



**MENTAL
HEALTH**

it's part of all our lives

Developing a **Stigma Reduction Initiative**

EVENT PLANNING

PARTNERSHIP DEVELOPMENT

**OUTREACH TO SCHOOLS
AND BUSINESSES**

MENTAL HEALTH RESOURCES

**MARKETING TO THE
GENERAL PUBLIC**

GRASSROOTS OUTREACH



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Substance Abuse and Mental Health Services Administration
Center for Mental Health Services
www.samhsa.gov

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FOREWARD

“Every man, woman, and child with or at risk for mental disorders deserves a life in the community, with meaningful employment, interpersonal relationships, and community participation.”

This is the vision expressed in “Transforming Mental Health in America—The Federal Action Agenda: First Steps.”

Many share a common commitment to this vision. Yet there are numerous obstacles to turning this vision into a reality. As the agenda goes on to state, “Many people [with mental illnesses] remain unserved, in part because of the stigma of seeking help.”

Certainly, stigma is one of the more formidable obstacles to a transformed mental health system. Stigma and discrimination against people with mental illnesses leads others to avoid living, socializing or working with, renting to, or employing people with mental illnesses. It leads to low self-esteem and hopelessness. And it deters the public from seeking and wanting to pay for care. Worst of all, it often causes people with mental illnesses to become so embarrassed or ashamed that they conceal symptoms—and avoid seeking the very treatment, services, and supports they need and deserve.

In 2003, the Substance Abuse and Mental Health Services Administration (SAMHSA), which is part of the U.S. Department of Health and Human Services, launched the Elimination of Barriers Initiative (EBI). Based in eight pilot States, the EBI aimed to build awareness of and counter the discrimination and stigma associated with mental illnesses. The EBI laid much of the groundwork for SAMHSA’s National Anti Stigma Campaign (NASC). It also laid the groundwork for developing the contents of this Resource Kit.

A key component of the EBI—and a major focus of this kit—is grassroots support and outreach. Each of the eight States that participated in the EBI formed partnerships, mobilized volunteers, and conducted other on-the-ground activities that generated attention from the media, paved the way for entry into school systems and businesses, and took mental health out of the shadows. Indeed, the program’s impact was deepened through the vibrant community-based initiatives conducted by groups and individuals, including local speakers’ bureaus and other activities intended to foster direct contact between people with mental illnesses and the public at large.

Mounting a stigma reduction initiative requires a significant investment, in terms of both human and financial resources. It is a full-time job, especially in the early planning stages. It is hard work. Yet it is also gratifying. As the ugly veil of stigma gives way to compassion and acceptance, one realizes the reward is worth the hard work.

This resource Kit is intended to raise awareness of mental health and help counter the stigma and discrimination faced by people with mental illnesses. You are invited to use it in the fight against stigma and discrimination.

Thank you for your continued dedication to this critical issue.

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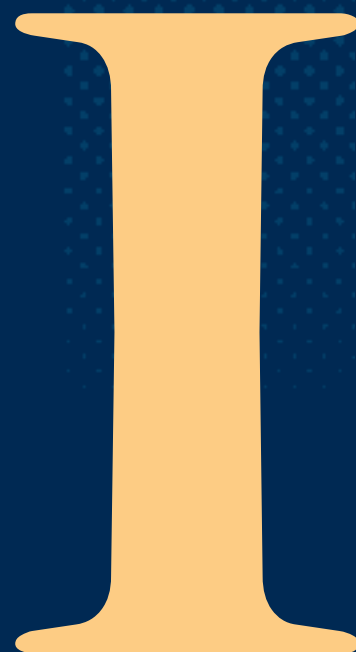
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Resource CD:

SECTION

Introduction



WHAT'S INSIDE

This kit, “Developing a Stigma Reduction Initiative,” is designed to support the activities of those who plan to mount a statewide, regional, or local effort to address and counter stigma and discrimination. It is intended for use by local mental health advocates, consumers of mental health services and their family members, community leaders, and other organizations and individuals who have dedicated themselves to eliminating the barriers of stigma and discrimination faced by people with mental illnesses. It is divided into four sections in addition to this introduction:

- Section 2, “Mounting a Stigma Reduction Initiative,” offers guidance on the basic mechanics of planning and implementing a statewide initiative.
- Section 3, “Outreach Materials,” provides sample materials and templates you can use to develop and customize your own communications materials.
- Section 4, “Best Practices,” includes tactics to enhance and maximize your outreach efforts.
- Section 5, “Resources,” provides several directories of resources for creating your own public education materials, including communications resources.

This kit provides you with nearly everything you need to mount a local, regional, or statewide stigma and discrimination reduction initiative. There are two key elements, however, that you will need to provide: people and financial resources. Mounting an effective stigma and discrimination reduction initiative is extremely labor-intensive. It requires careful planning; outreach to potential partners, the media, and stakeholders such as consumers of mental health services and their families; and followup. Although these tasks are described in the section titled “Launching a Stigma Reduction Initiative” in Section 2, it is worth emphasizing here that the more people you can dedicate to your initiative, the greater your likelihood for success. Financial resources will also have an impact on your initiative’s success. While many aspects of your outreach activities may likely be donated—airtime and print space for public service announcements (PSAs), catering services for events, even venues for trainings—there are many incidental costs that add up quickly. These include duplication costs for CDs of drop-in articles and print PSAs, printing costs for brochures and posters, charges for conference call services, and mileage reimbursements. Many of these expenses are relatively small, yet they add up quickly.

Throughout this kit are synopses of outreach efforts from the eight pilot States that participated in the Elimination of Barriers Initiative (EBI). In implementing the EBI, each State had its own set of circumstances and barriers to overcome—and each developed its own innovations and ideas for mounting a statewide stigma reduction initiative. These stories will both demonstrate that there is no single “one-size-fits-all” approach to countering stigma and discrimination and provide inspiration to you in the development of your statewide initiative.

Also in this kit is a CD-ROM that contains this document and other items including the following samples. See the Appendix for a complete list.

- Live-Read Radio Scripts (English)
- Live-Read Radio Scripts (Spanish)
- Print PSAs (English—for both newspapers and magazines)

- **Print PSAs (Spanish—for both newspapers and magazines)**
- **PSA Pitch Letter (English)**
- **PSA Pitch Letter (Spanish)**
- **State- or Community-Specific Drop-In Article**
- **General Drop-In Article (English)**
- **General Drop-In Article (Spanish)**
- **Drop-In Article Pitch Letter**
- **Sample Feature Story Pitch Letter**
- **Fulfillment Brochure (Bilingual: English and Spanish)**
- **Schools Materials**
- **Business Materials**
- **Sample Proclamation**

For more information about any of the materials in this kit, please contact the Substance Abuse and Mental Health Services Administration (SAMHSA) Resource Center to Address Discrimination and Stigma (ADS Center). Visit the ADS Center Web site at www.stopstigma.samhsa.gov, or call 800-540-0320.

ABOUT THE ELIMINATION OF BARRIERS INITIATIVE

In January 2003, SAMHSA's Center for Mental Health Services (CMHS) launched the EBI. The purpose of the EBI was to identify effective approaches for addressing the stigma and discrimination faced by people with mental illness. As the Federal Action Agenda states, "Every man, woman, and child with or at risk for mental disorders deserves a life in the community, with meaningful employment, interpersonal relationships, and community participation."¹ Unfortunately, stigma and discrimination often stand in the way of opportunities for people with mental illnesses. They contribute to the economic poverty and social isolation of many consumers. Stigma and discrimination have a substantial impact on everything from mental health care penetration rates to support for public mental health services. The EBI was a 3-year demonstration designed to test approaches to addressing discrimination and stigma in eight pilot States: California, Florida, Massachusetts, North Carolina, Ohio, Pennsylvania, Texas, and Wisconsin.

The EBI kicked off in January 2003 with a gathering of representatives from national mental health and behavioral health organizations, academia, Federal agencies, and foundations. At the meeting, this high-profile audience was introduced to the EBI and asked to join a listserv, where subscribers were provided with updates about the initiative as well as completed materials. A smaller group of key partners was engaged throughout the 3-year period to review strategies and tactics, disseminate materials, and gather and judge entries for the Voice Awards event.

A Social Marketing Approach to Stigma and Discrimination Reduction

Social marketing is similar to traditional marketing, but instead of encouraging the purchase of goods or services, social marketing encourages behavioral change. In the case of the EBI, social marketing strategies and tactics encouraged target audiences to adopt favorable attitudes toward and be part of an accepting environment for people with mental illnesses. The EBI was unique in that it offered a voice to consumers in reducing stigma and discrimination in an effort to raise awareness about mental health issues. By communicating real stories of consumers and by facilitating and encouraging personal contact with people who have mental illnesses, the EBI urged that people with mental illnesses be treated with respect and humanity. The application of social marketing strategies such as these, which serve as the foundation of the EBI, has proven to be effective in shifting public attitudes and behaviors.

The EBI employed three distinct social marketing strategies that have been shown by researchers to effectively reduce discrimination and stigma:

- Public education
- Direct contact with mental health consumers, and
- Reward for positive portrayals of people with mental health challenges.

Based on feedback gathered from the eight pilot States, the EBI focused on three target audiences:

- The general public (adults age 25-54)
- The business community, and
- Secondary school educators

The EBI followed a classic social marketing model, which typically includes the following steps:

- Conduct a situational analysis to determine prevailing attitudes regarding the issue to be addressed; investigate similar efforts, if any, that have been used to address the issue; identify potential program partners, stakeholders, and target audiences; establish message characteristics, communications strategies, and obstacles; and make recommendations regarding communications strategies, messages, training and technical assistance, and other activities.
- Develop a marketing plan, based on the information from the situational analysis that describes the marketing and communications approach by addressing initiative goals, audiences, messages, communication channels, needed partnerships, implementation strategies and timelines, and a means for evaluating the initiative's success.
- Implement the strategies described in the marketing plan within the stated timeframe.
- Evaluate the effectiveness of the strategies.
- Refine strategies, if necessary, according to evaluation findings.

One of the first actions in the development of the EBI situational analysis—and the EBI as a whole—was to conduct discussion groups among a number of potential audiences about mental health awareness, stigma, and communications channels. In addition, the EBI gathered background and feedback from the eight pilot States charged with implementing the effort. The result, the EBI situational analysis, provided a snapshot of the prevailing needs, attitudes, demographics, media environment, and opportunities in the areas to be served by the EBI. It identified potential opportunities—and challenges—as well as target audiences and media channels. Also, it identified the States' desired goals and outcomes for the EBI and their role in implementing the EBI. This analysis served as a benchmark for evaluating the effectiveness of the EBI.

The EBI marketing plan described the social marketing approach to addressing the stigma and discrimination associated with mental illnesses. While the situational analysis identified a range of possible audiences and opportunities, the EBI marketing plan narrowed the audiences to a workable list of three. In addition, it identified the strategies and tactics for exploiting opportunities and reaching those audiences. These strategies and tactics were synthesized into creative briefs for each audience. The document closed with a plan for implementation, complete with target dates for achievement of milestones, a plan for technical assistance, and recommendations for evaluation. The EBI situational analysis and marketing plan are included in this kit in the Appendix.

After the situational analysis and marketing plan were completed for the EBI as a whole, each pilot State developed its own marketing plan. A sample of a State marketing plan is included in the Appendix. In addition, each State conducted its own EBI kickoff meeting with local partners. The meetings were similar to the EBI national kickoff meeting, but tailored to each State's experience in addressing stigma and discrimination on the local level. States took the lead in planning these meetings with the help of the EBI implementation team and found them a good way to connect with stakeholders who would likely be tapped to help roll out the initiative in each State.

The next step was materials development. States and partners were consulted regularly over an 8-month period to comment on messages and materials. The result was a portfolio of EBI educational materials that had buy-in and support across the range of stakeholders.

States began implementing the campaign in May 2004 with a variety of activities including events, community outreach, consumer involvement, speaking engagements, and trainings in businesses and schools.

During the third year of the EBI, the Voice Awards were organized and held in Los Angeles to recognize film, TV, and radio writers for dignified, accurate, and respectful depictions of people with mental illnesses. In addition, EBI States and consumers were recognized for their work in addressing discrimination and stigma on the State and local level.

In addition to communications materials developed specifically for each audience, the EBI also developed a training and technical assistance program with corresponding materials to assist States in launching their campaigns on the local level. Through the course of the EBI's implementation period, all strategies, tactics, and materials were evaluated to assess their reach, awareness, and utilization. This process of evaluation included tracking and monitoring of activities and materials as well as State-based case studies of successes and lessons learned. A summary of the evaluation is included in the Appendix.

A vertical decorative bar on the right side of the page, featuring a halftone pattern of small blue and yellow dots. The background is split horizontally into a yellow top half and a dark blue bottom half.

SECTION

Mounting a Stigma Reduction Initiative

III

LAUNCHING A LOCAL, REGIONAL, OR STATEWIDE STIGMA REDUCTION INITIATIVE

This kit is designed to help you initiate or augment your stigma and discrimination reduction activities. You can use one or all of the enclosed ideas to improve your current stigma and discrimination reduction efforts or to create a new initiative that blankets your target audiences with stigma and discrimination reduction messages.

What Steps Should You Take?

Your initiative should adopt a thorough, step-by-step process to identify activities and materials that would most effectively address stigma and discrimination. You can implement these key steps:

- Conduct a Situational Analysis to determine prevailing needs, attitudes, demographics, media environment, barriers, and opportunities to address stigma and discrimination associated with mental illness. (See Situational Analysis Tip Sheet)
- Develop and implement a marketing plan for your stigma and discrimination reduction initiative, including selection of one or two audiences to approach and a timeline for implementation. (See Marketing Plan Tip Sheet)
- Convene partners and stakeholders, including adult and youth consumers of mental health services and their families, early and throughout the process to help develop and implement activities and materials.
- Evaluate the effectiveness of the implemented strategies and refine as necessary according to the findings.

While these steps will provide a foundation for your initiative, here are a few additional considerations that could help increase your chances for successfully engaging the public in a discussion about critical mental health issues.

Invest Both Human and Financial Resources

Undertaking an effective stigma and discrimination initiative requires a significant investment of human and financial resources. Yet the potential dividends are invaluable. Reducing the stigma and discrimination faced by people with mental illnesses is a major step in transforming mental health care in the United States, according to the Federal Action Agenda.

Your investment will depend upon two primary factors:

- **The size and scope of your market area:** Obviously, undertaking a multifaceted statewide initiative requires a significantly higher investment than does a local initiative focused on changing attitudes about mental illnesses among employers.
- **The extent, if any, of your existing stigma and discrimination reduction efforts:** One of the lessons learned in the EBI was that among States with existing stigma and discrimination reduction efforts, much of the groundwork, in terms of partnership and coalition-building, audience identification, and message testing

had already been undertaken, so fewer human or financial expenditures were required to get their EBI activities off the ground than in States with no existing efforts.

Although it is virtually impossible to estimate the financial investment your initiative will require, supervising, managing, and implementing a major stigma and discrimination reduction initiative—especially on a statewide level—is at least a half-time, if not full-time, job for the duration of the initiative. There are meetings and events to coordinate, media to contact, calls to make, and plans to organize and implement. As for the financial commitment, some of the items to budget for include the following:

- Printing costs for posters and brochures, business and schools outreach materials, and PSA packaging,
- Duplication costs for PSAs, which are usually submitted on CD for newspapers and magazines and on paper for live-read radio scripts,
- Postage costs for PSAs,
- Venue and catering costs for meetings and trainings,
- Telephone costs, and
- Transportation costs.

Know Your Message

The EBI messages for the original campaign were developed in close consultation with pilot States, consumers, and partners. These stakeholders recommended keeping stigma-reduction messages strength-based and focused on recovery. The messages of the general public campaign follow:

- Mental illnesses affect almost every family in America.
- People with mental illnesses make important contributions to our families and our communities.
- People with mental illnesses recover, often by working with mental health professionals and by using medications, self-help strategies, and community supports.
- Stigma and fear of discrimination are key barriers that keep many people from seeking help.
- You can make a difference in the way people see mental illnesses and mental health if you:
 - Learn and share the facts about mental health and about people with mental illnesses, especially if you hear or read something that isn't true;
 - Treat people with mental illnesses with respect and dignity;
 - Support the development of community resources for people with mental illnesses and their friends and family; and
 - Respect the rights of people with mental illnesses and don't discriminate against them when it comes to housing, employment, or education.

You can use these messages for your initiative or combine them with State or local messages, depending on which issues are of most concern to your community. Whatever messages you choose, be sure they are repeated in interviews, at events, and in locally produced materials. A campaign must be consistent to be effective.

Develop a Compelling, Memorable Theme

The theme of the EBI was “Mental Health: It’s Part of All Our Lives.” It was tested among target audiences, stakeholders, and partners to gauge its memorability, relevance, and believability—three factors crucial to success. The groups embraced the theme line because it both struck a chord of agreement and led them to think about mental health. The theme line was used in all EBI materials, and it was incorporated into the Web site URL.

Watch Your Language

A key to successful communications is addressing your audiences in language with which they are comfortable and with a message they are ready to hear. One example you will notice in virtually all the educational materials developed for the EBI is the reference to “mental health problems,” instead of “mental illnesses.” This was a conscious decision based on considerable testing among target audiences, especially the general public. While targeted audiences responded to “mental health problems” favorably and felt the term covered a wide range of conditions, the term “mental illnesses” came across as frightening; audiences felt that it connoted the potential for violence. Certainly, the public’s reaction to the term “mental illnesses” points out the need for stigma reduction initiatives. Yet a key to effective social marketing is to move audiences up the continuum from rejection to acceptance, and because stigma reduction efforts are at their infancy, it was clear that audiences were not ready to accept the term “mental illnesses,” and the use of the term might have led them to reject the overall message of the EBI.

Establish Spokespeople

Direct contact and personal stories are powerful ways to impart messages that can reduce stigma and discrimination related to mental illnesses. Research shows personal contact to be one of the most effective ways of bridging the gap between misconceptions and the truth. An effective way to augment your public education activities is to research and take advantage of opportunities for consumers to tell their stories before various audiences—whether they are media public service directors, reporters, community- or faith-based organizations, businesses, or schools.

Before you take your messages to the public, it’s important to decide who’s going to represent your community and your issue. Choose spokespeople who are well versed in mental health and recovery issues and can represent your program well. Reporters usually prefer to speak to the person in charge, so you might want to make that a factor in your decision. You should also consider choosing a representative who can speak personally about mental health concerns. An outreach worker or a local consumer can often convey your message much more credibly than a spokesperson who does not have personal experience with the issue. Before having your spokesperson do interviews, review the public speaking tips in section 4 and conduct an in-depth mock question-and-answer session to prepare the spokesperson.

Make Use of the National Toll-Free Info Lines and Web Site

The “Mental Health: It’s Part of All Our Lives” materials direct callers to SAMHSA’s National Mental Health Information Clearinghouse via a national toll-free number and Web site, where both English- and Spanish-speaking callers can obtain free brochures as well as

local referrals. The national toll-free number is 1-800-789-2647. A TDD line (1-866-889-2647) is also available for the hearing-impaired. Bilingual information specialists knowledgeable about mental health issues are available to receive calls and assist callers with information, publications, and referral information within their State. In addition, materials refer to the English and Spanish EBI Web sites: www.allmentalhealth.samhsa.gov and www.nuestrasaludmental.samhsa.gov. Please take advantage of these toll-free numbers and URLs. Publicize them in your brochures and fliers, and mention them in interviews with the media. Or if you already have your own toll-free number and/or Web site, be sure to refer to them in your materials. You can also contact the SAMHSA Resource Center to Address Discrimination and Stigma at www.stopstigma.samhsa.gov or 800-540-0320 for information and assistance with your initiative.

Establish a Timeline

Consider launching your effort during May Is Mental Health Month or Mental Illness Awareness Week in early October. Extend your planning beyond the initial launch to ensure your messages reach as many people as possible. To help you envision and organize a comprehensive campaign that reaches beyond an initial blitz, here's a timeline that includes milestones based on planning over a 6-month time frame. This calendar can assist you in turning your campaign into a multilayered, multimonth effort.

You'll see that tasks and milestones are included that address each of the EBI audiences: general public (adults, age 25-54), business community, and secondary school education. However, it is not necessary that your State adopt all three of these audiences, as the infrastructure and resources required to do so can make it difficult to penetrate them all successfully. Choose a single audience, and then consider taking on an additional audience once inroads are successfully made in reaching the first.

Month 1

- Choose a planning committee comprising partners and consumers of mental health services
- Familiarize yourself with all general public materials
- Plan for and prepare launch event; send media advisory
- Identify personal contacts at TV, radio, and print outlets and set up meetings with them
- Develop distribution plan for drop-in articles
- Forward e-mail announcement promoting initiative and referring to Web site to all contacts for both general public and education kits
- Finalize list of target schools for school outreach; identify school contact and trainer

Month 2

- Meet with media outlets to secure print PSA placement
- Distribute drop-in article kits to advocates, partners for local dissemination
- Identify team for Hispanic outreach; plan distribution
- Familiarize yourself with all schools materials
- Identify school outreach team; set up meetings with target schools to schedule training

- Finalize list of target businesses for business outreach
- Begin planning any events related to business/schools launch

Month 3

- Hold launch event
- Continue to meet with media outlets to secure PSA placement
- Send reminder e-mail to advocates/partners about PSA drop-in article efforts and accomplishments
- Link-trade with partner Web sites
- Familiarize yourself with business materials; finalize distribution plan
- Look for speaking opportunities at business/school organizations (Chambers of Commerce, Rotary, PTA, etc.)
- Continue to meet with schools

Month 4

- Continue to meet with media outlets to secure PSA placement
- Target alternative outlets for print PSAs, such as community bulletin boards and faith-based community publications
- Consider pitching spokespeople for feature stories
- Market business materials to local employers
- Promote schools/business materials (use back-to-school/work as entry point if appropriate)

Month 5

- Write op-eds for placement
- Follow up with target schools about implementing training
- Continue to market business materials; follow up with interested businesses
- Look for alternate general public drop-in article placement opportunities, such as community newsletters and partner Web sites
- Promote business/schools drop-in articles and PSAs to related local publications
- Book speaking engagements for spokespeople

Month 6

- Promote general public/business/school drop-in articles to community publications
- Prepare for speaking engagements

SITUATIONAL ANALYSIS TIP SHEET

Once you have decided to plan and implement a stigma reduction initiative, a written comprehensive situational analysis must first be completed. This provides a snapshot of where things stand at the time of the development of your stigma reduction initiative. Generally, the analysis involves an assessment of how stigma and discrimination are manifested towards people with mental illness, an examination of relevant research, knowledge and experiences, and an identification of what works to reduce stigma and discrimination, past and existing effective anti-stigma efforts, and barriers and opportunities to implementing a stigma reduction program. After analysis of the gathered information, recommendations are offered related to the stigma reduction initiative. A baseline of quality information serves as the foundation for comprehensive social marketing efforts and can be used to make decisions about what you wish to address in your initiative and how you will go about it.

Areas to be considered for your Situation Analysis include the following:

- A comprehensive inventory of literature addressing discrimination and stigma associated with mental illness,
- A comprehensive review of materials from local and national models of effective anti-stigma programs, projects, campaigns and activities,
- An overview of stigmatizing thoughts, attitudes, and behaviors directed toward people with mental illnesses in the nation and your locality,
- An identification and discussion of effective interventions to reduce stigma and discrimination,
- Findings from research on public attitudes and behaviors directed toward people with mental illnesses as well as public awareness of mental health issues,
- A snapshot of print media vignettes of newspaper coverage to see if print media portrayals and reporting are consistent with your findings,
- Identification of situations and barriers to developing a successful stigma reduction initiative,
- Identification of resources and opportunities that can be utilized for the initiative,
- Identification of potential partners for development and implementation of the initiative,
- A listing of communication and media channels,
- A discussion of target audiences and desired outcomes for the initiative, and
- Recommendations on communication strategies, messages, training and technical assistance, and other activities for the initiative.

Among the sources you can use in your analysis consider the U.S. Census, Government sources, Arbitron, Inc., and Nielsen Media Research. Also, a component of your research needs to include comprehensive personal interviews and use of focus groups. These may include the general public, mental health consumers and advocacy groups, mental health directors and providers, public affairs personnel, and others. Involving others in the situational analysis helps to build a better understanding of the issues and how you might address them.

It is important to give adequate time and effort to the preparation of the situational analysis. It forms the foundation for the development of your stigma reduction initiative to overcome the misperceptions that belie the present-day realities of mental illness, as well as the discrimination resulting from these misperceptions.

MARKETING PLAN TIP SHEET

Think of the marketing plan as your roadmap for your initiative. It ensures that everyone working on your initiative will work toward the same goals, address the same audiences, speak with a unified voice, and operate with the same set of objectives within the desired time frame. A marketing plan ensures that your initiative moves from the planning stage through implementation and evaluation, on time and without interruptions. Granted, there will always be surprises and unexpected developments, so you should also view the marketing plan as a living document—one that should be periodically updated and revisited.

Developing a marketing plan is an eight-step process:

- Step 1: Determine Goals
- Step 2: Identify and Profile Audiences
- Step 3: Develop Messages
- Step 4: Select Communications Channels
- Step 5: Choose Activities and Materials
- Step 6: Establish Partnerships
- Step 7: Implement the Plan
- Step 8: Evaluate and Make Midcourse Corrections

Before You Start: A Marketing Plan Checklist

Developing a marketing plan for the first time is both challenging and time-consuming. Yet the benefits to investing the time and energy up front pay off richly when you actually implement your plan.

To make the process a little easier, consider the following questions:

- What are your short-term and long-term campaign objectives?
- What is your timeline for completion of the campaign?
- Who are your target audiences?
- What are the key communications messages?
- What are your staff and financial resources?
- What materials and activities will best disseminate your messages?
- What media have you targeted?
- What specific roles have you identified for your spokespeople?
- What role will consortium members, corporate partners, and staff play?
- How will you evaluate your campaign?

STEP 1: DETERMINE GOALS

To initiate a successful and effective marketing plan, start with an assessment of your current goals. Examine what you stand for—your mission, values, and beliefs. Look closely at whom your organization is serving. This process will help narrow and sharpen the focus for your *communication initiative(s)*. Limit your goals to no more than two or three. A common mistake many organizations make is setting so many goals that it is virtually impossible to achieve any, let alone all, of them.

Some of the questions to ask in determining your goals follow:

- What issue is most important to you right now?
- Who is most affected by the issue stated above?
- Who makes decisions about the issue?
- What is the overall goal you want to achieve? (i.e., what change would you be able to observe? Be specific.)
- What tangible outcomes would you like to achieve through a communications effort? (i.e., how will you know you are achieving your goals? Be specific. What would you see, hear, or have in-hand that would let you know you are making progress toward the goal?)

STEP 2: IDENTIFY AND PROFILE AUDIENCES

Once you've identified your key issues, it's time to identify and profile specific audiences to target with a communications initiative. The reason for taking the time to look this closely at your audiences is that this kind of background information is essential in choosing the most effective ways to communicate with the audience. Madison Avenue has learned this lesson well.

In Step 1, you were asked to determine who is most affected by the issue. These are the audiences whose knowledge, attitudes, and behavior must be changed in order to meet your goal. For example, if your primary issue is stigma in the workplace and the effects it has on the hiring of people with mental illnesses, your primary audiences will likely be employers.

Next, think about who else is affected if you succeed in your goal. These groups become your secondary audiences. Again, if workplace stigma is your primary issue, those who will be affected by achieving your goal include employees.

Now consider whether there are others who can influence primary and secondary audiences. These groups become your tertiary audiences—commonly referred to as “influencers.” You may wish to design a communications initiative to reach some of these audiences as well. Or you may see a role for these folks as “allies and partners.” Continuing with the example of workplace stigma, some of these influencers might include professional organizations, such as chambers of commerce or labor unions.

Now it is time to profile each audience. For each of the audiences, describe what you know about its knowledge, attitudes, and behaviors as they relate to your issue. Determine what barriers stand in the way of each audience fully supporting or participating in reaching your goal, as well as the benefits if they do. What are the characteristics of each audience? How do they spend their time? What is their gender, ethnicity, and income level? How have they been educated? What are the language considerations? What or whom are they influenced by? What makes new information credible for them? What or who could motivate change or action?

STEP 3: DEVELOP MESSAGES

Your messages are closely tied to your goal and objectives. They deliver important information about the issue and compel the targeted audience to think, feel, or act.

They can:

- Show the importance, urgency, or magnitude of the issue,
- Show the relevance of the issue,
- Put a “face” on the issue,
- Be tied to specific audience values, beliefs, or interests of the audience,
- Reflect an understanding of what would motivate the audience to think, feel, or act,
- Be culturally relevant and sensitive, and
- Be memorable.

The messages you develop can be used in many ways. First, they are a set of statements that you and your team agree upon as conveying the key information for your initiative. They will not include all the detail and supporting ideas and data that you may use in printed materials or other forms of communication. The messages you develop can become the underlying themes for your materials and activities. You may develop slogans based on them. You may develop sets of talking points that members of your team will use in making presentations. And they easily become the basis for radio and print PSAs, the genesis for posters, and themes or topics for fact sheets, drop-in articles, and even letters to the editor or newspaper editorials.

Here are some items to consider in message development:

- **Clarity:** Your messages must convey information clearly to ensure your audiences’ understanding and to limit the chances for misunderstanding or inappropriate action. Clear messages contain as few technical/scientific/bureaucratic terms as possible, and they eliminate information or details that the audience does not need. Readability tests can help evaluate how easy to read and understand your materials are, and can help writers to be conscientious about the words and phrases they use.
- **Consistency:** In an ideal world, there would be specific consensus on the meaning of new findings, and all messages on a particular topic would be consistent. Unfortunately, consistency is sometimes elusive. Experts tend to interpret new data differently, making consensus among government, industry, and public interest groups difficult. Make sure that the messages you use stay constant no matter what form they take.
- **Main points:** Your main points should be stressed, repeated, and never hidden within less strategically important information.
- **Tone and appeal:** A message should be reassuring, alarming, challenging, or straightforward, depending upon the desired impact and the target audience. Messages should also be truthful, honest, and as complete as possible. In addition, positive, strength-based messages have been shown to be more appealing than those that use a negative appeal.
- **Credibility:** The spokesperson and source of the information should be believable and trustworthy.
- **Public need:** For a message to break through the “information clutter” of society, messages should be based on what the target audiences perceive as most important to them—what they want to know, not what is most important or most interesting to the originating agency.

Prior to final production, messages should be tested with the target audiences (and in some cases with channel “gatekeepers”) to ensure public understanding and intended responses.

STEP 4: SELECT COMMUNICATIONS CHANNELS

Communications channels carry the messages to the target audiences. Channels take many possible forms. Sample channels include the following:

- Television stations
- Radio stations
- Newspapers
- Web sites
- Weblogs (“blogs”)
- Viral e-mails
- Community centers
- Street festivals
- Laundromats
- City government offices (e.g., Division of Motor Vehicles)
- Malls
- Parks
- Schools, colleges, and vocational and language training centers
- Libraries
- Recreation centers (e.g., basketball courts or soccer fields)
- Community nonprofit offices
- Transportation depots/stations
- Supermarkets
- Fast food restaurants
- Literature racks
- Word-of-mouth

Answering some key questions will aid you in identifying the most effective channels for reaching your audiences. Some questions to ask include:

- Where or from whom do your audiences get their information?
- Whom do they find credible?
- Where do audiences spend most of their time?
- Where are they most likely to give you their attention?

STEP 5: CHOOSE ACTIVITIES AND MATERIALS

What are the activities, events, and/or materials—to be used in your selected channels—that will most effectively carry your message to the intended audiences? In choosing these, you should consider the following:

- Appropriateness to audience, goal, and message
- Relevance to desired outcomes
- Timing
- Costs/resources
- Climate of community toward the issue/activity
- Cultural appropriateness (including language)
- Environment—geographic considerations

Sample activities include:

- News conferences
- Editorial board meetings at newspapers
- Radio talk or call-in shows
- A benefit race
- Parades
- Web links
- Conferences
- One-on-one meetings
- Open houses
- Speeches
- Hotlines
- Listservs
- Information fairs

Materials to support activities may include:

- News releases
- Fliers and brochures
- Opinion editorials (op-eds)
- Letters to the editor
- Posters
- PSAs
- Bookmarks
- Video presentations
- Web pages
- Float in a parade
- Buttons, pins, and ribbons
- Promotional items and giveaways

STEP 6: ESTABLISH PARTNERSHIPS

Groups, organizations, or businesses may exist that will aid you in reaching your goal by providing funds, expertise, support, or other resources. List allies or partners who support or work with your audiences or share your goals. The prospect of developing partnerships with area businesses and local organizations may be challenging if you haven't had much experience in working with the private sector. However, there are some practical steps you can follow that will focus your energies and resources where they will be most effective.

Determine Your Needs

Before you ask for help, it's important to identify what you need most. Make a "wish list" and include resources like equipment (computers, vehicles, or supplies), services, educational activities and materials, and specific products that can be donated. This list will help set your priorities and guide who you need to contact.

Identify Potential Partners

There may be hundreds of organizations to approach in your community—where do you start? Let your fingers do the walking and start with the Yellow Pages. By using your wish list to identify categories of need, you can narrow the types of organizations that can help you. Don't limit yourself at this stage, and try to be imaginative. For instance, a local pizza parlor may not have an obvious link to your issue, but if it is a popular hangout for high school students, the restaurant might host a pizza party and allow you to hand out fliers.

Start with partners with whom you, your Board and your Committee have contacts. After you have made these personal contacts, ask each of them who else they would suggest as contacts, and ask if you may use their name as a reference. Other sources for potential partners are your Chamber of Commerce directory, general corporate directories, and existing coalitions. For national contacts as well as local, there are several national directories that are available at your local library. The Corporate Giving Directory, which is updated annually, is an excellent choice. Don't forget to monitor the local media. Who sponsored that nonprofit ball and where was it held? What company bought the T-shirts for the annual 10K Run to support environmental research? Also, if you have a good relationship with other nonprofits or agencies, they may share their giving list.

Prioritize Your Contacts

When you have a list of possible contacts, begin making your partnership circle. This circle will help you further identify your most important contacts so you can prioritize your efforts. You've chosen possible partners by category—now look for personal contacts. Think of dropping a pebble in the water and watching the ripples spread out. By putting organizations where you already have contacts in the center, you will anchor your effort as you move further and further out.

Start with organizations that have helped in the past—they will be the very center of your circle. Then talk to your employees, board of directors, or coalition members. Whom do they know? You may discover that someone on staff went to school with the president of a local bank. Put organizations where you have close personal contacts on the next “wave” of your circle. After examining personal contacts, look for those organizations that would make “perfect partners” (i.e., organizations that have supported similar issues in the past). Keep going until you get to the very outer layer, which would be organizations where you have no contacts at all and no apparent links. Now you have prioritized your outreach list!

The final step before preparing your proposals is finding the correct contact. You may have this information if you've used an up-to-date directory or have a personal contact, but if you're not sure, make a phone call. Ask to whom you would send a partnership proposal; be sure to get the person's name, title, full address, and phone number. And finally, don't overlook the importance of using the Internet to research target organizations.

Make Your Proposal Strategic

Companies have a giving strategy, so your proposal should be strategic, too. A fundraiser for a major national nonprofit once said, “There is no corporate philanthropy—they all give for a reason.” Most organizations give strategically, meaning they give in areas where they have an interest, want to influence someone or something, or stand to gain something—employees, customers, and the community influence those decisions as well. We all know that there can be tough competition for nonprofit support, and that decisions

are sometimes made on small details. Look at your partnership circle and carefully look for connections. Has a city councilperson recently dealt with a mental health-related issue? Look for logical allies and mutual goals and put that information in your proposal.

Make the proposal “mutually beneficial.” Just as you have asked for something, be prepared to offer something in return. Try to at least reward the organization with positive community exposure and recognition for its efforts.

Use your best judgment on the proposal. If you know someone, a letter may suffice. If you’re sending a proposal to a large company, you may want to send a letter, an information kit, and a recent newspaper article on what your organization is doing in the community. Always demonstrate the importance of the issue, the importance of the program in the community, specifically how the organization can help strengthen your efforts, and how the organization will benefit from its participation.

Face-to-Face Followup

About a week after sending your proposal, call the contact to verify that he or she received the information. At this point, introduce yourself (if you don’t know the contact already) and offer to answer questions or send more information. Ask when would be a good time to call back to schedule an appointment; mark the date and call promptly at that time.

The best way to “sell” the proposal is face-to-face, where you can talk about the campaign, its goals, and its accomplishments. It’s important to be realistic. Smaller businesses may not have extra funds to support community programs, but may be able to provide in-kind support. They may be willing to include information in their mailings to the community or circulate fliers to their employees, in their stores, etc. If you’ve done your homework, you will be able to request help that the company will gladly agree to provide.

Make Your Community Partners Part of Your Team

Don’t ask for something and then never contact the organization again! Keep a database of all donors (even those who said they might give in the future) and recognize them periodically with a personal note or newsletter. Keep them informed on issues in the community and continually offer opportunities for participation, including volunteering. Also, offer a chance for feedback so you can establish a two-way dialogue with your partners. Town meetings, online seminars, and presentations are all ways to share information with your partners. Make them team members and they will continue to support you for years to come!

For more information about partnership development, please see the tip sheet titled “Developing Productive Partnerships” in Section 4 of this resource kit.

STEP 7: IMPLEMENT THE PLAN

There are many tools for organizing yourself around time, dollars, and staff needed to implement an initiative. Use the following steps to determine time, budget, and staffing needs:

- List all activities.
- Under each activity, outline the steps, in order, that will lead to its completion.
- Assign a budget estimate to each step.

- Assign a staffing needs estimate to each step.
- Working backward from the activity completion point, assign a date for each step in the activity.

You can plot your dates on calendar pages if you'd like, or you can organize them in another timeline such as a Gantt chart. A sample timeline is included in the Appendix.

STEP 8: EVALUATE AND MAKE MIDCOURSE CORRECTIONS

No matter how thorough your planning may be, it is important to remember that no plan is perfect. And although it is the last item listed, evaluation should be ongoing so that you have the opportunity to change or eliminate items that are not meeting your expectations.

Evaluation should include the following steps:

- Specify times to take stock of your progress in completing the marketing plan.
- Determine strengths and weaknesses.
- Identify obstacles.
- Identify and measure outcomes.
- Create and implement new approaches for success.

TYING YOUR CAMPAIGN TO “MAY IS MENTAL HEALTH MONTH”

Holidays give us an excuse to do things we enjoy, such as throwing parties, giving gifts, and taking comfort in traditions that become beloved over time. They also give us a framework to reflect on things we may not think about for the rest of the year—to count our blessings at Thanksgiving or appreciate our loved ones on Valentine’s Day.

Mental Health Month can be approached in this same spirit—as an annual tradition to look forward to, an excuse to celebrate the strides you have made, and a framework for engaging communities to think about all of our roles in reducing stigma and discrimination against people with mental illnesses. Below are a few tips for celebrating—and leveraging—Mental Health Month.

- **Remind the media gatekeepers months in advance:** Public service directors and editors are probably not looking forward to celebrating Mental Health Month as much as you are. In fact, they probably don’t even know it exists. Be sure to let them know about it so they will have added incentive to run your public service announcement, drop-in article, or column. Doing so months ahead of time will help them plan and increase your chances of getting the word out.
- **Focus on the positive:** Remember, this is Mental Health Month. Media and the public are more likely to participate in an event tied to a “holiday” that seems positive or celebratory. You can effectively counter stigma and discrimination by focusing on strength, resilience, recovery, self-sufficiency, respect, and support.
- **Don’t just offer suggestions, do the work:** Schools and businesses may be interested in learning more about mental health in general or stigma in particular, but there is a good chance they have no one with the time and resources to put together a program. Mental Health Month is a great time to let them know you are available to set up an educational program or give a talk, that you have materials to distribute, and that all they will be asked to provide is an audience.
- **Look beyond the usual suspects:** Government agencies and social services are used to working on advocacy and public education projects. Supermarket managers and restaurant owners probably aren’t. But that doesn’t mean they wouldn’t be willing to get involved if you let them know about Mental Health Month and asked them to make information available while customers wait for a table or stand in line at the cashier.
- **Give the people what they want/need:** When planning your event, materials, or program, think about what would meet the needs of your desired audience. Are you trying to reach young families? How about a Mental Health Month program that includes fun activities for children? Do you want to talk to the business community? Make a dollars-and-cents case for reducing stigma and discrimination in the workplace.
- **Make it “official”:** Getting a government official to announce Mental Health Month somehow makes it seem more real and important to potential partners, including media, and to your audience. A sample proclamation is included in Section 3 of this resource kit.

PROMOTING MENTAL HEALTH AWARENESS WITH PUBLIC SERVICE ANNOUNCEMENTS

Public service announcements (PSAs) offer you the opportunity to promote mental health issues to the general public. TV and radio stations and print media make time and space available for PSAs as a way to demonstrate their commitment to the communities they serve. Yet competition for public service airtime grows stronger every year. As 2005 demonstrated, responses to natural disasters such as the Indian Ocean tsunami and Hurricane Katrina can take priority over all other PSAs without warning. Another consideration is seasonality. Typically, the demand for advertising is highest during the last three months of the year leading up to the holidays. So the amount of unsold advertising time and space, where PSAs usually are placed, is at its lowest. That said, it is best to avoid releasing PSAs just before the holidays, as well as just before the beginning of the school year. Conversely, demand for advertising space is at its lowest during the month of January. It is also the time of year that people spend the most time indoors, especially in northern climates, so TV viewership is at its highest. One caveat: Many creators of PSAs know this, so it is also the time of year when the most PSAs are distributed. As a result, competition from other PSA campaigns is at its highest.

One key to successful placement is to offer the media as many choices as possible, so that they can fill whatever broadcast time or print space they have available. This kit includes a variety of sizes and formats to meet outlets' needs:

- Recorded TV PSAs in English and Spanish in 15- and 30-second lengths;
- Recorded radio PSAs in 60-second lengths (three are in English, and one is in Spanish);
- Scripts for 15-, 30-, and 60-second radio PSAs in English and Spanish;
- Several sizes of English and Spanish print PSAs in black-and-white for placement in newspapers;
- Several sizes of PSAs in both full-color and black-and-white for placement in magazines; and
- A sample PSA pitch letter.

Motivating Public Service Directors and Producers

Most radio and TV stations and print media have public service directors who are responsible for determining which PSAs will run. Public service directors are busy people who receive compelling PSAs every day. They are most likely to use PSAs that they believe are of local interest to their communities, and they often favor issues and causes related to health and children's issues. Because mental health is an important issue that affects many families in your community, public service directors will likely find mental health-related PSAs highly appealing. In addition, they will likely find the "Mental Health: It's Part of All Our Lives" theme just as interesting. Educating local public service directors about the importance of mental health, the harmful effects of stigma and discrimination, the potential for recovery, and the need for increased awareness, knowledge, and action related to mental health can help encourage them to run your PSAs.

The following tips will help you get your PSAs placed:

- **Approach media outlets that use PSAs:** Not all TV and radio stations, newspapers, and magazines use PSAs. So watch TV, listen to the radio, read the newspapers and magazines in your community, and approach those outlets that already run PSAs. In large metropolitan areas, it might be challenging to get your PSAs placed on the most highly watched TV stations, the most popular radio stations, or the most widely read newspapers and magazines. On the other hand, there are probably several less popular TV, radio, and print media outlets that would be willing to run your PSAs. Be sure to contact the cable TV systems in your area. Likewise, weekly and community newspapers are often more likely to run print PSAs.
- **Use your connections:** Chances are, you or someone in your agency already has connections to the media. Take advantage of those connections to encourage your contacts to use your PSAs.
- **Place PSAs in diverse outlets:** Media serving diverse communities offer an outstanding opportunity for PSA placement, especially Spanish PSAs. There is often a lower demand for paid advertising among these media—many mainstream advertisers simply overlook media reaching ethnic or specialized audiences, or consider the cost of adaptation to be too high—so there is usually a higher-than-average availability for PSA time. In addition, not all PSAs are adapted for ethnic or specialized media, so there is less competition for PSA placement than in mainstream media. The key to placement in ethnic and specialized media is making all communications culturally competent. Your communication must be appropriate for the language and cultural practices or characteristics of the target audience. If you are focusing on Hispanic radio stations, for example, make sure you provide both Spanish and English versions of the PSAs—there has been a growing trend toward Spanish media using both languages—and be sure any correspondence to the media outlet is in Spanish. Although public service directors at Spanish-language media outlets are likely fluent in both English and Spanish, they will appreciate the sincerity of your pitch if it is in Spanish, and the gesture will increase your opportunity for placement. The same holds true of other non-English media. Sample Spanish-language PSAs have been included as part of this kit.
- **Know who is in charge:** Public service directors may have different titles, including community affairs director, advertising manager, or general manager. Often, radio and TV on-air personalities or producers decide which PSAs will air, and print media publishers, editors, or advertising managers determine which PSAs will run in newspapers or magazines. Call the media outlets where you want your PSAs to run, and ask who the best person is to speak with about your PSAs.
- **Write a letter of introduction:** Once you have determined who is in charge, send a letter of introduction. Introduce your plans for your State’s mental health initiative, and ask for their support of your activities by running PSAs. Remember to keep it local. The people in charge of PSA placement want to know how the issue affects their community. A sample pitch letter is included in this resource kit.
- **Meet face to face:** Follow up your letter by scheduling a meeting with the public service directors at the media outlets where you want your PSAs to run. Involve consumers of mental health services in these visits. They can put a face on the issue and can educate the public service director about issues related to mental health. It generally takes a few weeks for radio stations to put PSAs into their regular

rotation and even longer for print media, so you should schedule your meetings at least 6 to 8 weeks before you want your PSAs to begin running.

- **Say “thank you”:** Follow up your visits and meetings with thank-you notes. Even more important, acknowledge media outlets once they use the PSAs. Send thank-you notes, and let them know you are delighted that they were able to help raise awareness about mental health issues.
- **Seek a media partnership:** Often the media, including TV and radio stations, newspapers, and magazines, will sponsor community events or issues. When they do, they actively promote the event or issue by giving PSAs premium placement and producing PSAs—and they usually ask that their organization co-brand the event or issue. For example, they might ask you to name an event The Channel 4 Mental Health Initiative. Radio scripts and print ads can be tailored to accommodate sponsors with logos and text fairly easily. There is one downside to a media-sponsored event or issue: Competing media will not use your PSAs. This downside could be far outweighed by the benefits of gaining premium PSA placement and visibility.

Additional Promotional Ideas for the PSAs

Beyond traditional media placement, there are many ways to increase the visibility of your campaign messages through PSA placement. This section will help you with additional ideas for distribution. Hold a brainstorming session to think about places where the target audience spends its time—and remember, print ads make great fliers. Below are some ideas to get you started.

COLLABORATE

Remember that it is important to involve members of your community in your initiative. Begin by naming the groups with whom you often interact or businesses you support. Each is likely to have a newsletter or public bulletin board on which you could post a copy of the print PSA. Some examples:

- Libraries
- Schools, including colleges and universities
- Public government buildings and courthouses
- Community and neighborhood associations
- Churches and synagogues
- Shopping malls, supermarkets, and drug stores
- Youth centers
- Health clubs
- Spas, salons, and barber shops
- Bingo halls
- Civic organizations
- Local businesses
- Hospitals, clinics, and local health centers

SHOP TILL YOU DROP

Thousands of people a day visit your local grocery stores and shopping malls. This is an excellent way to reach the general public. Ask local grocery stores and other merchants to print the PSA on their bags or to include a copy of it in each bag. Shopping malls also have many advertising opportunities, including wall-mounted and freestanding displays, kiosks, and programmable video and digital displays. Call the administrative office of your local stores or malls and ask about advertising possibilities.

TAKE 'EM OUT TO THE BALLGAME

Where can you find a more captive audience than at an athletic event? Athletic events, whether they are professional, amateur, college, high school, or community, provide great opportunities to distribute information. You can ask your local sports team to use the print PSAs in the programs or read live announcer scripts over the public address system. You can even ask them to air the TV PSAs over the in-stadium jumbotrons. Contact the administrative office and ask for the marketing/advertising department of your local stadium to find out how to get advertising space.

LINK UP

Don't overlook the wealth of "virtual opportunities" to promote your initiative online. Ask your partners to include a paragraph about your campaign and the PSAs, as well as a link to your page, on their Web site. In return, you can offer to provide a link to them.

Encourage your partners and advocates not only to talk about your Web site, but to visit it often; the more frequently the site is visited, the higher it will appear in search engine rankings on pages such as Google, Yahoo!, and msn.com.

THE GREAT INDOORS

Don't forget about the advertising possibilities inside buildings. Airports and commercial restrooms offer another way to reach the general public with your message. Almost every airport has advertising space available. This venue is a great way to reach business and leisure travelers. Airport advertising is available in a variety of formats. Advertisements are located throughout the terminals in arrival and departure areas, ticketing areas, baggage claim, concourses, entrances/exits, retail shops, and VIP lounges. Many airports also run PSAs over the monitors throughout the terminals and at baggage claim. PSA advertising in restrooms is becoming popular in restaurants and retail outlets. And don't forget movie screen advertising. Some theater chains prefer slides; others will air the TV PSAs. Contact the facility's administrative office and inquire about ad space. A face-to-face meeting can go a long way toward securing donated ad space.

PLACING DROP-IN ARTICLES

Drop-in articles, also known as repro-proofs or camera-ready news, are effective, cost-efficient ways to spread information on mental health and reduce stigma in your community. A drop-in article is a ready-made article that may be inserted into community and weekly newspapers. The articles typically begin with a vignette, focus on key issues and facts, and conclude with a message summary.

Sample drop-in articles in both English and Spanish are included in this kit as PDFs, which some newspapers prefer. They are also included as text documents that can be modified. One opens with the true story of a recovered mental health consumer from Texas in English. You may use this story “as is,” but in order to give your initiative a local angle, we recommend you open with the story of a recovered mental health consumer in your State or community. For maximum placement opportunities, identify mental health consumers from your State or community who are willing to share their stories, and target the newspapers in their communities. Obviously, you will need to get permission—ideally in writing—from anyone whose story you feature, and it is a good idea to have each person review his or her story before you release it to the media. (A sample consent form is included at the end of Section 3.) The other drop-in article is a general piece with facts and information on mental health and stigma in English and Spanish. These samples can be distributed as they are, but if you feel the audience you are targeting would be more receptive to other mental health information, simply use the text versions of the articles as starting points to draft your own. You can plan to pitch both articles at once or stagger their placement to coincide with State or local news opportunities. A letter to the editor, asking the editor to use the drop-in article and explaining the purpose of the campaign, is included as well, both in text and as a PDF. Special drop-in articles for school and business publications are also included in the kit and are discussed later in this section.

Who Uses Drop-In Articles?

Community newspapers have staffs than larger daily papers—sometimes only an editor and staff writers. These outlets are always looking for ways to effectively and efficiently communicate important information to their readers. Drop-in articles can offer ready-made stories on stigma and other important mental health issues. These articles will save the newspaper staff time and get your mental health messages out in the community.

Distribution Tips

Drop-in articles are most successfully placed at the local level. Approach appropriate local outlets that will print one or more of the drop-in articles. Following are tips to help enhance local distribution efforts:

- Managing editors and feature editors are most likely to make decisions about drop-in placement. Note that at larger newspapers (those with circulations of 10,000 or more), these contacts are different from those who received the PSAs. They are listed on the newspaper web site. Use established media lists, such as Bacon’s Media Directories, as well as any existing reporter relationships you may have, as starting points for your pitch.

- **Traditional newspapers aren't the only places where drop-in articles can be useful. Consider:**
 - **School newsletters**
 - **Supermarket news**
 - **E-blasts or fax blasts to your mailing list**
 - **Faith organization publications**
 - **Hispanic and other ethnic or culturally diverse publications**
 - **Mental health journals**
 - **PTA newsletters**
 - **Business journals and school administration publications**
- **Target a wide range of outlets for drop-in distribution. The more places receiving your drop-in, the higher the odds for placement.**

Creating Your Own Drop-In Articles

Mental health is a topic that affects almost every family in your State. Small, local media outlets may want additional information on stigma and discrimination once they have placed the first drop-in article. After an outlet has placed your article, consider following up in a few weeks or months with a new drop-in article. You can create your own State or local series on mental illnesses and their place in society, using a different mental health consumer story every month or quarter. Keep the stories as local as possible so they're most relevant to local papers and newsletters.

Florida: Weathering a Storm (Six, To Be Exact)

Despite a number of external obstacles, Florida's EBI effort has done more than survive—it has thrived. Hit by six hurricanes in 2004–2005, Florida experienced its worst storm devastation in over a generation. As a result, the Florida Department of Children and Families (DCF) was pressed into action to provide emergency trauma counseling. While this limited the amount of outreach DCF was able to conduct for the EBI, it did not affect the agency's ability to disseminate EBI messages. EBI materials were used by first responders, and Florida produced additional brochures and resource inserts for the purpose of helping hurricane victims. In addition, DCF personnel traversed the entire State providing information on its mental health resources as well as those available through SAMHSA and the EBI.

Not all Florida activities were hurricane-related. DCF also conducted a number of high-visibility events promoting the EBI, including outdoor jazz concerts, May Is Mental Health Month events, and presentations at conferences and seminars throughout the year. These activities helped Florida develop more and stronger networks among advocacy organizations and enabled the State to reach out to various underserved populations, many of which were receptive to mental health messages and eager to become involved in disseminating them. Florida's work with the Mental Health Association of Central Florida, for example, enabled outreach to the State's sizable older population.

PSA placement was one of the major challenges in Florida during the course of the EBI's implementation, largely because of the competition for airtime due to the 2004 presidential election (Florida was a "battleground" State) and hurricane-related messages. So DCF utilized other strategies that enabled it to effectively distribute EBI messages across the State. These strategies included placing information and drop-in articles about the initiative in advocacy newsletters statewide. The agency also utilized local workgroups, such as speakers' bureaus, faith-based organizations, and media partnerships, to promote the messages of the EBI.

With a mental health consumer employment rate below the national average, Florida also saw success in its business outreach efforts. In less than a year, DCF replicated the initial EBI business materials and trained over 50 people to use the "Workplaces That Thrive!" business resource. These advocates have since fanned across the State and encouraged workplaces to incorporate mental health-friendly policies and procedures into their human resources and management processes.

USING MEDIA OPPORTUNITIES TO INCREASE THE REACH OF YOUR INITIATIVE

PSAs on their own generate a certain amount of attention from key audiences. When their placement is combined with other promotional activities, however, awareness can increase considerably. Placing stories in “free” media is one way to maximize the impact of a campaign. Drop-in articles are one way to get your message out, but your local news media offer additional opportunities to communicate your mental health messages to the public.

Following are some basic tips for working successfully with media gatekeepers.

Tip #1: Understand Reporters’ Needs

- Recognize that reporters have many deadlines. Contact the reporter or editor to find out about specific deadlines, and take the opportunity to introduce yourself, your campaign, and the valuable information you can provide about stigma and the impact it has on people with mental illnesses.
- Consider the many angles a reporter could take on a mental health story, and then offer evidence and examples to back them up.

Tip #2: Develop a Relationship

- If you already have relationships with local reporters who cover mental health, your campaign is likely to be an interesting story idea for them. If you don’t, find out which reporters cover mental health topics in your area—especially those who report on mental health issues related to your target audiences.
- If a friend, colleague, or editor has referred you to a reporter, be sure to mention your contact in correspondence. Reporters may be more inclined to listen to you if they think their editors or friends care enough about mental health issues enough to have referred you.
- Position yourself as a resource for information on mental health and stigma by offering facts, statistics, and story leads when you have them.
- If you don’t know the answer to a question, admit it. Tell the reporter you’ll find the answer and call him or her back as soon as possible, even if you can’t find the necessary information. Always call back before the reporter’s deadline.

Tip #3: Show Respect

- Establishing a friendship with a reporter is natural, but always honor his or her professionalism before your friendship. Never take advantage of a friendship by asking a reporter to write a story as a “favor.”
- Have respect for all members of the media. Many times, the best people to talk to are the beat reporters or assistants, who have more time to talk about issues. They can then pitch to their editors a story about the importance of mental health awareness in the community.

- Ensure that your first contact with reporters is about something truly newsworthy.
- Always thank reporters when they run a story on your organization or quote you in an article. It is also important to recognize when a reporter writes a story that accurately addresses stigma and mental health, whether or not you helped with that story.

Tip #4: Stay Aware

- When being interviewed, avoid saying “no comment.” Be honest, and let the reporter know if you are facing a confidentiality issue.
- Avoid telling reporters anything you don’t want to see in print the next day, no matter how friendly the reporter may seem or how long you have been working together.
- Remember that although your primary goal is to promote messages about stigma, mental health, and people living with and recovering from mental illnesses in society, the reporter’s primary goal is to write a compelling story. Provide the reporter with interesting facts on mental health, intriguing spokespeople who are recovering from mental illnesses, or access to groundbreaking statistics and cutting-edge information.

Tip #5: Be Patient

- Not all news is breaking. A personal consumer story may be what the reporter needs to tell your story on stigma. If you have individuals who are willing to share their stories, pitch them to your local paper’s feature or health editor. Real-life stories are effective ways to present messages about mental illnesses—especially since features tend to be more in-depth, with more time dedicated to developing a story.
- Don’t feel like you need to write the feature story yourself—simply provide the necessary information and angle to the reporter.
- A pitch letter, e-mail, or phone call is an effective way to provide the important information on stigma. If you are offering a spokesperson for the story, be sure that the person is willing to talk to the media. Promising a quotable source for the story and being unable to deliver could derail your efforts by leading the reporter to believe that stigma is the culprit.
- Be creative in your pitch—it’s one of the best ways to bring the media on board. Give the reporter a story angle and/or data pertinent to a large audience, spreading your message and increasing the number of people who read, watch, or listen to their outlet. Highlight how mental illnesses affect almost every family in their community along with the number of talented local citizens who are either recovering from a mental illness or have recovered—posting their stories as testimonial pieces.

Here are some additional suggestions for feature stories that focus on consumers and stigma:

- Profile an active member of the community who is a self-identified mental health consumer pursuing treatment for mental illness and willing to talk or share a vignette about experience. Focus on improved attitude and productivity after the appropriate treatment and diagnosis were provided.
- Pitch to health reporters the idea of a weekly or monthly series spotlighting local community members recovering from mental illnesses. Each story should focus on a different citizen, but they should all support the mental health messages that you are trying to get out to your community.
- Write to advice columnists. Make sure they recognize behavioral signs of mental illnesses that might come through in letters and address those topics in the advice provided to their readers. Ask the columnists to provide your Web site address as a potential reference.
- Allow a local reporter or producer to follow a consumer through daily routine. Help reduce stigma by showing the life of a mental health consumer and how that person's life reflects so many in society.

Tip #6: Offer Your Opinion

As a rule, the media want to see stories presented factually. There is an exception to that rule: the op-ed page. Found opposite the editorial section, this page provides space for members of the community to express views on topics of local or national importance.

Editorial page editors receive thousands of op-eds every day. The following are a few tips to ensure yours get noticed, so your opinion is heard:

- In the first two sentences of your op-ed, explain what you think about how people with mental illnesses are treated in society or in a specific situation.
- Include evidence so the editor and the audience know you are not alone in your opinion; what you have to say about mental health and stigma is important to society.
- Tie it all together. Conclude with some information about mental health, stigma, and action steps that make it newsworthy. If you can incorporate current headlines, you are sure to grab the editor's attention.
- Be sure to include an opinion. The op-ed page was created to give readers a voice. Don't leave yours out!

Newspapers make their editorial decisions through a team of writers and editors known as the editorial board. You can help educate the editorial boards of your local newspapers about your State or local mental health programs by participating in one of their meetings. To set up a meeting, contact the editorial department by letter, and then follow up by phone. When you attend the meeting, bring along one or two people who you believe can best convey your messages. Also bring materials for each member of the board. Keep your message simple and direct. Make sure the members know exactly what you think they should write about mental illnesses on the editorial page of their paper.

Tip #7: Put Yourself in Their Shoes

- Media require information be provided to them in different formats. The focus of a broadcast story is visual, while a radio piece relies on the interview. Provide each outlet with the information they need to do a story about stigma in a format they can use.
- Know the cultural and language expectations of the outlet before you call. Some media outlets have receptionists and reporters that only speak a foreign language. Find out the appropriate way to address a reporter who might not speak the same language as you.

Tip #8: Be Quotable

- Reporters are always in search of the “quotable” quote to bring their stories to life. Providing short, pithy statements in news releases, during a media event, or in an interview may entice reporters to use your quote on the air or in the paper. Providing a reporter with a sound bite will help get your messages into stories about stigma and mental health awareness.

Tip #9: Don't Forget the Obvious

- If you are planning a launch or other event, make sure you post it on the community calendar. These calendars usually run free on local television channels. Don't forget to let your newspaper's calendar editor know, too.
- Radio and television talk shows offer a unique opportunity to discuss mental health issues. Unlike taped news stories that use only pieces of an interview, talk shows allow you the opportunity to talk about an issue at length. If you get the chance to appear on a radio or television talk show, be prepared. Just as you are able to discuss your issue more thoroughly, the host also has an opportunity to ask more in-depth questions. And even if the host isn't tough on you, many shows allow listeners or viewers to ask questions—and they're often the toughest of all.

Tip #10: Establish a Partnership

- Recruiting “flagship media” can ensure that your message is being promoted by at least one television and/or radio station in the community. When an outlet signs up as a flagship for your media effort, it normally agrees to report regularly on program activities and get involved in community relations for the effort. Why would a station want to be a flagship? Most media devote some airtime or ad space to public service, so they are constantly on the lookout for important community projects that they can promote. If an issue has widespread public support, media like to be seen as supporters, too. In order to avoid alienating other stations in your area, it's important that you limit your exclusive “flagship” relationship to “feature news” about the issue and the initiative. This way whenever you have a hard news story, all the media in town can have equal access to it.

PLANNING A MEDIA EVENT

News conferences, briefings, breakfasts, and other gatherings can be effective in telling many media outlets the same thing at the same time. While a media event is not always necessary to get a story placed, it can be a great way to increase the news value of an ongoing issue. Often a community event or gathering can be a good alternative to a news conference. By involving the community, you are communicating directly to your audience and adding newsworthiness to reporters' stories.

Following is a simple checklist for preparing a media event:

PRIOR TO MEDIA EVENT

- Budget prepared
- Space reserved
- Audio/video equipment ordered
- Speakers identified/coached
- Media list developed
- Media advisory sent in advance inviting members of the media
- Parking arranged for media and speakers
- Media kit prepared (include a list of speakers with short biographies)
- Visuals prepared (graphs, posters, and/or photos as backdrops)
- Onsite photographer arranged
- Transportation arranged for speakers (if necessary)
- Media sign-in sheet prepared
- Guests/audience invited
- Statements written and approved
- Timed agenda shared with speakers
- Media call-arounds completed (day before the event)
- Food and beverages ordered (if necessary)
- Speaker name cards prepared (for identification at speaker table)

DAY OF MEDIA EVENT

- Room arranged
 - ___ Podium
 - ___ Seating
 - ___ Displays
 - ___ Decorations
- Refreshments arranged
- Organizational identification placed at podium or head table
- Microphones/sound system checked
- Audio/video equipment placed and checked
- Security arranged (if necessary)
- Photography assignments made
- Moderator briefed

- Names of persons to be recognized given to moderator
- Media signed in
- Media kits (with news release) distributed
- Speakers assembled and introduced

FOLLOWING MEDIA EVENT

- Room restored to original condition
- Non-attending media called
- News release distributed to non-attending media
- Photos with captions released to newspapers
- Media coverage reviewed and assessed
- Debriefing to assess activity held
- Report written

ENHANCING YOUR EFFORTS WITH COMMUNITY EVENTS

A well-planned community outreach event can be invaluable in generating positive publicity for your PSAs and other media outreach and increasing awareness about how many lives are affected by stigma and discrimination related to mental illnesses. Even after your State or local campaign begins, community events can help sustain and re-energize support for the life of the initiative.

Establishing the goal of your event is one of the first and most important things you must do before planning begins. Look at the overriding goal of your initiative and figure out how that goal fits into your event planning. Ask yourself the following questions:

- What do I hope to achieve with this event?
- Do I have the necessary approvals, resources, and backing from “people at the top” in my organization to proceed with this event?
- What do I want participants to come away with after attending this event?

Do you want to provide information to the community about mental illnesses? Do you want attendees to take action steps to reduce stigma, or are you recruiting spokespeople for a speakers’ bureau to speak out about the effects of stigma on people living with and recovering from mental illnesses?

Here are some examples of strategic event goals in launching the PSA campaign:

- Demystify the general public’s perception of mental illnesses.
- Provide information about mental illnesses to increase knowledge of the disorders and decrease stigma toward consumers.

To unify your event messages with your campaign theme, it is important to weave it throughout. Include the theme in written and visual materials, talking points, menu choices, and even event location. Reference how mental health is a part of everyone’s lives, include spokespeople who have lived through and recovered from a mental illness, or sprinkle your event menu with facts about mental illnesses.

Who Should You Invite?

The events you decide to hold to promote the launch of an initiative in your State are key opportunities to target specific audiences on an individual basis. Identify whom your event would best be suited for and plan the event details accordingly.

Show Faces

Choose a spokesperson that will resonate with the group you are targeting. The spokesperson should be well versed in your campaign and PSA themes and prepared to speak to the media about his or her experiences and how mental health affects everyone. If appropriate, you may choose several spokespeople to address different topics during the event, such as the director of your organization to explain the mission and goals and a consumer to discuss experience with stigma.

Buddy Up To Maximize Budget

Hosting an event can prove to be a costly venture when factoring in meals, facility charges, audiovisual equipment, material development, and production and other miscellaneous expenses that can arise. But hosting an event is the perfect time to get partners on board with your initiative.

Partners can provide additional funding, visibility in the community, and moral support during event planning and into the campaign. Media representatives can offer insight on planning ideas and support in promoting the event and placing the PSAs. Approach potential partners with a pitch addressing the importance of mental health awareness in the community, the particular “ask,” and how the partnership can benefit everyone involved.

Get Creative

The more creativity you use in identifying potential ideas for your event launch and supporting activities, the more success you will have spreading your messages about discrimination, stigma, and mental health in the community. Identify events that are traditionally not linked to mental health, and incorporate messages about stigma and mental health in daily life. Take the opportunity to showcase people dealing with mental health problems in their daily routine as they celebrate holidays, observances, and experience the daily grind with the rest of society.

Sponsor a Marathon for Awareness

Raise money for an area charity related to mental health and garner support for mental health awareness by sponsoring a walk-a-thon or some other type of endurance event. Enlist consumers from your advocates’ network or speakers’ bureau to coordinate and promote the event. Information on implementing walk-a-thons is available at the SAMHSA Resource Center to Address Discrimination and Stigma.

Involve the Faith Community

Nearly 40 percent of Americans attend at least one religious or faith-related meeting weekly. Work with faith organizations in your community to include messages about stigma and mental health in unison with prayers, newsletters, sermons, and other forms of religious activity.

Beat Stigma With Brains

Partner with schools and businesses to host a mental health fair. Members of your speakers’ bureau can offer a lecture series on varying topics during the fair and enlist volunteers to further the effort.

Feed Them, They Will Come

To build relationships with policymakers and educate them about the issue, hold a breakfast for local legislators, county commissioners, the county administrator, and other key decisionmakers. Open the event to the public and invite all of your partners so that policymakers can interact with those concerned about the issue.

Declare a Proclamation

A proclamation is a document usually issued by a mayor, the city council, the State legislature, or a Governor to officially kick off a campaign or to commemorate various weeks, months, days, or years. Hold a news conference at which these “newsmaker” personalities issue the proclamation.

Spread the Word

Once you have identified activities and events you will host to launch an initiative in your community, it is important to promote your event. People will only participate if they are aware it is happening. Identify methods most appropriate for your target audience, such as grocery store fliers for mothers or public transportation advertising for those that commute to work in larger cities.

- Customize the print PSA(s) with a tagline that announces your upcoming event.
- Develop a direct mail invitation with the same look and feel as the print PSAs.
- Announce any upcoming events in organization newsletters and partner mailings.
- Announce your upcoming event through the media by sending a news release or media advisory.
- Create a banner ad for your event that links to your mental health Web site. You can pitch the banner ad to local mental health organizations or partner groups to post on their sites as well.
- Send an e-blast to your mailing list announcing the upcoming activities in your area. Create a monthly calendar that lists campaign-related events, partner programs, and other community-related activities that will include mental health information. Be sure to have information and take-away items available at any event on your calendar.
- Distribute fliers, pass out drop-in articles, and hang copies of PSAs in community centers, schools, office lunchrooms, faith organizations, etc.

Was It a Hit?

After all of your hard work, how do you find out if your event was a success or a flop? Revisit your original plans and address the goals and outcomes you were seeking. Were you looking for media attention, or to provide leave-behind information for attendees?

If you were seeking media attention, scan the local news to see if you received any hits, or you can hire a clipping service such as Bacon's (www.bacons.com) or Burrelle's/Luce (www.burrellesluce.com) to provide you with a listing of all media hits.

You can measure the intake of take-away materials by assessing how many takeaways you brought to your event, and how much remained at the end of the day.

California: Public Support Pays Off

Since the EBI was launched in May 2004, California experienced a whirlwind of change in the way mental health services are delivered. Just 6 months into the EBI campaign, California voters passed Proposition 63, the Mental Health Services Act (MHSA), which will channel between \$800 million and \$1 billion annually into the mental health system. In those critical pre-election months, the EBI presented the opportunity for mental health consumers and family members to tell their stories to voters and give meaning and context to the ballot initiative. The citizens of California listened to and supported them.

Because a portion of MHSA funds are set aside for stigma reduction efforts, California mental health advocates are eager to use and build upon the quality materials developed through the EBI for that purpose. In 2005, local advocates used EBI materials for public education efforts related to May Is Mental Health Month and to begin outreach efforts to traditionally underserved communities. Mental health advocates expanded their contact strategies with the goal of having a speakers' bureau in every county. The EBI workplace resource kit enhanced their outreach to the business community.

The size and diversity of California's population present many challenges to mental health advocates working to overcome stigma. In Los Angeles County alone, for example, there are 11 threshold languages. Other large cities have similarly diverse populations. Advocates are working to culturally adapt EBI materials already on hand to address communities in need. Sacramento, for example, is adapting materials for the Russian community, while San Francisco is working to reach the Chinese community.

California advocates continue to look for ways to incorporate the EBI materials in their effort to counter stigma and discrimination. Mental health forums are held throughout the State on a regular basis to generate fresh perspectives and keep new ideas flowing.

EVENT PLANNING CHECKLIST

GOALS, OBJECTIVES, AND STRATEGIES

- Establish your event goals
- Determine your event objectives
- Target your audience
- Determine the type of event
- Maintain event theme
- Establish evaluation criteria

TEAM AND TALENT

- Choose an event committee and chairperson
- Establish communication methods
- Get organized

BUDGET AND FINANCE

- Create your budget
- Explore revenue sources
- Set up your record-keeping process

PROGRAM AND CONTENT

- Determine program agenda
- Select presenters, speakers, and facilitators
- Allocate program time for networking and sightseeing activities
- Prepare a daily program and activities schedule
- Arrange for audiovisual and other equipment
- Expect the unexpected

SITE SELECTION

- Select your event date
- Establish site selection criteria
- Choose your facilities

MEALS AND LODGING

- Determine meal and food service needs
- Set meal and lodging selection criteria
- Arrange for meals and lodging
- Provide number of confirmed guests by the deadline

CATERING SERVICES

- Choose a caterer
- Determine your catering selections
- Provide confirmed numbers by the deadline

OTHER CONSIDERATIONS

- Transportation access
- Medical or mobility needs
- Legal issues
- Onsite registration areas
- Central office space during the event

MARKETING AND PUBLICITY

- Choose your marketing methods
- Establish your project timelines
- Prepare your marketing collateral
- Develop your public relations plan

EVENT COUNTDOWN

- Prepare a timeline
- Arrange for additional staff (temps, greeters, hospitality teams)
- Finalize and confirm all arrangements with event site
- Confirm presenter, speaker arrangements
- Review details with all event committees and subcommittees
- Conduct a site walkthrough
- Post directional signs for participants

POST-EVENT WRAPUP

- Tabulate evaluation results
- Conduct wrapup meeting with event committee
- Prepare written summary of event; complete event binders and records
- Review invoices and send payments
- Send thank-you cards and notes of appreciation to committee members, volunteers, presenters, staff members, and others involved with the event

ONLINE MARKETING

While people can be encouraged to call a toll-free number and request information and materials, the Internet has become the preferred method for Americans to do their research. Furthermore, according to the National Telecommunications and Information Administration, 35 percent of Internet users are seeking health information online. A Web site is your opportunity to use this channel to educate the public about mental health and stigma. It's available anytime, visitors can read as much or as little as they want, and visits are anonymous.

What the Web Site Should Contain

Most likely, your Department of Mental Health or partner organization has a Web site to which you can steer your audience as part of your local campaign. If you are interested in customizing the EBI materials to refer to a local URL instead of the national one, try to ensure the site you choose meets the basic criteria listed below. This will avoid frustrating visitors to your site who are looking for specific kinds of information and expect to find it. The call to action in the EBI PSAs was “Get the facts about mental health,” so it is the promise on which you need to deliver. The URL listed in the PSAs and other materials should:

- Be designed for members of the general public who have little to no knowledge about mental health issues, yet are intrigued by the PSAs or other materials and want to learn more;
- Allow for service referrals. As you know, it's important to link someone with mental health needs to resources and treatment as quickly and easily as possible. Visitors should also be able to link directly to the State or local Department of Mental Health via your site;
- Feature the EBI brochure (www.allmentalhealth.samhsa.gov) in PDF format and/or reiterate campaign messages;
- Feature information such as myths and facts about mental health in different formats; and
- Include resources for more information about mental health and mental illnesses.

Sites can also include information for the media and/or solicit and feature personal stories from mental health consumers.

How You Can Market the Site

No matter which Web site you use as part of your initiative, be sure to include the URL in all publications and speeches about your campaign. Mention the Web site during public speaking opportunities, including speakers' bureau engagements and media interviews. Promote your Web site by programming it to rank high in search engine queries using meta tags with keywords such as “stigma,” “mental illnesses,” and “consumers,” and query result descriptions that highlight your campaign messages and mental health information. You can also set up a listserv to reach interested audiences and post to it regularly. A great way to begin your listserv is to include a signup sheet at your campaign launch event. Individuals interested in receiving more information on mental health and stigma will sign up to receive regular e-mails from you.

If your site has good content about mental health—or even if it is simply an effective resource for referrals for mental health services—it can serve as a useful link to provide to potential partners, media, business owners, and educators who are interested in providing information about stigma and mental health to their constituents, customers, and staff. Link up with the Web sites of local hospitals and health care providers. Direct health reporters and medical experts to your Web site as a resource.

PROMOTING YOUR INITIATIVE TO DIVERSE AUDIENCES

Mental health issues affect people of all backgrounds, ethnicities, and languages. And it is important to recognize diverse audiences in your general public outreach, especially since mental illnesses are viewed differently among various ethnic groups. Depending upon the composition of your target area's population, you may need to create materials in languages other than English. Because Hispanics comprise the largest minority group in the United States, all EBI materials were created in both English and Spanish. Many target areas also have sizable populations that speak languages other than English or Spanish, so, resources permitting, you might wish to offer general public materials in those languages. Be sensitive to the audiences in your local area, and target materials distribution and promotion in ways that will best suit their needs. Here are some ideas for reaching out to diverse communities with your messages:

- Mental health stigma is prevalent in many minority communities. Recognize stigma in television shows and news features. Take the opportunity to host a breakfast for minority media, providing facts and information on mental illnesses. Demystify mental health in their communities, but be sure to incorporate their attitudes toward mental health, tying them in closely to issues and focuses that are most relevant to them. If possible, leave them with campaign materials developed in their language.
- Make your initiative a newsworthy item in the community. Highlight a minority-run or staffed business that has partnered with your campaign and is actively promoting mental health awareness through its human resources department.
- Make sure you are using the appropriate language, mental health messages, and spokespeople to resonate in your community. If resources for extensive translation do not exist, plan to reach the community in person instead, using a spokesperson who speaks the language. You can even work with your spokesperson on an in-language outreach presentation, using the EBI PowerPoint presentation as a start. The presentation, included in the Appendix CD, features data tailored to different minority audiences.
- Many minority communities hold festivals celebrating culture. These festivals may be perfect opportunities for your organization to host a celebration of mental health in the community using your campaign materials.
- Many communities have a Chamber of Commerce that is aware of business-related events specific to a country of origin or ethnicity. This same Chamber of Commerce is also a good source of information on minority-based community events.
- Identifying the best channel for targeting minority audiences means recognizing the differences among diverse communities. Some still hold close ties to their country of origin, while others have adapted to mainstream American norms. Talk to your audiences to understand how mental health is perceived in their community. If your campaign materials do not perfectly fit your minority audience, tailor your materials so they work.
- Understand the media preferences of the minority audiences in your community, and be sure to put out campaign messages in a way that will reach them best. Some urban minority audiences focus more on mainstream English-language programming, and may best receive messages about mental illnesses from a spokesperson belonging to that minority group. Other minority audiences largely watch foreign-language programming that is not mainstream, and may best receive those same mental health messages from different spokespeople. Find out what health programming these outlets offer.

Texas: Culturally Competent Outreach

EBI implementation in Texas gave the El Paso Department of Mental Health & Mental Retardation (MHMR) the opportunity to enhance its existing outreach efforts to local Hispanics, who comprise 78 percent of El Paso's population. All EBI materials distributed in El Paso were printed in both English and Spanish, and communications activities were also provided in both languages.

One of the more ambitious and unusual projects undertaken by the group was the development and posting of billboards and bus bench advertisements. Half the billboards and bus bench ads were in English; half in Spanish. All carried the "Mental Health: It's Part of All Our Lives" graphic and directed readers to MHMR for information and help. This outreach effort helped to dispel stigma and misconceptions often surrounding mental illness in both the English- and Spanish-speaking communities. It has also worked to raise awareness about the availability of high-quality care for individuals with mental illnesses, and it helped build closer ties between the community and the mental health system. The billboard and bus bench advertisements were posted in more than a dozen prominent locations reaching riders, drivers, and pedestrians throughout El Paso in March 2005 and remained on display through September 2005.

In addition to the billboards and bus bench advertising, El Paso MHMR engaged in public speaking events and media interviews, and it reached out to the business community, which was previously an untapped opportunity.

For May is Mental Health Month, El Paso MHMR hosted the first "Mind Your Health" Awareness Fair, an event open to the public. The purpose of the health fair was to increase community health awareness through education and prevention. The health fair provided a valuable service to the community, while emphasizing the relationship between mental and physical health. A variety of health providers were available to offer basic health screenings, immunizations, blood pressure, and glucose checks. Also on site were informational booths designed to help the community become aware of the many health-related programs, services, and providers located in the surrounding community. By hosting the fair at its main building, and providing mental health information tied to overall health, El Paso MHMR was able to conduct an event that contributed to the elimination of stigma associated with mental illnesses in support of the EBI. EBI brochures and other information were distributed.

- Schools outreach—The most effective medium for reaching school audiences was an EBI PowerPoint presentation. The most effective way to schedule the presentation was by contacting the communications office at each of the school districts so the office could in turn distribute the information to each of the schools. Then, each school was individually contacted to set up dates to visit its campus. The EBI PowerPoint presentation was presented at high school pep rallies and seminars with over 300 participants each. Pamphlets were distributed.
- Business/workplace outreach—EBI brochures were sent to local businesses through businesses' employee assistance programs (EAPs).
- Partnership development—A key component of the EBI effort has been collaboration with the local media and local advocacy groups such as the El Paso chapter of the National Alliance on Mental Illness (NAMI). Certain media allow for extensive penetration in the local markets, such as television, which provides high levels of exposure in the form of interviews and news stories. Local advocacy and support groups allowed Texas to incorporate the subject of EBI into conferences, seminars, and other events it was already hosting or participating in, increasing opportunities for exposure and participation in the community.

REACHING OUT TO THE BUSINESS COMMUNITY

It is estimated that mental illnesses cost an estimated \$63 billion in lost productivity each year.² Reaching out to businesses—and ultimately creating workplaces that are accepting of people with mental illnesses—is a worthwhile goal of any statewide stigma reduction initiative. The Appendix CD has business materials for you to use in targeting business people with your messages. The tips below will assist you in building a support base for the business materials and successfully disseminate these materials to this audience.

Step 1: Familiarize yourself with the elements of the business materials and their audiences

The materials in the business resource and the audiences for whom they are intended include the following:

- Business executive booklet—top executives
- “Workplaces That Thrive!” resource—human resource personnel or managers who play that role
- Poster—employees
- Drop-in articles—employees
- Print PSAs—employees

Step 2: Understand and communicate the benefits of a Mental Health-Friendly Workplace

A Mental Health-Friendly Workplace makes good business sense. It benefits owners, managers, and employees in ways that affect the bottom line. When promoting the business materials to local businesses, make sure to highlight outcomes that are the benefit from a healthy workplace that plans for the mental health needs of its employees.

- **Higher productivity and motivation:** Employees feel valued and secure and work more effectively when employers demonstrate a commitment to their well-being.
- **Reduced absenteeism:** Workplace stress is a major cause of absenteeism. Helping employees manage their stress and overall mental health can boost productivity.
- **Health insurance cost containment:** Instituting health and wellness programs can hold down health insurance rate hikes.
- **Preparedness for disasters:** Assisting employees in times of sudden unexpected trauma with counseling, peer support groups, and links to needed community services can help the business become productive again sooner.
- **Loyalty and retention:** Businesses with mental health-friendly practices have documented remarkably low turnover rates along with cost savings in recruitment, new employee orientation, and training.
- **Hiring and promoting the most qualified people:** By openly supporting mental health-friendly policies, employers can increase the pool of qualified applicants.

² Rice, D. P. & Miller, L. S. (1996). The economic burden of schizophrenia: Conceptual and methodological issues and cost estimates. In M. Moscarelli, A. Rupp, & N. Sartorius (Eds.), *Schizophrenia* (pp. 321–334). Chichester, UK: Wiley.

- **More efficient workplace practices and policies:** The process of thinking about mental health can generate helpful internal policy and benefit reviews and more effective workplace systems and procedures for employees as a whole.
- **Better workplace relations:** Awareness and openness on mental health issues help create a positive climate for understanding, conflict resolution, and support.
- **Diversity, acceptance, and respect in the workplace:** Embracing diversity includes people who live with mental illnesses. In becoming more inclusive, businesses can both thrive and set a standard for others.

Step 3: Understand and communicate the practices and policies that characterize a Mental Health-Friendly Workplace

A Mental Health-Friendly Workplace:

- Welcomes all qualified job applicants—diversity is valued;
- Includes mental health coverage as part of overall health coverage within the employee benefits package;
- Has programs and/or practices that promote and support employee health, wellness, and/or work-life balance;
- Provides training for managers and front-line supervisors in mental health workplace issues, including identification of performance problems that may indicate worker distress and possible need for referral and evaluation;
- Safeguards the confidentiality of employee health information;
- Provides an Employee Assistance Program or other appropriate referral resources to assist managers and employees;
- Supports employees who seek treatment or who require hospitalization and disability leave, including planning for return to work;
- Ensures “exit with dignity” as a corporate priority, should it become essential for an employee to leave his or her employment; and
- Provides information to all employees regarding equal opportunity employment, the reasonable accommodations policy of the Americans with Disabilities Act, health and wellness programs, and similar topics that promote an accepting, anti-stigmatizing, anti-discriminating climate in the workplace.

Step 4: Inventory and coordinate mental health resources that support the business program

Many employers and their employees don't know what mental health resources are available in the community. As advocates, you know a lot of the resources that can assist businesses. Put together a list of these resources including their contact information.

Step 5: Identify appropriate businesses and build relationships with key personnel

Here are some tips to help your outreach to businesses succeed:

- Don't go it alone! Arrange a business outreach committee or council of advocates interested in going out into the business community.

- **Devise a plan. Before you go out and approach any businesses, sit down and strategically develop a plan. Decide if you will target employers of large or small businesses. Some States have had success approaching large businesses with at least 1,000 employees because programs quickly reach a large number of people. Others have had success building relationships with smaller businesses through organizations such as the Business Leadership Network.**
- **You may want to start with one of the following organizations. These organizations have great connections with businesses and may have State or local chapters in your community.**
 - **Employee Assistance Professional Association (EAPA)—www.eapassn.org**
 - **U.S. Business Leadership Network (USBLN)—www.usbln.com**
 - **Wellness Councils of America (WELCOA)—www.welcoa.org**
 - **Society of Human Resource Management (SHRM)—www.shrm.org**
- **You may also want to contact local organizations with which you already have good relationships, such as the following:**
 - **Local mental health organizations**
 - **Clubhouses**
 - **Unions**
 - **Chambers of Commerce including the minority groups such as Afghan, American Lebanese, Hispanic, Asian, or American Chamber of Christians in Business**
 - **Colleges/universities**

Wisconsin: Building on Experience

The State of Wisconsin was no stranger to confronting the stigma associated with mental illnesses, having formed Wisconsin United for Mental Health (WUMH) in 2001, well before it joined EBI. WUMH had established itself as a statewide collaboration of over 16 public and private organizations and had already developed key messages and stigma reduction initiatives.

When invited to join the EBI, WUMH saw the opportunity to link with other States to be part of a campaign whose total would be greater than the sum of its parts. Because WUMH was building on its own work, there were substantial challenges associated with incorporating EBI messages and materials into its own preexisting messages, materials, and ongoing outreach activities. WUMH rose to the occasion with a seamless State-level stigma reduction campaign that countered stigma on all of EBI's fronts: the schools, the business community, and the general public.

In schools, WUMH used a “train-the-trainer” model to teach pupil services personnel how to implement the EBI school materials with classroom teachers. In the business community, WUMH built on the business advisory group of one of the WUMH member organizations—the Mental Health Association of Milwaukee County—and introduced the EBI business materials at special breakfast forums and wellness workshops. To reach the general public, WUMH conducted unified media outreach to ensure placement of television, radio, and newspaper PSAs. The results of WUMH's activities were impressive. Through September 2005, WUMH:

- Trained 125 pupil services personnel in the delivery of WUMH/EBI school materials;
- Placed 250 WUMH/EBI business packages among key businesses across the State; and
- Secured the placement of WUMH/EBI PSAs, which reached millions across the State.

While WUMH's participation in these EBI activities has been successful, the organization also sees new doors opening because of the EBI. For instance, its success in general public education has led the State to consider strategies for reaching out to the African American faith-based community. Its success in reaching out to businesses has helped WUMH make substantial contacts with the State's Department of Workforce Development and its disability navigator program. Finally, because of its success in high schools, WUMH is planning to adapt EBI materials for continued work that includes elementary school teachers.

- Award-winning companies (such as companies on the 100 Best Places To Work list)
- Local companies who are progressive in social issues
- Establishing partnerships with businesses means reaching out. Yet doing some “inside” work first can be the difference between success and failure. Before approaching anyone, hone your presentation skills. Make sure you have a well-defined vision of what you are asking for and why.
- It is important to know the culture of the workplace you are going into. Consider the language and the dress code and create your presentation accordingly.
- Go for the “low-hanging fruit.” Gain support from businesses with which you already have a relationship. This support will help give you the momentum to go after other businesses.
- Many States have had success approaching the human resource professionals or middle management of a company. They are more accessible than higher level managers and can carry your message to all employees, both senior and junior.
- To begin, send a letter or e-mail requesting a meeting and make sure you follow up.
- Host an outreach event. Instead of going out to each business one-by-one, sponsor a breakfast or lunch where you bring in members of the local business community.
- Tailor your outreach around a national health observance. For example, schedule events to occur during May Is Mental Health Month. For a listing of all national health observances, visit www.healthfinder.gov/library/nho/nho.asp.
- Be patient. Efforts to obtain support tend to work best when relationships are nurtured.

REACHING OUT TO HIGH SCHOOLS

Creating schools with tolerant, accepting attitudes toward people with mental illnesses can go a long way toward reducing stigma and discrimination now and well into the future. The Appendix CD contains EBI school materials. Here are some tips to assist you in building a successful support base for the EBI's Eliminating Barriers for Learning schools training package.

Step 1: Thoroughly familiarize yourself with the features of the training program

Eliminating Barriers for Learning is a continuing education program for secondary school teachers and staff that focuses on social-emotional wellness, its impact on classroom behavior and student learning, and practical techniques and methods teachers can use to promote social-emotional wellness. Its goals are to inform teachers about adolescent social-emotional wellness and provide specific skill-based techniques for classroom use.

The training aims to:

- Increase knowledge of adolescent mental health, including risk and protective factors
- Show teachers and staff how to develop an action plan to help students who need additional support
- Suggest ways to promote a mentally healthy learning environment through instructional techniques that take into account individual styles of learning and the classroom climate
- Help staff identify school and community resources and partnerships to promote youth mental health

The training consists of four modules, each designed for a continuing education or in-service workshop. The modules include extensive instruction and notes for the trainer, who may be a school social worker, psychiatrist, guidance counselor, school nurse, or other staff member. Speakers from family or youth advocacy groups also can be involved as co-trainers to provide valuable perspectives and insights into family and youth wellness.

The entire training package should take about five hours to deliver. However, each module has been designed to stand alone. Module I is a prerequisite for all of the following modules. This flexible format allows for training in specific areas or for ongoing training as time permits. The modules are as follows:

- **Module I: Eliminating Barriers for Learning: The Foundation**
 - Describes the links between teen social-emotional development, mental health, and learning. It also addresses the impact of the stigma surrounding mental health issues. It lays the foundation for the three modules that follow.
- **Module II: Social-Emotional Development, Mental Health, and Learning**
 - Gives an overview of common mental health issues among adolescents and their potential effects on learning and behavior. It trains teachers to recognize risk factors and protective factors.

Massachusetts: Connecting With Schools

When Massachusetts became an EBI State in January 2003, the local Department of Mental Health (DMH) immediately identified the Massachusetts Association for Mental Health (MAMH) as a key partner in implementing the initiative. The DMH had worked closely with MAMH for years, and that close working relationship allowed Massachusetts to start quickly. When EBI's audiences and campaigns were announced, Massachusetts quickly embraced the secondary schools initiative. Both DMH and MAMH felt the EBI could play an important role in encouraging schools to address mental health and help improve environments and outcomes for students with mental health needs.

Realizing that in education, decisionmaking often requires buy-in among top school officials, Massachusetts arranged an introduction to the EBI schools campaign at the Massachusetts Secondary School Administrators Association Conference in July 2003. MAMH, DMH, and EBI staff gathered feedback on curriculum development and training, and the team's presentation before more than 200 principals and administrators featured a speech by the DMH Commissioner. The MAMH/DMH team subsequently met with a subgroup of health and wellness educators to discuss the collaboration in more detail and recruit pilot schools for the project.

Following the conference and meeting, utilizing their many contacts, MAMH and DMH recruited four schools to receive the EBI training as a pilot. The schools were urban and suburban, with vastly different ethnic and racial compositions. Each school was given the option to choose among the four training modules, and each set its own timetable to receive the training. For its part, MAMH offered to augment the trainings with guest speakers and to connect students, parents, and staff with needed services. In-school trainings began in August 2004 with DMH trainers adapting the modules as necessary for each school. Schools responded enthusiastically, and participants offered positive feedback and suggestions for improvement.

While Massachusetts focused its EBI efforts on schools, it also promoted the EBI general public campaign and messages heavily. On September 30, 2004, DMH held an event at the State House to launch the EBI and kick off Mental Health Awareness Week. Over 250 mental health consumers, family members, advocates, providers, and State legislators attended to hear speeches about stigma and the EBI by the DMH Commissioner, legislators, NAMI officials, and mental health consumers as the EBI PSAs played in the background. In addition, the principal of one of the EBI pilot schools spoke about that school's effort. The State generated media coverage for the EBI in outlets such as AP and MetroWest. What's more, Massachusetts' PSA placements have represented a high percentage of the total placements among all eight States.

Over the 3 years, the EBI has become a component of most DMH activities, and it expanded in 2005 to include a stigma and discrimination reduction initiative that targets older Massachusetts residents.

- **Module III: Strategies To Make Help Accessible to Students and Families**
 - Equips teachers with the tools they need to address specific mental health issues in their classrooms. It shows how to formulate a plan to help students with mental health needs and encourages the creation of sustained school-home-community partnerships to meet educational and developmental needs of youth.
- **Module IV: Strategies To Promote a Positive Classroom Climate**
 - Addresses ways to create a classroom climate that promotes learning and mental health for all students.

The full training package contains the following elements:

- School Administrators' and Trainers' Guide
- Training Modules and PowerPoint Presentation
- Poster
- Drop-in Articles
- Print PSAs

Step 2: Understand and communicate the benefits of the training program

WHY USE THE ELIMINATING BARRIERS FOR LEARNING SCHOOLS TRAINING MATERIALS?

- Teachers and administrators are concerned about having more burdens put on them. This training package gives them tools to ease those burdens. The training modules make clear that a teacher is never expected to diagnose or even to refer a child to a health professional. Instead, they are encouraged to refer children to the appropriate pupil services personnel, such as the school psychologist, school social worker, school nurse, or guidance counselor.
- Across the Nation, schools that promote mental health report:
 - Higher academic achievement;
 - Lower absenteeism; and
 - Fewer behavior problems.
- The financial cost of untreated serious emotional disturbances (SEDs) can have a major impact on communities. It has been estimated that untreated SEDs cost school taxpayers an equivalent of more than 50 teaching positions in a single education district.
- The training program can easily be tailored to the needs of each school or district. Module III, especially, is all about working with local school and community partners.
- It is based on current education and behavioral science research and compiles practices supported by research and associated with positive outcomes for youth.
- It can help create the kind of positive climate that enhances social and emotional development and promotes a healthy learning environment.

Step 3: Identify appropriate schools and build relationships with key personnel

Here are some tips to help your outreach to schools succeed:

- Establishing partnerships with schools means reaching out. Before approaching potential partners, make sure your presentations are well prepared and that you are clear about what you are asking for and why. This homework can do much to ensure success in your outreach.
- Gain support from schools with which you already have a relationship. This will help give you the momentum to approach other schools.
- Contact schools early. Many in-service training schedules are made before the school year starts. Try to get meetings with school administrators in the summer to ensure your planning for the year.

North Carolina: Collaboration With Education

North Carolina's EBI outreach, led through the North Carolina Division of Mental Health, Developmental Disabilities and Substance Abuse Services (DMH), was an orchestrated, statewide effort to promote educational materials to its school systems. In an effort marked by thoroughness and strategic thinking and implemented with long-term success in mind, DMH secured its first-ever partnership with the North Carolina Department of Public Instruction (DPI). The acting superintendent of DPI sent letters to all North Carolina schools inviting them to participate in the EBI. This outreach enlisted seven diverse pilot schools. Additionally, subcommittees on the EBI met regularly on topics such as education, media, and partnership development. DMH personnel also gave countless EBI presentations to State education and government employees at all levels.

Since the EBI began, North Carolina's Division of Mental Health and the public service system have undertaken reform efforts. The EBI has represented a new chapter in their mental health work. EBI has now been introduced to increase awareness about stigma in each of the Local Management Entities that cover the State's 100 counties. DMH personnel have marketed the EBI as the way to fulfill this mandate. As such, much of the State has adopted EBI materials, and enthusiasm for the program has been high.

As North Carolina moves ahead, the plan is to continue using the EBI materials and messages to strengthen and build on several existing strategies. First, North Carolina would like to work closely with associations in the State to develop more and stronger networks. Next, North Carolina would like to build upon its contact strategy efforts. So far, 15 advocates have received spokesperson training. These advocates have used the spokesperson training to travel across the State and talk to people about the importance of recognizing and utilizing contact strategies as a means of recovery. North Carolina would also like to continue reaching out to school systems across the State, as they represent the greatest prospect for long-term impact in future generations.

- **Use the Administrator's Guide in the schools materials to help obtain the support of principals and superintendents. Their endorsement is key to implementing the training.**
- **Once you have administrators' support, use the poster to get teachers interested. These posters can be hung in teachers' lounges.**
- **Take your time. Efforts to obtain support tend to work best when relationships are nurtured.**

Step 4: Inventory and coordinate mental health resources that support the school program

Many school personnel don't know what mental health resources are available, either inside their school building or in the community. As advocates, you know a lot of the resources in your community that can assist schools. Put together a list of these resources, including their contact information.

Step 5: Gain buy-in and approval from school administrators, staff, and communities

Here are some tips to help you gain and maintain buy-in from schools and communities:

- **Assess their needs and match the training program's benefits to those needs.**
- **Keep it going. Relationships need to be maintained. It's vital to keep up a high energy level and to revisit expectations as you go along. Ongoing communication is important to keep partner schools in the loop. How much communication depends on the situation, but avoid overkill—teachers and administrators are very busy.**



SECTION

Outreach Materials

III

OUTREACH MATERIALS

This section contains outreach materials that you may use or adapt for your stigma reduction initiative. You will find the following:

- **Television Copy: “.30 Contribution”**
- **Television Copy: “.30 Contribution” (Spanish)**
- **Television Copy: “.15 Contribution”**
- **Television Copy: “.15 Contribution” (Spanish)**
- **Live-Read Radio Scripts (English)**
- **Live-Read Radio Scripts (Spanish)**
- **PSA Pitch Letter (English)**
- **PSA Pitch Letter (Spanish)**
- **State- or Community-Specific Drop-In Article**
- **General Drop-In Article (English)**
- **General Drop-In Article (Spanish)**
- **Sample Drop-In Article Pitch Letter**
- **Sample Feature Story Pitch Letter**
- **Sample Proclamation**
- **Consent Form**

TELEVISION COPY: “:30 CONTRIBUTION”

Client: SAMHSA/EBI
Job Number: 2000-235
Job Title: :30 TV PSA/“Contribution/Final”
Date: April 15, 2004 AS RECORDED

| VIDEO | AUDIO |
|---|---|
| FADE IN: ECU MIDDLE-AGED MAN | ANNCR (V/O) What do a storeowner ... |
| CUT TO: ECU 30-SOMETHING WOMAN | ANNCR (V/O) A mother of two ... |
| CUT TO: ECU TEENAGER | ANNCR (V/O) And an honor student have in common? |
| CUT TO: MAN FROM FIRST SCENE BEHIND THE SALES COUNTER OF A HARDWARE STORE, INTERACTING WITH A CUSTOMER | ANNCR (V/O) They’ve all recovered from a mental health problem. And they’re all part of our lives. |
| CUT TO: TEENAGER FROM THIRD SCENE INTERACTING WITH ANOTHER STUDENT AT A LOCKER IN THE HALLWAY OF A SCHOOL | ANNCR (V/O) Mental health problems are surprisingly common. |
| CUT TO: WOMAN FROM SECOND SCENE, OLDER WOMAN AND TWO CHILDREN DECORATING A FLAN IN A KITCHEN SUPER: President’s New Freedom Commission on Mental Health | ANNCR (V/O) They affect almost every family in America. Maybe even yours. |
| CUT TO: TITLE CARD: GRAPHIC: “MENTAL HEALTH - IT’S PART OF ALL OUR LIVES” 1-800-789-2647 www.allmentalhealth.samhsa.gov DHHS/SAMHSA LOGO [STATE LOGO HERE] | Get the facts about mental health. Call 1-800-789-2647. Because mental health is part of all our lives. |

TELEVISION COPY: “:30 CONTRIBUTION”

Client: SAMHSA/EBI
Job Number: 2000-235
Job Title: :30 TV PSA/“Contribution/Spanish Version”
Date: April 15, 2004 AS RECORDED

| VIDEO | AUDIO |
|---|--|
| FADE IN: ECU MAN IN DOCTOR’S LAB COAT, STETHOSCOPE AROUND NECK | ANNCR (V/O) ¿Qué tienen en común un doctor... |
| CUT TO: ECU 30-SOMETHING WOMAN | ANNCR (V/O) Una madre ... |
| CUT TO: ECU TEENAGER | ANNCR (V/O) Y un estudiante en la lista de honor? |
| CUT TO: INTERIOR DOCTOR’S OFFICE. DOCTOR CHECKS EARS OF CHILD AS MOTHER LOOKS ON. | ANNCR (V/O) Todos se han recuperado de un problema de salud mental. Y son parte de nuestras vidas. |
| CUT TO: TEENAGER FROM THIRD SCENE INTER- ACTING WITH ANOTHER STUDENT AT A LOCKER IN THE HALLWAY OF A SCHOOL | ANNCR (V/O) Los problemas de salud mental son sor- prendentemente comunes. |
| CUT TO: WOMAN FROM SECOND SCENE, OLDER WOMAN AND TWO CHILDREN DECORAT- ING A FLAN IN A KITCHEN SUPER: Comisión Presidencial Nueva Libertad para la Salud Mental | ANNCR (V/O) Afectan a casi todas las familias. Quizá también a la suya. |
| CUT TO: TITLE CARD: GRAPHIC: “SALUD MENTAL: PARTE DE NUESTRA VIDA” 1-800-789-2647 www.nuestrasaludmental.samhsa.gov DHHS/SAMHSA LOGO [STATE LOGO HERE] | Conozca toda la verdad sobre salud mental. Llame al 1-800-789-2647. Porque la salud mental es parte de nuestra vida. |

TELEVISION COPY: “:15 CONTRIBUTION”

Client: SAMHSA/EBI
Job Number: 2000-235
Job Title: :15 TV PSA/“Contribution/Final”
Date: April 15, 2004 AS RECORDED

| VIDEO | AUDIO |
|--|--|
| <p>CUT TO: MONTAGE OF SCENES FROM :30 CONTRIBUTION</p> <p>SUPER: President’s New Freedom Commission on Mental Health</p> | <p>ANNCR (V/O) Mental health problems are surprisingly common. They affect almost every family in America. Maybe even yours.</p> |
| <p>CUT TO: TITLE CARD: GRAPHIC: “MENTAL HEALTH - IT’S PART OF ALL OUR LIVES” 1-800-789-2647 <i>www.allmentalhealth.samhsa.gov</i> DHHS/SAMHSA LOGO [STATE LOGO HERE]</p> | <p>ANNCR (V/O) Call 1-800-789-2647. Get the facts about mental health.</p> |

TELEVISION COPY: “:15 CONTRIBUTION”

Client: SAMHSA/EBI
Job Number: 2000-235
Job Title: :15 TV PSA/“Contribution/Spanish”
Date: April 15, 2004 AS RECORDED

| VIDEO | AUDIO |
|--|--|
| <p>CUT TO: MONTAGE OF SCENES FROM :30 CONTRIBUTION</p> <p>SUPER: Comisión Presidencial Nueva Libertad para la Salud Mental</p> | <p>ANNCR (V/O) Los problemas de salud mental son sorprendentemente comunes. Afectan a casi todas las familias. Quizá también a la suya.</p> |
| <p>CUT TO: TITLE CARD: GRAPHIC: “SALUD MENTAL: PARTE DE NUESTRA VIDA” 1-800-789-2647 <i>www.nuestrasaludmental.samhsa.gov</i> DHHS/SAMHSA LOGO [STATE LOGO HERE]</p> | <p>ANNCR (V/O) Llame al 1-800-789-2647. Conozca toda la verdad sobre salud mental.</p> |

LIVE-READ RADIO SCRIPTS (ENGLISH)

(An electronic version of this document is included on the CD-ROM.)

:60

LIVE ANNOUNCER: Think of the people you know. Think of the people who are close to you ... the people who are part of your family and part of your life. Now think of this: There's a good chance that one of them has a mental health problem. In fact, mental health problems affect almost every family in America. The good news is that most people with mental health problems recover from them, and they go on to lead productive, fulfilling lives. Most have jobs, raise families, and play important roles both in our communities—and our lives. Get the facts about mental health. Call 1-800-789-2647 for a free brochure. That's 1-800-789-2647. Because mental health is part of all our lives. This message is a public service of **[YOUR STATE'S MENTAL HEALTH DEPARTMENT]** and this radio station.

:30

LIVE ANNOUNCER: Did you know that mental health problems affect almost every family in America? So chances are, someone you know and love has a mental health problem. So get the facts about mental health. Call 1-800-789-2647 for a free brochure. That's 1-800-789-2647—because mental health is part of all our lives. A public service of **[YOUR STATE'S MENTAL HEALTH DEPARTMENT]** and this radio station.

:10

LIVE ANNOUNCER: Get the facts about mental health. Call 1-800-789-2647 for a free brochure. A message from the **[YOUR STATE'S MENTAL HEALTH DEPARTMENT]** and this radio station.

LIVE-READ RADIO SCRIPTS (SPANISH)

(An electronic version of this document is included on the CD-ROM.)

Guión para locutor, en vivo

:60

LOCUTOR: Piense en la gente que conoce. Piense en la gente más cercana a usted...gente que es parte de su familia y parte de su vida. Ahora piense en esto: Es muy probable que uno de ellos tenga un problema de salud mental. Un informe del Gobierno Federal dice que los problemas de salud mental afectan a casi todas las familias en América. Lo bueno es que la mayoría de la gente con problemas de salud mental se recupera de ellos, y llevan vidas productivas y satisfactorias. La mayoría tiene empleos, forman familias, y juegan importantes papeles en nuestra comunidad—y en nuestras vidas. Así que, conozca toda la verdad sobre salud mental. Visite este sitio web: [nuestra salud mental punto gov](http://nuestra.saludmental.punto.gov). Repetimos, [nuestra salud mental punto gov](http://nuestra.saludmental.punto.gov). Porque la salud mental es parte de nuestra vida. Este mensaje es un servicio público del Departamento de Salud y Servicios Humanos de los Estados Unidos, y de esta cadena de radio.

:30

LOCUTOR: Un informe del gobierno Federal dice que los problemas de salud mental afectan a casi todas las familias en América. Así que es probable que alguien que usted conoce y ama tenga un problema de salud mental. Conozca toda la verdad sobre salud mental. Visite este sitio web: [nuestra salud mental punto gov](http://nuestra.saludmental.punto.gov). Repetimos, [nuestra salud mental punto gov](http://nuestra.saludmental.punto.gov). Porque la salud mental es parte de nuestra vida. Este mensaje es un servicio público del Departamento de Salud y Servicios Humanos de los Estados Unidos, y de esta cadena de radio

:10

LOCUTOR: Así que, conozca toda la verdad sobre salud mental. Visite este sitio web: [nuestra salud mental punto gov](http://nuestra.saludmental.punto.gov). Repetimos, [nuestra salud mental punto gov](http://nuestra.saludmental.punto.gov). Porque la salud mental es parte de nuestra vida. Este mensaje es un servicio público del Departamento de Salud y Servicios Humanos de los Estados Unidos, y de esta emisora.

PSA PITCH LETTER (ENGLISH)

(An electronic version of this document is included on the CD-ROM.)

Dear Public Service Director:

Mental health problems are surprisingly common. According to a recent report from the President's New Freedom Commission on Mental Health, mental health problems affect nearly every family in America—and, by extension, nearly every family in your community.

There is a good chance you know someone who is affected.

The good news is that effective treatments and services for people with mental health problems are available and that recovery is now the expectation. Unfortunately, many people do not seek or receive treatment because of cost, fear, not knowing where to go for services, and concern about confidentiality and the opinions of neighbors and community. This fear of what people may think—the stigma that surrounds mental health problems—is a serious barrier to treatment and recovery. Fortunately, everyone can do something to reduce stigma.

By printing the enclosed public service advertisements, you can help people see that mental health problems are common and can be overcome. By printing them, you can break down the barriers that keep people from seeking treatment.

Please take this opportunity to help not only the people who will experience mental health problems, but also the countless others whose lives these people touch. After all, the people you help may be the people closest to you.

Sincerely yours,

[Name]

[Title]

[Organization]

[Phone Number]

PSA PITCH LETTER (SPANISH)

(An electronic version of this document is included on the CD-ROM.)

Estimado Director de Servicio Público:

Los problemas mentales son sorprendentemente comunes. De acuerdo con un informe reciente de la Comisión Presidencial Nueva Libertad sobre Salud Mental, las enfermedades mentales afectan a casi cada familia en América—y probablemente afectan a muchas familias en su comunidad.

Hay una gran probabilidad de conocer a alguien afectado por una enfermedad mental.

Lo importante es que hay tratamientos disponibles y servicios para personas con problemas de salud mental y que la recuperación es posible. Desafortunadamente, muchas personas no buscan tratamiento por razones de costo, temor, por no saber a donde ir para ser atendidos, y por dudas acerca de la confidencialidad y las opiniones de sus vecinos y su comunidad. Este temor a lo que la gente pueda pensar—el estigma que rodea los problemas de salud mental—es una barrera seria para el tratamiento y la recuperación. Por suerte, cada uno de nosotros puede hacer algo para reducir el estigma.

Trasmitiendo el anuncio de servicio público adjunto, usted puede educar a la gente para que vean que los problemas de salud mental son comunes y pueden ser resueltos. Trasmitiendo este anuncio usted puede derribar las barreras que impiden a muchas personas buscar tratamiento.

Por favor aproveche esta oportunidad de ayudar, no solo a gente con problemas de salud mental, sino también a muchos otros para quienes estas personas son muy importantes. Es muy posible que las personas a las que usted ayude pueden ser personas muy cercanas a usted.

Atentamente,

[Name]

[Title]

[Organization]

[Phone Number]

STATE- OR COMMUNITY-SPECIFIC DROP-IN ARTICLE

(An electronic version of this document is included on the CD-ROM.)

Please note that the portions in brackets, most notably the first several paragraphs, are meant to be replaced with the story of an actual resident of your State or community who has recovered from a mental illness.

Mental Health Problems Are Common, But So Is Recovery

[When Mike Halligan first heard the diagnosis—paranoid schizophrenia—he also heard that he might as well give up on having a future.

“The general attitude was that life was over for me, someone with schizophrenia,” said Halligan. “They more or less said, ‘Don’t expect to get involved in life that much.’”

Since then, Halligan has worked in oil fields, managed \$25 million contracts, earned a master’s degree in psychology, married, and had children. “I’m glad I didn’t listen,” he said.

In the 30 years since that first diagnosis, there have plenty of hard times, too. Halligan tells about periods when he couldn’t find work and couldn’t afford his medication. He spent time in hospitals. There were major bouts with depression. After one of these, his diagnosis shifted to depression, which turned out to be more accurate. “Getting the right diagnosis and the right treatment made a big difference,” he said.

Halligan now heads Texas Mental Health Consumers, a statewide advocacy organization for people with mental illnesses. He and his family live in Georgetown, north of Austin.

Halligan’s] story of illness and coping and recovery is remarkable. But he says it is not unique. In fact, studies show that most people with mental health problems do get better and many recover completely.

This is not widely known, however. A recent federal report found that many Americans don’t know that mental illnesses can be treated and recovery is possible.

This and other misconceptions are one reason for the stigma—the aura of shame and blame—that surrounds mental health problems. Fear of mental illness is itself a serious problem because it keeps people from acknowledging their condition and getting treatment.

Some other myths about mental illnesses that contribute to stigma:

- Myth: Mental health problems are not common. On the contrary, they are very common. Nearly every family in America is affected, according to the same report.

- **Myth: People with mental health problems can't hold jobs. Not true. Many people with mental health problems are productive employees and contributing members of their communities.**
- **Myth: There is nothing you can do about a mental illness. In reality, there are more new treatments and community supports than ever before, and even more are on the horizon.**
- **Myth: People with mental health problems are violent and unpredictable. In reality, the vast majority of people who have mental health problems are no more violent than anyone else.**

What can people do about stigma? When it comes to jobs and housing, laws protect people with mental health problems. But there are also steps that anyone can take.

“Labels contribute to stigma,” said Charles G. Curie, administrator of the Substance Abuse and Mental Health Services Administration (SAMHSA), part of the U.S. Department of Health and Human Services. “Terms like crazy, schizo, or psycho demean and devalue the individual.”

Labeling people by their illness is also damaging, Curie said. For instance, instead of saying “he’s a schizophrenic,” say “he has schizophrenia.”

[Mike Halligan would add, “Don’t assume that people with mental illnesses have to drop out of life.”

Halligan] is telling his story as part of a new federal initiative that aims to break down the barriers that keep people from seeking treatment (www.allmentalhealth.samhsa.gov; click on “my story”).

The National Anti Stigma Campaign, part of the Center for Mental Health Services, also has a toll-free number (1-800-789-2647; English/Spanish) for information on stigma and mental illnesses. The Center for Mental Health Services is an agency of the Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services.

GENERAL DROP-IN ARTICLE (ENGLISH)

(An electronic version of this document is included on the CD-ROM.)

Stigma Around Mental Health Problems Gets in Way of Recovery

Mental health problems are surprisingly common, according to many studies. In fact, they affect most families in America at some point. But studies also show that most people with mental illnesses get better and many recover completely.

One major barrier to recovery, however, is stigma—the aura of shame and blame that surrounds mental health problems. This fear of mental health problems is a major problem in itself, according to experts.

“Stigma gets in the way of treatment and recovery,” said Charles G. Curie, administrator of the Substance Abuse and Mental Health Services Administration (SAMHSA), part of the U.S. Department of Health and Human Services. “Stigma makes it hard to find a job and a place to live. It keeps people from getting the treatment they need.”

When it comes to jobs and housing, laws protect people with mental health needs. But there are also steps that anyone can take to counter stigma:

- Share the facts about mental health problems and about people with these problems. Speak up if you hear or read something that isn't true.
- Treat people with mental health needs with respect and dignity, as you would anybody else.
- Don't label people with mental health problems by using terms like “crazy,” “wacko,” “schizo,” “loony,” “psycho,” or “nuts.”
- Don't label people by their illness. Instead of saying “She's a schizophrenic,” say “She has schizophrenia.”
- Support people with mental health problems by helping to develop community resources.
- Teach children about mental health. Help them see that these problems are like any other illness and can be treated.

SAMHSA is leading a public education effort to counter stigma and bring down barriers that keep people from seeking treatment.

“Mental Health: It's Part of All Our Lives” has information on mental health problems and stigma at www.allmentalhealth.samhsa.gov. Or call the toll-free number: 1-800-789-2647 (English/Spanish).

GENERAL DROP-IN ARTICLE (SPANISH)

(An electronic version of this document is included on the CD-ROM.)

El estigma que rodea los problemas de salud mental dificulta la recuperación

Los problemas de salud mental son sorprendentemente comunes, según varios estudios. En efecto, en algún momento afectan a la mayoría de las familias en América. Pero los estudios también muestran que la mayoría de las personas con dolencias mentales mejoran, y muchas se recuperan por completo.

Una importante barrera para la recuperación, no obstante, es el estigma—el aura de vergüenza y culpa que rodea los problemas de salud mental. Este miedo ante las dolencias mentales es un importante problema en si mismo, según los expertos.

“El estigma dificulta el tratamiento y la recuperación”, dijo Charles G. Curie, jefe de la Administración sobre el Abuso de Sustancias y los Servicios de Salud Mental (SAMHSA, por sus siglas en inglés) que forma parte del Departamento de Salud y Servicios Humanos de los Estados Unidos. “El estigma dificulta el encontrar un trabajo y un lugar para vivir. Impide que la gente obtenga el tratamiento que necesita.”

Cuando se trata de empleos y vivienda, las leyes protegen a las personas con necesidades de salud mental. Pero también hay pasos que cualquiera puede dar para luchar contra el estigma:

- Dé a conocer la verdad sobre los problemas de salud mental y sobre la gente con estos problemas. Hable si oye o lee algo que no es cierto.
- Trate a la gente con necesidades de salud mental con respeto y dignidad, como lo haría con cualquier otro.
- No ponga etiquetas a la gente con problemas de salud mental usando palabras como “loco”, “chiflado”, “esquizo”, “pirado”, o “psico”.
- No ponga etiquetas a la gente por sus dolencias. En lugar de decir “Es esquizofrénica”, diga “Tiene esquizofrenia”.
- Apoye a la gente con problemas de salud mental ayudándole a desarrollar recursos en la comunidad.
- Enseñe a los niños sobre la salud mental. Ayúdeles a ver que estos problemas son como cualquier otra dolencia y que pueden ser tratados.

SAMHSA dirige un esfuerzo de educación del público para luchar contra el estigma y derribar las barreras que impiden que la gente busque tratamiento.

“Salud mental: parte de nuestra vida” tiene información sobre los problemas de salud mental y el estigma en www.nuestrasaludmental.samhsa.gov. O llame al número gratuito: 1-800-789-2647 (inglés/español).

SAMPLE DROP-IN ARTICLE PITCH LETTER

(An electronic version of this document is included on the CD-ROM.)

You may use this pitch letter to market your drop-in article, or you may create your own.

Dear Editor:

Mental health problems are surprisingly common. According to the President's New Freedom Commission on Mental Health, they affect nearly every family in America—and, by extension, nearly every family in your community.

Although public attitudes toward people with other disabilities have changed dramatically over the past two decades, people with mental health problems are often the subjects of scorn, ridicule, and fear. Common misconceptions and stereotypes about mental health problems still create frightening barriers to employment, education, housing, and, most sadly of all, treatment.

Yet people with serious mental health problems recover. With treatment, most get better and go on to lead fulfilling, productive lives.

The enclosed articles explore some of the myths and misconceptions surrounding mental health problems. In them, your readers will find interesting facts and tips that will help break down barriers to treatment and recovery. Please consider publishing these articles to help not only the people who will experience mental health problems, but also the countless others whose lives will be affected.

Sincerely yours,

[Name]

[Title]

[Organization]

[Phone Number]

SAMPLE FEATURE STORY PITCH LETTER

(An electronic version of this document is included on the CD-ROM.)

You may use this pitch letter to market your feature story, or you may create your own.

Dear [Mr./Ms. Reporter's Name]:

Robert is an education counselor, a husband, and a father. He works hard, and he is a happy, productive member of society. He also happens to be recovering from schizophrenia.

Like many other Americans recovering from mental health problems, Robert has fought a tough battle against stigma. Countering the aura of shame and blame associated with mental health problems is critical to everyone, especially to mental health consumers who must identify the need for and seek mental health treatment and continue to live healthy and productive lives.

Studies show that people with mental health problems do get better, and millions recover completely, leading full and active lives. But stigma prohibits too many from seeking the diagnosis and treatment necessary for improved mental health. Stigma has many faces: Social isolation, labels like "psycho," "schizo," or "crazy," and outright discrimination all work to inhibit people with mental health problems from getting the help they need.

Reducing the stigma and discrimination associated with mental health problems is critical in helping more people recover from them. We've joined a new Federal initiative whose goal is to create a more accepting environment for people with mental health problems. This initiative includes a national public service advertising campaign. The materials are upbeat in tone and focus on the important ways people with mental health problems contribute to our lives every day. **[Add a line here about your local campaign.]** We need your help to get this message out.

[Your State mental health program] has several spokespeople who have experienced these problems and are in recovery from their mental health problems. They are available to share their stories and discuss mental health in our community.

Please give me a call if you would like more information or want to set up an interview. For more information on mental health awareness and reducing stigma, please visit **[insert Web site address here]**. I hope you'll help us spread the word that mental health is part of all our lives.

Sincerely yours,

[Name]
[Title]
[Organization]
[Phone Number]

SAMPLE PROCLAMATION

(An electronic version of this document is included on the CD-ROM.)

You may use this proclamation to promote your event, or you may create your own.

WHEREAS, there is a proven connection between good mental health and overall personal health; and

WHEREAS, mental illnesses affect almost every family in America; and

WHEREAS, people with mental illnesses recover if given the necessary services and supports in their communities; and

WHEREAS, people with mental illnesses make important contributions to our families and our communities; and

WHEREAS, millions of adults and children are disabled by mental illnesses every year; and

WHEREAS, only one out of two people with a serious form of mental illness seeks treatment for their mental illness; and

WHEREAS, stigma and fear of discrimination keep many who would benefit from mental health services from seeking help; and

WHEREAS, research shows that the most effective way to reduce stigma is through personal contact with someone with a mental illness; and

WHEREAS, good mental health is critical to the well-being of our families, communities, schools, and businesses; and

WHEREAS, greater public awareness about mental illnesses can change negative attitudes and behaviors toward people with mental illnesses;

NOW, THEREFORE, I, [Name of Government Official, State/City] on behalf of [State/City], do hereby proclaim the month of May [Year] as MENTAL HEALTH MONTH. As the [Title of Government Official], I also call upon all [Name of State/City] citizens, government agencies, public and private institutions, businesses, and schools to recommit our community to increasing awareness and understanding of mental illnesses, reducing stigma and discrimination, and promoting appropriate and accessible services for all people with mental illnesses.

CONSENT FORM

(An electronic version of this document is included on the CD-ROM.)

Name: (please print) _____

Organization: (if any) _____

Address: _____

Phone: (day) _____ (eve) _____

Fax: _____ E-mail: _____

I consent to allow [YOUR STATE MENTAL HEALTH DEPARTMENT] to publish personal information and/or photos provided by me on its Web site, as well as in its official publications, and/or in media outlets and advertisements for the public and scientific community, so long as such use is in keeping with established standards of good taste. The text may be used in its entirety or edited for length. The media described above include, but are not limited to: [LIST]

[YOUR STATE MENTAL HEALTH DEPARTMENT] may use (check one):

- My full name and photo: ____;
- My first name only and photo: ____;
- I prefer that my name not be used and that a pseudonym be used instead with photo: ____.

I understand that I will not be paid for either the text or any photos that I provide. I agree to waive any and all claims for compensation for such materials.

Signature: _____

Date: _____

Project Description: **[Enter information about your initiative here.]**

Please complete this form and return by mail or fax to:

NAME

TITLE

ADDRESS

CITY, STATE, ZIP



SECTION

Lessons Learned and Tips

IV

LESSONS LEARNED IN DEVELOPING AND IMPLEMENTING THE EBI

As a pilot program, the EBI implemented a variety of activities described within this kit to reduce the stigma and discrimination associated with mental illnesses. While the EBI evaluation provides a complete, quantitative look at all aspects of the EBI, there are also a number of anecdotal lessons the EBI team learned during this effort.

1. **Use a multifaceted approach** that includes public education, contact, and reward strategies.
2. **Use a participatory process** by developing a grassroots network of key stakeholders and program partners on local, State, and regional levels. Include representatives both within and outside of the mental health community, especially from target audiences. These can include education, the business community, State and local governments, communications professionals, law enforcement, local and national celebrities, sports figures, and others.
3. **Involve consumers of mental health services** in a meaningful way throughout the planning, implementation, and evaluation, including creative development.
4. **Work closely with a smaller subgroup of key partners** to promote buy-in, participation, and support among important voices in the mental health community.
5. **Involve stakeholders early and often throughout the creative process**, and allow time to implement feedback.
6. **Identify your audience(s) and speak to them in their own language.** For example, focus group testing revealed that the general public preferred the term “mental health problems” to “mental illnesses.”
7. **Focus on positive, strength-based messages that demonstrate that recovery is both real and possible.**
8. **Localize and personalize educational strategies** as much as possible, including providing personal stories from within States and localities.
9. **Choose a campaign theme that can be tailored to specific audiences**, such as “Mental Health: It’s Part of All Our Lives.”
10. **Develop and implement a comprehensive evaluation** and implement regular reporting on activities and successes. Provide PSA placement data to partners and stakeholders to encourage media outreach.
11. **Use existing commemorative events**, such as May Is Mental Health Month, as a springboard.
12. **Generate and maintain enthusiasm** among participants by celebrating achievements and moving beyond disappointments. Encourage partners to be creative and trend-setting.
13. **Provide basic training and tools on media outreach** to those who will be implementing the initiative. This equips and motivates advocates to support the public education effort through followup on the local level.
14. **Utilize train-the-trainer opportunities** to facilitate ownership of the initiative.
15. **Provide forums for peer-to-peer information sharing.**
16. **Additional training may be required in the development and ongoing operation of speakers’ bureaus.**
17. **Recognize that messages directed at media gatekeepers may vary from those directed at the general public**, and that those messages should address the impact of mental health issues on their individual communities.

TIPS FOR DEVELOPING PRODUCTIVE PARTNERSHIPS

When it comes to reducing stigma and discrimination, there truly is strength in numbers. Enlisting organizations, businesses, groups, and individuals to your cause can broaden the reach of your message and the scope of what you are able to accomplish. Partners bring not only energy and resources, but a point of view that is unique and valuable in planning, implementing, and evaluating your efforts.

Below are some suggestions to help you identify and enlist enthusiastic and productive partners for your work and put those partnerships to the best possible use:

- **Be prepared to present outcomes:** Presenting potential partners with results from similar projects, studies, or your own campaign helps get them over the reluctance barrier and shows that involvement would not be a waste of time or resources.
- **Think locally:** The outcomes reports that are most persuasive are those that demonstrate a real effect in the partners' home community or with the partners' constituency.
- **Include target audiences in your partnership development:** If you want to reach schools, it's not a stretch to suggest that the best way is through those already involved in the education system, such as teachers or a State board or education agency.
- **Consider motivations:** Not all of your partners will join solely out the goodness of their hearts. Most expect to get something valuable for themselves out of the campaign—and that's fine. Before approaching them, think about what it is you can offer them and then be sure to make these benefits clear. Some examples of assets you might bring to a potential partnership:
 - Training opportunities for staff
 - A résumé booster
 - Assistance reaching new markets
 - Community goodwill
- **Be flexible about commitments:** One organization, agency, or business may have countless dollars or hours to put into the campaign. Another may be able to contribute far less. If you set a minimum participation requirement, you run the risk of scaring off partners who have valuable, but limited, assets to offer.
- **Do your homework:** Despite the best of intentions, not every partnership will be appropriate or helpful. Be sure you know what you are getting when you sign on a partner. A business embroiled in a scandal, for example, is likely to draw attention away from your core message.
- **Come prepared with suggestions:** Explain exactly what you mean when you say you want to partner in this endeavor. The more specific you can be, the better. Do you want them to carry your flyers in their business places? Do you want them to attend trainings or present trainings? The more they know, the easier it is for them to make a realistic decision about joining you.
- **Don't assume the potential partner knows anything about your issue:** Just because someone has agreed to meet with you or hear you out does not mean they are well versed in stigma and discrimination against people with mental illnesses. Have your facts and figures ready to explain what the problem is and why it needs to be solved.
- **Be ready to explain your costs:** If you are asking for money, you will want to present as much detail as possible to justify your dollar figures.
- **Identify the real leader:** Just because one member of an agency or organization is excited about joining your team doesn't mean he or she has the influence to make the partnership happen. Get to know the organization's internal structure before deciding whom to approach.

Pennsylvania: Reaching Outside the Box

Pennsylvania's EBI effort began with a strong foundation, as the State had already been conducting its own anti-discrimination campaign, OpenMindsOpenDoors, focusing on employer and mental health provider audiences. Through a network of advocates, speakers, and partners, including chapters of the National Mental Health Association, OpenMindsOpenDoors integrated EBI materials into its business outreach, while still maintaining key components of the existing campaign.

Part of Pennsylvania's EBI success has been in developing partnerships. For example, Pennsylvania used the EBI to reach out to organizations not usually involved in mental health issues, such as the Pennsylvania Association of Latino Organizations (PALO), as well as older adults, faith-based organizations, and the top 100 employers in the State. These audiences were eager to get involved and receptive to mental health messages. Pennsylvania has also had success disseminating EBI messages and materials at employee health fairs, such as a fair hosted by the Pennsylvania Higher Education Association.

Pennsylvania helped widen the scope of the EBI's reach by seeking alternative channels for distribution. The State was the first to identify college radio as a medium for PSAs, and it distributed materials to almost 100 college radio outlets in the State. It also was able to use the EBI as a springboard for widening the scope and diversity of its speakers' bureau activities.

Pennsylvania is currently targeting mental health providers to create a healthy environment for all employees and employers while assisting those to whom treatment is provided. The State is encouraging businesses to be aware of the mental health of all employees, instead of focusing solely on employed mental health consumers. Using EBI messages and materials, Pennsylvania also hopes to show businesses how embracing mental health in the workplace affects the bottom line by decreasing absenteeism and tardiness. In order to measure the success of these programs, Pennsylvania is increasing the evaluation of stigma reduction programs already in place. Increased mental health awareness will be a key component of that effort.

Working With Partners

Once you have partnered with key organizations, you will have to work to maintain a productive and effective relationship. Here are some tips for making partnerships work:

- **Pick one “message” and stick with it:** You and your partners will want to agree on themes and tactics and on how to communicate them before you make any public statements or decisions. This is crucial to building and maintaining a strong message.
- **Report in:** Your partners may not want or need to be involved in every decision—or even most decisions. But they will want to know that work is getting done and that word is getting out. Design a mechanism to keep them informed regularly, whether through face-to-face meetings, e-mail newsletters, or just the occasional phone call.
- **Offer leadership roles:** Partners are more likely to be engaged in and excited about the campaign if they have real tasks that allow them to make decisions in some cases. Offer these roles, but do not insist upon them. Some partners will not have the time or resources to participate in this way.
- **Don't go too long between events or meetings:** This can slow momentum and lessen commitment from partners, who in the lag time may have picked up other commitments and responsibilities.
- **Cede tasks graciously and gratefully:** If one of your partners volunteers to take on a task you had slated for yourself, by all means allow them to do it, or at least to participate as an equal.

TIPS FOR PREPARING TO TALK TO YOUR PUBLIC

Each of us has a story to tell, but it's often difficult to translate our real-life experiences into speeches and presentations that make an impact. It's important to recognize that the best communicator is one who believes in what he or she is saying and whose sincerity and dedication to the topic is readily apparent. Your expertise, experience, interest, and commitment to the issue are what make you a competent and believable spokesperson for the EBI. You already possess the necessary motivation and knowledge to be a persuasive spokesperson. Now you can use this section as a tool to improve the delivery and organization of your presentation.

Pointers for Public Speakers:

- **Content.** Share information about yourself up front. This personalizes you to the audience and makes them feel that they know you. The introduction should be 15 percent of your speech, the discussion about 75 percent, and the closing, 10 percent.
- **Eye contact.** The reason you maintain eye contact with your audience is for feedback. The only way you'll know if your audience is getting the message is through eye contact. Look for eyes focused on you and heads nodding with you.
- **Smile:** Does your face say you are approachable? It did if you smiled (at appropriate times).
- **Body language.** A picture is worth a thousand words. Defensive body language is exhibited by crossed arms, a “fig leaf” stance, or a military stance. These are all negative. Positive body language is seen through openness, gestures, moving away from the podium (unless you can't take your microphone with you), and taking off your jacket, if appropriate.
- **Facial expression.** It is impossible to hide your feelings when you talk about something you really care about. The kind of passion people feel and exhibit when they talk about their loved ones, their mate, or their children is the same passion that should be harnessed when talking about your issue. That kind of passion gives off energy, and energy makes you convincing.
- **Gestures.** Gestures help tell the story. Remember, 50 percent of what people retain is through your body language. Gestures reinforce and highlight your story and give you energy in your delivery.
- **Voice.** You have six different octaves—use them. Avoid non-fluencies such as “umms,” “ahs,” and “you know.” Never try to camouflage a regional dialect. All you have to do is tell people where you're from and they'll expect you to sound the way you do.
- **Pauses/silence.** There are four good times to pause: when you move from one subject to another, when you want the message to sink in, when you want or need to collect your thoughts, and when you receive laughter or applause.
- **Use of humor.** Jokes and anecdotes make for an entertaining speech, but make sure you practice them. Choose material carefully, and never tell “off-color” jokes.
- **Avoid distractions.** Don't fiddle with your hair, shuffle your feet, sway back and forth, jingle change in your pockets, or play with your eyeglasses.
- **Practice.** Practice, practice, practice. If possible, spend time alone just prior to your speech; take some deep breaths and think about your central theme.
- **Don't forget that being nervous is normal.** Try and “reframe” your fear into excitement and enthusiasm.
- **Remember. You are the expert on your own story:** People have come to hear you talk about what you know.

PARTNER INVOLVEMENT AND CONSENSUS BUILDING

The EBI began as a collaborative program, involving a diverse group of partners on the national as well as the State levels from the outset. For that collaborative character to continue, materials and activities were shared with State representatives and partners early in the process, and comments were gathered. In turn, States shared materials with their partners and consumer advocacy networks and forwarded their comments for inclusion as well. Sharing and communicating this not only provided valuable direction for the Initiative but also helped promote buy-in for its components among these partners. As such, partners were tapped later in the Initiative for endorsement and dissemination of materials, and even for monetary support for the Voice Awards event.

How To Engage Partners and Build Consensus

To reach mass audiences and create widespread change, your campaign must be built using input and buy-in from a diverse set of partners who can offer unique and differing perspectives. Naturally, the more interests and individuals offer opinions and ideas, the better the chances for disagreement will be. Research suggests a consensus model of community organizing and dispute resolution is helpful, both in the production process as a method to keep ideas flowing, and in the final product, which ultimately benefits from the debate.

Below is a step-by-step approach to partner involvement and consensus building that may help your organizational processes and, ideally, your outcomes.

IDENTIFY STAKEHOLDERS

Partners are those affected by the initiative—negatively or positively—as well as those who can affect the initiative’s outcome. For example, the media in your community are likely to be partners in both these arenas. Your campaign may choose to scrutinize and perhaps criticize local media for examples of stigma and discrimination against people with mental illnesses in their work. At the same time, those media outlets will likely play an extremely important role in promoting your message.

Partners are not necessarily outside organizations or individuals. Take care to identify those within your own organizational structure who are in a position to affect the outcome of the decisions you are trying to reach.

Finally, be sure those partners you have identified are perceived as legitimate representatives of a particular group by the members of that group. Remember that within many communities with similar goals, there are still likely to be splinter groups that identify with different approaches or individual leaders. Leaving one or another of these groups out of the process can have serious consequences down the road.

DEFINE SUCCESS

It is critical to begin with an understanding of exactly where you hope to get at the end of a decisionmaking process, as well as a firm grasp of how likely it is that you will get there. A successful consensus-building process must end with decisions being made and,

ideally, with action steps. Success does not, however, have to mean that every one of the stakeholders is happy. In fact, it is possible that no one will be entirely happy with the outcome—but no one will be entirely unhappy either.

ANALYZE STAKEHOLDER SELF-INTEREST

A successful outcome is one that meets the needs not only of the community at large but also of the individual partners involved in the process. From idealism to profit, each of your partners will have a motive for wanting to be involved in your campaign. Knowing what these motives are will streamline your consensus-building efforts and strengthen your campaign.

ANALYZE STAKEHOLDER STRENGTHS

During the consensus-building process this will help you to ensure all partners participate in a way that is meaningful to them—and to you. Questions, ideas, considerations, and requests for input can grow out of this perspective. Later in the campaign, it will help you to be efficient and effective.

DESIGN A PROCESS

Create both an agenda and an “action plan” for sticking to that agenda. Rather than just leaving the discussion open, try to be sure that all partners have a set block of time to express their opinions within each key decision module. While designing the process, pay particular attention to the order in which issues are addressed. This will help you avoid the perception by partners that you have already made the “real” decisions and are not truly interested in their participation.

IDENTIFY YOUR PRIORITIES

In an ideal world, your process would run so smoothly that everything on your agenda gets accomplished. Because few of us live in that world, it is important to know internally what absolutely must get accomplished at a single meeting in order to be productive in the time between then and the next meeting.

MAKE CLEAR WHEN A DECISION HAS BEEN REACHED

Consensus does not end in a vote but rather in an agreement. To avoid problems such as duplication of arguments and discussions at a later time, be sure everyone is clear that an agreement has been reached and what that agreement entails.

CONTACT STRATEGIES AND VIGNETTES

Using Speakers' Bureaus

EBI States saw the value of personal contact with mental health consumers in addressing stigma and discrimination from the start—in fact, some States already had speakers' bureaus in various stages of operation. However, many States needed some assistance in either activating or re-engaging those speakers' bureaus so they were involved in regular speaking engagements. To help States make contact strategy a reality, the EBI implementation team developed and conducted a popular Persuasive Storytelling training and delivered it to two States. The team also developed a tip sheet for States about setting up a speakers' bureau. When SAMHSA was able to award States mini-grants for further work in addressing discrimination and stigma in January 2005, most States built speakers' bureau development into their grant proposals and were able to do even more with their speakers when funding came through.

Using Person-to-Person Contact Effectively To Address Stigma and Discrimination

Like most prejudices and stereotypes, the stigma attached to mental illness is most often a result of misunderstanding or ignorance. So it may seem that countering stigma and discrimination against people with mental illnesses is simply a matter of presenting facts that clear up the misunderstandings.

Unfortunately, it is not that easy. Presenting data and statistics that counteract false beliefs about people with mental illnesses is a good first step, but ultimately it is not enough to effect sustainable change in attitudes, beliefs, and behaviors.

These negative stereotypes and beliefs persist despite evidence to the contrary because they have been reinforced time and again by media, by language, and at various levels of consciousness. It would be impossible to present people with facts about people with mental illnesses every time they read that someone was a “schizophrenic” or heard another person being called “crazy.”

Fortunately, a more realistic tool exists for dislodging stereotypes and prejudices: people with mental illnesses themselves. Studies repeatedly show that contact with people who have mental illnesses is the most effective method of changing attitudes.³ Research also provides some guidance for people with mental illnesses interested in telling their stories publicly in an effort to reduce stigma and discrimination.

³ Corrigan, Patrick and Lundin, Robert, Don't Call Me Nuts!: Coping With the Stigma of Mental Illness, 2001, Recovery Press, Chicago, IL, p. 303.

Below are some tips on using person-to-person contact strategies and personal stories to reduce stigma and discrimination against people with mental illnesses.

1. **Set up a project:** Contact strategies are particularly effective in a setting where participants in the interaction have equal status and are engaged in cooperative activities. Consider setting up a volunteer project, such as cleaning up a park or playground, that fosters interactions between your target audience and people with mental illnesses.
2. **Keep the contact up:** A single conversation or even a day spent with a person with mental illness can fade from mind and memory. A series of shared experiences, on the other hand, will create a memory bank that will challenge preexisting attitudes and beliefs long after the initial meeting takes place.
3. **Bring like together with like:** A shared trait, attribute, or experience can help connect people with mental illnesses to target audiences. Consider having people with mental illnesses tell their stories to groups with whom they have something in common. For example, people with mental illnesses may want to speak before a group of their professional peers (fellow teachers, or engineers, etc.). Or they may choose to speak to alumni of their school, or groups who share their religious affiliation.

Ohio: A Focus on Youth

Over the past few years, Ohio focused its activities on countering stigma toward children and youth who need mental health services. Starting in 2000, Ohio began focused policy and program work to improve access to mental health through school-based and school-linked services and established a regionally based Ohio Mental Health Network for School Success (OMHNSS) to promote school-based access and technical assistance in best practices.

EBI was seen as a targeted approach to further build on these efforts. From the start of the EBI, Ohio knew it wanted to build a youth speakers bureau as a key element of its EBI implementation. The EBI provided the ability to direct the planning, creation, and training of the Youth Speakers Bureau, a service of Ohio's Speakers Bureau. Ohio's two goals for the Youth Speakers Bureau were to:

1. Raise awareness of and counter stigma; and
2. Increase help-seeking behavior.

Because youth often turn to each other for advice and support, they can have a strong moderating effect on the education and help-seeking behavior of their peers. Ohio's approach to working with schools consists of youth-driven and peer-to-peer approaches to reduce stigma that target middle and high school students and staff.

Through the OMHNSS, Ohio has developed training teams around the EBI, each of which features an educator, a parent, and a mental health provider. These teams promote and facilitate trainings based on the EBI schools materials. In April 2005, teams of Ohio trainers began piloting the school modules in schools throughout the State. Six trainings on module I took place in Ohio between April and June of 2005.

Ohio also contracted with a mental health provider and skilled trainer who assisted a state-level team in carefully identifying, screening, training, and beginning to pilot an adult and youth speakers' bureau. The youth make presentations on mental health, bullying, and suicide prevention. Some of the trained youth speakers participate in a county-based suicide prevention program called S.A.F.E. (Seeking And Finding Everyone).

4. **Offer the ordinary:** Contact with people whose stories are too remarkable may serve to reinforce negative stereotypes. Contact strategies should not depend only on people with mental illnesses who have had, for example, extraordinary professional success, or managed to “beat” their condition.
5. **Assess comfort with disclosure before you begin:** Before people with mental illnesses choose to share their stories, they must assess their comfort level with talking about personal details of their life. Discomfort by the presenter is likely to translate into discomfort in the audience, which may reinforce rather than reduce stigma. But the more general a story, the less it will resonate with an audience.
6. **Have concrete examples available:** Personal stories are best when they include details that others can relate to, rather than broad generalities. Talking, for example, about something that happened while riding the same train most of your audience takes to work helps emphasize the commonalities between the speaker and the audience.
7. **Encourage questions:** Even in situations where a person with mental illness has volunteered to tell a personal story, people in the audience may still feel uncomfortable asking what they consider personal questions—particularly detailed questions about the experience with illness. Encouraging questions reinforces the message that people with mental illnesses have nothing to be embarrassed about and nothing to hide.
8. **Join up:** People with mental illnesses may want to consider becoming part of groups to whom they have told their stories, such as faith communities (churches, synagogues, mosques, etc.) or civic organizations like the Rotary Club or League of Women Voters. Maintaining that level of contact on an everyday basis can serve as a consistent block to negative attitudes and images group members receive elsewhere.

REWARD STRATEGIES

Saying “thank you” is not just good manners, it’s also good marketing practice. Research suggests that publicly rewarding positive efforts can be a powerful way to strengthen a campaign. To leverage this tool, consider hosting an awards ceremony, breakfast, or similar event in honor of a business, media professional, group, or individual who has made a substantial effort to reduce stigma and discrimination against people with mental illnesses. Or publicly compliment a media outlet for work that portrays people with mental illnesses in positive, strength-based ways. Showing your appreciation for the work of your partners and others outside your campaign can pay dividends in a number of ways, including the following:

- **Strengthening buy-in:** Recognizing someone’s work in a public way creates an expectation for the future than can bolster the honoree’s continuing commitment to the campaign.
- **Guiding other efforts:** Rewarding the work of one organization or individual provides a roadmap or “best practices” guide for others interested in working on your cause or campaign.
- **Getting your message out:** Public awards ceremonies touch not only the award recipient but also everyone who attends the event on his or her behalf. This is a great outreach and education opportunity. Similarly, a letter to the editor or producer about a good article or broadcast will be seen beyond the circles you may be able to reach with other campaign strategies.
- **Spark a little friendly “competition”:** A “prize” in the form of public recognition can serve as inspiration for some individuals and groups to increase their efforts on behalf of the campaign.
- **Expanding your network of partners, collaborators, and activists:** Everyone likes to be appreciated. The chance to be rewarded can serve as inspiration to potential new partners as well.

Consider the following suggestions for implementing a public awards event:

- **Pick presenters strategically:** Think carefully about who is presenting each award. Receiving an award from someone an honoree respects or admires is likely to be more powerful than receiving an award from someone with whom he or she is unfamiliar.
- **Pick your guest list strategically:** Again, try to have an audience packed with both people your honoree admires and those in a position to reward the honoree’s good work in other ways.
- **Make it rare:** A prize offered too often, or for too little actual effort, will make the strategy less effective.
- **Try to make it media-worthy:** Recruiting celebrities or using the event as a chance to present a newsworthy study or kick off a newsworthy new project will expand the reach of both your anti-stigma message and your “thank you.”

Consider the following suggestions for recognizing excellence in media coverage of people with mental illnesses:

- **Don’t thank the media for “getting it right”:** That implies they’ve gotten “it” wrong in the past. Instead, complement them on a particularly thoughtful approach to the subject.

- **Be clear about what you are complimenting:** A reporter or reader might not know exactly what it was in the story that was better than the average coverage of people with mental illnesses. In any compliment designed for public consumption, be sure you are clear on exactly what is worthy of your appreciation.
- **Address your appreciation to the boss:** Local television newscasts rarely have a segment for viewers' comments, but that doesn't mean you can't make your appreciation known—to someone who matters—for a job well done. If you see or hear something you like, try sending a letter not to the reporter, but to the reporter's boss or other higher-ups at the station.

The EBI developed an awards program to reward entertainment industry writers and producers for positive depictions of people with mental illnesses. The celebrity aspect of this event was successful in appealing to the media and drawing attention to the event, but it was listening to consumer advocates tell their stories that really resonated with the Hollywood community that was present. Through dozens of e-mails, they praised the event team on the relevance and need for the awards program, and commented on the moving nature of the testimonials it offered. Truly an example of the reward strategy at work—and enhanced by contact approaches—the Voice Awards have received SAMHSA support to become an annual event.

About the Voice Awards

As part of the EBI, the Voice Awards are one example of the rewards strategy in action. They were developed to acknowledge film, television, and radio writers and producers whose work has given a voice to people with mental illnesses by incorporating dignified, respectful, and accurate portrayals of these people.

The Voice Awards also recognize the efforts of State mental health professionals and consumers of mental health services. The efforts of both of these groups have been instrumental in raising awareness and understanding of mental health issues around the country. Their work also helps ensure that people with mental illnesses are able to access services and supports that will help them recover.

The submission of nominees for the Voice Awards was open to anyone. Writers and producers of more than 50 productions were nominated to receive Voice Awards. Nominees were reviewed by a panel of judges that included mental health advocates and professionals, as well as representatives from the U.S. Department of Health and Human Services, the communications and entertainment industries, and people who have personally experienced mental illnesses.

In 2005, the first year of the Voice Awards, writers and producers of winning productions, as well as mental health leaders, were recognized at a gala awards ceremony at the Skirball Cultural Center's Ahmanson Ballroom in Los Angeles on the evening of Wednesday, July 20. The event was co-hosted by former TV journalist Kathleen Sullivan and Mariette Hartley, acclaimed actress, author, and playwright. Both are also people with self-disclosed bipolar disorder. More than 230 people, including entertainment professionals, studio representatives, television network executives, and mental health consumers and providers, attended the first event, at which writers and producers of the following productions were honored:

- “The Aviator”
- “ER”
- “Huff”
- “Larry King Live”
- “Monk”
- “People Say I’m Crazy”
- “Scrubs”
- “Stateside”
- “Strong Medicine”
- “There’s No Such Thing as Crazy”

Neal Baer, executive producer of “Law & Order: Special Victims Unit” and former writer/producer for “ER,” was also honored with a Career Achievement Award. In addition, SAMHSA Special Recognition Awards were bestowed upon actress/author Brooke Shields for her efforts to publicize postpartum depression, “General Hospital” star Maurice Benard for his efforts on behalf of people with bipolar disorder, and Univision for its efforts to promote mental health awareness among Hispanics.

The 2005 Voice Awards generated significant media coverage, including a feature article in entertainment trade publication Daily Variety, as well as coverage in the New York Times, the Los Angeles Times, Mental Health Weekly, HollywoodReporter.com, Hollywoodfyi.com, and biz.yahoo.com, among others. Based on the success of the inaugural event, the decision has been made to make the Voice Awards an annual event.

ENCOURAGING SUSTAINABILITY

Sustainability as a goal has two distinct but interrelated meanings within the context of a campaign to reduce stigma and discrimination against people with mental illnesses. The campaign's planners and promoters are striving to keep up the momentum for change by sustaining a level of visibility and activity around the issue. At the same time, they are striving to ensure that changes sparked in the way the public views and treats people with mental illnesses are not lost over time.

Planning for sustainability of a social marketing campaign should be part of the overall campaign strategy from its inception. That means that from the very beginning, you will want to be thinking about how to build a platform from which to launch into the long-term future. Obviously, financial resources will be a big part of this effort. But money isn't everything. A sustainability strategy must include the following key components in order for the campaign to grow and flourish—and, not incidentally, to attract funding if needed:

- **Vision:** Lay out a clear objective that articulates how the campaign will improve the lives of people with mental illnesses and the community at large.
- **Results of orientation:** Determine a way to measure results after the first stages of the campaign to show yourselves and others that what you are doing is worthwhile.
- **Adaptability:** Social, economic, and political trends are dynamic. A sustainable campaign follows suit.
- **Strong internal systems:** An organization is only as strong—and therefore as sustainable—as its leadership and structure.
- **Broad base of community support:** Determine who considers this initiative important, who needs it, and who cares if it doesn't happen.
- **Key champions:** If possible, enlist leaders from businesses, faith-based institutions, government, or other parts of the community who are willing to use their power, prestige, and contacts to generate support.

Maintaining Community and Individual Change

When a sustainable plan has been developed, consider using the following tools to keep it going strong and to maintain positive change:

- **Reminders:** While members of the public who have been exposed to your campaign recently may, for example, change the way they refer to people with mental illnesses, these new language patterns are not yet habitual. The old stigmatizing words are likely to reappear. Consider ways to offer a gentle reminder on a daily basis until the new behaviors, attitudes, and language patterns become second nature. For example, if you determine that a local television broadcast uses stigmatizing or discriminatory language, consider creating a product that might be used while a person is watching television, such as a coaster or a mug.
- **Continued analysis of barriers:** In the beginning of your planning process, your organization may have identified lack of knowledge as the major barrier blocking positive perceptions of people with mental illnesses. Once your campaign has been launched, continue to re-evaluate whether this remains the case. Education about stigma and discrimination may not be enough to end it. You will want to reevaluate

your campaign strategies to determine how to build on education to make greater strides toward behavior and attitude changes.

- **Ongoing incentives:** For media, the incentive may be a thank-you note to a higher-up or even just the pleasure of writing a great story. For businesses the incentive may be perceived reduction in workplace stress as stigma reduction encourages those in need to seek treatment or counseling. Whatever the incentive, be sure that the target audience is aware of it and recognizes a positive outcome as being the result of behavior or attitude change toward people with mental illnesses.
- **Collaborate:** Reach out to other groups or individuals who are working on similar issues, perhaps in other States or localities, to find out what they are doing. One of the keys to keeping an issue in the public eye is making the same message new, over and over again. When your ideas are tapped out, suggestions from others with shared goals are invaluable on their own and may serve to enforce your message in different ways.

Maintaining Media Relations After Launch

To get continuing coverage of your issue when no major events are planned, you must develop an ongoing relationship with the media. These steps can help garner continuing media coverage.

- Develop a plan for periodic media coverage of your campaign and make it newsworthy. Your plan should include your program's objectives, the messages you want to communicate to the media (including why your campaign or message deserves coverage), any promotional activities you plan to sponsor, and a schedule for media contact (when it will occur and who will initiate it).
- Track media coverage. This tracking includes coverage of issues generated by your media relations efforts as well as coverage that occurs independently. Monitoring all types of coverage can provide important process evaluation data. It will enable you to identify and take steps to correct misstatements and errors, determine the impact of your media activities and whether changes are needed, identify other media representatives interested in your issue, and find out whether your organization is being overlooked. Media coverage can be measured in terms of quantity (how much space did a story get and how often are stories published?), prominence (does it appear on the front page or not?), slant (is coverage positive or negative?), accuracy of content, and type of story (is the story an editorial or hard news?).
- Capitalize on breaking news. When something happens that is related to your campaign, call news outlets and offer them an expert opinion. For example, if in the aftermath of a high-profile shooting spree, a public figure uses stigmatizing language to describe the suspect, let the media know the kind of damage this kind of language can cause to others who are living with mental illnesses.



SECTION

Resources

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THE ADS CENTER: YOUR RESOURCE FOR INFORMATION ON STIGMA RELATED TO MENTAL ILLNESS

The Resource Center to Address Discrimination and Stigma Associated with Mental Illness (ADS Center) provides practical assistance to individuals, States, and public and private organizations in the design, implementation, and operation of programs and initiatives to reduce discrimination and stigma.

The goal of the ADS Center is to enhance mental health consumer independence and community participation by ensuring that people have all the information they need to develop successful efforts to counteract discrimination and stigma.

THE ADS CENTER CAN HELP YOU BY:

- Providing useful resources and information about effective approaches for people or organizations interested in countering discrimination and stigma;
- Making you aware of research on discrimination and stigma—including research regarding the public’s attitudes about, and behaviors toward, people with mental illnesses—that has been published or that is underway;
- Offering information about available publications, events, and issues of relevance regarding discrimination and stigma;
- Connecting you with guest speakers who can make presentations on discrimination and stigma in your State;
- Providing a comprehensive bibliography of literature addressing discrimination and stigma;
- Offering technical assistance and trainings to help you create your own stigma reduction initiatives, or information to help you connect with effective campaigns and programs that already exist in your area; and
- Arranging teleconferences to help you facilitate meetings and updates with partners, advocates, consumers of mental services, and other stakeholders.

HOW TO CONTACT THE ADS CENTER:

- **By phone:** The ADS Center’s toll-free number is 1-800-540-0320. It is open Monday through Friday (9 a.m. to 5 p.m. Eastern Time) with bilingual (English/Spanish) staff.
- **On the Web:** www.stopstigma.samhsa.gov
- **By Mail:**
ADS Center
11420 Rockville Pike
Rockville, MD 20852
- **By E-mail:** stopstigma@samhsa.hhs.gov

The ADS Center is a program of the U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Mental Health Services.

COMMUNICATIONS RESOURCES

Media Directories

You can purchase media directories that list outlets by type of media, city, and area of specialization. Before ordering a directory, find out when the next issue will be published, as several major directories are issued late in the year.

The most popular directories are Bacon's Media Directories, Gale Directory of Publications and Broadcast Media, and Editor & Publisher Yearbook, all of which are national in scope. Call your local chamber of commerce or press club for information on media directories in your city or State.

- **Bacon's Media Directories:** Bacon's TV/Radio Directory, Magazine Directory, and Newspaper Directory list stations and publications with addresses, phone numbers, and key contacts. Updated annually. For costs and subscription information, call 1-800-PR-MEDIA (1-800-776-3342) or write Bacon's Media Directories, 332 S. Michigan Avenue, Chicago, IL 60604. E-mail: info@bacons.com
Web site: www.bacons.com
- **Gale Directory of Publications and Broadcast Media:** Gale's provides contact information for thousands of print, radio, and television outlets across the country. Updated annually. For costs and subscription information, call 1-800-877-GALE (1-800-877-4253) or write Thomson Gale, Inbound Sales, 27500 Drake Road, Farmington Hills, MI 48331. E-mail: gale.salesassistance@thomson.com
Web site: www.gale.com
- **Editor & Publisher Yearbook:** Provides information on editors and publishers of newspapers. Published by Editor & Publisher Magazine and updated annually. For costs and subscription information for the print edition, call 1-800-562-2706. To subscribe to the online edition, call 1-800-641-2030.
E-mail: edpub@editorandpublisher.com Web site: www.editorandpublisher.com

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Making Health Communication Programs Work: A Planner's Guide. National Cancer Institute Office of Cancer Communications, National Institutes of Health, 1992. (Free from the Cancer Information Service at 1-800-4-CANCER.)

Marketing Matters: Building an Effective Communications Program. National Center on Child Abuse and Neglect, 1996. (Free from the National Clearinghouse on Child Abuse and Neglect Information at 1-800-394-3366.)

McKenzie, James F., and Jan Smeltzer. *Planning, Implementing, and Evaluating Health Promotion Programs: A Primer*, 3rd ed. Pearson Education, 2000.

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PHOTO & CLIP ART RESOURCES

Photos

A selection of the “Mental Health: It’s Part of All Our Lives” photos are included on the Appendix resource kit CD-ROM as .eps files. All of the photos are saved at 300 dots per inch (dpi) and in CMYK. These photos can be used at no cost by States, Tribal Governments, organizations, and other stakeholders conducting stigma reduction initiatives. Unlimited print usage is granted to the aforementioned groups for PSAs, brochures, and Web use only. The photos may NOT be used for outdoor (including billboards, bus backs, taxi cards, transit posters, transit shelters or kiosks, lighted duratrans, etc.), television, or movie theater displays. If you have any questions about what is appropriate usage for these photos, contact the ADS Center.

The photos on the CD are:

- EBI-0001 Hispanic Female Reading a Book
- EBI-0002 Older White Male Golfing
- EBI-0003 African-American Male Going to Work
- EBI-0004 Hispanic Family Eating Dinner
- EBI-0005 Older Asian-American Female Designing
- EBI-0006 Hispanic Mom and Daughter Bringing in Groceries
- EBI-0007 Young White Male Graduating
- EBI-0008 African-American Female Gardening
- EBI-0009 Hispanic Male High School Student
- EBI-0010 Hispanic Male at Work
- EBI-0011 Hispanic Female Youth Home From School
- EBI-0012 White Female Taking Pictures
- EBI-0013 White Female Youth at the Mall

There are also many resources for clip art and photography (commonly called “stock photography”) available online. Some of these resources offer photography free of charge, others require a one-time or annual registration fee, and still others charge a fee for the use of each image. Take some time to research what is available online using the term “stock photography” to conduct your research.



APPENDIX

Resource CD

RESOURCE CD

- **A-0 - Appendix**
 - **A-1 - EBI ADS Center Presentation-ppt**
 - **A-2 - EBI Marketing Plan**
 - **A-3 - EBI Situational Analysis**
 - **A-4 - Sample State Marketing Plan**
 - **A-5 - Sample Timeline**
- **B-0 - Business Materials**
 - **B-1 - Drop-in Articles**
 - **B-2 - Handouts**
 - **B-3 - Poster**
 - **B-4 - Powerpoint**
 - **B-5 - Print PSAs**
 - **B-6 - Toolkit Resource**
 - **B-7 - Top Exec Booklet**
- **C-0 - Consent Form**
- **D-0 - Drop-in Articles**
 - **D-1 - California Drop-in**
 - **D-2 - Florida Drop-in**
 - **D-3 - Massachusetts Drop-in**
 - **D-4 - North Carolina Drop-in**
 - **D-5 - Ohio Drop-in**
 - **D-6 - Pennsylvania Drop-in**
 - **D-7 - Texas Drop-in**
 - **D-8 - Universal English Drop-in**
 - **D-9 - Universal Spanish Drop-in**
 - **D-10 - Wisconsin Drop-in**
- **E-0 - EBI Evaluation Summary**
- **F-0 - Live-Reach Radio Scripts**
 - **F-1 - Live Radio Scripts English**
 - **F-2 - Live Radio Scripts Spanish**
- **G-0 - Photo and Clip Art Resources**
- **H-0 - Pitch Letters**
 - **H-1 - Dear Public Service Director Spanish**
 - **H-2 - Dear Advertising Director**
 - **H-3 - Dear Editor**
 - **H-4 - Dear Public Service Director English**
- **I-0 - Print PSAs**
 - **I-1 - Magazine Ads**
 - **I-2 - Newspaper Ads**

- **J-0 - Proclamation**
- **K-0 - School Materials**
 - **K-1 - Drop-in Ads**
 - **K-2 - Print Ads**
 - **K-3 - School Poster**
 - **K-4 - Training Modules**
 - **K-5 - Training Power Points**
 - **K-6 - School Administrator's Guide**
- **L-0 - TV PSA Scripts**
 - **L-1 - Contribution :15**
 - **L-2 - Contribution :30**
 - **L-3 - Spanish Contribution :15**
 - **L-4 - Spanish Contribution :30**
- **M-0 - Final Resource Toolkit PDF**

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