Communicating Public Health: Why Do We Have to Market Something Everyone Should Already Want

June 19, 2013

Fred Fridinger
Chief, Strategic and Proactive Communication Branch
Division of Communication Services
Office of the Associate Director for Communication
Centers for Disease Control and Prevention
What is Health Marketing?

An organizational function and a set of scientific processes for creating, communicating, and delivering value to customers and for managing customer relationships in ways that protect and promote the health of diverse populations.¹

A multi-disciplinary area of practice.

¹ Based on marketing definition by the American Marketing Association.
Commercial Marketing

Market research, Audience segmentation, Sales and marketing metrics

Products
Brands

Sales Force
Distributors
Retailers

Customers

(Product development, Packaging, Placement, Promotion (B2B/DTC)
Health Marketing

Products:
CDC’s Research, Science, Evidence-based-advice

Audience research, Formative research, Public engagement, Partner engagement

Customers:
“The Public”
Individuals Institutions Communities US pops Global pops

Customers:
Health profs Partners

Translating research to practice (B2B), Health communication and marketing (DTC)
CDC Health Marketing Model

**Products:**
- CDC’s Research
- Science
- Evidence-based advice

**Customers:**
- “The Public”
- Individuals
- Institutions
- Communities
- US pops
- Global pops

**Customers:**
- Health profs
- Partners

**CIOs**
- PHIRE
- EpiX
- HAN
- 800-CDC-INFO

**Online Resources:**
- www.CDC.gov

**Brands:**
- MMWR
- Campaigns
- Podcasts
- CDC-TV
- Guide to Community Preventive Services
What is Social Marketing?
Social Marketing

• The application of commercial marketing techniques to produce voluntary behavior change
• Customer-driven, willing to change product, data-driven
• Rooted in social and behavioral theory
What it is

- A social or behavior change strategy
- A systematic and strategic planning process
- A way of thinking/mindset about addressing problems
- A total package of strategies carefully chosen based on characteristics of the target audience
What it is not

- Just advertising
- Just communication
- A social media campaign
- Reaching everyone
- A fast process
Hard to reach

Ask what is wrong with our offer, not what is wrong with them.
Competition

• They can *go* somewhere else
• They can *do* something else
• They must find your offer *more attractive*
Marketing Mind-set

• What is *wrong* with our programs?
• What do we need to *offer* them to offset their costs?
• What would make our product *more attractive* than our competition?
**Audience Orientation**

- Put them at the center of every decision
- Must understand barriers *from their perspective*
- You, your child, your mother are NOT the target audience
- Avoid the N of 1 syndrome
Consumer-based Health Communications to be Answered:

• Who should the program target?
• What should the audience be encouraged to do?
• What should we promise the audience?
• How can we make this promise credible?
• How and when should we reach this audience?
• What image should we convey? (branding)
The Four “P’s”

Product, Price, Place, Promotion

- Four domains of influence to consider when planning intervention activities for reaching a target audience from multiple perspectives
Social Marketing: A model for voluntary behavior change interventions
Figure 5.2  Factors and Forces Influencing Your Target Market and Your Efforts
SWOT Exercise

• Identify an organization that will develop the plan

• Then identify S.W.O.T.:
  – Strengths
  – Weaknesses
  – Opportunities
  – Threats
### Internal Factors

**Strengths:**
- Open 24 hours a day, seven days a week
- Low-cost (sliding scale)
- Easy access
- Contact is in a position in which change can be affected
- Lack of competition

**Weaknesses:**
- Initial limitation of staff
- Construction takes time
- Limited knowledge of community concerning health services

### External Factors

**Opportunities:**
- Mobile unit enhances reach
- Lack of competition

**Threats:**
- Grant limitations
- State allowances being cut
Principle One: Know Your Audience
Know Your Audience:

- Who are they?
- What do they want and need?
Audience Segmentation, Selection and Analysis
Marketing is about tailoring offerings that address all three levels of the Socioecological Model.

Environmental: Where we live, work, and play.

Interpersonal: Who we know, spend time with, & care about.

Intrapersonal: What we think, know and feel.

Socioecological Marketing
Why Segment Populations?

Even though people share some similar demographics, people often differ on the SEM factors needed for effective behavior change programs.
“Are all adolescent females enough alike on the important and changeable factors that influence pregnancy prevention that the same set of program elements is likely to work equally well for all teen females?”
A 3-Step Process

#1: Segment the market
#2: Evaluate segments
#3: Choose one or more for targeting
Focus in on Segments

• Segment must have meaning related to your target behavior
• Demographics alone just don’t cut it!
  – All women are not the same
  – All Hispanics are not the same
  – All people living in Atlanta are not the same
  – All people who don’t eat 5 A Day are not the same
Why Segment? People Differ!

- in health knowledge, motivations, beliefs
- in access to behaviors and social norms
- in life path points, media habits, cultural values
- in non-health motivations, beliefs, traits
- communication is filtered through these differences
Segment selection criteria

• Consider two major factors -
  1) *organizational characteristics*
     – the fit and resources to reach potential audiences/segments
     – political situation surrounding audiences
Segment selection criteria

2) segment’s characteristics
   – size of group
   – problem incidence
   – severity of outcomes in segment
   – readiness to change (general responsiveness)
   – ability to influence others/or be influenced
   – ability to reach
   – unique or unserved segment (vulnerability)
Markets of Greatest Opportunity

- Greatest need
- Most ready for action
- Easiest to reach
- Best organizational match
Where are the data?

“Don’t accept your dog’s admiration as conclusive proof that you are wonderful.”

— Ann Landers
Data Sources

National Health Interview Survey
National Health and Nutrition Examination Survey
Behavioral Risk Factor Surveillance System
Youth Risk Behavior Surveillance System
School Health Policies and Programs Study
National Household Travel Survey
Consumer Expenditure Survey
Health Plan Employer Data and Information Set
State Legislative Information
Legal Research Data
Media Market and Sales Data
Some NCHS data systems and surveys are ongoing annual systems while others are conducted periodically. NCHS has two major types of data systems: systems based on populations, containing data collected through personal interviews or examinations; and systems based on records, containing data collected from vital and medical records.

National Health Interview Survey
- National Health Interview Survey on Disability

National Health and Nutrition Examination Survey
- NHANES I Epidemiologic Followup Study

National Health Care Survey
- Ambulatory Health Care Data (NAMCS/NHAMCS)
- Hospital Discharge and Ambulatory Surgery Data
- National Home and Hospice Care Survey
Available at: www.cdc.gov/brfss

Behavioral Risk Factor Surveillance System

Turning Information Into Health

The BRFSS, the world’s largest telephone survey, tracks health risks in the United States. Information from the survey is used to improve the health of the American people.

Please select a content focus:

- Interactive Databases
- Interactive BRFSS Maps
- Survey Data Files & Questionnaires
- About the BRFSS & Learning Resources

Interactive Databases

Prevalence Data
Information on health risks in your state and in the nation.

Trends Data
Healthy Youth!
Data & Statistics
YRBSS: Youth Risk Behavior Surveillance System

Notice:
Error in 2003 National YRBS Data


Youth Online: Comprehensive Results

State Fact Sheets, 2003
Selected results for the United States and by individual states, including mortality data on leading causes of death.

Slide Set
The 2003 YRBS results are available as a Power Point presentation.

IN THE NEWS
Methodology of the YRBSS [pdf 270K]
Risky Behaviors [pdf 70K]

MORE YRBSS PUBLICATIONS
About the YRBSS
Trend Fact Sheets
Reports and Journal Articles
MMWR Surveillance Summaries
2005 QUESTIONNAIRES
Youth Risk Behavior Survey (pdf A4X1)
The Consumer Expenditure Survey (CE) program consists of two surveys collected for the Bureau of Labor Statistics by the Census Bureau — the quarterly Interview survey and the Diary survey — that provide information on the buying habits of American consumers, including data on their expenditures, income, and consumer unit (families and single consumers) characteristics.

- General Overview
- Economic News Releases
- Special Notices
- Tables Created by BLS
- Get Detailed CE Statistics
- Products
- Survey Forms
- Publications and Other Documentation
- Related Links
- Frequently Asked Questions
- Contact Us

GENERAL OVERVIEW:
- Overview
- About CE Tables
- Glossary of terms
- Contacts
- FAQs

ECONOMIC NEWS RELEASES:
- Current
Available at: www.nielsenmedia.com
### CDC.gov Primary Audiences

#### Leadership Rank

<table>
<thead>
<tr>
<th>#1 (Public Health Professionals)</th>
<th>#2 (Healthcare Providers)</th>
<th>#3 (Consumers)</th>
</tr>
</thead>
<tbody>
<tr>
<td>![Image 1]</td>
<td>![Image 2]</td>
<td>![Image 3]</td>
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</tbody>
</table>

#### Percent of Current Users:

<table>
<thead>
<tr>
<th></th>
<th>Public Health Professionals</th>
<th>Healthcare Providers</th>
<th>Consumers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percent of Current Users:</td>
<td>19% (N=215)</td>
<td>22% (N=246)</td>
<td>15% (N=170)</td>
</tr>
</tbody>
</table>

#### Primary Reason for Visiting the Site Today:

<table>
<thead>
<tr>
<th>Public Health Professionals</th>
<th>Healthcare Providers</th>
<th>Consumers</th>
</tr>
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#### Primarily Looking For:

<table>
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<tr>
<th>Public Health Professionals</th>
<th>Healthcare Providers</th>
<th>Consumers</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Disease Prevention</td>
<td>2. Health Promotion</td>
<td>2. Diseases &amp; Conditions</td>
</tr>
<tr>
<td>3. Health Promotion</td>
<td>3. Vaccinations / Immunizations</td>
<td>3a. Healthy Living (Tie for 3rd)</td>
</tr>
</tbody>
</table>

#### Current Satisfaction:

<table>
<thead>
<tr>
<th></th>
<th>Public Health Professionals</th>
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<th>Consumers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current Satisfaction</td>
<td>73</td>
<td>82</td>
<td>69</td>
</tr>
</tbody>
</table>
Principle Two (Key!):

- Focus on Behavior Change.
Focus on Behavior Change

• What will I help them do?
Target a Change in Behavior

• The end point is ACTION
• What do you want your target audience to DO as a result of your intervention?
• Is that clear to THEM?
• Try segmenting based on similar behaviors
Social Marketing: A model for voluntary behavior change interventions
Product

- Anything that can be offered to a market to satisfy a want or need
Product

Product refers to:

1. The desired behavior and associated benefits you are asking the audience to do

2. Tangible objects or services that support or facilitate behavior change
Actual Product = The desired behavior

Core Product = The key benefit(s) associated w/the behavior

Augmented Product = Tangible objects & services to support behavior change behavior
Actual Product

• Specific behavior we are promoting
• More specific than the core idea (e.g., eat 5 to 9 f&v per day vs. healthy eating)
• Will achieve the benefits (core product)
Actual Product

• Can include brand (sponsors or endorsements) for credibility
Core Product

• What is the service or key benefit being offered (according to your target audience)?

• What does the consumer feel they are getting?
Charles Revson of Revlon

“In the factory we make cosmetics; in the store, we sell hope”
Augmented Product

• Tangible objects and services promoted along with the desired behaviors
The more the conditions of a social (marketing) campaign resemble those of a product campaign, the more successful the campaign will be.
Based on strong evidence of effectiveness for producing intended behavior changes, the Community Preventive Services Task Force recommends *health communication campaigns that use multiple channels, one of which must be mass media, combined with the distribution of free or reduced-price health-related products* (defined below).

Because results were positive across all of the six behaviors evaluated, the Community Preventive Services Task Force concluded that *these findings are likely to apply to a broader range of health-related products* that meet the review's product eligibility criteria in the intervention definition. The effectiveness of interventions promoting the use of *health-related products* other than those distributed in the reviewed studies should be assessed to ensure applicability.

- *The Guide to Community Preventive Services 2012*
<table>
<thead>
<tr>
<th>Core Product</th>
<th>Actual Product</th>
<th>Augmented Products</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Increasing resident’s knowledge of preventable health conditions.</td>
<td>• Visiting the health center for preventive information.</td>
<td>• Health education flyer/ card.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• “Quick Preventive Tips” send both by e-mail and by text messages.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Free healthy snacks with a “health reminder” attached to the snacks.</td>
</tr>
</tbody>
</table>
What is a Brand?

A name, term, design, symbol, or any other feature that identifies one seller's good or service as distinct from those of other sellers.

- American Marketing Association®
Why Branding?

“If this business were split up, I would give you the land and brick and mortar, and I would keep the brands and trademarks, and I would fare better than you.”

– John Steward, co-founder of Quaker Oats®
Characteristics of a Brand

• Exists only in the mind of the customer – not the company!
• Typically summed up in a few words or symbols
• A single thought of accumulated experiences and associations
• Communicates a promise
• Differentiates from alternative choices
• Represents values, idea and personality
• *Establishes trust and simplifies buying and using the product or service*
Thus, a Brand is Not Just a...

- Logo
- Name
- Tagline

Just Do It
Controllable Ingredients of a Brand

- Core positioning statement
- Consistent messaging
- Customer relationship systems
- Name and tagline
- Logo or symbol
- Color schemes and fonts
- Use of imagery
A Brand is not singularly any of these things, but a combination of these things controlled by the company which generates expectations, associations and experiences with a customer.
iPod®: Not This..
iPod®: ...But That
Target®: Not This..
Target®: But That
McDonald’s® - Young Kids
McDonald’s® - Adults
CDC 24/7

Strengthening Your Community

CDC provides state and local public health departments with resources and support to protect you from health threats.

- Improve capacity and performance of public health agencies to detect and respond to health events
- Make programs and services more efficient and effective to protect the public’s health
- Provide specialized education and training for new public health officials and public health professionals
Why Branding?

- Branding is simply a more efficient way to sell things
- Supports business strategy
- The emotional bridge between your marketing mix and your customer
Branding and the Marketing Mix

- Product
- Price
- Promotion
- Place
- People
- Partners
- Policy
- Packaging

Brand Promise

Brand Bridge

CUSTOMERS
- Experiences
- Associations
- Thoughts
- Expectations
  - Value
  - Beliefs

Brand Image
Branding vs Positioning

• Positioning statements provide parameters and inspiration for developing your desired brand identity.
Positioning = The act of designing the organization’s actual and perceived offering in such a way that it lands on and occupies a “distinctive place” in the TA’s mind – where you want it to be?

- Provides reason why target audience would want to “buy the product” from you
- *After researched Target Audience* and *before* develop marketing mix
Positioning statement

• *We want* [TARGET AUDIENCE] to see [DESIRED BEHAVIOR] *as* [DESCRIPTIVE PHASE] *and as more important and beneficial than* [COMPETITION]
College Health Center
Positioning Statement

• We want community residents to see visiting the college health and wellness clinic for both sick and well visits, and promotional prevention activities, as beneficial to their health and well-being and as more important and beneficial than not going to the health and wellness center.
Principle Three:

• Know what influences their behavior.
Know What Influences Their Behavior:

• What can I offer them?
• How will they benefit?
Know What Influences Their Behavior:

- What price must people pay?
- What barriers will they encounter?
Know What Influences Their Behavior:

• Do they have the skills?
• Do they have the confidence?
Know What Influences Their Behavior:

• What do people that they respect want them to do?
Research Plan

- Qualitative Data: Focus Groups
- Quantitative Data: Surveys
- Compliance: Social Networking and GSC Alumni Department
- Advisory Board: Glenville State College faculty members, students, health professionals and community members
Desired Behavior: We would like the students to do is to visit the health and wellness facility for not only sick visits but for well visits as well.

Benefits

• Improved health status
• Increased self-efficacy toward healthier living

Barriers

• Time constraints
• Lack of knowledge of the center’s services and health education offerings
• Low self-efficacy of the residents to visit the center

Competition: Not visiting the health facility
Key Health concerns Among the Public

- Participants were asked to identify their main health-related concern in their communities
  - In every group, **affordability of and accessibility to health care** were cited as major concerns
  - Health care costs and access issues were often the primary concern, overriding specific disease or health concerns
    - Across all groups, participants frequently expressed concern about **cancer, diabetes, and children’s health/well-being**
    - Concerns about access to and affordability of healthy living were not top-of-mind for most participants
Words Used When Envisioning a Healthy, Vibrant [Community]
Principle Four:

• What is the Right Price?
• How can I lower the Price and Other Barriers?
Social Marketing: A model for voluntary behavior change interventions
Price

Price refers to the costs (financial, emotional, psychological, or time costs) or barriers the audience members face in making the desired behavior change.

Leads you to plan interventions that reduce the costs of the desired behavior or increase the costs of the competing risk behavior.
Exchange

• Our actions are asking people to give up, modify, or start a new behavior.
• Your offering must have appeal.
• Tangible exchange
  – Pay a quarter and get more fries
• Intangible exchange
  – Buy Nike and get everything that goes with the image of the brand
Ways to make the target behavior more attractive

- \( \uparrow \) benefits of target behavior
- \( \downarrow \) barriers to the target behavior
- \( \downarrow \) benefits of the competing behavior
- \( \uparrow \) barriers of the competing behavior
## Competitive Analysis

### Table 8.4 Identifying Perceived Barriers and Benefits of the Competition

<table>
<thead>
<tr>
<th>Audience Perceptions</th>
<th>Desired Behavior</th>
<th>Competing Behavior</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><em>Use a Litterbag in the Car</em></td>
<td><em>Tossing Fast-Food Bags Out the Window</em></td>
</tr>
<tr>
<td>Perceived benefits/motivators</td>
<td>It’s good role modeling for my kids.</td>
<td>It’s easier.</td>
</tr>
<tr>
<td></td>
<td>I am doing my part for the environment.</td>
<td>I avoid the smell of old food in my car.</td>
</tr>
<tr>
<td></td>
<td>I help save tax dollars.</td>
<td>I avoid the trash all over my car.</td>
</tr>
<tr>
<td></td>
<td>I don’t feel as guilty.</td>
<td>It gives prisoners a job to do.</td>
</tr>
<tr>
<td>Perceived barriers/costs</td>
<td>Having to find one and remember to put it in the car.</td>
<td>I might have to do community service and pick up litter.</td>
</tr>
<tr>
<td></td>
<td>Having liquid spill out of it.</td>
<td>I could get caught and fined.</td>
</tr>
<tr>
<td></td>
<td>Looking like a nerd with a white plastic bag in my black leather interior car.</td>
<td>I'm contributing to the litter on the roadways that looks bad and will have to be picked up.</td>
</tr>
</tbody>
</table>
College Health Center - Pricing

Increase Non-Monetary Benefits of the Desired Behavior

• Better Health
• Opportunity for social networking
• Increased self-efficacy for practicing healthy behaviors

Increase Monetary Costs for the Competing Behavior

• Increased Medical Costs
• Decreased ROM
Principle Five:

• What is the Right Place?
Social Marketing: A model for voluntary behavior change interventions
Place

Place is where and when the target audience:

1. Will perform the desired behavior
2. Will access program products/services
3. Is thinking about your health or safety issue

Leads you to offer services or products in a location and manner that it is convenient and pleasant for the target audience

Leads you to offer information when and where the audience is already thinking about your issue
Placement strategies (distribution channels) not the same as communication channels (e.g., print, broadcast, new media)
Distribution channels (commercial marketing)

- Physical locations (e.g., walking trails)
- Phone, mail, fax
- Internet
- Mobile units
- Where people shop
- Where people “hang out”
- Drive throughs
- Home delivery/house calls
- Kiosks; vending machines
Developing the Place Strategy

• #1 - Make the location closer (e.g., dental office on wheels)
• #2 - Extend hours (e.g., vote by mail)
• #3 - Point of Decision making (e.g., fruits & vegs at eye level in refrigerator)
• #4 - Make the location more appealing (e.g., bicycle paths for commuters)
• #5 - Overcome psychological barriers (e.g., pets on the net)
Developing the Place Strategy

• #6 - More accessible than the competition (e.g., HOV lanes)
• #7 - Make access to the competition more difficult or unpleasant (e.g., police cars outside convenience or liquor stores)
• #8 - Where target audience shops (e.g., mammograms in the mall)
• #9 - Where T.A. “hangs out” (e.g., college students at sporting events)
• #10 - Use existing distribution channels (e.g., electric company billing for ways to reduce energy costs)
Good placement strategies increase the product’s positioning and the organization’s image; and along with the product’s features, pricing and promotional strategies, are effective means to add to the core product.
College Health Center - Placement

- **Physical Locations**: Restaurants; adjacent to the city park
- **Cell Phone**: Text Message Reminders and Healthy Tips
- **Internet**: Calendar of Events
- **Where people “hang out”**: Restaurant Table-Top Highlights
- **Mobile units**: Accommodating Rural Community Members
Principle Six:

• What are the Right Promotional Activities?
Social Marketing: A model for voluntary behavior change interventions
Promotion

• Persuasive communications designed and delivered to inspire your target audience to action
Promotion

- **Messages** = Communicating what you want your target audience to **do**, **know**, and **believe**
- **Messengers** = **Who** will deliver the message
- **Creative Strategy** = **How** you want to say and show the message
- **Communication Channels** = **Where** and **when** your message will appear (separate from distribution channels)
Promotion

Includes the communication messages, materials, channels and activities that will effectively reach your audience to promote the benefits of the behavior change as well as the Product, Price and Place features of your program.

This is often confused with the entirety of marketing.
Our Channels are Changing

Average informed person reads or listens to 7 sources of information daily

http://www.curcuitcity.com
Now mainstream communication channels

- Product placement
- Social media (blogs, podcasts, YouTube, Second Life, etc.)
- Web sites (search engine marketing)
- Viral marketing (leveraging social networks – where interested consumers can market to each other)
Social Media Examples

• Web 2.0 applications
• Blogs and Webinars
• Social Networking
• Virtual worlds
• Streaming media
Mobile Health Marketing: KnowIT Campaign

• With HBO and KFF
• World AIDS Day
• Mobile Texting Campaign
• To encourage users to know their HIV status and to locate HIV testing facilities nearby
“Push” versus “Pull”

• Push = Initiated by marketer & directed towards customer thru various media (TV, radio, etc.)

• Pull = customer initiates action & marketer responds (e.g. Yahoo! or other search engine; mobile phones)
Integrated Marketing Communications

- Coordinates many communication channels to deliver a clear, consistent, message
- Consistency in slogans, images, colors, fonts, etc. – “consumer touchpoints”
- Example: CDC and “Safer. Healthier. People”
• Positioning Statement
  – We want community residents to see visiting the health and wellness center for both sick and well visits, and promotional prevention activities, as beneficial to their health and well-being and as more important and beneficial than not going to the health and wellness center.

• Media:
  – Focus on community-based materials, mobile phone text messages and internet materials.
CHC - Creative Strategy (cont.)

• **Tone:**
  – Messages should be youthful, energetic, and motivating to the residents. The messages should be mindful of residents’ lack of time, transportation and preference toward social interactions.

• **Openings:**
  – Around town Bulletin Boards, Utility Bills and E-mails, Town newspaper, Library, Radio Announcements, and other meeting areas.
CHC - Promotion

• **Message:**
  – We want our target audience to visit the health center, know how to modify their lifestyles to better their health and prevent preventable causes of death, and believe that they can continue these new healthy behaviors with their increased sense of self-efficacy and promote the center to their friends and family.

• **Messengers:**
  – Health center staff, health promotion department faculty and staff
Creative Strategy:
- By utilizing the “slice of life” creative strategy we believe we can connect our message to our target audience. Our logo will be Wild, Wonderful, Wellness - a play on West Virginia’s moto which is Wild, Wonderful, West Virginia

Communication Channels:
- When: Year-Round with featured events
Principle Seven:

• Use Integrated Strategies that Offer:
  • The Right Product
  • At the Right Price
  • In the Right Places
  • With the Right Promotional Strategies and Tactics
Marketing Mix

• Four “P’s” of marketing
  – Product
  – Price
  – Place
  – Promotion
  – You’ll probably need to add Politics
Marketing Mix

• Finally ready to develop & implement strategy
• You know
  – Target market profile
  – Desired behavior
  – Barriers, benefits & competition
  – Desired positioning
Thinking Like a Marketer:

• Focus on Behavior Change
• Who are They?
• What Will I Help Them Do?
“My question is: Are we making an impact?”
Resources

OADC has developed important tools and resources that will be made available to state and local governments. Visual presentation is a critical component of effective communications that will strengthen the impact of public health information used to promote behavioral change and ultimately prevent the spread of disease. The templates and resources provided will strengthen state and local outreach capabilities with professional, high-quality, products at no cost.

These tools will be hosted on OSTLTS SharePoint site, as well as linked to the Gateway Portal www.cdc.gov/healthcommunication.
To Be Available Tools & Resources

• Graphic Design Templates
• Rights-Free Stock Photography
• Medical Illustrations
• CDC-TV Health Matters Videos
• CDC Communications - Repurposed
• Podcasts
• Matte Articles
Thank You!

Any questions/comments, please send an email to: 
SPCBHealthMktg@cdc.gov

For more information please contact Centers for Disease Control and Prevention

1600 Clifton Road NE, Atlanta, GA 30333
Telephone: 1-800-CDC-INFO (232-4636)/TTY: 1-888-232-6348
Visit: www.cdc.gov | Contact CDC at: 1-800-CDC-INFO or www.cdc.gov/info

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.