

HEALTH POLICY CORNER: PART I

Hill Day Recap: Telling Stories and Advocating for Primary Care

Theodore Long, MD

Dr. Long is a Robert Wood Johnson Clinical Scholar in the Yale School of Medicine.

On March 12, 2014, 63 SGIM members assembled in Washington, DC, for the annual Hill Day. While this was my first Hill Day, there was a palpable sense of excitement among the leadership that so many people had come. With this many people, we knew we would have a significant voice. I started the day with meeting the other members of my advocacy team: a seasoned attending, another physician fresh out of residency, and a fourth-year medical student. As we began our meetings, the questions on my mind were what we could offer to the representatives and how we could help inform them about health care. To put it another way, I wanted to communicate ideas from our unique perspective, something that only we could discuss with authority.

We started our first two meetings with health policy advisors by emphasizing that SGIM supports repeal of the sustainable growth rate (SGR). Judging by their knowledgeable responses, it was clear that this was not the first time a physician had advocated for SGR repeal to them. We were quick to acknowledge it, as well as our own vested interest in

getting the SGR repealed. The brevity of our SGR discussion did not mean the issue was unimportant to us—we brought it up first for a reason. However, the implicit message was that this was not the issue about which we as representatives of SGIM had exclusive authority.

As each of the first two meetings proceeded, we transitioned to a conversation about our views on the primary care workforce from the perspectives of general internists in varying stages of career development. As we began to talk about how our experiences in training had impacted our decisions about entering primary care, I could tell that we had caught their interest. When we described SGIM's progressive stance of promoting accountability in graduate medical education to address the current primary care workforce shortage due to the implementation of the Affordable Care Act, I knew that we had found a topic that could benefit from our unique perspective.

The common tactic going into an advocacy or lobbying meeting is to try to tell a story based on your experiences. Using personal experience

and anecdotes lends credibility to your words and creates a dialogue that the person you are speaking with will remember. Based on our experience with Hill Day, I would add that your story should involve an issue that you are passionate about and that you have a unique or personal perspective on. As we continued to go to our meetings throughout the day, our team spontaneously and without previous planning or discussion began telling stories about training in primary care. We used these experiences to demonstrate our take-home point that graduate medical education funding should support training that grows the primary care workforce.

At the end of the day, we had all told our stories and excited some interest from the representatives we met. I was impassioned by our ability to reach out to representatives and health advisors and am already looking forward to repeating the experience next year. In the meantime, I will continue to reflect on the stories my team told and the intersection between our experiences and policymaking.