Using Interactive Media in CDC's Health Marketing and Communication Activities

This podcast is presented by the Centers for Disease Control and Prevention. CDC - safer, healthier people.

So I'm also going to do just a very quick overview and run through a lot of slides and then I want to show you some of the stuff that we're doing at CDC. I did want to say that everything that you're going to see is done in collaboration with many groups within the center and across CDC and I'm going to try as best I can to mention those groups when I get to them and you'll also have these slides if you want to go back and look at them. And I get an advantage because some of them were circling through when you came in, so you've already seen them.

I'm gong to start with the beginning of our division. We're not even quite a year old and it's really—our main focus is to work on web. So this is actually the beginning of web at CDC. What you see in the upper left hand corner was the first website that CDC had and you see as several iterations since them. This is the new home page that we launched with on April 19th—which is the day that is seared into all of our memories—this year and this came about after about a year-long usability study where we really looked at who was coming to our website and how they were using it so that we could structure our information to match their needs, but what we found is that at the very beginning, the first step in this process is to figure out who was coming to the website and these are the top three audiences. And you can see the first two are probably not that surprising and judging from a lot of your correct answers from the beginning of this session, you'll probably expect that consumers will be up there, but this is something that is still a new idea for CDC that even programs that we don't expect to have information ready for consumers, they're coming to our website and they're accessing that information. So we really need to start thinking of them as people who are our audiences.

And so, looking at that, this is the goal for CDC 2.0. A lot of our division worked with interactive media and the web. We want to make it available when, where, and how users want them. If they're in social networks, then we should be in social networks. If they're in Second Life, then we should be in Second Life and figuring out how people are using that information and who's there. And then we really define interactive media by the three P's, as we call them: personalization - it's relevant to me; presentation—podcasting is a great example of that; it's similar content, but in a new format; and participation - I can have a say in the health information that I want.

Here is an overview of some of the things that we're doing, but rather than read through the bullets, I'm going to show you some screen shots. One of the first things we launched about a year ago were podcasts. They're really successful and we upload them to our site. They're also downloadable from iTunes and it's really providing CDC information in a new way so people can take them with them and listen to them in the gym or wherever they want to access the information.

ECards is something that, as we saw earlier, is certainly not new, but it's new for CDC and this, I think, goes a long way in getting a lot of programs at CDC, giving them the availability to access new media. So any program at CDC can create eCards with the systems that we built for free.

They can customize the messages to reach their target audiences, use their visuals, we have hyperlinks, and then people who come to the site can add in a personalized message. So this is a message from someone to their mom. Now, we don't collect data, so I'll admit that I wrote this message. All of the messages are private, but these are people saying, you know, I'm not going to wait for the CDC to tell my mother that diabetes is important. I'm going to remind her and lead her to this information that I think would be relevant.

This is a tag cloud which appears on our new site. It's a visual way of showing what are the most popular search terms. So the more popular something is the larger and the bolder it is. Email updates is something that we added about nine months ago and you can sign up from many pages on the CDC website to get email updates and you will get a notification any time that page has been updated. And as you can see here, these are the sets after you sign up for a page; it will give you list of all the other pages that you can sign up for as well. I don't have the exact numbers today. Here is the trending. The last I heard is that we're well over 100,000 unique subscribers.

We launched the blog last summer. This is Dr. Jay Bernhardt who is the director of the Health Marketing Center, and why I think this is really interesting is because this is a blog that's connecting public health professionals. So, this is a different way of using interactive media, not necessarily just to connect with our audiences or with our consumers, but how can we, as public health professionals, work together to demonstrate successes, to advocate for our field, to advance the knowledge, and then, so I think using tools like this, even within the discipline, they're going to become really important.

Now we're going to move into some of the campaigns that we did. The seasonal flu campaign was done in partnership with the National Center for Immunizations and Respiratory Diseases. We basically supported their ongoing efforts and used their content and messages to help them expand their reach. What we added last year was a graphical button which you can see in the circle there. It was a snowman and it had little animated snowflakes that fell behind it and it said, don't let the flu ruin your holiday and he had a thermometer as if he might have a fever and be in real trouble. We had this on about 80 different web pages, 15 of which were state and local health departments. The top refers are shown here: Medline Plus, NIH, and HHS homepage, and our partners really like it, particularly at the local levels because it' showed that they were connected to ongoing efforts. They were up to date on what was going on. It added credibility to their sites.

We also held a webinar for blog writers. This was an hour long, which this is our first webinar and we realized that was maybe a little bit too long for the blog writers, but it was staffed by two subject matter experts from CDC, one knowledgeable in the flu trends and the data, the other knowledgeable in health messages, particularly related to flu. So we could empower bloggers with the tools to really motivate their readers to go out and get vaccinated. And the other thing I want to point out that was really interesting about this is that you'll see that in the right hand corner we have APHA, who is of course a heavy hitter in public health, and then below that we have Beth's Blog and Beth was a woman who did not have a public health background, but she cared a lot about the flu and she appointed herself to be an expert. So she did a lot of work in getting current information, in linking to resources, and her readers trusted her as someone who

was knowledgeable in flu and I think this is really helping to reshape the way that we are thinking about partnerships at CDC and expanding what that means. Another activity that we did which has gotten a lot of attention, I think, but was probably the smallest activity in the campaign was we had a small activity in a virtual called Whyville, which is for eight to eleven year olds. It's based on active learning and we basically had a little CDC robot, you'll see there, show up and start offering virtual vaccinations. This is building on the momentum that they had had several years ago when they did another vaccination campaign and research showed that the children, actually after participating, went back home to their parents and argued for their entire family to be vaccinated. So we just wanted to keep that information fresh in their mind and build on that momentum and so we expected kids to come and get little virtual vaccinations and keep having that conversation. We didn't expect is how into it they got. This little girl on the corner is saying, I need to know why it's so important for me to get the flu shot and I need to know because I work in the newbie center and so I want to be able to tell all the new Why-villians why they should come here and get a flu shot and, you know, getting kids to say why is it important and how can I carry that message forward to my friends, I think it's a really powerful thing in public health.

I'm not going to talk too much about the Virginia Tech response because there was a really great poster yesterday by Wendy Heaps. We basically helped the Division of Violence Prevention at CDC get their podcast and related materials for coping with stress out through MySpace profiles and several news blogs.

This is the old space in Second Life that we are currently improving. This was an effort that was spearheaded by John Anderton and we are now looking at expanding it and seeing how we can create more in-world content. So this really shows the breadth of CDC and what we do and next we're taking it to what are the health messages and how can people interact with it. Can they listen to a podcast in Second Life? Can they do something that would—where they would learn something about their health in Worlds? Wikis are something that we're using within CDC at the moment to really build collaborations across teams. This is similar to Wikipedia which many people have heard of, so shared spaces where people can go in and edit the same content. This, you know, we had talked about this, so I don't have any shots exactly about mobile activities, but I can tell you, because of this, we have a number of activities going forward, the first of which will be a collaboration between Georgia Tech, CDC's National Center for Health Marketing, and the Division of Diabetes Translation to look at how seniors are understanding newly diagnosed cases of diabetes. So they will get a cell phone, learn how to use it, and they can send in questions to a diabetes counselor about whatever it is they may be thinking about in terms of how to manage their diabetes at that moment. But what's interesting then is that the counselor can send questions back saying, what is it about your environment right now that's making you ask these questions? Why do you care at this moment, so that we can better understand at what times we should be interrupting their daily lives with diabetes information.

So just to close, I'm going to do a minute or two on why we're there. So these screen shots were up circling and the real reason, as I mentioned earlier, is because that's—this is where the people are. This is where they're getting their information. This is the way they're connecting with other people and making decisions. This is a huge statistic and I was really surprised when I first saw this. It would be the tenth biggest in the world behind Mexico. That's a lot of people. But what's

great is, even when you go down past MySpace and Facebook and the ones that everyone has known, there are some very specialized social networks that have large audiences, but much more specialized. So you can start to tap in in targeted messages, but still reach large groups of people. And I think this is probably my favorite and what I think is really important about interactive media, and it's not just that people are using them and becoming empowered by the information, but that they are connecting with other people who care about the same thing. So we heard in yesterday's plenary that people no longer want to be told how they're going to buy their toothpaste. They want to tell the manufacturer, this is the kind of toothpaste I want, but I want to take that one step further and say, people are actually not only becoming empowered by the information, but they're connecting with other people who are passionate about the same things. So, while the manufacturer might not right now be concerned that Tom Smith wants blueberry toothpaste, when 100,000 people who are passionate about blueberries come knocking on the door, they're going to have to start listening.

And in closing, I'm just going to show you a couple of websites out there that I think are demonstrating this. This is 'fivelimes'. This is a website where you can find all things green and how to live your life in a green fashion. This is their products page and it's hard to think of something that isn't covered there, and you could imagine if you were a retailer, how this would effect whether or not your products show up here.

This is maybe my favorite example. This is called 'I Buy Right'. It's not in production right now, but this came out of a Master's thesis and I hear that several companies are interested, but this is the idea that you can take your cell phone into a grocery store. You can take a picture of the bar code and you can get back information on that product. So it may say in the grocery store that this green pepper costs 99 cents per pound, but then you'll get information where you can look at the carbon foot print, you can look at the fuel that it took to fly there. You can look at how much the workers were paid when they harvested it and imagine how that's going to start changing the way that consumers want to choose their products. If you have somebody at the grocery store thinking about migrant workers' wages, that's a huge connection across disciplines.

This is an example out of London. This is a system that was set up to measure air quality. I took this screen shot last night. They were having a pretty good day, but you can see there's one little purple circle there on the right hand side which is very high. Imagine how you would feel if you lived in that purple circle. You know, what is it about my community? How come we can't have air like everybody else has air? What's wrong with it and who's going to do something about it?

And in closing, these are a couple of the social networks that lots of people are talking about and that I think are good examples: Sermo, you may have heard about, is a physician to physician network and doctors are logging on and talking about things like, I'm seeing this odd symptom when I use this medication, is anyone else? And if they're finding groups of that, they're years ahead of the medical journals. Daily Strength are people coming together in communities around different topics, like bipolar or diabetes, which is not that unusual for social support, but you can now rank medications: 62% of people said that Paxil was effective for anxiety and I hope no pharma companies are listening because I made that up, but—so these are really changing and revolution health is including blogs and wikis and social networks to give people a different

choice outside of the medical realm. So I think this is where the power of interactive media is and I think this is really why we should be there.

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