

Creating a Shared Story

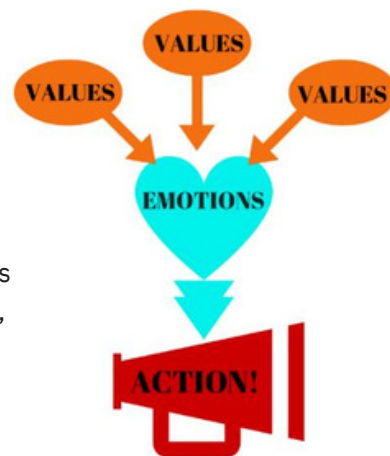
Organizing is rooted in shared values expressed as public narrative. Public narrative is how we communicate our values through stories, bringing alive the motivation that is a necessary pre-condition for changing the world. Through public narrative, we tell the story of why we are called to leadership ("Story of Self"), the values of the community within which we are embedded that calls us as a collective to leadership ("Story of Us"), and the challenges to those values that demand present action ("Story of Now"). You all practiced this at the Training Institute - now you must elicit a "Story of Self" from all your team members and construct together a "Story of Us and Now."

Why Use Public Narrative?

Basically, because it will make you a much stronger team.

Public narrative translates VALUES into ACTION.

Public leadership requires the use of both the "head" and the "heart" to mobilize others to act effectively on behalf of shared values. Leadership engages people to interpret WHY they should change the world and HOW they can act to change it. Why leaders work to change their world is their motivation, their driving force, and how they work to change their world is their strategy, how they approach their particular dilemma. Public narrative is the "why" - the art of translating values into action through stories and that is where we will spend our time and energy.



The key to motivation is understanding that values inspire action through emotion.

Emotions inform us of what we value in ourselves, in others, and in the world. Emotions can also act as a conduit to allow us to express the motivational content of our values to others. Stories draw on our emotions and show our values in action, helping us feel what matters, rather than just thinking about or telling others what matters. Because stories allow us to express our values not as abstract principles, but as lived experiences, they have the power to move others to action.

Some emotions inhibit mindful action, but other emotions facilitate action.

The language of emotion is the language of movement, sharing the same root word. Mindful action is inhibited by inertia, self-doubt, fear, isolation and apathy. On the other hand, action can be facilitated by YCMAD (you can make a difference), solidarity, anger, urgency, hope. By being mindful of our thoughts and emotions, we can learn to control them to become effective leaders. Stories can mobilize emotions, enabling mindful action to overcome emotions that inhibit it.

Creating a Public Narrative

*If I am not for myself, who will be for me?
When I am only for myself, what am I?
If not now, when?*

-Rabbi Hillel, 1st century Jerusalem sage

As Rabbi Hillel's powerful words suggest, to stand for yourself is a first but insufficient step. You must also construct the community with whom you stand, and move that community to act together now. But before you act you must find common threads in values that call you to your mission, values shared by your community, and challenges to those values that demand action now.

Crafting a public narrative is a way to connect three core elements of leadership practice:

- **Story** - why we must act now
- **Strategy** - how we can act now
- **Action** - what we must do to act now

The Three Key Elements of Public Narrative Structure:
Challenge, Choice, Outcome

A plot begins with an unexpected challenge that confronts a protagonist pursuing a purpose. The plot challenges the protagonist to pay attention and to choose how to act, regardless of whether or not s/he is prepared. The choice yields an outcome that subsequently teaches a moral to the protagonist.

Because we can empathetically identify with the character, we can experience the emotional content of the experience, learning the moral with not only our heads, but also our hearts. Although we only hear about a person's courage in making their choice, we can be inspired by it.



The story of the character, his or her struggle to choose, and the values that enabled him/her to act engage listeners to recall their own stories of challenge, choice, and the values that moved them to action. This recollection allows the listener to gain a new insight into their own lives and the struggles that they are currently facing in themselves and will then, hopefully, drive them to action as well.

A “Story of Self” communicates the values that called you to lead in this way, in this place, at this time.

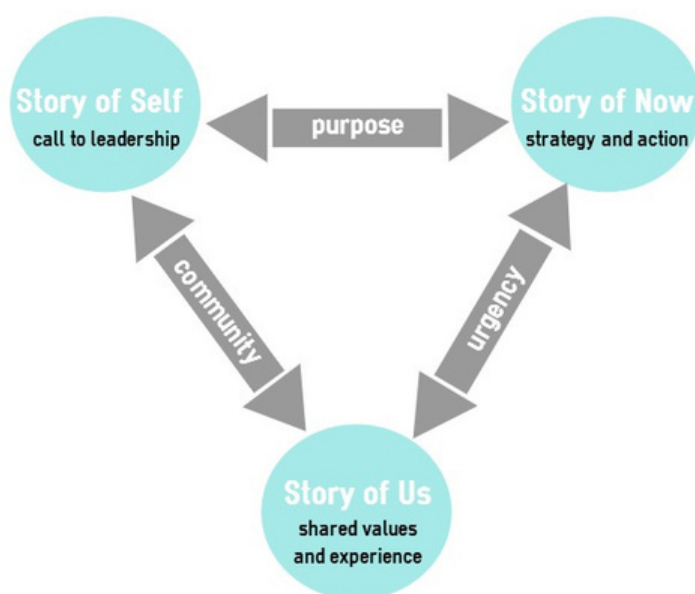
Each of us has compelling stories to tell. In some cases, our values have been shaped by choices others – parents, friends, teachers – have made. We have chosen how to deal with loss, even as we have found access to hope. Our choices have shaped our own life path: we dealt with challenges as children, found our way to a calling, responded to needs, demands, and gifts of others; confronted leadership challenges in places of worship, schools, communities and work.

A “Story of Us” communicates shared values that anchor your community, values that may be at risk, and may also be sources of hope.

You tell a story of self to enable others to “get you” – to experience the values that call you to public life. You tell a “story of us” to enable them to “get each other”- to experience the values they share that can inspire them to act together, find courage in each other, and find hope in their solidarity. In other words, the “us” that the storyteller brings to life is based less on what “category” describes them (race, gender, language, etc.) than on values they share rooted in common experience. By learning to tell a story of us you can bring those values alive as a source of solidarity, hope, and the motivation to act.

A “Story of Now” communicates an urgent challenge you are calling on your community to join you in acting on now.

The Story of Now focuses on a challenge to your community demanding action now, a source of hope, and the choice of a pathway to action you call on others to join you in taking.



How can I create a shared story for my team using public narrative?

Host a public narrative workshop with your team.

Developing a shared story should be an intentional process, where the team comes together for an hour or two and focuses solely on why they have been called to do this work.

Check out the resources and worksheets below to guide you through the process of developing a shared story with your team.

Public Narrative Workshop: Agenda

Time	Topic
10 minutes	Introduce public narrative
TBD (depends on # of group members)	Story of Self: <i>Each team member shares why they feel called to this work.</i>
10 minutes	Story of Us: <i>You teach the team in the story of Partners In Health.</i>
10 minutes	Story of Now: <i>You share with the team the urgency of this current moment.</i>
20 minutes	Linking Together: <i>A few team members share a full Story of Self, Us, and Now.</i>

Public Narrative Workshop: Introduction

Use the information on pages 1-3 of this guide to tell your team members why we use public narrative, what it is, and why it's important that you as a team create a shared story.

Public Narrative Workshop: Story of Self

Step 1: Read through the guiding questions on page 5 with your team.

Step 2: Ask each member of your team to spend *5 minutes* crafting their Story of Self on page 6. They can write or draw pictures.

Step 3: Each person should then share their Story of Self with the group. Ask for volunteers, or go around in a circle. Make sure that everyone gets a chance to share. Consider timing each person to keep the workshop moving – 2 to 5 minutes per person is best.

WORKSHEET: DEVELOPING YOUR STORY OF SELF

Before you decide what part of your story to tell, think about these questions:

1. Why am I called to leadership? What is my purpose in calling on others to join me in action? What will I be calling on them to do? Focus on the major project on which you are working with your team. Why did you decide to tackle this specific social problem? What stories can you tell to answer these questions?
2. What values move me to act? How might they inspire others to similar action?
3. What stories can I tell from my own life about specific people or events that would *show* (rather than tell) how I learned or acted on those values?

What are the experiences in your life that have shaped the values that call you to leadership in this campaign?

FAMILY & CHILDHOOD

Parents/Family
Growing Up Experiences
Your Community
Role Models
School

LIFE CHOICES

School
Career
Partner/Family
Hobbies/Interests/Talents
Experiences Finding Passion
Experiences Overcoming
Challenge

ORGANIZING EXPERIENCE

First Experience of Organizing
Connection to Key Books or
People
Role Models

A good public story is drawn from the series of choice points that structure the “plot” of your life- the **challenges** you faced, **choices** you made, and **outcomes** you experienced.

Challenge: Why did you feel it was a challenge? What was so challenging about it? Why was it *your* challenge?

Choice: Why did you make the choice you did? Where did you get the courage—or not? Where did you get the hope—or not? How did it feel?

Outcome: How did the outcome feel? Why did it feel that way? What did it teach you? What do you want to teach us? How do you want us to feel?

Use the space below to help craft your story using the structure of challenge, choice, and outcome.

Try drawing pictures here instead of words. Powerful stories leave your listeners with images in their minds that shape their understanding of you and your calling. Remember, articulating the decisions you make in the face of challenges is what ultimately communicates your values.

Challenge:	
Choice:	
Outcome:	

Public Narrative Workshop: Story of Us

After your team has told their Stories of Self, a Story of Us should become pretty clear. The story of us in the room draws on stories of specific experiences that your team shares, and the values underlying all of your stories. In every case, those values have drawn them to this meeting, and this movement for the right to health. Every person, as a part of SPIHC, shares in the story of Partners In Health.

Spend time with your team reading aloud or silently the founding story of Partners In Health:

Since the early 1980s Partners In Health has demonstrated time and time again that the deemed “impossible” is, in fact, possible, in global health.

Paul and Ophelia started their global health equity fight as young people – 22 and 18 respectively – and have remained completely committed to advancing the right to health. Launching efforts in a small squatter’s settlement in the Central Plateau of Haiti called Cange, Paul Farmer, Ophelia Dahl, and community members pledged to prove that you could provide high quality primary medical care in a setting of deep poverty and disruption.

- ☐ These efforts ballooned with the community’s need and with access to more resources from Tom White – a philanthropist and complete supporter of PIH’s efforts to provide a preferential option for the poor in health care. Soon Zanmi Lasante in Cange was providing outpatient services, TB treatment, maternal and child health services, surgical services, and had a primary school.
- ☐ As the HIV epidemic was expanding throughout the Central Plateau and many other marginalized communities, PIH / ZL was one of the first organizations in the world to provide antiretroviral therapy to people living in a poor, rural place. Together, they proved that by utilizing community health workers and “wraparound” support services (i.e. food packages, donkey rental fees, housing support, etc), patients who were poor and were infected with HIV could successfully be treated and would stay on treatment for years after starting therapy. This evidence changed the way that the world viewed HIV treatment in settings of poverty.
- ☐ Similar to the fight to provide HIV treatment to the poor, Partners In Health fought to provide effective treatment to multi-drug resistant tuberculosis. In the 1990s the WHO and others promoted the prevailing wisdom that it was impossible to provide treatment for drug resistant TB. Again: it was considered too expensive, too complicated, too risky, and not worth it to make these “second and third line” drugs available to those living in low-income countries and communities. PIH, by beginning to deliver MDR-TB treatment in Caraballyo, a slum in Lima, Peru, proved once again that you could have very high retention and cure rates in a very difficult and impoverished setting.
- ☐ Now, Partners In Health is demonstrating new platforms of high quality, equitable health care delivery in Rwanda, Malawi, Lesotho, and the Navajo Nation. In partnership with the governments of these nations and their Ministries of Health, PIH is showing how effective cancer treatment, NCD care, and maternal and child health care can be delivered in some of the most difficult settings in the world.

Ask the team: What resonates with you in this story? Circle the top three bullets that most inspire you.

Public Narrative Workshop: Story of Now

A “story of now” is urgent—it requires dropping other things and paying attention, is rooted in the values you emphasized in your story of self and us, and requires action now.

In a story of now, story and strategy overlap because a key element in hope is having a strategy – a credible vision of *how to get from here to there*. A meaningful choice requires action we can take now, action we can take together, and an outcome we can feasibly achieve. A “story of now” is not simply a call to make a choice to act – it is a call to “hopeful” action.

SPIHC's Story of Now

We each have a powerful story to tell about why we're here, advocating for the right to health. Partners In Health's founding stories and ongoing narrative brings us together and highlights the values that we share. Now, it's time to issue a call to action that will drive others to take action on behalf of the poor and marginalized around the world.

Understanding the urgency that this moment presents and issuing a call to action to those around us is essential if we are to build any kind of a useful social movement.

- ☐ Global health has experienced some significant successes since the HIV treatment movement – we've seen millions of people brought on to successful HIV treatment therapy, health systems have been strengthened as a result of the development of PEPFAR and the Global Fund to Fight AIDS, TB, and Malaria, and we as a world have demonstrated the effectiveness of what has been dubbed the “delivery decade.”
- ☐ But, the world is in dire danger of sliding back on these gains and these commitments to the poor and marginalized around the world. Resources dedicated to investing in HIV, TB, and malaria treatment are being cut. Increasingly, donor countries and people of power and privilege seek to invest in narrow, “cost-effective” interventions rather than seeing the wisdom of investing in strong public systems required to protect and advance the basic right to health. Partners In Health is working to fight these trends – and is winning!
Let's look at Rwanda – in the 20 years since it's devastating genocide, they have seen the sharpest *increases in life expectancy ever recorded in human history*.
We've shown that investment in the largest solar-powered hospital in the developing world – University Hospital in Mirebalais, Haiti – clearly bolstered the health system, and also is a major boon to the local economy.
- ☐ And, we're showing that we don't need to lower our sights to only the “low hanging fruit” – choosing only the cheapest and simplest illnesses to treat. In conjunction with the Ministry of Health of Rwanda, along with many partners, we are operating a Cancer Center of Excellence in rural Rwanda that is seeing thousands of cancer patients, and saving lives.

And so, we need you to join us in a movement to change what is considered possible in global health. Will you join me in _____ ?

Public Narrative Workshop: Linking Together

Now it's time to put all three stories together in your public narrative. What are the values that link your story of self, us, and now? What theme links them together? Are there particular images that bring them all together?

Ask for volunteers to try telling a full Story of Self, Us, and Now. They should:

- Retell their Story of Self
- Transition into the story of PIH
- Link this to an urgent call to action

End the session with reflection from the team. Why was this exercise useful? How can we use what we've learned?

When should I use public narrative?

1. Incorporate a Public Narrative Workshop into your Kickoff Retreat.

This is the best time to work on public narrative – when you're just getting to know each other! This will not only build the relationships within your team, it will also get you fired up and committed to the year-long campaign. Check out the Kickoff Retreat Toolkit for more resources on how to host your retreat.

2. Host a Public Narrative Workshop ahead of the Grassroots Giving Challenge.

Being able to tell an effective public narrative will be especially useful during the Grassroots Giving Challenge. Personal fundraising is about relationships – it's about asking your family and friends to join the movement with you. If you can relate why you felt compelled to join, and the urgency of now, your personal fundraising ask will be that much better.

3. All the time!

Public narrative is always a good practice to keep in mind. Here are a few examples where it can be useful:

- When recruiting members of your leadership teams
- When asking friends or large groups to attend your latest event
- During a face-to-face meeting with a member of Parliament
- When asking friends, family, or local businesses for donations or sponsorship