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Communicating with Lawmakers Is Citizen's Responsibility Now

BY RHODA WEISS

Ken Strobeck knows a good deal about communicating with lawmakers. On one hand, he is director of public affairs, Blue Cross and Blue Shield of Oregon. On the other, he has been a Republican member of Oregon's House of Representatives since 1994.

Strobeck began his career as a television news broadcaster and then did public relations work for a series of Oregon hospitals before joining Blue Cross and Blue Shield of Oregon. At a recent Washington, DC, meeting of the American Society for Health Care Marketing and Public Relations, he offered his audience advice on how to effectively convey messages to elected officials.

THE CITIZEN AS COMMUNICATOR

Strobeck said citizens today have a responsibility to be their own communicators. He gave two reasons for this:

- Government at both the federal and state levels has, in recent years, restricted the activities of professional lobbyists.
- Lawmakers tend to take the opinions of actual constituents more seriously than those of professional lobbyists. "There is no substitute for the person who can push the vote button," as Strobeck put it.

He urged persons interested in healthcare organizations—patients and community members as well as CEOs, board members, vendors, and employees—to communicate with legislators on behalf of those organizations. Why? "Lawmakers have the power to turn your business upside down," said Strobeck. "You don't have the luxury of being on the sidelines anymore. Your opposition is lobbying. Everyone needs to make his or her presence felt."

KEEPING TRACK OF ISSUES

To get information about proposed legislation, the citizen-communicator should stay in touch with a representative of his or her professional trade association or organization (e.g., the Catholic Health



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Association). "It is a full-time job keeping track of bills, and government is a complex process," said Strobeck. He noted, for example, that although more than 2,700 bills were introduced in the Oregon legislature last year, only 809 of those were enacted into law. "It takes someone familiar with the system to be on the lookout for what needs your attention," he said.

He urged citizen-communicators to get to know which issues interest individual legislators. Not all lawmakers are knowledgeable about healthcare issues, Strobeck warned his audience. He said that at a recent meeting a representative noted that fewer than a dozen of his colleagues could intelligently discuss critical healthcare topics. "Who has the healthcare perspective in your state legislature?" asked Strobeck. "Who knows your issues?" He also recommended that the citizen-communicator get to know lawmakers' staff members, especially those who specialize in healthcare. "Rather than spin your wheels waiting to discuss an issue with a legislator, take it to the staff member, who will pass it on to the legislator," he said.

Strobeck said the citizen-communicator should always try to approach legislative issues from the local angle. Despite the growing power of PACs, legislators are still most interested in hearing from local people—especially from those who hold positions of power or influence ("influentials" or "grasstops," in today's political parlance). "The decisions may be made in Washington, DC, or the state capital, but the battles are fought on Main Street," Strobeck said.

GETTING YOUR POINT ACROSS

Letter-writing campaigns can still be an effective way to influence lawmakers, but only if the letters are genuine, Strobeck said; form letters are not taken seriously. He was more enthusiastic about using new media—for example, e-mail and telephone "conferencing." He suggested that a citizen-communicator might arrange a phone conference involving, on one hand, a legislator's staff

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REDUCE VIOLENCE

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ple will be dying from firearm injuries than from automobile crashes.

Violence against Children Homicide was the leading cause of death among children under age 4 in 1993, according to the National Association of Children's Hospitals and Related Institutions. Nationwide, 808 children under 4 were killed by physical violence that year. It costs an average of \$14,000 to care for a child injured by a handgun.

Children can be damaged for life by violence, even if they recover physically. How do you place a monetary value on the loss of a child's future? A University of Missouri-Kansas City study found that 40 percent of children under 15 who experience violence in the family tend to lose interest in the future and begin to live for the moment.

A PERSONAL COMMITMENT

How do we begin to end this violence? Clearly we need to assess the impact of violence in our own communities and collaborate with other organizations on projects to reduce it (see *Health Progress*, March-April 1996, pp. 24-40). We also can present educational programs and seminars that promote safety and improved personal relationships within our facilities. We can address the impact of domestic violence on our workplaces by creating environments in which employees feel safe enough to acknowledge and begin to resolve abusive situations.

But, I believe, we must go beyond these efforts. Violence is so pervasive in our society that each of us in healthcare must make a personal commitment to actively work to reduce it in our own lives—at work, at home, and in our neighborhoods.

There are many ways that employees in our organizations can make a personal commitment to nonviolence. For example, mission awareness teams (MATs) throughout our system recently gave employees an opportunity to sign a statement disavowing media violence and pledging to reduce its impact on themselves, their families, and their communities. Nearly 2,500 persons signed a statement called "Say 'NO' to Media Violence."

We found that our employees were

grateful for the chance to speak out on this issue in a personal way. One MAT chairperson said that many signees insisted on using their own addresses, even though the hospital address was offered, because they wanted to make it clear who was signing. She said some of the hospital's security officers, who now wear bullet-proof vests at work, were eager to assist in preparing displays for the activity.

We can also monitor our own language and the language spoken in our homes and offices. We may think language is inconsequential, but we should not underestimate its power. We each have the ability to speak to others—both those close to us and strangers—in ways that can create either happiness or unhappiness, that can demean or inspire.

In marketing our organizations, we can "focus on" rather than "target" audiences, for example. Instead of "shooting down" ideas and projects, we can "take them off the table." We don't need to put "bullet" points in our newsletters and memos when we could use "dot" points. Instead of being on the "cutting edge," we can be "in the forefront." In brief, I am proposing that we find suitable alternatives to our own violent language.

No one is safe from violence. It reaches us at home and at work. It is personal, and we must meet it with a personal commitment to nonviolence. □

NOTES

1. January 17, 1994.
2. Charlene Marmer Solomon, "Talking Frankly about Domestic Violence," *Personnel Journal*, April 1995, pp. 62-72.
3. Solomon, p. 62.
4. Kristin L. Nelson, "Picking Up the Tab for Violent Crime," *Best's Review*, May 1994, pp. 38-45.
5. "Work Violence: Cost Guess Rises as Definition Expands," *Security*, June 1995, p. 9.
6. Christine Woolsey, "Crime in Hospitals Calls for Special Care," *Business Insurance*, November 28, 1994, p. 10.
7. Joseph L. Annest, et al., "National Estimates of Nonfatal Firearm-related Injuries: Beyond the Tip of the Iceberg," *JAMA*, June 14, 1995, pp. 1,749-1,754.
8. Charles Marwick, "A Public Health Approach to Making Guns Safer," *JAMA*, June 14, 1995, pp. 1,743-1,744.

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member and, on the other, four or five local "influentials." Each "influential" could then tell his or her story from notes developed earlier. "This is effective because in this way legislative staffers can hear the views of actual constituents at first hand," said Strobeck. "It will seem like a spontaneous expression of support, even though it was precoordinated."


Strobeck said citizen-communicators should try to make legislators feel as if they were part of the community. "Invite them to your facility and give them a tour," he said. "Personalize healthcare issues by telling lawmakers the number of persons your facility employs, the amount of care it provides, the economic impact it has on the community."

Lawmakers enjoy hearing news from the community, Strobeck said, so the citizen-communicator should remember to send them newsletters and information about new developments. "Consider lawmakers an important part of your organization's communications plan," he said. "Make sure they're on the invitation list for major events."

Citizen-communicators can also ingratiate themselves with lawmakers by helping them develop legislative research, by volunteering to work in their campaign organizations, and by making personal or PAC contributions to their campaigns, Strobeck said.

PERSEVERANCE IS IMPORTANT

However, Strobeck also noted that politics is an enterprise that has its limits and disappointments, just like any other. He urged citizen-lobbyists not to give up if, after all their work, they should fail to win on a particular issue. "Good ideas will succeed eventually," he said. "If your position has merit, it will survive. Work on it again. No politician—or hospital executive, for that matter—became successful by quitting after one defeat. It's the same way with legislation." □

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