

Colorado Consortium for Prescription Drug Abuse Prevention

Public Awareness Work Group Meeting Minutes

September 15, 2021 via Zoom

Present:

Kent MacLennan, Co-chair, Rise Above Colorado

Liz Owens, Co-chair, OBH

Charlotte Whitney, OBH

Patricia Stroud, Rocky Mountain Crisis Partners

Cathy Law, AmeriCorps

Erik Crankshaw, RTI

Consortium: Gina Olberding, Susanna Cooper, Jen Place, Tyler Payne, Jessica Eaddy, Lindsey Simbeye, Michael Davidson, Rosemarie MacDowell

Absent: See attached list.

Liz Owens, Work Group Co-chair, called the meeting to order at 1:05 p.m.

Approval of Minutes:

A motion was made to approve the July 2021 work group meeting minutes. Motion approved.

RTI Final Report:

Michael Davidson introduced the final RTI evaluation report. The evaluation reviewed past campaigns and established the parameters for the development of future campaigns.

A copy of the RTI presentation given by Erik Crankshaw is attached to the minutes.

Presentation Comments:

The Consortium was prescient in focusing on naloxone as a critical topic because of the impact on reducing overdose deaths. The focus was good, but the message wasn't always clear. There is a challenge connected to "static" advertising.

Another challenge relates to the existing level of awareness. 85% of people in the focus groups reported having never seen the campaign, which represents an insufficient percentage when trying to influence behavior and attitudes. This result pertained to sub-groups as well (opioid users/misusers) and rural and urban populations. Normally, the percentage to effect change would have to be in the range of 75 to 85 percent. Achieving this range is now more difficult because the media mix is so broad.

The concept of Bring Naloxone Home is a good one; the question is whether or not there is a wide enough reach and a clear enough call to action.

A discussion was held regarding other types of campaigns in various states, including in rural and urban areas, and the difficulty involved in achieving a successful reach.

A recommendation was made to target specific groups in future campaigns and to consider better message testing, clear calls to action (including in campaign materials), and offering available resources in both urban and rural areas (such as where and how to obtain naloxone).

The differences in targeting rural and urban demographics was also discussed, particularly with reference to obtaining naloxone. Partnering with local organizations was suggested. Gina Olberding said that there might be an opportunity to partner with the Colorado Naloxone Project. They just received funding for Narcan distribution in hospitals and clinics. The naloxone campaign could focus efforts in those distribution areas.

Lindsey Simbeye mentioned that the RAS-Col and RROE coalitions are currently conducting a stigma campaign for the rural counties in the northwest corner of the state, and that it might make sense to look more closely at how they are targeting the local rural population. OBH could provide a list of rural organizations in each county that are accessing naloxone via the bulk fund.

Charlotte Whitney provided the following link: <https://coloradocrisisservices.org/toolkit/general-campaign/#rural-colorado-assets>

Erik was asked about suggestions for successful campaigns that might address myths or that could be repurposed. He indicated that they tested a lot of video ads (30+) and an ad (from Utah) showing a family member administering naloxone and reversing an overdose scored very high.

Budget Discussion:

Michael Davidson presented the following budget considerations:

1. Do we need to adjust expectations?
2. Should we find alternative audiences?
3. What are reasonable measures of success:
 - Change in attitudes from unsure/don't know?
 - Increased number of filled naloxone prescriptions?
 - Digital engagement?
 - OpiRescue downloads?
4. What can we do with our budget?
5. What are we being asked to do by the state?

Participants discussed the budget and campaign directions, including current funding available and how additional funding could be obtained or partnerships with other existing campaigns could be established.

Erik had several suggestions regarding ad campaign partners as well as ads that address misperceptions. He suggested that the CDC's RX Awareness Campaign may be worth exploring. The CDC makes their ads available for states to use without incurring heavy production costs.

Gina Olberding asked work group members to consider their overall public awareness objectives, as there may be other funding sources over and above the currently established

budget. A survey for ideas may be sent to work group members once they have had an opportunity to thoroughly review RTI research findings.

Adjournment and Next Meeting:

The meeting adjourned at 2:33 p.m. The next work group meeting will be held on Wednesday, November 17, 2021 from 1–2:30 p.m.

Attachments: Work group roster, RTI Presentation