## 80% by 2018 Strategic Mapping Moving Consumers to Action Pre-Meeting Survey Results

Mary Doroshenk, MA, NCCRT Director July 17th, 2014 Washington, DC



# 80% by 2018 Strategic Mapping Process

#### Big Picture Mapping Session – June 10th, 2014

- 23 organizations represented
- Provided input through pre-meeting survey and discussion
- Session used to begin development and prioritization of draft 80% by 2018 strategic plan

#### Public Awareness Task Group Meeting – July 17th, 2014

- 26 organizations represented
- Provided input through pre-meeting survey and discussion
- Further adjust 80% by 2018 strategic plan
- Advance 80% by 2018 Communications Plan

#### Professional Education and Practice Task Group Meeting – July 30th, 2014

- 25 organizations invited
- Will provide input through pre-meeting survey and discussion
- Further adjust 80% by 2018 strategic plan
- Develop a 2015 provider outreach/systems change plan around 80% by 2018
- Fold 80% by 2018 Communications plan into the work

# 80% by 2018 Strategic Mapping Moving Consumers to Action Pre-Meeting Survey Results

#### What:

Participants took a 17 question on-line survey

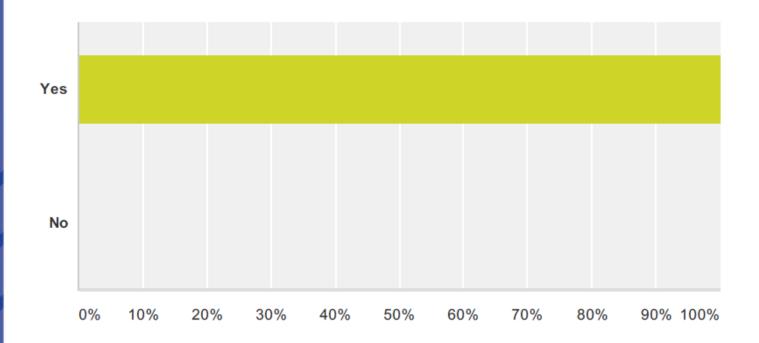
#### **Participants:**

- 25 individuals took the survey; 22 organizations represented
- 26 organizations represented at the meeting

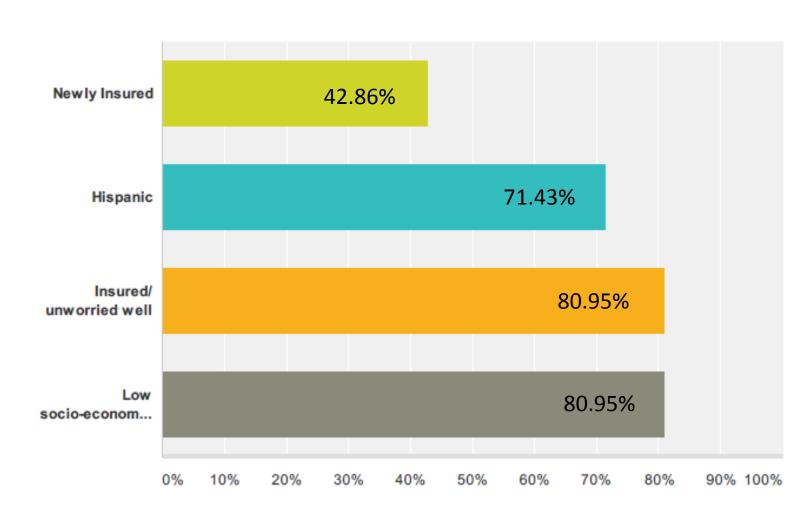
#### **Purpose:**

 To help inform the development of a public awareness strategy geared toward targeted audiences in order to reach 80% screening rate for colorectal cancer

In addition to your organizations own communication strategy to promote colorectal cancer screening, would your organization be willing to collaborate with NCCRT and NCCRT members on a communications strategy that will advance the 80% by 2018 goal?



Who do NCCRT organizations currently reach?



#### **Keys to Success:**

#### Cross cutting advice:

- Engage physicians, Federally Qualified Health Centers (FQHCs), insurance providers and employers, as they will help motivate the general population (create cancer screening friendly work culture)
- Stress test options for those who cannot or will not have a colonoscopy
- Must have appropriate patients, survivors and spokespeople to speak to various audiences
- Need a unified message with the ability to tailor to unique audiences

#### For newly insured:

Work through insurers, health insurance exchanges, Medicaid and healthcare.gov;
 we have a great model already with Kaiser Permanente

#### For insured, unworried well:

 Stress age as a risk factor; stress screening is for those without symptoms; use testimonials; use creativity to break through the clutter

#### **Keys to Success:**

#### For Hispanics:

 Use family-based messaging; develop partnerships with appropriate organizations, particularly to reach Hispanic markets (Univision and Telemundo, radio stations, Hispanic churches, soccer or baseball arena advertisements, promotores, FQHCs, National Hispanic organizations).

#### For low socio-economic populations:

Reach through established support networks; think long-term; use patient navigators/community health workers; extremely important to align with long term plan for patient care

#### What do we have going for us?

- Range of organizations and campaigns with influence on local, state and national levels
- Established and successful campaigns Love Your Butt, Undy Run/Walk Series,
  Screen for Life, Now you know/Now you can among others
- Efforts to target Hispanic audiences underway (Screen for Life, Colon Cancer Coalition, ASGE "myths" video in Spanish)
- Opportunity for direct access to physicians through professional associations
- Strong presence on the ground through a variety of networks: CDC CRCCP program, CCC programs, state health departments, ACS, state-based organizations, targeted markets and other many other local leaders
- There is a focus on building screening programs to serve underserved communities
- Strong desire to build collaborative campaign with unified messages

#### What are the barriers?

- Resources, funding and staff
- Consensus on level of commitment from each organization

#### **Tools Needed**

- Provide shared tested messages and graphics that keep individual members visible;
  address fear issue
- Provide materials that are creative/break through the clutter
- Create tested multicultural materials tailored to populations, including in Spanish
- Partnerships with state Medicaid programs, health insurance companies and insurance exchange organizations
- Conduct training webinars to kick-off campaign

#### Possible messages

#### *Life Saving Messages*

- Screening saves lives
- Screening helps prevent colon cancer
- No more excuses, screening saves lives
- Live longer, get screened.

#### Insured, Unworried Well

- Protect yourself while you are well get screened for colon cancer
- Don't wait for symptoms to get tested
- Colon Cancer is Preventable
- Testimonials from healthy people who found polyps
- Testimonials from those touched by colon cancer
- Messages about taking control of ones health

#### Possible messages

#### Newly insured

- ACA coverage includes screenings (though be transparent about loop-hole)
- Medicare and most insurance plans help pay for screening
- You have insurance; it's time.
- You are now eligible. This is covered.
- Do this for you and the people you love. This is covered.

#### Affordability Messages

- Do this for you and the people you love. Here are community resources that can help you get it done.
- There are testing options

#### Address fears surrounding screening

- There are testing options
- Testimonials that make screening seem doable
- Messages that stress ability to care for others/personal responsibility

#### **Possible messages:**

#### **Action Messages**

- Talk to your provider
- Get screened
- Now you know. Now you can.

#### Hispanic Messages:

• Family-based messaging for Hispanic communities: Do it for yourself. Do it for your family.

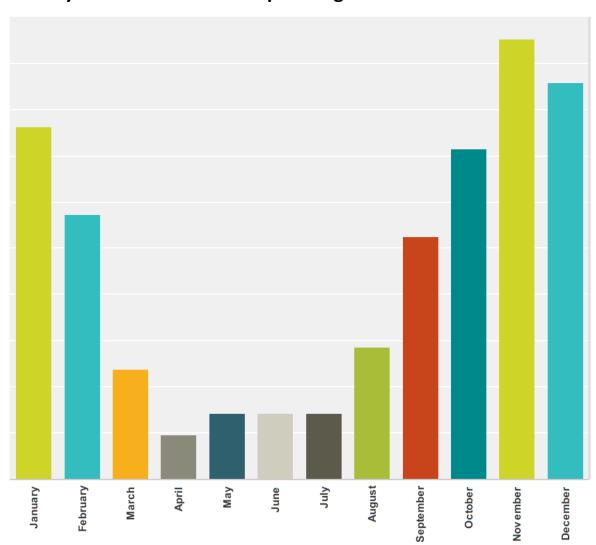
#### Other

- Eliminating colorectal cancer: a group effort
- Don't be left out: get screened.

#### **Roundtable Action Items**

- Develop a clear roadmap around 80% by 2018 with tools needed to be successful
  - Test messages for targeted populations
  - Create easy to use tools and resources
  - Design logo that shows participation in 80% by 2018 but still retain individual organization identity
  - Develop training webinar for partners to introduce materials and kick-off effort
- Promote collaboration between organizations and maximize available resources
  - Provide clear and diverse opportunities for organization to participate
  - Allow groups to contribute and collaborate in campaign, but still retain own brands and identities
  - Use existing networks of partners to activate physicians and other health care providers
  - Continue work to promote existing tools on systems and policy change
  - Be mindful of certain nuances around language (testing method, need to tailor)
- Need to determine metrics and goals, success
- Give thought to developing two to three year strategy

What are your critical months in planning for March?



#### **Questions about 80% by 2018**

- What are the shared goals that each organization is committing to?
- What materials and resources will be provided to the organizations?
- Has any federal support been committed to the campaign yet?
- How will Dr. Koh's departure affect the campaign?
- How do we get more patients and community members involved in the messaging?
- What is the overall awareness/communications budget and are we considering sponsorships?
  - Will there be multiple options for organizations to choose from depending on size and budget?
- What public forums and fan participation organizations (College, NFL, NBA, MLB, etc.) are being used if any?
- How flexible is ACS willing to be?