



Georgia
Health
Initiative

Welcome!

Findings and Recommendations from Health Equity Messaging Research

December 6, 2024



Our Mission

To inspire and promote collective action that advances health equity for all Georgians

Our Vision

A Georgia in which all people have the opportunity to attain their fullest potential for health

Our Values

Courageous Leadership • Trust • Equity • Partnership

Background and Context on this Research Initiative

Underlying Goals in Commissioning this Research

- Understand attitudes and perceptions around the terms and concepts of “equity” and “health equity”
- Understand how different audiences perceive and react to the concept of health equity
- Understand effective ways of framing and messaging the concept of health equity in a way that will positively influence knowledge, understanding, and effectiveness of health equity communications and messaging



Background and Context on this Research Initiative

Underlying Goals in Commissioning this Research (cont'd)

- Develop evidence-informed recommendations to support messaging, strategies, and knowledge among priority audiences
- Share recommendations with wider audience of Georgia-based organizations to inform their own communications efforts

Partners in this Work:



Introducing Speakers from Our Project Team:



Joann Yoon Kang

*Vice President of Strategic
Communications*

Georgia Health Initiative



Celinda Lake

President

Lake Research Partners



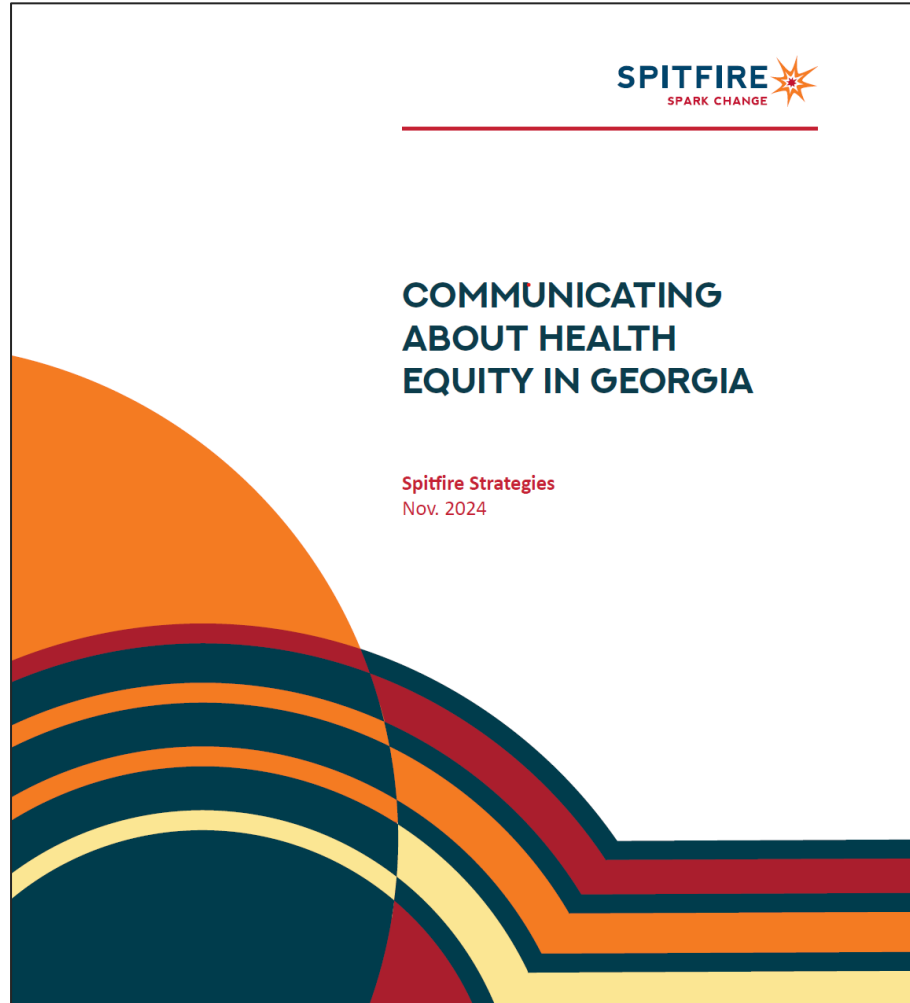
Ellie Klerlein

*Managing Senior Vice
President*

Spitfire Strategies



How to Use the Message Guide



- Methodology
- Research Findings & Recommendations
- Messaging Recommendations





Research Overview



The Messaging Research Process



May-June 2024:

Six virtual focus groups across the state and four in-person focus groups in Metropolitan Atlanta and Columbus, Georgia



July 17-23, 2024:

A phone survey with adults across Georgia

600 adults statewide with additional samples of 100 Latino/a adults, 100 Asian American and Pacific Islander (AAPI) adults, 100 rural adults, and 100 adults under 30.

Margin of error = +/-3.1%



September 2024:

Four virtual focus groups to specific audiences in Georgia

Focus Group Methodology

- **Pre-Survey Groups:** Lake Research Partners conducted six virtual groups and four groups in person in Metro Atlanta and Columbus, Georgia, in late May and early June 2024.
- **Post-Survey Groups:** Lake Research Partners conducted four virtual groups statewide September 5 and 9, 2024.
- Individuals participated in a group discussion that lasted about two hours. Participation was voluntary, anonymous, and confidential. Participants were compensated for their time.
- In addition to meeting the demographic screening criteria for their group, participants were recruited to reflect a mix of educational attainment, household income, employment status, party identification, and marital/family status.

Pre-Survey Groups		
Location	Date	Composition
Virtual, Statewide	May 30	Latinas 30-60
		White suburban men, 30-60
	June 3	Women under 30, mixed race
		Black rural men, 30-60
	June 5	Men under 30, mixed race
		Latinos 30-60
Atlanta, GA	June 10	White suburban women, 30-60
		Black suburban women, 30-60
Columbus, GA	June 11	Black rural women, 30-60
		White rural men, 30-60
Post-Survey Groups		
Virtual, Statewide	September 5	Latino/as - Curious or Choir
		AAPI men and women - Curious or Choir
	September 9	White men and women – Curious
		Black men and women - Choir

Audience Segmentation

Audience segmentation is necessary for understanding:

- How groups of people with different backgrounds and experiences think about a concept such as health equity
- Which mindsets and frames facilitate or hinder their understanding of the term
- Their willingness to support solutions to health equity

With these learnings, we can then craft messaging that will resonate best with each audience.

Defining Our Audiences

- **Which statement comes closer to your views, even if neither is exactly right?**
 - Government should do more to solve problems and help meet the needs of people
 - Government does too many things better left to businesses and individuals
 - (don't know)
- **Which statement comes closer to your views, even if neither is exactly right?**
 - What's great about the U.S. is that everyone has the opportunity to succeed if they work hard
 - Right now, for many people in the U.S., just working hard is not enough to get ahead
 - (don't know)
- [split sampled] **Do you agree or disagree that everyone in Georgia has the same/equal opportunities to reach their fullest potential for health?**
 - Strongly agree
 - Somewhat agree
 - Somewhat disagree
 - Strongly disagree
 - (don't know)

Defining the Choir, the Curious, and the Conflicted

Choir – 20% of Georgians.

1. See a role for government
2. Believe working hard is not enough to get ahead
3. Disagree everyone has the same/equal opportunities to reach their full potential for health
 - The Choir leans female, Black, urban, and Democratic and is more likely than the other two audience segments to be under 30 years old
 - **People defined as the “Choir” are attuned to the problem of health equity disparities, ready to act, and intensely engaged on impacts and issues.**

Curious – 52% of Georgians.

1. Have mixed views on the role for government
2. Have differing views on whether hard work is enough to get ahead
3. Split on whether everyone has the same/equal opportunities to reach their full potential for health
 - The Curious segment resembles Georgians overall
 - **Curious people believe health equity is possible to achieve across the state, are willing to act, see the impacts of income and access, and believe it is intensely important to address issues.**

Conflicted – 28% of Georgians. Say government should get out of their way

1. Believe everyone has the opportunity to succeed if they work hard
2. Agree everyone has the same/equal opportunities to reach their full potential for health
 - The Conflicted is majority male, over the age of 30, white, and Republican. They also tend to live in suburban areas.
 - **People defined as “Conflicted” believe health equity is possible to achieve across the state, but they are not willing to act. They are less likely to acknowledge impacts and think it is less intensely important to address issues.**



Research Findings & Recommendations

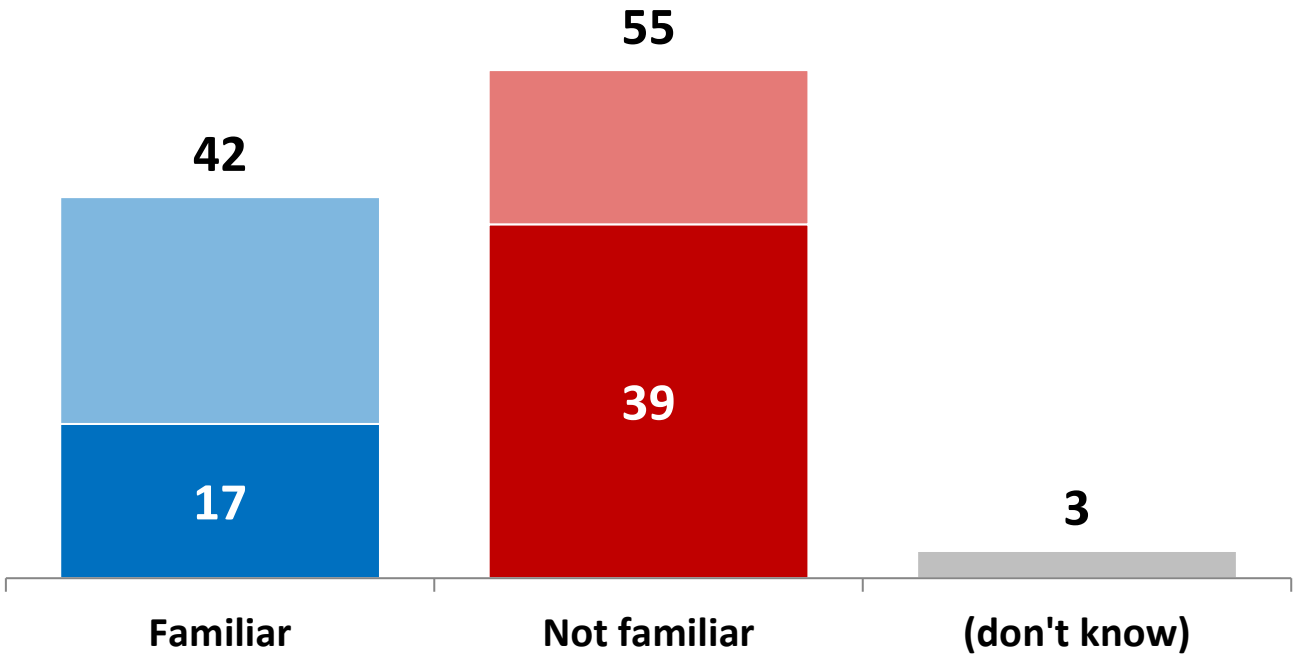


Summary

- Most Georgians are not familiar with the term “health equity.” While they have positive associations before and after hearing a definition, they would prefer organizations specify what they mean when they are describing the work they do as it relates to health equity.
- People are very supportive of striving for health equity in the state, strongly agreeing especially on statements on **children’s education, neighborhood safety, and prescription and medical care affordability**. They find it very important to address being able to **afford the cost of living, access maternal health care, and access healthy food**.
- However, **intensity** is our biggest challenge, especially regarding the possibility of achieving health equity. **People are split on whether they think it is possible to have health equity across Georgia**.
- Those who are less likely to think it is possible to have health equity across Georgia tend to be those who see health inequities across communities and acknowledge systemic barriers.
- People see strong connections between **specific identities/resources and health equity**. Some of the strongest factors are income and access to health care.
- The strongest messaging on health equity acknowledges **barriers, invokes a systemic frame, feels inclusive, and includes measurable calls to action**. Messaging needs to keep the conversation on a systemic level so people don’t fall into individual responsibility framing.

Most Georgians are not familiar with the term “health equity,” including four in ten who are not familiar at all.

How familiar are you with the term “health equity” – very familiar, somewhat familiar, a little familiar, or not familiar at all?



■ Somewhat familiar ■ A little familiar
■ Very familiar ■ Not familiar at all

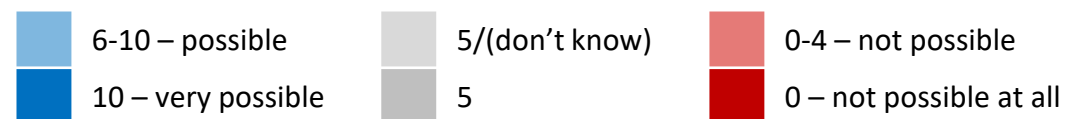
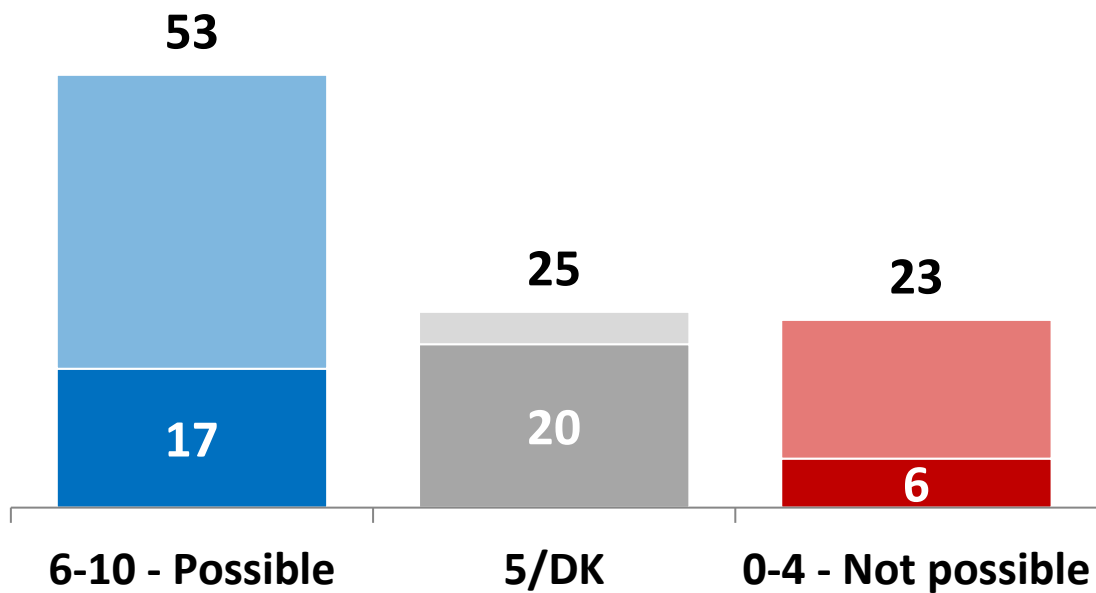
	Very familiar	Familiar	Not familiar
Men	18	44	52
Women	16	39	59
Under 30	11	35	60
30 and over	18	44	54
White	16	40	59
Black	19	46	51
Latino/a	13	39	55
AAPI	7	43	39
Urban	13	41	57
Suburban	22	46	49
Small town/rural	6	39	59
Fulton/Dekalb	15	49	50
North Suburban	24	46	51
South Suburban	7	29	67
Other North GA	16	38	60
Southeast	20	49	46
Southwest	12	34	62
Democrat	18	49	46
Independent/DK	16	35	63
Republican	16	37	61
Choir	20	45	52
Curious	14	40	56
Conflicted	18	42	58

Because most Georgians are not familiar with the term “health equity,” we generally recommend not using the phrase. Instead, define what you mean by the term, for example, “everyone having the opportunity to maximize their best health.” Or if you do decide to use it, set the proper context beforehand.

- Describe the change your organization wants to see and how you are doing it instead of trying to introduce the term.
- Saying what you mean in plain language is the most effective way to advance support for health equity.
- Some examples of simple language we tested in the survey are “people having the same opportunities to maximize their health and well-being” or “people reaching their fullest potential for health.”
- This isn’t to say you should strike “health equity” from your vocabulary.
- The recommendation to communicate without using the term “health equity” does not mean that we are staying quiet or overly shying away from terms like “health equity.”

Once provided a definition of health equity, half of Georgians rate health equity as possible (6-10) to achieve across the state, but intensity is low. A quarter of people are neutral or unsure about the possibility of achieving health equity. It is not that Georgians disagree with the concept of health equity but rather that they are skeptical that improving health equity in Georgia is possible.

If I told you that health equity means people having the same opportunities to maximize their health and well-being, on a scale from zero to ten, where zero means it is not possible at all and ten means it is very possible, how possible do you think it is to achieve health equity across the state of Georgia? You can choose any number in between.



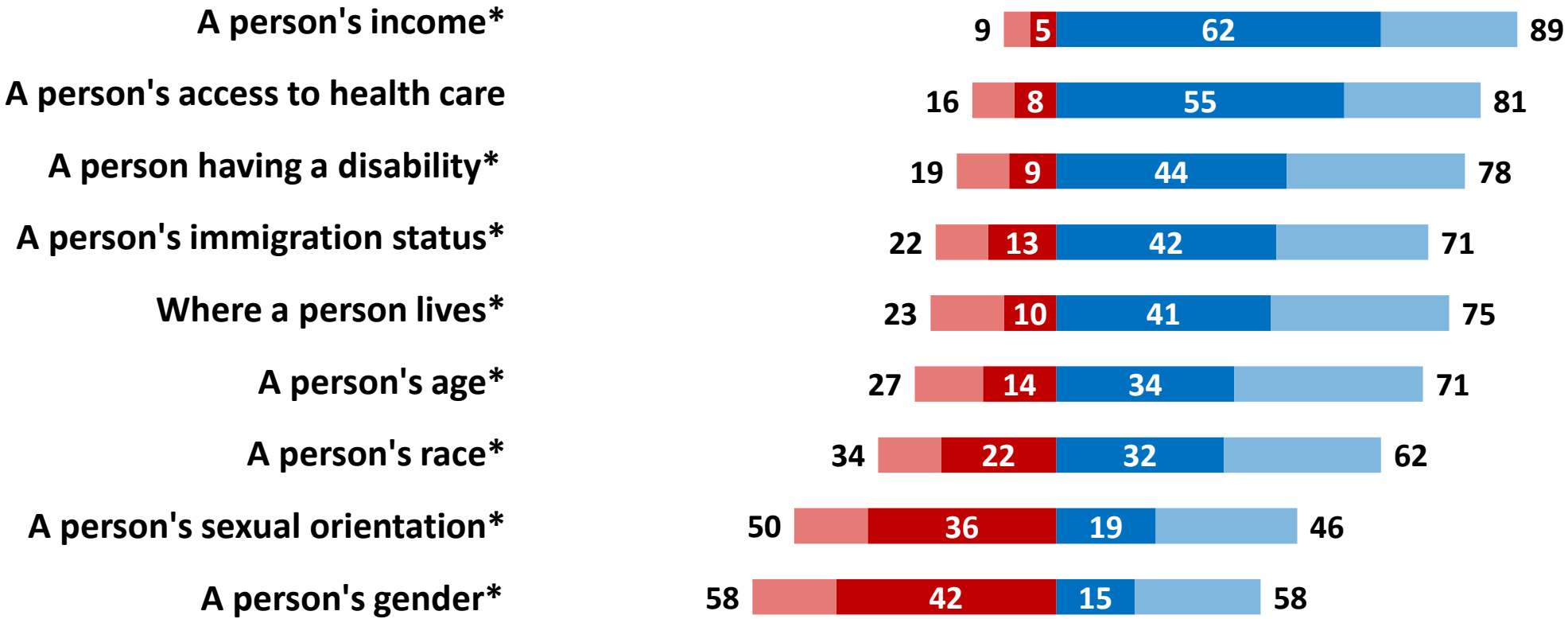
	10 - very possible	6-10 - possible	0-4 - not possible
Men	18	54	19
Women	17	52	26
Under 30	20	65	14
30 and over	17	50	25
White	19	53	22
Black	16	53	25
Latino/a	20	52	19
AAPI	6	51	11
Urban	18	55	23
Suburban	17	58	23
Small town/rural	17	45	22
Fulton/Dekalb	15	54	27
North Suburban	15	52	19
South Suburban	21	48	35
Other North GA	18	54	19
Southeast	24	54	27
Southwest	15	50	19
Democrat	16	49	26
Independent/DK	14	51	30
Republican	21	57	14
Choir	11	34	45
Curious	17	54	18
Conflicted	27	72	8

To address this skepticism that health equity is possible among our audiences, when communicating about health equity, demonstrate that change is possible.

- Show the possibilities and specifics for what an organization is doing.
- Organizations should give specific information about the work they're doing and how it impacts varying layers of health, such as improving neighborhood safety, children's education, and the affordability of prescriptions and medical care.
- Help them feel hopeful for change; otherwise, they can easily get discouraged.
- Show what is possible by sharing stories that you already know about tangible changes and wins your organization or others have achieved.

Georgians see multiple factors impacting people in Georgia reaching their fullest potential for health. The most impactful include a person’s income and access to health care. People in Georgia don’t necessarily see a connection to a person’s sexual orientation or gender and health equity.

For each of the following, please tell me how much of an impact each has on people in Georgia reaching their fullest potential for health – a major impact, somewhat of an impact, a little impact, or no impact at all.



*split sampled

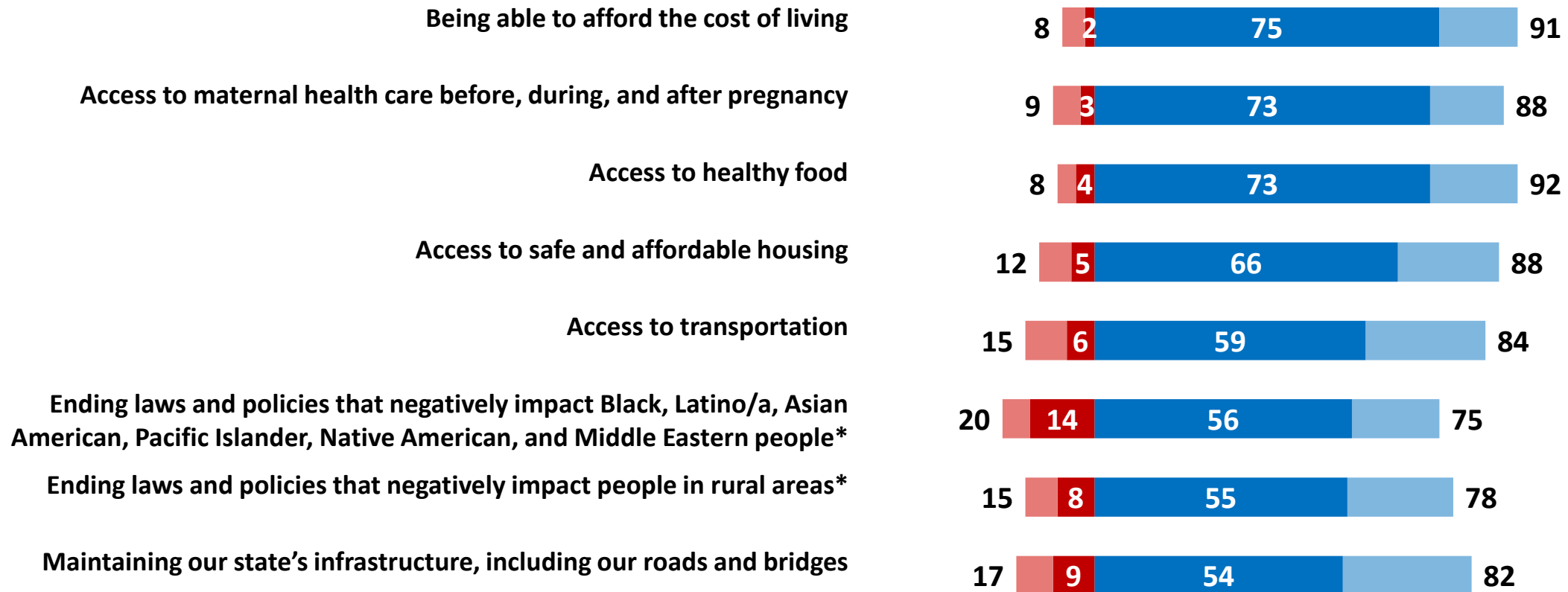


When communicating about the obstacles to health equity, acknowledge known, familiar and concrete barriers that people face in achieving better health; invoke a systemic frame; and ensure your message feels inclusive and includes measurable calls to action.

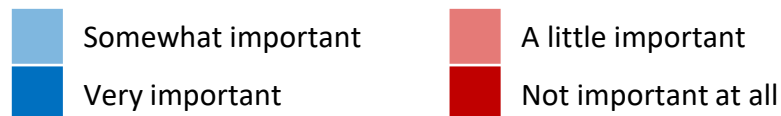
- Keep the conversation on a systemic level so that people don't fall into individual responsibility framing.
- Personal responsibility is a powerful sentiment that can take away from the collective action needed for people to achieve health equity across the state.
- Avoid using messaging that could get people in the personal responsibility mindset and talk more about the systemic barriers at play that prevent everyone or large groups of Georgians from reaching their fullest potential for health.

Georgians believe it is important to address every issue area tested. Being able to afford the cost of living, access to maternal health care, and access to healthy food are considered the most important when it comes to improving health equity in Georgia. Negative laws and policies in rural areas and infrastructure are at the bottom of the list, but still seen as very important to a majority of Georgians.

How important is it to address the following issues to improve health equity in Georgia – very important, somewhat important, a little important, or not important at all?



*split sampled

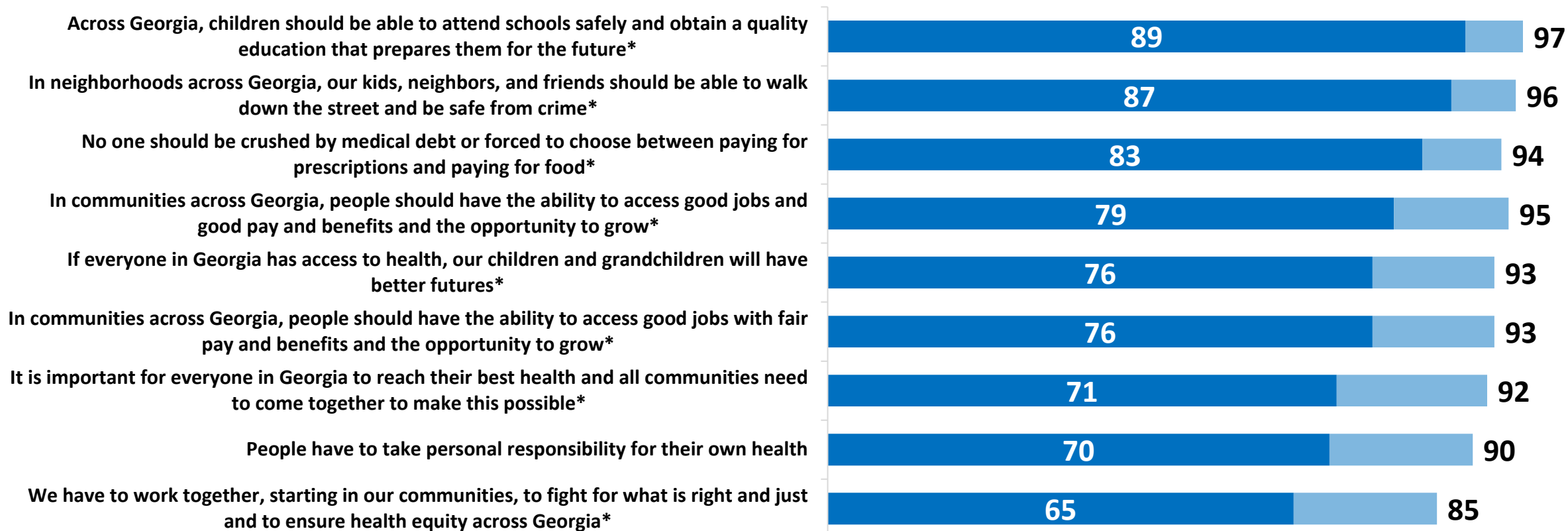




Potential pathways to introducing the concept of health equity to those in Georgia who are unfamiliar with it or those who associate the concept narrowly with access to health care include talking about access to healthy food and maternal health care and the cost of living.

- Talking about access to healthy food and maternal health and the cost of living because it provides a way to talk about the broader, systemic factors at play.
- Use maternal health in your messaging to help continue establishing common ground with your audience, along with being able to afford the cost of living and access to healthy food.

All the values statements have high intensity in agreement, with almost unanimous agreement for some. The top statements focus on education, neighborhood safety, and medical debt/prescription prices. Lower are individualistic sentiments and more generic statements, though these are still met with solid strong agreement.

I'm going to read some statements that people have made. For each, please tell me if you agree or disagree.



 Somewhat agree
 Strongly agree

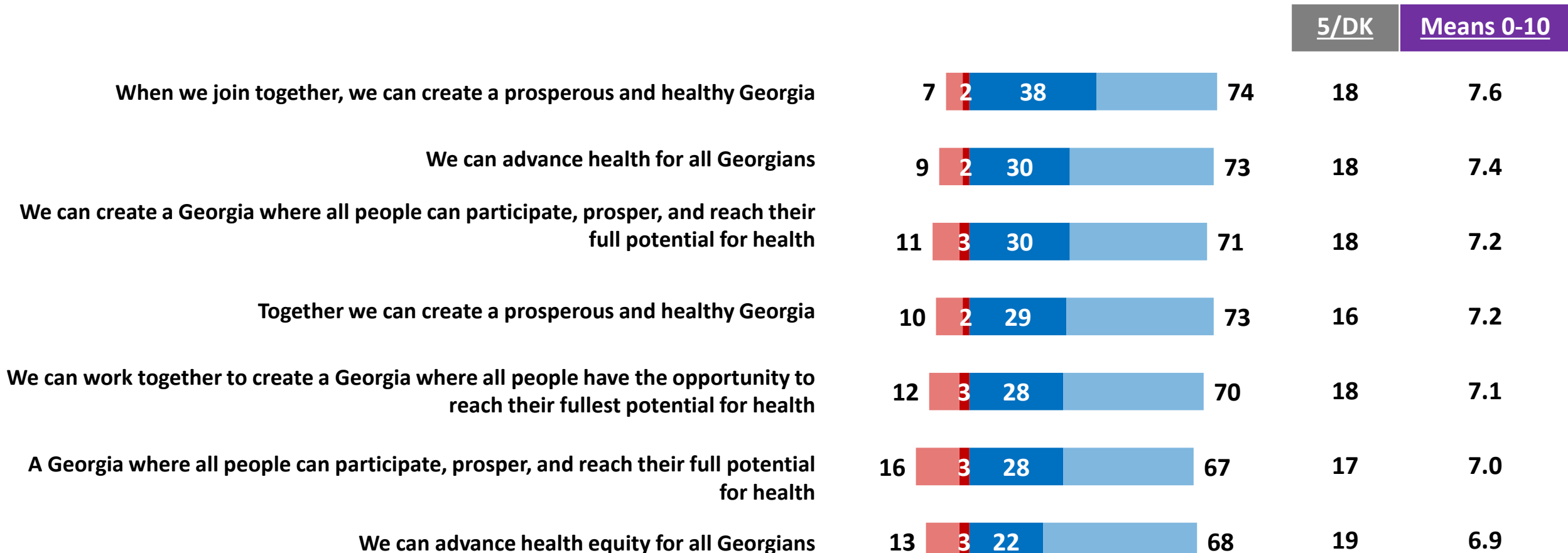
*split sampled

Effective messaging taps into the values that an audience holds.

- Education, neighborhood safety and affordability all operate as core values to get your audiences nodding in agreement to your messaging about examples of what Georgia could look like upon achieving health equity.
- Georgians agree that children deserve a safe, quality education; that people should feel safe in their communities; and that crushing costs in today's health care system are unacceptable.

The top tier of vision statements that people view as the most possible to achieve in Georgia revolve around working together and creating a prosperous Georgia. It is strongest to combine “joining together” with “prosperity.”

Now I’m going to read some phrases. For each, using a scale that goes from zero to 10 where 0 is not possible at all and 10 means it is very possible – how possible is it to achieve what the following phrases describe in Georgia? You can use any number in between.



*all statements split sampled

In the bottom tier among all Georgians are vision statements that are more absolute, including words and phrases like “everyone” and “no exceptions.”

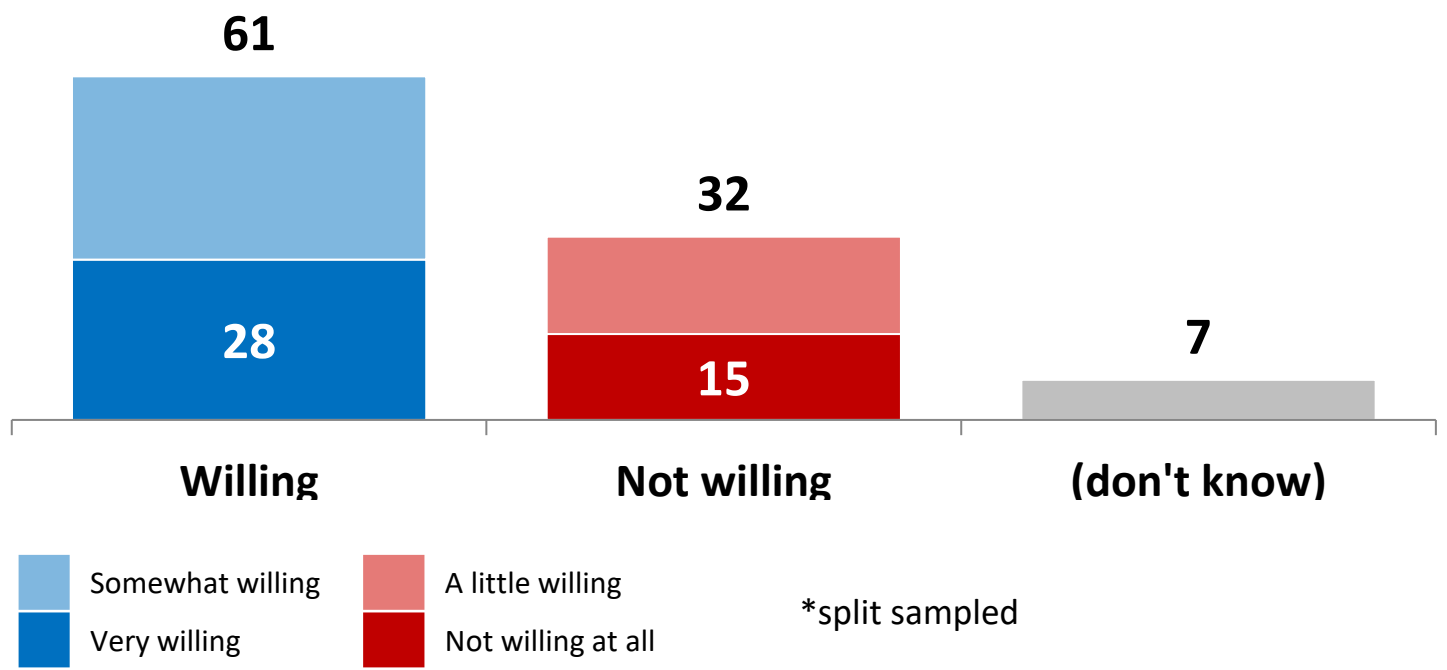
Even though they demonstrate potential for health equity through phrases like “can achieve,” which tested well, absolute language like “no exceptions” decreases the believability. Examples of this absolute language include:

- “All Georgians, no exceptions, can achieve health equity and get what they need.”
- “Everyone shares the same opportunities to maximize their health and well-being.”

These statements can also make it seem like these changes to improve health equity have already happened instead of something we are working to achieve together. While the intensity with which people feel these statements are possible is not strong, at least half of people still see these statements as possible.

Most people in Georgia are willing to come together to take action to remove barriers to health equity across Georgia. A majority of the Choir say they are very willing to come together to take action to remove barriers to health equity. Curious individuals are willing to come together with other people in Georgia, although unlike the Choir, they are not as eager to engage. Conflicted people are far less willing to come together with other people in Georgia and take action to remove barriers to health equity.

How willing are you to come together to take action to remove barriers to health equity across Georgia – very willing, somewhat willing, a little willing, or not willing at all?*



	Very willing	Willing	Not willing
Men	23	57	38
Women	33	64	27
Under 30	25	52	39
30 and over	30	63	30
White	19	55	36
Black	45	74	22
Latino/a	30	47	39
AAPI	10	49	26
Urban	41	69	29
Suburban	22	61	30
Small town/rural	19	51	37
Fulton/Dekalb	45	60	36
North Suburban	27	62	31
South Suburban	28	49	42
Other North GA	22	58	30
Southeast	27	63	30
Southwest	24	65	30
Democrat	40	73	19
Independent/DK	39	64	30
Republican	10	47	44
Choir	51	80	14
Curious	24	56	37
Conflicted	13	49	42

Messages should focus on increasing intensity among the Choir and the Curious to take action.

- One of the best ways to increase intensity and motivate audiences to act is to repeat messages that tap their core values. For instance, organizations in Georgia may decide to come together through an audience education campaign to share knowledge about health equity and gradually increase their willingness to act.

Think strategically about who could serve as trusted voices and messengers.

- Consider connections or relationships with community leaders, nonprofits, medical associations, nurses and small-business owners whom you could tap to communicate with those you are trying to engage and activate.
- Hearing from leaders they trust can help audiences overcome their barriers to action and build trust with your organization.



Message Recommendations



My Georgia

“The Georgia I know and love is resilient and caring. In communities across Georgia, we try to look out for our neighbors. But when jobs don’t offer fair pay and benefits, roads aren’t safe, people can’t access health care, and healthy grocery stores are few and far between, some people in our state still don’t have what they need for themselves and their families to thrive. Everyone across Georgia should have the ability to access good jobs, stable housing and health care, regardless of their age, immigration status, ZIP code or having a disability. Leaders in our state should work toward solutions that help people have every chance at health, like expanding access to health coverage and ensuring stable housing so that everyone can flourish.”

68% Rated Convincing, 40% Rated VERY Convincing

Whom It Resonated With: Choir, Curious, Black Georgians, Democrats and Fulton/Dekalb residents

Opportunity

“People across Georgia want to live in a place where everyone has a fair and just opportunity to reach their best health and well-being, no matter their race, ethnicity, class or ZIP code. That can happen when everyone has the option to put healthy food on the table for their families and when our roads and infrastructure are safe. It can happen when everyone can get access to the medical care they need, regardless of how far they live from a hospital. We can work together to create a better Georgia where health equity is the norm. But this is not everyone’s reality today. By joining together, we can unite to create a better future for everyone’s children and grandchildren.”

74% Rated Convincing, 35% Rated VERY Convincing


Whom It Resonated With: Choir, AAPI, urban and suburban residents, independents, Fulton/Dekalb residents, south suburban residents, and southwest residents

Dreams


“We all have dreams for ourselves and our families. But we don’t all have the same opportunities to make those dreams come true. In Georgia, there are laws and social practices happening today that place more value on some lives than others, based on race and class. And that leads to fewer opportunities in access to healthy food, health care, and city infrastructure and roads. Where we live in the state shouldn’t dictate our health. Because people created the laws and systems that shape these opportunities, we can reinvent them to be more equitable. Bettering health equity means that leaders in our state are working together so that everyone’s children and grandchildren can have the best possible future and everyone can reach their best health and well-being.”

64% Rated Convincing, 33% Rated VERY Convincing

Whom It Resonated With: Latino/as and Georgians under age 30, Democrats, south suburban and other north Georgians



Messaging Objectives & Considerations



Messaging Objectives for the Choir, Curious and Conflicted

Choir

- Show them that achieving health equity is indeed possible and to overcome their skepticism.

Curious

- Help them understand the concept of health equity and the system barriers at play.

Conflicted

- Educate them around the importance of health equity. They will be difficult to convince that achieving health equity is necessary, and therefore we do not recommend that you focus your energy and resources here.

Context of how message applies	Instead of saying...	Try this...	Why it works...
When describing the concept of barriers that prevent health equity...	Take action to ensure health equity.	Take action to remove barriers to achieving better health and well-being.	This acknowledges structural barriers that were put in place and can be removed when we take action together.
	Barriers to health or systems	Systemic barriers	<p>“Systemic barriers” includes what we mean by barriers and also the fact that the barriers are not the individual’s responsibility. We want to avoid that frame of personal responsibility that could influence some folks in the Curious segment.</p> <p>Systems alone brings audiences back to only thinking about hospital systems or health insurance systems, and they don’t consider the broader issues around health equity.</p>

Things to Consider:

- The recommendations included in the Message Guide are just that—recommendations.
- Always remember your audience.
- When engaging in conversations around health equity, some potential pathways to introduce the concept include access to healthy food and maternal health care and the cost of living.





Georgia
Health
Initiative

Questions?

Thank you and Stay in Touch:



Joann Yoon Kang

Joann@georgiahealthinitiative.org



Celinda Lake

clake@lakeresearch.com



Ellie Klerlein

ellie@spitfirestrategies.com

