

ALTAMED 2020 GENERAL REPORT

AN EVALUATION OF THE EFFICACY OF COMMUNITY CLINIC-BASED INTEGRATED VOTER ENGAGEMENT DURING CALIFORNIA'S 2020 GENERAL ELECTION

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INTRODUCTION

Our analysis indicates that AltaMed's outreach efforts are very effective at mobilizing communities, and that their phone and canvassing program was very successful in mobilizing the low-propensity voters they contacted.

Shortly after the March 2020 primary, the coronavirus pandemic reached the United States. The pandemic upended life for everyone, and presented unique challenges. Among the list of concerns was what this would mean for the 2020 election and voter turnout. Much of the campaigning was moved to an online format, relying on virtual events and small campaign events in key battleground states. What this would mean for turnout of minority and low propensity voters was uncertain, particularly among those who do not live in battle ground states and were less likely to receive voter outreach from the campaign.

Having done community outreach during the last five years, AltaMed's civic engagement team has learned how to reach communities in California that are often underserved. After a very successful Get Out The Vote (GOTV) campaign during the primaries, AltaMed made the critical decision to continue their GOTV campaign by door knocking and phone banking in the 9 weeks leading up to the election.

Research shows that healthcare providers are among the most trusted messengers in low-income communities of color, giving them unique opportunities to help low-propensity voters overcome barriers to voting, improve their own health, and engage in actions that address Social Determinants of Health (SDoH) in their neighborhoods. This is especially true in a year when healthcare workers were on the frontlines of an unparalleled pandemic. By using its community health centers as hubs for civic engagement the program seeks to mobilize traditionally underrepresented and marginalized voting-eligible individuals.

For the November 3rd, 2020 General Election, AltaMed continued their statewide My Vote. My Health.™ integrated voter mobilization and GOTV effort in partnership with peer Federally Qualified Health Centers (FQHC's), including San Ysidro Health in San Diego County and La Clínica de La Raza in Alameda County. The program included a combination of election education information in the health centers as well as door-to-door canvassing and phone banking within a five-mile radius of their respective clinic sites. The program was conducted throughout communities in East Los Angeles, Southeast Los Angeles, Oakland, parts of Orange County where outreach focused on the cities of Anaheim and Santa Ana, and parts of South San Diego County where outreach was done in Chula Vista, National City and San Ysidro.

During the general election, AltaMed also partnered with UCLA's Latino Policy and Politics Initiative to design a randomized experiment with treatment, placebo and control groups to measure the effectiveness of their GOTV campaign. This project was generously funded by The California Endowment, a statewide charitable foundation focused on expanding access to affordable, quality health care for underserved individuals and communities, and promoting fundamental improvements in the health status of all Californians.

This report outlines the findings from this experiment. Our analysis indicates that AltaMed's outreach efforts are very effective at mobilizing communities, and that their phone and canvassing program was very successful in mobilizing the low-propensity voters they contacted. This report will detail how the experiment was conducted, and the effects of both the phone and door to door canvassing efforts. In addition to analyzing the My Vote. My Health.™ campaign as a whole, we have also analyzed the results by region.

EXPERIMENT DESIGN

We started our experiment by randomizing precincts into one of three possible conditions - treatment, placebo, or control group. Eighty percent of our precincts were randomly assigned to the treatment group, while 10% were assigned the placebo group and 10% were assigned the control. While the analysis of the GOTV efforts is done at the individual level, the randomization was done at the precinct level so that canvassers could easily go through neighborhoods without having to switch between different scripts. Our universe is low propensity voters across all three conditions.

Table 1

CONDITION	N
CONTROL	37,117
PLACEBO	4,658
TREATMENT	119,334

Since the randomization was conducted at the precinct rather than the individual level, the number of people in each condition that were targeted varies. Also due to the limited resources directed toward the placebo group, the outreach percentages are significantly off of the target percentages. **Table 1** displays the number of people that are low propensity voters that AltaMed attempted to contact in the placebo and treatment conditions by both phone banking and canvassing. Outreach efforts for the placebo condition were done throughout the experiment, but with less manpower than the control group, so the placebo condition accounts for only 3% of our total universe, while the treatment condition makes up 74% of the total universe. The control group makes up 23%. Individuals in the control group are low propensity voters that live in the precincts that received no outreach efforts. Voters who moved prior to the election were removed from our analysis.

OUTREACH SCRIPTS

AltaMed uses a 5-touch non-partisan model when contacting voters and engaging with community members. This model is based on the premise that repeated contact will facilitate in informing and persuading voters. The first touch involves calling low propensity voters and having semi structured conversations about policy issues and voting. The second touch involves door canvassing the homes of low propensity voters. Community members are also mailed voting reminders, and sent texts to encourage them to vote. Finally, the five-touch model calls voters and reminds them of their polling location and coordinates transportation for those who do not have a way of getting to a polling location.

Because of the pandemic, not all of the locations did door canvassing, but all locations did phone outreach in their communities.

Canvassers and phone bankers involved in outreach efforts were trained to have semi-structured conversations with respondents. Two separate scripts were used for the treatment group. In San Ysidro the treatment message included information on COVID safety and voting early. Information was given about how to vote by mail and using drop boxes.

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Individuals in the treatment group at all other locations were asked if they knew about the propositions that were being voted on. Propositions 15, 16, and 17 were discussed and voters were asked to vote yes on these propositions. Voters were encouraged to vote by mail as soon as they received their ballot, and asked to talk to other people in their household to encourage them to vote. For a full version of the scripts please see the **appendix**.

The placebo message focused on COVID-19 safety messaging. AltaMed used the placebo as an opportunity to spread safety awareness to our low propensity voters. They were told about the importance of wearing a mask to reduce transmission, washing their hands more frequently, and staying home if they felt unwell.

Finally, respondents in the control condition did not receive any messaging regarding voting, or COVID-19 safety.

JOINT ANALYSIS

Aggregating phone and canvas data allows for a joint analysis that investigates AltaMed's November GOTV campaign in its entirety. **Table 2** summarizes the entire dataset and reports the raw number of individuals in each experimental condition. Within each condition, individuals are grouped by whether or not they voted in the 2020 general election. The three conditions include people who were not successfully contacted in the treatment and placebo conditions as well as those who were successfully contacted.

Table 2

CONDITION	DID NOT VOTE	VOTED
CONTROL	13,587	23,530
PLACEBO	1,808	2,850
TREATMENT	45,742	73,592

Table 3 reports the percent of people who voted across each condition. Our findings indicate that 63.39% of people in the control group voted in the November election compared to 61.19% of people in the placebo group and 61.67% of people in the treatment group. This suggests that the treatment group experienced a 1.72% decrease in turnout when compared to the control. When comparing the treatment group to the placebo, we find that turnout was .48% higher in the treatment group.

Table 3

CONDITION	DID NOT VOTE	VOTED
CONTROL	36.61	63.39
PLACEBO	38.81	61.19
TREATMENT	38.33	61.67

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Because only a fraction of individuals assigned to the treatment and placebo conditions were successfully contacted, our analysis subsets the data in an effort to more precisely estimate the effects of AltaMed’s GOTV campaign¹. By subsetting the data to include only those who were successfully reached by phone and/or canvass and those assigned control, we can better assess the impact of being encouraged to vote by AltaMed.

Table 4 and **Table 5** summarize our findings and indicate a clear positive treatment effect. We find that 70.17% of those who were successfully mobilized by AltaMed voted - nearly four percentage points higher than the national turnout average². 63.39% of respondents in our control group voted and 67.64% of those successfully contacted in the placebo group voted. Comparing treatment to placebo reveals a 2.53% increase in turnout for those successfully treated. This comparison is important because it isolates the effect of the GOTV message and eliminates likelihood of contact as a potential confounding factor. When comparing the control and treatment groups we find a 6.78% increase in turnout. The next section of this analysis will look into the specific methods of contact to measure the effectiveness of the phone banking and canvassing operations.

Table 4

CONDITION	DID NOT VOTE	VOTED
CONTROL	13,587	23,530
PLACEBO	668	1,396
TREATMENT	12,611	29,672

Table 5

CONDITION	DID NOT VOTE	VOTED
CONTROL	36.61	63.39
PLACEBO	32.36	67.64
TREATMENT	29.83	70.17

PHONE BANKING

Our phone banking analysis includes 213,953 individuals. **Table 6** breaks the respondents down by their assigned experimental condition and also by vote history for the November election. **Table 7** reports the percent of people who voted across each condition, with each row summing to 100%. When comparing the treatment to the control group, we find a 5.35% increase among those who voted in the treatment group. When comparing the treatment to the placebo group, we find a 2.26% increase among those who voted. It is important to note that this data includes all those contacted by phone, including individuals that were unsuccessfully contacted.

Table 6

CONDITION	DID NOT VOTE	VOTED
CONTROL	13,583	23,530
PLACEBO	540	1,071
TREATMENT	7,433	16,343

Table 7

CONDITION	DID NOT VOTE	VOTED
CONTROL	36.61	63.39
PLACEBO	33.52	66.48
TREATMENT	31.26	68.74

¹ The percent of people who were successfully contacted is much higher in the November 2020 general election when compared to the March election because in March we received the PDI IDs for every person whose number was entered into the dialer. For the November election we were only given the PDI ID of people who answered the phone. Those who were not successfully contacted either did not speak the same language as the promotora, was not home, or hung up after answering the call.

² <https://www.pewresearch.org/fact-tank/2021/01/28/turnout-soared-in-2020-as-nearly-two-thirds-of-eligible-u-s-voters-cast-ballots-for-president/>

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AltaMed attempted to contact 1,611 people in the placebo group by phone and successfully contacted 1,299 for a success rate of 81%. This successful contact rate is higher than the spring study because the data is based off of numbers where someone answered the other line, whereas in the spring the data we had access to included everyone whose numbers were fed into the dialer. In the treatment group, 23,776 people answered their phones and we successfully contacted 18,223 for a success rate of 77%.

When we focus on individuals who were successfully contacted by phone, we find that AltaMed's phone banking efforts were remarkably effective. In the treatment group, 73.07% of those successfully contacted turned out to vote. In the placebo group, turnout shrinks to 68.13%. In the control group, 63.39% of people voted. Comparing the treatment group to the placebo group, we find that the treatment group is associated with a 4.94% increase in voting. This gap grows to 9.67% when comparing treatment to control. Taken together, these results indicate that being successfully contacted by AltaMed by telephone increases turnout among low-propensity voters.

Table 8

CONDITION	DID NOT VOTE	VOTED
CONTROL	13,583	23,530
PLACEBO	414	885
TREATMENT	4,907	13,316

Table 9

CONDITION	DID NOT VOTE	VOTED
CONTROL	36.61	63.39
PLACEBO	31.87	68.13
TREATMENT	26.93	73.07

CANVASSING

Turning to the canvassing campaign, **Table 10** displays the raw count of individuals in each experimental condition and also groups individuals by their November vote history. There are 140,636 total participants. **Table 11** shows that for those assigned to the control group, turnout was 63.39%. For those assigned to the placebo group, turnout was 58.44%. Finally, for those assigned treatment, turnout was 60.40%. Though it is interesting that those assigned control have a higher turnout than those assigned treatment, we hesitate to put much stock into this finding because of the low successful contact rates.

AltaMed attempted to contact 100,441 individuals in the treatment group via canvassing and successfully contacted 25,541 low-propensity voters for a success rate of 25%. In the placebo group, 3,082 low-propensity voters were reached out to, and 774 were successfully contacted for an identical success rate of 25%.

Table 10

CONDITION	DID NOT VOTE	VOTED
CONTROL	13,583	23,530
PLACEBO	1,281	1,801
TREATMENT	39,771	60,670

Table 11

CONDITION	DID NOT VOTE	VOTED
CONTROL	36.61	63.39
PLACEBO	41.56	58.44
TREATMENT	39.60	60.40

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When subsetting the data to only include respondents who were successfully canvassed and the control group, our findings become more pronounced. Among those who successfully received treatment, 68.23% turned out to vote. Among those who successfully received the placebo message, 67.05% voted. The 1.18% turnout difference between those who received placebo and those who received treatment indicates a moderately positive effect of AltaMed’s political canvassing campaign. When we compare the treatment to the placebo, we find a 4.84 increase in turnout. The results from both the canvassing and phone banking efforts indicate that AltaMed’s strategy of targeting low propensity voters is succeeding in getting them to turn out in elections. Furthermore, the phone campaign is slightly more effective than the canvassing campaign.

Table 12

CONDITION	DID NOT VOTE	VOTED
CONTROL	13,583	23,530
PLACEBO	255	519
TREATMENT	8,114	17,427

Table 13

CONDITION	DID NOT VOTE	VOTED
CONTROL	36.61	63.39
PLACEBO	32.95	67.05
TREATMENT	31.77	68.23

REGIONAL ANALYSIS

AltaMed’s mobilization efforts took place in four different target regions in California; Southeast Los Angeles, Oakland, Santa Ana, and Anaheim in Orange County, and South San Diego County (Chula Vista, National City and San Ysidro). AltaMed and their partner clinics have a historical presence in each of these communities. For each of the four regions highlighted above, we analyze the effects of both the phone banking and canvassing campaigns. Ultimately, the evidence points to a nearly ubiquitous success in AltaMed’s GOTV mobilization. Those who were successfully treated in the phone banking experiment experienced between a 7.75% and 12.40% increase in turnout when compared to their region’s control group. Among those canvassed, we saw a 3.40% to 6.04% increase in turnout when compared to the control group.

Table 14 displays the results for the attempted contacts by condition for both phone banking and canvassing by region. These results are small in size and sometimes in the opposite expected direction, but that is because there are a number of voters whom AltaMed intended to contact in the treatment and placebo groups that were not successfully contacted due to not answering their phone or their doors.

Table 14

SOUTHEAST LOS ANGELES

	DID NOT VOTE	VOTED
CONTROL	35.3	64.7
PLACEBO	33.56	66.44
TREATMENT	30.59	69.41

OAKLAND

	DID NOT VOTE	VOTED
CONTROL	38.28	61.72
PLACEBO	32.23	67.77
TREATMENT	33.08	66.92

SANTA ANA AND ANAHEIM

	DID NOT VOTE	VOTED
CONTROL	33.9	66.1
TREATMENT	30.85	69.15

SOUTH SAN DIEGO COUNTY

	DID NOT VOTE	VOTED
CONTROL	42.08	57.92
PLACEBO	34.38	65.62
TREATMENT	33.21	66.79

In Southeast Los Angeles, 64.70% of those in the control group voted, whereas in the placebo group, 66.44% (phones) and 57.06% (canvassing) voted. Among those AltaMed intended to treat, 69.41% of those in the phone banking experiment voted and 60.11% of those in the canvassing experiment voted. The intent-to-treat effect among those contacted by phone is moderately positive with the treatment group having higher turnout than both the placebo and control groups. The results of the canvassing experiment are more mixed, with turnout in the treatment group higher than turnout in the placebo group, but not the control group.

In Oakland, GOTV was limited to phone banking so our analysis focuses on the effects of being called. The control group in Oakland had a turnout of 61.72%. In the placebo and treatment groups, turnout was 67.77% and 66.92% respectively. Though turnout among those in the treatment group is higher than those in the control group, it is nearly indistinguishable from the placebo group.

Santa Ana and Anaheim trends similarly to Los Angeles. Among those in the treatment group, turnout is 69.15%. In the control group turnout is 66.10%. Like Los Angeles, the results are more mixed for the canvassing respondents. Those assigned treatment have a turnout rate .48% lower than those assigned control, but 1.65% higher than those assigned to the placebo group.

In South San Diego County 57.92% of the control group voted while 66.79% (phone banking) and 55.01% (canvassing) of the treatment group voted.

Table 15

SOUTHEAST LOS ANGELES

	DID NOT VOTE	VOTED
CONTROL	35.3	64.7
PLACEBO	31.37	68.63
TREATMENT	26.42	73.58

OAKLAND

	DID NOT VOTE	VOTED
CONTROL	38.28	61.72
PLACEBO	32.98	67.02
TREATMENT	26.25	73.75

SANTA ANA AND ANAHEIM

	DID NOT VOTE	VOTED
CONTROL	33.9	66.1
TREATMENT	26.15	73.85

SOUTH SAN DIEGO COUNTY

	DID NOT VOTE	VOTED
CONTROL	42.08	57.92
PLACEBO	32.7	67.3
TREATMENT	29.68	70.32

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Table 15 focuses on those who were successfully contacted. By dropping cases of unsuccessful contact, the results of AltaMed’s outreach efforts indicate strong success. Beginning with Southeast Los Angeles, we find that 73.58% of those successfully treated by telephone voted. This is a 4.95% increase when comparing the treatment group to the placebo group, and an 8.88% increase when comparing the treatment group to the control group. Looking at those who were successfully canvassed, 68.77% of the treatment group voted, compared to 69.52% of the placebo group and 64.7% in the control group.

In Oakland, 73.75% of those successfully contacted by telephone voted. Among those who received the placebo message, 67.02% voted. Turnout was 61.72% in the control group.

The phone banking campaign in Santa Ana and Anaheim was exceptionally successful with a turnout of 73.85% among those who received treatment. Turnout among the control group in this region was 66.1%, making for a 7.75% difference in turnout between treatment and control. There is no placebo comparison group for the phone banking experiment in this region due to the low successful contact numbers for the placebo group. Moving to the canvassing campaign, we see similar results. 72.14% of those successfully treated turned out to vote in the November election. This is 15.89 percentage points higher than the placebo group and 6.04 percentage points higher than the control group.

In South San Diego County we also observe positive treatment effects among those who receive treatment. For those who received treatment by telephone, turnout was 70.32%. This was 3.02% and 12.40% higher than the placebo and control groups respectively. In the canvassing experiment, those who received treatment had a turnout rate of 61.32%. Turnout in the control group was 57.92%.

ANALYSIS BY SUCCESSFUL CONTACTS

Many individuals were contacted multiple times by AltaMed. This section of the analysis examines the effectiveness of multiple successful contacts per respondent - whether by phone, canvass, or a combination of the two. Interestingly, we find that in the treatment group those who were successfully contacted once were more likely to vote than those who were successfully contacted multiple times. Respondents who were successfully contacted three or more times were 1.83% less likely to vote than respondents that were successfully contacted just once. This may be because the number of respondents who were successfully contacted more than once is smaller in the 2020 General Election than when compared to the spring turnout drive. When comparing individuals who were successfully contacted one time to the control group, we find a 6.9% increase in turnout. When comparing those who were successfully contacted three times to the control group, we still find a positive effect, albeit slightly smaller increase of 4.45%.

Table 16

	DID NOT VOTE	VOTED
CONTROL	13,587	23,530
PLACEBO 1 CONTACT	667	1,389
PLACEBO 2 CONTACT	1	7
TREATMENT 1 CONTACT	11,058	26,161
TREATMENT 2 CONTACT	1,252	2,876
TREATMENT 3 OR MORE	301	635

Table 17

	DID NOT VOTE	VOTED
CONTROL		63.39
PLACEBO 1 CONTACT	32.44	67.56
PLACEBO 2 CONTACT	12.50	87.50
TREATMENT 1 CONTACT	29.71	70.29
TREATMENT 2 CONTACT	30.33	69.67
TREATMENT 3 OR MORE	32.16	67.84

CONCLUSION

Examining the impact of AltaMed's My Vote. My Health.™ program, we are pleased by the strong impact of their GOTV messaging. We found that despite the pandemic, people were still answering their doors and open to listening to AltaMed's message of civic engagement. We would expect that this program would be equally successful if it were expanded to cover low propensity voters across more precincts and counties. This is the second evaluation of AltaMed's civic engagement program, and we are highly confident in the results given the replicability of their outreach efforts. We recommend that this program continue given the strong positive impact it has.

APPENDIX

SAN YSIDRO HEALTH – TREATMENT SCRIPT

Hi, is ___ home? My name is ___ and I'm talking with members of the community on behalf of San Ysidro Health, a community healthcare provider. We are talking with voters about COVID safety and voting early this year. These are important issues for our community.

COVID Preparedness:

San Ysidro Health wants to make sure everyone is safe and prepared to deal with Covid. We recommend you:

- Wear a mask in public places covering your nose and mouth
- Wash your hands with soap and water for 30 seconds
- Try and reduce the number of surfaces you are touching and avoid touching your face or eyes
- Stay home when feeling sick

As I'm sure you know, this is a critical election year with many important races and issues on the ballot that will impact important healthcare issues! We want to talk with you today about **voting early!!!** It is so important that we vote for candidates and issues that support good healthcare policies for our community and our families!

Voting is a little different this year! Every registered voter in California, like you and anyone in your household who are registered to vote, will be receiving a ballot in the mail.

Ballots should be delivered to you around October 5th. Voting by mail is safe, secure and reliable and we're recommending that everyone vote by mail. Please make sure to sign and date the back of the envelope and mail it back as early as possible -- no stamp required! There will also be in-person voting options.

Can we count on you to vote by mail early or do you plan to drop your ballot in a drop box or vote in person?

1) Voting by Mail 2) Voting by drop box 3) Voting in Person 4) Don't Know 5) Already Voted

IF BY MAIL - That's great! Please be sure to fill out your ballot and mail or drop it off right away. And don't forget to sign & date the envelope!

IF IN PERSON OR BALLOT DROPBOX - You can find out about your in-person voting options [*and dropbox locations*] by checking our **County Registrar of Voters website**: <https://www.sdvote.com/>

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If Undecided about voting: I understand there is a lot of information this year but we need to make sure all voters have a voice for our community and vote for candidates who will protect and ensure important healthcare policies. Voting is safe and so easy for all voters this year! Everyone has a chance to fill out their ballot and vote that same day without having to leave the house. There are also polling locations opening early in San Diego county where they are focusing on social distancing.

You should have also received a voter guide from the state that will have information on candidates and ballot measures or you can visit Calvoter.org or easyvoterguide.org. Both are non-partisan and have information about what will be on the November ballot.

Will you commit to staying safe and voting early by mail this year? *(record response)* Thank you for your time! Stay safe and have a great day/evening!

Finally, would you like to be added to our newsletter to receive updates about community health events and information?

ALTAMED 2020 TREATMENT SCRIPT

Hi, is ___ home? My name is ___ and I'm talking with voters about the upcoming November 3rd election on behalf of AltaMed, a community healthcare provider. This is a big election year with many issues on the ballot but we want to talk with you today about three VERY important ballot initiatives that will have a big impact on our community.

Prop 15 – will help California recover from the pandemic crisis by reclaiming \$12 billion each year so that we have new funding for every school district in our state, as well as for the community services we all rely on - like public health programs, fire safety services and services to address housing and homelessness. Prop 15 closes a corporate tax loophole and makes sure that big corporations pay their fair share, while protecting homeowners, renters, small businesses, and agriculture.

Can we count on you to join AltaMed, teachers, nurses, firefighters, and the California PTA and vote YES on Prop 15 in the November election? *(record response)*

Prop 16 – Is the **Opportunity for All** initiative which will help address the problem of discrimination in with state contracts, employment, pay, and educational opportunities. Prop 16 will help give everyone -- Black, White, Latino, Native American, Asian American or Pacific Islander, any gender -- an equal shot at fair wages, good jobs and quality schools in California. It's the systemic change we need to end discrimination as we know it.

Can we count on you to join with the AltaMed and hundreds of community organizations and leaders and support Proposition 16 in the November election? *(record response)*

We have one more proposition to talk with you about. **Prop 17** – Which would allow people with felonies the right to vote while they are on parole giving people who have already served their time the opportunity to vote!

Can we count on you to join AltaMed, Senator Kamala Harris and the League of Women Voters in supporting Proposition 17? *(record response)*

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IF YES:

Voting is a little different this year! Every registered voter in California, like you and anyone in your household who are registered to vote will be receiving a ballot in the mail. Ballots should be delivered to you the first or second week in October. WE ARE ENCOURAGING ALL VOTERS TO CAST THEIR BALLOT AS SOON AS IT ARRIVES! There is no postage necessary and we need to make sure everyone's vote counts, this is the most secure way to do that!

Can we count on you to send in your ballot as soon as you receive it? *(record response)*

Great! **Can we also count on you to talk with your household members about these important initiatives and get them to turn their ballots in as well?** *(record response)*

Finally, would you like to be added to the "AltaMed My Vote. My Health.TM" newsletter and receive updates about community health events and information?

Thank you so much for your time and for being a voter! Have a good day/evening.

If Undecided: I understand there is a lot of information here. Is there one initiative in particular you need additional information about? (ID whichever initiative and move to your one pager talking points, then ask again. Can we count on you to vote by mail for Prop 15,16 and 17)?

If they need more info: All voters will get a voter guide from the state that will have information on candidates and ballot measures or visit Calvoter.org, or easyvoterguide.org. Both are non-partisan and have information about what will be on the November ballot

ALTAMED PLACEBO SCRIPT

Hi, is ___ home? My name is ___ and I'm talking with members of the community about COVID safety on behalf of AltaMed a community healthcare provider. This is an important issue in our community and I want to talk to you about important ways to reduce the risk of spreading COVID our community.

The first is to wear a mask – wearing a mask will help California reduce the pandemic crisis by lowering rates of transmission. Some people may not know that they have the virus, and wearing a mask will reduce the chances that you may spread the virus to others should you become sick. Your mask should cover your mouth and your nose. It is also recommended that you wash your mask regularly. Places that have required masks have lowered their COVID numbers even while re-opening businesses.

Have you been wearing a mask when you go out in public to stores, on walks, or had other interactions with individuals living outside of your household?

Wash your hands frequently – In the event that you have come in contact with the virus, one way to make sure you don't get sick or spread the virus is to wash your hands with soap and water for 30 seconds. When out in public try to reduce the number of surfaces you are touching, and avoid touching your face or eyes. As soon as you get home wash your hands, so that the virus does not spread on surfaces in your home.

Are you working outside of the home, and do you have easy access to a sink?

If you are working outside the home and don't have the ability to wash your hands, carrying and using hand sanitizer is another way to reduce the risk of catching COVID.

Stay home when you are sick- There are many different symptoms that people have experienced when they get the virus. Some get a fever, sore throat, upset stomach, vomiting, or diarrhea. Others experience severe fatigue and respiratory issues. Because the symptoms vary so much it is important that we be cautious when we don't feel well so that we don't risk spreading the virus.

AltaMed is here for you should you have any questions about the virus, and our doctors are available for telehealth and in person visits.

Can we also count on you to talk with your household members about protecting themselves from the virus?

Finally, would you like to be added to the "AltaMed My Vote. My Health.TM" newsletter and receive updates about community health events and information?

Thank you so much for your time and for being a voter! Have a good day/evening.

AltaMed
QUALITY CARE WITHOUT EXCEPTION™

UCLA

**Latino Policy &
Politics Initiative**