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Enhancing the Adoption of Evidence-Based Health Marketing and Promotion Strategies in Local Communities: Building a Communication Dissemination and Support System for the National Diabetes Prevention Program

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Abstract

The Centers for Disease Control and Prevention (CDC) created a health communication marketing and promotion support system (support system) to help 10 CDC-funded national organizations (recipients) grow enrollment of underserved populations in the National Diabetes Prevention Program. This article describes the creation of a successful support system to increase the use of effective marketing approaches and key messaging. The support system was developed using a systematic approach. It included a needs assessment, audience research, marketing strategy identification, expert panel review, materials development, and dissemination guidance. Hands-on, individualized, and group end-user training and technical assistance was also included. Recipients received culturally and linguistically tailored marketing materials to support their specific priority audiences, as well as corresponding training on recommended dissemination methods. In in-depth key-informant interviews, staff from six recipients reported increased knowledge of local communities and audiences, efficacy and skills to conduct media interviews, capacity to identify and train champions and influencers, and greater community partner investments. With marketing support, 90% of recipients reported increased enrollment, of which 40% exceeded self-set targets and another 40% doubled or tripled their enrollment numbers. These findings indicate that a customized strategic health communication marketing and promotion support system presents a significant opportunity to help recipients increase enrollment in evidence-based interventions. Practitioners disseminating evidence-based interventions may consider a support system to increase program uptake.

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Keywords

diabetes; social marketing/health communications; technical assistance; evidence-based programs; marketing and promotion

ASSESSMENT OF NEED

Prediabetes affects 88 million adults in the United States, increasing their risk for type 2 diabetes, heart disease, and stroke. Prediabetes can be reversed through health behavior changes such as healthier eating, increased physical activity, and weight loss (Centers for Disease Control and Prevention [CDC], 2020). The CDC works to prevent or delay type 2 diabetes through the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP), an evidence-based approach to behavior change for people with prediabetes (CDC, 2020). The success of the National DPP is contingent on participant enrollment (CDC, 2020). Health marketing and promotion are essential to raising awareness of the program and driving enrollment (Andreason, 2004). While frontline staff know their priority populations and communities, they have varying levels of capacity to plan and execute comprehensive marketing activities.

Using the knowledge to action framework as a guide, we created a comprehensive support system to deliver tailored and coordinated promotional materials, and training and technical assistance (TTA) to enhance LCP marketing efforts (Wilson et al., 2011). The framework guided the identification of marketing and promotion best practices to increase adoption of evidence-based strategies that effectively support LCP enrollment.

DESCRIPTION OF INNOVATION

In 2017, CDC funded 10 recipients with community-based program delivery sites (affiliates) to increase enrollment of individuals who are underrepresented in or who have not had access to LCPs (although *Health Promotion Practice* recommends "health behavior change" rather than "lifestyle change," we use LCP to be consistent with National DPP terminology). To support recipients' marketing and promotion activities, CDC, in collaboration with global communications agency ICF, developed a marketing support system illustrated in Figure 1 (Kreuter & Wang, 2015). First, we simultaneously conducted a recipient needs assessment and priority audience research. Through these activities, the team identified recipient needs and effective marketing, messaging, and promotion strategies for priority audiences. Recommendations were given to an expert panel proposing various strategies and tactics to help recipients increase their marketing capacity and effectiveness. Finally, the team used the panel's feedback to develop a support plan and menu of practice-ready marketing materials and training resources to distribute to recipients and affiliates. Through continuous recipient and expert feedback, support services evolved to become more effective at reaching priority audiences.

STEP 1: UNDERSTANDING RECIPIENT NEEDS AND PRIORITY AUDIENCES

We began with a needs assessment and audience research to understand recipient marketing needs, priority audiences, and promotion opportunities. The needs assessment included review of recipient documents and in-depth interviews to identify gaps in marketing and promotion implementation capacity, material and TTA needs, and recipient's delivery of TTA to affiliates. Audience research identified tailored marketing strategies, audience messaging, and dissemination channels. Literature review and input from experts informed development of audience profiles, which included information about cultural nuances such as beliefs, barriers to health, and preferred types of messaging. Insights about recipients and priority populations guided the team's recommended strategies, messaging, and tactics.

STEP 2: EXPERT PANEL REVIEW OF RECOMMENDED STRATEGIES AND TACTICS

Based on insights, the team developed a recipient support plan with recommended marketing and promotion strategies, tactics, materials, and TTA approach for CDC's expert panel review to ensure the selected approaches matched end-user needs. For example, recipients expressed a need for priority audience tailored marketing tactics and materials that were user-friendly, easily adaptable with local LCP information, and usable across multiple communication channels. The panel approved the recommendations and provided continuous review throughout plan implementation.

STEP 3: MARKETING MATERIAL DESIGN

The team developed practice-ready marketing products intentionally designed to elicit behavior change among priority audiences and recommendations for their use. Types and formats of the materials were multifaceted and based on priority audiences' channel and influencer preferences. Infographics, social media posts, drop-in articles, flyers, radio announcements, and influencer/champion talking points formed a menu of resources from which recipients could select based on program priorities.

STEP 4: DISSEMINATION AND TRAINING AND TECHNICAL ASSISTANCE

Marketing and promotion materials were disseminated to recipients for use by affiliates. We provided a mix of TTA to increase buy-in and accommodate recipients' shifting needs. TTA included face-to-face recipient events, peer learning, live and recorded webinars, job aids, and consultation to address specific needs. To complement the audience profiles, comprehensive market profiles *provided* audience demographic and behavioral data specific to affiliate sites. Both profiles outlined priority audiences' preferences for media usage, including print, digital, social media, and out-of-home media; preferred TV and radio formats; transportation preferences; and health and religious behaviors.

PRELIMINARY EVALUATION FINDINGS

More than 250 resources specific to 11 priority populations were developed for LCPs. Cumulatively 476 recipients, affiliates, and community partners attended the 12 trainings provided. During in-depth interviews, individuals from six recipient organizations reported increases in knowledge of local communities and audiences, confidence scheduling and conducting media interviews, and capacity to identify and train champions and influencers. All recipients reported that the robust library of materials, readily available templates, and responsive TTA facilitated their success.

Enrollment increased for nine of 10 recipients; four of 10 exceeded self-determined enrollment goals, and another four doubled or tripled enrollment numbers. During interviews, recipients reported using enrollment surveys to identify effective recruitment practices, including audience-specific tailored strategies and tactics, multichannel high-frequency efforts, use of champions/influencers, and relatable messages with clear calls to action. Challenges identified included internal organizational limitations, changing market conditions, adherence to joint branding standards, and limited local evaluation capacity. Recipients reported marketing support removed the burden to develop marketing materials, increased the frequency of promotion activities, encouraged consistent messaging, and enabled resource allocation to implement strategies that addressed their marketing challenges.

IMPLICATIONS FOR PRACTICE

This article describes a systematic way to design a support structure for the implementation of effective health-related marketing and promotion activities. Practitioners disseminating evidence-based interventions may consider a marketing support system to increase program uptake. This approach is unique because it focuses on identifying needs and implementing an informed method to address them while simultaneously building capacity to facilitate increased efficiency of marketing activities. Participants reported increased effectiveness of marketing tactics and ability to focus on hands-on, community-based strategies. Through a critical analysis of the needs and context of participating entities, an effective support system was accomplished to develop an informed, coordinated, and mission-driven approach supported by TTA to increase organizational marketing capacity to improve outcomes. The knowledge to action framework supported the connection of health marketing with the needs of the organizations implementing the intervention. We encourage future research to systematically study and formally evaluate the process and impact of marketing support.

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FIGURE 1. Health Communication Marketing Support System

Note. Marketing and promotion support system for identifying best practices and delivering tailored, coordinated training, technical assistance, and promotional materials that increase adoption of evidence-based strategies that effectively support enrollment in the National Diabetes Prevention Program lifestyle change program. CDC = Centers for Disease Control and Prevention.