



VISION & VOICE

FAITHFUL CITIZENS AND HEALTH CARE

Raising Our Vision and Voice

FACILITATOR MANUAL SESSION FOUR



SESSION 4

RAISING OUR VISION AND VOICE

THEME

Putting faith into action: Learning to elevate a moral message that is grounded in our faith traditions and that supports health care for all

OUTCOMES

Note: Outcomes for this session will vary depending on the activities you decide to use with the group. Present those outcomes that match the activities you will be doing.

Participants may leave this session with:

- A letter to elected leaders sharing a faith-inspired message on the future of U.S. health care.
- A list of questions for elected leaders that elevate faith values and point to issues of justice and fairness as we talk about health care.
- A commitment to next steps as individuals and as faith communities to help lead to change in health care.

PREPARATION

Supplies/resources needed:

- Clip from movie “Damaged Care” featuring Linda Peeno’s testimony to Congress (optional)
- If you will be using the Linda Peeno clip, you will need a DVD player and TV monitor
- Wall mural, “The Road to Our Health Care Future”

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- Letter paper, envelopes, pens, and stamps to write and mail letters to elected leaders
- Addresses for elected leaders
- Guidelines for writing a letter to the editor, plus a sample letter from your local paper; two resources can be found at:
 - + Texas Impact: www.texasimpact.org/PDFs/FIT07LTE.pdf
 - + NETWORK:
www.networklobby.org/resources/media_tips.pdf
- Copies of the participant pages for this session, one for each person
- Copies of the “commitment and action check-in” sheet for each participant (optional)
- Additional copies of the (Faith Community Action Calendar)
- Copy of the final evaluation form for each participant (See “[download materials](#)” on Vision and Voice website)
- Opening and closing words/prayers (See “[download materials](#)” on Vision and Voice website)

Note: Activities marked as “optional” are for sessions longer than one hour.

Before the session:

- Post the wall mural “The Road to Our Health Care Future”
- Post chart with overview of the four sessions
- If you are using the movie clip, set up DVD

OPENING

Arrival Activity: What have you heard about health care this week?

As people arrive, Invite them to paste or add to the wall mural any articles or additional information they have gathered since the last session. Invite people to walk along the mural to see what has been added.

If you have more than an hour session:

Invite participants to share “snippets” of what they are hearing or reading about health care— both in the news as well as in their day-to-day lives— by posting articles they have brought in or writing summaries of what they are hearing on the wall mural.

Invite people to take a brief walk along the mural and look at what has been added. Ask two or three people to share briefly about what they have added.

Opening words that tie faith with action

5 min

Welcome, introductions and brief overview of previous sessions

5 min

Some Assumptions for this Session

- Faith communities and individual people of faith can offer important perspective and leadership in making changes in U.S. health care.
- Our Faith Values + Our Active Citizenship (learning about issues, voting, etc.) = Power for Change

REFLECTION

Activity: Elevator Speech and Vision Statement Check-In

10 min

Introduction: While some of us may not feel comfortable speaking out in large crowds, as individuals we have opportunities in day-to-day life to speak out, to share a vision of a better world that grows from the values of our faith. On the individual level, a way to do this is through our day-to-day conversations with others and in making time to share our vision with policy makers. Some of us tried that this past week with our elevator speeches and vision statements.

Work in groups of 2 or 3 with persons you don't know well.

By answering one or two of the questions below, engage in a crisp check-in about how you used your elevator speech or vision statement during the last week.

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1. How did you use it? If you didn't use it, what was the barrier for you?
2. How did it feel?
3. What did you learn that you can use the next time you have an opportunity to share your elevator speech in a conversation or written communication?
4. What connection do you see between this idea of using an elevator speech or vision statement and people of faith raising a faithful voice for change in U.S. health care?
5. What did you learn from hearing about others' experiences in using or not using their elevator speeches or vision statements?

In the large group, we'll hear from one or two people on their responses to questions four and five.

LEARNING

Optional Activity: *If your session is longer than an hour and you will be writing letters, use this activity to lead into the letter writing. If people in the group are not ready to take an action like writing a letter, use this activity as an alternate.*

An Example of Asking Justice Questions

Show the Linda Peeno clip from the film "Damaged Care." This made-for-television movie based on a true story is available in some libraries, and can be ordered inexpensively in both DVD and VHS formats from several online sources. If the movie cannot be shown, the story of Linda Peeno can be told briefly.

The movie "Damaged Care" depicts the story of Linda Peeno, a former health insurance worker who exposed some unjust practices in the managed care industry. The movie ends with two poignant scenes. The first is her visit to the patient who could speak only with the help of a special machine that Linda authorized, a move which cost her a job. When the young patient expresses her thanks to Linda for helping her "find a voice," Linda returns the thanks exclaiming that the young lady had helped Linda find her voice. The movie then concludes with Linda's testimony to Congress with her question "How many people

20 min

have to die...? Linda concluded for herself that even one death was too many.

We won't all have the opportunity to testify before Congress, but we will have numerous opportunities to make our voices heard.

Total group dialogue: If people of faith were to raise their voices about U.S. health care, what do you think this would look like? What would we denounce? What would we announce?

Activity: Learning to ask the questions about justice in health care

Introduction: People of faith have a very special role to play— the role of elevating a moral message that health care for everyone is, very simply, the right thing to do. In fulfilling that role, sometimes we may use our elevator speeches or vision statements. Other times our role is to question what the elected leaders are saying. Particular questions can be raised about justice and fairness to help us better understand how proposals measure up to our faith values. But to do any of that, we need a very basic understanding of what is actually challenging our moral sensibilities. Asking the difficult questions about justice helps us better understand where our voices will be important.

We begin this conversation with a quote that has been attributed to a number of sources:

It is often said that the moral test of a society is how that society treats:

- + those who are in the dawn of life— the children;
- + those who are in the twilight of life— the elderly;
- + and those who are in the shadow of life— the sick, the needy and the differently-abled.

With the moral values found in our faith traditions as the starting point, questions about justice and fairness can help us keep our government leaders focused on those issues which make the greatest contribution to the common good. Let's look at those questions, as printed on the participant sheet.

- Remembering our most vulnerable populations— the children, the elderly, the sick, the impoverished, the differently-abled:
 - + Who is included . . . AND . . . the more important question: Who is excluded?
- Reflecting on the economic realities of U.S. health care:
 - + Who pays . . . AND . . .who pays the most in proportion to their ability to pay?
 - + Who profits . . . AND . . . who profits at the expense of those who cannot pay?
- Recognizing the political processes that are necessary to make change happen:
 - + Whose voices are being heard . . .AND . . . Whose voices are not being heard as elected leaders struggle with difficult decisions about how to make reform happen?

Example: Numerous proposals are offered to reform U.S. health care. They vary considerably in how they would cover and pay for persons who are currently uninsured. Here are some sample questions to use when writing a letter to an elected official or attending a health care forum:

Mr./Ms. Elected Leader:

1. Does your proposal make affordable health care available to everyone?
2. If not, who is still excluded and how do you propose they get their needed health care?
3. Have you talked to uninsured families to find out what they consider to be affordable?
4. Have you talked with families who have insurance but don't get care because they can't afford deductibles, co-payments, or medicine?
5. What promises have you made to other health care stakeholder groups, like the insurance and pharmaceutical industries, to gain support for this proposal?

Case Study: Children’s Health Care

10 min

Introduction: In September 2007, our country was home to 9 million uninsured children. Fall 2007 was consumed with debate over the Children’s Health Insurance Program to cover children who were eligible but not enrolled in the program, plus 4 million children (still leaving 5 million uninsured). Some of the most contentious points of debate included: the payment mechanism, how “poor” a family had to be to qualify for services, and citizenship documentation.

Total group Dialogue: What “questions of justice” could/should have been asked by people of faith?

ACTION

Activity: Write letters

15 min

Options for taking action:

Option 1: *Have each participant, using her/his elevator speech or vision statement as a start (and, if you were able to introduce them, the justice questions as a guide), and incorporating information from the three previous sessions, write a single letter to an elected leader. (Letters to be collected and mailed by the facilitator.)*

Option 2: *In small groups, compose a letter to elected leaders.*

Option 3: *Individually or in small groups, write a letter to the editor of a local newspaper, using an elevator speech or vision statement and information from the three previous sessions as a start.*

Activity: Commitment & Action Check

5 min

Introductory Statement: During our first and third session, you were asked to consider your personal commitment to learning about and taking action on health care.

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The next suggested activity is to make a commitment for individuals and/or the faith community to take some next steps on health care. Before we do this, we want to check to see if people are ready to take such an action.

Find out if the group is ready to take the next step by either:

1. *Inviting people to complete and return the check-in sheet (see page 10). Then collect the check-in sheets and quickly review them to see if people are ready to take action. One way to do this is to post them and ask the group to interpret the results.*
2. *Asking people to close their eyes (for confidentiality) and then asking for a show of hands for the two questions from the check-in sheet.*
3. *Asking people to do a “thumbs up/thumbs down” to each question from the check-in sheet to see where the group is.*

Activity:

People of Faith: Calendar of Activities for Change in U.S. Health Care

10 min

Share the “People of Faith: Calendar of Activities for Change in U.S. Health Care.”

Introduction: These four sessions invited us to consider the importance of the faith community working on change in the U.S. health care system. In order to make a difference, we need to identify and take next steps that will help us raise our voices on this issue. We don't have the time to do the actual planning in this session, but it is important that we leave here with a sense of who will take responsibility for leading us through the next steps.

1. As a group, follow along as we skim through the calendar of possible activities and think about these questions:
2. Which one or two of these look like “next steps” that we have the time and energy to do?
3. Who from this group is willing to take the lead to make sure this happens?
4. What would be a timeline we could meet?

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5. Sign up to lead or to help with one of the efforts that people from this group will lead in your faith community.

Evaluation

Invite participants to complete the session evaluation.

5 min

PRAYER

Closing Words

5 min

OUTCOME FOR SESSION FOUR

You may leave this session with:

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- A list of questions for elected leaders that elevate faith values and point to issues of justice and fairness as we talk about health care.
- A commitment to next steps as individuals and as faith communities to help lead to change in health care.

SOME ASSUMPTIONS FOR THIS SESSION

- Faith communities and individual people of faith can offer important perspective and leadership in making changes in U.S. health care.
- Our Faith Values + Our Active Citizenship (learning about issues, voting, etc.) = Power for Change

ELEVATOR SPEECH OR VISION CHECK-IN

1. How did you use it? If you didn't use it, what was the barrier for you?
2. How did it feel?
3. What did you learn that you can use the next time you have an opportunity to share your elevator speech in a conversation or written communication?
4. What connection do you see between this idea of using an elevator speech or vision statement and people of faith raising a faithful voice for change in U.S. health care?
5. What did you learn from hearing about others' experiences in using or not using their elevator speeches or vision statements?



LEARNING TO ASK THE QUESTIONS OF JUSTICE

Asking the difficult questions about justice in health care helps us better understand where our voices will be important. We begin this conversation with a quote that has been attributed to a number of sources:

- It is often said that the moral test of a society is how that society treats:
 - + those who are in the dawn of life— the children;
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With the moral values found in our faith traditions as the starting point, questions about justice and fairness can help us keep our government leaders focused on those issues which make the greatest contribution to the common good. Let's look at those questions:

- Remembering our most vulnerable populations— the children, the elderly, the sick, the impoverished, the differently-abled:
 - + Who is included . . . AND . . . the more important question: Who is excluded?
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 - + Whose voices are being heard . . . AND . . . Whose voices are not being heard as elected leaders struggle with difficult decisions about how to make reform happen?

Example: As consensus grows about the inadequacy of our current system, we're hearing numerous proposals for reforming U.S. health care. Many millions more people will be covered by each proposal and several mechanisms for financing the plans are suggested. When writing a letter to a leader, or attending a health policy forum, here are some sample questions.



Mr./Ms. Elected Official:

1. Does your proposal make affordable health care available to everyone?
2. If not, who is still excluded and how do you propose they get their needed health care?
3. Have you talked to uninsured families to find out what they consider to be affordable?
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Case Study: Children's Health Care

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What "questions of justice" could/should have been asked by people of faith?

WHAT IS DIALOGUE

In dialogue, we pay attention to the wisdom of the group. We listen for new thinking and ideas that help us address complex and challenging issues. A conversation is a dialogue when people in a group agree to:

- + Listen deeply to one another, giving full attention to each other, looking for common ground.

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- + Respect the ideas and viewpoints of each person, trusting that others have part of the answer.
- + Give voice to their own ideas and thinking.

In dialogue, each person also monitors her/his participation, taking responsibility for getting her/his ideas out there, while making sure that others in the group have both the clock time and a respectful environment in which to share their ideas. In dialogue, we see changes in thinking and often see new ideas emerge.

Dialogue is usually in danger when people defend their point of view, assume there is one right answer, criticize others' thinking, ask questions that are really opinions or judgments, and look only for conclusions that agree their thinking.

Quoted from www.OurHealthcareFuture.org.

WHAT WILL SUCCESS LOOK LIKE?

Here is what success will look like for these Vision and Voice sessions:

- People of faith who participate in these sessions will have a deeper understanding of moral issues related to U.S. health care.
- Individuals and faith communities will have some tools to help them talk about the future of U.S. health care in a way that reflects the values of their faith traditions.
- Communities of faith will learn ways to share these messages in the media and election events.

For those participants and communities ready to take action, success for these sessions might also include:

- Your/our faith community— or a group of individuals within it— will commit to activities that will help keep health care front and center with elected leaders as they engage in health policy reform.
- Your/our faith community— or a group of individuals within it— along with other faith groups will take action to help keep the conversation on health care active and growing in your faith community, local area, state and the nation.



VISION & VOICE

FAITHFUL CITIZENS AND HEALTH CARE

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