

Healthy Delaware 2010 Market Research

Preliminary Findings of
Stakeholder Interviews, Focus
Groups, & Marketing Audits

*Public Health Foundation
The Nixon Group*

Purposes

- Learn from Delaware stakeholders and potential partners before planning begins
- Develop a plan that people will use
- Learn how to involve partners
- Create an effective marketing and communication plan

Methods

- Individual interviews (60-90 min.)
- Focus groups (2 hours)
- Telephone interviews (20 min.)

Completed Mid-July

- 33 Public Health Foundation
- 17 Nixon Group

Time Line

Final interviews

ASAP

Written report

July 30

Send to Steering
Group

Early August

Marketing Plan

August 31

Top Health Concerns

- Access to care, care for uninsured (adults > children, undocumented residents, elderly)
- Cancer
- Substance Abuse
- Mental Health
- Health disparities among racial and ethnic groups (esp. growing Latino population)
- Transportation
- Teen pregnancy and parenthood

Top Health Concerns

- Lifestyle behaviors (physical activity, not tobacco)
- Oral health
- School health
- Accountability
- System issues concern government and those in the system, not communities
 - tracking/improving health ins. plan performance
 - data sharing among agencies and hospitals
 - evaluating outcomes -- the “big picture”

Perceptions of Healthy Delaware

- Most have heard of Healthy Delaware, unclear on the purpose or success
- Government--most recognition
- Business--least
- First response: "Healthy Delaware" sounds like another government initiative
- *What happened to Healthy Delaware 2000?*
 - Frequent and strong concerns about follow up (organizations need follow-up for credibility)
 - Came and went

Perceptions of Plans

- Most say plans have little impact or use on daily basis
- Community groups skeptical of government plans
- Government agrees that people should use plans, but don't

Use of Plans

- Plans that get used:
 - practical strategies and measurable
 - required by legislators or funders
 - agency strategic or program plans
- Reasons not to use plans:
 - react to crises, no ability to choose
 - vague, impractical, prescription for all
 - not consulted in development

How People Choose Issues to Address

- Most do their own assessment, respond to internal influences (surveys, consumer input, supervisor, members)
- External influences:
 - Government: legislation, funding, leaders, media, citizens
 - Community: association office, resources, partnership opportunities, parents

Impressions of Public Health

- “Public health” = DPH
- Favorable opinion of DPH is tied to staff
- Hospitals, legislators and the public see public health as service delivery system (sick care)
- Unclear on public health’s role, seen as struggling
- Strong desire for public health to define its role, focus on prevention, & identify what needs to be done--not necessarily do
- Mixed reaction from private groups whether public health is relevant to them

Ideas for Healthy Delaware 2010

- Whose plan is it?
- Scope of plan
- Content & characteristics
- Motivation to use

Whose plan is it?

- A “people’s plan” --the more who think it’s theirs, the better
- Not government, DPH, or DHHS
but get in the hands of candidates
- Desire by community groups and government to to be listed
- DPH: accountable, official “pest”

Scope of Plan

- An overall wellness plan--how Delaware can be healthy
- Community groups see housing, transportation, poverty as central
- Substance abuse, mental health, environmental health (lesser extent)
- Take on system issues in the background to issues people care about

Content & Characteristics

- Set priorities--focus attention
 - 28 areas is too many (10)
 - shorter term, plan to update
 - better to do few things well
 - objective process
 - be flexible, take advantage of opportunities

Content & Characteristics

- Specific strategies (policy, program)
 - much more specific than 2000 plan
 - differences for rural, urban, populations
 - show how can make an impact
- Resources
 - contacts, funding resources, tools

Content & Characteristics

- Accountability
 - list who will make sure this is done
 - list the key players
 - let everyone see others' roles
- Put details elsewhere
- Humanize it--stories, people
- Focus on the positive

Motivation to Use

- Resources (private sector, community)
- Access to technical assistance (community groups)
 - informal, “no forms, no hassle”
 - Healthy Delaware Office, Office of Technical Assistance
- Partner status

Motivation to Use

- Clear mechanisms for action
- Personal stories (leaders and communities)
- Advocacy groups speak out
- Managers tie to employee performance
- Leverage as purchaser of health care
- Economic incentives, bottom line

Marketing Approach

- Healthy Delaware needs to stick out from the rest
- Specific appeals to media, government, health & community organizations, and business
- Win over leaders (top-down)

Communication

Business

- Fax and email
- Purpose must be clear at outset

Health Assns./ Organizations

- e-mail, newsletters
- speakers, seminars
- Purpose tied to mission, marketed individually

Communication

Government

- Face to face (not newsletters)
- Leaders, seminars, speakers

Media

- Upper management
- Skeptical: must impact community, lives of Delawareans
- fax, email, word of mouth

Targeted Versions of Healthy Delaware?

Support for the idea

- General summary/booklet--YES
- Web--YES
- Schools--YES
- Business--Probably yes, more info.
- Special Populations--NO
- Health/Community Agencies--NO
- Environmental Health--LATER

Engaging Partners

- Who should be involved?
- How to involve audiences in development & implementation
- How to involve in marketing

Who should be involved?

- Include everyone--all levels
 - People with clout (private sector, minority)
- People who have responsibility to implement or track must be involved up front
- Politicians
- Business--boosts credibility

Involvement in Initiative

- Very willing to assist in all areas (except \$ for community groups, public advocacy for gov't)
- Need specific appeal needed prompts except for comment on plan and serve on committee
- Interest in doing more, finding connections with other areas

Involvement in Marketing

- Non-profits are very interested in working to promote HD 2010
 - newsletter articles, use logo, mail plan to constituents
- Private sector willing to volunteer-- use individuals to bring in company
- Want everything "ready to go"
- *Need a Marketing Committee*

Overarching Themes

- Broad partnerships and input
- Specific recommendations and action steps to achieve
- Updates and accountability to keep initiative alive
- Positive, clear, and relevant to communities