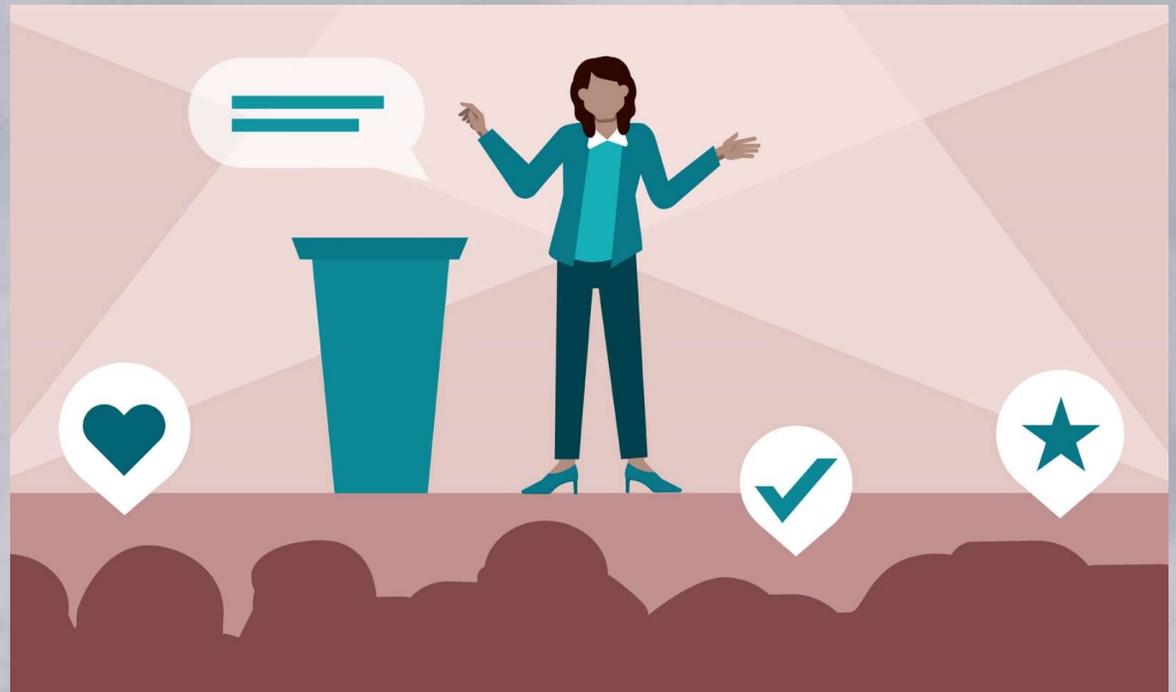


# Messaging that advances our goals

Developing and  
deploying solid  
messages about  
oral health



# Problem statement



**How do we communicate to policymakers, stakeholders and the public in ways that will persuade them to support our efforts to improve oral health?**

# Gaps in our understanding

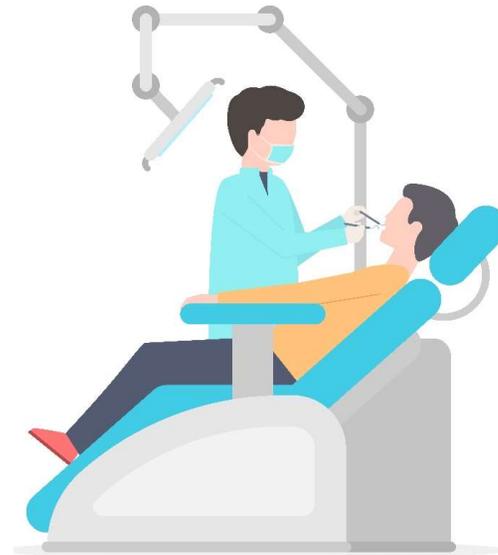
1. Who are the best messengers for advancing our goals?
  2. How can we engage, support and empower the affected communities to be effective messengers?
  3. When communicating with communities of color, older adults, etc., are we using language that is respectful?
  4. How can we test messages with actual legislators or other policymakers to assess their effectiveness?
  5. Which communication modes are best to reach policymakers?
  6. Are we better off focusing more of our communications on potential champions?
-

# Helpful resources for message guidance



# Good resources for messaging

1. **FrameWorks Institute** ([FrameworksInstitute.org](https://www.frameworksinstitute.org))
  - Use messages that will overcome or avoid the “**health individualism**” trap
  - Establish oral health’s link to overall health
  - Appealing to your audience’s **values** “can have a measurable effect on people’s attitudes and policy preferences”



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## INSIGHTS

Public thinking of oral health:  
<https://bit.ly/FWpublicthinking>

A communications toolkit:  
<https://bit.ly/FWtoolkit>

# Good resources for messaging

## 2. Marketing For Change (MarketingForChange.org)

- Engaged in message-testing to explore perceptions related to Medicare dental coverage. Key takeaways:
  - ✓ Frame this as something that seniors stand to lose rather than something they stand to gain
  - ✓ A dose of humor can help: “Medicare doesn’t think you have teeth”



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### INSIGHTS

Has the pandemic changed public attitudes about a dental benefit in Medicare?

[https://bit.ly/Medicare\\_COVID](https://bit.ly/Medicare_COVID)

# Good resources for messaging

## 3. CDHP's qualitative research (Maine and Texas)

- Conducted focus groups of “influencers” to gain insights about how to engage them and their legislators. Key takeaways:
  - ✓ Most felt their legislators would care more about improving Medicaid benefits if they knew tooth decay is a **disease**
  - ✓ Oral health's links to school success and jobs motivated their advocacy



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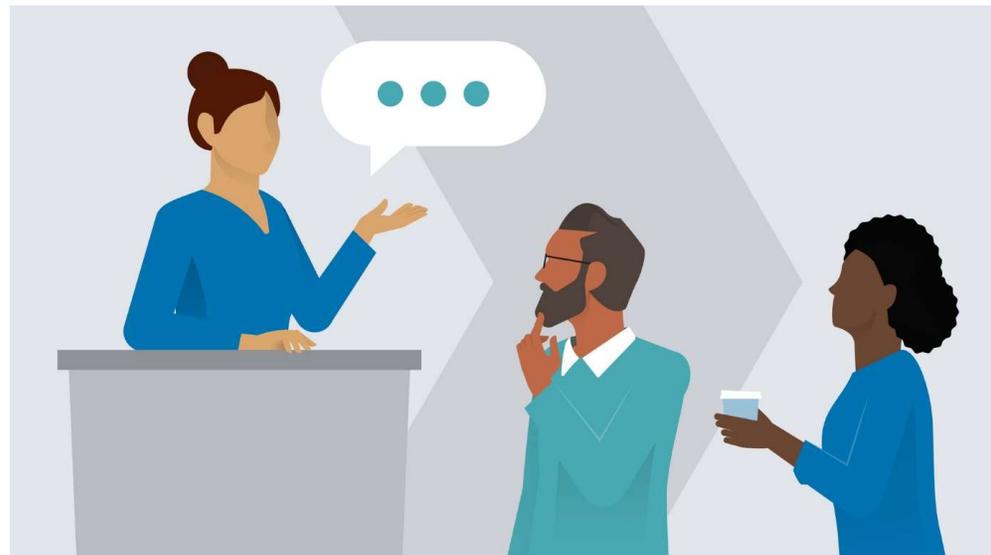
Report on the Maine findings:  
[https://bit.ly/CDHP\\_Maine](https://bit.ly/CDHP_Maine)

Report on the Texas findings:  
[https://bit.ly/CDHP\\_Texas](https://bit.ly/CDHP_Texas)

# Good resources for messaging

## 4. DentaQuest Partnership for Oral Health Advancement

- With state budgets facing major revenue shortfalls, Medicaid adult dental benefits could face cuts in various states
- DQP has produced some communication materials that support advocacy for Medicaid adult dental benefits



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### INSIGHTS

Healthy Mouths:

<https://bit.ly/DQPHealthyMouths>

Medicaid Advocacy Toolkit:

*(available soon)*

# Good resources for messaging

## 5. **Families USA** ([familiesusa.org](https://familiesusa.org))

- Its website provides talking points about oral health coverage that are based on research and feedback from its partners.
- The talking points and some sample Q's for policymakers focus on Medicare
- Conducted a national survey (2019) to learn voters' views about seeking a Medicare dental benefit



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### INSIGHTS

Talking points on coverage:  
[https://bit.ly/FUSA\\_TalkPts](https://bit.ly/FUSA_TalkPts)

Medicare survey results:  
[https://bit.ly/FUSA\\_Medicare](https://bit.ly/FUSA_Medicare)

# Good resources for messaging

## 6. OPEN – Oral Health Progress and Equity Network (OpenOralHealth.org)

- One of its founding objectives has been to improve the public perception of oral health — and it just created a Public Perception Network Response Team
- OPEN created a Medicare Dental Advocacy Guide to help advocates prepare for virtual meetings with their elected representatives



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### INSIGHTS

Medicare Dental Advocacy Guide  
<https://bit.ly/OPENAdvGuide>

Why Oral Health Is Critical Now  
<https://bit.ly/OPENCritical>

# Good resources for messaging

## 7. The Opportunity Agenda ([racialequitytools.org](http://racialequitytools.org))

- Its communication toolkit promotes the Opportunity Frame for talking about racism and other structural obstacles:
  - ✓ Leverage the consensus about “opportunity”
  - ✓ Americans react better to positive messages than to negative ones
  - ✓ This frame presents a goal in a forward-looking way



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### INSIGHTS

Their communications toolkit can be accessed at:

[https://bit.ly/TOA\\_Toolkit](https://bit.ly/TOA_Toolkit)

# Additional thoughts about messaging



# Important considerations

- **The partisan divide:** Partisan bubbles have intensified, driven by social distancing and the Trump era. This requires us to choose our words carefully.
- **Beware of the ‘M’ confusion:** Some people confuse Medicaid with Medicare — and many people don’t know what their state’s Medicaid program is called\*
- **Don’t get stuck in the ‘problem’ phase:** In your messaging, move as quickly as possible from the problem to the solution.



\* This can affect an organization’s ability to field surveys about oral health coverage.

# One size doesn't fit all

Messages should vary **based on the audience** they are directed to:

- Policymakers
  - Medicaid officials
  - Legislators
- Your members
- Partners or allies
- Consumers/Communities of interest



# Language matters

## Avoid using:

- Diabetics\*

## Better language:

- People with diabetes

\* People-first language may not always be appropriate. We should take our cues from the language used by patient/community advocacy organizations. One example where advocates choose to self-define by health/medical condition is the Amputee Coalition of America.

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- **Poor** people
- Safety-net **populations**

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- **People** who live in poverty or low-income **people**

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- **Poor** people
- Safety-net **populations**

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- **Free** dental care

## Better language:

- People with diabetes

---

- Medicaid **members**

---

- **People** who live in poverty or low-income **people**

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- A **low-cost** or **no-cost** dental program

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# Tiny differences can shift perceptions

## **Conservatives may like:**

Creating a preventive dental benefit in Medicare is doing what is right and taking care of the working class.



## **But might care less for:**

Creating a preventive dental benefit in Medicare is doing what is right and taking care of the most vulnerable in our nation.

(The context for this slide is qualitative research that was conducted by Marketing For Change on behalf of DentaQuest.)

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# A caveat to consider

“Spokespersons who tell personal stories about problems in their lives are often blamed by audiences for their problems.”

– The Opportunity Agenda

## A caveat to consider

“Spokespersons who tell personal stories about problems in their lives are often blamed by audiences for their problems.”

– The Opportunity Agenda

**My thoughts:** A personal story can backfire for this reason. But details matter. It’s possible to find a powerful story that will not push people into the “health individualism” frame.

Questions?  
Comments?

**Matt Jacob**

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**Twitter:** [@MattinDCtweets](https://twitter.com/MattinDCtweets)

