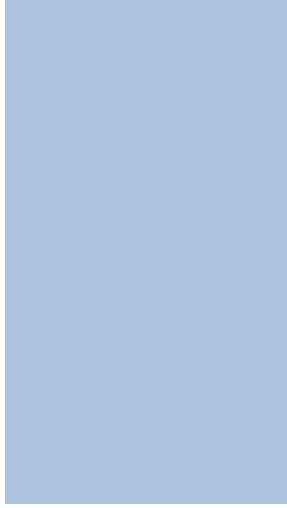


DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR DISEASE CONTROL AND PREVENTION



COMMUNITY MOBILIZATION GUIDE



A community-based effort to eliminate syphilis in the United States.

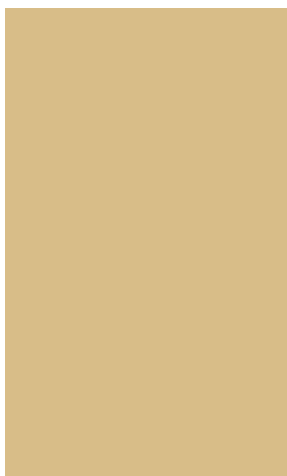
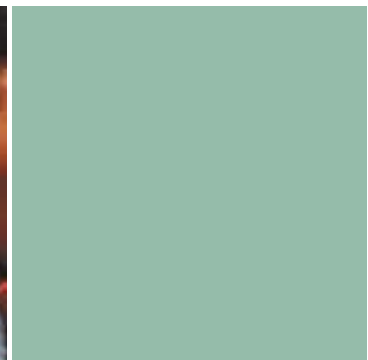




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SECTION I





NOTES



SECTION I

■■■ INTRODUCTION

■■■ WHAT IS SEE?



Syphilis rates in the United States decreased during the 1990s and reached their lowest ever in 2000. However, these rates have begun rising again, increasing slightly in 2001 and more substantially in 2002. Between 2001 and 2002, the overall syphilis rate increased 12.4 percent. In 2003, the rate of primary and secondary (P&S) syphilis in the United States was 4.2% higher than the rate in 2002.

The Syphilis Elimination Effort (SEE) is a national initiative bringing together health care providers, community leadership, policy and opinion makers, and health departments to drive down syphilis rates in the United States. In October 1999, the Centers for Disease Control and Prevention (CDC), in collaboration with federal, state, and local partners, launched a national plan to eliminate syphilis. In the plan, CDC identified key strategies needed for elimination. They are:

- Increase detection and monitoring of syphilis cases.
- Strengthen community involvement and partnerships to implement locally relevant syphilis elimination action plans.
- Respond rapidly to outbreaks to interrupt transmission of the disease.
- Enhance health promotion to promote preventive sexual and health care behaviors to those at risk.
- Expand clinical and laboratory services to promote access to and use of high-quality care for people infected with or exposed to syphilis.



To help move the National Syphilis Elimination Plan forward, CDC and its partners published the Syphilis Elimination Communication Plan in August 2000. This document provides an outline of the national plan's communication goals, objectives, target audiences, strategies, and tactics. The *SEE Community Mobilization Guide and Kit* incorporates many of the recommendations in the Syphilis Elimination Communication Plan. For more information on "The National Plan to Eliminate Syphilis from the United States" and the "Syphilis Elimination Communication Plan," go to the Web site: www.cdc.gov/std/see/.

■■■ ERADICATION VS. ELIMINATION OF SYPHILIS

Eradication of syphilis may not be biologically feasible at this time based on criteria (e.g. vaccine availability) set forth during the Dahlem Workshop. Eradication is described as "permanent reduction to zero of the worldwide incidence of infection caused by a specific agent as a result of deliberate efforts; intervention measures are no longer needed." Elimination of a disease is described as "reduction to zero of the incidence of a specified disease in a defined geographical area as a result of deliberate efforts; continued intervention measures are required." The termination of control measures or interventions is an important factor that distinguishes eradication from elimination. (Centers for Disease Control and Prevention. Principles of Disease Elimination and Eradication. In: Global Disease Elimination and Eradication as Public Health Strategies. MMWR 1999; 48 Suppl.)

The national goals of the SEE are to reduce the total number of P&S syphilis cases to less than 1,000 (0.4 cases/100,000 people) and to make at least 90 percent of U.S. counties syphilis free.



SECTION I



INTRODUCTION

WHO IS AFFECTED BY SYPHILIS?

Syphilis is concentrated in a small number of counties – most of them urban, or in the South. The 2003 Sexually Transmitted Disease Surveillance Report indicates that half of the nation's reported P&S syphilis cases were concentrated in 18 counties and 1 city. While race/ethnicity is not



a risk factor, some communities are harder hit by syphilis than others.

Communities burdened by poverty, racism, unemployment, low rates of health insurance, and inadequate access to health care are most affected.

Specifically, communities of color—particularly African-Americans and Hispanics who are living in poverty—are disproportionately affected.

The burden of syphilis is also heaviest in those who engage in high-risk sexual behavior, such as having multiple sex partners, unprotected sex, etc. The number of reported syphilis cases increased 2.1% between 2000 and 2001. In 2001, the rate of syphilis in men in the United States increased for the first time in 10 years. This pattern was observed in all racial and ethnic groups during 2000-2003. Rates in women continued to decrease. In 2003, the rate of reported P&S syphilis among men was 5.2 times greater than the rate among women. This, in conjunction with reports of outbreaks of syphilis in men who have sex with men (MSM), indicates that syphilis affects MSM disproportionately.

Eliminating syphilis will reduce one of the most glaring racial disparities in public health. In 2003, the rate of infectious syphilis among African-Americans was 5.2 times higher than the rate for non-Hispanic white Americans.

WHY IS IT SO IMPORTANT TO ELIMINATE SYPHILIS NOW?

- In 2003, P&S syphilis cases reported to CDC increased to 7,177 from 6,862 in 2002, an increase of 4.6 percent. The congenital syphilis rate peaked in 1991 at 107.3 cases/100,000 live births, and declined by 90.4% to 10.3 cases/100,000 live births in 2003. However, this rate is still 10 times higher than the Healthy People 2010 target of 1.0 cases/100,000 live births. Communities need to work together to build and maintain awareness and outreach at the local, state, and federal levels until syphilis is eliminated.
- Eliminating syphilis also will impact the public health care system by:
 - Decreasing the spread of HIV infection. Syphilis increases HIV transmission at least 2-5-fold.
 - Improving infant health through the elimination of congenital syphilis. Syphilis can be transmitted from mother to child.
 - Reducing health care costs.
 - Strengthening our public health capacity by putting effective sexually transmitted disease (STD) prevention and screening programs in place.

SEE'S COMMUNITY MOBILIZATION EFFORT AND ITS CHALLENGES

As explained in The National Plan to Eliminate Syphilis from the United States and the Syphilis Elimination Communication Plan, eliminating syphilis from our communities cannot be done by one person, organization, or institution alone. It needs the support of the community as a whole. Becoming mobilized as a community is a key factor in the success of SEE.



SECTION I

■■■ INTRODUCTION

Together we can eliminate syphilis and strive for a future without this disease.



Through mobilization, communities can make syphilis education a part of community health programs, develop efforts to reach at-risk populations, and increase awareness in policy makers and community leaders regarding the

importance of eliminating syphilis from their communities. This effort can promote increased syphilis screenings and reporting of results by health care providers.

While this guide and the kit provide you with the tools and counsel for conducting community mobilization efforts, it is important to recognize and prepare for challenges you may experience along the way. These challenges may include:

- Despite the realities of syphilis in your community, syphilis may not be a high priority for many organizations, communities, health care providers, and policy makers, or even for your own health department. Communities often are concentrating on other public health and social concerns such as asthma, cancer, heart disease, HIV/AIDS, drug abuse, homelessness, crime, and poverty.
- Financial and staffing resources of volunteer organizations are limited.
- There is a lack of awareness that syphilis is an STD that is still affecting people.
- There are social stigmas and taboos attached to this disease.



- There may be a lack of interest or sense of urgency for increased testing for syphilis.

Becoming mobilized as a community is a key factor for the success of SEE.

■■■ WHO SHOULD USE THIS GUIDE

This *Community Mobilization Guide* is designed to help state and local health departments build their capacity and skill in mobilizing a community-wide effort to eliminate syphilis from their areas. The materials will help health departments reach out and deliver important information about syphilis elimination to others in the community who play important roles in wiping out this disease. The kit contains materials designed specifically to inform and educate health care providers, community-based organizations (CBOs), faith-based organizations (FBOs), and their leaders, policy makers, and the local media.

■■■ HOW TO USE THIS GUIDE

The *Community Mobilization Guide* is organized into topics on how to reach and mobilize health care providers, policy makers and the media. Each section provides background on the target audience and suggested steps and actions to take to garner support from each. The sections that follow are:

- ***Mobilizing the Community***—An overview of how to mobilize a community, including a special section on planning and conducting outreach activities and mobilizing your community during a syphilis outbreak.
- ***Mobilizing Community-Based and Faith-Based Organizations (CBOs and FBOs)***—Techniques for building partnerships with CBOs and FBOs.



SECTION I



INTRODUCTION

- **Informing Policy Makers about Syphilis Elimination Efforts**—Tips on providing information to policy makers and explaining the importance of syphilis elimination in your community.
- **Mobilizing Health Care Providers to Eliminate Syphilis**—Tips for increasing the support of health care providers in the private and public health care systems.
- **Working with the Media**—Strategies and methods for using the media to increase broad awareness and understanding of the issues surrounding syphilis in your community.
- **References**—Additional Web sites and resources.

MATERIALS KEY

Throughout the guide, you will find suggestions on how and when you can use the materials provided in the SEE kit. Each folder in the kit is labeled according to a location number-letter identifier. The Materials Key below lists each kit item and its location in the kit. Whenever a kit item is referenced in the guide it will be followed by its location number-letter identifier.

1A	SEE Invitation	1J	Partner Thank You Letter	4A	Full-Page Print Ad
1B	SEE Poster	1K	Community-Based Organization Contact List	4B	Three Small Print Ads
1C	Involving the Faith Community in Syphilis Elimination Brochure	1L	National Public Health Information Coalition (NPHIC) Contact List	4C	Radio PSA Scripts
1D	Getting Your Community Involved Brochure	1M	Event Banner	4D	Op-Ed Letter to Newspapers
1E	Syphilis in the United States: The Facts Brochure	1N	Audience Profiles	4E	Syphilis Key Messages
1F	Syphilis and Affected Communities Brochure	2A	Syphilis—Physician’s Pocket Guide	4F	Tips for Effective Online Media
1G	Strategic Plan of Action	2B	A Guide to Taking a Sexual History	4G	Crisis Communication Tips
1H	Coalition Meeting Agenda	2C	Sexual History Discussion Form	4H	Communication Tools List
1I	Partner Invitation Letter	3A	Letter to Policy Maker	4I	Contact List of Public Affairs Directors in 19 HMA Departments of Health
		3B	Policy Maker Contact List	4J	Sample Media Advisory



SECTION II





NOTES



SECTION II



■■■ MOBILIZING THE COMMUNITY

■■■ WHAT IS COMMUNITY MOBILIZATION?



Community mobilization engages all sectors of the population in a community-wide effort to address a health, social, or environmental issue. It brings together policy makers and opinion leaders, local, state, and federal governments, professional groups, religious

groups, businesses, and individual community members. Community mobilization empowers individuals and groups to take some kind of action to facilitate change.

Part of the process includes mobilizing necessary resources, disseminating information, generating support, and fostering cooperation across public and private sectors in the community. Anyone can initiate a community mobilization effort — the STD staff of local or state health departments, CBOs, or concerned physicians and other health professionals. All it takes is a person or a group to start the process and bring others into it.

■■■ HOW CAN ORGANIZATIONS BENEFIT FROM COMMUNITY MOBILIZATION?

The most significant benefit is doing something to help address an issue impacting their community to save valuable resources. By getting involved, community- and faith-based organizations, health care professionals, and policy makers will jointly take actions that should result in the elimination of syphilis in their community.

Beyond the great satisfaction and achievement of eliminating an STD, community mobilization can position your organization as a leader in the community, possibly bringing in new resources.

■■■ WHY MOBILIZE THE COMMUNITY

It can:

- Infuse new energy into an issue through community buy-in and support.
- Expand the base of community support for an issue or organization.
- Help a community overcome denial of a health issue.
- Promote local ownership and decision-making about a health issue.
- Encourage collaboration between individuals and organizations.
- Limit competition and redundancy of services and outreach efforts.
- Provide a focus for prevention planning and implementation efforts.
- Create public presence and pressure to change laws, policies, and practices — progress that could not be made by just one individual or organization.
- Bring new community volunteers together (because of increased visibility).
- Increase cross-sector collaboration and shared resources.
- Increase access to funding opportunities for organizations and promote long-term, organizational commitment to social and health-related issues.



SECTION II



MOBILIZING THE COMMUNITY

WHO WILL YOU NEED TO MOBILIZE IN THE COMMUNITY?

For community mobilization efforts addressing syphilis elimination, it will be most effective to gather the support of those who have the most interaction and influence with the populations most at-risk for syphilis. They include:

- CBO and FBO leaders,
- Health care providers, and
- Local and state policy makers and opinion leaders (support from policy makers and opinion leaders can be achieved through efforts of CBOs and FBOs).

Refer to the Syphilis Elimination Communication Plan for an expanded list of examples of whom you might want to include in each of these categories at www.cdc.gov/std/see/.



The chapters in this guide will provide you with action steps and resources for generating support and involvement from each group. There is also a section on how to work with the media to raise awareness on syphilis elimination activities. The kit includes a variety of materials specifically developed for these four target audiences.

MOBILIZING YOUR COMMUNITY TO ELIMINATE SYPHILIS

Mobilizing your community to support syphilis elimination efforts may seem very challenging — yet, if you break the effort into the following phases, you will be able to manage it in a focused and systematic fashion.

Phase I: Planning for Community Mobilization

Phase II: Raising Awareness

Phase III: Building a Coalition

Phase IV: Taking Action

Phase V: Monitoring and Evaluating

PHASE I: PLANNING FOR COMMUNITY MOBILIZATION

Before you begin any syphilis elimination activity, you must undergo a planning phase to help determine the many factors that can influence your effort.

Begin this phase by:

- 1 **Conducting a Community Assessment.**
 - You will need to conduct a Community Assessment to learn where your community currently stands in regard to syphilis elimination. (Who is currently involved, what has been accomplished, and what has not happened, opportunities, barriers, gaps, etc.)
- 2 **Involving the right people.**
 - Do not try to conduct a community-wide syphilis elimination effort just through your health department. You will want to form a community coalition of health professionals, CBOs and FBOs (and their leaders), community activists and others who have an interest in local syphilis elimination activities. Make sure that you encourage open communication.



SECTION II

MOBILIZING THE COMMUNITY

3 *Selecting a strong leader.*

- Appropriate leadership is key to the success of your community mobilization effort. Whether it is a person in the health department or a member of your community coalition, this leader needs to be creative and have the ability to bring together people who have different perspectives and vested interests to support the coalition's vision.
- This leader needs to become an agent of change who is passionate about the issue and able to organize members of your coalition and its target audiences into change agents.

4 *Defining goals and strategies.*

- Your goals help to define what must be accomplished to achieve your vision.
- Strategies identify the actions you will take to meet your goals. How will you tackle the strategies needed to eliminate syphilis?
- Set goals that you think can be achieved and choose strategies that you think can be implemented with the resources (funding, manpower, equipment) you have or believe you can obtain.

5 *Developing ways to regularly measure progress.*

- Creating change takes time. Tracking your achievements will help you maintain the momentum necessary for success. Early in your mobilization planning process, identify your short- and long-term goals, as well as how and when you will measure when you have achieved those goals.

6 *Identifying funding and other resources.*

- All community mobilization initiatives require ongoing financial and resource support.
- Identify financial and other resources you will need and possible sources to meet these needs. If you need additional resources, how will you make the case for them? Who are the people with whom you need to speak? Who, in your coalition, would be the best person(s) to do this? Are they willing to take on this role? How quickly does this need to be done?
- Look for creative ways of identifying and securing needed resources. Potential funding sources could include:
 - Centers for Disease Control and Prevention (CDC)
 - State and city health departments
 - Pharmaceutical company grants
 - University grants
 - Foundation grants
 - Private funding
- Seek support from community grants. The Foundation Center (www.fdncenter.org) can provide community coalitions with a wealth of information and resources to help secure funding for community syphilis elimination projects.
- CDC's National Prevention Information Network (NPIN) maintains a searchable database of federal, regional, local, and private funding opportunities. Go to www.cdcpin.org/scripts/locates/LocateFund.asp for more information.



SECTION II



■■■ MOBILIZING THE COMMUNITY

■■■ HOW TO DO A COMMUNITY ASSESSMENT?

The following questions will enable you to do a basic community assessment with community leaders and can be adapted and revised as needed:

- ① **Who is affected most by this disease?**
 - What are their race, ethnicities, and gender?
 - What are their socio-economic levels?
 - Where do they live?
 - What other information do you have on this population?
- ② **What is the impact of this disease in the community?**
 - For the individuals most affected?
 - For their families?
 - For this community?
- ③ **What are the barriers?**
 - Are there barriers to addressing syphilis in the community (social, political, economical, ect.)?
 - Can they be overcome and if so, how?
- ④ **What are the resources?**
 - What kind of resources does your organization and the community need to address syphilis elimination?
 - Where and how can these resources be acquired?
- ⑤ **What has been done in the past to eliminate syphilis in the community?**
 - Who was involved?
 - Have efforts been ongoing?
 - If efforts already exist, can those who are already involved be enlisted to help?
 - What are the results?
- ⑥ **What does the community know about syphilis?**
 - What are the myths and beliefs surrounding syphilis, if any?
 - How can these perceptions be changed, if necessary?
- ⑦ **What is the community's attitude toward syphilis elimination?**
 - Do they see it as an important issue?
 - If not, what will make it important?
 - What do they (the community) recommend we do to eliminate syphilis?



SECTION II

MOBILIZING THE COMMUNITY

ACTION STEPS

You can begin planning your community assessment to identify critical issues and to plan future interventions by:

- Interviewing and spending time with community members,
- Conducting listening sessions and public forums,
- Reading available relevant government reports, and
- Contacting colleagues in other branches of your health department and other health departments in your region.



Identifying and working with community leaders and others involved in syphilis elimination will provide you with a wealth of information about syphilis elimination activities in your community.

Once your planning for community mobilization is complete, you are ready to move onto the next phases of Awareness Raising and Coalition or Partnership Building.

Note: Depending on your assessment, the order in which these phases are conducted may be interchanged.



PHASE II: AWARENESS RAISING

The Community Assessment will help guide you in determining the organizations and individuals you should contact, and the best way to reach them.

Begin this phase by:

- 1 Preparing a community impact statement based on the syphilis problem in your community using the Community Assessment and other available information. The community impact statement should be available in different formats (e.g., editorial, letter, press release).
- 2 Determining the organizations, agencies, and individuals who should be involved in this effort and how you should get information to them (use information from Phase I and add to it as necessary).
- 3 Approaching a wide spectrum of community leaders, representing:
 - Private foundations
 - State and local health coalitions
 - FBOs
 - Non-traditional community leaders from affected neighborhoods (e.g., convenience store owners, hairdressers, barbers, homeless shelter and soup kitchen personnel)
 - Policy makers
 - Local medical societies
 - School-based clinics
 - Health care providers
 - Non-profit hospitals
 - CBOs



SECTION II



MOBILIZING THE COMMUNITY

- Health insurance companies
 - Correction facilities, sheriff's office, and police departments
 - Drug treatment centers
 - Community health centers
 - African-American colleges and universities
 - African-American fraternities and sororities
 - Hispanic and other ethnic organizations
 - Gay men's organizations
 - Community activists
 - Neighborhood associations
 - AIDS service organizations (ASOs)
- 4 Preparing the case for the issue (e.g., fact sheets, case histories) and making it relevant to your audience.
 - 5 Developing an ongoing dialogue about the issue with those with whom you want to partner.

ACTION STEPS

- Identify key messages to attract attention to the problem and its impact in your community. **4E**
- Create a list of appropriate organizations and representatives to target. **1A 1L 1K 3B 4E 4I**
 - Develop background materials for interested parties.
 - Start to contact and brief those you would like to involve.
 - Send out letters and invitations. **1A 1I**
 - Follow up with a phone call to the invitees to get a sense of their interest.

PHASE III: BUILDING A COALITION

A community mobilizes when people become aware of a common need and decide together to take action to create shared benefits. Those concerned about the issue must create the momentum for mobilization — or it cannot be sustained over time. Once you decide to mobilize your community to conduct or expand syphilis elimination activities, you need to build your community coalition and partnerships.



Depending on the syphilis elimination activities underway in your community, the goals of your community coalition could include increasing overall awareness of the need for syphilis elimination, increasing syphilis screening and reporting, or greater local funding for CBOs and FBOs that want to hold syphilis education and outreach programs. By building a community coalition that may have representation from health care providers, policy makers, and CBOs or FBOs leaders who serve, treat and represent your target audience, you will build a unified voice and support for syphilis elimination efforts. Remember — there is strength in numbers.

As you begin this phase, keep in mind the need to have the group develop a **unified vision**.

- A vision is a shared statement of what you want the initiative's success to look like. It unifies the different community segments that make up your community coalition.
- The coalition's goals, strategies, and activities will support this vision.
- When developing this vision, your coalition needs to ask itself: How would the community benefit by reducing this disease to undetectable levels?
- The coalition's vision should reflect the findings of the Community Assessment.



SECTION II



MOBILIZING THE COMMUNITY

Begin this phase by:

- 1 Inviting all interested individuals to a planning meeting. Use the responses to the letter and invitation as a starting point. **4B**
- 2 Identifying, through the coalition team, other community and professional networks that can be tapped and enlisted in syphilis elimination efforts.
- 3 Preparing and training team members to become advocates for syphilis elimination. **4B**

ACTION STEPS

- Schedule the initial meeting.
 - Invite individuals who responded and showed interest.
- At the first meeting, determine your community coalition goals. **1B**
- Brainstorm with the participants to identify other prospective stakeholders and community leaders and members you want to join the coalition. Determine why they would support community syphilis elimination efforts, how to best recruit them (use information from Phase II) and whether they have been involved in previous activities similar to this coalition. Refer to your Community Assessment findings for insight.



- Ensure your coalition is open and diverse and includes some “key players” that you know will take an active role.
- Share with prospective members of the coalition a copy of the Community Assessment, community impact statement, and any other appropriate documents prepared up to this point.
- Develop a shared vision, mission statements, and feasible goals. Try to establish the following during the first few meetings:
 - The coalition’s vision.
 - The coalition’s goals.
 - The need for any subcommittees, and who will begin to draft the coalition’s strategic plan of action. **1C**
 - A meeting schedule.

MATRIX FOR IDENTIFYING PROSPECTIVE STAKEHOLDERS AND OTHER COMMUNITY COALITION SUPPORTERS

Individual or Organization Name	Why They Would Support Syphilis Elimination Efforts	Skills and Resources They Bring to the Table	How They Should Be Recruited	Pre-involvement, Orientation, and Information Needs	Notes



SECTION II



MOBILIZING THE COMMUNITY

PHASE IV: TAKING ACTION

With your community coalition in place, and goals and vision established, you are ready to move into an action and outreach phase.



As you develop and implement your action plan, keep in mind the importance of increasing the awareness and knowledge of your target audience and at-risk populations about syphilis (e.g., detection and treatment of the disease, impact on the community, prevention, etc.)

Begin this phase by:

- 1 Developing a strategic plan of action based on your community's needs. The plan should include specific steps, a timeline, and needed resources.
- 2 Delegating the responsibilities evenly among coalition members.
- 3 Identifying and preparing additional materials to be used.
- 4 Implementing actions toward the key target audiences (other community organizations as well as the at-risk populations). Consider the following activities:
 - Strengthen community involvement and partnerships.
 - Develop health promotion materials and culturally competent interventions. See examples at www.cdc.gov/std/commdata and the STD Prevention Edition of CDCynergy.)

- Develop a rapid outbreak response plan (who does what in the case of an outbreak)—refer to Tips for Mobilizing Your Community During a Syphilis Outbreak on page 21.
- Expand clinical and laboratory services.
- Improve access to and use of health services, such as taking clinical and laboratory services out to where the affected populations are.
- Conduct health promotion activities such as distributing posters or brochures, or holding a series of community health events.
- Develop and implement media and public outreach, when appropriate.
- Develop community capacity to help inform policy makers and key health care providers.

ACTION STEPS

Once you have your community coalition members on board and committed, you are ready to devise a strategic plan of action that will guide you and your coalition in implementing syphilis elimination activities. When developing a strategic plan of action, refer to the Community Assessment Report and to the Vision and Mission Statements developed during earlier phases. The following is an outline of the key components of a strategic plan of action that can be adapted to your needs.



SECTION II

■ ■ ■ MOBILIZING THE COMMUNITY

Strategic Plan of Action

- 1 **Vision Statement** – *Your vision is your dream; it's the way you think things ought to be.*

Example:

- Build the public health capacity needed to eliminate syphilis, to control other infectious diseases, and to ensure reproductive health.

- 2 **Mission Statement** – *What is going to be done and why.*

Example:

- To become one of the leading communities in eliminating syphilis by increasing monitoring and evaluation of syphilis cases, creating a comprehensive community mobilization effort, expanding accessible treatment and counseling facilities, and conducting health promotion activities. Eliminating syphilis in this community will have direct implications for the public resources available for other diseases, build public health capacity where it is needed the most, and decrease a glaring racial disparity in health.

- 3 **Goals** – *Your goal(s) should have a specific outcome attached. You should have short-, mid-, and long-term goals.*

Example(s):

- Increase awareness about syphilis in our community by outreach (short-term).
- Increase testing and treatment of at-risk populations (mid-term).
- Eliminate syphilis in our community (long-term).



- 4 **Objectives** – *Specific measurable results of your work. A plan may have several objectives; however, each objective must support the broader goals.*

Examples:

- By Fall 200_, have an additional new community health clinic in the most affected neighborhoods to conduct syphilis screenings for at-risk populations.
- Have the state medical society endorse the coalition's plan of action and include the endorsement in all their materials to physicians by 200_.
- Increase testing and treatment hours by at least an hour in 15% of our health facilities.

- 5 **Target Audiences** – *Who in the community do you need to reach to achieve your objectives? Do you have more than one target audience?*

Example:

- Emergency room nurses and physicians
- At-risk populations
- Leaders of CBOs

- 6 **Strategies** – *Broadly describe the paths you are going to take to achieve your objectives. There may be more than one strategy identified to help reach each objective. Each strategy must support the objectives.*

Examples:

- Brief the president and board of the state medical society on the need to endorse local syphilis elimination efforts.
- Change STD clinic environments to make certain that they are patient-friendly and non-judgmental regarding syphilis screening and treatment.
- Provide no- or low- cost testing in public health clinics.



SECTION II



MOBILIZING THE COMMUNITY



7 **Actions** – *Actions incorporate the specifics of what will be done, by whom, by when, and with what resources. They will ultimately result in the achievement of the objectives you have created.*

Examples:

- Reverend Jones will give a talk on the need for the community to support syphilis elimination efforts at a Wednesday night church supper in August 200_.

As you determine your actions, remember the following tips:

- You can have different actions to meet your different objectives and strategies.
- Your actions may be very specific and be directed toward different target audiences such as policy makers, health care providers, STD clinic managers, community center directors, etc.
- What do you want to change with your actions? A certain behavior, perception, or environmental norms?
- If people are going to make a behavior change, what changes in their environment need to occur to make that happen?
- Prioritize your actions. You may not be able to do everything at once due to limited financial and labor resources.

TIPS FOR ESTABLISHING A SUCCESSFUL COMMUNITY COALITION

Meetings:

- Schedule regular meetings with coalition members.
- Create and use an agenda to keep meetings well-structured, time-efficient, and focused.
- Record and share the meeting proceedings with all coalition members.

Coalition:

- Delegate leadership and authority, and assign responsibilities throughout the coalition. Let different members take responsibility for various outreach efforts, so they are a contributing force on the coalition.
- Set attainable goals. Celebrate large and small accomplishments along the way.
- Make sure that all coalition members agree to the goals of the coalition.
- Keep coalition members apprised of all coalition activities as well as those performed individually by members. Make sure there is regular communication among coalition members (e.g., bi-monthly meetings, e-mail, newsletter, etc.), and promote effective communication.



SECTION II



MOBILIZING THE COMMUNITY

Timeline and Responsibility Project Chart



Develop a timeline and responsibility project chart to help keep all coalition members, partners, and volunteers aware of activities and who is involved.

Remember to include short-term, mid-term, and long-term activities.

Update the chart as needed. Below is an example of a Timeline and Responsibility Project Chart for executing your plan.

WORKING ON A LIMITED BUDGET

Almost every community mobilization effort has a limited budget. It is rare to have the opportunity to coordinate a community-wide outreach activity with unlimited resources.

Carefully consider available funding and other resources. The coalition should not set itself up for defeat because there are no potential avenues for securing needed funding and resources. When developing the coalition's plan of action, estimate the cost of each activity to the extent possible. The coalition may not want to consider actions that they know cannot be supported financially at this time.

The members should ask: What are the creative alternatives to producing materials or conducting activities at a lower cost? Can we get some services or activities on a "gratis" or "pro bono" basis? If so, from whom?

TIMELINE AND RESPONSIBILITY PROJECT CHART

<i>Actions (What Will Be Done)</i>	<i>Person(s)/ Organization(s) Responsible</i>	<i>Date Completed (By When)</i>	<i>Resources Required (At What Cost)</i>	<i>Collaborators or Partners that Are Needed</i>
Put together a list of local organizations working on health initiatives	Jane	March	-Jane's time -Cost of copying	State Health Department
Contact local representatives with similar health platforms	Rick	May	-Rick's time -Cost of reproducing necessary documents	Public Affairs Department



SECTION II



MOBILIZING THE COMMUNITY

ACTION STEPS

- Evaluate the type of financial resources you have and the resources you need based on the information gathered in Phase I.
- Create a budget document to track these resources. Identify resources by categories (e.g., grants, in-kind services, volunteers, etc.). Depending on the complexity of the budget, you may need coalition members to volunteer to serve as treasurer, accountant, and grant writer of the community mobilization effort. Maintaining the budget by categories will also help you keep track of deadlines (e.g., grant proposal submissions) and ensure that projects can be completed with available resources.
- Encourage partners to donate financial support and services.
- Prioritize activities based on funding that is available or will be available in the future.

Executing Your Plan

Be realistic in the timing of activities, and do not try to do everything at once. Behavior change and awareness-building take time. Long-term behavior changes usually occur gradually. Thus, activities should be phased in over time, with the aim of first accomplishing those activities that will bring the greatest return in the shortest amount of time.

PHASE V: MONITORING AND EVALUATING

With any community mobilization effort, it is important to keep track of activities that are most effective in your community and those that may need to be improved upon to more successfully meet your goals.

Begin this phase by:

- 1 Planning how you will track your efforts and evaluate progress, based on the strategic plan of action.
- 2 Determining how you will measure which community mobilization actions are bringing the greatest return, so you can plan to increase or replicate those and minimize, revise, or modify the ones that are less effective.

ACTION STEPS

- Determine the type of evaluation you plan to conduct and how you will collect data.
- Develop both process (e.g., number of brochures distributed within a certain timeframe) and outcome (e.g., number of people who know about syphilis) measures.
- Research and secure an evaluation contractor if needed.
- Determine when in the timeline you are going to carry out monitoring and evaluation activities. (It is recommended to do this throughout your project – not only at the end.)
- Develop evaluation plans and forms.
- Keep coalition members involved in the evaluation activities, as their participation in the data collection and agreement on the follow-up actions are critical to the ongoing success of the coalition.



SECTION II



MOBILIZING THE COMMUNITY

TIPS FOR MOBILIZING YOUR COMMUNITY DURING A SYPHILIS OUTBREAK

To be prepared for a potential syphilis outbreak emergency in your community, you need to immediately begin to work on a detailed rapid outbreak response plan. In the event that your community is affected by a syphilis outbreak prior to having an outbreak plan in place, the health department should consider the following:

- Promptly contact the CDC regarding any syphilis outbreak.
 - Coordinate and conduct meetings with state and/or local agencies and local SEE partners to discuss how your community will be affected by the outbreak. Include a discussion of the impact of behavioral, social, and health care services and the role each organization will play in managing the community's outbreak response.
 - Make sure CDC is aware of your plan to manage a community outbreak response and your media plan.
 - Identify and establish a method of rapid communication (i.e., telephone, e-mail) with local SEE partners to share reports, updates, and other information.
 - Work with SEE partners to determine the messages and calls to action that members of the community need to know.
 - Work with CDC and other organizations to identify the most appropriate methods of communicating messages to constituents (e.g., public service announcements and other media outreach, organization meetings, and correspondence). Make sure that the messages have been cleared through all the necessary channels, including CDC.
 - Make a list of “who will do what” and update this list regularly.
- Develop a method of tracking community response to your plan. Include information requests and facts about patients seeking screening and treatment.
 - Conduct an epidemiologic, social, and behavioral assessment as appropriate.
 - As needed or required, communicate and work across national, state, and local boundaries.
 - Evaluate actions taken during a syphilis outbreak response.
 - Depending on your situation and on the extent of the outbreak, additional steps may be required. For more information, obtain a copy of the National Plan to Eliminate Syphilis at www.cdc.gov/std/see/.



SECTION II



MOBILIZING THE COMMUNITY

FOR MORE INFORMATION ON EVALUATION VISIT:

- www.cdc.gov/eval/resources.htm
- www.ctb.ku.edu/tools/en/part_J.htm

Additionally, there are many evaluation-related resources on CDCynergy-STD Prevention Edition CD-ROM. You may order it online at www.cdc.gov/std.

FREQUENTLY ASKED QUESTIONS

- 1 ***Should our mobilization efforts also target people who are at high-risk for syphilis?*** The community mobilization effort outlined in this guide does not directly address the at-risk population. The primary focus of your community mobilization efforts is to bring together CBOs, FBOs, health care providers, and policy makers to help your health department. Once mobilized, these individuals and organizations can help solve health or social issues by providing services and resources, by influencing environmental factors, and by helping you reach and influence the at-risk populations.
- 2 ***Won't mobilizing my community to eliminate syphilis require more time and resources than working alone?*** Initially, it may take more time and resources to form a coalition, but if you engage strategic community partners with specific strengths, over time you will find it to be more efficient to share the various tasks and activities associated with eliminating syphilis in your community. Remember, the ultimate goal is the elimination of syphilis in your community. This is a long-term endeavor and will require ongoing involvement to sustain the accomplishments.

- 3 ***We have an extremely tight budget that limits our ability to get our mobilization effort started. Should we even consider trying to mobilize the community, or should we wait until our health department has additional funding?*** Only you and senior health department staff are able to assess whether or not tackling a community mobilization effort to eliminate syphilis should be a priority right now. Also, recognize that once formed, the coalition will expand your pool of resources. Keep in mind that a lot of the preliminary information you need to start your community mobilization effort can be obtained by making a few calls to colleagues within your health department, as well as a few key CBO and FBO leaders. The reference section provides ideas for obtaining resources.

TIP: *If you don't have a computer or access to the Internet, you can use the computer and services of your local library for the necessary research.*

RESOURCES

- 1A SEE Invitation
- 1C Strategic Plan of Action
- 1B Coalition Meeting Agenda
- 1I Partner Invitation Letter
- 1K Community-Based Organization Contact List
- 1L National Public Health Information Coalition (NPHIC) Contact List
- 3B Policy Maker Contact List
- 4E Syphilis Key Messages
- 4I Contact List of Public Affairs Directors in 19 HMA Departments of Health



MOBILIZING COMMUNITY- BASED AND FAITH-BASED ORGANIZATIONS TO ELIMINATE SYPHILIS





NOTES



SECTION III

■■■ MOBILIZING COMMUNITY ORGANIZATIONS TO ELIMINATE SYPHILIS

■■■ PARTNERING WITH COMMUNITY-BASED ORGANIZATIONS TO ELIMINATE SYPHILIS



Syphilis elimination will not be possible without significant buy-in, support, and involvement from community leaders and the CBOs they often (but not always) represent. It is important for state and local health departments

to build support for efforts that reach out, communicate, and partner with community leaders and organizations within affected communities. Their involvement is essential especially during an implementation of a rapid outbreak response, expanding clinical and laboratory services, and for enhanced health promotion interventions.

Without community buy-in, there can be no community partnerships. These groups must be equal partners in the process and can provide necessary linkages between federal, state, and local efforts. Community groups will help define community needs and assets, how those needs can be appropriately and effectively addressed, and how assets can be disseminated. Community leaders need to be kept informed about syphilis elimination efforts in their communities and be actively engaged in identifying what steps need to be taken to support these efforts.

The involvement of community-based leaders and organizations can:

- Facilitate communications that are more effective.
- Restore, build, and maintain trust in affected populations. It must be acknowledged that distrust exists in certain affected communities (e.g., Tuskegee Study).
- Improve access to and utilization of testing, treatment, and health promotion services.
- Ensure the development of culturally competent interventions.



- Encourage participation of community members to build community capacity to eliminate syphilis.

Community-based organizations can get involved with syphilis elimination activities in many ways. They can:

- Contact policy makers at local and state levels and inform them about the increase of syphilis in the community and talk with them about ongoing efforts in the community to address the problem.
- Invite a community leader, policy maker, or a guest speaker who is involved in syphilis elimination to speak during a community-wide event.
- Write a “letter-to-the-editor” for local newspapers and magazines requesting they inform their readers about the importance of preventing and treating syphilis. **4D**

- Partner with neighborhood hospitals, clinics, pharmacies, and STD health clinics to start a community-wide initiative to raise awareness about syphilis screening, testing, and treatment.



- Collaborate with other community organizations (e.g., hospitals, STD clinics, YMCAs, health clubs, neighborhood pharmacies, minority organizations, and private businesses) with an interest in health or community issues to determine how several CBOs can convey the same syphilis elimination message to their constituents.
- Provide frequent progress reports and updates to the community about the current status of syphilis.
- Encourage community participation in addressing concerns about syphilis elimination. Remember strength exists in numbers and community involvement leads to community empowerment.



SECTION III



MOBILIZING COMMUNITY ORGANIZATIONS TO ELIMINATE SYPHILIS

SEEKING COMMUNITY INVOLVEMENT AND PARTNERSHIPS

Building a community coalition lays the foundation for future partner-building activities. Forming partnerships with other organizations in the community will increase available resources and expertise for your efforts. It will also help to extend the reach of SEE messages through the most effective communication channels.

Partnering can help ensure the appropriateness and success of your strategic plan of action. Partners can support SEE by:

- Providing access to specific target audiences, including at-risk populations.
- Assessing community needs for syphilis education resources, clinic services, etc.
- Making your messages more credible.
- Providing expert information on syphilis.
- Helping you reach various distribution channels.
- Donating advertising space.
- Making event or meeting space available.
- Recruiting volunteers.
- Writing letters of support.
- Donating printing, other services, and incentives.
- Providing financial contributions.
- Providing transportation, childcare, and health care services.

POTENTIAL PARTNERS

The best possible partners are those who share a common interest in eliminating syphilis from your community. Depending on your community and its needs, the list of potential partners could be very long. Here are some suggested partners:

- Hospitals (especially emergency rooms)
- Neighborhood clinics
- Government agencies
- Health clubs
- STD clinics
- Substance abuse treatment centers
- Local ASOs
- CBOs
- Beauty and barber shops
- Neighborhood pharmacies
- Private businesses with an interest in health or community issues
- FBOs and other religious groups
- Minority organizations
- Retail stores (e.g. book stores, gas stations, electronics and appliance stores, etc.)
- Social service organizations (e.g. shelters, soup kitchens, etc.)



SECTION III

MOBILIZING COMMUNITY ORGANIZATIONS TO ELIMINATE SYPHILIS

ACTION STEPS

- 1 Based on the strategic plan of action, determine the types of partners (in addition to coalition members) that you will need.
- 2 Put a contact list together of your potential partners.
- 3 Invite potential partners to participate in SEE activities.
1A 1D Include informational brochures to help state your case for involvement and assistance. **1D 1E 1F**
- 4 Make follow-up calls to each organization to learn of their interest.
- 5 Schedule meetings with potential partners to discuss opportunities for getting involved in SEE.
- 6 Hold additional meetings or conference calls to secure involvement and plan for the activity.
- 7 Track the responsibility of the partners and keep them apprised of deadlines, challenges, or changes to the partnership agreement.
- 8 Send a thank you letter to each partner. **1D**

*Note: When conducting a media outreach activity, secure a partnership with a radio station, television station, or newspaper to donate airtime or print space. Make sure that all media documents have gone through all the necessary clearance channels, including CDC. **1E 1D 1E 1A***



TIPS FOR ESTABLISHING SUCCESSFUL PARTNERSHIPS

- Talk to the leaders of the organizations or institutions that you want as partners.
- Involve partners early. Your contact may have to go through a formal internal permission process to commit his or her organization or business as a partner.
- Early in the process, provide partners with the essential background on the community's syphilis elimination efforts. Explain how you want the organizations to participate, so they understand their role and responsibilities. If you have the Community Assessment Report, mission and vision statements, and strategic plan of action, share these with potential partners, so they can see how their organization can fit into the community's mobilization efforts. **1G**
- Ask for comments and feedback on the strategic plan of action. Be sure to incorporate the feedback.
- Communicate, communicate, communicate. Maintain regular contact with partners. Invite them to coalition meetings, if necessary. Hold special meetings, with them about the activity with which they are involved.
- Be generous with praise! Share the results and success stories with your partners. Thank them for their support and participation. Let them know their efforts and partnership with the coalition make a positive difference in the lives of the people in the community.



SECTION III

MOBILIZING COMMUNITY ORGANIZATIONS TO ELIMINATE SYPHILIS

WORKING WITH FAITH-BASED LEADERS AND THEIR ORGANIZATIONS

Faith-based leaders and organizations can play an important role in eliminating syphilis.

FBOs often bring people of the same faith affiliation together for spiritual, political and social guidance, and information. In many communities, these organizations offer information about health issues that affect the lives of their congregants or members, including obesity, diabetes, HIV/AIDS, and cancer. Communities attach a level of trust to the institution of worship and to its leaders.

In working with FBOs and their leaders, it is important to provide them with information about syphilis elimination and to tie the goals and key messages of SEE to the goals and key messages of the church. Asking faith-based leaders to veer away from their core religious messages will not increase the health department's ability to garner support for SEE in the FBO.

FBOs can:

- Start a health ministry and raise awareness about all health issues affecting congregants, including syphilis.
- Provide information on caring for the body and soul and improving lives through healthy living and spirituality. You may need to provide the organization with statistical information on how syphilis is affecting the community.
- Invite community leaders and policy makers involved in syphilis elimination to be a guest speaker at a health ministry event.



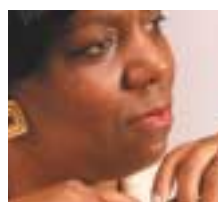
After you have identified the FBOs in your community, begin the dialogue with the appropriate FBO officers. In talking with faith-based leaders about SEE, you will want to:

- Introduce the goals of the program.
- Highlight the people in the community who are most affected by syphilis.
- Discuss the key community mobilization messages of SEE. **1B**
- Provide statistics, showing how syphilis is affecting their community.
- Provide them with informational brochures and other materials that may be helpful to their health ministry. **1C 1B 1E 1F**

RESOURCES

SEE Resources for Working with CBOs and FBOs

- 1A** SEE Invitation
- 1B** SEE Poster
- 1C** Involving the Faith Community In Syphilis Elimination Brochure
- 1D** Getting Your Community Involved Brochure
- 1E** Syphilis in the United States: The Facts
- 1F** Syphilis and the Affected Communities Brochure
- 1G** Strategic Plan of Action
- 1H** Coalition Meeting Agenda
- 1I** Partner Invite Letter
- 1J** Partner Thank You Letter
- 1K** Community-Based Organization Contact List



SECTION IV

**MOBILIZING HEALTH CARE
PROVIDERS TO
ELIMINATE SYPHILIS**





NOTES



SECTION IV

■■■ MOBILIZING HEALTH CARE PROVIDERS TO ELIMINATE SYPHILIS

■■■ INVOLVING HEALTH CARE PROVIDERS IN SYPHILIS ELIMINATION ACTIVITIES

Health care providers play a significant role as the sources of screening, treatment, and counseling and prevention information for patients. They work in private clinic settings, local health department clinics, hospital emergency rooms, community-based treatment facilities, and com-



munity health centers. Their involvement in community mobilization is crucial, as they are often the only health information source for those at-risk or in need of treatment for syphilis. Additionally, they are viewed as credible health experts by the community.

Not only are health care providers often the gatekeepers and communicators of health information to those at risk for syphilis, they are the first line of defense for syphilis elimination, they are most responsible for increased syphilis screening, treatment, and reporting activities. Also, they are a source of prevention messages to help reduce the risk of contracting syphilis. They need to improve syphilis screening and reporting, so we can more accurately assess syphilis rates in our communities and ensure that appropriate access is available for treatment.

Some health care providers may not be aware of the prevalence of syphilis in their communities and may not regularly screen for syphilis. Formative research for SEE revealed that health care providers are highly motivated to help eliminate syphilis once they are made aware of its prevalence and impact on the community.



The following are ways that health care providers can be involved with local syphilis elimination efforts:

- Use the SEE's Syphilis–Physician's Pocket Guide as a reference to screen patients for syphilis. **2A**
- Take a patient's sexual history. **2B 2C**
- Report positive syphilis test results to local health departments within one working day of a positive test result.
- Host community screenings (independently or with other clinics) or volunteer to conduct screenings at a community health fair. **1M**
- Display SEE posters in break rooms and common areas to make other health care providers aware of SEE. **1B**
- Make the SEE brochure and syphilis information brochures available. **1D 1E 1F**
- Join a SEE community coalition and become involved on a more strategic level.
- Incorporate syphilis transmission, screening, and treatment information into HIV/AIDS or other STD educational classes and one-on-one patient counseling.
- Emphasize the best ways to protect the community from syphilis. Information on syphilis prevention methods (or strategies) can include abstinence, monogamy, i.e., being faithful to a single sex partner, or using condoms consistently and correctly. These approaches can avoid risk (abstinence) or effectively reduce risk for getting syphilis (monogamy, consistent and correct condom use).



SECTION IV



MOBILIZING HEALTH CARE PROVIDERS TO ELIMINATE SYPHILIS

When planning an outreach to health care providers, know which health care providers you want to target, what syphilis elimination activities you wish them to do, and how you are going to motivate them to get involved and take some action. The following are some steps to guide you through the planning process.

Step 1: Determine which health care providers in your community you want to target. It is best to concentrate your efforts on health care providers practicing in the areas of your city or county where the incidence of syphilis is high. The following is a list of health care providers you can target:

- Local or state medical society leaders or STD advocates.
- Those in public or community health clinics.
- Hospital and clinic administrators.
- Emergency room physicians and nurses.
- Those in private practice settings.
- Primary care and family physicians.

Step 2: List the ways these health care providers can best contribute to your community's syphilis elimination activities (see previous suggestions).

Step 3: Determine the most effective, time-efficient, and financially affordable means of disseminating information to this target audience. Some activities could be:

- Sending local health care providers the SEE invitation or a letter with the Syphilis in the United States: The Facts brochure, A Guide to Taking a Sexual History, Sexual History Discussion Form, and Syphilis–Physician's Pocket Guide. **1A 1B 1C 2A 2B 2C**

- Partnering with a health care facility, government office or medical society to host a continuing education credit seminar, addressing the SEE initiative, treatment for syphilis, and what to do in case of an outbreak in the community. **1A 1B 2A 2B 2C**
- Submitting SEE print ads to local and state medical association journals and newspapers to help increase awareness of the issues. **4A 4B**

Step 4: Prioritize your activities and begin to conduct your outreach. Health care providers regularly receive hundreds of marketing brochures from pharmaceutical companies, medical associations, and other health care-



related concerns. They also have busy schedules between caring for patients, going to clinics, attending meetings, and fulfilling other professional obligations — so carefully select the outreach activities that you think would be most effective

for reaching them. You may also want to use the STD Communication Database (www.cdc.gov/std/commdata) and STD Prevention Edition of CDCynergy to get a better understanding of which communication methods are most effective for reaching this target audience. (Also, see Audience Profiles in this kit). **1D**

Step 5: Always keep in mind the Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule, which establishes standards for the privacy of health information.

For more information on HIPAA, visit the Web sites below.

www.cdc.gov/nip/policies/hipaa/hipaa_factsheet.htm

www.cms.hhs.gov/hippa/online/hippa1/default.asp



SECTION IV



■■■ MOBILIZING HEALTH CARE PROVIDERS TO ELIMINATE SYPHILIS

- To emphasize the importance of syphilis elimination activities in the community, make sure to highlight the local syphilis rates to make the initiative relevant to health care providers.
- Schedule in-person meetings with health care providers to establish a more personal relationship.

■■■ ACTION STEPS

- 1 Disseminate the SEE brochures, such as Syphilis in the United States: The Facts, Syphilis–Physician’s Pocket Guide, A Guide to Taking Sexual History, and Sexual History Discussion Form, and other materials to health care providers. **1B 2A 2B 2C**
 - Determine the targeted list of health care providers who need to receive the SEE materials.
 - Have a member of the coalition (perhaps a health care provider) write a short letter introducing SEE. Explain the facts about syphilis in the community and the need for health care providers to get involved. Emphasize the importance of screening and reporting test results to the health department within one working day of positive test results.
 - Mail the letter with the SEE materials noted above. You can also include other SEE brochures, the SEE poster, and the SEE invitation to join the effort. **1A 1B 1D 1E**
- 2 Host a continuing education seminar on syphilis and the local SEE initiative.
 - Contact a local STD/HIV Prevention Training Center (PTC) (www.stdhivprevention.org), medical university, professional medical journal or state medical society and inquire about their credentials for providing continuing education credits for hosting a “Grand Round.”

- Have a member of your coalition who is a health care provider facilitate a partnership with the university or medical association and decide on each partner’s responsibilities. Ask one of your partners to donate food. You may be able to increase attendance if you provide food (e.g., boxed lunch, coffee, and light snacks). The university or association should be able to provide the mailing list of potential attendees and an instructor for the course, plus secure participants and orchestrate the class.
 - Create a list of health care providers to invite to the seminar.
 - Secure a date and send out postcards announcing the course to health care providers in your community. Your partners should be able to help you disseminate these postcards.
 - Work closely with the instructor to develop course materials and provide him or her with the most recent syphilis statistics and facts from your state health department. You can access the latest data as well as training materials (e.g., STD 101) from the CDC Web site at www.cdc.gov/std.
 - Hold a course for health care providers on syphilis detection, treatment, and reporting. Distribute SEE materials for health care providers during the course. **1B 2A 2B 2C**
- 3 Submit SEE print ads to local medical and relevant CBO publications. **4A 4B**
 - Research relevant publications.
 - Develop the contact information list. Contact both the editor and advertising director at each publication.



SECTION IV



MOBILIZING HEALTH CARE PROVIDERS TO ELIMINATE SYPHILIS

- Prepare a letter explaining local syphilis elimination efforts and the SEE initiative, the need to increase awareness and action among health professionals, and the availability of camera-ready print ads. Ask if the publication could support your community's syphilis elimination efforts by publishing the SEE ad as a public service announcement. Include the print ads, the SEE Invitation and Syphilis in the United States: The Facts brochure with your letter.
1A 1B 4A 4B
- Follow-up your mailings with a telephone call to determine interest and secure placement.



RESOURCES

SEE Resources for Health Care Providers

- 2A Syphilis–Physician's Pocket Guide
- 2B A Guide to Taking a Sexual History
- 2C Sexual History Discussion Form
- 4A Full-Page Print Ad
- 4B** Three Small Print Ads

Note: General CBO SEE materials may also be appropriate to share with health care providers.

STRATEGIES FOR INCREASING SYPHILIS TEST REPORTING AND WORKING WITH LABORATORIES

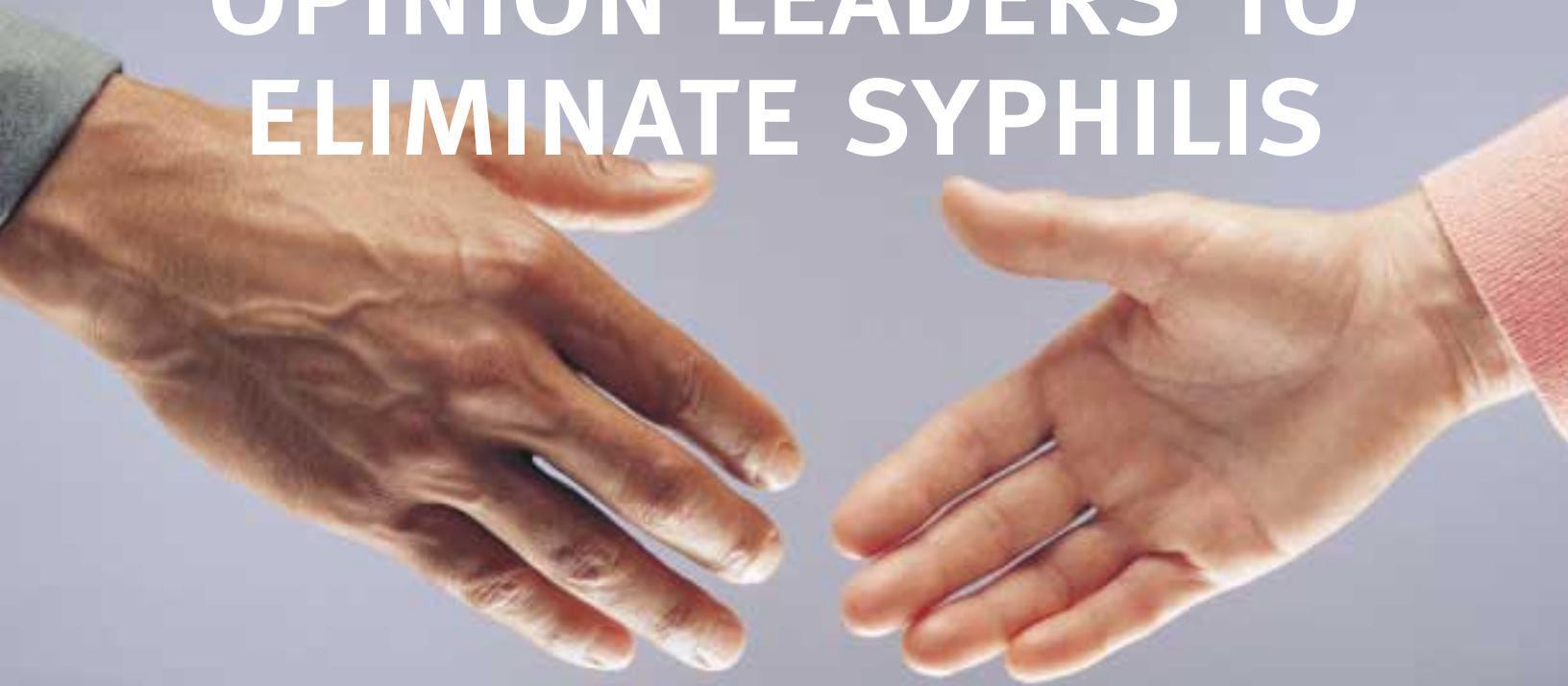


Increasing reporting of syphilis testing is one of the goals of the National Plan to Eliminate Syphilis. Following are some strategies that may help your community increase reporting and involvement of laboratories.

- Develop messages to motivate health care providers to appropriately screen, test, and promptly report positive test results.
- Collaborate with the Association of Public Health Laboratories (APHL), www.aphl.org and National Laboratory Training Network (NLTN) www.phppo.cdc.gov/nltn/default.asp to involve laboratorians in influencing health care providers to promptly report positive test results.
- Utilize the STD/HIV Prevention Training Centers (www.stdhivpreventiontraining.org) to provide clinical and didactic training to providers in High Morbidity Areas (HMAs) and Potential Re-Emergence Areas (PRAs).



**MOBILIZING
POLICY MAKERS AND
OPINION LEADERS TO
ELIMINATE SYPHILIS**





NOTES



SECTION V

■■■ MOBILIZING POLICY MAKERS AND OPINION LEADERS TO ELIMINATE SYPHILIS

Policy makers and opinion leaders are visible and influential people in your community. They should be educated that syphilis is a problem in their community and be made aware of local syphilis elimination efforts.

■■■ POLICY MAKERS AND OPINION LEADERS

- State, city, county elected officials
- State, city, county influential staff
- State health officers
- Local health officers
- Community activists

Following are information and tips for effectively communicating with policy makers and opinion leaders about the importance of syphilis elimination in your community and for keeping policy and opinion leaders informed about your syphilis elimination efforts.

To get policy and opinion leaders on board with your local syphilis elimination effort, they need to be convinced that syphilis is a serious local issue with devastating implications for your community and for our nation. Many policy makers are unaware that syphilis is still a major health concern – and they probably do not think their community is affected. So, the first action is to make them understand how their constituency is affected by syphilis and the importance of eliminating syphilis in their community.



Be prepared to present them with:

- The history and successes of treating syphilis,
- A list of the communities that are most affected by syphilis, and facts about syphilis in the United States **1B 1F**
- The impact syphilis has on the people in their community and what your organization and other community partners are doing to eliminate it.



■■■ COMMUNICATING WITH POLICY MAKERS AND OPINION LEADERS ABOUT SYPHILIS ELIMINATION

One of the main goals for your effort is to develop a relationship with your policy makers and opinion leaders and their staff so that:

- You and your organization are known to their office.
- You are viewed as a credible source of information on syphilis elimination.
- You have the ability to get a meeting with them.
- Your input is valued and sought.
- Your calls are returned.

Follow these steps to accomplish this goal:

Step 1: Make a list of state senators and representatives who serve on health committees or represent the district where syphilis is a problem. You can find some of this information on the Internet, the SEE Policy Maker Contact List, or in your local phone directory. **6B**

Step 2: List events that you think the policy makers might be interested in knowing about, for example, health fairs and other screening efforts. See if a photo-op can be arranged with a local publication.



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MOBILIZING POLICY MAKERS AND OPINION LEADERS TO ELIMINATE SYPHILIS

Step 3: Reach out to policy makers. Write them, meet with them, or invite them to a local SEE event.

ACTION STEPS

1 Write a Letter to a Policy Maker

- Write a short letter (no more than two pages – one if possible) that explains syphilis, how it is affecting your community, and what your organization is doing to eliminate it.



- Avoid personal criticism.
- Express appreciation for past or future support. When combined with similar letters from your colleagues and partners, you will make more of an impact. (You can use the sample SEE letter for policy makers.) **4A**

2 Meet with a Policy Maker

- Identify and summarize the key points you need to communicate to your policy maker about syphilis elimination in your community. **4B**
- Contact the policy maker's local office and ask to speak with the appointment secretary or scheduler. (Don't be disappointed if you end up meeting with staff, rather than the senator or representative – staff are considered to be gatekeepers and can sometimes be the real driving force on an issue.)
- Develop a one-page issue paper on syphilis elimination to share with the policy maker to remind him or her of the purpose of your meeting.

- Prepare leave-behind materials for the policy maker that highlight or illustrate your concerns and key messages. **4C**
- After the meeting, send a note thanking the policy maker or aide for his or her time and briefly restating your position on national and local syphilis elimination efforts. Include any follow-up information that was promised.
- Provide feedback on your meeting to your program partners who could not attend, so they may adjust their coordinating efforts as needed.

3 Invite Policy and Opinion Leaders to an Event

- Send an invitation to the policy maker explaining why he or she should attend your syphilis elimination event. Make sure to give examples of how syphilis affects the policy maker's constituents.
- Call to follow up on the invitation.
- Answer any questions asked of you to the best of your ability, and tell the policy maker you will get back to him or her regarding those you can't answer.
- Once the policy maker is present at the event, keep in mind his or her time is limited. Stay on track and concisely address the key messages about syphilis elimination you want the policy maker to leave with. **4D**
- Make arrangements with your organization to photograph the policy maker's visit and include a story on the visit in your organization's newsletter. Send the policy maker copies of the stories. If local press coverage is desirable, coordinate media coverage with the policy maker's press secretary.



SECTION V

■■■ MOBILIZING POLICY MAKERS AND OPINION LEADERS TO ELIMINATE SYPHILIS

■■■ TIPS FOR SUCCESSFULLY REACHING POLICY MAKERS

- **Accentuate the positive!** Keep your eyes open for small group accomplishments and make them known. People are motivated by tangible results.
- **Present syphilis elimination in a way that is relevant to them.** To better appeal to policy makers and opinion leaders, syphilis elimination can be positioned as an important health goal by linking it to child health and the potential for reducing overall health care costs. It may be appropriate to emphasize the impact of syphilis on certain target audiences. For example, a policy maker or opinion leader who pays attention to issues related to men who have sex with men (MSM) may be more interested if you emphasize the impact of syphilis in that community. Don't address their issues; rather, always present syphilis in such a way that the positive results of your efforts are highlighted. Frame syphilis in such a way that the policy maker wants to be a part of this effort, can visualize ways to help eliminate syphilis in your community, and will champion your organization's efforts.
- **Develop your own public identity.** Even though your organization is part of the National Syphilis Elimination Effort, try to focus more on your local partners and accomplishments so that your organization is not lost in the more general messages of the national effort. Also, when you bring syphilis elimination to the local level, you increase your chances for public interest. Issues that are close to home become relevant to policy makers.
- **Check your facts.** Understand your organization's syphilis elimination efforts inside and out. Quote sources of information or point to reliable statistics for claims you make publicly. Facts should always guide your actions and public statements.



- **Be passionate and persistent.** It's important to have the passion and persistence to overcome entrenched attitudes the public may have toward syphilis elimination. Passion lends energy to your movement. Persistence keeps your issues in the public eye and helps you follow through on commitments.



■■■ FREQUENTLY ASKED QUESTIONS

- 1 **Our CBO partners have very limited funding for reaching opinion leaders and policy makers. Should they focus their energies on policy makers who have more of a local or more of a state or national audience?** The CBO should focus most of its energies on local policy makers. Those individuals have a vested interest in the well-being and support of their constituents, who also are the individuals affected by syphilis in your community. If CBOs are able to develop effective relationships with the local policy makers, hopefully they will then elevate SEE messages to the state and national policy makers' attention.



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2 *The CBO we are working with has limited staff time to contribute to policy maker outreach activities. How can they most effectively use their limited staffing resources?* Telephone calls are the most effective means of communication when timing is critical. Consider using a telephone tree. A telephone tree comprised of many individuals is the most useful organizing tool for getting large numbers of people to call your policy makers and opinion leaders at the same time. Get a few people to serve as tree leaders. The tree leaders should call others and get them to make phone calls on the issue of eliminating syphilis in your community. The tree leaders are also responsible for providing the accurate verbal message for activating the phone tree. (Use the information in the brochures *Syphilis In The United States: The Facts* and the *Syphilis And Affected Communities* to design your telephone message.) 1B 1D

In addition to reading their hometown and other local newspapers, policy makers and staff may also read these publications:

- *Roll Call*, a twice weekly newspaper of news and commentary on national legislative issues (www.rollcall.com),
- *The Hill*, a weekly newspaper that provides reports and analysis of the latest national legislative issues (www.hillnews.com),
- *The New York Times* (www.nyt.com), or
- *The Washington Post* (www.washingtonpost.com).

RESOURCES

SEE Resources for Working with Policy makers

Syphilis in the United States: The Facts Brochure

Syphilis and Affected Communities

Letter to Policy makers

1B Policy maker Contact List

Note: General CBO SEE materials and Syphilis Key Messages may also be appropriate to share with policy makers.



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SECTION VI

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THE POWER OF THE MEDIA

The media are powerful disseminator of information. Their can reach thousands of people quickly and concisely. In doing so, the media can educate their listeners, viewers, or readers about SEE related issues and messages and motivate them to take action.

Media coverage raises visibility of your community mobilization efforts and how syphilis is affecting your community and others around the country. It increases awareness about SEE among the general population as well as community leaders, policy makers, health care providers, opinion leaders, and potential funders. By selecting to cover your news events or stories, the media send a signal to members of the public at all levels that syphilis is an important issue in your community and that they should think about getting involved in syphilis elimination efforts.

MEDIA	KEY CONTACTS
■ Television stations	■ Producers, assignment desks ■ Public affairs directors ■ Health reporters
■ Radio stations	■ News producers ■ Public affairs directors
■ Newspapers	■ Health reporters ■ Community news columnists ■ Assignment desks
■ Web sites	■ Online producers and reporters
■ Wire Services	■ Daybook editors ■ Health and local beat reporters



PAID MEDIA VS. PUBLIC SERVICE ANNOUNCEMENTS

Paid media or advertising requires an organization or person to pay the media (radio, television, newspapers, magazines, and the Internet) to promote or publicize specific messages. Placing “canned” or produced advertisements in the media can be expensive; however, it does guarantee that your exact messages will be broadly disseminated to that outlet’s audiences at a specified time.

Public service announcements (PSAs) are a lot like paid commercial advertising, except the media run PSAs at no cost. Because of this, you generally have no control over when a PSA will run and how often. The competition is great among the worthy causes vying for limited PSA spots. Both PSAs and paid advertising can be used to encourage people to think differently about a particular issue or to take action to benefit their families or communities.

Public relations efforts also promote specific messages and shape people’s perceptions through the media, but they do so through generating news stories on the issues. News stories often have more credibility than advertisements because a reporter, whose job it is to report the news objectively, writes them.

WHAT MAKES NEWS?

The secret to gaining publicity is to understand the news media and what makes news. Once you have a basic appreciation of the needs of news media, you can then use a variety of story angles, or “news hooks,” to interest your media contacts in a story about syphilis elimination. The good news is that, since we are exposed to news every day as consumers, most of us already have a basic understanding of the news media. Don’t downplay this



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experience. Think about what you already watch, listen to, and read in the local media. Here are some basic facts about local media and how they deliver news to their constituents:



- **Newspapers** are published daily or weekly. They are the primary deliverer of in-depth news in communities and cover many local events, together with the local perspective on national news or issues. The weekly papers tend to be less dominated by breaking news due to their time frame and offer more feature articles on local events, issues, community leaders, businesses, and organizations. Daily papers also run feature articles, usually on specific days of the week, such as a mid-week health section.
- **TV stations** usually allot one-half to one hour for local news programming several times during the day. Given these daily airings and the visual nature of the medium, they concentrate on breaking news supported by video footage and reports gathered by mobile news crews. With the exception of some local cable networks, these stations cater to universal interests and thus reach a broad audience.
- **Radio stations**, which proliferate on the local level, are the most diverse media outlets in terms of programming formats, catering to specific audiences with different types of music, sports, or talk shows. Their news coverage, with the exception of all-news formats, may be only 1 to 2 minutes at the top of each hour. However, radio plays an important role in serving local interests.

This review highlights three important factors that relate to all news media formats, and they are important to remember when working with the news media:

- **Frequency and Deadlines** – The frequency with which a particular news medium is printed or aired (hourly, daily, weekly, or even monthly) has a direct impact on the type of news that is communicated. It also has a practical bearing on deadlines. Daily media have daily deadlines; for instance, a newspaper reporter must finish a story by the afternoon before it is printed in the next day's edition. Therefore, if you want to contact a daily reporter about a potential story, it is best to call in the morning or even a couple of days before a certain event. To assist in coordinating stories with pressing deadlines, many newspapers and TV stations have assignment editors on their news desks that take incoming stories and assign them to appropriate reporters. Although it is usually best to try to talk to reporters who you know have an interest in your story, you may also contact assignment editors when you have a specific event happening on a specific day (e.g., a health fair at a certain location).
- **Different Stories for Different "Beats"** – Most news organizations, depending on their size, have a variety of different departments. These are usually divided into two basic categories: news and features. "News" provides us with information about the breaking facts and important events. "Features" are usually human interest stories. When watching the local news or reading the paper, think about how the "harder" news is usually covered up front and is followed by "softer" news features.
- **Further Segmenting Your Approach** – Within each area you may find a number of different "beats," or areas of interest, that might apply to your local syphilis elimination activities. Here are some examples:



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- You may want to approach a health reporter with a story on how local syphilis elimination activities aim to educate people in the community about STD prevention with a focus on preventing syphilis. You would want to be able to offer a local clinic or other community outreach program as an example. Weave into your message that syphilis is preventable and treatable. Its spread can be stopped. The community needs to be aware of its impact and band together to help eliminate it. Then provide a toll-free number or a Web site for more information.
- It may be that you are working with a policy maker on a particular issue or trying to get legislation passed regarding syphilis screenings. You may want to approach government, city, or local news “beat” reporters with your story.
- New statistics on syphilis rates have just been issued, or your community coalition has successfully achieved one of its goals or had a successful outreach effort. You may want to contact a health or community news reporter with this information and discuss how syphilis is impacting your community.

By tapping into specific areas of interest, you can tailor your story several different ways. Many newspapers list their departments in both their print and online editions and also give contact information. Most news desks at TV or radio stations can also refer you to an appropriate reporter if you ask for someone working in the areas of health or community news.

Most TV stations and newspapers have their own Web sites. In addition to having an article published in a local publication or having a story aired on your local TV news, you may be able to place a Web link on their Web site.



MEDIA RELATIONS: PREPARING TO WORK WITH THE MEDIA

Monitoring the Media

In order to work most effectively with the media, you need to know who they are and what type of news they cover. The purpose of monitoring the media is to know and understand the media outlets and reporters that you are trying to influence, so you will be able to speak to them in a way that would interest them.



ACTION STEPS

To begin monitoring the media:

- Read your target audience’s specific local newspapers (dailies, weeklies, monthlies, college or university newspapers, small neighborhood papers and other free community papers).
- Read city and regional magazines.
- Watch your local television news shows, including university and local cable television stations.
- Monitor public broadcasting and closed-circuit television at local businesses.
- Listen to local radio, including university stations.
- Pay attention to the types of stories, news, etc. they feature and think of ways to best present SEE activities.



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Media Relations

Successful media relations is a multifaceted effort. It is based on a targeted media strategy that results in the placement of news stories in the medium that best reaches the CBO and FBO leaders, health care providers, and policy makers with the messages you want them to read, hear, or see.

ACTION STEPS

The media strategy is a blueprint for carrying out your media campaign. To create a media strategy, answer the following questions:

- 1 What is your communication goal?**
 - Are you trying to generate awareness about your local syphilis elimination community coalition?
 - Are you trying to publicize a syphilis screening event or health fair?
- 2 Who is the audience you are trying to reach?**
 - Do you want the general community to learn about syphilis, the rates in the community, and the need for its elimination?
 - Are you targeting a specific population in your community based on age, cultural background, sexual orientation, or gender?
- 3 What are the key messages?**
 - What three issues or statements do you want your news story to present?
 - What is the most important message you want people to learn?
 - Keep your message simple and easy to understand.
 - Do you want to include messages from the SEE initiative?

- 4 What media will you communicate with to reach your target audience?**
 - Television? Radio? Newspaper? Wire services? The Internet and online media?
- 5 What communication tools do you want to use to send your message to your selected media, and how are you going to disseminate them?**
 - Press release? Fact sheet? Media advisory? Media kit with several press materials? News conference? Public service announcements? Letters to the editor? Photographs? Broadcast-roll?
 - Will you fax the materials or send them via e-mail? Do any of the materials need to be sent overnight?
- 6 Who are your spokespeople?**
 - Who is going to communicate your messages to the media during an interview?
 - How will you approach them and prepare them?
- 7 When do you want to carry out your media campaign?**
 - How long do you need to prepare? When and by whom do you need to have any press materials approved? When do you begin contacting the media?

Once you have written your media strategy, you will have a comprehensive framework that should result in a successful media campaign.

Always make sure that your media efforts have been cleared through CDC and the local authorities before going forward.



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USING MEDIA ADVISORIES



A media advisory is a brief description of your event and contains important information pertaining to the event: who, what, when, where, and why it is news. The media advisory is your opportunity to alert the media to your upcoming event and should be sent two or three days prior to the event.

The media advisory can be sent to reporters, producers, and news assignment editors and daybook editors (a calendar of upcoming news events kept by wire services, such as AP, UPI, and Reuters). After you have sent the media advisory, you will need to follow-up with a phone call to confirm interest in your event and possible attendance. You may need to refax or e-mail the media advisory the day of or a day before the event.

Note: Media advisories will not tell your complete story, so they should not be used in place of a press release.


You will increase the likelihood of having your event covered by the media if you can provide a visual opportunity for the media to photograph events, such as community- or faith-based leaders sharing syphilis testing and prevention information with their neighbors or congregants. Work with your local partners to arrange such a photo opportunity.

Note: A hospital or clinic can advise you on the necessary patient agreement procedures.



TIPS FOR WRITING A MEDIA ADVISORY

When writing a media advisory, remember the following:

- Clearly identify the who, what, where, when, and why of the event.
- Identify featured spokesperson and interview opportunities.
- Describe photo opportunities, if available.
- Include a media contact name, organization, and telephone number.
- Limit the advisory to one page.
- A sample media advisory is available in the SEE Toolkit. 

USING PUBLIC SERVICE ANNOUNCEMENTS

PSAs are short messages produced on film, video, or audiocassette and given to radio and television stations. They look and sound like short advertisements. PSAs can also be print advertisements that are placed in a newspaper or a magazine for free. The Internet may be another source for placing PSAs. Generally, PSAs are sent as ready-to-air (professionally produced) audio or videotapes, although radio stations (especially community or public stations, such as campus radio or National Public Radio affiliates) sometimes prefer a script that their announcers can read live on the air (known as “live-copy” radio PSA scripts) or print PSA ads.

Radio and television stations donate a percentage of their air time to serve “in the public interest.”



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ACTION STEPS

If conducting a PSA outreach is one of your media activities, use the print PSAs in different sizes and the radio PSAs (15 seconds, 30 seconds, and 60 seconds) provided in this kit. ● ● ●

- 1 Determine the number of copies of the print PSA that need to be reproduced (either in print or on disc) and send them to local newspapers and radio stations.
- 2 Contact the public service directors at radio stations and newspapers to learn of their interest in running your PSA. (It usually takes 6-12 weeks before a PSA will actually appear).



TIPS FOR SUCCESSFULLY WORKING WITH THE MEDIA

- Be sure that your media list is accurate and up-to-date and includes all reporters who cover the media you are interested in, such as health reporters and those who cover community issues. These reporters may be especially interested in a news story on local efforts to eliminate syphilis. The more familiar you are with the reporter's "beat" and style, the better.
- Create "pitch" letters that tell the media what the interesting news angle is and why it has relevance in your community. Use the SEE key messages, editorial letter, and the Syphilis in the United States: The Facts brochure to help develop your media materials. **1B 4D 4E**
- When calling upon the media remember to:
 - Know your topic and the facts.
 - Be confident in what you say to the reporter.
 - Ask questions. "What is your deadline? Would you like to interview our spokesperson? Who else are you interviewing? What additional information do you need? What's your angle?"
 - Be creative. Don't just approach a reporter with one news story idea. If he or she rejects your initial story, pitch another one.
- Pitch your news story early in the day – not in the late afternoon.
 - Reporters usually get their daily assignments in the morning.
 - Reporters usually have late afternoon deadlines and often cannot be interrupted when they are trying to make a deadline.
- Have your media materials available electronically. A growing number of reporters like to receive media materials via e-mail. **4F**



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FREQUENTLY ASKED QUESTIONS

- 1** *Do we have to conduct media outreach? What if we don't have the resources to do outreach? Are we setting ourselves up for failure?* Once again, media support is critical to your program because it extends the reach of your messages to CBOs, FBOs, health care providers, policy makers, and to people you never thought to involve. Most of the resources you will need in order to conduct an effective media outreach effort are included in the SEE Toolkit. If you can find a way to work with the media, it will prove extremely beneficial to the goals of your community outreach.
- 2** *What if we are not able to generate positive or helpful media coverage for our efforts? Should we give up on media outreach?* If you have worked closely with the media to inform the public and your key audiences about SEE and your efforts have not proven useful, encourage partners and other participants to tell their friends and associates about the program. Word-of-mouth communication tends to link people with shared interests. Also, explore how current participants became aware of the program – this should help you refine your media outreach strategies and understand where to channel your media outreach resources.



- 3** *We don't have a lot of money to buy radio or TV airtime for PSAs. What can we do?* Negotiate with the radio or TV station and explore the possibility of their “matching” your paid airtime with some free airtime. You may also want to “piggyback” your syphilis elimination-related news with other news that is already being reported. In addition, certain days and months are designated to recognize certain diseases. For example, April is National STD Prevention Month. You may “pitch” your story or PSAs during these times to increase your chances of getting free media services.



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RESOURCES

SEE Initiative Materials for Working With the Media

- 4A Full-Page Print Ad
- 4B Three Small Print Ads
- 4C Three Radio Public Service Announcement Scripts
- 4D Op-Ed Letter for Newspapers
- 4E Syphilis Elimination Key Messages
- 4F Tips for Working with Online Media and Sending E-Mails
- 4G Communication Crisis Tips
- 4H Communication Tools
- 4I Contact List of Public Affairs Directors in 19 HMAs
- 4J Sample Media Advisory

General CBO SEE materials may also be appropriate to share with the media.



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■ ■ ■ ADDITIONAL RESOURCES

For more information on community mobilization and how to work with health care providers, policy makers, CBOs, FBOs, and the media, refer to these additional resources.

PLEASE NOTE: *Web sites to non-Federal organizations and other resources below are provided solely as a service to our users. The inclusion of these resources does not constitute an endorsement of these organizations or their programs by CDC or the Federal Government, and none should be inferred. CDC is not responsible for the content of the individual organization Web pages found at these links.*

■ ■ ■ COMMUNITY MOBILIZATION/SYPHILIS ELIMINATION AND HEALTH INFORMATION

■ *Articles/Publications*

Joint United Nations Program on AIDS. Community Mobilization and AIDS: UNAIDS Technical Update. Geneva, Switzerland. UNAIDS; 1997.

Durch JS, Bailey LA, Soto MA, editors. Improving Health in the Community: A Role for Performance Monitoring. Institute of Medicine. Washington (DC): National Academy Press; 1997.

■ *Web Sites*

www.communityframeworks.org

Community Frameworks

This is a nonprofit organization based in Spokane, Washington. It is dedicated to helping individuals, groups, and communities overcome obstacles and seize opportunities. The Web site has a resource directory on Community Asset Mapping and Community Mobilization.

<http://casat.unr.edu/bestpractices/>

CSAP's Western Center for the Application of Prevention Technologies

This web site includes useful information and tools for use in community mobilization efforts.

www.cdc.gov/std and

www.cdc.gov/std/see/

Division of STD Prevention, National Center for HIV, STD, and TB Prevention, Centers for Disease Control and Prevention (CDC)

These CDC Web sites include various information and other materials for syphilis elimination activities.

www.tulane.edu/~icec/socmob.htm

The International Communication Enhancement Center (ICEC) and Global Social Mobilization Training Program, Tulane University

This online publication defines and describes social mobilization and provides a national social mobilization training guide.

<http://ctb.ku.edu>

The Community Tool Box

This online tool kit is the “gold standard” for community-based skill-building information. Created and maintained by the Kansas Work Group on Health Promotion and Community Development, the core of the site is the “how-to tools,” which include everything from how to run a focus group to how to write a press release. There are informative sections on leadership, strategic planning, and evaluation. This site also includes information on grant writing, check-lists, and other helpful links.

www.health.gov/healthypeople/Publications/HealthyCommunities2001

U.S. Department of Health and Human Services (HHS) “Healthy People in Healthy Communities: A Community Planning Guide Using Healthy People 2010” is a guide for building community coalitions, creating a vision, measuring results, and creating partnerships dedicated to improving the health of a community. This Web site includes “Strategies for Success” to help in starting community activities.

www.cdcpin.org

CDC National Prevention Information Network

This Web site is an online resource for one of the largest collections of information and resources on HIV, STD, and TB prevention. It also includes a searchable database for funding resources.



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■ ■ ■ ADDITIONAL RESOURCES

■ ■ ■ MOBILIZING COMMUNITY-BASED AND FAITH-BASED ORGANIZATIONS

■ *Articles/Brochures*

Campbell KN, Ellis SJ. The (Help!) I-Don't-Have-Enough-Time Guide to Volunteer Management. Philadelphia (PA): Energize Books; 1995.

Rothman J, Tropman JE. Models of a Community Organization and Macro Practice Perspective: Their Mixing and Phasing. In: Cox FE, et al. editors. *Strategies of Community Organization: Macro Practice* (Fourth Edition). Itasca (IL): FE Peacock Publishers; 1987; 3-26.

The Balm In Gilead. (US) The Church's Role in HIV Prevention. Available at www.balmingilead.org/resources/churchrole.asp.



■ *Web Sites*

www.balmingilead.org

The Balm In Gilead

A not-for-profit, non-governmental organization with an international mission to stop the spread of HIV/AIDS throughout the African Diaspora by building the capacity of faith communities to provide AIDS education and support networks for all people living and affected by HIV/AIDS.

<http://comm-org.utoledo.edu>

Comm-Org: The Online Conference on Community Organizing and Development

This Web site is sponsored by the University of Toledo, Ohio. It aims to help connect people who care about the craft of community organizing. It contains a listserv, which is open to anyone interested in community organizing, and has a membership of more than 800. The site also contains online technical assistance manuals on issues such as public partnerships, community management and development, and skills training for non-profits.

<http://ctb.ku.edu>

Community Works Toolbox-Tools for Change

This Web site is for the problem solvers in communities. The "Tools for Change" are the nuts and bolts of community activism. The tools here are real-life guidelines and how-to's that are being used all across the country. Most importantly, they can be adapted for use in any community.

www.ezec.gov/toolbox

EZ/EC Community Tool Box

This Web site is run by the United States Department of Agriculture (USDA) and has good information on community empowerment, implementing strategic plans, and enhancing community-based partnerships.



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■ ■ ■ ADDITIONAL RESOURCES

www.tcwf.org/archives/PDFs/portfolio/p_2001fall.pdf

Faith-based Organizations Mobilize Communities Around Health Issues, The California Wellness Foundation

This Web site is run by the California Wellness Foundation and includes stories, ideas, and lessons learned from the organization's own health grant making experiences.

www.genie.org

Nonprofit Genie

This Web site is sponsored by the California Management Assistance Partnership, and contains information for non-profits from established experts on fundraising and development on using consultants and strategic planning.

www.health.org/govpubs/prevalert/v3i13.aspx

Prevention Works! Incorporating Faith-Based Organizations in Prevention Strategies

This Web site includes strategic methods to help faith-based organizations design prevention strategies that effectively meet the needs of their communities.

www.whatworks.com

The Center for What Works

The Center for What Works is an Internet community for non-profits, academics, and private sector partners to share information. This Web site provides information and online resources and links on benchmarking, technology, and research that may be of interest to non-profit organizations.

www.iscu.org

The Institute for the Study of Civic Values

The Institute is a non-profit that helps grassroots organizations gain knowledge and skills needed for effective participation in the community. This Web site contains information on building community resources and several e-mail lists of interest to community organizations.



■ ■ ■ REACHING HEALTH CARE PROFESSIONALS

The Bureau of Primary Health Care. Movement Toward 100% Access and Zero Health Disparities. Washington, DC: The Bureau of Primary Health Care; 2002. Search this resource at www.bphc.hrsa.gov/.

Work Group on Health Promotion and Community Development of the University of Kansas. Talking About Risk and Protective Factors Related to Community Issues. Lawrence, KS: University of Kansas. Available at: www.ctb.lsi.ukans.edu/tools/EN/section_1028.htm.



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■ ■ ■ ADDITIONAL RESOURCES



■ ■ ■ WORKING WITH POLICY MAKERS

Kingley E, Harmon G, Pomeranz J, Guinane KE. *Advocacy for Nonprofits: The Law of Lobbying and Election Related Activity on the Net*. Washington (DC): Alliance for Justice; 2000. Available at www.afj.org.

Altman DG, Balcazar FE, Fawcett SB, Seekins T, Young JQ. *Public Health Advocacy. Creating Community Change to Improve Health*. Palo Alto (CA): Stanford Center for Research in Disease Prevention; 1994.

■ *Tips on Communicating with Policy Makers*

www.naeyc.org/policy/toolbox.asp

National Association for the Education of Young Children

This Web site includes practical information to help organizations effectively advocate issues to opinion leaders and policy makers.

■ ■ ■ WORKING WITH THE MEDIA

Bonk K, Griggs H, Tynes E. *The Jossey-Bass Guide to Strategic Communications for Nonprofits: A Step-By-Step Guide to Working with the Media to Generate Publicity, Enhance Fundraising, Build Membership, Change Public Policy and Handle Crises and More!* San Francisco (CA): Jossey-Bass Inc.; 1999.

Wallack L, Dorfman L, Jernigan, D, Themba M. *Media Advocacy and Public Health*. Newbury Park (CA): Sage Publications; 1993.







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