A New Way to Talk About the Social Determinants of Health

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How do we find a common language that will expand Americans’ views about what it means to be healthy—to include not just where health ends, but also where it starts?
Using Metaphor for Insight Development

Elizabeth Carger, Senior Project Manager, Olson Zaltman Associates
What is ZMET®?

Zaltman Metaphor Elicitation Technique

A patented interview and interpretation process developed in Harvard’s Mind of the Market Laboratories.

Designed to “dig deep” into people’s minds for full & rich understanding of the frames through which they view the world.

ZMET draws from diverse fields:

- Sociology, Anthropology, Cognitive Science, Psychology, Marketing Strategy
A few of the topics we have tackled for non-profit organizations

(Thoughts and feelings about) making charitable donations to different organizations and what makes for a positive giving experience. (Harvard)

…the issues faced by gays and lesbians in the U.S. (blinded client)

…how African children view their future. (World Bank)

…the role of the arts in your life. (The Heinz Endowments)

…how young teens understand healthy relationships. (RWJF)

…what climate change means to you. (The Alliance for Climate Protection)
ZMET®: Foundational Principles of Emotion and Cognition

1) 95% of human thinking and emotion happens in the subconscious – afterwards decisions and attitudes are rationalized but are they the true motivation?

2) Thought and emotion is a series of neural activations (mostly images), not words – therefore research needs to go beyond words in order to go deeper.

3) Metaphoric thinking is THE basic mental process through which we understand meaning, and make sense of the world. The use of metaphor is a way to the subconscious.

4) Emotion is critical to how we think, behave, and interpret our world … and is intimately intertwined with reason. Metaphor is a way to uncover and explain emotions.
The ZMET Technique

ZMET Overview:

Each ZMET interview is a one-on-one discussion approximately two hours long. In preparation for the interview, participants are asked several days prior to their interview to collect pictures that represent their thoughts and feelings about the research topic. As a result of this pre-interview work, participants arrive for their in-depth interview at an advanced stage of thinking, ready to discuss their thoughts and feelings.
Three Levels of Metaphor in ZMET Analysis

**Surface Metaphors**
idiosyncratic verbal and visual expressions

**Metaphor Themes**
shared or “cultural” themes

**Deep Metaphors**
universal orientations
What are Deep Metaphors?

Technical definition

A fundamental orienting structure of thought that operates automatically and unconsciously

Working definition

A viewing lens; a basic but powerful way of seeing the world

Deep Metaphors are…

biological reactions to events or circumstances unconscious and precede conscious thoughts and feelings

hard wired or instinctual few in number and universal
How do we acquire Deep Metaphors™?

Our early physical (and other) experiences shape how we see the world.

Embodied cognition is when we use a physical experience, such as learning how to walk, to understand other domains and experiences.
Helping RWJF reframe the issue of health disparities

**Background:** RWJF was launching a major bipartisan commission on the issue of health disparities. They needed a better understanding of how Democrats and Republicans viewed this issue in order to overcome political gridlock.

**Objectives:** To understand the fundamental frames both groups used to understand health disparities and help develop a campaign that would push the issue forward without alienating either group.
“Beauty is the adjustment of all parts proportionately so that one cannot add or subtract or change without impairing the harmony of the whole.”

Leon B. Alberti
Democrats: System breakdown

**System:** (1) Democrats view poor levels of health as emerging from an interrelated system of social, cultural, economic, and biological factors. Consequently, changing any one factor (like access to insurance) is not going to fix health disparities. (2) American society is a complex system founded on rights, one of which is (or should be) the right to health.

*It’s all tied together* - housing, healthcare, energy, food, you’d start to see well gee you know if someone is sick they are more likely in emergency room.

*It does stem from the belief and that was a founding belief* that has been added to obviously of equity. Well let me flip that. A better way to say it and I think one of the real founding principles was the notion of absence of privilege by virtue of birth.

**Healthcare as a right,** it’s so *fundamental* to being able to have a healthy lifestyle. (What makes something a right?) The values of society, government, federal government. And I say federal because states are all different so some national *over arching societal value* that it is a right.
Container

“I did never know so full a voice issue from so empty a heart:
but the saying is true ‘The empty vessel makes the greatest sound’”

William Shakespeare
Container: (1) Low-income communities are isolated and self contained. (2) Poverty is a hole that traps individuals in unhealthy lifestyles, they cannot emerge on their own. (3) These isolated groups are outside of the social system and rigid barriers prevent their entrance.

It’s like living within your own little world … the reality for poor people is never leaving their culture of poverty.

A self-contained group at the bottom of the pyramid with high unemployment, low job skills.

It can be difficult to lift you and your family out of an economically challenged situation to one that is slightly more stable.

Individuals at the bottom of society’s rungs, economically, socially, etc. they’re the ones who get left out when it comes to access to affordable quality healthcare. … we leave a sixth of all Americans outside the system … we as a society have a responsibility, an obligation and it’s in our best interests to bring them in.

Significant barriers related to healthcare between the Latino community/African American community [and] white folks.
CONTAINER

• “People have their noses pressed to the window, on the outside looking in”

• “Locked up in a bad managed care plan”

• “We walled people into a system”
Disparities reflect a deep social (im)Balance

**Balance:** (1) Health disparities and wealth disparities are a reflection of extreme imbalance in American society between the “haves” and the “have-nots.” (2) Equality is balanced distribution of resources and the same treatment for everyone.

*Equality assumes that we’re all going to end up at the **same level**. Equity to me presumes a fair and **even** distribution of resources.*

*Slavery, you have people coming in on a completely **different level** and I think it’s very hard to reduce that distance when having started from an **unequal level**.*

*It would take this chief executive two hours to earn enough to fund a community kitchen for three years. **Something is wrong** there. **It’s out of balance.***
This social imbalance makes Democrats very angry

It makes me very angry and I think healthcare is a right and a civilized society should not deny healthcare to anyone and so it’s to me unjust and unfair and profoundly disturbing …this should not be the way our society works.

(How do you feel about [Wal-Mart not providing health care?] Really angry. I mean really angry…Wal-Mart either makes other employers treat their people badly or puts those employers out of business. I think it’s unfair. I think it capitalizes on people’s desperation for having any job at all. I didn’t realize how angry I was about that till you asked me.
Journey

“You cannot travel the path until you become the path itself”

Buddha
Republicans: Health is an individual and societal Journey

**Journey:** (1) People travel on individual journeys to health. Poor health arises from choosing bad paths and the inability to overcome obstacles. (2) Society as a whole is on a larger health journey through time. (3) Both the personal and the social journeys are unpredictable, thus adaptability is key.

She's **getting her on the right track** for what would more likely be a **healthy life**.

Helping [young people] paint a picture of where they want to be and then giving them a **road map** of how to achieve that … some of the differences we see we create because … we lead ourselves to places

A **long windy road**. There needs to be **constant movement, a journey**— it’s not where you’re going, it’s the fact that you’re moving… we’re a very different population than we were a hundred years ago, the person laying out that road a hundred years ago, they had no idea what the society was going to look like.

The **world is changing**, the world is always changing and we’re always going from where we were towards where we’re going, but who knows where that is.
JOURNEY

• “There are **two paths** that people can follow”
• “Giving young people a **jumpstart** in life”
• “Creating a **roadmap**”
The long timeline of the American health journey allows for optimism

Because Republicans frame America’s health journey as a very long, evolutionary process, they view the current system more optimistically than Democrats.

_The African lady with the bundle on her head symbolizes that ours is a society that is come so much farther than that._ We look at our healthcare system with great criticism because it doesn’t provide everybody with all of their needs. _We have forgotten where our health system was 20 years ago._ We don’t have the perspective of where it is compared to where other people are. … _there’s a lot of criticism of where we are and I think in the grand scheme of things, it’s a little unrealistic to think that because we are short of perfection, that the system is somehow deeply flawed._

_Look back to where the world was say 80 years ago, 90 years ago._ The average life expectancy was middle age. … _[I’m] not going to die before I’m 55, where 100 years ago I couldn’t [say that]. It’s collective improvement that goes the full spectrum._
Health is a Journey

Both having good health and coping with challenges to health are very frequently framed as a journey.

Democrats also make references to journeys such as paths to better health, but the common theme of getting stuck tends to lead to more discussions about the “container” of poverty.

Some people in the community would have to want to do it. You build incentives for people too to go down that road.

Whether it's a death or having to be out of work and having no healthcare – all of these life circumstances that can happen to people oftentimes lead them to that spot.

People that don’t have money or don’t have education or have their cultural beliefs are stuck, they get stuck in time, they get stuck in not pursuing and their destiny becomes one of life is cut short.
Inadequate resources make a successful journey harder

**Resource:** (1) Lack of personal resources such as income and knowledge limit the individual’s ability to follow optimal paths to health (and vice versa). (2) American society has a finite amount of resources – both monetary and service-related – that realistically will not provide everything to everyone.

I think we have a lot of control over how well we do in life, through the choices we make. But if you are born in a poor place, [without] a lot of resources and without a lot of education, your choices are severely limited.

You can raise healthy kids in poor communities if you have good messaging, good instruction, and a healthy environment... children depend on look to parents for direction.

...because of this world of scarce resources, there’s always rationing... balancing out how you’re going to ration things with how much redistribution you want.

The system that we have doesn’t guarantee the equality... if we had unlimited resources, it’d be great to say that everybody deserves and can have access to Cadillac healthcare, but we don’t.
Balance: Dangerous territory

Balance: (1) Republicans understand equality to mean an undesirable lowering of some individuals’ health status and raising of others to have one uniform level of health. (2) Imbalance in levels of health in any society is natural, though we should establish a minimum acceptable level. (3) Public policy must balance amount of aid provided with amount of individual responsibility expected.

...is this Commission going to be aimed at squishing everybody down to an equal level where everybody has the same access? The better approach is try to raise people who are down here up to an adequate level of healthcare.

If all you think about is the difference between the high end and the low end, then you’d be just as happy bringing the high end down as you would be bringing the low end up and that doesn’t make sense. I care about bringing the low end up and the fact that reduces disparities is great, but it’s not the disparity that worries me, it’s the low end people not doing well. So you could imagine reducing income inequality by burning a yacht, great, did that give a poor person more to eat,... No, it just makes disparities narrower...

There are bound to be differences in health outcomes, there are good reasons why some people should be healthier than others. As long as we’re willing to live in a society where people are different and given different levels of income, [we] will have to have different levels...

Government makes decisions on behalf of representing people overall and there has to be some balancing of altruistic motivation to redistribute and efficiency for the economy as a whole
### The two parties view balance and equality differently

<table>
<thead>
<tr>
<th>Democrats</th>
<th>Republicans</th>
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</thead>
<tbody>
<tr>
<td>Imbalance in levels of health is unjust.</td>
<td>Imbalance in levels of health is natural.</td>
</tr>
<tr>
<td>Equality should be our goal.</td>
<td>Equality is unrealistic and unfair.</td>
</tr>
<tr>
<td>- Equal distribution of resources</td>
<td>- Tailor distribution of [limited] resources to</td>
</tr>
<tr>
<td>- Equal treatment for all</td>
<td>particular needs, not same for all</td>
</tr>
<tr>
<td>- Equal outcomes</td>
<td>- Cannot guarantee equal outcomes.</td>
</tr>
<tr>
<td>We need to “level the playing field”</td>
<td>We need to raise the bottom.</td>
</tr>
<tr>
<td>Society bears primary responsibility for inequality,</td>
<td>Both society and individual choices create disparities,</td>
</tr>
<tr>
<td>thus to fix it requires more change in society than in the individual.</td>
<td>thus social aid must be balanced against individual</td>
</tr>
<tr>
<td></td>
<td>responsibility.</td>
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</tbody>
</table>
Speaking of Health
From the think tank to the kitchen table

Drew Westen, Ph.D.
An experiment

What networks are active at Fox?
Ambivalence toward immigrants: an example of networks

Data based on focus groups conducted nationally by Westen Strategies and GQRR in 2008
Three principles of effective messaging: Lessons from health care reform

Know what networks you’re activating

- The uninsured
- “The public plan“

If you don’t feel it, don’t use it

- S-CHIP
- Universal health care, health care reform, health insurance reform
- A family doctor for every family

Tell a compelling, memorable story
Speaking in compelling ways about social determinants of health

The audience
- Decision makers (opinion elites)
- Their constituents (across the political spectrum)
- Question: Two sets of messages?

The message
- Placing health in its social context
- Disparities in health

The product
- A set of effective narratives
- A set of effective proxy statements
- Data supporting those conclusions
The process: A methodology for developing messages that work

Study the existing polls to understand the networks and design initial messages

Refine those draft messages using focus groups

- Six Focus Groups: Swing voters, DC Opinion Elites, African Americans, Hispanics

Test the messages online using large national samples

Refine and test again

Test unconscious responses online (oversampling elites)
What We Learned

About Health
84% Americans tend to view their health as something largely under their control and for which they have to take personal responsibility.
But after seeing effective messages, the shift in the percentage of Americans choosing social factors as influences on health increased 31%.
What We Learned

Talking about Social Determinants: Keys to effective messaging
1. Traditional phrasing of “social determinants” language consistently tested poorly in every phase of research.

2. Priming audiences about the connection with messages they already believe makes the concept more credible.

3. When messages are presented in colloquial, values-driven, emotionally compelling language, they are more effective.

4. Use one strong and compelling fact—a surprising point that arouses interest, attention and emotion—for maximum impact.
5. Identify the problem, but offer potential solutions.

6. Incorporate the role of personal behavior.

7. Mix traditionally conservative values with traditionally progressive values.

8. Focus broadly on how social determinants affect all Americans (versus a specific ethnic group or socioeconomic class).
What We Learned

Our Messages
Messaging Highlight Tool

America leads the world in medical research and medical care, and for all we spend on health care, we should be the healthiest people on earth. Yet on some of the most important indicators, like how long we live, we’re not even in the top 25, behind countries like Bosnia and Jordan. It’s time for America to lead again on health, and that means taking three steps. The first is to ensure that everyone can afford to see a doctor when they’re sick. The second is to build preventive care like screening for cancer and heart disease into every health care plan and make it available to people who otherwise won’t or can’t go in for it, in malls and other public places, where it’s easy to stop for a test. The third is to stop thinking of health as something we get in hospitals and doctors’ offices but instead as something that starts in our families, in our schools and workplaces, in our playgrounds and parks, and in the air we breathe and the water we drink. The more you see the problem of health this way, the more opportunities you have to improve it. Scientists at the Centers for Disease Control and at universities around the country have shown that the conditions in which people live and work have more than five times the effect on our health than all the errors doctors and hospitals make combined. It’s time we expand the way we think about health to include how to keep it, not just how to get it back.
Leads the World…

America leads the world in medical research and medical care, and for all we spend on health care, we should be the healthiest people on earth. Yet on some of the most important indicators, like how long we live, we're not even in the top 25, behind countries like Bosnia and Jordan. It's time for America to lead again on health, and that means taking three steps. The first is to ensure that everyone can afford to see a doctor when they're sick. The second is to build preventive care like screening for cancer and heart disease into every health care plan and make it available to people who otherwise won't or can't go in for it, in malls and other public places, where it's easy to stop for a test. The third is to stop thinking of health as something we get at the doctors' offices but instead as something that starts in our families, in our schools and workplaces, in our playgrounds and parks, and in the air we breathe and the water we drink. The more you see the problem of health this way, the more opportunities you have to improve it. Scientists have found that the conditions in which we live and work have an enormous impact on our health, long before we ever see a doctor. It's time we expand the way we think about health to include how to keep it, not just how to get it back.

Total: 78.2  Average: 77.4  Elite: 79.0
Start Where Health Starts…

It's time we made it possible for all Americans to afford to see a doctor, but it's also time we made it less likely that they need to. Where people live, work, learn, and play has an enormous impact whether they stay well in the first place. Health starts in strong, loving families and in neighborhoods with sidewalks safe for walking and grocery stores with fresh vegetables. Health starts in jobs we can get to without hours of commuting and in work places free of unnecessary hazards. Health starts in schools that educate our children for the jobs of the 21st century so they can compete in the world economy, that feed them healthy meals rather than junk foods, and that send them home safe at the end of the day. And health starts in having the time and financial resources to play at the end of a hard day's work, because unrelieved stress takes its toll on our hearts and immune systems. As we work on fixing health care in America, we need to start where health starts, not just where it ends.

Total: 74.1  Average: 75.5  Elite: 72.7
Social By Nature…

We are social by nature, and when the ties that bind begin to unravel, so does our health. Health begins at home in our families, with a loving relationship between parents and their children, where kids can expect to be safe, nurtured and protected. Health begins with healthy communities, with safe streets, freedom from violence, and parks where kids can play. Health begins with a good education, where children learn not only how to read, write, and prepare for a fulfilling, prosperous life, but how to treat each other with dignity and respect. And health begins with safe jobs and a fair wage, where people derive a sense personal satisfaction from their work and connection to their co-workers. No institution alone can restore a healthy America that nurtures families and communities. That will require leadership, and a partnership of business, government, and civic and religious institutions. We can't eradicate illness, but we can foster health. And health begins with healthy relationships, healthy communities, and healthy jobs, which protect us from the stress of everyday life. That's one prescription that doesn't require a co-pay.

Total: 73.9  Average: 73.6  Elite: 74.2
Lessons Learned: A Message that Ended up Strong

People have a personal responsibility to take care of themselves and their health. But it isn’t right when things outside our control—like where we’re born or how much money we make—affect our health. In the entire city of Detroit—an area of nearly 150 square miles—there are dozens of “convenience stores” but only five grocery stores. An apple a day may keep the doctor away, but you have to be able to buy an apple. And it isn’t easy to get exercise if you have to work three jobs just to get by, or if you can’t easily get affordable day care for your kids. We’re not just talking about the rich versus the poor. On average, middle class Americans live shorter lives than those who are wealthy, and that’s not right. Money can’t buy happiness, and it shouldn’t buy health. We have to take responsibility for our lives and decisions. But all Americans should have an equal opportunity to make the decisions that allow them to live a long, healthy life, regardless of their level of income, education, or ethnicity.

Total: 71.4; Average Voter: 73.9; Elite Voter: 69.0
Unconscious Responses to Messages

Internet study of 1726 Voters
Unconscious Responses to Messages
Proxy Statements
## Conscious Ratings of Descriptive Phrases

<table>
<thead>
<tr>
<th>Total</th>
<th>Average Voter</th>
<th>Elite Voter</th>
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<tbody>
<tr>
<td><strong>Your opportunity for health starts long before you need medical care.</strong></td>
<td>82.0</td>
<td>81.5</td>
</tr>
<tr>
<td>81.7</td>
<td></td>
<td></td>
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<tr>
<td><strong>Health starts long before illness, in our homes, schools, and jobs.</strong></td>
<td>81.2</td>
<td>81.8</td>
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<tr>
<td>81.5</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>All Americans should have the opportunity to make the choices that allow them to live a long, healthy life, regardless of their income, education, or ethnic background.</strong></td>
<td>81.5</td>
<td>80.9</td>
</tr>
<tr>
<td>81.2</td>
<td></td>
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<tr>
<td><strong>Your neighborhood or job shouldn’t be hazardous to your health.</strong></td>
<td>76.7</td>
<td>76.0</td>
</tr>
<tr>
<td>76.3</td>
<td></td>
<td></td>
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<tr>
<td><strong>Health begins where we live, work, learn, and play.</strong></td>
<td>76.0</td>
<td>74.4</td>
</tr>
<tr>
<td>75.1</td>
<td></td>
<td></td>
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<tr>
<td><strong>The opportunity for health begins in our families, neighborhoods, schools, and jobs.</strong></td>
<td>69.5</td>
<td>70.5</td>
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<tr>
<td>70.0</td>
<td></td>
<td></td>
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<tr>
<td><strong>If we want to improve our health we need to address the social determinants of health.</strong></td>
<td>62.6</td>
<td>63.3</td>
</tr>
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<td>63.0</td>
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## Implicit Emotional Responses to Descriptive Phrases (scale of 0-5)

<table>
<thead>
<tr>
<th>Total</th>
<th>Average Voter</th>
<th>Elite Voter</th>
</tr>
</thead>
<tbody>
<tr>
<td>Your opportunity for health starts long before you need medical care.</td>
<td>1.8</td>
<td>2.1</td>
</tr>
<tr>
<td>Health starts long before illness, in our homes, schools, and jobs.</td>
<td>4.4</td>
<td>4.2</td>
</tr>
<tr>
<td>All Americans should have the opportunity to make the choices that allow them to live a long, healthy life, regardless ....</td>
<td>3.4</td>
<td>4.5</td>
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<tr>
<td>Your neighborhood or job shouldn't be hazardous to your health.</td>
<td>4.7</td>
<td>4.1</td>
</tr>
<tr>
<td>Health begins where we live, work, learn, and play.</td>
<td>1.8</td>
<td>1.7</td>
</tr>
<tr>
<td>The opportunity for health begins in our families, neighborhoods, schools, and jobs.</td>
<td>0.3</td>
<td>0.1</td>
</tr>
<tr>
<td>If we want to improve our health we need to address the social determinants of health.</td>
<td>0.9</td>
<td>1.5</td>
</tr>
</tbody>
</table>
Conclusions
We can begin to incorporate new messages into our work

3 Macro messages capture core concepts in a compelling way:

- *Leads the World*…
- *Start Where Health Starts*…
- *Social by Nature*…
We can begin to incorporate new messages into our work

3 Proxy statements work well at multiple levels:

• Health starts long before illness, in our homes, schools, and jobs.

• Your neighborhood or job shouldn’t be hazardous to your health.

• All Americans should have the opportunity to make the choices that allow them to live a long, healthy life, regardless of their income, education, or ethnic background.
The broader take-home message

Americans do not “naturally” think about health in terms of social factors

But in this case, research can help nurture trump nature

Both decision elites and average Americans respond to messages that are evocative, values-driven, and solution-focused

We should apply the same methodological rigor to disseminating our knowledge and policy prescriptions as to developing them

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Applying the Insights
Choosing our words wisely

Terms often used to describe health disparities can get in the way of people accepting the concept of social determinants of health.

People with conservative views tend to have negative reactions to the idea of creating equal levels of health.

People with liberal perspectives describe health disparities as an injustice, but conservative audiences never use this phrase.

- Equal, equality, equalizing
- Leveling the playing field
- Creating balance
- Unjust, injustice
- Outrage
- Immoral
- Unconscionable
Vulnerable Populations

Too many Americans don’t have the same opportunities to be as healthy as others

Americans who face significant barriers to better health

People whose circumstances have made them vulnerable to poor health

All Americans should have the opportunity to make the choices that allow them to live a long, healthy life, regardless of their income, education or ethnic background

Our opportunities to better health begin where we live, learn, work and play

People’s health is significantly affected by their homes, jobs and schools
Health Disparities

Raising the bar for everyone
Setting a fair and adequate baseline care for all
Lifting everyone up
Giving everyone a fair chance to live a healthy life
Unfair
Not right
Disappointing (e.g., Americans should be able to do better, not let people fall through the cracks)

It’s time we made it possible for all Americans to afford to see a doctor, but it’s also time we made it less likely that they need to
Finding One Fact to Fight Fiction

The use of data and information to support—not make—your case
Nine Facts About Facts

1. Less is always more
2. Use complementary—not competing—data
3. Context is king
4. Specific examples matter
5. Don’t let numbers be forgettable
6. Break down big numbers
7. The value in a number is in its context
8. Imagine why someone might dismiss the data
9. Overall messaging rules still apply

In a Little Rock, Arkansas middle school last month, over 108 suspensions resulted from fights during recess—a time that should be when kids can play, recharge their batteries and return to class ready to learn. After a new program called Playworks was introduced into the school, suspensions dropped to zero. The program allows kids to spend more time playing instead of fighting, and teachers to spend more time teaching instead of dealing with conflicts that carry over to the classroom. In fact, the program has been shown to restore a whole week’s worth of class time that would have previously been spent dealing with fights.

America leads the world in medical research and medical care, and for all we spend on health care, we should be at the top of the list of most important indicators, like how long we live, we’re not even in the top 25, behind countries like Bosnia and Jordan.

“Imagine a very wealthy couple who had a lot of cash in reserve, I mean a lot. Well, one day 30 years ago, they decided to start a small business. And it was an awful business plan. So every day, for the last 30 years, their business lost a million dollars every single day. To show you how much a trillion dollars is, they would have to lose a million dollars a day for another 2,700 years to lose a trillion dollars.”

- Richard Saul Wurman, Founder TED
Vulnerable Populations Messaging
Moving Forward
Questions & Answers
Thank You

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