

## Adolescent Health Research on the Road: A Day in D.C.

### [Adolescent Health & Well-Being](#)

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As public health, health services and health policy researchers, we identify key issues that affect the health and well-being of the populations we serve and develop rigorous research projects to better understand the root of the issues these populations face. Unfortunately, too often in our line of work, we see high-quality research fail to meaningfully influence the lives of the people it's about. That's why we subscribe to PolicyLab's model of collaborating with community members, families, practitioners, youth-serving organizations and policymakers at all levels to disseminate rigorous, scientific research into useable and practical tools. It's not just enough to get our research published; we recognize that in order to create real impact, we must translate important data and findings into actionable solutions so that our leaders have the best evidence available when making decisions that affect the health and well-being of children, adolescents and their families.

This translation can take many forms—research can inform the decisions made in how children and adolescents access services at hospitals, clinics or schools. Or, policymakers can use research to determine which programs are worth investing in and how to modify existing legislation to make the most difference for children and families. But none of that happens if there aren't experts on the frontlines talking to key decision makers about important evidence and educating the public about how they can do the same.

For this reason, we encourage—and in fact, urge—researchers to engage with their policymakers and community leaders.

We recently had an opportunity to do just that at an advocacy training through this year's [Society for Adolescent Health and Medicine](#) (SAHM) Annual Meeting. Given that the conference was held in Washington D.C., this training was a great opportunity for experts in adolescent health and research to start conversations with policymakers about key adolescent health and well-being priorities. The training started with a half-day session on federal advocacy led by experienced adolescent providers and staff from the American Academy of Pediatrics and concluded the next day with meetings at the offices of our congressional representatives on Capitol Hill. The purpose of our meetings was to use our knowledge and expertise to advocate for key legislative issues—[Title X Family Planning Program](#) funding and [gun violence prevention research funding and policies](#).

We, along with another Pennsylvania researcher, visited a total of four members of Congress from throughout the Commonwealth, including with the offices of Sens. Pat Toomey and Bob Casey and Philadelphia-area Rep. Dwight Evans.

When we met with the offices, we knew that we would be meeting with the staff and not the lawmakers themselves. While members of Congress are the decision makers, their aides are the influencers. As we discussed in our training, staff often have the inside knowledge as they are the ones with the boots on the ground, diving deep into the topic areas to inform and influence their bosses' decisions. Because we scheduled the meetings in advance and did our homework, we knew with whom we were meeting and their key platforms for each content area. We focused on learning about their voting history, education, previous employment and family constellation—any and all information that could potentially help us make a personal connection.

As an example, during one of our meetings, we learned that one of our members of Congress has school-aged children and thus, had become increasingly concerned with gun violence and its impact on school safety. This

insight gave way to a very productive and transparent conversation about the evidence behind the impact of gun violence on young people, including the [increase in suicide risk](#), the [impact on community violence](#), the role guns play in school shootings and more.



Additionally, we knew that this individual had personal values and beliefs that influenced their voting and allocation of resources with regards to issues around Title X and reproductive health services. Knowing this ahead of time, we still discussed the importance of sexual and reproductive health services to improve the health and well-being of all young people, however, we did not get into a heated debate. Our intent was not to change their mind or influence their personal beliefs, but rather listen and learn about a different perspective, connect on shared values, and present data and share our expertise and experience working with these populations and on these issues. Our goal was to illustrate the data we were sharing with real-world stories. Framing the conversation in this way allowed us to talk about issues related to adolescent and young adult women's need for reproductive health care and why we need additional funding to support research, without getting into a debate about hot-button issues.

With that in mind, we were able to respectfully engage, hear their concerns and needs, be heard and understood, and share issues that are of importance to us as people who research and work with adolescents. This preparation and awareness was critical to respectful dialogue and the building of long-term, productive, working relationships, which ultimately allow for dialogue across party lines. We learned lots of important lessons in our workshop, lessons we look forward to taking to other meetings with key decision makers. Through continuing this type of collaboration, we can ensure that high-quality research is the bedrock of the programs and policies that impact our adolescents.

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