The ACTION Campaign: Social Marketing as a Tool to Change Provider Behavior

THE UNIVERSITY of WISCONSIN MADISON

ACTION CAMPAIGN
ADOPTING CHANGES TO IMPROVE OUTCOMES NOW
An initiative of NIATx

Introduction

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Aims: According to Everett Rogers (1996), adoption of an innovation is a five-step process that begins with *knowledge* of the innovation and proceeds through *persuasion*, *decision*, *implementation* and *confirmation*. Adoption may be abandoned at any step in the process based on the difficulty of adoption and the value of the innovation compared to current behavior. Social marketing, using marketing techniques to achieve a social good, has been used extensively by the public health field to change behavior, but its value has not been widely tested in addressing organizational innovation adoption. The Adopting Changes to Improve Outcomes Now (ACTION) Campaign was an 18-month long national campaign that used social marketing strategies to entice addiction treatment providers to adopt one of 12 NIATx quality improvement practices (innovations) to increase access to and retention in treatment. Social marketing strategies employed included creating a partnership with leading behavioral health organizations at the state and national levels; print and electronic promotional materials; media outreach; presentations at key industry events; and a dedicated web site. We used data collected during the ACTION Campaign to identify the communication channels most likely to lead to a decision to adopt an innovation. Data also identified the barriers that led people to abandon the innovation between Rogers' decision and implementation steps.

Methods: We used Google Analytics data on peak usage, geographic location of usage, and page views to identify when specific web information and tools were most used and by whom. Sign up for the campaign was used as a marker for decision to adopt. We identified the most effective channels by dividing communication channels into categories and comparing sign up to time when they were used. Sign ups were compared to web hits to develop a conversion factor based on varying communication channels.
We analyzed survey data from 6, 12, and 18 months into the Campaign to identify reasons for implementing and reasons for abandonment between decision and implementation.

Results: The greatest number of sign ups occurred within 72 hours of national media attention. In states with high numbers of providers signing up, an ATTC, state or county authority, or a provider association also launched a local effort to increase participation (CA: 216, FL: 71, NC: 60, IL: 56, WI: 52, OH: 50) N=1203. Participant surveys cited Internet search as an additional communication channel. However, Google Analytics showed that most searches contained the term "ACTION" or "ACTION Campaign," indicating that the searcher was already looking for the site rather than general information on quality improvement. Conference presentations were more costly and less effective than other channels overall, though local conference presentations had the highest conversion factor from the number of people who signed up after obtaining information through that channel (CF=3.25 per 100). Survey data indicated that the channel most related to implementation was communication from a state provider association. The ease of adoption and fit with existing values and strategies appeared to have more influence on implementation than any particular message. Barriers reported were: "new to campaign and haven't started yet" (27%), "not enough time" (15%), and being overwhelmed by other responsibilities (12%) N=75. These responses remained the same whether the survey was done at 6, 12, or 18 months.

Conclusions: Specific social marketing tools can help move recipients through Roger's stages of adopting innovation. Newsletters and trade publications help people learn about an innovation, addressing the first stage, *knowledge*. The endorsement of authority figures can strongly influence the *decision* to adopt. Peer contact can influence *implementation*. The traits of the innovation itself are important both to *implementing* and *confirming* the adoption of an innovation. In the ACTION campaign, using these different tools at different times, along with messages emphasizing the benefit to both clients and organizations, effectively moved people from knowledge to implementation.

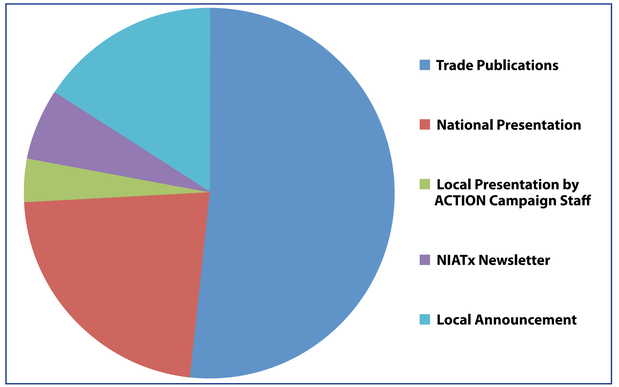
Project Description

The ACTION Campaign was an 18-month long national campaign that used social marketing strategies to entice addiction treatment providers to adopt one of 12 NIATx quality improvement practices to improve access to and retention in treatment.

Decision to Change:

Of 25% of the 1203 people that signed up for the campaign that we can attribute to one communication channel:

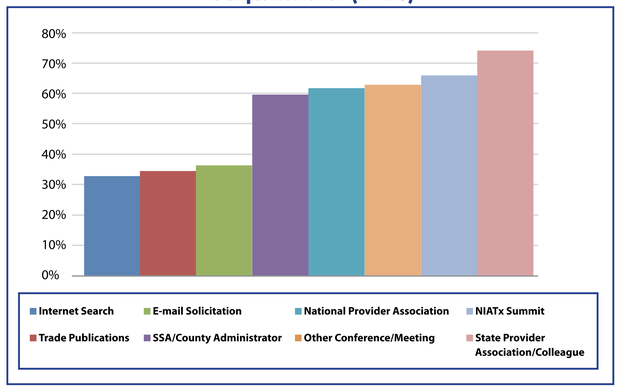
Number of Sign-ups Attributable to Communication Channel



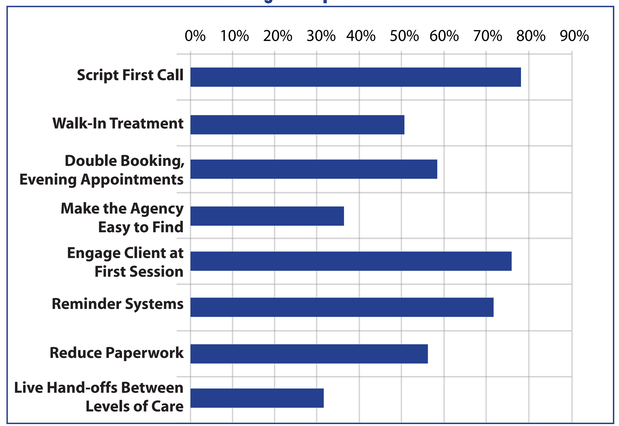
Conversion Factor for Communication Channels

Channel	Conversion from web hits to sign ups	Conversion from audience reach
Trade Publications	0.96	0.83
National Presentation	1.00	5.75
Local Presentation	0.27	3.25
NIATx Newsletter	0.95	1.75

Communication Channels That Led from Decision (Sign Up) to Implementation (N=126)



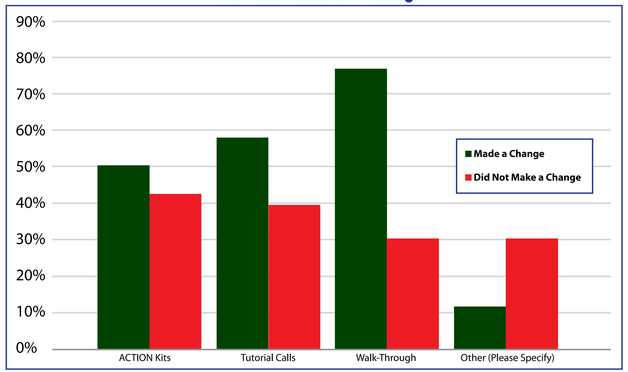
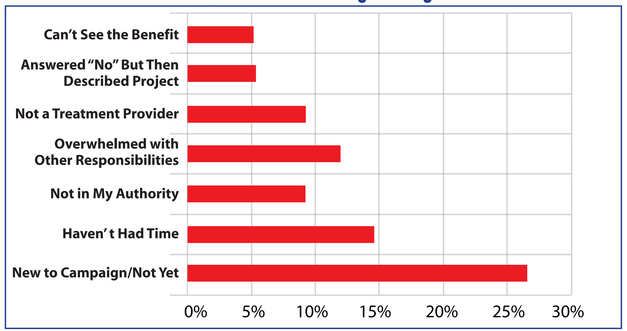
Changes People Made



Factors that Facilitate or Inhibit Implementation

While the ACTION Campaign featured 12 change practices, only 8 had any traction with providers. Changes that were easier to make (scripting response to first call, reminder systems) and in line with existing values (engaging client at first visit), were more likely to be adopted. Change practices that were difficult to make (hand-offs between levels of care) or difficult to explain (evaluating hand-offs, rewarding staff for better client engagement) were less likely to be implemented.

Tools That Facilitated Change



Reasons for Not Making a Change