

covering kids[™] & families

Message Strategy Toolkit

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Introduction

An effective message strategy is the cornerstone of any successful communications effort. A message communicates the core idea that you are using to inform and motivate your target audience to action. To be effective, messages must be:

- ◆ **Clear:** Your messages should not try to convey multiple, complicated concepts. A message should be conveyed in simple, direct language. This ensures that your message will not only be heard, but understood. Keep in mind the reading level of your target audience when you develop print materials.
- ◆ **Consistent:** Your strategy should drive home the same message consistently and repeatedly.
- ◆ **Persuasive:** A persuasive message delivers the relevant rational and emotional arguments that will motivate your target audience to action.
- ◆ **Credible:** The information contained in your message must be believed by members of the target audience for them to accept it as personally relevant.



What Is the *Covering Kids & Families* Message Strategy?

The research supporting the *Covering Kids & Families* communications campaign shows that the biggest hurdle to enrollment is that many parents of eligible children are unaware that their kids qualify for coverage. Parents said if they knew their children were eligible, they would apply. For low-income parents, the most compelling reason to apply for low-cost or free health care coverage is to reduce the economic and emotional stress that results from parenting and running a household with limited financial resources.

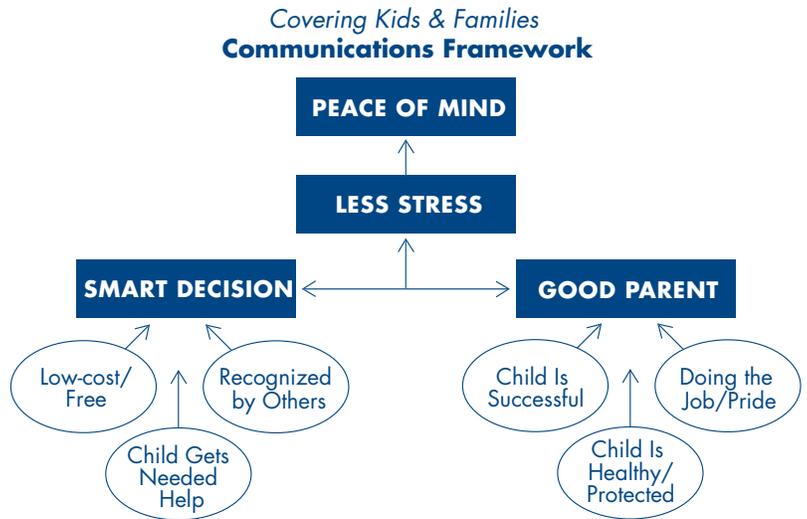
The *Covering Kids & Families* message strategy is to let parents know that their children may be eligible for low-cost or free health care coverage through Medicaid or the State Children’s Health Insurance Program (SCHIP) and to encourage them to get their children covered. What are the key elements of this message strategy? The campaign contrasts the benefits of enrolling in these programs with the consequences of not enrolling, but does so in terms that are positive and personally relevant to parents. It is important to be positive because parents are not motivated by scare tactics.

The diagram on page two illustrates the *Covering Kids & Families* communications framework as a “ladder.” The lower rungs are the rational benefits and the higher rungs are the emotional benefits of enrolling in low-cost or free health care coverage programs for children. Using this ladder—or message pathway—is the most effective way to clearly, consistently, persuasively and credibly motivate parents to call for information and possibly begin the enrollment process.

The following are research-based “connections” with the communications framework that will motivate parents to enroll a child in Medicaid or SCHIP. Therefore, these are the points that should be communicated:

- ◆ Parents want to make smart decisions that improve the health and well-being of their children. Calling to apply for Medicaid or SCHIP will feel like a smart decision and will be recognized as such by others because these programs are low-cost or free, and ensure that children get the health care they need to stay healthy.

- ◆ Parents want to feel good about the way they raise their children. Calling to inquire about health care coverage will promote this feeling because it is a step toward helping their children grow up healthy and achieve success in life.
- ◆ By enrolling their children in a low-cost or free health care coverage program, parents experience the emotional payoff of reduced stress related to raising children and balancing finances.
- ◆ Ultimately, parents desire peace of mind about their children’s well-being and their household finances. This is the value of enrollment.



The *Covering Kids & Families* message strategy recommends that enrollment campaigns tap into the desires of parents to be good parents by urging them to make smart choices in raising their children and balancing their household budgets. The message strategy encourages parents to enroll children in low-cost or free health coverage programs, an action that will in turn reduce stress and bring peace of mind.

How Does the Message Strategy Translate into a Message?

Here’s an example:

“ Parents work hard to take care of their kids. But it’s not always easy. Without health insurance, medical bills can break the family budget. Now there’s help. Thousands of [STATE] kids are eligible for [LOW-COST OR FREE] health care coverage — and your child could be one of them, even if you work. In fact, many working families earning up to [\$XX,XXX] a year or more can get a health care card for their kids. If your kids don’t have health insurance, call [TOLL-FREE HOTLINE]. ”

Covering Kids & Families Communications Guiding Principles



Covering Kids & Families developed four guiding principles, based upon its research findings, to help make sure that the campaign reaches its objectives. These guiding principles are listed below, along with some specific tips on how to translate them into messages to be used in advertising, campaign materials, and media outreach.

1. Communications must show how enrolling children in low-cost or free health care coverage programs will make parents feel like they are being good parents who make smart decisions that will reduce stress and bring them peace of mind.

- ◆ Avoid using the term “health insurance” when describing these programs. Parents respond to that term by considering the cost and not the benefits of having their children insured. Therefore, parents are less likely to pay attention to “insurance” messages because they perceive insurance as too expensive. However, you can use the term “health insurance” when describing something that uninsured people lack. For example, “If your kids don't have health insurance, call [TOLL-FREE HOTLINE].”
- ◆ Use the term “low-cost or free health care coverage” because it connects the desire to save money with the desire to ensure that children get the care they need to stay healthy. Both of these benefits help reduce the stress parents feel about caring for their children and protecting their pocketbooks. The words “low-cost” and “free” should always be used together. Parents told *Covering Kids & Families* researchers that the word “free” on its own is not credible, but “low-cost” is believable. It is also more effective if you lead with “low-cost.”
- ◆ Use imagery and language to acknowledge the stress parents feel when they face the difficult choices that are part of being a parent. Imagery and language should also be used to demonstrate how Medicaid and SCHIP can help relieve some of that stress.
- ◆ Don't use the term “peace of mind” in your messages. Instead, show how parents will gain peace of mind with their children enrolled in these programs. In short, show, don't tell, and let the parents themselves conclude that they will feel peace of mind.

2. Generate familiarity with Medicaid and SCHIP among the target audience. Awareness of SCHIP has increased, but understanding of specifics lags behind.

- ◆ To increase the number of calls to toll-free information lines by parents, work with your state agency to get an easy-to-remember toll-free number using letters instead of numbers. Or, encourage them to use the national 1(877) KIDS-NOW number.
- ◆ Repeat the phone number in television, radio and oral communications to increase the number recall. In print, make sure the phone number is prominently listed.
- ◆ Show images of teenagers to convey the notion that the program is also for older children. Most parents assume that Medicaid and SCHIP are for young children.
- ◆ Share the Spokesperson Talking Points on page five with people who talk to the media about Medicaid and SCHIP. This will help ensure that effective messages are used consistently.
- ◆ Conduct outreach efforts in places where parents look for important information. Some locations that rate high as information sources among parents with uninsured children are clinics, doctor's offices, pharmacies, churches, day care centers, and worksites.

3. Help eligible families understand that these programs apply to them. One of the biggest hurdles for enrollment efforts to overcome is the fact that many families assume incorrectly that they are ineligible.

- ◆ Present typical working family scenarios that parents can relate to, such as the tough choices that parents face, the care parents must provide for their children and the concern they have about bills.
- ◆ Use images of working-class neighborhoods, where many eligible families live.
- ◆ Emphasize working families with images and phrases like “even if you’re working” to overcome the mistaken impression that to benefit from these programs one must be either unemployed or enrolled in a government financial assistance program.
- ◆ Include a specific, credible, annual income figure so that parents will stop and think, “maybe my kids are eligible.” Use the phrase “even families earning up to [\$\$\$] a year or more” to make certain that parents understand that these programs could benefit their families.
- ◆ Identify and use real families enrolled in low-cost or free health coverage programs to communicate your message. Hearing about the experiences of real families can help convince parents that their children may be eligible for the program and that it offers valuable services.
- ◆ Try to reach friends, families and colleagues of eligible families, because they are trusted messengers with whom parents discuss these issues.

4. Establish Medicaid and SCHIP as valued products or services.

- ◆ Talk about specific services that the program covers, such as prescriptions, immunizations, dental care and emergency care, so that parents understand the program’s value.
- ◆ If applicable in your state, emphasize the fact that parents will get a health care card for their children, just as they would from a private health insurer. Parents perceive having a card as valuable.
- ◆ Use trusted medical professionals, especially doctors, to talk about the quality of care children can receive through Medicaid and SCHIP. Doctors are particularly credible spokespersons and their credentials help to legitimize the program. Nurses are also effective spokespersons, but are not as credible as doctors.
- ◆ If applicable in your state, emphasize the simplified enrollment process and the ability to apply for Medicaid and SCHIP over the phone.



Spokesperson Talking Points

If you have identified effective and credible spokespersons for the *Covering Kids & Families* effort in your state or community, you can provide them with the following talking points to reinforce the core messages of the campaign. While these talking points can be used as the building blocks of any speech on this topic, individual speakers should customize their speeches with state-specific

program information, local statistics and anecdotes.

- ◆ *Covering Kids & Families* research shows that families with uninsured kids are forced to make difficult choices in caring for their children. In fact, the parents of uninsured children are seven times more likely to be forced to delay or not get medical care for their kids than parents whose kids have health insurance.
- ◆ Health care coverage helps keep children healthy, and healthy children are better prepared to learn. The American College of Physicians reports that uninsured children are less likely to receive proper medical care for sore throats, earaches and asthma. These are typical childhood illnesses that are often the cause of school absences.
- ◆ An estimated [XX] children in America are uninsured, yet most of them are eligible for low-cost or free health care coverage. In [state], there are [XX] uninsured children. [AT LEAST/MORE THAN] [# OF ELIGIBLE CHILDREN] of them are likely eligible for [MEDICAID/SCHIP PROGRAM NAME]. All their parents need to do is apply.
- ◆ Children in a family of [# IN FAMILY] earning up to [\$XX,XXX] a year or more may qualify for [MEDICAID/SCHIP PROGRAM NAME]. Eligibility is based on family size and income. Larger families with higher incomes may also be eligible for low-cost or free health care coverage. [MEDICAID/SCHIP PROGRAM NAME] is designed to provide medical coverage similar to private health insurance programs.
- ◆ Children enrolled in [MEDICAID/SCHIP PROGRAM NAME] will receive coverage for [TYPES OF BENEFITS, ESPECIALLY THINGS LIKE REGULAR CHECKUPS, PRESCRIPTIONS, HOSPITALIZATIONS, IMMUNIZATIONS AND VISION CARE].
- ◆ With this nationwide campaign, we hope to reach families that are eligible but don't realize it. It's hard enough on families when a child is sick. Parents don't need the added worry of not being able to afford their child's medical bills.
- ◆ To learn more about [MEDICAID/SCHIP PROGRAM NAME], families can call toll-free [STATE NUMBER] or 1(877) KIDS-NOW.

Message Evaluation Checklist

The following checklist will help you apply the *Covering Kids & Families* message strategy to your own work, including the outreach materials you produce.

- Do the materials convey the hard choices parents have to make in raising a child while managing a household with limited financial resources?
- Do the materials demonstrate how Medicaid and SCHIP can reduce parents' stress and worry about their child's health?
- Do the materials demonstrate how Medicaid and SCHIP can reduce parents' stress and worry about money and medical bills?
- Are the materials written using clear, simple language that will be easily understood?
- Will parents reading the materials believe that the information applies to them?
- Will parents reading the materials feel that by calling they will experience more "peace of mind"?
- Is basic income eligibility information included?
- Are three or four specific medical services their children could receive if enrolled in Medicaid or SCHIP listed?
- Do the materials portray families in working-class environments?
- Do the materials include the words "working families"?
- For broadcast, is the phone number repeated?
- For print, is the phone number prominently listed?
- Do the materials include a diverse age range of children, including adolescents?
- Is the term "health care coverage" used when describing Medicaid and SCHIP?
- Do the materials refer to "low-cost or free health care coverage"?
- If applicable in your state, do the materials talk about the simplified enrollment process?
- Do the materials refer to a "health care card"?

Campaign Planning Questions to Answer

- ◆ How could you use a credible professional such as a doctor or nurse to deliver this message?
- ◆ What supporting statistics could you use to make your key points?
- ◆ How could this message be shared with family, friends and co-workers of eligible families?
- ◆ What other spokespersons in the state might be willing to use these message?
- ◆ How can you reach parents in the places where they look for important information?

Note: For current statistics for uninsured children, visit the *Covering Kids & Families* Web site at www.coveringkidsandfamilies.org

The Supporting Research: How Did We Get Here?



FORMATIVE RESEARCH: GENERATE FRAMEWORK, TEST MESSAGES, ESTABLISH BENCHMARKS

2000 VISTA™ Study. April/May 2000; 114 one-on-one interviews with parents.

2000 National and Test Markets Pre-test Survey. June/July 2000; 2,778 telephone interviews nationally and in six target markets (Fresno, CA, Albuquerque, NM, Springfield, IL, Baltimore, MD, Boise, ID, Greenville, NC) and two comparison markets (Idaho Falls, ID and Wilmington, NC).

AD TESTING RESEARCH: TEST ADVERTISEMENTS, LANGUAGE, AND DELIVERY OF MESSAGES

2000 Ad Test Pulseline™. July 2000; two sessions in Baltimore, MD and two in Fresno, CA, for a total of 101 parents of uninsured children eligible for SCHIP or Medicaid.

2001 Ad Test Focus Groups. January/February 2001; two groups in New Orleans, LA and two groups in Miami, FL.

2002 Ad Test Focus Groups. March 2002; three groups in Philadelphia, PA and three groups in Miami, FL.

EVALUATION RESEARCH: MEASURE IMPACT, REFINE MESSAGES, GENERATE NEWS HOOK STATISTICS

2000 National and Test Markets Post-test Survey. September/October 2000; 3,014 telephone interviews in same target and comparison markets.

2000 Hotline Callers Feedback Survey. August/September 2000; 503 telephone interviews among parents who called the hotline during the course of the *Covering Kids* campaign in New Mexico and North Carolina.

2001 National Study on Health Impact for Being Uninsured. June 2001; 1,662 telephone interviews nationally among parents with privately insured, government insured, or eligible uninsured children living at home under the age of 19.

2002 National Parent Tracking Survey. June 2002.

Additional *Covering Kids & Families* Resources

Log on to www.coveringkidsandfamilies.org for more information or to order or download these resources:

Toolkits and Guides

- *Covering Kids & Families* Back-to-School Action Kit
- *Covering Kids & Families* Guide to Placing Public Service Announcements
- *Covering Kids & Families* Guide to Working with the Faith Community
- *Covering Kids & Families* Interfaith Toolkit
- *Covering Kids & Families* Guide to Evaluating Communications and Outreach
- *Cover the Uninsured Week* Health and Enrollment Fair Planning Guide
- *Cover the Uninsured Week* State Guides to Finding Health Insurance Coverage
- Engaging the Business Community Toolkit
- Meeting the Match: A Guide to Fundraising
- Reaching American Indian and Alaska Native Families Toolkit
- Reaching Latino Families Toolkit

Outreach Materials

- Children's Health Coverage Bookmark
- Children's Health Coverage Fan

- Children's Health Coverage Flier
- Children's Health Coverage Lapel Sticker
- Children's Health Coverage Poster
- Online Photo Library

Videos and Public Service Announcements

- *Covering Kids* Public Service Announcements
- *Covering Kids & Families* Back-to-School 2005 Spanish Language Music Video
- *Covering Kids & Families* Outreach Videos (available in English or Spanish)
- Highlights of the *Covering Kids & Families* Accomplishments Video

Reports

- Communications Strategies for SCHIP and Medicaid Retention
- Reaching Uninsured Parents: "Insights About Enrolling Uninsured, Low-Income Parents in Medicaid and SCHIP"
- Addressing the Barriers to *Covering Kids & Families*: A Values-Based Strategic Framework Research Report
- Retention Literature Review: "Retaining Eligible Children in SCHIP and Medicaid"