

Increasing Civic Engagement through the Creation of the Voting Is Healthcare (VIH) Taskforce

Jaya Parulekar BS, Kellie Brue MS, Neel Patel DO, Ijeoma Nnodim Opara MD Wayne State University/Detroit Medical Center

Background

 Recognizing that an identifiable gap exists in voter turnout in Detroit, the VIH Taskforce was created at Wayne State University School of Medicine (WSUSOM) to engage students, residents, faculty, and patients about voter registration

> VIH Taskforce Partners

National

>- VotER*

Local

- Faculty- Residents
- •- Medical Students

WSUSOM

- Black Medical Association
- Health Equity and Justice in Medicine program
- American Medical Association

*VotER is a non-profit, non-partisan organization dedicated to helping patients register to vote through a user-friendly and easily-accessible online platform

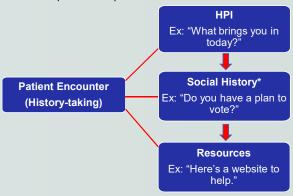
Methods

- The VIH Taskforce and VotER created a text-messaging system and QR codes linked to a web platform specific to WSUSOM (vot-er.org/wayne).
- The QR codes were placed on badge-backers disseminated for in-person patient encounters and as an image for tele-health visits.
- A training session open to all WSUSOM members was also held featuring guest speakers from VotER Leadership and community partners across the state of Michigan.



Taskforce Objectives

- Declare that voting is healthcare
 - Previously physicians had no clear role in political advocacy during patient encounters
 - Since political leaders play a role in passing health policies, it is important for patients to vote for the leaders who will have their best health interests in mind¹
- Health policy necessitates that voting is healthcare and has a role in patient encounters²
- Incorporate civic health duties into the patient encounter
 - Patient autonomy is correlated with better health outcomes³
 - Patients who lack knowledge of or access to the voting process may feel as if they have do not have autonomy or their own political voice
 - Physicians and medical students were encouraged to use the VotER badges during the social history* portion of the patient encounter to assess the patient's readiness and willingness to vote
 - Motivational interviewing and resources were offered based on the patient's responses



- Navigate civic engagement during the COVID-19 pandemic
 - Telehealth outpatient visits were conducted for patients
 - VotER website platform was provided in Zoom and Microsoft Teams chat boxes during tele-health visits
 - Zoom conferences and meetings were hosted by the VIH
 Taskforce and other collaborators

Results

- The VIH Taskforce gathered materials and resources to assist patients with various levels of the voting process including, but not limited to, the following:
 - Voter registration
 - · Voting absentee
 - Mailing absentee ballots
 - · Finding polling locations
 - · Voting as a non-MI resident
 - · Drop-off and contactless voting
- Per VotER records, we were able to help 84 patients vote, registering 34 to vote and helping 50 vote from home
- We are still waiting on the total patients registered in the City of Detroit from VotER Leadership

Conclusion

- The VIH Taskforce successfully increased civic engagement at WSUSOM, representing a collaboration between physicians and students in engaging with each other and the patients whom they serve
- The VIH Taskforce hopes to continue conversations about civic engagement after the election cycle, with plans to branch out to additional outside health systems and community partners in the future

References

- Miller KL. Patient centered care: A path to better health outcomes through engagement and activation.
 NeuroRehabilitation. 2016 Oct 14;39(4):465-470.
- Brown, Chloe L., Danyaal Raza, and Andrew D. Pinto. Voting, Health and Interventions in Healthcare Settings: A Scoping Review. Public health reviews 41 (2020): 1-21.
- Lee, Y. and Li, J. Do patient autonomy preferences matter? Linking patient-centered care to patient-physician relationships and health outcomes. Social Science & Medicine. (2010) 71(10); 1811-1818