# Building Healthy Online Communities Digital Campaign Execution



#### Matt Moss Founder

- 8 years of Social Marketing experience with AltaMed, Desert AIDS Project, and Building Healthy Online Communities
- 15 years in Marketing and Advertising for non and for profit companies in a wide range of industries















AltaMed



```
care :: prevention :: advocacy
```











Your plan is the foundation your campaign is built on and the ruler you'll use to measure its success.

#### Planning questions you need to answer

What are you trying to achieve and why? - Goals Who are you trying to reach or influence? – Audience Why would/should they do what you want them to? - Message What resources do you need to do it? – Budget

All of these questions should be answered and shared with the parties involved with the development of your campaign via a document called a project brief.



## Set SMART goals

As in any other kind of public health program planning, successful campaign planning is based on having SMART goals:

- Specific
  - The more specific the better e.g. Reach 1,000,000 with a PrEP message by November 15, 2018 instead of Raise awareness of PrEP
- Measurable
  - How many? How much? Define the metrics you will use to measure success
- Attainable
  - Is this possible within the timeframe and budget? Your agency can help you answer this one.
- Relevant
  - Your goals should focus on the primary purpose of your campaign. Resources are finite
- Timely
  - There's a timeframe for achieving them e.g. the end of the grant period



### Success Metrics By Goal

Your success metrics will be directly informed by your goals and should be established in the planning phase. Below are some examples of metrics based on common goals.

- Awareness (Process)
  - Reach number of people that saw your message
  - Impressions number of times someone saw your message
  - Website traffic
- Engagement (Process)
  - Video views
  - Social media likes, comments, shares, reactions
- Conversion (Outcome)
  - Click-to-call
  - Form-fills
  - Seeking directions to care facilities
  - Live chats
  - Clinical visits



### Defining the Priority Population

Who are we trying to reach and influence?

- Demographics Age, Race, Geography, Education Level, Household Income, Married Status
  - This information is often found from analyzing surveillance data or provided by the funder organizations
  - Epi-contacts
  - Internal Statisticians
  - <u>https://www.cdc.gov/datastatistics/index.html</u>
- Behavior, Values

If you don't have data here or time to do formative research, make some educated guesses and test them during your campaign



#### What ads are you going to run?

The more relevant and compelling your ads are, the more your audience will retain and take action. However, developing new creative may not be realistic based on your budgets and timing. **Using existing creative from another organization can save substantial time and money.** 

The CDC has a library of campaigns on a wide range of HIV prevention modalities available for use at no cost.

Building Healthy Online Communities has a <u>clearinghouse of ads</u> that you can search based on topic and audience. Some of the campaigns are ready for use while others have contact info so you can request permission.

Any dollar you save on creative development is a dollar you can spend reaching someone in your target audience.



#### Setting Budgets Based On Goals

Your budget for media should always be based on your goals and estimates from past campaign performance. Many organizations don't have data from past campaigns, which is why it's vital that those that do have it, share it.

• Goal – Get 15 MSM to enroll in PrEP using Google advertising this quarter

Budget Calculator Bas				
<b>Conversions Desired</b>	<b>Conversion Rate</b>	Clicks	Cost/Click	Budget
15	0.09%	16,666.67	\$0.25	\$4,166.67

- Once you've got your estimated budget, start running ads and monitor to see how actuals compare to your estimates and adjust accordingly
- If you don't have any previous data, a good place to start is enough budget to reach everyone in your audience 4 times a month for awareness and 8 times a month for encouraging action



#### Defining Goals Based On Budget

If you have a budget already set aside, you can use that to determine realistic and specific goals for your online media using the planning tools provided by each platform. Often we have small budgets and big expectations – population level impact will be difficult without a larger budget.

- I have \$500 to raise awareness for an HIV outbreak to MSM of color in Augusta, Georgia
  - Evaluate where you can get the most reach for your money based on the cost per thousand impressions (CPM) for your audience and a lower frequency (# of times a person sees your ad) so you can show your message to the most people possible
  - A Facebook CPM of \$12 means you can show your message to 41,666 MSMOC once or 20,833 MSMOC twice.
  - If an action is required to demonstrate success you can do the same type of calculation based on cost per click instead of impressions.



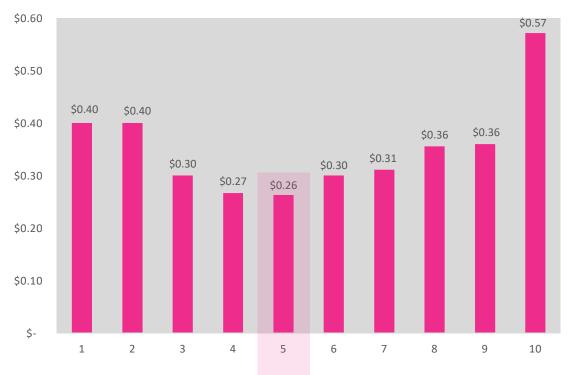
#### Increasing Media Spend, Diminishing Returns

water&stone

The more ads you show to your audience, the more people will convert, but the rate of conversion starts to diminish after optimal frequency.

This happens because you are paying to show more ads to your audience (increasing frequency) to convince people less likely to convert to do so.

By tracking cost per conversion, we can identify the optimal frequency (5 in the chart) per month and adjust our campaigns to ensure maximum efficiency.



Cost Per Conversion vs. Frequency

# What's the minimum budget?

## Minimum Budget Depends on Your Audience

Target Audience Size/Desirability

How big is your target audience?

A large audience requires more money to saturate with your message than a small audience. However, advertisers can charge a premium for reaching audiences that are really small.

Prices aren't fixed in the digital space. They fluctuate based on competition.

How much competition is there for your audience's attention?

Young, lower income audiences of color are often targeted by multiple agencies and organizations (Google/FB/IG).



## Minimum Budget Depends on Your Goals

#### **Desired Outcomes**

What do you want your audience to do?

Increasing awareness is easier to achieve and requires significantly less money than motivating action. Do you want them to read your message, click and read more on your website, or take an action in real life (IRL)?

How difficult is it for them to do it?

Digital actions are all very easy to take compared to things that need to be done IRL like going to a provider to get PrEP or visiting a clinic to get tested. The more involved your desired action is, the more ads you will need to show and over a longer period of time to motivate action.

How many times do you need them to take the action?

If multiple actions are needed over time you will want to extend you campaign to not only reach but remind your audience to take action.



### Media Strategy Based on Goal

- Awareness
  - Maximize the number of people that see your message (reach) within your priority population
- Engagement
  - Focus more on reach and message relevance to encourage interaction
- Conversion
  - Increase frequency until you reach a point of diminishing returns based on campaign performance
  - Message relevance is an important factor affecting conversion rate
  - If possible, retarget site visitors with ads until they convert using <u>Google</u> and <u>Facebook</u> pixels that keep track of your site visitors for a period of time (not allowed on all sites depending on site content)



#### Minimum Budget Varies Based on Goal

Example Campaign Data

<b>Results Projections</b>				Budget:	\$1,000.00	
					Cost Per	
Channel	Campaign	Impressions	Clicks	Conversions	Conversion	
Google	<b>AIDS United</b>	446,429	982.14	4.81	\$207.79	
Grindr	<b>AIDS United</b>	59,382	1,021.38	1.02	\$979.07	
Jack'd	<b>AIDS United</b>	5,910	28.37	3.92	\$255.08	
Facebook	AltaMed	154,083	5,038.52	4.53	\$220.52	

Showing your ad 446,428 times, could result in less than five people taking an action depending on the rate at which the people who see your ad decide to take action (Conversion Rate).



Evaluation of your campaign should take place at regular intervals and be based on consistent metrics that demonstrate success.

#### **Tracking and Analytics**

The tools you use to track and analyze campaign performance will depend on the goals of your campaign and the media channel(s) you are running your campaign on

- Google Analytics
  - Every digital campaign should utilize google analytics to track website traffic and behavior data in conjunction with channel specific tracking tools
  - Because it lives on your website, it provides the most accurate information about where your site traffic is coming from and what actions they are taking on your site
  - You can set goals in GA to see when visitors are taking an action you've defined as a conversion and when paired with Google Tag Manager you can see which advertisement(s) brought that person to your site and what actions they took on your site
- Google Tag Manager
  - Essential to tracking any interaction on your website and attributing it to a source (ads).
  - Interactions you can track include page loads, clicks, downloads, outbound links, form submissions, video views, mailto links, social widget use, scroll depth and more.
- Platform Specific Tracking
  - Most platforms like Facebook/Instagram, Grindr, Twitter, YouTube, etc. have their own tracking systems that will give you more data on interaction with your ads and should be used in conjunction with the google tools above.



## Weekly evaluation, monthly reports

Depending on the resources you have available, you should aim to evaluate your campaign weekly and report on it monthly. Your monthly report should look at all of the metrics that support your goals and should follow the same template every month, making comparisons month-over-month and year-over-year when possible.

If resources are lacking, you can decrease the frequency of evaluation and reporting accordingly but make sure you communicate when you will need a final report and what will need to be in it for your funders or anyone else that will be evaluating your efforts during planning.



# Planning Questions?

The right media channel will allow you to reach your priority population with a compelling message, when they are willing to receive it, and for a reasonable cost.

#### Digital Media Channels

A digital media channel can be a website, application or ad network. This presentation will focus on three major digital media channels used to target Men who have Sex with Men (MSM).

Google Display Network - ads run across millions of websites and apps based on user information

Facebook/Instagram – ads run on the popular social networking sites based on user information

Dating Apps (Grindr, Adam4Adam, etc.) – ads run on applications that men use to find new partners based on users geographic location



#### Select a Channel Based on Your Goals

If you're goal is to increase awareness you should select a vehicle with the lowest cost per impression (CPM) because it will allow you to reach the largest number of people with the largest frequency

If you're trying to motivate an action you should select the vehicle or combination of vehicles that lead to the lowest cost per conversion.

Sample Data from Various Campaigns								
Channel	Campaign	CPM		CTR	CPC	Conversion Rate	Cos	st/Conversion
Facebook/IG	AltaMed	\$	6.49	3.27%	\$ 0.20	0.09%	\$	222.22
Google	AIDS United	s	2.24	0.22%	\$ 1.02	0.49%	\$	208.16
Grindr	AIDS United	\$	16.84	1.72%	\$ 0.98	0.10%	\$	980.00
Jack'd	AIDS United	s	8.76	0.47%	\$ 1.86	0.10%	\$	1,860.00
Programmatic Apps	BHOC	s	0.77	0.37%	\$ 0.21	0.92%	\$	22.83
Grindr Direct	BHOC	\$	4.07	1.35%	\$ 0.30	0.77%	\$	38.96
Jack'd Direct	BHOC	\$	92.59	0.32%	\$ 29.31	9.50%	s	308.53

A calculator for media projections is available for download and use <u>here</u>.



#### Select a Channel Based on Your Audience

Reaching the right people should always be your primary consideration. There is no "MSM audience" targeting on Google or Facebook so if you aren't confident that you can target MSM well, you should run your advertising on dating apps.

Dating apps like Grindr, Jack'd, Adam4Adam, Scruff, Hornet and others are a simple way to ensure that you are showing your ads to an MSM audience.

Most digital advertising agencies have the capabilities to target MSM on Google and Facebook. However, the minimum media budget to engage these types of agencies to handle your campaign is going to be around \$30K because it's likely that the planning and management of the media will be at least \$6K depending on the size and duration of your campaign.









#### Google Display Network

This channel gives you access to users of millions of websites and applications allowing you to show your ads to more members of your priority population than any other digital channel.

Google offers you the **widest variety of targeting parameters**, which means you can be very specific about the people you want to show your ads to.

Google allows you to **pay for ads based on a number of different metrics** including impressions (# of times your ad is seen), clicks (# of times someone that sees your ad clicks on it) and conversions (# of times someone that saw your ad came to your site and took an action you wanted them to take) and the cost is based on real-time bidding with other advertisers.

Because of the vast reach of this network and the highly customizable targeting capabilities, Google Display Network can be one of the most efficient and effective digital advertising channels for marketers that know how to use it.



## Google Display Network

#### Demographics

Gender, Age, Household Income, Parental Status can all be specified for your audience. If you're trying to reach MSM start with Men, 18-54, Not a parent.

#### Affinity and Custom Affinity

Show ads to people based on broad interest groups like Foodies, Health and Fitness Buffs, News Junkies & Avid Readers » Men's Media Fans and while these groups aren't highly targeted they can be customized with particular websites of interest and demographic information like gender to help create an audience that is more likely to be MSM. best for brand awareness and reach – getting your message out to as many people as possible.

#### **Custom Intent Audiences**

Based on keywords your audience could be searching for or websites that they may be visiting, this is a good place to start building an audience you can test, optimize and own.

#### **Remarketing Audience**

The best for generating conversions because you are only showing ads to people that have already been to your website. May not be allowed depending on the focus of your website.



## Direct vs. Programmatic Ad Buying

If you have a budget under \$25k/month for digital media you will need to buy ads directly from the channels that you decide to run ads on.

If you have more than \$25K/month to spend on digital media you should consider purchasing ads through Google's programmatic ad platform, Google Marketing Platform. This platform gives you access to display advertising on over 80 million websites, thousands of mobile applications, streaming-audio and TV ads.

- Most efficient way to buy ads
- Increased targeting, placement and tracking capabilities
- Need a digital budget > \$25K/month or an agency partner with access to Google Marketing Platform
- More complex than buying directly









#### Facebook and Instagram

This channel gives you access to the **millions of people using Facebook and Instagram (FB and IG)** while they are on the applications. Facebook owns Instagram and has a single platform for purchasing media on either or both apps.

Advertisers can **target based on demographic, geographic and interest-based data**, which means you can be very specific about the people you want to show your ads to.

FB and IG allow you to **pay for ads based on a number of different metrics** including impressions (# of times your ad is seen), clicks (# of times someone that sees your ad clicks on it) and conversions (# of times someone that saw your ad came to your site and took an action you wanted them to take), video views and more based on real-time bidding with other advertisers.

Because of the vast reach of this network and the highly customizable targeting capabilities, **FB and IG** can be highly efficient and effective digital advertising channels for marketers that know how to use them.



## **DATING APPS**





## Dating Apps

There are a number of apps that men use to find new partners. Many of them are **exclusively MSM**, which means advertisers don't have to worry about creating audiences that reach MSM.

Because of the nature of the application, users also have a higher likelihood of being sexually active with multiple partners, putting them at increased risk for HIV and STDs. Looking at your data on where individuals with syphilis reported meeting partners may help you select which apps to advertise on.

While apps like Grindr, Jack'd, Adam4Adam and others make it really easy to show your message to sexually active MSM, they charge a premium to reach this audience and users may or may not be receptive to a sexual health message when they are trying to find someone to hook up with.

In contrast to other advertising channels, dating apps **only allow you to buy ads based on impressions** (# of times your ad is seen) but not other metrics such as clicks or conversions.

Most GBTQ dating apps only allow advertisers to target based on location.



# Questions?

#### Ad Efficiency Campaign Background

Building Healthy Online Communities run 4 digital campaigns in 6 California counties with the highest incidence rates of HIV, to test the effectiveness of purchasing ads directly from apps (Grindr and Jack'd) versus programmatically. The campaign creative used included two existing PrEP campaigns and two existing Treatment as Prevention (TasP) campaigns.

Details

- Campaign: PrEP and TasP
- Campaign Dates: DEC 2019 JUL 2020 (extended due to Grindr hiatus)
- Media Budget: \$180K
- Media Channels: Dating Apps (Grindr & Jack'd), DV360 Programmatic (Google)



## Campaign Objectives & Success Metrics

Objectives

- Raise Awareness of HIV prevention modalities in MSM living in target counties
- Drive click traffic to campaign landing pages
- Use success metrics to compare the efficiency and effectiveness of ads bought on dating apps directly vs. programmatically
- · See if creative from one jurisdiction could be effective in another

#### KPIs

- Impressions / Cost-Per-Thousand-Impressions (CPM)
- Clicks / Click-Through-Rate (CTR) / Cost-Per-Click (CPC)
- Services Locator Uses / Cost per use (CPL)
- Navigator Live Chats / Cost per use (CPL)



#### **Campaign Creative**

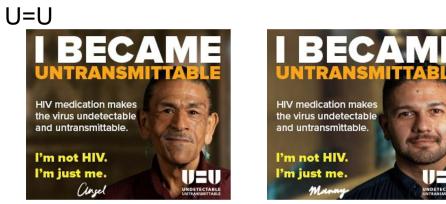
#### PrEP



Center for Disease Control

tion and trea

HIV



Santa Clara County Department of Public Health



New York City Department of Health and Mental Hygiene



New York City Department of Health and Mental Hygiene



# Programmatic More Efficient Than Direct

Programmatic ad buys are more efficient and effective than direct buys.

- Media purchased programmatically served 10x more impressions per dollar spent.
- Media purchased programmatically drove 3x more clicks per dollar spent.
- Media purchased programmatically drove 3x more lead actions per dollar spent.

\*Comparison between programmatic vs. direct buys on dating apps.



### Campaign Benchmarks

This project has generated programmatic benchmarks that jurisdictions (esp. in California) can use to budget future campaigns, project future outcomes and evaluate campaign performance against when running ads on apps that target MSM.

<b>KPI Source</b>	Expected Action	Prog. Benchmarks	Est. Direct Buy Cost
BHOC	1000 Ad Impressions Served (CPM)	\$1.00	\$10.00
BHOC	1 Click to Campaign Landing Page (CPC)	\$0.25	\$0.75
BHOC	1 Resource or Article Read (CPL)	\$29.00	\$87.00
BHOC	1 PrEP/HIV Service Locator Used (CPL)	\$111.00	\$333.00
BHOC	1 Click to Request Live Chat (CPL)	\$912.00	\$2,736.00
BHOC	1 Successful Live Chat with Health Advocate (CPL)	\$1,888.00	\$5,664.00

Projected Res	ults with a \$10K E	Budget	
Buy Type	Impressions	Clicks	Conversions
Programmatic	10,000,000	40,000	435
Direct	1,000,000	13,333	145



### **Campaign Benchmarks**

Other campaigns we've worked on have generated benchmarks that jurisdictions (esp. in California) can use to budget future campaigns, project future outcomes and evaluate campaign performance against based on similar lead actions targeting an MSM audience

<b>KPI</b> Source	Additional Actions*	Benchmark	Prog. Est. (3x Less)
DAP	Digital Calls (From Website)	\$788	\$263
DAP	Lead Form Fill on Website	\$1,576	\$525
DAP	In Person PrEP Consult	\$407	\$136
AltaMed	Schedule In Person Appointment	\$409	\$136

\*Additional actions (not a part of this programmatic campaign) shown for reference. These campaigns included nonprogrammatic media, so their costs are higher than one would expect with a programmatic execution. Estimate programmatic outcomes are shown in the far-right column – at 1/3 of the cost of previous benchmarks based on the data gathered in the BHOC campaign.



# Campaign Benchmarks

Here are campaign benchmarks by jurisdiction that you can use in planning and projecting future campaigns and results on dating applications.

<b>Direct Grindr Bencl</b>	hmarks				
Jurisdi	ction CPM	I CPC	CTR	CPL	ConvR
Alamed	a \$6.9	4 \$0.50	1.38%	\$38.76	1.30%
Contra	Costa \$8.4	9 \$0.61	1.39%	\$64.02	0.96%
Fresno	\$8.9	0 \$0.65	1.37%	\$76.39	0.85%
Kern	\$9.8	0 \$0.89	1.10%	\$150.34	0.59%
Sacran	nento \$7.5	7 \$0.45	1.69%	\$73.14	0.61%
San Die	ego \$6.5	6 \$0.61	1.08%	\$82.51	0.74%

If you're trying to get 100 MSM in Fresno to locate PrEP services you should budget at least \$7,639 for Grindr ads purchased directly.

Programn	natic Grindr Bench	marks				
	Jurisdiction	CPM	CPC	CTR	CPL	ConvR
	Alameda	\$0.84	\$0.24	0.36%	\$41.71	0.57%
	Contra Costa	\$0.83	\$0.24	0.35%	\$33.70	0.71%
	Fresno	\$0.76	\$0.19	0.41%	\$21.88	0.85%
	Kern	\$0.76	\$0.21	0.37%	\$34.20	0.60%
	Sacramento	\$0.76	\$0.19	0.41%	\$19.31	0.96%
	San Diego	\$0.75	\$0.21	0.36%	\$17.42	1.19%

If you're trying to get 100 MSM in Fresno to locate PrEP services you should budget at least \$2,188 for Grindr ads bought programmatically.

# Using Existing Creative Is More Effective

### Using existing creative from other jurisdictions results in more leads via increased media spend.

Campaign	Location	СРМ	CPC	CPL	<b>Creative Cost</b>	Leads	Results	Creative Used
BHOC	CA (6 Counties)	\$0.99	\$0.25	\$27	\$0	6,590	Actual results	Repurposed Existing (+\$50k into media budget)
BHOC	CA (6 Counties)	<i>\$0.99</i>	\$0.25	\$27	\$50,000	4,824	Est. Results 27% fewer Leads*	New Creative by Agency (-\$50k from media budget)

Check BHOC Ad Clearinghouse for existing campaign creative.

### When purchased programmatically, existing creative can be as or more efficient than new creative.

Campaign	Location	СРМ	СРС	CPL	Media Notes	Creative Notes
BHOC	CA (6 Counties)	\$0.99	\$0.25	\$27	Mostly Programmatic	Utilized Existing Creative from Partners
AltaMed	Los Angeles, CA	\$7.26	\$0.72	\$169	No Programmatic	Utilized Creative Developed by AltaMed
Desert AIDS Project	Coachella Valley, CA	\$3.31	\$0.61	\$223	Some Programmatic; Mostly Social	Utilized Creative Developed by Agency

Considerations:

- Creative which follows best practices will almost always perform better than creative that does not.
  - Best practices: clear, concise messaging + call to action + relevant demographic representation that drives to corresponding landing page aligned with the same principles.
- While creative performance can vary based on the degree of adherence to the best practices above, media purchased programmatically will still be more efficient than direct.
  - E.g.: some creative within this campaign lacked clear calls to action, however, the average CPL ranged from \$18-\$47 well below the AltaMed and DAP examples above, which leveraged custom developed creative and had less or no programmatic spend.



# Example Media Plan: Awareness A

Goal: Raise awareness of PrEP in MSM in Augusta, GA

Budget: \$1,000

Audience: MSM, 18+

Geography: Augusta, GA

Success Metrics:

Impressions

Clicks to website (to measure receptivity to message and interest)

Services locator usage

Media Channels:

Dating Apps - Grindr, Jack'd, etc. as they guarantee you are reaching an MSM audience



# Example Media Plan: Awareness A

Projected Outcomes:

Channel: Grindr						
	Cost/thousand					
Budget	impressions	Impresions	CTR	Clicks	Cost/Click	
\$1,000.00	\$ 4.07	245700	1.35%	3317	\$ 0.3	30

With an estimated MSM population of around 4,819 in Augusta GA you can show your message to each member of your audience 50 times, allowing you to do heavy frequency for a short time (10 times per week for 5 weeks) or less frequency over a longer period (5 times a week for 10 weeks)

Note that this is a starting point for our campaign. Once the campaign is running, we track and optimize according to actual results by shifting dollars from one campaign to the other to maximize our success metrics.

One media channel lowers creative development costs and also makes tracking and attribution of traffic much simpler.



# Example Media Plan: Awareness B

Goal: Raise awareness of PrEP in MSM in Augusta, GA

Budget: \$1,000

Audience: MSM, 18+

Geography: Augusta, GA

Success Metrics:

Impressions

Clicks to website (to measure receptivity to message and interest)

Services locator usage

Media Channels:

Google - lowest CPM

Facebook – second lowest CPM, higher engagement



## Example Media Plan: Awareness B

### **Projected Outcomes:**

Geographic Area	Population	% Male	Male Pop.	MSM Population	Media Channel	Frequency	Duration (months)	Coverage %	Impressions	EST. REACH	Total Freq	EST. COST	СРМ	Click Through Rate	EST. Clicks
Augusta, GA	197,081	48.9%	96,373	4,819	Google Display	6.3	3	130%	117,454	6,264	19	\$ 263.10	\$2.24	0.22%	258.40
Augusta, GA	197,081	48.9%	96,373	4,819	Facebook	6.0	3	130%	112,756	6,264	18	\$ 731.79	\$6.49	3.27%	3,687.12
Totals									230,210		37	\$ 994.88			3,945.52

We set coverage at 130% to account for media waste (ads show to someone outside our target audience) which will occur to various degrees depending on the accuracy of our targeting to reach MSM as opposed to people that simply behave like MSM online.

Note that this is a starting point for our campaign. Once the campaign is running, we will track and optimize according to actual results by shifting dollars from one campaign to the other to maximize our success metrics.



# Key Takeaways

- 1. Planning is key and requires data to accurately project outcomes share your data
- 2. Every dollar you save on creative development is another dollar you can spend showing your ads to your audience **share creative**
- 3. Dating apps are the easiest way to reach MSM, but may not be most efficient depending on your targeting capabilities, Grindr is the most efficient app for reaching MSM
- Google and Facebook will be cheaper than dating apps but require more expertise to ensure you're reaching MSM
- 5. Smaller budgets are fine for creating awareness, but larger budgets are required for motivating action
- 6. Many organizations have done this before and may be willing to share data, creative, and/or learnings with you if you ask



# Key Takeaways

7. If you can afford to use programmatic you should as it is much more cost effective and provides

improved analytics when paired with Google Tag Manager



# Questions?

### Next Steps

If you have any additional questions, consult the resources section or feel free to reach out to me directly:

Matt.Moss@WaterAndStoneMarketing.com

Check out the <u>resources section</u> of this deck for helpful links and tools.



# Thank You

Matt.Moss@WaterAndStoneMarketing.com



# Ad Campaign Resources

- 1. <u>Setting up a basic google ad buy</u>
- 2. <u>Setting up Google Display ad buy</u>
- 3. <u>Setting up a Facebook ad buy</u>
- 4. Grindr Self Service Ad Sign Up
- 5. <u>BHOC Advertising Clearinghouse</u>
- 6. BHOC Keyword Summary List
- 7. <u>Setting up Google Tag Manager</u>
- 8. Event Tracking in Google Tag Manager
- 9. BHOC Dating App Info
- 10. <u>Media Budget Calculator</u>
- 11. Media Brief Example
- 12. Media Brief Template
- 13. Media Report Example



### **DAP: HEP-C Campaign**

### 1. Background & Overview

We're kicking off a HEP-C campaign on 5/16 which coincides with HEP awareness month, HEP testing day and world testing day. The overarching campaign concept will reach primary and secondary HEP audiences and drive 200 HCV screenings at testing centers and care at DAP. The campaign <u>look</u> and feel will establish a template for DAP's future line of service campaign creative.

#### Key Dates:

- HEP Awareness month is in MAY
- HEP Testing Day is May 19<sup>th</sup>
- World HEP Day is July 28<sup>th</sup>

#### The History of HEP-C – additional reading for those interested

- HEP-C is a nasty disease and until recently there has been no cure
  - <u>HARVONI</u> a new drug that has shown 96% cure rates in most with audiences, 1 pill / day. These medications have fewer side effects and shorter treatment times.
- Past treatment options were extremely harsh and there was never a guarantee of a cure:
  - The most common hepatitis C treatment used to be a two-part therapy that involved weekly injections of the drug pegylated interferon and a regimen of an antiviral drug called ribavirin, taken in pill form. The course of this hepatitis C treatment was long, lasting 24 to 48 weeks, depending on response to the drugs, and effective for about 50 percent of patients. Side effects including skin rashes and other skin problems, weight loss, fatigue, cough, flu-like symptoms, general pain, and anemia were common.

#### Living with HEP-C:

Chronic hepatitis C virus is known as the 'silent killer' because it is often asymptomatic until the liver starts to fail. Chronic infection can progress to serious liver disease and cancer, including scarring of the liver (fibrosis) and advanced scarring (cirrhosis)

#### Symptoms - most are undiagnosed and experience these.

Bleeding & Bruising easily	Fluid buildup in your abdomen (ascites)
Extreme Fatigue	Swelling in your legs
Poor appetite	Weight loss
Jaundice, Dark-colored urine	Confusion, drowsiness and slurred speech
Itchy skin	Spider-like blood vessels on your skin (spider angiomas)

### 2. Overall Business Objectives

Develop an overarching campaign concept which can be applied to effectively target and drive our primary and secondary audiences to GET TESTED for HEP-C and into treatment with DAP.

- Develop Overarching Campaign Concepts & Messaging
- · Establish Brand Style (which will carry across other lines of service) across ad like objects
- Develop and leverage Media (Below) to Drive Traffic to a DAP Landing Page / Testing Centers
  - Digital: Facebook, Display & Search + The Desert Sun (Web/Print)
  - o Outdoor: Billboard (Lamar) & SunLine Bus Shelters + Interior
- Drive 200 Screening Appointments via Campaign Landing Page
  - Form fills
  - Click to calls (DAP to
  - Find a testing location

### 3. Target Audience

Who are we talking to? Primary & secondary targets? Demographics – age, gender, occupation, general tasks? What do they want to do? How will they benefit from this project?

- Primary audience:
  - o Baby Boomers: born in the early-to-mid 1940s to 1964 + high risk
  - The reason that people born from 1945–1965 have high rates of hepatitis C is not completely understood. Most baby boomers are believed to have become infected in the 1960s through the 1980s when transmission of hepatitis C was highest. Hepatitis C is primarily spread through contact with blood from an infected person.
- Secondary audience
  - High risk individuals (Below)
- Highest HEP-C Risk Factors
  - Health care worker who has been exposed to infected blood, which may happen if an infected needle pierces your skin
  - o Have ever injected or inhaled illicit drugs (Most Common, not a messaging group)
  - Have HIV
  - Received a piercing or tattoo
  - Received a blood transfusion or organ transplant before 1992
  - Received clotting factor concentrates before 1987
  - o Received hemodialysis treatments for a long period of time
  - o Were born to a woman with a hepatitis C infection
  - o Were ever in prison

 Were born between 1945 and 1965, the age group with the highest incidence of hepatitis C infection

### 4. Reasons to Believe & Buy

Explain rational and emotional reasons why target audience should believe what we say, why they care, and why they should take action.

DAP is a Hep-C center of excellence offering the leading-edge diagnosis and treatment methods from renowned Infectious Disease physicians that specialize in Hepatitis care.

- DAP is one of two places that offer Fibroscans, a non-invasive, painless testing and monitoring method for Hepititis.
- Dr. Kerkar is an award-winning, board-certified infectious disease doctor who is passionate about curing people who live with Hepatitis C throughout Southern California. She has been helping D.A.P. clients lead healthy lives for more than 20 years and has been instrumental in building the Hepatitis Center of Excellence.
- DAP accepts most insurance plans, including Medicare and Medi-Cal and treat uninsured income-qualified patients at reduced costs

### 5. Main Message

What's the single most persuasive or most compelling statement we can make to achieve the objective?

Millions of Americans are living with Hep-C and don't know it.

- 1 in 30 Baby boomers has Hep C and most don't know it. (Gilead message)
- About 3.5 million Americans are currently living with hepatitis C and roughly half are unaware of their infection.

Hep C is serious, killing more Americans annually than any other infectious disease and more than HIV, pneumococcal disease, and tuberculosis combined

Testing is easy and Hep C can usually be cured quickly and easily when caught early.

- A mouth swab can detect HCV and a blood test is necessary to confirm
- The majority of infections can NOW be cured in two to three months.
- <u>http://hepc.liverfoundation.org/treatment/the-basics-about-hepatitis-c-</u> <u>treatment/advances-in-medications/</u>

### 7. Measures of Success

How will you measure success for this project... purchases, leads, forms completed, page views, downloads, click-thru's, etc.?

- Media Metrics: Total Reach, Impressions, CPM, Total Click Traffic, CPC, CTR, CPL, CPT(est)
- Facilitate a total of 200 screenings over an 8-week period

### 8. Project Deliverables

What are the required project deliverables?

- (3) Campaign Concepts in the form of "ALO's" (Ad Like Objects) + Campaign Messaging
  - i.e.: Harvoni: Is it time to ask your doctor about putting HEP C behind you?
  - o i.e.: Harvoni: Let go of the uncertainty of HEP-C
  - o i.e.: Have a piercing or tattoo? You may have HEP-C and not know it.
- Campaign Collateral featuring approved Campaign Concept/ALO
  - (6) Facebook Ads
    - (4) Prospecting
    - (2) Retargeting
  - o (6) Display Ads 300x250, 160x600, 320x50, etc.
    - (4) Prospecting
    - (2) Retargeting
  - o (2) Billboards
  - o (3) TDS Creative DUE 4/27, 5/15, 5/15 respectively
    - (1) Tab On (3" x 3") Print
    - (1) Half Page for Thursday's Health Section half page color (10" x 10.5")
    - (1) Friday's Entertainment Section Full page color (10" x 10")
  - o (24) Search Ads
  - (4) SunLine Ads
- (1) Wireframe, re: below
- (1) Landing Page(s) / Microsite
  - Risk Factors
  - Symptoms
  - Treatment Options / History
  - Get Tested Form / CTA
- (1) Media Plan



 $\cap$ 

### Black Infant Health Intervention

The Black Infant Health Program (BIH) has evolved since its inception in 1989 when the intervention was narrowly focused on ensuring that women received prenatal care. Today, the program is moving forward with an intervention strategy emphasizing social support, stress reduction and empowerment. This report provides an overview of the BIH implementation.

#### **BIH INTERVENTION PURPOSE & RATIONALE**

African-American mothers and babies continue to face challenges to their optimal health and wellbeing. The California Black Infant Health (BIH) program is intended to address the problem of poor birth outcomes and health disparities that affect African-American women and their babies. BIH aims to improve health among African-American mothers and babies and to reduce the Black:White disparities in maternal and infant health by helping women become empowered to make healthy choices for themselves, their families and their communities.

#### Intervention Summary

Within a culturally affirming environment and honoring the unique history of African-American women, the BIH program uses a group-based approach with complementary participant-centered case management to help pregnant and parenting women develop life skills, set and attain health goals, learn strategies for managing stress and build social support. Each BIH participant attends weekly group sessions and works individually with BIH staff to set and make progress toward meeting personal goals, to connect with other community and social services to meet her needs, and to develop a longer-term life plan that can guide her continued progress after BIH.

#### Scientific Rationale

The health of African-American mothers and infants can be improved and health disparities reduced through an empowerment-based approach that focuses on strengthening life skills, building resilience, reducing/managing stress, and promoting healthy behaviors and relationships to help women create healthier lives for themselves and their children.<sup>12,3</sup>

JANUARY 2016

Addressing stress among African-American women — including stress due to experiences of racial discrimination, trans-generational poverty, and associated powerlessness and lack of self-esteem — is crucial to reducing the Black:White disparities in maternal and infant health. When Black women become empowered with skills to help them manage and reduce stress in their lives, they are more likely to be healthy, have healthy babies, and raise healthy children.<sup>45</sup> Having more social support can also help them and their families become healthier, in part by buffering the health-harming effects of stress and by increasing access to health-promoting resources.<sup>52,8</sup>

The BIH intervention builds on the following evidence-informed assumptions:

- Group approaches are more effective than one-on-one approaches in accomplishing behavior change
- Most pregnant African-American women can participate in and benefit from groups when those groups are accessible, and effectively and enthusiastically facilitated

- **Culturally relevant:** Providing culturally relevant information that honors the unique history and traditions of people of African descent
- Participant-centered: Placing the participants' own needs, values, priorities and goals at the core of every interaction and activity

#### **PROGRAM OUTCOMES & IMPACTS**

#### Shorter-Term Outcomes

		Longer
Participant Outcome	Outcome Measure	Imp
Improved ability to set and make prog- ress toward meeting personal goals	Goal setting, confidence in goal achievement, and progress toward stated goal(s) in the areas of health, relationships, and finances	Increased proportio term deli among A Americar
Improved ability to manage stress	Change relative to baseline in self-reported use of stress manage- ment techniques	Increase
Improved social support	Change relative to baseline in (a) self-reported emotional and practi- cal support and (b) Social Provisions Scale (Cutrona, C.E. & Russell, D. 1987)	proportio normal b weight d among A Americar
Increased mastery	Change relative to baseline in Pearlin Mastery Scale (Pearlin, L. & Schooler, C. 1978)	
Increased self-esteem	Change relative to baseline in Rosenberg's Self-esteem Scale(Rosenberg, 1965)	
Increased resiliency	Change relative to baseline in Brief Resiliency Scale (Smith et al. 2008)	
Healthier eating and decreased cigarette smoking	Changes relative to baseline in fruit and vegetable intake; consump- tion of sugary beverages; fast food consumption; compliance with recommended use of multivitamin with folate; and cigarette smoking among women who smoke	REFERENCES 1 Rising S. Cent Journal of Nu 2 Wallerstein N promotion pr
Increase health knowledge	Change relative to baseline in knowledge about appropriate timing of delivery, infant sleep prac- tices, and shaken baby syndrome	3 Wallerstein N 2002;30:72-7 4 Ickovics J. Gr 2007;110(2 P 5 Braveman P, I
Greater physical activity	Change relative to baseline in reported level of physical activity	Robert Wood 6 Giesbrecht G social suppo
Increased breastfeeding	Self-reported breastfeeding initia- tion and duration, relative to initial intent	Psychosom M 7 Orr S. Social s Obstetrics an 8 Berkman LF.



Back

### • **Strength-based:** Building on each woman's strengths by empowering her to make healthy decisions

 Cognitive skill-building: Encouraging each woman to think differently about her behaviors and to act on what she has learned

#### Longer-Term Impacts

	Impact	Impact Measure
,	Increased proportion of term deliveries among African American women	Proportion of live births to BIH participants that occur at or after 39 completed weeks of gestation, relative to (a) other African American women who have not participated in BIH and (b) white women
S	Increased proportion of normal birth weight deliveries among African American women	Proportion of singleton live births to BIH participants with birth weighs between 2500 and 4000 grams for singleton deliveries, relative to (a) other African American women who have not participated in BIH and (b) white women
	REFERENCES 1 Rising S. Centering Pregnancy	y. An interdisciplinary model of empowerment.
	<ol> <li>Rising S. Centering Pregnancy Journal of Nurse Midwifery 19</li> <li>Wallerstein N. Powerlessness,</li> </ol>	998; 43(1):46-54. empowerment, and health: implications for health
	<ol> <li>Rising S. Centering Pregnancy Journal of Nurse Midwifery 19</li> <li>Wallerstein N. Powerlessness, promotion programs. Am J He</li> </ol>	998; 43(1):46-54.
	<ol> <li>Rising S. Centering Pregnancy Journal of Nurse Midwifery 15</li> <li>Wallerstein N. Powerlessness, promotion programs. Am J H</li> <li>Wallerstein N. Empowerment 2002;30:72-77.</li> <li>Ickovics J. Group prenatal can 2007;110(2 Pt 1): 330-339.</li> </ol>	998; 43(1):46-54, empoverment, and health: implications for health ealth Promot 1992;63(3):197-205. to reduce health disparities. Scand J Public Health e and perinatal outcomes. Obstetrics & Gynecology
	<ol> <li>Rising S. Centering Pregnancy Journal of Nurse Midwifery 13</li> <li>Wallerstein N. Powerlessness, promotion programs. Am J H</li> <li>Wallerstein N. Empowerment 2002;30:72-77.</li> <li>Ickovic J. Group prenatal can 2007;110(2 Pt 1): 330-339.</li> <li>Braveman P. Egnetrs 5, Ractaga</li> <li>Robert Wood Johnson Found</li> </ol>	989;43(1):46-54 empowerment, and health: implications for health all hromos 1992;63(3):197-205. to reduce health disparities. Scand J Public Health e and perinatal outcomes. Obstetrics & Gynecology vC. Issue Brief 3: Stress and Health. Princeton, NJ:
	Rising S. Centering Pregnancy Journal of Nurse Midwifery 13 Wallerstein N. Rowerfessness, promotion programs, Am J H 3 Wallerstein N. Empowerment 2002;30:27-77.     Ickovics J. Group prenatal can 2007;110(2 H1): 330-339.     Braveman P. Egerter S. Barclay Robert Wood Johnson Found 6 Giesbercht C. Poole J. Letoury	998: 43(1):46-54. empowerment, and health: implications for health ealth Promot 1992;6(3):197-205. to reduce health disparities. Scand J Public Health e and perinatal outcomes. Obstetrics & Gynecology (C. Issue Brief 3: Stress and Health. Princeton, NJ: aton 2011. Heau N. Campbell T, Kaplan B. The buffering effect of incipituitary-adrema ads function during regenancy.
t	Rising S. Centering Pregnancy Journal of Nusce Midwiferg 17 V Wallerstein N. Powerlessness, promotion programs. Am J H 2002;037:277.     Ickovics J. Group prenatal can 2002;0102 H 1: 330-339.     Savaman P. Sperter S, Bardigo Robert Wood Johnson Found G. Gleisbercht C, Pools J. Ictoury Psychosom Med. 2013;27(9)8; 9 Tor S. Social support and prep Obstentics and Gynecology 20	999: 43(1):46-54. empowerment, and health: implications for health ealth Promot 1992;6(3):197-205. to reduce health disparities. Scand J Public Health e and perinatal outcomes. Obstetrics & Gynecology (C. Issue Brief 3: Stress and Health. Princeton, NJ: aton 2011. Heau N. Campbell T. Kapian. B. The buffering effect of incipitulary-adrema ask function during megnancy. 56-02. jmancy outcome: a review of literature. Clinical

1615 Capitol Avenue Building 173 Sacramento, CA 95814 916 650 0300 BlackInfantHealth@cdph.ca.gov

# Contact Info

For more information on paid digital media campaigns please contact us.

Matt Moss

Matt.Moss@WaterAndStoneMarketing.com

Jen Hecht

jenhecht@bhocpartners.org

Dan Wohlfeiler

danwohlfeiler@bhocpartners.org



There are several barriers standing between you and the outcomes you are trying to achieve, and they can all be overcome with the right strategy.

# Digital Marketing Barriers

Platform/Channel Restrictions - "I'm not allowed to advertise on dating applications."

While dating and hookup applications like Grindr can be an effective way to reach MSM, other channels like Facebook, Instagram and Google can be just as effective and even more efficient depending on your ability to target.

If you feel apps are still essential to reaching your priority population, consider working with a thirdparty ad agency or CBO to place the ads for you.



# Digital Marketing Barriers

Campaign and Ad Approval Issues - "I can't get campaign materials approved."

It can be difficult and time-consuming to get new creative approved in many municipalities and organizations. The CDC has campaigns that have been approved to run nationally that you can use for free!

Each digital channel has their own restrictions on what you can show or say in your ads. Understanding these before you select or develop creative is essential. Here are some links that can help when trying to do sexual health related advertising:

<u>Google Ad Policy – Personalized Advertising</u> (All ads targeting MSM are subject to these)

Facebook Adult Products and Services Policy

Facebook Adult Content Policy

Facebook Personal Attributes Policy (All ads targeting MSM are subject to these)



# Digital Marketing Barriers

Budget Cliffs - "I have to spend everything by June 30<sup>th</sup> but I'm not ready."

Budgets are often required to be spent during a specific timeframe that can prove challenging. Partnering with a third-party ad agency or CBO is an option for getting money off your books by a specific date without losing access to it.

Budget Size – "I only have \$1,000 so I can't afford digital advertising."

Most organizations have less money for marketing than they'd like. Look for existing campaigns that you can use and speak to your audience and objectives. The CDC has campaigns that organizations can use for free. The <u>BHOC Advertising Clearinghouse</u> has a large collection of campaigns produced by other organizations that they may be willing to share with you if you ask.

Depending on the size of your market and the competition for your audience you might be pleasantly surprised with how far your money can go online.

