

SAMHSA's Center for the Application of Prevention Technologies (CAPT)

Pitching Prevention National Webinar Series

Session 2: Prevention Messaging in Action: Stories from the Field

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[Julie Kafka]: Today's training was developed by the Center for the Application of Prevention Technologies, and is for training use only. Today's webinar is being recorded, and we will be making it available to participants after today's call.

First, I'd like to take care of some event logistics. Due to the number of attendees at today's session, we'll be using a question-and-answer window instead of a chat. You'll see that on the bottom left. If you would like to submit a question to our presenters or our technical support staff, just type it in the Q&A window and submit. You will not see what other people are typing in the Q&A pod, but our presenters will read aloud any questions that are submitted before they provide a response. The PowerPoint slides and handouts will also be available for download at the conclusion of today's session.

We're joined today by National Prevention Network (NPN) and Single State Agency for Substance Abuse Services (SSA) representatives, project directors, training and technical assistance providers, community-level prevention practitioners, and, of course, SAMHSA staff and fellows.

So, by the end of today, we're hoping participants will be able to describe how effective prevention pitches can support efforts to build community awareness, increase community readiness for change, and strengthen relationships with community leaders. We're also hoping that today's webinar will help you identify successful approaches for pitching prevention messages based on our case study and a grantee example.

I have the pleasure of introducing our speakers today.

Marcus Bouligny of Prospectus Group has been a CAPT associate for many years, providing training to build capacity of state and local systems. Marcus has over 15 years of experience working with communities and states in which he's helped project leaders develop and pitch prevention to a variety of key stakeholders.

Crystal Borde is the Associate Director of Vanguard Communications. Crystal has worked for a decade in strategic communications planning, media outreach, and branding. Much of her work has been centered specifically on health and behavioral health communications and message development.

So, we're using this photo of beautiful Fenway Park to illustrate the roadmap for our discussion today. We're first going to begin reviewing some key elements from Session 1 of "Pitching Prevention," which happened in July. Next, we'll walk through a case study that will allow us to really practice the skills we learned and see what they look like on the ground. And finally, we'll round off the conversation with a real-life example from the field to offer a perspective on the application of some of these skills. And so, hopefully, with all that we're presenting on the event today, we'll help you "hit a home run" for your prevention efforts.

So, I'll pass this off to Crystal to give us a review of what we learned during Session 1.

[Crystal Borde]: Great. Thanks so much, Julie, and welcome, everybody to today's training. And, hopefully, you were able to join us for the first session where we started talking about pitching prevention.

But, if you missed it, let's do a really quick recap as to why pitching prevention is so important. So, first, pitching prevention basically means that it gives us an opportunity to build support among key stakeholders; it gives us opportunity to identify and create prevention champions to help move our work forward in the field; it gives us an opportunity to strengthen our prevention work; and it also helps with sustainability by helping us identify and develop partnerships with people within our communities that help support our work.

And, one of the other things that came up in the first session when we were going through

how to structure your pitch—how that relates to prevention—is my co-presenter, Dodie, shared her story about how difficult it was to explain to her mother what she does as a prevention practitioner. And, so even after years and years of working in prevention, Dodie's mother still didn't really fully grasp what she did for a living. And often when people would ask her what Dodie did, her mother would say, "Oh, my daughter works with kids," even though it's been years since Dodie did anything related to early development education.

So, as preventionists, it's really important for us to be able to communicate not only the work that we do but also its value to the communities in which we're trying to serve: states, tribes, and jurisdictions.

And, during our conversation in the first session, we tried to brainstorm some of the different kinds of language we can use to actually describe prevention. And as you can see on our screen, we have a bit of a word cloud to represent some of the key concepts and phrases and words that people shared during that conversation.

Some of the common things that came up in responses were providing skills, information, and strategies to help people live healthy lives; to stop risky behavior before it happens; and to identify the root cause of a problem in order to develop a targeted program or solution. And so, looking at the word cloud, look at the words that seem to populate and come up a lot—the ones kind of in orange, where it's community, healthy, outcomes, risk strategies, choices, and conditions. So, all of these things are kind of related to how we define as well as pitch prevention.

So, let's take a second to talk a little bit about how we define prevention. This was a topic we also touched on in the first session, and some of the attendees shared some of their definitions they came up with for how to define prevention.

So, why don't we take a minute to have you guys weigh in? So, of these three options: (1) Is prevention identifying the root cause of a problem in order to develop a targeted solution?, or (2) Is prevention helping people understand high-risk choices and related outcomes?, or a final option, (3) If you picture a dirty duck in water, substance abuse treatment focuses on the duck and prevention focuses on the water—a bit of an analogy type definition.

So it looks like, from the votes that are coming in, that it seems like the first option, "identifying the root cause of a problem in order to develop a targeted solution," seems to be

the one that's resonating with folks. Although, it seems also there's a large group that like the idea of using the dirty duck analogy as a simpler way, perhaps, to define prevention.

Well, thank you, guys, for your feedback. And, that is definitely something to keep in mind—that there can be multiple ways for us to define prevention. And, part of pitching prevention is figuring out who it is we're trying to communicate with and the best way we can define prevention in the language that we use and the phrasing that we use that will make people, like say for example, Dodie's mom, really understand what prevention work is.

So, before we start talking about some real-world scenarios, there is a little bit that we would like to recap when it comes to how the messages should be developed. There are five key components. And, I'm just going to go through them really quickly. So for folks who joined us in the first session, this will be a bit of a refresher. And for our new attendees, this will help add this frame in your mind as we move forward.

The first element is: What is your goal for your pitch? What message are you trying to get across? How do we want to get there? We want to make sure it's something that's measurable, that's achievable, and that's clear, because that will help guide the direction of the pitch that we're crafting.

The next thing to think about is: Who is your intended audience? What stakeholder audiences are you planning to communicate with? Who are you trying to persuade, right? Or, you might even consider what group of people is going to have the greatest impact on whether or not you reach your goal or your organization reaches its goal.

The next element is a very, very critical one. And, it's figuring out what action is it that we want our audience to take? So, now that we've determined what we want to achieve and whom we would like to engage in order to achieve that pitch and goal, the next piece we have to figure out is: What is it we want those folks to do for us? How can they help move our prevention work forward?

The next element is the compelling element. So, this is what I like to sometimes think of as the tipping point, right? What is it that we need to have as a part of this pitch that will persuade or convince our intended audience to take our desired action? So that's the persuasive element of this messaging exercise, is figuring out what is it that we need to say. Like, what

are the benefits for them to take that action? And what are the kinds of barriers that we need to decrease as a challenge in order for them to engage? So, what's that compelling element?

And then, finally, the last part is: What is the tone of the message or pitch? How do we want to talk about what we're trying to do? How do we want our communications to be encouraging, or empowering, or inspirational? Or perhaps, depending on our audience, it needs to have a more serious tone and be very based in data.

So, all of those five elements together are the things that we should be considering and the questions we should be asking ourselves as we start to compose and construct our pitches.

So, before we move on, I'd like to take a short break to open it up to any questions that you might have. As Julie mentioned earlier, feel free to enter your questions into the Q&A pod on the left hand side of your screen.

So it looks like—and I'll also mention that, as the presentation goes on, if a question should pop into your mind before we get to a question break, feel free to put it into the question pod during the presentation, and then when we pause for the next question break, we'll make sure to get to it.

So, before we talk about anything else, I want to acknowledge that we know that pitching can be every hard. It's probably one of the more challenging things to do is to go out, sometimes to a group of people that you don't know, and to talk about the work that you're doing in a way that's going to convince them to support your efforts, or to engage in your activities, and to take that desired action. And part of what makes it really challenging is some of the unknowns.

But, there are some things that we do know about engaging with audiences that are good to have in the back of your mind that can help you construct your pitch. And, that is, you want to understand that the stakeholders you're reaching out to may have a limited awareness of the problem, right? They might know about substance misuse or prevention, but not really a lot of information. So, there might be some education that you'll need to do.

They also tend to have a low perception of harm, thinking that they don't really get those

kinds of big health impacts.

And, sometimes you'll see some campaigns use a lot of fear factor language, which we'll touch on a little bit later in the training, as a way of making people pay attention to the risks that are involved with substance abuse. But, it's good to know that we might have to find some interesting ways of communicating harm, in order for our audience to better understand what we're talking about.

And then, finally, we are competing with a lot of other health messages out there, including sometimes some substance misuse prevention messages. And so, knowing that the space in which people are communicating has a lot of information in it, it adds even greater value to understanding your audience, so you can really customize that pitch so it has the right desired action, the right compelling element, and the right tone to really make your pitch be successful.

So now I'm going to turn it over to Marcus to talk us through a real-world example, so we can see how pitching prevention works in the real world. Marcus?

[Marcus Bouligny]: Excellent. Thank you so much, Crystal. And, I agree. I think that pitching can actually be difficult and can certainly be quite challenging as we move forward. So hopefully, this case study will allow us to gain a little bit of context and will ground us a little in our conversation. So, if you wouldn't mind, we can drift into our case study here.

And you'll keep in mind that you're going to put your prevention hat on and you will be playing the role, at least in our case study here, of a community-level practitioner. And your community has recently received some funding for underage drinking. And, so we want to get out and do some work around that. But of course, to do that, we want to make sure that we also have some good, solid key stakeholders on board, but we also want to make sure that we have some level of community readiness. So let's take a look.

So, our case example is going to be based in what we call Anytown, USA. And Anytown, USA, is a white middle class community with a large African American population. Most of the people in the community are Christian and the church is really the center of Anytown, USA. And I know some folks on the call can certainly identify with Anytown, USA. Many parents who are raising their children there actually grew up there. So there are generations of folks

here in Anytown, USA. High school sports are hugely popular. And, there are a lot of people to be found at weekend football games. So, let's get a sense of what Anytown, USA, looks like and feels like. And I'm sure, again, many of us, if we do not currently live in Anytown, USA, we have had some experience.

So, that's going to be the foundation for our conversation today—or our case study conversation, at least. So, as we go through this, just as if you were on a coalition, the first thing you want to do is gather some data. Or, you probably have gathered some data to be able to implement your underage drinking projects. So here's some case study data we can look at. Again, this came from Anytown, USA.

They went out and gathered the data. And this is what their alcohol use for the past 30 days from 2015 to 2011 looks like. So, you can see the blue line there, which is trending upward, is our data. That's our Anytown, USA, past 30-day use. I'm sure many of you on the call are used to looking at these kinds of data, so you're pretty familiar with that.

So, you can see it started off probably in the 16 percent range, and then over time it's trailed up quite a bit. And certainly, that's a concern. An even greater concern is that the green line, which represents the United States, and the red line, which represents the state, is actually trending slightly downward. So we do have some concerns here in Anytown, USA.

But again, you need to get those key stakeholders on board. So, when we go out looking for these key stakeholders, we're looking around to figure out who might be interested. Who's concerned with this message? Whom do we need to let folks know that this problem, these data occur? So there are many different key stakeholders that we might consider. And as we go through, we realize that the police department is also already concerned about this.

So, there are some key stakeholders who are concerned, but the mechanisms of prevention are not quite there yet. So in this case for Anytown, USA, the police are actually ticketing, which is great, but then those tickets actually get handed over to the local school, and then those are supposed to result in consequences like suspensions and expulsions. But that's really not occurring. Or, at least it's occurring inconsistently. And, actually, even some football players on the team haven't been completely let off the hook. And so, we can see that though there is some initial understanding that there's a problem and some of the actors are actually doing stuff to make it better, some of the systems in place aren't quite working.

So, we'll take a quick look at Anytown, USA. A good thing is that we did do a focus group. So, we have some information around Anytown, USA. And here's a focus group that we did with parents.

So, some of the attitudes among adults in Anytown are:

"I grew up in Anytown, USA, and everybody knows me, and I know everybody. We drank when we were that age. So what's the big deal? Right?"

"My kids have parties in the basement, and I just always take their car keys. That way they're all safe."

"If my son gets drinking, it may affect his chances in college."

So, you can see there's a smattering of different information that folks are concerned with in Anytown, USA, from "just take the car keys" to understanding and even recognizing that indeed, there are some consequences if they get caught with alcohol.

So, considering Anytown, USA, who might be some key stakeholders that we'd think about? So in our chat here, you can go ahead and put down some challenges that you encounter when it comes to prevention or getting that readiness across. So, if the community is not quite ready or the parents aren't quite ready to see that message as our data, as our focus group did, as seemed to indicate, what might be some challenges that you might think parents might need to be able to get over? Sure, so funding capacity, absolutely. Perception?, Certainly, of the past. Denial of the problem? Absolutely. Good.

I see lots of perception of harm. And I think that's clearly shown up in that data, right? So, the perception of harm was clearly that they really didn't think that this was an issue. Economic drive? Absolutely. Education, I see. OK.

So, let's dial in on a few. Let's dial in on this idea of the perception of harm. So, but if we think about perception of harm—we really think about what's the likelihood if my kid, if I'm an Anytown, USA, parent, will actually get in trouble, or actually be hurt, or will actually encounter some negative consequence? And certainly, our survey data can probably pick

some of that up. And I would agree. Probably, there seems to be—at least from that focus group—some lapsed perception of harm, right?

So, parents say, “If they’re going to drink, they drink downstairs, and they should be fine.” And I think that echoes across the region I work in, certainly. And I’m here in Atlanta, Georgia, and we just got them talking about that, actually. So the perception [is there] that they can curb the outcome somehow by taking away keys so they don’t get into alcohol accidents, certainly.

Someone also mentioned the capacity. So that’s another excellent point. So, the capacity of the community might not be there. They might not have the information to really make that happen. And I think that was also indicated in the way that the police department was ticketing, certainly. However, those tickets weren’t getting realized in any real consequences in the high school. And certainly that can be a challenge.

And what do I see here? Traditions and culture. Absolutely. This is a fascinating one, right? So in some regions, the traditions—which literally rely on the parents—can really drive the pervasiveness or the acceptance of kids having their drinks.

And, so, I think that was also shown directly in that focus group where the parents said, “Hey, you know, I drank when I was a kid and I’m fine.”

You know, I think that that’s an interesting—that’s a very challenging place to get at—and certainly it’s a challenge to our readiness score, right? Because when we go out and survey these folks and we ask readiness questions, they can make those kinds of statements and kind of show us where they are.

So. Good. Let’s see here. Resources. Excellent. Excellent point. Outstanding. And, so I love the idea of the resources because we might take a look across this community and find that really, besides the police ticketing, not much is going on. We don’t have much prevention programming and kids are—maybe have no other messages that are going on. So I think that’s excellent. This is great. Great, great, great, great. Wonderful. OK.

I think we can go back to the next—to our slides here. Wonderful. OK, so if we go back to the next, we’d ask ourselves, “Who are the key stakeholders in this community?”

So, considering what we've said so far about our community here, our Anytown community, who do you guys think a reasonable—or some of the key stakeholders— might be in this community? Absolutely—houses of worship or churches. Absolutely. Police. Clergy. Law enforcement. Schools. Wonderful. Community officials. Outstanding. You guys are fast. Churches. Wonderful.

And I'll just dial in really quickly on churches, because I think churches—in this community certainly—as we have read in our case study, churches are the therapy. And so, churches for key stakeholders I think are outstanding. And sometimes we don't really make a good point in making sure that we reach out to churches in a voice in which they're interested and hear, I guess. Excellent point.

Influence of families. That's interesting. We actually talk a lot about this in Georgia in some of the smaller communities—right—where you might have a particular family or someone's grandmother that really is just the centerpiece of the community, that knows everybody—she knows all the kids. He or she knows all the kids. And so I think that's an absolutely fascinating piece, that you sometimes have those “mavens” in the community. It's fascinating. And of course, even mentioned in our case study, is the idea that law enforcement can be a critical key stakeholder. And school. Excellent. And what I like here also is the parents. I think so many times we actually kind of overlook the parents, or we may underestimate the need for their involvement. Excellent.

City officials. Absolutely. Especially if we're going after more of a systems-level change, which seems to be indicated a little bit in the case study. So even though we're going to go in a particular direction, you actually might take a look at the city officials and say, “Hey, what's going on when the police department's handing those citations off to a high schooler? What does that look like? Why is it the high school's responsibility to administer the consequence there?” Outstanding. Excellent. OK. So let's go ahead and go back to our slides. Thank you guys so much. These are really great.

[Crystal]: Great, that was great feedback—talking about the different challenges and stakeholders that are related to this kind of case study that we're talking about happening in Anytown, USA. So before we get into—actually now we have kind of thought that through, talked a little bit about the scenario in which we're going to be creating our prevention pitches, let's refresh really fast the key components of building your pitch.

So, remember, we need to know what the goal is. We need to know who your audience is. What is the action you want them to take? How can we compel them to take that action? How do we persuade them, basically? And then, what tone should our messages have?

So, let's start with the first part of that checklist and talk a little bit about goals. Marcus, why don't you start?

[Marcus]: Outstanding. So, what do you guys think a reasonable goal might be for—and we have some examples here? Diversify your coalition might be a goal. Increase awareness of the problem, i.e., readiness. Or, identify additional key stakeholders and champions. I'm curious, for you guys, what would you imagine a reasonable goal would be for Anytown, USA?

I love that. First thing on the list—or second thing on the list, I should say, was “increase awareness,” right? Because, clearly, there might be some gap there. I think from our data it's reasonable to imagine that folks—at least these parents—might not quite understand the consequences that they could be flirting with by allowing their young people to drink. I think that's an excellent point.

[Crystal]: And some things to keep in mind as you guys are thinking about what goals you'd like to suggest here, is you want to make sure that your pitch goal is not too broad or too specific, right? Because you want it to be something that's (1) achievable, and (2) measurable. You want to know when you've achieved it, right? So you want to keep it focused and succinct, but not overly specific. And, you want to really be very, very clear that, as we conceive these goals that you're communicating them with your team, so that everybody's on the same page as to what it is that you're goal in communicating is, when we're doing the prevention pictures. Those are also really important. We see a lot like “build trust.” That's a great one.

[Marcus]: Crystal, actually, I like that one, too. Actually, that one caught my eye. And the reason why I kept thinking through with this process—and having done a lot of community readiness—is if a community doesn't trust the information or trust your position in the information, knowing that you're coming from a position of help, it can really undermine your effort. And, a lot of times, there is some level of trust that needs to be—not just necessarily with the community at large—but it could be with the institutions I worked with. That's a great one. And, I also really like “identifying champions.” And I'm sure, Crystal— I'm sure you

have a lot of experience with helping folks identify champions in their communities in your work.

[Crystal]: Yes, absolutely. Because, oftentimes, it kind of connects back to that goal about building trust, right? You want to put [in] people who have credibility with the audience that you're trying to communicate with. Yet, usually those folks come from within that audience to be the ones who can help amplify your message and expand your reach.

[Marcus]: I think that's an excellent point. And, Crystal, I like your point of possibly identifying folks who may not be your typical message carriers. I think it's important that we look outside of our kind of existing—our sometimes existing— group of folks and look for folks who are interested and passionate about prevention—and knowledgeable—and they might not be the typical—actually this in quotes—“preventionist,” because you realize that's very far and wide.

But, you know, I've heard of police chiefs carrying this message here in Georgia. I thought that was amazing. And where the preventionist was able to kind of take a back seat, and the police chief took the initiative. And that was amazing. So, excellent.

[Crystal]: Someone else shared about expanding the coalition. And, that's very interesting because one of the examples we gave on the slide was to diversify your coalition, which means you're trying to expand the variety of voices that are a part of your prevention work. But, sometimes you want to expand the quantity of a certain audience as a part of your prevention work. And that's really where the expanding the coalition part might fit into that.

[Marcus]: I think it's an excellent, excellent point. And I like 'finding and making sure the data's credible.' And what I often say to coalitions is, “Make sure it's defensible. I make sure if someone calls it into question and says, ‘You know what? I just don't believe this. It can't be our community. Our kids don't do this,’ “or ‘This doesn't happen,’ that you're in a position to defend.” And, sometimes you have to do that. You have to help the community and help your coalition, certainly, defend its message and its data. I think that's to be very, very important. These are great conversations.

[Crystal]: Yeah, these are all great suggestions, everyone. And, just so you know, we're not going to forget them. We're going to move on to the next item on the checklist, but we'll be coming back to these. So keep them in the back of your minds.

[Marcus]: Excellent. I think we can go back to our slides now. Thank you so much.

[Crystal]: And now, Marcus, you're going to talk to our audience, right?

[Marcus]: Absolutely, yes. And I think Crystal brought up a point earlier going through this that it would be absolutely amazing—and I think you probably agree with this—Crystal, here, is if you could have a magical message that would reach everybody. But, the reality is it's a little bit more complicated than that, right? So, we're actually going to have to match the goal that you guys put in there to a particular key stakeholder. And, so you can imagine how many multitudes [of times] this could happen with the combination of goals and key stakeholders, and making sure—indeed— that that message would match those two metrics.

So for our conversation today, we have many—I mean again, our example today is just an example of what you guys mentioned: law enforcement, schools, youth groups, and certainly parents.

So, for our conversation today, we're going to take a look at those parent groups—our audience of parents.

[Crystal]: Yes, and I'd love to add here that for the folks who joined us for the first session for "Pitching Prevention," that was an audience that came across very often as [one] people were really interested in talking about and focusing on. And, so that was also part of our rationale for picking them as the ones that we're going to work through this case study with—to kind of answer that need and interest.

[Marcus]: Absolutely—an excellent point. And I think that—I think it's rightly so because parents can kind of be that—they can kind of be considered sometimes—I know you guys are better on the call—but I remember there were times when you didn't really approach parents because parents were in the home, and that was something—we dealt with everybody else, and we certainly included everyone else as a key stakeholder. Parents were kind of the ones that were some of the more difficult key stakeholders at some point to educate and earn their support. So I think that's an excellent point and an excellent one to take into account here.

And here are some reasons or ways that parents might be—and we really talked about these.

In fact, I think you guys did a much more expansive job than we'll do here. But sometimes they obviously have low perception of harm, right? So again, from our focus group around Anytown, USA, is that these parents said, "Hey, you know, kids are going to drink. We're going to put them in the basement, take the car keys, make sure no one leaves, and they'll be good to go."

Right? And they also might minimize the consequences—or not even really understand the consequences.

It was amazing, I think, talking to parental groups here in Georgia about the connection between drinking and the new studies on the brain, and understanding that it can really affect academic performance. And that's a very hot topic right now with parents—pretty much in every community—is academic performance. And, making sure that they make those links sometimes can be very, very helpful for folks to kind of see things differently.

And again, I think it's sometimes natural for a parent to go, "Oh, it's them over there. It's certainly not my child. My child will never do that." And even if that is the case, the question is, "Is your child in the greater, larger environment?" And part of that is just, again, being able to raise awareness with our key stakeholders.

So, for our conversation today, we are going to focus on parents. They will be our key stakeholders here. And, so part of that process is assessing or gaining access to the key stakeholders, and, I think that what you guys heard before is making sure that you are able to get that [assessment] information. Because we might assume some of the stuff, but we really need to know. Again, we might have research that tells us that perception of harm might be a little bit low—but we really, really need to understand and know that.

And, so, here are some examples of access in that key stakeholder group. And, mind you, we are talking about parents, but I would caution and say this could really be any key stakeholder group. So, if you were talking law enforcement, it would be them. If you were talking schools, it could be them. But certainly for parents here, you could gain access with things like visiting a parent-teacher organization, going to service clubs, or meeting one-on-one with parents. So, you might have a neighbor, or even if you have children—I have a 14-year-old—you might think about going to ask them—folks outside in the community—or excuse me, your kid's friends' parents—about being involved.

So, there are many ways we could do that [gain access to parents]. Or, we could ask coalition members if they might connect us with parents. So there's many different ways that we can reach these key stakeholders.

I will say one thing as we go forward, is that connecting with parent organizations is always very, very powerful. So the individual is great, and that could be law enforcement or anyone else. But connecting with an organization that represents that population or group is golden. And, that really, you'll be able to get a lot more reach. Excellent. With that said, I'll send it back to Crystal.

[Crystal]: Yeah. So, one of the other components that we need to think about as we're thinking about our intended audience, which in this scenario are parents, is—and this is something that you apply, regardless of who your audience is—is considering what are the benefits and the barriers for that particular audience to take your desired action. And why that's important, as I think I mentioned a little bit earlier in the session, is that, oftentimes, it's those barriers that prevent your audience from taking the action. And it's the benefits that help convince them to take the action.

So, as you're constructing what that desired action should be, which we'll get to in a minute, it's important at this point in your pitch development to really consider what your audience's benefits and barriers are, so you can construct a desired action that emphasizes the benefits and decreases the barriers. And I will note that if, when you draft this as a desired action and there seem to be more barriers present than benefits, there is something wrong with that action, and that may not be the best ask to make to that audience. And so, I would say, that's a good point to kind of course correct and go back to the information about your audience that you're reaching out to, and seeing, OK, what can we do as we ask them that will be . . . you know, highlight those benefits . . . while kind of minimizing those barriers? So, how does that work in the real world?

So, we talked about goal, we talked about audience, and now we're getting to desired action, which is basically to get people to do what we'd like them to do that helps support and advance our work.

So, Marcus and I gave a couple goal examples in the beginning. So just to use them as an example to see how that would play out, one of our goal examples was to diversify your

coalition. So, a possible desired action for that, like the ask we might make to parents in order to— in response to that goal—would be, “We would love you to join our coalition to address underage drinking.” So, basically, it’s a desired action where you’re just asking them to be a part of your effort, right? That means to attend meetings, or to attend events, or whatever way that that role would play.

We have the other goal example of increasing awareness of underage drinking. And, so, a possible desired action there might be to ask, “Can we—being the coalition—can we attend your parent-teacher organization meeting to talk about the risks of house parties and maybe social host laws, things that would directly impact parents in relationship to underage drinking?”

So, really, it’s kind of making a strong connection, but working into that example. That’s just to show you the thought process of how you can convert that goal into a desired action once you know your audience.

So why don’t we bring back some of the goals that you all shared in the earlier exercise. See—I promised you they would show up again. And Marcus, maybe you and I can highlight a few of them and come up with some of the possible desired actions.

[Marcus]: I think it’s an excellent suggestion here. Of course, I’ll be quite honest; I really like the idea of identifying champions. I think that’s such a critical element. Especially in this case, right, where there’s some systems work that needs to happen. So, identifying key champions is going to be absolutely critical.

[Crystal]: Yes. You know, I like the “build trust” option as a goal. And, maybe the desired action would be that you would identify someone in the parent community who is influential, who maybe has a connection to the underage drinking problem. And have them—ask them—if they could speak at a parent-teacher organization meeting or something like that, as a way of having someone who represents their own community, share with them their connection with the issue, and why it’s so important to do this prevention work.

[Marcus]: That’s excellent. Even I was sitting here thinking, “What’s a great action item for ‘identify champions?’” There are so many. But even just an internal action is a start, making sure you’re attending whatever board meetings you should: city council, or school board, or in

this case it would probably be the school board meeting. Or, the PTO meetings would be even better, right? So, you might be able to identify some like-minded parent-teacher members on that PTO, parent-teacher organization. And a lot of times you can do that just by attending.

[Crystal]: Well, and I think that plays into one of the examples—desired actions that we have for increasing awareness. I think it also plays into that “build trust” goal or maybe “expand coalition” is, you know? Oftentimes, audiences are much more receptive if you’re offering them something, instead of asking them to do something for you.

And so, maybe that first desired action is asking, “Hey, can we make a presentation at your next community organization meeting? We have these great resources that we think would be of value to your parent members. Can we contribute an article to your blog or to your e-newsletter?”

So you want to be offering resources and adding value for them, because parents are very busy people. So, if they’re already actively engaged in these kinds of community groups, they’re looking for people to help them do that work. And so, being a resource to them and offering that as “the ask” would be a great desired action.

[Marcus]: I love that. That’s a great one. And, Crystal, I’ll go a couple slides back where we talked about the barriers. You know, this is a time where you can really begin to think, “What are inherent barriers to my ask?”

And, I love taking that into account, because if we can reduce those barriers, then the likelihood is greater that we’ll get an action, or that they’ll be able to participate. And, if they participate, we’ll most likely be able to do our work in making sure they’re educated and their awareness is raised. I love that. It’s great.

[Crystal]: Another goal someone suggested was about engaging youth in their prevention work. And, I think a great act would be inviting some young adult leaders in the community to be a part of your coalition—to have a seat at the table so they can add their voices and contribute their perspectives to the shape and the direction of the prevention work that you’re doing in the field, as well as to give you that personal insight into how best to engage them and move that work forward. So, that could be a great ask.

[Marcus]: I love that. That's a virtual "high five" there for the person that contributed that. I'm youth development at heart and in my background, and I just love that. I think that's excellent. And, as we get into more complex issues in the community, sometimes you get left out. And I think that that's something you certainly would want to make sure that we're all cognizant of. But youth, certainly, is a key stakeholder. Even with the parents. Even in our case study when parents are the focus, we still have to be talking to those youth because, essentially, those are their parents. So, I think that's excellent. It's great.

[Crystal]: And it's kind of a rule of thumb for a lot of audiences, particularly audiences that are part of the list of people we're trying to engage within the community. It goes back to that longstanding behavioral health community slogan of "nothing for us without us."

[Marcus]: I love that one.

[Crystal]: So, it's definitely offering people a seat at the table and asking them for their guidance and personal expertise in understanding the audiences they represent is always a great addition and will definitely strengthen the pitch.

[Marcus]: Wonderful. Thank you guys so much. These were great. Thank you for allowing us to go through these, you guys. Great suggestions.

[Crystal]: Yes. So, Marcus, are there additional considerations that people should have when forming that desired action?

[Marcus]: I think so, yeah. I mean, certainly, I think that our list certainly is—we could probably go on and on in terms of the additional considerations. But, here are some that we put together that we thought you guys might be interested in hearing about.

And, I think the first one is interesting because we tend not to think of —we tend to think sometimes this is kind of outside of our work, or this is outside the action plan. I think it's so important that, just as you might have action plans or implementation plans that you sustain for the key stakeholders. Make it easy for them. Why should they have a more difficult time in going through this process? So, one thing is you can share the action items. And there are many, many different tools that you can use for this, and certainly this is not the webinar to

discuss that. But there are a lot of tools out there.

Focus on the progress and celebrate the progress. So, as they are building the coalition, as they are expanding the coalition, as they are being able to solidify the message, make sure that that's celebrated and that you give support for that. And, make sure you provide resources.

You know, I talk to a lot of coalitions and I will ask them sometimes, "Where's your paper?" You know? And what I mean by "paper" is, "Where is the documentation that supports what your coalition does?"

And I'd be surprised how many don't have that. Develop something. Briefings are a great way to do it. But make sure that your key stakeholders, or your shareholders, are very well up-to-date and are equipped to be able to provide that message. And not just by voice, but also on paper or on a website or Twitter—whatever that medium is that they use, make sure that they're well resourced. And understand that—hey— if they say "no," that's OK. You know?

And part of our process is not necessarily an easy win. A lot of times, we have to very tactfully be consistent making sure that we, just because the key stakeholder may say no initially—that after they become more educated or after they hear their constituency, their key stakeholders talk about it—that a lot of times those no's will change to light interest, and then to very interested, and possibly to support.

So if they say no, certainly don't get discouraged. And there might be someone else around them in their circle who might be more interested.

And then, of course, last but not least in our list here—and again, this is not all-inclusive—make sure you leave that door open. And again, I think sometimes this goes back to even the way we initially introduce ourselves.

So, we talked about going to city council or going to visit a parent group in our scenario. You know, what paper—you at least leave them with a card or something and a way they can get ahold of you, because all the times these things don't come up in a vacuum. So, it's not that you're necessarily going to talk to them right when they need to hear this, but it might come

up later. And you'd be surprised on how many—sometimes I get phone calls from folks I gave cards to many, many years ago—and something's happened in the community, and now they want to talk. So, by leaving that door open, I think is essential for our work and making sure that folks know that we're there. So, good.

Crystal, have you got anything?

[Crystal]: Yes, the one thing I will add is—because actually one of our attendees, Lou Ann, shared it—is that a big issue that is key for parents is not just understanding the consequences of underage drinking and the development issues. And, so keep in mind that maybe “desired action” has to be educational and creating scenarios in which we are opening the door to educate people about the issue.

[Marcus]: I think that's an excellent point. Excellent point. So, moving on here, this is great conversation, I certainly appreciate it.

I want to get your feeling, your idea around this issue. What do you think—and again this is kind of open-ended here—but what do you guys think in terms of what's the most compelling issue for our audience? And, of course, we have four here: data about drinking in the community, scientific research on the brain, information on alcohol and its various consequences, and emotional story involving youth. And again, keep in mind that our key stakeholders are parents here. So, what do you think would move parents?

I love that. It looks like right now the emotional story on individual youth. I've seen young people visit PTOs and school boards, and that is powerful. Creating a story—especially if it's the youth that's providing that story—that's amazing. And I love that you guys are thinking of youth. I mean, you're thinking of parents, right? Because this might look very, very different if we were talking about another key stakeholder, but indeed we're talking about parents. So, absolutely, because parents are very, very, very concerned. And those stories can be very—not only persuasive—but they can be very impactful.

The second one, I think, is information on alcohol regarding the consequences. I completely agree. I think as a parent, a lot of folks are highly concerned with that, especially something that they know has happened in the community, or maybe they've heard of it. But just to have that confirmation can be pretty amazing.

Scientific research on the brain—actually, that moves to our second place now. And I agree, again, with extreme charge, if I can use that term, and I mean that in a positive sense, on the focus on academics, making sure that that research is really clear—that there is a connection—that can be very powerful.

Excellent. It looks pretty good to me. Crystal, what do you think?

[Crystal]: Yeah, I think that that's great. You know, I think that definitely highlighting that emotional appeal part can be very compelling, particularly for this audience.

[Marcus]: Wow. So, it's scientific information, which I think is almost really similar, right? Scientific research on brain development: Cognitive interruptions can be certainly a consequence of alcohol use. So, I see that as a very close second.

And I agree with the data about communities. And I know that there are data folks out there that are probably cringing right now, but that is great information—but maybe not for this population. But, I know other key stakeholders who do need that [information]. So, make sure you have that and it's good and dependable.

Excellent. Good. OK. Wonderful. Thank you—very much texting. You guys are amazing.

[Crystal]: So, one more thing about compelling elements before we move on. And, it's just that we wanted to touch on—in the first pitching prevention session, people shared, “Like what about scare tactics? Isn't that an effective pitch to make to get people to pay attention, to raise awareness, and so on?”

And, so I just wanted to touch on that a little bit before we move on that there is evidence to suggest that the use of scare and fear tactics in substance abuse prevention campaigns don't actually have a significant effect upon intentions to change behavior. And perhaps the greatest takeaways from this research, for the purposes of our conversation today, is that first, we need to make sure that our messages are evidence based, theoretically informed, and grounded in facts, right? The grounded in facts part I think is really important. And then, also, that we need to carefully select the data or evidence that we use to make our argument—because if we use inaccurate or hyper-exaggerated information, it can be very

harmful to the message. I remember taking a public speaking class in college, and the professor had suggested that while it takes maybe seven times for us to learn something, it takes 36 times to unlearn it. So that can be incredibly damaging if we're putting information out there that that is misinformation [as] we're really trying to get people's attention, it actually might undermine our efforts. It's of interest to you . . . I think it was . . . so, a lot of folks who participated in the last session, the CAPT has developed a brief summary that will be made available to you at the end of today's discussion that has more research that has been done on the use of fear or scare tactics in substance abuse. So, pay attention when that shows up at the end of the presentation.

So, now that we've finished talking about compelling elements, how about we talk about the last piece of the checklist, which is message tone. Marcus?

[Marcus]: Absolutely. And, I think message tone is . . . when I first came into beginning this conversation, I thought, "Wow. It would be great if we could just [inaudible] in there." And, I think going through this, you think, "No, different key stakeholders might need different tones."

And, certainly, some of those could be things like being encouraging, being empowering, or being inspirational. And, you might use the tone with different types of approaches at different times. When you're recruiting, possibly an important key stakeholder, an influential key stakeholder, you could use something that's empowering. You know, "Let's get this done. Let's do something about this."

So, I think that was an interesting conversation to have, to make sure that we have an idea of what tone our conversation happens in and our message happens in. And I think we have a lot of range in there. So that's good stuff. Crystal, do we have anything else?

[Crystal]: You know, I would just say that we should remember that when we're speaking to parents, they may actually be engaging in this behavior themselves, right? And something to keep in mind is that adults can take offense if you speak in a way to condemn alcohol use generally. So, finding a way that's really focusing it on—in this situation, their children—and using examples of young adults in their community, and the risks and consequences of that behavior for them, specifically, might be a good approach. You really don't want to create an obstacle by making them feel either self-conscious or that there's judgment of their own

behavior.

[Marcus]: I think that's an excellent point. And great transitions into our next conversation here are the language and cultural considerations of engaging parents. Again, as you read the case study, you realize that there's a lot of—there seem to be folks who are regionally similar here in our case study. However, there are cultural differences, even within the same grouping of folks. And so, one thing we keep in mind is: What if you are not necessarily from that group? You know, what if you're not even—and I work with communities a lot of times in which the prevention person is actually from a neighboring community or a community that's a hundred miles away, or just not part of that culture.

So, how can you gain some insight and some access to those folks? And here's some language and a cultural consideration that you might consider for parents for our example here, is partnering with what we consider the “culturally informed.”

So, what are other agencies or organizations that are already serving that population? For example, we point again back to the PTO. So sure, I could go around and try to address and bring in parents individually, but parents might not know me; they might not be comfortable with me. So, engaging a group that connects with parents or with a particular subpopulation of parents could be more important, that I might ??partner with that group or find some kind of maven with whom they can help me connect and learn more. So again, I love that term, those “cultural informants.”

The second one is: Determine the literacy level of parents. And again, this is going to have to come through some additional data gathering. You're going to have to know that population. You know, what is the literacy level of those parents? And keep in mind that it might not just be literacy in terms of reading and writing. It could be technological literacy. It could be that, you know what? We were going to promote or we were going to formulate our message on social media, but realizing most parents don't use social media in this community. Everything is paper. Or whatever that case may be.

And understand, with this population especially, that we choose our words carefully. And that can be particular phrases that might be considered unfriendly or confusing. And a lot of times the way we know that is we can bounce this off of other folks. We can actually do little focus groups about our message, to make sure that we are approaching parents correctly and not

offending or confusing—which can happen in our population.

[Crystal]: Thanks, Marcus. So, before we start to get deeper into some of the barriers to engagement for this group, I wanted to respond to some of the great feedback that we've been getting in the question-and-answer pod, some comments from folks who are joining today's session who have a lot of experience working with parents related to underage drinking.

So, some of the ideas that they've been sharing: Muan shared how that, when engaging parents on underage drinking, perhaps [we might] begin with middle school parents. Pull together one or more focus groups. Let parents know that underage drinking has been identified as an issue, and then ask parents what they want and need to do to address underage drinking. So, kind of turning it around a little bit and asking parents, "What is it that you need?" instead of it being about the organization saying, "This is what we think you need."

So, [I'd suggest] kind of allowing them to tell us what the needs actually are, which will most likely be really helpful and insightful. Brenda shared that appealing to emotions is OK to capture attention. So this was where we were talking a little bit about using that emotional appeal—right—and engaging parents into this conversation. So she says, "Appealing to emotions is OK to capture attention. But for long-term change, there needs to be more."

So, I think what Brenda is suggesting is that maybe the emotional appeal really works in the short term. Maybe it's a start of engaging parents. But perhaps looking for other opportunities to engage with them in the long term will help promote the kind of long-term change that we're all striving for.

And then another participant, Coleman, asked if I could cover again what I was discussing about how to broach the issue of drinking with parents who might be engaging in high-risk drinking themselves. That situation is actually a really great segue to the slide that we're on now, where we're talking about barriers to engagement. So that could definitely be a barrier, right: that you have parents who are participating in the same behavior that we're trying to prevent young adults and youth in their community from participating in? And, I think this is one of the examples of where that empowering message tone in your pitch can be really important. And, I think that it's helping them understand that the focus is really on the

behavior of the youth in their communities. Talking and really highlighting the risks and the consequences specifically for the youth, will be very appealing for this audience.

And I would also backtrack to say that all of the suggestions that Marcus and I are sharing right now about this case study in Any Town and pitching to parents as our intended audience are a bit generalizations, right? We're hoping that when you're doing this work in your community, you're investing some time into really getting to understand and communicate with the audience that you're trying to reach and engage so that you can really customize this, because what I'm suggesting here may not apply to parents in your community. They may need other things or have different kinds of concerns. And, you have to adapt your pitch to respond to that.

So thank you, everyone, for your comments. Keep them coming in if you have comments or questions. We'll be heading to a question break shortly, and so we can start answering some of those as well.

Moving on in the presentation . . . as I mentioned, barriers can be a real hindrance to us creating successful pitches with our audience. So, we wanted to give you some examples of how to overcome those barriers with the types of pitches that might be effective. So, keeping these parents in Any Town in mind, one of their arguments might be, "It's not my kid, right? That's somebody else's kid. My kid's never going to do that."

So, a possible response to that might be "reducing underage drinking improves the health outcomes of all youth in communities." So, it's more than just your child. You have to think about your young person or youth that is interacting with their peers, and that the well-being of all of their peers impacts the well-being of your child. Right?

Another obstacle or barrier they might present is that house parties are safer because parents can take away car keys, right? And this comes from the perception that, like, "Oh, if we're watching what's happening and we're removing the potentially dangerous—which they see as driving under the influence—then our kids are safe. So, it's not important for us to intervene." And so, a response to that might be, "You know, it's important to decrease all alcohol-related consequences associated with underage drinking, not just drinking and driving. There are other risks and consequences that are related to that behavior that don't involve cars that can be just as unhealthy or possibly damaging to your young people."

And then, another obstacle that might come up in that scenario is, “Hey. We did it. So, it’s not that big of a deal.” And that concept comes from an attitude of: “Well, I did it and I survived and nothing bad happened to me, so why should I assume that something’s going to—that if my child does this or young adults do that—there’s going to be any negative consequences for them?” And, a good response is: “Well, actually, there is a negative effect. And, it has a great impact on the development of their brains, which can have long-term health ramifications as they mature and get older.”

And so, those are just some of how you can look at barriers and then find ways to answer them in the pitch to that audience to engage them in what you’re doing.

Another attendee, Liz Nelson, just shared a great response to the last barrier in particular. She suggested that another helpful response to the “we drank when we were that age” obstacle could also reference that we didn’t used to use car seats or seatbelts. In other words, you can actually create some kind of historical context: There are other things that we didn’t do, either, that we now recognize are important to do, for example, wearing a seatbelt in a car or putting our children in car seats. Right?

That could also be a really effective response. Thanks so much, Liz—that was great. All right. So, let’s pause for questions. So, if you haven’t had a chance to submit your question in the Q&A pod, go ahead. A few people have submitted, so Marcus, as we’ve been talking, could perhaps go through a few of them.

The first question I wanted to tackle was one that was submitted by Erin, asking about outreach to churches. She says, “We have tried reaching out to churches in our community and emphasizing that they have a protective factor, but then we can’t get them to take action, right? So, we can’t get them to engage.”

And so, Erin, that is a great question and a very common issue: relating to church communities or religious organizations about their role in our substance abuse prevention work. And one kind of insight I might give you is, if you were in a community that has a local college or university, to look at the campus ministry programs in those environments, in those higher-education environments as a gateway to that larger religious community. We know from our experience with talking with church ministries and campus ministries about underage drinking, that they’re really interested at that level to get involved in the underage

drinking prevention conversation. And so, they might actually be the champions—like we were talking about finding champions earlier— to launch that conversation and maybe introduce you to other religious organizations in your community to expand your outreach efforts. So, that's a great question.

[Marcus]: That was an excellent question. I would also point out the question here from Gary—and I think he sent in a couple. I kind of identify with this one, which is, “I do think middle school parents can be the target of raising the knowledge and understanding of the risk of underage drinking.”

And I completely agree, Gary. I think it's an interesting point, and as a parent, you're probably a little bit more sensitive to it before you become a little bit more normalized or jaded in raising a high school student or someone that's very, very near the age of drinking. So I think that's an interesting point. That might be a point of entry with your key stakeholders around that issue.

[Crystal]: Great. Thanks, Marcus. So, I think we're going to move on to our next section, but I will add the caveat that there will be another opportunity before the end of the session today for Marcus and me to answer a few more questions.

But before that, I'd like to take the opportunity to introduce a special speaker joining us today, Stacie Schroeder, who is joining us from Helping Services for Northeast Iowa. She's joining us to talk a little bit about engaging colleges, which we sort of touched on already just from some of the feedback during the question-and-answer period, about how to engage colleges in addressing high-risk drinking.

And just a little bit about Stacie before she starts her presentation: Stacie is a certified prevention specialist with Helping Services for Northeast Iowa. She worked as one of 23 Iowa Strategic Prevention Framework State Incentive Grant coordinators who focus on engaging stakeholders to reduce underage drinking and adult binge drinking in their respective counties. Environmental strategies used as part of the Fayette County project included compliance checks of alcohol retailers, alcohol use restrictions in public places, and college campus policies. So, welcome, Stacie.

[Stacie]: Thank you for having me. So, as Crystal had mentioned, I worked as the assistant

coordinator addressing high-risk drinking, and one of our real priority areas was high-risk drinking at our local community college. And according to the NIAAA, high-risk drinking is defined as underage drinking, any level of drinking and driving, drinking when health conditions or medications make the use dangerous, and then, of course, binge drinking, which is defined as five drinks in a row per occasion for males and four for females. And so, that was how we were defining high-risk drinking. But we also knew that in the college population, national surveys were showing that four in five college students were drinking, and about half of them were binge drinking. Next slide, please.

So, a little bit about the background of our county university: Very much so nationally and also locally, the college culture supported underage drinking and also binge drinking. And you can see the beer pong game here. Policies on this university's campus were very vague and enforcement was quite lax. The security guards were seen more as friends to the students than the law enforcement presence on campus. We also knew that Greek life was seen as an important piece of college culture, and actually Greek life is a contributing factor a lot of times to underage drinking or supporting underage drinking and binge drinking.

At this university, there was definitely a mentality of "if we don't admit it, there's not a problem."

And, people that worked at the university were quite concerned about admitting it. They thought that, if they put it out there and admitted that there was a drinking problem, parents would send their children elsewhere. There was really a lack of funding available. Numbers had dropped over the past few years. And so, this university was quite concerned about putting anything more into prevention efforts.

The initial request for doing some surveys of students was not honored. We went through extensive processes trying to get surveys approved for use on campus, and we were unable to get that done. And then one kind of final blow to the start of our project was that we had an interim president on campus who wanted his last contribution be to approve the sale of alcohol at football games. Next slide, please.

So our goal, then, at this university was really to establish a subcommittee on campus that was well-represented with stakeholders from throughout the campus to really address this high-risk drinking culture.

First, we needed to really define who was in that college community. We learned quickly that the stakeholder group could be more diverse than what it looked like at first glance. I think everybody leaned toward management, instructors, and students. But, we learned that the college community actually involved retailers in the community. It involved the janitors that were cleaning up on Monday morning. It involved a variety of people who had some stake in college high-risk drinking.

So for the sake of this exercise, we're going to focus on the assistant athletic director. And we'll talk a little bit more about that. Our desired action was to raise awareness and engage others to get involved. Crystal had mentioned before the concept of empowering your stakeholders. That really was our focus. As negative as high-risk drinking can be for our college campus, we really wanted to focus on that positive empowerment piece, identifying what high-risk drinking was and then engaging people to address it.

Our compelling element was to draw from people's experiences, to address the concerns on the campus, and frame the issue in a way that would make it relevant to people and their work. So, the biggest question that we were asking everybody we visited with was: "How does underage drinking or binge drinking affect your work? What do you do at the university? What do you do in this college community? And how does high-risk drinking affect your work?"

So, the tone was really, really important. As I had mentioned, you have to make it somewhat positive, which can be difficult, in talking about high-risk drinking—making sure that there is no blame, and in our community, understanding, recognizing and sharing that we understood that the university was inheriting this problem, in a way. A lot of times in rural communities in Iowa, it's been my experience that people feel that the schools or the universities are responsible and they should take care of some of these issues, because they're the ones that have the students the majority of the day. And we were able to communicate to the our university that we know that "this isn't your problem," that "in looking at the Iowa U survey, 40 percent of our students are drinking by 12th grade. We know that based on national core surveys, four out of five college students are drinking, whether they started at your university or somewhere else."

So, we let them know that we knew it was not something they caused, and that also our culture condones high-risk drinking. We talked about the movies, such as *Animal House*, that

really promote and condone high-risk drinking. We also recognized that the communities in which a college operated profited from high-risk drinking—that the bars and their drink specials were actually profiting from a very difficult situation in the community. So, we were really able to look at a lot of the factors that were contributing to high-risk drinking on the university campus. Next slide, please.

So, we're going to go over a little bit of the pitch. As I mentioned, our audience for this pitch was the assistant athletic director. Early on in visiting with people, and having conversations, and even in the information that I've provided to you so far, athletics came up several times. And, there really was a belief or a perception by the college community that athletics directly contributed to high-risk drinking.

So when we approached the assistant athletic director, we really needed to frame the message that we knew that underage and binge drinking does not happen only with athletes, but we also knew that athletes are seen as leaders on campus. And so, when a small group of athletes were drinking, they were definitely the ones receiving the attention because they were so recognizable.

So in my conversation with the assistant athletic director, and explaining all this to her, and also explaining that we knew that the school inherited some of these issues, we talked about how underage drinking, high-risk drinking, and binge drinking affected her work. And she shared a story from the school—the university that she was at previously—where she actually lost a student athlete to an alcohol overdose, and how that had changed her and her perception of alcohol use and the acceptability of alcohol use.

So, we really found an ally, somebody who had been through it, somebody who had understood it from the perspective of the school and the publicity that they received—the team and the effects that this had on the team, the community, and the family. She was able to experience all of those things and how high-risk drinking directly affected her.

So, it was a great opportunity for us to then empower her to have conversations with others and talk about her experience and why she's trying to stop high-risk drinking among university students. And it became more of—rather than somebody saying, "Don't do it because it's not legal, and it's not good for you," it became more of a "Don't do it, and this is my experience. This is how we can connect on that."

So, that was our pitch.

[Crystal]: Great. Thank you so much for sharing, Stacie. That was wonderful.

There was a question that came in during your presentation that I think would be great to talk about here. So, let's see. Victoria said that she is struggling with the example a little bit because she didn't see the connection between the desired actions that you had for the assistant athletic director and the compelling element to reduce—that she didn't see how those things would actually reduce underage drinking on campus. And so, one of the things I would add there—and then, Stacie, I'll let you jump in and add anything else that makes sense—is that I think it's important to keep in mind that we have program goals. And, pitching goals are different than program goals.

So, our program goal or your coalition goal is that you want to reduce high-risk drinking, right? So where the pitching part comes in is kind of figuring out, "OK, whom do we need to talk to in order to make that happen?"

And so, through Stacie's example and the work that they were doing in Iowa, they recognized that establishing a subcommittee on campus would address high-risk drinking. And then they had to figure out, "OK, who is it that we need to be a part of that subcommittee to give it credibility—give it more influence, right?"

And so, while the pitching goal seems like it doesn't have a direct correlation to reducing high-risk drinking, it is helping support and expand the programmatic goal of doing exactly that. Does that sound right to you, Stacie?

[Stacie]: Yes. I think for us the compelling element was really the way to start the relationship and to start the conversation. And, it gave us the opportunity to then ask that assistant athletic director if she would be part of our subcommittee and work on this initiative with us. So, you did a great job explaining it.

[Crystal]: Yeah, great. Oftentimes what you're going to find is that you're not going to be pitching a large group of people. You're most likely going to be pitching individuals. And you're pitching those individuals because you want them to be the champion of your

message. Maybe there's a gatekeeper that you have to convince that this is important, in order for you to actually get to the larger audience you're trying to reach. And so, sometimes, there are individuals who are kind of a means to an end. And they are a means to a much larger programmatic goal end.

And so, we want to keep in mind that there are program goals and then there are communication goals that have to be connected to program goals, right? That's important. But, they are really there to help strengthen and help us achieve those larger program goals.

So, great—great question, Victoria. Thank you for asking. And so we're going to pause here. And, if you should have any questions for Stacie related to the case study she shared with us, or for Marcus and me, please go ahead and put it in the Q&A pod.

I think there was one that came in that is really interesting about whether there are any participants who are seeing a trend that parent-teacher organization activities dropped off after elementary school? What other parent groups can you use to engage older youth? So Marcus, do you have any suggestions for folks of other organizations that engage parents that might be helpful here?

[Marcus]: I do, in fact. I did see that also and wanted to address that. And, I completely agree. I think that you're 100 percent right that the parent participation wanes off sometimes in middle school and things become more disparate.

But, I would engage at the clubs and sports levels. In the case study, and also here in the Southeast, football teams are quite a force to be reckoned with, as is baseball and everything else. But to connect to parents through those—because again, they might not be the target population, but again, we're looking for key stakeholders in this process. So, these might not necessarily be participants or even the folks that need to receive the message, but powerful folks in the community, nonetheless. And a lot of times, depending on your high school, sports teams and other clubs have parents on them, or very active folks. I mean, they're rushing their kids back and forth places, they're doing things, and they're likely very involved in other stuff. So, I find that those groups can be a good—and again, alternative—for a strong PTO.

[Crystal]: Great suggestion. Thank you.

So, we're going to move on to our last activity for this session, and I just want to say thank you, everybody, for your questions and your comments and your thoughts. That was fantastic. And just know that if we didn't have time to get to your question today, we are definitely going to be looking at those. And we know there was a lot of interest in this session. And so, perhaps in your questions we'll find some topics for future ones.

But before we say goodbye, we wanted to have just one more conversation with you. We would love to know: What is the one thing that you will take away from this conversation, this discussion today about pitching prevention that you will use when reaching out to stakeholders in your communities in the next few months?

So, if you were a part of the first session during which we talked about in the intro, "Pitching Prevention," or/and part of the conversation today where we've talked more about how we apply those concepts in the real world, I'd love to hear what is the one takeaway that you're going to be integrating in your work moving forward?

So, great. 'Message tone tailored to specific audiences.' That makes me so happy, I can't tell you. I think sometimes we like to think that there is a one-size-fits-all for messages. And that is far, far, far from the truth. Really, the most successful pitches in this scenario are the ones that are really customized to the audience that we're trying to reach and tailored to their needs and their concerns, and also those benefits and barriers that we talked about earlier.

So . . . 'Framing the message, tone.' Great. Wonderful feedback. Thanks, guys. 'Identify key stakeholders.' Good. 'How to overcome barriers with specific stakeholder groups.' So . . . a lot about choosing the right stakeholders, understanding that. That's really great insight, because I think that will help really strengthen the prevention pitches that you're making in the field. Great.

Marcus, do any of these jump out to you? I like the 'steps for pitching prevention—having that checklist as a backup.' That's great. 'Framing the message.' Wonderful. All right. These are great.

So, thank you all for your feedback and your participation today. Marcus and I just enjoy talking with you. And now, I'd like to turn it over to Julie.

[Julie]: Thanks so much, Crystal. And I'll just close up the event today. We have a couple handouts that we're going to share with you. They're available to download on the left [of the screen during the live webinar]. You'll see there's a file share. So the first handout is just a write-up of the case study, so you can review the content we covered and further digest it. The second one is a worksheet on anticipating barriers to stakeholder engagement. We also have a review of the definitions that you came up with in "Pitching Prevention," Session 1. And, of course, we have the slides. So, you can download those on the left. We also have a link to the resource on "scare tactics," which is on our website. It's in the middle of the screen. And so, feel free to share anything with us; there's a chat at the bottom.

And then, finally and importantly, we really value your feedback. Please click on the link so you can tell us how you liked the webinar, whether it was useful to you, and how we could improve this kind of content in the future. We really appreciate it. Your time and feedback is important.

So thanks again for joining us today. We hope it was a valuable time. Take care, everyone.

END OF RECORDING

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