

# SHARED INTERESTS



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**Working Together across organizations to  
achieve common purposes**

# UHCAN Ohio



Universal Health Care Action Network of Ohio (UHCAN Ohio) is a statewide, non-partisan, nonprofit organization building the consumer voice to achieve quality, affordable, accessible health care for all Ohioans.

UHCAN Ohio works to inform and unite consumers and their allies to influence decision makers so that all Ohioans can get the care they need to lead healthier lives.



# Community Catalyst System of Advocacy



1. **Coalition and Stakeholder Alliances**
2. **Communications**
3. **Resource Development**
4. **Grassroots Organizing**
5. **Policy Analysis & Advocacy**
6. **Campaign Development**

# Coalition and Stakeholder Alliances



Build, expand and maintain strong coalitions and networks that represent a broad range of consumer interests, and bring different assets, missions, perspectives, constituencies, relationships and strategies to work collaboratively toward a common goal.



# Working with Other Partners



## Walk in the Woods

- Reveal Interests
- Agreement and Disagreement
- Brainstorm new ideas and creative solutions
- Align Interests
  - Define Priorities
  - Want, Need, Like to Get, Able to give up

# Needed for Mutual Response

- Roles
- Responsibilities
- Communication
- Coordination



# Watch for and provide clarity on:



- Press
- Branding
- Promotion
- Points of Conflict or Disagreement



# Communications



Communicate the right message to the right audience to build timely public and political support for an issue or position and to counter opposition.



# Resource Development



Raise and appropriately allocate dedicated and unrestricted funds in support of an advocacy campaign and to sustain advocacy work over time.



# Grassroots Organizing



Engage community members who are affected by public policy decisions or systemic problems to put a human face on an issue and to build leadership at the local level. Grassroots can provide important input and feedback on policy approaches and campaign ideas.

# Policy Analysis & Advocacy



Analyze complex legal and policy issues, conduct research and develop sound policy solutions. Strong policy analysis provides organizations with the data and context they need to develop winnable policy campaigns, identify key constituencies, and engage allies in the work.

# Campaign Development

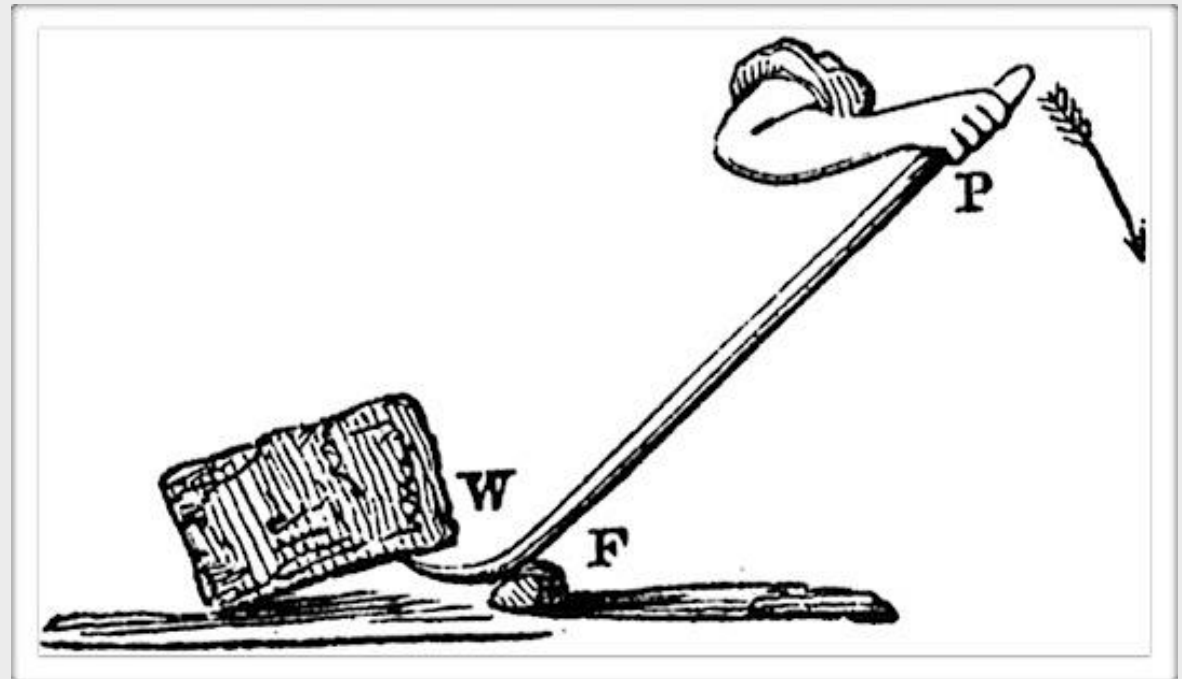


The ability to plan and coordinate advocacy campaigns is essential to shape policy decisions and outcomes. Campaign development brings together all the capacities and orchestrates the involvement of partners and allies to take advantage of opportunities to advance a consumer health agenda.

# Campaign Plan



- Critical Decision-Maker
- Influencers
- Alignment of Values and Interests
- Leverage



# Campaign Plan



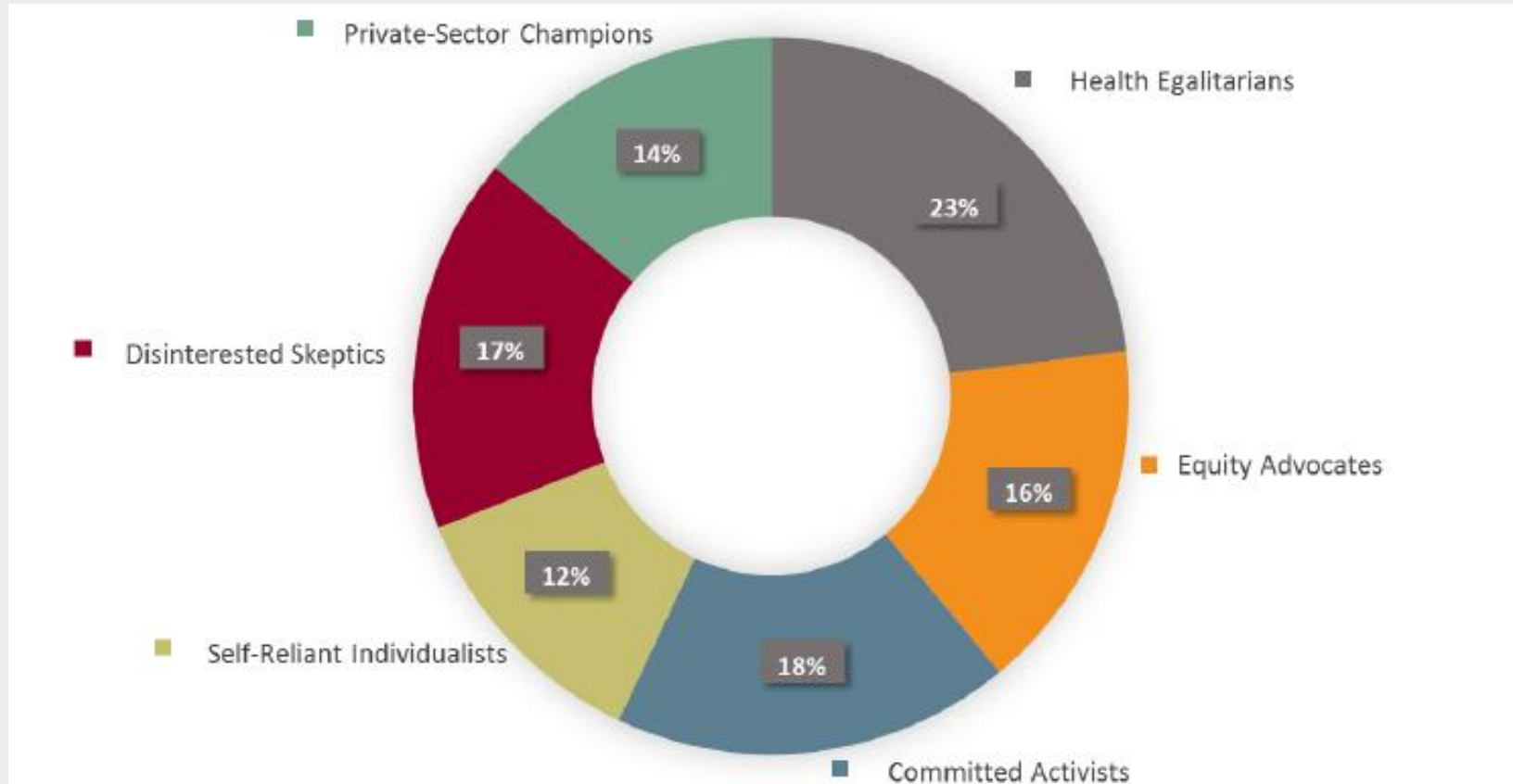
## Strategies

Activism – Rallies, Bird dogging,...

Social, Earned and Paid Media

Direct and Grassroots Lobbying

# American Health Values Survey



<https://www.rwjf.org/en/library/research/2016/06/american-health-values-survey-topline-report.html>

# Health Egalitarians (23% of U.S. adults)



Do not place as much importance at the individual level on personal health as other Americans, and they are less likely to put health first in their daily lives. At the societal level, they are more likely to strongly embrace health equity, but less likely to believe that disparities for different populations exist, or that social determinants influence health. Health Egalitarians also believe government should generally be doing more to promote health, and are more likely than others to believe that building healthier communities is a high priority.



# Equity Advocates (16%)



Are less likely to be highly engaged in personal health—whether through prevention, care seeking, or prayer/meditation. At the societal level, they are more likely to be strongly concerned about equality of opportunity, social solidarity, and health equity. Equity Advocates broadly agree about the existence of disparities, but are less likely to believe that social determinants influence health. They are highly trusting of science and the health care system, and more likely to believe that government generally should do more to promote health.



## Committed Activists (18%)

Are very engaged in their personal health. The majority put health first in daily life, whether through disease prevention, seeking care, frequent prayer or meditation, or openness to alternative medicine. At the societal level, Committed Activists are more likely to believe that health care disparities exist and that the social determinants of health, as well as “non-social determinants” like stress, air and water quality, care access and genetic inheritance, play a role in influencing health. They overwhelmingly believe that health should be a top federal priority.

# Self-Reliant Individualists (12%)



Are very likely to put health first in their daily lives. They are also the most likely of the groups to believe that ordinary people can decide for themselves “what is true” without the need for experts. At the societal level, Self-Reliant Individualists are much less likely to strongly believe in equality of opportunity to succeed, social solidarity, and health equity—or to believe race/ethnic and income-based disparities exist. They are less likely to believe that health should be a top priority for government, but are more likely to be civically engaged through charities or voting based on health issues.



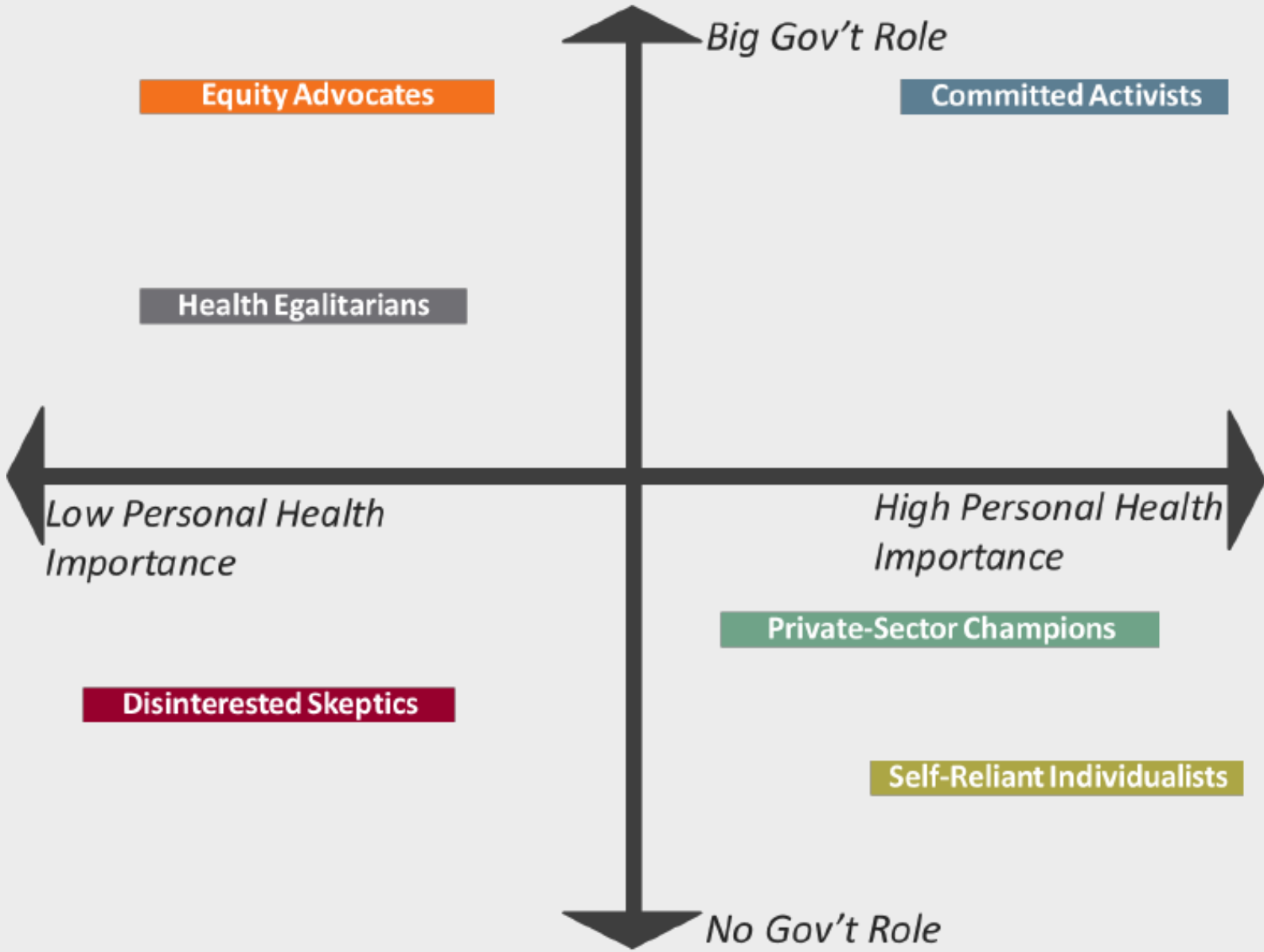
## Disinterested Skeptics (17%)

Do not place high importance on personal health, and are the least health-conscious of the segments. At the societal level, they are less likely to believe in equality of opportunity to succeed, that disparities exist, or that social and non-social determinants have a very strong influence on health. Disinterested Skeptics are much less likely to believe that government should do more to promote health at the federal or community level, and are less likely to be civically engaged.

# Private-Sector Champions (14%)



Are more likely to be oriented toward prevention and seeking care at the personal level, and are much more likely to pray or meditate. They have the least trust in science and the health care system, and often place trust in the wisdom of ordinary people. At the societal level, Private-Sector Champions are less likely to believe that health care disparities exist, but overwhelmingly more likely to believe that social and non-social determinants are important influencers of health. They are the most likely to believe that the private sector should influence health in communities, while less likely to view a role for government.



# Contact



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