

# VotER: Healthy Democracies Make Healthy Communities

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Like many, I am encouraged by the shift among emergency physicians toward exploring our role in addressing social determinants of health. The power of these societal factors is enormous compared to health care's capacity to counteract them. Yet, interest among emergency medicine providers is resulting in community partnerships that are improving the lives of some of our most vulnerable patients. In April 2020, though still in COVID survival-mode, I began to wonder how I could get involved in addressing some of the failures that underpin our health system and were leading to the pandemic's disproportionate impact on black, brown, and low-income communities.<sup>1</sup> My search led me to *VotER* and its healthy democracy kit.

“THROUGH THE EFFORTS OF HEALTH CARE PROVIDERS AND MEDICAL STUDENTS ACROSS THE STATE, WE HELPED 4,881 PEOPLE REGISTER TO VOTE AND ENGAGED 9,805.”

*VotER* was started at Massachusetts General by emergency physician Alister Martin. Dr. Martin observed that those who are more likely to present as low acuity patients in the emergency department are also more likely to be unregistered to vote – young adults, people of lower socioeconomic status, and people of color. He wanted to invite patients to be civically engaged because so much of the health care system and our health care experiences are determined by the policies of our elected officials.<sup>2</sup> Initially, iPad-based kiosks and posters in waiting areas offered patients a convenient, nonpartisan opportunity for voter registration.<sup>3</sup> The arrival of COVID-19 necessitated a

change in strategy and the healthy democracy kit was born – a red, white, and blue lanyard and badge-backer with a QR code for patients to scan. This decentralized *VotER* framework empowered health care providers to have brief, nonpartisan conversations with patients to encourage them to be politically engaged and to vote safely by mail.

In June, myself and three others were invited to meet with Dr. Martin and his community organizers. The four of us – attending, fellow, resident, and medical student – met our guide in community organizing, a law student focused on civil rights and policy. Together we set out to grow the *VotER* effort in Pennsylvania. Using the framework of Harvard's Marshall Ganz, our strategy was relational community organizing, a methodology that was new and inspiring to all of us. Our aim was to build a network of health care professionals registering new voters. We learned to tell our story, a public narrative. “Organizers work through narrative to deepen people's understanding of their values, their capacity to share them, and to draw upon them for the courage to act.”<sup>4</sup> This helped me approach my residency program with a goal to mobilize the feelings of urgency, anger, and empathy among my colleagues, and to challenge feelings of apathy, fear, and isolation all too typical of our times.

In approaching my residency program for support, I was fortunate that the attending in the organizing group also works in my hospital system. I also found that one of my co-residents had already requested a healthy democracy kit and begun to get posters approved to hang in the emergency department. Our program director was receptive, as was the chair of the

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department. Both advocated on our behalf to hospital leadership that the *VotER* initiative is in line with the hospital's value to improve the lives of our patients. Aspiring to an American democracy that is inclusive of all and empowering patients to participate in shaping public policy through civic engagement is essential to eliminating health disparities and holding our government accountable.<sup>5</sup> Legally speaking, the *VotER* platform simply serves as a prompt for patients to register themselves to vote. It does not involve medical providers actively registering patients. Even if it were interpreted as such, the American Hospital Association's legal team has stated that nonprofit hospitals are permitted to conduct nonpartisan voter registration activities.<sup>6</sup>

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With the support of the hospital, emergency department, and residency leadership, I ordered more kits and prepared presentations for resident conferences. My co-resident crafted a staff message and hung our VotER posters. We eventually created a group of 15 residents and attendings committed to speaking with our patients about voting. Obviously, it is not appropriate to speak to all patients about voting, some are critically ill or altered, and some shifts are just too busy. But on manageable shifts for low acuity patients, I found the experience uplifting. After collecting the initial clinical information for their visit, or when returning with results and to discuss disposition, I would ask about the patients' voting status and express my concern that they have a plan to vote safely. The conversation usually took 1-2 minutes, and most of my patients were already registered to vote. I offered my VotER badge with its QR code to those who were not registered, had recently changed their address, or wanted to request a mail-in ballot. All these patients expressed appreciation at the end of our conversation.

## “HEALTHY DEMOCRACIES MAKE HEALTHY COMMUNITIES.”

Our group met monthly on-line to check in, reflect on challenging conversations, discuss ideas, and offer each other support. We also participated in virtual statewide meetings where VotER organizing groups around Pennsylvania joined to share experiences and develop collective momentum. Through the efforts of health care providers and medical students across the state, we helped 4,881 people register to vote and engaged 9,805.<sup>7</sup> The total is, in fact, much higher as not all the patients we interacted with needed to scan the badge, but they still benefited from knowing that their health care providers valued their civic participation.

While some may say it is not the role of emergency departments or physicians to address the social determinants of health, there is no doubt that circumstances outside health care nurture or impair health. “When the fabric of communities upon which health depends is torn, then healers are called to mend it.”<sup>8</sup> Healthy democracies make healthy

communities. I think we can agree that we want our patients to invest in their own health and wellbeing. So just as we might counsel them to stop smoking, exercise, and wear helmets, we must also encourage patients to vote, because without claiming their role in our democracy, they will never achieve true health equity. Nonpartisan voter registration through platforms like VotER can help us heal the communities we serve. ●

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