

Public Health Communications Awards

APPLICATION: CAMPAIGN WITH THE MOST IMPACTFUL OUTCOMES

CONTACT INFORMATION

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Jurisdiction size (Please check one):	
<input type="checkbox"/> Large (Population exceeds 700,000) <input checked="" type="checkbox"/> Medium (Population less than 700,000; more than 200,000) <input type="checkbox"/> Small (Population less than 200,000; more than 50,000) <input type="checkbox"/> Very Small (Population less than 50,000)	

ABOUT THE COMMUNICATIONS CAMPAIGN

Name Of Communications Campaign	Solano County Go Before You Show
Brief Campaign Overview (200 Words Or Less)	In 2006, the Solano Prenatal Care Access Committee convened to review and recommend policies and strategies to assure access to early prenatal care for all women to improve birth outcomes and reduce health inequities throughout the county. The committee examined relevant local data related to prenatal care usage and time of entry into prenatal care among various population segments. They explored potential barriers for Medi-Cal eligible women that may impact access to/utilization of early prenatal care, including individual barriers and barriers at the level of prenatal care providers and governmental/institutional systems. One key recommendation was to conduct a consistent, sustained, education effort aimed at increasing knowledge about (1) the importance of early prenatal care, (2) how to obtain prenatal care and

healthcare coverage during pregnancy, and (3) how institutions can reduce barriers to care.

The “Go Before You Show” Campaign was created under the leadership of Solano Maternal, Child and Adolescent Health and BabyFirst Solano to coordinate with agency partners to conduct an ongoing multilingual, multimedia outreach campaign at the community level to motivate women to seek early prenatal care and provide information about how to access care and insurance coverage.

Campaign Start Date

2006

Campaign End Date

2012

CAMPAIGN PLANNING AND IMPLEMENTATION

What is the purpose of this campaign? Does it address an underlying community need? Please describe why the campaign was developed. You are encouraged to submit evidence of need (e.g., local news stories, internal reports, testimonials, data, community health assessments) as an addendum to this form.

The Go Before You Show campaign was designed to improve birth outcomes and reduce health disparities by improving rates of early entry to prenatal care for disadvantaged populations. In 2006, Solano County reviewed data from the 2005-2009 Maternal, Child and Adolescent Health Needs Assessment and identified rates of early entry to prenatal care as an area for concern in Solano County (see attachment 1). The Center for Disease Control and Prevention Healthy People 2010 national target rate for entry to prenatal care was: 90 percent of pregnant women receive prenatal care by 12 weeks of pregnancy. In Solano County in 2005, only 73% of all women received some prenatal care in the first 12 weeks of pregnancy, and only 47.7% of women insured by Medi-Cal did so, well short of the Healthy People 2010 goal of 90 percent. In particular, rates of early prenatal care were lower for Black and Hispanic women than for White and Asian women. The Maternal, Child and Adolescent Health Bureau shared this information along with other health indicators with the community in a collaborative process, and rates of prenatal care were identified by the group as a significant concern in Solano County. This area of concern has continued to be a focus through subsequent five year needs assessments (see attachment 2).

Women who receive prenatal care early in their pregnancies and continue with regular care throughout their pregnancies have better birth results. ¹ Prenatal care is associated with decreased infant morbidity and mortality by identifying and dealing with potential risk factors, treating medical conditions and addressing potentially unsafe behaviors. ³ As early as 1985 a policy report published in the Journal of the American Medical Association made a strong case for the link between prenatal care

and low birth weight⁴, and a 1988 report in the New England Journal of Medicine on the association between increasing levels of prenatal care and decreasing incidence of low birth weight among 31,000 Kaiser patients found that those with early prenatal care the relative risk of low birth weight reduced 2.1 fold among white women and 3.6 fold in African American women. ⁵ There is a clear link among prenatal care and birth outcomes and socioeconomic status. Poverty creates many barriers to accessing prenatal care. ⁶ Poverty is linked to increased risk for health problems for mothers and infants. Poverty also is associated with a much higher risk of a low birth-weight birth, maternal depression in infancy and lower chances that the mother will undertake breastfeeding. ⁷ All these are known to be associated with poor outcomes in the rest of childhood and throughout life. Early prenatal care has many important benefits: Early prenatal care can support reduced use of alcohol, tobacco and other drugs during pregnancy. Solano County ranked in the lowest quartile (indicating a higher rate compared with other counties) in California for low birth weight and infant mortality. Early care can prevent significant costs related to poor birth outcomes, e.g. neonatal intensive care of low birth weight or substance exposed infants. Early screening allows for early identification and intervention with chronic diseases that may contribute to poor maternal and child health outcomes. Early care promotes timely enrollment of low-income mothers in Comprehensive Perinatal Services Program that addresses basic needs, nutritional, psychosocial and health education issues.

¹ National Council of Welfare. Healthy parents, healthy babies. 1997. Available at:

http://www.ncwcnbes.net./htmldocument/reportparenthealth/rephealthyparents_e.htm.

² American Academy of Pediatrics and the American College of Obstetricians and Gynecologists. Guidelines for perinatal care, 5th Edition. 2002

³ Heaman, MI, Gupton, AL, Moffatt, MEK. Prevalence and predictors of inadequate prenatal care: A comparison of Aboriginal and non-Aboriginal women in Manitoba. JOGC 2005; 27:237-46.

⁴ Brouliette, Robert T. Preventing Low Birthweight. Journal of the American Medical Association. 1985; 254(11): 1517-1518. Doi: 10.1001/jama.1985.00360110113035.

⁵ Murray, JL, Bernfield, M. The differential effect of prenatal care on the incidence of low birth weight among blacks and whites in a prepaid health care plan. N Engl J Med 1988 319: 1385-1391

⁶ <http://www.cpag.org.uk/info/Povertyarticles/Poverty121/mothers.htm>

⁷ <http://www.cpag.org.uk/info/Povertyarticles/Poverty121/mothers.htm>

Does your campaign address an issue related to health equity? How?

This campaign was designed to assist women in seeking prenatal care in the first trimester of pregnancy. Early prenatal care is a key component to improving birth outcomes, and this is particularly a concern for vulnerable communities. Early prenatal care has been shown to be an important strategy in preventing infants from being born at low birth weight or before 37 weeks gestation, which not only represent a risk of increased infant mortality, but also put the infant at risk for a variety of health conditions later in life, including diabetes, heart disease, high blood pressure, metabolic syndrome and learning difficulties.

Solano County, similar to other counties, has significant health disparities between various groups. African-American women, Hispanics, teens, and substance using women have lower rates of early entry to prenatal care and higher rates of low birth weight and prematurity than other women. Women insured by Medi-Cal also have lower rates of early entry into prenatal care and higher rates of low birth weight and prematurity than women insured by private insurance. These birth outcomes are profoundly impacted by the social determinants of health, including poverty, racism, unequal access to insurance, and stress. This represents an undue burden on disadvantaged communities, and primes the infants born into those communities to experience further negative health effects through the course of their lives.

Infant health is a leading indicator of the health of the community. The Go Before You Show campaign was designed to improve infant health and to address disparities in health outcomes by targeting communities experiencing disparate health outcomes.

What population was this campaign targeted to reach? How did you plan to reach them?

The campaign was targeted to pregnant women and potentially pregnant women who are Medi-Cal eligible. There was an additional, specific campaign focus on four communities of concern; African-American women, Hispanic women, teens, and substance-using women. The campaign used a broad, population based approach, and featured campaign ads on billboards, pre-show movie ads in theaters, ads on buses and bus station shelters, bowling alley lane ads, mall ads, radio ads in English and Spanish and local press articles in newspapers and local magazines. (see attachments 3, 4) The campaign used GIS mapping to locate areas with a high concentration of Medi-Cal eligible women who entered prenatal care late, and focused additional resources in those neighborhoods. In addition, the campaign used focus groups with members of the target communities to solicit ideas for further grass-roots outreach, including putting materials in laundromats, grocery stores, apartment complexes, restaurants, check cashing businesses and shelters. Materials including Go Before you Show posters and rack cards were also distributed through health care provider offices, an opportunity to reach both community members about the importance of prenatal care, as well as providers themselves.

Could this campaign be replicated or transferred to other jurisdictions? Please explain.

This campaign was adopted from San Joaquin County. San Mateo and San Francisco Counties in turn reached out to us to share with them our materials. The methodology and Prenatal Care Access Improvement Theory of Action Framework (see attachment 5) we used is applicable for any county to use to improve rates of early entry into prenatal care and improve birth outcomes.

What partners did you work with in planning and implementing this campaign?

Planning and implementation began by convening a work group that included front line staff from our prenatal care clinics, hospitals, WIC, Employment and Eligibility Benefits (CalFresh, Medi-Cal), managed care plan Partnership HealthPlan of California, community member focus groups, Planned Parenthood, Head Start and County Information Technology Graphical Information Systems (GIS) Mapping experts. In addition, dissemination and display of campaign materials required creating relationships with community groups and businesses, who agreed to partner with us by displaying materials in their locations.

To what extent does the campaign leverage existing resources without creating new costs?

Much of the Go Before You Show campaign planning and implementation was conducted by local partners working collaboratively through already existing networks. Agencies agreed to participate on the work group and or the Prenatal Care Access Committee and support the recommendations by taking on some of the activities. For example, two of the local hospitals provided funding to produce the Go Before You Show campaign posters. Distribution of materials included an annual outreach calendar of countywide events, and partner agencies agreed to sign up for to attend the event, provide Go Before You Show materials, and encourage pregnant women to seek early prenatal care. Partner agencies were also invaluable in facilitating community member feedback and helping to organize focus groups.

OUTCOMES

Did you test or evaluate your campaign? If so, how?

Since the campaign began in 2006, data on rates of early entry to prenatal care were tracked to evaluate campaign effectiveness. Early work focused on communicating to prenatal care providers and Medi-Cal staff about the importance of early prenatal care and the need to reduce institutional barriers to care. To evaluate this work, data was collected on the average wait time for an appointment at various prenatal care provider sites and the average processing time for a Medi-Cal application for a pregnant woman.

Once campaign materials were introduced to educate the community directly about the importance of prenatal care, MCAH evaluated the effectiveness of the specific materials used. Surveys were conducted to determine the effectiveness of the outreach materials themselves, and information about the number and type of community members who were exposed to the materials was collected to evaluate the reach of the campaign.

A. Effectiveness of Outreach Materials

The survey revealed relatively positive feedback about the material design from the respondents:

67% of respondents agreed or strongly agreed that the materials capture their attention.

61% of respondents agreed or strongly agreed that the materials motivate them to share the information to pregnant moms.

83% of respondents agreed or strongly agreed that the materials provide the right information about seeking prenatal care.

2/3 of respondents agreed that the materials drive people to call the toll-free line.

To improve the outreach materials' design, respondents recommended simplifying the posters, using less text, choosing eye-catching photos to appeal to young adults, and using brighter colors to attract more people to notice them. Respondents also suggested placing the print materials where younger people congregate, such as in schools, campuses and movie theaters.

B. Impact of Outreach Campaign

To evaluate the reach of the Go Before You Show's outreach campaign, measures of "perceived impact" as well as direct impact were used. Perceived impact estimates the number of viewers of the materials in a given venue, and were provided by the marketing department of each venue location as an estimate of the number of patrons who would be exposed to the campaign materials:

Pre-show movie ads monthly views: Vacaville-67,942 monthly views, Fairfield – 63,898 monthly views, Vallejo – 46,562 monthly views

Bus campaign: 75,000 – 100,000 view bus shelter ads per month

Radio: 300,000 listeners for English radio ads, 51,400 listeners on Spanish radio ads

Bowling alley lane ads: 500,000 games played per year

Radio ads and radio station website leaderboard/banner advertising:

KMEL has 206,829 unique visitors on their website and 5 million page views per month.

- 34.8% of KMEL listeners are 18-24
- 50.4% of KMEL listeners are Black
- KMEL Ranks #2 among females age 12-34 (Metro)

KUIC has over 250,000 listeners each week. Radio reaches commuters in Solano County. The average commute time in Solano County is over 1 hour per day. 1 out of 2 people in Solano County is exposed to KUIC each week.

Spanish language public service announcements were also carried on Poderosa 107.3 and Radio 89.1. Flyers were posted at apartment complexes, restaurants, Laundromats, check cashing businesses, libraries, shelters and grocery stores, reaching an unspecified number of additional viewers.

Direct impact estimates considered the number of calls that were referred from the Go Before You Show campaign, Go Before You Show/ BabyFirst Solano flyer distribution at health fairs and clinics, and the BabyFirst Solano website. However, due to technical difficulties in tracking call volume and challenges with client recall of where they encountered the toll free number, it was difficult to estimate the percentage increase of women calling the toll-free line as a result of the Go Before You Show campaign.

What were the outcomes of this campaign? To what extent were your objectives achieved?

The Go Before You Show campaign produced outcomes at both the institutional and population-based level. Most significantly, rates of early entry into prenatal care increased among women insured by Medi-Cal from 49.8% in 2006, the year that Go Before You Show began to introduce campaign materials, to 61.5% in the following year, continuing to rise to 67.0% by 2012, an 34% increase overall.

Among the populations of special interest to the BabyFirst Collaborative, rates of early entry to prenatal care for teens increased from 53.1% in 2006 to 62.2% in 2012. Rates of early entry to care for African-American women increased from 65.7% in 2006 to 75.1% in 2012. Rates of early entry to care among Hispanics increased from 65.6% in 2006 to 75.0.1% in 2012. Rates of prenatal care among substance using women are not available due to lack of data.

At the institutional level, average processing time for Medi-Cal applications for pregnant women fell from 97 days in 2006 to 29 days in the years since.

Other positive outcomes of the campaign included better communication between prenatal care providers, Solano County Public Health staff and other stakeholders, better coordination with partners representing prenatal care insurance, including Solano County Employment and Eligibility staff and organizations that work to improve accessibility of health insurance, including Medi-Cal, and subsequent health initiatives and grant opportunities which were facilitated by the relationships formed during the Go Before You Show campaign.

To what extent does the campaign shift thinking about health from individual medical care to community / public health / equity issues?

The Go Before you Show campaign was designed to increase both individual awareness of the importance of early prenatal care, as well as build community-wide support for structures to better address the need for early prenatal care in disadvantaged communities. Meetings held with providers and policymakers emphasized disparities in the rates of early entry to prenatal care between

race/ethnic groups, and between women insured by private insurance vs. those insured by Medi-Cal. Specific outreach was done to bring the Go Before You Show message and materials to the County's Employment and Eligibility Department, to emphasize the importance of facilitating a woman's entry into prenatal care, both by direct referral and by increasing the speed at which pregnancy-related Medi-Cal claims were processed. The Go Before You Show campaign also included focus groups with specific communities of concern, including African-American women, Hispanic women, teens and substance using women. The information around barriers to care for these groups was then transmitted back to providers, policymakers and the community at large as a means of raising awareness of the social justice and equity issues which influence disparate rates of prenatal care. Prenatal care providers and policymakers developed a better understanding of barriers to care at the provider and institutional level, not just the individual level. Health care providers and government agencies became aware of changes their organizations need to adopt to improve the accessibility of prenatal care.

To what extent were earned media articles, letters to the editor, and op-eds published about this project?

This project was publicized in the media by press releases which were carried in local newspapers and public service announcement ad time which was provided by local radio stations and magazines. Articles were printed in the Spanish language magazine La Voz, the Grapevine, the Solano Coalition for Better health featured the campaign in an article for the Vacaville Reporter, and work was publicized in the Maternal, Child and Adolescent Health Newsletter. The primary vehicle for the campaign was print ads of the Go Before You Show campaign materials which were included in pre-show movie ads, mall kiosks, bus shelters, and were posted in numerous locations and businesses.

To what extent does the campaign inform and lead to personal and collective action to improve population health?

The Go Before You Show campaign was designed to operate on multiple levels. Campaign materials speak to individual pregnant women, encouraging them to seek early prenatal care. However, the selection and distribution plan for the materials was intentionally created as part of a collaborative effort between prenatal care providers, the county, and community based organizations in an effort to promote shared responsibility and collective action to address a community health problem. This collaborative partnership encouraged participants to examine their role in the health care system and to look for areas where better integration could lead to better service delivery. The Go Before You Show campaign outreach plan included outreach to a variety of community groups to raise awareness of infant birth outcomes as a population health issue as well as a social justice issue, and encouraged their participation in supporting the Go Before You Show campaign at the community level.

How have you used what you have learned from this experience? How will use what you have learned to improve your next communications campaign?

An important lesson was the importance of planning evaluation strategies early and building systems for collection and analysis of data into the campaign from the beginning. These systems will allow for evaluation of effectiveness as the campaign progresses, and enable the program to make changes as needed. Also critical was the inclusion of input from the affected community, and a continuing dialogue about the purpose and implementation of the campaign, to ensure that the message is appropriate and

adequately addresses the community's concerns. Lastly, it was important to seek technical assistance and guidance from consultants/experts in media outreach, to better guide the work.

Based on these lessons, future communication campaigns will include agreements for technical assistance and have a more detailed evaluation plan in place before campaign launch, and will incorporate ongoing focus group feedback with members of the target communities.

IMPACT

Was baseline data collected for the target audience prior to campaign implementation?

Prior to campaign implementation, data was collected from the Maternal, Child and Adolescent Health Five Year Needs Assessment to evaluate rates of early entry into prenatal care, as well as additional and more complex analysis with data collected from the Solano County Automated Vital Statistics System.

Were results among the target audience measured during the campaign?

Rates of early entry to care for the county as a whole and for specific subgroups was collected and reviewed every year. Campaign materials encouraged women to utilize the county's toll-free line for assistance with referral to prenatal care and prenatal care insurance, and the number of calls to the toll-free line was tracked before and during the campaign. In addition, specific evaluation of the effectiveness of campaign materials was done with target audience members.

How were youth, disadvantaged populations, and other groups at high risk included in the development and public voice of the campaign?

Based on the initial needs assessment and community feedback, the BabyFirst campaign focused on four groups at highest risk of late entry into prenatal care and/or poor birth outcomes: African-American women, Hispanic women, teens, and substance-using women. BabyFirst Solano recruited women from each of the target communities to participate in focus groups where they could share information on their perceived barriers to prenatal care, and the factors which motivated them to receive care. Focus group participants also reviewed the campaign materials and provided input on the format and look of campaign materials, the information provided, and the distribution plan for making the materials available to the public.

Were social media, mobile phones, and other technology utilized in the campaign?

The Go Before You Show campaign was launched in conjunction with a BabyFirst website which provided additional detail about the importance of prenatal care and with information on how to connect with a prenatal care guidance navigator who would assist with referral to prenatal care insurance and medical care. The MCAH Bureau is currently working to add a Facebook page to further publicize Go Before You Show.

Can we share this application with other local health officials who are interested in communications best practices?

Yes.

Please email your completed application by Friday, May 27, 2016 to:

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