

The Canadian Council for Donation and Transplantation

GUIDE FOR PLANNING PUBLIC AWARENESS
AND EDUCATION INITIATIVES TO PROMOTE
ORGAN AND TISSUE DONATION



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Acknowledgments

The idea for this guide emerged from the Public Awareness Working Group formed in 2003-04 to develop a social marketing framework to promote organ and tissue donation in Canada. One of the working group's recommendations was to establish a model that Canadian donation stakeholders could follow for developing and estimating the resources required, as well as possible outcomes for their respective public awareness and education initiatives.

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Introduction

The need to engage individual Canadians, through public awareness and education initiatives, is one of the keys to improving consent levels and donation rates in Canada. However, public opinion polls have consistently demonstrated that high support for organ and tissue donation does not translate to an increase in donors.

Canadians can adopt the following actions to improve the “supply” side of the donation equation:

- As a potential donor, confirm the individual’s decision to donate (intent) by adopting one or both of the following behaviours:
 - Signing or registering.
 - Letting family members know of the decision to donate.
- As a family member, be prepared to receive a request and respect the decision of the deceased person when the request is made (consent).
- Living donation.

The Guide for Planning Public Awareness and Education Initiatives to Promote Organ and Tissue Donation is a practical resource for donation stakeholders working at all levels. The guide was developed with the knowledge that most Canadian donation stakeholders have limited financial resources dedicated to public awareness.

Each step contains the following sections:

- KEY QUESTIONS to be addressed.
- RECOMMENDATIONS based on best practices and experiences.
- EXAMPLES from donation and other fields.
- RECOMMENDED READINGS for individuals who want additional information.

Outline of Planning Steps

1. Form a planning team and set budgeting rules.
2. Select a priority audience and the behaviour that you want to promote.
3. Analyze the priority audience and set objectives.
4. Identify opportunities and challenges.
5. Select channels and partners.
6. Develop and pre-test messages.
7. Plan for monitoring and evaluation.
8. Establish a timetable.
9. Establish a budget.

FORM A PLANNING TEAM AND SET BUDGETING RULES

In short,

- Form a knowledgeable and influential planning team.
- Have a sense of what the budget could be to remain realistic.
- Establish an efficient schedule for the planning process.

■ KEY QUESTIONS

- Who will be involved in the planning and budgeting process of the public awareness and education activities to optimize the organization's knowledge, resources, partners and decision-making process?
- How will you ensure that your planning process will include the input of representatives of the intended audience and key partners?
- Are you working with a predetermined budget or will you establish the budget after you have identified what is needed to achieve specific objectives?
- If public awareness and education activities are likely to involve promoting products and/or services, will your or other organizations be able to respond to the increased demand? This is an operational and ethical question.

■ RECOMMENDATIONS

- Your planning team should be composed of six to eight individuals - staff and volunteers.
- Team members should jointly bring a solid understanding of:
 - » Where public awareness and education activities fit into the organization's mission, vision and plans, and the ability of the organization to respond to increased demand for services, if applicable.
 - » Organizational policies and practices.
 - » Previous public awareness initiatives of all stakeholders.
 - » Financial commitments and ability of the organization to access funding sources, if necessary.
 - » Key audiences that you are targeting, including various linguistic and ethno-cultural segments, as well as market research your organization or others have conducted.
 - » Partners to give credibility to messages and provide access to audiences.
 - » Basic marketing and communications principles and best practices.

- If you are not assured of the involvement of key decision-makers on your team, brief them throughout the process to:
 - 1) confirm the overall objectives and process;
 - 2) share what you know about the audience and confirm priorities; and
 - 3) present and adopt the plan, then confirm or seek funds.
- In an ideal budget-setting scenario, the budget would be established only after all steps are completed. However, it is useful to know:
 - 1) whether senior officials have a predetermined idea of financial/human resources and in-kind services to be allocated to public awareness;
 - 2) what similar organizations are doing in this area;¹ and
 - 3) your organization's track record in securing funding and/or services from other sources. This will keep you realistic.
- Establish a schedule for the planning team, at least two to three meetings over a two-to-four month period. This will be needed to gather information, test messages and seek approvals.

■ EXAMPLE

- The following is a fictitious example of a planning team for a medium-sized organization working at the provincial level:
 - » Chief operating officer, assuming the individual is responsible also for strategic planning.
 - » Communications director.
 - » Chair of the board or a board member responsible for handling communications.
 - » Volunteer or staff member with marketing, communications and/or media experience.
 - » Volunteer or existing partner with extensive knowledge and contacts with the intended audience and an ability to organize focus groups.
 - » Professional from the health, education, or social services field, who works with key audiences.
 - » Volunteer or staff member who delivers communications activities and forms partnerships at the local level.
 - » Volunteer or staff member able to access funding sources for public awareness initiatives.

¹ Recent Canadian surveys in the organ and tissue donation field would suggest that few human and financial resources are currently allocated to public awareness and education initiatives. A budget comparison at this point would probably not prove very useful. However, it may be appropriate to compare budgets allocated to public awareness and education initiatives in the organ and tissue donation field with those in other public health areas seeking similar outcomes in terms of reach and knowledge, attitudes and behavioural changes.

■ RECOMMENDED READINGS

- Andreasen, A.R. & Kotler, P. (2003). Strategic marketing for nonprofit organizations (6th Ed.). Upper Saddle River, NJ: Prentice Hall. (See Chapter 3 - Strategic marketing planning, pp. 63-89).
- Bryson, J.M. (1988). Strategic planning for public and nonprofit organizations. San Francisco, CA: Jossey Bass. (See Chapter 4 - Initiating a strategic planning process, pp. 73-92).
- Lagarde, F. (2004). The challenge of bilingualism - ParticipACTION campaigns succeeded in two languages. *Canadian Journal of Public Health*, 95(Suppl. 2), S30-S32.
- The Health Communication Unit (1999). Overview of health communication campaigns (See pp. 11-14). http://www.thcu.ca/infoandresources/publications/OHC_Master_Workbook_v3.1.format.July.30.03_content.apr30.99.pdf.

SELECT A PRIORITY AUDIENCE AND THE BEHAVIOUR THAT YOU WANT TO PROMOTE

In short,

- If you are aiming your initiative at the “general public,” focus on segments who are most receptive and the easiest to reach.
- You may want to reach specific ethno-cultural communities who are less receptive, but are important for your donation goals.
- Specify the desired behaviour you want them to adopt, rather than aiming for general awareness.

■ KEY QUESTIONS

- Who do you want to reach?
- What do you want them to do?

■ RECOMMENDATIONS

- Identify the key audience(s) and segment(s) you want to reach.
 - » Avoid aiming for the “general” public. Focus instead on individuals who are ready for action and easiest to reach.
 - » Given medical needs, geographic realities and varying degrees of receptiveness, you also may consider specific ethno-cultural communities and First Nations.
- To achieve the greatest and fastest gains, given the limited human and financial resources dedicated to public awareness in most Canadian donation organizations, the working group recommended that the priority audience for public awareness and education activities over the next few years be women in the 25-59 age group. They are the most receptive segment of the population. Many of them have decided to donate, but may not have told their family members. They also can be key influencers for groups who are undecided about donating, signing the donor card, or registering.
- Most donation stakeholders will aim for one of the many following behaviours:
 - » Signing or registering to signify intent.
 - » Letting family members know of the decision to donate thus signifying intent.
 - » As a family member, be prepared to receive a request to donate and respect the decision of the deceased person when the request is made in order to increase consent.
 - » Living donation.
 - » Access to specific products or services. Ensure that the organization, whether yours or another, has plans to respond to the increased demand and that you will act to make products and services attractive and accessible.

■ EXAMPLES

- One of the British Columbia Transplant Society's priority audiences for increasing registration is "women aged 25 to 54 years."
 - < For one of its recent awareness campaigns, "Candle," The Kidney Foundation of Canada's priority audience consisted of individuals who were positively inclined to be donors, but had not yet made their wishes known to family members. It was important that the message be national in scope and that it work within the various provincial contexts. By promoting the "talk to your family" message, the Kidney Foundation was:
 - 1) telling people that informing family members of their decision to be a donor is as important as signing a card or registering, something which many are unaware of; and
 - 2) facilitating the request phase for the health professional at the time of a potential donor's death.

The behaviour change the Kidney Foundation was seeking was to move people from "good intention" to "positive action."

■ RECOMMENDED READING

- Lagarde, F. (2004). Worksheets to introduce some basic concepts of social marketing practices. *Social marketing quarterly*, 10(1), 36-41.

In short,

- Knowing the profile and true number of people in the priority audience will be helpful in selecting channels and budgeting.
- Identify benefits and barriers to the behaviour in order to make it fun and easy (Smith, 1999).
- Identify individuals and groups who are most influential and supportive of the behaviour. This will help you develop testimonials, select messengers and partnerships.
- Identify your best channels and settings to reach your audience.
- Optimize what you know and consider low-cost research to establish baseline data and gather insight on the audience.
- Set realistic objectives based on your audience analysis. A five per cent behavioural adoption increase within a year would be quite an accomplishment.

■ KEY QUESTIONS

- What is the priority audience's demographic profile?
- Why would members of the priority audience adopt the behaviour (benefits)?
- Why not (barriers)?
- Who has an influence on them (influencers)?
- How and where can you reach them (channels, events, settings)?
- How can you find out about these characteristics with your limited research budget?
- What are your objectives?

■ RECOMMENDATIONS

- Gather the following basic demographic data on your audience - if not completed in the previous step:
 - » Number - how many individuals you are trying to reach?
 - » Age.
 - » Sex.
 - » Level of education.
 - » Family status - this is key demographic data if you are trying to promote "letting family members know."
 - » Income.
 - » Occupation.

- » Urban or rural population.
- » Languages.
- » Other cultural characteristics related to organ and tissue donation.
- Benefits:
 - » A review of the literature by Morgan and Miller (2002) identified the following variables associated with organ donor willingness: altruism, empathy, acceptance of mortality, humanitarian impulses (such as the desire to help others), low death and/or body anxiety, and rationality. They found that “organ donors have little, if anything, to gain by donating their organs after death; it is a purely altruistic act, based on empathy with those who are sick and in need of a transplant.”
 - » The working group has identified two major benefits in “letting family members know”: 1) have the individual’s decision to donate respected by family members; 2) make it easy and provide solace for family members when the request to donate is made (e.g., support groups).
 - » Most living donations, such as kidneys, are from relatives. In this case, the benefit for the donor is to help a loved one. However, a growing number of “living-unrelated donors” have started considering living kidney, partial lung, partial liver or partial pancreas donation. These pose significant ethical dilemmas (Gohh et al., 2001); however, the altruistic motivation is still central.
- Barriers:
 - » Myths and fears are the main barriers for end-of-life donation. Individuals undecided about donation may fear not being dead when the donation takes place or feeling pain after death. They also want to avoid body mutilation, may distrust the medical system, do not want to upset family members who disagree with organ donation, or have a desire to respect the limit set by God or nature (see Morgan and Miller, 2002).
 - » Potential donors may think they are too old and/or may be concerned about costs.
 - » Barriers for “letting family members know” are related to the uncomfortable nature of a discussion about death and fear of upsetting family members who disagree.
 - » In 1991, Dr. Clive O. Callender, founder of the National Minority Organ and Tissue Transplant Education Program (MOTTEP) in the U.S. conducted interviews to identify reasons African-Americans were not donating organs. Although the following reasons cannot necessarily be applied to Canada and all ethno-cultural communities, they illustrate the nature of possible barriers in these communities. Some reasons are similar to those expressed by members of the mainstream population:

- Lack of community awareness about renal disease and transplantation.
 - Religious beliefs and superstitions
 - Distrust of the medical community
 - A fear that by signing an organ donor card, medical personnel would not work as hard to save them
 - Racism. They felt that their organs would go only to whites (See National MOTTEP).
- » If you are promoting a specific product or service, barriers most often are due to lack of time, financial and physical access, real or perceived lack of skills, etc. Remember that barriers rarely be eliminated through communication alone. You may have to introduce changes to your product or service "offer."
- Key influencers:
 - » Positive interpersonal influence and social norms are very important in convincing people to adopt a given behaviour. Finding specific individuals, such as opinion leaders, formal and informal, is useful. Whether or not your budgets allow you to consider advertising, these networks of influential people will be your most important channels. Consider asking your key influencers to help communicate testimonials, select messengers and establish partnerships.
 - Channels and settings:
 - » Find out about your audience's media habits and events' participation, as well as their membership in groups and places where they can be reached.
 - » Identifying cyclical family gatherings or other opportunities for family discussions is important if you focus on the "letting family members know" behaviour.
 - Research:
 - » When organizations have small budgets for public awareness and education, one can assume the research budget is close to nothing. So, it is a good idea to determine what your team members know and obtain data from free sources of information: web search, publicly available surveys, talking with experts and leaders in a given community and/or media habits information available in magazines and other publications.
 - » If you need answers to questions of "how many?" and "how much?", consider quantitative surveys. They often require research professionals to ensure the validity and reliability of the results. Such a survey has the added value of providing you with baseline data to better evaluate your program.
 - » If you need answers to "why?" questions, consider qualitative methods such as focus groups and interviews. Asking an outside moderator to conduct focus groups and interviews ensures that the process is more objective.

- » The following questions can prove useful when conducting research to analyze your priority audience (McKenzie-Mohr & Smith, 1999):
 - What positives are associated with doing X?
 - What negatives are associated with doing X?
 - What makes it difficult to do X?
 - What makes it easy to do X?
 - Who wants you to do X, and how much do you care about their opinion?
 - Who does not want, or care if you do X, and how much do you care about their opinion?
- » To save time and money, determine the precise information you need and the type of decision you will make once the results are available. This will keep your research agenda focused.
- Use the following table to summarize the audience profile. If you can, distinguish between those who have adopted the behaviour and those who have not. It will help go beyond the “already converted” individuals.

	Those who have adopted the behaviour	Those who have not
Demographic data		
Benefits		
Barriers		
Key influencers		
Media habits		
Participation in (family) events and other family discussion		
Membership in groups		
Places where they can be reached		

- Objectives: Based on affordable resources, determine what you consider a satisfactory achievement. This involves setting objectives in terms of the number of audience members who will recall messages, gain knowledge, change attitudes and intentions, and ultimately adopt the behaviour. Remember to be realistic.
- A review of U.S. health campaign effects on behaviour showed that the mean change in per cent of population performing target behaviour was five per cent for non-enforcement adoption campaigns of one year or less (Snyder et al., 2004; Snyder & Hamilton, 2002). This percentage may vary according to the baseline behaviour rate. Although five per cent may appear to be a modest amount, small percentage changes may affect very large numbers of people in a community, provincial/territorial, or national campaign.

■ EXAMPLES

- The Saskatchewan Transplant Program set an objective to increase by five per cent the number of women aged 25-59 who will let their family members know of their decision to donate.
- Based on current data and recent increase in registration among women aged 25-54, the British Columbia Transplant Society identified the baseline of registrants, approximately 250,000, and set a target for the campaign to increase overall registration by 30,000 with 60 per cent or 18,000 of the total coming from women aged 25-54. The BCTS also evaluated the increase in the number of families where all family members registered.

■ RECOMMENDED READINGS

- Andreasen, A.R. (2002). *Marketing research that won't break the bank*. San Francisco, CA: Jossey Bass.
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- McKenzie-Mohr, D. & Smith, W. (1999). *Fostering sustainable behavior*. Gabriola Island, BC: New Society Publishers.
- Morgan, S.E. & Miller, J.K. (2002). Communicating about gifts of life: The effect of knowledge, attitudes, and altruism on behaviour and behavioural intentions regarding organ donation. *Journal of Applied Communication Research*, 30(2), 163-178.
- Siegel, M. & Doner, L. (1998). *Marketing public health: Strategies to promote social change*. Gaithersburg, MD: Aspen Publishers. (See Chapter 11 - Formative research, pp. 261-295).

- Smith, W.A. (1999). Marketing with no budget. *Social Marketing Quarterly*, 5(2), 6-11.
- Snyder, L.B., Hamilton, M.A., Mitchell, E.W., Kiwanuka-Tondo, J., Fleming-Milici, F. & Proctor, D. (2004). A meta-analysis of the effect of mediated health communication campaigns on behavior change in the United States. *Journal of Health Communication*, 9, 71-96.
- Snyder, L.B. & Hamilton, M.A. (2002). A meta-analysis of U.S. health campaign effects on behavior: Emphasize enforcement, exposure and new information, and beware the secular trend. In R. Hornik (Ed.), *Public health communication - Evidence for behavior change* (pp. 357-383). Mahwah, NJ: Lawrence Erlbaum Associates.

IDENTIFY OPPORTUNITIES AND CHALLENGES

In short,

- Identify promotional and partnership opportunities that you should use.
- Identify your competition and other challenges to be considered in developing your strategy.

■ KEY QUESTIONS

- What promotional and partnership opportunities could you use?
- With what and/or whom are you competing for your audience's attention - within your field or with those opposed to your organization or initiative?
- Are there legal, political, social, economic, technological, ethical or any other considerations and events that represent an opportunity or challenge for your public awareness and education activities?
- Is the public environment or receptiveness in specific communities supportive or not of what you are about to promote?

■ RECOMMENDATIONS

- Raise these questions with members of your planning team and key partners.
- Discuss how the answers can be applied when you begin developing messages, selecting messengers, channels and partners, as well as timing implications.

■ EXAMPLES

- Opportunities:
 - » The British Columbia Transplant Society saw its key audience as parallel to that of the Canadian Blood Services and recognized that by partnering to cross-promote their needs they would be helping each other. The British Columbia Transplant Society now has volunteers and displays at most blood donor clinics. Blood donors are the people who clearly exhibit a selfless desire to help others. The partnership between the two organizations was a logical one.
 - » The Saskatchewan Transplant Program used the National Organ and Tissue Donor Awareness Week to launch its donor recognition activity.
- Challenges:
 - » One of the Kidney Foundation of Canada's challenges is how to develop a national campaign within the context of a provincially administered organ donation system. The solution was to focus on a universal message that transcends provincial jurisdictions: "Tell your family that you want to be an organ donor."

- » 40 per cent of the Greater Vancouver Area is comprised of ethno-cultural populations, primarily Chinese and Indo-Canadian. This presents language, cultural and religious barriers. The solution was to invest time and energy to research these communities to fully appreciate how the British Columbia Transplant Society can assist them in understanding the issues related to organ donation and transplantation. Focus-tested materials were developed for these communities and a community relations staff position is being planned.

■ RECOMMENDED READINGS

- Andreasen, A.R. & Kotler, P. (2003). Strategic marketing for nonprofit organizations (6th ed.). Upper Saddle River, NJ: Prentice Hall. (See Chapter 3 - Strategic marketing planning, pp. 63-89).
- Kotler, P., Roberto, N. & Lee, N. (2002). Social marketing: Improving the quality of life (2nd ed.). Thousand Oaks, CA: Sage Publications. (See Chapter 5 - Mapping the internal and external environments, pp. 91-108).

SELECT CHANNELS AND PARTNERS

In short,

- Select various media and interpersonal channels, as well as appropriate events based on your audience analysis and budgets.
- Ensure that you have sufficient and timely exposure in each channel.
- Establish partnerships with key influencers who will give credibility to your messages and access to the audience.

■ KEY QUESTIONS

- Based on your audience analysis (Step 3), which media, networks of key influencers, events and settings will enable you to reach your audience?
- Is your audience large enough to justify the use of mass media?
- Do you have contacts and access to some of these channels, groups and events to make them more realistic options given your budget?
- How can you enhance current partnerships? Which new partners should you consider to utilize their influence and credibility, while gaining access to the audience?

■ RECOMMENDATIONS

- Select channels which are easy for you to access and choose the most efficient and best ones to reach the majority of your priority audience.
- Consider the mass media if you are trying to reach a large number of people and if it is more cost-effective than reaching them one by one.
- Based on your answers to the key questions above, select a combination of channels listed below (adapted from The Health Communication Unit - University of Toronto). Also specify when and how often you will use them:
 - » Mass Media
 - Direct Mail: Brochures, generic letters, tailored letters, trial offers, kits, etc.
 - Displays
 - Magazines: Articles, ads
 - Newspaper: Commentaries, letters to editors, news coverage, supplement, paid ad, public service announcements, etc.
 - Online world: Bulletin boards, e-mail (tailored or generic), websites, electronic mailing lists, advertisements, CD-ROMs, etc.
 - Other print media: Brochures, booklets, flyers, pay cheque stuffers, newsletters, comics/stories, newsletter articles, newsletter ads, other print ads, etc.

- Outdoor: Billboards, signage, transit shelter ads, bus ads, streetcar ads, etc.
 - Phone: Direct calling with message, hotline (live), info-line (taped message), etc.
 - Point of Purchase: Brochures/other print materials, demonstrations, displays, posters, videos, audio recordings, health information kiosks, etc.
 - Promotional items: Fridge magnets, hats, matches, buttons, bags, pens, pencils, stress balls, bracelets, etc.
 - Radio: Community announcements, paid ads, public service announcements, phone-in show, news coverage, guest speakers, editorials/commentaries, etc.
 - Television: Community channel text ad/message, documentary/extended educational piece, edutainment, news coverage, paid ad, public service announcements, etc.
- » Interpersonal communication
- Training
 - Speeches and presentations, but sure they are presented in settings identified in your audience analysis
 - Courses
 - School lessons/curriculum
 - Peer interaction/discussion
 - Family interaction/discussion
 - Interaction/discussion with opinion leaders
 - Coaching/interaction with health care providers
 - Coaching/interaction with teachers.
- » Events
- Family events/gatherings
 - Conferences
 - Contests
 - Fairs
 - Fund-raisers
 - Rallies
 - Awards ceremonies.
- If you consider using the media to communicate your message, determine the approach to take:
- » Generating publicity is the most realistic approach to gaining visibility in the media. The organ and tissue donation field relies heavily on this form of media exposure with success due to the newsworthiness of stories about medical breakthroughs, personal stories of people whose lives were saved

or about donor family members. Getting coverage comes from personal media contacts, pitching stories to the right people in the media, preparing for interviews and selecting spokespeople including celebrities. This may require training the spokespeople, organizing news conferences and briefings (Bonk, Griggs and Tynes, 1999).

- » Paid advertising or unpaid public service announcements can be a powerful means of communication, but also expensive and difficult to ensure ongoing exposure. If you rely on the goodwill of the media, confirm placement before spending a lot of money on production. You may want to hire a media placement consultant or agency (perhaps the same one which is developing your messages) to maximize your resources by selecting the right media with the optimal frequency and duration to reach your audience and achieve your objectives.
- Websites increasingly are becoming an important component of health communications campaigns. The site should be promoted well and clearly in all materials and activities with a name that is easy to remember. Be sure the site is attractive, easy to navigate and fast to download, interactive, provides reasons for future visits and is consistent with all other campaign materials.
- In developing your communication strategy, plan for frequent exposure in whatever channels you use. Exposure gained through frequency and multiple channels is a success factor in most health communications campaigns. This is due primarily because people vary in their timing and willingness to respond to a message. “The more times the message is made available, the more likely the audiences are to hear/see it when they are ready to attend to it” (Hornik, 2002). Successful campaigns are not just a matter of the right messages delivered to the right audiences, but also a result of the right levels of frequency over time.
- For events, be sure they will effectively reach the intended audience. It may be more cost-effective to work within an existing and successful event in attracting your audience, rather than organizing your own.
- Select partners based on their credibility and access to the audience. Before asking them to become involved in your activities, analyze them as you would analyze any audience. They will expect benefits, may see barriers and are likely to consult other people before agreeing to your proposal. Build your case accordingly and use personal contacts.
- Check if your organization has a partnership or sponsorship policy, or if it should be developed before approaching partners, especially in the private sector.
- Put partnership agreements in writing.

■ EXAMPLES

- The Kidney Foundation of Canada used a mix of traditional mass media vehicles for its national media campaign: TV, radio and newspaper public service announcements were distributed to all media outlets across the country. Foundation branch offices across the country sought media support and undertook local initiatives, especially during the national awareness week in April to support the campaign.
- To reach college and university students, the British Columbia Transplant Society promoted its message at student orientation activities at all college and universities throughout September and October. In addition to displays and continuous stream videos, volunteers were present to answer questions. Editorials and inserts were placed in student newspapers, magazines, and handbooks. University radio stations also provided coverage. Newsworthy approaches were used to create interest, generating much more coverage than a limited advertising budget could provide.
- For partnerships, see examples in Step 4.

■ RECOMMENDED READINGS

- Bonk, K., Griggs, H. & Tynes, E. (1999). Strategic communications for nonprofits. San Francisco, CA: Jossey Bass. (See Chapters 8 - Earning good media coverage - and 9 - Selecting and training spokespeople, pp.78-121).
- Hornik, R.C. (2002). Exposure: Theory and evidence for behavior change. *Social Marketing Quarterly*, 8(3), 30-37.
- The Health Communication Unit. Select communication channels and vehicles. Retrieved January 4, 2005 from <http://www.thcu.ca/infoandresources/publications/StepSixSelectChannelsVehiclesForWebOct9-03.pdf>.
- National Cancer Institute. Making health communication programs work. Retrieved January 6, 2005 from <http://cancer.gov/pinkbook/page5>. (See table on Communication channels and activities: Pros and cons).

DEVELOP AND PRE-TEST MESSAGES

In short,

- Use humanitarian appeals and testimonials to promote donation.
- Offer factual information from credible sources to address fears.
- Use prompts and make donor cards available for informing family members to encourage people to take action.
- Provide focused briefs to those who will develop messages and materials.
- Pre-test messages and materials.

■ KEY QUESTIONS

- What is the main appeal - rational or emotional, positive versus negative, tone - light or heavy, and call to action in your message and materials?
- To which organization will the message be credited?
- What type of graphics will be used?
- How will you know if the messages are effective?

■ RECOMMENDATIONS

- Most organ and tissue donation messages use emotional appeals focused on the humanitarian approach.
- Conveying the fact that there is a population-wide shortage of organs and tissue may draw people's attention, but it is not enough to get them to take action.
- Testimonials from donors, donor families and recipients, as well as endorsement by a credible source are effective.
- Organ and tissue donation messages addressing barriers tend to be more factual and use credible medical and health professionals as the source.
- Organ and tissue donation communicators have used commitment as a call to action. Donor cards to inform family members are often used.
- Prompts around common family events and gatherings have been used effectively in the field.
- Remind people that the majority of individuals and opinion leaders support organ and tissue donation.
- Use key words your target audience would use to express benefits and barriers.
- Provide a focused brief, one to two pages, to writers and graphic design suppliers to include: the main message and angle; a brief description of the audience, key factors and insights from the audience analysis; what you want the

audience to know, think and do after they receive the message; benefits and other content elements to support your message; channels to be used and specifications; deadlines.

- Conduct focus groups or individual interviews to pre-test messages among individuals from the audience. “A properly designed pre-test can assess whether materials are understandable, attention getting, memorable, and relevant to target audience members. It can also identify any source of confusion or offence.” (Siegel and Doner, 1998).
 - » The following items should be included when pre-testing messages and materials (adapted from Siegel and Doner, 1998):
 - What is the main idea of the (ad, booklet, etc.)?
 - What, if anything, did you particularly like?
 - What, if anything, did you particularly dislike?
 - Was anything offensive? What? Who would it offend?
 - Was anything hard to understand? What?
 - Was anything hard to believe? What? Why?
 - Who is this (ad, booklet, publication, etc.) intended for? Who would get most out of it?
 - » Do not overreact to pre-test results - use your judgment. Sound planning in previous steps should not create too many surprises.

■ EXAMPLES

- Recommended Web sites:
 - » British Columbia Transplant Society: www.transplant.bc.ca.
 - » Donate Life: www.donatelife.net.
 - » Kidney Foundation of Canada: www.kidney.ca.
 - » Give Life: The Transplant Journey (The Regents of the University of Michigan): www.journey.transweb.org.
 - » Health Canada: http://www.hc-sc.gc.ca/dhp-mps/pubs/biolog/transplantation_e.html.
 - » Trillium Gift of Life Network (Ontario): www.giftoflife.on.ca.
 - » United Network for Organ Sharing (UNOS): <http://www.transplantliving.org>.

■ RECOMMENDED READINGS

- National Cancer Institute. Making health communication programs work. Retrieved January 6, 2005 from <http://www.cancer.gov/pinkbook/page6>. (See Stage 2: Developing and Pre-testing Concepts, Messages, and Materials).
- Siegel, M. & Doner, L. (1998). Marketing public health: Strategies to promote social change. Gaithersburg, MD: Aspen Publishers. (See p. 333 for an example of a creative brief and Chapter 16 - Pre-testing messages and materials, pp. 415-445).

PLAN FOR MONITORING AND EVALUATION

In short,

- Establish a systematic monthly review of the implemented activities.
- Ensure that activities are reaching the intended audience.
- Evaluate progress toward the objectives, using baseline data and a methodology.

■ KEY QUESTIONS

- How will you monitor implemented activities?
- How will you know if the activities are reaching the intended audience?
- How will you know if you are successful?

■ RECOMMENDATIONS

- The reason monitoring and evaluation are discussed before any activities are implemented is to ensure they are included in your timetable and budget.
- For each channel and partnership (Step 4) and for each task (Step 8), report:
 - » If and when the action/activity was completed.
 - » If it was on time and why or why not.
 - » If it required/used all the allocated human, material and financial resources.
 - » For each channel:
 - The number of individuals reached
 - Their profile versus the intended audience's profile.
 - » What was done well and less well.
 - » What you have learned.
 - » Recommended adjustments to the activity and/or plan.
- Monitor activities with brief monthly progress reports.
- Track campaign outputs - PSA time and space, press clippings, materials distributed, in-kind donated services, attendance at events, etc.
- To evaluate your campaign against objectives, survey your audience at the end of your activities or annually, using the same methodology used for the audience analysis (Step 3).

■ EXAMPLES

- The British Columbia Transplant Society measures all campaigns according to the number of new registrations. Campaigns are systematically coded for better tracking and evaluation.
- The Kidney Foundation of Canada uses a media monitoring service for press clippings on organ donation stories, features and ads, as well as general kidney-themed articles. The media monitoring service costs approximately \$15,000 per year.

■ RECOMMENDED READINGS

- Burroughs, C.M. & Wood, F.B. (2000). *Measuring the difference: Guide to planning and evaluating health information outreach*. Bethesda, MD: National Library of Medicine. Available at <http://nmlm.gov/evaluation/guide/frontmatter.pdf>.
- Doner, L. (2003). Approaches to evaluating social marketing programs. *Social Marketing Quarterly*, 9(3), 18-26.

ESTABLISH A TIMETABLE

In short,

- Specify the tasks, people involved and deadlines to ensure effective and efficient implementation of your activities.
- Assign a competent and dedicated person to oversee the initiative/activities.

■ KEY QUESTIONS

- Who will do what and when to implement the activities?
- How will you ensure that public awareness and education activities do not end up being postponed indefinitely?

■ RECOMMENDATIONS

- Develop a schedule with dates/deadlines, tasks to be accomplished and the people in charge of each task.
- Assign someone to oversee the project. Ensure that the individual is given an official mandate as co-ordinator or leader, has sufficient time to carry out the initiative, and the appropriate credentials to ensure a successful implementation of the initiative.
- Make public awareness and education activities a regular part of senior management meetings, procedures and follow-ups.

■ EXAMPLE

- The table below lists some typical items in an activities schedule. Each item is likely to require more detail.

Tasks	Dates	Person-in-charge
Analyze priority audience		
Establish partnerships		
Develop messages		
Pre-test		
Produce/distribute materials		
Implement initiative (carry out planned activities)		
Monitor		
Evaluate results		

■ RECOMMENDED READING

- Kotler, P., Roberto, N. & Lee, N. (2002). Social marketing: Improving the quality of life (2nd Ed.). Thousand Oaks, CA: Sage Publications. (See Chapter 16 - Completing an implementation plan and sustaining behaviour, pp. 371-389).

In short,

- Establish a realistic budget outlining expenses, sources of revenue and in-kind contributions.
- Revise your objectives and strategy based on confirmed revenues.
- Look for opportunities, use your personal contacts and develop strong cases when seeking additional funding.

■ KEY QUESTIONS

- What financial resources do you need to achieve your objectives?
- Are revenue resources confirmed?
- Do you need to raise funds and/or should you revise your objectives and approach?

■ RECOMMENDATIONS

- Your budget should include both expenses and revenues.
- Do not mistake your dreams for reality. Confirm revenues or in-kind services from your partners before engaging in activities and reconfirm objectives to manage expectations.
- Revise your objectives to reflect your confirmed budgets or seek additional funds.
- Seek information on funding, philanthropic and sponsorships trends on an ongoing basis.
- When approaching potential funding organizations, use personal contacts and develop a strong case that is linked to their funding priorities.

■ EXAMPLES

- The following expense items are typically part of a public awareness and education initiative:
 - » Management and staff - coordination, media and partner relations, selecting and working with suppliers and volunteers, website maintenance, etc.
 - » Expertise and committees.
 - » Research, pre-testing and evaluation.
 - » Development and production of materials.
 - » Media activities.
 - » Events.

- » Training.
 - » Mailing and other distribution.
 - » Contingencies.
 - » Applicable taxes.
 - » Other.
- The following revenue items are typically part of a public awareness and education initiative:
- » Your organization.
 - » Government agencies.
 - » Non-profit organizations.
 - » Individual donations - employees, members, others.
 - » Foundations/service clubs.
 - » Private sector.
 - » Other.

■ RECOMMENDED READING

- Kotler, P., Roberto, N. & Lee, N. (2002). *Social marketing: Improving the quality of life* (2nd Ed.). Thousand Oaks, CA: Sage Publications. (See Chapter 15 - Establishing budgets and finding funding sources, pp. 345-369).

PIECING IT ALL TOGETHER

This template is designed to help you assemble and summarize your initiative after you have completed the nine steps. If you run short of space, use additional pages as required.

Organization: _____

Your name: _____ Title: _____

Public Awareness & Education Initiative: _____

Implementation Period: _____

Step 1. Form a planning team and set budgeting rules.

- Planning team members: _____

- Pre-determined or possible budget: _____

- Schedule for the first 2 to 3 planning team meetings: _____

Step 2. Select a priority audience and the behaviour that you want to promote.

- Who do you want to reach? _ _____

- What do you want them to do? _____

Step 3. Analyze the priority audience and set objectives.

- Audience profile (Use table on page 13).
- Research agenda (information required, including baseline, methodology, supplier): _____

- Objectives (date, audience, changes sought in terms of knowledge, attitudes, behaviours): _____

Step 4. Identify opportunities and challenges.

- Opportunities: _____

- Challenges (including competition): _____

- Implications: _____

Step 5. Select channels and partners.

- Combination of channels

Channels	Approach or materials	Timing	Frequency
Media:			
Interpersonal:			
Events:			

- Partners (list, case, personal contacts): _____

Step 6. Develop and pre-test messages.

- Messages (content, approach, source): _____

- Brief for supplier (if applicable): _____

- Pre-testing: _____

Step 7. Plan for monitoring and evaluation.

- Monitoring implementation (elements, frequency): _____

- Tracking outputs: _____

- Evaluating outcomes (methodology, timing, supplier): _____

Step 8. Establish a timetable.

- Use table on page 26.
- Name of coordinator: _____
- Meetings with senior management to discuss implementation and progress:

Step 9. Establish a budget.

- Use list of budget items in the Examples section on pages 28 and 29.
- Private sector sponsorships and other funding sources (prospects, case, personal contacts): _____
