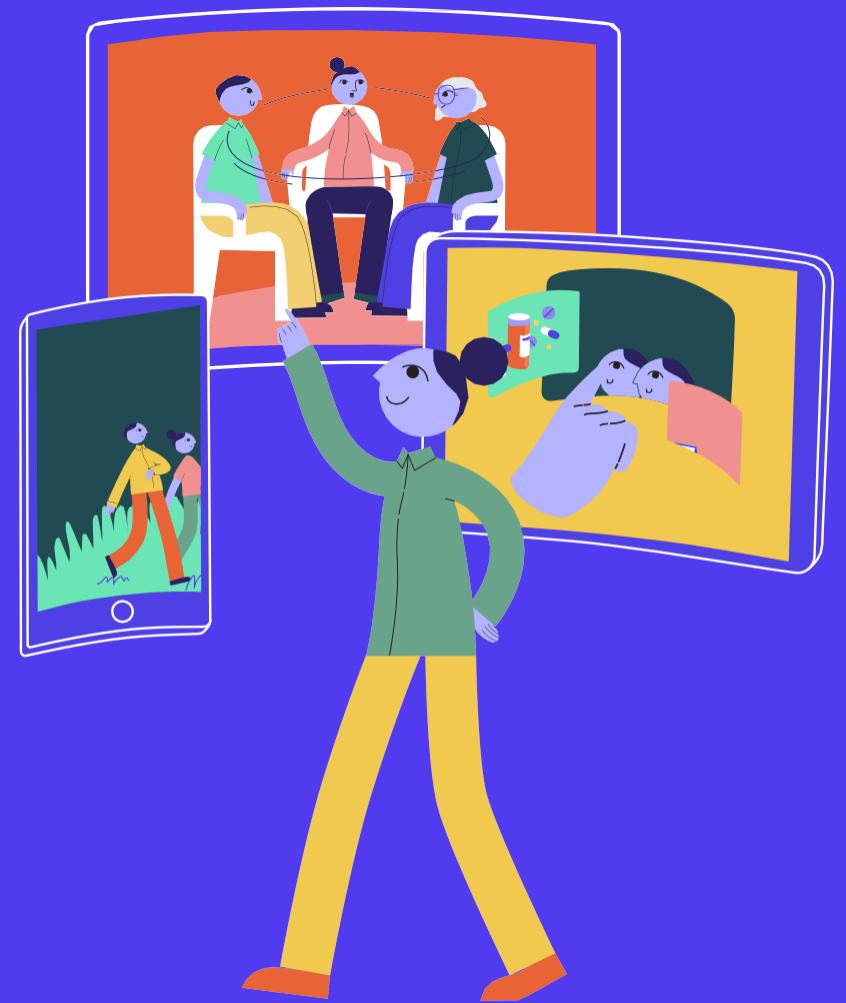


Evidence-based Principles for Public Outreach

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Objectives

- Review Serious Illness Messaging project and evidence
- Discuss using serious illness messaging principles

Background

- Long history public health campaigns using marketing techniques: smoking cessation, seat belts, drunk driving, etc.
- Goal: Apply those techniques to palliative care, hospice, and advance care planning
- ***Is*** about introducing these services to the public (public education or outreach)
- ***Not*** about clinical communication with patients
- Public means general people, potential patients, but not necessarily patients or family caregivers
- Messaging is term for this kind of marketing

Why This Is Needed



Aligned messaging could improve public engagement

2 grants 2019-2022, 2022-2025

The John A. Hartford Foundation & Cambia Health Foundation

AAHPM, CAPC, NHPKO, NCHPC, C-TAC, Conversation Project, Respecting Choices, Ariadne Lab Serious Illness Conversation project, Vitaltalk, POLST, AMDA

Project team

- PI- Anthony Back MD, University of Washington
- Marian Grant DNP, RN, content and marketing consultant
- Patrick McCabe, McCabe Messaging Partners

Palliative care public awareness

- [2021 scoping review](#)
- Public awareness low, 70%+ could not even rate for favorability
- Small proportion who felt familiar had mostly inaccurate perceptions
- 59% of those familiar thought was same as hospice or end-of-life care
- When participants saw CAPC definition 95% rated favorably

2019 CAPC tested language

- Appealing definition
 - Specialized medical care for people with **serious illness**.
 - Goal to improve quality of life for both person and family.
 - Provided by team of doctors, nurses, and other specialists who work with patient's other providers to provide **extra layer of support**.
 - Appropriate at any age and at any stage in a serious illness
 - Can be provided together with curative treatment.**
- “Serious” not ~~“life-limiting”~~, ~~“advanced”~~ or ~~“terminal”~~ illness

Low beneficiary engagement a factor in past palliative care research projects

- CMMI Palliative care projects per 2022 Palliative Project Evaluation
- [Cancelled PCORI palliative care study](#)

Tested Messaging Principles



Messaging principles are evidence-based ways of talking to the public

- We can't use ourselves as the target audience.
- Our nuanced views of palliative care aren't being heard.
- But we don't have to all share the same phrases. You need to talk about the work you or your organization does.
- To do that, we can use communication strategies that have worked in public campaigns and trusted brands.
- This approach could work for your outreach.

2019 Consumer & clinician focus groups

- Denver & Baltimore
- 8-9 per group; semi-structured moderation
- Demographics
 - Participants age 70+
 - Participants age 50-70
 - More than a third of the participants were ethnically diverse
 - All had medical coverage of some kind
- Did again in 2020 after Covid with little change

Palliative care heart failure story

Laura, 72, enjoyed her retirement until she noticed she was having trouble keeping up with her friends on their walks.

She went to her primary care doctor, and then a heart specialist, who found out that she had had a silent heart attack.

A few weeks later, Laura had another heart attack and ended up in the hospital with heart failure.

A nurse, Nicole, came to see Laura. Nicole explained that she was on the palliative care team, which meant focusing on helping people live well, even with a serious illness.

Nicole asked Laura what was most important to her about her care, and then arranged support that Laura didn't know existed. That included giving her medication for pain, helping her with how to talk about her illness with her grandchildren, and a social worker to provide support to Laura's husband.

A few weeks after starting palliative care, Laura is starting to feel more normal again and back to enjoying some of the activities she used to do.



Messaging Principles

- 1 Talk up the benefits**
These services and care improve peoples' lives.
- 2 Present choices for every step**
At every stage of an illness, you have choices.
- 3 Use stories**
The stories that resonate are positive and aspirational.
- 4 Invite dialogue—and not just once**
The call to action is to talk with someone.
- 5 Invoke a new team**
Patients, families, clinicians, & community all have a role.

What consumers said about principles

Talk up the benefits

“It gives you a handle on the illness and it kind of broadens your mind. It takes some of the pain away, some of the anxiety away.”

Present choices for every step

“It gives you a sense of control. It’s what you want, not what they want.

Use stories

“You can relate to something like this because the alternative is to explain how 72% of the people do this and 32% of them do that. I’d rather have anecdotes about people.”

Invite dialogue

“The important thing is getting the conversation going, and this is not threatening. It’s reassuring to me.”

Invoke a new team

Participants liked the inclusivity of framing the conversation around “we” and naming all the players relevant to the conversation (patients, loved ones, care team).

Consumers don't get our terminology

Terms widely used in serious illness care fraught with misconceptions:

- Nearly all who had heard of palliative care thought was for end of life
- Most were confused by idea that they should express preferences or set goals

Participant comfort with conversations seemed to correlate with positive past experience.

Most prefer conversations be initiated by a long- term provider.

Seriousillnessmessaging.org

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