80% by 2018

Shared Communications Plan
DRAFT

July 17, 2014
The Road to 2018

Roundtable Strategy
• Develop a shared campaign that is targeted, relevant, and impactful, with the ultimate goal of saving lives from colorectal cancer
• Increase the colorectal cancer screening rates to 80% by 2018

Launch
• March 17, 2014 was a seminal moment in the campaign, setting us up for ongoing momentum and media interest

Campaign Attributes
• Ladders up to the 80% by 2018 strategic plan
• Employs micro-targeting to multi-cultural and economically disadvantaged groups who are under-represented in CRC screening
• Mirrors research on psychographic/attitudinal barriers to screening
• Empowers critical partners to help drive toward our call to action
LAUNCH HIGHLIGHTS (March 17, 2014)

COLON CANCER is:
Preventable. Treatable. BEATABLE.
Regular testing can prevent colon cancer or find it early. If you’re 50 and older, go get tested!

7 THINGS to KNOW ABOUT GETTING a COLONOSCOPY
Colorectal cancer screening is important because it can prevent cancer or find it early when it is easier to treat. The American Cancer Society recommends colorectal cancer testing (there are several acceptable methods) for everyone starting at age 50, though some people with certain risk factors may need to start at a younger age. Colonoscopy is one of the most widely used tests because not only can it find
Organizations Embrace 80% by 2018

Goal: 50
Actual: 100+
80% by 2018 Launch

• 80 plus partners and dignitaries attended press conference
• 3000+ views to live stream
• Participation from VIPs:
  • Assistant Secretary of Health and Human Services, Dr. Howard Koh
  • Congressman Donald Payne

• Engagement from the White House through CRC briefing, proclamation and celebratory tour
• Introduced new market research at Roundtable meeting at Dialogue for Action
Traditional & Social Media

Roundtable members were provided shared talking points, graphics and a press release template

- 241 stories discussed the 80% by 2018 initiative
- 236M media impressions across print, digital and broadcast outlets
- Nearly $7.5M earned media value
- Strong presence in national and local news

NCCRT 80% by 2018 Twitter chat

- 20M+ impressions
- 1,000+ tweets
- 200 participants including: Mayo Clinic, ABC Health & Medical Reporter, Fight Colorectal Cancer, CDC & NCI
MAINTAINING MOMENTUM

What is it going to take to screen the unscreened?
## Barriers to Screening of Consumers
### New Marketing Research Cites Factors

| Affordability | • Unscreened have lower income than screened counterparts  
|               | • More likely to be uninsured  
|               | • Newly insured don’t know it’s covered  
| Lack of symptoms | • Symptoms drive doctor visits  
|                | • Misconception about disease  
| No family history | • Perception that heredity is only risk factor  
|                 | • Reduced sense of urgency  
| More pressing health issues | • Focus on acute illnesses and issues of more concern  
|                     | • Not a top priority  
| Negative perceptions about the test | • Connotation of test being unpleasant, invasive, embarrassing  
|                      | • Fear of test-prep compounds negativity  
| No regular primary care to reinforce message | • Utilize medical neighborhood  
|                                | • Avoids doctors/no routine physicals or wellness visits  
|                         | • Think they’re healthy already  
| Doctor does not recommend it | • #1 reason among African Americans  
|                            | • #3 reason among Hispanics  

#9
The Path to Screening

The unscreened are knowledgeable about CRC screening, but have rationalized avoidance

Make the case for early detection
Eliminate real & perceived barriers
Engage family & community networks
Align systems to reinforce messages

Elicit support & testimony from peers, survivors
De-stigmatize the test & offer options
Articulate disease profile & progression
Address financial concerns
Equalize with “competing” health concerns

Refine & test messages
Identify influencers
Dispatch messengers
Deploy campaign assets
Activate communication channels
Measure success
Course-correct

Continue to promote 80% by 2018 to national media
Recruit partners
Lend credibility to partners’ efforts
Micro-targeting Consumers Informs Strategy & Messaging

Newly insured
- Nearly 50% of ACA enrollees are age 45-64

Insured, unworried
- Utilize medical neighborhood (versus medical home)

Low socio-economic populations
- Underserved; manifest health disparities; more likely to be uninsured

Hispanic (53% screening rate)
- Caucasian
- African American
- Asian American/Pacific Islander
- Native American/Alaska Native
Reaching the Unscreened

Shaping Dialogue, Engaging Supporters

- Partner with primary care
- NCCRT member communications
- Outreach to Promotores
- Align with FQHCs
- Expand Flu-FIT program

- Develop cache of survivor stories & spokespeople
- Communications guidelines & toolkit
- Co-promote assets
- Light up social media
- Share ACA materials

- “80% by 2018” and NCCRT member communications
- Tap into benefits exchanges & vendors
- Align with Human Resources depts.
- Disseminate employee-centric collateral
- Work with payers on incentives

- Medical Home or Neighborhood
- Advocacy Groups & State/Federal Agencies & CCC
- Payers & Employers
- Community & Cultural Touch points
- Caregivers, Families & Friends
- Media (paid & earned)

- Reinforce messages about importance of screening, alleviate fear, and make the need real
- Help with appointment scheduling and reminders
- Distribute Q&A’s, brochures, posters

- Promote 80% by 2018
- Lend credibility to local efforts
- Underscore disease burden with data
- Engage spokespersons
- Seek media partnerships
- PSAs
- Editorial calendar
- Complement with digital

- Partner with neighborhood organizations
- In-market activities such as walk/runs, fundraising events
- Leverage local dignitaries/leaders
- Utilize relevant spokespeople
- Churches strategy

- Consumer

- Consumer

- Consumer
Campaign Messaging – Critical Message Recommendations

- **CRC facts & importance of screening**
- **Testing options/alternatives**
- **Cost/insurance Information**
- **Personalize the CRC risk and the screening benefits with survivor stories**
- **Customize with race/ethnicity epidemiology data**

**Low SE Population**

- **Newly Insured**
- **Insured, Unworried**

**Continued efforts**
- **Continue to promote 80% by 2018 to national media**
- **Recruit partners**
- **Lend credibility to partners’ efforts**
Message House Example

Screening Options Information

2-3 Critical Messages
Always Delivered

PROOF
- Statistics
- Data
- Results
- Facts

EMOTION
- Anecdotes
- Relevance

AUDIENCE
- Identify the Details
- Specific information regarding audience

RELEVANCE
- Timely information to make it newsworthy
Communications Timeline

<table>
<thead>
<tr>
<th>Q3 2014</th>
<th>Q4 2014</th>
<th>Q1 2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>July-September</td>
<td>October-December</td>
<td>January-March</td>
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**NCCRT Leadership**
- Promote 80% by 2018 and track 80% by 2018 media outreach
- Continue recruiting partners

**NCCRT Operations**
- Conduct tools audit (survey, research)
- Update NCCRT.org
- Conduct message testing
- Identify multicultural organizations to join NCCRT
- Coordinate Awareness Month (AM) communications planning
- Determine short-term metrics for campaign
- Draft NCCRT annual report
- Develop publication strategy
- Consider SMT/RMT
- Activate AM communications
- Compile analytics & outcomes
- Solicit member feedback and conduct AM post-mortem

**Public Awareness Task Group**
- Convene subgroup for AM planning
- Review message testing outcomes
- Refine vocabulary/terminology
- Identify and disseminate toolkit
- Encourage sharing of best practices
- Review and approve Awareness Month communications planning
- Check-in with task group members
- Help support AM communications
- Evaluate analytics & outcomes
- Celebrate successes

**NCCRT Members**
- Identify opportunities for research or data generation
- Access NCCRT.org for toolkit/templates
- Refine materials for target audiences
- Seek organizational buy-in
- AM communications planning
- Collect success stories along care continuum
- Collaborate on media strategy and share media plan
- Keep organization informed
- Prepare/execute for March
- Report activities and results
- Conduct own media sweep
- Provide media pitching updates
- Communicate & celebrate successes

**80% by 2018 Partners**
- Set goals
- Access NCCRT.org as needed
- Use toolkits/templates
- Incorporate blue star and messages into materials
- Measure activities and outcomes
- Collect success stories

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FOR DISCUSSION
Are We Aligned?

• How do your constituents map against the three target audiences?
• What lessons do you have to share?
• Referring to the stakeholder pie chart, are these the right communications activities?
• Are there opportunities in your organization for additional programming?
• Would your organization be willing to fold these approaches into your on-going work? What do you need to make that happen?
• Are you able to employ metrics and how they will be captured?
• Where do you need help?
What Assets Do We Still Need?

Consider...

**Target audiences**
- Messaging
  - Test for call-to-action
  - Cultural receptivity
  - Lexicon, vocabulary
- Communications guide and toolkit
- Identify spokespersons from each audience segment

**80% by 2018 Campaign generally**
- Satellite Media Tour
- Press release
- Matte releases
- Fact sheets
- Videos
- Public Service Announcements
Do We Need an Umbrella Message for the Campaign?

ASPIRATIONAL THEMATIC:
• TOGETHER WE CAN PREVENT COLON CANCER
• PREVENTING COLON CANCER IS POSSIBLE WITH FAMILY.
• PREVENT COLON CANCER FOR YOURSELF AND YOUR FAMILY.
• BE SURE. BE TESTED FOR COLON CANCER.
• DETECTION IS PREVENTION.
• COLON CANCER STOPS TODAY.
• THE ONLY GOOD THING ABOUT COLON CANCER IS THAT IT’S PREVENTABLE.

CALL TO ACTION
• SCHEDULE YOUR TEST FOR COLON CANCER TODAY.
• CALL TODAY.
• CALL TODAY TO BE TESTED FOR COLON CANCER.
• SCHEDULE AN APPOINTMENT TODAY.
• SCHEDULE THE TEST THAT CAN SAVE YOU AND YOUR FAMILY.
• ONLY YOU CAN PREVENT COLON CANCER.
• SCHEDULE YOUR APPOINTMENT TODAY.
• BE SMART. BE TESTED FOR COLON CANCER.
• COLON CANCER IS PREVENTABLE, BUT ONLY IF YOU ARE TESTED.
Which Metrics Do We Use to Monitor Progress?

- BRFSS
- Campaign Partners
- NCCRT
- ACS
Breakout Sessions

Process:

1\textsuperscript{st} step: Breakout sessions to complete message house
   – Develop message house
   – Include messages for micro-targeting Hispanic and African American audiences
   – Discuss lessons learned/advice
   – Discuss ways to reach target audiences and possible channels

2\textsuperscript{nd} step: Teams to present messages developed

3\textsuperscript{rd} step: Determine overlapping themes/key messages that are consistent throughout

4\textsuperscript{th} step: Group to determine finalized messages

5\textsuperscript{th} step: Message testing to be conducted

6\textsuperscript{th} step: Develop final message house