



**Advancing Advocacy**  
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<b>Background</b> (What is the curriculum gap? Brief Lit Review)	<b>Goal(s) of the Curriculum</b>	<b>Program Objectives</b> (Why this experience was created?)
<ol style="list-style-type: none"> <li>1. It is identified by the ACGME that pediatric residency must have two educational units of ambulatory medicine to include child advocacy.</li> <li>2. The existing literature proves that exposure to advocacy teaching and training during residency had a higher rate of community involvement and advocacy during residency, as well as years after residency.</li> <li>3. The CHKD residency program has elements of advocacy teaching and exposure to meet ACGME expectations, but there is no formalized advocacy curriculum with structured access to training materials.</li> <li>4. Residents identified that they have inadequate knowledge regarding the legislature, the art of identifying and contacting their representatives and are not always aware of issues facing the pediatric population in the local community, the state of Virginia (VA) nor on a national level.</li> </ol>	<ol style="list-style-type: none"> <li>1. To enhance resident advocacy skills and knowledge in the context of key child health issues in VA.</li> <li>2. To improve resident knowledge regarding state and federal legislation.</li> <li>3. To facilitate residents' abilities to communicate with state and federal representatives and be involved in advocacy projects.</li> <li>4. To provide residents access to extensive advocacy training resources.</li> <li>5. To enable residents to learn and practice the skill of conducting child health advocacy meetings with representatives, the art of negotiation and making partnerships, op-ed/letter writing.</li> <li>6. To familiarize residents with existing VA state policies/programs on pediatric nutrition, sudden infant death syndrome (SIDS), and child mental health.</li> <li>7. To provide residents the opportunity to attend VA General Assembly Day and a VA-AAP board meeting.</li> </ol>	<ol style="list-style-type: none"> <li>1. To enhance resident advocacy skills and knowledge in the context of key child health issues in VA.</li> <li>2. To improve resident knowledge regarding state and federal legislation.</li> <li>3. To develop resident interest in child advocacy with the goal of creating future pediatricians who continue to participate in child advocacy.</li> </ol>
<b>Resident/Fellow Learning Objectives</b> (What resident/fellow will learn?) (Bloom’s Taxonomy)	<b>Educational Strategies/Activities</b> (Miller’s Pyramid)	<b>Learner Assessment</b> (How is the learner assessed for success? Results?)
<ol style="list-style-type: none"> <li>1. Residents will discuss current child health issues from the point of view of The Medical Society of VA and the AAP</li> <li>2. Residents will be able to identify at least three major child health issues in the state of VA.</li> <li>3. Residents will identify inequities in child health policies and potential areas for improvement.</li> <li>4. Residents will understand why child advocacy is important to their future practice.</li> <li>5. Residents will become familiar with existing VA state policies and programs on pediatric nutrition, SIDS, child mental health and will identify opportunities for improvement.</li> <li>6. Residents will be able to accurately determine their state and federal representatives and learn how to contact them.</li> <li>7. Residents will understand how to effect change using negotiation and how to build partnerships.</li> <li>8. Residents will gain the skills necessary to write op-eds and letters to legislators..</li> <li>9. Interested residents will have the opportunity to attend a VA-AAP board meeting and General Assembly Day, write to a representative, write an op-ed or meet with a representative with assistance from a course director.</li> </ol>	<ol style="list-style-type: none"> <li>1. Lieutenant Governor of VA, Dr. Ralph Northam, delivered a didactic covering VA child health history, current laws and challenges in child health policy, views of VA legislatures on child health policies, gaps and opportunities.</li> <li>2. Former VA Health Commissioner, Dr. Cynthia Romero delivered a didactic covering the importance of advocacy for residents, personal experiences, and priorities for VA child health policy.</li> <li>3. Advocacy penlights and flash drives with advocacy training materials were prepared and distributed to all residents.</li> <li>4. Three workshops will be led by local VA-AAP members, faculty and advocacy leaders focusing on meeting representatives, art of negotiation and building partnerships, op-ed/letter writing in the context of pediatric nutrition, SIDS, and child mental health respectively.</li> </ol>	<ol style="list-style-type: none"> <li>1. A pre-workshop survey was given to residents gauging their awareness of existing state programs, their involvement in previous advocacy projects, their awareness of advocacy educational resources, and how to effectively get involved at the state level as well as their interest in community outreach.</li> <li>2. Pre-workshop surveys (n=62) revealed the majority of residents had not been involved in community, state or federal level advocacy (73%, 97%, 98 %). 47% and 42% were not comfortable communicating with or finding their representative. 61% of residents indicated unfamiliarity with advocacy resources.</li> <li>3. Post workshop surveys will assess the same areas assessed in the initial survey.</li> <li>4. Attendance is taken at each session to accurately determine which post-survey results will be reliable.</li> <li>5. Pre and post workshop surveys are numbered with each resident assigned a number so we can effectively compare pre and post results per individual.</li> </ol>



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<b><u>Program Evaluation</u></b> How is the experience/rotation assessed for success? Results?	<b><u>Implementation</u></b> Collaborators? Resources? Skills? Faculty Development? Barriers?	<b><u>Lessons Learned</u></b>
<ol style="list-style-type: none"> <li>1. All individual educational activities have a feedback form at the end for evaluation and assessing effectiveness of the workshops and practical experiences.</li> <li>2. Resident participation in VA General Assembly Day and advocacy projects will be compared to previous years.</li> <li>3. Pre and Post workshop surveys will help assess improvement in knowledge, attitude and practices amongst residents regarding child health advocacy. A positive shift in results will be a good measure of program success.</li> <li>4. Follow-up surveys will be sent to participating residents after graduation to assess continued involvement in child advocacy.</li> </ol>	<ol style="list-style-type: none"> <li>1. Funding via Resident-Faculty pair grant: Community Pediatric Training Initiative Advocacy Grant by AAP</li> <li>2. Virginia AAP collaboration: Most recent data provided on health issues, guest speakers invited.</li> <li>3. Resource compilation in flash drives: AAP advocacy guide, Blueprint for Children AAP, VA Department of Health.</li> <li>4. Interested residents attended General Assembly Day under VA AAP and VA MSV to meet their representatives and practice skills acquired.</li> <li>5. Workshop faculty: VA AAP board members and lobbyist, local advocacy leaders including former VA health commissioner.</li> <li>6. Barriers: More block time is needed to effectively teach residents advocacy skills. Not all residents utilized the flash drives given. It was difficult for all residents to attend workshops and local advocacy gatherings due to schedule conflicts. There were a handful of residents who had no interest in advocacy. Arranging for faculty leadership to be in one place at one time was difficult.</li> </ol>	<ol style="list-style-type: none"> <li>1. It may be better to concentrate on PGY-1 and PGY-2 residents to cultivate the culture of advocacy early on in training.</li> <li>2. Creating an advocacy track for interested residents may be a good option in order to provide extensive advocacy training.</li> <li>3. Advocacy modules should be available online on the residency website for advocacy teaching.</li> <li>4. Exposing residents to state and federal child health information and policy cultivates a culture of awareness and desire to possibly contribute to change in health policy at some point in their career.</li> <li>5. It is beneficial to reinforce that advocacy training is not only for general pediatricians but can be applied to various sub-specialties, as well as location of future practice sites (rural/urban) and practice setting (private practice/academic position).</li> <li>6. Workshops may have to be offered multiple times a year so all residents can benefit from them.</li> <li>7. Incentives should be provided to residents who attend all workshops such as time to attend an advocacy event or a certificate of course completion.</li> </ol>

Example workshop 1 format: Infant and Child nutrition in VA: Meeting your representative

- Existing VA Department of Health Programs for infant and child nutrition and policies effecting them- PowerPoint
- How do you locate your representative at the state and federal level?
- How to have a first time meeting with your representative?
- Case based practice on conducting mock interviews with your representative (case on advocating for child nutrition reauthorization act 2016)
- Handouts given: WIC in VA, First checklist encounter (figure 1.), Talking points for case, Child nutrition reauthorization act leave behind, individual workshop evaluation forms



**Figure 1. First Encounter Checklist**

**Meeting Your Representative  
First Time Encounter Checklist**

<input type="checkbox"/> Do your research before the 1 <sup>st</sup> meeting. <i>Notes:</i>
<input type="checkbox"/> What are the member /staff priorities for the coming year? <i>Notes:</i>
<input type="checkbox"/> What committees does the Representative / Senator sit on? <i>Notes:</i>
<input type="checkbox"/> Decide what each of you will say. <i>Notes:</i>
<input type="checkbox"/> Identify yourself and your position in the community. <i>Notes:</i>
<input type="checkbox"/> State the reason for your visit. <i>Notes:</i>
<input type="checkbox"/> Assess the level of knowledge of the person you are addressing. <i>Notes:</i>
<input type="checkbox"/> Share personal experiences. <i>Notes:</i>
<input type="checkbox"/> Invite questions and comments. <i>Notes:</i>
<input type="checkbox"/> Ask for a commitment. <i>Notes:</i>
<input type="checkbox"/> Leave behind a business card. <i>Notes:</i>
<input type="checkbox"/> Thank you and follow-up. <i>Notes:</i>

**Figure. 2. Portion of post- workshop survey**

**Advocacy Curriculum  
Post Survey**

1. What level of training are you in? <input type="checkbox"/> Student <input type="checkbox"/> PGY 1 <input type="checkbox"/> PGY 2 <input type="checkbox"/> PGY 3 <input type="checkbox"/> Other
2. Please highlight which of these you have attended as part of this curriculum? <input type="checkbox"/> Lecture: Virginia child policy history, current laws, gaps and opportunities <input type="checkbox"/> Lecture: Importance of advocacy for residents and health issues facing Virginia <input type="checkbox"/> Workshop – Child Nutrition and Meeting Your Representative <input type="checkbox"/> Workshop – SIDS and Art of Negotiation <input type="checkbox"/> Workshop - Mental health and op-ed
3. How likely are you to speak out for a child health issue in the future? <input type="checkbox"/> Not at all <input type="checkbox"/> Pre-contemplation <input type="checkbox"/> Contemplation <input type="checkbox"/> Preparation <input type="checkbox"/> Action
4. How likely are you to get involved in <b>community level advocacy</b> regarding a child health issue you care about: <input type="checkbox"/> Not at all <input type="checkbox"/> Pre-contemplation <input type="checkbox"/> Contemplation <input type="checkbox"/> Preparation <input type="checkbox"/> Action
5. How likely are you to get involved in <b>state level advocacy</b> regarding a child health issue you care about: <input type="checkbox"/> Not at all <input type="checkbox"/> Pre-contemplation <input type="checkbox"/> Contemplation <input type="checkbox"/> Preparation <input type="checkbox"/> Action
6. How likely are you to get involved in <b>federal level advocacy</b> regarding a child health issue you care about: <input type="checkbox"/> Not at all <input type="checkbox"/> Pre-contemplation <input type="checkbox"/> Contemplation <input type="checkbox"/> Preparation <input type="checkbox"/> Action
7. How often do you plan on paying attention to current events pertinent to child health? <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Less than monthly
8. Where do you plan on getting your news about pediatric health issues? <input type="checkbox"/> Email via American academy of pediatrics federal or state affairs <input type="checkbox"/> Local newspaper <input type="checkbox"/> American Academy of Pediatrics website <input type="checkbox"/> All of the above <input type="checkbox"/> Other: Please specify _____
9. Are you planning on becoming a member of any of the following? Mark all that apply- <i>If you are already a member of all please skip this question.</i> <input type="checkbox"/> American Academy of Pediatrics <input type="checkbox"/> American Academy of Pediatrics Virginia Chapter <input type="checkbox"/> American Medical Association
10. Are you planning on attending a Virginia American Academy of Pediatrics Chapter board meeting? <input type="checkbox"/> Yes <input type="checkbox"/> No

Modified from Niebuhr & D’Alessandro. Planning for Online Teaching-Learning Activities. Workshop at PAS Vancouver, 2010  
 Adame, Arandes, Payne. Teaching Clinical Reasoning Skills: Core Concepts for Developing a Curriculum. Innovations in Health Science Education, 2012  
 Adame et al. Teaching Clinical Reasoning Skills: Core Concepts for Developing a Curriculum, PHM 2012