immunization Example

4. Loyalty/Betrayal

“Getting vaccinated is a duty we owe each other in society.”

“CDC has sold our kids out to Big Pharma.”

5. Authority/Subversion

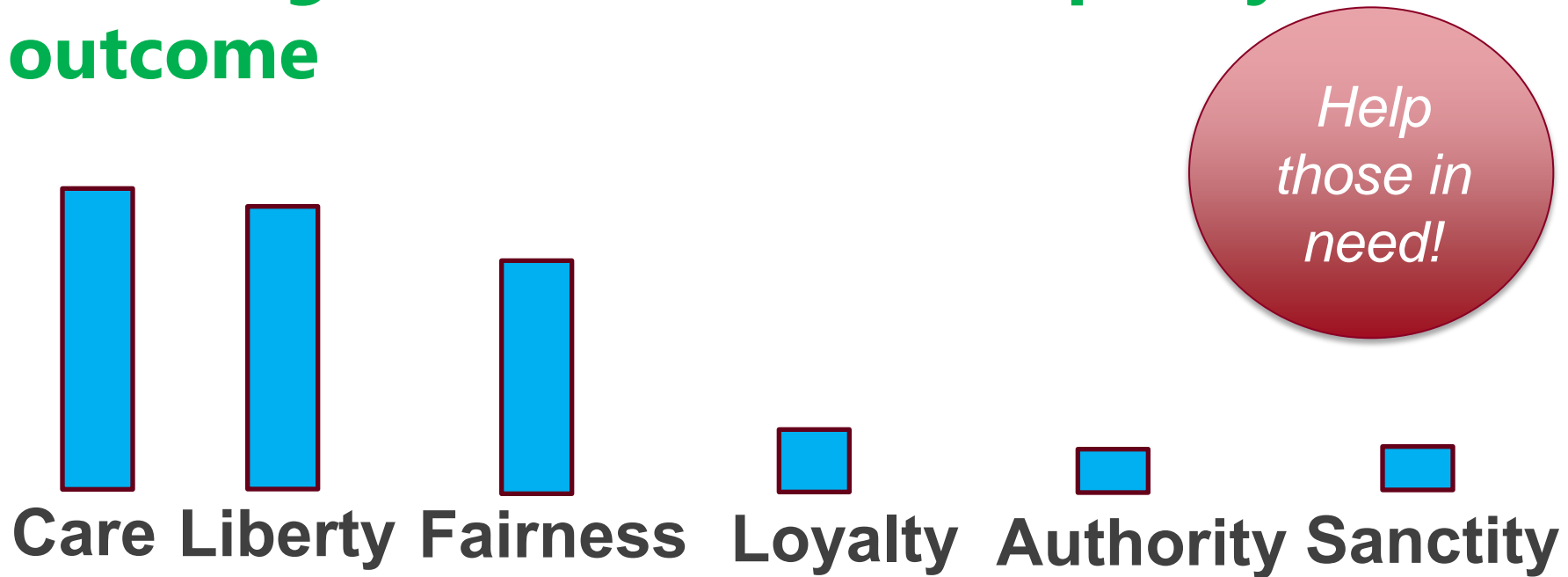
“Science proves that vaccines are safe.” “Mandatory vaccination is a conspiracy to make doctors and Big Pharma rich.”

6. Sanctity/Degradation

“I got my shots because I believe in the sanctity of human life.” “I refuse to expose my child's body to toxins.”

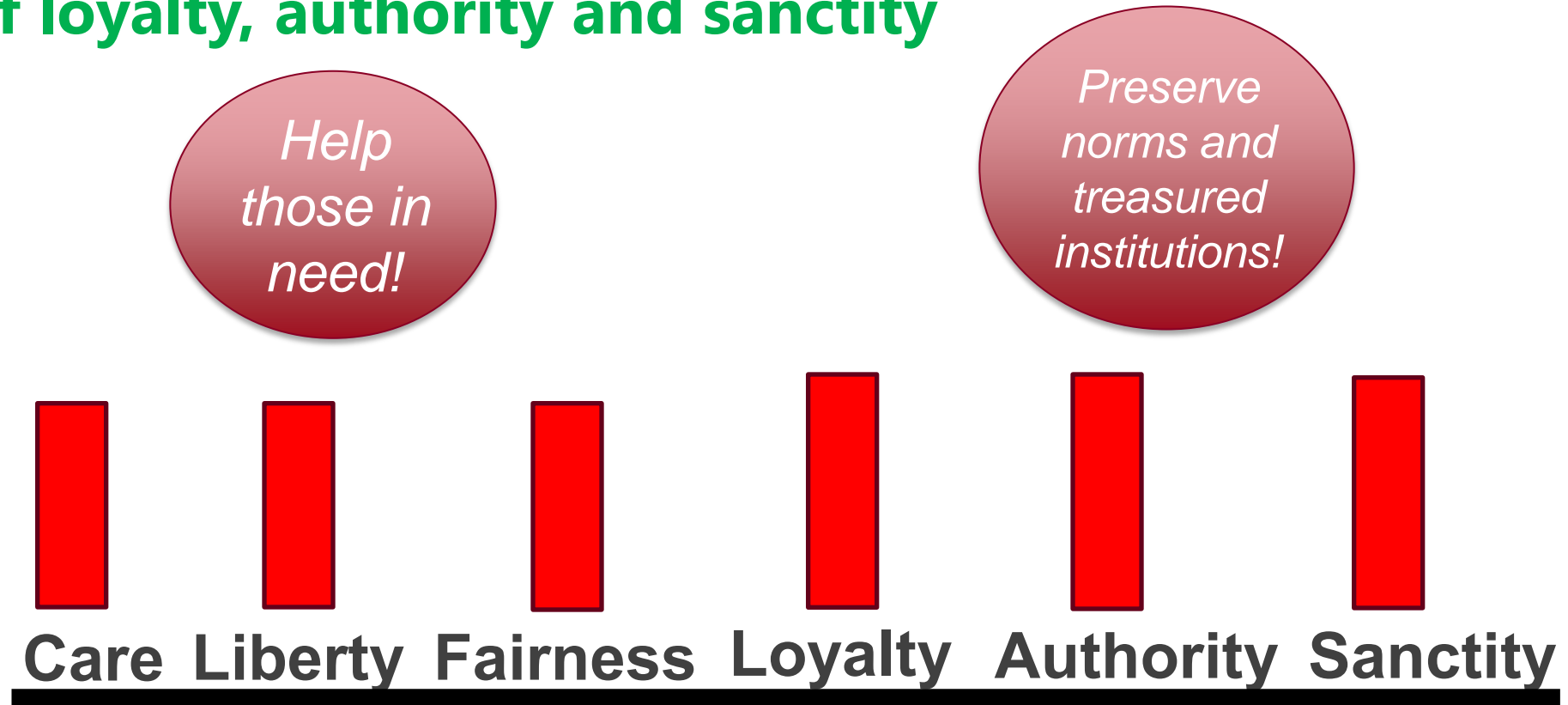
The Liberal Moral Matrix

Heavy on caring for the weak/preventing harm, rights and fairness as equality of outcome



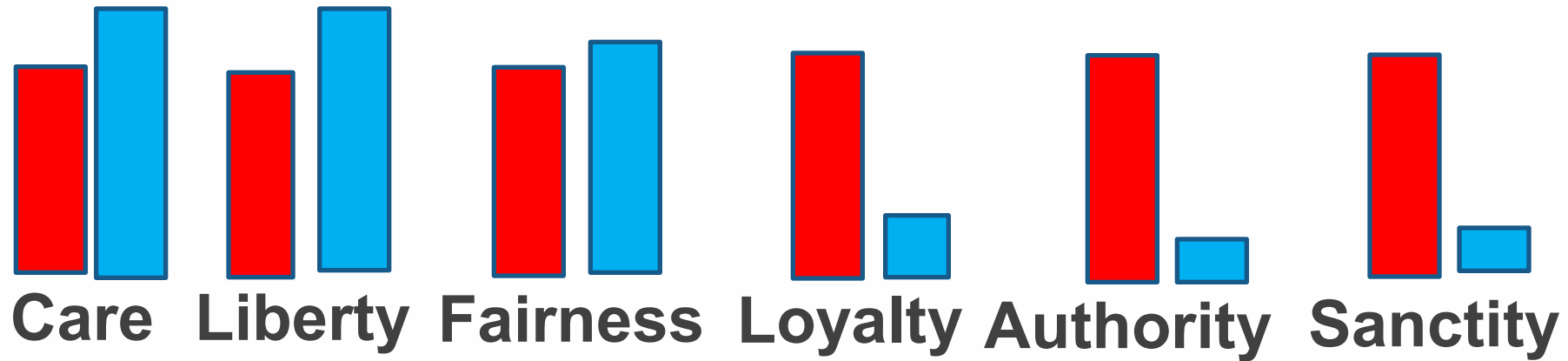
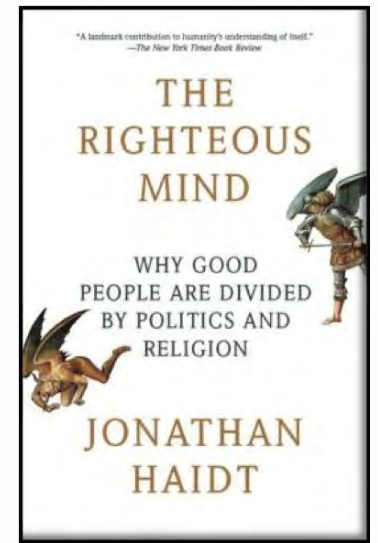
The Conservative Matrix

Includes care, liberty and fairness (as equality of opportunity), but even more on the “institutional” values of loyalty, authority and sanctity



Moral Foundation Theory

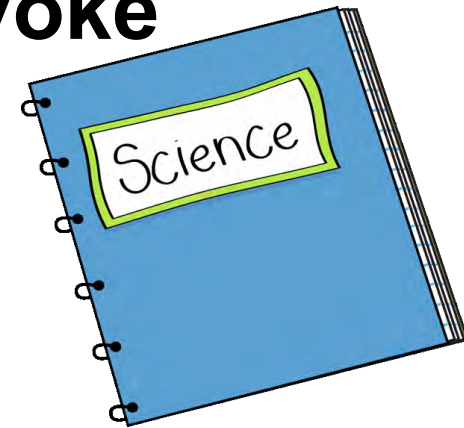
“The Conservative Advantage”



**This framework gives us insight into a significant
“Public Health Advantage” at this moment**

Public Health Tends to Speak the Moral Language of Liberals

- When we take our evidence and expertise into the political realm to change law and policy, we invoke **Care/Harm**
 - “lives saved”
 - “harm prevented”
 - “costs avoided”
- When challenged, we fall back on **authority & science**



Thanksgiving Dinner Explained



Becoming Better Messengers

VIDEO



https://www.networkforphl.org/resources/topics_resources/becoming_better_messengers/

HOW TO TALK TO THE DARK SIDE

Listen Intently: Frame the PH Advantage
in the “For Profit World”

Sue Lynn Ledford, DrPH MPA BSN RN



How to listen and learn – advancing population health outcomes

- “I heard you joined the dark side” State DPH retiree
 - *Is this accurate? How do we learn to listen and learn from profit making ventures to advance health outcomes?*
 - *Who makes \$ on healthy people?*
- Staying true to the “mission”
- Listen and learn the “new language”
 - *“high utilizers” vs. addressing the SDOH*
 - *Data analytics vs. people trends*
 - *Market share vs. service opportunity*
 - *Avoiding customer abrasion vs. making the right choice the easy choice*

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Just two words...



Empathy

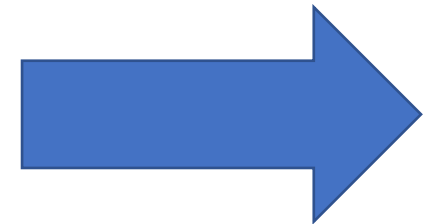


Humility

And just one more



Loyalty





Rod Broussard, New Orleans

Gary Gunderson, DDiv, DMin
VP of Faith and Health Ministries
Wake Forest Baptist Health
Professor, Social Sciences and Health Policy
Wake Forest School of Medicine

Haidt's most off-putting insight: Public Health Sanctity

**In a very,
very, very
strange land and time**

Public Health in a strange land

- ***Sanctity/Degradation***: a sense of the transcendence of life and a powerful rejection of taboo thoughts and actions of degradation.
- Usually understood as micro, personal and time-limited disgust. Political tactics are often designed to trigger revulsion at policies and practices.
- And public health folks respond out of disgust for a strange land devoid of facts, common language or even shame about the health of the public.
- Psalm 137: By the rivers of Philadelphia there we sat down and there we wept when we remembered the people. On the willows there we hung up our data and there our captors asked us for validation and our tormentors asked to sing along, saying “sing us one of those public health songs!” How could we sing of our sacred public trust in such a strange land and time?

Tips for Babylonian Exiles

- **Jeremiah 29: seek the comprehensive health of the county where you have been sent. (build houses and offices and live there; plant gardens and eat; learn science and use it. Be productive and raise the next generation of colleagues. Be stronger, not weaker. Do all this for a lifetime to have a chance to rebuild a ruined place.**
- **Public health is a long game. Works at the speed of trust, and validated over time in the fruit of large and long patterns of lives beyond our own.**
- **Foege: Tenacity doesn't always work; but it's the only thing that works. Our advantage is that we show up early, stay late and come back for years.**

Daytime work implications

- Public health is all about the mesh of humans and our messy institutions which intuitively—and sometimes reasonably—muddle toward health.
- Science helps us distinguish opportunities from distractions so we don't waste social capital. But it may not help potential partners recognize us as friends unless we translate with our lives.
- Listen, listen, listen.
- Show up, show up, show up.
- Don't quit.

Photo by Collins Dillard



***Millennials and the Public
Health Advantage***

Colleen Healy Boufides, JD

Lizzie Corcoran, MPH

Agenda

- 1. Millennials and why we're talking about them**
- 2. Millennials as messengers in our turbulent political climate**
- 3. Millennials, the public health workforce, and social justice**

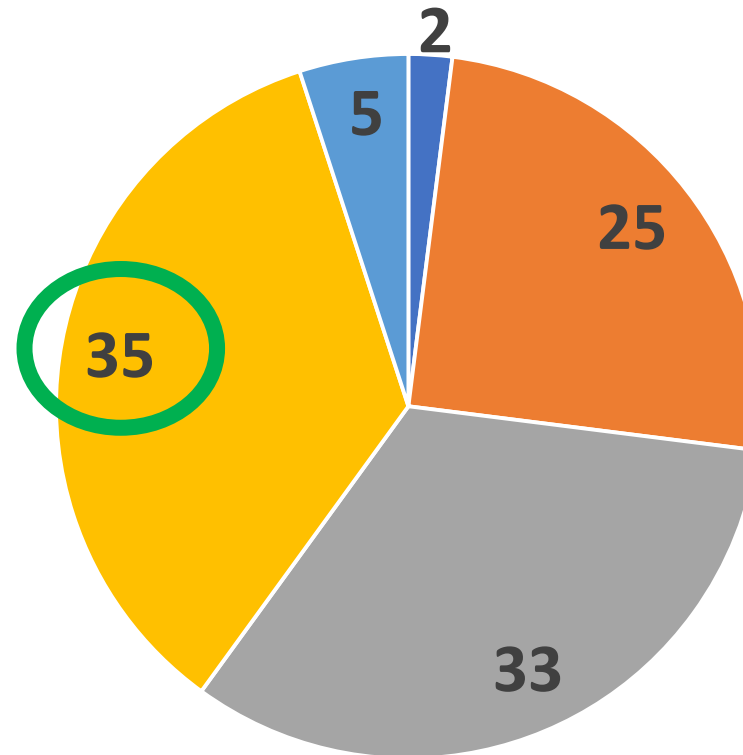
1. Millennials and why we're talking about them

Who are millennials?

- **Born between 1981 and 1996 (currently ages 23-38)** (Pew 2018)
- **Most diverse generation – 44% identify as minorities**
(Brookings, 2018)
- **Most educated generation** (Pew, 2015)
- **Digital natives** (Prensky, 2001)

Why talk about millennials?

Workforce - by Generation (2015)



■ Silents ■ Boomers ■ Gen Xers ■ Millennials ■ Post-Millennials

2. Millennials as messengers in our turbulent political climate

Asset

Millennial Trend #1: Cause-driven

“Cause not loyalty drives engagement.”

(Millennial Impact Report 2016)

Challenge

Millennial Millennial Trend #2: Identity-focused

Preference for “virtue signaling” over communicating and connecting.

(See Bartholomew, 2015)

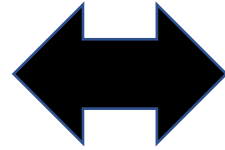
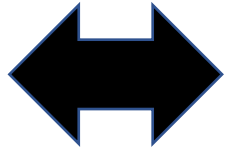
Asset Millennial Trend #1: Cause-driven

Challenge Millennial Trend #2: Identity-focused

Opportunity

[Identity ≠ Image]

Building identity
around the shared
cause of public
health.



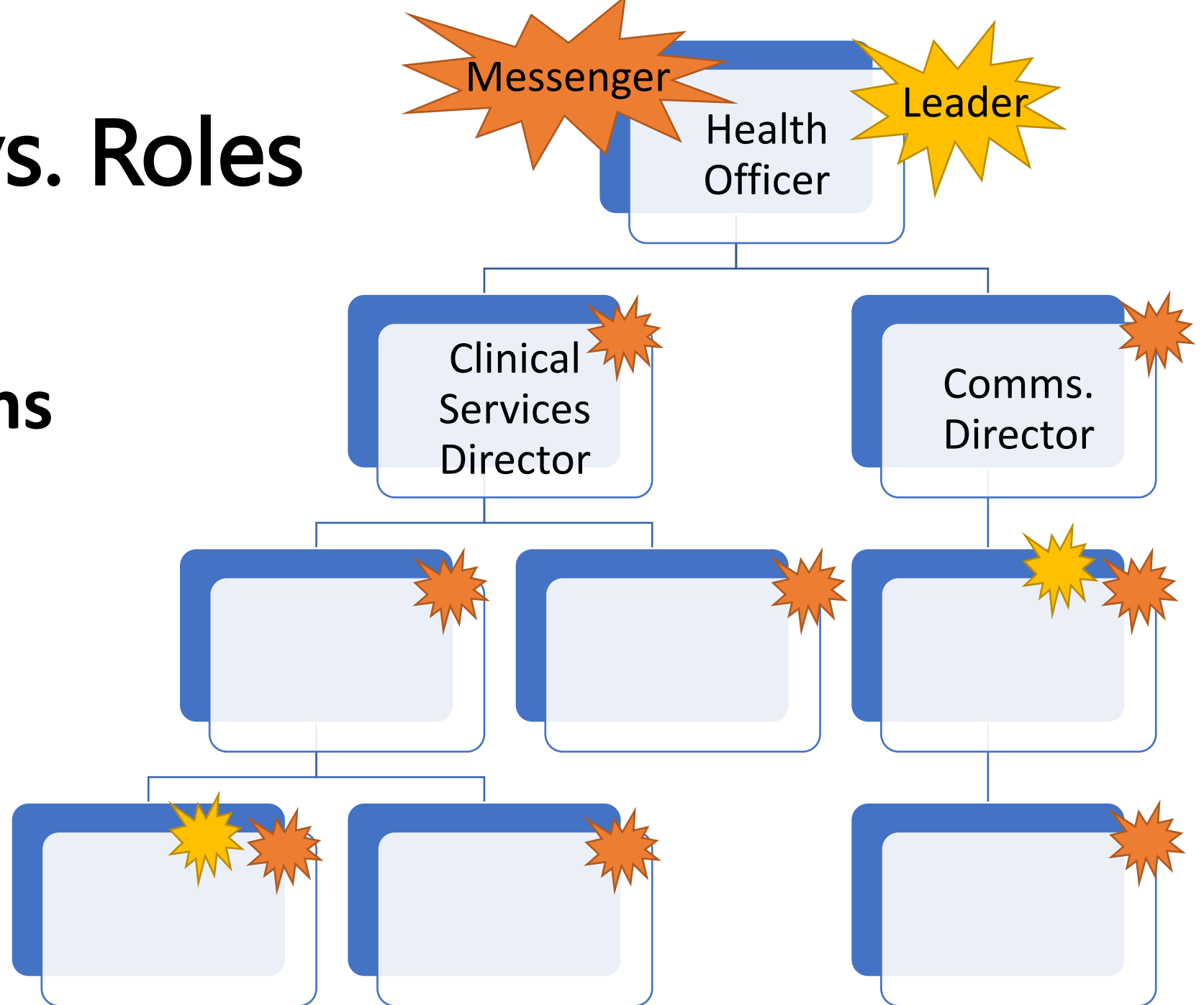
“Signaling”
at

“Communicating”
to

“Connecting”
with

Job Titles vs. Roles

- **Messenger ≠ Communications staff**
- **Leadership ≠ Authority**



3. Millennials, public health, and social justice

Trends Shaping the Young Workforce

Who is the
Future
Workforce?

- 300% growth from 1992 to 2016
- 5th fastest growing degree out of 500 graduate degree programs
- Growth partially contributed to the school's "do good" appeal
(Leider et al., 2018)



SAINT LOUIS UNIVERSITY

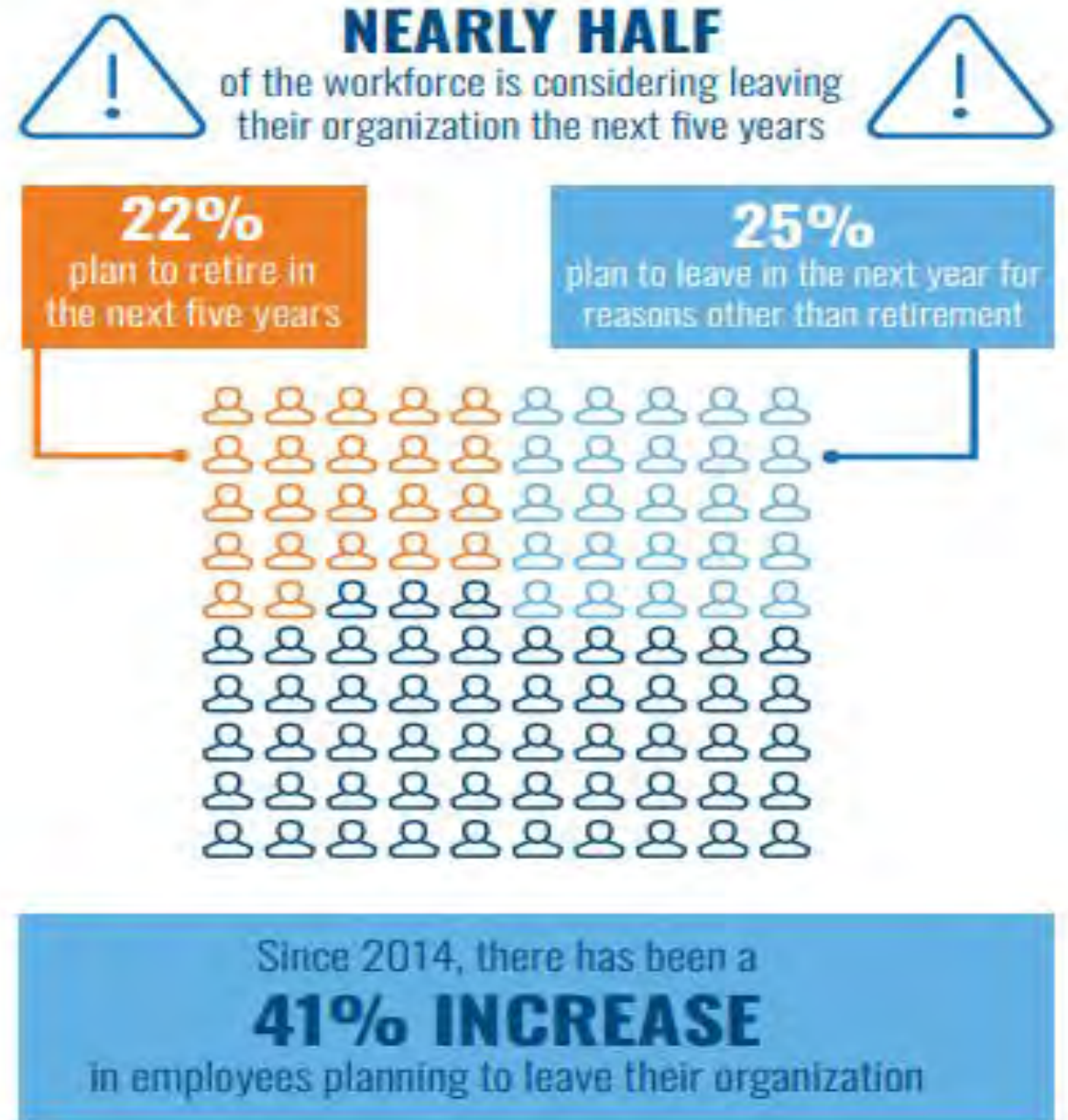
—
COLLEGE FOR PUBLIC HEALTH
AND SOCIAL JUSTICE



***New Trends in
Public Health
Schools***

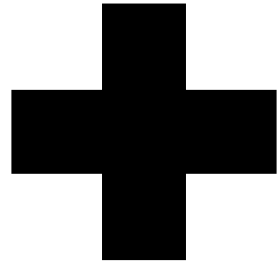
Public Health Workforce Crisis

- Millennials make up 35% of the general workforce
- but
- only 22% of the governmental public health workforce (Pew, PH WINS)



[Credit: De Beaumont Foundation](#)

Newly educated young people



Workforce crisis, shortage



***Opportunity to reenergize public health
with young people***

- Dedication to public health
- Care about communities and social good
- More loyal to causes than institutions; look for non traditional allies

Offline Advantage



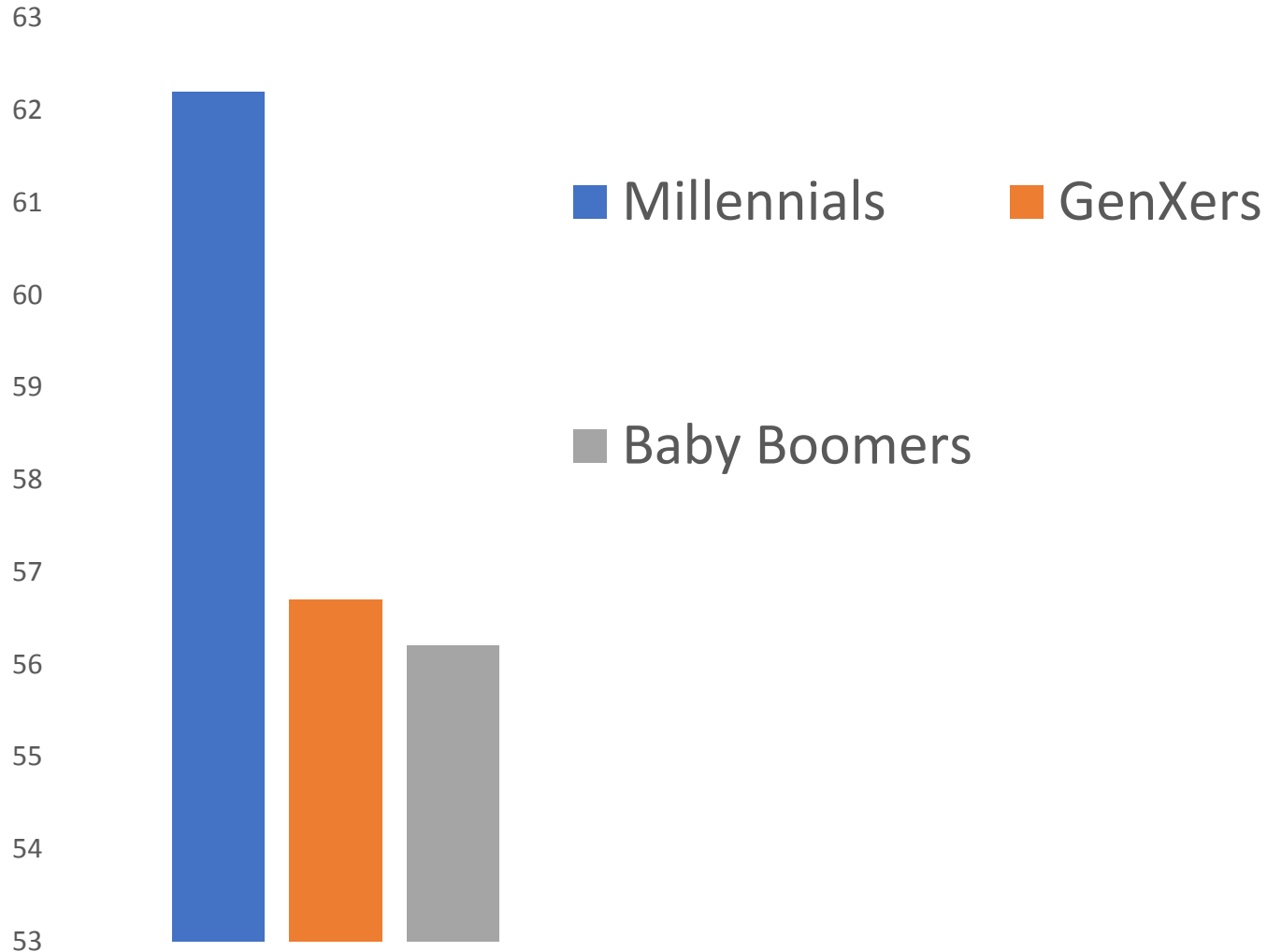
Online Advantage



- **Tech savvy**
- **Amplification of messages using social media**

Millennials and Social Justice

% believe public should be very involved in health equity



- 62.2% of millennials said that their organizations should be very involved in health equity (PH WINS, 2017)
- 56.7% of Gen Xers and 56.2% of Baby Boomers say their organizations should be very involved in health equity

Recommendations: Invest in Young People

- Mentor young people
- Create pathways of advancement
- Engage young people in your cross-sector partnership and advocacy
- **Encourage young people to connect with diverse moral foundations, rather than value signaling**
- Offer opportunities for leadership
- Offer opportunities to contribute to health equity
- Consider the workplace culture and flexibility to change

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Becoming Better Messengers: Millennials, Health Equity & Our Public Health Advantage

Kimberlydawn Wisdom, MD, MS

Senior Vice President of Community Health & Equity,

Chief Wellness & Diversity Officer

Henry Ford Health System

Michigan's First Surgeon General

**Appointed by President Obama to the Advisory Group on Prevention, Health
Promotion, and Integrative and Public Health**

Appointed by Sec. Alex Azar to Advisory Group on Minority Health



all for you

Bridging the Aisle



The Reproductive Well-Being Narrative

*As Seen Through a
Moral Foundations Theory Lens*



all for you

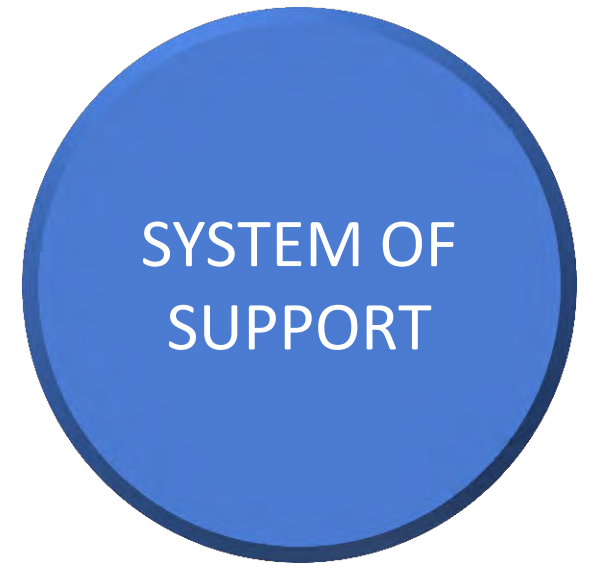
Reproductive well-being means that *all* people have the information, services and support they need to have control over their bodies and to make their own decisions related to sexuality and reproduction throughout their lives.



all for you

Narrative Pillars

To advance the narrative, all messages, stories and experiences must align with and convey these **four pillars** – the conditions that need to be in place to create reproductive well-being.



Narrative Pillar #1 - Respect

- People are seen, heard and understood by their provider, family and society.
- They are trusted to be able to make the decision that is best for them.
- Their unique experiences, beliefs, and cultures, as well as the complexity of their decisions, are respected.



Narrative Pillar #2 - Autonomy

- Decision-making power sits with the individual.
- Providers prioritize shared decision-making, even when a patient's decision may feel counter to their training or beliefs, or when the system they work in makes that difficult.



Narrative Pillar #3 - Control

- People receive the full range of information and have the ability to make informed decisions.
- No one else decides what information is most relevant or limits their options.
- People can build a family, or not, in whatever way works for them.



Narrative Pillar #4 – System of Support

- Systems of support – from education to law to health and beyond – are built and aligned to support reproductive well-being.
- Systems of support work together to make reproductive well-being an expected part of well-being and life.



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