Making Numbers Talk:
Using Data to Strengthen Your Social Marketing

Presented By:

Caring for Every Child's Mental Health Campaign

Social Marketing TA Team

Presenters

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Learning Objectives

- Develop skills in combining data and storytelling to reach specific audiences

- Learn how the combination of data and storytelling can be used to impact an audience's knowledge, attitudes, and behaviors

- Learn how to focus messaging so it resonates with the audiences you are trying to reach
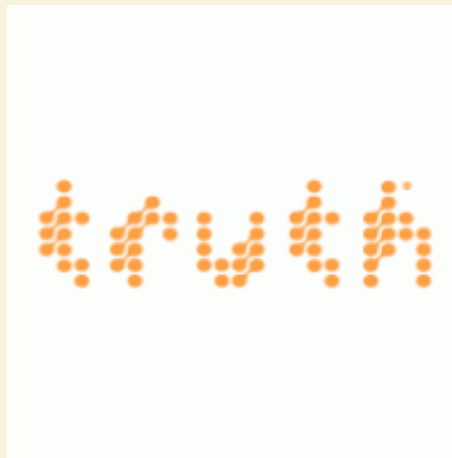
What Is Social Marketing?

Social marketing is the marketing of behavioral change that benefits society as well as the audience .
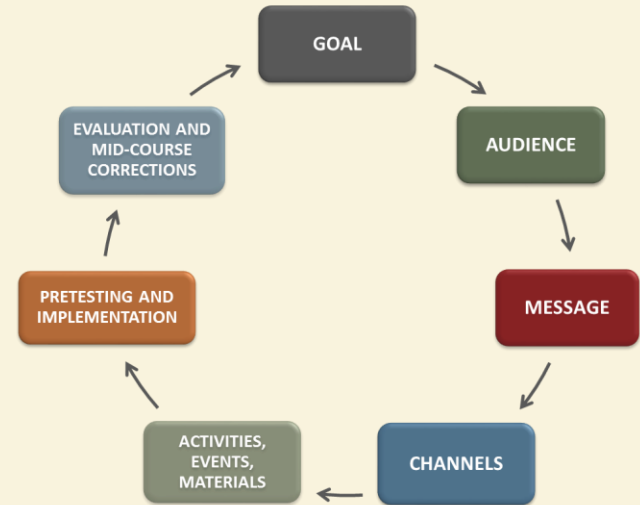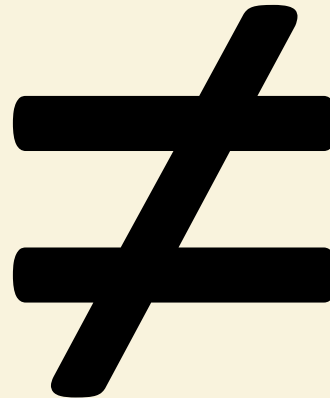
(No, really. That's it.)

You may have heard of…

A Note on Social Media

(Two different things.)

How can social marketing help YOU?

Partnership Development

Audience Engagement

Awareness Building

Social Marketing Sustains

Sustainability strategies that benefit from social marketing include:

- Cultivating strong interagency relationships;
- Involving stakeholders;
- Establishing a strong family organization; and
- **Using evaluation results.***

*Stroul, B., & Blau, G. B. (2008). *The system of care handbook: Transforming mental health services for children, youth, and families*. Baltimore, MD: Paul H. Brookes Publishing Co.

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How do you do it?

What's the goal?
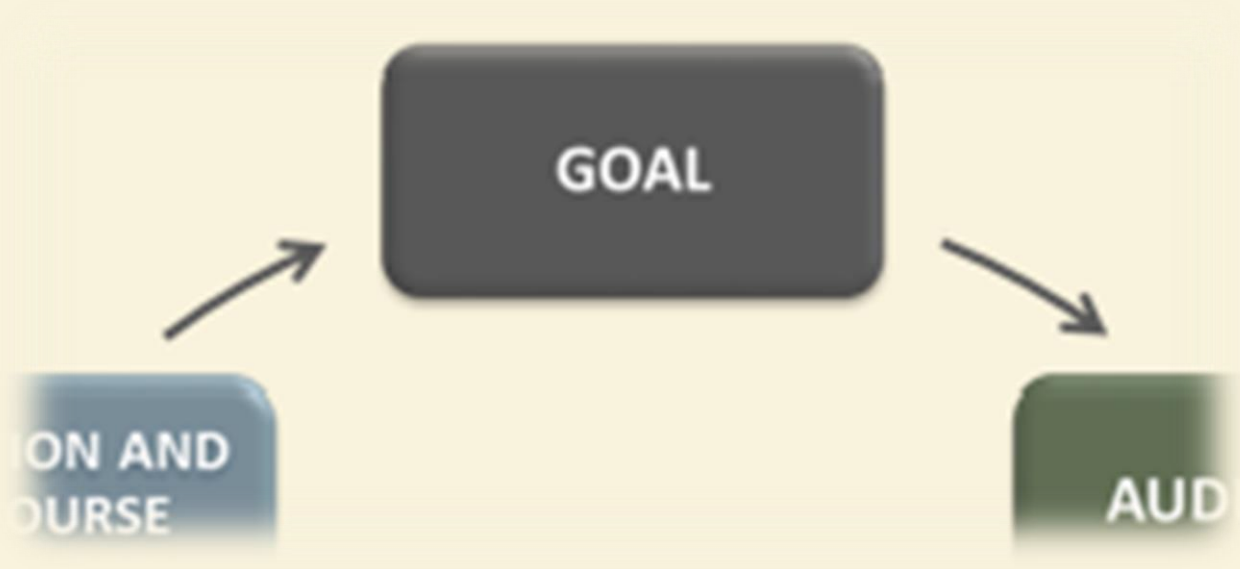
Your social marketing goals should **help you achieve your program's goals.**

Program Goal:
- Enable more people to seek behavioral health services.
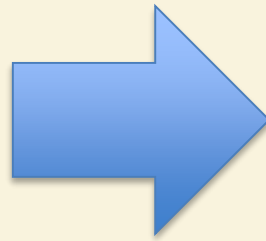
Social Marketing Goals:
- Raise awareness of services available.
- Reduce negativity associated with seeking services.

Who do we need to reach…

…and what do we know about them?
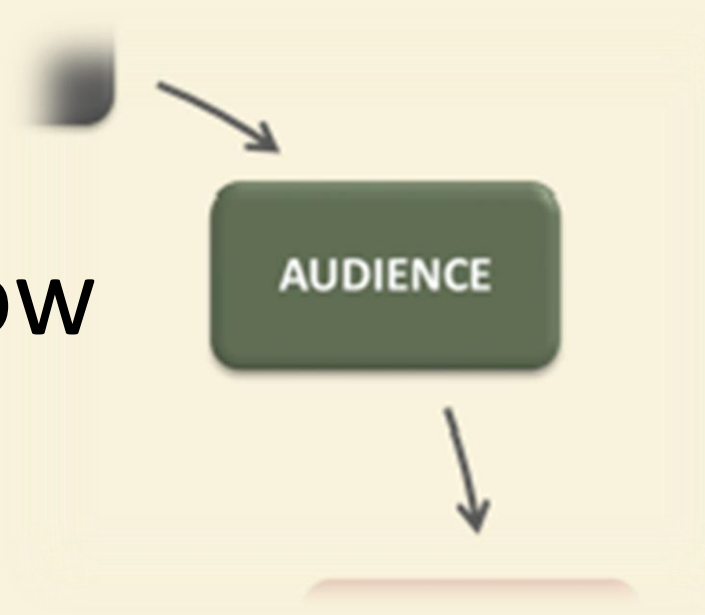
AUDIENCE

Where does your audience stand?

Continuum of Understanding and Acceptance

Unawareness	→	Basic understanding	→	Interest	→	Desire to learn more	→	Full support

Segment Audiences

- What do they know?

- What are their attitudes about health and mental health?

- What are their cultural considerations (race, ethnicity, language, traditions, food, music, spirituality, etc.)?

- Where do they spend their time?

- What are the barriers and benefits?

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Develop messages...

.... that will resonate with the audience.
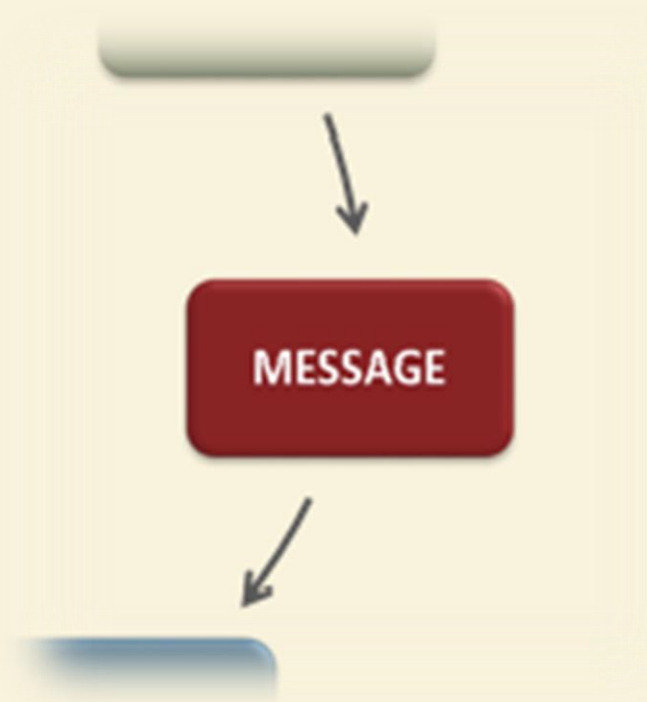
MESSAGE

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Create Messages for Specific Audiences

Messages should:

- Show the importance, urgency, or magnitude of the issue

- Put a "face" on the issue

- Be tied to specific values, beliefs, or interests of the audience

- Be culturally competent

- **Be pre-tested with your audience**

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Here are some examples…

For Families:

- Making sure everyone in the family gets help is an important part of helping young adults maintain positive mental health.

For Educators:

- Academic performance and attendance improve when students are connected to a supportive system of care.

For Practitioners:

- Positive mental health is essential to a child's healthy development from birth.

For CSA Coordinators

- HFW has been rated as having promising research evidence for Placement Stabilization Programs by the California Evidence Based Clearinghouse for Child Welfare

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Six Elements of Using Data Effectively in Messages

1. Know Your Audience
2. Choose a Reliable Data Source
3. Make it Real
4. Put a Face on the Data
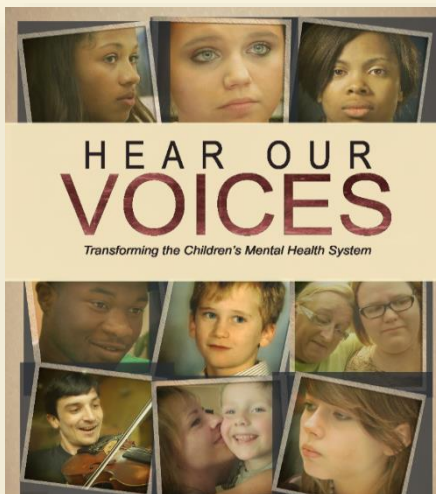5. Be Symbolic
6. Know Your Limits

The Art and Science of Systems Change

ART

- Personal stories
- Families as messengers
- Youth as messengers

SCIENCE

- Evidence base
- Outcomes
- Return on investment

The Science: Outcomes Data

- **Academics**
  - Only 6.3% of children in systems of care for 12 months had repeated a grade, compared with 9.6% of American students in the general public.
  - On average, 20% of high school students with emotional challenges nationwide drop out per year before finishing high school. In contrast, only 8.6% of youth in systems of care had dropped out of school after 12 months of services.
- **Emergency Room (ER) visits for Behavioral/Emotional Problems**
  - Before involvement with systems of care, children visited the ER an average of .33 times in the 6 months prior to intake. Frequency of visits declined to an average of .14 times in the 6 months prior, after one year of involvement in systems of care. This is a 58% reduction in ER visits.
- **Juvenile Arrests**
  - The average number of arrests for children involved in systems of care declined by 38% from 0.32 at intake to 0.20 at 12 months.

Source: Stroul, B. A., Pires, S. A., Boyce, S., Krivelyova, A., & Walrath, C. (2014). Return on investment in systems of care for children with behavioral health challenges. Washington, DC: Georgetown University Center for Child and Human Development, National Technical Assistance Center for Children's Mental Health. Retrieved from http://gucchdtacenter.georgetown.edu/publications/Return_onInvestment_inSOCsReport6-15-14.pdf

The Art: Make it Real

Translate the data into terms that will resonate with your audience

Lifetime prevalence of mental disorders in 13 to 18 year olds

- Lifetime prevalence: 46.3%

- Lifetime prevalence of "severe" disorder: 21.4%
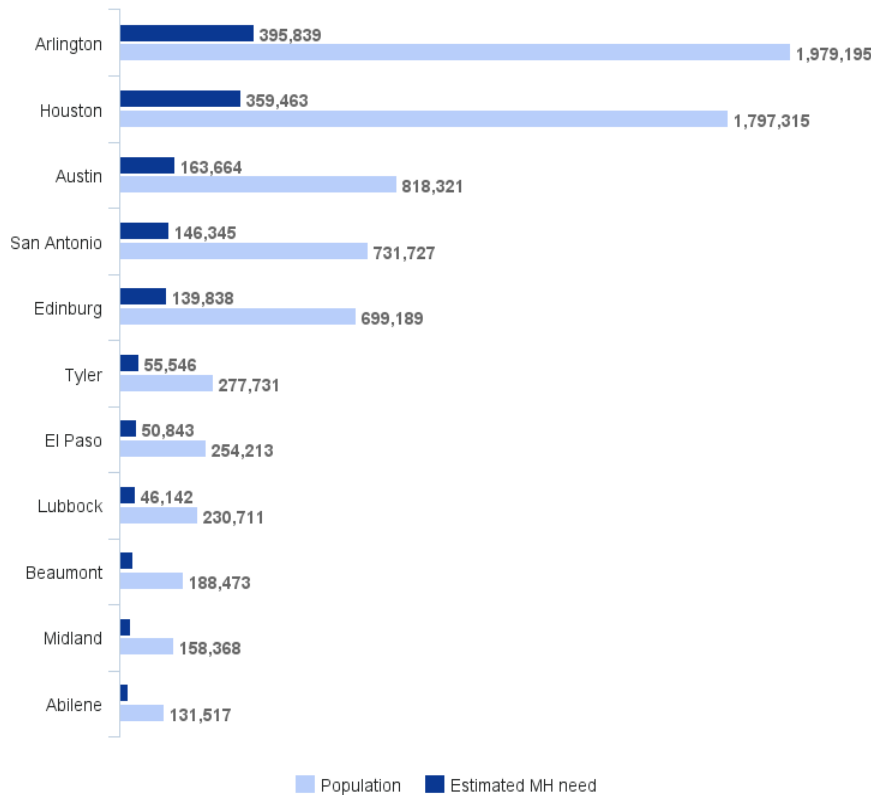
More than 1 in 5 teenagers will have a serious mental illness in their lifetime.

Source: Merikangas KR, He J, Burstein M, Swanson SA, Avenevoli S, Cui L, Benjet C, Georgiades K, Swendsen J. Lifetime prevalence of mental disorders in U.S. adolescents: Results from the National Comorbidity StudyAdolescent Supplement (NCS-A). J Am Acad Child Adolesc Psychiatry. 2010 Oct;49(10):980-989.

It is estimated 1 in 5 children have a mental health need

Child population and estimated mental health needs by region [4]

Region	Estimated MH need	Population
Arlington	395,839	1,979,195
Houston	359,463	1,797,315
Austin	163,664	818,321
San Antonio	146,345	731,727
Edinburg	139,838	699,189
Tyler	55,546	277,731
El Paso	50,843	254,213
Lubbock	46,142	230,711
Beaumont		188,473
Midland		158,368
Abilene		131,517

Population ▪ Estimated MH need

11% 2013
of youth who experienced a Major Depressive Episode (MDE) in the past year [2]

36% 2013
of youth with Major Depression who received treatment

10% 2013
of youth reporting they had attempted suicide one or more times during the last 12 months [2]

28% 2013
of students who felt sad or hopeless for two weeks+ that they stopped doing some usual activities

17% 2013
of youth reporting they had seriously considered attempting suicide [2]

1) Substance Abuse and Mental Health Services Administration http://www.samhsa.gov/data/sites/default/files/NSDUHmhfr2013/NSDUHmhfr2013.pdf
2) Centers for Disease Control and Prevention http://goo.gl/vthbUA
3) Texas Department of State Health Services https://www.dshs.state.tx.us/mhsa/prs/
4) Texas State Data Center, University of Texas (San Antonio). https://www.dfps.state.tx.us/About_DFPS/Data_and_Statistics/child_protective_services/default.asp

3

Texas System of Care
Achieving Well-Being for Children and Youth

Channels...

...are the means through which you will reach your audiences

Activities, Events & Materials…

…are what you will HOST, PRODUCE, OR CREATE to carry your messages to your intended audience.

ACTIVITIES, EVENTS, MATERIALS

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Pre-testing...

CORRECTIONS

PRETESTING AND IMPLEMENTATION

...with your intended audience, and implementation of your plan!

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Evaluation & Mid-Course Corrections…

EVALUATION AND MID-COURSE CORRECTIONS

…ensure that your efforts are effective, and allow you to adjust accordingly.

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Estimates of Depression[a] Among Adolescents Ages 12 to 17, by Lifetime Diabetes Status, Percentages and 95 Percent Confidence Intervals: NSDUH 2005–2014
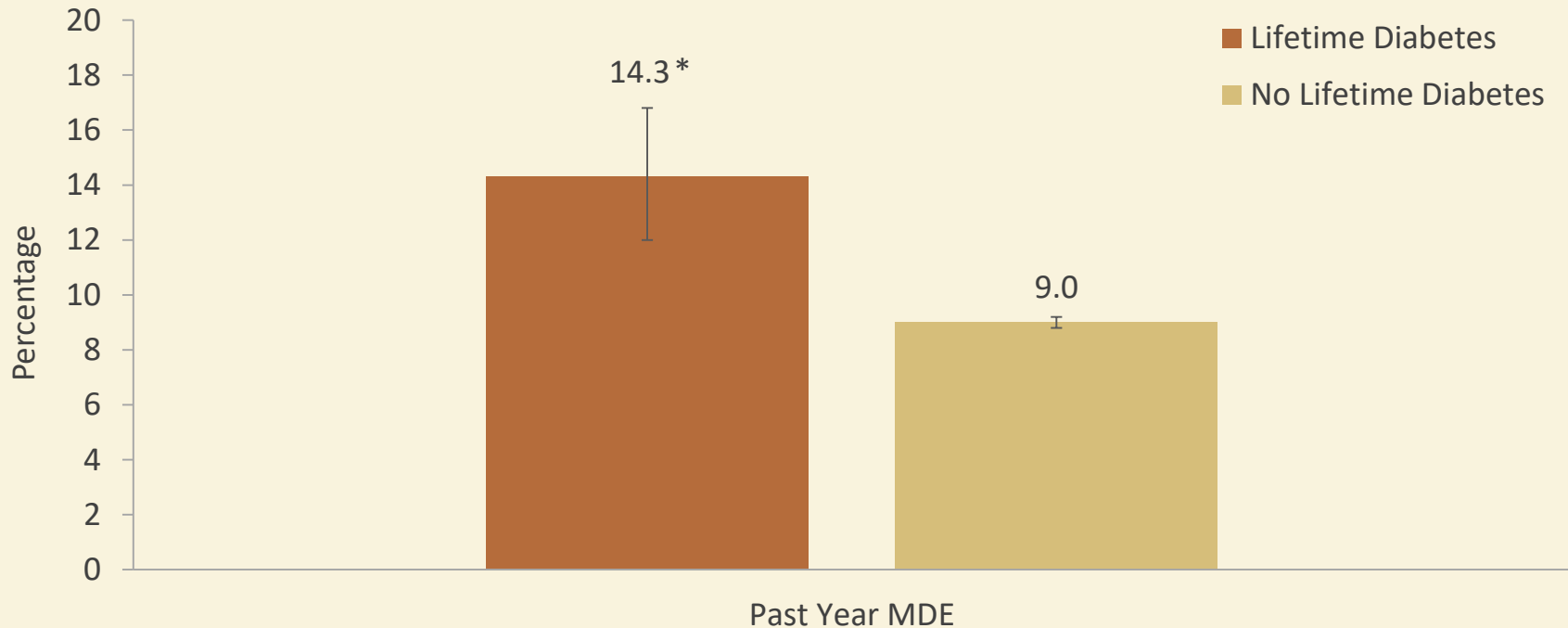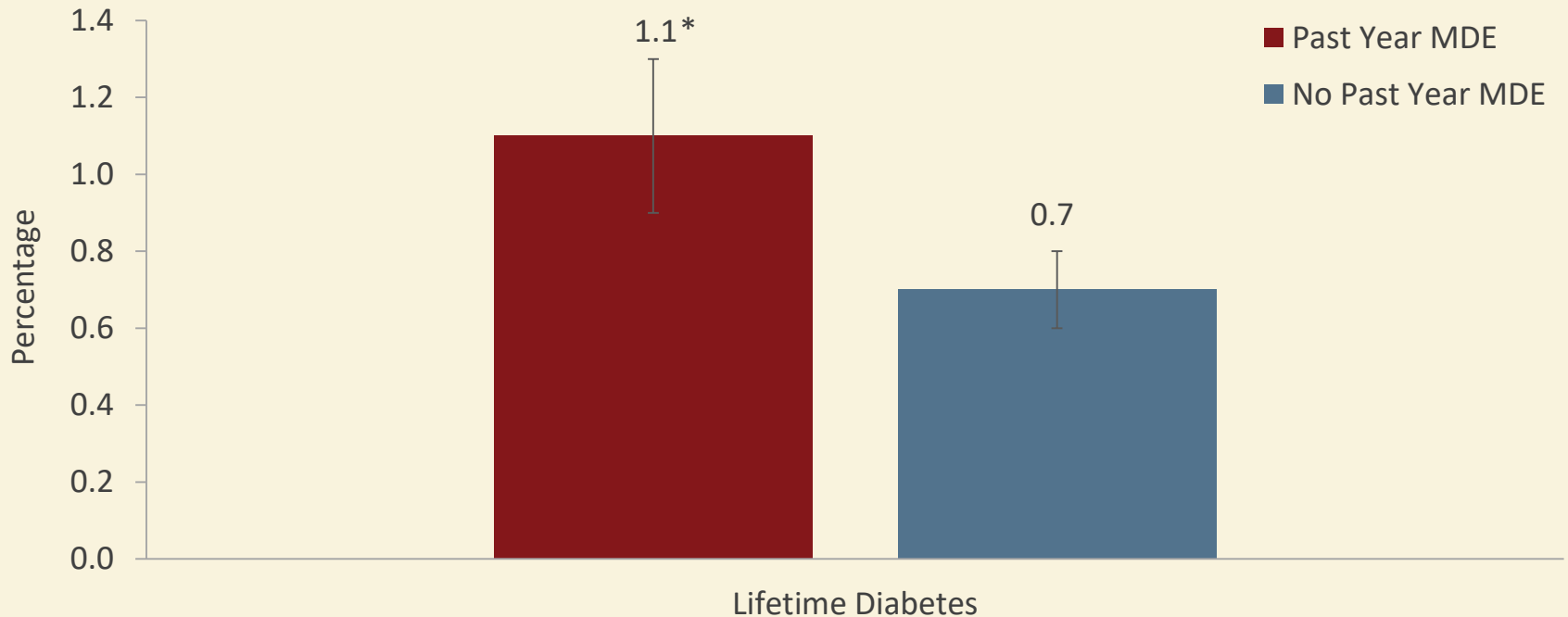
[a] Past Year Major Depressive Episode (MDE)

*Difference in MDE prevalence between lifetime and no lifetime diabetes is statistically significant at the $p < .05$ level.
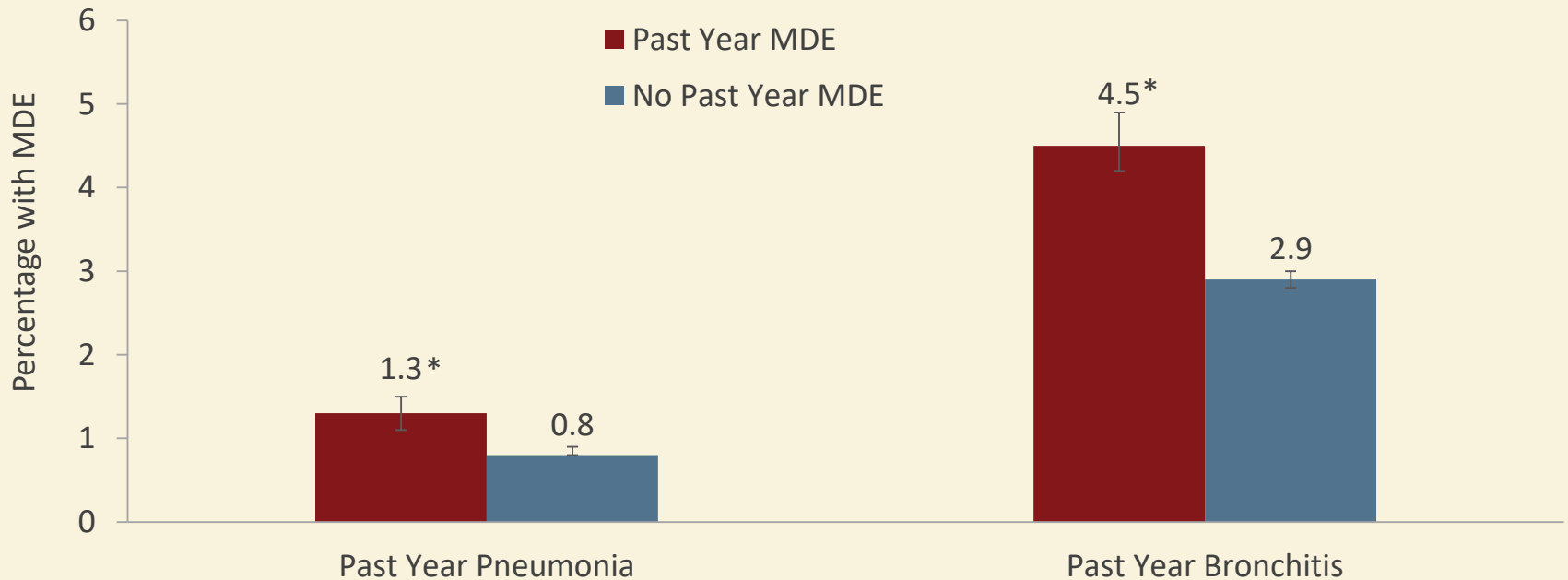
Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2005–2014.

Estimates of Lifetime Diabetes Among Adolescents Ages 12 to 17, by Past Year Major Depressive Episode (MDE), Percentages and 95 Percent Confidence Intervals: NSDUH 2005–2014

*Difference in diabetes between Past Year MDE and No Past Year MDE is statistically significant at the $p < .05$ level.

Association between MDE and diabetes remained significant after adjusting for age group, gender, race/ethnicity, and poverty

Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2005–2014.

Estimates of Past Year Respiratory Conditions Among Adolescents Ages 12 to 17, by Past Year Major Depressive Episode (MDE) Status, Percentages and 95 Percent Confidence Intervals: NSDUH 2005–2014

*Difference in respiratory condition between Past Year MDE and No Past Year MDE is statistically significant at the *p* < .05 level.

Association between MDE and each respiratory condition remained significant after adjusting for age group, gender, race/ethnicity, and poverty.

Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2005–2014.

Conclusions

- Significant associations among adolescents exist between physical health (overall health, asthma, bronchitis, pneumonia, and diabetes) and past year depression.

- Overweight and obesity categories are associated with depression among female but not male adolescents.

Implications of Findings

Understanding associations between depression and physical health conditions among adolescents can:

- Help aid prevention efforts;
- Improve identification of at-risk populations; and
- Help begin timely treatment strategies.

The Art: Illustrate It

Figure 2. Children and Youth Have Fewer Suicidal Thoughts and Make Fewer Suicide Attempts

Suicidal Ideation and Suicide Attempt Among Youth
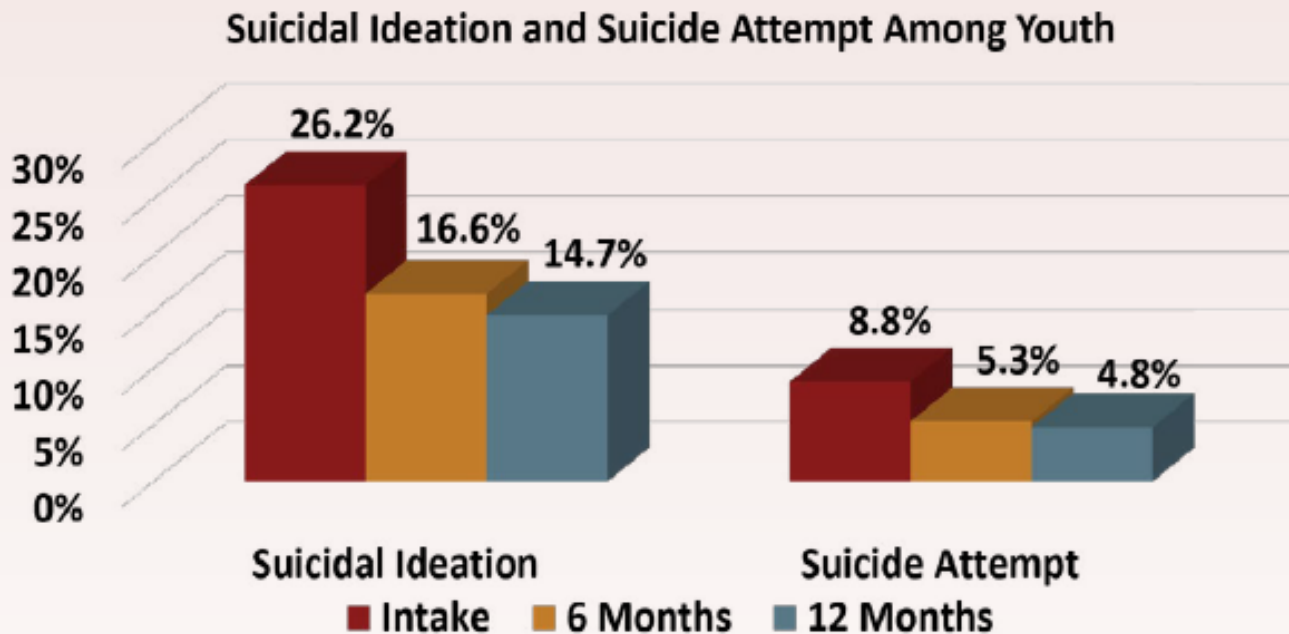
The Art: Put a Face on the Data

Know your Audience

Who are you trying to reach?

What motivates them to

think, feel, or act?

What barriers exists to changing attitudes, beliefs and behavior?

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Understanding Audiences

Questions to ask:

- What do you know about them?
- What do you know about this audience's knowledge, attitudes, and behaviors as they relate to your goal?
- What do they care about?
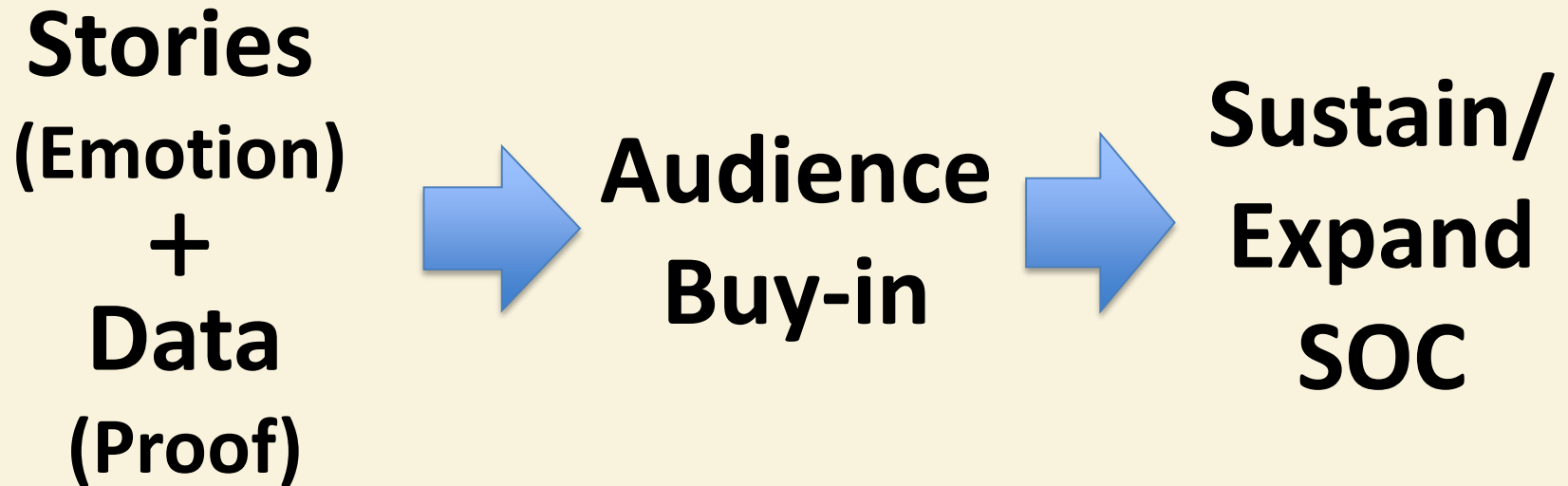- Who is most likely to change/"low-hanging fruit"?

Create Messages for Specific Audiences

Messages should:

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Why Combine?

Stories
(Emotion)
+
Data
(Proof)

→

Audience Buy-in

→

Sustain/ Expand SOC

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Leverage National Data for Local Outreach

- Pitch local stories that illustrate data:
  - Identify success stories among children, youth, or young adults in integrated programs who have a chronic illness and behavioral health disorder.
  - Highlight local stories from a caregiver's perspective on how an integrated program has benefited their child.
  - Identify behavioral health and medical professionals who can speak about the importance of well-integrated programs.
  - Identify communities in the process of establishing integrated programs and how they will help the residents of the community.

Leverage National Data Through the Year: Earned Media

- Engage with media during national observances:
  - Create editorial calendar to track national observances such as National Childhood Obesity Month (September) or National Diabetes Awareness Month (November).
  - Identify relevant spokespeople for media interviews.
  - Conduct proactive media outreach.
- Leverage opportunities in the news cycle:
  - Track stories about children and youth with chronic illnesses and behavioral health disorders.
  - Develop core database of local reporters covering these issues; create Twitter list to follow these reporters.
  - Pitch this core media database when new studies or stories break on the national or local level that relate to behavioral health or chronic illness among children, youth, and young adults.

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Leverage National Data During Awareness Month: Social Media

- Engage on social media during Awareness Day and May:
  - Post social media messages about mental health and the Spotlight Reports during Awareness Day and throughout May (Mental Health Awareness Month).
  - Leverage relevant observances in May for additional promotion (National Asthma and Allergy Awareness Month).
  - Share infographics.
  - Use the hashtag #HeroesofHope.
  - Engage with other organizations posting about mental health by sharing, liking, commenting, or adding to the conversation with the national data.

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Leverage National Data Through the Year: Social Media

- Engage on social media during national observances:
  - Post social media messages and images that connect the observance and the findings in the Spotlights.
  - Use the #HeroesofHope hashtag, as well as those associated with the observance (e.g., #diabetes #type1).
  - Share infographics.
  - Engage with other organizations posting about the observance by sharing, liking, commenting, or adding to the conversation with the national data.

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Potential Media Outlets

- Newspapers

- Broadcast outlets—TV and radio

- Blogs

- Podcasts

Reporter Beats for Local Outreach

- Behavioral health
- Health and medicine
- Education
- Youth and family
- Parenting
- Community

Privacy Issues During Media Outreach

- **Be sensitive to children, youth, young adults, and family privacy issues when sharing stories with the media.**
  - Obtain permission from parents or caregivers.
  - Have a clear idea of the stories youth and families are willing to share.
  - Manage expectations with the reporter and be prepared to negotiate.
  - Offer strategic story-sharing resources by youth and family organizations.

The Importance of Providing Culturally Competent Care

- Previous research has shown that children, youth, and families are more likely to engage in services and to report better outcomes if services are culturally appropriate (Huey & Polo, 2008).

- Almost all (96%) of the families served in systems of care reported being *mostly satisfied* or *very satisfied* with the cultural responsiveness of their services.

Huey, S. J., & Polo, A. J. (2008). Evidence-based psychosocial treatments for ethnic minority youth. *Journal of Clinical Child and Adolescent Psychology, 37*(1), 262–301.

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Improvement in Behavioral and Emotional Symptoms

Average Score on Child Behavior Checklist

	Intake	6 Months	12 Months
Total Problems (n = 1,043; p < .001)	68.0	65.3	63.9
Externalizing Symptoms (n = 1,043; p < .001)	67.2	64.7	63.5
Internalizing Symptoms (n = 1,043; p < .001)	64.9	62.5	61.2
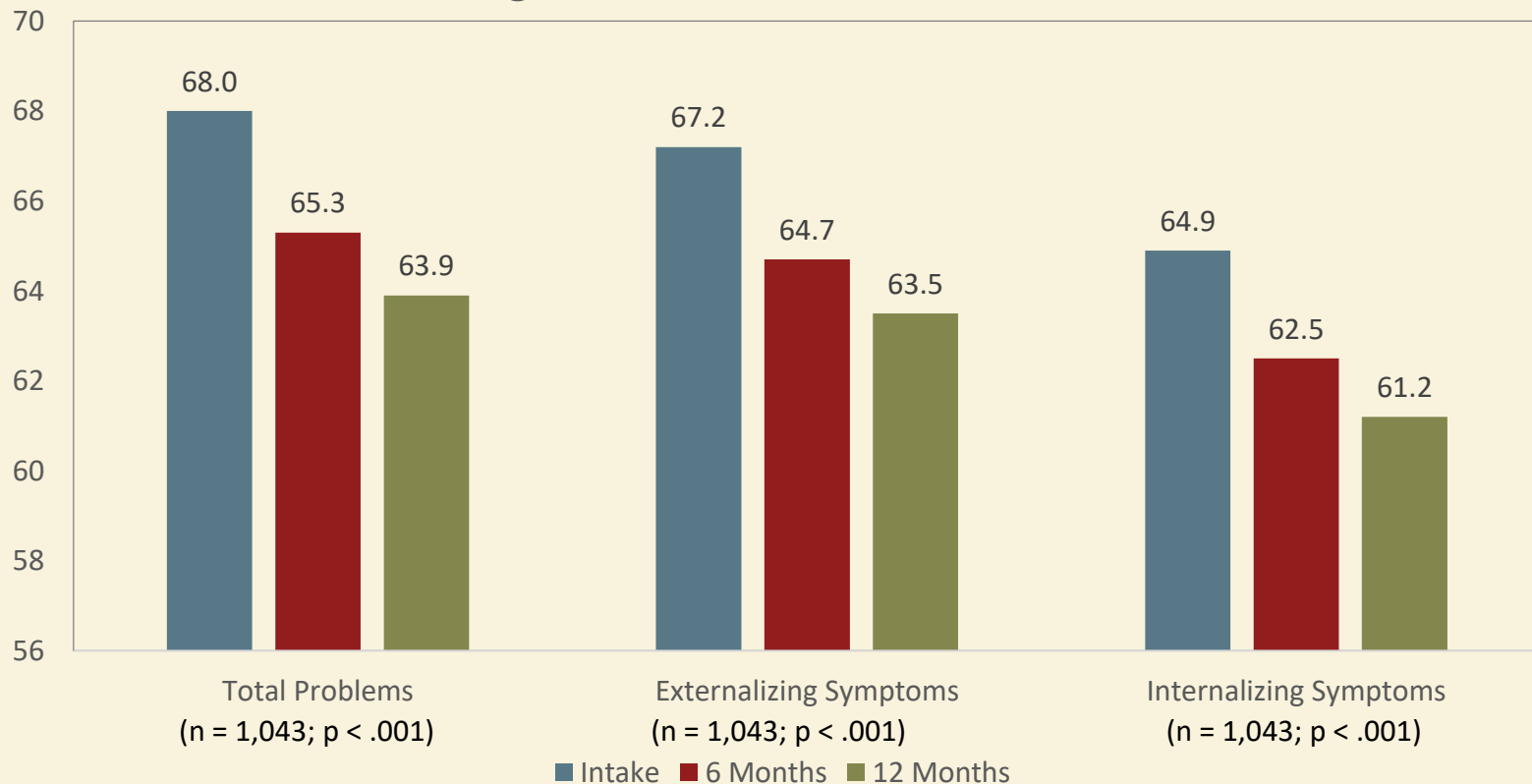
Externalizing symptoms include aggression and rule-breaking. Internalizing symptoms include depression and anxiety. Scores are age-normed, and a score above 64 indicates symptoms in the clinical range.

Fewer Suicidal Thoughts and Suicide Attempts

26
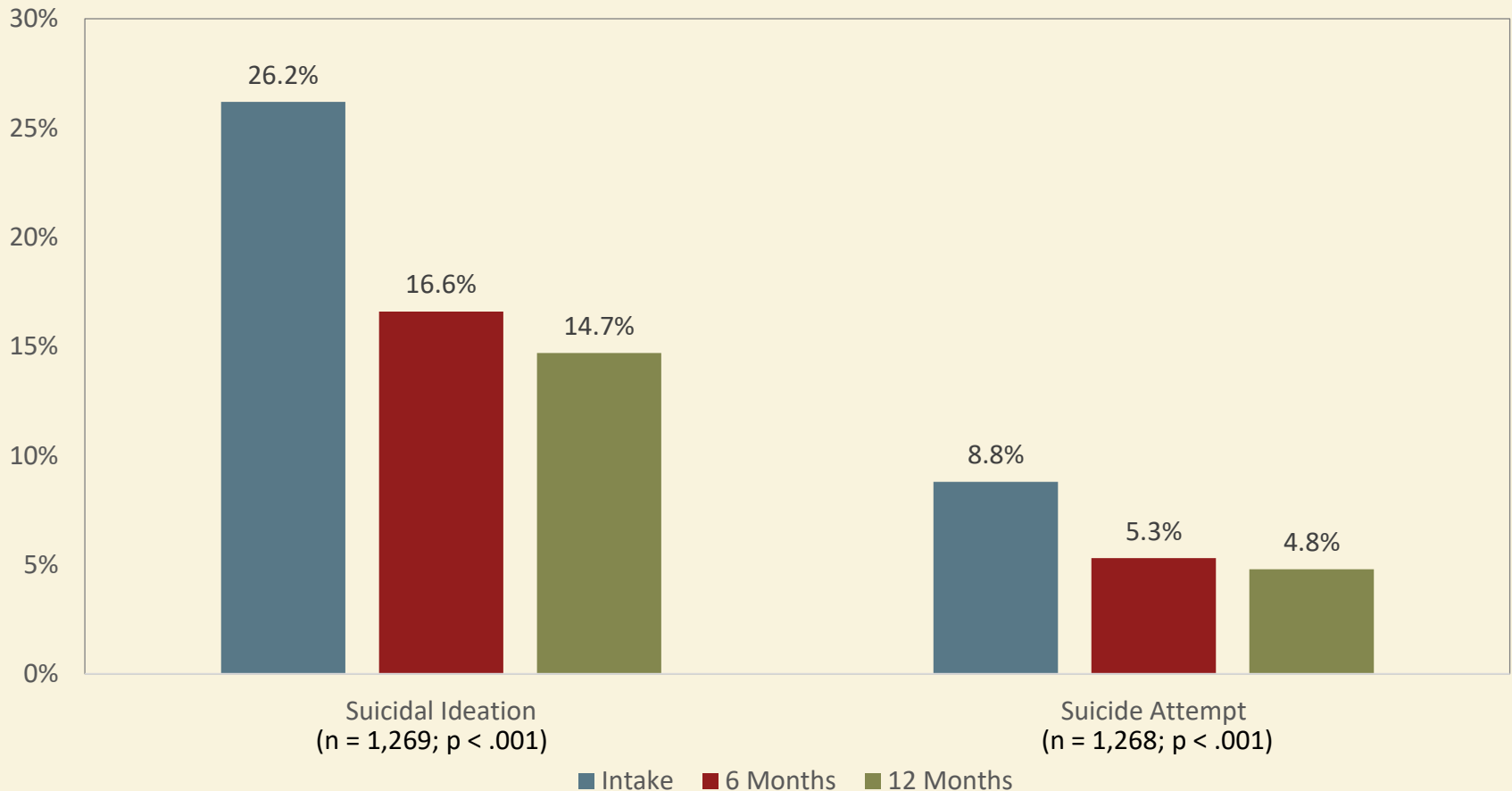
Reduction in Arrests

- Youth ages 11 years and older reported fewer arrests.
  - At intake, 20% had been arrested in the previous 6 months.
  - At the 12-month follow-up, 10% had been arrested in the previous 6 months ($p < .001$).

Reduction in Arrests

Arrested in Past 6 Months
(n = 689; p < .001)

■ Intake ■ 6 Months ■ 12 Months

28
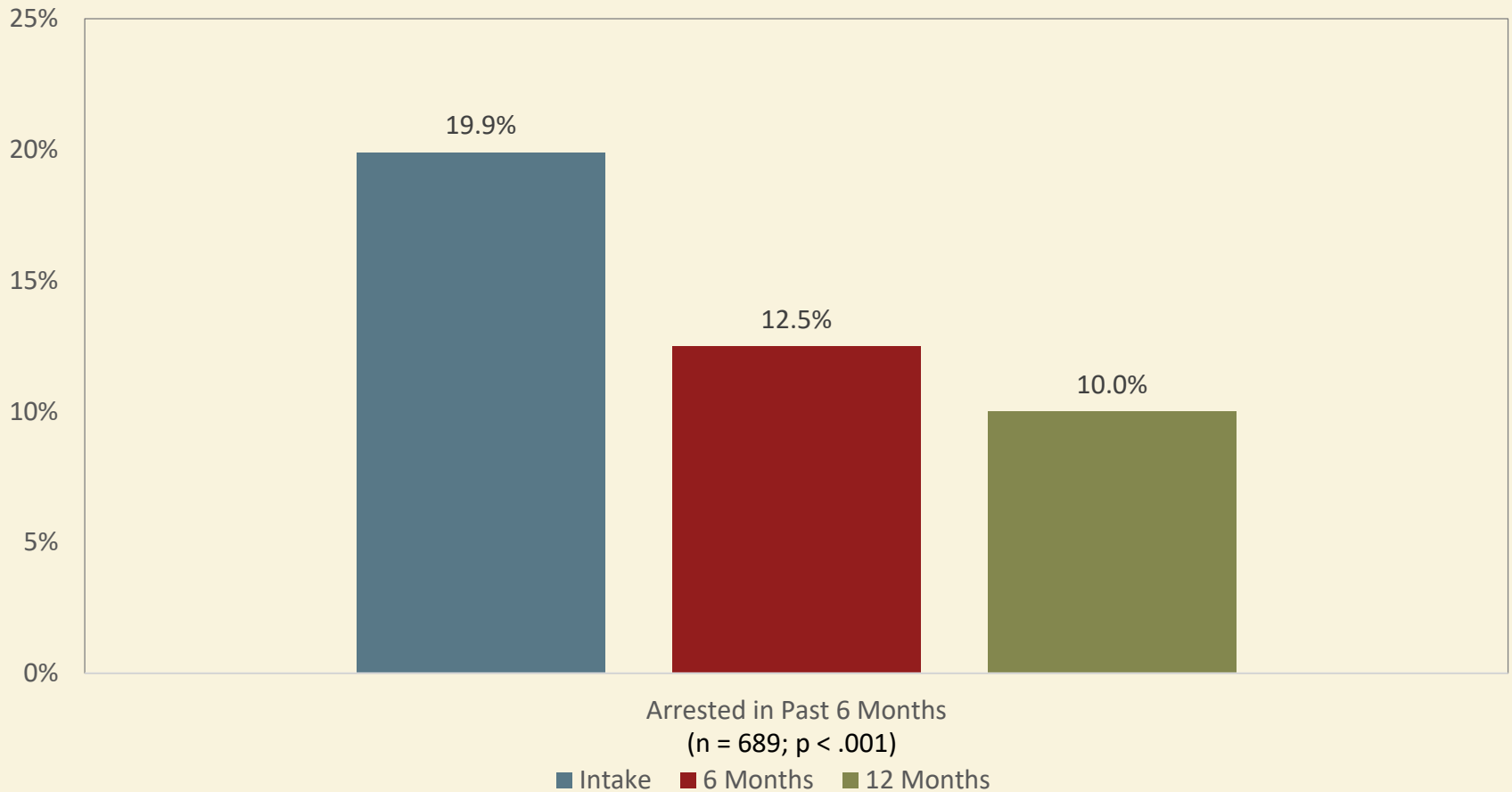
Improved Academic Outcomes

Bar chart showing academic outcomes at Intake, 6 Months, and 12 Months.

No Disciplinary Action (n = 752; p < .001): Intake 62.6%, 6 Months 70.5%, 12 Months 74.7%

Average Grades of 'C' or Better (n = 480; p < .001): Intake 66.0%, 6 Months 68.3%, 12 Months 75.4%

Regular Attendance (n = 850; p < .001): Intake 76.8%, 6 Months 83.2%, 12 Months 84.0%

Legend: ■ Intake ■ 6 Months ■ 12 Months

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Caregivers See Improvements, Too!

- Parenting stress decreased over time.
  - More than two-thirds (68%) of caregivers reported levels of parenting stress above the "clinically significant" level at intake.
  - At the 6-month follow-up, that percentage was reduced to 57%, and it was reduced further to 51% at the 12-month follow-up (p < .001).

Caregivers See Improvements, Too!

Parenting Stress in Clinical Range
(n = 508; p < .001)

Intake: 67.7%
6 Months: 57.3%
12 Months: 50.6%

31
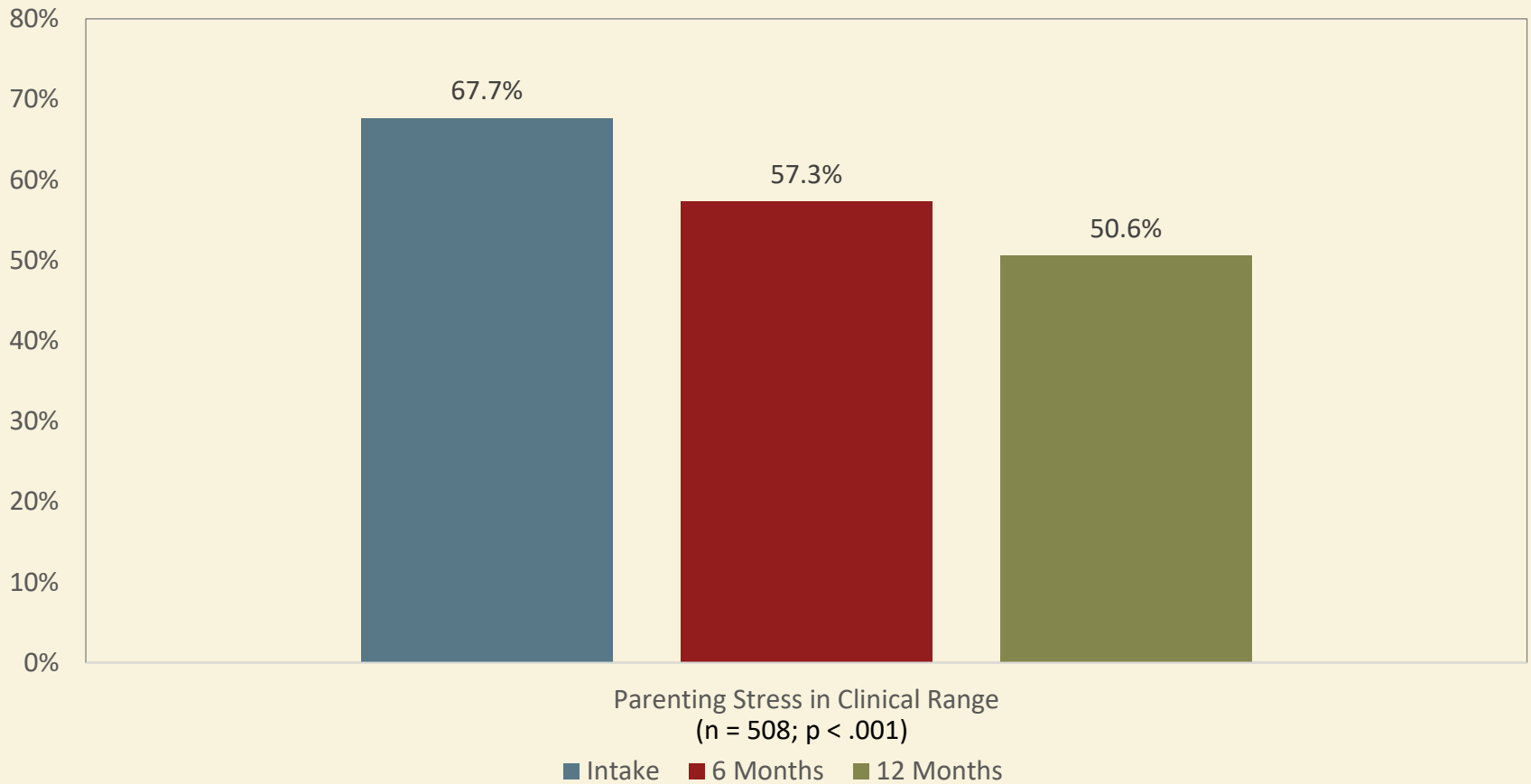
Caregivers See Improvements, Too!

- Among caregivers who had been unemployed at intake because they had to care for their child's mental health problem:

  - 23% found employment within 6 months of entering services.

  - 38% reported that while they continued to look for work, their child's mental health problem was no longer the primary reason for their difficulties in finding employment.

Summary

- Children and youth who enroll in systems of care show the following improvements:
  - Reduced behavioral and emotional symptoms
  - Fewer suicidal thoughts and suicide attempts
  - Improved academic performance and school attendance
  - Fewer arrests
- Benefits for caregivers include:
  - Reduced parenting stress
  - Increased likelihood of being able to seek and find employment
- Caregivers identify the most helpful services as those that promote access to care

Leveraging of National Data for Local Outreach

- **Link key national data and trends to local system of care programs and outcomes.**
  - Feature how local programs provide services and supports that can address these national trends.

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Leveraging of National Data for Local Outreach

- Pitch local stories that illustrate data.
  - Identify stories of local system of care children, youth, or young adults who have benefitted from access to behavioral health supports.
  - Highlight local stories revealing improvements in academic outcomes among children, youth, and young adults who have access to integrated care services.
  - Highlight reductions in suicide attempts among children, youth, and young adults who have access to integrated care services.
  - Identify success stories among children, youth, or young adults who have benefitted from collaborations with juvenile justice services.
  - Identify success stories of caregivers who have benefitted from access to behavioral health supports.

Potential Media Outlets

- Newspapers

- Broadcast outlets—TV and radio

- Blogs

- Business and trade publications

- Education outlets

- Podcasts

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Reporter Beats for Local Outreach

- Health and mental health

- Education

- Business

- Criminal justice

- Family and parenting

- LGBTQ

Privacy Issues During Media Outreach

- **Be sensitive to children, youth, young adults, and family privacy issues when sharing stories with the media.**
  - Obtain permission from parents or caregivers.
  - Have a clear idea of the stories youth and families are willing to share.
  - Manage expectations with the reporter and be prepared to negotiate.
  - Offer strategic story-sharing resources by youth and family organizations.

Download and Go! (update)

Let the Data Work for You!

Promote data using…

Press releases	Fact sheets	Infographics
Social media messages	Email marketing messages	Websites
Brochures	Fliers	Presentations

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Questions?

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Thank you for participating!

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