



Voter Registration and Participation Resolution

Call for SOPHE to support policy and advocacy efforts to increase voter registration and voting participation, which leads to healthier communities.

**Adopted by the SOPHE Board of Trustees
May 17, 2022**

Whereas, the Robert Wood Johnson Foundation's *Culture of Health* action framework identified seven measures required to make health a national shared value, one of which is the extent to which people participate in voting and engage in volunteer work (Trujillo & Plough, 2016); and

Whereas, high levels of community engagement help people recognize their own agency and ensure they are connected with each other, which improves neighborhood cohesion, health outcomes, and community resilience (Nelson et al., 2019); and people who value community health are more likely to translate those values into civic engagement; which includes involvement in civic organizations, participation in advocacy and voting, and other actions to change laws or policies, bring about systemic change and produce healthy communities (Dubowitz et al., 2020); and

Whereas, a positive relationship exists between civic engagement and physical and mental health, health behaviors, and well-being (Dubowitz et al., 2020; Nelson et al., 2019); while social isolation, marginalization, lack of trust in institutions, poor health, and the burden of chronic disease result in lower voting participation rates and less civic engagement (Dubowitz et al., 2020; Holbein et al., 2019; Nelson et al., 2019); and conversely, participation in voting is more likely among those who enjoy good health (Ojeda & Pacheco, 2019); and

Whereas, regardless of political party, health care issues are considered extremely important by a plurality of likely voters, with voters' values, beliefs, and concerns about issues such as health care costs, insurance coverage, and benefits influencing both candidates' campaigns and legislators' votes; and policy issues about health and health care influencing a majority of voters' choices when voting for candidates (Blendon et al., 2018), budgets, and ballot initiatives (Nelson et al., 2019); and

Whereas, until recently, public health was viewed as an issue of personal conduct, related more to socioeconomic status or group standing than a political matter (Acharya et al., 2020), but public safety has been compromised during the COVID-19 pandemic by state legislators enacting partisan measures that limit the power of governors and the authority of public health officials in at least 26 states (Weber & Barry-Jester, 2021); and

Whereas, public health considerations should be the guiding factor in health policy decisions (Neelon et al., 2021) because legislation that affects population health is crafted by individual legislators within political systems (Purtle et al., 2017), such that essentially apolitical public health interventions or guidelines (Eden et al., 2021) can be influenced by political ideologies and partisan agendas (Purtle et al., 2017); and

Whereas, political participation can be affected by changes in public policy, such as increased voter turnout associated with increased Medicaid enrollment as a result of the Affordable Care Act's Medicaid expansion (Haselswerdt & Michener, 2019); and

Whereas, because of the COVID-19 pandemic, primaries were postponed, election laws were changed, and emergency powers were invoked in dozens of states to give election administrators more time and resources to conduct elections safely (Hinkle, 2020), yet high levels of civic engagement continues to be threatened by the ongoing COVID-19 pandemic; and

Whereas, people experience barriers to registering to vote and casting a ballot for many reasons, including many that intersect with barriers to receive healthcare. These reasons include the lack of identification documents (Carnegie Corporation, 2019), frequent changes in home address (Barth & Ensslin, 2014), limited English proficiency (Shelly & Forbes, 2013), misconceptions about the rights of people with disabilities to vote (Sklar & Nisen, 2013), a combination of poor health and low income (Lyon, 2021), and voter registration office closures due to emergencies like COVID-19 (Panetta, 2020); and

Whereas, our nation's public health agenda no longer prioritizes civic participation. While civic participation was included in *Healthy People 2020*, and voter registration and participation were included as measurable objectives within the Social Determinants of Health (Healthy People 2020), and the committee helping to construct the latest objectives for the nation stated that voter participation has a bearing on health equity and the many disparities among groups in this country (National Academies of Sciences, Engineering, and Medicine, 2020), the voting-related objectives were not included in Healthy People 2030; and

Whereas, an easier transition in the development of a voting habit, and an interest in politics more broadly, happens through the presence of resources; and adolescents from well-to-do families are better equipped to confront the challenges that come with independent living and thinking, while their less well-off counterparts face a bumpier path (Ojeda & Pacheco, 2019); and

Whereas, disparities exist with a negative correlation between those enrolled in Medicaid and voter registration (Michener, 2017)

Therefore, be it resolved, the Society for Public Health Education (SOPHE) shall:

1. Support the non-partisan *Healthy Democracy, Healthy People* initiative which encourages civic participation to improve community health.
2. Support legislation, policies, and practices that encourage state and local agencies who administer social service programs to integrate voter registration opportunities for applicants, such as how several states have authorized an "opt out" method for voter registration with Medicaid to electronically verify information, to either register an individual to vote or to update their registration information; including being a U.S citizen and being at least 18 years old on Election Day.
3. Support policies and practices that allow for those who are 16 and 17 years old to pre-register to vote in upcoming elections, when they will reach voting age and then be eligible to vote.
4. Support policies that make elections more accessible for all eligible voters, including considerations for people with varying literacy and/or abilities. These include:
 - a. automatic and same day registration; early voting; mail (absentee) voting
 - b. no-excuse absentee voting; convenient voting locations and hours

- c. physical accessibility of polling sites, and assistance with equipment, languages, and casting a ballot.
5. Support efforts to restore civic participation as a goal in the federal *Healthy People 2030* initiative, as well as future iterations of this national set of health goals for the nation.
6. Oppose policies and practices that create barriers - or discourage, suppress, or restrict the ability of eligible voters to either register to vote and/or cast a ballot in free and fair elections. These include but are not limited to:
 - a. partisan or otherwise biased redistricting
 - b. requiring identity verification or other additional documentation requirements at the polls after the person has already established their eligibility to vote
 - c. early voter registration deadlines
 - d. prohibiting online registrations
 - e. requiring an approved excuse for early voting
 - f. minimizing poll locations or hours of operation
 - g. restricting voting by mail
 - h. disallowing nourishment in voting lines.
7. Encourage its members to promote the health of communities by reminding them of upcoming elections and to vote in every election of which they are eligible.
8. Provide members with opportunities to learn about issues that will shape policy and encourage members to support elections and to be civically engaged, by serving as poll workers and by participating in town halls and other public meetings.
9. Provide its members with information on how public health experts can play a larger role in helping election administrators manage safe options for voters to cast their ballots; including voters who may have active COVID-19 infections, those who are particularly vulnerable to a host of other health concerns, or those who are not familiar or comfortable with absentee or mail voting options.

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