Summary of Pilot Site Experiences

Implementation Planning Worksheet "Physical Activity. The Arthritis Pain Reliever."

1. Select Target Audience/Market Segment

(Campaign was designed for Caucasian and African-American adults, age 45-64 with incomes below 35,000, and high school education or less. Do you want to try to reach this whole audience, or a subset?)

AZ	No subset selected, ran campaign in Tucson; approximately 40%
	of the residents match the target audience
IL	Targeted smaller town (Quincy, population 40,300) in West Central
	Illinois (Adams County, population 72,000 more rural part of
	state). 19% of county are in target audience age range.
MN	Targeted one rural county in north central Minnesota (Crow Wing
	county population 56,000) and one county that is a first ring suburb
	of Minneapolis/St. Paul metro area (Anoka county population
	300,000). Crow Wing county is largely Caucasian. Anoka county
	is more diverse.
NC	Targeted three rural counties in the northern part of North Carolina.
	Total population for three counties is just over 111,000. About 50%
	population in this area were Caucasian, 45.6% African-American.
	Income per capita for adults over 25 averages \$17,111.
OR	Targeted rural county in Central Oregon, specifically one of the
	larger cities, Bend, with a population of 52,000. 95% of residents
	living in Deschutes County are Caucasian, over 25% are between
	the ages of 45-64. Targeted those who meet Federal Poverty
	Guidelines.
PA	Two low income (70% below \$30,000/household) areas of
	Philadelphia: West Philadelphia, population 198,000, primarily
	African American; Lower North Philadelphia/Kensington,
	population 41,000. 46 and 27% respectively with high school
	diploma or less.

2. What do you know about this audience and the community? (What type of radio stations do they listen to? When do they listen to the radio? What community locations do they frequent (potential locations for countercards/poster)? What publications are they likely to read?)

AZ	• Used marketing firm to place radio spots at stations with large
	target audience listenership
	Purchased print ads in small local papers rather than
	metropolitan paper through the Arizona Newspaper Association
IL	• Used Radio stations appealing to target audience; talk radio,
	easy listening, and Christian stations
	 Quincy Medical Group main clinic in town, YMCA and Senior
	Center well used by community
MN	We broadcast the radio spots statewide using a statewide
	network of local radio stations. These stations have the greatest
	reach with a 40+ age demographic. Of the two stations in the
	Mpls/St. Paul broadcast area, one is an all news stations with
	frequent traffic and weather updates and the other targets older
NG	populations.
NC	• Three radio stations in listening area
	• Local informant said people in community gather at fire station
	Gas/convenience stores, county senior centers popular
OR	• Utilized media contractor to place paid material with a PSA
	match targeting radio stations that target audience listens to.
	• Targeted pharmacies, physician offices for print material.
	Targeted largest local newspaper for paid print ads.
PA	• Certain radio stations target African Americans; news station has
	broader demographic appeal.
	• Target population frequently use check cashing centers
	• Target populations likely to use neighborhood pharmacies and
	medical clinics
	Significant differences in newspaper readership

3. Who are your logical partners to help you reach this audience with this message?

(What organizations already have relationships with your target audience, or have an interest in your target audience? e.g.; faith communities, businesses, health systems)

AZ	Other DHS programs (i.e. physical activity program)
	Department of Economic Security
	Area Agencies on Aging
	Arthritis Foundation
IL	Area Health Education Center was contractor for entire project.
	Project Active, a program of the County health department
	Arthritis Foundation
MN	Our local chapter of the Arthritis Foundation was a key partner in
	this campaign. We used their 800 number on all the materials and
	they distributed information in response to calls and tracked calls.
	In the two counties, the local public health agencies were our
	primary partners in distributing the materials. Their intern worked
	with their partners in placing materials in worksites, pharmacies,
	clinics and other retail locations.
NC	Utilized Cooperative Extension agents to distribute brochures
	Area Agency on Aging
OR	Local health plan; mailed out brochures (and PACE class listing
	insert) to those who are Oregon Health Plan members (those
	meeting the Federal Poverty Level Guidelines) and Medicare
	members who reside in Deschutes county; placed an article in their
	Medicare newsletter and helped the AP Coordinator make
	connections to various media contacts.
PA	Pharmacies and clinics. Radio. Community centers.

4. When is a good time to run the campaign?

(Any logical community activity to tag onto? Any competing activities to avoid?)

AZ	Arthritis Month—ran campaign late April through May. Need to
	run campaign before it gets too hot. Snowbirds are starting to leave
	by then.
IL	Implemented campaign in June

MN	Implemented during May. The local AF chapter delayed their promotions for National Arthritis Month to assist us in this
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	campaign. This year, we intend to run the campaign in April to lead
	into National Arthritis Month and local AF activities.
NC	Implemented during May, National Arthritis Month and National
	Seniors Month, participated in 2 national senior physical and
	fitness events.
OR	Planned for early summer but implemented in August due to
	logistical difficulties. Tagged campaign to PACE classes that were
	being launched; included a promotional offer sponsored by local
	health plan. May be too hot for people to trial physical activity.
	Also, major forest fire near the Bend area contributed to poor air
	quality and occupied many media outlets.
PA	Arthritis Month (May); possibly early Fall.

5. Which materials best match your campaign target audience and plans? (What are you planning to use, and why? See list of materials on attached page.)

AZ	Target audience primarily Caucasian (area only 3% African
	American), so did not use poster or print ads with African
	Americans featured; used the rest of the materials.
IL	Used Live announcer radio scripts (preferred by station public
	affairs directors); used only black and white print materials to
	reduce costs, Brochures and countercards, small number of flyers.
MN	In addition to radio spots, we used brochures, some posters—small
	ones were easier to place. We didn't have much luck with print
	PSAs.
NC	Radio spots; both posters; brochures; counter cards; Newspaper
	PSAs
OR	Radio spots; countercards, brochures; newspaper PSAs; (tried
	flyers)
PA	Used Women Walking and Man washing car flyers, both for race
	depicted and because these are activities that resonate with target
	audience. Used flyer of Caucasian couple dancing in Lower North
	Philadelphia/Kensington (sizeable Caucasian population). Used
	radio spots on three station, brochures, newspaper ads, and small
	posters.

6. Where will you have the brochures, countercards, (and posters, print PSAs if you plan to use them) printed? Where will you get the Radio spot CD's reproduced?

(Are you required to use a state sanctioned printer? Can your partners do this more easily with less bureaucracy? Does the state have capacity to reproduce CDs?)

AZ	Used State Print Shop and Marketing Firm
IL	Local printing
MN	We were able to get help from partners to complete commercial
	printing. This is a big hurdle.
NC	Used Health Department to duplicate CDs, but they had wrong
	software; eventually went to commercial vendor
OR	Utilized state sanctioned printer for brochure and cardholder
	printing. This took 3 months. Tried creating flyers from PDF
	version and home printing. These turned out to be of lesser quality.
PA	Used commercial printer

7. Do you want to localize the materials (i.e. add a local program name)? If so, what name do you want to use? (Generic materials say "A message from the Centers for Disease Control and Prevention and the Arthritis Foundation")

AZ	Added Arizona Department of Health Services name and logo
IL	Added Illinois Department of Health, Arthritis Initiative
MN	Added MN Department of Health logo and local AF chapter phone
	number, some materials included MDH website url.
NC	Added Division of Public Health's logo to the brochures and NC
	Division of Public Health's Arthritis Program to end of recorded
	radio spots.
OR	Added Oregon Arthritis Coalition's logo and Department of Human
	Service's logo to brochure. Added Oregon Arthritis Coalition to
	recorded radio spots.
PA	Added Arthritis Foundation, Eastern Pennsylvania Chapter

8. What response mechanism do you want to use? What are your options? (Generic materials give the Arthritis Foundation's 800 line as the number to call for more information.)

AZ	Left Arthritis Foundation, National Office number on materials.
	Added health department website.
IL	Left Arthritis Foundation, National Office number on materials
MN	Used local AF 800 number and MN health Department web address
NC	Left Arthritis Foundation, National Office number on materials
OR	Used local Arthritis Foundation's Chapter's 800 number
PA	Used Arthritis Foundation, Eastern Pennsylvania Chapter number

9. Where should you place the materials you selected?—Be specific. (Where is your target audience likely to encounter the message—which radio stations do they listen to? Where do they go in the

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community...stores? churches? community centers? pharmacies?

Doctor's offices? What newspapers/newsletters do they look at? Be specific about where you plan to place which campaign materials)

Churches Community Centers Clinics Office Ruildings

AZ	• Churches, Community Centers, Chines. Office Buildings
	Smaller community newspapers
IL	• Senior Centers, Convenience stores, Clinics, Grocery Store,
	Pharmacies, Laundromat, Libraries, Banks
	• The Senior Center, and Project Active both placed information
	in their newsletters
MN	Pharmacies, senior centers, worksites, convenience stores,
	churches, clinics
NC	• Senior Center (1); Convenience Stores (13); Pharmacies (1);
	Restaurant (1); Special Events (3); Churches (7); Community
	Centers (1); Doctors/Clinics (5); Fire Stations (3); Grocery stores
	(2); Pharmacies (14); Libraries (3)
	Place paid ads in 4 newspapers (11 placements total)
OR	• Community Center (1); Senior Center (1); Convenience store
	(1); Diner (1); Clinics (4); Pharmacies (9); Health Departments
	(1); Hospital (1); Therapy clinic (1)
	Place paid ads in 1 major newspaper (4 placements total)
	• Drop-in article utilized by 2 smaller local newspapers (article
	about arthritis and exercise and the PACE program).

PA	•	Pharmacies, Clinics, Check-cashing centers, YMCAs, Grocery
		Stores, Libraries.
	•	Print PSA in 4 community newspapers

10. How will you contact the distribution channels (radio stations, community locations for countercards and posters, print media etc.)? Who will actually mail/deliver the materials?

(Success of PSA placement often depends on developing and maintaining a relationship with the PSA director, who has or can develop that relationship? Is there someone else who could handle the materials distribution?)

AZ	Public Relations firm placed radio spots
	Arthritis Foundation volunteers distributed posters and brochures
	with holders to community locations
IL	Contractor (AHEC) placed materials, also used students from
	community nursing class
MN	Used paid placement of radio spots through a statewide radio
	network. Local public health staff did local placement of
	materials. State arthritis program staff and AF chapter staff
	provided materials on request.
NC	AP staff placed PSAs with three radio stations, local
	newspapers, and multiple community locations (Dr. office,
	convenience stores).
OR	• Utilized media contractor to place ads. Contract took about 6-7
	weeks to be written and approved (this was not in original grant).
	Media contractor responsible for selecting appropriate radio
	stations based on target population, placing ads with selected
	stations, place PSAs with all stations, tracking ads placed and
	other pertinent data required for piloting materials.
	AP staff placed most print materials in community site. Health
	Plan placed print material in their contracted providers offices (4
	large clinics and pharmaceutical coalition partner helped place
DA	print materials in many pharmacies.
PA	• Used Arthritis Foundation's public relations contractor.
	Newspapers placed by AF staff

11. What other elements could enhance your campaign? (Create dropin articles, tie campaign to physical local events, facilitate newspaper articles or television stories on arthritis and physical activity)

AZ	Took materials to a health fair
	Public Relations firm (contractor) developed press kits
	Article in Prevention newsletter
IL	Radio interviews on two stations with orthopedic surgeon
	Insert in pharmacy bags for arthritis related medications
	 Press releases to newspapers and radio stations
	Community fair at mall
	Info card placed in Meals on Wheels bags
MN	Radio interviews
NC	Included materials with home delivered meals
	Vista distributed at local recruitment events
	Took materials to county Senior Health and Fitness events
OR	Created drop-in articles for local newspapers.
	Interview with local cable television show.
	Completed PACE training before campaign; created brochure
	insert with local PACE resources to complement brochures.
PA	• Modified (reduced) poster size to increase placement options.

12. Evaluation: How can you tell if your campaign is reaching the target audience, or having any impact? (What indicators could you use to determine campaign impact?)

AZ	Number of brochures picked up at sites
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IL	Community survey, number of brochures picked up
MN	Phone survey, number of brochures picked up, calls to the AF
	chapter, comments of those distributing and displaying materials,
	response to mail survey question on AF materials distribution
	follow-up survey
NC	Community Survey; number of brochures picked up at sites
OR	Community Survey; number of calls to the local Chapter; number of
	participants who joined PACE or Aquatics program since the
	beginning of campaign; number of brochures picked at sites
PA	Community survey. Number of brochures picked up at drop sites.

Other Lessons Learned by Pilot States:

- Allow plenty of time to prepare before implementing campaign (cannot be emphasized enough).
- Rely on local partners for insight into how to run a successful local campaign.
- Working with partners helpful to extend reach, also challenging to assure follow-through
- Laundromats and check-cashing locations receptive
- Some locations (i.e check-cashing stations) not have room for brochure holder on counter
- In general chain stores harder to work with because they needed corporate approval
- Church racks were good for brochure distribution
- Full size posters (36 " x 24") were too large for man locations, but flyers printed on 81/2" x 11" worked well
- Helpful to have written dissemination plan outlining activities and roles.
- Using state printing requires lots of extra time; could have partner print and DOH purchase from them.
- Can make contact with community sites by phone ahead of time, most useful to make site visits when you have materials in hand easier to get sites to agree when they can see materials.
- Need early and careful collaboration with Arthritis Foundation to make sure campaign any their activities complement each other
- Can add local physical activity options (PACE programs, walking clubs etc) as brochure insert or list in response packet.
- Placing print ads in smaller newspapers is better value, more coverage, or frequent placement for less money.
- Small newspaper may not be able to use Quark printer files, and could require PDF files.
- Cost per brochure goes down when larger quantities are printed.