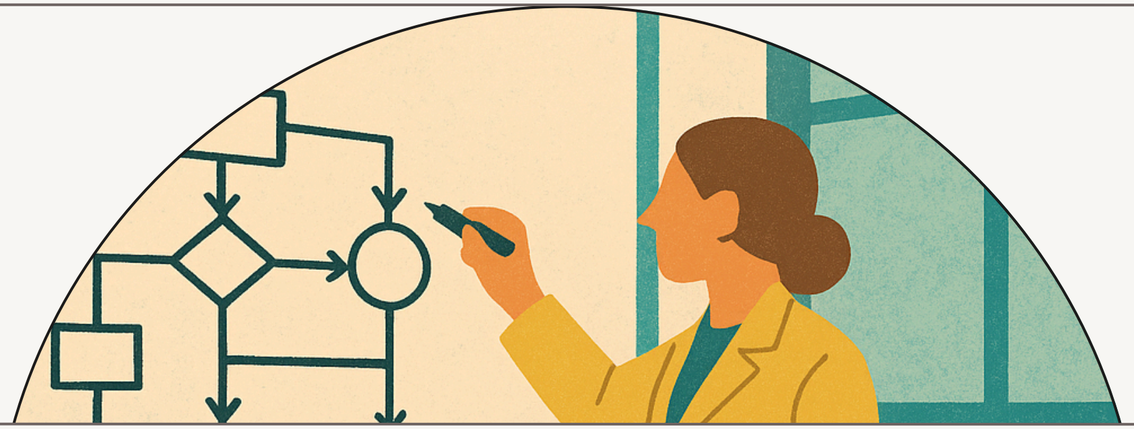


MAKE ME CARE

A STORYTELLING TOOL FOR INNOVATORS BUILDING TRUST, NOT HYPE.



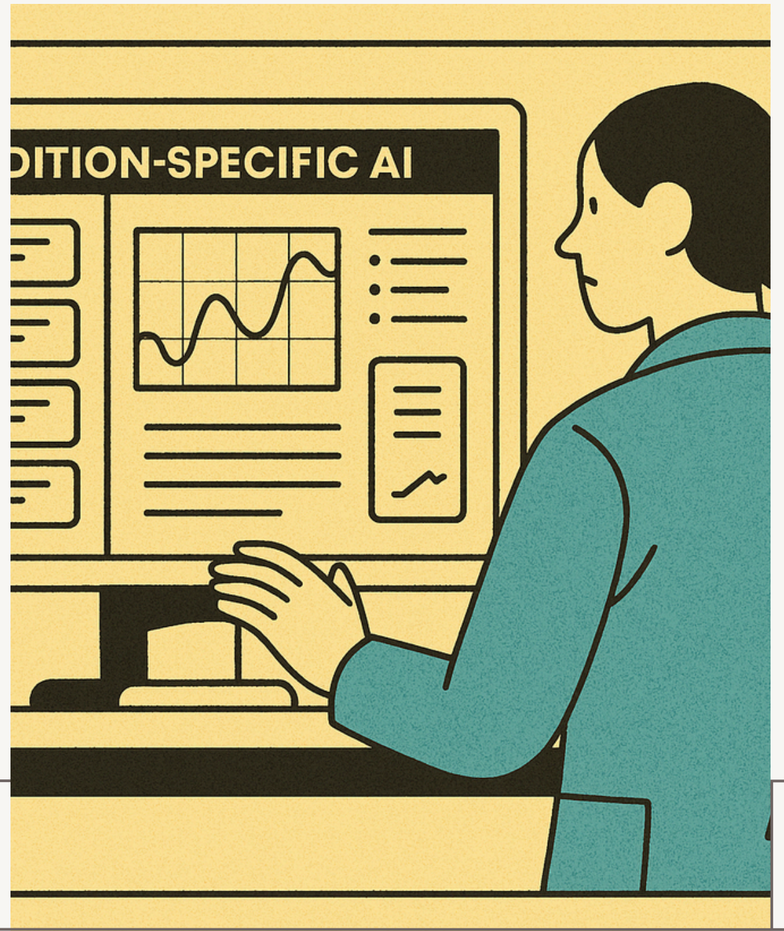
GUIDELINE

Introducing: The Resonance Framework™

Here, you will find a storytelling framework for health innovators, researchers, and responsible technologists.

Use this to shape your pitch, website, or go-to-market strategy with clarity and care.

Or hire me and I'll do it for you ;)



→ EMOTIONAL INTELLIGENCE →

WE BUILD SYSTEMS THAT UNDERSTAND MORE THAN WORKFLOWS — THEY UNDERSTAND MOMENTS.

→ CO-CREATION →

WE DESIGN ALONGSIDE PATIENTS AND PROVIDERS, WITH EQUAL WEIGHT ON EVIDENCE AND LIVED EXPERIENCE.

→ HOLISTIC STRATEGY →

WE BRIDGE CLINICAL UTILITY WITH EMOTIONAL NUANCE — ALIGNING IMPACT WITH CARE.

→ NARRATIVE AS SIGNAL →

WE TRANSLATE PATIENT STORIES INTO DESIGN SIGNALS THAT SHAPE REAL-WORLD SYSTEMS.

WHY STORYTELLING BREAKS DOWN

WHAT

- FEATURE LISTS WITHOUT EMOTIONAL CONNECTION
- GENERIC POSITIONING ACROSS INDUSTRIES
- TEAMS UNCLEAR ON SHARED STORY
- STRATEGY DISCONNECTED FROM USER BEHAVIOR
- MESSAGING FOCUSED ON FUNCTION ONLY

HOW

- PRIORITIZES CLARITY OVER RESONANCE
- CONFUSES INTERNAL ALIGNMENT WITH AUDIENCE CLARITY
- LACKS EMOTIONAL/IDENTITY-LAYER LANGUAGE
- USES BUZZWORDS INSTEAD OF INSIGHTS
- BUILT WITHOUT UNDERSTANDING OF REAL JOBS TO BE DONE

WHY

- PEOPLE DON’T FEEL SEEN OR UNDERSTOOD
- TEAMS CAN’T RALLY AROUND A SHARED NARRATIVE
- STAKEHOLDERS MISINTERPRET WHAT MAKES THE PRODUCT MATTER
- LAUNCHES STALL DUE TO UNCLEAR POSITIONING
- TRUST ISN’T BUILT EARLY ENOUGH TO DRIVE ADOPTION

LET’S FIX THIS—LAYER BY LAYER.

3-Layer Messaging Framework

Functional	**What they're trying to DO**	"Track, forecast, or simplify X"
Social	**What it SIGNALS to others**	"I'm the kind of person who leads change"
Emotional	**What they're trying to FEEL**	"Confidence under pressure"

Let's Back Up And Talk Jobs Theory

Introducing Jobs-To-Be-Done Theory

JTBD: A framework that focuses on the job a user is trying to get done—not features. It asks: what outcome are they hiring this product for?

Examples:
- Count my steps (Fitbit)
- Stop my dog from whining (Hemp Calm Chews)
- Make me look pro on the bike (RAPHA)

Strategic Messaging as Narrative Infrastructure

WHAT	I built a fictional company — BioAxis	**WHY**	to prototype what trust-centered messaging could sound like when it's actually grounded in Jobs to Be Done.

THIS ISN'T BRANDING. IT'S INFRASTRUCTURE.

A value proposition is strongest when it speaks across layers of human motivation.

Let’s Carve Out A Segment As An Example: Healthcare Executives & Innovation Leaders

Functional

Access	Ensure timely access to care in increasingly resource-constrained environments
Balance	Build and govern payvider models that balance cost, care, and coordination
Speed to Care	Accelerate speed to care through intelligent triage and workflow optimization
Shift In Ops	Shift focus from reactive to proactive interventions, especially in ambulatory settings
VBC Outcomes	Optimize value-based outcomes across clinical, operational, and financial domains
Identify & Intervene	Integrate AI to identify, activate, and intervene on condition-specific risks (e.g., sepsis, respiratory, UTI)

Social

Steward + Innovative	Be seen as a steward of scarce resources while advancing innovation
AI Leader	Position their health system as a leader in AI-powered precision care
Systems Thinker	Collaborate across siloes to be viewed as systems thinkers and integrators
Maintain Credibility	Maintain institutional credibility by ensuring privacy, regulatory alignment, and responsible data use

Emotional

Maintain Culture	Maintain a culture of abundance despite real operational and staffing constraints
Feel Confident	Feel confident navigating complex trade-offs between efficiency and empathy
Cultivate Trust	Collaborate across siloes to be viewed as systems thinkers and integrators
Avoid Regret	Maintain institutional credibility by ensuring privacy, regulatory alignment, and responsible data use

Here's how we mapped the messaging across functional, emotional, and identity layers to clarify what matters—and move stakeholders to action.

SOURCE: SOCIAL LISTENING,
TIE AI CONFERENCE IN APRIL

→ Value Proposition →

FOR	translational researchers and health system innovation teams	THAT NEED	to unlock scalable, population-specific insights from biobanked specimens to accelerate precision care and reduce health disparities,
BIOAXIS IS A	next-generation biobanking intelligence platform	THAT	transforms complex biospecimen data into clinically actionable insights by integrating genomic, clinical, and behavioral context at scale.

→ Differentiation Statement →

UNLIKE	traditional biobanking tools that focus narrowly on storage, retrieval, or basic sample annotation,	BIOAXIS PROVIDES	a system-level synthesis engine that prioritizes equitable access, predictive utility, and real-world readiness—turning biobanks into engines of precision impact.

Now that you have a working draft of your value proposition... you can begin to get into the nuance.

Challenges

Fragmentation	Data fragmentation across behavioral, clinical, and social risk domains
Ambiguity	Ambiguity in how to apply predictive AI meaningfully at scale
Legacy Bottlenecks	Legacy workflows that don’t support activation at the point of ambulatory risk
Conflicts	Lack of internal alignment on governance, privacy, and regulatory concerns

Costliness

Readmissions	High readmission and acute escalation costs from missed early signals (e.g., sepsis)
No ROI on Gen AI	Wasted investments in generic AI tools that aren't condition- or population-specific
Staff Shortages	Staff burnout from poorly implemented tech and process overload
Siloed	Inefficiency from rearview-mirror metrics and siloed data usage

Common Mistakes

Looking Backwards	Using AI for retrospective reporting rather than prospective intervention
FOMO	Focusing on flashy tools instead of workflow-embedded decisions
Poor UX/HCI	Deploying tech without training frontline teams or adapting culture
Bad Bets	Misjudging access points and intervention timing in care pathways

Unresolved Problems

False Positives	Difficulty predicting and intervening on high-cost condition drivers (e.g., respiratory, skin, UTI)
Gaps	Gaps in translating AI predictions into actionable care plans
Governance	Ongoing questions about who controls inputs and data responsibility
No North Star	Fragmented approaches to governance and cross-silo synthesis

Expectations

By Condition	AI that delivers customized, targeted, prioritized predictions by risk and condition
Focused ROI	Solutions that align with scarcity-informed strategy while enabling impact at scale
Pinpointing	Visibility into when and where to intervene, not just what to measure
Real-time	Systems that synthesize clinical, behavioral, and social data in real time

Savings

Outpatient	Reduction in avoidable admissions through early outpatient interventions
Triage	Time saved through smarter triage and condition-specific workflows
Optimized	Fewer false positives or generic alerts by training on localized risk factors
Efficiencies	Improved operational efficiency via environment of synthesis

Adoption Factors

Cost of Care	Tools that demonstrate clear ROI by reducing cost of care per condition
Pop. Health + Privacy	Ability to train models on local population data while maintaining privacy and compliance
AI Control	Strong governance frameworks that define access, control, and equity
Org. Change	Cultural readiness and leadership alignment to embrace intelligent automation

User Desires

Restoring Health	Restoring and maintaining health rather than reacting to failure
Reduced burnout	Greater staff confidence and reduced burnout from better-informed decision making
Time	Reclaiming time for human care through automation of low-value tasks
Tech Trust	Reinforced trust in technology as a compassionate extension of care, not a replacement

As you scale beyond your beachhead, you can build upon the initial value proposition for additional market segments.

→ Value Proposition →

FOR	integrated delivery networks and payviders	**THAT NEED**	to proactively manage population health and reduce high-cost admissions using real-time biospecimen and risk data,	
BIOAXIS IS A	precision care orchestration platform	**THAT**	translates biobank and clinical data into targeted, scalable interventions at the point of care—before conditions escalate.	

→ Differentiation Statement →

UNLIKE	fragmented data platforms that silo genomics, risk, and claims data,	**BIOAXIS PROVIDES**	an interoperable infrastructure to forecast condition drivers (e.g., sepsis, UTI, respiratory) and activate preventive workflows across ambulatory and inpatient care.	

→ Value Proposition →

FOR	clinical AI teams and operational leaders in health systems	**THAT NEED**	to generate condition-specific predictions that are clinically relevant and ethically deployable,
BIOAXIS IS A	biobank-powered condition intelligence engine	**THAT**	trains AI on behaviorally, socially, and biologically grounded data to surface high-risk patients early—where intervention can actually shift outcomes.

→ Differentiation Statement →

UNLIKE	general-purpose ML tools that overlook contextual clinical nuance,	**BIOAXIS PROVIDES**	targeted prediction models calibrated for both risk and intervention feasibility—turning insights into action, not just alerts.

→ Value Proposition →

FOR	public health labs and government-led innovation units	**THAT NEED**	to scale precision public health strategies without widening inequities,	
BIOAXIS IS A	public sector-ready biobanking insight platform	**THAT**	empowers agencies to design culturally informed, data-driven interventions rooted in both biology and community context.	

→ Differentiation Statement →

UNLIKE	proprietary precision health tools designed for elite health systems,	**BIOAXIS PROVIDES**	open-access, equity-aligned infrastructure that supports surveillance, prevention, and intervention at the population level—without compromising on scientific rigor.	