Marketing and Communications Planning Guide

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NIH HEAL INITIATIVE
HEALing Communities Study
New York

ORAU

Contents

Acknowledgements

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Overview

About the HEALing Communities Study

Scientists from the nation's leading health agencies and four major academic institutions are partnering with communities in four states to test a set of interventions to combat the opioid crisis. The HEALing Communities Study aims to reduce opioid overdose deaths by 40 percent over the course of the study in participating communities.

Research grant awards were issued to the University of Kentucky in Lexington; Boston Medical Center in Boston; Columbia University in New York City; and The Ohio State University in Columbus. The HEALing Communities Study is a multiyear study under a cooperative agreement supported by the National Institute on Drug Abuse, part of the National Institutes of Health (NIH). Oak Ridge Associated Universities (ORAU) is pleased to partner with Columbia University to provide participating communities in New York with health communications training and technical assistance.

About the Integrated Marketing and Communications (IMC) Planning Process

The integrated marketing and communications (IMC) planning process integrates health communication and social marketing principles with traditional marketing and business strategies to achieve maximum return on investment of marketing and communications efforts. This process uses a data-informed approach to identify audience segments and tailoring messaging and materials to meet their unique imagery, linguistic, and cultural needs to ensure materials resonate with them and inspire the desired behavior.

About This IMC Planning Guide

ORAU tailored this resource as a guide through the steps involved in planning, designing, implementing, and evaluating a W2C1: Naloxone-Fentanyl Education dissemination plan. Examples provided throughout this guide focus on the development of a community and audience-tailored dissemination plan for the HCS naloxone-fentanyl education campaign. You can also use this guide as a template to create an IMC plan for other initiatives in the future.

NOTE: the HCS campaigns were centrally developed and tested by the study consortium; therefore, the tailored version of this guide does not include the full steps required to create and test new campaigns and materials with intended audiences. To develop new campaigns after the study ends, reference the sustainable version uploaded to the HCS-NY Communications Sustainability Package GoogleDrive folder.

Intended User

ORAU developed this guide to help Communication Champions identified for each wave 2 community lead their Communications Workgroup through the steps needed to successfully plan for, implement, and evaluate the first HCS campaign.

Understanding the Value: Social Marketing and Health Communications

Social marketing and health communications efforts aimed at increasing vaccine confidence involves understanding and influencing the behavior of key individuals as well as the social norms and practices of communities, institutions (e.g., healthcare facilities), and decision-makers.

The Socioecological Model (McLeroy et al., 1988[1]) includes five levels to consider when planning marketing and communication tactics to influence positive behavior and social change. In order to improve knowledge, attitudes, practices, and social norms, it is important to recognize the different levels that influence decision-making among individuals (*see Figure 1*).

Figure 1. Communication approaches for each of the levels in the Socioecological Model
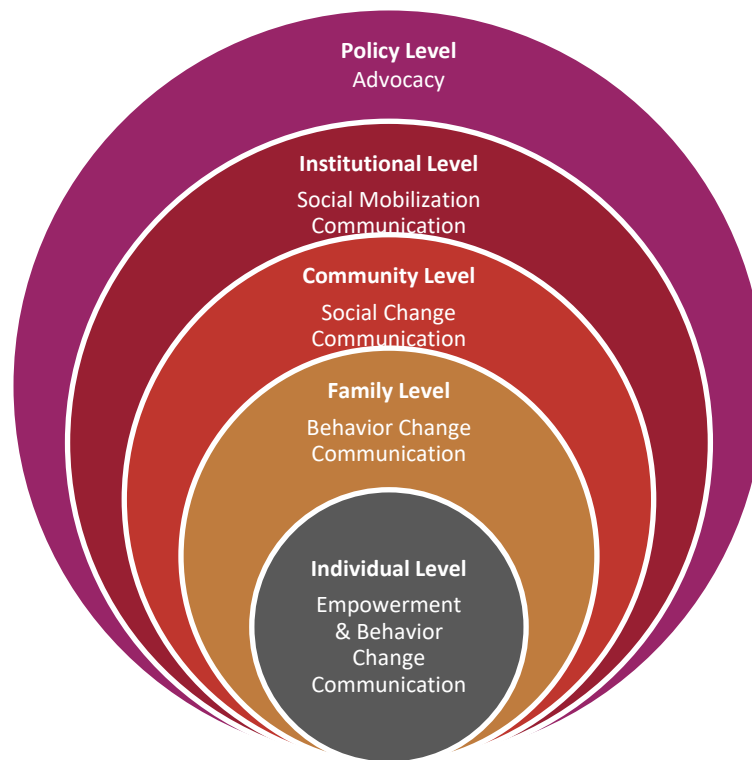
[1] McLeroy, K., et al. (1988) An ecological perspective on health promotion programs. Health Education Quarterly, 15, 351-377. doi10.

There are five interrelated communication approaches that influence the behavior of specific audience segments:

- **Empowerment Communication** – is the process whereby the audience segment feels heard, respected, and understood. Individuals are more empowered to make a behavior change when in a supportive environment that includes encouragement from family-level audiences (e.g., family members, neighbors, friends).

- **Behavior Change Communication** – aims to create common understanding and positive attitudes about a topic (e.g., COVID-19 vaccines) and to maintain confidence in the desired action (e.g., receiving immunization).

- **Social Change Communication** – aims to encourage community leaders and stakeholders (e.g., elected officials) to be part of a supportive environment by encouraging audiences to become informed about a topic (e.g., COVID-19 vaccines) and to feel confident about the benefits of the desired action (e.g., receiving immunization).

- **Social Mobilization Communication** – aims to encourage other needed supporters (e.g., healthcare providers, teachers and coaches, community leaders, healthcare organizations, local retailers, religious organizations, media, and other stakeholders) to support the desired action and share consistent messaging.

- **Advocacy** – is an evidence-based process of informing, motivating, and influencing decision-makers to implement policies, allocate resources, and develop infrastructure to help foster adoption of the desired behavior change among the audience.

Social marketing seeks to integrate social science and social policy approaches with commercial marketing concepts (see *Table 1*) to influence behaviors that benefit individuals and communities for the greater social good. Social marketing incorporates all of the "4 P's":

- **Product:** Create an enticing *Product* (i.e., the package of benefits associated with the desired action)

- **Price:** Minimize the *Price* the target audience believes it must pay to implement the desired action

- **Place:** Make the desired action and its opportunities available in *Places* that reach the audience and fit their lifestyles

- **Promotion:** *Promote* the desired action with creativity and through channels and tactics that maximize desired responses

Table 1 – Example Marketing Tactics	
Marketing Type	**Example Tactics**
Advertising	• Television / Radio ads • Newspaper/magazine ads • Outdoor ads (e.g., billboards) • Display ads (e.g., web banner ads, search ads) • Social media ads
Public Relations	• Media relations • Influencer relations • Events • Sponsorships
Direct Marketing	• E-mail marketing

	• SMS text marketing • Phone call

Reinforcing a Communications Infrastructure

Intended Purpose

The HEALing Communities Study (HCS) Communications Campaigns are a critical pillar of the Communities that HCS intervention designed to support the study goal of reducing opioid overdose deaths across the United States. Identifying and securing expertise within your community will positively impact the effectiveness of how your coalition will plan for, implement, and evaluate your community-tailored campaigns. This technical resource guide was developed by Oak Ridge Associated Universities (ORAU) on behalf of the HCS-NY research team to help communities successfully identify this expertise. This guide is not intended to be prescriptive, but rather used by communities as a starting point when building their Coalition's communications infrastructure. Feel free to adapt information in this guide to fit your community's unique needs.

Step 1. Identify a Communications Champion

Overview of Their Role

The Communications Champion will be recruited from the coalition to serve as the main point of contact, or the link, between the HCS-NY research team and the coalition. The Communications Champion will be responsible for coordination the completion and lead the submission of all study communications deliverables on behalf of the coalition.

Timeline

Each wave 2 HCS-NY community coalition is expected to recruit a Communications Champion no later than **July 31, 2022** due to training webinars and planning activities that need to take place prior to Campaign 1 launch.

Suggested Responsibilities

Based on the Wave 1 intervention, the HCS-NY research team estimates that the Communications Champion will need to devote a minimum of approximately 3-5 hours per week to carry out HCS communications responsibilities between July 2022 and December 2023. A sample *Communications Champion Role Description* is provided in **Appendix A**.

Step 2. Identify and Convene Your Communications Workgroup

Overview of Their Role

Communications Workgroup members are the champions of your community's HCS marketing and communications efforts, so workgroup members should be committed to helping the Communications Champion plan for, implement, and evaluate HCS communications work between July 2022 and December 2023.

Timeline

Due to the upcoming planning activities that need to occur prior to launch of Campaign 1 (October 3, 2022), the HCS-NY research team recommends establishing your coalition's Communications Workgroup and convening the first meeting no later than **September 9, 2022**.

Recommended Expertise

Workgroup members should ideally represent the major labor categories and capacity skills necessary to implement HCS communications campaigns and be well connected to campaign priority audience groups. You can use *Worksheet A: Communications Workgroup Members* on the next page to identify your core members.

Workgroup Charter

To ensure that all workgroup members have a clear, shared understanding of their roles to plan for, implement, and evaluate HCS Communications Campaigns, the HCS-NY research team recommends creating a simple charter and reviewing this during the first workgroup meeting. A *Sample Communications Workgroup Charter* is provided in **Appendix B**.

Worksheet A: Communications Workgroup Members

Role	Responsibilities	Name	Title - Agency	Contact Info
Communications Champion [Workgroup Chair]	Leads and convenes Communications Workgroup; Provides guidance and direction in completing HCS communications deliverables			
Workgroup Co-Chair **OPTIONAL**	Supports Communications Champion in convening the Communications Workgroup and completing deliverables			

Community or Partner Engagement Facilitator	Coordinate partner outreach to generate support disseminating campaign materials			
Health Communications Specialist(s)	Helps drafts and implement campaign dissemination plans; writes materials			
Social Media Manager	Manage coalition's social media presence and implement owned social media tactics in campaign dissemination plans			
Evaluator/Data Specialist	Provide ongoing/outcome data analysis; coordinate data collection			
Graphic/Web Designer	Help develop customized campaign materials and other EBP communication materials following HCS branding guidelines			
Earned Media Specialist (e.g., Journalist)	Coordinate implementation of earned media tactics in campaign dissemination plans			
People from the Priority Audiences (e.g., providers, PWLE, PWUD)*	Provide insight on dissemination tactics, partner engagement, and materials needed to effectively reach priority audiences			

* Priority Audience Groups for the HCS Communications Campaigns include:

- Campaign 1: Naloxone-Fentanyl Education
    - o People with Use Disorder (PWUD) who don't know about fentanyl
    - o PWUD who know about and/or seek fentanyl
- Campaign 2: Medications for Opioid Use Disorder (MOUD) Anti-Stigma & Awareness
    - o People with Living Experience
    - o Loved Ones
    - o Providers
- Campaign 3: MOUD Treatment Retention
    - o POUD in MOUD Treatment
    - o POUD who have been in MOUD Treatment, but not currently receiving MOUD

- o Needed supporters (e.g., elected officials, referral sources likes jails, healthcare providers, recovery support coaches, loved ones of people with OUD, faith-based leaders)

Starting the IMC Planning Process

Work as small group (e.g., Communications Champion, Community Engagement Facilitator, Program Manager) or Communications Workgroup to complete the following activities.

Step 1: Understand the campaign platform

Activity 1.1 – Review the campaign platform (tab 1 of the Campaign Dissemination Plan & Tracker Template)

The campaign platform includes the goal, single overarching communications objectives (SOCOs), priority audience groups, key messages, and calls to action. This campaign platform is outlined in the first tab of each Campaign Dissemination Plan & Tracker Template located in your community Google Drive folders.

Key terms defined:

- The **campaign goal** identified by the study is a long-range outcome statement that is broad enough to establish the overall tone and approach of campaign marketing and communication messaging, materials, and dissemination.

- The **campaign SOCOs** describe the knowledge change we want to see in an intended audience group as a result of seeing or hearing campaign materials and messaging.

- **Key messages** are the main point(s) of information we want the audience group to hear, understand, and remember.

- A **call to action** is the behavior we want the audience group to take or adopt as a result of seeing or hearing campaign materials and messaging.

 Activity 1.1 Instructions: Review the campaign platform outlined in *tab 1 of the Campaign Dissemination Plan & Tracker Template* with all active, implementation members of your Communications Workgroup.

Activity 1.2 – Review the HCS-NY campaign dissemination objectives

HCS-New York research site defined the SMART (specific, measurable, achievable, realistic, and time-based) dissemination objectives to ensure communities are implementing dissemination tactics across owned, earned, and paid media.

Activity 1.2 Instructions: Review the SMART campaign dissemination objectives in *Table 1*.

Table 1 – HCS-NY Dissemination Objectives	
Objective 1.1	By the end of the campaign, [community] will have disseminated **at least 20 unpaid posts or publications** (e.g., social media posts, e-newsletters, articles) on our owned channels.
Objective 1.2	By the end of the campaign, [community], with the guidance of the HCS-NY Communications team, will have implemented a **paid campaign** for a minimum of 4 weeks within the geographical market.
Objective 1.3	By the end of the campaign, [community] will have published one press release and sent/published at least 2 media alerts, articles, interviews, or PSAs to/on local media outlets.
Objective 1.4	By the end of the campaign, [community] will conduct or participate in **at least 2 educational events** (e.g., training presentations, town halls, educational booths at local events).
Objective 1.5	By the end of the campaign, [community] will have disseminated the campaign toolkit/materials to **at least 5 local partners**.

Step 2: Collect/update and analyze your county's data

Having an understanding of your county's overdose data will help you identify the audience segments that have the highest risk of overdose death in your community that you needed to prioritize reaching. Understanding your county's sociodemographic data will help you determine what communication channels are best to reach them and the image and linguistic characteristics you may want to consider to create customized campaign materials that resonate more with the audience segment.

Activity 2.1 Identify the sociodemographic characteristics of your county

Using the American Community Survey data or a completed HCS Community Profile, document your county's sociodemographic characteristics in *Worksheet A*.

Worksheet A: Sociodemographics

Instructions: Work with your communications workgroup to complete the content below.

Total Population		
Sex	Female	
	Male	
Age	Under 18	
	19-24	
	25-34	
	35-44	
	45-54	
	55-64	
	65+	
Race/Ethnicity	White alone	
	Black or African American alone	
	American Indian or Alaska Native alone	
	Asian alone	
	Hispanic or Latinx (of any race)	
Language Spoken at Home	English Only	
	Spanish	
	Asian and Pacific Islander Languages	
	Other Indo-European Languages	

Activity 2.2 Identify the overdose characteristics of your county

Using the Overdose Detection Mapping Application Program (ODMAP) or other available county data, document your county's overdose characteristics in *Worksheet B*. If you can obtain data to identify the race/ethnicity and language spoken of the overdose incidents, that will help you tailor materials and tactics to meet their unique needs.

Worksheet A: Sociodemographics

Instructions: Work with your communications workgroup to complete the content below.

Sex of Overdoses	Female	
	Male	
Age of Overdoses	Under 18	
	19-24	
	25-34	
	35-44	
	45-54	
	55-64	
	65+	
Zip Codes with Highest Incidence of Overdoses		

Step 3: Conduct an audience analysis

Activity 3.1 Review the campaign priority audience groups

The W2C1 priority audience groups that campaign materials that HCS intends to reach and have tested include:

- Individual Level
    - People who use drugs who DON'T KNOW ABOUT or seek fentanyl
    - People who use drugs who KNOW ABOUT and/or seek fentanyl

You may also desire to reach other audience groups with your campaign dissemination:

- Family Level (e.g., family, neighbors, friends)
- Community Level (e.g., elected officials, community leaders)
- Institutional Level (e.g., healthcare providers, recovery specialists, coaches)
- Policy Level (e.g., decision-makers)

Activity 3.2 Identify and prioritize your priority audience segments

Based on the data collected in step 2, narrow the priority audience group into audience segments with the highest overdose risk in your county. Segments are smaller groups of people in your community that have things in common in order to personalize the messaging, language, and imagery so it resonates with them more and helps you identify the best communication channels to use to reach them. You can segment audience groups by socio-demographics (age, gender, occupation), geography (where they live, work, play, and worship), behaviors (what they do), and psychographics (how they think and feel).

Activity 3.2 Instructions: List at least three audience segments for each campaign audience group in *Worksheet C* on the next page.
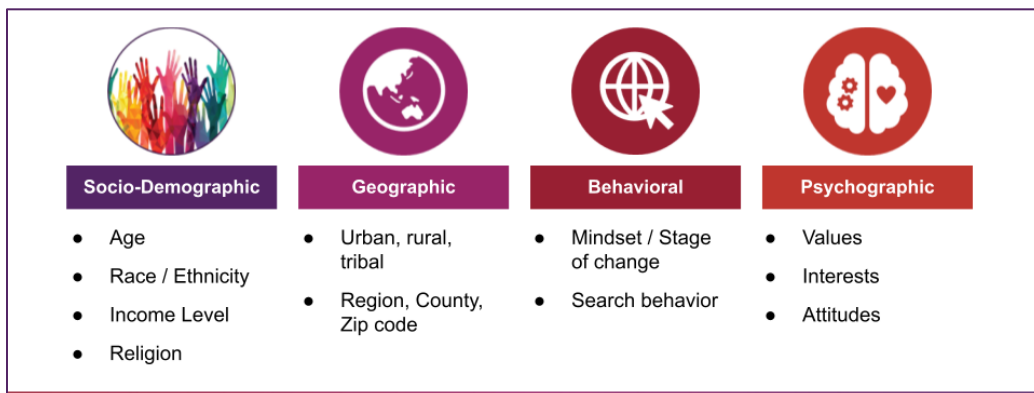

Image 1: Audience group segmentation categories

Worksheet C: Audience Segments

Instructions: Work with your communications workgroup to complete the content below.

Campaign Priority Audience Group *A well defined population group which campaign materials and messaging are designed to reach and have been tested to increase understanding and drive adoption of the desired behavior.*	Priority Audience Group Segment Numbers *A narrower portion of the audience group with things in common to personalize messaging and imagery so it resonates with them more.*	Priority Audience Group Segment Numbers *Enter your audience segment selections for each campaign audience group in this column.*
People Who Use Drugs who DON'T KNOW about or seek fentanyl	Priority Audience Segment #1:	
	Priority Audience Segment #2:	
	Priority Audience Segment #3:	
People Who Use Drugs who KNOW ABOUT and/or seek fentanyl	Priority Audience Segment #1:	
	Priority Audience Segment #2:	
	Priority Audience Segment #3:	

Activity 3.3 Identify the communication barriers and channels

Think about the ways the audience segment receives information. These are their communication channels. Identifying the communication channels will help you identify the best dissemination tactics you need to implement to reach the intended audience segment.

Activity 3.3 Instructions: List the communication channels you can use to reach each audience segment in *Worksheet D* on the next page.

Worksheet D: Audience Analysis

Instructions: Work with your communications workgroup to complete the content below.

Campaign Priority Audience Group *A well defined population group which campaign materials and messaging are designed to reach and have been tested to increase understanding and drive adoption of the desired behavior.*	Priority Audience Group Segments *A narrower portion of the audience group with things in common to personalize messaging and imagery so it resonates with them more.*	Communication Considerations *Identify any communication barriers or preferences that will help you identify the best way to reach each audience segment.*	Communication Channels *The ways the audience segment prefers to receive information through owned (e.g., Facebook, e-newsletter), earned (e.g., local media), and paid (e.g., billboard) media. Be specific.*	Partners *The organizations and people in your community with already established networks and trust that your coalition can partner with to reach the intended audience group segment.*
Insert Audience Group #1 Here	Insert audience segment here			
	Insert audience segment here			
Insert Audience Group #2 Here	Insert audience segment here			
	Insert audience segment here			

Step 5: Develop a dissemination plan

Activity 5.1 Identify tactics

A dissemination plan clarifies the campaign goal, objectives, priority audience groups, materials needed, and tactics staff will implement to reach the objectives. Tactics are the specific steps you will take to deliver campaign messages and materials to audience segments in support of campaign objectives. Everything that costs time or money is a tactic.

When completing your dissemination plan for W2C1: Naloxone-Fentanyl Education, focus on identifying owned and earned media dissemination tactics. CU and ORAU will lead the planning, implementation, and evaluation of paid media buys for each HCS campaign and in coordination with each community. Only document paid media tactics in your dissemination plan if you plan to purchase additional ad placements, not included in the central media buy, using your community impact dollars. The dissemination plan is also a "living" document that your coalition should review, monitor, and revise weekly.

Activity 5.1 Instructions: Review the sample owned and earned media dissemination tactics in *Table 3*. Complete the campaign dissemination plan template located in your Coalition's Google Drive folder. A copy of the template is also located here. KPIs for common dissemination tactics are located in the last tab of the template.

Image 2: *Campaign Dissemination Plan & Tracker Template*

Table 3 – Owned and Earned Media Tactics	
Owned Media Any non-paid marketing communications activity that uses the channels your coalition owns and controls.	**Earned Media** Working with media outlets and community partners to elicit their help in disseminating campaign materials through their owned channels.

• Posting campaign materials and messaging on social media channels
• Sending out an e-Newsletter
• Hosting naloxone trainings or other educational events
• Displaying print materials (e.g., posters, flyers) in owned buildings
• Posting graphics and web banners on owned websites
• Posting messaging and materials on owned digital display screens
	• **Media Relations**
	  o Publishing a press release on partner websites/sending to press
	  o Sending media alerts for local events to press
	  o Sending opinion editorials (Op-Eds) to press
	  o Conducting spokesperson interviews
	
	• **Partner Engagement (not on Coalition)**
	  o Sending campaign toolkit to partners
	  o Placing web banners on partner websites
	  o Publishing posts to partner social media channels
	  o Participating in local events and handing out educational campaign materials
	  o Hanging print posters in partner buildings
	  o Providing print materials for handouts
	  o Placing an article in partner e-Newsletters
	  o Joining a partner event to educate attendees
	  o Providing a naloxone training to partner staff
	  o Getting a PSA placed at a local radio station
	  o Working with a local printer to send direct mailer (e.g., postcard)

Step 6: Request data-informed, community tailored campaign materials

Tailoring the core set of campaign social media graphics available in the Campaign Dissemination Toolkits will ensure you have the right size and type of material to implement tactics identified in your campaign dissemination plan. This process will also ensure the materials you disseminate resonate with the intended audience segment by addressing their unique imagery, linguistic, and cultural characteristics.

Activity 6.1 Review your dissemination tactics

Review the tactics outlined in your campaign dissemination plan. When identifying dissemination tactics, you should have documented any customized materials needed to implement that tactic.

Activity 6.2 Complete your campaign material customization form

Using the campaign material customization form found in the Campaign 1: Naloxone-Fentanyl Education subfolder of your Community's Google Drive folder, indicate the custom campaign materials needed to implement your dissemination plan.

Email Kara Stephens (Kara.Stephens@orau.org) by 9/16/22 and indicate your customization form is complete with your customization requests. NOTE: customization requests submitted after 9/16/22 may not be ready by campaign launch on October 3, 2022.

Image 3: Campaign Material Customization Form

Step 7: Evaluate your dissemination tactics

Evaluating your dissemination tactics throughout the implementation process will provide the information needed to make informed decisions about how to focus or adjust campaign dissemination efforts appropriately.

Activity 6.1 Record KPI results

Activity 6.1 Instructions: The evaluation portion of your dissemination plan can be found in the red columns of your dissemination plan template. For each tactic you implemented, document the KPIs results. Based on feedback from wave 1 communities, we recommend recording dissemination KPI results daily or at least once a week.

Activity 6.2 Answer evaluation questions

Activity 6.2 Instructions: Next, answer the evaluation questions for each tactic to help improve the effectiveness of future campaign dissemination tactics. Indicate any improvement actions needed.

Example evaluation questions are provided in *Table 4*.

Table 4: Evaluation Questions
Was this tactic implemented as planned? Yes/No
Describe any modifications you made to implementation. If there weren't any, state 'None.'
Provide reasons as to why changes were made. If there weren't any, state 'None.'
Indicate any improvements needed to improve results of similar dissemination tactics.

Appendix A: Communications Champion Job Description

Communications Champion Job Description

The HEALing Communities Study (HCS) New York (HCS-NY) – [Insert Community Name] County is looking to identify a Communications Champion to support communications activities on behalf of a NIDA-funded study to combat the opioid crisis.

With support from the HCS-NY Research team and the Coalition's Community Engagement Facilitator (CEF) and Communications Workgroup, the Communications Champion will be responsible for overseeing the overall planning and implementation of three HCS communication campaigns as well as additional communications activities to support the effectiveness of evidence-based practices and larger Coalition goals in [insert county name].

Based on the Wave 1 intervention, the HCS-NY Research team estimates that the Communications Champion will need to devote approximately 3-5 hours per week to carry out the responsibilities outlined below between July 2022 and December 2023. In exchange for the communications champions' time in completing the below responsibilities, they will be provided with incentive compensation in the amount of X paid quarterly as a lump sum payment via the Community's HCS community impact dollars.

Responsibilities:

- Conduct needs assessment to understand the coalition's communications capacity.

- In collaboration with the CEF, recruit, convene, and regularly engage a Communications Workgroup to support the HCS Communications Campaigns.

- Lead [or designate a lead] to schedule routine Communication Workgroup meetings

- Lead coalition's efforts to successfully plan and implement three centralized, community-customized communication campaigns through engaging its communications workgroup.

- Establish a locally owned repository for all meeting materials, minutes, and campaign materials

- Engage communications workgroup to develop tailored campaign dissemination plans for each campaign

- Coordinate the implementation of dissemination plans, including the posting of campaign materials to external communication channels (e.g., social media, organization websites, etc.) Create or coordinate the creation of additional channels as needed.

- Develop and maintain media relationships; write, pitch, and place op-eds and other content to support campaign dissemination.

- Collect and track dissemination data on behalf of the coalition for each campaign.

- Complete campaign fidelity

- Complete qualitative assessments for each campaign and debrief with the HCS Communications Program Manager to share lessons learned

- Attend communications-specific meetings including bi-weekly *Communications Office Hours* and TTA webinars facilitated by the study team.

Required Qualifications:

- Availability to dedicate ~3-5 hours per week to HCS Communications between July 2022 and December 2023

- Experience or interest in leading communication and/or marketing efforts related to health or behavior change, ideally at the local level

- Demonstrated commitment to behavioral health, substance use disorder, and healthcare issues and activities

- Excellent oral and written communication skills

- Excellent interpersonal and administrative skills

- Highly organized, good problem-solving skills, flexible

Preferred Qualifications:

- 2+ years of experience leading behavioral health or health behavior change campaigns, ideally for community or government entities

- Experience leveraging data (i.e., demographic, paid advertising) to inform campaign planning and implementation

- Experience managing social media accounts to disseminate health-related messages

- Experience reaching vulnerable and/or priority populations (e.g., Spanish-speaking, homeless, people who use drugs, etc.) through communication dissemination planning and partner engagement

Appendix B: Sample Communications Workgroup Charter

Purpose

The [Insert Name of Community] Opioid Communications Workgroup guides the coordination and execution of communication and partnership efforts necessary to deliver opioid education messages with a clear, consistent, and amplifying voice in our community. The Workgroup is focused on the development and delivery of opioid education campaigns and materials, and will report to xxx (name governing organization, coalition or committee)

Benefits of Workgroup Participation

Members will:

- Help shape local efforts to increase visibility and sustainability of opioid-related education and communication efforts,

- Help drive the type of messaging and content developed to educate stakeholders and policymakers on the progress made to reduce opioid overdose rates in our community,

- Assist with ensuring a wide range of stakeholders are involved to amplify our voice and reach of communication campaigns, and

- Gain immediate knowledge of and access to free communications materials, tools, models, data, and best practices available to share with stakeholders and colleagues.

Communications Workgroup Member Expectations & Responsibilities

The Communication Workgroup Chair (and Co-Chair, if desired) will serve the entire wave 2 intervention period (July 2022 - December 2023) with the ability to re-elect for 1-year terms after HCS, if desired. All members are expected to participate in monthly, 1-hour workgroup calls and participate in project work between workgroup calls (~2 to 5 hours per month during the wave 2 intervention period. Ultimately, members are responsible for the coordinated planning, implementation, and evaluation of HCS Communications Campaigns. Specific responsibilities for each member role is provided in **Worksheet A**.

Appendix C: Social Media Content Calendar

The following template can be used to create a social media content calendar. You can add additional posts, as needed.

	KEY:
	PWUD who DON"T know about or seek fentanyl
	PWUD who KNOW about and/or seek fentanyl
	Relevant observance days

OCT/NOV 2022

*Retrieve the social media posts' text and graphics from the dissemination toolkit located in your community's GoogleDrive folder.

SUNDAY (6/27)	MONDAY (10/3)	TUESDAY (10/4)	WEDNESDAY (10/5)	THURSDAY (10/6)	FRIDAY (10/7)	SATURDAY (10/8)
	W2C1 Post 1		W2C1 Post 1		W2C1 Post 2	

SUNDAY (10/9)	MONDAY (10/10)	TUESDAY (10/11)	WEDNESDAY (10/12)	THURSDAY (10/13)	FRIDAY (10/14)	SATURDAY (10/15)
	W2C1 Post 2		W2C1 Post 3		W2C1 Post 3	

SUNDAY (10/16)	MONDAY (10/17)	TUESDAY (10/18)	WEDNESDAY (10/19)	THURSDAY (10/20)	FRIDAY (10/21)	SATURDAY (10/22)
	W2C1 Post 4		W2C1 Post 4		W2C1 Post 5	

SUNDAY (10/23)	MONDAY (10/24)	TUESDAY (10/25)	WEDNESDAY (10/26)	THURSDAY (10/27)	FRIDAY (10/28)	SATURDAY (10/29)
	W2C1 Post 5		W2C1 Post 6		W2C1 Post 6	National Prescription Drug Take Back Day

SUNDAY (10/30)	MONDAY (10/31)	TUESDAY (11/1)	WEDNESDAY (11/2)	THURSDAY (11/3)	FRIDAY (11/4)	SATURDAY (11/5)
	W2C1 Post 7		W2C1 Post 7		W2C1 Post 8	

SUNDAY (11/6)	MONDAY (11/7)	TUESDAY (11/8)	WEDNESDAY (11/9)	THURSDAY (11/10)	FRIDAY (11/11)	SATURDAY (11/12)
	W2C1 Post 8	W2C1 Post 9		W2C1 Post 10	W2C1 Post 9	

Additional Resources

Hootsuite Social Media Content Planner – you can draft, preview, schedule, and publish all of your social media posts directly from the calendar. This resource works for Facebook, Instagram, Twitter, LinkedIn, YouTube, and Pinter